



Social Care in
Northern Ireland
2025

“Collaborative Days”

The ‘Collaborative Days’ scenario, set in 2025, explores the potential impacts of the State having far less of a role in providing care in Northern Ireland in 2025. In response to this a new kind of market place for social care provision has emerged – one that is driven by community interest. This, coupled with a decade of increased demand for more rights, social justice and equity has led to whole-scale change in the attitudes of citizens who have stepped up, through necessity, to exercise their rights and responsibilities and play a fuller part in the life of their communities.

KEY CHARACTERISTICS

Person-centred, progressive, localism, collaborative, creative, motivated, hope, shared values, open-minded, sense of belonging, participatory, self-motivated, personal responsibility, citizenship, community-based, holistic, assets based, non-judgemental, mutual respect, proactive, flexible, adaptable services, positive ageing, resilient, collaborative learning, cross sector.

Today in Northern Ireland in 2025, citizens, service providers and the state have found their proper roles and responsibilities and social cohesion is strong. A strong ethos of shared public values and strong public leadership is evident. Over recent years a change in the relationship between citizen and state has led to communities run by people-power; people who are united and respectful stewards of community assets.

Much of Northern Ireland’s success is put down to political, civic leadership and the business community investing in people. Creating a quality of life offer has ensured that the critical components are in place.

Communities are keen to use facilities more effectively: learning hubs include the use of public buildings and business premises. These are open 24/7 to allow people to learn at a time and pace that suits them.

A thriving community movement is working behind the scenes, sometimes in conjunction with these groups, plugging some of the gaps and providing their own solutions to local problems.

Their work ranges from associations offering friendship and support to groups providing playgroup, holiday activities and after-school support for children with complex additional needs, local co-operatives and individual volunteers.

Social enterprises are also helping local people re-define their relationships while creating new opportunities and driving social and economic change. Initiatives range from shops and restaurants employing homeless people to organisations offering palliative care at home for patients who are being failed by the cash-strapped NHS. While demand is high for the latter, services are limited due to lack of funding.

Attitudes to social care are so very different for even a decade before. Most do not require any formal support. People who rely on social care services earn, learn, care, contribute, participate and volunteer like everyone else and they buy support services as and when they need them.

“Collaborative Days”

E-health services have moved a long way in recent years. This has helped make it easy for people to seek out information for themselves or make decisions about their own health and wellbeing. Largely gone are the old paper and phone modes of communicating with those who rely on services. Contacting health and social care services about appointments are mostly done through electronic channels or in person, in local community improvement centres.

Innovative support schemes, such as the much talked about **GRANDPARENT SERVICE**, which give older people the opportunity to ‘adopt’ children raised in single households, have proven popular and effective, despite concerns from some critics regarding the issue of child protection.

Networks of community trusts are widespread, set up in response to public demand offer a range of services from support and activities for the elderly to youth centres run by teenagers and nurseries. Many have taken over council facilities and set up trading subsidiaries to employ local people to run centres, which offer restaurants, conference centres and community theatres.

The government, keen to reduce dependency on the state, has recognised the work of these groups with the introduction of new national award schemes and a small prize fund to celebrate and encourage a more DIY approach as it continues with its public sector reforms.

One of this year’s winners, **‘TIME, SPACE AND TOOLS (TST)’** in the Ardoyne area of North Belfast, an organisation which teaches and enables joined up approach to supporting families with multiple problems to improve economic prosperity, raise aspirations and achievement, make a positive contribution to a safe and stable living environment, and improve long-term life chances for the whole family is using its £10,000 prize money to fund family learning initiatives

This bottom-up approach has driven a culture of collaboration between citizens, local and central government and health and social care professionals. Community Improvement Coalitions chaired by local councillors are the ‘engine room’ of change and innovation. CICs bring together individuals from the community, the voluntary sector and social enterprise as well as representatives from business, health and social care. The chairs of this network come together at Stormont and meet twice a year to discuss and celebrate progress.

Local Councillors are the shapers and makers of local services, working to their own social justice charters, which are drawn up by members of the local community. Councillors host regular social debates and speed dating style ideas exchanges to create solutions to local problems and improve life in the community.

In both rural and urban areas, healthy living and ageing centres, pre-birth parenting programmes and employability schemes targeting people with disabilities, mental health problems, learning difficulties and addictions are among the many initiatives improving health and reducing inequalities.

Today in 2025, Northern Ireland is recognised internationally as a beacon of innovation, and an iterative approach is being taken to ensure employment schemes offer value for money and are sustainable when scaled up and rolled out. Across the City, the **BELFAST GUARANTEE** scheme is the result of the business community, education providers and the state offering a shared model of modern apprenticeships for young people entering social care. Competition for these prized placements is high with a guaranteed job at the end of 18 months, a living wage salary and up to three hours a day set aside for study for professional qualifications.

“Collaborative Days”

The new living wage across the city – currently £15 an hour – has dramatically reduced in-work poverty while new apprenticeship schemes and incentives for businesses have led to higher employment rates, particularly among the women, the ‘young’ old and the disabled.

Latest figures from the Office for National Statistics show unemployment is at its lowest level for ten years while the number of people working beyond retirement age has doubled since 2020.

The increase in lifelong learning programmes has led to a highly skilled older workforce. Most people under the age of 75 are engaged in some form of community activity with many contributing their time, energy and assets as coaches or volunteers for local groups based around their interest, skills and knowledge. A dramatic rise in participation over the past five years has resulted in volunteering becoming a way of life. Last month, the University of Belfast’s Social Policy Department reported that the worth of volunteering for the local economy had risen from £122million in 2015 to £300 million today, in 2025.

The private sector together with government is reversing years of under investment in housing. A major expansion in the creation of affordable housing stock is under way, with the emphasis on co-housing projects for the rental market. New Scandinavian style apartment blocks with communal facilities on the ground floor and basement and a communal roof patio or communal decked garden area are becoming a common sight around Belfast’s skyline. They are proving popular particularly with single parents and retired people with limited incomes.

Technology is improving many aspects of people’s lives and health. Many people use their smart phones and tablet devices to monitor their cholesterol and weight levels and follow healthy lifestyle programmes. New domestic devices such as ovens that switch off when left unattended for too long are making homes safer.

One area where progress has not been made is in data sharing across public services mostly due to lack of confidence in IT systems following a number of high profile failures.

Social media is the key tool for keeping in touch for the young and old who are digitally literate thanks to the many life-long learning courses available in local schools and colleges.

Volunteers and development workers also work hard to ensure technophobic service users can navigate the web and use social media to make the most of local support and opportunities. Hospital and doctor appointment reminders, along with many other social services information, routinely ‘pop up’ in residents’ “TV inboxes”.

However, those who have steadfastly refused to embrace the technology revolution and those in financial hardship 2025 can feel isolated in a world where television is the main focal point of their life.

Community learning hubs are underpinned by technology, with learners downloading lectures and communicating online with educators and other students. Young and old are able to combine study, work, family and community in a way that suits their individual circumstances and preferences, so that learning about citizenship, health and areas of personal interests becomes part of life and not a precursor to life.

Role of the social care workforce

NISSC has raised minimum qualifications for all care staff and training is now heavily focused on personal leadership and outcomes. Service users are heavily involved in designing training programmes and, following their own training, a number also deliver some teaching modules.

The population of Northern Ireland has become a healthier society through prevention of ill health and the promotion of health and wellbeing. People wish to be responsible in taking decisions to support better personal health. NISSC and other leaders in social services continue to communicate well the evidence to enable people to choose a lifestyle where healthier outcomes for people.

Over the last decade, there has been a major increase in the dependency levels of people being cared for in the community. Many medical services that used to be provided in hospitals are now undertaken in community settings. As a result, community nursing staff have much more complex caseloads. There is also greater complexity in the other forms of disability, as well as in the treatments that people are receiving.

The health and social care system values robust evidence on what works to inform policy and year-on-year, that evidence says people are best cared for as close to home as possible. In the 2024 Omnibus survey – 81% of people surveyed said that more health and social care services should be delivered in GP surgeries, local centres and in people’s homes.

It is striking to notice that every social care worker knows the underpinning values of the health and social care system in Northern Ireland. Staff know it matters less that they follow strict procedures and regulations but work hard to innovate, safeguard and support communities, as long as their efforts contribute to the vision. The workforce sees themselves as enablers, relationship and ideas brokers and are trusted and valued. This has led to a new breed of social care workers, drawn from the rising immigration but also in retraining.

Today in 2025, social services expenditure is targeted and used in ways that are effective in meeting people’s needs. This requires social workers to keep their knowledge and skills up-to-date, to base their practice on evidence and research of what works, to be effective in their interventions and to be able to demonstrate the difference they make in people’s lives.

The 2025 social work education prospectus, attracting new students, proudly highlights the core values and assumption of the social care workforce in Northern Ireland as,

- focused on the needs of individuals, families and communities.
- accessible, responsive, integrated, flexible and innovative.
- cross boundaries.
- promote wellbeing and disease prevention and safeguard the vulnerable.
- operate to high standards of safety, professionalism and accountability.
- be informed by the active involvement of individuals, families and communities, HSC staff and voluntary and community sectors.
- deliver value for money ensuring that all services are affordable, efficient and cost-effective.

“Collaborative Days”

Social workers, for example, are known for facilitating and commissioning rather than working directly with specific individuals or families and, as such, spend much of their time in community settings. Decisions on what services people access are often made in collaboration with the individual's family or a voluntary organisation acting as an advocate, with no pressure on time unlike the old system of timed 10, 15 or 30 minute slots.

NISSC has invested heavily in systems leadership training for all staff, not just senior managers. The training practices of old, where staff were simply encouraged to pursue endless efficiencies and speed up processes, have largely been abandoned.

There has been a sea change in culture across both health and social services, which are much more integrated in practice. The Assembly's Health and Social Care Committee last month reported a drop in the required revenue budget from DHSSPS from £5.8 million to £4.3 million in 2024, the levels of 2011.

Cross-agency secondments, job shadowing, rotational programmes and mentoring for all health and social care staff is now standard practice. Pay inequality across the public, private and third sector has all but been eradicated.

The new supportive climate has resulted not only in more productive and engaged staff but also in higher retention and lower sickness levels. However, some have found the transition easier than others, despite a raft of leadership seminars and new courses to prepare staff at all levels.

Some social care workers have been resistant to the introduction of new ways of working and in some areas where leadership is weak, the power shift from managers to front-line staff is happening more slowly.

