TRANSFORMING CARE IN RURAL ENGLAND

Insights from the IMPACT Network on 'Social Care in Rural Areas'

By Chris Watson – Founder of Self Directed Futures and Network Coordinator (December 2024)

Background to the report

The Rural Social Care Network for England was established and facilitated by Self Directed Futures as part of a collaborative initiative supported by the IMPACT Centre for Improving Adult Social Care. IMPACT, a UK-wide organisation, aims to bridge the gap between research and practice in adult social care, focusing on creating practical, evidence-informed solutions for the sector's most pressing challenges.

As a key project under the IMPACT umbrella, the Rural Social Care Network specifically addressed the unique complexities of delivering social care in rural England. The network served as a platform for commissioners, providers, community leaders, and other stakeholders to share experiences, identify systemic barriers, and co-develop innovative strategies tailored to rural contexts. Its work aligned with IMPACT's core principles of inclusivity, evidence-based practices, and collaborative problem-solving.

By engaging diverse voices from across the country, the network fostered a deeper understanding of the challenges in rural social care—such as transport barriers, workforce shortages, and digital exclusion—and highlighted the importance of community-driven solutions. This paper synthesises the network's findings and recommendations, offering commissioners actionable strategies to implement more effective, equitable, and person-centred care systems in rural areas.

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Introduction

The **delivery of social care in rural areas** presents commissioners with both significant **challenges and unique opportunities**. Unlike urban settings, rural communities are characterised by sparse populations, limited infrastructure, and significant geographical distances, all of which impact the accessibility, quality, and sustainability of care services. These factors, coupled with workforce shortages and demographic shifts, create a pressing need for innovative and tailored approaches to social care.

Rural areas also offer **unique strengths**, such as a strong sense of community and belonging. These attributes provide a foundation for place-based solutions that engage local stakeholders and harness the inherent resilience of rural communities. **Lessons from the IMPACT Rural Social Care Network** underscore the importance of collaboration, inclusivity, and local knowledge in shaping care strategies that are both effective and sustainable.

This brief report explores **the challenges faced in rural social care and identifies opportunities** to address them through **innovative models, community-driven solutions, and targeted commissioning strategies**. By doing so, it aims to **support commissioners** in their efforts to create a more equitable and supportive care system for rural populations.

Key Challenges

Delivering social care in rural areas requires navigating a series of interlinked challenges that often exacerbate one another. These obstacles range from practical issues, such as transport and workforce shortages, to systemic barriers like funding constraints and digital exclusion. Below, **these challenges are explored in greater detail, highlighting their implications for care provision**.

Transport and Accessibility

Rural geographies often pose significant hurdles for both care recipients and providers. The **lack of reliable public transport** disproportionately affects older adults and individuals with mobility issues, limiting their ability to access essential services such as day centres, medical appointments, or community activities. Similarly, care workers frequently struggle with the logistics of reaching clients spread across vast rural areas, leading to increased travel times and costs. Many providers report difficulties in maintaining viable operations due to these logistical inefficiencies.

Transport issues also intersect with **economic challenges**. For example, care workers who drive are often required to cover vehicle maintenance and fuel costs, reducing the financial attractiveness of working in rural locations. These factors compound existing recruitment and retention issues, with many staff opting for urban settings where travel and time costs are lower.

Staffing and Workforce Recruitment

Workforce shortages are a critical barrier to delivering consistent and high-quality social care in rural areas. Many rural regions lack the population density needed to sustain a large pool of care workers, and the dispersed nature of demand often makes it financially unfeasible for providers to operate. Staff are often reluctant to take on rural roles, citing long travel times, wear and tear on personal vehicles, and the inability to maximise earnings due to lower call volumes.

Additionally, the social care sector has long struggled with **low wages and limited career progression opportunities**, issues that are particularly pronounced in rural areas. Innovative approaches, such as employing local teams and providing full salaries with paid travel time, have shown much promise but require significant investment and policy support to scale.

Digital Exclusion and Connectivity Issues

In an increasingly digital world, rural areas face notable disparities in access to technology and reliable internet connections. These challenges undermine efforts to implement digital solutions in care delivery, such as electronic care plans, remote monitoring, and telehealth services. Even in areas where basic infrastructure exists, connectivity can be unreliable, making it difficult for staff to access vital resources or for clients to benefit from digital tools.

Digital exclusion also impacts communication and information-sharing. Rural residents may struggle to access up-to-date information about available services, limiting their ability to make informed decisions about their care. Bridging this digital divide is critical for improving access to care and enabling innovations that can mitigate other challenges.

Community Polarisation and Isolation

Rural communities are often characterised by a dual dynamic of strong local identity and social isolation. While a sense of community can provide a robust foundation for local solutions, it can also be exclusionary to newcomers, particularly those from different cultural or socioeconomic backgrounds. Older adults who have lived in rural areas their entire lives may rely on informal support networks that are difficult to replicate for newer residents.

Social isolation is a significant risk factor for many individuals in rural areas, exacerbated by limited transport options and a lack of accessible community spaces. This isolation not only

affects mental and physical well-being but also increases dependency on formal care services, placing further strain on an already stretched system.

Economic and Funding Constraints

The economics of rural social care present unique challenges. Lower population densities mean fewer economies of scale, making care delivery more expensive per capita compared to urban areas. Funding models often fail to account for these disparities, leaving rural providers under-resourced and unable to meet local demand effectively.

Additionally, bureaucratic delays in accessing funding mechanisms, such as direct payments, further hinder innovation and responsiveness. Many councils also lack the flexibility to adapt procurement practices to support smaller, community-based providers, favouring large organisations that may not be well-suited to rural contexts.

Opportunities and Strengths

Despite the challenges of delivering social care in rural areas, there are significant opportunities for innovation and improvement. Many of these lie in harnessing the unique strengths of rural communities, such as their strong sense of identity and connectedness, while addressing systemic issues through creative solutions and collaborative approaches.

Community-Driven Care Models

Rural communities often have strong social networks that can be leveraged to create sustainable and localised care solutions. Community-driven models, such as Care Micro-Enterprises (CMEs) and neighbourhood-based care systems, demonstrate the power of hyper-local approaches. CMEs are small, often independent care providers that operate within specific communities, reducing travel times and fostering closer relationships between carers and clients.

These models also offer economic benefits, as they create local employment opportunities and reduce the reliance on larger, less adaptable care organisations. Examples like shared lives schemes and intergenerational living arrangements provide a template for integrating care into the fabric of rural life, promoting mutual support between different age groups.

Enhancing Funding Mechanisms

Flexible funding mechanisms, such as Individual Service Funds (ISFs) and direct payments, enable individuals to exercise greater choice and control over their care. These models empower clients to select local providers, including CMEs, and tailor their care to meet

specific needs. However, widespread uptake of these mechanisms requires commissioners to address barriers such as bureaucratic delays and restrictive procurement policies.

Local authorities can also adapt funding strategies to incentivise community-based care initiatives. For example, offering grants or low-interest loans to microenterprises and sole traders can help stimulate rural care markets while ensuring that smaller providers meet quality standards.

Technology and Digital Solutions

Digital technology holds transformative potential for rural social care, addressing both logistical and operational challenges. Innovations such as telehealth consultations, remote monitoring systems, and mobile care apps can bridge geographical gaps and improve efficiency. For instance, rostering systems that account for local knowledge, such as realistic travel times, can optimise workforce deployment.

Commissioners should also prioritise investments in digital infrastructure to ensure that rural areas have reliable internet access. This will enable both care workers and clients to benefit from modern digital tools and foster better integration between health and social care systems.

Place-Based Commissioning

Place-based commissioning offers a strategic approach to address the unique needs of rural areas. By focusing on smaller geographical areas and building relationships with local stakeholders, place-based commissioners can identify gaps in service provision and shape markets to address them. This model also supports closer collaboration with voluntary, community, and social enterprise (VCSE) organisations, which play a crucial role in rural care.

Examples such as the use of community connectors—individuals who facilitate local networks and link residents to resources—demonstrate the impact of this approach. These roles help reduce social isolation, promote awareness of available services, and strengthen community resilience.

Integrated Health and Social Care Services

Integrated care models that bring together health and social care providers can deliver more holistic support for rural populations. Coordination between these sectors reduces duplication of services and ensures that individuals receive comprehensive care. Successful examples include joint initiatives focused on preventative measures, such as fall prevention programs and age-friendly community planning.

Integration also extends to partnerships across departments, such as housing and transport, to address broader determinants of well-being. Commissioners have the opportunity to lead

these collaborative efforts, ensuring that care strategies align with the broader needs of rural communities.

Promoting Volunteer and Intergenerational Networks

Rural areas often have a wealth of untapped resources in the form of community volunteers and intergenerational networks. Programs that encourage younger residents to support older individuals, such as Homeshare schemes, not only address care needs but also foster cross-generational understanding and solidarity.

Volunteering initiatives can also supplement formal care services, providing companionship, assistance with daily tasks, and social engagement. These efforts, when coordinated effectively, can reduce pressure on formal care systems while enhancing the overall quality of life for rural residents.

Strategies for Commissioners

To address the challenges and harness the opportunities in rural social care, commissioners should adopt innovative, community-focused, and flexible approaches. These strategies, informed by the lessons from IMPACT Rural Social Care Network and related examples, offer practical pathways to reshape care delivery.

Build Place-Based Commissioning Frameworks

Place-based commissioning allows commissioners to focus on the specific needs of smaller geographical areas, fostering collaboration with local stakeholders. By embedding themselves in the community, commissioners can:

- Identify and address service gaps with tailored solutions.
- Strengthen relationships with voluntary, community, and social enterprise (VCSE) organisations to maximise impact.
- Support local initiatives like community connectors, who reduce isolation and improve access to resources.

Support Community-Led Care Models

Community-driven care models, such as Care Micro-Enterprises (CMEs), empower rural areas by localising care delivery and enhancing personalisation. To facilitate these models, commissioners can:

- Provide financial and regulatory support to small-scale providers, ensuring they meet quality standards while remaining adaptable.

- Promote intergenerational and shared lives schemes, which integrate care into everyday community interactions.

Invest in Digital Infrastructure and Tools

Digital solutions are key to overcoming logistical and operational barriers in rural care. Commissioners can:

- Advocate for improved broadband and mobile infrastructure in rural areas, enabling wider adoption of care technologies.
- Encourage the use of digital tools like telehealth systems, remote monitoring devices, and electronic care plans to enhance efficiency and accessibility.

Encourage Workforce Sustainability

Workforce issues, including recruitment and retention, can be addressed by:

- Offering competitive compensation packages, including full salaries and travel reimbursements, to attract and retain care workers.
- Promoting local recruitment and training initiatives that tap into the rural talent pool.
- Exploring innovative workforce structures that align care workers with specific geographic areas for efficiency and familiarity.

Bridge Social Care and Health Services

Integrated care systems enhance outcomes by addressing the interconnected needs of individuals. Commissioners can:

- Foster collaboration between social care, health services, and other sectors to provide holistic and preventative care.
- Prioritise initiatives such as fall prevention programs and age-friendly planning, which reduce reliance on acute services while improving quality of life.

Engage and Empower Communities

Community engagement ensures care models reflect the lived experiences and needs of rural populations. Commissioners can:

- Create accessible forums and surveys to gather input directly from rural residents.
- Enhance service awareness through local notice boards, libraries, and community hubs.
- Support volunteer networks and local initiatives that complement formal care systems.

Promote Flexibility in Funding and Procurement

Rigid funding models often stifle innovation. Commissioners should:

- Simplify access to Individual Service Funds (ISFs) and direct payments, empowering residents to personalise their care.
- Adopt procurement practices that accommodate smaller providers, ensuring rural residents have access to diverse care options.
- Shift focus from task-oriented care to outcome-based commissioning, fostering more meaningful support.

Key Lessons from the IMPACT Rural Social Care Network

The IMPACT Rural Social Care Network provides invaluable insights into addressing the unique challenges of delivering social care in rural areas. Its emphasis on collaboration, inclusivity, and local innovation highlights practical strategies that can be adapted to improve care provision. Below are key lessons derived from the network's work, supported by detailed case studies.

Community Engagement and Empowerment

One of the strongest messages from the network is that "good support isn't just about services—it's about having a life." Rural communities possess an inherent strength in their sense of identity and connectedness, which can be harnessed to create meaningful, locally driven care solutions. However, fostering inclusion is critical, especially for newer residents or those from different cultural backgrounds who may feel isolated.

Actionable Insights:

- Commissioners should work to engage rural residents in discussions about their care needs and preferences.
- Promoting tools like community hubs, libraries, or local notice boards can enhance awareness of available services.
- Facilitating preventative conversations in accessible community spaces, such as libraries and churches, can empower individuals to take proactive steps in their care journey.

Case Study: Community Hub for Preventative Conversations

In the East Riding of Yorkshire, a community hub initiative was established to address the isolation experienced by rural residents and to enhance access to social care information. Using mobile libraries and local churches as central locations, the program offered informal drop-in sessions where residents could learn about available services, receive preventative care advice, and engage in community activities. These hubs became a vital lifeline for many older adults, fostering connections while ensuring they were aware of the support available. This initiative

also provided commissioners with invaluable feedback on unmet needs and service gaps in rural areas.

Collaboration Over Competition

Participants in the IMPACT network stressed the importance of breaking down silos between organisations to promote shared goals. Too often, competition over limited funding hinders collaboration and innovation.

Actionable Insights:

- Establish multi-stakeholder forums to encourage dialogue and partnership between social care providers, local authorities, and voluntary organisations.
- Emphasise joint working across sectors, such as health, transport, and housing, to ensure comprehensive care strategies.

Case Study: Joint Commissioning for Falls Prevention

In Dorset, a collaborative effort between social care and health services resulted in a groundbreaking falls prevention program. Recognising that fall-related injuries were a major cause of hospital admissions among older adults, the initiative pooled resources to develop a targeted intervention. The program combined home modifications, strength and balance classes, and regular health check-ups, reducing hospital admissions by 25% within its first year. This collaboration demonstrated the power of shared goals and resource pooling in delivering impactful preventative care.

Leverage Local Strengths to Address Workforce Gaps

Workforce shortages are a persistent issue in rural care, but the IMPACT network advocates for reframing the problem. Instead of solely focusing on recruitment, the network suggests developing informal community support and promoting roles like community connectors and volunteer carers.

Actionable Insights:

- Encourage rural councils to invest in community connectors, who link residents to local resources and reduce social isolation.
- Support volunteer-led initiatives that complement formal care systems, such as intergenerational programs and timebanking.

Case Study: Homeshare Program in North Yorkshire

The Homeshare program in North Yorkshire matched older adults who needed companionship and support with younger individuals willing to provide care in exchange for affordable housing. One pairing involved an elderly farmer and a university student. The farmer gained help with household tasks and social interaction, while the student benefited from affordable accommodation near their campus. The program successfully addressed loneliness and housing challenges, proving the value of innovative intergenerational care models.

Adopt Flexible, Outcome-Oriented Approaches

The IMPACT network champions flexibility in funding and commissioning, emphasising that rigid models often fail to meet the nuanced needs of rural areas. Instead, it advocates for funding mechanisms that prioritise outcomes and empower individuals.

Actionable Insights:

- Simplify access to Individual Service Funds (ISFs) and direct payments, allowing rural residents to choose care options that suit their specific needs.
- Incorporate case studies and real-life examples to showcase the impact of innovative approaches and encourage buy-in from policymakers.

Case Study: Direct Payments for Personalised Care in Somerset

In Somerset, commissioners streamlined the process for accessing direct payments to empower individuals to personalise their care. One participant, an older woman living in a remote village, used her direct payment to hire a local microenterprise for daily support and companionship. This approach ensured that her cultural preferences and specific needs were met while supporting a local care provider. The initiative also cut costs compared to traditional care models by reducing administrative overheads and travel expenses.

Shift the Paradigm from Services to Support

One of the most profound lessons from the network is the need to redefine the role of social care. Moving away from a "service-oriented" model toward one that focuses on holistic support can enhance both individual well-being and system sustainability.

Actionable Insights:

- Highlight stories of success that demonstrate how care can improve quality of life, rather than merely meeting basic needs.

- Encourage innovations like shared lives schemes, which integrate care into everyday community life.

Case Study: Olympic Walker Race in Cambridgeshire

In Cambridgeshire, a nurse heard from an older client that she wanted to participate in a walking race. Taking this idea forward, the nurse organised a local "Olympic walker race" for care recipients, which quickly gained popularity and became an annual event. The initiative not only encouraged physical activity but also fostered community spirit and social interaction. Over time, the event grew to include hundreds of participants and garnered national attention, demonstrating how small, person-centred ideas can lead to widespread benefits.

Conclusion and Recommendations

The challenges faced by rural communities in accessing and delivering social care are multifaceted, encompassing logistical, economic, and systemic barriers. Yet, the strengths inherent in rural areas—strong community bonds, local knowledge, and a sense of resilience—offer opportunities for commissioners to reimagine how care is provided. By leveraging these assets and addressing key issues with innovative approaches, commissioners can help transform rural social care into a system that not only meets basic needs but also enhances quality of life.

Final Thoughts

The challenges of rural social care require commissioners to think beyond conventional models and embrace innovative, community-centred solutions. By incorporating tools like geospatial mapping and allowing providers the flexibility to focus on achieving meaningful outcomes, commissioners can deliver care that truly enhances the lives of rural residents.

Appendix: Useful Web Links

Below is a curated list of resources referenced in this paper, providing further details on the topics, case studies, and strategies discussed:

- **IMPACT Centre for Improving Adult Social Care**
  https://impact.bham.ac.uk
  Learn more about IMPACT's work in bridging research and practice to improve adult social care.

- **Shared Lives Plus**
  https://sharedlivesplus.org.uk
  Explore the Shared Lives model, which supports community-integrated care in rural and urban areas.

- **Age-Friendly Communities | Centre for Ageing Better**
  https://ageing-better.org.uk/age-friendly-communities
  Resources on creating age-friendly environments that support older adults.

- **Small Good Stuff (Community Catalysts)**
  https://www.smallgoodstuff.co.uk
  A platform supporting community microenterprises in social care.

- **Pro-Social World**
  https://www.prosocial.world
  Insights into fostering collaboration and psychological safety in group settings.

- **Homeshare International**
  https://homeshare.org
  Information about Homeshare programs connecting individuals needing support with those offering companionship.

- **Care Together Program**
  https://www.canva.com/design/DAF3CcWAbz4/6tIg9OoBO-kklKUtdMdXWQ/watch
  A video showcasing Cambridgeshire's Care Together initiative.

- **Direct Payments and Individual Service Funds**
  https://www.skillsforcare.org.uk/Topics/Direct-payments/Direct-payments.aspx
  Guidance on using direct payments and ISFs to personalise care.

- **SDS Network England**
  https://sdsnetwork.org.uk
  A dedicated network supporting the implementation of self-directed support in England, with a focus on Individual Service Funds and Direct Payments.

- **Citizen Network**
  https://citizen-network.org
  Resources on inclusive care models and direct payment solutions, supporting self-directed approaches to care.

- **The Social Value Portal**
  https://socialvalueportal.com
  Tools and resources for measuring social value in care initiatives.

- **Geospatial Data and Rural Connectivity**
  https://www.gov.uk/government/publications/rural-connectivity-improvement
  Information on geospatial mapping and rural broadband initiatives.

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Improving Adult Care Together

The Health Foundation

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Economic and Social Research Council