

# Determinants of staff turnover in Adult Social Care: an analysis from both worker and employer level perspective

Florin Vadean (PSSRU, University of Kent)

Eirini Saloniki (PSSRU & CHSS, University of Kent)

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## Acknowledgements

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## Two studies from the RESSCW project

- Job separation and sick-leave in LTC in England
  - Secondary data: ASC-WDS
  - Worker job-spell level analysis
- Determinants of staff turnover and job vacancies in LTC in England
  - Secondary data: ASC-WDS
  - Care establishment level analysis

# Motivation

- High staff turnover rates – over 30%; care workers 38% (Skills for Care 2020)
- 66% of leavers move to other social care employers (Skills for Care 2020)
- Potential negative impact on:
  - Service users – continuity and quality of care (Netten et al. 2007)
  - Providers – recruitment and training costs; closures (Netten et al. 2003)
  - Staff – workload, motivation (Royal College of Nursing 2012)
- What drives LTC staff turnover?
  - Previous studies (mainly US) – job (part-time work), management style (support and control), employer (for-profit, home care), local market (unemployment, competition)
  - England – low pay, limited career progression and employment without guaranteed hours (NAO 2018; HEE 2017; Taylor 2018; Moriarty, Manthorpe and Harris 2018)
  - survey of ~2k care services; 74% saw an increase in staff exits since Apr 2021; 50% leaving due to stress and 44% for better pay elsewhere (NCF, 2021)

## Aims

- Quantitative evidence on factors under the control of care providers and/or policymakers related to LTC staff turnover in England
- Importance of job quality (e.g. wages and guaranteed working hours) in driving staff retention
- Extend previous studies by controlling for unobserved worker and employer heterogeneity → reducing potential bias in the estimated coefficients

# Data

## Adult Social Care Workforce Data Set (ASC-WDS)

- >700k social care staff, >20k establishments; ~50% of LTC market
- Four cuts - Oct 2016, Oct 2017, Oct 2018, Oct 2019
- Identification of care establishments and workers - unique/permanent IDs
- Inclusion criteria
  - Establishments – records updated in last 6 months; unique IDs for >75% of workers; statutory LA (i.e. public), private (i.e. for-profit), and voluntary (i.e. not-for-profit) establishments; care home services with nursing, care home services without nursing and domiciliary care (i.e. home care)
  - Workers – unique ID; no multiple entries per year; employed under a permanent or temporary contract; aged 16 to 64; direct care role (i.e. 86% care workers, 10% senior care workers, 4% other care providing roles [e.g. community support & outreach and activity workers])

# Sample and main variable (job-spell analysis)

## Main variable

- Job separation – binary variable
  - = 0, if worker still with same employer 12 months later (61%);
  - = 1, if employee
    - employed 12 months later by other LTC employer in the sample (5.5%);
    - not in sample 12 months later, but employer still in the sample (19.5%);
  - = missing, if job separation status not identified (14%).

## Final sample

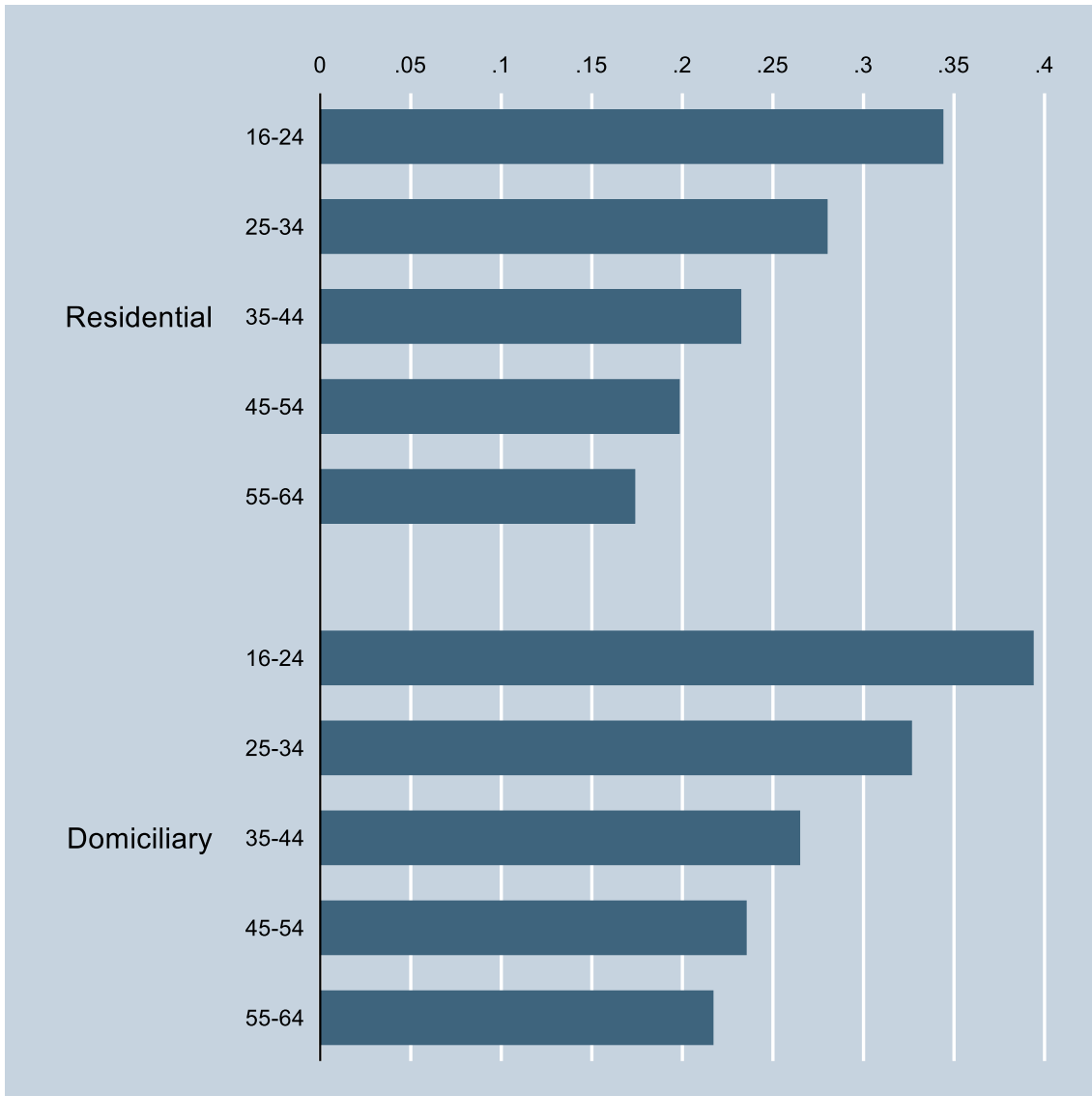
- 355,155 observations of 211,283 job-spells in 8,312 care establishments
  - Sector – statutory LA (6%), private (79%), voluntary (15%)
  - Care setting – CH w/ nursing (23%), CH w/o nursing (33%), domiciliary care (44%)

# Sample representativeness

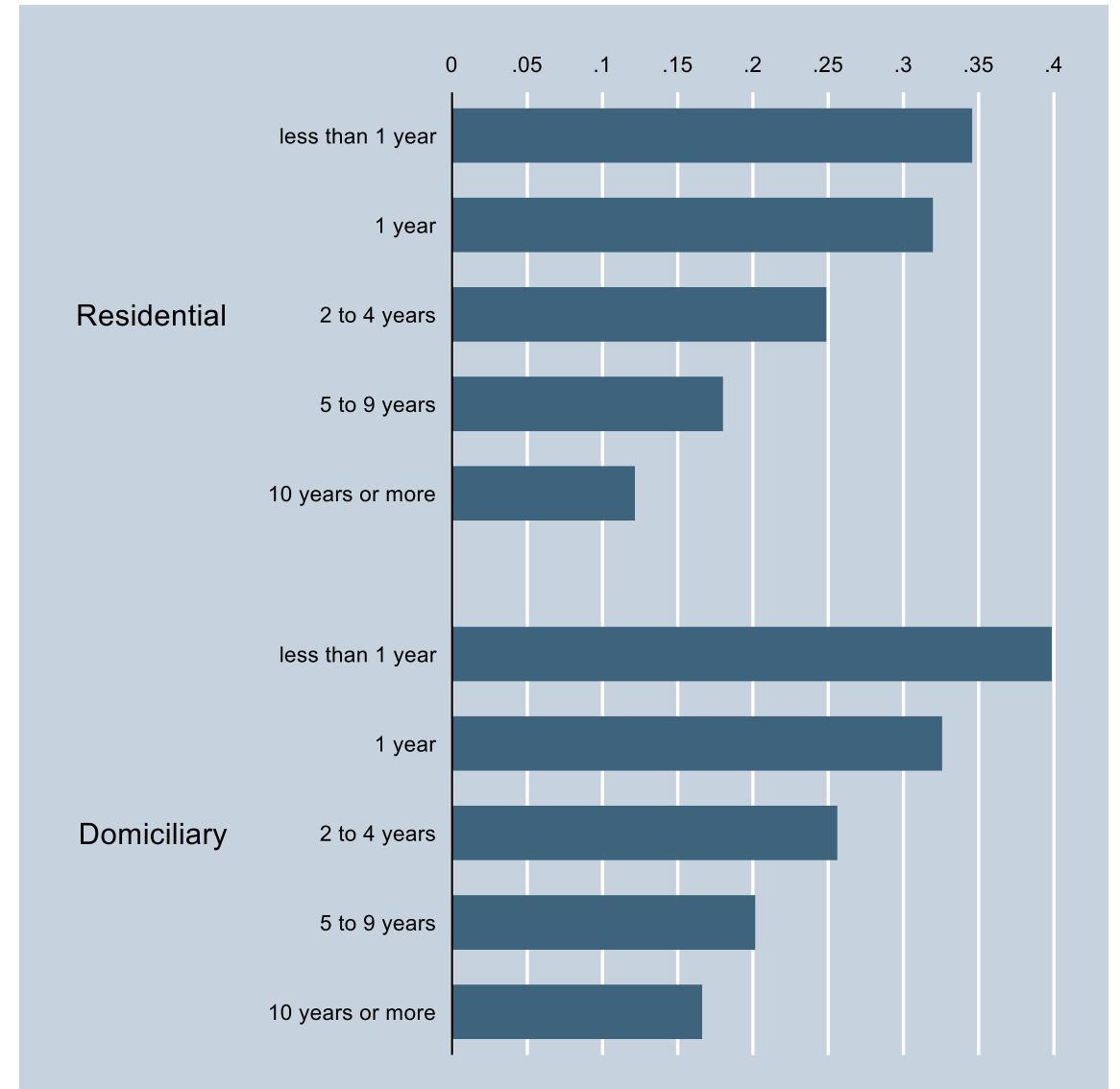
- Comparison with establishments in the CQC care directory
  - sector, overall quality rating and regional distribution + (for CHs) type and capacity
- 25% of the CQC registered CHs and 20% of the CQC registered domiciliary care establishments
  - public, better CQC rating and CH with larger capacity were overrepresented
- Post-sampling weights (i.e. 'raking') – weighted sample averages match the CQC care directory averages



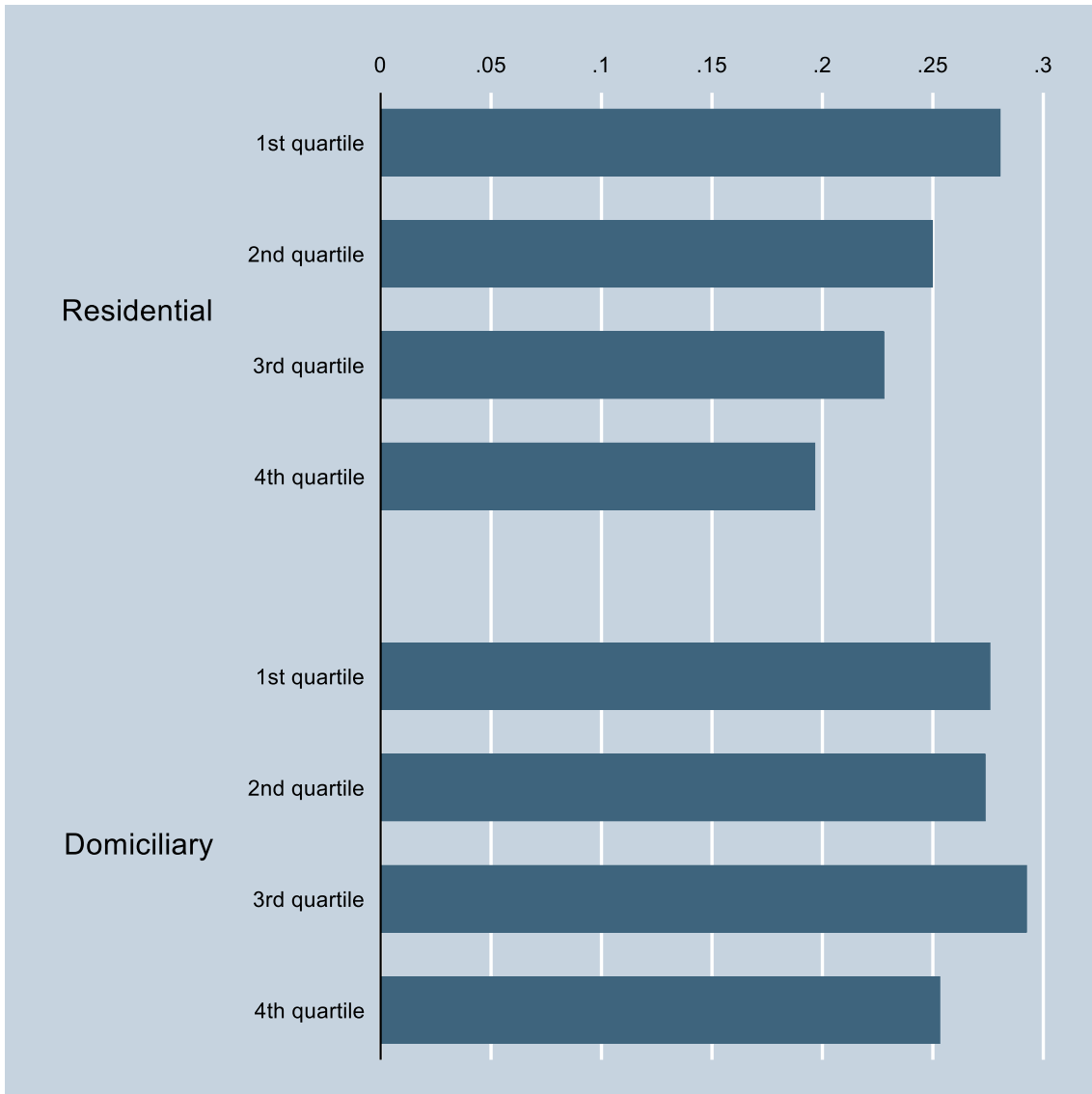
**Employer separation rate by age group and care setting**  
(direct care staff)



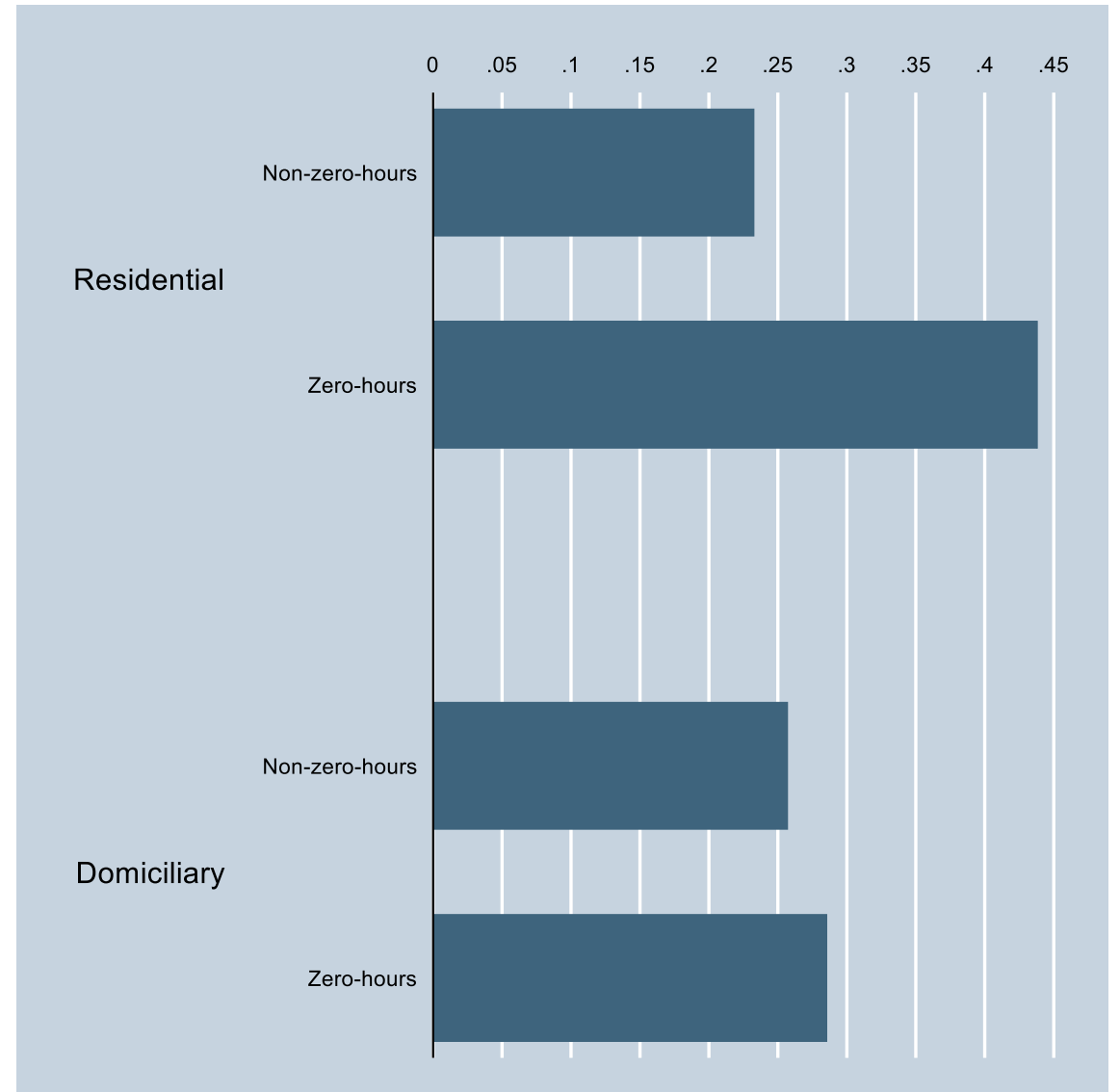
**Employer separation rate by job tenure and care setting**  
(direct care staff)



**Job separation rate by hourly wage and care setting  
(direct care staff)**

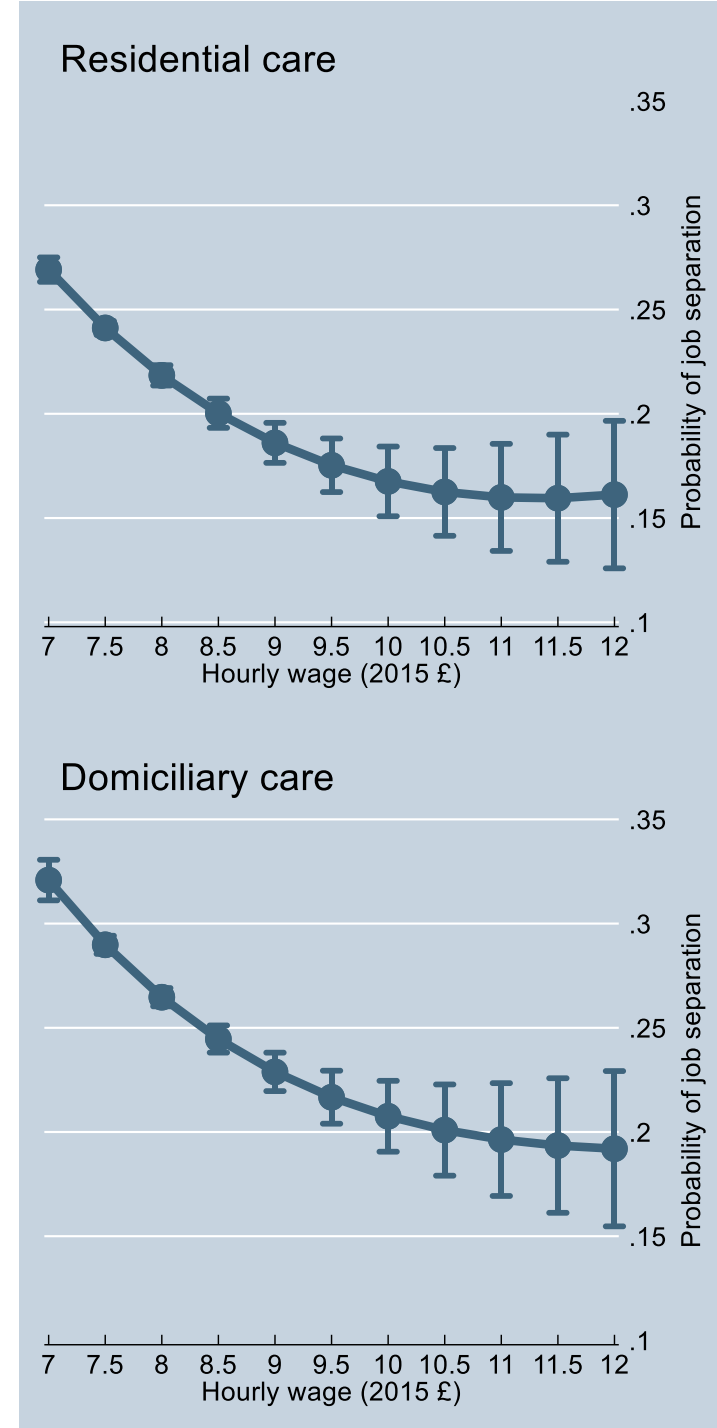


**Job separation rate by contract type and care setting  
(direct care staff)**



# Regression analysis – main findings

- unobserved worker and employer characteristics -> underestimation of the wage effect on job separations
- wage effect has diminishing marginal magnitudes
- increase in wages from sample mean to RLW level (9 to 12%) – reduction in job separations of 3 to 4% points
- positive relationship between job separations and part-time as well as zero-hours contracts
- Good leadership (CQC rating on ‘Well-led’) has a small negative effect on job separation



# Establishment level analysis

- ~36k obs of ~13k establishments
  - Complete cases: ~15k obs of ~6k care establishments
  - 4-year panel: Oct 2016, Oct 2017, Oct 2018, Oct 2019
  - 20% CH w/ nursing, 51% CH w/o nursing, 29% dom care
  - 5% statutory LA, 80% private, 15% Voluntary

## Main findings:

- mean age and tenure are negatively related to staff turnover
- share of staff on ZHC is related to higher turnover rates
- local unemployment has negative effect on turnover
- no effect of mean wage, relative wage or share of staff paid at NLW

## Establishment level analysis

- 20% - zero turnover (median turnover rate: 0.20); 66% - zero vacancies
  - 4 groups: low turnover ( $<.2$ ) w/o vacancies; low turnover w/ vacancies; high turnover w/o vacancies; high turnover w/ vacancies

### Preliminary findings

- Wages have a negative effect on high turnover w/o vacancies
- High turnover w/ vacancies – no wage effect, but comparatively stronger positive effect from ZHCs

### Ongoing research (March 2022)

- unobserved heterogeneity; multiple imputation

## Policy implications

- LTC staff retention can be improved by increasing wages
- combined with full-time contracts with guaranteed working hours staff turnover could be reduce even more
- Health care – important destination for staff leaving LTC
- Potential solution – align pay and conditions (contract type, sick leave) in the LTC independent sector to public heath and LTC
  - Increased public expenditure – tariffs paid by LAs need to increase
  - LAs to link LTC commissioning to care providers' staff pay and employment conditions

# Thank you!

Contact: [f.vadean@kent.ac.uk](mailto:f.vadean@kent.ac.uk)

Retention and sustainability of social care workforce (RESSCW)  
project website: <https://www.pssru.ac.uk/resscw/frontpage/>

Twitter: @pssru\_kent; @f\_vadean