Your views about the MAC's latest commission

About you

Q1. What is the name of your organisation?

United Kingdom Homecare Association

Q2. What is your email address?

colin.angel@ukhca.co.uk

Q3. Which of the following options best describe your reason for completing this form?

I am providing evidence of recruitment and salaries in the sector, on behalf of other organisations/members or as a recruitment business

About your sector(s)

Q27. Which of the following best describes your organisation?

Other (please specify):
We are a not-for-profit organisation which represents social care providers in the private and third sectors

Q28. How many businesses /organisations do you represent?

500-5,000

About the businesses/organisations you represent

Q29. How have you engaged the businesses/ organisations you represent to inform this consultation response?

Ongoing dialogue as part of business as usual

Q30. Thinking of the businesses/organisations you have engaged with, in general are their staff concentrated in specific UK countries/regions or are they nation-wide?

Nation-wide

Continued

Q32. Thinking of the businesses/organisations you engage with, tick all the relevant sectors they cover from the list below: (Please select all that apply) For more information about the sectors please refer to the link below: http://resources.companieshouse.gov.uk/sic/

Human health and social work activities

Q33. Thinking of the businesses/organisations you engage with and their number of employees, tick all size bands that they cover:

0-9 employees

10-49 employees

50-249 employees

250-499 employees

500+ employees

Q34. Thinking about the businesses/organisations you engage with, are the majority roughly of a similar size in terms of the number of employees (e.g most SMEs or most large organisations)?

No

Employment of migrant workers

Q36. To your knowledge, have the organisations you have engaged with recruited any of the following workers in the past 5 years: (Please select all that apply)If you are unclear about the terms please hover over the question (workers from Switzerland are included in our definition of EEA countries).

UK and/or Irish workers

Workers from EEA countries outside of the UK and/or Ireland

Workers from non-EEA countries

Q37. In the next 12 months are they likely to recruit: (Please select all that apply) *If you are unclear about the terms please hover over the question (workers from Switzerland for example are included in our definition of EEA countries).

UK and/or Irish workers

Workers from EEA countries outside of the UK and/or Ireland

Q37. In the next 12 months are they likely to recruit: (Please select all that apply) *If you are unclear about the terms please hover over the question (workers from Switzerland for example are included in our definition of EEA countries).

Workers from non-EEA countries

Experience of Tier 2 (General) visa

Q38. Following on from the previous question, were these non-EEA workers recruited under the Tier 2 (General) visa system: *If you are unclear about the terms please hover over the question(workers from Switzerland for example are included in our definition of EEA countries).

Yes some

Q39. Are the salaries required by the immigration rules for the Tier 2 (General) visa generally:

Higher than what they would normally pay

Q40. Have the organisations that you represent experienced any issues with Tier 2 (General) visa salary requirements? If so, what were they?(In 200 words)

Employment of workers in the homecare sector through the Tier 2 route is an extremely small proportion of the total workforce, and largely relates to the employment of:
(1) managers who will be registered with a social care regulator (CQC, CIW, The Care Inspectorate or RQIA), and
(2) The employment of Registered Nurses delivering specialist services to older or disabled people in their own homes. The Tier 2 route in no way meets the total demands for front-line workforce vacancies in the homecare sector.

Q41. Have any of the Tier 2 (General) visa employees employed by your members (or organisations you represent) applied or tried to apply for settlement?

Yes

Experience of Tier 2 continued

Q42. In general, was the settlement income threshold (currently £35,800)?

About the same as their current salary

Q43. Please provide any additional views of Tier 2 (General) visa settlement(in 200 words)

The Tier 2 route in no way meets the total demands for front-line workforce vacancies in the homecare sector. On occasion it enables the recruitment of Registered Managers or specialist nurses from outside the EEA when it has been impossible to recruit suitable candidates from the UK or EEA.
However, Tier 2 does not enable recruitment to the estimated 58,000 vacancies in the homecare sector at any one time, equivalent to 10.6% of all jobs in the homecare sector [Source: Skills for Care, figures relate to England]
Tier 2 relates to 'skilled' workers. While we would reject an assertion that the front-line homecare workforce are 'unskilled' for the proposes of comparison, the ratio of managerial and supervisory jobs to direct care jobs in our sector is approximately 1:10.

Salary Threshold questions

Q44. To what extent would the businesses/organisations you have engaged with agree or disagree with the following statements:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
There should not be a minimum salary threshold above the legal requirement (the national minimum wage)		X			
If there is a salary threshold it should be applied universally across the economy and UK, with a few exceptions to keep the system simple					X
If there are salary thresholds, there need to be a variety to reflect employer needs	X				

If you have an alternative model you wish to describe, please explain it here (in 200 words):
1. The homecare workforce make a major contribution to the social good of the UK. They are either (1) delivering services commissioned by local government or the NHS (estimated to be 70%); or (2) supporting people who would otherwise rely on State-funded care, if their net assets fell below eligibility criteria set by Government (estimate 30%). The wages paid to the workforce are therefore largely determined by the fees paid by the statutory sector. Wages, on-costs and reimbursing mileage are approximately 74% of the cost of homecare and must be funded from the fees paid by the purchaser. 3. Changing the salary thresholds for workers on its own would not resolve the serious short-fall in the capacity of the social care workforce. The majority of people recruited do not have a previous qualification, but often have extremely valuable life experiences which equip them with the right skills and values to meet people's care needs. Our suggested models would therefore be either: (1) To place social care workers on a shortage occupation list; or (2) To create a system of 'social value' for prospective recruits to the social care sector which recognises the value of social care work.

Q45. If there were tailored salary thresholds, to what extent would the businesses/organisations you have engaged with agree that they should be varied by:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Sector	X				
Region/country				X	

Q45. If there were tailored salary thresholds, to what extent would the businesses/organisations you have engaged with agree that they should be varied by:

New entrants/young workers					X
Occupation	X				

Q46. Do the businesses/organisations you engage with most commonly think that jobs judged to be in shortage (such as those on the Shortage Occupation List) should have:

Lower salary thresholds compared to those not in shortage

Q47. Do the businesses/organisations you engage with most commonly think that having a salary threshold equivalent to the 25th percentile of the full-time pay distribution for employees in that occupation is:If you are unclear of the terms please hover over the question

About right

Q48. Do the businesses you engage with most commonly think that having a minimum salary requirement of £30,000 for an experienced full-time employee is:

Too high

Q49. What do you think should be counted towards the salary for assessing whether an individual meets the threshold? (Please select all that apply)

5. Part-time working patterns

6. Pension contributions

Q50. Following on from the previous question, please list your responses in order of importance with 1 being the most important and 6/7 being the least.

1. Part-time working patterns;
2. Pension contributions;
3. Employee equity ownership;
4. Commission
5. Company car / travel allowance
6. Other cash/non-cash remuneration

Q51. Are there any other issues we should consider? (In 200 words)

The fragility of the UK's homecare market is well-documented, including by social care regulators, who recognise the impact of under-funding by central/local government. Government has not brought-forward plans for the long-term funding of social care, promised two years ago.

In 2017 UKHCA surveyed 324 homecare employers. 95% told us that recruiting front-line careworkers was "difficult or extremely difficult". 80% said the same thing about first-level supervisors. This compares to just 19% of respondents who said recruiting to clerical or admin roles was equally difficult. We believe we would receive even worse results to the same survey today.

In England (where figures are available) 16% of the homecare workforce are non-British nationals (7% from the EU). In London it is 43%. Turnover is running at 38.8%. An estimated 10.6% of posts are vacant [Skills for Care 2019].

The average annual pay of front-line homecare workers is £13.9k and senior careworkers £15.0k, less than half the current threshold [Skills for Care 2019].

There has been a 23% increase in homecare jobs over the last 6 years. This is expected to increase with the needs of an ageing population and government policy to support more people at home, rather than in institutions.

Q52. Please attach any additional evidence you would like us to consider

- File: SupplementaryevidenceUKHCAresponsebyColinAngel20191016.final.pdf

Australian Points Based System

Q53. The Government is considering adopting an Australian type Points Based System. In your opinion, please tell us the relative importance of the following characteristics typically used to award points to migrants by ranking them where 1 is the most important and 8/9 is the least important.

Having a job offer	4
Work experience	1
Education attainment	5
Language proficiency	2
Age	7
Having studied in the UK	6
Salary	8
Priority occupations	3

Other please specify (in 200 words):
1. Suitable skills or values (not necessarily work experience). This is more important than work experience and we believe ranks as number 1, with the other characteristics renumbered accordingly. ie Work experience should be 2, Language proficiency should be 3 etc.

MAC stakeholder database

Would you like to be added to our stakeholder database for future research purposes and updates on MAC work?
Yes

Q54. We may require follow-up to clarify or supplement your responses to the online form, or for follow-up research. Do you consent to be contacted to clarify or supplement your responses?
Yes

Annex B: MAC Call for Evidence Questions for representative organisations

Supplementary evidence by Colin Angel, Policy Director, UKHCA, submitted at Question 29 of the on-line version of this questionnaire

Thank you for the opportunity to respond to this consultation. This submission is made by the United Kingdom Homecare Association, which is the national professional association for homecare providers. We have over 2,000 member organisations delivering home-based social care into people's own homes.

The homecare sector comprises 10,829 businesses which are regulated by one of the four national social care regulators to deliver homecare services. (i)

There is no UK-wide dataset about the social care workforce. The wider issues of social care services varies by administration, and is largely focussed on state-funded services. Where necessitated by the absence of data, we have used data from England to represent the picture across the UK, on the basis that it is broadly similar.

We estimate that there are around 536,000 homecare workers employed in the UK (excluding supervisors and managers). (ii) They support older and disabled people to live independently at home, of which at least 850,000 people are funded by councils or the NHS and a further 365,000 people pay for their own care. (iii)

People who use social care services (particularly the majority of those funded by the State) are likely to have two or more long-term health conditions and are heavily reliant on NHS support. For many, their home-based care enables them to remain independent at home, rather than using acute hospital services, or moving into residential care.

The homecare workforce therefore make a major contribution to the social good of the UK because they are either:

1. Delivering services commissioned by local government or the NHS (estimated to be 70%); or

2. Supporting people who would otherwise rely on State-funded care, if their net assets fall below eligibility criteria set by Government (estimated to be 30%).

However, the predominance of state-funding for social care means that the wages paid to the workforce are largely determined by the fees paid by the statutory sector. This has an undesirable effect on the terms and conditions which employers in the independent and voluntary sector can offer to the workforce.

The fragility of the UK's homecare market is well-documented, including by the social care regulators, who recognise the impact of under-funding by central and local government. (iv)

The Migration Advisory Committee will be aware that the Government has not brought-forward plans for the long-term funding of social care, promised two years ago. We believe that this places employers in the homecare sector at a significant competitive disadvantage to other business sectors competing for workers with similar skills and career expectations.

The Migration Advisory Committee has previously observed that problems of low-pay and status of the social care workforce, rather than access to migrant workers, would be a more suitable solution. (v) The situation remains, however, that Government inaction in this area has not addressed the issues which the Committee believed were needed.

The homecare sector workforce in the United Kingdom (and the wider social care sector) is facing a number of other serious challenges. These are likely to be exacerbated by the UK's exit from the European Union.

A lack of strategic workforce decision-making

There has been a lack of comprehensive workforce planning by central and local government across the sector. At the moment, there is no national workforce strategy covering social care and health settings across the UK, or within any of the four UK nations. This means that there has not been an assessment of the growing and changing care needs of the population reconciled with any plan for growth in the social care workforce. In England, the National Audit Office has criticised the Department of Health and Social Care for neither having a national workforce strategy nor doing enough to support a sustainable social care workforce. (vi)

 This has come about because of a lack of clear roles and responsibilities in law at Government level, and within national and local bodies for workforce planning and supply. For individuals using care services, the lack of strategic oversight has led to unmet needs and delays in discharge (vii) In addition, there is a significant proportion of the population (estimated to be 1.4 million people) (viii), who would benefit from a social care service, but do not receive one. While this is primarily the result of constrained public spending, it is exacerbated by known workforce shortages. These factors together put additional pressure upon other parts of the health and care system.

Shortages of homecare workers

This lack of strategic planning has led to severe workforce shortages across social care. There has been a 23% increase in homecare jobs over the previous 6 years. (ix) This is expected to increase with the needs of an ageing population and government policy to support more people at home, rather than in institutions. Staff turnover in the homecare sector is running at 38.8%. (x) An estimated 10.6% of posts are vacant. (xi)

In 2017 UKHCA surveyed 324 homecare employers. 95% told us that recruiting front-line careworkers was "difficult or extremely difficult". 80% said the same thing about first-level supervisors. This compares to just 19% of respondents who said recruiting to clerical or admin roles was equally difficult. We believe that we would receive even worse results to the same survey today. (xii)

Workforce supply is currently not generating sufficient numbers of staff to fill all existing posts within social care, and there is not enough capacity within the workforce to meet increasing future demands. (xiii) This puts the delivery of safe and effective care at risk.

When there are insufficient numbers of staff generated through supply pipelines, recruitment into vacancies at provider level becomes more challenging. In the current economic environment, providers may be limited in what they can offer to potential recruits to incentivise them into employment, such as increased wages or better terms and conditions.

In practice, this means that posts are often left vacant or are substituted with less experienced or less skilled staff. (xiv)

When staffing shortages occur, staff members are more likely to work additional hours; this is often unpaid. (xv) While it is a tribute to the dedication of the existing homecare workforce, it would be unethical to rely on the goodwill of the workforce, and over time it is likely to be detrimental to the motivation of the workforce.

Pressures arising from staff shortages are a source of additional stress, which can lead to individuals become unwell and missing work (xvi). Individuals receiving social care support are negatively affected by staffing shortages too; care is more likely to be left undone, or performed in a rushed or undignified manner. In some areas this puts more of a burden on unpaid family carers substituting the role which ordinarily would be undertaken by professionals. (xvii)

Status and perception of the social care workforce

Staff working in social care report feelings of a lower status and level of recognition in comparison to colleagues working in the NHS. (xviii) This may be exacerbated by lower wages in social care settings. (xix)

In 2017 UKHCA surveyed 324 homecare employers. 95% told us that recruiting front-line careworkers was "difficult or extremely difficult". 80% said the same thing about first-level supervisors. This compares to just 19% of the same sample of respondents who said recruiting to clerical or admin roles was equally difficult. We believe that we would receive even worse results to the same survey today.

Future uncertainty caused by Brexit

In England (where the figures are available) 16% of the homecare workforce are non-British nationals (7% from the EU). (xx) The proportions vary by government regions and in London non-British nationals account for 43% of the workforce. (xxi)

Wages, on-costs and reimbursing mileage are approximately 74% of the cost of homecare and must be funded from the fees paid by the purchaser (see references to the dominant impact of purchase from the statutory sector, above).

79% of EEA nationals are earning less than £30k per annum. (xxii) The average annual pay of front-line homecare workers is £13.9k and senior careworkers

£15.0k, less than half the current threshold. (xxiii) This means that few, if any, front-line homecare workers from outside the UK would be eligible to work here if the Government's proposed immigration system was implemented, (xxiv) and even with an exemption from the earning threshold, the expectation that prospective recruits would be able to meet qualification requirements would present an insurmountable barrier. The majority of people recruited into the homecare workforce at present do not have a previous qualification, but often have extremely valuable life experiences which equip them with the right skills and values to meet people's care needs.

The impact of this would be catastrophic for the social care sector, and the level of domestic supply is not sufficient to substitute any losses of staff caused by these proposed changes. Migration policy alone cannot fix the issues with domestic shortages. (xxv)

Our recommendations to the Migration Advisory Committee

We urge the Migration Advisory Committee to give consideration to the following two options:

1. To place social care workers, including homecare workers, on the shortage occupation list; or

2. To create a measure of 'social value' for prospective recruits to the social care sector which recognises the value of social care work, rather than a combination of minimum annual salary and previous qualifications.

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[i] This figure is a combination of data from the four social care regulators in the United Kingdom. Definitions and requirements to register homecare agencies differ in all four UK administrations.

[ii] UKHCA's analysis of data available from the four UK regulators, with reasonable assumptions made for missing data.

[iii] Ibid.

[iv] Care Quality Commission (2019) The state of health care and adult social care in England 2018/19, pp39-40 https://www.cqc.org.uk/sites/default/files/20191015b_stateofcare1819_fullreport.pdf

[v] Migration Advisory Committee, EEA Migration in the UK: Final Report https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/741926/Final_EEA_report.PDF

[vi] National Audit Office report, February 2018, Department of Health & Social Care - The adult social care workforce in England, paras 3.7 – 3.11 https://www.nao.org.uk/wp-content/uploads/2018/02/The-adult-social-care-workforce-in-England.pdf

[vii] The King's Fund (2018) *Key challenges facing the adult social care sector in England* [Available at https://www.kingsfund.org.uk/sites/default/files/2018-12/Key-challenges-facing-the-adult-social-care-sector-in-England.pdf]

[viii] Age UK, Briefing: Health and Care of Older People in England 2019
https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/health--wellbeing/age_uk_briefing_state_of_health_and_care_of_older_people_july2019.pdf

[ix] Skills for Care (2019) Domiciliary care services in the adult social care sector 2018/19. [Available at: https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/Summary-of-domiciliary-care-services-2019.pdf]

[x] Ibid.

[xi] Ibid.

[xii] United Kingdom Homecare Association. Unpublished data from a national survey in 2017, which was completed by owners, directors and senior managers of homecare provider organisations across the UK.

[xiii] RCN England (2018) *Response to Local Government Association green paper for adult social care and wellbeing in England* [Available at https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/policies-and-briefings/consultation-responses/2018/conr-4418.pdf]

[xiv] Skills for Care (2018) *The state of the adult social care sector and workforce in England* [Available at https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-state-of-the-adult-social-care-sector-and-workforce-2018.pdf]

[xv] Fair Work Convention (Scotland) (2019) *Fair Work in Scotland's Social Care Sector 2019* [Available at https://www.fairworkconvention.scot/wp-content/uploads/2018/11/Fair-Work-in-Scotland%E2%80%99s-Social-Care-Sector-2019.pdf]

[xvi] Bath Spa University (2018) *UK Social Workers: Working conditions and wellbeing* [Available at https://www.basw.co.uk/system/files/resources/Working%20Conditions%20%20Stress%20%282018%29%20pdf.pdf]

[xvii] Independent Age (2016) *Brexit and the future of migrants in the social care workforce* [Available at https://independent-age-assets.s3.eu-west-1.amazonaws.com/s3fs-public/2016-09/IA-Brexit-Migration-report.pdf]

[xviii] King's College London (2018) *Recruitment and retention in adult social care services* [Available at https://www.kcl.ac.uk/scwru/pubs/2018/reports/recruitment-and-retention-report.pdf]

[xix] The King's Fund (2019) *Average pay for care workers: is it a supermarket sweep?* [Available at https://www.kingsfund.org.uk/blog/2019/08/average-pay-for-care-workers]

[xx] UKHCA analysis of workforce data held by Skills for Care covering front-line careworkers and senior careworkers in the independent and voluntary sector, calculated in January 2019.

[xxi] Ibid.

[xxii] IPPR (2018) *Fair Care* [Available at https://www.ippr.org/files/2018-11/fair-care-a-workforce-strategy-november18.pdf]

[xxiii] Full-time workers undertaking a 35-hour week and taking statutory holiday entitlements. Calculated by annualising hourly wage rates in Skills for Care (2019) Domiciliary care services in the adult social care sector 2018/19, as above.

[xxiv] Cavendish Coalition Response from UKHCA June 2019
http://www.ukhca.co.uk/pdfs/cavendishcoalitionresponsejune2019final.pdf

[xxv] Independent Age (2016) *Brexit and the future of migrants in the social care workforce* [Available at https://independent-age-assets.s3.eu-west-1.amazonaws.com/s3fs-public/2016-09/IA-Brexit-Migration-report.pdf]

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