

Estimating demand and supply of migrant home care workers in the UK

Summary of Round 1 of a Delphi Survey

Professor Shereen Hussein &
Dr Agnes Turnpenny

Personal Social Services Research Unit
February 28, 2020
www.pssru.ac.uk

University of Kent

University of Kent
Cornwallis Central
Canterbury
Kent
CT2 7NF
Tel: 01227 823963
pssru@kent.ac.uk

About the research/Acknowledgements

This survey was conducted as part of a component study within the *Sustainable Care* programme, *Migrant labour in the UK home care sector: a sustainable wellbeing analysis*, led by Professor Shereen Hussein at PSSRU, University of Kent. The Sustainable Care programme is funded by the Economic and Social Research Council (award ES/P009255/1, *Sustainable Care: connecting people and systems*, 2017-21) whose support is gratefully acknowledged, and led by Professor Sue Yeandle at the University of Sheffield. The views and opinions expressed here are not necessarily shared by the funder.

The first round of this Delphi Survey was prepared and conducted by Sab Siddiq (graduate student, King's College London), Professor Shereen Hussein and Dr Agnes Turnpenny.

<https://www.pssru.ac.uk/project-pages/sustainable-care/>

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In 2019, as part of a study on *Migrant care workers in the UK*,¹ we launched a Delphi Survey² to generate possible scenarios to guide future statistical modelling of the migrant home care workforce³ in the UK.⁴ The aim of the modelling will be to explore what the future role and composition of this workforce could look like after Brexit, within the context of wider sectoral challenges. The present report summarises the responses received in Round 1 of the survey, which were collected in the first phase of the larger study.

Background

Non-UK nationals make up approximately 16% of the home care workforce in England – 9% are non-EU nationals and 7% are non-UK EU nationals. The regions of England that rely most on migrants to fill vacancies in the overall adult social care sector are London, the South East, the South West and the East.

Although the overall share of migrant workers in home care jobs has been relatively stable in recent decades, its composition has changed considerably since 2010, when [the Adult Social Care Workforce Data Set \(previously the National Minimum Dataset for Social Care; NMDS – SC\)](#), started recording nationality and country of birth data about workers in social care.⁵ The relative importance of EU nationals has increased since 2010, perhaps as a consequence of both new visa rules introduced in 2012 (that restricted non-EU work migration) and the opening of the UK labour market to Romania and Bulgaria in 2014.

In the context of high vacancy levels in social care, migrant workers seem to have responded to a consistent demand in the sector. The latter suggests that a certain level of migration is both required and needed – at least in the short and medium term – to maintain an

¹ This study is part of the [Sustainable Care: Connecting People and Systems](#) programme (details in acknowledgements).

² The Delphi Survey is an established method to explore a range of views and achieve consensus opinion on topics characterised by high degree of uncertainty. It is often used to inform forecasting. For more information on the method, see for example [Iqbal & Pipon-Young \(2009\)](#).

³ Skills for Care defines adult domiciliary or home care services to include domestic services and home help; domiciliary care services; extra care housing services; meals on wheels; supported living services; other adult domiciliary care services (ASC Workforce Statistical Appendix 2019).

⁴ Although social care is a devolved responsibility in the UK, migration policy is not and many of the challenges are shared. Therefore, stakeholders from all four UK nations were invited to take part in the survey.

⁵ Hussein, S. (2011). *The contributions of migrants to the English care sector. Social Care Workforce Periodical*, SCWP(11).

adequate supply of workers in the home care (and broader social care) workforce, especially in certain regions (ASC Workforce Statistical Appendix 2019, Tab 4.13).

The Conservative Government's proposed post-Brexit immigration system will end the unrestricted access of EU nationals to the UK labour market and introduce a [points-based immigration system for all non-UK nationals seeking employment in the country](#). Exact details, and the timetable for introducing this policy are yet to be revealed, but [concerns have been raised about the adequacy of the proposed system for the social care sector](#).

Respondents and research method

We invited 53 experts and stakeholders from across the UK to take part in an expert (Delphi) survey on the topic 'demand and supply of migrant home care workers in the UK'.

Participants were identified through existing networks and/or recommendations of Sustainable Care senior team members, programme advisory board, and partners. Experts were approached by email and invited to complete the survey questionnaire online.⁶ There were 32 complete responses; over half of respondents (n = 20) described their expertise as relating to the 'social care workforce' and/or 'home care', and five indicated that their expertise was in 'immigration policy'. Some respondents had additional expertise in workforce modelling, employment rights, social care and other relevant areas. This initial round of the Delphi survey was drafted and piloted within the Sustainable Care research team in December 2018. The data presented here were collected from 32 respondents who completed the survey from January to February 2019.

Timescale and uncertainty

The data collection took place after publication of the previous Government's *White Paper on the Future Immigration System* in December 2018, but before the (first) deadline for the UK to leave the EU in March 2019. At that time, the May Government was intending to publish an adult social care (ASC) green paper setting out policy ideas for ASC funding, workforce, carers, integration, and technology.⁷ This was abandoned in July 2019, when the Government announced it would instead be publishing an ASC White Paper, at an unspecified date. This was not forthcoming during Theresa May's premiership, and at the time of the writing remains unpublished.

There were thus, unavoidably, high levels of uncertainty regarding all the areas considered in the first round of the survey when our data were collected. We nevertheless attempted to

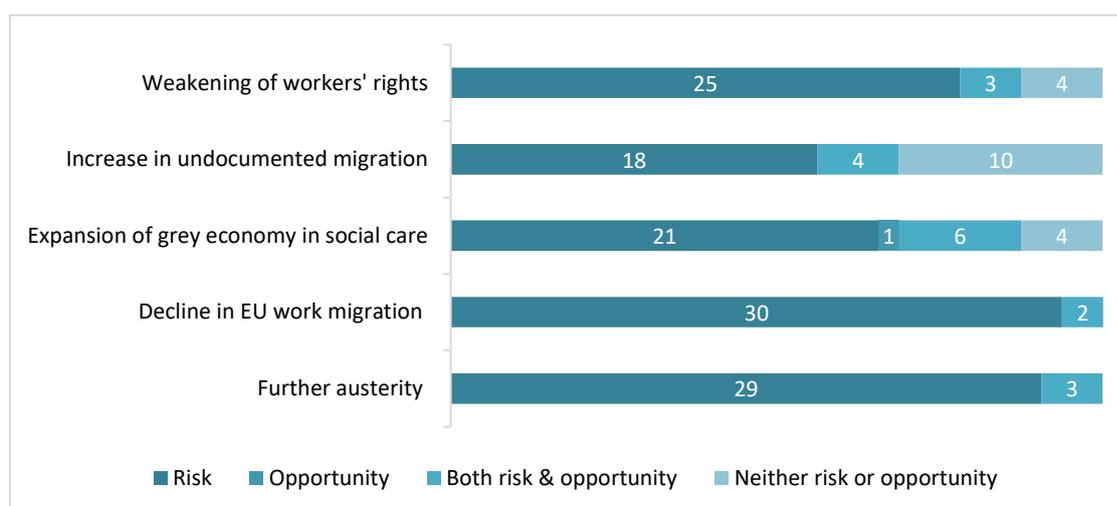
⁶ The Research Ethics Committee of King's College London granted research ethics approval for the survey (Ref.: MRS-18/19-847).

gauge a sense of the plausibility and/or likelihood of different future options across three broad time-scales: ‘short term’ (within the next 5-10 years); ‘medium term’ (10 to 15 years in the future); and ‘long term’ (15-25 years ahead). Where possible, we report the perceived likelihood of different scenarios, although these should be treated with caution in the absence of robust policy direction in relation to immigration post Brexit at the time of the survey. Respondents had the opportunity to include free-text responses for each question to explain their selection. Where relevant these are also summarised in the report.

First round responses

All 32 respondents regarded further austerity and a decline in EU work migration as definite risks associated with Brexit (Fig.1). There was somewhat less concern about future weakening of care workers’ rights, potential expansion of care work into the informal/grey economy or an increase in undocumented migration in home care, all of which were widely seen as less likely to happen.

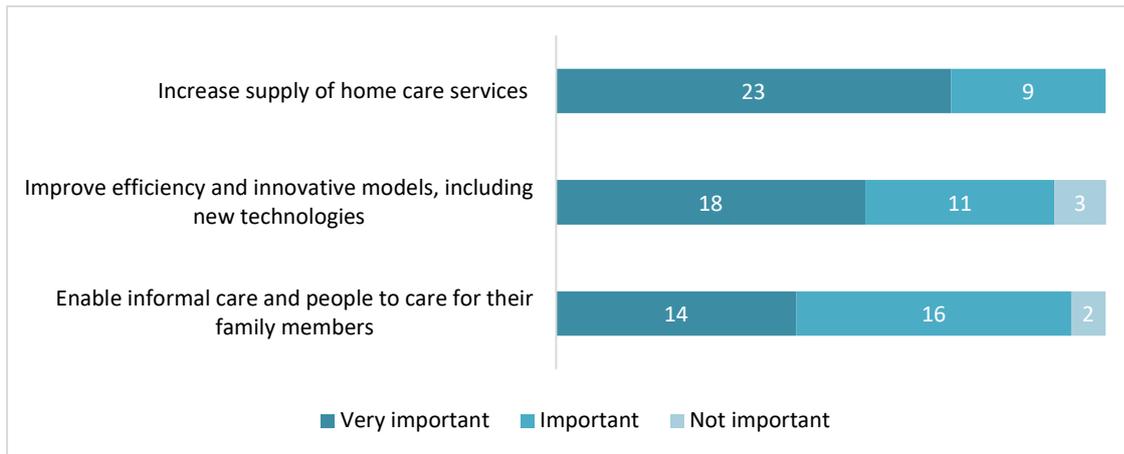
Figure 1: In relation to the home care workforce, what are the risks and opportunities Brexit (n=32)



Most respondents felt growing demand for home care should be met primarily via an increase in the supply and/or availability of services, and their associated workforces, although new models of home care delivery, use of technologies and support for informal care were also considered important areas.

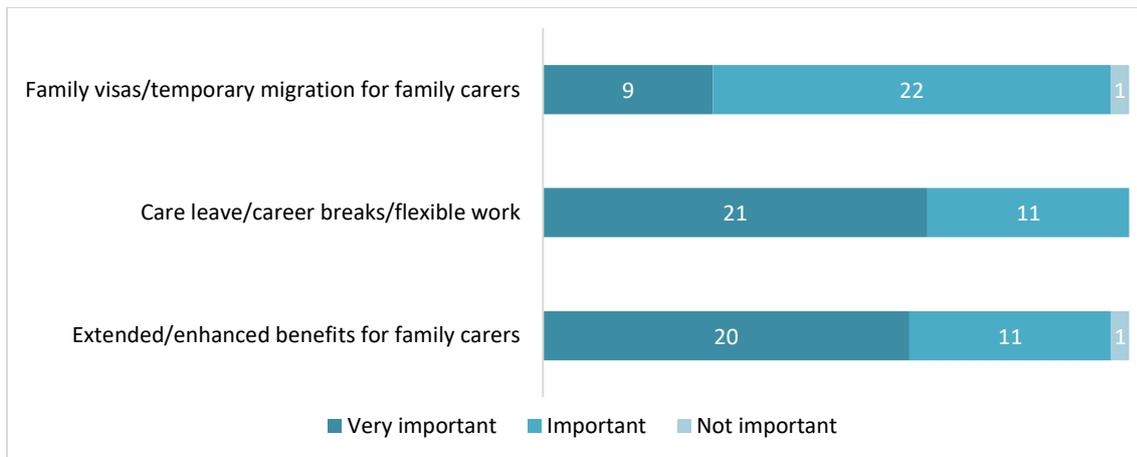
A few respondents highlighted that families/informal carers already contribute a huge amount and expressed concern about any expectations that they should ‘do more’ to care for relatives (Fig. 2). The importance of supporting family carers – either with services or through flexible employment measures – was emphasised.

Figure 2. How should increasing demand for home care in the UK be met? (n=32)



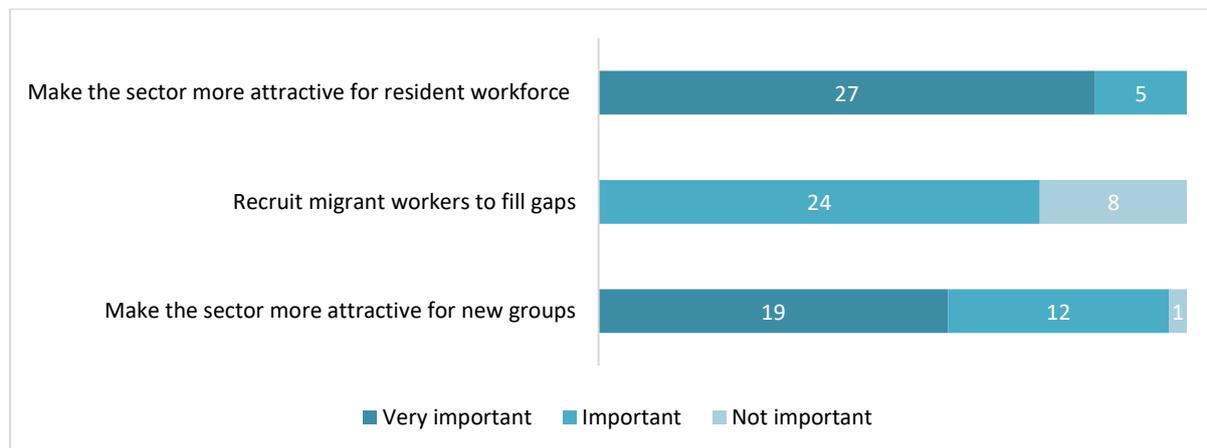
When asked about different options for supporting informal care, financial support and support for working carers emerged as the measures respondents thought most important (Fig. 3). Most respondents also thought allowing family care migration, for example by offering family visas or temporarily allowing family reunion, was important.

Figure 3. How should informal caring arrangements be supported? (n=32)



Improving the attractiveness of the sector to existing and potential workers in the UK emerged from the responses as the most important route to ensure an adequate supply of care workers; attracting new groups to work in home care (such as older workers, young people, etc.) was also highly rated (Fig.4). Recruiting migrants to work in care, although considered important by our respondents, did not emerge as a preferred solution to workforce challenges.

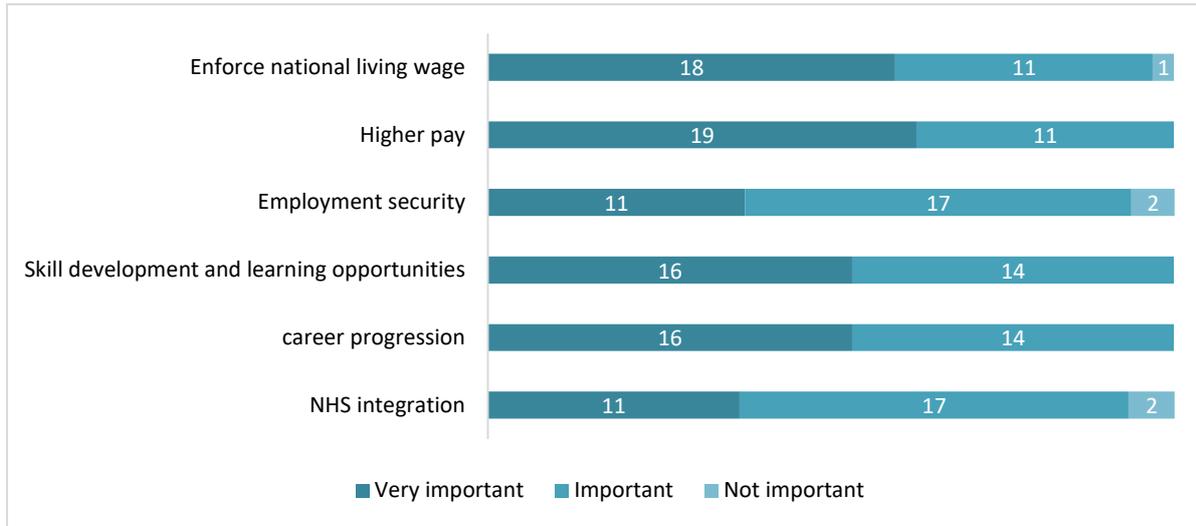
Figure 4. How can the sector ensure adequate workforce supply? (n=32)



Higher pay and opportunities for skills development and career progression were seen as the key measures to attract workers to the sector (Fig.5). The majority of respondents considered these very important. Employment security and integration with the NHS received more qualified support, with just over a third of respondents considering this very important. For most, flexibility (for example, use of zero-hours contracts) was not a problem *per se*; it was even thought to be desirable for some workers. Respondents felt that what matters is how employers use these types of contract. Respondents who highlighted the importance of integration with the NHS raised this issue in the context of the importance of improving career opportunities and raising pay levels.

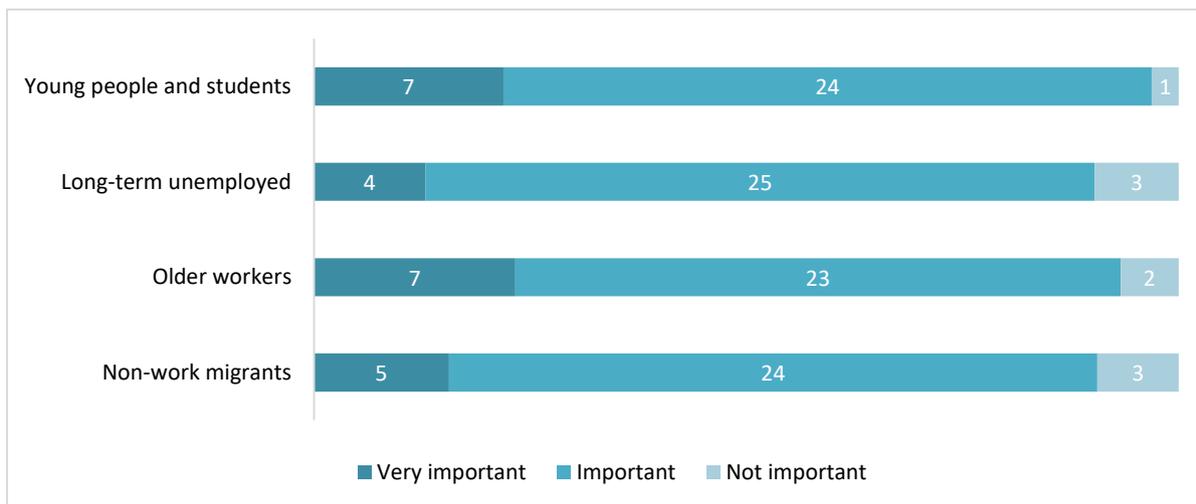
When asked about the likelihood of these aspects of work in home care improving in coming years, respondents indicated that they felt they were unlikely to happen in the short term (5-10 years) but were more likely in the long term (15-25 years ahead).

Figure 5. What would make home care more attractive for workers? (n=30)



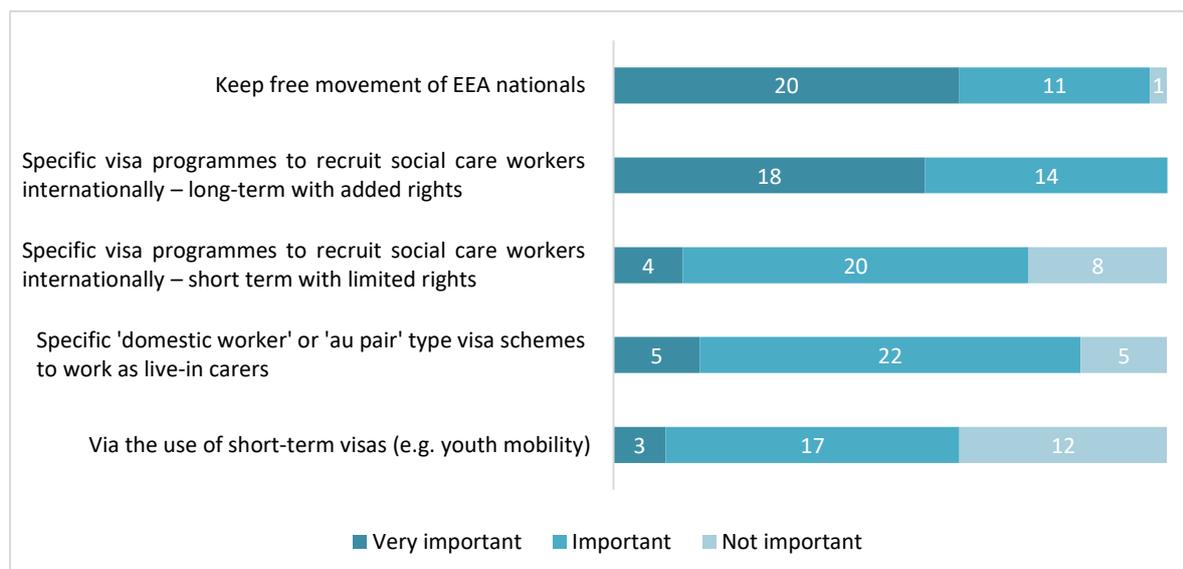
Young people and older workers were the most favoured groups to attract to home care, although attracting long-term unemployed people and non-work migrants was also seen as important (Fig. 6). Respondents felt additional support would be required for this, however, which was seen as unlikely to be available – particularly in the case of non-work migrants (refugees, accompanying family members, foreign students). More than half of respondents (n=17) said it was unlikely people in this group would be attracted to work in the home care sector in the short term.

Figure 6. What groups could be attracted to work in home care? (n=32)



To recruit and employ migrant workers, long-term visas with added rights (e.g. for settlement) were seen as preferable to short-term arrangements, such as sector-specific short-term visas (Fig.7).

Figure 7. How could migrants be recruited to work in home care? (n=32)



Conclusion

Overall, the findings of our first round of the expert (Delphi) survey highlight the social care sector needs urgent reform to ensure it meets the growing demand in a sustainable manner. The latter would include improvements to funding and working conditions, however, there is a realisation that to tackle these core issues a medium to long-term plan is needed. In the meantime, it is important to ensure that migrant workers can continue to make their contribution to this sector, at least in the short to the medium term, to avoid sudden gaps in care or decline in the quality of care provided. How this could be managed within the emerging post-Brexit ‘points-based immigration system’ is highly uncertain. The second and final round of this expert (Delphi) survey seeks to achieve consensus on priority areas for reform and the role of migrant labour within such changes to ensure the social care sector is able to meet the growing demands at the highest possible quality.