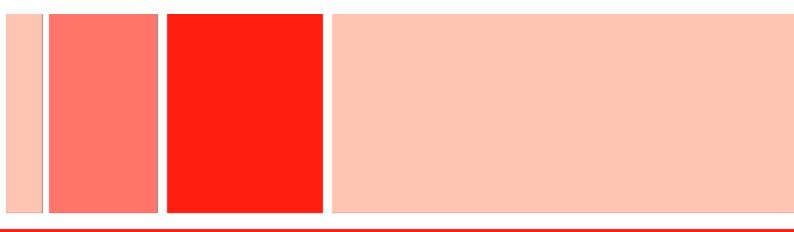




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# Review of Evidence of Variation in Terms and Conditions for Social Care Employment Contracts in Wales



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Title: Review of Evidence of Variation in Terms and Conditions for Social Care Employment Contracts in Wales

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Views expressed in this report are those of the researchers and not necessarily those of the Welsh Government

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#### Glossary

The terms used in this report are in the context of their application to employers and employees. Therefore:

**Adult social care** refers to the provision of care and support to individuals aged 18 years and over, such as personal and practical support to retain their independence and quality of life.

**Basic pay** refers to the amount of pay a worker receives before being enhanced by the value of additional benefits, such as reimbursements of certain costs, or allowances for additional factors such as shift working or working with complex cases.

**Contract** refers to the legal agreement between employer and employee that lays out the terms and conditions of employment.

Pay refers to the total amount of remuneration a worker receives.

**Recruitment** refers to the process undertaken by employers to attract staff to become employed.

Retention refers to the ability of employers to retain staff in their employ.

**Selection** is the process following recruitment that employers use to choose people to be appointed.

Stability refers to the degree to which jobs and employment contracts change.

**Terms and conditions** refer to the requirements associated with the job, e.g. working hours, and the allowances and benefits associated with undertaking the job.

The **local authority sector** refers to the 22 local authorities in Wales, who are employers of social care workers.

The **National Minimum Wage (NMW)** is what the government sets as a minimum amount people must be paid on average for the hours they work. This is called the **National Living Wage (NLW)** if you are aged 25 or over. The NMW and NLW are statutory requirements.

The **NHS** refers to the local health boards and trusts that employ health care support workers in Wales.

The **independent sector** refers to employers who deliver social care services, which are outside the local authority sector and the third sector.

The **Real Living Wage** is a rate of pay calculated by the Living Wage Foundation according to an assessment of what employees and their families need to live on. The real living wage is paid voluntarily by employers.

The **third sector** refers to charities, co-operatives, social value organisations and other not for profit employers who deliver social care services, outside the local authority sector and independent sector.

The **social care workforce** refers to all workers in the scope of this research employed by organisations within one of the three sectors within social care – the local authority sector, the independent sector and the third sector.

Variation **within** one of the four sectors in the scope of this research – the local authority sector, the independent sector, the third sector and the NHS – means that an element of pay, terms and conditions was different from at least one employer in that sector to another within the same sector.

Variation **between or amongst** one of the four sectors in the scope of this research – the local authority sector, the independent sector, the third sector and the NHS – means that an element of pay, terms and conditions was different from at least one employer within one sector to an employer in at least one other sector.

**Working in social care** means working for employers who deliver different forms of personal and practical care and support for adults.

# 1. Introduction/Background

- 1.1 The Welsh Government (WG) commissioned The Welsh Institute of Health and Social Care (WIHSC), University of South Wales, to deliver this *Review of Evidence of Variation in Terms and Conditions for Social Care Employment Contracts in Wales*.
- 1.2 This review was commissioned and the research undertaken prior to the COVID-19 pandemic.

#### Aims and objectives of the research

1.3 The aim of this research was to review disparities in pay and conditions across the social care workforce in Wales and assess the extent to which this may have influenced recruitment and retention of care workers. The primary focus was 'the lowest paid/entry-level' care workers who deliver care and support. For example, domiciliary care workers, care support workers, housing support workers (supported living), health care assistants/ health care support workers and residential care workers. The review included health care support workers undertaking similar roles in the NHS employed on <u>Agenda for Change pay scales</u>. Senior carers and supervisors employed within social care were included if their role involved the delivery of care and support<sup>1</sup>.

The specific objectives of the research as set out in the specification from WG were:

- To identify the extent to which employment terms and conditions for social care workers vary (or not) across different types of employers including the local authority (LA), independent and third social care sectors, and the NHS. This included:
  - A comparison of health care assistants/health care support workers employed in the NHS on Agenda for Change pay scales who undertake similar roles;
  - Monetary benefits such as pay rates, pay scales/increments and access to holiday pay, sick pay and maternity/paternity pay and non-

<sup>&</sup>lt;sup>1</sup> Two employer typologies were delivered specifically for this study and are provided in section two, p. 10 & 11

monetary benefits such as training and development, stability (contract type) and career progression.

- To explore the extent to which disparities in terms and conditions are geographical across Wales (e.g. urban/rural) and potential reasons for such disparities.
- Where disparity in terms and conditions exists (either by provider type or geographically) to assess the extent to which this influences;
  - Employers: for example, their ability to recruit and retain staff, quality of staff, costs (training, recruitment), and the continuity and quality of care provided;
  - Employees: for example, staff morale, parity of esteem, desire to stay within the sector and perceptions of any impact on quality or continuity of care provided.
- To identify examples of good practice, such as innovative approaches employers have taken to improve staff retention where they are not able to offer better/more competitive rates of pay or approaches commissioners have taken to promote more harmonious terms and conditions within a local area.

#### **Constraints and limitations**

1.4 It was recognised from the outset that the objectives of this study were ambitious given the large number of individual providers of social care and the range of issues needing to be explored. It was also necessary to acknowledge the sensitivity of the subject matter and the potential reluctance of some employers to impart information, which could be considered commercially sensitive. This is understood to be the first occasion an all-Wales survey, an integral part of this research, has been developed and conducted across all social care sectors and the NHS, seeking information pertaining to variation in pay and conditions. The level of granularity of the information sought meant survey design was a particularly complex process requiring numerous iterations and consultations with partner organisations and expert advisors. The complexity also had implications for

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timescales, distribution, and data analysis. Distribution of the online survey to employers was also challenging without access to a national database.

The researchers therefore wish to express their appreciation of the degree of understanding demonstrated by WG officials throughout the project's duration to the constraints and limitations these and other complexities placed upon our research. Particularly important was their understanding of the exploratory nature of the work and its potential value as a foundation to further detailed research.

#### Data Cymru

1.5 WIHSC worked in partnership with Data Cymru, developing and managing the Wales-wide online employer survey, which is a substantive element of this review. Data Cymru is part of the Welsh LA statistical community and has significant experience in collecting and managing workforce data, including information on the social care workforce.

# 2. Methodology

#### Overview of the methodology

#### **Data Collection**

- 2.1 The data collection for this research used mixed methods and included:
  - A desk-based review of literature and policy guidance documentation.
  - A Wales-wide survey of employers of social care staff working in adults' services and children's residential homes.
  - A Wales-wide survey of NHS employers.
  - Interviews and focus groups with managers and staff in adults' social care services and children's residential homes.

#### Desk-based literature and documentary review

- 2.2 The desk-based review had two key elements:
  - a) A literature review of UK academic and grey literature to ensure a comprehensive understanding of practice and research across Wales and the UK.
  - b) Accessing publically available relevant documentation and statistics for example, the Social Care Workforce Development Programme (SCWWDP) data.

This phase helped set the context to the study, determine what needed to be asked in the employer surveys and create a typology of the workforce for the purposes of the research.

#### Workforce typology

2.3 The focus of this literature review is on the adult social care workforce, and the children's residential workforce in Wales (including health care support workers who undertake similar roles within the NHS), across all social care sectors (LA, third, and independent). These roles are categorised below using two employee typologies developed specifically for this study and are not part of any nationally agreed framework.

Type of	Titles	Setting/environment	Role/duties
worker		care provided	
Care worker <i>Grade 1:</i> <i>Entry level</i>	Domiciliary care worker, care assistant, care worker, home care worker, frontline care worker, home care assistant, home carer, support worker, community support worker, domiciliary support worker Day care assistant, day care support worker Residential care worker, supporting living worker, care home worker, night care assistant	In the individual's home or family home Day care settings Care home services (without nursing) Care home services (with nursing) Supported housing Community care services	Frontline care workers provide care and support to individuals (e.g. adults, older people)
Senior care worker <i>Grad</i> e 2	Senior care assistant, senior care worker, senior care home worker, senior support worker, team leader	All of the above	Senior care workers oversee and monitor care workers. They also provide care and support to individuals (e.g. adults, older people)
Supervisor <i>Grade</i> 3	Team leader, field care supervisor, care supervisor, home care supervisor	All of the above	Supervisors are responsible for a small group or team of care workers and/or senior care workers. They may also provide care and support to individuals (e.g. adults, older people)
Health care support worker <i>Grade 2/3</i>	Health care assistant, healthcare support worker, nursing assistant,	Hospitals (NHS) Community Nursing homes	Health care support workers primarily provide help with personal care, meals and mobility as well as performing basic medical checks (e.g. monitoring vitals) within hospitals, homes, clinics and the wider community. Tasks associated with the role are primarily health support needs that may require appropriate training.

 Table 1: Adult social care workforce typology

Job title	Other titles	Setting/environment care provided	Role/duties
Residential childcare worker	Children's residential support worker, residential children's worker, Children's residential care worker	Children's residential care settings	Residential childcare workers provide ongoing care and support to children and young people, helping them feel safe and secure. It also involves liaising with other agencies (e.g. social services, health and education) in order to ensure that they get proper access to other services
Senior residential childcare worker	Children's senior residential support worker, senior residential children's worker, Senior children's residential care worker	As above	Senior residential childcare workers oversee residential childcare workers, take responsibility of the day-to-day running of the home, and liaise with other agencies (e.g. social services). They also provide care and support to children and young people
Residential children's' health care worker	Children's residential health care worker, residential children's health assistant/healthcare support worker/nursing assistant	As above	Residential children's health care worker may provide basic medical checks or advice and support. Tasks associated with the role are primarily health support needs that may require appropriate training

Table 2: Children's re	idential workforce typology
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2.4 This literature review focusses on posts in tables 1 and 2, the emphasis being on those who deliver frontline care and support. It does not include deputy or senior managers or their equivalent, nor does it include agency workers or personal assistants.

#### Search strategy

2.5 The detailed approach of a systematic search and review was beyond the scope and remit of this study. Systematic reviews are original empirical research that follow a standard scientific protocol of criterion (Kowalczyk & Truluck, 2013). An initial literature search was undertaken by WG library staff and results shared with the research team. This was followed with a *comprehensive literature search* of academic and grey literature using University of South Wales (USW) databases; the search was undertaken in a comprehensive way but without the level of detail required of a systematic review (Aveyard, 2014).

Combinations of terms included, 'social care workforce' OR 'social care workers' OR 'healthcare assistant' OR 'healthcare support worker' AND 'adult care' OR 'adult

care services', OR 'children's residential workers' AND 'employment terms' OR 'employment terms and conditions' OR 'pay and conditions'. Search term combinations were entered into the following databases: Scopus; ASSIA; and Social Care Online (Annex A provides an example search strategy).

- 2.6 Inclusion and limiter criteria applied included:
  - Title (TI) only (expanded to include 'abstract' if limited search results)
  - Date: Last 5 years (2014-2019)
  - Location: UK only
  - Publication type: Peer reviewed, scholarly journals, grey literature (policy statements and issue papers, research reports, fact sheets)
  - Language: English
- 2.7 Abstracts were read and articles identified as potentially relevant were saved for further reading. The reference pages of relevant publications were searched to identify literature not obtained through the USW search.
- 2.8 The total number of papers (academic and grey) saved to be included in the review was approximately 50.

#### Wales-wide social care and NHS employer surveys

- 2.9 The surveys (Annex B) were designed to gather data on pay and conditions which could be compared across a range of subject heads, e.g. by sector, geography and care setting. The typology referred to above was used to conduct separate surveys with each of the staff groups. Questions asked related to:
  - Pay
  - Enhancements
  - Contracts
  - Recruitment and retention
- 2.10 The surveys' content was informed by views and comments from a number of key stakeholders who had agreed to act as a reference group for the duration of the

project. Conversations were held with each of the following:

- Welsh Local Government Association (WLGA)
- Care Forum Wales
- Wales Council for Voluntary Action (WCVA)
- Senior NHS Workforce and Organisational Development Manager
- Former LA HR Manager
- Social Care Wales
- ADSS Cymru
- UNISON Cymru
- Health Education and Improvement Wales
- Welsh NHS Confederation
- WIHSC's standing Expert Reference Group (ERG), which comprises experienced senior academics and professionals from across the health and care sector
- 2.11 Due to the nature of the study, it was necessary to engage with some organisations more than others. For example, particularly important in the survey design and distribution were the contributions of colleagues in Care Forum Wales, the WCVA, the WLGA (via HR leads), and the NHS. Colleagues in WG also made useful suggestions which were incorporated in the final report.
- 2.12 A number of factors meant it was not possible to construct a sample frame containing every care provider. It was originally intended to distribute the survey link to all care providers via a national database maintained by a third party but for reasons outside of the research teams control this was not possible. After considering various alternative mechanisms, the surveys were distributed electronically via the partners named above. This meant a 100% reach was not achievable and the support of third parties was required to distribute. Consequently, it was not possible to directly control the distribution process. However, the alternative method at least enabled partners to encourage participation of their members to complete the surveys and issue reminders and follow-up emails.

#### Interviews and focus groups

- 2.13 The study used purposive sampling which is often used to recruit participants for exploratory social research (Adler & Clark, 2008), and gain insight into specific phenomena by selecting a best suited sample. Participants will have knowledge, or experience of the topic (Starks & Brown-Trinidad, 2007) and are best suited to help achieve the aims and objectives of the study. Participants were recruited with the support of the project reference group and WIHSC's ERG. Interviews and focus groups were completed via telephone and face-to-face and were arranged at times and locations convenient to participants, taking place between November 2019 and January 2020. Interview and focus group schedules were prepared in advance (Annexe C and D).
- 2.14 Eleven provider/manager interviews were completed representing the LA, independent and third sectors across the following care settings:
  - Children's residential care
  - Day services
  - Community support
  - Residential care
  - Domiciliary care
  - Supported living/housing
- 2.15 Six sector specific focus groups comprising the LA, independent and third sectors, and the NHS (four staff and two manager/provider) were completed. Staff focus groups comprised a mixture of care workers, senior workers and supervisors/managers and included:
  - Children's residential care
  - Residential Care for older people
  - Domiciliary care
  - Supported living/housing
  - NHS

#### Ethics

2.16 Prior to data collection commencing, ethical approval was secured from the Faculty of Life Science and Education (LSE), at the University of South Wales. All potential participants received an information sheet providing details of what their participation would entail. To access the online survey, participants were asked to confirm they understood that completion implied consent. For qualitative data collection, written or verbal consent was confirmed before interviews and focus groups commenced.

#### Data analysis

#### Wales-wide social care and NHS employer surveys

2.17 Data Cymru acted as the lead partner on survey design and construction. Data Cymru used the <u>SmartSurvey</u> tool, which enabled bilingual, fully customisable questionnaires, which are GDPR compliant. It allowed a range of response collection methods including custom web links, email, social media links, QR codes, web embedding and popups, as well as offline collection. It also provided instant access to results with key summary statistics and basic tables and charts (Annexe E for methodology statement).

#### Interviews and focus groups

2.18 Interviews and focus group were audio-recorded, transcribed and analysed using Braun and Clarke's (2006) six steps to thematic analysis, which provided a useful framework to support consistency.

#### Triangulating data capture

2.19 Findings from across the datasets (literature review, surveys, interviews and focus groups) were triangulated. The process of triangulation refers to the view that findings from multiple methods are combined to mutually corroborate one another (Creswell & Plano-Clarke, 2011). Data captured from all methods were considered to determine whether findings agreed, offered complimentary information on the same issue, or contradicted one another (O'Cathain *et al*, 2010).

### 3. Findings: Literature review

3.1 The literature review sought to determine evidence of:

Variation of pay and conditions between and within sectors (public, third, independent, and NHS), specifically focusing on:

- employers: e.g. the impact on recruitment and retention, quality of staff, costs, continuity of care/and or quality of care provided
- employees: e.g. staff morale, parity of esteem
- examples of innovative practice taken by employers to recruit and retain staff

#### Terms and definitions

#### Adult social care

3.2 Adult social care is a broad term that refers to the provision of care and support to individuals aged 18 years and over, such as personal and practical support with the aim of retaining independence and quality of life (Cromarty, 2019). Formal adult social care is provided in the person's own home, in community settings (day centres) or residential settings (care homes) or supported housing. Whilst the boundaries between social care, health care and other community services can be blurred, social care is largely defined by the source of its funding (Atkinson et al, 2016). For the majority of service users, LAs finance some or all of their care (Cromarty, 2019; Atkinson et al, 2016). Unpaid or informal care refers to the provision of care by family, friends or neighbours without payment (Cromarty, 2019).

#### Adult social care workforce

3.3 Numerous titles exist for social care employees who deliver frontline care and support. Some job titles/roles can be distinguished based on where care and support is being provided, for example, in a person's home (e.g. domiciliary care), or away from home (e.g. supported living or residential care). Job titles are often used interchangeably; domiciliary care workers can be referred to as 'home care workers' or 'support workers' (Atkinson et al, 2016) whilst those providing residential care can be referred to as 'residential worker/carer/support worker/practitioner'.

- 3.4 Adult social care client groups predominantly include older people (including individuals living with dementia with care and support needs), adults (younger and older) with physical and/or learning disabilities and/or mental health needs.
- 3.5 Health care support workers refers to those who undertake similar roles in the NHS and are employed on Agenda for Change pay scales (NHS Employers, 2017).

#### Children's residential care

3.6 Children's residential care workers support children and young people (CYP) away from their home. The role of children's residential care workers differs from adult social care workers. Rather than providing, for example, personal care, the emphasis is on keeping CYP safe and secure, providing emotional support, helping them change behaviour, liaising with agencies and parents, providing and supporting access to education and leisure activities (White et al, 2015).

#### Social care context in Wales and England

- 3.7 In 2016 in Wales, the total direct, indirect and induced value of the provision of adult social care was estimated at £2.2 billion, approximately 2,070 sites provided care and the average earnings for full time equivalent (FTE) was £16,900 (Skills for Care 2018a). Most of the adult social care workforce (44,500) providing regulated services were employed at sites run by independent sector providers.
- 3.8 In England in 2016, adult social care employers contributed £38.5 billion to the economy and provided over 40,000 sites with care provision, the majority (78%) of which were run by the independent sector (Skills for Care, 2018b). The adult social care workforce is growing, with an estimated 1.47 million people working in adult social care in England alone and with the number of jobs increasing by 275,000 since 2009 (Skills for Care, 2018c).
- 3.9 The Social Care Wales Workforce Development Partnership (SCWWDP) workforce data (2017) provides information on commissioned care provider services (Social Care Wales, 2018a) and LA regulated services<sup>2</sup> (Social Care Wales, 2018b) and

<sup>&</sup>lt;sup>2</sup> 'As this was the first year this data has been collected nationally there were, as anticipated, a number of data quality issues. As a result, the level of analysis we have been able to do is limited' (Social Care Wales, 2018b, p.3)

provides a useful overview of the landscape of the adult social care workforce in Wales.

#### Commissioned care providers

3.10 In 2017, approximately 1,350 care providers were commissioned by LAs in Wales to provide social care and it was estimated there were over 52,500 staff working for commissioned care providers. The majority of the commissioned care was provided by independent sector organisations (83%) compared to 17% in the third sector, a decrease from 21% in 2016. The majority of care providers delivered residential care, although this varied, from 71% in Ceredigion to 19% in Merthyr Tydfil. For domiciliary care commissioned providers, the percentage ranged from 11% in Gwynedd, Ceredigion and Carmarthenshire to 42% in Flintshire. Services were commissioned to provide services for adults (62%) and older people (62%) and 13% of commissioned care providers provided services for children. Staff employed were largely frontline care workers (65%) while staff referred to as senior carers accounted for 9% of employees.

#### LA Regulated services<sup>3</sup>

- 3.11 During the same period, there were at least 130 services run by LAs and regulated by Care Inspectorate Wales, employing 11,000 social care staff. Regulated services mostly provided residential care (51%) with 20% providing domiciliary care. The majority provided services for adults and older people and employed frontline care workers (57%).
- 3.12 Whilst not identified within the literature, or either of the reports above, it is possible that staff employed within social care and the NHS may have more than one contract and may work for more than one provider.

#### Recruitment and retention in the social care workforce

3.13 Social care is facing a number of workforce challenges including high turnover and vacancy rates, increasing demand for care workers, costly recruitment and training of new staff and increasing use of agency staff (Moriarty et al. 2018).

<sup>&</sup>lt;sup>3</sup> 'We are unsure of the proportion of the regulated services sector the data represents. As a result, we were unable to estimate for any 'missing' services. Our analysis has, therefore, focused on those services included in the collection. However, these figures should be used with caution' (Social Care Wales, 2018b, p.3)

- 3.14 In Wales, care providers commissioned by Carmarthenshire and Swansea reported the highest percentage of vacancies (9%), while less than 1% were reported to be vacant in care providers commissioned by Anglesey, and just 0.5% for Merthyr Tydfil (Social Care Wales, 2018a). Of reported vacant posts across all commissioned care providers, 74% were for care workers, care officers or care assistants. For LA regulated services, Blaenau Gwent and Caerphilly reported the highest percentage of vacancies (24%) and almost half of all LAs had no reported vacancies. Of reported vacant posts across regulated services, 73% were for care workers, care officers, or care assistants (Social Care Wales, 2018b).
- 3.15 The stability of the workforce varies across authorities. In the Vale of Glamorgan 39% of staff working for care providers commissioned by the authority were recruited in 2017, compared to 14% working for providers commissioned in Ceredigion (Social Care Wales, 2018a). The commissioned care provider data also show that 33% of domiciliary care staff across Wales left in 2017 compared to 13% of staff that left from other care settings (e.g. day care services). The data did not clarify the destination of these leavers.
- 3.16 Skills for Care (2018c) estimate the staff turnover rate of employees in adult social care in England equates to an estimated 390,000 people leaving their jobs each year. However, the majority do not leave social care with 67% of recruitment coming from other roles within social care. Increasing levels of turnover and churn indicates challenges to recruit and retain social care workers; at any one time Skills for Care (2018c) estimate there are 110,000 vacancies.
- 3.17 As well as competition between social care providers, there is competition from the NHS and temporary employment agencies. Moriarty et al (2018) highlight the issues encountered by the independent and voluntary sector; they struggle to compete with the NHS terms and conditions of service, and invest in training health care support workers/assistants who then leave to work in the NHS. The Agenda for Change system standardised pay and conditions for healthcare workers employed within the NHS. Agenda for Change allocates posts to a set pay band using the Job Evaluation Scheme. It is designed to deliver fair pay for non-medical staff, provide better links between pay and career progression, and harmonise terms and conditions of services such as annual leave, hours and sick pay, and work

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undertaken during unsocial hours (NHS Employers, 2017). For a healthcare support worker employed by the NHS in Wales, this means that irrespective of where they are working (geographically), they will receive the same pay and terms and conditions.

3.18 One difficulty in recruiting and retaining care staff is competition from other job roles outside of social care. A key challenge highlighted is the lack of pay differentials between social care work and other roles, for example, hospitality and retail (Moriarty, 2018, Grimshaw & Carroll, 2002). Domiciliary care providers in Wales raised the issue of competition in roles outside social care, for example, the recent opening of a new supermarket (Social Services Inspectorate Wales (CSSIW), 2016). Similarly, in a report on earnings and hours in domiciliary care, case study LAs in England highlighted that rates of pay in domiciliary care could not compete with local major supermarkets with a subsequent impact on local labour markets and staff recruitment and retention (Bessa et al 2013).

#### Factors associated with recruitment and retention of the social care workforce

3.19 As well as competition between providers and roles outside social care, there are other factors associated with recruitment and retention in social care.

#### Evidence of variation of pay and conditions

3.20 Our literature search did not identify evidence of variation of pay and conditions amongst LA, independent, and third sector social care employers. However, there was some evidence that the variation of terms and conditions offered by the NHS contributes to difficulties retaining social care workers (Moriarty et al, 2018). As highlighted above, despite high turnover rates of employees within adult social care, over half (67%) leave to work for other providers and do not leave social care. Nonetheless, without empirical evidence, it is not possible to determine the extent to which the variation of pay and conditions is a factor in employees leaving to work for other providers.

#### Low wages

3.21 As an occupation, social care has an historical trend of being a low paid sector characterised by precarious working arrangements (Hussein, 2017). Difficulties in recruitment and retention as a result of this are widely acknowledged (Moriarty et al, 2018) and service providers have expressed dissatisfaction about the rates of pay they can offer as they see this as detrimental to recruitment and retention in social care (Bessa et al, 2013).

- 3.22 In a review of domiciliary care in Wales, a key message reported by CSSIW (2016) was that care workers felt pay and conditions are poor and do not reflect the demands and complexity of the work they undertake. In 2018, the median UK pay for a care worker was £9.14 per hour, rising to £9.62 for senior care workers. Some 517,000 jobs in social care paid below the living wage set out by the Living Wage Foundation (Dromey & Hochlaf, 2018). Furthermore, Moriarty et al (2018) refer to limited enhancements being available for unsocial hours or level of experience for those receiving the National Living Wage, which has created unbalanced capacity in terms of 24-hour care provision, with difficulties recruiting staff to work nights, evenings and weekends.
- 3.23 Analysing data from two sources, the National Minimum Data Set for Social Care (NMDS-SC), January 2012, and the Longitudinal Care Study (LoCS), Hussein (2017) explored the scale of, and perceived factors of '*poverty* pay' for the long-term care workforce in adult social care in England. Focussing on '*the most vulnerable group of this workforce*' (p.1818), findings from the LoCS identified that over half of respondents received some form of welfare benefits and 28% of care workers indicated that managing their finances was difficult or very difficult. Hussein's (2017) qualitative analysis of the LoCS developed three themes related to persistent low pay in social care; 1) The intrinsic nature of the job, 2) Society and the value of care work, 3) Funding, outsourcing, and marketisation of care.

#### Low skilled and low status

- 3.24 SCWWDP data (Social Care Wales 2018a) show that there is variation across LAs in Wales regarding the percentage of staff referred to as Care Workers, Care Officers or Care Assistants with the required/recommended qualifications. Figures ranged from 32% in care providers commissioned by Merthyr Tydfil to 71% of care providers commissioned by Flintshire and Ceredigion.
- The low status of social work and social care is regularly cited as a reason for recruitment and retention problems in adult social care, for example, Twigg et al, 2011; Cavendish, 2013; Skills for Care, 2014; Hussein and Christensen, 2017).

Although poor pay was the most frequently reported reason for recruitment and retention difficulties, status was discussed almost as often.

3.26 In Wales, social workers, social work students, residential childcare managers and workers, adult care home managers and domiciliary care managers are required to be registered to be able to work in social care. For example, children's residential care workers are required to register with Social Care Wales, have a Level 3 Diploma in Health and Social Care (Children and Young People), or complete the qualification within the first three years of registration (Social Care Wales, 2019a). The Regulation and Inspection of Social Care (Wales) Act 2016 changed the regulation and inspection of social care in Wales. A requirement arising from the Act is that from April 2020 it was planned that all domiciliary care workers within social care would be registered with Social Care Wales, with all adult residential care workers to be registered by 2022. The advantages of registration identified by Social Care Wales (2019b) include valuing social care workers through recognition of the role, and demonstrating that care workers have the skills and knowledge required to undertake the role. This is not a requirement for healthcare support workers employed in the NHS.

#### Contracts and job stability

- 3.27 The social care workforce is characterised by high levels of job insecurity (Dromey & Hochlaf, 2018) such as insecure working arrangements (e.g. non-guaranteed hours contracts, short-term temporary contracts). The use of zero hour contracts within social care is associated with multiple unpaid gaps of time in care employees' working day. In addition, irregular working hours, or working above contractual hours, can result in lost benefit entitlement (universal credit) (Bessa et al, 2013).
- 3.28 Acknowledging the increasing use of non-guaranteed hours contracts in social care, the WG passed legislation to address the issue. The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017 place requirements on providers of domiciliary care workers to offer care workers the choice of a guaranteed hours contract after three months of employment (WG, 2017).
- 3.29 The SCWWDP data (Social Care Wales 2018a) show that in 2017, 82% of LA commissioned care provider staff in Wales were on permanent contracts. The

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percentage ranged from 73% of staff in care providers commissioned by Cardiff to 92% commissioned by Wrexham. During the same period, 14% of staff employed by commissioned care providers were on casual contracts, from 1% of commissioned providers by Merthyr Tydfil to 23% commissioned by Cardiff. Across provider types, 92% of all commissioned residential care provider staff were on permanent contracts, falling to 66% among commissioned domiciliary care staff while 32% of commissioned domiciliary care staff were on casual contracts. For LA regulated services (Social Care Wales, 2018b), 79% of staff were on permanent contracts in 2017, ranging from 100% of staff in Merthyr Tydfil to 40% in Swansea.

#### Increasing divide between demand and expenditure

3.30 Adult social care employers have argued for several years that the fees local councils pay them to provide services are insufficient to enable them to invest in ways of improving employment conditions for their staff which in turn might improve recruitment and retention (United Kingdom Homecare Association, 2015, cited in Moriarty, 2018). However, Consillium (2016) advised that employers can have a tendency to adopt short-term solutions to tackling staff shortages rather than investing in longer-term approaches to improve retention. The 'growing gap' between levels of expenditure and demand for social care provision, particularly complex needs and the requirement of intensive support, was highlighted by Moriarty et al (2018) who explored recruitment and retention in adult social care services in England.

#### <u>Rural vs urban</u>

3.31 Moriarty et al (2018) further highlighted the challenges for domiciliary care providers in rural areas to recruit care workers. Improving social care recruitment in rural areas is hampered by the cost of travel and public transport for care workers who do not have access to their own transport. By contrast, care homes located in prosperous areas with the aim of attracting 'self-funders' of care had difficulties recruiting care staff who lived within travelling distance of the care premises.

#### Children's residential care

3.32 Similar challenges as those highlighted above surrounding recruitment and retention exist for employers in children's residential care. Difficulties are attributed to the perceived low status of the role, attracting people with adequate experiences and skills, and competition with other similarly low paid, entry-level work requiring no previous qualifications that are likely to be less demanding and more compatible with family life and commitments (White et al, 2015).

#### Impact of recruitment and retention

- 3.33 Issues surrounding recruitment and retention within social care can impact on continuity of care for service users, while engagement and wellbeing of staff is directly related to user experience (Maben, 2013). There is a consensus that high vacancy and turnover rates make it more difficult to achieve and maintain good standards of care (Moriarty et al, 2018). Other impacts include staff morale and job satisfaction, a lack of which can affect work, colleagues, and the quality of care provided (Squires et al, 2015).
- 3.34 A systematic review of factors (individual and organisational) associated with job satisfaction amongst carers in long-term residential facilities for older people highlighted that important individual factors were empowerment and autonomy, whilst important organisational factors included facility resources and workload. Qualitative studies included in the review that related to the individual factors further highlighted contact/relationships with residents, nature of the job, and opportunity for learning and advancement as being important factors contributing to job satisfaction (Squires et al, 2015). Previous research has found caring motivations including relationships with individuals receiving care and support cited as factors for job satisfaction, as well as opportunities for flexible working and availability of jobs close to home (Hebson et al, 2015; CSSIW, 2016). Individual factors identified as not being important were age, ethnicity, gender, education level, attending specialised training, and years of experience. Satisfaction with salary/benefits and job performance were not, however, considered important organisational factors in relation to job satisfaction (Squires et al, 2015).
- 3.35 Work undertaken by Exeter University regarding recruitment and retention issues within the adult social care workforce in Devon in 2018, highlighted similar reasons care workers remain in their roles. They included feeling valued for the role they do, job satisfaction (including the diversity and challenge of their role), having a positive impact on people's lives, opportunities for personal and professional development, and good working conditions (e.g. guaranteed working hours, fair wages). The

report concluded that triggers for care workers leaving their jobs include: the challenges of the role (e.g. lone working, pay levels and level of support provided), the stress of appointments being too close together, lack of a full-time job and split shifts, lack of input into work schedules and last minute changes, and that agency workers are paid more. Similarly, Hebson et al (2015), highlighted sources of job dissatisfaction for care workers, including terms and conditions of employment (especially pay), working time and staff shortages.

#### Innovative approaches to recruit and retain social care staff

- 3.36 Acknowledging the challenges of recruitment and retention faced by social care, the literature review attempted to source innovative approaches, which may help to address the issue.
- 3.37 In 2017, Skills for Care undertook an online survey amongst adult social care employers identified as having low staff turnover (less than 10%) to explore what they felt contributed to their success. Surveys were based upon four key themes from the adult social care recruitment and retention toolkit '*Finders keepers*' (Skills for Care, 2013):

#### Attracting people to work for your organisation

3.38 Pay was cited as the *most important* criterion to attract more people to apply, followed closely by the organisation developing a positive culture that supports and values its staff, access to training development, honesty about the reality of the role, and working conditions (particularly flexible working).

#### Taking on the right people

3.39 Establishing that prospective new employees have the right personal attributes, motivation and values, and having a robust recruitment process were seen as the *most important* factors to ensure employers recruit the right people. Bennett et al (2018) reiterate the importance of a values–based approach to recruitment and retention. The approach considers the extent to which potential employees demonstrate values linked to the caring role such as compassion, as well as skills and experience. A previous evaluation found that compared to 'traditional' recruitment methods, values-based recruitment led to benefits including lower staff turnover, improved staff performance, and staff possessing stronger care values; for

example, empathy, respect, and compassion (Consilium, 2016). However, factors employers felt would impact their ability to implement this approach included the 'National Living Wage, financial pressures linked to 'tight' contracts with local authorities and a lack of time and capacity within senior management to invest in planning' (p.7). Furthermore, confusion persists amongst employers about what a values-based approach 'looks like', how to develop it, and what represents good practice.

#### Develop talent and skills

3.40 Staff access to (on-going) training and development opportunities was the *most important* factor to develop new talent and skills followed by developing the existing skills of staff to enable employees to grow and progress.

#### Keeping your people

- 3.41 The *most important* factors to retain staff included respecting and valuing staff, communication (listening to staff), supporting staff in their roles (and increasingly in their personal lives), benefits and incentives, and a working environment which facilitates staff development.
- 3.42 In the same study, employers were asked about issues that affected recruitment either positively or negatively. The issues referred to most frequently were as follows:
  - Reputation of the organisation
  - Working hours and patterns
  - Pay
  - Career progression opportunities
  - Competition from other social care providers
  - Local on-site leadership and management and organisation-wide leadership and management
  - Funding
  - Service user profile/s
  - Competition from other employers outside social care

- 3.43 Bennett et al (2018) provide a useful summary of other approaches taken to improve terms and conditions for care workers that include addressing issues of training, stability, pay and autonomy. European countries (Germany, Austria, and Denmark) have reformed educational qualifications and the training of domiciliary care workers to encourage recruitment into social care and help improve its image. In Denmark, programmes where carers are seen as 'coaches' who undertake positive and motivational work have been highlighted as improving the status of care work. In the UK, reducing hierarchy within teams has enabled organisations to offer training and more competitive rates of pay to make a career in care more attractive. Bennett et al (2018) highlight new approaches to the organisation and delivery of care through the use of autonomous or self-managed teams, that enable 'flexibility in meeting care needs as well as improved flexibility and control for care workers over their hours and job satisfaction' (p.6).
- 3.44 In a study exploring recruitment and retention in adult social care services (Moriarty, 2018), improving the status of social care was cited as an important element. An example provided by one participant referred to Devon County Council's 'Proud to Care' programme. Proud to Care South West is a partnership of 16 LAs (including Devon) and Health Education England. Working together at a regional level, the aim is to raise the profile of a career in care and health by using 'real life stories' to highlight the types of care work available and the variety of people employed to undertake it (Proud to Care South West, 2019).
- 3.45 Within the same study, examples of financial incentives to improve recruitment and retention were provided. These included:
  - A 'finding fee'- Introducing satisfactory new employees. Participants reported examples of being given £350 for each new employee they introduced once the new workers had been in post for six months.
  - 'Gainsharing' Gainsharing refers to offering employees payments based on their performance i.e. their productivity (Freeman et al, 2010); unlike performance related pay, which rewards individual performance, gainsharing leads to collective benefits. Citing an earlier paper (Moriarty, J., & Manthorpe, J. 2014), Moriarty et al, (2018) acknowledged that although the practice of

outcomes based commissioning is well established, this was the first example found for translating it into rewards for employees.

 Employee engagement in which employees are encouraged to invest their physical, cognitive, and emotional resources towards the achievement of organisational goals is regularly included in examples of high performance work practices (HPWP) (Albrecht et al, 2015). Two participants considered that it had a beneficial effect on retention (Moriarty et al, 2018).

#### Campaigns/social media – direct targeting

- 3.46 In Wales, an initiative was launched in March 2019 called '*WeCare Wales*'. This is a national campaign for social care and early years and childcare and is part of an initial four-year project on attraction and recruitment into social care. The aim is to attract more people in Wales into roles in care (Social Care Wales, 2019c). It includes a bilingual <u>WeCare website</u> and focusses on raising the profile of social care and early years and childcare, improving perceptions of care as a career, and accentuating the positives of working in care (WeCare Wales, 2019).
- 3.47 In February 2019, the UK Department of Health and Social Care launched its <u>'When</u> you care, every day makes a difference' campaign with the aim of recruiting new people, 'with the right values' to social care and provide advice to recruit and retain the 'right people'. Developed in close collaboration with those involved with adult social care, it ran during February to March via social media (using the hashtag #shareifyoucare), digital advertising and events across England. Phase two of the campaign was launched in October 2019 to run until April 2020. The campaigns are primarily targeted towards 20-39 year olds. A recent survey of 2,020 adults in England, undertaken by the <u>UK Department of Health and Social Care</u>, showed that those aged 18-34 are the most likely to consider a career in adult social care.
- 3.48 The <u>campaign website</u> includes an online job search, information on qualities, skills and development, and personal testimonies from employees working in social care. The first phase of the campaign generated a 14% uplift in clicks on the 'apply' button for care roles and 97% more searches for jobs containing 'care' or 'care worker' (Skills for Care, no date).

#### Summary of the literature

- 3.49 The literature review identified limited academic literature pertaining to the variation of terms and conditions and its impact on recruitment and retention within the social care workforce. Despite limited availability of existing literature, issues highlighted in the review provide a useful basis for this research.
- 3.50 Academic literature that does exist provides information on some of the factors associated with these challenges, and is supported by a number of 'grey' publications. Factors include:
  - Low wages
  - Low skills and low status
  - Contracts and job stability
  - Rural vs urban
  - Increasing divide between demand and expenditure
- 3.51 These factors highlight that whilst pay and working conditions within social care are problematic and highlighted as issues affecting recruitment and retention, they are not the only factors and do not exist in isolation. Other considerations found in the review include:
  - Building relationships with the individuals they care for
  - Having a positive impact on people's lives
  - Opportunities for personal and professional development
  - Flexible working
  - Feeling valued
  - Good working conditions (fair wages, guaranteed hours)
- 3.52 Sources of dissatisfaction amongst social care workers include:
  - Terms and conditions of employment, such as pay and leave/time-off facilities.
  - The challenges of the role (lone working, support provided)
  - A lack of choice in working hours (split shifts, last minute rota changes)

#### • Staff shortages

3.53 The literature review highlights some approaches aimed at addressing the issue of recruitment and retention, yet there is a shortage of evidence demonstrating how effective these approaches are. Examples of approaches highlighted above such as recruiting the 'right people', 'valuing staff', investment in training and careers development, and working conditions, are reflected in the views of social care workers. However, despite potentially helpful guidance and some good examples of strategies for improving rates of recruitment and retention, the evidence base for what works is limited. This may be reflected in the different LA retention rates referred to earlier. Furthermore, despite the potential benefits of approaches like value-based recruitment, barriers to being able to fully implement them have been highlighted by employers (e.g. financial pressures, lack of time and capacity) and there is uncertainty about what such an approach looks like in practice, and how to develop it. Future work might consider how to address these issues, for example, developing guidance to support employers to implement approaches like valuesbased recruitment, sharing good practice between and within sectors, and encouraging and supporting employers to evaluate initiatives to build the evidence base on what may be effective in improving recruitment and retention.

# 4. Findings: Wales-wide adult social care and NHS employer surveys Introduction

- 4.1 This section of the report presents the findings from the Wales-wide adult social care and NHS employer surveys. The findings are limited to the adults' surveys as only a small number of responses (11) were received for the children's residential survey, 10 from LAs and one from the private sector. This meant analysis amongst sectors was not meaningful, and that analysis within the LAs that had responded was similarly limited.
- 4.2 In Section 5, which follows, comparisons are made amongst social care organisations and between them and the NHS.
- 4.3 The surveys sought information on a range of worker roles and care setting types. Whilst responses to the surveys may in some topic areas be sufficiently robust (representative of the population as a whole), for others this was not the case. These have not been distinguished in the findings, instead reporting has been limited to the information provided by respondents. However, a base figure is reported, which shows the number of organisations that responded to each question. More detail on the base figure is outlined in paragraph 4.5.
- 4.4 In a small number of cases where there were inconsistencies in the data within responses, or where there was good reason to suspect that values were reported incorrectly, these have been excluded from the findings.
- 4.5 In examining the findings of this report, it should be noted that there is a degree of item non-response i.e. not all respondents provided data for all questions. This can be seen in the 'Base' column in the tables reporting findings below. Where no responses were received, the base column shows a zero (0). However, where a base figure was lower than five, data was suppressed as part of disclosure control, represented by a dash (-).

#### Survey responses

4.6 **Error! Reference source not found.** below shows the number of survey responses received from social care workforce employers and the NHS. Issues connected to

the sample frame and distribution of the surveys (referred to in para. 2.12) means it is not possible to provide comparable response rates.

*Figure 1:* Number of responses from employers of adult social care workers by sector, and the NHS

	Number of responses
LA	14
Private / independent sector	55
Third sector	7
NHS	7
Total	83

4.7 Figure 2 shows the number of employers responding to the surveys that employed staff across the target 'typology' of adult care workers (Table 1).

*Figure 2:* Number of responses from employers of adult social care workers by sector, NHS and worker type

	Care workers	Senior care workers	Supervisors	Health care support workers
LA	14	13	13	0
Private / independent sector	53	45	30	8
Third sector	7	7	5	0
NHS	-	-	-	7
Total	74	65	48	15

#### **Reporting the findings**

4.8 The survey findings that follow are reported by adult social care employers and the NHS. Within these sections, data are reported by sector (LA, independent, third sector, and the NHS) and by type of worker (care workers, senior care workers, supervisors, and health care support workers). Each section reports on the following:

Pay

4.9 Seeking information on pay was not straightforward, as employers operate different approaches, for example:

Fixed rates of pay - a single rate of pay to some or all of their workers;

**Pay ranges** – enabling some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted;

Differential pay rates – such as paying different pay rates in different locations;

*Client based pay rates* – paying workers at different rates according to which client group they support; or

A *mix* of some or all of the above.

N.B. Please also note the definition of basic pay rate contained in the glossary of terms. It should also be noted that some respondents may operate pay systems which incorporate additional elements into basic pay, such as a recognition of working with complex cases.

- 4.10 Respondents were asked to provide information on these different approaches to pay.
- 4.11 While the range of values from responses are reported, the analysis of pay data has concentrated on the median values (i.e. the midpoint of the observed values). This limits the impact of any 'outlier' values and is more appropriate than the mean, given the possible impact of the National Minimum Wage and the National Living Wage on the distribution of hourly rates paid.
- 4.12 The National Minimum Wage, at the time data collection took place (prior to April 2020), was set at £4.35 for under 18s, £6.15 for 18-20 year olds, and £7.70 for 21-24 year olds. The National Living Wage, at the time data collection took place, was set at £8.21 for 25s and older. In the literature review (para. 3.22), we referred to the "real living wage", a rate established by the Living Wage Foundation. This was set at £9.30 at the time data collection took place.

#### Contracts

4.13 Respondents were asked to provide information on the types of contracts their social care workforce have. This included a question on the numbers of staff who had non-guaranteed working/zero-hour contracts. Some of the workers with these contracts will also have another type of full-time or part-time contract(s). For example, non-guaranteed working/zero-hour contracts might be used to enable staff to provide additional cover during the absence of colleagues.

#### **Contract options and enhancements**

4.14 The survey asked for information about 30 different contractual benefits, enhancements, rewards or incentives that are available or paid to the social care workforce (over and above the basic hourly pay rates). This included options such as job share or flexible working, enhancements such as paid overtime or bank holiday working, and incentives such as leisure/entertainment benefits or reimbursed registration fees.

#### **Recruitment and retention**

- 4.15 The survey sought the views of employers on the extent to which they experienced difficulties in recruiting or retaining staff within the social care workforce and, where this was the case, their views on the factors that contributed to these difficulties. Contributing factors defined as 'extremely' or 'very' significant' by at least 50% of the respondents are reported.
- 4.16 Respondents were also asked to describe how they recruited and retained their social care workforce.

#### **Findings: Adult Social Care**

#### Care workers

4.17 In this section, all references to *care workers* relate to 'frontline' care workers providing direct care and support to **adults** (see the typology in Table 1).

#### Pay

4.18 The survey responses provided the details of the basic pay rates of around 5,500 care workers employed in adult social care across 13 Welsh LAs (one responding LA did not provide workforce numbers but their responses on pay are included in the pay analysis below). Figure 3 below shows responses to the pay questions on LA care workers.

*Figure 3:* Summary of LA responses to questions on care worker basic pay rates, by care setting<sup>4</sup>

	£ per hour					
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
Day care services	9.36	12.85	3.49	9.74	10.97	12
Care home services	9.36	12.35	2.99	9.74	10.14	11
Domiciliary support services	9.36	12.35	2.99	9.74	10.34	12
Supported housing	-	-	-	-	-	-
Other community care services	9.55	13.11	3.56	9.94	12.12	6

- 4.19 The *minimum basic hourly rate* paid to *care workers* by LAs across all setting types was £9.36. Across the LAs who responded, the absolute (or lowest value) minimum rate across the settings ranged from £9.36 to £9.55. The median minimum value across all care settings was £9.74. The absolute minimum and median minimum rates were above the current National Living Wage figure of £8.21 and just above the real living wage figure of £9.30.
- 4.20 The *maximum basic hourly rate* paid to *care workers* by LAs across all setting types was £13.11. Across the LAs who responded, the absolute (or highest value) maximum rate across the settings ranged from £12.35 to £13.11. The median maximum value across all care settings was £11.88.
- 4.21 The survey responses allowed consideration of the variation across the different setting types. However, it is important to note that for two of the care setting types there were only a small number of responses.
- 4.22 As shown in Figure 3, the minimum basic hourly rate paid to *care workers* by the LAs who responded was the same for numerous care setting types (£9.36). The exception was *other community care services* with a slightly higher minimum basic hourly rate of £9.55. The median provides further insight into this variation. The median values (minimum basic hourly rate) for three care setting types was £9.74, the exception being *other community care services* where the median of

<sup>&</sup>lt;sup>4</sup> 13 LAs provided at least one response to one question. However, not all LAs answered the same questions. Therefore, the base figures do not sum to 13 when the data are broken down e.g. by care setting.

the minimum basic hourly rate was £9.94 but it is important to note that the number of responses was small.

4.23 In terms of variation in maximum hourly rates for LA care workers, two care setting types (care home services and domiciliary support services) had a maximum basic hourly rate of £12.35, and day care services had a rate of £12.85. Other community care services had a slightly higher maximum basic hourly rate (£13.11). The median values of the maximum basic hourly rate for the care setting types ranged from £10.14 for care home services to £12.12 for other community care services. Again, the latter figure was based on the responses of only six LAs.

#### Contracts

4.24 Across the 14 LAs who provided information about contracts, 76% of *care worker* contracts were permanent; 25% were full-time and 51% were part-time. Furthermore, 22% of care worker contracts were non-guaranteed working/zero-hour. In at least two LAs, these were referred to as "casual" or "casual by claim" contracts, and were held in addition to substantive (guaranteed hours) contracts. A further one percent (1%) of care worker contracts were part-time temporary. Figures do not sum to 100 due to rounding.

#### **Contract options and enhancements**

- 4.25 All LAs who responded (14 of 14) reported paying sick pay and maternity pay 'above and beyond the statutory minimum' for *care workers* across all settings. Thirteen of 14 LAs (93%) also offered paternity pay above and beyond the statutory minimum. Furthermore, all LAs offered both 'paid' and 'unpaid' leave of absence, and nine of 14 (64%) offered flexible working.
- 4.26 All LAs (14 of 14) offered career progression/promotion opportunities, supervision, and personal support (e.g. counselling) to their *care workers* across all care settings. Family support (e.g. carer's leave) and appraisal were offered by 13 of the 14 (93%) LAs who responded, job share was offered by 12 (86%) and career breaks were offered by 10 (71%)
- 4.27 Enhanced rates of pay were offered to *care workers* in all LAs who responded (14 of 14) for bank holiday working and night working. Enhanced pay for overtime hours was offered by 13 of the 14 (93%) LAs across care settings. However, six (43%)

LAs paid enhanced rates for weekend working and unsocial hours, and three (21%) paid enhanced rates for shift working.

4.28 All LAs who responded (14 of 14) offered paid/reimbursed time for training/development for *care workers*, and nine (64%) offered paid or reimbursed registration fees. Thirteen (93%) paid or reimbursed Disclosure and Barring Service (DBS) fees. All 14 offered paid travel expenses for duties undertaken during work time, and eight (57%) offered some form of leisure/entertainment benefits.

## **Recruitment and retention**

- 4.29 Seven of the 13 (54%) LAs who provided a response reported difficulty in recruiting care workers. 'Pay' and 'shift work/unsocial hours' were the highest placed reasons for the difficulty, both being reported as 'extremely 'or 'very significant' by six of the seven LAs (86%). Five (71%) rated 'alternative jobs outside care sector (e.g. retail)', and four (57%) rated 'nature of the work' and 'similar jobs in health sector (e.g. NHS)' as significant factors in their recruitment difficulties.
- 4.30 Six of the 13 (46%) LAs who provided a response reported difficulty in retaining *care workers*. When asked to specify the reasons for this perceived difficulty with retention, 'shift work/unsocial hours' was the most significant factor reported as 'very' significant' by all of the five (100%) responding authorities. 'Pay', 'similar jobs in health sector' and 'alternative jobs outside care sector (e.g. retail)' were reported to be 'extremely' or 'very' significant issues by three of the five (60%) respondents.

#### Senior care workers

4.31 In this section, all references to **senior care workers** relate to senior care workers providing direct care and support to **adults** (see the Typology in Table 1).

#### Pay

4.32 The survey provided details of the pay of around 380 *senior care workers*, employed in adult social care across 11 Welsh LAs.

*Figure 4:* Summary of LA responses to questions on senior care basic pay rates, by care setting<sup>5</sup>

			£ per ho	ur		
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
Day care services	9.18	13.64	4.46	11.19	12.6	9
Care home services	10.14	14.46	4.32	12.11	13.11	7
Domiciliary support services	10.34	14.92	4.58	12.36	13.82	8
Supported housing	10.54	16.26	5.72	11.64	14.92	5
Other community care services	10.34	17.52	7.18	11.88	13.64	5

- 4.33 The *minimum basic hourly rate* paid to *senior care workers* by LAs across all setting types was £9.18. Across the LAs who responded, the absolute (or lowest value) minimum basic rate across the settings ranged from £9.18 to £10.54. The median minimum value across all care settings was £11.08. The absolute minimum and median minimum basic rates were above the current National Living Wage figure of £8.21.
- 4.34 The *maximum basic hourly rate* paid to *senior care workers* by LAs across all setting types was £17.52. Across the LAs who responded, the absolute (or highest value) maximum basic rate across the settings ranged from £13.64 to £17.52. The median maximum basic rate across all care settings was £13.82.
- 4.35 The survey responses allowed consideration of the variation across the different setting types. However, two of the care setting types (*supported housing* and *other community care services*) have only a small number of responses.
- 4.36 As shown in Figure 4, the minimum basic hourly rate paid to senior care workers by the LAs who responded was similar for four of the five care setting types (between £10.14 and £10.54). The exception was day care services with a minimum basic hourly rate of £9.18. The median provides further insight into this variation. The median value (minimum hourly rate) for day care services is £11.19, the lowest median value across care settings.

<sup>&</sup>lt;sup>5</sup> 11 LAs provided at least one response to one question. However, not all LAs answered the same questions, perhaps because not all applied. Therefore, the base figures do not sum to 11 when the data are broken down e.g. by care setting.

4.37 In terms of variation in maximum hourly rates for LA senior care workers, other community care services paid the maximum basic hourly rate of £17.52. However, the median values of the maximum basic hourly rate for the care setting types ranged from £12.60 for day care services to £14.92 for supported housing, with the median maximum pay in other community care services falling in the middle of the five care settings at £13.64.

#### Contracts

4.38 Eleven LAs who provided information about the contracts of employment they had in place at the time of the survey; 86% of *senior care worker* contracts were permanent (55% full time and 31% part time). Eight percent (8%) of *senior care worker* contracts were for non-guaranteed working/zero-hour. A further four percent (4%) of care worker contracts were temporary, and two percent (2%) were fixedterm.

#### **Contract options and enhancements**

- 4.39 All 12 LAs reported paying sick pay and maternity pay 'above and beyond the statutory minimum' for *senior care workers* across all settings, and 11 (92%) offered paternity pay above and beyond the statutory minimum. Furthermore, all 12 LAs offered both 'paid' and 'unpaid' leave of absence for *senior care workers*, and nine (75%) offered flexible working.
- 4.40 All 12 LAs offered supervision, appraisal and personal support (e.g. counselling) to their **senior care workers** across all care settings. Career progression/promotion opportunities, job share opportunities, and family support (e.g. carers leave) were available to **senior care workers** in 10 (83%) of responding LAs.
- 4.41 All 12 of the responding LAs offered enhanced rates of pay to senior care workers for bank holiday working across all care settings. Eleven (92%) paid senior care workers enhancements for overtime and 10 (83%) paid enhancements for night working. Enhancements for shift working were paid by four (33%) responding LAs, for weekend working by seven (58%), and unsocial hours by six (50%). However, enhancements for unsocial hours and weekend working were more commonly paid to staff working in day care services, care home services or domiciliary support services, as compared to supported housing or other community care services.

4.42 All 12 of the responding LAs offered paid/reimbursed time for training/development and paid/reimbursed DBS fees for their **senior care workers** across all care settings. Eight (67%) LAs offered paid or reimbursed registration fees. All 12 offered paid travel expenses for duties undertaken during work time, and seven (58%) offered some form of leisure/entertainment benefits.

#### **Recruitment and retention**

- 4.43 Two of 11 (18%) LAs who provided a response reported difficulty in recruiting *senior care workers*.
- 4.44 Only one of 11 (9%) LAs who provided a response reported difficulty in retaining *senior care workers*.

#### <u>Supervisors</u>

4.45 In this section, all references to *supervisors* relate to supervisors providing direct care and support to **adults** (see the Typology in Table 1).

#### Pay

- 4.46 The survey provided the pay details of around 330 *supervisors*, employed in adult social care across 12 Welsh LAs.
- 4.47 The survey responses allowed consideration of the variation across the different setting types. However, two of the care setting types had to be supressed due to small sample sizes.

# *Figure 5:* Summary of LA responses to questions on supervisor worker basic pay rates, by care setting<sup>6</sup>

			£ per ho	ur		
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
Day care services	9.74	19.11	9.37	13.37	18.03	8
Care home services	12.6	24.14	11.54	13.68	16.82	8
Domiciliary support services	10.54	24.14	13.6	14.46	17.84	10
Supported housing	-	-	-	-	-	-
Other community care services	-	-	-	-	-	-

<sup>&</sup>lt;sup>6</sup> 12 LAs provided at least one response to one question. However, not all LAs answered the same questions, perhaps because not all applied. Therefore, the base figures do not sum to 12 when the data are broken down e.g. by care setting.

- 4.48 The *minimum basic hourly rate* paid to *supervisors* by LAs across setting types was £9.74. Across the LAs who responded, the absolute (or lowest value) minimum basic rate across the settings ranged from £9.74 to £12.60. However, some data that were suppressed were lower than the minimums we can report here. The median minimum value across all care settings was £13.37.
- 4.49 The *maximum basic hourly rate* paid to *supervisors* by LAs across all setting types was £24.14. Across the LAs who responded, the absolute (or highest value) maximum basic rate across the settings ranged from £19.11 to £24.14. The median maximum value across all care settings was £18.03.
- 4.50 As shown in Figure 5, the minimum basic hourly rate paid to *supervisors* by the LAs who responded varied by care setting. *Day care services* paid the lowest absolute rate at £9.74, and also reported the lowest median value (minimum hourly rate) at £13.37. *Domiciliary support services* paid the highest median value (minimum hourly rate) at £14.46.
- 4.51 The maximum basic hourly rate paid to *supervisors* by the LAs who responded varied by care setting. *Day care services* paid the lowest absolute rate at £19.11; with *care home services* and *domiciliary support services* reporting the same absolute maximum basic rate of £24.14. However, the median values showed inverse results. *Day care services* paid the highest median value (maximum hourly rate) at £18.03, followed by *domiciliary support services*, and then *care home services*.

#### Contracts

4.52 Twelve LAs provided information about the contracts of employment in place at the time of the survey; 92% of *supervisor* contracts were permanent, (82% full time and 10% part time). Just two percent of *supervisor* contracts were for non-guaranteed working/zero-hour. A further five percent of care worker contracts were temporary, and two percent were fixed-term. Figures do not sum to 100 due to rounding.

# **Contract options and enhancements**

4.53 All 12 LAs who responded offered their *supervisors* sick pay and maternity pay (above and beyond statutory allowance), paid and unpaid leave of absence,

promotion/progression opportunities, supervision, personal support, paid time for training/development, reimbursed DBS fees and paid travel expenses.

4.54 Eleven (92%) LAs offered their social care supervisors paternity pay, job share, and appraisal. Paid enhancements are offered to *supervisors* for bank holiday working in 11 (92%) responding LAs, and for night working in 10 (83%).

# **Recruitment and retention**

4.55 Only one of the 11 (9%) LAs who provided a response reported difficulty in both recruiting and retaining *supervisors*.

#### **Findings: Adult Social Care**

## Independent sector social care workers

4.56 It is worth noting that while the survey responses allowed consideration of variation across the different setting types, the numbers for some care setting types were low or zero.

#### Care workers

4.57 In this section, all references to *care workers* relate to care workers providing direct care and support to **adults** (see the Typology in Table 1).

#### Pay

4.58 The survey provided details of the pay rates of around 2,400 *care workers* employed by 50 *independent sector* organisations. Figure 6 below shows responses to the pay questions on *care workers* in the *independent sector*. For this sector, *care home services* are split into those with and those without nursing.

	£ per hour						
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base	
Day care services	-	-	-	-	-	-	
Care home services with nursing	8.21	18.5	10.29	8.24	8.58	14	
Care home services without nursing	7.7	19	11.3	8.25	8.56	20	
Domiciliary support services	8.21	11	2.79	8.3	9.1	19	
Supported housing	-	-	-	-	-	-	
Other community care services	-	-	-	-	-	-	

*Figure 6:* Summary of independent sector responses to questions in care worker basic pay rates, by setting<sup>7</sup>

- 4.59 The *minimum basic hourly rate* paid to *care workers* by *independent sector organisations* who responded across all setting types was £7.70. Across the independent sector organisations who responded, the absolute (or lowest value) basic minimum rate across the settings ranged from £7.70 to £8.21. The median minimum value across all care settings was £8.25. The absolute minimum (£7.70) equates to the current National Minimum Wage for younger workers and apprentices (aged 21-24 years). However, it is below the current National Living Wage figure of £8.21, whereas the median minimum rate is slightly above.
- 4.60 The *maximum basic hourly rate* paid to *care workers* by *independent sector organisations* who responded across all setting types was £19.00. Across the independent sector organisations who responded, the absolute (or highest value) maximum basic rate across the settings ranged from £11.00 to £19.00. However, some data that were suppressed were higher than the maximums can be reported here. The median maximum value across all care settings was £9.00.
- 4.61 The survey responses allowed consideration of the variation across the different setting types. However, it is important to note that three of the care setting types responses were supressed due to small sample sizes.

<sup>&</sup>lt;sup>7</sup> 50 independent sector organisations provided at least one response to one question. However, not all organisations answered the same questions, perhaps because not all applied. Therefore, the base figures do not sum to 50 when the data are broken down e.g. by care setting.

- 4.62 As shown in Figure 6, there was quite a lot of variation in the absolute minimum values, ranging from £7.70 to £8.21. However, the median (minimum hourly rate) exhibited much less variation, ranging from £8.24 paid for *care homes services with nursing* to £8.30 paid for *domiciliary support services*.
- 4.63 Similarly, there was a lot of variation in the absolute maximum values, ranging from £11.00 to £19.00. However, the median (maximum hourly rate) exhibited much less variation, ranging from £8.56 paid for *care homes services without nursing* to £9.10 paid for *domiciliary support services*.

#### Contracts

4.64 Of the *independent sector* respondents that provided information about contracts in place at the time of the survey, 78% of the *care workers* contracts in place were permanent, (55% full-time and 23% part-time). Some 22% of all *care worker* contracts were for non-guaranteed working/zero-hour.

#### **Contract options and enhancements**

- 4.65 Forty-six *independent sector* organisations provided responses around contract options and enhancements. Thirty (65%) of those that responded offered their *care workers* flexible working arrangements, 28 (61%) offered unpaid leave, and 27 (59%) offered paid leave. However, only seven (15%) offered sick pay and paternity pay above and beyond the statutory allowance, with nine (20%) offering maternity pay above and beyond the statutory allowance.
- 4.66 All of those that responded offered supervision, 45 (98%) offered appraisal, and 32 (70%) offered personal support. Job share and career breaks were offered by 16 (35%) *independent sector* respondents, with family support offered by 13 (28%).
- 4.67 Paid enhancements were offered to *care workers* for bank holiday working in 34 (74%) of the responding *independent sector* organisations, and for night working in 12 (26%).

#### **Recruitment and retention**

4.68 Across 45 *independent sector* organisations who responded to the question, 32 (71%) reported difficulty in recruiting *care workers*. Of these, 70% (21 of 30) noted that 'pay' was an 'extremely' or 'very' significant issue, 73% (22 of 30) selected 'similar jobs in health sector (e.g. NHS)' and 'similar jobs in care sector', and 76%

(22 of 29) selected 'alternative jobs outside care sector (e.g. retail)'. 'Low status of role', 'nature of work' and 'shift work/unsocial hours' were also noted as significant issues for over 50% of respondents.

4.69 When asked about retention, 18 of the 46 (39%) *independent sector* organisations who responded reported difficulty retaining *care workers*. When asked to specify reason(s) for this difficulty, 88% (14 of 16 respondents) replied that 'similar jobs in health sector (e.g. NHS)' was 'extremely' or 'very' significant, 75% (12 of 16) said 'similar jobs in the care sector', and 73% (11 of 15) said 'alternative jobs outside care sector (e.g. retail)'. Other reasons selected by over half of the respondents were 'pay' (11 of 16) and 'nature of work' (10 of 16).

#### Senior care workers

4.70 In this section, all references to **senior care workers** relate to senior care workers providing direct care and support to **adults** (see the Typology in Table 1).

Pay

4.71 The survey provided details of the pay of around 120 *senior care workers*, employed in adult social care in 28 *independent sector* organisations.

*Figure 7:* Summary of independent sector responses to questions on senior care worker basic pay rates, by care setting<sup>8</sup>

			£ per ho	ur		
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
Day care services	-	-	-	-	-	0
Care home services with nursing	8.49	10.15	1.66	8.7	8.7	7
Care home services without nursing	8.4	9.49	1.09	8.82	8.82	12
Domiciliary support services	8.57	11.2	2.63	9.33	9.56	11
Supported housing	-	-	-	-	-	-
Other community care services	-	-	-	-	-	0

# 4.72 The *minimum basic hourly rate* paid to *senior care workers* by *independent sector* organisations for all setting types was £8.40. Across the independent sector

<sup>&</sup>lt;sup>8</sup> 28 independent sector organisations provided at least one response to one question. However, not all organisations answered the same questions, perhaps because not all applied. Therefore, the base figures do not sum to 28 when the data are broken down e.g. by care setting.

organisations who responded, the absolute (or lowest value) minimum basic rate across the settings ranged from £8.40 to £8.57. The median minimum value across all care settings was £8.80.

- 4.73 The *maximum basic hourly rate* paid to *senior care workers* by the *independent sector* organisations for all setting types was £11.20. Across the independent sector organisations who responded, the absolute (or highest value) maximum basic rate across the settings ranged from £9.49 to £11.20. The median maximum value across all care settings was £9.00.
- 4.74 As shown in Figure 7, the minimum basic hourly rate paid to senior care workers by independent sector organisations who responded was similar (between £8.40 and £8.57). The median provides further insight, with the median value (minimum basic hourly rate) for domiciliary support services reported as £9.33, which is £0.63 higher than care home services with nursing, for which a median (minimum basic hourly rate) of £8.70 is reported.
- 4.75 In terms of variation in maximum hourly rates for senior care workers employed by independent sector organisations, domiciliary support services paid the highest absolute maximum value of £11.20. Similarly, domiciliary support services also paid the highest median value (maximum hourly rate) of £9.56.

#### Contracts

4.76 Of *independent sector* respondents that provided information about contracts in place at the time of the survey, 98% of the *senior care workers'* contracts were permanent, (81% full-time and 17% part-time). Two percent of all *senior care workers'* contracts were for non-guaranteed working/zero-hour.

# **Contract options and enhancements**

4.77 Twenty-nine *independent sector* organisations provided responses around contract options and enhancements. Twelve (41%) of those that responded offered their *senior care workers* flexible working arrangements, 17 (59%) offered unpaid leave, and 19 (66%) offered paid leave. However, only three (10%) offered sick pay above and beyond the statutory allowance, and four (14%) offered paternity pay above and beyond the statutory allowance, with five (17%) offering maternity pay above and beyond the statutory allowance.

- 4.78 Twenty-eight (97%) of those that responded offered supervision, 27 (93%) offered appraisal, and 19 (66%) offered personal support. Job share was offered by seven (24%) independent sector respondents, with career breaks offered by six (21%), and family support offered by nine (31%).
- 4.79 Paid enhancements were offered to **senior care workers** for bank holiday working in 19 (66%) of the responding *independent sector* organisations, and for night working in four (14%).

# **Recruitment and retention**

- 4.80 Across the 29 *independent sector* organisations who responded to the question, eight (28%) reported difficulty in recruiting *senior care workers*. 'Low status of role' was selected as a 'very' or 'extremely' significant reason for this perceived difficulty by all responding organisations, seven of eight respondents (88%) noted 'similar jobs in health sector (e.g. NHS)' as a significant factor, and six of eight respondents (75%) selected 'nature of work' and 'shift work/unsocial hours'.
- 4.81 When asked about retention, just two (7%) of the 28 *independent sector* organisations who responded reported difficulty retaining *senior care workers*.

# Supervisors

4.82 In this section, all references to *supervisors* relate to supervisors providing direct care and support to **adults** (see the Typology in Table 1).

# Pay

4.83 The survey provided details of the pay of around 55 *supervisors*, employed in adult social care in 13 *independent sector* organisations.

*Figure 8:* Summary of independent sector responses to questions on supervisor basic pay rates, by care setting<sup>9</sup>

			£ per hou	ır		
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
Day care services	-	-	-	-	-	0
Care home services with nursing	-	-	-	-	-	0
Care home services without nursing	9	18.56	9.56	10.1	12.5	6
Domiciliary support services	9.21	14	4.79	10.04	10.04	8
Supported housing	-	-	-	-	-	-
Other community care services	-	-	-	-	-	0

- 4.84 The *minimum basic hourly rate* paid to *supervisors* by *independent sector* organisations across all setting types was £9.00. Across the independent sector organisations who responded, the absolute (or lowest value) minimum basic rate across the settings ranged from £9.00 to £9.21. The median minimum value across all care settings was £10.10.
- 4.85 The *maximum basic hourly rate* paid to *supervisors* by *independent sector* organisations across all setting types was £18.56. Across the independent sector organisations who responded, the absolute (or highest value) maximum basic rate across the settings ranged from £14.00 to £18.56. The median maximum value across all care settings was £10.26.
- 4.86 As shown in Figure 8, the minimum basic hourly rate paid to *supervisors* by *independent sector* organisations who responded was £9.00 paid for *Care home services without nursing*. However, the median value (minimum hourly rate) for *care home services without nursing* was higher than *domiciliary support services* (£10.10 compared to £10.04).
- 4.87 In terms of variation in maximum basic hourly rates paid to *supervisors* by *independent sector* organisations, those employed in the *care home services without nursing* setting receive higher median (maximum) basic pay (£12.50) than those employed in the *domiciliary support services* (£10.04).

<sup>&</sup>lt;sup>9</sup> 13 independent sector organisations provided at least one response to one question. However, not all organisations answered the same questions, perhaps because not all applied. Therefore, the base figures do not sum to 13 when the data are broken down e.g. by care setting.

# Contracts

4.88 Of the *independent sector* respondents that provided information about contracts in place at the time of the survey, all *supervisor* contracts were full-time and permanent. No *supervisor* contracts were non-guaranteed working/zero-hour.

#### **Contract options and enhancements**

- 4.89 Thirteen *independent sector* organisations provided responses around contract options and enhancements. Nine (69%) of those who responded offered their *supervisors* flexible working arrangements, six (46%) offered unpaid leave, and seven (54%) offered paid leave. Four (31%) offered sick pay above and beyond the statutory allowance, and none offered paternity pay above and beyond the statutory allowance, with just one (8%) offering maternity pay above and beyond the statutory allowance.
- 4.90 Twelve of the 13 (92%) independent sector organisations that responded offered supervision and appraisal, and eight (62%) offered personal support. Job share and career breaks were offered by four (31%) *independent sector* respondents, and family support was offered by six (46%).
- 4.91 Paid enhancements were offered to senior care workers for bank holiday working in eight of the 13 (62%) responding *independent sector* organisations, but no paid enhancements were offered for night working.

# **Recruitment and retention**

- 4.92 Four of the 13 (31%) *independent sector* employers that responded to the question reported that they faced difficulty recruiting *supervisors*, however none reported difficulty retaining supervisors once in post.
- 4.93 In terms of recruitment issues, 'similar jobs in health sector (e.g. NHS)' was selected as a 'very' or 'extremely' significant issue in all responding organisations.
  'Pay', 'nature of work', 'shift work/unsocial hours' 'alternative jobs outside care sector' and 'emotional burden' were all listed as significant issues by 75% (3 of 4) respondents.

#### Health care support workers

4.94 All data associated with *health care support workers* employed by *independent sector* organisations have been suppressed, inclusive of pay, contracts, contract options and enhancements, and recruitment and retention. This is due to the base figures (the number of employers responding to each question) being lower than five, meaning these data pose a disclosure risk.

# **Findings: Adult Social Care**

#### Third sector social care workers

4.95 It is worth noting that while the survey responses allowed consideration of variation across the different setting types, the numbers for some care setting types are low or zero. This was the case for all **third sector** settings.

#### Care workers

4.96 In this section, all references to *care workers* relate to care workers providing 'frontline' direct care and support to **adults** (see the Typology in Table 1).

#### Pay

4.97 Pay data associated with *care workers* employed by the *third sector* have been suppressed. This was due to the base figures (the number of employers responding to each pay question) being lower than five, meaning these data pose a disclosure risk.

#### Contracts

4.98 Across the six *third sector* respondents who provided information about contracts, 89% of the *care workers* contracts were permanent, (62% full-time and 27% part-time). Four percent of all *care worker* contracts were for non-guaranteed working/zero-hour. A further seven percent of care worker contracts were fixed-term.

#### **Contract options and enhancements**

4.99 Six *third sector* organisations provided responses around contract options and enhancements. Five (83%) of those who responded offered their *care workers* flexible working arrangements, three (50%) offered unpaid leave, and five (83%) offered paid leave. However, two (33%) offered sick pay above and beyond the statutory allowance, and three (50%) offered paternity pay above and beyond the statutory allowance, with three (50%) offering maternity pay above and beyond the statutory allowance.

- 4.100 All of those that responded offer supervision and appraisal, and five (83%) offered personal support. Job share was offered by two (33%) of the *third sector* respondents, family support was offered by three (50%), and career breaks were offered by one (17%).
- 4.101 Paid enhancements were offered to *care workers* for bank holiday working in three (50%) of the responding *third sector* organisations, two offered paid enhancements for night working and unsocial hours, and one (17%) offered paid enhancements for weekend working and overtime. None paid enhancements for shift working.

## **Recruitment and retention**

- 4.102 Five of the six (83%) *third sector* employers that responded to the question reported difficulty recruiting *care workers*, however none reported difficulty retaining care workers once in post.
- 4.103 In terms of recruitment issues, 'pay' was selected as a 'very' or 'extremely' significant factor for four of the five respondents (80%), while 'alternative jobs outside care sector' was an issue for three of the five (60%) respondents.

#### Senior care workers

4.104 All data associated with *senior care workers* employed by the *third sector* have been suppressed, inclusive of pay, contracts, contract options and enhancements, and recruitment and retention. This is due to the base figures (the number of employers responding to each question) being lower than five, meaning these data pose a disclosure risk.

#### **Supervisors**

4.105 All data associated with *supervisors* employed by the *third sector* have been suppressed, inclusive of pay, contracts, contract options and enhancements, and recruitment and retention. This is due to the base figures (the number of employers responding to each question) being lower than five, meaning these data pose a disclosure risk.

# Findings: NHS health care support workers

4.106 Across the health sector, the survey sought information on one worker role, *health care support workers* (see the Typology in Table 1). This was based on advice from specialist HR officers in the NHS who confirmed this role covered all workers in the category included in the scope of the research.

#### Pay

- 4.107 The survey provided the details of the basic pay rates of around 9,400 *health care support workers*, employed across the NHS in Wales, based on returns from seven health boards and trusts. There was little variation across the NHS responses received. This was expected as *health care support workers* are paid on the 'Agenda for Change' Band 2 and Band 3 pay scales, with posts being evaluated based on the role, responsibilities and qualifications.
- 4.108 The *minimum basic hourly rate* paid to *health care support workers* was £9.02. Across the health boards and trusts that responded, the minimum rate ranged from £9.02 to £9.03. The median value was £9.03. The absolute minimum and median minimum rates are above the current National Living Wage figure of £8.21 but below the real living wage referred to in para. 3.22.
- 4.109 The *maximum basic hourly rate* paid to *health care support workers* was £10.64. Across the health boards and trusts that responded, the maximum basic rate ranged from £9.73 to £10.64. The median value was £10.63.

#### Contracts

4.110 Across the health boards and trusts who responded, 77% of the contracts extended to *health care support workers* were permanent. Just over half (56%) were permanent full-time contracts and 21% were permanent part-time contracts. The NHS organisations reported that 21% of all their *health care support worker* contracts were non-guaranteed working/zero-hour. The remaining two percent (2%) of contracts were fixed-term.

# **Contract options and enhancements**

4.111 All of the NHS health boards and trusts that responded to the survey (7 of 7) reported offering *health care support workers* flexible working, sick pay, maternity pay and paternity pay above and beyond the statutory allowance, paid and unpaid

leave of absence, time off in lieu, job share, career breaks, career progression/promotion opportunities, supervision, appraisal, personal support (e.g. counselling), and family support (e.g. carers leave).

- 4.112 All NHS respondents reported paying enhanced rates for weekend working, bank holiday working, and unsocial hours. Six of the seven respondents (86%) paid enhancements for overtime and night working, and five (71%) paid enhancements for shift working.
- 4.113 All NHS respondents confirmed that DBS fees were paid/reimbursed, and six of the seven (86%) paid/reimbursed time for training and development.
- 4.114 All respondents paid travel expenses for duties undertaken during work time, and five (71%) also offered a pool/company car.

#### **Recruitment and retention**

- 4.115 None of the NHS health boards and trusts who responded to the survey reported difficulty with recruiting *health care support workers*.
- 4.116 One of the seven respondents (14%) noted difficulty with retaining *health care support workers*.

# 5. Wales-wide adult social care and NHS employer surveys: Comparisons between social care organisations and the NHS

- 5.1 This section brings together the data presented in Section 4 to facilitate comparisons and illustrate variation amongst social care organisations and between them and the NHS.
- 5.2 The survey findings that follow are reported for the social care workforce and the NHS, and by type of worker (care workers, senior care workers, supervisors and health care support workers).

Pay

5.3 The survey responses provided details of the pay rates across adult care settings in 14 Welsh LAs, 53 independent sector organisations, 7 third sector organisations, and 7 NHS health boards and trusts. Figure 9 below shows responses to the pay questions for all sectors and worker types.

Figure 9: Summary of responses to questions on basic pay rates, by sector and
worker type

			£ per ho	ur		
	Minimum	Maximum	Range	Median of minimum hourly rate	Median of maximum hourly rate	Base
LA						
Care workers	9.36	13.11	3.75	9.74	11.88	13
Senior care workers	9.18	17.52	8.34	11.08	13.82	12
Supervisors	9.74	24.14	14.4	13.37	18.03	11
Health care support workers	-	-	-	-	-	0
Private / independent sector						
Care workers	7.7	-	-	8.25	9	50
Senior care workers	8.4	11.2	2.8	8.8	9	28
Supervisors	9	18.56	9.56	10.1	10.26	13
Health care support workers	-	-	-	-	-	-
Third sector						
Care workers	-	-	-	-	-	-
Senior care workers	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	0
NHS						
Care workers	-	-	-	-	-	0
Senior care workers	-	-	-	-	-	0
Supervisors	-	-	-	-	-	0
Health care support workers	9.02	10.64	1.62	9.03	10.63	7

5.4 For ease of reference, the rates of pay for *health care support workers* have been included in the paragraphs relating to *care workers*. Only NHS health boards and trusts, and independent sector employers provided data on health care support

workers. However, data for independent sector health care support workers have been suppressed due to disclosure concerns. Therefore, the only data that can be disseminated around health care support worker pay has been provided by the NHS. As a result, caution must be used when interpreting these figures.

- 5.5 Across all the employers who responded, the absolute (lowest value) *minimum* basic hourly rate paid to care workers/health care support workers ranged from £7.70 (independent sector employees aged 21-24) to £9.36 (LAs). The median minimum value across responding sectors was also lower for independent sector organisations (£8.25) than for LAs (£9.74) and for NHS health care support workers (£9.03).
- 5.6 Across the employers who responded, the absolute (highest value) *maximum basic hourly rate* paid to *care workers/health care support workers* ranged from £10.64 (NHS) to £13.11 (LAs). However, these figures should be viewed with caution as data on the independent social care sector's maximum pay have been suppressed. The median maximum rate across responding sectors was lower for independent sector employers (£9.00) than for LAs (£11.88) and for NHS health care support workers (£10.63).
- 5.7 Across all responding sectors, the absolute (lowest value) *minimum basic hourly rate* paid to *senior care workers* was by independent sector employers at £8.40, with LAs paying a minimum of £9.18. The median minimum value across responding sectors was also lower for independent sector providers (£8.80) than for LAs (£11.08).
- 5.8 Across all responding sectors, the absolute (highest value) maximum basic hourly rate paid to senior care workers was by LAs at £17.52, with independent sector employers paying a maximum of £11.20. The median maximum value across responding sectors was also lower for independent sector providers (£9.00) than for LAs (£13.82).
- 5.9 Across all responding sectors, the absolute (lowest value) *minimum basic hourly rate* paid to *supervisors* was by independent employers at £9.00, with LAs paying a minimum of £9.74. The median minimum value across responding sectors was also lower for independent sector providers (£10.10) than for LAs (£13.37).

5.10 Across all responding sectors, the absolute (highest value) *maximum hourly rate* paid to *supervisors* was by LAs (£24.14), with independent sector employers paying a maximum of £18.56. The median maximum value across responding sectors was also lower for independent providers (£10.26) than for LAs (£18.03).

#### Contracts

5.11 The survey responses provided details of contract conditions across adult care settings in 14 Welsh LAs, 53 independent sector organisations, 7 third sector organisations, and 7 NHS health boards/trusts. Figure 10 below shows responses to the contract questions for all sectors and worker types.

*Figure 10:* Summary of responses to questions on contracts, by sector and worker type

	Full time - Perm	Full time - Fixed	Full time - Temp	Part time - Perm	Part time - Fixed	Part time - Temp	Total full time + part time	Zero-hour	Base
LA									
Care work ers	25%	0%	0%	51%	0%	1%	78%	22%	14
Senior care workers	55%	2%	3%	31%	0%	1%	92%	8%	11
Supervisors	82%	1%	3%	10%	1%	2%	98%	2%	12
Health care support workers	-	-	-	-	-	-	-	-	0
Private / independent sector									
Care work ers	55%	0%	0%	23%	0%	0%	78%	22%	46
Senior care workers	81%	0%	0%	17%	0%	0%	98%	2%	27
Supervisors	100%	0%	0%	0%	0%	0%	100%	0%	12
Health care support workers	-	-	-	-	-	-	-	-	-
Third sector									
Care work ers	62%	4%	0%	27%	4%	0%	96%	4%	6
Senior care workers	-	-	-	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	-	-	-	0
NHS									
Care work ers	-	-	-	-	-	-	-	-	0
Senior care workers	-	-	-	-	-	-	-	-	0
Supervisors	-	-	-	-	-	-	-	-	0
Health care support workers	56%	1%	0%	21%	1%	0%	79%	21%	7

5.12 The proportion of *care workers* employed on a *full-time permanent* contract was relatively similar at 55% for the independent sector, 62% for the third sector, and 56% for the NHS (although these employees are *health care support workers* and not care workers). LA employees, however, were roughly half as likely to be employed on a full-time permanent contract, at 25%. When *part-time permanent* contracts are examined, it is clear again that LAs are outliers, employing roughly twice as many part-time permanent staff as the three other sectors. LAs, then,

employed roughly twice as many part-time permanent staff as full-time permanent staff, whereas the other three sectors employed roughly twice as many full-time permanent staff as part-time permanent staff.

- 5.13 The proportion of *care workers* employed on a *non-guaranteed working/zero-hour* contracts was similar at 22% for LAs, 22% for independent sector organisations, and 21% for the NHS (although these employees are *health care support workers* and not care workers). Third sector social care workers, however, were far less likely to be employed on non-guaranteed working/zero-hour contracts, at 4%.
- 5.14 Examining the contracts data on senior care workers and supervisors it is apparent that as staff become more senior they are less likely to be employed on non-guaranteed/zero-hour contracts. Less than 10% of the contracts offered to senior care workers and supervisors by LAs and independent sector employers were non-guaranteed/zero-hour. Again, independent sector employers were slightly more likely to employ these staff on *full-time permanent contracts* than LAs.

#### **Contract options and enhancements**

5.15 The survey responses provided details of contract options and enhancements across adult care settings in 14 Welsh LAs, 53 independent sector organisations, 7 third sector organisations, and 7 NHS health boards and trusts. The survey did not seek values on enhancements but as the survey questions sought information about **basic** rates of pay, any paid enhancements are important in understanding how the value of the pay workers actually receive is affected by different factors. Figure 11 below shows responses to the contract options and enhancements questions for all sectors and worker types.

# *Figure 11:* Summary of responses to questions on contract options and enhancements, by sector and worker type

	Shift working	Weekend working	Bank holiday working	Night working	Unsocial hours	Overtime	Base
LA							
Care work ers	21%	43%	100%	100%	43%	93%	14
Senior care workers	33%	58%	100%	83%	50%	92%	12
Supervisors	17%	58%	92%	83%	50%	58%	12
Health care support workers	-	-	-	-	-	-	0
Private / independent sector	r						
Care work ers	13%	28%	74%	26%	11%	24%	46
Senior care workers	3%	24%	66%	14%	7%	24%	29
Supervisors	0%	23%	62%	0%	8%	15%	13
Health care support workers	-	-	-	-	-	-	-
Third sector							
Care work ers	0%	17%	50%	33%	33%	17%	6
Senior care workers	-	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	-	0
NHS							
Care workers	-	-	-	-	-	-	0
Senior care workers	-	-	-	-	-	-	0
Supervisors	-	-	-	-	-	-	0
Health care support workers	71%	100%	100%	86%	100%	86%	7

- 5.16 Across the social care sectors and NHS, there was a great deal of variation in which non-core working patterns were paid for through enhancements. *Bank holiday work* was compensated through enhancements by almost all LAs who responded; all paid bank holiday enhancements to care workers and senior care workers, and 11 of 12 (92%) to supervisors. Similarly, all health care support workers employed by the NHS who responded were entitled to enhanced pay for bank holiday working. In contrast, between half and three quarters of third sector and independent sector respondents offered enhanced pay for bank holiday work, regardless of worker type.
- 5.17 Night work is compensated through enhancements by almost all LAs who responded; all paid night work enhancements to care workers, 10 of 12 (83%) to senior care workers and supervisors. Similarly, six of seven (86%) of the NHS health boards and trusts who responded paid enhancements to health care support workers for night work. However, fewer than 35% of third and independent sector respondents offered enhanced pay for night work, regardless of worker type.
- 5.18 Overtime was compensated through enhancements by almost all LAs who responded; 13 of 14 (93%) paid overtime to care workers, 11 of 12 (92%) to senior care workers, and seven of 12 (58%) to supervisors. Similarly, six of seven (86%) of

NHS health boards and trusts who responded paid overtime to health care support workers for overtime. However, fewer than 25% of third and independent sector respondents offered enhanced pay for overtime, regardless of worker type.

	Flexible working arrangements	Sick pay	Maternity pay	Paternity pay	Paid leave of absence	Unpaid leave of absence	Time off in lieu of additional hours worked	Base
LA								
Care work ers	64%	100%	100%	93%	100%	100%	64%	14
Senior care work ers	75%	100%	100%	92%	100%	100%	75%	12
Supervisors	83%	100%	100%	92%	100%	100%	83%	12
Health care support workers	-	-	-	-	-	-	-	0
Private / independent sector								
Care work ers	65%	15%	20%	15%	59%	61%	35%	46
Senior care workers	41%	10%	17%	14%	66%	59%	38%	29
Supervisors	69%	31%	8%	0%	54%	46%	46%	13
Health care support workers	-	-	-	-	-	-	-	-
Third sector								
Care work ers	83%	33%	50%	50%	83%	50%	83%	6
Senior care work ers	-	-	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	-	-	0
NHS								
Care work ers	-	-	-	-	-	-	-	0
Senior care work ers	-	-	-	-	-	-	-	0
Supervisors	-	-	-	-	-	-	-	0
Health care support workers	100%	100%	100%	100%	100%	100%	100%	7

*Figure 12:* Summary of responses to questions on contract options and enhancement, by sector and worker type

- 5.19 **Sick pay (above and beyond the statutory allowance** was provided through enhancements by all LAs who responded, regardless of worker type. Similarly, all NHS health boards and trusts who responded offered sick pay above and beyond the statutory allowance to health care support workers. However, fewer than 35% of third and independent sector respondents offered sick pay above and beyond the statutory allowance, regardless of worker type.
- 5.20 *Maternity pay above and beyond the statutory allowance* was provided through enhancements by all LAs who responded, regardless of worker type. Similarly, all NHS health boards and trusts who responded offered maternity pay above and beyond the statutory allowance to health care support workers. However, only a maximum of 50% of third sector respondents offered maternity pay above and beyond the statutory allowance and a maximum of 20% of independent sector respondents offered this enhancement, regardless of worker type.

5.21 Flexible working arrangements were offered by most respondents, regardless of sector. Nine of 14 (64%) LA respondents offered flexible working arrangements to care workers, nine of 12 (75%) to senior care workers, and 10 of 12 (83%) to supervisors. All NHS health boards and trusts who responded provided flexible working arrangements for health care support workers. Thirty of 46 (65%) independent sector respondents offered flexible working arrangements to care workers, 12 of 29 (41%) to senior care workers, and 9 of 13 (69%) to supervisors. Five of six (83%) third sector respondents offered flexible working arrangements to care workers.

Figure 13: Summary of responses to questions on contract options and
enhancement, by sector and worker type

	Job share	Career breaks	Career progression / promotion opportunities		Appraisal	Personal support	Family support	Base
LA								
Care work ers	86%	71%	100%	100%	93%	100%	93%	14
Senior care workers	83%	75%	83%	100%	100%	100%	83%	12
Supervisors	92%	67%	100%	100%	92%	100%	83%	12
Health care support workers	-	-	-	-	-	-	-	0
Private / independent sector								
Care work ers	35%	35%	80%	100%	98%	70%	28%	46
Senior care workers	24%	21%	69%	97%	93%	66%	31%	29
Supervisors	31%	31%	77%	92%	92%	62%	46%	13
Health care support workers	-	-	-	-	-	-	-	-
Third sector								
Care work ers	33%	17%	67%	100%	100%	83%	50%	6
Senior care workers	-	-	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	-	-	0
NHS								
Care work ers	-	-	-	-	-	-	-	0
Senior care workers	-	-	-	-	-	-	-	0
Supervisors	-	-	-	-	-	-	-	0
Health care support workers	100%	100%	100%	100%	100%	100%	100%	7

- 5.22 Supervision was offered by all LAs who responded, regardless of worker type. Similarly, supervision was offered to health care support workers by all NHS health boards and trusts who responded. Additionally, all independent and third sector respondents offered supervision to care workers. Similarly, most independent sector 28 of 29 (97%) respondents offered supervision to senior care workers and 12 of 13 to supervisors (92%).
- 5.23 *Family support* (e.g. carers leave, childcare facilities) was offered by most LA respondents, regardless of worker type; 13 of 14 (93%) of respondents offered family support to care workers, 10 of 12 (83%) to senior care workers, and 10 of 12

(83%) to supervisors. All NHS health boards and trusts who responded offered family support to health care support workers. However, a maximum of 50% of independent and third sector respondents offered family support, regardless of worker type.

5.24 **Job share** was offered by most LA respondents, regardless of worker type; 12 of 14 (86%) of respondents offer job share to care workers, 10 of 12 (83%) to senior care workers, and 11 of 12 (92%) to supervisors. All NHS health boards and trusts who responded offered job share to health care support workers. However, a maximum of 35% of independent and third sector respondents offered job share, regardless of worker type.

<i>Figure 14:</i> Summary of responses to questions on contract options and
enhancements, by sector and worker type

	Paid or reimbursed time for training / development	Paid or reimbursed registration fees	Paid or reimbursed DBS fees	Medical insurance	Leisure / entertainment benefits	Mobile phone	IT equipment / laptop	Base
LA								
Care work ers	100%	64%	93%	7%	57%	43%	29%	14
Senior care workers	100%	67%	100%	8%	58%	42%	33%	12
Supervisors	100%	67%	100%	8%	50%	50%	33%	12
Health care support workers	-	-	-	-	-	-	-	0
Private / independent sector								
Care work ers	89%	46%	72%	7%	11%	11%	9%	46
Senior care workers	83%	45%	83%	14%	7%	17%	10%	29
Supervisors	85%	38%	85%	8%	8%	23%	38%	13
Health care support workers	-	-	-	-	-	-	-	-
Third sector								
Care work ers	100%	67%	100%	0%	33%	33%	50%	6
Senior care workers	-	-	-	-	-	-	-	-
Supervisors	-	-	-	-	-	-	-	-
Health care support workers	-	-	-	-	-	-	-	0
NHS								
Care work ers	-	-	-	-	-	-	-	0
Senior care workers	-	-	-	-	-	-	-	0
Supervisors	-	-	-	-	-	-	-	0
Health care support workers	86%	0%	100%	0%	29%	14%	14%	7

5.25 **Training/development** time was paid for or reimbursed by all LA respondents regardless of worker type and six of seven (86%) NHS health boards and trusts who responded. Similarly, all third sector respondents paid for training/development time for care workers. Forty-one of 46 (89%) independent sector respondents offered this to care workers, 24 of 29 (83%) senior care workers and 11 of 13 (85%) of supervisors

- 5.26 **DBS fees** were paid or reimbursed by almost all LA respondents; 13 of 14 (93%) respondents paid care workers' DBS fees and all (12 of 12) paid senior care workers' and supervisors' DBS fees. All (seven of seven) NHS health boards and trusts who responded paid the DBS fees of health care support workers, while all (six of six) third sector respondents paid the DBS fees of care workers. For the independent sector, 33 of 46 (72%) paid care workers' DBS fees, 24 of 29 (83%) paid senior care workers', and 11 of 13 (85%) paid supervisors' fees.
- 5.27 Medical insurance was paid for or reimbursed by very few respondents. No NHS or third sector respondents paid or reimbursed medical insurance. Just one of 14 (7%) LA respondents paid or reimbursed medical insurance for care workers, one of 12 (8%) for senior care workers and supervisors. Similarly, three of 46 (7%) independent sector respondents paid or reimbursed medical insurance for care workers, four of 29 (14%) for senior care workers, and one of 13 (8%) for supervisors.

	Pay travel expenses between home and work	Pay travel expenses for duties undertaken during work time	Provide a pool / company car	Base
LA				
Care workers	14%	100%	21%	14
Senior care workers	8%	100%	33%	12
Supervisors	0%	100%	25%	12
Health care support workers	-	-	-	0
Private / independent sector				
Care workers	4%	76%	33%	46
Senior care workers	3%	69%	31%	29
Supervisors	0%	77%	38%	13
Health care support workers	-	-	-	-
Third sector				
Care workers	0%	100%	33%	6
Senior care workers	-	-	-	-
Supervisors	-	-	-	-
Health care support workers	-	-	-	0
NHS				
Care workers	-	-	-	0
Senior care workers	-	-	-	0
Supervisors	-	-	-	0
Health care support workers	0%	100%	71%	7

*Figure 15:* Summary of responses to questions on contract options and enhancements, by sector and worker type

5.28 **Travel between home and work** was paid for by very few respondents, regardless of sector and worker type. Only two of 14 (14%) LA respondents paid care workers for this type of travel, while one of 12 (8%) paid senior care workers. Only two of 46

(4%) of independent sector respondents paid care workers for travel between home and work, and one of 29 (3%) paid senior care workers. No respondents paid this enhancement to supervisors.

- 5.29 **Travel expenses paid for duties undertaken during work time** were paid by all LA, third sector, and NHS health board and trust respondents, regardless of worker type. Thirty-five of 46 (76%) independent sector respondents paid these expenses for care workers, with 20 of 29 (69%) paying them for senior care workers, and 10 of 13 (77%) for supervisors.
- 5.30 **Company/pool cars** were provided by fewer than 40% of LA, independent, and third sector respondents, regardless of type. However, five of seven (71%) NHS health board and trust respondents provided company/pool cars.

#### **Recruitment and retention**

5.31 The survey responses provided details of recruitment and retention difficulties faced across adult care settings by 14 Welsh LAs, 53 independent sector organisations, 7 third sector organisations, and 7 NHS health boards and trusts. Figure 16 below shows responses to the contract questions for all sectors and worker types.

Figure 16: Summary of responses to questions on recruitment and retention, by	y
sector and worker type	

	Percentage of respondents who reported difficulty recruiting staff	Base	Percentage of respondents who reported difficulty retaining staff	Base
LA				
Care workers	54%	13	46%	13
Senior care work ers	18%	11	9%	11
Supervisors	9%	11	9%	11
Health care support workers	-	0	-	0
Private / independent sector				
Care work ers	71%	45	39%	46
Senior care work ers	28%	29	7%	28
Supervisors	31%	13	0%	11
Health care support workers	-	-	-	-
Third sector				
Care work ers	83%	6	0%	6
Senior care work ers	-	-	-	-
Supervisors	-	-	-	-
Health care support workers	-	0	-	0
NHS				
Care work ers	-	0	-	0
Senior care work ers	-	0	-	0
Supervisors	-	0	-	0
Health care support workers	0%	7	14%	7

- 5.32 All social care organisations that employed *care workers* reported difficulty in recruiting staff; seven of 13 (54%) *LA* respondents, 32 of 45 (71%) *independent sector* respondents, and five of six (83%) *third sector* respondents.
- 5.33 However, this pattern differs regarding the retention of *care worker* staff; six of 13 (46%) *LA* respondents and 18 of 46 (39%) of *independent sector* respondents reported difficulty retaining staff but none of the *third sector* respondents did.
- 5.34 As seniority increases, difficulties with recruitment diminish amongst *LA* and *independent sector* organisations (the two sectors that can be reported). Two of 11 (18%) LA respondents reported difficulty recruiting *senior care workers*, and just one of 11 (9%) reported difficulty recruiting *supervisors*. Similarly, eight of 29 (28%) and four of 13 (31%) independent sector respondents reported difficulty recruiting senior care workers and supervisors, respectively.
- 5.35 As seniority increases difficulties with retention also diminish across *LA* and *independent sector* employers, (the two sectors that can be reported). One of 11 (9%) LA respondent reported difficulty retaining *senior care workers* and *supervisors*. Similarly, two of 28 (7%) of independent sector respondents reported difficulty retaining senior care workers but none reported difficult retaining supervisors.
- 5.36 **NHS health boards and trusts** reported less difficulty with recruitment and retention of *health care support workers* than similar workers (care workers) employed in social care. No health boards or trusts reported difficulty with recruitment and just one of seven (14%) noted a problem with retention.

#### **Geographic variation**

5.37 The survey responses were not spread evenly across Wales. Some areas of Wales had few, or no, respondents whereas others had numerous. As such, it is not possible to meaningfully report on geographic variation.

#### **Client group variation**

5.38 As with the responses on geographic variation, respondents were not evenly spread across Wales. Some areas of Wales had few, or no, respondents whereas others had numerous. As such, it is not possible to meaningfully report on client group variation.

# 6. Findings: Interviews and focus groups

- 6.1 Qualitative findings presented below include data from interviews, focus groups with employees and managers/providers, and free-text response from the Wales-wide social care and NHS employer surveys. The type of data and which part of the social care workforce they come from (LA, independent sector, third sector) accompanies quotes presented below. Additional details of participants, for example, whether they are providers, managers, care workers have not been included to ensure anonymity.
- 6.2 Overarching themes developed from analysis are:
  - Difficulties recruiting social care workers
  - Shortage of people with the right skills to recruit from
  - Challenges/nature of the work
  - Difficulties retaining social care staff
  - Comparisons between social care and health
  - The impact of recruitment and retention difficulties
  - Innovative and successful approaches to recruitment and retention

# Difficulties recruiting social care workers

- 6.3 Recruiting social care workers was highlighted as an issue faced by providers/managers. Pay and conditions were prominent reasons cited for recruitment difficulties. However, pay and conditions were not the only problems raised. Other factors included:
  - Employment contracts and job stability
  - Expectations and regulations
  - Shortage of people with the right skills to recruit from
  - Challenges/nature of the work

# Pay and conditions

6.4 Despite offering 'good conditions', being unable to pay above the minimum wage was seen as a key contributing factor by one third sector employer: 'It's probably to do with the minimum wage, a lot of people seem to be applying to show they are applying for work and then don't turn up to the interview. We have good conditions, holiday pay, good pension, we try to push that forward but it doesn't seem to pull people in, and we can't go any higher than the national minimum wage' (Third sector, interview)

Other participants made comparisons to the pay offered by other non-social care employers, specifically retail. Jobs were considered to carry less responsibility and easier working conditions than those experienced by care workers yet benefitted from higher pay rates.

'One of the main issues, the pay is low relative to other roles like supermarkets' (Independent sector, interview)

'You are asking people who are the most vulnerable in the community to do the most difficult job in the worse conditions and pay them less that what they'd get in Asda' (Independent sector, focus group)

'We do not struggle to recruit to care worker posts but the main competition we face is retail rather than care providers' (LA, survey)

There was agreement that compared to independent and third sector employers, that LAs offered more competitive pay and terms and conditions.

*'With the local authorities, their support workers tend to do less than we do but they get £2 odd more' (Third sector, focus group)* 

'What we can't do is compete with local authority pensions or things like that [...] it won't be at the same level for example as a local authority person. If somebody works in a local authority day centre and looks at the roles we are offering they are being paid more in the local authority day centre for possibly doing a lower level responsibility. Their terms and conditions in a local authority would be better than what we as a charity in the third sector would be able to offer' (Third sector, interview)

'It's (LA) a good organisation to work for and a lot of people come from private care [...] probably they are lower paid. I worked for home care

when I started and when I see the care in the private sector, they [carers] are rushed off their feet. From what I can see, the pay, terms and conditions are better with [LA]. (LA, interview)

Another LA manager reflected this perspective:

'We've just interviewed for a part and full time post and the response was amazing, the calibre of applicants was wonderful, I don't get any issues recruiting staff at all, it's never been an issue, the terms and conditions we've got with [LA], it's never been an issue' (LA, interview)

The concerns about low pay were exemplified by providers referring to staff struggling to afford vehicle repairs, having to arrange food bank vouchers, and provide advancement on new staff pay due to the gap between their benefits stopping and their pay date.

'We've got staff who when they start with us, because their benefits stop and there's a period of time when they don't have any money and they are waiting for their wages to arrive, we used to give them a sub of their wages but what we found was happening was they couldn't afford to pay it back. So now we give them food hampers' (Independent sector, focus group)

*'For us it can be a petrol sub upfront, because they can't, until they get their wages, pay out for petrol' (Independent, focus group)* 

*'I've got staff where I've had to ring social services and organise food bank vouchers (Independent sector, focus group)* 

#### Contracts and stability

6.5 Employment contracts and job stability in the context of casual workers and nonguaranteed working hours, was highlighted by a manager as contributing to difficulties in recruitment.

> 'Yes, I think it's [recruitment] a massive issue, nationally, as well as our own organisation [...] I think the system we are relying on is more aimed at casual workers, zero hours contracts' (LA, interview)

However, for some independent providers, offering casual and nonguaranteed working hours meant being responsive to those they are providing a service for, and flexibility for their staff.

'In domiciliary care people want the care when they get up, when they want a meal, when they get out of bed, it needs to fit around what people want, so you're not looking for full time people, you want people who can be available those times' (Independent sector, focus group).

*'We as a company offer permanent contracts, but our staff prefer the zero hour contracts' (Independent sector, survey)* 

'People know that they can always flex their hours up if they want to, but if they have fixed hours they don't have the flexibility to flex them down when that suits them' (Independent sector, focus group).

#### Expectations and new regulations

6.6 Some participants referred to changes in regulations arising from the Regulation and Inspection of Social Care (Wales) Act 2016. Whilst overall, people welcomed initiatives to enhance the status of social care workers via registration, some concerns were also expressed about the additional demands, such as the registration fee, and new training requirements.

> 'It's [recruitment] the worst I have ever known it and it's getting worse by the week. Part of that is due to expectations and the new regulations. It means having to be far more specific when recruiting that's on academic ability, availability, hours. It's a whole heap of things, it's not for one reason' (Independent sector, focus group)

> 'Care workers have to be professional but employers cannot afford to pay professional wages as the private sector do not receive sufficient funding to do this. Each year the min[imum] wage increases and the increases we receive from local authorities do not cover this increase. Until the funding is addressed to attract good staff the situation is not going to improve' (Independent sector, survey)

'It is only in the last year that recruiting care staff has been a problem. Now we also have to specify NVQ Level 2 because we are unable to provide in-house the more onerous induction required' (Independent sector, survey)

# Shortage of people with the right skills to recruit from

6.7 For some employers, the impact of a shortage of skilled people seeking roles in care has meant recruiting staff who may not have the appropriate skills and abilities.

'We all seem to be fishing from the same pool, we don't get swamped by applications [...] there's not the volume and the quality isn't there. It seems like there's not enough people in care and it's not an attractive career path for them' (Independent sector, interview)

'The calibre of staff coming through is lower, we are taking on a lower calibre of staff' (Independent sector, interview)

## Challenges/nature of the work

6.8 Participants referred to the challenges of care work resulting in additional difficulties to recruit and retain care staff.

#### 6.9 *The disparity between pay and the responsibility of the role*

'Comments we've received are "the pay is not enough for the work you are expected to do or the responsibility you carry"' (Independent sector, survey)

'There are things that can go majorly wrong and allegations can be made against you and it can cause you a lot of stress. I've had to go through one and it's not pleasant. You know you don't get that in a general job in the garage selling cars (Third sector, focus group)

#### 6.10 *Rurality/geography*

'Our partner providers do struggle to recruit and this is due to the geography and number of potential employees available in [LA] as it's a remote rural location' (LA, survey).

We certainly struggle in our [area] service and there is an issue there in terms of the remote locality of that service' (Third sector, interview)

#### 6.11 *Financial difficulties for care workers*

'What we was finding was they their [staff] cars were breaking down so they wouldn't come to work because they were too embarrassed to say they couldn't afford to repair their car (Independent sector, focus group)

'Wear and tear on private vehicles make it costly to work in the community sector" (Independent sector, survey)

#### Difficulties retaining social care staff

6.12 Similar issues as those cited in relation to recruitment difficulties were also raised in terms of staff retention. However, in addition, participants referred to the competition for social care workers within and outside social care and talked about having staff who had been employed with them for some time.

#### 6.13 <u>Competition within the social care sectors and with the NHS</u>

'Within the authority it's not pay and conditions, prior to me coming into post, I think they lost eight social care staff in one hit. They all went to day services who had a massive recruitment drive because they were so short of staff. [...] We are 24 hours, and then you've got day services that's Monday to Friday 9-5, what's more enticing, you could be out of home away from family for three days or day services where you could be home at 5 every night'. (LA, interview)

'We have lost one [staff member] recently to nursing. There were two reasons for the person leaving to go to the NHS – one was that she felt she couldn't progress any further, and that's one of the problems, there isn't a very long career ladder. You are a residential worker, a senior or a manager, you can't really go any further, and as she said, the pay was better. She said, "I love my job but I can do a similar job working in nursing and getting paid more money" (LA, focus group).

#### 6.14 Values and motivation (relevance of pay)

'It's a rewarding role so that's why some people stay. It's not the kind of job you want to do if you just need to get paid. [...] We have got lots of people who've been in the organisation five, 10, 15 or 20 years' (Independent sector, interview).

'I don't think you can stay in it for the pay, you can earn the same if not more working in other industries, it's about the passion. People come into the job wanting to make a difference and they stay because they feel so passionate about helping children' (LA, interview)

'The thing I come to work for everyday is the kids, it definitely isn't the rate of pay. I know I'm making a difference to a child's life, that's what motivates me (LA, focus group)

I had my doubts when I first came here whether it's something I wanted to do and now I wish I'd done it years ago even though I am on less I get job satisfaction with what I do now (Third sector, focus group)

#### Factors that support retention

6.15 Important factors discussed as facilitating retention included good pay, relationships (employer/staff relationships, and relationships with those they care for), and creating a supportive environment that values staff.

'We are not run like a big corporate, I get the feeling we have a good culture' (Independent sector, interview)

'They [staff] are all on quite good money, the holidays, the LA pension scheme is quite good, they have access to training' (LA, interview)

'I have seen job satisfaction coming out of an outcomes focussed way of working rather than 'time and task'. Even though it's been really tough they [staff] are valuing the time we are spending with them to get them registration ready. I'd like to see more of that, I think they have gained a real positivity and probably do feel more valued' (Independent sector, focus group)

'Staff are given access and support to appropriate levels of training with a real emphasis on continuous development. We provide access to regular supervision and hold regular team meetings and employee forums with Senior Managers to ensure communication channels are open' (LA, survey)

'They [social care workers] get very attached to our residents [...]. In my experience people who work as carers genuinely care for the residents and I think it would be a big step for them once they have established those relationships to jump ship unless it's for a very good reason' (Independent sector, interview)

'When we have new staff start we buddy them up with a senior member of staff and have them follow a plan of everything to go through with them. We then have a follow up interview after 6 weeks to see how they are getting on and if they require any help with anything' (Independent sector, survey)

#### Comparisons between the social care sectors and the NHS

6.16 In contrast to the LA, independent and third social care sectors, the NHS focus group advised they experienced no issues with recruitment and retention. The group cited good pay, pension, offering a big proportion of full time contracts, and opportunities for progression. In addition, they felt that the difference between how the NHS is perceived and how social care is perceived was thought to be a further reason for the NHS having a more advantageous recruitment and retention position.

Similarly, the feedback from those working in social care confirmed that how social care is perceived and valued was seen to impact on recruitment and retention.

'I think there is something around the values we place on social care and the professionals working in social care [...]. We are talking about people who are caring for people and being paid the minimum wage, and the fact that you could be working in retail and be paid more with far less responsibility and how that impacts individuals who work in the sector' (Third sector, interview).

'There's that thing about how the sector is perceived, everybody says "I want to be a nurse or a doctor", but how many people say "I want to be a carer"?' (Independent sector, focus group)

#### Impact of recruitment and retention difficulties

6.17 The impact of recruitment and retention problems included continuity of care and increased pressure/demand on existing staff.

'It puts a lot of pressure on the existing team because they always take on more work, although they always pick up and help, but you can't survive like that for long' (Third sector, interview)

'It's [continuity of care] a huge issue to have continuity of staff and losing people with experience and knowledge and for anyone change is distressing. [...] Constant change causes a permanent state of distress I think for people that have very little control over their lives anyway' (Third sector, interview)

'Even when we are full staff team we are literally one sickness away from a crisis. What they [LA] don't allow us to have on the staffing is for everybody to have 6 weeks leave, sickness, training, maternity leave, bereavement leave, everything they are entitled to. There aren't surplus staff who can pick up those hours, it literally does rely on the goodwill of your other team members to pick that up, and that can only go so far' (LA, focus group)

'In our scheme for a long time we are working extra hours and, you know, do that much more because of shortages of staff' (Third sector, focus group)

#### Innovative approaches to recruitment and retention

6.18 In the absence of being able to offer improved pay and conditions, but recognising that recruitment and retention were issues, participants offered some examples of approaches they were using to try to tackle the problem.

#### Including service users on the interview panel

6.19 A new approach for one participant, which offered confidence that they were employing the right person with the right values.

'I've recently involved one of our service users in the interview process which was very successful [...] it was amazing really because the interaction between the two spoke volumes' (LA, interview)

#### Celebrating achievements

6.20 Examples provided included awards for carer/employee of the month, and service recognition awards,

*'We have awards, so they [staff] get nominated every quarter' (Independent sector, interview)* 

#### Offering incentives

6.21 Some people, particularly those in the independent sector, mentioned examples of staff incentives, some of which were referred to within the employer survey. They included a 'refer a friend scheme' where staff receive a cash payment, prize draws, staff saving schemes, gift vouchers/bonuses for staff not having absences throughout the month, and bonuses for long service. One provider gave birthday and Christmas presents to staff, guidance with financial advice and offered small loans on an interest free basis.

*'We offer when they start a welcome bonus - £100 after 3 months and £100 after 6 months' (Independent sector, survey)* 

*'We regularly give free prizes away i.e. a la carte meals, rugby tickets, cash giveaways, Christmas dinners' (Independent sector, survey)* 

#### Offering 'taster sessions'

6.22 A LA manager had engaged with two job fairs aimed at supporting people back into employment to look at the possibility of offering 'taster sessions'. These sessions provide individuals the opportunity to understand the role of care work without losing their benefits and individuals are also given interviews with feedback to develop their skills. This approach has been successful.

*'We've recently had four individuals, three of those have just taken up contracts with me this week' (LA, interview)* 

For the manager, this meant that for four of seven new 24-hour contract vacancies were filled, saving time advertising, recruiting, training and awaiting enhanced disclosures.

For individuals considering entering/applying for a role within social care, a focus group reflected the importance of having a good understanding about what that entails, suggesting taster sessions would be advantageous.

'A part of the recruitment process should be to give people an insight into what they are walking in to. Give them a taster, an induction so to speak. Because some of them walk in through the door and they see somebody have a behaviour and they leg it. That's no good to anybody. So give them more knowledge' (Third sector, focus group).

#### Collaborative working

6.23 The same LA manager offering taster sessions had also developed a partnership with a LA homecare provider advising each other on prospective employees.

'We work quite closely with Home Care. When it comes to interviews and recruitment my colleague up in home care did a batch of interviews recently by the end of day I had an email "I've got this person" [...] "would you be interested in picking them up?" (LA, interview)

#### Inclusion and teambuilding

6.24 An independent employer discussed several initiatives they had implemented which centred on building strong relationships, incentivising existing staff, and targeted recruitment.

Team building such as charity work and fundraising, and 'group chats' enabled staff to talk to each other or their manager, which was to be of particular benefit for lone working carers.

'It's fantastic for continuity and making them feel part of the team, so that helps with retention. They [staff] don't feel like they are on their own' (Independent sector, interview) Weekly newsletters included practical information (e.g. links to caring for your car in winter), staff birthdays and achievements.

Targeted recruitment was aimed at specific age groups.

'There are about five different people to recruit from, you've got your young people that have never done caring but are thinking about a career, you've got other people that just want to earn loads of money but you still have to make sure they have the values, you've got other ones that have children and so they want to fit it in amongst children, and you've also got your elderly people that have maybe done an office job and want to do something back into the community. So we tried to target our advertising trying to look at how we could get to those people' (Independent sector, interview)

A LA employer also cited the use of targeted recruitment campaigns

'Ensuring we are targeting an audience who wish to have a career and be part of training and development opportunities within the social care sector' (LA, survey).

#### Apprenticeships/career progression and learning

6.25 The importance of care work being seen in the context of a career was referred to.

'We have recently recruited over 50 Health Care Apprentices from the local community. These are the first recruited into our Apprenticeship Academy – and will progress through an 8 year development programme to become a registered Nurse. The scheme guarantees them a university place and employment within the Health Board at the end. Our "Grow Your Own" scheme is available for existing Health Care Assistants within the Health Board and supports them through their Nurse training. Both schemes provide the opportunity to 'learn and earn' and are highly sought after' (NHS, survey)

*'We have introduced an apprentice scheme and have signed up to a trial which will offer 10 weeks placement to all those selected to take part from a pool of pre-employment' (LA, survey)* 

#### Summary of findings

6.26 The qualitative research element of the project provided useful insight into the feelings, views and perceptions of employers and staff. The following summary is presented in the context of understanding how these related to the variation in pay, conditions and contracts and their impact on recruitment and retention.

#### Variation in pay and conditions

6.27 There was agreement amongst participants that LAs offer more competitive pay and conditions compared to the third and independent sectors. Independent employers providing examples of staff struggling with financial difficulties highlighted this issue further. By contrast, no participants from the LA or NHS raised similar concerns.

#### Variation in contracts

6.28 Very little reference was made to any variation in employment contracts within or between the sectors within the social care workforce. One LA manager referred to the existence of casual/non-guaranteed contracts as a source of difficulty for recruitment. However, qualitative findings indicate that stability of contracts was not perceived as being a key contributory issue in recruitment. For independent sector employers, offering non-guaranteed working hours meant choice and flexibility to their staff and to those they care for.

#### Variation in recruitment and retention

- 6.29 Variation in difficulties recruiting and retaining staff was an issue identified amongst social care sectors and the NHS. The NHS focus group reported no recruitment and retention difficulties compared to LA, independent sector and third sector employers. Where recruitment and retention problems were raised as an issue, one LA participant provided an example of an employee leaving to work in the NHS, citing better pay and opportunities for progression. Comparisons were made between the perceived low value of a career in social care compared with a career in the NHS.
- 6.30 A LA manager, despite acknowledging good pay and conditions, described a number of staff leaving to work for another LA in a different area of service (day services) because of better working hours.

- 6.31 Competition from different roles outside social care was an additional reason cited for recruitment and retention difficulties, and the provision of better or similar pay for a role with less responsibility was seen as important and reflected in staff focus groups.
- 6.32 The issue of rurality as a factor affecting recruitment was raised by a LA and third sector manager, indicating variation with regards recruitment between urban and rural areas.

#### Motivations and values

6.33 Pay and conditions and its impact on recruitment and retention in the social care workforce was raised frequently throughout interviews and focus groups and there was a general agreement (particularly from third and independent sector participants) about the level of pay and poorer terms and conditions. However, also of importance were the values and motivations of the staff who continue to work within social care. Across all social care sectors, there was reference to the rewarding nature of care work, making a difference, being passionate, job satisfaction, and building relationships with the individuals they care for. Providing a supportive environment (e.g. training and supervision), where staff feel valued and appreciated was also important.

#### Successful approaches to recruitment and retention

6.34 Participants provided some examples of innovative and successful approaches to recruitment and retention, for example offering incentives, collaborative working, and taster sessions. Nonetheless, other than national media campaigns, initiatives reflected efforts by individual employers and there was little evidence of good practice being shared and adopted more widely.

### 7. Summary of findings

- 7.1 The following section is a summary of findings drawn together from the three data sources of the study:
  - 1) The literature review
  - 2) The Wales-wide employer survey
  - 3) Interviews and focus groups with providers/managers, and staff
- 7.2 Each table considers the evidence of variation in regards to:
  - Pay
  - Contracts
  - Enhancements
  - Recruitment
  - Retention
  - 7.3 Tables presented in this section may overlap and should be considered together rather than in isolation.

Table	3:	Summary	of	findings:	Pay

Subject	Literature review	Wales-wide employer survey	Interviews and focus groups
Variation of pay amongst the social care and NHS workforce	No evidence of variation of pay for employer types across the social care workforce. However, some evidence of NHS offering better terms and conditions than independent and third sectors.	The median minimum basic pay value in the independent sector was £8.25; NHS health care support workers £9.03; and the LA £9.74. The NHS pays more enhancements to basic pay, and statutory bodies offer more enhancements than others.	NHS employers cited good pay, pensions, conditions. Example provided by LA of employees leaving to work in the NHS citing better pay and opportunities.
Competition amongst social care employers, the	Social care organisations face competition from the NHS and outside social care e.g. hospitality and retail.	For care workers, the median basic minimum value was lower for the independent	Competition for social care workers amongst employers highlighted as an issue.

NHS and others		sector (£8.25) than for the LA sector (£9.74). For senior carers, the median basic minimum value was lower for the independent sector (£8.80) than for LAs (£11.08). For supervisors, the median minimum value was lower for the independent sector (£10.10) than for LAs (£13.37).	General agreement that compared to independent and third sector, LAs can offer more competitive pay, terms and conditions. Roles outside social care considered to have less responsibility and similar or better pay.
Social care as a low pay sector	Social care regarded as a low pay sector. In 2018 in the UK, the median pay for a care worker was £9.14 per hour and for senior care workers, the average pay was £9.62.Some 517,000 jobs in social care paid below the real living wage. Half of all respondents to a Longitudinal Care Study received some form of welfare benefits and 28% of care workers advised managing finances was 'difficult' or 'very difficult'.	See rows above.	Effects of pay levels on staff (poverty issues) referenced by independent sector with staff being unable to pay for vehicle repairs, arranging food bank vouchers, providing food hampers and needing an advancement on pay. Similar issues not reported by the LA sector or NHS. General agreement (particularly from the third and independent sectors) about the pay levels and poorer terms and conditions.

#### 7.4 Table 3 indicates:

- There is variation in pay *between* the three social care sectors.
- That LA social care employers and the NHS appear to pay more and offer more favourable terms and conditions compared to independent and third sector providers.
- Basic pay is enhanced by more factors in the NHS and LAs.
- There is competition from employers outside the three social care sectors (e.g. retail) from roles considered to have similar or better pay but with less responsibility.

• Social care has a low paid workforce that can result in care workers facing financial difficulties.

Subject	Literature review	Wales-wide employer survey	Interviews and focus groups
Employment contracts and non-guaranteed working hours	The social care workforce is characterised by high levels of job insecurity such as insecure working arrangements (e.g. zero hours contracts, short-term temporary contracts). The use of zero hour contracts is associated with multiple unpaid gaps of time in care employees' working day. Irregular working, or working above contractual hours, can result in lost benefit entitlement (e.g. Universal Credit). In 2017, 82% of commissioned care provider staff in Wales were on permanent contracts and for LA regulated services, 79% of staff were on permanent contracts.	LA providers employ roughly twice as many part-time permanent staff as full-time permanent staff, whereas the other two social care sectors and the NHS employ roughly twice as many full-time permanent staff as part-time permanent staff. The proportion of care workers employed on a non- guaranteed working/zero hour contracts is remarkably similar at 22% for LA employers, 22% for independent employers, and 21% for the NHS. Third sector social care employees, however, are far less likely to be employed on non- guaranteed working/zero hour contracts (4%). Fewer than 10% of contracts offered to senior care workers and supervisors by LA and independent employers are non-guaranteed/zero hours.	Little or no reference was made to variation in employment contracts. Independent sector employers highlighted benefits of non-guaranteed contracts; flexibility and choice for staff and those they care for. Only one LA employer referred to the use of non- guaranteed contracts as contributing to recruitment problems. Findings indicate stability of contracts was not a key contributory issue in recruitment.

#### Table 4: Summary of findings: Contracts

- 7.5 Table 4 indicates there are advantages and disadvantages with the use of nonguaranteed working hours:
  - Whilst the literature review referred to the problematic issues associated with non-guaranteed working hours, stability of contracts was not raised as a contributory issue affecting recruitment within interviews and focus groups.

- Independent sector providers highlighted that non-guaranteed working hours provided choice and flexibility to their staff and the individuals they cared for.
- 7.6 Furthermore, regarding the proportion of care workers employed on non-guaranteed working hour contracts:
  - There is little variation amongst the LA and independent sectors
  - There is little variation between the LA, independent and third sectors and the NHS
  - Third sector social care providers are less likely to offer this type of contract
  - In the context of part-time and full-time permanent contracts ratio, there is variation amongst the social care workforce and the NHS.

Subject	Literature review	Wales-wide employer survey	Interviews and focus groups
Variation of enhancements amongst the social care and NHS workforce	No evidence of variation of enhancements for employer types across the social care workforce. Limited enhancements are available for unsocial hours or level of experience for those receiving the National Living Wage. The NHS Agenda for Change system harmonises terms and conditions of services such as annual leave, hours and sick pay, and work undertaken during unsocial hours.	Variation amongst and within LA, independent and third sector social care employers. Greater incidence of enhancing pay evident in the NHS than other sectors.	General agreement that compared to the independent and third sectors, LAs can offer more competitive pay, terms and conditions.

#### **Table 5:** Summary of findings: Enhancements

7.7 The literature review (table 5) highlighted no evidence to determine variation of enhancements amongst the social care workforce but did refer to the consistency in pay amongst health care workers employed in the NHS (Agenda for Change). However, the survey demonstrates variation of enhancements to basic pay amongst

and within LA, independent and third sector social care employers, a finding that was supported by interviews and focus groups. Basic pay is enhanced by more factors in the NHS and LAs.

Subject	Literature review	Wales-wide employer survey	Interviews and focus groups
Pay as an issue affecting recruitment within the social care workforce	Independent and voluntary social care employers struggle to compete with NHS terms and conditions of service.	'Pay' cited as significant for recruitment difficulties by LA, independent and third sector employers. Similar jobs being available in the NHS reported as significant by LA and independent employers.	Pay and conditions regularly cited as problematic to recruitment by independent sector, third sector and some LA social care employers.
High vacancy and turnover rate in social care workforce	High turnover and vacancy rates in the social care workforce.	NHS reported no difficulty with recruitment of health care support workers and therefore less than similar workers (care workers) in LA, independent and third sectors. Variable reported difficulties in social care - 54% of LA, 71% of independent and 83% of third sector employers reported difficulty recruiting care workers. Less difficulty recruiting senior care workers and supervisors. Alternative jobs outside the care sector (e.g. retail) cited as significant by LA and independent employers.	NHS reported no issues. LA, independent and third sector social care employers reported recruitment difficulties. Better or similar paid roles available outside social care.
Low status of social care	Social care seen as being of low employment status.	Similar jobs being available in the NHS reported as significant by LA and independent employers.	General perception that working in the NHS carries higher status than working in social care.

## Table 6: Summary of findings: Recruitment

Working hours and shift patterns	Onerous working hours and shift patterns.	'Shift work/unsocial hours' cited as significant factor in recruitment difficulties by LA and independent employers.	Employment contracts and job stability are factors affecting recruitment.
Rurality	Challenges for domiciliary care providers in rural areas to recruit care workers. Issue is hampered by the cost of travel and public transport for care workers who do not have access to their own vehicles.	It was not possible to report meaningfully on geographical variation given sample limitations.	Rurality and the geography of Wales raised by LA and third sector social care managers as affecting recruitment.

## Table 7: Summary of findings: Retention

Subject	Literature review	Wales-wide employer survey	Interviews and focus groups
High vacancy and turnover rates amongst social care workforce	High turnover and vacancy rates amongst the social care workforce.	NHS reported virtually no difficulty (except one respondent) with the retention of health care support workers. Variable reported difficulties in social care - 46% LA and 39% of independent employers reported difficulty retaining care workers but third sector employers reported no difficulties. Alternative jobs within and outside the social care workforce were reported as causing difficulty for retention. Less difficulty reported to retain senior care workers and supervisors.	NHS reported no issues. LA, independent and third sector social care managers reported retention difficulties. Better or similar paid roles available outside social care.
Pay, terms and conditions	Variation in terms and conditions offered by the NHS contributes to difficulties retaining social care workers	'Pay' reported as reason for retention difficulties by LA and independent employers. 'Similar jobs in care sector' reported as significant	Competition for care workers amongst social care employers and the NHS.

	Despite high turnover, the majority of the workforce leave to work for other providers and do not leave social care	reason for difficulties retaining care workers by independent employers.	
Low status of social care	Social care seen as of low employment status	Virtually no reference to 'low status of the role' as reason for retention difficulties.	General perception is that working in the NHS carries higher status than working in social care.
Working hours and shift patterns	Onerous working hours and shift patterns	'Shift work/unsocial hours' cited as significant reason for retention difficulties by LA and independent employers.	Employment contracts and job stability are factors affecting retention.

7.8 Table 6 and 7 above show that there are similar issues contributing to difficulties recruiting and retaining employees in social care. These include:

#### Pay

- All social care employers cited 'Pay' as a reason for recruitment and retention difficulties.
- Pay, as an issue affecting recruitment and retention was not highlighted by the NHS.
- Social care employers within interviews and focus groups regularly referred to pay and conditions as being problematic.
- Competition from similar jobs in the NHS was reported as significant by LA and independent social care employers as affecting recruitment.
- Competition within and amongst social care employers and the NHS contribute to retention problems for the social care workforce.

#### High vacancy and turnover of care staff

- The social care workforce is affected by high turnover and vacancy rates.
- Unlike the NHS, LA, independent and third sector employers reported variable difficulties in the recruitment and retention of care workers.

- Similarly, problems associated with competition amongst the social care employers and from the NHS were reported; however, less difficulty was reported in the recruitment and retention of senior care workers and supervisors.
- Difficulties to recruitment and retention were also attributed to roles outside social care (e.g. retail).

#### The low status of social care work

 Recruitment and retention difficulties within the social care workforce have also been attributed to the low status of social care as a valued career option particularly in comparison to similar roles in the NHS which carry a higher status.

#### Working hours and shift patterns

- Working hours and shift patterns are additional reasons attributed to recruitment and retention difficulties within the social care workforce.
- LA and independent employers reported 'shift work/unsocial hours' as reasons for problems recruiting and retaining staff.
- 7.9 In addition to the factors above, the issue of rurality (which included transport difficulties i.e. access to public transport and own vehicles, and a shortage of people from the area to recruit from) was also cited as problematic to recruitment and retention.

## Other factors associated with recruitment and retention of the social care workforce

- 7.10 Beyond pay, and terms and conditions of employment contracts, additional factors deemed important to recruitment and retention include:
  - The values and motivations of staff
  - Recruiting the right person with the right values
  - For staff to feel valued, appreciated, supported, and included.

- The importance and value of 'job satisfaction' and the relationships staff have with those they care for, knowing they are making a difference and having an impact
- 7.11 Providing a supportive environment including the provision of regular supervision, training and opportunities for personal and professional progression.
  - For staff to feel part of a team
  - Open communication channels with supervisors and managers

#### 8. Discussion: Implications for the workforce and employers

#### **Remit and context**

- 8.1 The context for this research was confirmed by findings from the literature review, focus groups and interviews which confirmed social care as having:
  - high turnover and vacancy rates
  - increasing demand for care workers
  - costly recruitment and training of new staff
  - increasing use of agency staff, and
  - competition from the NHS and temporary employment agencies
- 8.2 In contrast, the NHS is seen as having a more stable comparable workforce (health care support workers), experiencing very few problems with recruiting and retaining comparable staff, and generally a more highly valued place of employment.
- 8.3 The findings in the previous chapters reported on the variations in the pay and conditions of social care workers and health care support workers, illustrating that variations were evident within each of the social care sectors and between them and the NHS. Drawing definitive conclusions from the research about the impact of these variations is difficult. These are complex systems, with a variety of forces operating on them at any one time. Offering a definitive view on the factors in play is complex, not least because of the number of variables the research explored. Therefore, it is more useful perhaps to reflect on the findings and provide some reflections on the implications of the variations in pay and conditions observed within the wider context of the challenges of recruiting and retaining social care workers and healthcare support workers.
- 8.4 On this basis, the discussion below begins with pay, benefits and contractual issues, concluding with pull and push factors from the perspective of employers and employees, including how being a 'good employer' is critically important to running good quality health and social care services. The message here is that reducing variation in employment practices overall, particularly around valuing staff and including approaches to recruitment, helps mitigate against the negative effects of any unavoidable variations in pay.

Pay

- 8.5 Pay is undoubtedly an issue which impacts employers' ability to recruit and retain social care workers. It manifests itself in a number of ways:
  - As a reflection of the low value felt within social care and by social care workers

     the level of basic pay across social care is around the national minimum wage or national living wage, in some cases being around the real living wage.
  - As an instrument to incentivise recruitment and retention
    - the variation in pay amongst the social care workforce and between social care and the NHS has been identified as a reason for people switching jobs.
  - As a means of illustrating the fragmentation of the social care industry whereby provision is now located within different sectors and by individual employers

 the variation in pay levels accentuates the perception that there is not a level playing field between LA employers and others in respect of their ability to pay staff.

• As an over-simplified means of demonstrating a complex set of issues affecting recruitment and retention.

– headline basic pay levels are often used to make comparisons; however, the real remuneration package is much more difficult to identify because of enhancements and other benefits.

- As a way of reinforcing the gap between responsibility and remuneration, particularly when work pressures are acute
  - the relative importance of the job is seen to be a considerable distance from the pay level it engenders.
- 8.6 Comparing pay levels accurately is fraught with difficulty. Different agencies operate different pay systems, e.g. some with fixed points and others pay ranges. These differences apply within sectors (e.g. different LAs pay different rates) and amongst sectors. Enhancements to basic pay are also adopted differently, both in terms of the range of enhancements applied and the degree to which they are absorbed into the basic pay rate. However, there is sufficient evidence to conclude that pay levels for social care workers in the LA sector and NHS are generally higher than in other sectors, recognising the variation in pay levels within these sectors.

- 8.7 In considering potential reasons for this variation in pay and enhancements, it should be noted that LAs have outsourced many of their care services but many have retained the reablement service in house, which may be regarded as needing a higher skill level and therefore attract more pay. The survey questions did not differentiate different forms of domiciliary care to verify this. Secondly, it is understood that some independent sector care providers have felt it necessary to reduce costs associated with the implementation of the national minimum and living wage and this has impacted their ability to pay enhancements.
- 8.8 There are numerous factors affecting recruitment and retention but pay is reported to be the most significant issue. Even when other issues associated with being a good employer are addressed, such as having training and development opportunities, low pay remains a potentially demotivating factor for employees.
- 8.9 The variation in pay between sectors is generally perceived to be a factor in creating unhelpful turnover within social care whereby staff consider pay and conditions to be better elsewhere. This is seen as particularly prevalent by independent and third sector employers who see the better terms for comparable jobs in LAS and the NHS providing multiple incentives for their staff to move. LAs also identify alternative jobs in the NHS as a factor in this regard and the relatively high number of authorities reporting recruitment and retention difficulties, compared to virtually no difficulties reported by NHS employers, tends to support this view. Interestingly, however, the employer surveys indicate a lower level of difficulty in independent sector employers being able to retain staff than LAs, which would suggest the apparent attractiveness of jobs in LAs at least is not as great as it may first appear. Similarly, the lower basic rate paid by the NHS compared with LAs raises questions about whether pay is the main factor motivating staff to leave for similar posts with the health service. The research suggests there may be numerous alternative explanations for staff turnover.

#### Contracts and other employment conditions

8.10 It is likely that other factors are in play. The NHS focus group confirmed a range of attractive in-house benefits of being an NHS employee, such as training and development and career progression opportunities. The benefits of 'growing your own' by all sectors can possibly be detected in the relatively low number of reported

recruitment and retention difficulties in respect of senior care workers and supervisors. The NHS also continues to pay enhancements for shift, weekend and unsocial hours working, which the social care sectors generally do not. Enhancements to pay in general, however, appear to be greater in the NHS and LAs than in other sectors. Jobs in the NHS may also benefit from being regarded as highly valued and the NHS itself being a good and stable employer.

- 8.11 Overall, there is merit in the conclusion from the literature review that without empirical evidence, it is not possible to determine the extent to which the variation of pay and conditions is a factor in employees leaving to work for other providers. A robust system of tracking staff movement coupled with cross sector exit interviews would be needed to be more certain with regard to the precise reasons for staff changing jobs. Indications from the focus groups suggest a range of personal circumstances feature in people's motivations, alongside recognised factors such as pay and conditions. That is not to deny the relevance of the latter, as they are clearly important factors. It is merely to point out that pinpointing precise reasons for staff movement within, and between, sectors is a complex process.
- 8.12 It is equally difficult to assess the extent to which jobs outside social care, particularly in the retail sector, attract people to move. All three elements of the research suggest such alternative employment is a factor, but people also reported the feeling of worth they experienced whilst undertaking caring duties and how this outweighed the benefits of working in a lower pressure environment. Directly comparing remuneration packages between social care and others is also difficult as issues like levels of responsibility, working hours and benefits such as shopping discounts, must also be taken into account.
- 8.13 One concerning feature identified from the research was that numerous social care workers found themselves in a precarious financial position and needed to supplement earnings with state and other benefits, and sometimes rely on short term loans from employers. This has potential implications for the quality and continuity of care because of its effect on the stability of the workforce.
- 8.14 The brief for this study referred specifically to the 'harmful use of zero hours contracts', alternatively referred to as non-guaranteed working hours contracts or casual work contracts. This harm is associated with multiple unpaid gaps of time in

care employees' working day and lost benefit entitlement (e.g. universal credit, due to irregular working hours). The research indicates minimal variation in the proportion of these contracts to permanent contracts amongst the different social care sectors, just over three in every four contracts being permanent. Whilst some independent sector employers consider the insecurity of contracts to be a significant factor affecting retention, the overriding conclusion from that sector was that it was inappropriate to view 'zero hours' contracts in a purely negative light. Any negativity must be balanced with the benefits they provide for many staff in terms of flexible working, and for recipients of services in respect of being able to guarantee continuity of service in the absence of permanent staff. For the third sector, however, the insecurity of contracts is problematic as it is heavily dependent on external funding and not being able to have stability in either funding or the workforce is particularly challenging.

- 8.15 There is, however, variation in the ratio of part-time to full-time contracts and this is interesting in that it illustrates that there are different workforce configurations used to run social care services. Greater use of part-time contracts is reported in the LA sector and it could be argued having a predominantly part-time workforce enables flexible use of those workers to work additional hours and maintain continuity of service. On the other hand, employing more individual workers may have some potentially negative implications for vulnerable people in terms of continuity of relationships. It also means that more staff need to be employed at a time when recruitment is difficult. This is a possible factor in independent sector employers, who reported higher levels of difficulty in recruiting but fewer in retaining, choosing to employ more full-time workers.
- 8.16 When considering the impact on the quality and continuity of care, there is a consensus that high vacancy and turnover rates make it more difficult to achieve and maintain good standards of care. Other impacts include increased pressure and demand on existing staff, lower staff morale and damage to job satisfaction, a lack of which can affect work colleagues and the quality of care provided. The impact of a shortage of skilled people seeking roles in care has meant recruiting staff who may not have the appropriate skills and abilities.

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#### **Recruitment and retention**

- 8.17 The terms recruitment and retention have possibly been used too synonymously when describing workforce challenges. They are different and present distinct problems for employers. The strategies for dealing with each must also, therefore, vary. The research suggests it is possible to identify different pullers (recruitment factors) and pushers (retention factors) in social care from the perspective of employees, recognising that some affect both recruitment and retention. These may operate in isolation or in combination.
- 8.18 Taking the research in its entirety, the pull factors include:
  - being allowed empowerment and autonomy
  - having contact/relationships with users of service
  - the nature of the job
  - opportunity for learning and advancement
  - flexible working and availability of jobs close to home
  - feeling valued for the role performed
  - job satisfaction (including the diversity and challenge of their role)
  - having a positive impact on people's lives
  - opportunities for personal and professional development
  - good working conditions (e.g. guaranteed working hours, fair wages)
  - good pay
  - good employer/staff relationships
  - a supportive work environment
- 8.19 The push factors include:
  - the challenges of the role (e.g. lone working, pay levels and level of support provided)
  - the stress of appointments being too close together
  - lack of a full-time job
  - shift working
  - lack of input into work schedules and last minute changes
  - seeing agency workers being paid more
  - terms and conditions of employment (especially pay)

- working time and staff shortages
- the low value status of social care, especially when compared to the NHS
- less stressful alternative jobs
- 8.20 From the employer perspective, the key to meeting these challenges appears to rest with being a good employer and demonstrating skills such as those listed below:
  - a positive culture that supports, respects and values staff
  - access to ongoing training and development
  - honesty about the reality of the role
  - good working conditions (particularly flexible working)
  - communication (listening to staff)
  - supporting staff in their roles (and increasingly in their personal lives)
  - appropriate benefits and incentives
  - having a robust recruitment process
  - care workers who are seen as 'coaches' who undertake positive and motivational work
  - reducing hierarchy within teams which can enable organisations to offer training and more competitive rates of pay to make a career in care more attractive
  - autonomous teams
  - regular team meetings to avoid isolated working conditions
  - more training and flexibility to work autonomously
  - financial incentives e.g. a finding fee; gainsharing, employee engagement
- 8.21 Being a good employer is partly dependent, of course, on being able to operate within a supportive economic and policy climate. Some factors within this context exemplify the challenges of providing incentives for staff to be attracted to work and stay in social care whilst ensuring employers can sustain business continuity. These largely relate to the momentum towards paying a national living wage and providers having to work under financial pressures linked to 'tight' contracts with LA commissioners. Other factors relate to a lack of time and capacity within senior management to invest in workforce and service planning and some confusion persisting amongst employers about what a values-based approach to workforce management 'looks like', how to develop it, and what represents good practice.

- 8.22 Government plays its part through leadership, legislation and finance, and by sponsoring and supporting national initiatives like media campaigns to promote the status of social care and the benefits of working in it, such as WeCare Wales. Commissioning this research can be seen as an illustration of WG seeking to better understand and act upon issues affecting the social care workforce and its impact on the quality of care. Two issues are also particularly important currently in this context:
  - developments to improve the professional status of social care via registration, and
  - the new national workforce strategy for health and social care, currently in draft.
- 8.23 The latter is important in that it provides an opportunity to create a climate and framework for employers to address the issues referred to in this report. As the strategy is still in draft form, it is not appropriate to critique it in respect of its relevance to variation in pay and conditions but it is notable that its reference to the importance of valuing staff and using values-based recruitment chimes with the findings of this research. Members of the expert reference group confirmed the relevance of this research to finalising the content of the strategy.
- 8.24 In respect of registration, whilst there was general agreement that professionalising the workforce would improve its status and potentially assist recruitment, some warnings were given about unintended consequences. For example, costs to employers and employees associated with the initiative could be disproportionate relative to realising the benefits. Striking the right balance is crucial, therefore, and good communication will obviously play a key role in achieving this.

#### Innovation and good practice

8.25 Encouragingly, the research identified examples of innovative and successful practice in respect of recruitment and retention, including within Wales. These were highlighted in the findings from the interviews and focus groups. However, initiatives would benefit from research into, and evaluation of, what works, why, and in what context. Opportunities to share and promote practice, provide guidance for social care to enable learning from one another and to continue the development of innovative approaches are vitally important.

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- 8.26 It is likely there are more examples of good practice unreported which, if shared more widely, could contribute to improvements in recruitment and selection methods. For example, the roll out of a common understanding of what constitutes a values–based approach to recruitment and retention. This would involve establishing that prospective new employees have the right personal attributes, motivation and values (e.g. empathy, respect, and compassion), which in turn could promote greater consistency in approach and potentially a reduction in the turnover of workers.
- 8.27 To conclude, determining the extent to which variation in pay, terms, conditions and contracts affects recruitment, retention and the quality and continuity of care is a complex process, not least because of the nature of different motivations of workers. In some cases, perceived higher pay rates affect people's desire to move to other health and social care employers or even out of social care altogether. In others, different factors influence decisions. This research, limited in its nature, does not arrive at definitive conclusions but instead provides considerable learning about the issues requiring further research. What is clear, however, is that reducing variation in employment practices overall, particularly around valuing staff, and including approaches to recruitment, helps mitigate against the negative effects of any unavoidable variations in pay.

#### References

Adler E.S., & Clark. R. (2008) *How it's done: An invitation to Social Research*. 3<sup>rd</sup> edn. London: Thomson Wadsworth.

Atkinson, C., Crozier, S. & Lewis L. (2016) *Factors that affect the recruitment and retention* of domiciliary care workers and the extent to which these factors impact upon the quality of <u>domiciliary care</u>. Manchester Metropolitan University Business School, Welsh Government: Cardiff. Accessed 3 September 2019.

Aveyard, H. (2014) *Doing a literature review in health and social care: A practical guide.* 3<sup>rd</sup>edn. Berkshire: Open University Press.

Bennett, L., Honeyman, M. & Bottery, S. (2018) <u>New models of home care</u>. The Kings Fund (Accessed 3 September 2019).

Bessa, L., Forde, C., Moore, S. & Stuart. M. (2013) <u>The National Minimum Wage, earnings</u> and hours in the domiciliary care sector. University of Leeds. Accessed 15 October 2019.

Braun, V. & Clarke, V. (2006) 'Using thematic analysis in psychology', *Qualitative Research in Psychology*, 3(2), p.77-101.

Care and Social Services Inspectorate Wales. (2016) <u>"Above and Beyond". National review</u> of domiciliary care in Wales. Accessed 20 May 2020.

Consilium Research and Consultancy (2016). <u>Study into the impact of a values based</u> <u>approach to recruitment and retention</u>. Skills for Care. Accessed 3 September 2019.

Creswell, J.W. & Plano Clark, V.L. (2011) *Designing and Conducting Mixed Methods Research*. 2<sup>nd</sup> edn. Los Angeles: Sage Publications.

Cromarty, H. (2019) <u>Adult Social Care Funding (England)</u>. House of Commons Library. Briefing Number CBP07903, 3 October 2019. Accessed 20 October 2019.

Dromey, J. & Hochlaf, D. (2018) *Fair Care. A Workforce Strategy for Social Care*. Institute for Public Policy Research. Accessed 15 November 2019.

Freeman, R.B., Blasi, J.R. & Kruse, D.L. (2010) 'Introduction', in: Kruse, D.L., Freeman, R.B. & Blasi, J.R. (eds) *Shared Capitalism at Work: Employee Ownership, Profit and Gain Sharing and Broad-Based Stock Options*. London: The University of Chicago Press Ltd, p.5.

Hebson, G., Rubery, J., & Grimshaw, D. (2015) 'Rethinking job satisfaction in care work: looking beyond the care debates'. *Work, employment and society*, 29(2), p.314-330.

Hussein, S. (2017) "We don't do it for the money"...The scale and reasons of poverty-pay among frontline long-term care workers in England'. *Health and Social Care in the Community*, 25(6), p.1817-1826.

Kowalczyk, N. and Truluck, C. (2013) 'Literature reviews and systematic reviews: What is the difference?' *Radiologic Technology*, 85(2), p.219-223.

Maben J (2013). 'Focus on staff wellbeing'. Nursing Standard, 27(34), p.61-61.

Moriarty, J., Manthorpe, J., & Harris, J. (2018). <u>*Recruitment and Retention in Adult Social</u></u> <u><i>Care Services*</u>. Social Care Workforce Unit, Kings College London. Accessed 18 September 2019.</u>

Moriarty, J. & Manthorpe, J. (2014). 'Fragmentation and competition: voluntary organisations' experiences of support for family carers'. *Voluntary Sector Review*, 5, p.249-257.

NHS Employers. (2017) About Agenda for Change. Accessed 15 October 2019.

O'Cathain, A., Murphy, E. & Nicholl, J. (2010) 'Three techniques for integrating data in mixed methods studies', *British Medical Journal*, 341, p.1147-1150.

Proud to Care South West. (2019). Accessed 18 September 2019.

Skills for Care. (2018a) <u>The Economic Value of the Adult Social Care Sector – Wales</u>. Final report. ICF Consulting Ltd. Accessed 15 October 2019.

Skills for Care. (2018b) <u>The Economic Value of the Adult Social Care sector – England</u>. Final report. ICF Consulting Ltd. Accessed 15 October 2019.

Skills for Care. (2018c) <u>The state of the adult social care sector and workforce in England</u>. Accessed 20 August 2019.

Skills for Care. (2013) *Finders keepers: The adult social care recruitment and retention toolkit*. Accessed 1 September 2019.

Skills for Care. (no date) 'Attracting people'. Accessed 10 November 2019.

Social Care Wales. (2019a) *Residential child care worker*. Accessed 29 August 2019.

Social Care Wales. (2019b) *Domiciliary care worker registration*. Accessed 15 November 2019.

Social Care Wales. (2019c) *Thousands more care workers needed in Wales by 2030*. Accessed 2 December 2019.

Social Care Wales. (2018a) <u>Social Care Wales Workforce Development Programme</u> (<u>SCWWDP</u>) workforce data analysis 2017: Commissioned Care Provider Services</u>. Social Care Wales, Data Cymru, Welsh Government. Accessed 15 August 2019.

Social Care Wales. (2018b) <u>Social Care Wales Workforce Development Programme</u> (<u>SCWWDP</u>) workforce data analysis 2017: Local Authority Regulated Services. Social Care Wales, Data Cymru, Welsh Government. Accessed 15 August 2019. Squires, J.E., Hoben, M., Linklater, S., Carleton, H.L., Graham, N. & Estabrooks, C.A. (2015) 'Job satisfaction among care aides in residential long-term care: A systematic review of contributing factors, both individual and organizational'. *Nursing Research and Practice*, v.2015, doi: 10.1155/2015/157924.

Starks, H. & Brown-Trinidad, S. (2007) 'Choose your method: a comparison of phenomenology, discourse analysis, and grounded theory', *Qualitative Health Research*, 17 (10), p.1372-1380.

WeCare Wales. (2019) *The national attraction, recruitment and retention campaign for social care and early years and childcare. The story so far.* Social Care Wales.

Welsh Government. (2017) <u>The Regulated Services (Service Providers and Responsible</u> <u>Individuals) (Wales) Regulations 2017</u>. Accessed 20 November 2019.

White, C., Gibb, J, Graham, B., Thornton, A., Hingley, S. & Mortimer, E. (2015) <u>*Training and developing staff in children's homes: Research report.* Department of Education. Accessed 29 August 2019.</u>

## Annex A: Example of literature search string

#### Record of search - Scopus 8.8.19

Limiters: after 1<sup>st</sup> June 2014, scholarly journals, article, English, title, abstract and keywords, UK, peer reviewed

	Combination	No.	Saved for reading
1	Social care workforce OR social care workers AND employment terms OR employment terms & conditions OR pay & conditions	6	2
2	Social care workforce OR social care workers AND employment terms OR pay and conditions	10	4
3	Social care workforce OR social care workers AND adult care OR adult care services AND employment terms OR employment terms and conditions OR pay and conditions	1	0
4	Health and social care workforce OR health and social care workers AND adult care OR adult care services AND employment terms OR employment terms and conditions OR pay and conditions	0	
5	Domiciliary care worker OR support worker OR care worker OR care assistants AND employment terms OR employment terms and conditions OR pay and conditions	0	
6	Domiciliary care worker OR support worker OR care worker OR care assistants OR residential care worker OR care home worker OR home care worker OR supported living worker AND pay	0	
7	Domiciliary care worker OR support worker OR care worker OR care assistants OR residential care worker OR care home worker OR home care worker OR supported living worker AND pay difference	0	
8	Domiciliary care worker OR support worker OR care worker OR care assistants OR residential care worker OR care home worker OR home care worker OR supported living worker AND employment contracts or employment terms	0	

9	Care worker OR support worker OR social care worker OR health assistant OR healthcare assistant OR healthcare support worker AND pay OR employment terms OR pay and conditions or employment terms and conditions	3	0
10	Care worker OR support worker OR social care worker OR health assistant OR healthcare assistant OR healthcare support worker AND benefits	37	0
11	'care worker pay and conditions'	19	4
12	'domiciliary care and workforce'	5	3
13	'Social care workforce and employment terms'	8	2
14	'adult social care sector' AND pay rates OR pay scales	13	0
	'care worker' AND pay rates OR pay scales	5	0
15	'adult social care' AND remuneration OR employment contracts OR terms and conditions	18	0
16	Residential childcare worker OR residential children's worker AND employment terms OR employment terms and conditions OR pay and conditions	10	0
17	Residential childcare worker OR residential children's worker AND pay	2	0
18	'Residential childcare workers pay and conditions'	0	0
19	Social care workers AND recruitment and retention	0	0

**Annex B: Questionnaires** 

# Health and Social Care Employer Survey 2019 - LA

## 1. Introduction

Thank you for taking part in this survey about employment terms and conditions for health and social care workers in Wales. The survey is being run on behalf of Welsh Government and seeks information about pay and conditions (across sectors) for employees in the adult health and social care workforce who deliver care and support and are working specifically with adults. It has been agreed that completion of the survey will be coordinated by local authority HR leads who will liaise with social services staff as appropriate. This survey has been developed following discussion with the Welsh Government and national bodies representing the public, private and voluntary sectors. Please ensure you have read the Privacy Notice in relation to this work. The Welsh Institute for Health and Social Care (WIHSC) has commissioned Data Cymru to run this survey on their behalf. Data Cymru's privacy policy can be viewed at www.data.cymru/privacy-policy. Please note: we would recommend using a desktop/laptop computer to complete the survey, where possible. Please respond by Wednesday 18 December 2019. If you would like any further information, or have any difficulty completing the online survey, please contact surveys@data.cymru or call 029 2090 9500. \*

I have read the Privacy Notice and understand that completing this survey implies consent to participate

## 2. Typology

This survey asks you to consider all your employees who provide direct care to adults.

This includes:

Care workers

Senior care workers

#### Supervisors

#### Health care support workers

## Please see below for further information about the roles we'd like you to consider. Note that agency staff are <u>not</u> included.

<b>T</b>	Colore Constant of the		and the state of t
I ypology of job	titles for the adult	social care worktorc	e who deliver frontline care:

Type of worker	Titles	Setting/environment care provided	Role/duties
<b>Care workers</b> Grade 1: Entry level	Care worker, domiciliary care worker, care assistant, home care worker, frontline care worker, home care assistant, home carer, support worker, community support worker, domiciliary support worker Day care assistant, day care support worker Residential care worker, supporting living worker, care home worker, night care assistant	In the individual's home or family home Day care settings Care home services (without nursing) Care home services (with nursing) Supported housing Community care services	Frontline care workers provide care and support to individuals (e.g. adults, older people).
Senior care workers Grade 2	Senior care worker, senior care assistant, senior care home worker, senior support worker, team leader	All of the above	Senior care workers oversee and monitor care workers. They also provide care and support to individuals (e.g. adults, older people).
Supervisors Grade 3	Supervisor, team leader, field care supervisor, care supervisor, home care supervisor	All of the above	Supervisors are responsible for a small group or team of care workers and/or senior care workers. They may also provide care and support to individuals (e.g. adults, older people).

Health care support worker Grade 2/3	Health care assistant, health care support worker, nursing assistant	Hospitals (NHS) Community Nursing homes	Health care support workers primarily provide help with personal care, meals and mobility as well as performing basic medical checks (e.g. monitoring vitals) within hospitals, homes, clinics and the wider community. Tasks associated with the role are primarily health support needs that may require appropriate training.
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1. According to the definition in the table above, which of the following workers does your organisation employ: Select as many options as apply \*

Care workers

Senior care workers

Supervisors

Health care support workers

For each option selected you will be asked a series of questions around the workforce, client group, care setting, pay, contracts, enhancements, recruitment and retention.

This information is needed to help Welsh Government understand employment conditions across the social care sector. Please ensure the information is as accurate as possible for each type of worker and use the 'Save and Continue Later' option at the bottom of the page if you need to clarify any information before continuing.

## 3. Care workers

#### **Care workers**

This section asks questions about the <u>care workers</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

2. Geographic area In which area(s) does your organisation employ care workers? Select as many options as apply

Isle of Anglesey Gwynedd Conwy Denbighshire Flintshire Wrexham Powys Ceredigion Pembrokeshire Carmarthenshire Swansea Neath Port Talbot Bridgend The Vale of Glamorgan

Cardiff
Rhondda Cynon Taf
Merthyr Tydfil
Caerphilly
Blaenau Gwent
Torfaen
Monmouthshire
Newport

3. Workforce At the time of completing this survey, how many care workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ care workers in a given care setting please enter 0.

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

#### Any other (please specify):

#### 4. Client group Do your care workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

#### Pay and pensions

We would like information about the pay/remuneration that your <u>care workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>care workers who work during the day</u> (note - there is a question at the end of the section that asks about night care workers).

5. A. Fixed rate of pay If some or all of your care workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ care workers in a given care setting, or if you don't pay care workers a fixed rate of pay, leave the row(s) blank.



6. B. Pay range If some or all of your care workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ care workers in a given care setting, or if you don't pay care workers on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

7. C. Differential pay rates If you pay different salary ranges/rates and employ care workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ care workers in a given care setting, or if you don't pay care workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

#### Please indicate the most significant reason for paying a differential rate:

8. D. Client-based pay rates If you pay care workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ care workers with a given client group, or if you don't pay care workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		
Adults with a physical disability or sensory impairment		

9. Night care workers Does the basic pay for your night care workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

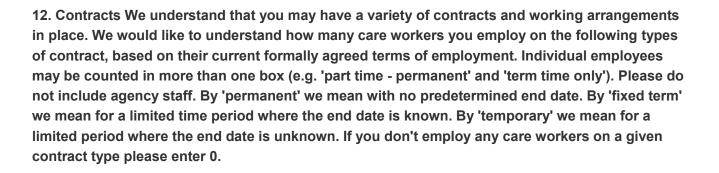
Night workers are paid THE SAME as day workers

We don't employ night workers

10. To what extent do you as an employer typically contribute to your care workers' pensions (as a percentage of earnings)? If you don't employ care workers in a given care setting, please leave the slider at the default 100% position



#### 11. Any comments around pay and pensions for your care workers?



#### Full-time (30 hours or more per week)

Full-time - permanent

Full-time - fixed term

Full-time - temporary

#### Part-time (between 1 - 29 hours per week)

Part-time - permanent	
Part-time - fixed term	
Part-time - temporary	
Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

#### Comments:

13. Please review the list below and tick all options that are available to the care workers that you employ: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	 Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)				
Sick pay (above and beyond statutory)				
Maternity pay (above and beyond statutory)				
Paternity pay (above and beyond statutory)				
	112			

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

14. Please review the list below and tick all options that are available to the care workers that you employ: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	 Supported housing	Other community care services
Job share				
Career breaks				
Career progression / promotion opportunities				
Supervision				
Appraisal				
Personal support (e.g. counselling)				
Family support (e.g. carers leave, childcare facilities)				
N/A				

## Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>care workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

15. For care workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Shift working					
Weekend working					
Bank holiday working					
Night working					
Unsocial hours					
Overtime					
N/A					

16. For care workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development					
Paid or reimbursed registration fees					
Paid or reimbursed DBS fees					
Medical insurance					
Leisure/entertainment benefits (e.g. gym membership)					
Mobile phone					
IT equipment/laptop					
N/A					

17. For care workers, does your organisation: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work					
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)					

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Provide a pool/company car					
N/A					

18. Does your organisation offer any other enhancements, incentives or rewards to its care workers not mentioned above?

19. Recruiting and retaining staff Does your organisation have difficulty recruiting care workers (i.e. attracting new staff)? Select one option

Yes

No

20. If yes, what are the main causes of difficulties for your organisation with recruiting care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very ignificar	3 Moderately at significant s	• •	5 Not at all t significant
Рау					
Nature of work					

	1 Extremely significant s	3 Moderately nt significant s	5 Not at all t significant
Shift work/unsocial hours			
Lone working			
Emotional burden			
Low status of role			
Similar jobs in health sector (e.g. NHS)			
Similar jobs in care sector			
Alternative jobs outside care sector (e.g. retail)	)		
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)			

#### Other (please specify):

# 21. Does your organisation have difficulty retaining care workers (i.e. keeping existing staff)? Select one option

	Yes
$\square$	No

22. If yes, what are the main causes of difficulties for your organisation with retaining care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significants	2 Very significar	3 Moderately nt significant s	 5 Not at all t significant
Рау				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				
Other (please specify):				

23. What is your organisation doing to recruit and retain care workers? Please provide examples of good or innovative practice that you have implemented:

# 4. Senior care workers

### Senior care workers

This section asks questions about the senior care workers that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

24. Geographic area In which area(s) does your organisation employ senior care workers? Select as many options as apply

Isle of Anglesey Gwynedd Conwy Denbighshire Flintshire Wrexham Powys Ceredigion Pembrokeshire Carmarthenshire Swansea Neath Port Talbot Bridgend

The Vale of Glamorgan
Cardiff
Rhondda Cynon Taf
Merthyr Tydfil
Caerphilly
Blaenau Gwent
Torfaen
Monmouthshire
Newport

25. Workforce At the time of completing this survey, how many senior care workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ senior care workers in a given care setting please enter 0.

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

#### Any other (please specify):

#### 26. Client group Do your senior care workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

### Pay and pensions

We would like information about the pay/remuneration that your <u>senior care workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

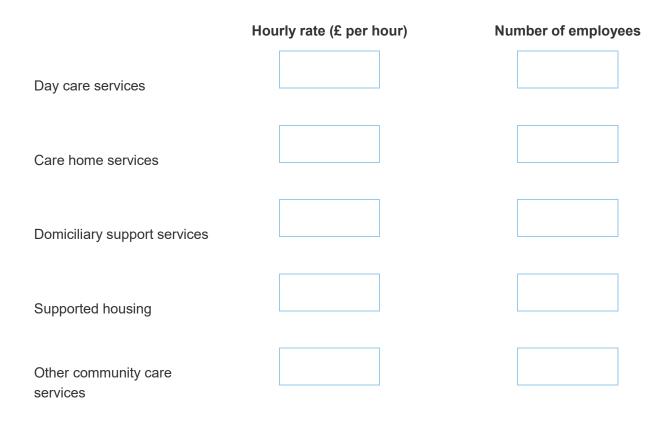
D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>senior care workers who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

27. A. Fixed rate of pay If some or all of your senior care workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers a fixed rate of pay, leave the row(s) blank.



28. B. Pay range If some or all of your senior care workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

29. C. Differential pay rates If you pay different salary ranges/rates and employ senior care workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

#### Please indicate the most significant reason for paying a differential rate:

30. D. Client-based pay rates If you pay senior care workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ senior care workers with a given client group, or if you don't pay senior care workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		
Adults with a physical disability or sensory impairment		

31. Night senior care workers Does the basic pay for your night senior care workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

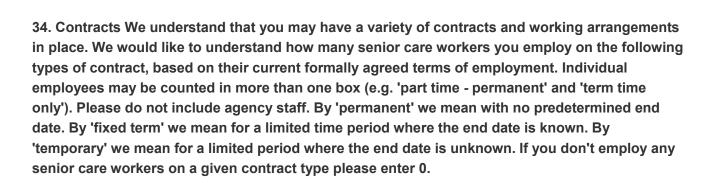
Night workers are paid MORE than day workers

- Night workers are paid LESS than day workers
- Night workers are paid THE SAME as day workers
- We don't employ night workers

32. To what extent do you as an employer typically contribute to your senior care workers' pensions (as a percentage of earnings)? If you don't employ senior care workers in a given care setting, please leave the slider at the default 100% position



#### 33. Any comments around pay and pensions for your senior care workers?



#### Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	

#### Part-time (between 1 - 29 hours per week)

#### Comments:

35. Please review the list below and tick all options that are available to the senior care workers that you employ: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)					
Sick pay (above and beyond statutory)					
Maternity pay (above and beyond statutory)					
Paternity pay (above and beyond statutory)					
	127				

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

36. Please review the list below and tick all options that are available to the senior care workers that you employ: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	 Supported housing	Other community care services
Job share				
Career breaks				
Career progression / promotion opportunities				
Supervision				
Appraisal				
Personal support (e.g. counselling)				
Family support (e.g. carers leave, childcare facilities)				
N/A				

## Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>senior care workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

37. For senior care workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Shift working					
Weekend working					
Bank holiday working					
Night working					
Unsocial hours					
Overtime					
N/A					

38. For senior care workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development					
Paid or reimbursed registration fees					
Paid or reimbursed DBS fees					
Medical insurance					
Leisure/entertainment benefits (e.g. gym membership)					
Mobile phone					
IT equipment/laptop					
N/A					

39. For senior care workers, does your organisation: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work					
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)					

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Provide a pool/company car					
N/A					

40. Does your organisation offer any other enhancements, incentives or rewards to its senior care workers not mentioned above?

41. Recruiting and retaining staff Does your organisation have difficulty recruiting senior care workers (i.e. attracting new staff)? Select one option

Yes
No

42. If yes, what are the main causes of difficulties for your organisation with recruiting senior care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	0 1	5 Not at all t significant
Рау					
Nature of work					
	131				

	1 Extremely significant s	2 Very ignificar	3 Moderately nt significant s	5 Not at all t significant
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

# Other (please specify):

# 43. Does your organisation have difficulty retaining senior care workers (i.e. keeping existing staff)? Select one option

	Yes
$\square$	No

44. If yes, what are the main causes of difficulties for your organisation with retaining senior care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

#### Other (please specify):

45. What is your organisation doing to recruit and retain senior care workers? Please provide examples of good or innovative practice that you have implemented:

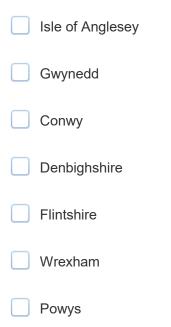
# 5. Supervisors

# **Supervisors**

This section asks questions about the <u>supervisors</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

46. Geographic area In which area(s) does your organisation employ supervisors? Select as many options as apply



Ceredigion
Pembrokeshire
Carmarthenshire
Swansea
Neath Port Talbot
Bridgend
The Vale of Glamorgan
Cardiff
Rhondda Cynon Taf
Merthyr Tydfil
Caerphilly
Blaenau Gwent
Torfaen
Monmouthshire
Newport

47. Workforce At the time of completing this survey, how many supervisors does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ supervisors in a given care setting please enter 0.

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

#### Any other (please specify):

#### 48. Client group Do your supervisors work with: Select as many options as apply

Older people	(includina	people li	ivina witł	n dementia)
•	(	p = - p . =	· · · · · · g · · · · ·	

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

# Pay and pensions

We would like information about the pay/remuneration that your <u>supervisors</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

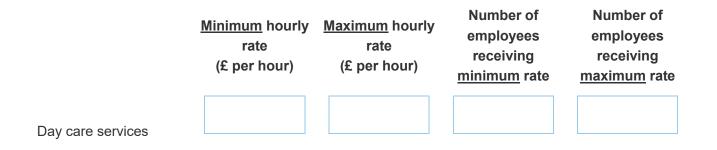
We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>supervisors who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

49. A. Fixed rate of pay If some or all of your supervisors are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ supervisors in a given care setting, or if you don't pay supervisors a fixed rate of pay, leave the row(s) blank.



50. B. Pay range If some or all of your supervisors can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ supervisors in a given care setting, or if you don't pay supervisors on a pay range, leave the row(s) blank.



	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

51. C. Differential pay rates If you pay different salary ranges/rates and employ supervisors or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ supervisors in a given care setting, or if you don't pay supervisors differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services				
Domiciliary support services				

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Supported housing				
Other community care services				

Please indicate the most significant reason for paying a differential rate:

52. D. Client-based pay rates If you pay supervisors at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ supervisors with a given client group, or if you don't pay supervisors client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		

#### Minimum hourly rate (£ per hour)

Maximum hourly rate (£ per hour)

Adults with a physical disability or sensory impairment

53. Night supervisors Does the basic pay for your night supervisors differ from that paid to your day supervisors (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

54. To what extent do you as an employer typically contribute to your supervisors' pensions (as a percentage of earnings)? If you don't employ supervisors in a given care setting, please leave the slider at the default 100% position

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services	

#### 55. Any comments around pay and pensions for your supervisors?

56. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many supervisors you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any supervisors on a given contract type please enter 0.

#### Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	
Part-time (between 1 - 29 hours per week)	)
Part-time - permanent	
Part-time - fixed term	
Part-time - temporary	
Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

#### Comments:

57. Please review the list below and tick all options that are available to the supervisors that you employ: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)				
Sick pay (above and beyond statutory)				
Maternity pay (above and beyond statutory)				
Paternity pay (above and beyond statutory)				
Paid leave of absence (e.g. bereavement)				
Unpaid leave of absence				
Time off in lieu of additional hours worked (not covered by overtime)				
N/A				

58. Please review the list below and tick all options that are available to the supervisors that you employ: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Job share					
Career breaks					

	Day care services	Care home services	 Supported housing	Other community care services
Career progression / promotion opportunities				
Supervision				
Appraisal				
Personal support (e.g. counselling)				
Family support (e.g. carers leave, childcare facilities)				
N/A				

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>supervisors</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

59. For supervisors, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Shift working					
Weekend working					
Bank holiday working					
Night working					

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Unsocial hours					
Overtime					
N/A					

60. For supervisors, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development					
Paid or reimbursed registration fees					
Paid or reimbursed DBS fees					
Medical insurance					
Leisure/entertainment benefits (e.g. gym membership)					
Mobile phone					
IT equipment/laptop					
N/A					

61. For supervisors, does your organisation: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work					
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)					
Provide a pool/company car					
N/A					

62. Does your organisation offer any other enhancements, incentives or rewards to its supervisors not mentioned above?

63. Recruiting and retaining staff Does your organisation have difficulty recruiting supervisors (i.e. attracting new staff)? Select one option

Yes

No

64. If yes, what are the main causes of difficulties for your organisation with recruiting supervisors? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

### Other (please specify):

65. Does your organisation have difficulty retaining supervisors (i.e. keeping existing staff)? Select one option

Yes
No

66. If yes, what are the main causes of difficulties for your organisation with retaining supervisors? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very ignificar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

Other (please specify):

67. What is your organisation doing to recruit and retain supervisors? Please provide examples of good or innovative practice that you have implemented:

### 6. Health care support workers

### Health care support workers

This section asks questions about the <u>health care support workers</u> that your organisation employs.

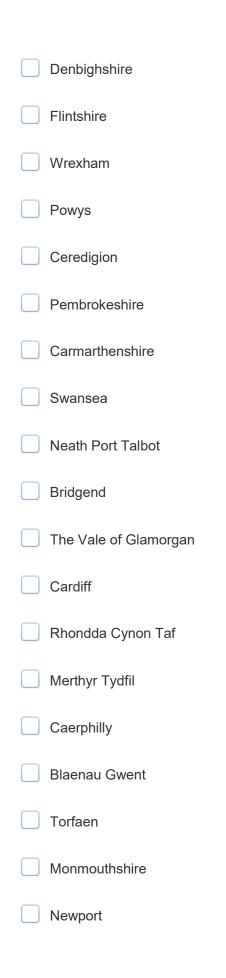
Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

68. Geographic area In which area(s) does your organisation employ health care support workers? Select as many options as apply

Isle of Anglesey

Gwynedd

Conwy



69. Workforce At the time of completing this survey, how many health care support workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ health care support workers in a given care setting please enter 0.

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

### Any other (please specify):

70. Client group Do your health care support workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

### Pay and pensions

We would like information about the pay/remuneration that your <u>health care support workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>health care support workers who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

71. A. Fixed rate of pay If some or all of your health care support workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers a fixed rate of pay, leave the row(s) blank.

	Hourly rate (£ per hour)	Number of employees
Day care services		
Care home services		
Domiciliary support services		
Supported housing		
Other community care services		

72. B. Pay range If some or all of your health care support workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services				
Domiciliary support services				

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Supported housing				
Other community care services				

73. C. Differential pay rates If you pay different salary ranges/rates and employ health care support workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services				
Domiciliary support services				
Supported housing				
Other community care services				

Please indicate the most significant reason for paying a differential rate:

74. D. Client-based pay rates If you pay health care support workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ health care support workers with a given client group, or if you don't pay health care support workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		
Adults with a physical disability or sensory impairment		

75. Night health care support workers Does the basic pay for your night health care support workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

76. To what extent do you as an employer typically contribute to your health care support workers' pensions (as a percentage of earnings)? If you don't employ health care support workers in a given care setting, please leave the slider at the default 100% position

Day care services	
Care home services	
Domiciliary support services	
Supported housing	
Other community care services	

#### 77. Any comments around pay and pensions for your health care support workers?

78. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many health care support workers you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any health care support workers on a given contract type please enter 0.

#### Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	
Part-time (between 1 - 29 hours per week)	
Part-time - permanent	
Part-time - fixed term	
Part-time - temporary	
Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

### Comments:



79. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)					

	Day care services	Care home services	••	Supported housing	Other community care services
Sick pay (above and beyond statutory)					
Maternity pay (above and beyond statutory)					
Paternity pay (above and beyond statutory)					
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

80. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Job share					
Career breaks					
Career progression / promotion opportunities					
Supervision					
Appraisal					

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Personal support (e.g. counselling)					
Family support (e.g. carers leave, childcare facilities)					
N/A					

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>health care support workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

81. For health care support workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Shift working					
Weekend working					
Bank holiday working					
Night working					
Unsocial hours					
Overtime					
N/A					

82. For health care support workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development					
Paid or reimbursed registration fees					
Paid or reimbursed DBS fees					
Medical insurance					
Leisure/entertainment benefits (e.g. gym membership)					
Mobile phone					
IT equipment/laptop					
N/A					

83. For health care support workers, does your organisation: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work					

	Day care services	Care home services	Domiciliary support services	Supported housing	Other community care services
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)					
Provide a pool/company car					
N/A					

84. Does your organisation offer any other enhancements, incentives or rewards to its health care support workers not mentioned above?



85. Recruiting and retaining staff Does your organisation have difficulty recruiting health care support workers (i.e. attracting new staff)? Select one option

Yes

No

86. If yes, what are the main causes of difficulties for your organisation with recruiting health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significants	2 Very significar	3 Moderately nt significant s	 5 Not at all t significant
Рау				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				
Other (please specify):				

87. Does your organisation have difficulty retaining health care support workers (i.e. keeping existing staff)? Select one option

Yes

No

88. If yes, what are the main causes of difficulties for your organisation with retaining health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

### Other (please specify):

89. What is your organisation doing to recruit and retain health care support workers? Please provide examples of good or innovative practice that you have implemented:

### 7. Final comments

90. Any other comments Is there anything else you would like to tell us regarding the responses you have provided?



91. Your participation in this survey is appreciated. Please provide the following information to help us better understand your survey response. These details will not be linked to your survey response in any reports or publications.

Name:	
Organisatio n	
Job title:	

Email address:	
address:	
Telephone number:	
number:	

# 92. If you would be interested in taking part in a short telephone interview, and consent to us contacting you for this purpose, please indicate this below: \*

Yes, I would be interested in taking part

No, I am not interested in taking part

# Health and Social Care Employer Survey 2019 - NHS

### 1. Introduction

Thank you for taking part in this survey about employment terms and conditions for health and social care workers in Wales. The survey is being run on behalf of Welsh Government and seeks information about pay and conditions (across sectors) for employees in the adult health and social care workforce who deliver care and support and are working specifically with adults. This survey has been devised following discussion with the Welsh Government and the Assistant and Deputy Directors' Workforce Group. It has been agreed by the group that that completion of the survey will be coordinated to provide a single response from the NHS. The Welsh Institute for Health and Social Care (WIHSC) has commissioned Data Cymru to run this survey on their behalf. Data Cymru's privacy policy can be viewed at www.data.cymru/privacy-policy. Please note: we would recommend using a desktop/laptop computer to complete the survey, where possible. Please respond by Wednesday 18 December 2019. If you would like any further information, or have any difficulty completing the online survey, please contact surveys@data.cymru or call 029 2090 9500. \*

I understand that completing this survey implies consent to participate

### 2. Typology

This survey asks you to consider all your employees who provide direct care to adults.

This includes:

Health care support workers

Please see below for further information about the roles we'd like you to consider. Note that agency staff are <u>not</u> included.

Typology of job titles for the adult social care workforce who deliver frontline care:

Type of worker	Titles	Setting/environment care provided	Role/duties
Health care support worker <i>Grade 2/3</i>	Health care assistant, health care support worker, nursing assistant	Hospitals (NHS) Community Nursing homes	Health care support workers primarily provide help with personal care, meals and mobility as well as performing basic medical checks (e.g. monitoring vitals) within hospitals, homes, clinics and the wider community. Tasks associated with the role are primarily health support needs that may require appropriate training.

You will be asked a series of questions around the workforce, client group, care setting, pay, contracts, enhancements, recruitment and retention.

This information is needed to help Welsh Government understand employment conditions across the social care sector. Please ensure the information is as accurate as possible and use the 'Save and Continue Later' option at the bottom of the page if you need to clarify any information before continuing.

### 3. Health care support workers

### Health care support workers

This section asks questions about the <u>health care support workers</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

1. Geographic area In which area(s) does your organisation employ health care support workers? Select as many options as apply

Isle of Anglesey Gwynedd Conwy Denbighshire Flintshire Wrexham Powys Ceredigion Pembrokeshire Carmarthenshire Swansea Neath Port Talbot Bridgend The Vale of Glamorgan Cardiff Rhondda Cynon Taf Merthyr Tydfil Caerphilly Blaenau Gwent

Torfaen
Monmouthshire
Newport

2. Workforce At the time of completing this survey, how many health care support workers does your organisation employ? Enter your answer as a whole number.



3. Client group Do your health care support workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

### Pay and pensions

We would like information about the pay/remuneration that your <u>health care support workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements)

also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>health care support workers who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

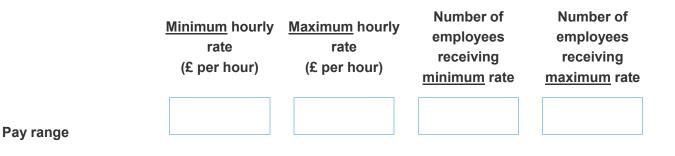
4. A. Fixed rate of pay If some or all of your health care support workers are on a fixed hourly rate, please provide the rate and the number of employees below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't pay health care support workers a fixed rate of pay, leave the row blank.

Hourly rate (£ per hour)

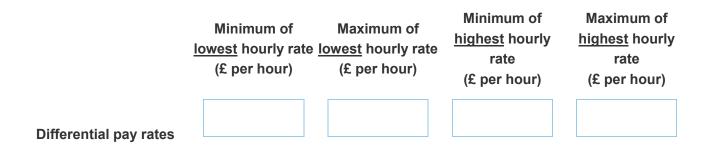
Number of employees

Fixed rate of pay

5. B. Pay range If some or all of your health care support workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't pay health care support workers on a pay range, leave the row blank.



6. C. Differential pay rates If you pay different salary ranges/rates and employ health care support workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't pay health care support workers differential pay rates, leave the row blank.



Please indicate the most significant reason for paying a differential rate:

7. D. Client-based pay rates If you pay health care support workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ health care support workers with a given client group, or if you don't pay health care support workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		
Adults with a physical disability or sensory impairment		

8. Night health care support workers Does the basic pay for your night health care support workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

9. To what extent do you as an employer typically contribute to your health care support workers' pensions (as a percentage of earnings)?

Health care support workers

### 10. Any comments around pay and pensions for your health care support workers?

11. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many health care support workers you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any health care support workers on a given contract type please enter 0.

Full-time (30 hour	s or more per week)
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Full-time - permanent			
Full-time - fixed term			
Full-time - temporary			
Part-time (between 1 - 29 hours per week)			
Part-time - permanent			
Part-time - permanent Part-time - fixed term			

Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

### Comments:

12. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply.

Available	to	health	care	support	workers
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Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)	
Sick pay (above and beyond statutory)	
Maternity pay (above and beyond statutory)	
Paternity pay (above and beyond statutory)	
Paid leave of absence (e.g. bereavement)	
Unpaid leave of absence	
Time off in lieu of additional hours worked (not covered by overtime)	

13. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply.

Available to health care support workers

Job share	
Career breaks	
Career progression / promotion opportunities	
Supervision	
Appraisal	
Personal support (e.g. counselling)	
Family support (e.g. carers leave, childcare facilities)	

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>health care support workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

14. For health care support workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply.

	Available to health care support workers
Shift working	
Weekend working	
Bank holiday working	
Night working	

#### Available to health care support workers

Unsocial hours	
Overtime	

15. For health care support workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply.

	Available to health care support workers
Paid or reimbursed time for training/professional development	
Paid or reimbursed registration fees	
Paid or reimbursed DBS fees	
Medical insurance	
Leisure/entertainment benefits (e.g. gym membership)	
Mobile phone	
IT equipment/laptop	

16. For health care support workers, does your organisation: Tick all that apply.

	Available to health care support workers
Pay travel between home and work	
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting	

#### Available to health care support workers

patients/service	users	to	medical
visits)			

Provide a pool/company car

17. Does your organisation offer any other enhancements, incentives or rewards to its health care support workers not mentioned above?

18. Recruiting and retaining staff Does your organisation have difficulty recruiting health care support workers (i.e. attracting new staff)? Select one option

\_\_\_ Yes

\_\_\_ No

19. If yes, what are the main causes of difficulties for your organisation with recruiting health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very ignificar	3 Moderately nt significant s	• •	
Рау					
Nature of work					
Shift work/unsocial hours					

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	1 Extremely significant s	3 Moderately nt significant s	 5 Not at all t significant
Lone working			
Emotional burden			
Low status of role			
Similar jobs in health sector (e.g. NHS)			
Similar jobs in care sector			
Alternative jobs outside care sector (e.g. retail	)		
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)			

### Other (please specify):

# 20. Does your organisation have difficulty retaining health care support workers (i.e. keeping existing staff)? Select one option

Yes

] No

21. If yes, what are the main causes of difficulties for your organisation with retaining health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

#### Other (please specify):

22. What is your organisation doing to recruit and retain health care support workers? Please provide examples of good or innovative practice that you have implemented:

# 8. Final comments

23. Any other comments Is there anything else you would like to tell us regarding the responses you have provided?



24. Your participation in this survey is appreciated. Please provide the following information to help us better understand your survey response. These details will not be linked to your survey response in any reports or publications.

Name:	
Organisatio n	
Job title:	

Email address:	
address:	
Telephone number:	
number:	

# 25. If you would be interested in taking part in a short telephone interview, and consent to us contacting you for this purpose, please indicate this below: \*

Yes, I would be interested in taking part

No, I am not interested in taking part

# Health and Social Care Employer Survey 2019 - Private/Third sector

# 1. Introduction

Thank you for taking part in this survey about employment terms and conditions for health and social care workers in Wales. The survey is being run on behalf of Welsh Government and seeks information about pay and conditions (across sectors) for employees in the adult health and social care workforce who deliver care and support and are working specifically with adults. This survey has been developed following discussion with the Welsh Government and national bodies representing the public, private and voluntary sectors. Please ensure you have read the Privacy Notice in relation to this work. The Welsh Institute for Health and Social Care (WIHSC) has commissioned Data Cymru to run this survey on their behalf. Data Cymru's privacy policy can be viewed at www.data.cymru/privacy-policy. Please note: we would recommend using a desktop/laptop computer to complete the survey, where possible. Please respond by Wednesday 18 December 2019. If you would like any further information, or have any difficulty completing the online survey, please contact surveys@data.cymru or call 029 2090 9500. \*

I have read the Privacy Notice and understand that completing this survey implies consent to participate

# 2. Sector

1. As an employer, is your organisation in the: Select one option \*

Private / Independent sector

Not for profit / Third / Voluntary sector

# 3. Typology

This survey asks you to consider all your employees who provide direct care to adults.

This includes:

Care workers

Senior care workers

Supervisors

Health care support workers

Please see below for further information about the roles we'd like you to consider. Note that agency staff are <u>not</u> included.

Typology of job titles for the adult social care workforce who deliver frontline care:

Type of worker	Titles	Setting/environment care provided	Role/duties
<b>Care workers</b> Grade 1: Entry level	Care worker, domiciliary care worker, care assistant, home care worker, frontline care worker, home care assistant, home carer, support worker, community support worker, domiciliary support worker Day care assistant, day care support worker Residential care worker, supporting living worker, care home worker, night care assistant	(without nursing) Care home services (with nursing) Supported housing Community care	Frontline care workers provide care and support to individuals (e.g. adults, older people).
Senior care workers Grade 2	Senior care worker, senior care assistant, senior care home worker, senior support worker, team leader	All of the above	Senior care workers oversee and monitor care workers. They also provide care and support to individuals (e.g. adults, older people).

Supervisors Grade 3	Supervisor, team leader, field care supervisor, care supervisor, home care supervisor	All of the above	Supervisors are responsible for a small group or team of care workers and/or senior care workers. They may also provide care and support to individuals (e.g. adults, older people).
Health care support worker Grade 2/3	Health care assistant, health care support worker, nursing assistant	Hospitals (NHS) Community Nursing homes	Health care support workers primarily provide help with personal care, meals and mobility as well as performing basic medical checks (e.g. monitoring vitals) within hospitals, homes, clinics and the wider community. Tasks associated with the role are primarily health support needs that may require appropriate training.

2. According to the definition in the table above, which of the following workers does your organisation employ: Select as many options as apply \*

Care workers

Senior care workers

Supervisors

Health care support workers

For each option selected you will be asked a series of questions around the workforce, client group, care setting, pay, contracts, enhancements, recruitment and retention.

This information is needed to help Welsh Government understand employment conditions across the social care sector. Please ensure the information is as accurate as possible for each type of worker and use the 'Save and Continue Later' option at the bottom of the page if you need to clarify any information before continuing.

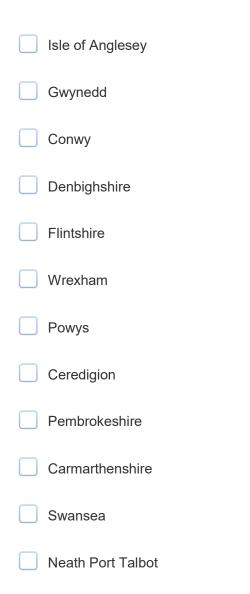
# 4. Care workers

# **Care workers**

This section asks questions about the <u>care workers</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

3. Geographic area In which area(s) does your organisation employ care workers? Select as many options as apply



Bridgend
The Vale of Glamorgan
Cardiff
Rhondda Cynon Taf
Merthyr Tydfil
Caerphilly
Blaenau Gwent
Torfaen
Monmouthshire

Newport

4. Workforce At the time of completing this survey, how many care workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ care workers in a given care setting please enter 0.

Day care services	
Care home services with nursing	
Care home services without nursing	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

### Any other (please specify):

#### 5. Client group Do your care workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

## Pay and pensions

We would like information about the pay/remuneration that your <u>care workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>care workers who work during the day</u> (note - there is a question at the end of the section that asks about night care workers).

6. A. Fixed rate of pay If some or all of your care workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ care workers in a given care setting, or if you don't pay care workers a fixed rate of pay, leave the row(s) blank.



7. B. Pay range If some or all of your care workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ care workers in a given care setting, or if you don't pay care workers on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services with nursing				
Care home services without nursing				
Domiciliary support services				
Supported housing				
Other community care services				

8. C. Differential pay rates If you pay different salary ranges/rates and employ care workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ care workers in a given care setting, or if you don't pay care workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services with nursing				
Care home services without nursing				
Domiciliary support services				
Supported housing				
Other community care services				

Please indicate the most significant reason for paying a differential rate:

9. D. Client-based pay rates If you pay care workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ care workers with a given client group, or if you don't pay care workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)		
Older people (including people living with dementia)				
Adults with learning disabilities				
Adults with mental ill health				
Adults with a physical disability or sensory impairment				

10. Night care workers Does the basic pay for your night care workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

11. To what extent do you as an employer typically contribute to your care workers' pensions (as a percentage of earnings)? If you don't employ care workers in a given care setting, please leave the slider at the default 100% position

Day care services	
Care home services with nursing	
Care home services without nursing	

Domiciliary support services	
Supported housing	
Other community care services	

#### 12. Any comments around pay and pensions for your care workers?

13. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many care workers you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any care workers on a given contract type please enter 0.

#### Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	
Part-time (between 1 - 29 hours per week)	
Dart time normanant	
Part-time - permanent	
Part-time - permanent Part-time - fixed term	

Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

#### Comments:

14. Please review the list below and tick all options that are available to the care workers that you employ: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	with	Domiciliary support services	/Supportedo housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)					
Sick pay (above and beyond statutory)					
Maternity pay (above and beyond statutory)					
Paternity pay (above and beyond statutory)					
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					

	Day care services	with	Domiciliary support services	Supported housing	Other community care services
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

15. Please review the list below and tick all options that are available to the care workers that you employ: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	Domiciliary support services	Supportedo housing	Other community care services
Job share					
Career breaks					
Career progression / promotion opportunities					
Supervision					
Appraisal					
Personal support (e.g. counselling)					
Family support (e.g. carers leave, childcare facilities)					
N/A					

# Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>care workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

16. For care workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Shift working						
Weekend working						
Bank holiday working						
Night working						
Unsocial hours						
Overtime						
N/A						

17. For care workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development						
Paid or reimbursed registration fees						
Paid or reimbursed DBS fees						
Medical insurance						
Leisure/entertainment benefits (e.g. gym membership)						
Mobile phone						
IT equipment/laptop						
N/A						

18. For care workers, does your organisation: Tick all that apply. If you don't employ care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work						
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting						

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
patients/service users to medical visits)						
Provide a pool/company car						
N/A						

19. Does your organisation offer any other enhancements, incentives or rewards to its care workers not mentioned above?



**20.** Recruiting and retaining staff Does your organisation have difficulty recruiting care workers (i.e. attracting new staff)? Select one option

Yes

21. If yes, what are the main causes of difficulties for your organisation with recruiting care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significants	2 Very significar	3 Moderately nt significant s	 5 Not at all t significant
Рау				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				
Other (please specify):				 

22. Does your organisation have difficulty retaining care workers (i.e. keeping existing staff)? Select one option

Yes

No

23. If yes, what are the main causes of difficulties for your organisation with retaining care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

### Other (please specify):

24. What is your organisation doing to recruit and retain care workers? Please provide examples of good or innovative practice that you have implemented:

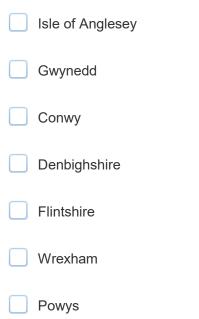
# 5. Senior care workers

### Senior care workers

This section asks questions about the senior care workers that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

25. Geographic area In which area(s) does your organisation employ senior care workers? Select as many options as apply



Ceredigior	)
Pembroke	shire
Carmarthe	nshire
Swansea	
Neath Port	t Talbot
Bridgend	
The Vale o	of Glamorgan
Cardiff	
Rhondda (	Cynon Taf
Merthyr Ty	′dfil
Caerphilly	
📃 Blaenau G	went
Torfaen	
Monmouth	shire
Newport	

26. Workforce At the time of completing this survey, how many senior care workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ senior care workers in a given care setting please enter 0.

Day care services

Care home services with nursing

		l
		l
		l
		l
		L

Care home services without nursing	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

### Any other (please specify):

### 27. Client group Do your senior care workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

# Pay and pensions

We would like information about the pay/remuneration that your <u>senior care workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

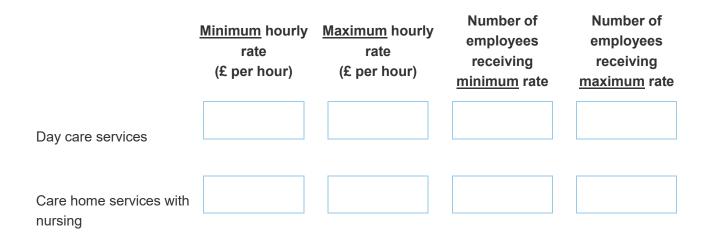
We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>senior care workers who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

28. A. Fixed rate of pay If some or all of your senior care workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers a fixed rate of pay, leave the row(s) blank.

	Hourly rate (£ per hour)	Number of employees
Day care services		
Care home services with nursing		
Care home services without nursing		
Domiciliary support services		
Supported housing		
Other community care services		

29. B. Pay range If some or all of your senior care workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers on a pay range, leave the row(s) blank.



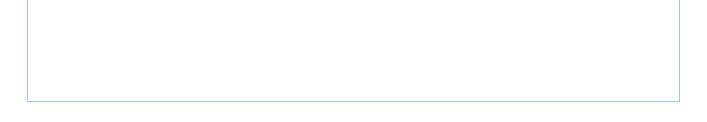
	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Care home services without nursing				
Domiciliary support services				
Supported housing				
Other community care services				

30. C. Differential pay rates If you pay different salary ranges/rates and employ senior care workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ senior care workers in a given care setting, or if you don't pay senior care workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services with nursing	1			
Care home services without nursing				

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Domiciliary support services				
Supported housing				
Other community care services				

#### Please indicate the most significant reason for paying a differential rate:



31. D. Client-based pay rates If you pay senior care workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ senior care workers with a given client group, or if you don't pay senior care workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly ra (£ per hour)		
Older people (including people living with dementia)				
Adults with learning disabilities				
Adults with mental ill health				

### Minimum hourly rate (£ per hour)

Maximum hourly rate (£ per hour)

Adults with a physical disability or sensory impairment

32. Night senior care workers Does the basic pay for your night senior care workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

33. To what extent do you as an employer typically contribute to your senior care workers' pensions (as a percentage of earnings)? If you don't employ senior care workers in a given care setting, please leave the slider at the default 100% position



34. Any comments around pay and pensions for your senior care workers?

35. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many senior care workers you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any senior care workers on a given contract type please enter 0.

Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	
Part-time (between 1 - 29 hours per week)	
Part-time - permanent	
Part-time - fixed term	
Part-time - temporary	
Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	
Comments:	

36. Please review the list below and tick all options that are available to the senior care workers that you employ: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	Care home services without nursing	••	Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)						
Sick pay (above and beyond statutory)						
Maternity pay (above and beyond statutory)						
Paternity pay (above and beyond statutory)						
Paid leave of absence (e.g. bereavement)						
Unpaid leave of absence						
Time off in lieu of additional hours worked (not covered by overtime)						
N/A						

37. Please review the list below and tick all options that are available to the senior care workers that you employ: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	Domiciliary support services	Supportedo housing	Other community care services
Job share					
Career breaks					
Career progression / promotion opportunities					
Supervision					
Appraisal					
Personal support (e.g. counselling)					
Family support (e.g. carers leave, childcare facilities)					
N/A					

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>senior care workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

38. For senior care workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Shift working						

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Weekend working						
Bank holiday working						
Night working						
Unsocial hours						
Overtime						
N/A						

39. For senior care workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development						
Paid or reimbursed registration fees						
Paid or reimbursed DBS fees						
Medical insurance						
Leisure/entertainment benefits (e.g. gym membership)						

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Mobile phone						
IT equipment/laptop						
N/A						

40. For senior care workers, does your organisation: Tick all that apply. If you don't employ senior care workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work						
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)						
Provide a pool/company car						
N/A						

41. Does your organisation offer any other enhancements, incentives or rewards to its senior care workers not mentioned above?

42. Recruiting and retaining staff Does your organisation have difficulty recruiting senior care workers (i.e. attracting new staff)? Select one option

Yes

No

43. If yes, what are the main causes of difficulties for your organisation with recruiting senior care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significa	3 Moderately nt significant s	 5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

Other (please specify):

44. Does your organisation have difficulty retaining senior care workers (i.e. keeping existing staff)? Select one option

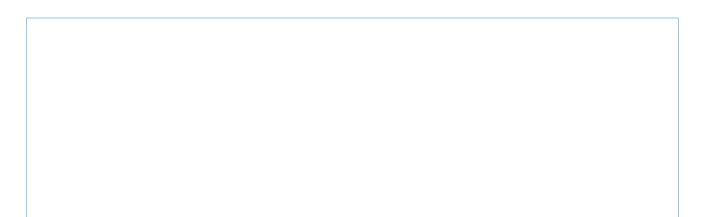
Yes
No

45. If yes, what are the main causes of difficulties for your organisation with retaining senior care workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significants	-	3 Moderately nt significant s	0	
Рау					
Nature of work					
Shift work/unsocial hours					
Lone working					
Emotional burden					
Low status of role					
Similar jobs in health sector (e.g. NHS)					
Similar jobs in care sector					

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	-	5 Not at all t significant
Alternative jobs outside care sector (e.g. retail)					
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)					
Other (please specify):					

46. What is your organisation doing to recruit and retain senior care workers? Please provide examples of good or innovative practice that you have implemented:



# 6. Supervisors

### **Supervisors**

This section asks questions about the <u>supervisors</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

47. Geographic area In which area(s) does your organisation employ supervisors? Select as many options as apply

Isle of Anglesey Gwynedd Conwy Denbighshire Flintshire Wrexham Powys Ceredigion Pembrokeshire Carmarthenshire Swansea Neath Port Talbot Bridgend The Vale of Glamorgan Cardiff Rhondda Cynon Taf Merthyr Tydfil Caerphilly

Blaenau Gwent
Torfaen
Monmouthshire
Newport

48. Workforce At the time of completing this survey, how many supervisors does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ supervisors in a given care setting please enter 0.

Day care services	
Care home services with nursing	
Care home services without nursing	
Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

### Any other (please specify):

#### 49. Client group Do your supervisors work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

### Pay and pensions

We would like information about the pay/remuneration that your <u>supervisors</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>supervisors who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

50. A. Fixed rate of pay If some or all of your supervisors are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ supervisors in a given care setting, or if you don't pay supervisors a fixed rate of pay, leave the row(s) blank.



51. B. Pay range If some or all of your supervisors can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ supervisors in a given care setting, or if you don't pay supervisors on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services with nursing				
Care home services without nursing				
Domiciliary support services				
Supported housing				
Other community care services				

52. C. Differential pay rates If you pay different salary ranges/rates and employ supervisors or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ supervisors in a given care setting, or if you don't pay supervisors differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services with nursing				
Care home services without nursing				
Domiciliary support services				
Supported housing				
Other community care services				

Please indicate the most significant reason for paying a differential rate:

53. D. Client-based pay rates If you pay supervisors at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ supervisors with a given client group, or if you don't pay supervisors client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)
Older people (including people living with dementia)		
Adults with learning disabilities		
Adults with mental ill health		
Adults with a physical disability or sensory impairment		

54. Night supervisors Does the basic pay for your night supervisors differ from that paid to your day supervisors (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

55. To what extent do you as an employer typically contribute to your supervisors' pensions (as a percentage of earnings)? If you don't employ supervisors in a given care setting, please leave the slider at the default 100% position

Day care services	
Care home services with nursing	
Care home services without nursing	

Domiciliary support services	
Supported housing	
Other community care services	

#### 56. Any comments around pay and pensions for your supervisors?

57. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many supervisors you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any supervisors on a given contract type please enter 0.

#### Full-time (30 hours or more per week)

Full-time - permanent	
Full-time - fixed term	
Full-time - temporary	
Part-time (between 1 - 29 hours per week)	
Part-time - permanent	
Part-time - fixed term	

Non-guaranteed working/zero-hours	
Annualised hours	
Term time only	

#### Comments:

58. Please review the list below and tick all options that are available to the supervisors that you employ: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	with	Domiciliary support services	/Supportedo housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)					
Sick pay (above and beyond statutory)					
Maternity pay (above and beyond statutory)					
Paternity pay (above and beyond statutory)					
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					

	Day care services	with	Domiciliary support services	Supported housing	Other community care services
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

59. Please review the list below and tick all options that are available to the supervisors that you employ: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	Domiciliary support services	Supported housing	Other community care services
Job share					
Career breaks					
Career progression / promotion opportunities					
Supervision					
Appraisal					
Personal support (e.g. counselling)					
Family support (e.g. carers leave, childcare facilities)					
N/A					

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>supervisors</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

60. For supervisors, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Shift working						
Weekend working						
Bank holiday working						
Night working						
Unsocial hours						
Overtime						
N/A						

61. For supervisors, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development						
Paid or reimbursed registration fees						
Paid or reimbursed DBS fees						
Medical insurance						
Leisure/entertainment benefits (e.g. gym membership)						
Mobile phone						
IT equipment/laptop						
N/A						

62. For supervisors, does your organisation: Tick all that apply. If you don't employ supervisors in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work						
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting						

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
patients/service users to medical visits)						
Provide a pool/company car						
N/A						

# 63. Does your organisation offer any other enhancements, incentives or rewards to its supervisors not mentioned above?



64. Recruiting and retaining staff Does your organisation have difficulty recruiting supervisors (i.e. attracting new staff)? Select one option

Yes

65. If yes, what are the main causes of difficulties for your organisation with recruiting supervisors? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significants	2 Very significar	3 Moderately nt significant s	 5 Not at all t significant
Рау				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				
Other (please specify):				

66. Does your organisation have difficulty retaining supervisors (i.e. keeping existing staff)? Select one option

Yes

No

67. If yes, what are the main causes of difficulties for your organisation with retaining supervisors? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significar	3 Moderately nt significant s	 5 Not at all It significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

### Other (please specify):

68. What is your organisation doing to recruit and retain supervisors? Please provide examples of good or innovative practice that you have implemented:

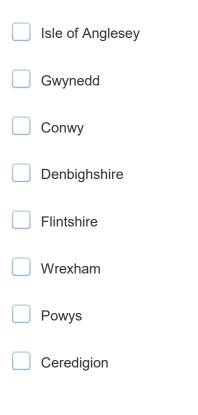
## 7. Health care support workers

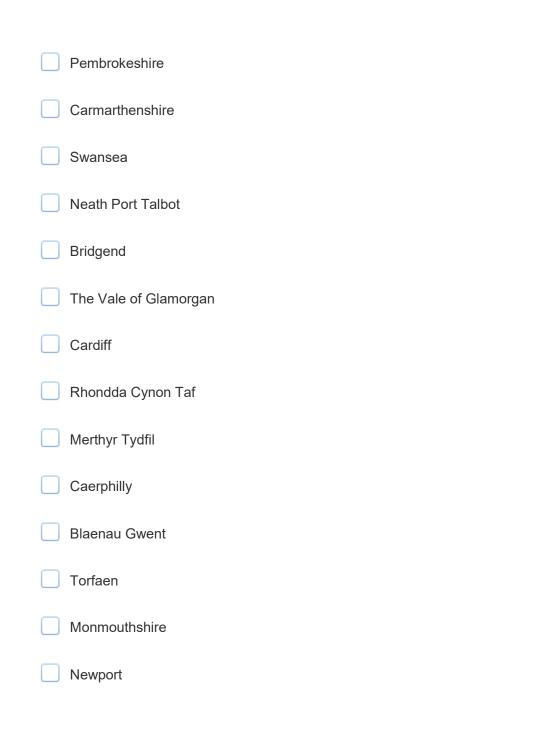
### Health care support workers

This section asks questions about the <u>health care support workers</u> that your organisation employs.

Please ensure this information is as accurate as possible - you can click the 'Save and Continue Later' button if you need to check information before answering.

69. Geographic area In which area(s) does your organisation employ health care support workers? Select as many options as apply





70. Workforce At the time of completing this survey, how many health care support workers does your organisation employ, by care setting? Enter your answers as whole numbers. If you don't employ health care support workers in a given care setting please enter 0.

Day care services	
Care home services with nursing	
Care home services without nursing	

Domiciliary support services	
Supported housing	
Other community care services (e.g. community support worker)	
Total:	

### Any other (please specify):

### 71. Client group Do your health care support workers work with: Select as many options as apply

Older people (including people living with dementia)

Adults with learning disabilities

Adults with mental ill health

Adults with a physical disability or sensory impairment

Other (please specify):

### Pay and pensions

We would like information about the pay/remuneration that your <u>health care support workers</u> receive, in terms of basic hourly rates (i.e. not including any enhancements).

We recognise that some employers may have incorporated into their basic rate additional

remuneration for undertaking more complex tasks or dealing with complex cases. In these instances, please continue to treat the increased pay as basic, (no enhancements) also remembering that we are seeking information about the <u>majority</u> of your employees (see below). You will have the opportunity to provide information about enhancements later in the survey.

We recognise that pay is not a straightforward issue and employers may operate different approaches to pay whereby they may:

A. Apply a single rate of pay to some or all of their workers - we refer to this as a "fixed rate of pay"

B. Operate a pay system which enables some or all of their workers to move incrementally from a minimum pay point to another higher point without being promoted - we refer to this as a "pay range"

C. Run services in more than one location (e.g. in a different local authority area) and pay different pay rates in different locations - we refer to this as "differential pay rates"

D. Pay workers at different rates according to which client group they support - we refer to this as "client based pay rates"

E. Operate a mix of some or all of the above.

We need information that allows us to understand the variation in pay that applies to the <u>majority</u> of the Welsh workforce. We would ask, therefore, that when addressing the following questions, if you operate different pay approaches such as those above, your responses reflect the <u>majority</u> of your workers.

The information relates to <u>health care support workers who work during the day</u> (note - there is a question at the end of the section that asks about night workers).

72. A. Fixed rate of pay If some or all of your health care support workers are on a fixed hourly rate, please provide the rate and the number of employees for each of the care settings below: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers a fixed rate of pay, leave the row(s) blank.

Hourly rate (£ per hour)



Day care services

	Hourly rate (£ per hour)	Number of employees
Care home services with nursing		
Care home services without nursing		
Domiciliary support services		
Supported housing		
Other community care services		

73. B. Pay range If some or all of your health care support workers can progress from one salary point to another whilst in your employment, (without promotion) what are the minimum and maximum hourly rates, and the number of employees receiving each rate, in each of the care settings below: Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). Enter the number of employees as whole numbers. If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers on a pay range, leave the row(s) blank.

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Day care services				
Care home services with nursing				
Care home services without nursing				

	<u>Minimum</u> hourly rate (£ per hour)	<u>Maximum</u> hourly rate (£ per hour)	Number of employees receiving <u>minimum</u> rate	Number of employees receiving <u>maximum</u> rate
Domiciliary support services				
Supported housing				
Other community care services				

74. C. Differential pay rates If you pay different salary ranges/rates and employ health care support workers or have services in more than one location (e.g. more than one local authority area) what is the range of your minimum pay rate and what is the range of your maximum pay rate for each of the care settings below? Enter the hourly rates in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ health care support workers in a given care setting, or if you don't pay health care support workers differential pay rates, leave the row(s) blank.

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Day care services				
Care home services with nursing				
Care home services without nursing				
Domiciliary support services				

	Minimum of <u>lowest</u> hourly rate (£ per hour)	Maximum of <u>lowest</u> hourly rate (£ per hour)	Minimum of <u>highest</u> hourly rate (£ per hour)	Maximum of <u>highest</u> hourly rate (£ per hour)
Supported housing				
Other community care services				

Please indicate the most significant reason for paying a differential rate:

75. D. Client-based pay rates If you pay health care support workers at different rates according to which client group they support, please indicate the minimum and maximum rates you pay across all care settings: Enter the hourly rate in pounds and pence (e.g. for £8.50 per hour enter 8.50). If you don't employ health care support workers with a given client group, or if you don't pay health care support workers client-based pay rates, leave the row(s) blank.

	Minimum hourly rate (£ per hour)	Maximum hourly rate (£ per hour)		
Older people (including people living with dementia)				
Adults with learning disabilities				
Adults with mental ill health				

#### Minimum hourly rate (£ per hour)

Maximum hourly rate (£ per hour)

Adults with a physical disability or sensory impairment

76. Night health care support workers Does the basic pay for your night health care support workers differ from that paid to your day workers (excluding any enhancements such as shift payments)? Select one option

Night workers are paid MORE than day workers

Night workers are paid LESS than day workers

Night workers are paid THE SAME as day workers

We don't employ night workers

77. To what extent do you as an employer typically contribute to your health care support workers' pensions (as a percentage of earnings)? If you don't employ health care support workers in a given care setting, please leave the slider at the default 100% position

Day care services	
Care home services with nursing	
Care home services without nursing	
Domiciliary support services	
Supported housing	
Other community care services	

#### 78. Any comments around pay and pensions for your health care support workers?

79. Contracts We understand that you may have a variety of contracts and working arrangements in place. We would like to understand how many health care support workers you employ on the following types of contract, based on their current formally agreed terms of employment. Individual employees may be counted in more than one box (e.g. 'part time - permanent' and 'term time only'). Please do not include agency staff. By 'permanent' we mean with no predetermined end date. By 'fixed term' we mean for a limited time period where the end date is known. By 'temporary' we mean for a limited period where the end date is unknown. If you don't employ any health care support workers on a given contract type please enter 0.

#### Full-time (30 hours or more per week)

Full-time - p	permanent
---------------	-----------

Full-time - fixed term

Full-time - temporary

#### Part-time (between 1 - 29 hours per week)

Part-time - permanent	
Part-time - fixed term	
Part-time - temporary	
Non-guaranteed working/zero-hours	
Annualised hours	
Annualised hours Term time only	

#### **Comments:**

80. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	 Domiciliary support services	Supported housing	Other community care services
Flexible working arrangements (e.g. flexible start/finish times, compressed hours, or which hours are worked in a day)					
Sick pay (above and beyond statutory)					
Maternity pay (above and beyond statutory)					
Paternity pay (above and beyond statutory)					
Paid leave of absence (e.g. bereavement)					
Unpaid leave of absence					
Time off in lieu of additional hours worked (not covered by overtime)					
N/A					

81. Please review the list below and tick all options that are available to the health care support workers that you employ: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	services	with	Domiciliary support services	/Supported housing	Other community care services
Job share					
Career breaks					
Career progression / promotion opportunities					
Supervision					
Appraisal					
Personal support (e.g. counselling)					
Family support (e.g. carers leave, childcare facilities)					
N/A					

### Enhancements

We would also like to understand any enhancements, rewards, incentives or benefits that your organisation pays to its <u>health care support workers</u> which is over and above the basic hourly rates you provided in the 'Pay and pensions' section above.

82. For health care support workers, does your organisation pay over and above basic hourly rates of pay for any of the following: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Shift working						
Weekend working						
Bank holiday working						
Night working						
Unsocial hours						
Overtime						
N/A						

83. For health care support workers, does your organisation offer or contribute to any of the following employee incentives or rewards? Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Paid or reimbursed time for training/professional development						
Paid or reimbursed registration fees						
Paid or reimbursed DBS fees						
Medical insurance						

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Leisure/entertainment benefits (e.g. gym membership)						
Mobile phone						
IT equipment/laptop						
N/A						

84. For health care support workers, does your organisation: Tick all that apply. If you don't employ health care support workers in a given care setting, please tick the N/A option at the bottom of the list.

	Day care services	Care home services with nursing	Care home services without nursing	Domiciliary support services	Supported housing	Other community care services
Pay travel between home and work						
Pay travel expenses for duties undertaken during work time (e.g. between home visits, escorting patients/service users to medical visits)						
Provide a pool/company car						
N/A						

85. Does your organisation offer any other enhancements, incentives or rewards to its health care support workers not mentioned above?

86. Recruiting and retaining staff Does your organisation have difficulty recruiting health care support workers (i.e. attracting new staff)? Select one option

Yes

No

87. If yes, what are the main causes of difficulties for your organisation with recruiting health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very significa	3 Moderately nt significant s	 5 Not at all t significant
Pay				
Nature of work				
Shift work/unsocial hours				
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
	~ · · ·			

	1 Extremely significant s	2 Very ignificar	3 Moderately It significant s	 5 Not at all tsignificant
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)				
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

#### Other (please specify):

88. Does your organisation have difficulty retaining health care support workers (i.e. keeping existing staff)? Select one option

Yes

No

89. If yes, what are the main causes of difficulties for your organisation with retaining health care support workers? Please rate each factor on a scale of 1-5 with 1 being 'extremely significant' and 5 being 'not at all significant'

	1 Extremely significant s	2 Very ignificar	3 Moderately nt significant s	• •	
Pay					
Nature of work					
Shift work/unsocial hours					

245

	1 Extremely significant s	•	3 Moderately nt significant s	 5 Not at all t significant
Lone working				
Emotional burden				
Low status of role				
Similar jobs in health sector (e.g. NHS)				
Similar jobs in care sector				
Alternative jobs outside care sector (e.g. retail)	)			
Insecurity of contracts (e.g. zero hours or short-term temporary contracts)				

### Other (please specify):

90. What is your organisation doing to recruit and retain health care support workers? Please provide examples of good or innovative practice that you have implemented:

# 8. Final comments

91. Any other comments Is there anything else you would like to tell us regarding the responses you have provided?

92. Your participation in this survey is appreciated. Please provide the following information to help us better understand your survey response. These details will not be linked to your survey response in any reports or publications.

Name:	
Organisatio	
n	
Job title:	
Email	
address:	
address.	
Telephone	
number:	
number.	

93. If you would be interested in taking part in a short telephone interview, and consent to us contacting you for this purpose, please indicate this below: \*

Yes, I would be interested in taking part

No, I am not interested in taking part

### Annex C: Interview guide

- 1. Can you tell me if your organisation has difficulty recruiting staff (adult social care/children's residential care workers/health care support workers)? *Prompts: if so what are those difficulties?*
- 2. Can you tell me if your organisation has difficulty retaining adult social care/children's residential care workers? *Prompts: if so what are those difficulties?*
- 3. Does pay and conditions affect recruitment and retention in your organisation? If so in what ways? *Prompts: do pay and conditions differ between providers/sectors, competition from other providers*
- 4. Do you have examples of any innovative practice that you/your organisation has implemented to recruit and retain adult social care/children's residential workers? *Prompts: if example of innovative practice has been provided, how successful has it been? Has it resulted in demonstrable change? If so what? Has it been evaluated?*
- 5. If recruitment and retention is a problem for your organisation, what it the impact on the continuity and quality of care provided?
- 6. What is the impact of differential pay and conditions on continuity and quality of care?

### Broader questions

- 7. If you were able to pay your employees more or offer better terms and conditions, do you anticipate productivity would be different and if so, why? *Prompts: staff more motivated, opportunities for training and developing skills, less mistakes, more confident, investment in technology?*
- 8. If yes to the above, would it have an impact on recruitment and retention, why?
- Considering the social services and wellbeing Act, can you tell me if you have seen a difference in any of what we have talked about (pre/post 2016)? Prompts: change in recruitment and retention, pay and conditions, what you as an employer can offer, investment.
- 10. Is there anything you would like to add?

### Annex D: Focus group guide

- 1. What attracted you to your role in frontline care and support? *Prompts: What* were/are your motivations for applying and continuing to work within the role? How much did you know about the role when you applied?
- 2. Has your role in frontline care and support met your expectations? If not, why not and if it has, how?
- 3. Has your role in frontline care and support changed? If yes, in what way, and does it impact the care and support you provide? *Prompts: Has there been a change in the needs of the population you care for? Other examples might include: changes in workload, changing jobs roles/progression*
- 4. To what extent has the pay and terms and conditions of your role influenced your decision to continue working within the care sector? Prompts: What keeps you motivated? Or are individuals considering or actively looking for other roles? If so, are their reasons linked to pay and/or terms and conditions?
- 5. Can you tell me if your organisation has difficulties recruiting and retaining frontline care and support staff? *Prompts: If so, what are those difficulties?*
- 6. If your organisation has difficulties recruiting and retaining frontline care and support staff, what could employers do to address those difficulties? *Prompts: Pay/conditions/contracts/working hours? Something else?*
- 7. To what extent do issues regarding recruitment and retention impact your role within frontline care and support? *Prompt: low staffing, continuity of care, additional workload/responsibilities*
- 8. Can you tell me if you have previous experience of working in frontline care and support in other sectors or settings (e.g. local authority/independent/3<sup>rd</sup> sector, NHS, day service, supported housing)? *Prompts: If so, are/were there differences in your experience, pay and conditions. If so, were these better or worse? And did they influence the decision to leave your job?*
- 9. Is there anything you would like to add?

### Annex E: Data Cymru methodology statement

Data Cymru was commissioned to develop and manage a survey of employers of social care staff who provide direct care to adults and children. The survey investigated pay and conditions across the workforce.

We aimed to survey all local authorities, independent sector employers, third sector employers, and NHS health boards/trusts in Wales. Five questionnaires were developed which differed only in the tailoring of questions around the care settings in which employing organisations work and the types of care workers they employ. A number of factors meant it was not possible to adopt a sample size containing every care provider, so instead the survey was distributed electronically via our partners at Care Forum Wales, the Wales Council for Voluntary Action, the Welsh Local Government Association (via HR leads), and the NHS.

The topics we report on are pay, contract types, contract options and enhancements, and recruitment and retention. We examined the data within and across sectors and care settings, and also looked for any variation based on geography or the organisations' client group(s).

Three outliers were removed from the dataset, because the information provided was either clearly incorrect (e.g. a minimum pay rate that was below the legal minimum wage) or was clearly associated with a different role (e.g. care workers receiving pay rates associated with senior managers).

Given the relatively small samples achieved, we chose to report median measures of pay, because the median is less susceptible to outliers than other measures of central tendency (particularly the mean). We also chose to report absolute minimum and maximum figures to inform readers of the range of the dataset.

Again, due to the small samples involved, we applied stringent disclosure control measures to prevent readers from identifying respondents. Our primary suppression strategy involved removing from published materials any statistic that was compiled from fewer than five responses. Secondary suppression was then applied to output tables to prevent the possibility of disclosure-by-difference. However, it must be noted that even though suppressed data were not explicitly shown in output tables they were included in the analysis and contribute to totals and aggregates throughout the report.