



MY HOME LIFE ENGLAND



IMPACT REPORT 2025

My home life
England



Words from our Director, **Tom Owen**

“Reflecting on the past year, **I am proud of all we achieved together.** Despite the challenging times facing the sector, we continue to be inspired by **care providers’ extraordinary dedication** to delivering quality of life for those they support. More than **230 care leaders completed a My Home Life England programme**, and it is a privilege to work alongside them in improving their services, and in supporting them to play **a greater role in the future of health and social care.**

We have remained **highly active in our research**, strengthening the evidence that underpins our work. We released our 2-year inquiry focused on **effective partnership across the sector**, calling for a **fundamental shift** in how adult social care providers and statutory system bodies work together; outcomes improve for everyone when we **prioritise relational partnerships** that **respect and value the expertise of care providers.**



We also completed our **evaluation of Shropshire Council's DHSC-funded Virtual Care Delivery project**, released **new insights into effective leadership in homecare services**, and continue to share the ‘6 key ways to thrive’ from our **‘Thriving in Residential Care’ research** - both with care services in the UK and internationally.

My Home Life is now in its 20th year. Our work in **empowering care leaders** through high quality professional development opportunities, and contributing to **a sustainable future for health and social care**, feels even **more relevant now than ever before.”**



Some of the My Home Life England core team and programme facilitators

Where we delivered programmes



Programme highlights



237 care leaders completed a My Home Life England programme



We **completed 19** programmes and **started 12** more programmes



We worked with **leaders from across the care sector** - from care homes, home care, supported living and extra care services



We supported **improvements in the culture of care** in at least **230 care settings**



The **impact** of our programmes

Our 2025 Leadership Programmes Evaluation revealed widespread impact on care leaders and their care services.



Delivering 25 leadership programmes to 322 care leaders had a positive ripple effect, impacting approx. 10,000 people receiving care and support and their families.



[See the evaluation](#)

Improved leadership quality and promotion of a positive culture

98%

saw improvement in the **quality of their management & leadership.**

97%

said their **understanding of how to improve the culture of care** increased.

Staff retention and increased morale for leaders and teams

95%

said the **quality of their engagement with their team** had improved.

Improved quality of support for individuals and families

91%

saw improvement in their **care team's desire to take the initiative** in responding to people's needs.

91%

said the **quality of practice** in their care setting increased.

93%

said their **sense of personal achievement from work** had increased.

Better engagement with regulators and commissioners

94%

felt their **professional confidence** had increased.

81%

reported an **increased confidence** to be able to meet CQC requirements.

Reduced NHS pressures

54%

said that **inappropriate hospital admissions** had decreased.

Commissioner feedback

“We’re **incredibly proud** to have funded My Home Life as part of our **commitment to investing in the care sector and its leadership**. The feedback from providers has been **overwhelmingly positive**; many have described the programme as **unlike anything they’ve experienced before**.”

The course goes beyond theory – managers are taking **real, practical insights** back to their homes, from **improving communication** and **prioritising staff wellbeing**, to **developing confidence in their leadership style**.

One provider had attended many management courses over decades, but said this was the **first time they felt truly listened to**. By supporting My Home Life, we’re not just **helping leaders grow** – we’re helping **create healthier, more resilient care environments**. It’s also sent a strong message to the market: **the council is here to invest in people, in quality, and in the future of social care**.

Amy Morgan, Senior Commissioning Manager, Surrey County Council



Surrey programme

“We’re always looking for ways to support providers in their **quality improvement work, learning new skills**, and **gaining confidence** in their roles.”

This programme offered them the opportunity to **learn from both their peers** and the **experienced tutors** leading the groups.

We appreciate how busy our managers are, and were pleased that **all attendees without exception** said they **gained a lot from the programme**, found it **really valuable**, and would **recommend it to others**. We look forward to working with the team again.”

Sarah McGlynn, Market Sustainability and Improvement Manager, Cheshire West and Chester Council



Cheshire West programme

“The impact was **more than I dreamed**. Hearing everyone’s feedback was unbelievably heart-warming... what stood out was the **willingness to embrace new ideas**, and the shift from seeing challenges as failures to viewing them as **opportunities for growth**.”

Most importantly, participants left as a team, ready to **take learning back** into their organisations and **make homecare even better for the residents** it serves.”

Nikki Ralph, Assistant Director, Strategic Commissioning - Age Well, Islington Council



Islington programme

Care leader testimonials

“My Home Life is a **real game changer** for many managers.

Beyond all the **valuable benefits** it brings **to leadership and practice**, one of its greatest strengths is the way it helps to **build a sense of community**, something that **truly responds to the needs we have** as managers.”

“Our programme has helped us to lead **positive, sustainable changes** in care quality and staff morale, and to navigate complex situations with more confidence. We now feel **better equipped to manage emotions and stress** in a high pressured environment.

“The most significant insight I've gained about myself is my **resilience** and **adaptability** in the face of professional challenges.

This course has taught me the **importance of self reflection and continuous personal development**, which has **enhanced my leadership** skills and deepened my understanding of how to **foster a supportive and empowering environment**, for both staff and for those we support”.

*“I am more **confident** in myself now. I feel more able to **tackle difficult situations** and find ways of **improving** my care service.”*



“Balancing demanding priorities in a care setting can be challenging, but **the programme taught me practical strategies** for managing my time effectively.”

“The course and the group work have allowed me to **think about my management style** and the **way I approach the team. We’re all working better as a result”.**

“Now **I am less stressed** and in turn [it] has ensured **the staff are not stressed**, which **benefits the residents and families.**

Improved outcomes through **partnership working**: A vision for social care

We launched a **major new report** calling for a **fundamental shift** in how adult social care providers and statutory system bodies work together.

It sets out a vision in which **care providers are respected and engaged as equal partners within the health and social care system** - working alongside statutory bodies to shape, deliver and improve services.

Based on a **2-year inquiry**, supported by the **Rayne Foundation**, we brought together insights from 90 stakeholders across care, local government and health, a literature review, 11 case studies, and learning from our work with more than 2,600 care leaders.

The evidence concludes that, where **adult-to-adult relationships** are **prioritised** and care providers are valued as equal partners, **outcomes improve for everyone**, including:

- Better-designed initiatives that save money
- Improved hospital discharge and reduced crises
- A more resilient and responsive care sector



[See the report](#)

To make relational partnerships the norm, we need **deliberate cultural change** across all parts of the system.

We advocate for:

- **Transparent, inclusive systems** that value care provider insight.
- **Strengthening the role of care associations** to act as independent, strategic connectors.
- **Recognising and resourcing the leadership of registered managers**, and supporting future care leaders to develop a new vision for the sector.



[Read our piece for Community Care](#)

Partnership report: Case study spotlight

The report highlights 11 case studies, where moving to more relational ways of working has already delivered wide-ranging impact. Including:

South Warwickshire NHS Trust made a strategic decision to **actively involve care home managers** in its work to implement the Enhanced Health in Care Homes programme.

Initially, when there was no direct representation from care homes, discussions were very problem focused.

Engaging managers – recruited via local forums - reshaped the conversation. They **moved the focus away from problems** and instead **highlighted successful practices**, giving insight into what works and building on shared strengths.

Together four key focus areas were identified. This **refocusing of priorities** helped to shape a **more effective implementation strategy** and enabled more co-ordinated, responsive and person-centred care.

Dorset Care Association, Dorset Council and the ICS collaborated to launch an **independent trusted assessor service** to support safe discharge from hospital into care services.

Dorset Care Association delivers the service and appoints assessors (often former care managers) with knowledge of the discharge process. They review medical notes and ensure providers are informed and confident before accepting people into their services.

Over 2,500 discharges have occurred with no failed placements or readmissions, and the service is being expanded into new areas.



Julie Richardson Nursing Home worked in partnership with its **local NHS continuing healthcare team** to co-design a **more flexible funding arrangement for an individual's care package**, ensuring it could better meet their complex, fluctuating needs.

In the original package, arranged through a traditional commissioning approach, staffing levels could not easily be adjusted as the person's needs changed.

The new flexible arrangement allowed the home to **vary the level of support** received on a day-by-day basis.

This **saved money** (approx. £50,000 per year to the integrated care system) and **improved the quality of support for the individual**.



Explore the 11 case studies



Leadership in Homecare Services – What Works Well?



[See the report](#)

We brought together insights from **90 homecare professionals** to identify **six key elements of effective leadership** in homecare services.

We drew on insights from our professional development programmes, interviews with homecare staff across different roles, and a review of the existing literature.

Our report ‘*Leadership in Homecare Services - What Works Well?*’ identifies **the challenges** faced by homecare leaders and **the effective strategies** they use to **support their teams and deliver high-quality care**.

We found **six interwoven elements of good leadership** that can all be transformative for homecare teams and the quality of care they provide.

- Supportive management
- Good team communication
- A positive work culture
- Clarity about roles
- Strong customer care
- Effective working with the wider health and social care system

Homecare leaders play a vital role in shaping the experiences of homecare workers and the quality of care delivered, yet often have little support.

Our report underscores the importance of **supporting homecare leaders** and ensuring they feel safe and valued – for example through **professional development opportunities** – so they, in turn, can support their teams and apply learnings to practice for the benefit of their teams and organisations.

The 6 key elements of good homecare leadership explored:



Read our Care Management Matters piece



Managing teams to feel safe, supported and valued

Building trust through consistency, shared decision-making, positive recognition, and sufficient access to training.

“We can openly voice concerns, there is good comradery, [the branch manager] asks for views, we all talk about it, there is no browbeating, we have ‘always here to help’ each other in our minds.”



Creating a positive culture of practice

Modelling positive values and behaviours, and empowering carers to form meaningful relationships with the people they support and their teams.

“We’re not micro-managed and so we feel empowered, we are a kind team.”



Strong quality assurance and customer care

Using feedback and complaints as learning opportunities. Maintaining relationships and regular communication with clients and families.

“I always end any update with ‘Anything I should know about or you want to let me know?’ I do a monthly email to keep next of kin involved and say let us know anything they need to discuss.”



Communication, collaboration and belonging

Fostering connection through regular communication, appreciation, and open conversations – despite time-pressured environments.

“As a manager, always providing the personal touch to carers e.g. I ring them if I hear some positive feedback so they receive lots of praise...”

Sustainability, growth, development and community engagement



Spreading risk to sustainably grow client numbers, investing in workforce development, collaborating with the wider health and social care system, and with local communities.

“[I have] good reviews from Occupational Therapy, Social Services, GP’s. Networking is a massive part of the Branch Manager role, making sure they know what we do and getting a named contact to communicate with.”



Clarity of roles, responsibilities, processes and policies

Ensuring roles and responsibilities are clearly defined, and it’s clear who to ask for support and how decisions are made.

“[We have] very clear role descriptions agreed with the manager so it’s clear when decisions should be passed on.”

DHSC-funded research: Evaluating virtual care technology in domiciliary care



We conducted a 2-year evaluation of **Shropshire Council's Virtual Care Delivery project**, funded by the Department of Health and Social Care.



Department
of Health &
Social Care

The VCD service was designed to **better meet people's care and support needs**, whilst also **alleviating some of the pressures** on our strained health and social care system.

We found that, when embedded effectively, virtual care technologies can **support users' independence, health, wellbeing**, and aspects of daily living, while delivering **meaningful benefits across the wider care system**, and offering a **sustainable, scalable approach to social care**.

Benefits included:

- Service users experiencing **greater independence** and **connection** through virtual support.
- **Greater reassurance** of wellbeing for families.
- Reduced travel time for staff and **improved access** to people in isolated areas.
- A more **proactive and preventative care** model.
- Better resource allocation and **financial savings**.
- A scalable, user-centred model that is a foundation for **system transformation**.

Lois (Genie client): "I feel a bit safer in me house... And [Genie] says, 'Lois, have you turned the water off?' Ooh, yes, I have!"

Adele (Relative): "It's taken the pressure off me. Mum has got her daughter back, and it gives me reassurance that she's safe."



Watch our animation
of the key findings

Other research news



Our Research Fellow, **Dr Bethany Morgan Brett**, was awarded an **NIHR School for Social Care Research (SSCR) Care Research Career Development Award**.

The award provides Bethany with dedicated time and space over the next two years to advance her research skills and develop inclusive, ethical and co-produced approaches to social care research.

NIHR | School for Social
Care Research **20**
Years

Research update: Thriving in Residential Care

In 2024 we conducted one of the **largest qualitative research studies** on **older people's experiences of living in residential care**, which revealed **six key ways** that **older people can thrive in a care home**, if the conditions are right.

Throughout 2025 we continued to **spread the research with new audiences**, and supported more care services to **embed the research into practice**.

➔ [Read our 6 part series with Care England](#)

*"Participation in the 'Thriving in Residential Care' project **directly influenced** our decision to **undertake LGBTQ+ training**, and implement **visible signs of inclusivity**.*

*These actions have **strengthened our home's culture**, improved staff awareness and confidence, and **created a tangible difference in the wellbeing** and self-expression of our residents."*

Care home manager



We continue to run bespoke workshops (online and in person) supporting care leaders to embed the Thriving research and apply the themes in their own care service to improve service quality. Please get in touch for more information.



Our research goes global!

Research author Dr Bethany Morgan Brett presented the research to **KU Leuven University** in Belgium.

Meanwhile Tom Owen was invited to share the key findings at the **Global Ageing Network Conference** in Boston, USA.



Hear how the home is Thriving Inclusively, and how their Pride celebration gave one gentleman the confidence to say "I am gay".

➔ [See our piece: Pride in Practice](#)

How we work

My Home Life England has **20 years' experience** working alongside **more than 2,700 care leaders** and the **wider health and social care system**.

Our **evidence-based frameworks** support **leadership, quality development** and **positive cultures** in care settings.



Leadership and Quality

Our professional development programmes empower care leaders and support sustainable care systems by improving quality.

- Many of our programmes are commissioned through the public sector and are free to participants working across adult social care.
- We take an appreciative approach, focusing on what is already working well, with action learning sessions giving space to explore topics in a confidential, supportive group.

Our Research and Evaluations

We undertake innovative research to support the sector.

Our programmes are founded on evidence and research and we constantly evaluate our work. We additionally support evaluation activities within the sector, including evaluating the impact of care technologies.

Bespoke Support

We also create bespoke programmes to meet local needs:

- Meeting CQC standards and proactively planning for future changes in line with the CQC approach.
- Building local partnerships and improving interprofessional communication.
- Improving care pathways and avoiding unnecessary hospital admissions.

Get in touch to discuss how we might support you.



Contact us

Resources and practice ideas

Social workers in care homes

Dr Sally Nieman - who has a PhD focused on social work with older people in care homes - joined us through a part-time fellowship with the North Thames Applied Research Collaboration (ARC).

Sally authored a 3-part blog series making the case for social workers to have a greater role in care homes, and how we might make this happen.



[Read Sally's 3 blogs](#)



[Explore her practice ideas](#)

Supporting people living with dementia

Care teams shared with us the ways that are supporting people living with dementia in care homes.



Supporting LGBTQ+ identities

Hear ideas from care teams for how they are supporting LGBTQ+ identities and intimacy in care homes.





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My Home Life England is part of City St George's, University of London.

We are very grateful to all the people and organisations who worked alongside us this year.

Your continued support, expertise and collaboration makes our work possible. **Thank you.**

Contact us

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