



Sector Pulse Check

The impact of the changes to the social care sector in 2019

January 2020



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2 Foreword

For the third time, Hft has commissioned Cebr to conduct research into the financial pressures facing the social care sector.

We were pleased to see that a growing number of providers are continuing to contribute to our survey, with the total number of respondents increasing from 54 to 77. I would like to take this opportunity to thank all those who took the time to provide feedback for this important piece of research.

2019 was something of a turbulent year in British politics. With the political landscape dominated by Brexit and the first winter General Election since 1923, social care once again seems to have hovered at the bottom of the government's priority list. It is perhaps unsurprising, then, that more than half of respondents (59%) believe that the social care sector was in a worse condition when former Prime Minister Theresa May left Downing Street in July 2019, compared to when she first entered it in July 2016.

Once again, unfunded increases in the National Living Wage continue to be the biggest financial pressure facing providers. While it is absolutely right that social care staff should be paid more for the invaluable work that they do, this must be factored in to the rates at which social care packages are commissioned. With wage levels due to increase to £8.72 p/h in April 2020, it is vital that providers are funded to continue to pay higher wages in a financially sustainable way.

It is deeply worrying that providers are having to close parts of their organisation as a way of dealing with these financial pressures. 45% of providers have had to close down services in the past year, and 52% warn they will need to do so in the near future. Service closure is the last resort any provider can take. It cannot be right that so many providers are choosing to take such drastic action due to lack of funding, when we are seeing growing demand for these services across the sector.

In particular, we know the demand is increasing for services for individuals with complex needs and behaviours that challenge, as the government rightly moves these people out of inappropriate ATUs and into supported living settings. However, our survey shows providers are struggling to recruit and retain staff to support these individuals. Without suitable social care provision, vulnerable adults will continue to languish in inappropriate medical settings. We call for urgent government investment in these services, to ensure all adults get the high-quality, person-centred support they deserve.

Last year, providers warned us that further funding cuts would have a negative impact on the quality of care they are able to provide. This year, 43% of providers have told us they have seen a reduction in the quality of care they are able to provide. Be it in the form of worsening CQC accreditations, decreases in staff morale, or higher incidences of safeguarding reports – it is our clearest indication yet that it is the people we support who will ultimately bear the brunt of any crisis within social care.

As well as being a new year, 2020 also marks the start of a new decade. Let this be the year that social care finally gets the attention that it deserves. We hope that this report will be a conversation starter on the challenges being faced by the sector, and provide an evidence base for the essential reforms that are needed.

Jacqui Roynon

Executive Director, People & Communications, Hft

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Authorship and acknowledgements

This report has been produced by Cebr, an independent economics and business research consultancy established in 1992. The views expressed herein are those of the authors only and are based upon independent research by them.

The report does not necessarily reflect the views of Hft. London, January 2020

Hft would like to express their gratitude to the following organisations for helping to promote the Sector Pulse Check survey across their membership:

- Care England
- . Dods Parliamentary Communications Ltd
- Independent Care Group
- Kent Integrated Care Alliance
- Learning Disability England
- Lincolnshire Care Association
- London Care and Support Forum
- Lloyds Bank Foundation England & Wales
- · Staffordshire Association of Registered Care Providers
- · Suffolk Association of Independent Care Providers
- Surrey Care Association
- Voluntary Organisations Disability Group (VODG)

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4 **Executive summary**

Hft and Cebr have produced their third annual Sector Pulse Check. This report offers an annual snapshot of the financial health of the social care sector, how the sector has reacted to the events of the past twelve months, and how providers anticipate the next year will progress.

- One in five providers say they have been forced to cut support in the last year as a direct result of financial pressures, with 95% citing rising wage bills as the main pressure point
- 45% of providers have handed back contracts to local authorities in the past year as a way of dealing with financial pressures, with 52% of social care providers saying they will need to hand back contracts "in the near future", if the financial situation does not improve
- Last year 11% of providers warned further cuts in funding could lead to a reduction in the quality of care they are able to provide. This year, 43% of providers warned they had witnessed a reduction in the quality of care they are able to provide
- Despite being the major area of growth in the sector, 76% of providers say they find it harder to recruit in roles that require supporting somebody that displays behaviours that challenge.
 82% also warn retention is significantly harder in these services

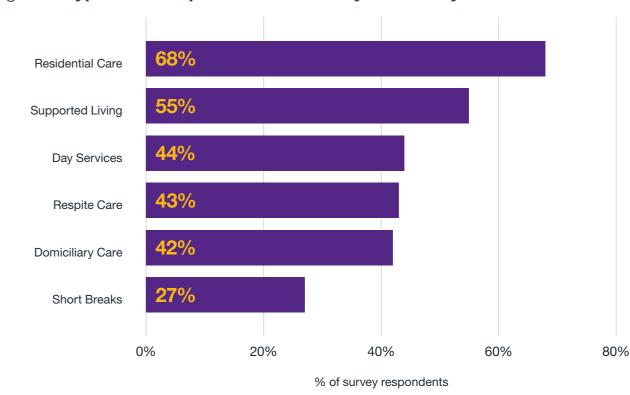
- 78% of providers believe that their staff enter a career in social care to make a positive difference in the lives of vulnerable adults
- The benefits of assistive technology are widely acknowledged, with 76% of providers saying that use of technology leads to improved outcomes for the people they support. However, while three-quarters (75%) of providers questioned say that they use technology as part of their services, 80% readily admit they are not using it to its full potential
- Theresa May left Downing Street in July 2019. 59% of providers believe that the situation in the social care sector has gotten worse during her premiership, compared to just 3% who believe that it has gotten better
- Many respondents raised concerns over decreasing funding from central and local government. There is also growing frustration about continued delays to proposals on long-term social care reforms

Introduction

The adult social care sector has faced pressures from increasing costs and underfunding for a number of years. This report uses a survey to highlight key issues and themes faced by care providers working in the sector, including cost pressures, staff recruitment and care quality. Hft and Cebr have conducted a survey of CEOs and Senior Managers within the care sector looking at how their organisations have fared over the past year. The survey received 77 responses across various types of care providers.

The majority (66%) of social care providers surveyed offer learning disability care, while 38% provide elderly care and 22% physical disability care. Figure 1 also breaks down the respondents by service type. 68% of the organisations surveyed provide residential care and 55% offer supported living.

Figure 1: Types of care provider covered by the survey



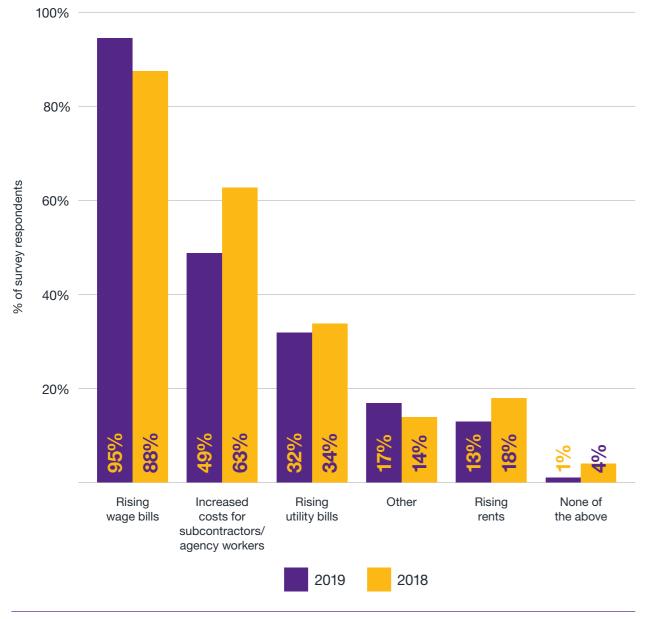
Source: Hft survey, Cebr analysis



6 Cost pressures

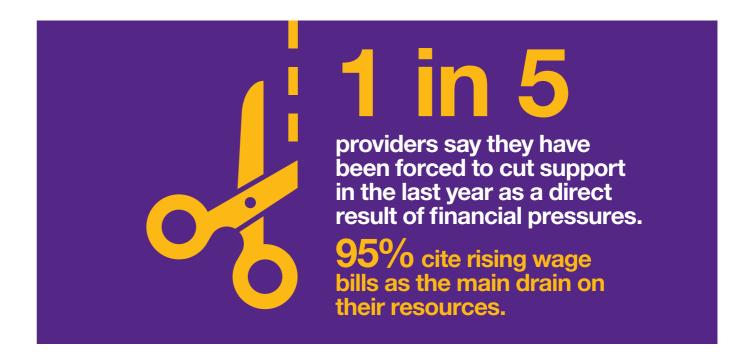
As found in previous surveys¹, rising wage bills remain by far the largest cost pressure facing care providers. 95% of care provider organisations in the latest survey reported rising wage bills to be the main cost pressure, up from 88% in last year's survey. On the other hand, a smaller share of organisations cited the cost of sub-contractors and agency workers to be a main cost pressure in this year's survey, with this issue cited by less than half (49%) of those surveyed.

Figure 2: Main cost pressures facing social care organisations at present



Source: Hft survey, Cebr analysis

Pressure from paying staff wages has worsened in recent years, especially since ongoing legal cases surrounding sleep-in payments has resulted in many providers continuing to pay National Living Wage rates for every hour of a sleep in shift, until clearer legal guidance is available². In April 2020, the national minimum wage is set to rise at a rate well above inflation, which will create further difficulty for care providers. The National Living Wage, which is the legal minimum for people aged 25 and above will rise by 6.2% to £8.72, meanwhile the National Minimum Wage for 21 to 24-year-olds will increase by 6.5% to £8.20.



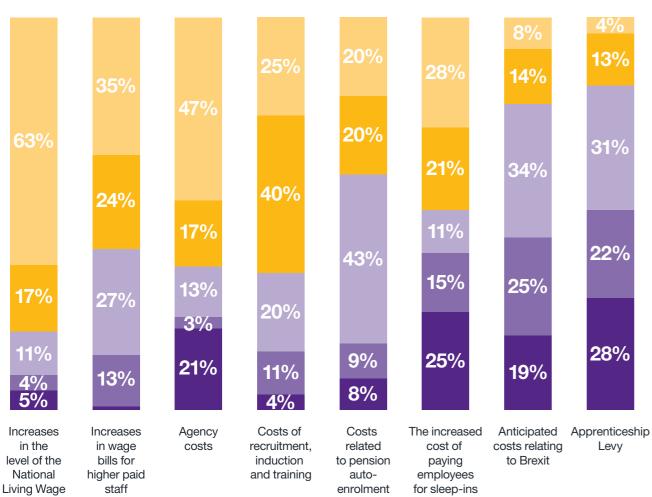
¹ See 2017 and 2018 Sector pulse check reports

² Source: https://www.civilsociety.co.uk/news/date-set-for-mencap-s-landmark-sleep-in-hearing-in-supreme-court.html



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Figure 3: Factors impacting care providers' wage bills



1 = No impact on costs, 5 = A significant impact on costs

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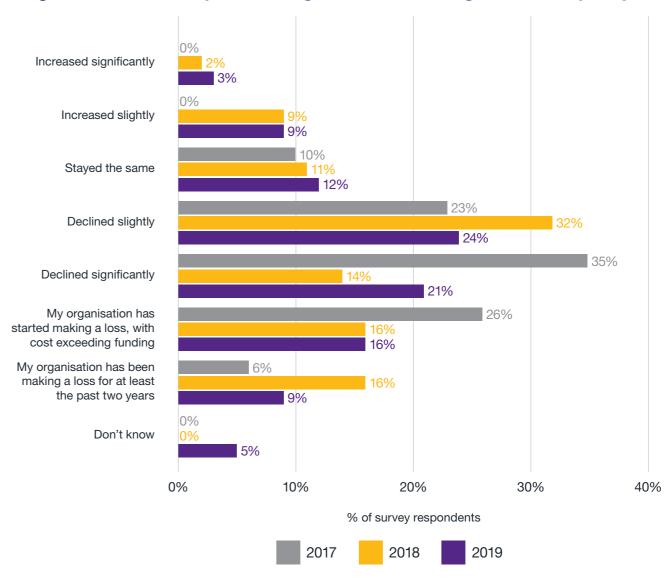
Source: Hft survey, Cebr analysis

Organisations in the social care sector were asked how much of an impact different factors were having on their wage bills. By far the factor with the most significant impact was the increase in the level of the National Living Wage, which 63% said is having a significant impact, and only 5% said is having no impact.

Increasing wages for higher paid staff, not on the National Living Wage, are also causing wage bill pressures, with 35% reporting this having a significant impact. Average weekly earnings in the health and social work sector increased by 5.0% annually in Q3 2019, to stand at £567³.

Despite Brexit dominating news headlines, only a small share of providers said that costs relating to Brexit are having much of an impact, with 22% selecting 4 or 5 on the rating scale. Although, this may change once the UK has left the EU.

Figure 4: How the surplus funding levels have changed over the past year



Source: Hft survey, Cebr analysis

In the survey, Cebr asked social care organisations how much surplus funding left over each year (which can be used for reinvestment) has changed. In the survey for this report, only 12% said that their surplus had increased over the past year. Overall, 45% said that their surplus has declined: 21% said that it had declined significantly and 24% said it declined slightly. Compared to the 2018 survey, a higher share (seven percentage points) of organisations said their surplus has declined significantly over the past year, although this was a smaller proportion than in 2017.

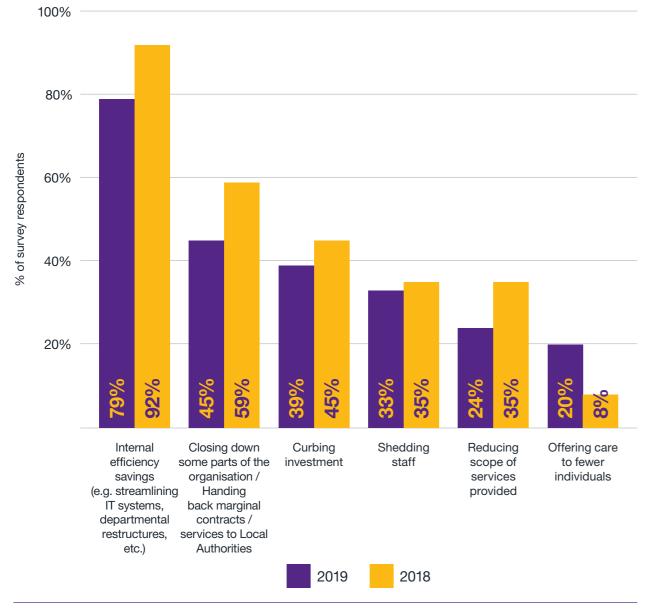
³ Source: Office for National Statistics

10 Measures to deal with cost pressures

In order to deal with the worsening funding situation in the social care sector, many care providers have had to find ways to deal with pressures on budgets. As in 2018, the main cost cutting measure being used by social care providers is making internal efficiency savings such as departmental restructures and streamlining IT systems. In the survey for this report, 79% of respondents said they were making internal efficiency savings, down from 92% in 2018. This slight fall could be due to the fact that some institutions have already done all they can to improve efficiency for the time being.

Notably, 45% of social care providers in the latest survey said that they have had to close down some parts of their organisation or hand back services to local authorities in order to manage rising costs.

Figure 5: Share of organisations which have taken the following cost cutting measures in the past year



of providers reported having to shed staff in the past year, while almost half of providers (45%) reported having to close down some parts of the organisation and/or hand back contracts to deal with cost pressures.

Between the 2018 and 2019 Sector Pulse Check surveys there has been a major rise in the proportion of organisations which are having to offer care to fewer individuals in order to manage their cost pressures, from 8% to 20%. This worrying trend suggests that some social care providers may have run out of other options and now have no choice but to reduce the number of people in their care.

The organisations which said that they had offered care to fewer individuals on average reported that there was an 8% reduction in the number of individuals in their care. Meanwhile, those who had reduced the number of staff they have on the payroll to cut costs, did so by 4% on average.

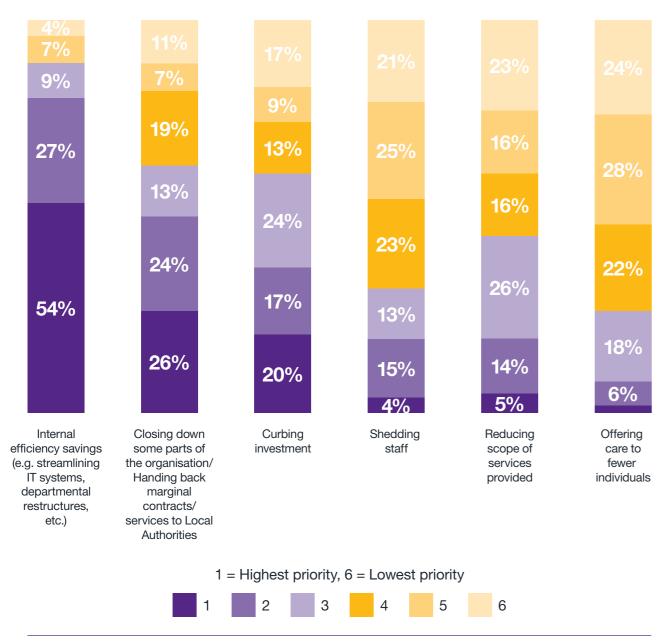
When asked the order in which organisations would implement cost cutting measures, the majority of respondents said that they would make internal efficiency savings first. Shedding staff, reducing the scope of services provided and offering care to fewer individuals were the least likely to be used as cost cutting measures ahead of other options.

Source: Hft survey, Cebr analysis



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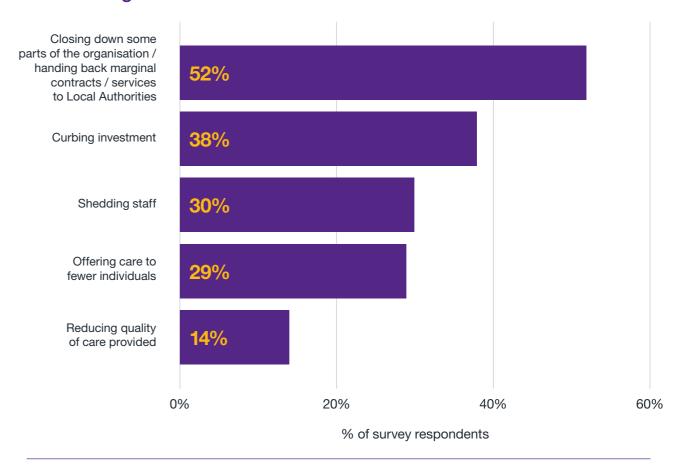
Figure 6: Order of priority in which social care organisations would implement cost-cutting measures



Source: Hft survey, Cebr analysis

Looking ahead, over half (52%) of social care organisations are still expecting to close down some parts of their organisation or hand back services to local authorities. Meanwhile, 38% believe they will have to curb investment in the near future and 30% will have to shed staff. It is interesting to note these cost-cutting measures would reduce the capacity for providers to support individuals when demand for services is growing. Analysis has shown that local authorities received 1.84 million requests for social care support from new clients in 2017/18, which is an increase of 2 per cent since 2015/16⁴.

Figure 7: Share of organisations expecting to make the following cost cutting measures in the future



Source: Hft survey, Cebr analysis

⁴ Source: https://www.kingsfund.org.uk/publications/social-care-360/access

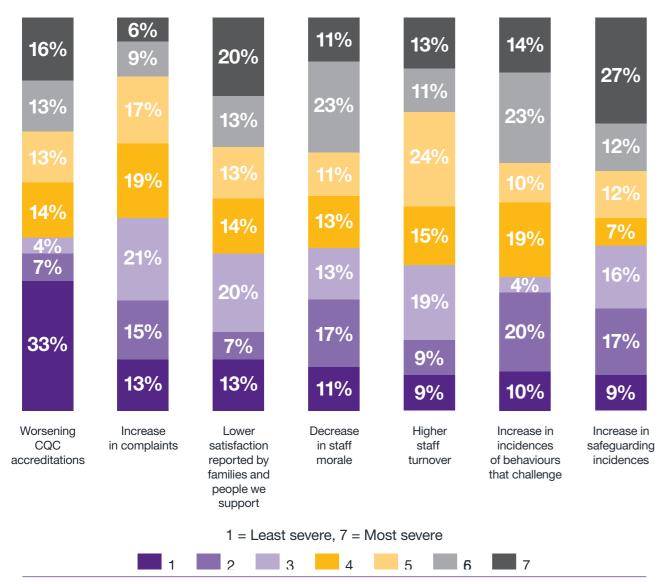
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14 Quality of care

In the 2018 Sector Pulse Check, 11% of providers warned that further cuts to social care could negatively affect the quality of care they are able to provide. In this year's survey, we asked if, in the past twelve months, respondents had noticed a reduction the quality of care that their organisation is able to provide and 43% said yes, 53% said no and 3% didn't know.

We then asked respondents to rank a number of indicators that the quality of their care had reduced, according to their severity. When they ranked different options, the average score for an increase in complaints was the highest, meaning that care providers consider it to be the most important sign of a reduction in the quality of care.

Figure 8: In order of severity, please rank how severe you consider that the following signs of a "reduction in the quality of care" would be for you



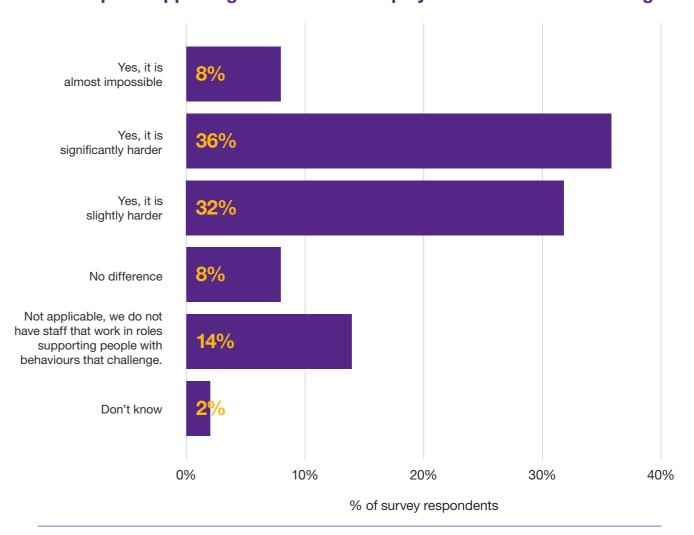
Source: Hft survey, Cebr analysis

A worsening of CQC accreditations was considered to be the second most severe sign of a reduction in quality of care, followed by a decrease in staff morale.

Staff recruitment and retention

A key issue in the social care sector at present is a shortage of staff. In this year's survey, we asked social care providers if they find it harder to recruit staff in roles that require supporting someone that displays behaviours that challenge. Overall, 8% said yes, it is almost impossible, 36% said it is significantly harder and 32% said it is slightly harder. Only 8% said it made no difference.

Figure 9: Share of providers which find it harder to recruit staff in roles that require supporting someone that displays behaviours that challenge



Source: Hft survey, Cebr analysis

Altogether, 76% of organisations said that it is harder to recruit staff in roles that require supporting somebody that displays behaviours that challenge. Of these organisations, the vast majority (82%) said that they also find it hard to retain staff in roles that require supporting somebody who displays behaviours that challenge. 43% said that it is slightly harder and 34% said that it is significantly harder.

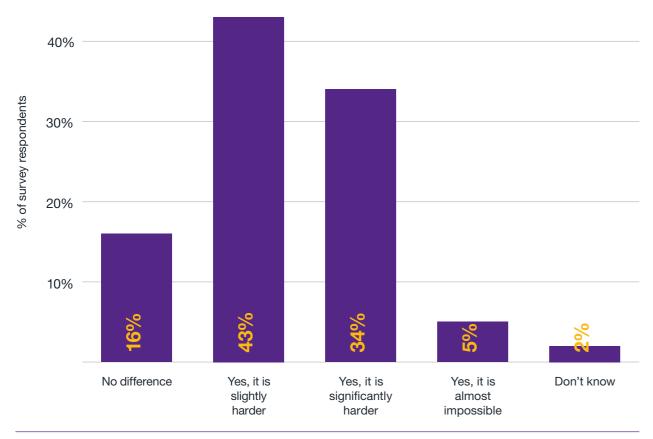
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Figure 10: Share of organisations that find it hard to retain staff in roles that require supporting somebody who displays behaviours that challenge (out of those which struggle to recruit for these services)



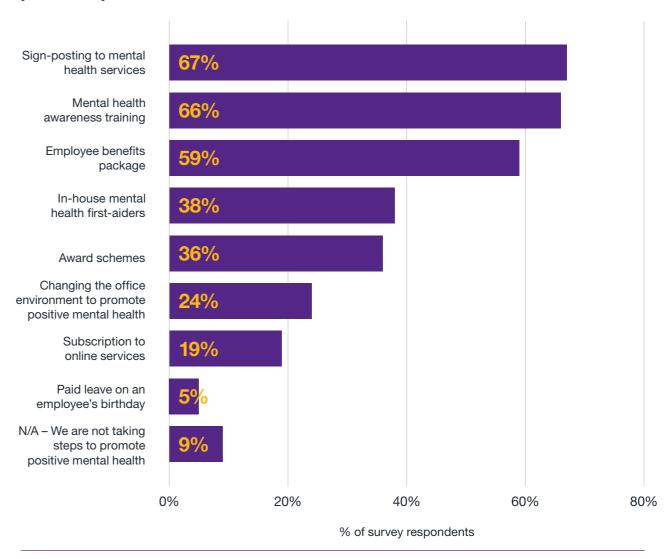
Source: Hft survey, Cebr analysis

According to a survey by CV Library, one in three social care workers have suffered from stress and poor mental health over the past year⁵. We asked providers what percentage of absenteeism (i.e. unplanned absences) in their workplace is related to mental health conditions (e.g. stress, depression, anxiety, etc.). The average figure was 17%, with some reporting shares as high as 60%, highlighting this as a significant issue for the sector.

Social care organisations are taking steps to improve the stress and mental health situation of their workers in a number of different ways. The most common way to promote positive mental health in social care organisations is by sign-posting to mental health services, with 67% having implemented this strategy. 66% of social care providers report having mental health awareness training and 59% have relevant employee benefits packages.

In the comments, some organisations expanded on the steps they have taken to improve mental health. One organisation recently established a Health & Wellbeing committee, which will work together to create a wellbeing strategy for the organisation.

Figure 11: Share of organisations taking the following actions to promote positive mental health



Source: Hft survey, Cebr analysis

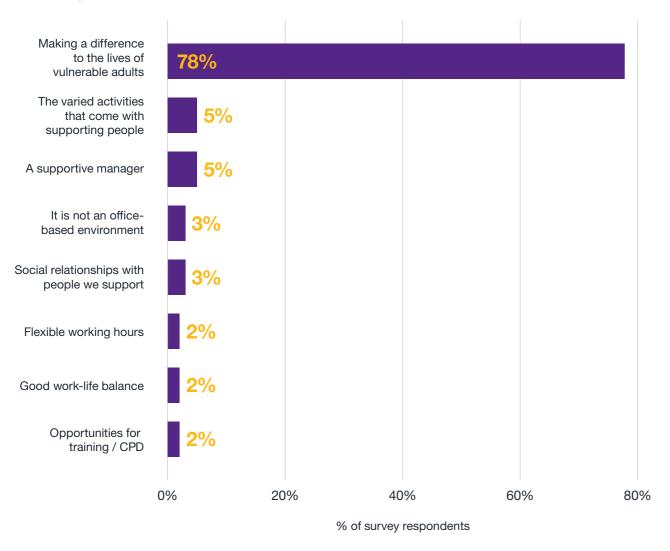
⁵ Source: "Summertime blues – Seasonal change affecting one in three social care professionals", Care Appointments, 22 August 2019, URL: https://careappointments.com/features/career-advice/131799/summertime-blues-seasonal-change-affecting-one-in-three-social-care-professionals/



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When asked what staff would say is the best thing about working in the social care sector, the overwhelming response was the opportunity to make a difference in the lives of vulnerable adults, with 78% selecting this response. The next most selected option was the varied activities that come with supporting people, chosen by just 5% of respondents.

Figure 12: What social care staff say is the best thing about working in the sector



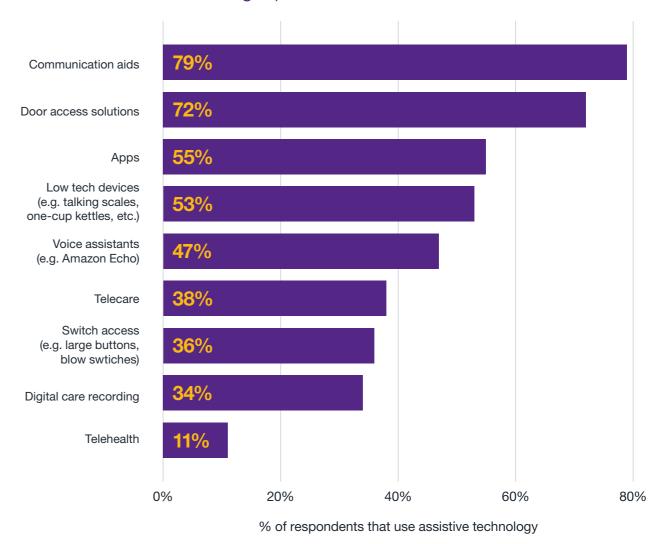
Source: Hft survey, Cebr analysis

Assistive technologies

As technology develops, there is a growing potential for social care providers to make use of new ways to improve their services. Assistive technology includes a wide range of supportive services and equipment, ranging from personal alarms for elderly people, to seizure monitors and more sophisticated technology such as fingerprint recognition systems, that allow someone to open a door without keys.

Of the social care providers who responded to the survey, 76% use assistive technologies, although only 19% use assistive technologies as a core part of their service provision. One in five (19%) do not use assistive technologies.

Figure 13: **Use of assistive technologies** (for social care providers which use assistive technologies)

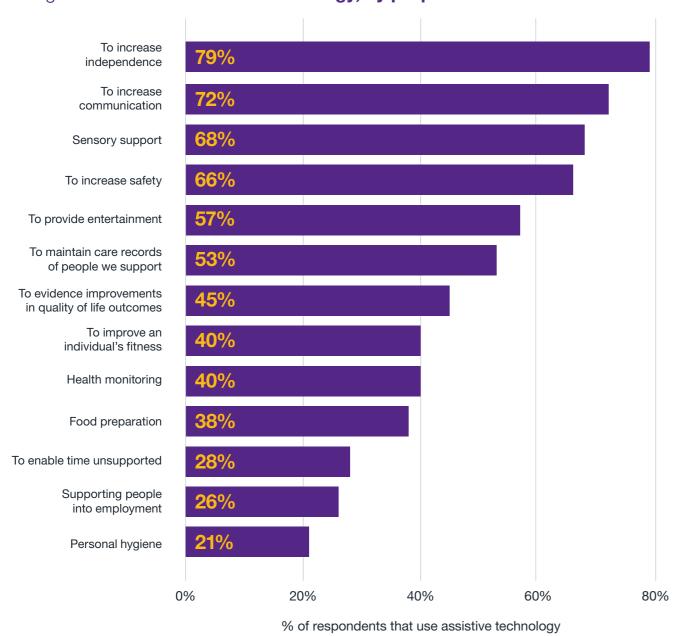


Source: Hft survey, Cebr analysis

Of the 76% of providers who use assistive technologies, the most common type to use is communication aids, which are used by 79% of these providers. These include using hearing aids and smart phones to facilitate communication. Also, 72% of those which use assistive technologies have door access solutions.

Telehealth, which involves using technology to enable healthcare professionals to remotely monitor data on certain aspects of a patient's health is the least used assistive technology. This may include sensors that can monitor the amount of oxygen in a person's blood, which could help prevent health problems.

Figure 14: Use of assistive technology, by purpose



Source: Hft survey, Cebr analysis

The top reason for using assistive technology is to increase the independence of the care receivers, which 79% of respondents who use assistive technology quoted. To increase communication and provide sensory support were other key reasons for using assistive technology.

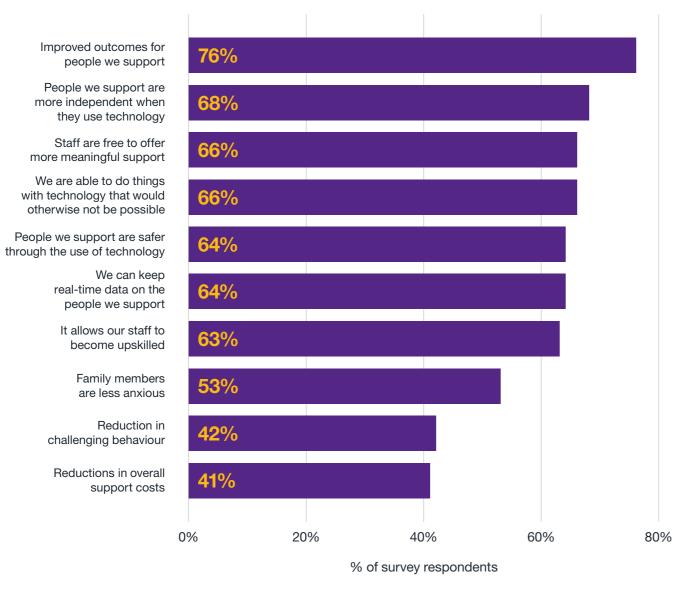
Organisations using assistive technologies were also asked if they believe they are using it to its full potential, to which the significant majority (81%) said no they are not. To realise the full potential of new technology requires training and time to embed new skills within the workforce. It may be the case that many staff in social care organisations are very busy, and so struggle to make the time to properly understand the full potential of the assistive technology available to them.

Although some social care providers are not using assistive technology, and many of the organisations may not be using it to its full potential, they are still able to recognise the benefits. Social care providers which responded to the survey highlighted the following key benefits of assistive technology:

- 76% said that they considered improved outcomes for the recipients of social care support to be a benefit of assistive technology
- 68% said that a key benefit is that people who are supported by assistive technologies are more independent when they use the technology
- •66% said that they consider that staff are free to offer more meaningful support



Figure 15: Benefits of assistive technology

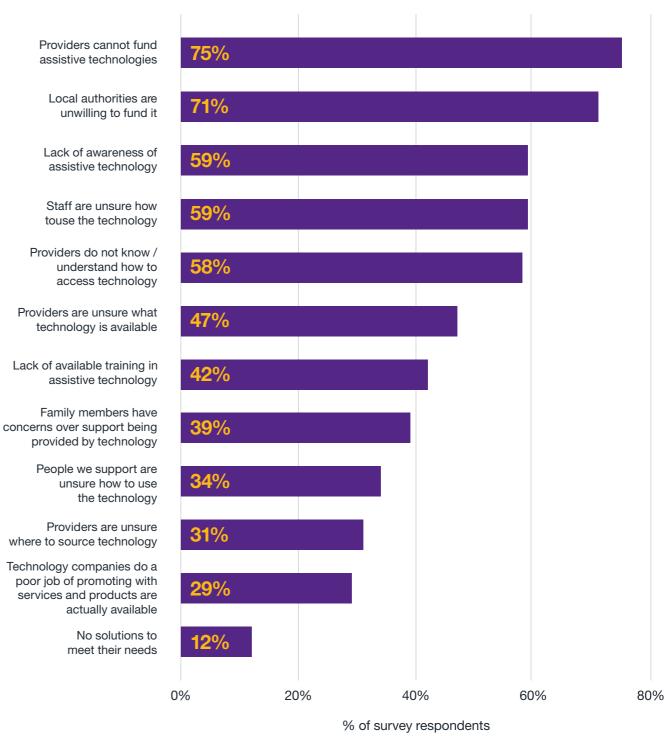


Source: Hft survey, Cebr analysis

The cost of assistive technologies is the main barrier to using them, with 75% of social care providers saying they cannot fund it. Furthermore, 71% of care providers said that local authorities are unwilling to fund it. A lack of awareness of assistive technology is considered a barrier, as even organisations who do have the budget to purchase assistive technology still need to invest time in understanding what would work best for the people they support. Many staff are also unsure how to use new technologies, which dissuades organisations from purchasing new equipment, as they fear that it will not be used by staff.

Very few organisations said that there are not the assistive technology solutions available to meet their needs, suggesting that the right equipment exists, but funding and implementation barriers are stopping social care providers from using it.

Figure 16: Barriers to using assistive technology



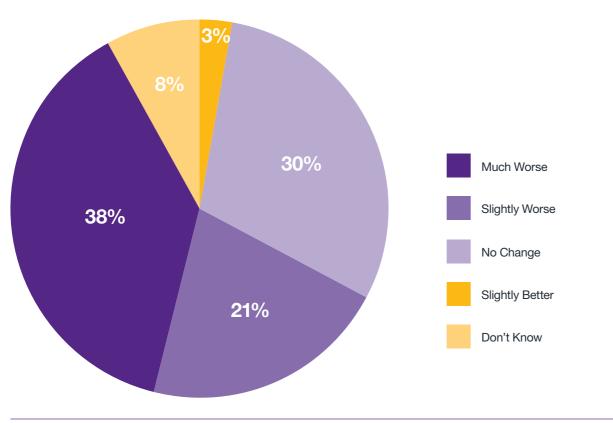
Source: Hft survey, Cebr analysis



24 Further issues

July 2019 saw the resignation of Theresa May as Prime Minister. Care providers were asked if they thought the general situation for social care was better or worse when she left office compared to when she became Prime Minister in July 2016. 3% said slightly better, 30% said no change, and 59% said the situation was far worse.

Figure 17: Opinions on how the situation for social care changed compared to when Theresa May left office to when she became Prime Minister in July 2016



Source: Hft survey, Cebr analysis

Additionally, 42% of respondents chose to add further comments on the funding position and the cost pressures of their organisation. The main themes discussed in the responses were lack of funding from local authorities, recruitment issues and rising costs due to wages, with one care provider saying that "the cost pressures and funding position could well be the catalyst for the failure of our business in 2020".

homes providers increases people local services people local servi National Living Wage quality care support residential C financial increased years
Local Authorities services_increase

The word cloud above shows the most common words and themes used by providers. Their comments can be read in full in **Appendix A**.



Conclusions

The results of the 2019 Sector Pulse Check survey highlight the continued funding difficulties that social care organisations are facing.

For some these have worsened to the extent that they are nearing a crisis. One care provider commented that "Local Authority funding is 90% of our funding and has decreased in 17% in real terms over 10 years, whilst the national minimum wage, pension contributions and overheads have increased. We cannot offer the best support to either our staff or participants with such limited financial resources." Another said that "it has never been harder to do what we do. There are no policy solutions on the horizon for supporting people with disabilities to lead better lives."

A worrying trend in this report is the major rise in the proportion of organisations which are having to offer care to fewer individuals in order to manage their cost pressures. The number of organisations forced to take this action has more than doubled from 8% to 20% between the 2018 and 2019 surveys. This may be because providers have already exhausted all their other options to reduce cost pressures and they now have no option but to reduce the number of people in their care. One employee in social care finance said that "for the last 15 years, we have had to make efficiencies and cuts every year."

Staff recruitment remained an issue over the past year. In order to attract the best staff, providers need to increase wages. However, when faced with a perilous funding situation, increasing wages is difficult to achieve. In the survey one provider commented that "we need funding desperately, to help with recruitment training of our staff and to enable us to pay staff appropriate wages and provide additional benefits as the NHS does."

Overall, government intervention is desperately required in the social care sector in order to end the prolonged period of staff recruitment difficulties and mounting cost pressures resulting in worsening care quality.

Appendix A: Your comments

Are there any general comments you would like to make about the funding position and the cost pressures of your organisation?

Hourly rate of £15 is putting cost pressure on organisation and retaining staff. on for long enough – local authorities have failed in their statutory obligations to fund social care properly in their area, meaning providers have to fill the funding gaps. It does not add up.

66 Concern about sleep in judgement, depending on decision either large back pay issue, or if Court of Appeal decision upheld then LAs will reduce their funding for sleep ins. **55**

44 As a home with a Christian ethos we are uncomfortable that we can only afford to accept private funding residents due to the percentage of LA funded residents (mostly due to having exhausted their private funds). We may be forced to request residents to move on to homes that accept the level of LA funding, which goes against our principles. >>>

Funding remains a problem. Fees not reflective of the quality of service they are expecting us to deliver.

for residential care homes as people are being kept in their homes longer and when their care needs increase they need either dementia care of nursing care or are coming into residential care at a much later age with more complex needs i.e. mobility. Currently those just providing residential care are experiencing empty rooms.

Review of support needs change constantly goals change without valid reasons.

to do what we do. There are no policy solutions on the horizon for supporting people with disabilities to lead better lives. ""

Funding reductions by the social services having a significant negative affect.

hardship onto the providers and increased the numbers of challenging users increasing the pressures on the providers. 55

This year has been the worst for us in ages. Delay to Brexit (which may or may not be a bad thing, but it's taking up all our energy!), new PM leadership and now an election!

No time to focus on social care!



The impact of short term contracts and constant re-tendering.

16 LAs and CQC plus all other inspections have no consideration of the day to day running and extra costs for the add-ons they demand. They control the input and output of the business with no regard to costs or viability.

View and drive down providers rates in a climate where providers face ever increasing costs.

An alternative longer-term view working in partnership providing incentives to support service users to reduce dependency on paid services would assist in developing a more cost effective sustainable market.

Get 0-1% which does not cover employment costs.

66 An urgent solution is required from Government in order to address the funding crisis in social care. It is a travesty that people doing such important and challenging work with some of the most vulnerable people in our society, are paid less than someone working in a retail environment.

of workers is increasing the salary bill and the increased costs are rarely reflected in funding from commissioners so margins are reducing.

funding and has decreased in 17% in real terms over 10 years, whilst the national minimum wages, pension contributions and overheads have increased. We cannot offer the best support to either our staff or participants with such limited financial resources.

Companies have to invest more in staff, which increases staff wages and training.

It is difficult to recruit in social care. Local councils should take into consideration hourly rates paid for non-skilled jobs e.g. stacking shelves in Aldi/Tesco.

funding position could well be the catalyst for the failure of our business in 2020.

does not depend on the NHS alone, the NHS would implode if there was no social care. We need funding desperately, to help with recruitment training of our staff and to enable us to pay staff appropriate wages and provide additional benefits as the NHS does. We need to be as spoiled as they are, however we in social care would not dream of abusing money the way they do in the NHS.

Is few years due to staffing costs, energy costs and ongoing repairs, and continued costs are going to mean closures of homes, residential and nursing if this is not addressed very soon. An increase in the cost of care is desperately needed to continue to provide good quality care! Care homes can no longer meet high quality with a lack of the correct funding to do so!

Funding is way too low; the councils want to pay a figure which is below the cost of care itself.

We depend on personal budgets and direct payments; it seems that social services are signposting people to cheaper day services.

It is so hard to remain positive and upbeat about the future when the funding situation is having a direct impact on the quality of support provided. Yet it I don't remain positive, my workforce will be even more demoralised than they currently are!

years, and for the last 15 years, we have had to make efficiencies and cuts every year. The pay of staff has been depressed each year. When I started we were paying a rate significantly above NLW, now we are on NLW. We have no ability to invest, and our pricing it barely above cost. The sleep-in issue has been the last straw, if we have to pay the back payments we will go under, if we don't have to pay and LAs withdraw the funding, we will lose staff and not be able to recruit, which will mean agency use, reduced quality, higher costs, and a worsening financial position that will not be sustainable.

44 Getting worse, especially with changes in employment law. E.g. average hours payment whilst on leave. 55

If We have been able to future proof for some financial increases over last few years but will be reaching a position whereby we have no further ability to continue without increase in funding. The report that both main parties wish to increase NLW to £10 would be unachievable for us without significant rises in fees. We currently pay slightly higher than NLW but owing to the amount of hours we deliver and keeping differentials in place we would require approx. £750,000.

Need to increase status and pay of front line workers through proper funding from local authorities.

over 26 years, it saddens me that the government still haven't got their act together as far as social care funding goes. As a sector we should spend less time waiting and debating issues and force the issues to be addressed – take action as a sector not individuals as this would be more powerful.

Thank you for taking the time to reach out to small independent providers. Not just the big players. Government does not listen to small business, despite what they say.

hft.org.uk



We are a national charity that creatively supports adults with learning disabilities to live the best life possible.

People with learning disabilities face obstacles that are hard to imagine. We use our skills, experience and creative ideas to help people to overcome them. Our Fusion Model of Support is key in this – it's how we ensure the best possible outcomes for everyone we support, challenging us to provide consistent, high-quality services.

Today, we are trusted to support more than 2,500 people across England and Wales, from living independently in their own home, to day opportunities; from a few hours a week, right up to 24 hours a day.

For some people we support, we provide round the clock support; for others it may be a question of helping with specific challenges such as building a social life or developing skills for independent living. For every person we support, we are committed to working with them to realise their best life possible.



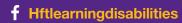
Find out more at hft.org.uk



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