



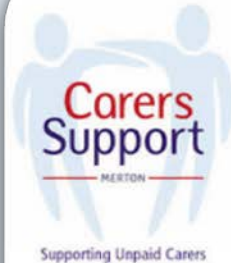
Working with carers:
90% per cent job satisfaction, 0% job security

Jo Moriarty & Jill Manthorpe
6th International Carers Conference

Background

RISE IN THE NUMBER OF POSTS WITH A REMIT TO SUPPORT CARERS
IN THE JOB DESCRIPTION

What sort of jobs?



Carers Support Merton (CSM) values and listens to unpaid carers of all ages from our diverse community and provides high quality services and advice.

CSM wants unpaid carers of all ages to have real choices to improve their quality of life and to receive the respect, support and recognition that they deserve.

This project will fully integrate a Dementia Carer Outreach Support Worker (DCOSW) into the Older Peoples Home Treatment Team (OPHTT) with South West London and St. George's, which cares for patients in crisis in the community, keeping people out of hospital from the first awareness of symptoms.

Overall Purpose of the Job

Working within clients' homes to promote independence through greater choice and control. To provide support and assistance to carers and people with care needs in a whole family approach. This will involve the provision of personal and social care, respecting confidentiality at all times within an equal opportunities framework and in compliance with our quality assurance standards. Also support to achieve personal goals and positive outcomes.

Box 3. Helping families make the most of personal budgets

Carers' Support Bexley, funded by The Princess Royal Trust for Carers

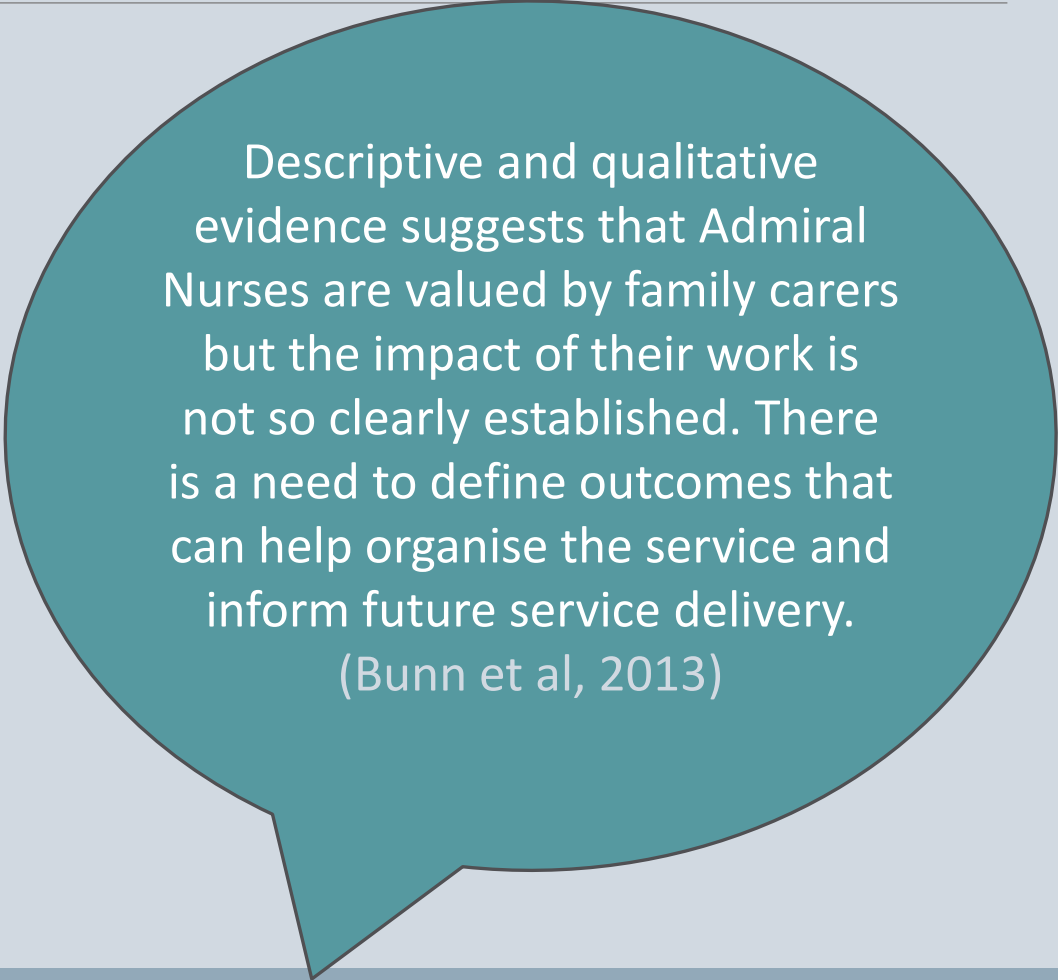
The scheme supports carers who are responsible for managing personal budgets on behalf of the person they care for, by offering ongoing support around managing budgets, accounting, insurance, and employing care staff. It also provides support for people who are self-funders. Importantly, control remains with the personal budget holder.

<http://www.carershub.org/node/161>

But limited number of studies evaluating their impact

Most existing research on Admiral Nurses but hard to get evidence on outcomes (Bunn et al, 2013)

Cochrane review of stroke liaison workers found patients and carers were satisfied but no improvements in carer subjective health status (Ellis et al, 2010)



Descriptive and qualitative evidence suggests that Admiral Nurses are valued by family carers but the impact of their work is not so clearly established. There is a need to define outcomes that can help organise the service and inform future service delivery.
(Bunn et al, 2013)

The muddly bit!

Data drawn from larger study of 'Social Care Practice with Carers'

Term 'social care' is not often used outside UK

Reflects historical origins of care and support systems

Equivalent term would be long term care in European and North American research

Local councils responsible for planning services and assessing needs but social care services largely delivered by private and voluntary sectors

What are care and support services?

Care and support services, also known as social care services, help people who are in need of practical support due to illness, disability, old age or a low income.

Care and support services could include having a personal assistant to help you around the home, structural changes to help you move around or manage in your house, or even an alarm system so that you can call for help if you have a fall.

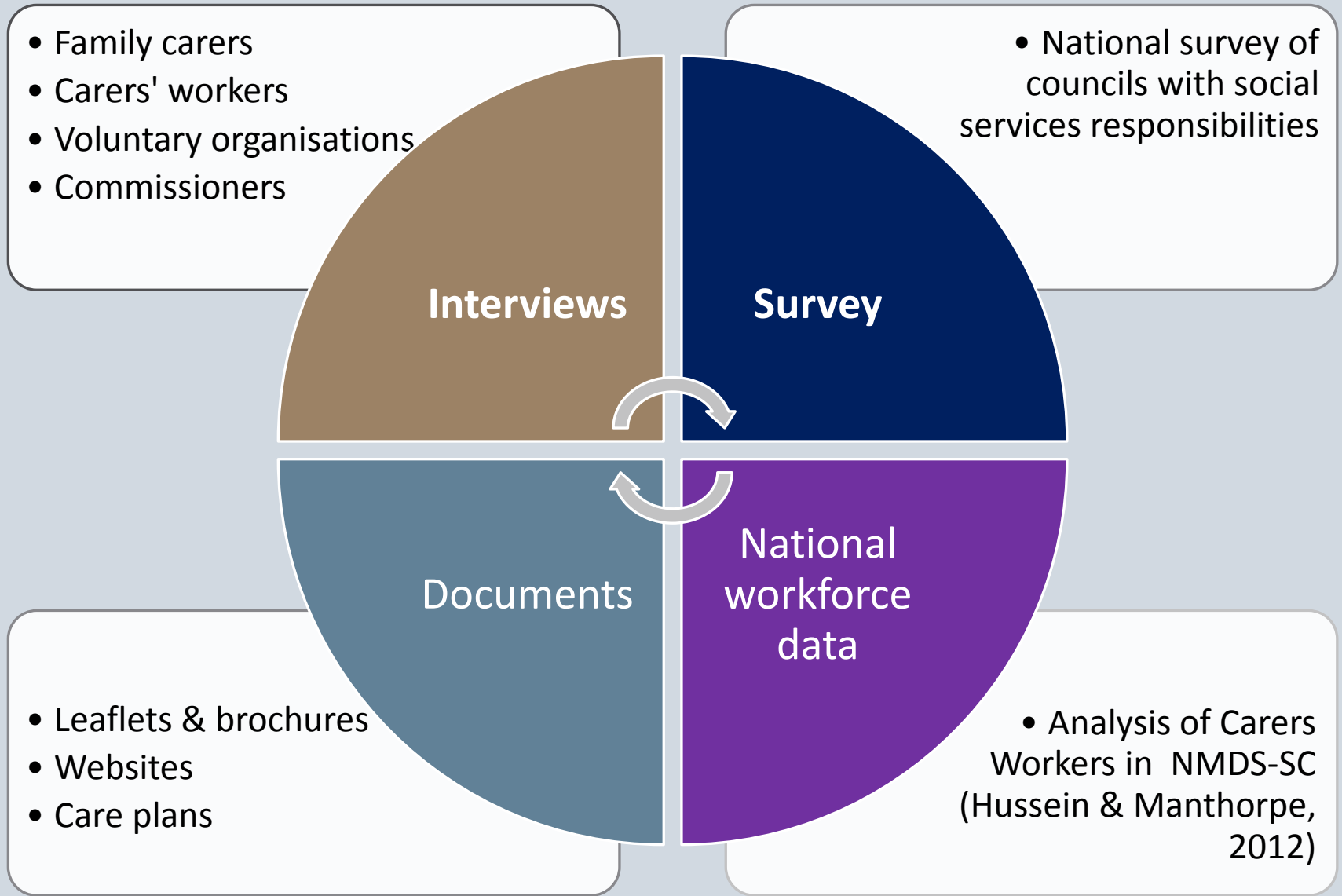
Social care services are available to everyone, regardless of their background.

However, social care is subject to rules about your needs and ability. Services can also support the families or carers of people who receive social care. Find out more about your [rights and entitlements to social care](#).

NHS Choices

Methods

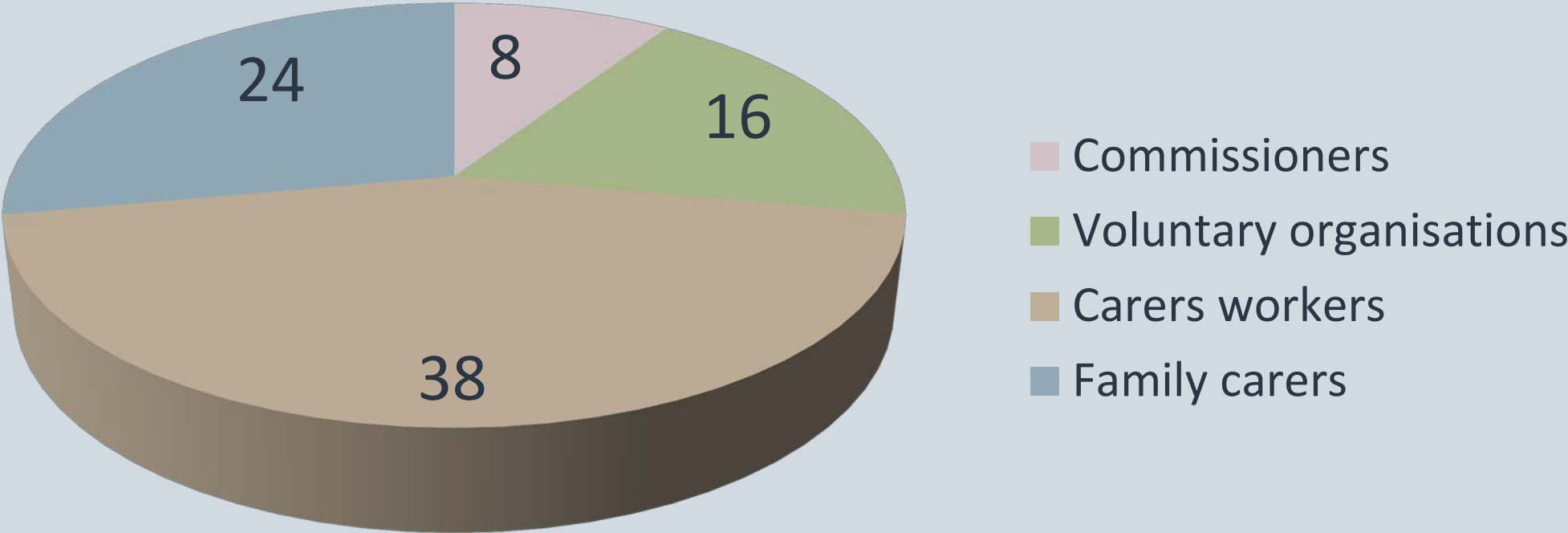
CONCURRENT MIXED METHODS DESIGN CHOSEN AS SUITABLE FOR
EXPLORATORY STUDY OF THIS SORT



Findings

TALKING ABOUT A SELECTION OF FINDINGS RELATED TO JOB
SATISFACTION AND TERMS AND CONDITIONS OF EMPLOYMENT.
INTERVIEWS MAIN DATA SOURCE

Interviews in four parts of England



[Home](#)[What is the NMDS-SC?](#)[News](#)[Help and Guidance](#)[e-guide](#)[Dashboards](#)[Reports](#)[Frequently Asked Questions](#)[Login](#)

National Minimum Data Set for Social Care

The NMDS-SC is an online database which holds data on the adult social care workforce. It is the leading source of workforce intelligence and holds information on around 25,000 establishments and 700,000 workers across England.

What is the NMDS-SC?

- [Watch our 2 minute animation](#)
- ["What is the NMDS-SC?" leaflet](#)
- ["Why use the NMDS-SC?" video](#)
- [Benefits for SMEs](#) (less than 250 staff)
- [Workforce Intelligence publications](#)



Skills for Care National Minimum Dataset for Social Care

Most reliable source of national social care workforce data

Analysis of subset of 'carers workers' in NMDS-SC

Mainly women

Working part time

Tended to be better qualified and to have more experience

Working in organisations with high turnover

Only 0.4% (n = 97) of social care organisations with main role to support family carers

But 8.5% (n = 2064) employers said it was an additional role

Just 42,418 carers workers out of 396,623 for whom NMDS-SC had detailed information

Diversity and Equality in Health and Care 2012, 9:101-111 © 2012 Radcliffe Publishing

Research paper

The diversity of staff supporting family carers in England: findings from an analysis of a national data set

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What is known on this subject

- Surprisingly little is known about social care staff whose roles, in full or in part, are to support family carers.
- Policy makers are increasingly interested in supporting family carers.
- Some family carers express concern that services do not provide them with adequate support.

What this paper adds

- Staff whose job involves providing support for family carers are mainly employed in home care services.
- The analysis suggests that the lack of continuity of relationships with practitioners reported by some family carers may be due to high rates of staff turnover in home care services as a whole.
- Efforts to develop the potential of social care staff to support family carers require specific attention from social care employers and policy makers.

Abstract

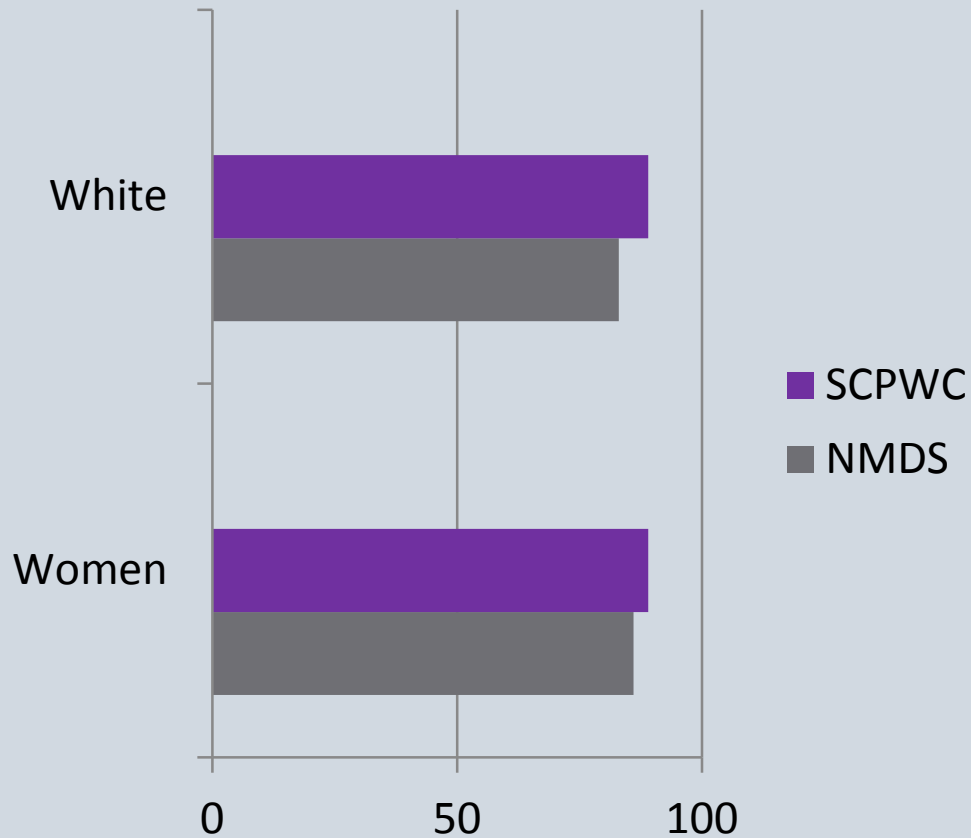
Little is known about those employed to support family carers of disabled people or those with long-term care needs. The term 'carer' is used in England to refer to family members and others who provide unpaid regular and substantial support to adults with disabilities, including older people and others unable to live independently. Among the wider social care workforce some staff are employed to provide support for these carers, but little is known about the composition and characteristics of this group of staff. The findings reported in this article are derived from quantitative secondary analysis of the National Minimum Data Set for Social Care (NMDS-SC; n = 399 634), which collects data from social care employers and reports to Skills for Care. This data set includes information about the characteristics of the workforce employed to support carers and the organisations that employ them to do so.

Our analysis showed that this support workforce is mostly female, with a large number of part-time employees who are based in organisations with significantly higher turnover and vacancy rates than other organisations which provide social care. Staff who support family carers appear to be better qualified and to have longer experience within the care sector than other social care workers.

From these findings we conclude that this support workforce may be affected by staff shortages themselves, and that high staff turnover rates may undermine the continuity of support given to family carers, leading to problems for existing staff. We argue that developing the potential of social care staff to support family carers requires specific attention from social care employers and policy makers.

Keywords: family carers, home care services, policy makers, social care staff, staff turnover

How our sample compared with NMDS-SC



Broadly similar in terms of gender & ethnicity

Age recorded differently but slightly older

- Mean age NMDS-SC workers was 42.5
- Two-thirds SCPWC sample aged 45 and over

Health problems recorded differently

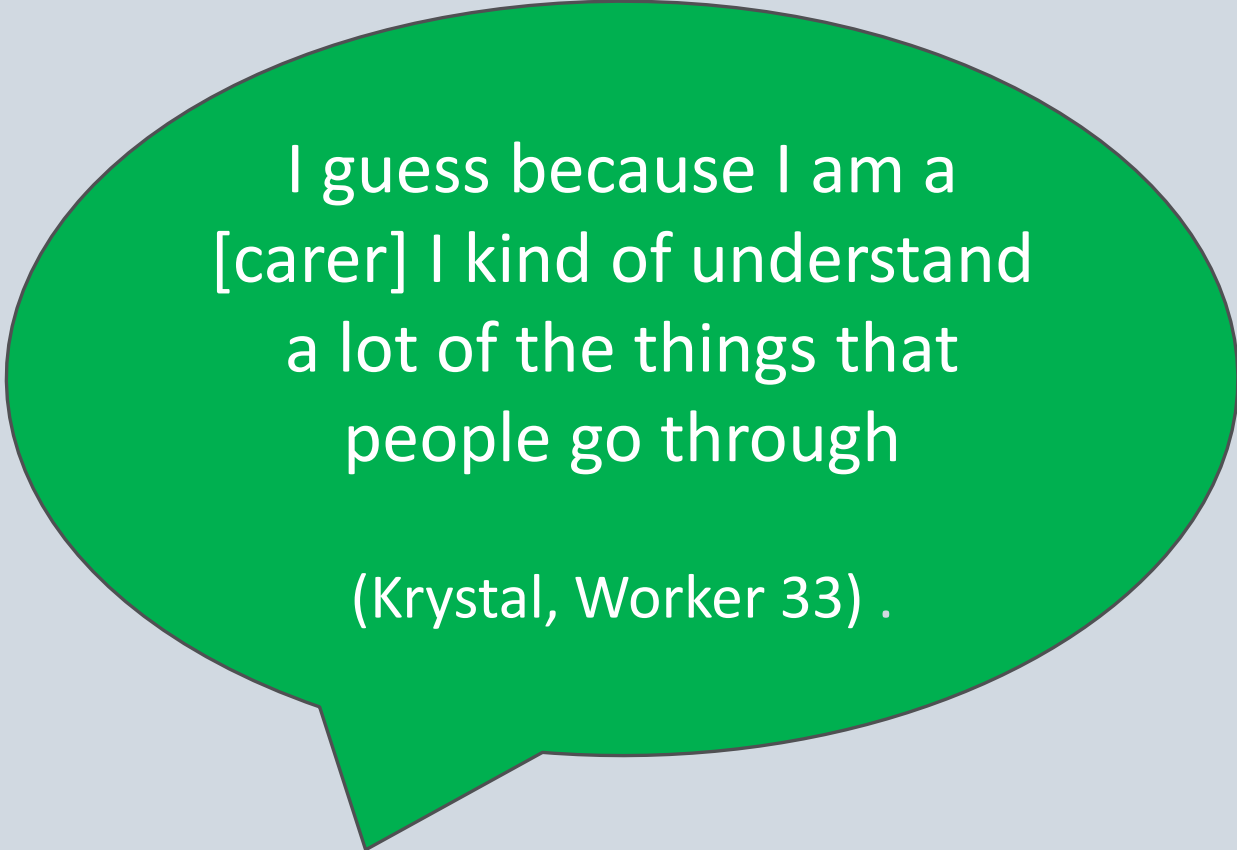
- 14% SCPWC said their activity affected by limiting longstanding illness
- 2% NMDS-SC had disability
- This question always produces smaller numbers
- NMDS-SC completed by employers – always get higher numbers with self report

Varied routes into role



Personal experience

Two thirds of the
workers had personal
experience of caring



I guess because I am a
[carer] I kind of understand
a lot of the things that
people go through

(Krystal, Worker 33) .

Valued by carers

Carers valued combination of personal and professional experience

Basically [Krystal] is a very good listener. She's obviously aware of issues pertaining to [my son's condition]. And she is someone who I know I can say anything to. For me that's very, very important
(Kelley, Carer 21)

Support *for* the carer

Carers often seen as 'resource' or 'co-worker' (Twigg, 1989)

... they gave me a safe place to talk
... It did help [that] ...worker knew about carers and about mental ill health conditions and related [to] the difficulties. So I felt, 'Oh at last I can just spill the beans' ... I haven't even told my parents everything yet

(Nami, Carer 05)

Job satisfaction and job security

Context of existing work
on recruitment and
retention in workforce
as a whole

I'd say I have 100% job satisfaction. Well, no not 100%, 90% job satisfaction ... The problem ... is the contracts and the funding of these roles. My [job] was initially commissioned just for a year and then it was extended for nine months, and then an extra three months. And now an extra month. I don't believe anyone can work under those circumstances.

(Lauren, Worker 12)

Context

Reflects changes to way services purchased from the voluntary sector

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practice

Fragmentation and competition: voluntary organisations' experiences of support for family carers

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In England, voluntary organisations such as the Carers Trust and Alzheimer's Society play major roles in providing practical help and support to family carers. This article draws on a large study looking at social care practice with carers to illustrate how changes in social care commissioning and cuts in funding have created difficulties for organisations such as these. It asks whether contracting policies based on competition between providers threaten collaborative campaigning and strategic alliances.

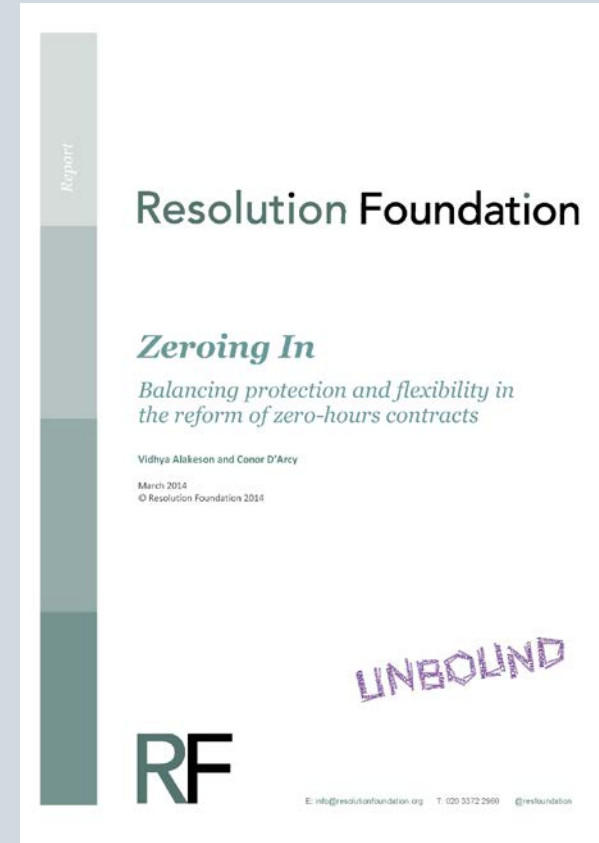
key words carers • commissioning • markets

Not just about zero hours

Debate in UK about rise of zero hours contracts, particularly in social care

Less attention paid to frequency of short term contracts – particularly in the voluntary sector

Doesn't lend itself to 'social care market' such as using direct payments to buy in support



Discussion

Exploratory study – not funded to look at outcomes for carers in terms of quality of life, wellbeing and so on

Provides basis for further work looking at links between different roles and different outcomes

Experienced practitioners and continuity of role contrasts with 'McDonaldization' (Ritzer, 1993) of social care

Context of reduced social care funding in England – not yet clear if has had differential impact on carers

Research on impact of Care Act 2014 will be very important in indicating what is happening

Acknowledgement and Disclaimer

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The Social Care Workforce Research Unit receives funding from the Department of Health Policy Research Programme. The views expressed in this presentation are those of the authors and not necessarily those of the Department of Health

The poster features a green vertical bar on the left with the text 'Research findings' written vertically. At the top left is the 'KING'S College LONDON' logo. At the top right is the 'NIHR School for Social Care Research' logo. The main title is 'Social care practice with carers: What social care support is provided to family carers? What support do family carers want?'. Below the title is a 'KEY POINTS FROM THE RESEARCH' section with a bulleted list of findings. To the right of this list is a text box titled 'The Care Act 2014 strengthens the rights and recognition of carers in the social care system...' which includes a list of research questions. At the bottom left is a small photo collage of people. At the bottom right is the 'National Institute for Health Research' logo. A footer at the very bottom reads 'Improving the evidence base for adult social care practice'.

KING'S College LONDON

NIHR School for Social Care Research

Social care practice with carers: What social care support is provided to family carers? What support do family carers want?

KEY POINTS FROM THE RESEARCH

- Most social care support for carers is delivered through the voluntary sector, although most councils still directly undertake carer assessments.
- Changes in commissioning and contracting arrangements have created additional opportunities for the voluntary sector but also some uncertainties.
- Carers have mixed views on the extent to which they feel their social care needs are met. However, they are positive about the help provided by carers' workers with a specific remit to provide them with support.
- Activities by carers' workers are varied and include outreach work, information provision, counselling, advocacy and ongoing support.
- Different ways of improving carers' access to information, such as websites, carers' cafes and outreach workers, have been developed, although these rarely seem to be evaluated for their effectiveness.
- Identifying carers in need of additional support seems mainly to take place when the person for whom they care is assessed. This disadvantages those caring for someone who is not eligible for, or who refuses, social care support from their local authority.
- The Care Act 2014 has implications for the way that social care support to carers is delivered. Currently,

The Care Act 2014 strengthens the rights and recognition of carers in the social care system, including new rights for carers to receive services. In the run-up to implementation of the Act, this study maps different types of social care support for family carers across England.

Using information from commissioners, carers' leads, voluntary organisations, social care workers with a specific remit to support carers, and family carers themselves, this mixed methods study used interviews, surveys and secondary data analysis to ask:

- How do carers access information about social care support?
- What are carers' experiences of assessment?
- What support is provided by carers' workers whose tasks involve providing specific support to family carers?

carers caring for someone not meeting the eligibility criteria for social care support may have substantial or critical unmet needs of their own.

- Carers' organisations argue that an important part of their role is to encourage carers to complete self-assessments but they are concerned that not enough support is then available to those carers who have been assessed.
- Some local councils are working with local clinical commissioning groups on integrating support for carers, though these developments have yet to become established everywhere.

The study represents independent research funded by the National Institute for Health Research (NIHR) School for Social Care Research (SSCR). The views expressed are those of the authors and not necessarily those of the NIHR, SSCR, Department of Health, or NHS.

National Institute for Health Research

Improving the evidence base for adult social care practice

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To NIHR SSCR for funding

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5	NHS Choices http://www.nhs.uk/conditions/social-care-and-support-guide/Pages/what-is-social-care.aspx
6	Skills for Care NMDS-SC https://www.nmds-sc-online.org.uk/content/About.aspx

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