



the
care
workers'
charity

THE BEATING HEART OF CARE:

SUPPORTING CARE WORKERS BETTER



RESEARCH REPORT 2019

HELPING TO CREATE A FAIRER AND MORE COMPASSIONATE WORLD

It is our mission and ethos, striving for a more equitable society is at the heart of everything we do. Care workers are some of the most important members of our society, but their contributions and challenges too often go unrecognized.

Quality Compliance Systems (QCS) is proud to be supporting the 'Beating Heart of Care' report and the wider work of The Care Worker's Charity, which provides support to the UK's almost 2 million care workers.

We know that the Charity's Crisis Grants change lives. In an industry that struggles to retain workers, grants keep carers in the sector. But they cannot solve every problem. To this end, we're delighted to support this important study from The Care Workers' Charity - a report that identifies the types of interventions that will empower care workers to overcome the complex challenges they face each day.

Not only does this important work chime with our values, but we see it as a vital step in the Charity's wider ambition to embed a programme of support across the UK. This, we believe, will enable carers - and those they care for - to face the future with confidence.

Mat Whittingham
Chief Executive Officer, QCS



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Report was designed, pro bono, by Arrive - the healthcare marketing agency*

FOREWORD

There are almost 2 million care workers in the UK, many of whom are battling a complex array of challenges. Whilst The Care Workers' Charity is able to support those in greatest need with crisis grants, we simply cannot provide grants to all of them, and it became apparent that there was a clear need for the charity to develop other, more preventative services. At the beginning of 2019, The Care Workers' Charity embarked on an extensive piece of research to identify the types of interventions that the sector needs in order to empower care workers, so they can overcome challenges they face.

Our research highlighted that mental wellbeing, financial wellbeing, outside-of-work caring responsibilities and not being effectively supported by managers were the main concerns of care workers. It is impossible to separate these issues from what is happening within the sector at the policy level right now: government funding for local authorities has halved since 2010, leading to cuts in care budgets; social care commissioners have identified low pay as the biggest barrier to recruitment and retention in the sector; the uncertainty of Brexit threatens to reduce the number of EU nationals working as frontline care workers; and there have been significant cuts to social security payments whilst the eligibility thresholds for statutory services and welfare benefits have been raised, meaning increasing numbers of care workers are finding themselves in in-work poverty.

With the sector being pummelled by such damaging ill-winds, it's easy to despair about what we can do to drive improvements on the ground. However, we at The Care Workers' Charity believe that finding practical ways of supporting frontline care staff is more essential now than ever.

Whilst it's important that the sector lobbies the government for increased funding, the result of lobbying is always uncertain. Given the political and economic uncertainty surrounding the UK right now, we need to focus on the areas where we can effect change and make tangible improvements to people's lives. That means focusing our efforts at an operational level and a cultural level, as well as at a policy level. Strengthening the sector helps make a better case for investment. If we can improve retention rates, reduce sickness absence levels and raise the standard of care, we'll be building a sector that is more likely to attract government investment.

What's more – it's not all about investment. More money would undoubtedly help with the recruitment, retention and low pay issues that are endemic across the sector. But they are not the only issues that exist for care workers, meaning investment is never going to be a silver bullet.

There is much we can do locally and within organisations to build cultures of wellbeing, supportive and appreciative workplaces, and working environments where care workers can thrive. We hope the recommendations in this report offer solutions to some of the most challenging issues and encourage you to consider how you can best support your care workers. They are undoubtedly our most valuable assets.

Richard Muncaster, CEO of The Care Workers' Charity



EXECUTIVE SUMMARY

WHAT THIS REPORT AIMS TO DO

This report summarises the research conducted by The Care Workers' Charity into the most pressing issues affecting care workers today. It concludes with recommendations based on existing successful interventions and suggested solutions to the key issues. Four key issues affecting care workers were identified: mental wellbeing; personal finances; caring responsibilities at home; and management and supervisor support.

STRUCTURE OF THE REPORT

The report begins with the context in which the care sector is currently operating. Following a brief explanation of the methodology, each of the four key issues is looked at in detail. The report concludes with suggested recommendations and the 'golden rules' for future service development.

KEY FINDINGS

The top two things that care workers liked most about their jobs were both **people-orientated**, namely helping others and seeing those cared for happy. The positive elements of being a care worker are not to be underestimated.

Of the four key issues, **mental wellbeing** was identified as the most prominent; it was a significant concern for the greatest number of care workers. Poor mental health amongst care workers is a cause of increased sickness absences and presenteeism, both of which are damaging to service quality and those being cared for.

Personal finances are a challenge for many care workers, particularly saving for the future. Whilst there are numerous free and reputable sources of financial support available, a high proportion of care workers do not know about them or how to access those services.

Caring responsibilities – such as being a parent or caring for a relative – affect care teams and

those being cared for, not just the individual carer. The care sector faces strong competition from other sectors and professions that can offer more family-friendly hours and benefits. Greater flexibility is needed in the workplace so that care work remains a realistic profession for those who are also voluntary carers.

Support from managers and supervisors is extremely important for care workers. 41% of care workers surveyed have considered leaving their role because of their manager. 59% said it would make a positive difference to them in their role if one-to-one support with their manager was improved.

Managers also need support, including training in how and where to signpost care workers to, supporting care workers' mental wellbeing plus coaching techniques for supervisions. Managers' mental health is just as important as care workers and should not be neglected.

Resources and information to support care workers on these issues is available, but they need to be more engaging and relevant for care workers if take up is to increase. Creating a culture where asking for support is normal will not happen overnight.

A key aim of our research was to gain an understanding of the types of support that already exist and the things people are doing to help alleviate some of the pressures. We learnt a huge amount that will prove invaluable to us when designing our own support services. In the meantime though, we'd like to share what we've learned. Therefore, alongside this report, we have also produced a suite of resources designed to be used by frontline staff and managers to help tackle some of the issues raised. It includes signposting to the many support services we encountered, along with some practical things that people can do to support their own wellbeing. To find out more, please visit www.thecareworkerscharity.org.uk/wellbeing-resources

INTRODUCTION TO THE CARE WORKERS' CHARITY

WHO ARE WE?

The Care Workers' Charity was first set up to help the UK's almost 2 million care workers to get through financial crises. We provide crisis grants to care workers, signpost them to support services and work to raise the profile of their vital work.

Our vision is **that care workers thrive**. In 2018 we gave out over £150,000 in crisis grants to almost 400 care workers – more than double what we distributed the year before. We also signposted over 500 care workers to relevant support services.



WHY WE'VE DECIDED TO DO THIS

It has become clear to us that providing crisis grants to care workers will never be enough. In order to have a more profound impact on the UK's care workers, we need to start addressing the causes of crisis, in addition to providing grants to support people after crisis has struck.

We've learnt a lot from the care workers who apply for our grants about the challenges they face. We'd now like to work with care workers, registered and service managers and care providers to support social care employees better, before they reach crisis point.

WHAT WE DID

To begin, we wanted to take a systematic look at the key issues facing care workers today, as well as the provisions that already exist to support them and how well they are working. We undertook an extensive piece of desk research into the existing services, followed by primary research with care workers and senior managers through an online questionnaire, telephone interviews and focus groups.

This report shares the results of this research. It doesn't solve all the challenges in the care sector, but we hope it can help shape and develop services for care workers that have a real impact: for the workers themselves, for the managers who support them, and for the people they look after.

BACKGROUND: THE 'BIG PICTURE' ISSUES

There are huge challenges facing our sector today, some of which - namely structural, financial and political - can only be resolved at a senior policy level.

The focus of this report is on the practical things that we can do as a sector without government intervention or significantly bigger budgets, but it is important to acknowledge the difficult context we're all working in. Here are the critical 'big picture' issues as we see them:

UNDER-INVESTMENT IN SOCIAL CARE

Around 55% of residential care and 85% of homecare in the UK are funded by local authorities¹. Local authority budgets have been cut by half since 2010, leading to massive cuts in care budgets². At the same time, demand is rising.



FUNDED BY LOCAL AUTHORITIES

39,000
DIFFERENT ESTABLISHMENTS
PROVIDING CARE



A SCATTERED WORKFORCE

39,000 different establishments provide care in England alone; the vast majority of these are small and medium-sized businesses³. Unlike in the NHS, low levels of trade union membership leave the social care workforce with limited independent support and little collective bargaining power to agree pay and conditions⁴.

"The challenge is making sure support for staff is universal, so it's engrained in the system rather than ad hoc across the sector. The sector deserves more than pockets of excellence in a sea of poor quality."

Professor Martin Green, Care England

SALARIES, RECRUITMENT AND RETENTION

43% of all jobs in social care are paid less than the Real Living Wage (RLW), as set by the Living Wage Foundation⁶. It has been suggested that paying all social care workers the RLW in England would require an additional £445 million⁷. Many senior leaders in adult social care services see low pay as the biggest barrier to recruitment and retention in the sector⁸.



VACANCIES AND THE BREXIT EFFECT

EU nationals make up 8% of frontline care workers in the UK⁹. With a 12% vacancy rate in the sector already, the uncertainty of Brexit for EU workers threatens to further increase vacancies in social care¹⁰.

LESS STATUTORY SUPPORT FOR CARE WORKERS

The thresholds for working families to access statutory support have been raised, and waiting times for Universal Credit are leaving gaps in household budgets¹¹. Charities, including The Care Workers' Charity, attempt to help in these cases, but whilst one-off grants can make a significant difference at an individual level, they are not effective at a population level.

STATUTORY SUPPORT
THRESHOLDS FOR
WORKING FAMILIES
HAVE BEEN
RAISED

These problems are significant, and many organisations are working on them at all levels around the UK. We will continue to add our voice to those calling for change. But we cannot wait until all this is fixed to act. While the big picture is unpredictable, there is a huge amount that we can do as a sector to recruit, support and develop care workers brilliantly.

METHODOLOGY

We set out to find out what services already exist, and what new services are needed, to empower and support care workers in their roles.

Our key questions were:

- What are the key issues facing frontline care workers?
- What is the impact of these issues on care workers and their employers?
- What are the existing services and interventions addressing these issues?
- What should new services look like?

Our research was designed to allow us to learn from existing work on these issues, and then to go further to address the unanswered questions ourselves. While our programme of primary research included consulting many care sector thought leaders, care providers and service managers, learning from care workers directly was our major focus.

WHO DO WE MEAN WHEN WE SAY 'CARE WORKERS'?

We mean people who have worked in a paid role in the UK social care sector and are involved in or support the provision of care. This includes people who have been employed in residential social care, domiciliary/home care, supported living or day care services.

PART 1: DESK RESEARCH TO UNDERSTAND EXISTING DATA

We reviewed over 50 of the outstanding research reports, surveys, books and project evaluations already available in the sector. We also analysed data from our crisis grant applicants across 2018, focusing in on their experiences of crisis, including their mental wellbeing, financial position and household makeup.

PART 2: SURVEY OF CARE WORKERS

Working with independent research company Pickersgill Consultancy & Planning Ltd (PCP), we conducted telephone (38%) and written (62%) interviews with 200 care workers currently working in England.

The sample group included a representative range of people working in domiciliary services (56%) and residential care services (44%), covering a range of organisation sizes, funding models, age groups and lengths of service.

PART 3: FOCUS GROUPS

We held two focus groups with 12 care workers from two residential care providers. By using a smaller sample size, we were able to better understand what we were seeing in the wider survey in more depth. We worked with the groups to discuss and reflect on the themes that had emerged most strongly from the research so far.

PART 4: INTERVIEWS WITH SERVICE MANAGERS, DIRECTORS AND SECTOR LEADERS

We held semi-structured interviews of approximately 1 hour with 11 Registered Managers, 10 senior care provider leaders (HR Directors, Operations Directors or CEOs), and 7 wider sector influencers (leaders of care providers, sector bodies, commentators and innovators). This last group formed part of our Steering Group (see below). As with our survey of care workers, we reached out to people from a range of service types, organisation sizes and types and locations.

PART 5: CONSULTING OUR STEERING GROUP

A group of thought leaders from the care sector agreed to share their experience and expertise to help us develop this research and explore possible future services. Having interviewed many of the members of this group one-to-one, we gathered them together at the end of the project for a workshop. The session was used to share our findings so far, to critically analyse them and to help drive our next steps.

Steering Group members:

Angharad Burnham:	Editor, Care Management Matters
Camilla Trimble:	Founder, The Outstanding Society
Charles Armitage:	CEO and Co-Founder, Florence
Karolina Gerlich:	CEO, National Association of Care and Support Workers, NACAS
Professor Martin Green:	CEO, Care England; Vice President, The Care Workers' Charity
Navin Mayani:	CEO, Care Innovation Hub
Neil Eastwood:	Adviser to national recruitment campaign at Department of Health & Social Care; Author of <i>Saving Social Care</i>
Peter Webb:	London Care and Support Forum; Consultant for care providers
Simon Parker:	Founder and CEO, SP&P
Tom Owen:	Director, My Home Life

KEY FINDINGS

Four issues emerged strongly from our research as significant for care workers:



1. MENTAL WELLBEING

"If you work in a retail you don't go to bed thinking about the wellbeing of the clothes."

Care worker, focus group participant

A key message from our research was that the rewarding aspects of care work can have a highly positive impact on care workers' mental health. Survey data showed that the two top factors care workers liked most about their role were helping others and seeing those cared for happy. Both factors reflect the person-centred nature of care work.

"The best part of a day is when you put a smile on someone's face. A thank you means the world to me."

Care worker, focus group participant



Figure 1: Word cloud generated from the answers of 200 care workers to the question, “What do you like most about your job?”. Source: The Care Workers’ Charity Survey, Question 1 (2019).

We also found that this mutual benefit for care workers and those being cared for is erased when teams feel they can't deliver a high standard of care, due to a decline in their own mental wellbeing.

Mental wellbeing refers to your “mental state – how you are feeling and how well you can cope with day-to-day life”¹². Mental health problems can occur when people experience low mental wellbeing for an extended period of time¹³.

Mental wellbeing was highlighted as the core issue for care workers in our survey, with almost half saying that they experienced stress on a regular basis as a result of their work. It is clearly a prominent issue; the mental wellbeing of care staff was the top staffing concern among the Registered Managers and senior leaders we interviewed.

What are your three main staffing concerns?



Figure 2: The main staffing concerns highlighted by Registered Managers and senior leaders interviewed. Mental wellbeing was the top concern. Very few interviewees were concerned about the quality of care staff are providing and none were concerned about their skills or their knowledge. Source: The Care Workers' Charity interviews. N=21. (2019).

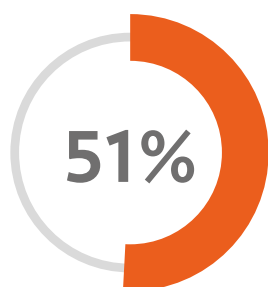
There has been increasing interest in emotional burnout and distress among healthcare professionals¹⁴. It's been suggested that social care workers may be at a higher risk because of the demands of their roles and increased tendency for empathy^{15,16}. Despite this, we found little existing research into the impact of working in care on mental health.

The main findings emerging in our research around mental health were:

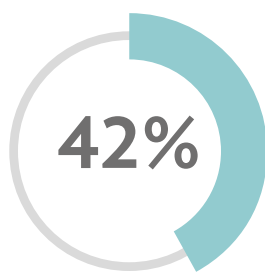
- A.** Despite the joyful aspects of the job, many care workers feel the role has a negative impact on their mental health
- B.** Not having time to do the job well is a major cause of stress
- C.** Poor staff mental health causes sickness absence and presenteeism
- D.** Poor mental health, sickness absences and stress can damage the service quality for those being cared for
- E.** Some employers offer mental health support, but much more is needed
- F.** Registered Managers need greater resources to support their own and their staff's mental health

A. DESPITE THE JOYFUL ASPECTS OF THE JOB, MANY CARE WORKERS FEEL THE ROLE HAS A NEGATIVE IMPACT ON THEIR MENTAL HEALTH

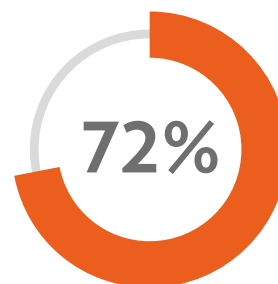
- Many of the care workers we interviewed said they experienced stress (42%) and anxiety (27%) "often" or "most of the time" as a result of their work¹⁷. According to the Health and Safety Executive Labour Force Survey, the health and social care sectors have the second highest rates of stress, depression and anxiety amongst the workforce after the Education sector¹⁸.
- 51% of care workers have considered leaving their role in the past three years because of the effect of the job on their mental health¹⁹.
- Bereavement can have a major impact on care workers' mental wellbeing. Around 100,000 people die in care homes each year in England and Wales²⁰. 72% of the care workers we spoke to said they had experienced bereavement directly as a result of their work²¹. Participants in one focus group said that the winter months are particularly hard, with around two deaths per month in their service.



51% have considered leaving their role because of the effect of the job on their mental health



42% care workers said they experienced stress "often" or "most of the time"



72% care workers said they had experienced bereavement directly as a result of their work

"Some residents you get really attached to – sometimes you can't get cover to go to the funeral and you can't have your last goodbyes. We mourn for them."

Care worker, focus group participant

"You can receive all the skills training for end of life care but not a lot for how to cope yourself afterwards."

Care worker, focus group participant

B. NOT HAVING TIME TO DO THE JOB WELL IS A MAJOR CAUSE OF STRESS

- Research has consistently found that relationships with clients are a core reason that people remain in the care profession²². The quality of relationships between care workers and clients is often seen (by clients and their families) as indicative of the quality of care²³, but UNISON recently reported that 53% of care workers are thinking of leaving their job because they don't have enough time to deliver care to what they see as an acceptable standard²⁴.

"I get frustrated in front of my own colleagues because I don't have time to do the job."

Care worker, focus group participant

"If you place value on the relationships forged between the care worker and client, you get the best care"

Karolina Gerlich, Director of NACAS

- When time is stretched, care workers are sometimes forced to do things for clients instead of with them²⁵. This can reduce clients' independence unnecessarily.
- Limited time also causes errors. While clearly detrimental for the people being cared for, care workers also told us that making mistakes and seeing them happen is a key cause of stress in their job.

"70% of my shift has become about filling in paperwork. I went into work on my day off just to finish it off."

Care worker, focus group participant

"There is far too much bureaucracy and paperwork. There's a push on tick-boxing and paper rather than people. If we did everything that we were supposed to, updating tick boxes, we would have no time to actually deliver the care our clients require."

Registered Manager, residential care service, major UK provider

C. POOR STAFF MENTAL HEALTH CAUSES SICKNESS ABSENCE AND ISSUES OF PRESENTEEISM

- 37% of our survey participants said they had taken time off for stress or poor mental health caused by their work.
- The average number of sick days per person working in social care in 2017 was 25% above the UK average, at 5.1 days²⁶. With an estimated 40% of sick days being taken due to mental health issues²⁷, that's around 2.6 million days of care work lost over a year due to people struggling with poor mental health – out of a total of 15.4 million days lost across Great Britain²⁸.
- Our grant application data shows how quickly people can fall into crisis when their income is limited to statutory sick pay. People often struggle to pay their rent and are rapidly at risk of eviction. In 2018, 62% of our crisis grants were awarded to people experiencing a sudden or unexpected illness or injury²⁹.
- This financial risk may be part of the reason that 76% of care workers went to work despite feeling unwell in the past year, saying they felt pressure from their manager, colleagues, themselves or the people they cared for³⁰. 19% said they went to work despite feeling unwell more than one day a week³¹. Presenteeism, or people going to work when they are ill, can mean less efficient work, mistakes, low morale and longer recovery times. The cost of presenteeism is well recognised³²; it can be more expensive to employers than absence³³.



Reasons for going to work despite feeling unwell

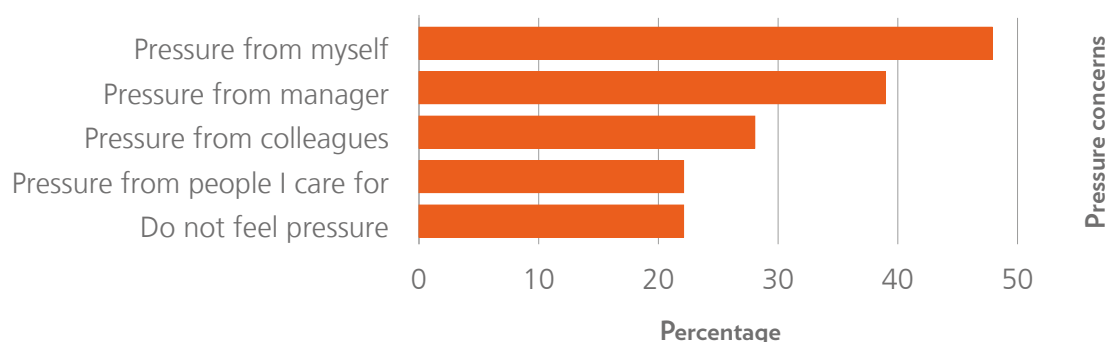


Figure 3: Responses to a survey question "Have you attended work despite feeling unwell in the past year, because you felt pressure from your manager, colleagues, from yourself or from the people you care for to go in?" Source: The Care Workers' Charity Survey (supported by PCP Market Research company). (2019). Question 21.

- Presenteeism appears to be more prevalent with mental health problems than with physical health problems, partly due to fear of pressure or discrimination from employers and management³⁴. Although public awareness of the importance of good mental health is increasing, research shows that stigma in work environments still prevents people from asking for help when they need it³⁵. The Centre for Mental Health stated that presenteeism from mental ill health costs the UK economy an estimated £21.2 billion per annum³⁶.

“It’s important that staff are aware that their mood is reflected on their clients and on the quality of care.”

Registered Manager, residential care service, medium-sized UK provider

AS WELL AS AFFECTING STAFF, THESE ISSUES ARE DAMAGING TO SERVICE AND QUALITY TO THE PEOPLE BEING CARED FOR

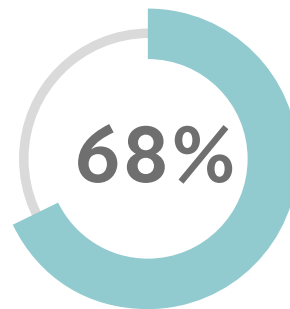
- 23% of survey participants said they experienced low mood “often” or “most of the time” as a result of their care work, which inadvertently impacts those being cared for³⁷. Feeling rushed by an over-stretched or unhappy care worker, feeling a lack of dignity, or care workers making errors due to fatigue have a big impact on those being cared for. In many cases, families also experience worry, stress and disruption as a result³⁸.
- Sickness absences increase the use of agency workers. This typically amplifies service costs and affects the quality and continuity of care that services can provide.
- There is also a direct link between sick days and staff turnover. *Skills for Care* has shown that turnover is higher for employees who have taken more sick days³⁹.
- Another option for stressed care workers is to become agency workers, bank staff or join self-employed ‘uber’ style platforms. *Skills for Care* only record 7% of the workforce as being bank or agency staff in a snapshot analysis, however the number of care staff leaving permanent roles to become agency staff is an increasing trend that the providers we interviewed are wary of, with some perceiving it as a threat to the fabric of care delivery⁴⁰.

D. SOME EMPLOYERS OFFER MENTAL HEALTH SUPPORT, BUT UPTAKE IS LOW

- Care staff told us about the coping strategies they adopted to “survive” and cope with the emotional pressures of the job. These self-taught techniques ranged from “shutting off” for five minutes during a shift, to falling asleep with the television on at the end of a 12 hour shift.
- Of the care workers we interviewed, 50% said their employer did not offer formal or informal support for their mental wellbeing. This contrasted to the 80% of senior staff and managers who told us they offered support. This may be reflective of the backgrounds of those we interviewed, many of whom came from high-end care providers with more money available to spend on staff support. Regardless, it highlights an issue of low awareness and take up of providers’ services.
- 80% of survey participants said their employer did not offer them formal training to help them manage their mental wellbeing at work, despite 68% being interested in this service.



80% care workers said their employer **did not offer** them formal training on managing mental wellbeing at work



68% care workers said they **were interested** in such service

“Where staff are supported to feel emotionally engaged in their work, this has the potential to have a positive effect on the quality of care provided.”

Tom Owen, Director, My Home Life

E. REGISTERED MANAGERS NEED GREATER RESOURCES TO SUPPORT THEIR OWN AND THEIR STAFF'S MENTAL HEALTH

- The many pressures on Registered Managers are widely acknowledged. They are legally accountable for service compliance, while also juggling daily operations, working with families and relatives, leadership, strategy and recruitment.

- We heard many reports of Registered Managers going beyond the expectations of their role by supporting staff with issues with their personal lives, relationships, finances and mental health. Care workers described the significant positive impact of managerial support.
- Registered Managers spoke of buckling under the pressure of their role and were unsure how to manage their own wellbeing as well as that of their team⁴¹.
- Turnover rates for Registered Managers are higher than other management roles in social care. *Skills for Care* found that 22% of Registered Managers left their role in the previous 12 months⁴². This, in turn, affects retention of care workers and quality of care provided.

“I have seen managers come into a role and just sink. This then pushes care staff to leave and places run on agency staff and then there are incidents.”

Registered Manager, residential care service, major UK provider

- Many of the managers we interviewed spoke about the challenge of finding the right services and support for their teams and not feeling trained, qualified or confident enough to help. Some resorted to quick Google searches to find information and resources but didn't feel confident working on resilience and mental health with their team members.
- 50% of managers said they were interested in being trained in how to offer good pastoral support to their team⁴³.
- There is little support available for Registered Managers' own mental health. While 60% of managers spoke of the value of peer support networks, many said face-to-face networking opportunities were rare because of the demands of the job.



2. PERSONAL FINANCES

While a sector-wide salary increase is not a silver bullet for these challenges, low pay is a huge issue affecting the quality of life of care workers, their ability to cover the basics and save for the future. It also has knock-on effects for providers and those being cared for, leading to increased staff turnover rates and a reduction in the quality of care. Many care workers successfully juggle competing financial pressures, yet there is a clear case for better access to relevant financial support and advice.

“[We] now have a situation where the NHS is desperate for staff and sees adult social care as a recruitment site. It’s quite common that trained employees are leaving social care to go to the NHS. Care workers may not want to leave smaller companies, or the service users they care for, but money talks and it talks very loudly at the lower end of the system. The NHS does not use Zero-Hours, and is able to offer better pensions, training and other peripheral benefits.”

Peter Webb, Consultant for care providers, London Care and Support Forum

The key findings from our research into personal finances were:

- A.** Low pay affects individuals and teams
- B.** Saving for the future is the most challenging aspect of financial management
- C.** Care workers are not accessing financial guidance and advice

A. LOW PAY AFFECTS INDIVIDUALS AND TEAMS

- Low pay is well known to be a major issue for care workers and those in the sector.
- 40% of the care workers we spoke to felt that financial concerns are a challenge in their personal life that directly affects their work⁴⁴. 30% told us low pay was the aspect they like least about their job⁴⁵. Many people are forced to work long hours or multiple jobs to make ends meet⁴⁶.
- According to government recommendations, care workers’ pay should include time spent caring for clients, travelling to appointments and waiting to start the appointment⁴⁷. In 2017, UNISON found that 63% of home care workers said they were only paid for contact time and not for travel between clients’ homes⁴⁸. With around 148 million miles being travelled by home care workers between 2017 - 2018, this is a big issue⁴⁹. We heard anecdotally about complicated repayment processes in some organisations, where mileage must be reclaimed partly through the employer and partly through an HMRC tax return.

- The introduction of the National Living Wage in 2016⁵⁰ (lower than the Real Living Wage) has increased salaries by 7% for the lowest paid 10% of care workers⁵¹. Though positive, this has increased care providers' wage bills and the cost of care for funders.
- It has also increased price-based competition between providers as some argue, has driven down employment standards, all without meeting the real cost of living according to the Living Wage Foundation⁵².
- An impact of the NLW changes is that the staffing structure in care is flatter than it was before, with fewer routes of progression and little difference in pay as people are promoted. For example, some of our focus group participants felt that the extra responsibilities of a senior care worker are not worth the additional £1 per hour in wage. The same challenge comes with promotion to management.
- Low pay increases turnover. The Association of Directors of Adult Social Services (ADASS) annual survey of councils in England ranked increasing salary as the most important factor in recruitment and retention¹³. UNISON found 73% of care workers who were thinking about leaving the profession were doing so because the pay was too low⁵³. 40% of senior staff said the biggest barrier to retaining frontline staff was competition from other care providers, as staff can be tempted to move jobs for minimal salary increments⁵⁴.
- Another effect of low pay for care workers is that many consider moving into agency work for higher rates of pay and reduced work-related stress⁵⁵.



40%
FELT THAT
FINANCIAL
CONCERNS
DIRECTLY **AFFECT**
THEIR WORK



63%
OF HOME
CARE WORKERS
NOT PAID
FOR TRAVEL
BETWEEN
CLIENTS' HOMES



ADASS SURVEY RANKED
INCREASING SALARY
AS THE MOST IMPORTANT
FACTOR IN **RECRUITMENT**
AND RETENTION

- The cost of high turnover is rarely measured accurately, however the outgoings for agency staff, advertising, recruitment and onboarding do not come cheap⁵⁶. Our interviews with managers produced figures that give some indication of the cost, including £2000 spent per month on advertising for jobs across 5 care homes, £1000 spent per care worker in onboarding costs within their first 6 months, and between £2000-3000 spent on new senior staff for training, equipment and travel.

“Sometimes people will leave if they know they get paid 10p more [per hour] down the road.”

Operations Manager, major UK provider of residential care

B. SAVING FOR THE FUTURE IS THE MOST CHALLENGING ASPECT OF FINANCIAL MANAGEMENT

- If it's a struggle to cover the essential costs of daily life, it is, of course, even harder to save money for future essentials or for unexpected events. This was the area of money management that care workers told us was the most challenging⁵⁷.
- The associated stress and instability of living without savings is clear from the individuals who contact our grant service for help in dealing with a sudden change in their financial circumstances.
- 74% of people awarded a crisis grant in 2018 were dealing with a sudden or unexpected loss of income within the last 6 months⁵⁸. Many of those that contact our grant service are in rent arrears and around 10% of our grant expenditure is spent on helping with rent arrears to prevent eviction.



Which area of money management is most challenging?

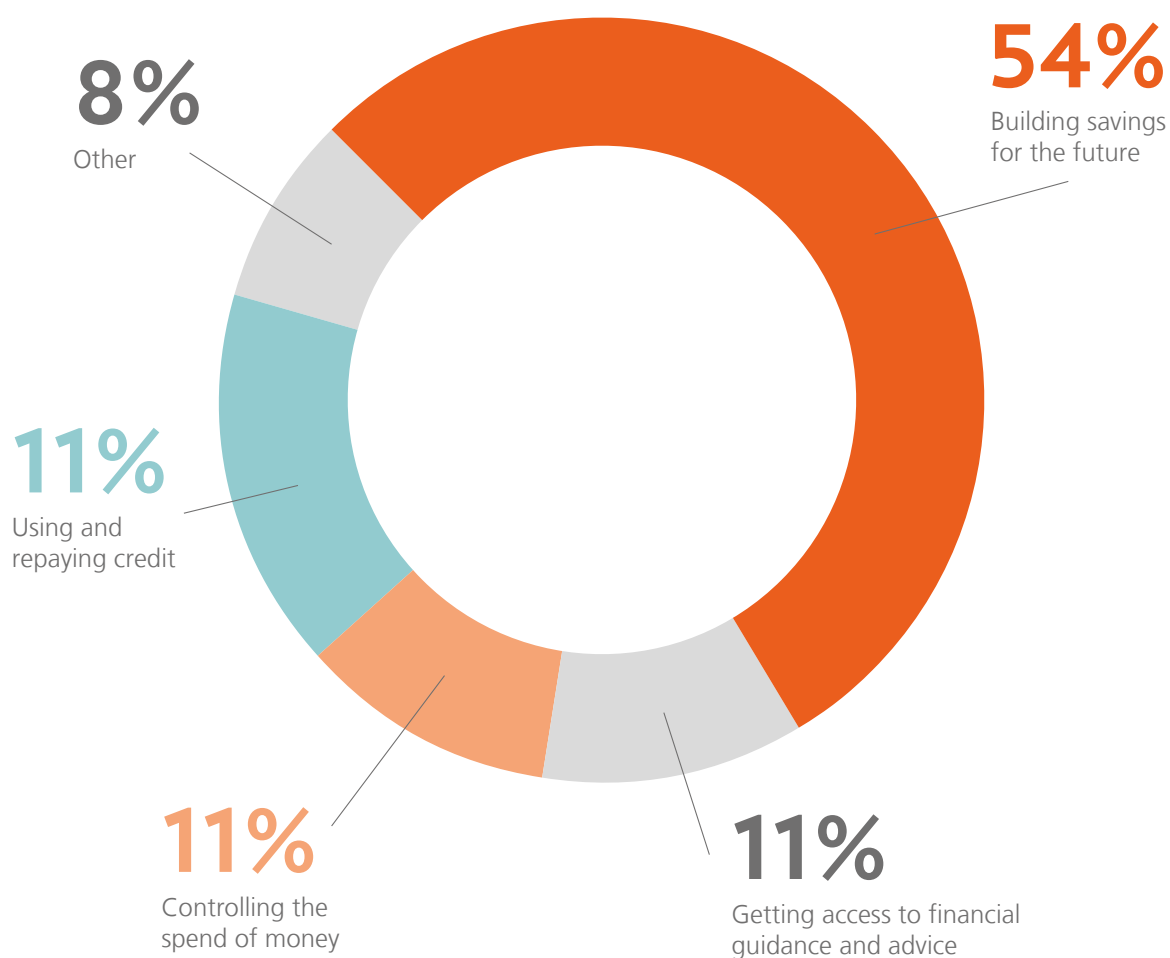


Figure 4: Saving for the future was the area of money management that care workers told us was the most challenging.
Source: The Care Workers' Charity Survey, Question 5. N=200. (2019).



C. CARE WORKERS ARE NOT ACCESSING FINANCIAL GUIDANCE AND ADVICE

- Though there is a lot of good financial support out there, our research showed it is often not reaching care workers. There's a clear opportunity here for the sector to link more effectively with relevant and engaging financial support services.
- People are experts in their own finances and the juggling act of living on a tight budget makes care workers more experienced in money management than most. That said, we found various areas where advice or guidance might be helpful.
- The Money Advice Service estimates that only half of all working-age people are aware that they can get free or low-cost financial support⁵⁹. Our own research indicated that in a job concentrated around caring for others, workers don't always take time to take care of themselves.
- The complexity of the UK's benefit system means that many people miss out on support they are entitled to. Many care workers we talked to were unaware of the means-tested statutory help with rent, council tax and childcare that they may be eligible for.
- 59% of care workers said their employer did not offer support around their finances (e.g. affordable loans, benefit and budgeting advice, debt advice and online budgeting tools)⁶⁰. Many Registered Managers told us they find themselves giving informal support, such as Googling debt support services and Citizens Advice resources, but they feel unconfident and unqualified to help properly.
- Stigma around money worries makes them worse, as people are unwilling to discuss them or seek help. Tackling this stigma and signposting people to free financial guidance services is something we do daily. Engaging with debt advice early can significantly reduce the harm debt can cause. StepChange, the UK's leading debt charity, estimates that a person's debt can increase by an average of £2,300 in just six months if charges and interest continue to be added⁶¹.

3. CARING RESPONSIBILITIES AT HOME

Many care workers have unpaid caring responsibilities outside of their jobs, meaning that they are taking part in the informal care system worth an estimated £132 billion in the UK each year⁶².

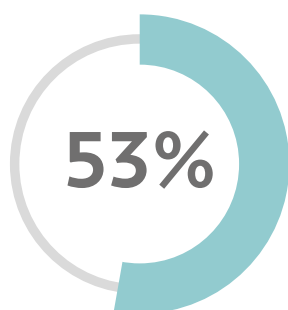
Most of the care workers we spoke to told us their employer did not provide support or flexible hours to help manage their caring responsibilities. It isn't an employer's responsibility to provide or pay for childcare, but there is an opportunity to make some small, positive changes. Better support for parents and carers would have a direct, positive impact for wider care teams and the people they care for.

The key findings we identified from our research into caring responsibilities at home were:

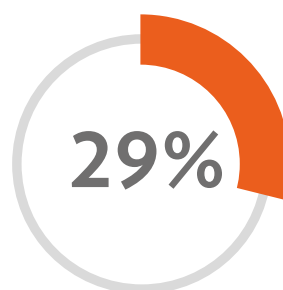
- A. Caring responsibilities impact care workers
- B. Caring responsibilities of care workers impacts care teams
- C. Greater support with childcare is needed

A. CARING RESPONSIBILITIES IMPACT CARE WORKERS

- Of the care workers we surveyed, 53% are mothers and 29% provide or arrange care for someone with a long-term illness or disability outside of their work⁶³. Of the care workers who applied to us for a crisis grant, 48% are single mothers⁶⁴.



53% of the care workers surveyed are mothers



29% of the care workers surveyed provide or arrange care for someone with a long-term illness or disability outside of their work

- 76% of parents we spoke to said the cost of childcare is their biggest problem⁶⁵.
- Cuts to statutory support and the freeze on most working-age benefits and tax credits has led to support falling further behind the rising cost of living for working parents. The rise of in-work poverty over the last five years has been driven almost entirely by the increase in the poverty rate of working parents. A working parent is over 1.5 times more likely to be in poverty than a working non-parent⁶⁶.
- 58% said that having to rely on family and friends for childcare was an issue for them⁶⁷. Interviewees explained that informal arrangements were more likely to involve unexpected obligations, family emergencies and short-term absences.
- Around 35% of care workers are now on zero-hours contracts⁶⁸. While this can provide flexibility for childcare, it brings other problems in its place – namely reduced and unreliable income. These contracts are seen by many as being in the interests of the employer rather than the worker⁶⁹.

What do you think are the main difficulties for working parents around arranging childcare

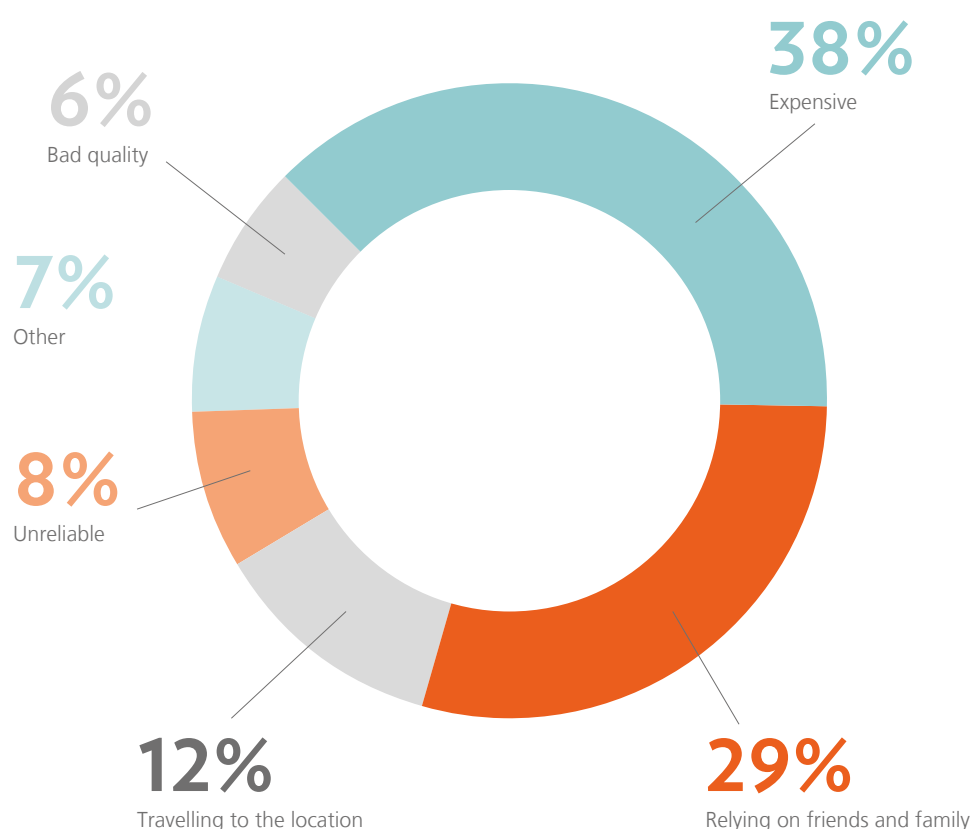


Figure 5: The cost of childcare was the number one challenge for working parents, closely following by the need to rely on friends and family. Source: The Care Workers' Charity Survey, Question 12. N=200. (2019).

B. CARING RESPONSIBILITIES OF CARE WORKERS IMPACTS CARE TEAMS

- Caring responsibilities and family emergencies were the top cause of short-term absence given by the senior staff and Registered Managers we interviewed.
- 72% of care workers who are parents confirmed they have taken time out of work to look after their children⁷⁰. Discussion in focus groups suggested that this can breed resentment among other staff members, who absorb the impact of staff shortages by taking on extra shifts and caring responsibilities.

“[We have] three people currently off work because of family responsibilities. We have to rely on each other, and we won’t use agency as we provide person-centred matches for our clients. I’m covering an additional 18 hours a week. I don’t want other people in the team burning out.”

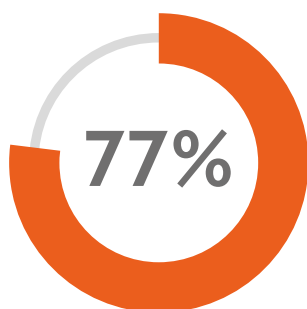
Registered Manager, home care service, major UK provider

“Workload must be picked up at short notice, so resentment and stress build quickly and morale drops, pushing more staff to quit.”

Neil Eastwood, Author of *Saving Social Care* and Steering Group member

C. GREATER SUPPORT WITH CHILDCARE IS NEEDED

- 68% of care workers told us their employer doesn’t offer any support with childcare (e.g. advice to manage parenting at work, subsidised childcare and a creche at work)⁷¹.
- 77% of care workers would be interested if their employer offered some support and advice on statutory entitlements for working parents (e.g. welfare benefit advice, information on tax credits, child maintenance services)⁷².



77% care workers would be **interested** if their employer offered some support and advice on statutory entitlements for working parents



68% care workers told us their employer **doesn’t offer** any support with childcare

- There's a business case for employers to offer employees support beyond what is legally mandated. It may help in filling existing vacancies and could save money on recruitment in a world of direct competition with employers who offer school-friendly hours and structured holidays.

"Without offending staff too much we are here for the people we support. As much as I want to give shifts which are flexible, our priority is clients."

Registered Manager, residential care service, medium-sized UK provider

"Care is a 24/7 business with 12 hour shifts. Inevitably you [the employer] impact significantly on the personal lives of staff, no matter how much you don't want to."

Camilla Trimble, The Outstanding Society

4. MANAGEMENT AND SUPERVISOR SUPPORT

While management structures vary across residential and home care services, and between different providers, one thing was clear from our research: the person responsible for direct line management of care staff has a huge effect on care workers, and on the overall service delivery. We found immense variety in the quality of support available to staff. Good management support really made a difference to care workers. It's also easy to see how staff support can slip down the list of priorities for managers under vast pressure.

The key findings we identified from our research into management and supervisor support were:

- A.** Support from management and supervisors is important for care workers
- B.** Managers also require support
- C.** Good management has a hugely positive influence on culture

"My manager doesn't even know my name. She's more concerned about not getting agency staff in than supporting the ones she has."

Care worker, focus group participant

A. SUPPORT FROM MANAGEMENT AND SUPERVISORS IS IMPORTANT FOR CARE WORKERS

- 41% of care staff have considered leaving their role because of their manager⁷³.
- Only 27% of staff said their manager uses supervisions or one-to-one support. 59% said it would make a difference for them if one-to-one support was improved⁷⁴.
- Supervisors often lack interpersonal skills, and interpersonal skills training⁷⁵, which means they struggle to build trusting relationships with their teams.
- Focus groups highlighted the importance of care workers having good relationships with their managers as it improves commitment to the role and boosts team morale.

“Aspects of people management are getting overlooked. There are a lot of systemic issues, but what can we do to understand what influences retention and people being able to do their job? Is it asking them what they need for them to do their job better? If you take care of workers then you stop spending money on advertising for care workers ‘with a car’ and help the ones you have with understanding their car insurance.”

Head of People Development, major UK provider of home care

B. MANAGERS ALSO REQUIRE SUPPORT

- As explored in the mental wellbeing section, the pressures on Registered Managers are widely acknowledged. The role is busy and varied, with time split between day-to-day operations, working with families and relatives of service users, external partners, legal compliance, leadership and business strategy. It is difficult for a single person to be brilliant in all these different areas.
- Turnover rates for Registered Managers are higher than other management roles in social care, at 22% in 2017-18⁷⁶.

“When I talk to Registered Managers about leaving their position, it is frequently not one particular item [...]. Little things mount up. CQC as a regulator has the power of life or death over an organisation and [they] can be scary operators to deal with, particularly for the inexperienced Registered Manager, or a Registered Manager not supported by their directors/trustees.”

Peter Webb, London Care and Support Forum

C. GOOD MANAGEMENT HAS A HUGE POSITIVE INFLUENCE ON CULTURE

- Care workers widely reported the positive difference that managerial support can make. We heard many reports of Registered Managers going above and beyond the expectations of their role, trying to support staff with issues in their personal lives, finances, mental health or relationships.

“[A] good manager is worth their weight in gold.”

Operations Director, small UK provider of residential care

- Based on our research, what seemed to work best was where the manager had a real relationship with the individuals in their team, knew them personally and saw it as part of their role to talk to them and be aware of how they are.

“At our last conference we had a [...] personal coach who taught stress management and went over some physical techniques. I taught all my staff what I learned. If the Registered Manager feels supported, this will be filtered down into care teams.”

Registered Manager, home care service, major UK provider



PRACTICAL SUPPORT

A key aim of our research was to gain an understanding of the types of support that already exist and the things people are doing to help alleviate some of the pressures. We learnt a huge amount that will prove invaluable to us when designing our own support services. In the meantime though, we'd like to share what we've learned.

Please find a simple wellbeing exercise included with this report. We hope you or your team enjoy using it. It's the first in a series of free resources we are sharing for care workers and care managers.



Please subscribe for more free resources on our website:

www.thecareworkerscharity.org.uk/wellbeing-resources

OUR RECOMMENDATIONS

Many people in the sector are working to tackle the problems we've described. A perennial challenge is that good ideas don't always spread, so we wanted to share our four key recommendations. Please feel free to take on board as many of our recommendations as are relevant to your organisation.

These recommendations will inform the development of pilot services that we will test with care workers and their managers. If there are ideas listed here that you'd like to collaborate with us on, please get in touch at info@thecwc.org.uk.

1. Create a culture of wellbeing
2. Build a supportive and appreciative workplace
3. Establish a community of care workers
4. Provide training and support for managers and supervisors

1. CREATE A CULTURE OF WELLBEING

Ensure care workers know how to look after their own wellbeing. Care providers and managers must ensure that care workers know how to look after their own wellbeing, and the importance of doing so. Our research indicated that care workers keenly felt the stress of their jobs; the build-up of this stress led to sickness absences and presenteeism, both of which result in a lower quality of care delivered to clients and residents. Care workers are not always aware of preventative steps they could take to reduce stress. Speaking to their line manager can be a productive first step, as managers can adjust work as appropriate whilst monitoring the situation.

Tell care workers about the resources available to them to support their wellbeing and encourage them to access them. Our research highlighted that uptake amongst care workers for mental health support from their employers is low. 73% stated they hadn't accessed support provided by their employer because they hadn't needed it – yet over half said that their mental health had been so adversely affected by their jobs that they had considered leaving their role. It is fair to conclude that some care workers are not accessing support for their mental health when they need it. Insight from managers suggested this may be because care workers don't want to access support provided by their employer as they fear their employer will find out. Be clear where necessary about the confidentiality of Employee Assistance Programme (EAP) telephone counselling and other contracted services, and signpost to external services that are independent and don't require a referral.

Create a culture where presenteeism is not practiced. This starts from the top. A culture of presenteeism results in an inefficient workforce, making more mistakes and with lower morale. Look beneath sickness absence rates. What's causing people to need time off? Work with teams to tackle these issues if you can (stress, childcare issues etc.).

Where possible, work to provide flexibility for employees with caring responsibilities, so that they don't feel forced to take sick leave or holidays to care for children and dependents, and ensure they are able to take time off to look after their own health should they need to. Take time to think about your organisation's culture and values with teams and what they mean in practice in the day-to-day work. The *Skills for Care* 'Culture for care' toolkit might help⁷⁷.

Consider the impact of bereavement on care workers. Some providers offer specific support for bereavement through reflective debrief sessions, provided in collaboration with their local hospices. These give the team an opportunity to talk together about the resident or client who has died, how they feel, and to reflect on the care they gave them.

Measure the impact of what you do (using questionnaires, tracking absences and retention, for example) to help justify longer term investment.

2. BUILD A SUPPORTIVE AND APPRECIATIVE WORKPLACE

Build relationships between care workers and their managers. Care workers told us it made a difference when they had a regular time in which to speak to their manager or supervisor one-to-one. Coaching techniques can help staff to develop their problem-solving skills, alongside making them feel more confident and supported at work.

Recognise and appreciate the efforts of staff. With limited scope for pay rises, formal rewards and informal appreciation schemes can take on extra significance in the care sector. Informal appreciation is more effective in supporting staff and increasing confidence, though formal recognition programmes are beneficial too. Many organisations we spoke to run internal rewards, including gifts, team activities, step counters redeemable against vouchers, respite days and high-street discounts.

Build in flexibility for those with caring responsibilities outside of work. Research shows that for people who combine working and caring, having a flexible manager often makes the biggest difference to how well they can manage their time^{78,79}. Some managers told us they allowed workers to change their shifts at short notice, through swapping with a colleague or arranging cover. These arrangements needed to be balanced with the needs of other team members, but they promote positive attitudes and improve retention. It's been demonstrated in other sectors that the most impactful interventions to support balancing work and caring are giving people greater control of their working hours and paid care leave of 5 to 10 days per year⁸⁰. When you're thinking about supporting carers and parents in the team, use Unison and Coram's research to help you⁸¹. It identified best practice in this area: 1) recruit flexibly by default; 2) put policies in place for carers in the workplace; 3) provide training for managers on supporting carers; and 4) become a member of network organisations.

Make information on financial issues, caring responsibilities and statutory entitlements easily available to care workers. Our research identified a huge disconnect; care workers were not always getting the best deals or accessing statutory benefits they are entitled to, yet 77% of those surveyed said they would be interested in receiving advice about welfare benefits and other freely provided services available to them.

As with mental health and wellbeing, make sure that all employees are aware of the internal and external services available to them. Create a culture where care workers don't feel ashamed to ask about financial help, by openly acknowledging the financial challenges faced by the workforce and signposting effectively to external services. This will not happen overnight, but it is imperative in a sector where 73% of care workers who were thinking of leaving their roles were doing so because of the low pay⁸².

Information should be shared conveniently in engaging, bite-sized and practical formats. Use central channels to communicate this regularly or display it prominently in a staff area. With such an emphasis on digital care right now, there are significant opportunities to integrate information for care workers in apps, particularly those used by home care workers.

3. ESTABLISH A COMMUNITY OF CARE WORKERS

Launch peer mentoring or buddy networks. Organisations offering peer mentoring programmes stated that they worked well, particularly for new starters, when new employees were matched with a more experienced peer. The peer mentor can answer questions, provide emotional support as appropriate and offer advice.

Peer support has been shown to benefit both the people receiving and giving the support, as well as the wider workplace⁸³. Programmes like these in other sectors have improved staff retention, reduced isolation, improved staff's sense of belonging and supported mental wellbeing⁸⁴. In a study within a care setting, staff retention doubled following the introduction of peer support⁸⁵. Online groups or forums can provide similar peer support benefits through a digital community.

Bring staff together. Acknowledge the challenges of care, celebrate the successes, recognise those who go the extra mile and feedback ideas for change. The realities of 24-hour client care and shift patterns make it challenging for care teams to get together, whether for learning, support or shared time off. Bringing together smaller groups can still create a community of care workers who can rely on each other for peer support and share their challenges and successes.



4. PROVIDE TRAINING AND SUPPORT FOR MANAGERS AND SUPERVISORS

Managers should know where to signpost to and what support is available to care workers. Managers don't necessarily need to understand in detail the benefits available for care workers, or organisations off the top of their heads, but they should know where to direct care staff to find out more information.

Provide training to managers so they can support the wellbeing of care workers. Managers at all levels may need ongoing training so they can best support the individuals they line manage. There is a wide range of free resources available online to support training in active listening skills⁸⁶ and coaching techniques⁸⁷, alongside paid courses including Mental Health First Aid⁸⁸. It is important that managers feel qualified to identify the early warning signs of common mental health problems in the workplace, to help them intervene as early as possible.

Take pressure away from managers. Service managers are the lynchpins that hold the sector together. In theory, they are the obvious group to approach to improve support for frontline care workers, but they are widely recognised as having too much to do. This is another opportunity for those of us designing support for care workers to think creatively. Rather than adding to managers' lists of responsibilities, what can be made easier for them or taken off their plate?

Make use of Registered Manager networks. 60% of managers told us how valuable peer support networks are to them in their roles. *Skills for Care* facilitates local Registered Manager networks across England. Several people we spoke to said they found great value from the peer support and useful information for their role. Regional partnerships and care associations may also provide dedicated forums and groups for Registered Managers. Alongside the benefits gained from the peer support element, such forums are also excellent environments for sharing best practice. Managers should be supported to attend these as frequently as is practicable.



NEXT STEPS FOR THE CARE WORKERS' CHARITY

We will take our support for care workers further and tackle some of the challenges we've found here. We are working on using everything we've learned from this research to develop pilot services that we will test with care workers and their managers.

If you'd like to get involved with this project, to collaborate or tell us about the ideas you've had, or if you have questions for us, we'd love to hear from you. Email us at info@thecwc.org.uk

To tackle the four key challenges in this report, we have narrowed down some key principles from this research to guide us – and you – in developing services that will make a real difference.

SERVICES SHOULD BE CO-PRODUCED WITH CARE WORKERS

Work with the people you want to support, to find out what they need and to develop the service into something truly useful. Capitalise on their innate assets as caring and empathetic individuals, whilst finding new ways to overcome the barriers that have prevented care workers from engaging in services in the past. Listen to their lived experience and value their expertise.

SERVICES SHOULD COMPLEMENT EXISTING SERVICES AND RESOURCES

Make use of the excellent services and support already out there around the UK, whether that is external or within your organisation. New services should build on existing best practice, rather than replicating or supplanting something that works.

SERVICES SHOULD BE PROVIDED IN PARTNERSHIP

Where possible, work with existing services, charities and those with expertise to develop and deliver services that address the areas of greatest need. Good practice needs to become the norm

across the sector, not sit in small pockets. Peer support networks for all levels of seniority in the sector, plus charities and other linking bodies can help to spread best practice.

SERVICES SHOULD BE FREE FOR CARE WORKERS TO ACCESS

If care providers are being asked to fund the service, make it clear what the benefit will be to their organisation and the people they support. Sustainable services need to be valuable to providers and recipients of care, as well as frontline care workers.

SERVICES SHOULD BE EMOTIONALLY ENGAGING, RESTORATIVE AND ACCESSIBLE

Care workers are often tired and busy! Services and support need to be quick, easy, and where possible, enjoyable to access, whether that is through mobile technology, face-to-face or another format. Where possible we need to think about how we can free up some space in people's days before expecting them to engage with a new initiative, which might otherwise seem quite daunting.

ONE SIZE DOES NOT FIT ALL

Every care worker and care service is different. The needs of a team in a major, national, residential care provider will be totally different to those of a local home care service. Start with listening and be bespoke in your approach. In addition, any service delivery should be aware of the stigma associated with the issues that they are addressing and avoid patronising those they are seeking to support.

DON'T FORGET ABOUT THE POSITIVE ASPECTS OF CARE WORK

Many of the people we spoke to chose this work because of how much they love being able to support others. Effective services for care workers don't just need to overcome the negative aspects of the role, they also need to enhance the positives.

ACKNOWLEDGEMENTS

A huge thank you to everyone who took part in this research.

To our Steering Group members, who generously contributed your thoughts over the phone and in a workshop.

To the senior leaders and managers, for giving us your time and honesty for sensitive interviews about all the most difficult aspects of your work.

Most of all, thank you to the 215 care workers who took part in our phone surveys and focus groups. The insights you have given us are the backbone of this report and will guide our next steps. We hope that you feel we have represented your views fairly, and that many care workers – including you – will benefit from the time you've given in the future.

This report was compiled by Anna Caseby and Daisy Bland with final edits by Laura Bealin-Kelly.

Feedback on any aspect of the report is very much welcomed to inform future research. Please get in touch with us at info@thecwc.org.uk

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NOTES



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