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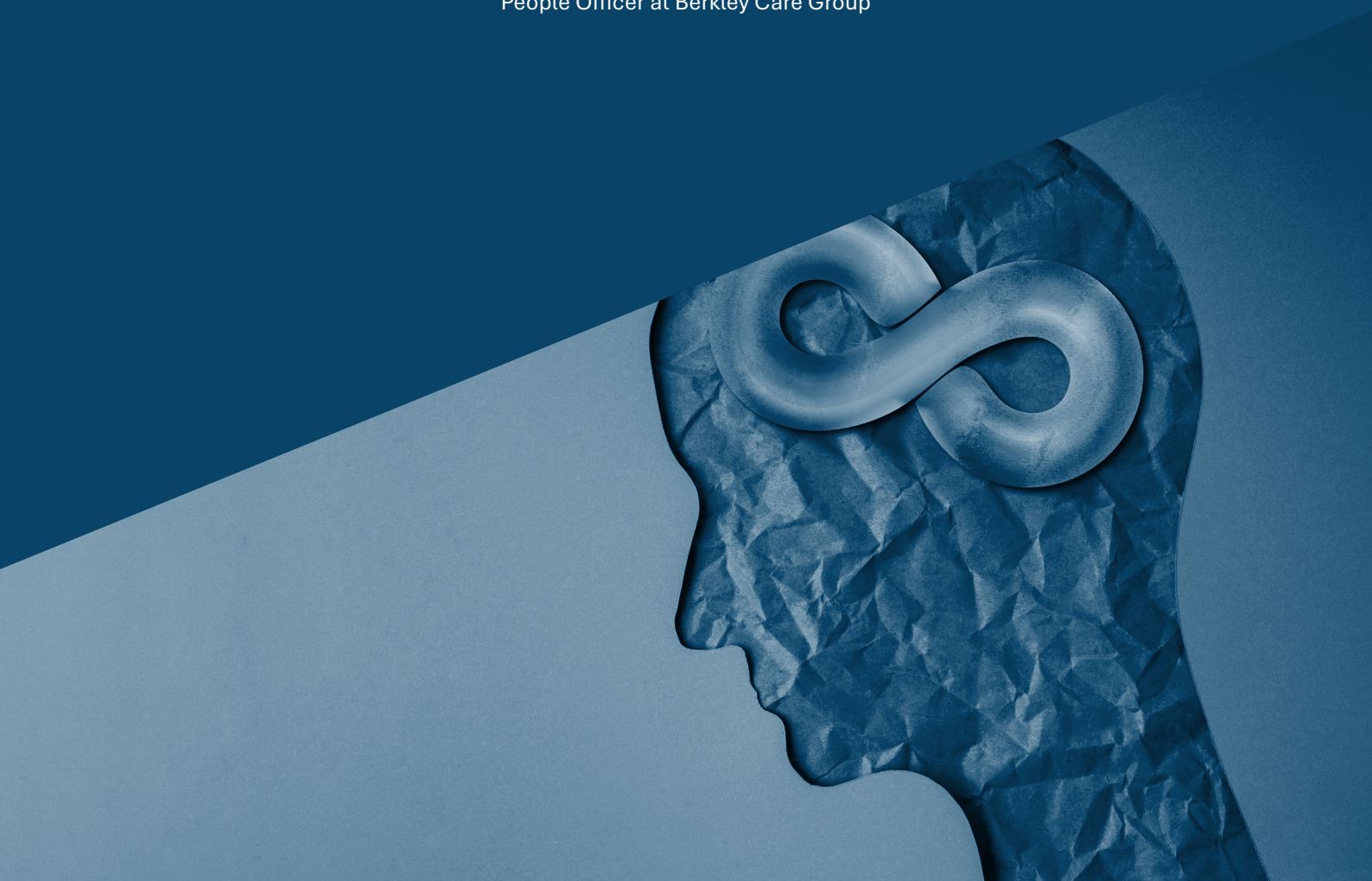
Care Reimagined

UNLOCKING UNTAPPED POTENTIAL:

How embracing neurodiversity can address the care staffing crisis

A Roundtable Discussion with Sojan Joseph MP, Chair of the Adult Social Care APPG, and Leah-Marie Smith, Co-Owner and Chief People Officer at Berkley Care Group



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Sojan Joseph MP, Chair, All-Party Parliamentary Group on Adult Social Care

Foreword

Our sector continues to face critical workforce challenges. There are currently 131,000 vacancies across social care, and carers remain among the most stressed employees in the UK. The question we now need to ask is not just how to attract more people into the care profession, but how to create workplaces where everyone has the opportunity to truly thrive.

For too long, neurodiverse individuals have been excluded from that conversation. Outdated recruitment practices, a lack of psychological safety, and a failure to recognise the value of different ways of thinking and working have all contributed to this gap. As a result, we've missed a vital opportunity to build more inclusive and effective teams.

At Berkley Care Group, we've seen first-hand the energy, creativity, and strong sense of commitment that neurodivergent colleagues bring to our teams. But we also recognise that more change is needed to make social care genuinely inclusive, at every level and in every part of the country.

That is why, in partnership with Sojan Joseph MP and the All-Party Parliamentary Group on Adult Social Care, we hosted a roundtable discussion. Our aim was to bring together sector leaders, neurodiversity advocates, and workforce experts to start a more open and honest conversation about what inclusive leadership in care really looks like.

The roundtable was a valuable opportunity to share perspectives and experiences in a constructive and thoughtful setting. Together, we explored what's working, what continues to create barriers, and where change is still needed, not just in policy, but in leadership practice and workplace culture.

This report brings together the insights and actions that emerged from that discussion. My hope is that it supports others across the sector to begin, or strengthen, their own journey toward neuro-inclusion. And that it reminds us all that the future of care isn't only about filling vacancies, but about valuing people for who they are, not just who we expect them to be.

Yours faithfully,

Leah-Marie Smith
Co-Owner and Chief People Officer,
Berkley Care Group

Acknowledgements

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About Berkley Care Group

Berkley Care Group is the UK's leading provider of luxury, all-inclusive care homes, with twelve homes across the Midlands, South, and South West of England. With over 1,100 employees, Berkley delivers high-quality residential, nursing, dementia, respite, and palliative care, grounded in compassion, dignity, and individualised support.

Founded in 2010, Berkley has grown rapidly by combining outstanding care with exceptional environments. All homes are designed to promote wellbeing and independence, offering premium facilities and a unique all-inclusive pricing model that provides transparency and peace of mind for families.

In 2023, Berkley launched its pioneering group-wide neurodiversity strategy, led by Co-Owner and Chief People Officer Leah-Marie Smith. The initiative includes:

- Neurodiversity awareness training delivered to over 95 per cent of staff
- Adapted, inclusive recruitment practices to reduce barriers for neurodivergent applicants
- Inclusive leadership training for managers and senior teams
- Designated neurodiversity leads

The strategy is already delivering impact: staff satisfaction has improved, turnover has fallen, and the organisation has seen greater engagement from neurodivergent applicants. By recognising neurodiversity as a strength, Berkley is building a workforce that reflects the complexity and humanity of the people it supports.

Berkley's mission is simple:

To help people live well, in every sense, creating vibrant, inclusive communities where care is not just provided, but deeply felt.

Key Themes

Removing barriers in recruitment

During the roundtable discussion, barriers within traditional recruitment processes emerged as a key theme affecting neurodivergent inclusion across the adult social care sector. Attendees agreed that while demand for care workers remains high, existing recruitment methods continue to exclude many candidates who could thrive in care roles with simple, reasonable adjustments.

Several participants pointed to application processes and interview formats as particular points of difficulty. Rigid online forms, inaccessible job descriptions, and conventional panel interviews were all highlighted as examples of practices that discourage neurodivergent applicants from progressing.

Leah-Marie Smith, explained how Berkley Care Group had begun revisiting each stage of its recruitment process with neurodiversity in mind. “We’ve changed the way we do interviews,” she shared, noting that questions are now shared in advance, and walking interviews are offered as an alternative for those who feel uncomfortable in formal settings. These adjustments, she said, aim to help candidates feel more at ease and demonstrate their suitability more naturally.

“[Sector-led initiatives] are imperative in terms of recruitment,” Smith reflected, “but are also the right thing to do.”

Others echoed similar sentiments. Sadie Pilgrim of Care UK explained that the organisation now has “buy-in [from the leadership team] to do more around supporting our current colleagues.”

With an initial strategy in development, Care UK is preparing to launch a dedicated workshop in July, bringing together key internal stakeholders alongside an external neurodiversity specialist.

“[Sector-led initiatives] are imperative in terms of recruitment but are also the right thing to do.”

- Leah-Marie Smith

Kirstie Jones, Chief People Officer at Salutem Care and Education, suggested a more personalised approach to supporting applicants and staff alike. Drawing on existing practice with residents, she asked, “Everybody we support has a care plan in place... why can't we do that for every [employee]?”

By applying tools like AI, she explained, providers could create tailored support frameworks from the outset. This kind of individualised approach, she proposed, could complement inclusive recruitment reforms by ensuring people are not only hired, but supported to thrive once in role.

Despite positive examples, challenges remain. Several attendees acknowledged that legacy HR systems and standardised corporate policies make recruitment reform difficult at scale. Others described a lack of confidence among hiring managers who feared saying the wrong thing or lacked training on neuroinclusive practices.

Leah-Marie Smith addressed the need to look within the existing workforce, not just at external candidates. “For us, when we started our journey, 30 per cent was the number,” she explained, referring to the proportion of Berkley staff who had disclosed a neurodivergent identity.

“That 30 per cent is really important. But interestingly, 40 per cent then have [a] neurodiverse family member. So, when you actually strip everything back, neurodiversity touches pretty much everybody.”

Sojan Joseph MP linked these conversations to upcoming national priorities. “The Department of Health and Social Care is looking to develop a workforce strategy,” he said. “They're hoping to publish in the summer, so I think this is the right time and the sort of thing that needs to be at the heart of those discussions.”

Concerns were also raised about low disclosure rates among neurodivergent applicants. Attendees suggested that unless recruitment processes feel safe and supportive from the outset, candidates will not feel comfortable sharing information about their needs.

Several agreed that without disclosure, opportunities to offer tailored support, or even make minor adjustments, are missed entirely.

Berkley case study

Inclusive hiring in practice

Location: Cedar Mews Care Home, Birstall, Leicestershire

Cedar Mews, through collaboration with Leicester City Council, launched a targeted initiative to help neurodivergent individuals access meaningful roles in care, removing barriers that often stand in their way.

The team took a flexible and thoughtful approach to the process, from recruitment to onboarding. In one recent example, they adapted their training for a new team member who found online modules difficult due to their condition. Instead, the trainers worked with them face to face, ensuring they could learn at their own pace in a way that felt supportive and empowering.

This way of working has helped build a more diverse and confident team. People who may have struggled to access employment in the past are now making a real difference to daily life at the home, bringing new skills, perspectives and energy to their roles.

Impact Highlights

- Flexible onboarding that meets individual needs
- Meaningful job opportunities in a supportive setting
- New team members making valuable contributions to care

This approach was recently shared by General Manager Joanne Hughes at an employer event hosted by the DWP and Leicester City Council, encouraging others in the sector to take similar steps.

Key Takeaways

- A personalised recruitment process can unlock potential
- Working with local authorities strengthens impact
- Creating an inclusive workplace benefits everyone
- Leadership in this space sets a positive example for others

We're proud of what we've achieved so far and excited to continue building a workplace where everyone is given the chance to thrive.

- Joanne Hughes, General Manager at Cedar Mews

Valuing neurodivergent strengths

Participants agreed that neurodivergent individuals already working in the care sector bring essential strengths to their roles but that these contributions are often undervalued or unsupported. As the discussion progressed, the focus shifted from barriers to potential, with attendees calling for a more strengths-based understanding of neurodivergence.

Karolina Gerlich of The Care Workers' Charity emphasised that support must begin by recognising the individual. "We understand that as a person, you have your needs, you have your human rights, and we need to meet them," she said. This, she argued, is a prerequisite to expecting care professionals to meet the needs of others. Flexibility, she added, is critical: "Sometimes it can all become so rigid. 'You [have to] do 14 hours for four days' and it doesn't work."

Leah-Marie Smith echoed this view, highlighting how inclusive practices are not just about fairness but about improving the system as a whole. "The conversation for me that's sometimes missing is around the strengths that neurodiverse individuals bring are exactly the strengths that we want and need in the social care sector." She called for a shift in narrative, moving from a deficit lens to a strengths-based approach that sees value in difference.

This reframing, several participants suggested, also opens the door to wider reform. Smith described how her organisation's work on neuroinclusion had tangible impacts, including a reported eight per cent reduction in staff turnover. "All of the indicators are that this is having a real benefit," she noted, "but it's wider than that... what we're actually saying to all of our teams is: bring your best self to work, whoever that is."

Theo Smith added that recognising individual strengths also means understanding and addressing wider structural barriers. He cited the example of job advertisements that are often overly complex or too vague, a deterrent for neurodivergent candidates. "We still have adverts that are either far too long or complex... people just won't apply," he said, arguing that adjustments to language and format are not expensive but can make a big difference in who feels able to apply.

> "We understand that as a person, you have your needs, you have your human rights, and we need to meet them."
>
> **- Karolina Gerlich, The Care Workers' Charity**

Sojan Joseph MP drew attention to the policy implications. He described the increasing number of people "economically inactive due to mental health or neurodiversity" and called for better awareness among employers. "We are writing off too many people who are able to do a very good job if [we] make reasonable adjustments in the workplace," he said.

A shared message emerged: inclusion is not just about doing the right thing; it's about enabling people to thrive in roles where their unique perspectives and capabilities can truly shine. As one contributor put it, "We need diverse mindsets to meet diverse needs."

Supporting managers to support people

The roundtable turned to the critical role of leadership in enabling neuroinclusion, not only through policy, but in practice. While many care leaders are passionate about inclusion, participants acknowledged that managers across the sector often lack the confidence or support to lead neurodivergent teams effectively.

Sojan Joseph MP, drawing on his experience in healthcare and as Chair of the APPGs on Mental Health and Adult Social Care, underlined the need for cultural change. “People can do [the work] even if they have neurodiversity… it’s about educating employers,” he said. “They all want the best people to work for them, but they don’t realise that.”

For Richard Preston of Hamberley Care Homes, the challenge lies in bridging that awareness gap at senior and middle management levels whilst also emphasising the power of visibility and peer examples to shift mindsets.

“One of the things I’m trying to do now is put some case studies together where people have embedded into the care home really well… it does bring the rest of the team up.”

Training alone wasn’t seen as sufficient. Participants called for frameworks that go beyond awareness, enabling managers to apply inclusive practice day-to-day. Karolina Gerlich highlighted the stakes: “Neurodiversity has come up sometimes [as an issue for prospective care workers]. We need to understand it and support it.”

Ultimately, there was wide agreement that without meaningful investment in leadership, and a shift from compliance to culture, progress would stall.

As one attendee put it during the discussion, “It’s about psychological safety… you need to build trust over time so people feel able to come forward.”

Several participants spoke candidly about the consequences of not investing in leadership development. One employer acknowledged that in the past, “managers avoided talking about neurodiversity because they were scared to get it wrong”, which had inadvertently created a culture of silence. Another added that without clear messaging from senior leadership, well-intentioned adjustments “ended up being inconsistently applied”, leaving neurodivergent staff feeling unsupported or singled out.

There was broad agreement that inclusive leadership isn’t a soft skill or a ‘nice to have’. In a workforce as people focused as social care, it is essential. As one participant noted: “Our managers shape the experience of work for every single employee. If we don’t invest in them, everything else is just window dressing.”

> “People can do [the work] even if they have neurodiversity… it’s about educating employers.”
>
> **- Sojan Joseph MP, Chair of the APPG on Adult Social Care**

Berkley case study

Opening doors to neurodivergent talent

Location: Burcot Grange & Lodge Care Home, Bromsgrove, Worcestershire

Burcot Grange & Lodge has recently been honoured with the Inclusive Employer Award by Heart of Worcestershire College, celebrating its commitment to creating inclusive routes into care sector employment for young people with additional needs and neurodivergent conditions.

Through a long-standing collaboration with the College's Supported Internship Programme, the home offers students real-life work placements within a warm and welcoming team. These experiences often lead to ongoing roles, giving interns the opportunity to grow in confidence and develop lasting careers in care.

One story that stands out is that of a neurodiverse applicant who reached out for help during the recruitment process.

Recognising that standard application steps could pose a barrier, the team offered one-to-one support with the form, prepared him for the interview questions in advance, and even chose to hold the interview outdoors in a calming garden space.

This thoughtful approach created the right conditions for success and ultimately led to a job offer.

These kinds of adjustments are not seen as exceptions at Burcot Grange & Lodge, but as everyday practices that reflect the culture of the home. The award acknowledges the team's ability to meet people where they are and support them to succeed.

What We've Achieved

- Strong links with local education providers
- Internships that lead to long-term employment
- A team approach shaped by empathy and flexibility

This recognition speaks not only to the leadership at Burcot Grange & Lodge but also to the wider values of Berkley Care Group. We are proud to demonstrate what inclusive employment can look like when people are given the right support, at the right time.

- Vicky Osborne, General Manager at Burcot Grange & Lodge

Embedding inclusion into regulation

The discussion concluded with a shared recognition that sector-wide progress on neuroinclusion depends on alignment between policy, regulation and practice. While many providers have already implemented inclusive initiatives, participants agreed that these efforts often remain isolated or difficult to sustain without stronger signals from national regulators, commissioners and policymakers.

Leah-Marie Smith made the case for stronger, coordinated sector-wide action. “We are probably all doing small things in isolation,” she said. She went on to emphasise that neurodiversity should be fully embedded within the forthcoming adult social care workforce strategy. This, she argued, means not only supporting inclusive recruitment, but also making neurodiversity awareness training a formal expectation for all providers.

“There is something around developing a specific neurodiversity-focused workforce strategy or embedding a neurodiverse pillar,” she explained. “Almost making it a requirement… particularly given how prevalent neurodiversity is within the sector.”

Several participants echoed this call, warning that in the absence of clear regulatory or commissioning guidance, inclusive efforts risk remaining piecemeal or under-resourced.

Attendees highlighted that providers who implement adjustments, such as adapted interview formats or personalised support plans, currently receive no formal recognition or incentive from inspection frameworks like those used by the CQC.

Richard Preston noted that while inclusive practices were often welcomed in principle, many middle managers and directors still failed to take consistent action without stronger regulatory encouragement. “When you put cases forward, everybody nods… but in reality, they don’t really do it.”

> “It’s about widening the conversation… and meeting the very goals we’ve talked about.”
> **- Leah-Marie Smith, Berkley Care Group**

Others spoke to the pressure placed on services to prioritise financial and clinical outcomes over culture or staff wellbeing. “You want good occupancy, the right staffing levels… and ultimately to be profitable,” Preston said. “And they can see people who maybe have a condition almost as a negative because they’ve got to support them.”

The group agreed that if regulators, commissioners and central government expect providers to invest in inclusive practices, then outcomes like staff retention, satisfaction, and psychological safety must be reflected in national frameworks and funding mechanisms.

Finally, the conversation turned to commissioning and funding. Some attendees noted that outcomes such as psychological safety, retention, or inclusive culture are rarely included in the key performance indicators used by commissioners. This focus on cost-efficiency over workforce sustainability, they argued, undermines long-term investment in inclusive practice. Aligning funding mechanisms with wellbeing and equity outcomes was viewed as essential if neuroinclusive strategies are to flourish at scale.

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