

## Hampshire EZ podcast innovation

Judy Cooper:

Hello, and welcome to this Community Care *Employers' Own* podcast, where we find out what's happening in the world of social work in different parts of the country. Today's podcast is sponsored by Hampshire County Council, and we're going to be talking about innovation in social work practice.

Thanks for joining me. I'm Judy Cooper. Innovation is one of those buzzwords you hear everywhere at the moment, isn't it? But what is it when it comes to social work practice? How can you achieve it as a social worker? How can you promote it as an employer or manager? And why is it so important anyway?

Hampshire, as some of you might be aware, received innovation funding from the Department of Education in 2018, to help challenge and transform its traditional ways of working, and it's developed what's become known as the 'Hampshire Approach'.

I'm joined today by Katy Burch from the Institute of Public Care at Oxford Brookes University. She and her team undertook the evaluation of Hampshire's programme for the government.

I'm also joined by Emily Hassan and Mhairi Macdonald. Emily is a team manager with one of Hampshire's children's assessment and safeguarding teams, also known as CAST, and it was the creation of these teams that was a key part of Hampshire's changed approach. And MHAIRII is a social worker in one of Hampshire's children in care teams. Thank you all for joining me today.

Katy, if I can come to you first. I wanted to start us off by thinking about what is innovation when it comes to children's social work practice. How would you describe it? [0:01:36.3]

Katy Burch:

Well Judy, that's a really great question straight up. I suppose innovation can mean different things to different people. I would define innovation as being all about finding new, more effective ways to provide services and to address common challenges, and in doing so rethinking, or reimagining, what we do.

And I would say that it's absolutely essential to continuous improvement in public services, particularly children's social care but all social care services really, where the impact of what we do has such a profound effect on people.

And I guess another argument in favour of innovation is that it's often very energising for professionals who are working in the sector.

And just to extend that a bit, thinking about innovation in the context of children's social work, more specifically I think we can see in recent times a real spectrum of innovation with at one end what might be

described as more radical experimentation that can – it doesn't always but can – lead to some big breakthroughs, and at the other end seemingly more conservative or incremental change or adaptation that seeks to build on the existing evidence base. And that can be an evidence base that's local or national or even international. And the aim of that kind of innovation is usually to replicate some, at least, of what's known to have been more successful elsewhere, and adapting that to local conditions. And that's what often gets described as 'transferability.'

Judy Cooper: What a fabulous description, Katy. It really shows the breadth of what we refer to as innovation in our sector. Emily, what about you? Thinking about yourself and your team, how would you describe innovation in social work practice? [0:03:47.3]

Emily Hassan: I think it's the same, really. It's about thinking, 'How can we do things differently?' but trying to be more conscious about why we're making those changes in the first place, who we're seeking to make those changes for, and what the value of that change is going to be, rather than just seemingly updating things all the time, thinking, 'Where should we invest our time and energy in and, like I say, what value would that have for the children and families that we're working with? And what practical measures do the social workers that we have need so that they can prove the practice that they're already completing?'

Judy Cooper: And MHAIRII, what about you? When you're thinking about your own practice or that of your colleagues, what do you think is innovative practice? [0:04:35.5]

Mhairi Macdonald: I think, given the current climate as well, innovation within our practice is so important to keep up with the current times. Things have changed over the last five years with regards to technology and the way we interact, but also the language that children and families use. So innovation in social work isn't just about the way we interact with professionals, but also with children and families and keeping up within the current practice. Along with what Emily's saying, it's making sure that what we're doing has a purpose. It's not just changing things for the sake of changing things, but what is the outcome of that change? Is it to have better participation? Is it to have strengths-based models and strengths-based practice? And I think that's what's been really helpful with this way of working, is that we're constantly able to push ourselves to be more in line with the current climate, and also to be able to work more effectively with the children and families we work with.

Judy Cooper: So I'm getting here a sense of challenging the norm, thinking about the outcomes you want to achieve and thinking, 'Is what I'm doing or what we are doing, is that the best way to achieve that?' And Katy, I know the evaluation picked out that challenging existing practice was a key stage that Hampshire went on on this journey. That can sometimes feel quite uncomfortable for people, can't it? But would you say that's an essential part of the innovation process? [0:05:55.3]

Katy Burch: Absolutely. I mean, it's not all that you want to do. It's not the only thing that you need to do. But it is really important in the early stages of change, I would say.

And I would say, rather than 'challenge', which is quite a challenging word, maybe 'question' and 'probe', rather than 'challenge'. I mean, the value is in creating a platform for change. Sometimes people talk about a 'burning platform for change', but it's all about why, 'Why do we need to change?' before you're trying to encourage people to invest their time and energy in doing so.

So you don't want to totally discredit the old or the established ways of doing things. You know, there were really good things about those ways of working too. But it's providing people with some time to explore what some of the limitations are, if you like, of the old ways of working, and thinking therefore about new ways of doing things.

Judy Cooper: So it's probably worth noting here that Hampshire had actually been rated as Good by Ofsted before they even started this journey, and of course now it's achieved an Outstanding rating. But I wonder if that role of challenge is even more important when people are feeling, perhaps, quite comfortable with their own practice? Emily, as a team manager, what was your role in challenging existing practice during Hampshire's transformation journey? [0:07:23.5]

Emily Hassan: I think it's exactly as you said, actually. It is very much, I agree, it's not so much about challenging what we were doing before. It's about exactly that strengths-based way of working, including taking a strengths-based way of analysing what we were doing before. There was some very, very good aspects of the practice, our practice, which we very much wanted to continue to have. But there was also an opportunity to look at, 'Could we do things even better and what might that be?' and encouraging a culture where everybody, no matter what level they are, is looking at what ways we can do that.

And actually, I saw a lovely example of that in a meeting earlier today when a professional sort of phrased a sentence the first time and then stopped herself and said, 'Oh actually, I don't think that's a very strengths-based way of saying it,' and then corrected herself and changed it to a different way of phrasing the same sentence. So even now we're still offering ourselves opportunities to say things in a different way, to think about how we work in a different way. And I think that had to come from the top down. So it's very much a culture shift, so everybody buys into it and everybody thinks about things now in a different way. And I think that's a really positive environment to be in.

Judy Cooper: And MHAIRII, what about you? Is there a process of personal challenge that you had to undergo, or perhaps are still undergoing now, when thinking about your own practice? [0:08:52.4]

Mhairi Macdonald: Completely. So I started Hampshire brand new. I completed my newly qualifying year. And I've kind of gone through the changes and the innovations in place as I've developed as a social worker. I would explain it as rebuilding a house. You buy an old house but you keep some of the features that you like and then you replace some of the

features you don't like and you paint the walls. The foundations are still there; you just build upon it to make it more in line with what's going on. I think Emily describes it perfectly, and it's just an ongoing way of working and it's something that's never going to end. I think the whole purpose of being innovative as we work is that you're never saying that there's an end-goal. You're just going to keep going and keep improving 'cause there's always going to be something to work on. And I think that's the good thing about what we're doing at the moment, is we're recognising, 'Oh actually, okay, we could reword that slightly or we could change this slightly,' and it's constantly going to improve as we go further.

Judy Cooper:

Okay. So if we move on to thinking about the environment for innovation to flourish, I noticed when I was reading the evaluation that the overall findings of the government's innovation programme so far has identified seven features of practice and seven outcomes of innovative practice. And let me list them for you. They were: relationship-based; systemic; strengths-based; solutions-focused; enough time for direct work; reflective; collaborative; and supportive.

All of these were found in the Hampshire approach but Katy, I was wondering, in your opinion is one of these features more important than the others for allowing innovation to flourish or are they all equally important? [0:10:37.6]

Katy Burch:

Well that's quite a complex thing to unpick within a complex whole system like social work practice with children and families, which contains within it lots of different elements, and then on top of that innovation applied to those different elements.

So it's difficult always to be very clear about the relative importance of each element. I mean, what we did in terms of the evaluation of the Hampshire transformations was to seek to get around that in part by looking at the question from a range of viewpoints or in relation to a number of aspects, so including through case-sampling and a series of interviews over time with staff and managers. And what we found was that all of those aspects that you've described seemed to be important in generating the improvements in practice and enabling families to become more resilient.

So just to give you an example, the relationship-based practice can facilitate better, more open and honest conversations with parents. It can also help to reduce any unproductive feelings of shame that tend to stem from families feeling judged or not understood.

The systemic practice may well suggest ways of exploring family dynamics, which can sometimes be very entrenched or unproductive, dysfunctional even.

And then the strengths-based, solution-focused practice not only helps families to feel valued and to become more hopeful about the future, but also to be motivated to try new things, which is often what social workers are encouraging families to do.

But then with reference to one of the things that you've mentioned, enough time for direct work, here's the catch, because unless you have time for that kind of work, that kind of relationship-based,

systemic and strengths-based work, you won't be able to walk the walk. And in fact, being asked to deliver on that against or to that kind of model without having enough time to do so can feel, I think, really frustrating, from a practitioner's perspective. You know, you begin to feel a disconnect between the organisational discourse around what you should be doing, and your day-to-day practice and challenges. And that can be a really unhelpful place to end up.

So in answer to your question, they're all important. I think one of the factors was more challenging to implement in Hampshire, as in elsewhere, but I think they're all important. I'd be interested to hear what MHAIRII and Emily think.

Judy Cooper:

Well let's find out. MHAIRII, there's your cue. What do you feel are the most important elements and how much comes down to having time and a realistic caseload? [0:13:50.8]

Mhairi Macdonald:

So I'm really fortunate working in the children in care team that we are able to do a lot of the long-term pieces of work. So a lot of the young people that I've worked with I've worked with for three, four years. So we have been able to do a lot of ongoing pieces of work, and that really intense and in-depth work.

I think the main thing from what you've both said is that strengths-based work is adapting the way that we talk. So things like life story work and discussions around the reasons why children are looked-after and why they're in care and why they aren't able to return to the care of their parents has been shifted in the way that we tell young people. So we build those relationships first so we can have those difficult conversations which go into that relationship-based side of work. But it also goes into that strengths-based, where we're saying, 'Actually your mum and dad tried really hard but it just wasn't working.' And it's almost shifted the way that we speak to young people, the way we speak to carers, and also the way we speak to parents by saying, 'Actually, we're not saying that this is a really negative thing but this young person needs to know the reasons. So let's do this together in a strengths-based way and making sure you're included.' I'd be intrigued to know Emily's side 'cause she obviously works within the CAST model. But for the children in care this has been really helpful with the long-term pieces of work that we've been doing.

Judy Cooper:

Emily? [0:15:07.7]

Emily Hassan:

Yeah, I mean, I would agree with everything that's been said, really. I mean, I worked as a social worker before the CAST model was introduced and I think time was always something that people felt that they didn't have enough of, in terms of direct work. And I can remember actually being quite envious of other people in other roles completing those pieces of direct work that I actually wanted to do myself, and feeling at times a bit like a coordinator of services but not necessarily feeling like I actually offered any of the social work work myself, *per se*. Whereas I think there's been a real shift since the CAST model's been introduced because it's allowed people to keep those cases from the beginning and build those relationships with families, and then complete those longer-term pieces of work and

hold the case for the duration of the time that it either needs to remain open or until a child's permanence is facilitated and it moves to a different team. So I think that's made a big difference to practitioners, that they do feel like they've got an opportunity now.

I think the sense of not having enough time is unlikely to ever go in social work because there is always going to be a lot of work and not enough time, but I think it's a more realistic environment now to be able to complete productive, long-term pieces of work with families, and I think the Hampshire approach has offered us a better environment to do that in.

Judy Cooper: So Emily, now is probably a good time to talk about the CAST model, actually. It was a central plank in the changes in Hampshire. Can you talk us through it? What do the CAST teams do and what changes has the reorganisation brought? [0:16:54.5]

Emily Hassan: Yeah. So the CAST teams in Hampshire amalgamated what we used to refer to as our 'referral and assessment team', so our team that would receive all new referrals to our local authority. We would complete those assessments, and then if they were deemed that they needed to remain open, at that point they would transfer to our children-in-need team, and then they would stay open until they either reached permanence or needed to close.

And when we were looking at improvements for the service, one of the things was looking at the experience obviously of children and families, and what kept coming up was the sense that people hated repeating their story to numbers of different professionals, and having to build those new relationships up with the first social worker in the referral and assessment team, and then having to do that over and over again with a child-in-need team social worker.

So like I said, they were amalgamated. So we have the children's assessment and safeguarding teams that take cases from the beginning until the end. And we work on a four-weekly rota, so for example in the district that I'm based in there are four teams, identical, and we will complete a week of intake where we receive all of the cases that need assessing for our district, and then that would allow us then three weeks to complete those assessments ready to effectively be ready to start at the beginning.

And then alongside that social workers will continue to work their longer-term cases. So it offers a really interesting environment for social workers, who can then hone their skills on assessments and having those faster pace of work, but also have opportunities to complete court work and longer-term direct work with families.

Judy Cooper: The organisation of social work teams often seems to be at the core of how local areas go about approaching the social work task. Katy, from your perspective when you were doing the evaluation, what did you see as being the key strengths coming out of the CAST arrangement of teams? [0:19:04.1]

Katy Burch: We saw this as being an area of really big impact on the experience for children and families. So it was much more likely under these arrangements that children and parents, children and families, would

experience a single social worker accompanying them on the journey through social care services, where previously that was quite uncommon, in part because of the hand-offs that Emily's just described so well. When a family changes teams *per se* they have a new social worker. Where they remained for longer within the same team, they're more likely to have the same social worker all the way through.

Of course, other factors can impact on that. So turnover of staff, of course. But it seemed to us to be that the CAST model had a really great impact on that.

So just to give you an idea, the rate of families having just one social worker all the way through went up from about 10% before the changes to up to 70% after the changes. So a really big impact.

Judy Cooper:

Some very impressive numbers there. Well if we move on from that now, so thinking about reorganisation and change management, it can be a messy business, can't it? And sometimes the more people involved, the messier it can be. But I know frontline social workers were heavily involved in various aspects of developing the Hampshire approach, particularly the creation of the new assessment framework. Emily, how important was that for the success of the programme, do you think? [0:20:39.8]

Emily Hassan:

Oh, I think that's been one of the key parts, is that through all of the changes that Hampshire has done there's always been a real focus on having little mini-projects that everybody was invited to attend if they were interested in and wanted to be kind of involved.

So it creates a situation where people feel that they can share those ideas. Actually, we've got lots of great practitioners with lots of great ideas. And it's only if you invite them and encourage them to come along that you'll get to hear them. And that's been a really key part, I think, and it's always interesting to look around a room when we're having a project and see how many different practitioners you've got from different parts of the service. And I think that's probably why people have bought-in so well to the Hampshire approach because it feels like we all own a little bit of it, rather than it feeling like just one person's great idea at the top and we all have to just follow along blindly. Actually, this is a participation from every person in our local authority.

Judy Cooper:

Mhairi, what about you? Did you feel you were involved and part of the changes? [0:21:48.1]

Mhairi Macdonald:

Yeah, I've been really fortunate to be involved. Similar to what Emily said, I think the fact that everyone's had the opportunity to contribute has really helped with the approach being taken on by the local authority and by those who work with it.

I think what's also been beneficial is that we've all been trained on the Hampshire approach. There's been deep-dive sessions into different aspects of it. So it's not just been an approach that we've been told, 'Oh okay, this is what we're going to run with now.' It's something that Hampshire has very much invested in developing the knowledge within those who work within the approach. So having, I think it's

something like four or five deep-dive session, which were a few hours at a time, and going through how we can use the approach to make a positive impact into children and young people's lives. And that's always stood out for me because it's not just being told that you're going to do this. It's being shown that actually, 'This is what we want to do and this is the reason why and this is why we think it would be beneficial.' So it's always been quite a hands-on approach from the beginning.

Judy Cooper:

Katy, in your evaluation you mention that all the changes in Hampshire had a very strong evidence base behind them. I just wonder, in your opinion, how strong does that connection need to be between new ideas and innovations and an existing evidence base? [0:23:03.1]

Katy Burch:

No, I mean, I think our experience at the Institute of Public Care is that all innovation needs to be evidence-based. Even when people are thinking about introducing quite radical experimentation it seems to be very important to touch base with and understand the existing evidence base at first, at least, otherwise, you know, all that happens is – and we do see this, unfortunately, quite frequently – is that people end up just either reinventing the wheel or going back around a circuit that's already been tested and failed, or thought not to work very well. So people do that without realising that they're doing so.

So even when breaking away, if you like, from the established evidence base, it's important that people are clear about why they're doing so. In the case of Hampshire and the Hampshire approach and the broader transformation programme, I really think the success is down to people spending time, committing energy and resources upfront to get under the skin of that evidence base, which they did with support from a local university, looking at the evidence base, really exploring it. Looking at it from different angles rather than just seeking to rely on one model or one idea from elsewhere, and thinking really carefully before testing with staff about what would create the right conditions to change practice in Hampshire and get it owned locally.

And I'd be interested again in hearing what Emily and Mhairi say, but I think people are tiring of that silver bullet approach, you know, that one thing will sort of sort out children's social care services. And that approach seems rarely to work.

I think the last thing I would say about it is that the Hampshire approach also really reinforces the importance of learning from the evidence base, not just in terms of selecting what model or models you want to use or how you want to change practice, but also how to do it well. There is an increasing evidence base around how to implement change within children's social care services, how to implement innovation well, and that sometimes gets described as 'implementation science'. And without that, you know, we've seen quite a few well-funded, even well-evidenced models fail to take hold in practice, and that wasn't allowed to happen in Hampshire, which is great. So I think there's lots about the Hampshire experience to be learnt from other sites, whatever innovations they implement, around how to do it well.



Judy Cooper: Interesting. I have not heard of implementation science before. But you're right. It can sometimes feel that social work in local authorities is on a never-ending cycle of change. Emily, I wonder, did this very careful approach to change in Hampshire, did that make it feel less stressful, for you? [0:26:10.9]

Emily Hassan: Yeah, very. I think you're absolutely right. You know, it is common for us to make changes in social work, and quite rightly, because times do change and we have to move on, and the evidence base moves on, and that makes lots of sense.

But social workers are already working extremely hard. They don't suffer fools gladly. So you know, if you're going to offer a new suggestion or a new idea, I think they're quite a tough crowd to convince, and what they don't like is quick schemes that sort of seem to come out of nowhere, when they don't really understand what its purpose is or why it's changing.

So I think what was really different about this is because it was delivered in a more sort of steady and sort of calculated way, that people could really understand how the decisions had been made and why they'd been made, and what evidence it was based from. So it was much easier for people then to buy into what was actually quite difficult to begin with, to start trying to practice in a completely different way, particularly for practitioners who'd been working in the same way for many years. You know, they really need to see the merit of those changes before they start trying to adapt their own practice. And I think Hampshire gave us confidence in changing our practice and understanding, you know, why it was necessary.

Judy Cooper: And Mhairi, was that the same for you? [0:27:41.7]

Mhairi Macdonald: I think going on with what Emily said, you know, it was done in a very steady way. We all had the time to do the training, both online and face-to-face. And I think we had almost like a breaking-in period where we had a few weeks where we could slowly shift the way that we were writing, the way that we were practising.

But also what made a difference was that management would recognise those positive pieces of work and share them. So when there was a good assessment done, when we first started writing the assessments in a different way, it was shared and it was praised and it was said, 'This is an example of how you can do it.' So it was almost like we were taught along the way but then we were complimented along the way when it was going well. And I think that's really helpful to know that actually we're all trying really hard and it's being recognised. And I think that's what's made the Hampshire approach so positive across the local authority and across particularly myself and the social workers that I work with, is that we can see the positives within children and families, but we can also see the positives with professionals, the way that they interact, the words and the terminology that they use, how they write their reports with the way that we work. And it just seems like it's a very complementary way of working as well, and I think that falls nicely within the strengths-based – not just the strengths-based with the children and

families but the strengths-based with the professionals that work within the Hampshire approach as well.

Emily Hassan: I agree. And can I just add, the other thing is that we've got a toolkit. So we have a toolkit online which anybody can access. And that's full of a) the forms that we use, but secondly really good case examples. So even our new family plan, which was recently developed inside that toolkit, practitioners can access the form but secondly can then look at those best-case examples that have been adapted to really look at how things should be written, explore techniques for how to write in the Hampshire approach. 'Cause it does take some practice. It's a different way of writing. But it's really helpful, as Mhairi says, to have opportunities to see good pieces of practice from other practitioners.

Judy Cooper: It feels like the timeframe is quite important here. It's been two years now since Hampshire was awarded the innovation and Katy, in your evaluation you mention these changes were only really now beginning to bed in and make an impact. In your experience, is that about how long it takes to embed innovation? [0:30:04.1]

Katy Burch: Well, I mean, of course it depends from innovation to innovation. So some innovations are relatively small and discrete, and could be implemented in shorter periods of time. But for this sort of scale of innovation and change, which is all about all practitioners and whole-system change, certainly that sort of period of time – you know, eighteen months to two years – does seem about right, including with reference to previous studies that have looked at those sorts of change programmes.

Judy Cooper: So we are rapidly running out of time but just very quickly, no discussion these days is complete without considering the impact of the Covid-19 pandemic. Emily and Mhairi, has the lockdown and the restrictions it's imposed on contact, has that slowed down some of the innovations you were considering or the implementation of your new approach? [0:30:56.8]

Emily Hassan: The reality is Covid has been a huge test, hasn't it, for everybody and continues to be. One of the biggest blessings that we've had in Hampshire has been that the technology that we had in place was already there, so I think actually...so for example, we had our devices and our smartphones already in our possession, thankfully. So although we weren't really utilising them actually to the best of their capacity, we were able to very quickly do that.

I think it's ironically offered some opportunities for more strengths-based and more creative ways of working. So it was mentioned about sort of bringing our work in line and up-to-date with the people that we work with, and particularly for teenagers, for example, we've actually seen, certainly in my team, that for some young people we've actually had better communication since we've been doing it virtually than we ever did face-to-face. Some teenagers quite enjoy the fact that they don't have to make so much eye contact when they're doing it virtually, and for attending meetings they can attend so much more easily and then choose whether to be on camera or not.

So it's offered us, like I say, some kind of accidental creative opportunities, which has been really interesting to see.

Of course, like I say, there are some limitations to the face-to-face work that we're going, but in terms of the Hampshire approach I don't think it has necessarily delayed our progress in any way. I think we've been able to continue to build really positive relationships with families and just utilise the technology that we've got in place.

Mhairi Macdonald:

I completely agree with Emily. I think if we had started this transition maybe a year after we had, we'd be having a different conversation.

I think, similar to what Emily has said, it's pushed a lot of us out of our comfort zones but made us more creative and more reflective. What Emily was saying with regards to teenager engagements, I find that I'm more available for a lot of my children, my young people, my families, my carers because I can have a 20-minute WhatsApp video call with them rather than driving three hours to see them and driving back again. So I find that a lot of my travel time has been reduced, so I'm more available to be hands-on and virtually, obviously, and just be more present. And I've found that since the lockdown and the way that we're using this technology, similar to what Emily was saying, a lot of my hard-to-reach young people are more forthcoming by WhatsApp-ing me. There's a lot less pressure with WhatsApp texting and video calls, and less intense pressure.

You can also check in on things. So if you've had a wobbly couple of days with a young person you could just send a message. You can be like, 'How's everything going?' or check in with a quick video call and just touch base. And I just think it makes you more approachable. And one of my young people said it makes me seem a bit more normal 'cause they can be just like, 'Oh, I'm just on the phone to someone,' rather than, 'Oh, I've got to go home and see my social worker.'

Judy Cooper:

And Katy, very quickly but more broadly, what impact do you think this pandemic will have on innovation in social work? [0:34:10.0]

Katy Burch:

Oh wow, you've saved the biggest question for last! The unknown, the massive unknown! I mean, I was going to say that the evaluation team wasn't able, sadly, to capture some of what my colleagues here are describing, some of the really innovative and creative practice that's been generated during this Covid period. So I've been scribbling notes frantically, you know, wanting to capture what their most up-to-date practice is.

But certainly beyond this evaluation we're hearing from other services across the UK. Some things are hard, or indeed harder, you know, including very early on and again this time around, you know, making decisions about which families to work face-to-face, in what circumstances, what contact methods for managers to support their staff as well as they want to remotely. There are quite a lot of challenges there. And obviously people just more generally anxious and stressed at this time.

So there are lots of challenges and lots of creativity. We're seeing a lot of adaptations of not only children's social work practice but other

practitioners working with children and families online, and some people adapt to that really well and some people have a preference for that way of communicating with professionals, particularly if they have a lot of professionals in their lives. But some people really don't and some people are beginning to tire of that way of communicating all the time. So I think we need to be careful around, you know, generalising for all populations. But what Emily and Mhairi are describing there is really cutting-edge creativity here, and it's great to hear it.

Judy Cooper: Well unfortunately we have to leave it there, I'm afraid. But I think that has been a fascinating discussion. And I just really want to thank you all, Katy, Emily and Mhairi, for taking part today and joining me in this podcast.

All: Thank you.

Judy Cooper: And finally, thank you for listening. I hope you've enjoyed it. If you have, keep an eye out for other *Employers' Own* podcasts. Just search 'Community Care' wherever you get your podcasts from.

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