The review of migrant employment in low-skilled work – MAC consultation

Response from the English Community Care Association (ECCA)

1. Introduction

1.1 The English Community Care Association (ECCA) is the leading representative body for community care in England. Our members provide a wide range of services for adults with care and support needs including residential and nursing settings, homecare, housing and community-based support. Our members also deliver specialist care home services such as rehabilitation, respite, palliative care and mental health services.

1.2 ECCA is pleased to be able to respond to this important consultation from the Migration Advisory Committee (MAC). Below are the responses from ECCA to the following questions set out in the MAC consultation document.

2. Where and how do you recruit workers for low-skilled jobs? Is there any difference to how you recruit migrants (EEA and non-EEA) compared to UK workers?

2.1 Some providers first seek initially to recruit UK, local workers whilst others do not differentiate in relation to UK or migrant workers. Providers undertake all or a range of the following:

- advertise all vacancies on their websites for at least 28 days;
- place advertisements in Jobcentre Plus offices;
- advertise some vacancies in local print media and websites;
- use employment agencies for some vacancies;
- track responses electronically using a company Applicant Tracker System;
- use video conferencing technology as part of the overall recruitment process;
- create a system to allow people to recommend friends at the same time that posts are being advertised

There may be differences in process according to location. One provider has established with EURES to further support a more effective approach to attraction and selection.

2.2 ECCA recently update the Skills for Document 'Finders keepers' which provides examples of good practice around recruitment and retention in this sector. This is available on the Skills for Care website

http://www.skillsforcare.org.uk/NMDS-SC-intelligence-research-and-innovation/Research/Research-knowledge-base/Articles/Finders-keepers-The-adult-social-care-sector-recruitment-and-retention-toolkit.aspx

3. Does your organisation experience problems recruiting people for low-skilled jobs? Why?

3.1 The adult and social care industry has significant challenge in promoting careers within the sector. Providers are struggling to recruit at all levels, but particularly workers where competition comes from other industries such as retail. Providers are experiencing the following issues:

- Limited supply especially in certain geographical areas;
- Limited supply in particular skill sets particularly nursing ;
- The current difficulties for a care worker to progress to the role of nurse ;
- The lack of available funding to support career progression given the demographic workforce profile;
- Difficulty in attracting school leavers to the sector;
- Competition from within the sector and from organisations in other industries.
- Difficulty recruiting due to pay. Also in some areas where jobs are available in an affluent area it is difficult for people on lower pay to afford to commute.

3.2 We have noted that we are having more feedback about overall difficulties in recruitment compared even to only a year ago. This applies across all services but there is a real worry that nurses are becoming more reluctant to work in this sector and this may be due in part to the recent increased requirement for nurses in the NHS in the face of criticism on nurse staffing levels and the need to deal with increased demand. In learning disabilities this may be due in part to the reputational damage to providers post the scandal of abuse at Winterbourne View private hospital.

3.3 Local Authority fees continue to fall behind the true costs of care and this leaves providers with very few options to improve staff terms and conditions including wages. The gap in funding is well documented and there have been a number of high profile judicial reviews on fees brought by providers against councils in recent years.

3.4 There is also depressingly little ambition in terms of assumptions around what the costs should be. So for example where cost models are used to determine local fair fees (whether these are ultimately paid or not is another matter) the figures fed into the model are for the national minimum wage (NMW). This hampers recruitment particularly when one considers the demands of the job and the skills required to best care for very vulnerable people. At the very least we should be aiming to pay care workers a living wage yet the new costing model developed by ADASS for example assumes only the national minimum wage for care workers.

3.5 As dependency grows people moving into homes now stay for shorter periods of time and require far higher levels of care than previously, yet funding continues to force down relative wage levels, reduces training opportunities and adds to staff stress levels. In such circumstances it becomes ever more difficult to recruit. These are not new messages but are still to be addressed properly.

3.6 The West Sussex Forum of care providers recently looked at the cost of recruitment. Skills for Care estimates an average staff churn across the care sector in West Sussex of 25%. The size of the sector workforce is 28,000. Skills for Care estimate total recruitment costs at £3,500 per vacancy so that means circa £24,500,000 a year that providers are having to find simply to stand still. It is roughly equivalent to the total budget for Older People Adult Services in West Sussex.

4. What skills do you require of low-skilled workers? How are these best acquired?

4.1 In order for care providers to give the highest levels of care to people, it is essential that employees feel passionately about the work that they do and the care they provide.

4.2 The Francis Report talked about the need for openness, transparency and candour and a focus on the need for a culture of caring and compassion. In the extensive recommendations it was made it clear that:

- Every single person serving patients need to contribute to a safer, committed and compassionate and caring service; and
- All who work within healthcare must adopt and demonstrate a shared culture in which the patient is the priority.

This is equally true within social care.

4.3 In recruitment, the report stressed the need that all recruits had to possess the appropriate values, attitudes and behaviour. It is generally accepted that it is not always possible to develop these behaviours and standards and therefore providers need to recruit staff demonstrating compassion. Evidence based recruitment tools help in this regard. Providers are then prepared to train people in the skills that are needed. If they understand the need to treat people with dignity and have a desire to help them providers can often train them to undertake the job roles necessary.

4.4 English Community Care Association and its members are committed to working with Skills for Care, the National Apprenticeship service and others to strive for improvements within the sector.

4.5 However the increasing challenge has to be to develop a more skilled workforce for the future to reduce the reliance on migrant labour. The current process is frustrated by lack of cohesion within the further education system. A more vocationally based qualification would support this and underpin the need to ensure the nurse or carer demonstrates the required values attitude and behaviour in the delivery of that care. Simplification, clarity and unity is required.

4.6 Finally it must be emphasised that the sector does not recognise the terms used in this consultation of 'low skilled workers'. The attributes, skills and knowledge required to do this difficult, demanding yet rewarding work are numerous and this is a sector that wants to see its entire staff acknowledged as having an important and vital role, that will support people to live fulfilling lives in safety and dignity whatever the care setting they live in. The terminology used in this consultation, whatever the justification for it, does not help the sector achieve that aim.

ECCA

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