

Essex County Council

Care Worker Survey 2021

Report

October 2021



Introduction

- Essex County Council (ECC) commissioned Enventure Research to undertake a survey of the care worker workforce in Essex.
- The survey was also undertaken in 2019 and 2020 by Enventure Research.
- The survey aimed to provide ECC with an up to date understanding of the county's care worker workforce on a number of topics, including:
 - Current roles
 - Key motivations for working in the care sector
 - Issues relating to retention and recruitment
 - Ways to recruit to the sector
 - Issues relating to the COVID-19 pandemic
 - Future intentions
- Equality monitoring information was also collected to aid ECC's understanding of the diversity of the workforce.
- The survey helps inform strategies to address issues and challenges to ensure high quality social care services continue to be provided to Essex residents.

Methodology and response



Online survey approach

- Questionnaire designed in partnership with ECC substantial changes were made this year, meaning direct comparisons cannot be made with previous years.
- The survey took respondents approximately 10 minutes to complete.
- Email invitations were sent to a database of care workers provided by ECC with reminders.
- An open link to the survey was promoted by ECC via its Care Provider Information Hub.
- The Essex Care Association promoted the survey with its members.
- As an incentive to take part, respondents were offered the opportunity to participate in a prize draw to win gift cards.

Response

- The survey was live from 24 August to 30 September 2021.
- **279 responses were received** a decrease since 2020.

Year	2019	2020	2021
Number of responses	392	393	279

How to read the report

Interpreting percentages

- This report contains tables and charts used to display survey responses.
- In some instances, the responses may not add up to 100% or the base size may differ between questions.
- There are several reasons why this might happen:
 - The question may have allowed each respondent to give more than one answer
 - A respondent may not have provided an answer to the question, as survey routing allowed certain questions to only be asked to specific groups of respondents
 - Only the most common responses may be shown in the table or chart
 - Individual percentages are rounded to the nearest whole number so the total may come to 99% or 101%
 - A response of less than 0.5% will be shown as 0%
- For each chart or table, a base size has been provided to show the number of respondents who responded to the question being analysed and, in some cases, which specific group of respondents the question is being asked to.

Subgroup analysis

- Subgroup analysis has been undertaken to explore the results provided by different groups, such as length of time in the care profession, role, setting, contract type, client group, working hours, and key demographics.
- Subgroup analysis has only been carried out where the sample size is seen to be sufficient for comment.
- In some cases where base sizes for subgroups are very small, they have been combined to create a
 larger group to allow for analysis.
- Subgroup analysis has been carried out using response percentages and mean scores.
- Subgroup analysis is clearly marked and is only shown for a question where differences exist at the 95% confidence level according to the z-test by this we mean that we can say with 95% confidence that we would see a difference if the total population within a group took part in the survey.
- The percentages shown in the subgroup analysis reflect the proportion of the subgroup who answered the question and gave a particular response.

Open-end responses

- For the analysis of open-ended (free-text) responses, verbatim comments have been read in detail by a researcher and a coding frame has been developed for each question based on the themes emerging.
- This has allowed for categorisation of the themes emerging in the comments.
- Where relevant, themes are presented in table format to show the frequency and percentage of comments associated with each.

Headline findings

Headline findings – promoting care roles



32% found out about their role from someone already working in care



15% found out about their role from a job website



34% thought the job advert was not appealing, informative or well-worded









60% actively encourage other people to look and apply for care jobs



36% thought promoting the rewarding nature would make working in care appealing



21% thought promoting career progression would make working in care appealing



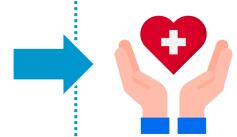




Headline findings – working in care



91% currently enjoy working in care



98% of whom enjoy making a difference to people's lives¹



33% said their original motivation for working in care had changed over time









Providing care to others was ranked as the most important job aspect, followed by personal wellbeing



37% said pay was their one biggest frustration in their role²





62% of those who used their own car in their role didn't mind doing so



Headline findings – wellbeing and the pandemic



67% had not heard of the 'Here for you' service



14% had started working in care during the pandemic



88% of whom felt that their induction had been sufficient









87% felt supported by their manager during the pandemic¹

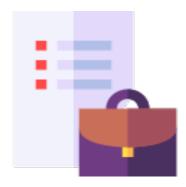


30% said that changes in the profession due to the pandemic had affected their feelings towards working in care





Headline findings – future intentions



11% are considering changing their role in care in the next year



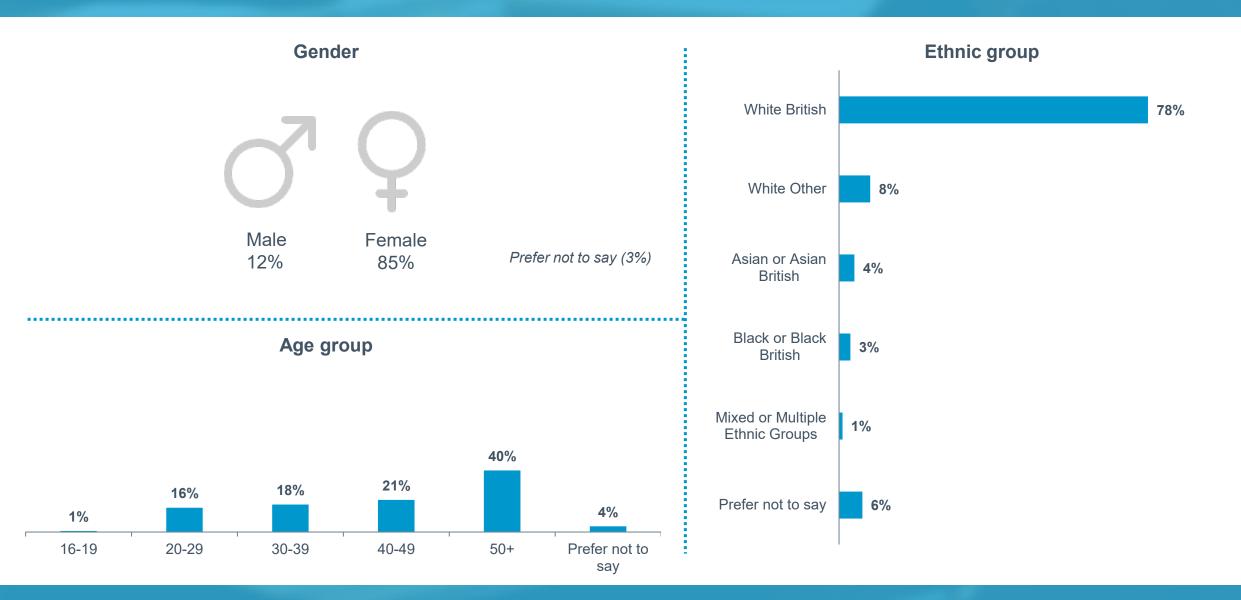


16% are considering leaving the care profession in the next year1

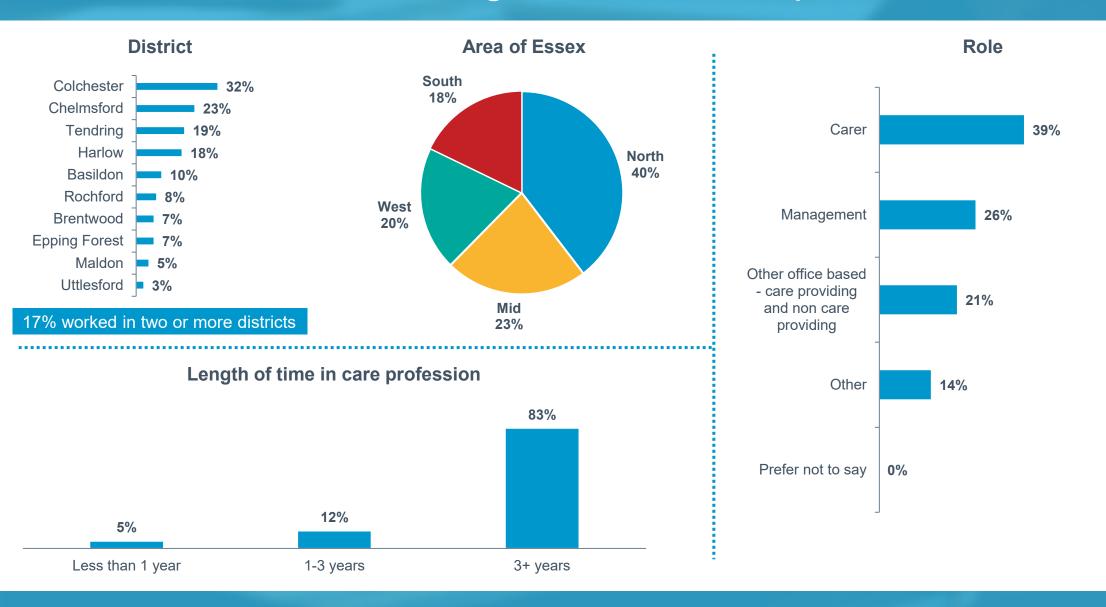




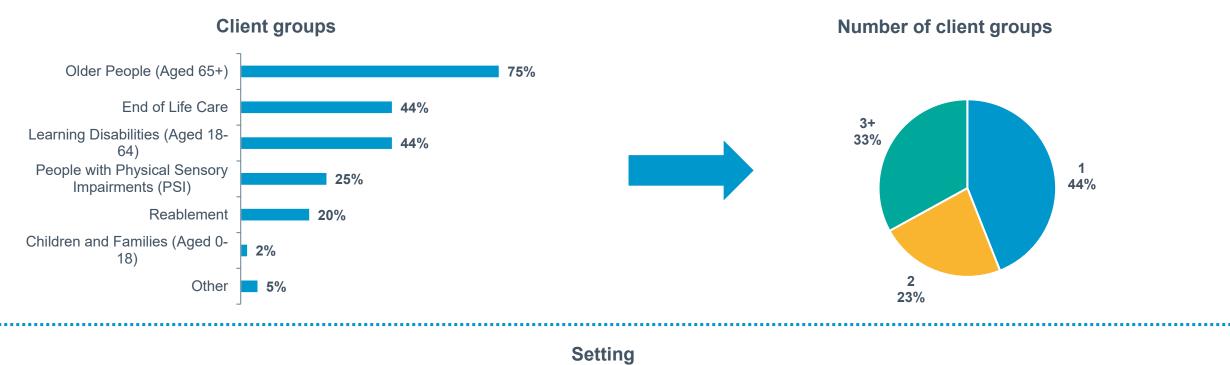
Demographic profile



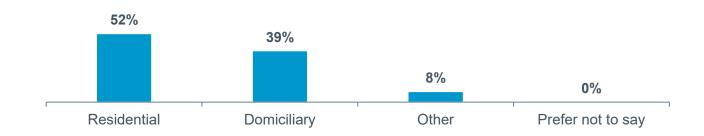
District, area, length of time in care profession & role



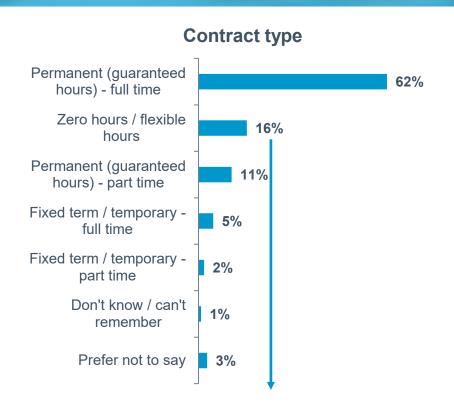
Client groups & setting





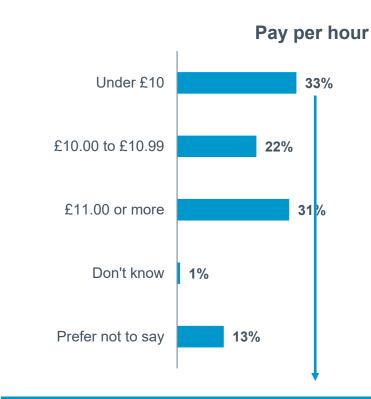


Contract type & pay





- Those aged 16-29 (30%) vs 50+ (12%)
- Those working in care profession for less than 3 years (42%) vs those who had been working in it for longer (11%)
- Those in carer roles (37%) vs other role types (3% to 5%)
- Those working in **domiciliary roles** (26%) vs residential (11%)
- Those in the **West** (50%) vs those in other areas (6% to 10%)



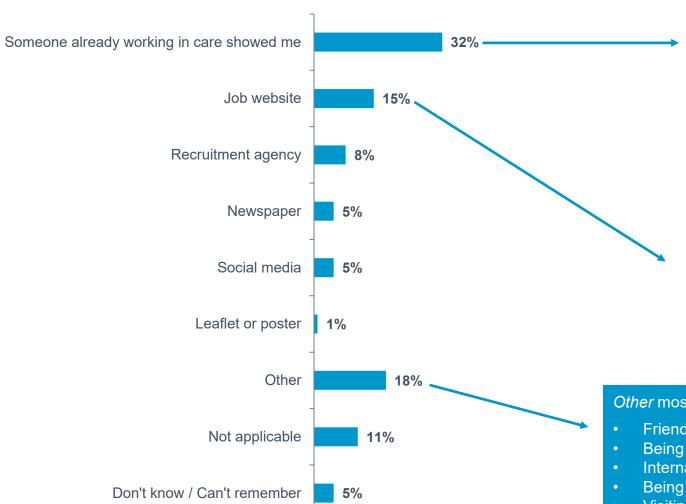
The following were more likely to be paid *under £10* per hour:

- Those aged **16-29** (57%) vs older age groups (24% to 36%)
- Those working in care profession for less than 3 years (48%) vs those who had been working in it for longer (30%)
- Those in carer roles (61%) vs other role types (3% to 34%)
- Those with **zero hour** / **flexible contracts** (54%) vs permanent contracts (26%)
- Those in the West (43%) vs those in the South (18%)

Promoting care roles

Where job adverts are seen

Where did you first see the job advert for your role?



This was the most common way of finding out about the job advert overall, and amongst every subgroup analysed.

Those working in carer roles (40%) were more likely to have been told about the job advert by someone already working in care than those working in management roles (25%).

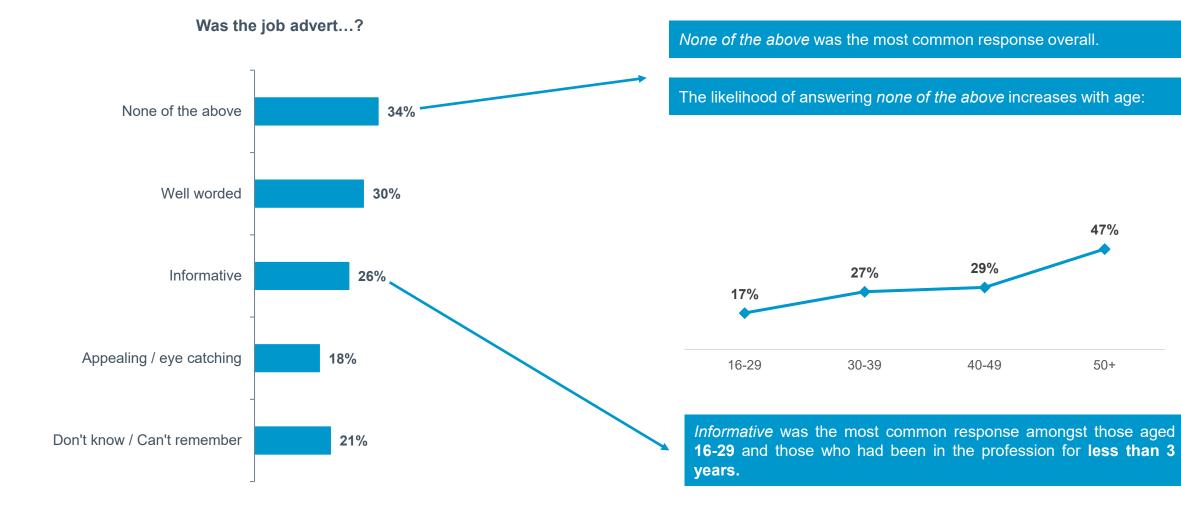
The following subgroups were more likely to have first seen the job advert for their role on a job website:

- Those aged **16-29** (26%) vs those aged 30-39 (6%) and 50+ (11%)
- Those who had been working in the care profession for less than three years (29%) vs those who had been working in it longer (12%)

Other most commonly included:

- Friends, family and acquaintances
- Being headhunted or directly recruited for the role
- Internal promotion or being an agency worker to begin with
- Being contacted by a local company
- Visiting the place of work in person/seeing a notice

Effectiveness of job adverts



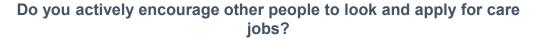
47%

50+

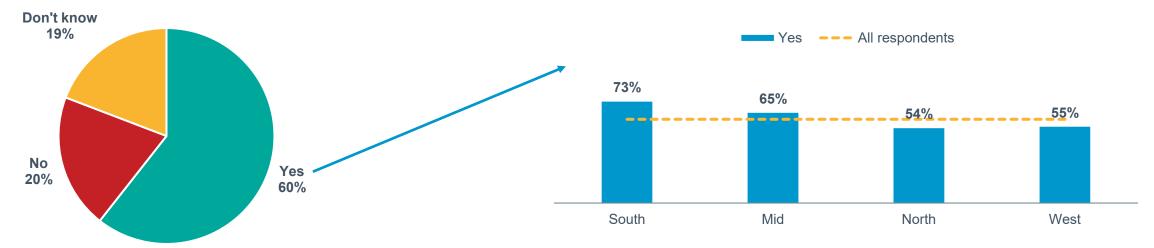
Encouraging others to join the sector

Six in ten actively encourage others to look and apply for care jobs, however, a fifth do not. A further fifth said they did not know.

Those in the **South of Essex** were more likely to encourage others than those in the North and West.







No other significant differences were seen between subgroups.

Ways of encouraging others to join the sector

Promoting job satisfaction in roles and the personal rewards was by far the most common way respondents suggested they encouraged others to look and apply for care jobs.

In a few words, please tell us how you encourage them.

Promote job satisfaction/rewards (72%) By promoting the positive aspects of the role and the possibility to progress and encouraging young people into the sector. **Domiciliary** Tell them how rewarding the role is. Residential

Talking to people/ describing the role/ honesty (26%)Being honest about the role. **Domiciliary** Word of mouth, discussing own experiences working in care. Residential

Sharing adverts online/ on social media (12%) Sharing advertisements on my social media. Residential Share ads and tell friends about the role. **Domiciliary**

Other ways included:

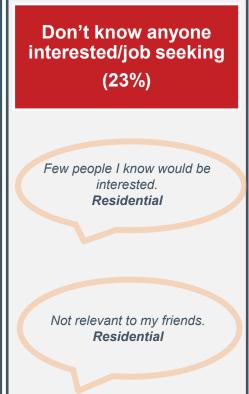
- Promote training/ progression opportunities (9%)
- Promote friendly/ supportive team (6%)
- Promote job stability (1%)
- Promote job flexibility (1%)

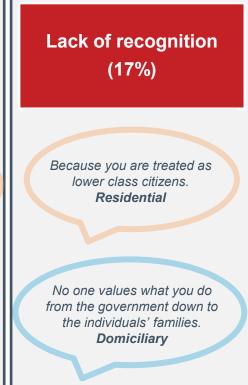
Reasons for not encouraging others to join the sector

The low pay and few rewards from working in the care sector was the most common reason that respondents did not encourage others to join the sector, followed by not knowing anyone who might be interested or that was currently job seeking.

In a few words, please tell us why not.





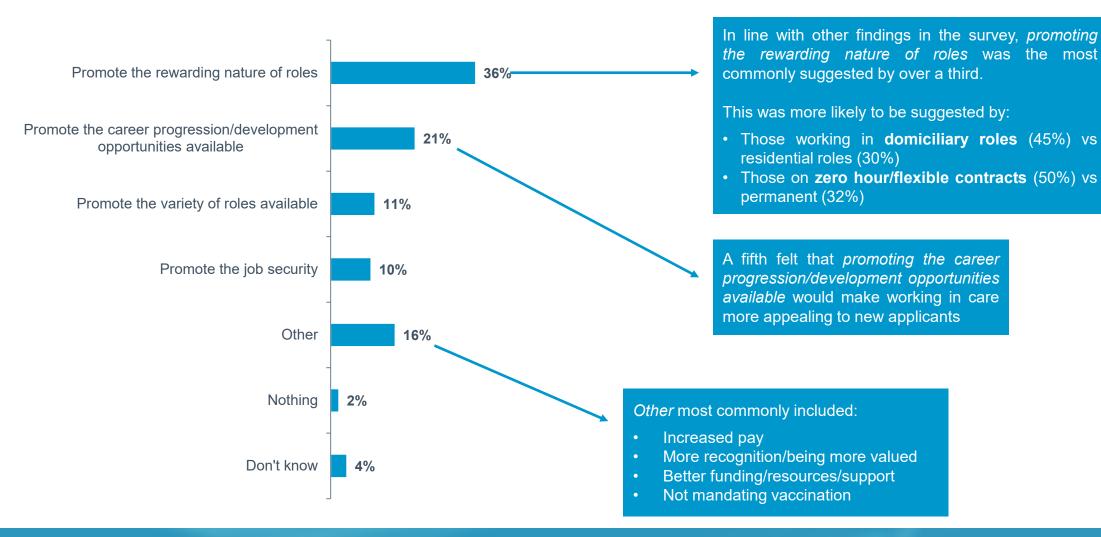


Other reasons included:

- Too busy/not my job role (13%)
- Hard work/lots of responsibility (11%)
- Personal choice/not for everyone (11%)
- Long/unsociable hours (6%)
- Lack of support (6%)
- Unhappy/considering leaving role (6%)
- Friends don't want to take vaccine (2%)
- Need to retrain staff (2%)

Making working in care more appealing

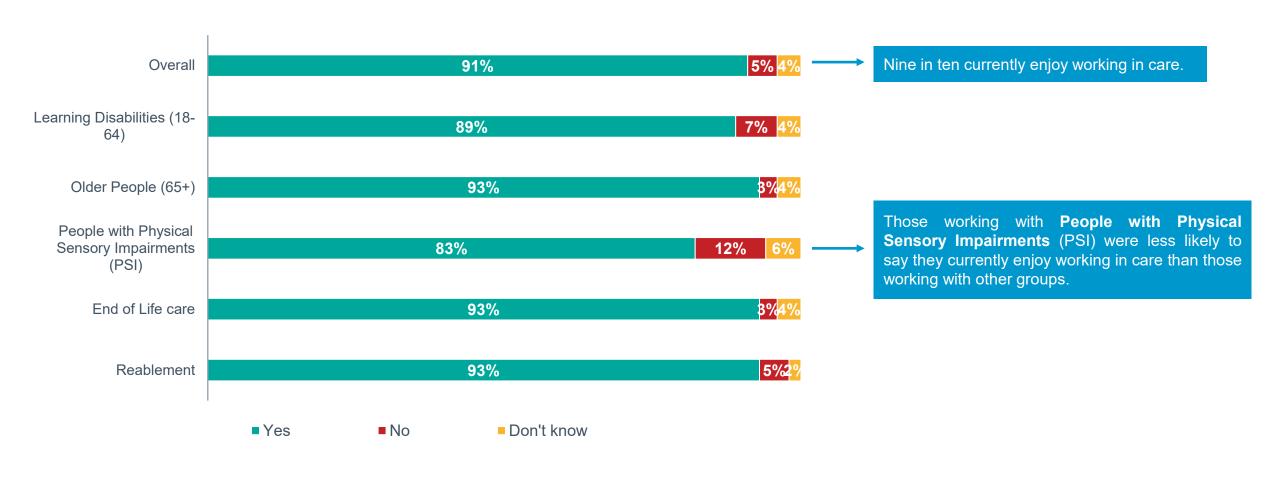
In your opinion, what one thing would make working in care more appealing to new applicants?



Working in the care profession

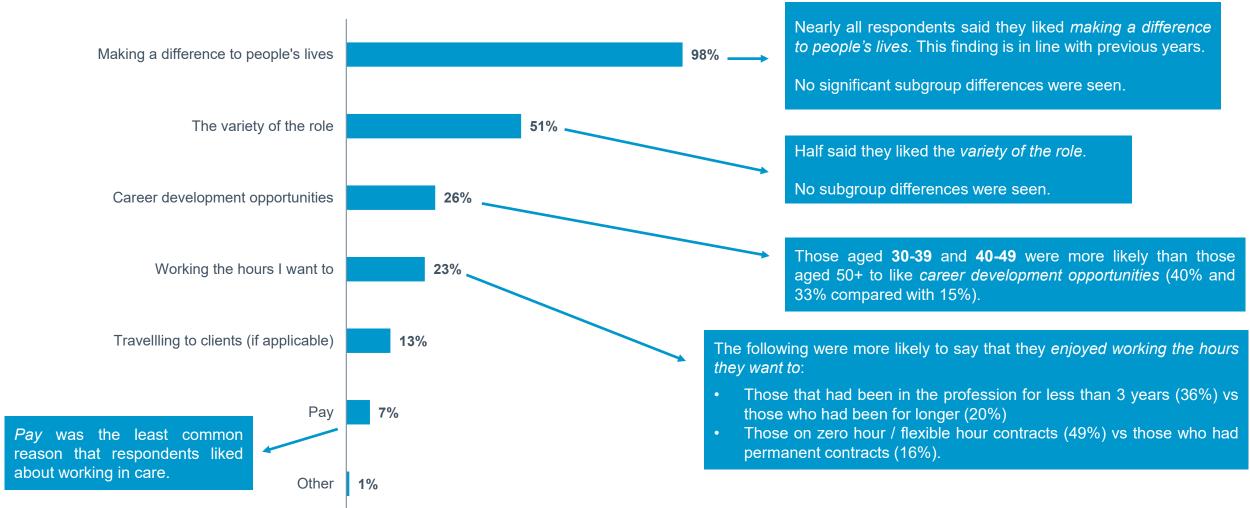
Satisfaction with working in care

Do you currently enjoy working in care? By client groups



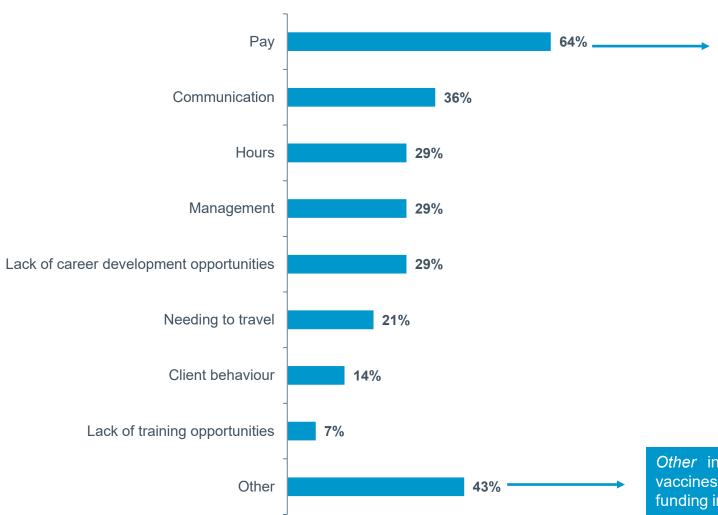
Reasons for enjoying working in care





Reasons for not enjoying working in care

Why don't you like working in care?

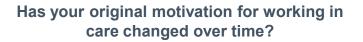


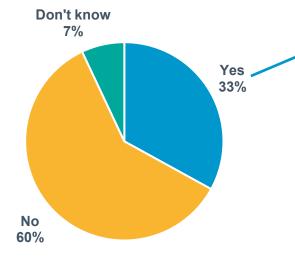
Only a small number (14 respondents) said they did not enjoy working in care. Of these, the most common reason was *pay* (64%), which is in line with findings from previous years. However, this finding should be interpreted with caution, given the low base size.

Other included: lack of benefits, sick pay and holidays; mandated vaccines; issues due to the pandemic; rules and regulations; lack of funding in the sector; and feeling underappreciated.

Changes in motivation for working in care over time

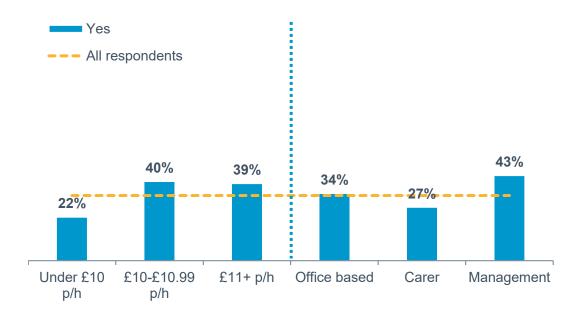
Whilst six in ten said their motivation for working in care had not changed over time, for a third it had.





As shown below, the following subgroups were more likely to say that their original motivation for working in care had changed over time:

- Those earning £10 an hour or more (40% and 39%) vs those earning under £10 an hour (22%)
- Those who worked in management roles (43%) vs those in carer roles (27%)



Reasons for changes in motivation

Most common explanations provided for motivation for working in care changing over time

Rewarding/enjoyable/ passionate about care (20%)

> I have enjoyed making a difference to people. **Domiciliary**

It's nice to help and support families in their hour of need. **Domiciliary**

COVID restrictions/ pressures (16%)

Working through COVID has been so hard and made our work more difficult. **Domiciliary**

I feel let down by the system since Covid 19. Residential

Staffing pressures (13%)

Resident to carer ratio pushed to absolute limit. Left working stressed and alone. Residential

It's hard to recruit new care staff. **Domiciliary**

Increasing responsibilities/more difficult role (13%)

Because we are expected to do far more than just care. **Domiciliary**

The job is getting much harder. Residential

Low pay (10%)

The low pay for support workers. Residential

At the minute I am working very long hours for minimum wage. **Domiciliary**

The majority of reasons provided were negative.

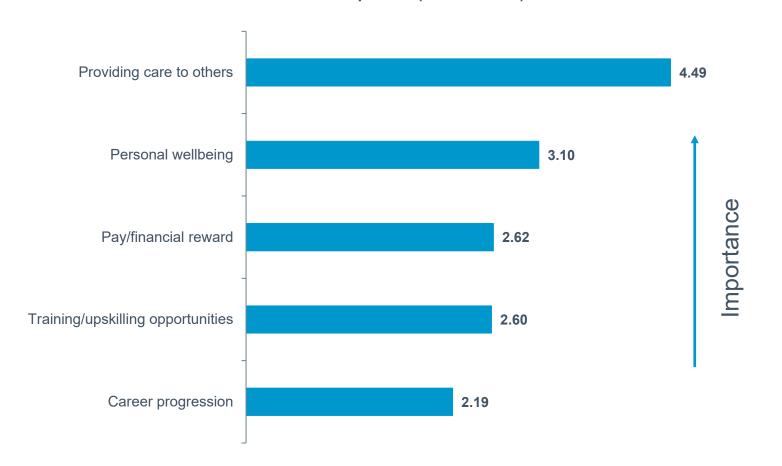
Other reasons included: increases in motivation over time (9%); more experienced/ knowledgeable/promoted (9%); lack of recognition/under appreciated (9%); too much paperwork/limited time with clients (8%); stress/pressure (7%); lack of funding/support (6%); reducing standards of care (5%); changes in service/role (5%); new vaccination policy (5%)

Interpreting the next question

- In the question presented on the next slide, respondents were shown five job factors and asked to rank them in terms of importance.
- For analysis, weights have been applied, whereby respondents' most important factor (which they rank as #1) has been given a weight of 5, and their least preferred choice (which they rank as #5) has been given a weight of 1.
- This allows for mean scores to be calculated out of 5 for the purposes of analysis to determine ranking preference.
- Mean scores are clearly marked in the figures and are shown to two decimal places.

Job aspects ranked

Thinking about your job, please rank the following in order of importance to you, with 1 being most important to 5 the least important (Mean scores)



Overall, most importance was placed on providing care to others (4.49 mean score), followed by personal well-being (3.10 mean score).

There was little difference between *pay/financial reward* and *training/upskilling opportunities* (2.62 and 2.60 mean scores).

Career progression was seen as least important overall (2.19 mean score).

Job aspects ranked by age

All age groups ranked providing care to others as the most important, although those aged 16-29 scored it lower on average (4.13) than other age groups (4.49 to 4.60).

All age groups ranked personal wellbeing as second, with no significant differences seen.

Training/upskilling opportunities was ranked third by those aged 16-29 and 40-49, but was seen as less important by those aged 50+ (fourth) and it was the least important for those aged 30-39.

Pay/financial reward was seen as fourth most important by most age groups, but was third most important for those aged 50+.

Career progression was least important for most age groups, apart from those aged 30-39 who ranked it third on average. This age group and those aged 16-29 gave it more importance (2.67 and 2.53 respectively) than those aged 50+ (1.79).

Thinking about your job, please rank the following in order of importance to you, with 1 being most important to 5 the least important (Mean scores) by age group

RANK	16-29	30-39	40-49	50+
1	Providing care to others (4.13)	Providing care to others (4.55)	Providing care to others (4.49)	Providing care to others (4.60)
2	Personal wellbeing (3.15)	Personal wellbeing (2.78)	Personal wellbeing (3.19)	Personal wellbeing (3.20)
3	Training/upskilling opportunities (2.62)	Career progression (2.67)	Training/upskilling opportunities (2.63)	Pay/financial reward (2.77)
4	Pay/financial reward (2.57)	Pay/financial reward (2.51)	Pay/financial reward (2.39)	Training/upskilling opportunities (2.65)
5	Career progression (2.53)	Training/upskilling opportunities (2.49)	Career progression (2.31)	Career progression (1.79)

Job aspects ranked by role

Both those working in care roles and those working in management roles ranked *providing care to others* as the most important, followed by *personal wellbeing* as second. There were no significant differences seen.

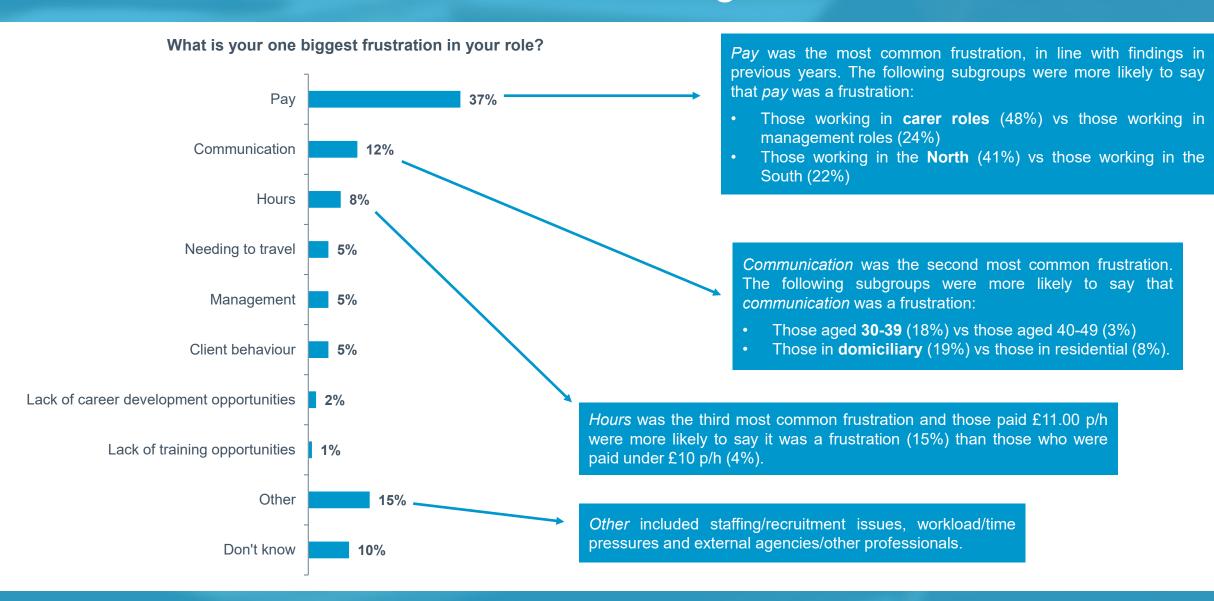
Pay/financial reward was third most important for those working in carer roles, but was fourth most important for those working in management ranked training/upskilling opportunities as third most important.

Career progression was least important for both role types.

Thinking about your job, please rank the following in order of importance to you, with 1 being most important to 5 the least important (Mean scores) by role

RANK	Carer	Management
1	Providing care to others (4.50)	Providing care to others (4.64)
2	Personal wellbeing (3.04)	Personal wellbeing (3.13)
3	Pay/financial reward (2.75)	Training/upskilling opportunities (2.53)
4	Training/upskilling opportunities (2.66)	Pay/financial reward (2.43)
5	Career progression (2.05)	Career progression (2.28)

Frustrations with working in care

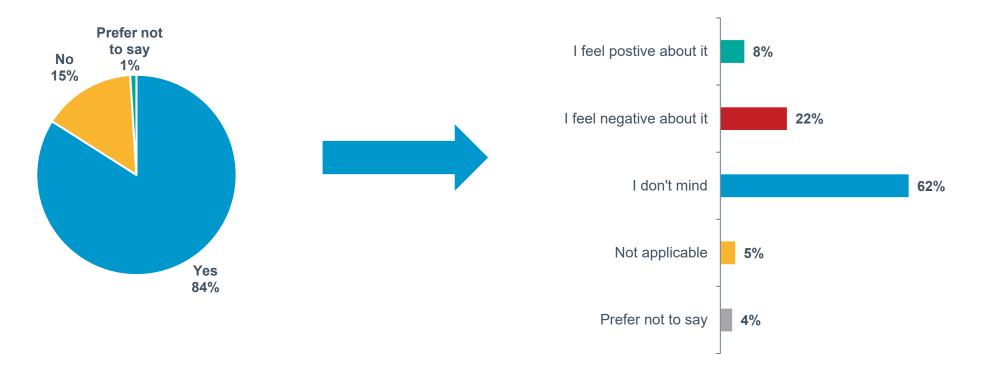


Travel

Eight in ten of those in domiciliary and reablement roles used their own vehicle for transport in their role. Of these, six in ten said they did not mind doing so. However, a fifth said they felt negative about it.

Do you use your own vehicle for transport for your role?

How do you feel about the amount of travel that your role requires?

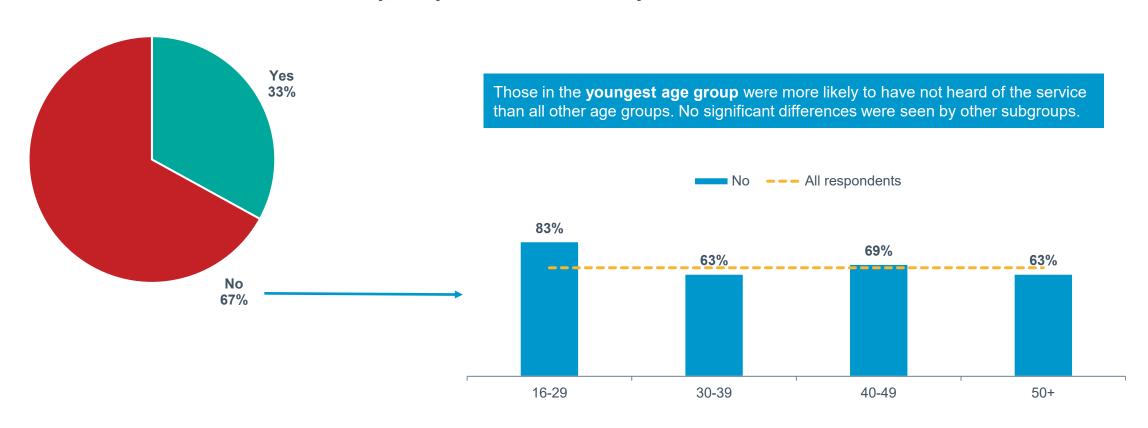




'Here for you' service

Two thirds said they had not heard of the 'Here for you' service and a third said they had.

Before today, were you aware of the 'Here for you' service?





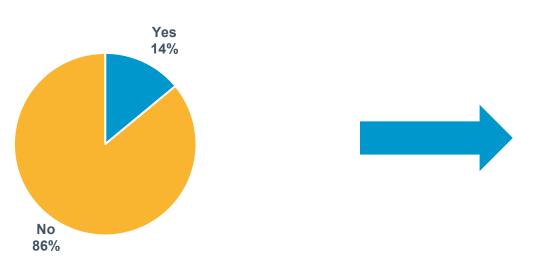
Starting in care during the pandemic

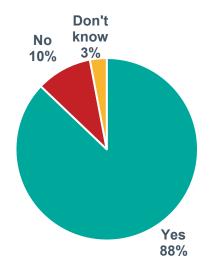
One in seven had started work during the pandemic i.e. since March 2020, whilst the vast majority had not.

Did you start working in care during the pandemic (i.e. since March 2020)?

The vast majority felt that their induction training had been sufficient to be able to carry out their job role effectively.

When you started, do you feel that your induction training was sufficient for you to be able to carry out your job role effectively?



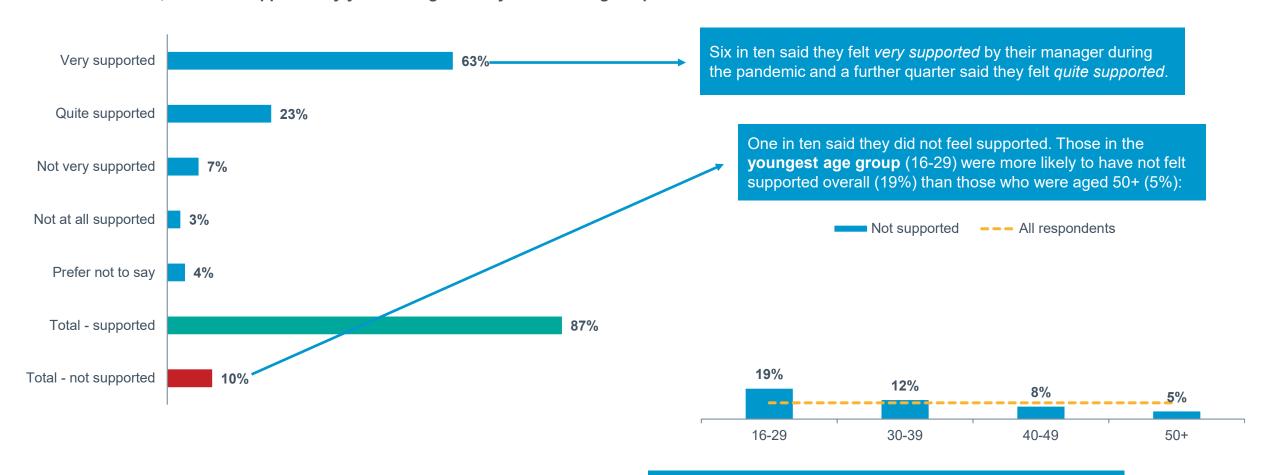


The following subgroups were more likely to have started during the pandemic:

- Those aged **16-29** (21%) and **40-49** (22%) vs those aged 50+ (8%)
- Those from other ethnicities (26%) vs those who were White British (12%)
- Those on zero hour/flexible contracts (28%) vs those with permanent contracts (11%)
- Those in carer roles (24%) vs management (8%)
- Those who were paid £10.00 p/h (20%) and £10.00 to £10.99 (18%) vs those who were paid £11.00 p/h (3%)

Managerial support during the pandemic

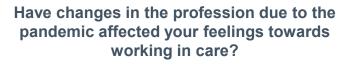
Overall, how well supported by your manager have you felt during the pandemic?

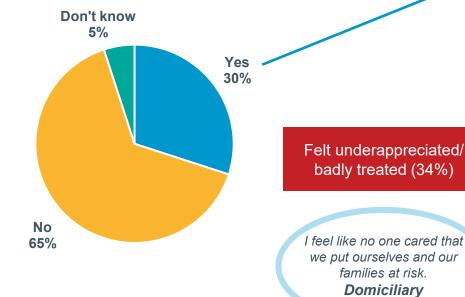


No other significant differences were seen between subgroups.

Affects of pandemic on feelings towards working in care

Whilst around two thirds said that changes due to the pandemic had not affected their feelings towards working in care, for three in ten they had.





The following subgroups were more likely to say that their original motivation for working in care had changed over time:

- Those aged **40-49** (49%) vs all other age groups (20% to 27%)
- Those who had been in the profession for **3 or more years** (34%) vs those who had been for a shorter period of time (10%)
- Those who had **permanent contracts** (34%) vs those on zero hour/ flexible contracts (11%)
- Those who worked in management roles (47%) vs those in carer roles (22%)
- Those earning £11 an hour or more (43%) vs those earning under £10 an hour (25%) and between £10.00 and £10.99 (15%)

Popular explanations for how feelings have changed

Increased workload/ responsibility/difficulty (16%)

The paperwork has increased so much and there is less and less time to be able to spend on the floor.

Residential

Stress/pressure/burn out (14%)

The past year has been extremely challenging, and it feels like I have burnt out. Residential

Other themes:

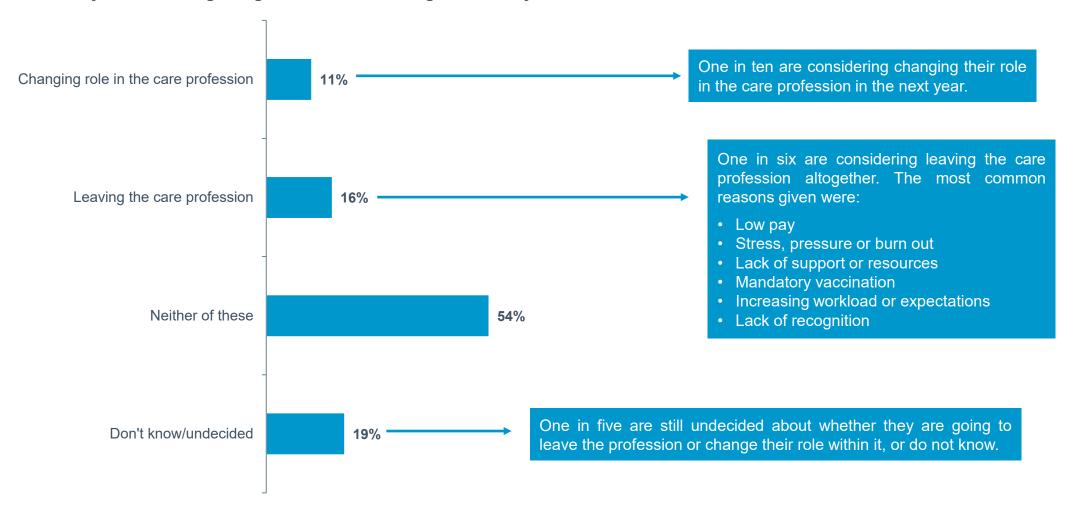
- Disagree with mandatory vaccination (11%)
- Risk of illness/putting family at risk (11%)
- Lack of support/forgotten by government (9%)
- Increased staffing pressures (9%)
- Demotivated/ demoralised (9%)





Future intentions

Are you considering doing either of the following in the next year?

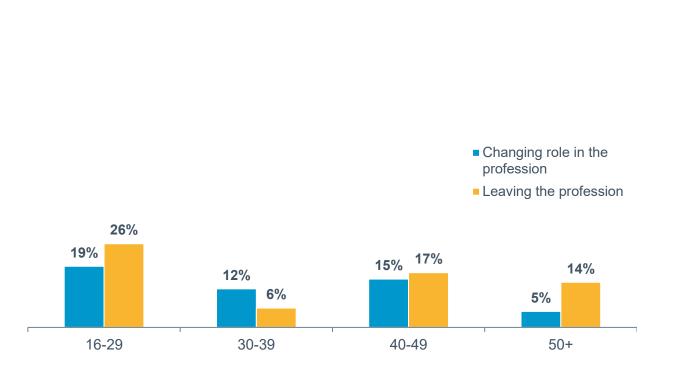


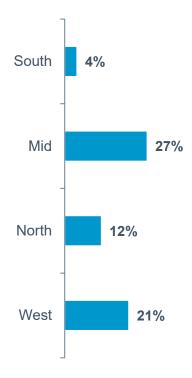
Future intentions – subgroup analysis

As shown previously, one in ten said they were considering changing their role in the care profession in the next year and 16% were considering leaving the profession.

Those in the **youngest age group** were more likely to be considering changing their role in the profession and leaving the profession altogether than other age groups.

Those in **Mid and West** Essex were more likely to be considering leaving the care profession than those in the South and North.







Further comments

When asked if they had any further comments, the majority of responses provided were negative?

Enjoy working in care/ rewarding (34%)

You need dedication to work in a caring role, but the job is very rewarding as I can make a difference everyday to the people I visit. **Domiciliary**

Very rewarding, every day is different. Making differences to people's lives is the most rewarding part of my job Residential

Pay should be increased (34%)

It needs better pay. You earn more as a waitress than care.

Residential

Carers need to be recognised as a profession and paid appropriately for it; care providers' hands are tied as the amount commissioned barely covers the pay rate.

Domiciliary

More recognition/better treatment needed (28%)

I feel that care staff are always overlooked and not recognised for the commitment and hard work that most put into their role.

Domiciliary

The care profession needs to be better appreciated.

Residential

Better funding/ resources/support needed (17%)

The Government needs to properly support and fund Health and Social Care and act on their promises to have a joint up system. Social Care has lost out for too many years - it has cost the sector a great deal (lives, sorrow, businesses closed etc) during the pandemic.

Residential

If properly resourced and supported ASC would be a truly amazing and fulfilling experience.

Residential

Care work is demanding/stressful (16%)

It's a mentally and physical draining career yet we see no benefits for what we do or see.

Residential

This job is extremely challenging at times and takes much patience, care and attention to detail. I love my job but its not easy and not everyone is right for the role.

Residential

Working in the care profession and future intentions

The overwhelming majority enjoy working in the care profession, with making a difference to people's lives the most rewarding aspect, as found last year

Some feel undervalued, and this has been exacerbated by the pandemic and low levels of pay in the sector

Personal wellbeing is important to those working in the sector and it should be prioritised by employers

There is low awareness of the 'Here for you' service

Most of those that use their own vehicle in their role don't mind, but a minority do have negative findings about it

One in six are considering leaving the profession in the next year due to stress, low pay, lack of support, mandatory vaccine and feeling undervalued

Pay and contracts

Pay is the single biggest source of frustration with working in the care profession, as seen in previous years

Younger carers are more likely to earn the least and to be on zero hour/flexible contracts than older age groups

The use of zero hour/flexible contracts is more prevalent in domiciliary care than residential care

Working during the pandemic

Only a small proportion had started working during the pandemic and the vast majority reported that their induction had been sufficient

The vast majority felt supported by their manager during the pandemic, similar to findings from last year

A significant minority report that their feelings towards working in care have changed due to the pandemic, as they feel more under-valued, stressed and over-worked

Promoting care roles

Referrals from others working in the sector is the most common way of finding out about roles, although there is some use of job websites, particularly amongst younger age groups

Most encourage others to look and apply for care jobs through promoting the job satisfaction

However, some do not actively encourage others to work in the sector, particularly because of the low pay

Recommendations

Recommendations

ECC could work with employers to address low levels of pay and use of zero-hour contracts to encourage more people to join the sector ECC could work with employers to address feelings of being undervalued in the sector, which have been exacerbated by the pandemic

ECC could work with employers to ensure workers' personal wellbeing is prioritised to raise morale in the sector

The 'Here for you' service needs further promotion to increase awareness of it

Further work could be undertaken by ECC and employers to minimise the risk of people leaving the sector

Job adverts should focus on the rewarding aspects of working in the sector, such as making a difference to people's lives

Job adverts should be reviewed to make sure they are appealing, informative and well-worded

Enventure Research

Head Office:

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