

“Being that Hopeful Person”

Capabilities for Social Work with Older People



FOREWORD

The Social Work with Older People research project shows the positive difference social workers can make in someone's life.

We consider that the social work role is to help someone transition from a life with struggles to a more hopeful, comfortable life.

We think this is so important. We don't want to be treated by the medical model, as someone who needs to be fixed. We want social work that is compassionate, thoughtful, human and skilled.

You are part of a system that can disempower older people. You need to be reflexive: always thinking about the impact that you have and how you use your role. We need you to challenge ageism and other areas of discrimination, and to use your power as an ally.

We hope you will use this resource to think about your practice and the positive impact you can have on someone's life.

*Expert Advisory Group,
Social Work with Older People
research project*



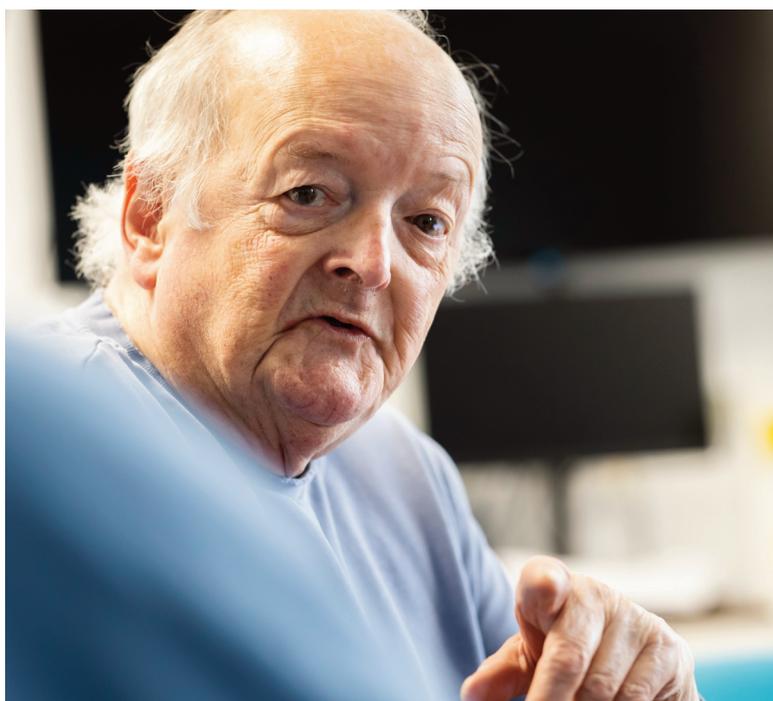
INTRODUCTION

Social work is a single profession with core knowledge, skills and values. These are set out in the [Professional Capabilities Framework](#).

Social workers working with older people also need an additional set of more specific capabilities. These enable the social worker to respond to the particular experiences, needs and situations that older people, older carers, other unpaid carers and families face.

Older people may have encountered complex challenges and situations over their life course, with associated changes and transitions. Inequalities persist, deepen and widen across the life course. Age discrimination (and its interaction with other areas of inequality) impacts on older peoples' access to appropriate care and support.

The particular capabilities that social workers bring to working with older people are set out in detail in the [Capabilities Statement for social workers who work with older people](#). They are acquired through education and practice experience, and they deepen and evolve throughout a career.



The [Social Work with Older People research project](#) observed social work practice with older people, carers and families, and interviewed them. This research provides insight into and examples of:

- The capabilities that social workers have
- The way they use these capabilities to promote wellbeing
- How the context impacts on their ability to offer good social work support.

This document draws on anonymised stories from the research. The stories provide an opportunity for critical reflection and learning about how social workers make a positive difference to people in later life.

HOW TO USE THIS RESOURCE



The aim of this resource is:

To enable social workers to develop their professional capabilities in specialist work with older people so that they can use these to ensure that older people have the best experiences and outcomes possible.

The resource is for social work students and social workers at any stage of their career.

- **All social work students and social workers** need an understanding and appreciation of social work with older people as part of general social work practice. Older people are part of families, communities and society, and an understanding of later life is essential to all areas of social work.
- Social workers, whose work includes **direct work with older people** need to develop confidence and capability, and seek specialist support as needed.
- As they become **more experienced**, social workers need to model expert practice and mentor others. They also advise and, sometimes, challenge other professionals and practitioners working with older people.
- In **advanced and leadership roles**, social workers who support practice with older people will need to pass on expertise, provide supervision or contribute to learning and development of this area of practice.

This resource goes alongside the **Capabilities Statement for Social Work with Older People**.

The capabilities statement covers nine domains, which are divided into three super domains: **Purpose**; **Practice**; and **Impact**.

For each super domain, we provide a **story from the research** that shows in detail the breadth and depth of social work practice.

You can look at the stories and:

- Use the **reflective questions** to draw learning from the stories.
- Use the **action plan** to consider how you will develop your practice with older people.

This resource can be used to support educators delivering social work qualifying education.

It can be used to support critical reflection and professional development in the Assessed and Supported Year in Employment.

It can be used in individual learning, peer learning or professional development sessions.

It can be used to meet registration requirements to record a piece of learning either that you have undertaken yourself or with peers.

OVERVIEW OF RESEARCH MESSAGES ABOUT CAPABILITIES

The Social Work with Older People research project asked three questions: **What do social workers do?; What impact do they have?; and How does the context affect their work?**

Researchers followed ten social workers in two local authorities. They observed social workers and interviewed them, older people, carers, family members and other professionals.

There were three newly qualified social workers with less than two years' experience and seven experienced social workers. The researchers looked in-depth at 17 situations that faced older people and carers who were aged from mid 60s through to 90s, and of different genders, socio-economic groups and ethnicities. The older people experienced issues arising from illness, disability, carer stress, bereavement and risk. They were interviewed and observed in their own homes, care homes and hospitals.

The research found that:

Social workers have specialist knowledge related to later life, personal skills, and a commitment to upholding rights and dignity that means they can offer something of unique value, especially:

- In life changing situations such as a sudden hospital admission
- When people need clarity to navigate health and social care
- When people are overwhelmed by complexity, for example, when arranging their own care
- When older people struggle to stay in control of their lives, for example, because they do not have capacity to make a decision
- In a crisis, such as when an unpaid carer becomes exhausted.



Social workers demonstrate capabilities across all nine domains of the Professional Capabilities Framework, in ways that show a deep and specific expertise that reflects the Capabilities Statement for social work with older people. This includes:

- Values and ethics which promote dignity and respect people's wishes
- Challenging ageism and other discrimination
- Upholding human rights, legal entitlements and social justice
- Wide knowledge about law, biopsychosocial issues that affect later life, the care and health system, and practical know-how
- Continual self-awareness, critical reflection and learning
- Skilful relationship-based practice, therapeutic responses, analysis and action to promote wellbeing
- Collaborative work and creativity in managing complexity
- Taking a lead, challenging appropriately and supporting others
- Being accountable and maintaining integrity.

These areas overlap and interweave.

Professional Capabilities Framework



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The capabilities that social workers have are important in **creating a therapeutic, ethical and rights-based experience** for older people, carers and families. They also bring more tangible outcomes through **contributing to improvements in older people's circumstances and care arrangements**. These positive outcomes cover all of the different areas of the wellbeing definition under the [Care Act 2014](#).

The context makes a difference to how capabilities can be used and wellbeing promoted. Social workers use their capabilities, for example legal knowledge, to navigate the context and achieve outcomes. They could use their capabilities more effectively if the system worked more smoothly and consistently. Professional development and profession-specific support are needed to support social workers to practice well.



PURPOSE

This super domain covers: Values and Ethics; Equality and Diversity; and Rights, Justice and Economic Wellbeing.

The following quotes from the research highlight aspects of the social work role in each domain:

Values and Ethics

'You have to be very neutral and you have to put your own thoughts aside... if that's the way people choose to live, that's up to them... People do live their lives very differently, and who am I to say that's wrong?' (Social worker)

Equality and Diversity

'She treated Mum as an equal, as if she hasn't got dementia. She never talked down to her.' (Carer)

Rights, Justice and Economic Wellbeing

'She's the one person that really sits there and knows her business, really. She knows all the information about mental capacity. She knows patient rights. She knows what people are entitled to. And she fights for that every single time.' (Voluntary sector colleague)

Findings from the research

Social workers undertake person-centred practice alongside strengths-based work. These values come from a deep respect for older people and their potential.

The values go hand-in-hand with a commitment to upholding rights. The rights flow from the law and reflect the centrality of older people's wishes and their involvement, and the rights of people who may lack mental capacity to make a decision.

Social workers believe they should be transparent and non-judgemental in their work. They tailor what they do to older people's particular needs and towards things that older people value.

Social workers see themselves as advocates. Their work is about promoting involvement, amplifying older people's voices and challenging limitations on their choice and control, including from medical colleagues or families.

Social workers see part of their role as ensuring people have access to income, resources and services beyond social care.

The story of Reg and Immy

Reg lived in a rented first floor flat with his friend Dom. Reg was 67 years old and had a stroke a few years ago, which affected his speech and his memory to a degree, but he had full mental capacity to make decisions. During the Covid pandemic, Reg had one of his legs amputated due to complications from diabetes. He was discharged with little direct support in his home (this was during the period when social workers had been told to avoid face-to-face contact and community visits as far as possible).

Reg had been in bed, in a tiny, box room with hardly room for any other furniture. Agency carers dropped some food in to him and managed his basic personal hygiene, and Dom did his best, but Reg's quality of life was not good at all.

Immy the social worker was asked to visit Reg after concerns were raised about how he was managing. She was adamant she could see how his quality of life could be improved given time and patience. Reg was initially cautious and reluctant to engage with Immy, but she persevered with gentle, slow-paced visits and calls until Reg opened up about himself and came to accept some offers of support. Reg spent over two years in the box room before his life changed.

Immy recalls:

'Oh yes. Reg is somebody that I've probably done, altogether probably about 20 home visits with.

For him, initially, it wasn't about talking about his care and support needs. It was him just wanting to talk about his life and what he's done, where he's worked, you know. He's always just been: "I work hard, and I go to the pub, and then I go home". So, it was more around building up the trust for him to explore his life story in a way. Even though he was just talking about things that have just happened in his life. But I think it was important for him to talk about that with somebody other than his friend. I would share my own interests, like he would show me pictures of him fishing and I would show him pictures of my husband fishing.

He was in a dark, dingy little room, he was not getting out of bed at all. He would barely sit himself up, he was just watching the telly all day. He couldn't even see out of the window. You know all those little things that we take for granted. But he was just adamant: "no I want to say here, this is my room" you know "I'm happy, I don't need to look out of a window, I don't need equipment, I don't want to go out".

But the more you spoke to him and he realised that we were there to help, he was more open to trying things to make things better for him.'

Immy brought in an occupational therapist colleague to work alongside her. Eventually, after several months of discussion and experimentation, Reg and his bed

were moved into the spacious shared living room, which has a large room-length window overlooking the street and the estate beyond. Reg declined to consider moving to an alternative property; he and his friend wanted to stay in the flat they knew. Immy said:

'Admittedly, it's probably not where I would have liked because I would have liked to see him moved. It would have been brilliant to see him in a ground floor apartment or bungalow. For him to be able to sit out in a garden. But again, he's got capacity, he understands the situation that he's in. He's lived there for a long time, and he's lived there with his friend for a long time, and I have to accept that that's his decision, it's not mine to make. I can just provide him with the guidance: these are the alternatives that are available to you should you wish for them.

But you know him just moving into that other room and being able to look out of a window that was good enough for him, that was what he wanted.'

Reflective questions

- What capabilities are being shown in this story?
- What are the ethics that underpin this practice?
- How are the different people in the story experiencing social work?
- What does this story make you consider about your own practice?

Additional reflective questions for this super domain

- How does this example demonstrate person-centred and strengths-based practice?
- How did Immy uphold Reg's human rights?
- How did Immy respect Reg's wishes?

Action plan

- What would you like to develop in your own practice?

Area of development	Aim	Actions	Support you need	How you will know when you have done this

PRACTICE

This super domain covers: Knowledge; Critical Reflection & Analysis; and Skills and Interventions.

The following quotes from the research highlight aspects of the social work role in each domain:

Knowledge

'I would say, the social worker is probably the most knowledgeable, and she is the one that in the meetings will push back and question why something is happening.'
(Voluntary sector colleague)

Critical Reflection & Analysis

'It's professional curiosity, it's analysing, it's having non-judgmental skills, being a counsellor, building rapport.' (Social worker)

Skills and Interventions

'She appeared to be like talking to a friend you've known for some time and that she had put forward the personality which she's got into her work. And I think that helps her a lot. I didn't realise how much she'd take in what I said. And I wasn't afraid of any of the questions she asked or any of the ideas she put forward. I could see the sense of her questioning and the sense of her proposals. She treated us both fairly, I think.' (Older person)

Findings from the research

Social workers demonstrate expertise in what they do and how they do it. They build relationships, ask questions, gather information, weigh this up, analyse, assess risks and options, agree actions and put things in place. To enable these things to happen, Social workers need expert and adaptable skills. The most important skills are the ability to quickly build trusting relationships; and to be able to communicate in different ways and at all levels. They provide therapeutic support and reassurance.

Social workers develop particular knowledge and awareness of topics related to older people and ageing. They have expert legal knowledge, and specific awareness and understanding of local services. They are able to act as information hubs and guide people through unfamiliar processes.

Social workers see it as essential to constantly develop their knowledge, including of theory, and to reflect on practice. Critical reflection underpins justifiable decisions, and helps to manage personal responses to the ethical and emotional aspects of the work. Supportive teams are crucial to effective critical reflection.

Social workers are multi-skilled and intervene on behalf of older people and carers at many levels - familial, community, institutions and systems. Social workers are creative, resourceful, flexible and persistent.

The story of Edna, Albert and Bernice

Edna was a 71 year-old woman with an advanced, undiagnosed dementia. She lived with her partner Albert, a local history expert and former postman aged 72 in his house on the edge of a small town. They had been together for about 10 years.

Late last year, Albert was admitted to hospital having had a number of small strokes. It was clear that Edna could not cope at home alone, she needed *'a place of safety'* and so she was also admitted to hospital.

Bernice was a hospital-based social worker and got involved because she felt that Edna and Albert were struggling, although they had not communicated this directly. Bernice said that she followed her social work *'instinct'*.

Bernice phoned the couple after Edna returned home. Albert expressed some concern about Edna's lack of appetite, wondering if it was due to their recent bout of Covid. Bernice offered to contact their GP and Albert was very happy for her to do so because although he had visited the surgery he had come away in some confusion with *'just a form'* for carers.

After this first contact and when Edna had been home for some weeks, Albert and Edna were happy to meet and welcome Bernice into their home and to show her around. Bernice undertook this home visit as an opportunity to gather and exchange information. Albert talked openly about their situation and about how he tried to keep Edna safe and well. Albert was concerned about spending money wisely and carefully, and was cautious about spending money that was not his, on behalf of Edna.

The visit developed into an opportunity for Bernice to suggest that they might want to begin thinking about getting someone to come in to help Edna get washed and dressed, thereby leaving more time for Albert to pursue his interests and to give him a break.

Bernice offered to contact someone who might help install a key safe, fix up a banister and help repair the shower. She discussed the cost of carers with Albert and offered support in sourcing care. She reassured Edna that she was not going to be put in a care home or have anything done against her wishes. Bernice also offered advice on letting the Police know that Edna is at risk. Edna had sufficient money to fund her own social care and Bernice provided advice about how to do this. Bernice also talked to Albert about the legalities of managing someone else's money and the potential for a Deputyship. She helped them to apply for and receive all the pension and benefit payments that they were entitled to.

Albert described his meeting with Bernice:

'She explained she was a social worker and that she was our social worker or handling our case anyway. She came over as a very competent person on the phone. Somebody who was being friendly but professional. There is a difference.'

As well as providing reassurance, Bernice was instrumental in sorting out practical problems, 'rolling her sleeves up' as Albert put it. For example, she got a smoke alarm fitted. Albert recalled:

'I was upstairs. I put the frying pan on. It heated up from just smoking. Well, it was only just smoking. I went upstairs and made the bed. I heard, "Choo," just like "Woo! Bang! Crash!" What the hell was that? And it was this alarm going off. I couldn't ask for a better social worker. She'd done mountains of stuff and all of it has come through. I was very pleased with her. Very, very pleased. She's involved in everything... She had a hand in everything in some way or the other.'

Reflective questions

- What capabilities are being shown in this story?
- What are the ethics that underpin this practice?
- How are the different people in the story experiencing social work?
- What does this story make you consider about your own practice?

Additional reflective questions for this super domain

- How did Bernice build up trust with Albert and Edna?
- What knowledge did Bernice demonstrate about ageing and later life?
- At what points did critical reflection enable Bernice to change her approach?

Action plan

- What would you like to develop in your own practice?

Area of development	Aim	Actions	Support you need	How you will know when you have done this

IMPACT

**This domain covers: Contexts and Organisations;
Professional Leadership; and Professionalism.**

The following quotes from the research highlight aspects of the social work role in each domain:

Contexts and Organisations

'The council does have a finite budget, which I completely agree, but everybody's an individual, so I think if you present your case and you present why that person should have an allocation of this budget, then the more you have in your armoury, the better equipped you are to present that to the managers. And we might not get it, but we will do our damned to put a case... using research, using equipment that we can use, pulling in community, using case law to evidence why we think, "Our professional opinion is this, and that is why we are advocating."' (Social worker)

Professional Leadership

'She was key in making sure that the conversation stayed firmly all about the patient. So she was to the point. "This is what we're here for. This is what we need to do." It was key that she was open and honest, and she ran that meeting. She was the person that was in charge of it all, if you like.' (Hospital discharge coordinator)

Professionalism

'She was lovely. She was a professional...And she always came back to us. If we had a problem or something we wanted to know, she was straight back, email or phone me. So the contact was there, which was good...So she was always there to be someone I could talk to or if we had a problem. (Family carer)

Findings from the research

Social workers are accountable for their own practice and act as leaders for others. They strive to be reliable, consistent and offer best practice. Social workers challenge poor practice and discrimination, and uphold older people's rights and voices. Social workers take a lead, informing others about social care and their role.

Professionals in other agencies see social workers as professional, caring, knowledgeable and good with people. Colleagues value social workers' ability to get things done, and their advice and mentoring.

The context is one of change, pressure, scarcity and complexity. Within this, social workers are adaptable, considered and knowledgeable. They face a range of barriers in their work. Social workers use their capabilities creatively and resourcefully to overcome the issues. This includes building relationships across organisational boundaries so that they can develop solutions with other agencies.

The story of Roy, the S family and Raymond

Roy was a 92-year-old man of White British background. He had been living with his friends Mr and Mrs S (who are of South Asian Sikh background) in their family home for the past 15 years. Roy had diabetes and had a pacemaker fitted. He experienced shortness of breath, dementia, difficulties with hearing and arthritis.

Roy used to work down the road from the S family and they became friendly over the years. When Roy's wife died some 15 years ago, he struggled to cope with life alone and came increasingly to rely on their friendship and generosity. At a certain point, he asked if he could come and live with them. Roy sold his house and transferred his assets to the S family on the basis that he could stay with them and be taken care of as a family member.

The informality of this situation raised some concern initially with the social services team. Supported by his manager, Raymond the social worker checked the situation out. Roy had capacity to decide his residence and he clearly expressed on multiple occasions that he did not wish to move from the property, where he felt happy and cared for. The Local Authority legal team advised that a more intrusive investigation could run the risk of undermining what was currently a stable and harmonious situation for Roy.

Most contact with Raymond was due to needing respite care for Roy while the S family dealt with their own medical or family matters. When her husband needed time off for medical treatment, Mrs S said she struggled to handle the personal care aspects (showering and toileting support) of Roy's care by herself. In part, this was for cultural reasons around modesty.

The S family valued Raymond's help to navigate the social care system when they needed back-up. Mr S said: *'With us, all right, we can speak English and that but we just couldn't cope kind of thing. We don't know how to use the proper wording.'*

Roy had two visits to a day centre each week to enrich his social life. After Mr S had surgery recently, Raymond added two visits from a home care worker each day to Roy's existing day centre visits. This helped manage the more physically demanding aspects of Roy's personal care at home. The S family were feeling the weight of their caring role, as they were in their 70s and Mr S in particular was suffering with multiple health issues of his own. Roy had occasionally gone off for long walks and been found much later by the police in a neighbouring town; he could also become agitated and upset in the nights, wandering the house and calling out. The S family reported becoming tired and overwhelmed at times.

Raymond explained that he is doing his best to support the ongoing residential and caring arrangement, both for Roy's preference and comfort, and also because it is a stable situation.

The social work manager always aimed to re-allocate Roy to Raymond for each additional referral, and to respond quickly and flexibly to arrange respite days. This was to avoid any duplication of work or questions about the situation, and to proactively avoid carer burn-out and the potential collapse of Roy's living situation.

The S family valued the continuity of having Raymond involved. Mr S said: *'You know, we felt comfortable, he can understand us. We can have things sorted out for Roy... Roy likes him as well, see. And obviously sometimes they do have a shift around... but then people who rely on this (social care), they want somebody who's reliable, who attends to you properly.'*

Raymond, in turn, values the support of his manager. He said: *'My manager supports not only me, but all of us... she will come with you, she will go to visits with you...She used to be a social worker, you know, she knows what to do.'*

Reflective questions

- What capabilities are being shown in this story?
- What are the ethics that underpin this practice?
- How are the different people in the story experiencing social work?
- What does this story make you consider about your own practice?

Additional reflective questions for this super domain

- How does Raymond need to consider the social, cultural and economic context of his relationship with Roy and the S family?
- How does Raymond seek advice and support?
- How do Raymond and his manager demonstrate flexibility in a constrained context?

Action plan

- What would you like to develop in your own practice?

Area of development	Aim	Actions	Support you need	How you will know when you have done this

ETHICAL DILEMMAS

Social workers need to manage the ethical dilemmas that arise in their practice. These dilemmas can stem from conflicting views and demands; differing aspirations and opportunities relating to older people, including overprotective attitudes; and possible tensions between their own professional stance and that of the older person or family. Social workers also need to respond to the impact that such dilemmas have on older people, carers and families.

'It's very clear what should be happening, but the grey area is how to make it happen, and make sure that the relationships with her family stay intact. And our relationships with her and everybody else stay intact.' (Social worker)

Findings from the research

Social workers face ethical dilemmas when trying to balance care needs and legal processes. Their priority is to make the system work well for older people, carers and families.

They are aware of resource constraints and carefully consider the legal, ethical and practical imperatives before requesting support, using knowledge of the law and research to advocate.

Critical reflection is necessary to respond ethically to the dilemmas that arise. Support from peers and supervisors, who have experience of these kind of dilemmas, helps social workers to manage the impact of the work that they undertake.



The story of Cynthia, Tom, Peggy and Olwen

Cynthia had lived on her own for decades in a remote rural rented property, close to her son Tom and daughter-in-law Peggy. Cynthia was 99 years old, and Tom and Peggy were in their 80s. Tom was recently diagnosed with terminal cancer.

Cynthia was in reasonably good physical health, despite some age-related hearing loss and sight impairment. However, she had lived with mental ill-health and a diagnosis of schizophrenia for decades.

Cynthia had been supported in her home for many years by Peggy who had helped arrange daily care visits to help her with domestic tasks. However, Peggy was also supporting her daughter who was widowed with small children, and her husband Tom through his illness. According to Peggy, it got to a stage where Cynthia was often distressed and phoning her at all hours of the day and night and their situation was becoming unsustainable.

At about the same time as Cynthia needed more support, the care agency completely withdrew its services due to a lack of care staff able to cover the rural area where Cynthia lived. Cynthia had input from a Local Authority duty worker, who had to arrange 'short stay' respite care at Wagtail Court. Wagtail Court was a converted and somewhat isolated farmhouse about 40 minutes' drive from Peggy and Tom's house.

The care review and reassessment that Cynthia was entitled to was delayed for a few months due to Local Authority staff shortages, until Olwen the social worker came to do this. While Cynthia was in Wagtail Court and before Olwen got involved, she decided to give up her tenancy. This meant she would need to look for somewhere else to live.

Olwen visited Cynthia in the care home to do a review. She said that her aim was to ensure that Cynthia was able to *'say what her wishes were, absolutely independent of everybody else'*.

Before she had visited, Olwen said that *'the information that came in from family members was that the lady concerned was completely deaf, blind, and unable to make decisions.'* However, Cynthia was very lucid and had insight into her situation. Olwen said that, although she had followed the principle of going in with an open mind, she had found that she needed to adjust because Cynthia was very different from how she had been described: *'I had to change, thinking, "No, hang on, this isn't what this about at all."*

Using some communication aids, Olwen was able to get a sense of what was important to Cynthia – her privacy, watching TV, speaking to family on the phone and having staff check in on her at night when she tended to experience distressing and negative thoughts. Cynthia said that she was happy to stay where she was, rather than move closer to another home or tenancy nearer to where her family members live.

As part of looking at care options, Olwen discovered that Cynthia's pension was paid into Tom and Peggy's bank account. Olwen knew that this was not legal and a deputyship should be put in place, but she also recognised that this was a process that could result in Cynthia not having access to any money for a period of time. Olwen had to carefully manage how she presented the issue of money management to Peggy, who felt weighed down with caring responsibilities. Olwen explained: *'So, that was another challenge where I was having to think on my feet, thinking, "I don't really want to break this relationship now by pointing out the actual facts of the situation." Which is that's not a way to manage anybody's money.'*

Instead, Olwen carefully raised the matter with Peggy and found that she was uncomfortable about having to manage her mother-in-law's money through her and her husband's account. They were then able to plan a timetable for working with the bank to set up an account for Cynthia and get the money managed that way, as well as setting up processes for the future.

Olwen reflected on the significance of these events in the lives of this family: *'I came away thinking, "Good grief. I think I spend quite a lot of time with people, but I really don't." Given the enormity of the decisions that people are making, in the situations they're in, I really, really don't.'*

Reflective questions

- What capabilities are being shown in this story?
- What are the ethics that underpin this practice?
- How are the different people in the story experiencing social work?
- What does this story make you consider about your own practice?

Additional reflective questions for this super domain

- How did resources and systems affect Cynthia, Peggy and her family?
- What are the competing rights, needs and wishes in this situation?
- How can Olwen best navigate the need to follow the law, with the need to support the family's wellbeing financially and emotionally?

Action plan

- What would you like to develop in your own practice?

Area of development	Aim	Actions	Support you need	How you will know when you have done this

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