

# Early findings from a social care workers' longitudinal survey (Wave 1): COVID-19 implications

Shereen Hussein, Eirini Saloniki, Grace Collins, Catherine Marchand and the RESSCW research team

*Work in progress. Please contact the authors before citing*

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MEDICINE



# About the Retention and Sustainability of Social Care Workforce (RESSCW) project

Funded by the Health Foundation's Efficiency Research Programme.  
Collaboration between UoK, UCL, City and SfC: 2019-2022

It aims to help social care providers, commissioners, regulators and policy-makers understand the specific organisational and individual drivers of staff retention in the social care sector

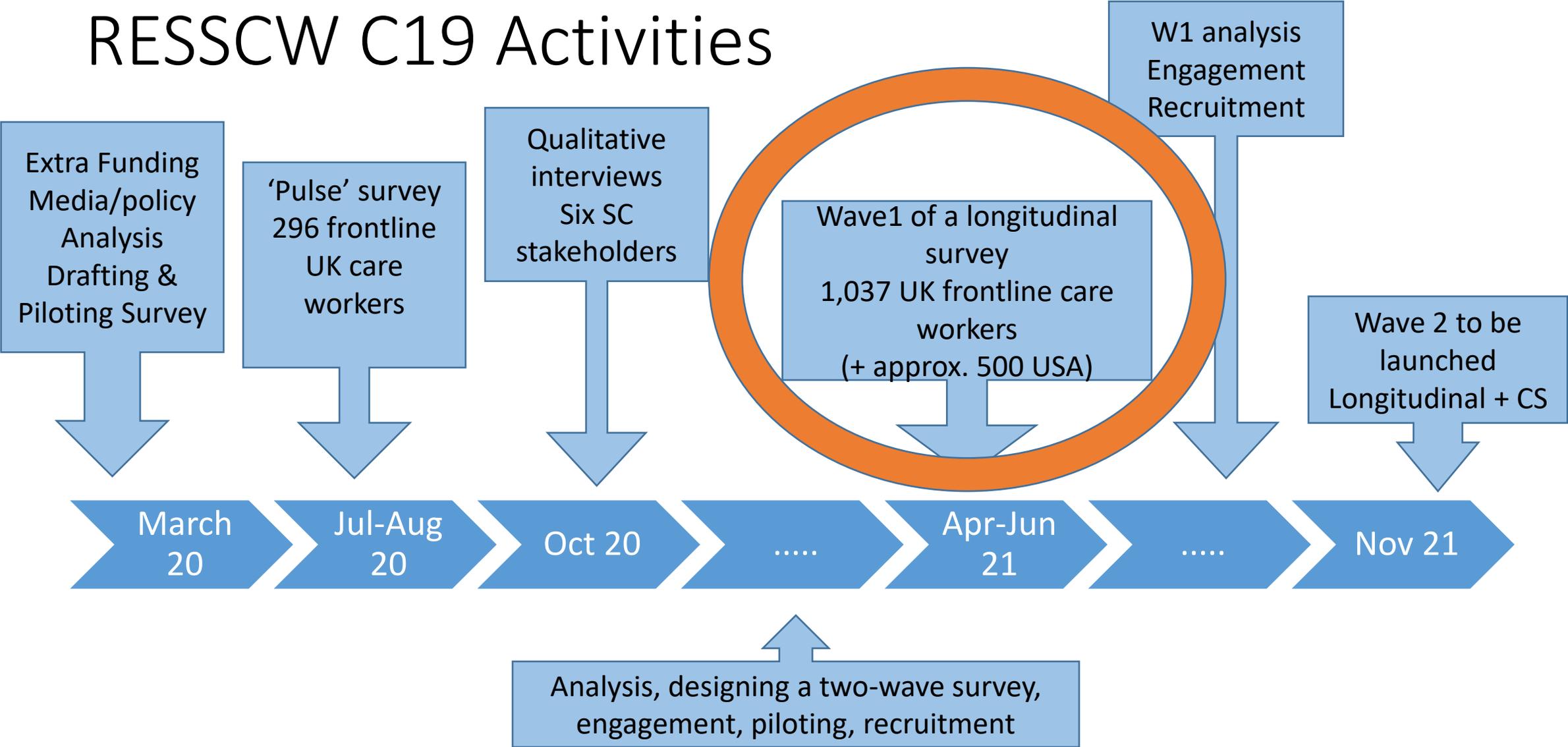
Work has been extended to examine the impact of COVID-19 on workforce retention & sustainability

## *Project Team:*

F. Vadean & S. Hussein (Co-PIs), S. Allan, E. Saloniki, K. Gousia, A. Turnpenny, G. Collins, A.M. Towers, A. Bryson, J. Forth, C. Marchand and D. Roland

*Disclaimer: The Health Foundation is an independent charity committed to bringing about better health and health care for people in the UK. The views expressed are entirely those of the authors.*

# RESSCW C19 Activities



# Summary of Findings from Pulse Survey & Stakeholders Interviews



# Pulse survey (Jul-Aug 20)

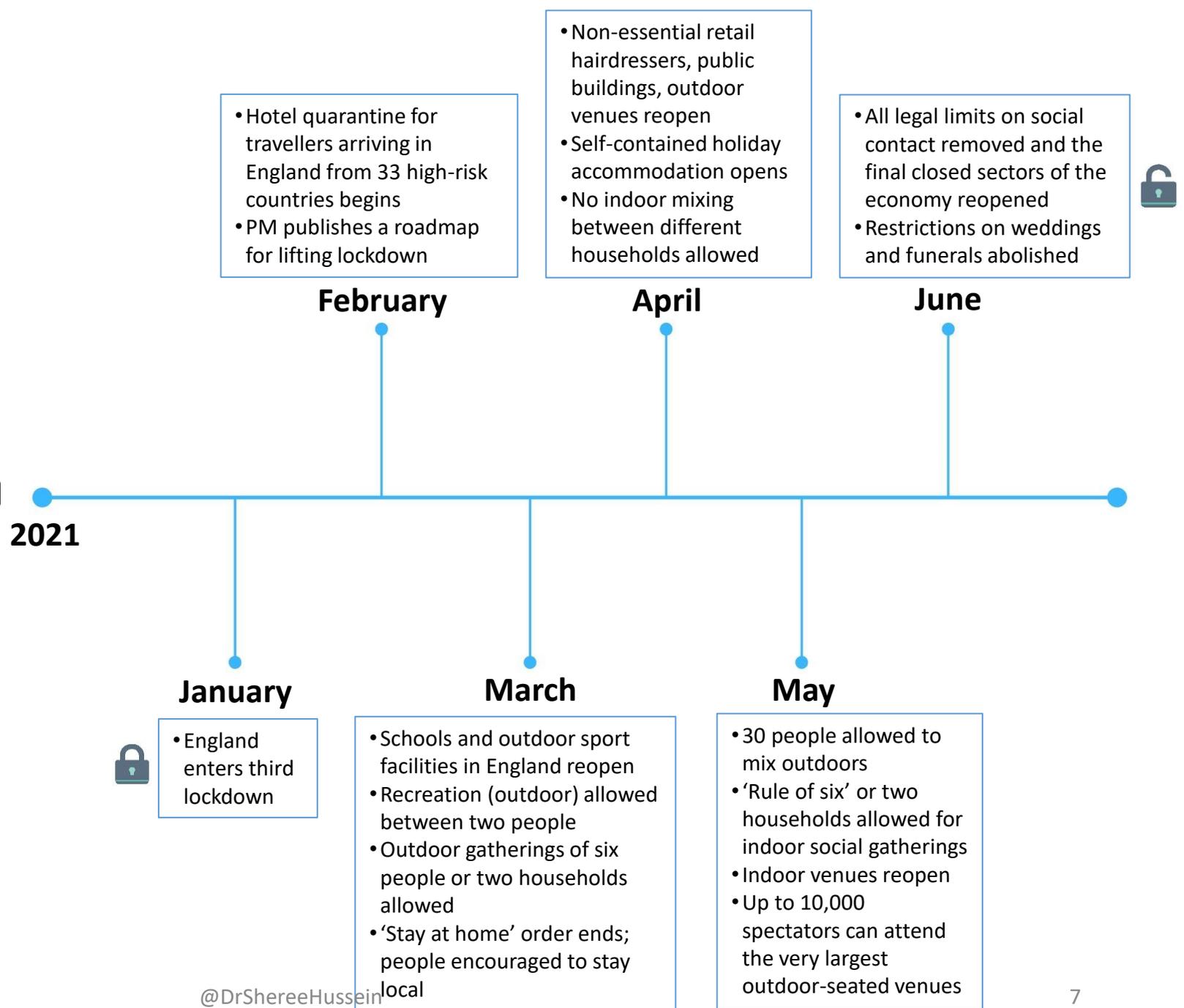
- Evidence of increased workload, stress and feelings unsafe at work
- Reported decline in general health
- Cases of self-isolation particularly high among black and minority ethnic staff (BAME)\*
- Over fifth have not had COVID-19 related training (half of BAME respondents)\*
- One in six reported not having clear guidance to be safe at work
- One in six did not have access to PPE
- One in sixteen had symptoms but did not receive a COVID-19 test
- Need to examine the effects of ethnicity and regional variation

\* small number of cases for BAME respondents

# Stakeholders Interviews

- High levels of anxiety amongst the social care workforce
- Social care sector felt to be abandoned in the early months of the pandemic
- Lack of understanding of the social care sector by central government
  - Policy guidance felt to be focused on the NHS
- Pressure to source PPE
- Supporting staff wellbeing: an onus on providers
  - *“let’s split the care givers amongst ourselves and phone up, and we’re not asking about work, we’re just saying, “And how are you, how’s it going at the moment, what can we do to support you?””*

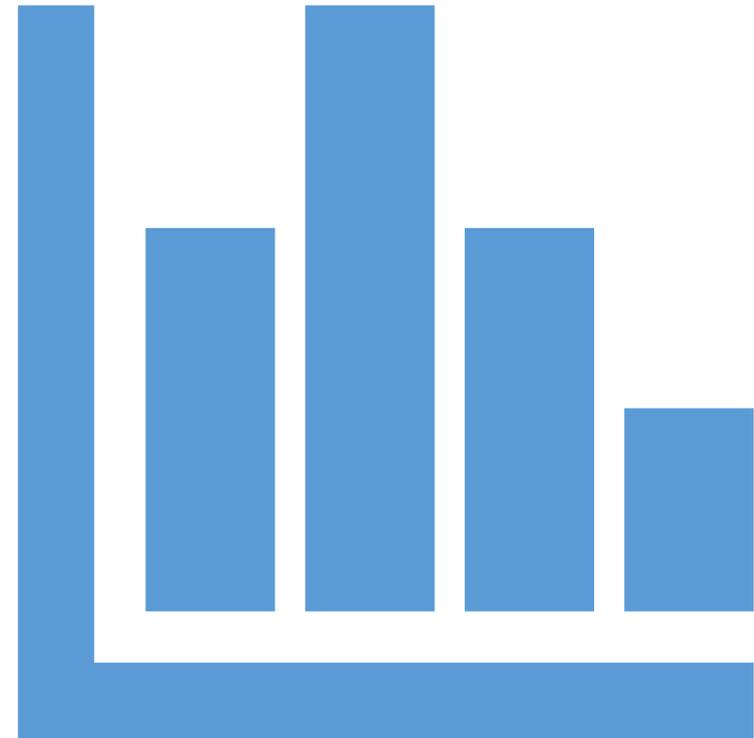
# Timeline leading to Wave1



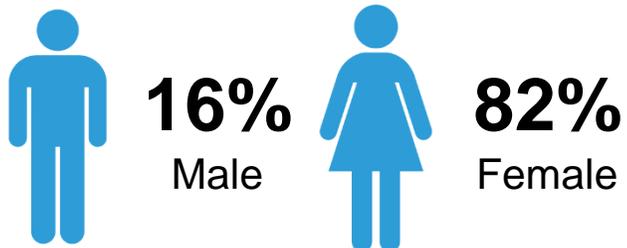
Source: Institute for Government analysis

# Findings from W1 Frontline care staff survey (Apr-Jun 2021)

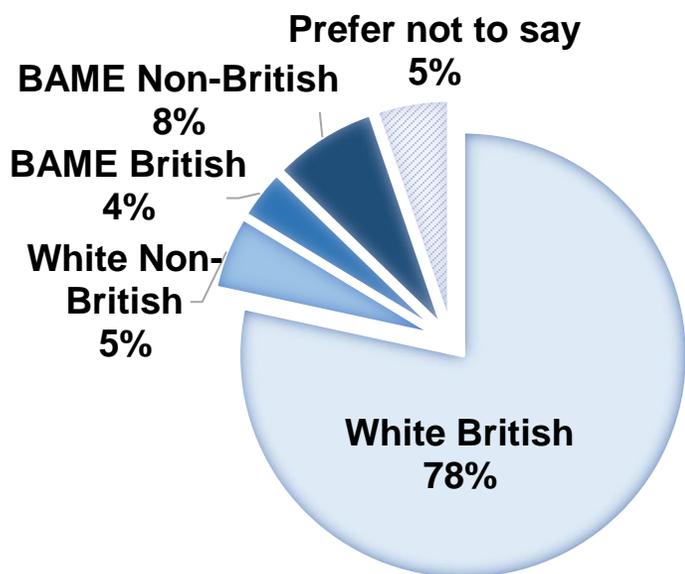
Eirini Saloniki



# Gender

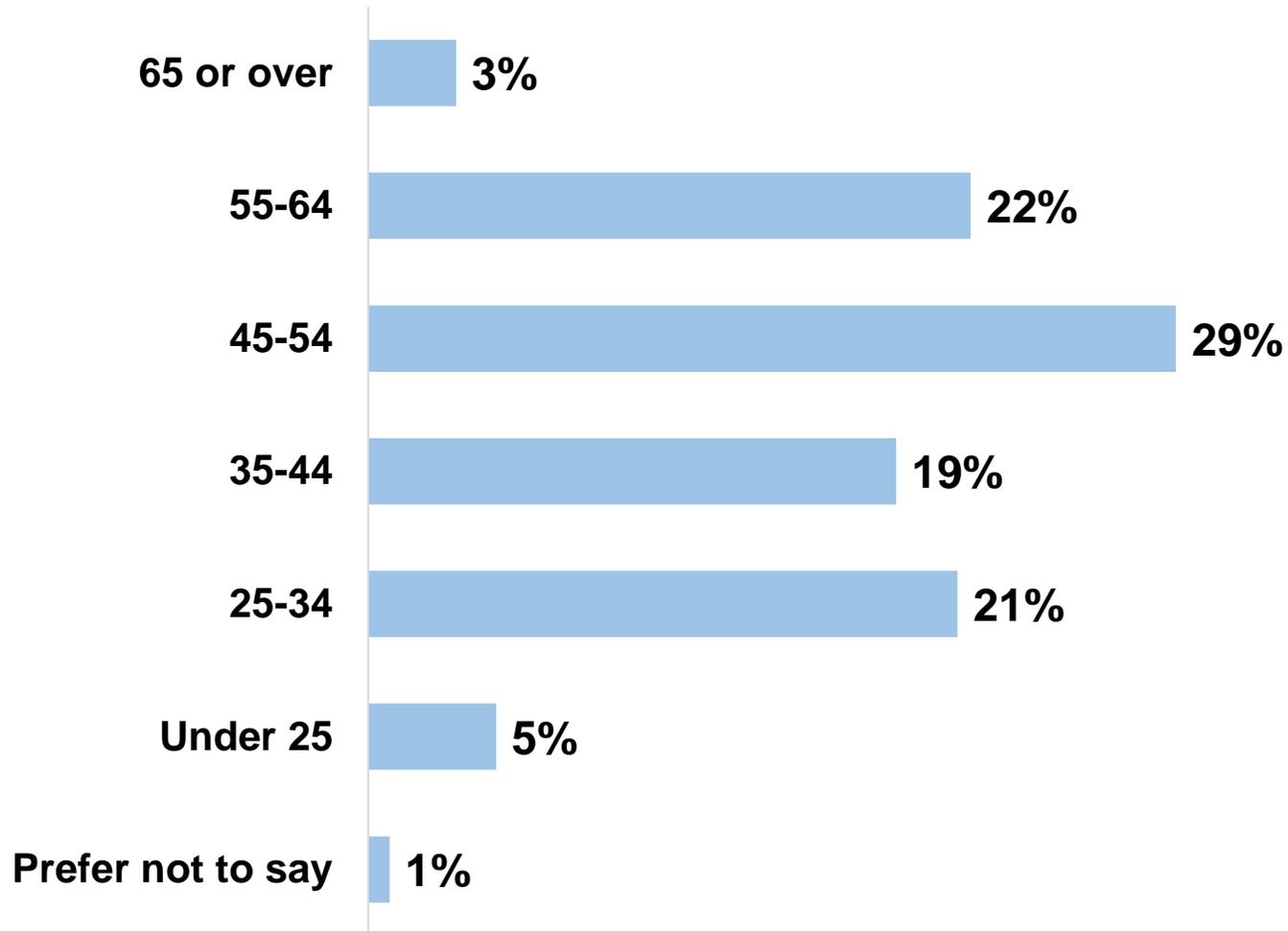


2% Other/Prefer not to say

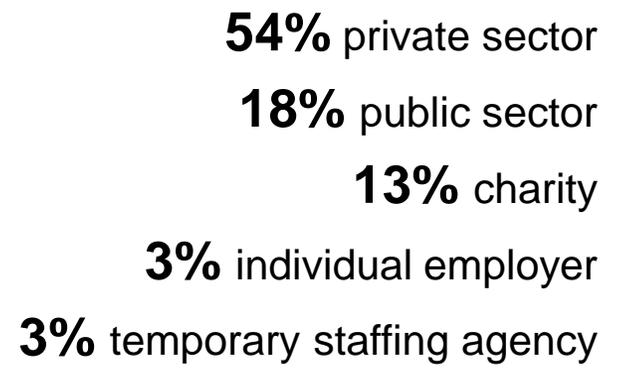
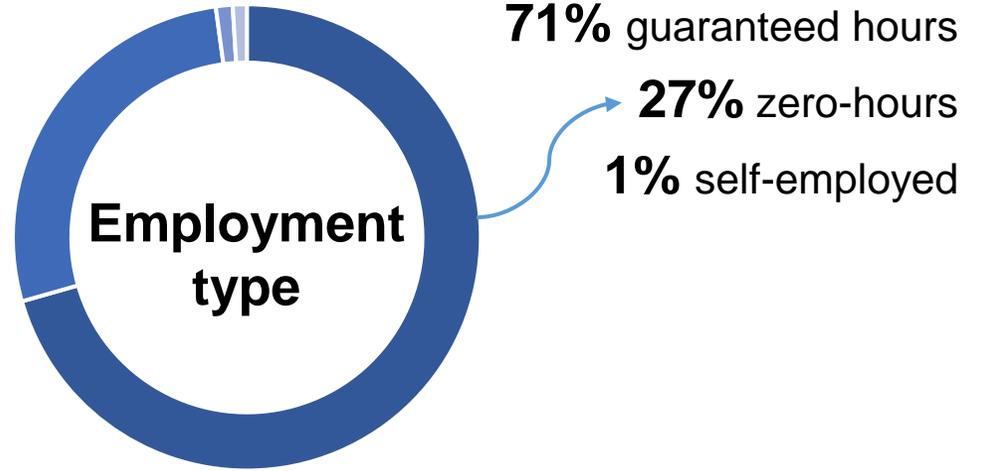
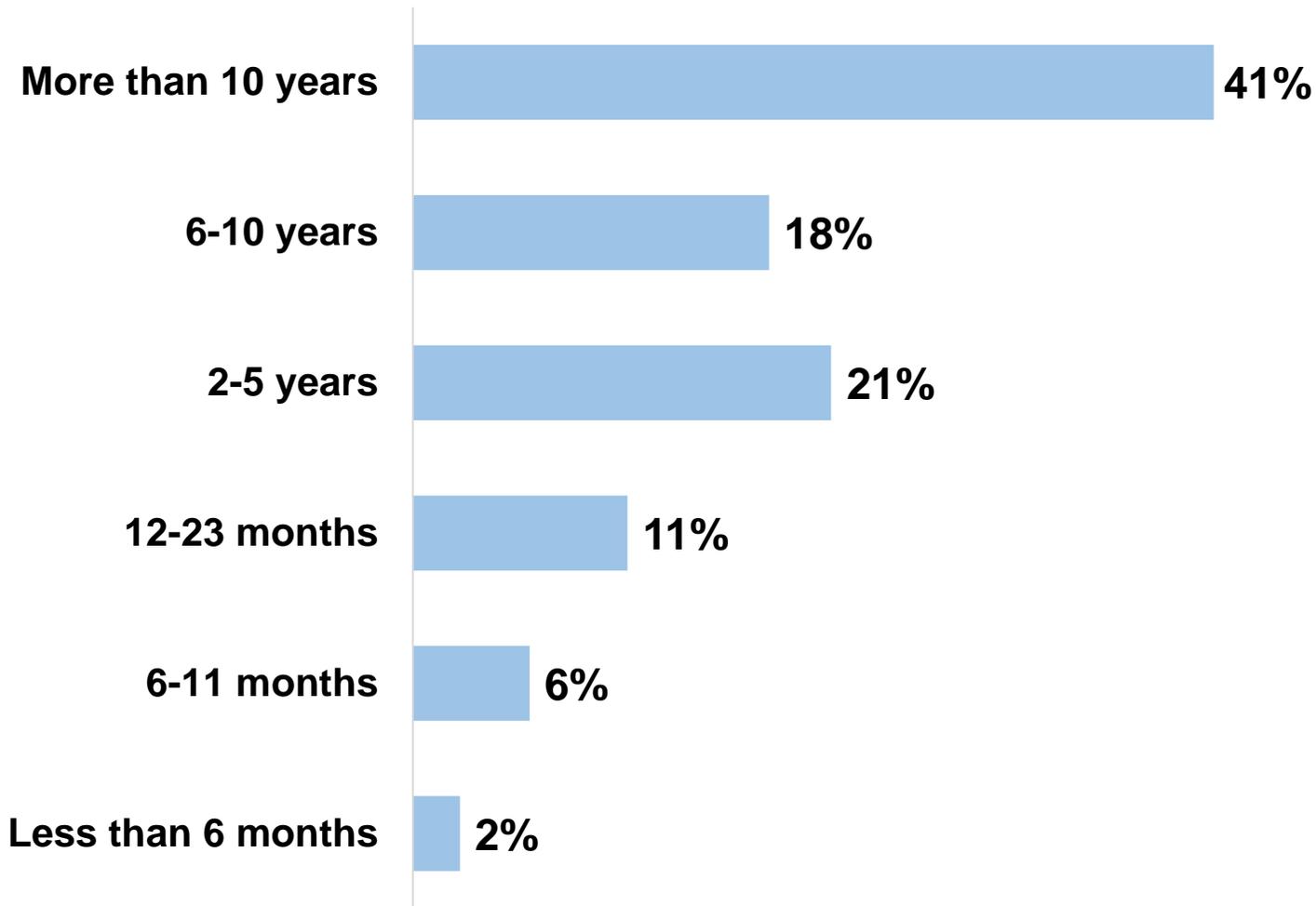


An online survey from 13<sup>th</sup> April to 28<sup>th</sup> June 2021  
Received 1,037 valid responses

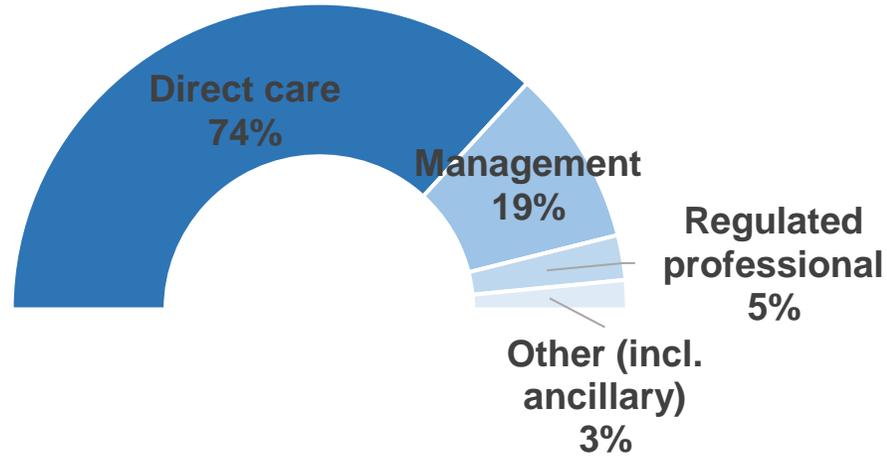
# Age



# Time working in social care



# Main job role



## Examples ([Skills for Care](#))

Direct care: care worker, personal assistant, advocacy worker

Management: manager, team leader, specialist coordinator

Regulated professional: social worker, occupational therapist, nurse

Other (incl. ancillary): administration roles, cook, domestic worker



Personal assistant



Live-in care worker

18/10/2021

## Groups work with

**58%** older adults (including those with dementia)

**16%** adults with physical and/or sensory disability

**14%** adults with mental health needs

**8%** adults with a learning disability or autism

**3%** children and young people



Source: freepik.com

## Setting mainly carrying out work

**36%** residential care (with/without nursing)

**38%** domiciliary care

**5%** day centre/service/community

**19%** supported living/extra care housing

@DrShereeHussein

Since the start of 2021:



**32%** increased workload without additional pay

**27%** self-isolated

**20%** increased paid working hours

**18%** took sick leave due to COVID-19

**13%** redeployed to a different role or workspace

**13%** stopped or was stopped by employer from working in different places to reduce spread of COVID-19

**If self-isolated, took sick leave or stopped working**



**48%** normal pay  
**28%** statutory sick pay  
**9%** employers' sick pay  
**11%** no pay

18/10/2021

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Employers should have more staff to avoid increased workload

Domiciliary care, older adults

Direct care, older adults, care home w or w/o nursing

it is such a struggle .. to keep my head above water to pay bills and council tax as i only received about £93 for the 11 days I had off with COVID 19

Care workers are now on thier knees and fatigued and yet still no light at the end of the tunnel.

Management, domiciliary care

I work more hours than the legal limit.

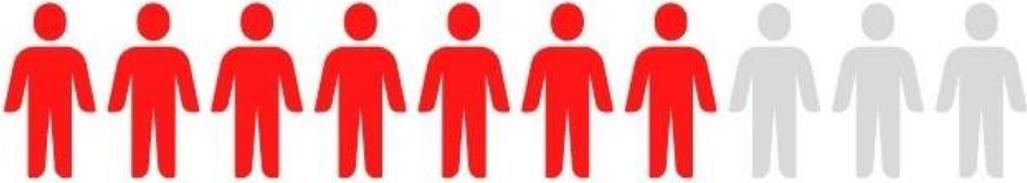
Direct care, older adults, care home w or w/o nursing

We had to work longer hours with less staff

Direct care, supported living/extra care housing

Since the start of 2021:

Among the people they work with



7 out of 10 had **confirmed** COVID-19 cases among staff or clients

Asked to do continuous working as all staff tested positive and needed to isolate, and offered without pay increase or proper recognition of work after the covid crisis.

Regulated professional, older adults, care home w or w/o nursing

Pressure to take covid vaccine at work, no sensitivity about that.

Direct care, older adults, care home w or w/o nursing



Had first dose of COVID-19 vaccine

87% ✓ 9% ✗ 3% !

I am very happy that we had both doses of vaccine and I hope for this whole thing to be over with and to go back to normal

Regulated professional, older adults, care home w or w/o nursing

Vaccines shouldn't be forced on ourselves or risk losing our jobs if not wanting to have the injection.

Direct care, older adults, care home w or w/o nursing

Source: canva.com

## Experienced in relation to COVID-19:



reported being abused  
(verbal abuse, bullying,  
threat or physical violence)

## Experienced in relation to COVID-19:



Verbal abuse



Bullying



Threat



Physical violence

Being called names,  
being threatened,  
being followed.

Direct care, adults with  
physical and/or sensory  
disability, supported  
living/extra care housing

A huge amount of negative  
comments on social  
media, blaming carers for  
so many residents who  
died of covid, and blaming  
care homes of keeping  
residents hostage,  
unwilling to allow visits

Direct care, older adults, care  
home w or w/o nursing

Social care workers have been the target  
for blame from all areas during covid 19,  
we were told to stop family visits then lots  
of documentaries on how cruel we were.  
... the general population now see us as a  
low paid, in a role where we don't need to  
be respected - yet we are caring for your  
loved ones.

Management, care home w or w/o nursing

Management threatened that we would have to complete our isolation period in work and live there for the duration if there was an outbreak amongst residents. Management ordered us to not use the track and trace app on our phones.

Direct care, children and young people, care home w or w/o nursing

I feel abused by the Government..! Coerced and bullied into forcing me to wear masks'.

Direct care, day centre/service & community

Because we were on the front line and trying to implement guidelines we had been given we got all the abuse thrown at us from residents and staff. No support given.

Management, supported living/extra care housing

Family's don't seem to understand that the company I work for don't make the rules, guidance given from PHA. They can be very frustrated and take that anger out on us.

Direct care, older adults, care home w or w/o nursing

I was threatened with a disciplinary from a regional manager due to me stating I was not going to let my team look after residents without full PPE despite having positive covid results on my unit.

Regulated professional, older adults, care home w or w/o nursing

**Verbally abused by**

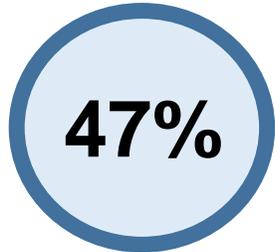
- 43% service user/client
- 32% service user's/client's family
- 24% colleague/staff member
- 24% general public
- 19% manager/supervisor

**Bullied by**

- 31% colleague/staff member
- 29% manager/supervisor
- 24% service user/client
- 16% service user's/client's family
- 10% general public

# Experienced in relation to COVID-19:

## Verbally abused – action taken



reported it to a manager/supervisor



took no action



told a colleague/staff member

## Bullied – action taken



reported it to a manager/supervisor



told a colleague/staff member



sought help from a union

There was nothing I could do. It was reported to line management. I was trying to keep all within the government guidelines and to keep people safe but colleagues wanted to and did work against the directives given placing all others at risk. When this was raised they bullied and used threatening behaviour.

Management, care home w or w/o nursing

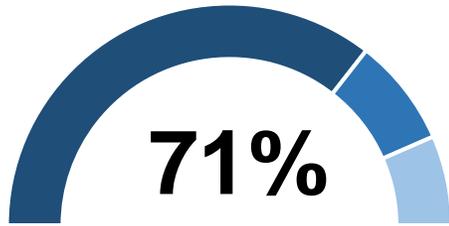
Direct care, adults with mental health needs, domiciliary care

It was reported to police and management, but they did nothing because "can't do anything about it because of covid restrictions and tenancy agreements". So we had to take the abuse for almost a year ...

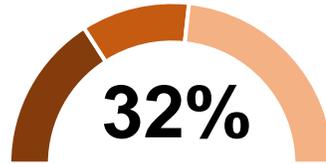
It's not safe to get help.

Direct care, adults with physical and/or sensory disability, supported living/extra care housing

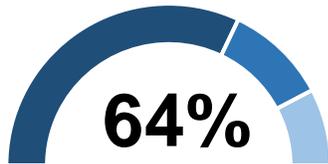
# Job Satisfaction and Intention to Quit



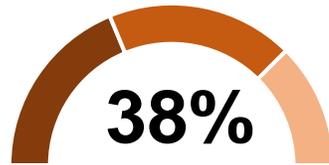
**very satisfied/satisfied with job (overall)**



**very satisfied/satisfied with amount of pay**



**very satisfied/satisfied with job security**



**very satisfied/satisfied with promotion prospects**

The desperately low pay, zero hours & no paid travel time is, the killer for this job. It's the most fulfilling job I have had. But I am constantly angry with the unfairness of the wages, pretence that it is unskilled labour, and so on. Which is why I can't stay.

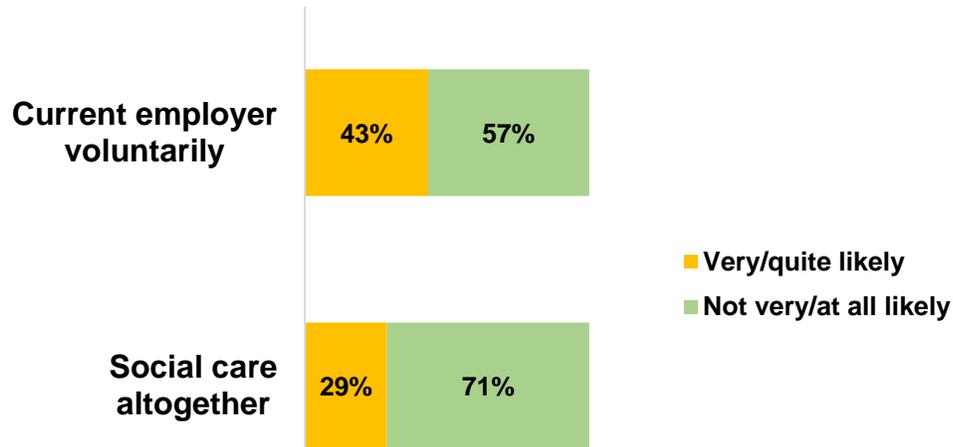
Direct care, older adults and adults with physical and/or sensory disability, domiciliary care

We were hung out to dry , we don't want clapping support we want fair wages for an extremely difficult job , appreciation in the pay packet not standing on front doors . Jobs stacking shelves in supermarkets pay better .... how is that right?

Direct care, older adults, care home w or w/o nursing

I feel undervalued, definitely under paid and have been looking for other jobs, not in care.

Management, care home w or w/o nursing



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**Intention to leave in the next 12 months**

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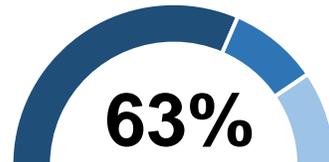
My immediate supervisor, line manager, boss, individual or family I work for...

respects me as a person



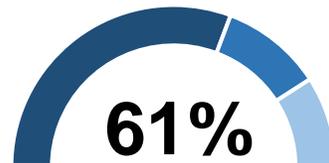
strongly/somewhat agree

recognises when I have done a good job

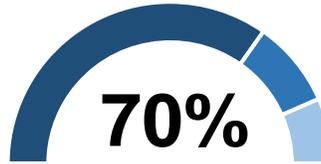


strongly/somewhat agree

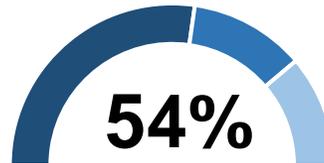
treats me fairly



strongly/somewhat agree



very satisfied/satisfied with job safety



very satisfied/satisfied with support from managers and/or co-workers



Source: freepik.com

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All through the pandemic I have worked every day had full support from managers and team mates been kept updated on COVID restrictions and had good supply of PPE

Direct care, older adults, domiciliary care

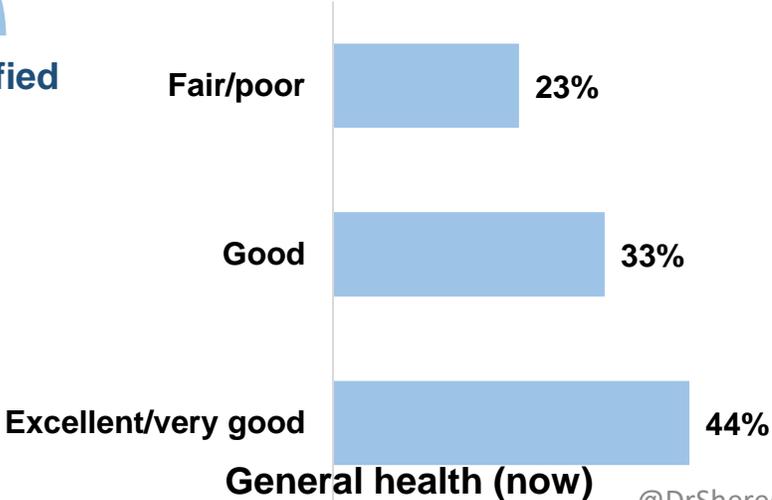
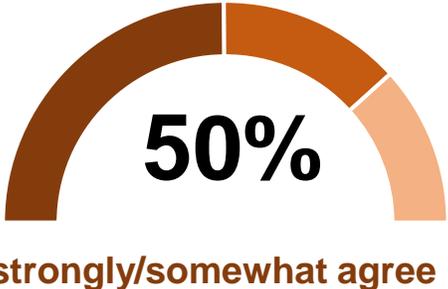
No support from management what so ever for people that suffer mental health, they seem to get rid of you and say your unfit for work, even when you have a drs note to say they think your fine. The management have no skills or support for supporting people with mental health, you actually feel victimised and that you are the one in the wrong etc.

Management, supported living/extra care housing

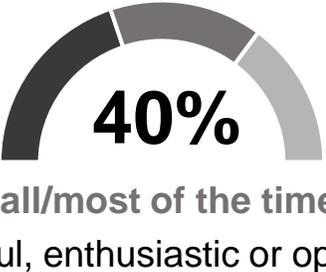
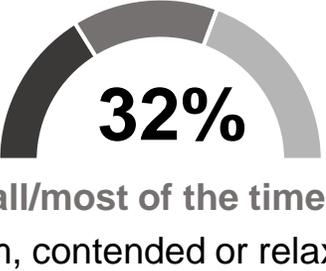
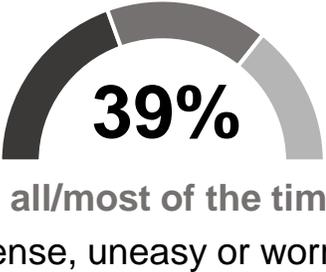
# Work-life Balance, Health and Wellbeing



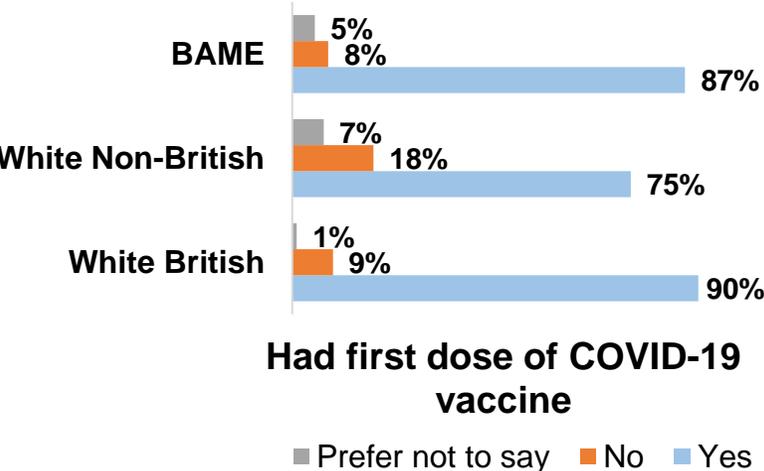
Often find it difficult to fulfil commitments outside work because of the amount of time spent on their job



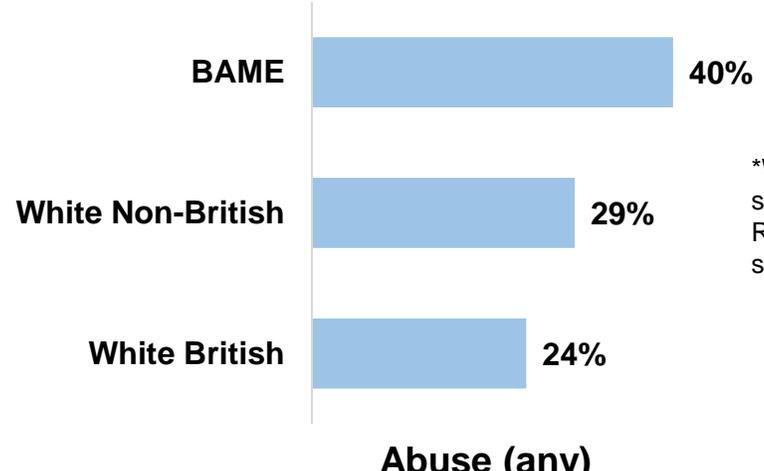
In the past few weeks, job has made you feel



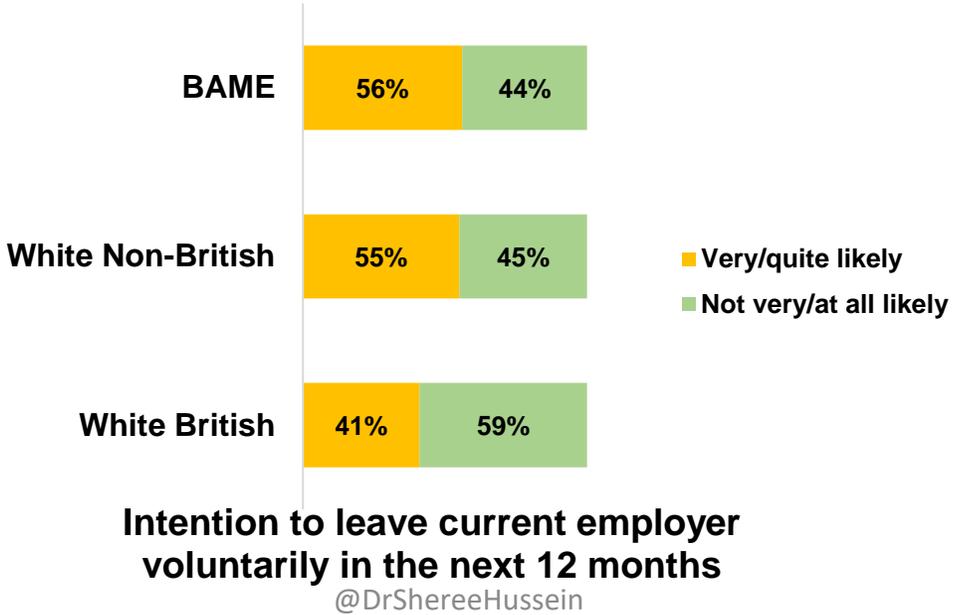
# Differential experience: Race & Nationality



\*White British vs BAME statistically significant at 5%. Remaining differences not statistically significant.

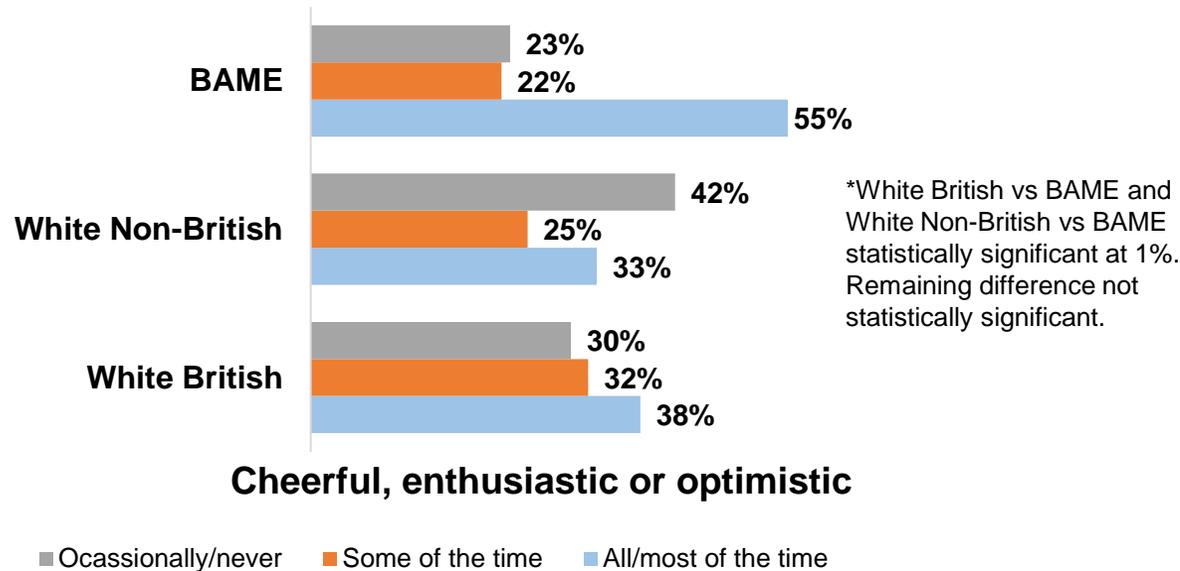


\*White British vs BAME statistically significant at 5%. Remaining differences not statistically significant.

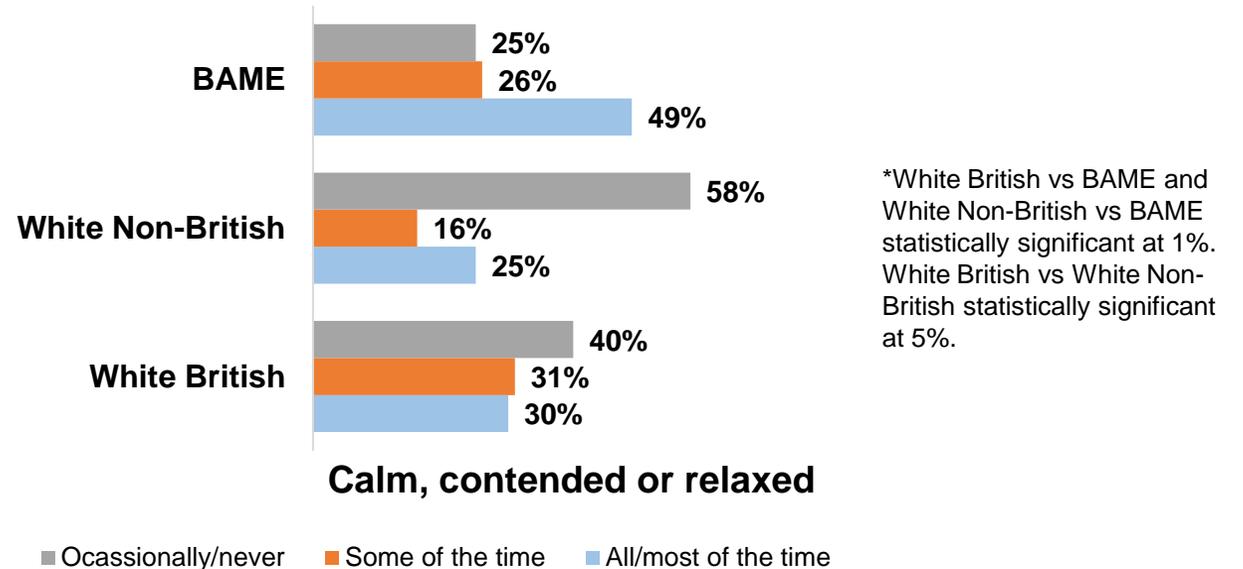


\*White British vs BAME statistically significant at 1%. White British vs White Non-British statistically significant at 10%. Remaining difference not statistically significant.

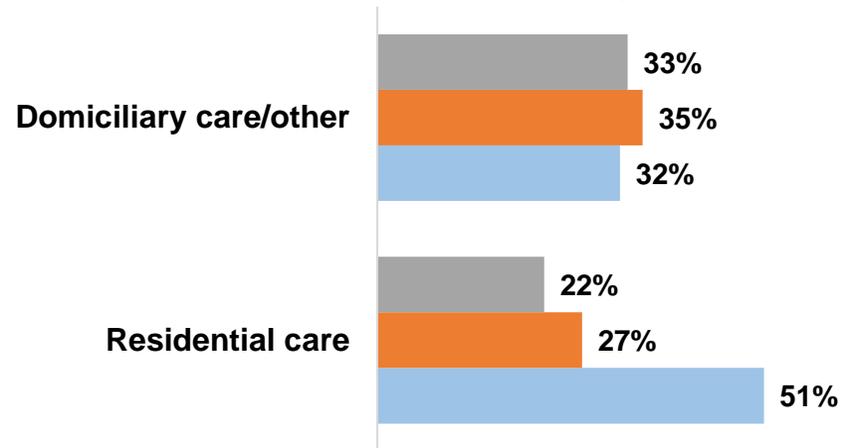
# Differential experience: Race & Nationality



- No significant differences:
  - Intention to leave SC altogether
  - Feeling tense or unease
  - Work-life balance



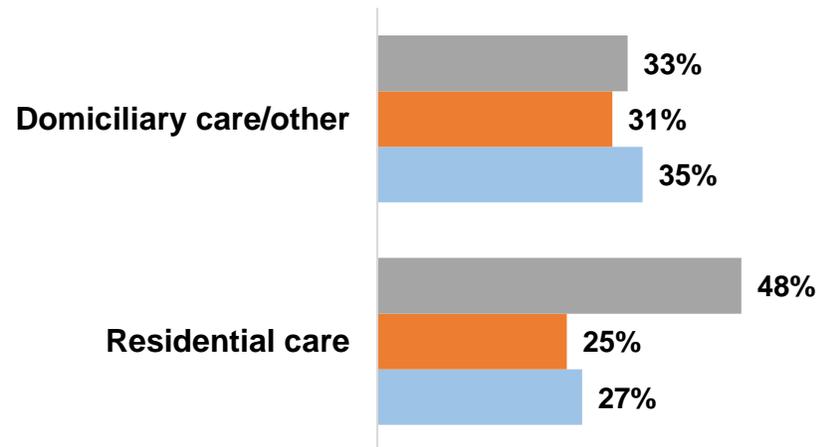
# Differential experience: Residential/domiciliary



\*Difference is statistically significant at 1%.

## Tense, uneasy or worried

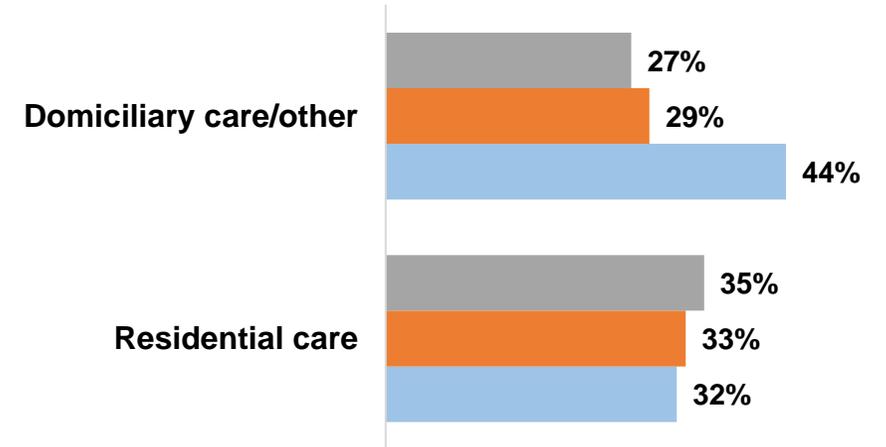
■ Ocassionally/never ■ Some of the time ■ All/most of the time



\*Difference is statistically significant at 1%.

## Calm, contented or relaxed

■ Ocassionally/never ■ Some of the time ■ All/most of the time

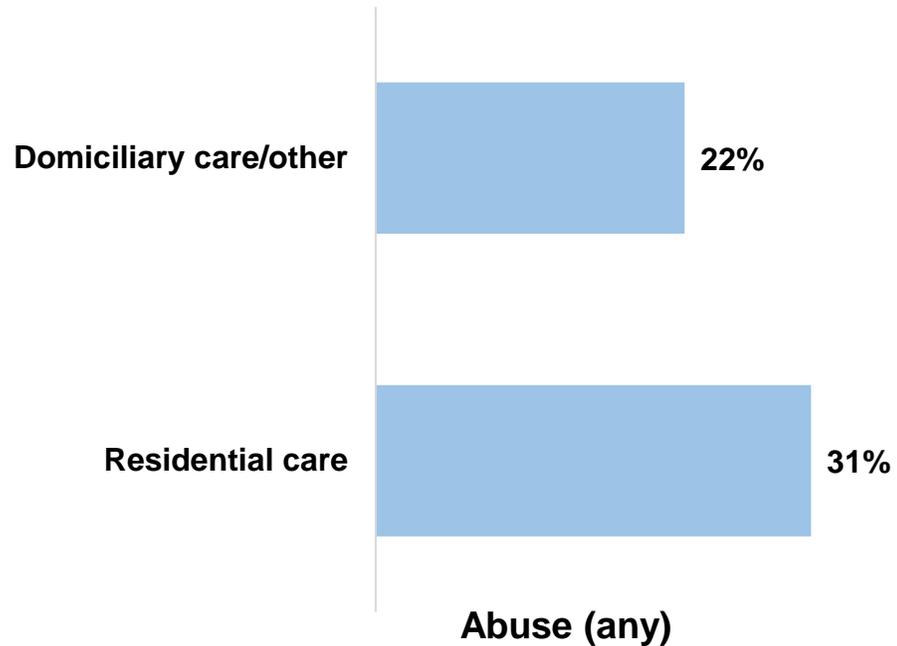


\*Difference is statistically significant at 1%.

## Cheerful, enthusiastic or optimistic

■ Ocassionally/never ■ Some of the time ■ All/most of the time

# Differential experience: Residential/domiciliary



\*Difference is statistically significant at 5%.

- No significant differences:
  - Intention to leave current employer
  - Intention to leave SC
  - Receiving first dose of vaccine
  - General health



# Summary and Conclusion

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# Key findings

Continued pressure on the sector and the workforce

Worrying findings related to bullying and abuse

Significant impact on workers' health and wellbeing

Workload pressures and unmatched pay

Intention to leave employers and the sector altogether

Some significant differences by ethnicity, nationality and care settings

- Racialised workers (BAME) adversely affected
- Impact on care homes

# Wider Implications

## Care workers feel neglected and undervalued

- **Workload**; job satisfaction; sense of responsibility
- **Wellbeing**: physical, mental and financial
- Further **retention** issues

## Brexit & COVID19

- The nature and structure of **social care provision**?
- **Live-in care**
- **Migrant workers**: who will fill the gaps?

## Sector-wide changes

- + Better **pay** & better jobs
- + Funding & reforms
- + Pool of recruits
- + Sector wide support mechanisms
- Geographical disparities
- Impact on **users** and their **informal carers**

Wellbeing ?

# Thank you for listening

## Happy to respond to questions

[Shereen.Hussein@LSHTM.ac.uk](mailto:Shereen.Hussein@LSHTM.ac.uk)

@DrShereeHussein

[e.saloniki@ucl.ac.uk](mailto:e.saloniki@ucl.ac.uk)

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