



## **1. BACKGROUND**

- 1.1** This paper provides a deep dive on the Adult social care labour (workforce) market across the independent sector, including an overview of workforce trends, current challenges faced and our approach to address these.

## **2. MAIN ISSUES**

### **2.1 Key Messages**

- 2.1.1** Across the Eastern Region, Skills for Care data shows that the number of adult social care jobs across the independent sector (including home care, residential and nursing homes) has increased by 7.1% since 2012. 90% of the workforce are on permanent contracts, with 52% full time, 37% part time and 11% having no fixed hours. 26% were recorded as having zero hours contracts, with the highest proportion (50%) recorded within domiciliary care, especially amongst care workers (60%) and registered nurses (51%).
- 2.1.2** An analysis of the National Minimum Dataset obtained by Skills for Care indicates that providers operating across the independent sector within Cambridgeshire will face significant challenges in recruitment and retention and it is likely that this will be exacerbated to some extent by the impact of Brexit. However it should be noted that conclusions drawn are indicative given that submission to the current National Minimum Dataset by external providers is currently completed on a voluntary basis. This has resulted in data collected representing a sample of local providers.
- 2.1.3** Key messages arising from the data analysis include:
- There are currently 62 independent homecare provider organisations registered with the Care Quality Commission (CQC) in Cambridgeshire and another 92 registered residential and nursing homes. This equates to a workforce of around 10,000 individuals providing direct personal care.
  - There is a relatively even spread of workers under the age of 55. However, 20% of the workforce is over the age of 55, which is likely to place pressure on workforce planning in the future.
  - Whilst 62% of the workforce directly involved with the provision of care are British, in line with the national average, the proportion of EEA (Non British) workers (24%) is significantly higher than the national and regional average. There is therefore real risk that policy development to support Brexit could have a detrimental impact on both retention of a significant proportion of the existing workforce, and the ability to expand the workforce using existing strategies to manage increased demand within Cambridgeshire.
  - Expanding the local independent sector provider workforce in line with increasing demand for services, especially within the over 65 age group is a regional challenge. In fact, the Eastern Region has the second lowest ratio of workers to population aged 65+, second only to the South West of England.
  - In line with national trends, data analysed indicated that local independent sector providers are experiencing a high turnover rate of around 44%, with the average length of time in post being 2.9 years. Equally, however, analysis of 411 Cambridgeshire workers also suggested that one third of the workforce leave their role to move to a competitor indicating that the sector as a whole is retaining staff

within Cambridgeshire. Furthermore, 63% of workers who reported their 'Leaver Destination' within Cambridgeshire moved to other roles working within the wider health and social care sector. This compares favourably to national (52%) and regional (59%) trends.

- Based on POPPI data, Skills for Care forecasts that if the independent sector workforce was to grow proportionately to the projected number of people aged 65 years and over, an increase of 36% in workforce capacity would be required by 2030.

- 2.1.4** The strength of Cambridgeshire's economy, whilst positive, is impacting on the ability to expand the local independent sector workforce due to the choice of occupations available to individuals and proximity to London. The following trends were identified:
- Cambridgeshire currently only has a 2.9% unemployment rate, with a comparatively high number of jobs available per resident aged 18-64.
  - The average weekly household income of £907.48 is also significantly higher than the average weekly incomes of a Care Worker (£289) and Senior Care Worker (£300). The impact of this is further exacerbated by the consistent increase in local property value within the area, with house prices being significantly above the national average in most areas. Data therefore indicates that the relatively high cost of living, combined with the low level of income associated with work as a carer makes attracting a workforce to the independent sector extremely challenging.

## 2.2 Detailed Analysis of Local Data

### 2.2.1 Providers

As of May 2017, there are **62** independent provider organisations in Cambridgeshire registered with the Care Quality Commission (CQC) to provide personal care, and another **92** registered to provide residential and nursing care. Estimates prepared by Skills for Care using provider workforce data captured via the annual National Minimum Dataset – Social Care (NMDS-SC) suggests there are around **10,000** workers providing personal care within the County.

### 2.2.2. Workforce and population

Skills for Care estimate that there are around **107,000** workers involved in the direct provision of care in the eastern region. The adult population of the region is estimated to be a little over 4.7m – of which 1.1m are aged 65 and over. Calculating the number of workers per 10,000 of population enables comparison nationally and between regions.

**Estimated number of workers delivering direct care, per 10,000 of population, Skills for Care, 2015**

Age	Eastern	East Midlands	London	North East	North West	South East	South West	West Midlands	Yorkshire and Humber	England
All adults	224	240	189	257	234	226	239	227	221	225
Aged 18-64	296	315	222	337	303	297	326	296	287	290
Aged 65+	919	1,014	1,268	1,082	1,014	947	898	975	965	998

Sources: ONS population estimates 2015, Skills for Care workforce data

**2.2.3** As shown in the above table, the Eastern region has the second lowest ratio of workers to population aged 65+, suggesting that the independent sector workforce pressures experienced in Cambridgeshire are experienced throughout the region, as well as other parts of the country, such as the South West.

**2.2.4** *Workforce demographics*

There is limited information available at a local level, due to the voluntary nature of data returns. Skills for Care are able to provide demographic and ethnicity details for around 1,500 workers in Cambridgeshire, which represents around 15% of the estimated total workforce involved in direct care provision. The below tables provide a breakdown of workforce demographics based on the available data.

**Age profile, workers involved in the direct provision of care in Cambridgeshire, NMDS-SC return, 2015**

Age Group	Number of staff	Percentage of staff
24 and under	210	14%
25 to 34	332	22%
35 to 44	290	20%
45 to 54	353	24%
55 to 64	250	17%
65 and over	49	3%
<b>Total</b>	<b>1,484</b>	<b>100%</b>

Source: Skills for Care workforce data

**2.2.5** As can be seen in the above figures, 20% of workers are aged 55 and over. Analysis of the national and regional datasets suggest a similar breakdown.

**Ethnicity, workers involved in the direct provision of care in Cambridgeshire, NMDS-SC return, 2015**

Ethnicity	Number of staff	Percentage of staff
Unknown	44	3%
Non-EEA	162	11%
EEA (Non British)	354	24%
British	925	62%
Non-British (nationality not known)	1	1%
<b>Total</b>	<b>1,486</b>	<b>100%</b>

Source: Skills for Care workforce data

**2.2.6** As shown above, 62% of workers involved in the direct provision of care in Cambridgeshire are British, which is broadly in line with the national and regional averages. The proportion of EEA and Non-EEA workers in Cambridgeshire is significantly higher than the regional and national averages.

### 2.2.7 Turnover of workforce

Turnover in Cambridgeshire is estimated at 44% which is in line with the regional (45%) and national (42%) averages. The average length of time in post is estimated to be 2.9 years, which is also in line with the regional (3.0 years) and national averages (2.9 years).

2.2.8 The Skills for Care dashboards hold data explaining the reason for leaving for and the destination for 411 Cambridgeshire workers. Analysis of the reasons data suggests that around a third of workers who left a position in the period moved to a competitor, and were therefore retained by the sector.

Reason for leaving, Skills for Care NMDS-SC return, 2015

Reason for leaving	Cambridgeshire	Eastern region	England
Pay / conditions / nature of the work	13%	12%	16%
Career development / market competition	32%	38%	31%
Personal reasons	34%	25%	24%
Resignation	4%	9%	11%
Retirement	3%	2%	2%
Death	0%	0%	0%
Dismissal	7%	5%	6%
Redundancy	0%	0%	0%
End of contract term	0%	1%	1%
Other reasons	8%	8%	8%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

Source: Skills for Care workforce data

2.2.9 Analysis of the Cambridgeshire data shows it is broadly in line with the regional and national averages.

2.2.10 205 workers who left a role in Cambridgeshire in 2015, provided information about where they were moving to. Analysis of this dataset shows that 63% of leavers in Cambridgeshire recorded in the annual NMDS-SC return moved to other roles within the health and social care sector, working with adults or children. This is broadly in line with the regional average (59%) but is significantly higher than the national average (52%). A comparison against the national and regional datasets show that the figures are broadly similar, with the exception of workers moving to other private or voluntary organisations, where 40% of Cambridgeshire workers reported that they moved to a similar type of organisation, compared to a regional figure of 32% and a national figure of 29%.

**2.2.11** This suggests that the Cambridgeshire independent care sector retains a higher proportion of workers than other parts of the country. Whilst this may sound positive, turnover is still comparatively high and length of service is relatively low, suggesting there is a high degree of workforce ‘churn’ which will have a detrimental impact on service user continuity of care, as well as recruitment, training and personal development costs for care providers.

**2.2.12** *The strength of the local economy*

Analysis of a range of employment indicators available from the Office National Statistics (ONS) shows that the Cambridgeshire economy is outperforming the regional, England and national averages.

**ONS People not in Work - January 2014 to December 2014 (published 17th April 2015)**

Economic Indicator	What is good?	Cambs	East of England	England	UK	Notes
Job density	Higher ratio	0.84	0.78	0.80	0.79	Jobs densities are calculated as the number of jobs per resident aged 16 to 64 of the relevant year.
Employment %	Higher %	79.5	75.7	72.5	72.2	Annual Population Survey (APS) data. The APS is a survey of the population of private households, student halls of residence and NHS accommodation.
Unemployment %	Lower %	3.90	5.20	6.20	6.20	Model-based estimates of unemployment. These are calculated from a model based on the Annual Population Survey with the Claimant Count as an auxiliary variable.
Unemployment claimant count %	Lower %	1.1	1.9	2.4	2.5	A measure of the number of people claiming benefits principally for the reason of being unemployed. Currently this is the number claiming Jobseeker's Allowance on the second Thursday of each month (the “count date”).

**ONS People not in Work - January 2014 to December 2014 (published 17th April 2015)**

Area	Job density	Employment %	Unemployment %	Unemployment claimant count %
<b>Cambridgeshire</b>	<b>0.84</b>	<b>79.5</b>	<b>3.9</b>	<b>1.1</b>
Cambridge	1.18	78.6	4.0	1.0
East Cambridgeshire	0.70	74.1	4.4	1.1
Fenland	0.64	78.0	5.4	1.9
Huntingdonshire	0.75	83.9	3.6	1.1
South Cambridgeshire	0.80	79.6	3.2	0.7

**2.2.13** The published Skills for Care NMDS-SC data shows that pay in Cambridgeshire is in line with the regional and national averages.

**Average annual pay rates, Skills for Care NMDS-SC return, 2015**

	Cambridgeshire	Eastern Region	England
Role			
Care Worker	£15,007	£15,388	£14,913
Senior Care Worker	£15,584	£15,873	£15,798

**Average weekly pay rates, Skills for Care NMDS-SC return, 2015**

	Cambridgeshire	Eastern Region	England
Role			
Care Worker	£289	£296	£287
Senior Care Worker	£300	£305	£304

**2.2.14** However, these weekly and annual averages are low when compared to other economic data available via the Office of National Statistics (ONS).

**2.2.15** Analysis of average weekly household income data shows that the county is performing well against national and regional comparators. However, analysis of the Cambridgeshire level data (i.e. district sub-district) shows significant geographical variations within the County. Cambridge and Huntingdonshire have weekly household income levels similar to the county average, and greater than the national and regional averages, with the average for South Cambridgeshire being significantly higher. The average weekly household income in East Cambridgeshire, is above national and regional averages, but a little below the county average, whilst the average for Fenland is significantly lower than all other districts and is also below the national and regional average.

**2.2.16** Analysis of district level information follows a similar pattern, with the averages within South Cambridgeshire being significantly above the regional and national averages, and Fenland performing poorly against other parts of the county, regionally and nationally.

## **2.3 Workforce Planning and Development Initiatives**

**2.3.1** Cambridgeshire County Council has been engaged in a significant level of partnership working with local independent sector providers with the aim of tackling challenges associated with recruitment and retention across the sector. Through LGSS Workforce Development, the Council also provides significant development opportunities to the local independent sector workforce. This section provides an overview of the recruitment and retention initiative, the local workforce development offer and a

summary of the key challenges identified which will need to be managed and mitigated against in moving forward.

**2.3.2** Contracts and Commissioning have been working with partnership with local independent sector providers to set up and ensure completion of the following initiatives:

- **Educational Engagement Initiatives** have taken to place with the aim of raising the profile and knowledge of the independent sector and providing placement opportunities which may lead to a permanent job role on qualifying through:
  - Working in partnership with Huntingdonshire Regional College, to build upon their existing work experience framework for the Professional Caring Pathway, with a view to embedding personal care into a number of work experience options available to students. The programme of work is being led by a single independent sector provider. To date, it has resulted in around 11 applications demonstrating some impact could be achieved if the initiative is rolled out to other colleges and areas.
  - A number of independent sector providers have also been proactively engaging in career events within a number of schools, academies and regional colleges in order to raise the profile of the sector amongst those who may be work ready, or in the process of considering future employment options. Whilst these events have taken place across Anglia Ruskin University, Cambridge Regional College, Huntingdonshire Regional College and Soham Village College, impact in terms of applicants has been limited to date.
- **Targeted Recruitment Initiatives** have mainly targeted advertising and recruitment campaigns to local people who work in local communities where workforce capacity is currently a significant challenge. This has included some joint working with Adult Learning and Skills to support individuals interested in employment opportunities within the sector, but who require some support with basic Maths and English skills. To date, 7 independent sector providers have been engaged in these initiatives and this has resulted in 7 applicants.
- **Wider Community Engagement Initiatives** have included a variety of activities such as attendance at job fayres for those seeking employment and working with Job Centre Plus representatives to raise their knowledge and awareness of the independent care sector to ensure they are equipped to signpost individuals to vacancies wherever possible.
- **Combined Authority Skills initiatives**, working closely in partnership with City College Peterborough and local learning partners, are focusing on the following key areas to support adult skills to address local needs and address skills gaps:
  - Development of a skills strategy
  - Innovation Pilot – 3 year pilot to address the skills shortage in health and social care; funded by the Department of Work and Pensions, to stimulate progression and improve career prospects for those in receipt of in and out of work benefits across Cambridgeshire and Peterborough. This will include wrap around career guidance and post-employment support, including bursaries for child care and travel costs; Influencing employer recruitment practice and staff development; Delivering a tailored programme of training, co-designed with local employers; and Supporting basic skills development and work experience visits.
  - Expansion and strengthening of the University of Peterborough.



- Closer integration of City College Peterborough and the Cambridgeshire Adult Learning and Skills Service.
- Apprenticeship grants for local employers.
- **Other key areas of work** have included:
  - Working with external partners to direct applicants who have completed a 'Get Into Health and Social Care' Course. This 6 week course is attended by younger people aged 19 to 24, which consists on a 2 week intensive course and a 4 week placement with a preferred employer. However, the success of this programme has been limited due to the suitability of candidates put forward to local providers.
  - Sector Based Work Academies, to be delivered in partnership with Job Centre Plus, were focused on offering employment training relevant to the needs of independent sector employers and other businesses, this has not been successful due to limited engagement from providers and is now on hold.
  - Work with Kick Start, a registered charity established to provide affordable, alternative means of travel in order to assist individuals residing in Norfolk, Suffolk and Cambridgeshire areas to secure, start or sustain their employment, education or training. This is in the early stages of development and therefore evidence of impact is limited.
  - Targeted campaign focused on promoting the value of male care workers through the media and an initiative which looks at supporting individuals who have experienced mental health challenges into employment within the independent care sector.

**2.3.3 LGSS Learning and Development** also offer a range of development opportunities to local independent sector providers to encourage increased recruitment and retention. However, in line with the above, progressing these schemes have been challenging and evidenced success is limited. In seeking to address the challenges of workforce retention, the following is offered by LGSS:

- A comprehensive learning and development programme stretching from the Care Certificate, addressing CQC Mandatory Training Requirements and Delegated Health Tasks to a range of vocational qualifications, and from September, apprenticeships. However, programmes are offered on a traded product basis and are therefore chargeable. This is viewed as a key area of expansion within LGSS, with 148 Private, Voluntary Sector organisations purchasing parts of the programme over the last financial year.
- The LGSS Learning and Development Team administers the Skills for Care Workforce Development Fund on behalf of Skills for Care. This fund amounts to £80,000 and the private, voluntary sector can access the fund to support qualifications. There has been a high level of interest and use of this fund.
- LGSS are currently engaged in development of the iCare Ambassador Partnership, which is sponsored by the Cambridge Care Professional Pathway. The partnership aims to identify champions of personal care provision and experts in best practice from across local providers and provide job shadowing for students following a social care pathway, map vocational qualification competencies against existing health and social care apprenticeship frameworks and develop a programme to support a sector based work academy. This initiative is currently in the early stages of development.
- LGSS have been working in partnership with Health Education to develop a 'Grow

Your Own' initiative which aims to lead on development of sector based work academies to support the sector. Although the programme was successful in appointing approximately 20 workers, the scheme was deemed financially unsustainable, so the contract has been terminated early.

**2.3.4** To support workforce pressures across the independent sector, the Council has looked at improved utilisation of resources and alternative models of delivering care. For example, to support the in-house reablement team as the provider of last resort, significant additional investment was agreed to increase the reablement offer by 20% and an aggressive recruitment campaign is ongoing. In addition, CCC is currently piloting two 'Neighbourhood Care Teams' in Soham and St Ives, where new ways of working with system partners are being developed to prevent needs escalating and enable timely and supported hospital discharges.

## **2.4 Key Challenges**

**2.4.1** Across the schemes progressed to date, a number of key challenges have been identified:

- Lack of consistent engagement from local independent sector providers
- There is a need to increase partnership working and consistency in approach across health and social care
- Lack of strategic, organisational focus on the external workforce despite responsibilities outlined within the Care Act 2014.
- Lack of continued funding and resources to build upon and scale up small pilots which have evidenced some success.
- In line with national trends, the independent sector brand requires professionalising and a clear career pathway needs to be developed in order to make the offer of employment within this sector more attractive.

## **2.5 Strategy Development**

**2.5.1** CCC is leading on the development of a joined up approach and strategy to independent sector workforce planning and development. This will draw on learning to date and best practice evidence in tackling workforce issues in the short, medium and longer term. Key areas of focus in the strategy development will include:

- Establishing a provider network
- Review of our development offer
- Explore where we can align recruitment approaches across CCC, health and private providers
- Longer term, explore opportunities to work as a region to increase the profile of care

## **3. ALIGNMENT WITH CORPORATE PRIORITIES**

Report authors should evaluate the proposal(s) in light of their alignment with the following three Corporate Priorities.

### 3.1 **Developing the local economy for the benefit of all**

Strengthening the local independent sector workforce, enhancing the availability and quality of home care, residential and nursing home provision.

### 3.2 **Helping people live healthy and independent lives**

Strengthening the local independent sector workforce, enhancing the availability and quality of home care, residential and nursing home provision.

### 3.3 **Supporting and protecting vulnerable people**

Strengthening the local independent sector workforce, enhancing the availability and quality of home care, residential and nursing home provision.

## 4. **SIGNIFICANT IMPLICATIONS**

### 4.1 Resource Implications

*There are no significant implications within this category.*

### 4.2 **Procurement/Contractual/Council Contract Procedure Rules Implications**

*There are no significant implications within this category.*

### 4.3 **Statutory, Legal and Risk Implications**

*There are no significant implications within this category.*

### 4.4 **Equality and Diversity Implications**

*There are no significant implications within this category.*

### 4.5 **Engagement and Communications Implications**

*CCC has worked in partnership with local Independent Sector Providers and other partners (e.g. education providers and health partners) in the development of workforce initiatives. CCC will continue to consult with and develop the development of the workforce strategy in partnership with these providers.*

### 4.6 **Localism and Local Member Involvement**

*There are no significant implications within this category.*

### 4.7 **Public Health Implications**

*There are no significant implications within this category.*

<b>Implications</b>	<b>Officer Clearance</b>
<b>Have the resource implications been cleared by Finance?</b>	Yes Name of Financial Officer: Tom Kelly
<b>Have the procurement/contractual/ Council Contract Procedure Rules implications been cleared by Finance?</b>	Yes Name of Financial Officer: Paul White
<b>Has the impact on statutory, legal and risk implications been cleared by LGSS Law?</b>	Yes Name of Legal Officer: Duncan Dooley-Robinson
<b>Have the equality and diversity implications been cleared by your Service Contact?</b>	Yes Name of Officer: Oliver Hayward
<b>Have any engagement and communication implications been cleared by Communications?</b>	Yes Name of Officer: Mathew Hall
<b>Have any localism and Local Member involvement issues been cleared by your Service Contact?</b>	Yes Name of Officer: Oliver Hayward
<b>Have any Public Health implications been cleared by Public Health</b>	Yes Name of Officer: Tess Campbell

<b>Source Documents</b>	<b>Location</b>
Skills for Care Dashboards	<b>Data sources</b> <a href="https://www.nmds-sc-online.org.uk/reportengine/dashboard.aspx">https://www.nmds-sc-online.org.uk/reportengine/dashboard.aspx</a>
ONS Population Data	<a href="https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland">https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland</a> <a href="https://www.cqc.org.uk/content/how-get-and-re-use-cqc-information-and-data#directory">https://www.cqc.org.uk/content/how-get-and-re-use-cqc-information-and-data#directory</a>

