## It is time to move from complacency to commitment to better lives for both the social care workforce and care users

**Shereen Hussein** discusses the need for a business case to improve the pay and working conditions of care workers.

Over the past few years policy debate has continued around the funding of the social care system in England; usefully summarized in the Dilnot review. Everyone now seems to acknowledge the growing and pressing need to address funding and maintain the social care system. An important element that seems to be missing from these debates is the social care workforce itself. While long term care funding reform is taking time to resolve,

social care workforce itself. While long term care funding reform is taking time to resolve, thinking about the workforce remains highly relevant. Direct care workers and their managers or employers are often invisible in funding debates and few commentators seem to know what it is like working in such roles. They usually only appear in the media negatively, when things go terribly wrong and quality of care is compromised.

There is an estimated 2 million direct care jobs in the UK; providing essential care and support for the most vulnerable people in our society. They are usually motivated to work in this sector because they 'feel good' about helping others, and in many situations have their own 'informal' caring responsibilities, which mean that they are often attracted by the promise of seemingly flexible working conditions. They may feel that their personal and public roles can complement and enhance one another. But the reality for some is very different, with poor pay levels and hard working conditions.

Some jobs mean that visits to people's own homes have to be very quick and some staff do not get paid for travel time. With the majority of the care workforce being women, often with multiple responsibilities, the effect on their wellbeing is considerable. These conditions are likely to become even tougher with the new realities of a longer recession and the continuous budget reductions facing local governments. Poor pay and hard working conditions do not usually receive high policy attention for many reasons, including the value the society places on such work as well as care workers' low representation in trade unions and their lack of 'voice', which ensures their frequent invisibility in ongoing debates.

A recent article in the Guardian, discussing pay levels in the care sector, triggered a group of care workers to send me their working diaries to illustrate how much of their work is in reality unpaid. They also gave many examples of how this affected their wellbeing and personal lives. I was privileged to receive such accounts, which only confirmed the bleak picture of pay and its effect on the lives of these workers.

While the campaign for a living wage is gaining momentum, some direct care workers are, for many reasons, not likely to be affected by this. The complex commissioning processes between their employers and local authorities does not usually promote better pay levels. Currently, as many as an estimated 10 to 12 per cent of this workforce is paid under the national minimum wage, the majority of the rest have a very narrow pay distribution with any 'unpaid' time or work likely to move their wages under the minimum threshold.

There is a need to establish a business case to improve the pay and working conditions of care workers, which looks into the medium and longer term effects. In terms of real economic costs to the society, if pay and working conditions improved, there is likely be significant savings associated with improving retention, less wasted training, improving workers' mental health and reducing up-take of income related benefits and savings to the public purse. It would also be important to reconsider the links between the quality and conditions of care work, with related levels of stress and quality of care received by service users. The costs associated here can be considerable. It is time to move from complacency to commitment to better lives for both the workforce and care users.



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