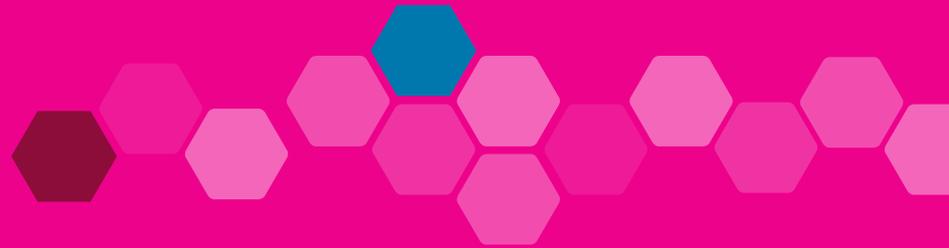




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The Contribution of Non-UK EU Workers in the Social Care Workforce in Scotland



HEALTH AND SOCIAL CARE



The Contribution of Non-UK EU Workers in the Social Care Workforce in Scotland

Research study by Ipsos MORI for the Scottish Government

June 2018

Contents

Executive Summary	3
1. Introduction.....	9
Background to the research	9
Research objectives	11
Structure of the report.....	11
Acknowledgements.....	11
2. Methodology	12
Survey of employers.....	12
Qualitative interviewing.....	17
Interpreting the data	19
3. Size of the non-UK EU workforce	20
Overall size of the non-UK EU workforce	20
Sub-sectors.....	20
Employer type.....	22
Types of Staff.....	23
Region	24
Urban/Rural classification	25
4. Perspectives on recruitment and retention	26
Recruitment	26
Ease of recruiting staff in general	26
Ease of recruiting non-UK EU staff.....	29
Retention	30
Ease of retaining staff in general	30
Ease of retaining non-UK EU staff.....	32
Summary	34
5. Qualitative findings	35
6. Conclusions	51
Appendix A: Republic of Ireland estimates	53

Executive Summary

Background to the research

The potential impact of Brexit on the UK workforce has been a prominent theme of political and economic discourse since the result of the European Union (EU) referendum was first announced in June 2016. To date much of the discussion has focused on the NHS and there has been comparatively less attention paid to the potential impact on the social care sector.

However, scenario-based modelling by the charity Independent Age has suggested that, even in the event of a softer Brexit and the care sector remaining attractive to EU workers, the Government's commitment to reduce levels of net migration could leave the care sector in England with a workforce gap of more than 750,000 people by 2037¹. In light of such evidence, the Scottish Government commissioned Ipsos MORI to conduct research aimed at providing an assessment of the contribution of non-UK EU27 workers in adult social care and children care services in Scotland, and the extent to which it had become easier or more difficult to recruit and retain these workers over the last year. The specific objectives of the research were two-fold:

- 1) to provide robust estimates of the number of non-UK EU workers in specified adult social care and childcare sub-sectors (adult day care, care at home, day care of children, childminding, housing support, and nurse agencies).
- 2) to provide insights into the specific roles and contributions of those workers from the perspective of both employers and non-UK EU workers.

The research comprised two consecutive strands: a mixed-mode survey of 1,572 employers from across the social care sector; and follow up qualitative interviews with 20 employers who took part in the survey, as well as with 10 workers.

The survey ran from 10 January to 16 February 2018. The qualitative fieldwork took place between 19 March and 25 April 2018.

Key findings

The size of the non-UK EU workforce

The estimate of the percentage of people employed within adult social care and childcare that are non-UK EU nationals is 5.6% (including 0.2% who are from the Republic of Ireland). Overall, there are around 176,000 people working within adult social care and childcare. The prevalence estimate of 5.6% equates to 9,830 workers.

The estimate varied by sub-sector, ranging from 0.3% for childminding services to 16.5% (+/- 11.3%) for nurse agencies, with the remaining sub-sectors between

¹ <https://www.independentage.org/policy-and-research/research-reports/brexit-and-future-of-migrants-social-care-workforce>

3.8% and 6.8%. In terms of absolute numbers of staff, the sectors with the most non-UK EU staff were Care Home for Adults (3,150), Housing support/Care at Home (2,850), and Day Care of Children (2,290). The sectors with the fewest were Childminding (20) and Adult Day Care (300).

In both percentage and absolute terms, non-UK EU workers were more prevalent in private sector services (6.4% +/- 1.6%; 5,410 staff), than in voluntary sector services (5.4% +/- 1.8%; 2,730) and public sector services (3.7% +/- 2.1%; 1,510). (Here, as throughout the report, differences between sub-groups have been commented upon only where these are statistically significant; that is, where we can be 95% certain that they have not occurred by chance).

Non-UK EU staff were more prevalent among NMC-registered nurses, auxiliary staff and care staff than managers and other staff. Around 7.3% of NMC registered nurses (+/- 1.2%), 5.9% of care staff (+/- 1.1%) and 5.7% of auxiliary staff (+/- 1.1%) were from non-UK EU countries. The corresponding percentage for managers was lower at 3.7% (+/-0.9%).

In terms of NUTS2 regions, non-UK EU staff account for the highest proportion of care staff in the North East (9.1% +/-4.3%) and the East (7.8% +/- 2%), compared to in the Highlands and Islands (3.8% +/-2.7%) and the South West (3.5% +/-1.3%).

Urban rural threefold classification was calculated using postcode data. The proportion of non-UK EU staff is 4.9% (+/- 4.9%) in remote rural Scotland, 5.6% (+/- 3.5%) in accessible rural Scotland, and 5.7% (+/- 1.4%) in the rest of Scotland.

Perspectives on recruitment and retention

The survey highlighted that the perceived ease of recruiting staff varied significantly depending on the types of post being recruited for. Over half (51.7%) of those who had tried to recruit NMC registered nurses and over two in five (44.2%) of those who had tried to recruit care staff or practitioners said the process had become more difficult in the last year; this compared with the 21.1% who said the same about recruiting auxiliary staff and the 19.4% who did so about recruiting managers.

The results for **auxiliary** posts showed some variation by sub-sector: respondents working in care homes for adults and housing support/care at home services were over two times more likely than those working in nurse agencies to report increased difficulties recruiting for such posts (22.6% and 22.4% versus 8.8% respectively).

Similar sub-sectoral variation was evident in respect of **care staff or practitioner posts**. Respondents working in day care of children and housing support/care at home services were more likely than those working in adult day care services and nurse agencies to report increasing difficulties recruiting for these posts (48.0% and 47.2% versus 30.5% and 24.1% respectively). Respondents working in private sector services were also more likely than average to report increased difficulties recruiting such staff (51.8% versus 28.8% of those working in local authorities and 44.3% of those working in the voluntary sector).

Difficulties recruiting **NMC registered nurses** had been felt most acutely among respondents working in care homes for adults and nurse agencies (66.4% and 52.4% versus 15.7% of those working in day care of children and 29.5% of those working in housing support/care at home services respectively). And, again, respondents working in the private sector were more likely than those working in local authorities and the voluntary sector to report increased difficulties (65.7% versus 13.5% and 15.9% respectively)².

For **managerial posts**, there was no sub-sectoral variation in the results but, here too, respondents working in the private sector, along with those working in the voluntary sector, were more likely than their local authority counterparts to report increased difficulties (27.0% and 18.1% versus 8.5% respectively).

Notwithstanding the varied general picture reported above, the majority of managers reported no change over the last 12 months in the number of applications they had received from *non-UK EU27 nationals*. The proportion reporting no change ranged from 63.0% in the case of applications for care staff or practitioner posts, to 85.2% in the case of managerial posts. Indeed, in respect of care staff and practitioner posts, 15.1% of managers reported having received *more* applications from non-UK EU nationals over the last 12 months.

In terms of retention, over four in five respondents reported that there had been no change over the last 12 months in the ease with which they were able to retain auxiliary staff (81.7%), managers (85.5%) and 'other' types of staff (82.8%). Fewer, though still a majority, said the same in respect of NMC registered nurses (70.3%) and care staff or practitioners (66.6%). Still, it was notable that just over a quarter (25.7%) reported *increased* difficulty retaining care staff or practitioners.

Respondents working in care homes for adults were more likely than average to have experienced increased difficulties retaining NMC registered nurses over the last year (24.2% versus the average of 18.0%), and those in the private sector were more likely than those in other sectors to report increased difficulties retaining all types of staff.

With respect to the retention of non-UK EU staff specifically, the results were again more positive than the general picture. Around eight in ten respondents reported no change in the ease with which they had been able to retain non-UK EU registered nurses (82.1%) and care staff and practitioners (84.1%). Around nine in ten said the same about non-UK EU auxiliary staff (88.3%) and managerial staff (91.4%). The proportion reporting that it had become more difficult to retain non-UK EU staff was consistently below the 10% mark, ranging from just 2.5% in respect of managers to 8.2% for care staff or practitioners.

Qualitative findings

² While all those responding to this question employed NMC registered nurses, it should be noted that 96% of NMC registered nurses working in the social care services sector are estimated to be employed in Care Homes for Adults and Nurse Agencies; and 91% are estimated to be employed in the private sector (Scottish Social Services Council (2017), Scottish Social Services Sector: Report on 2016 Workforce Data, <https://data.sssc.uk.com/images/WDR/WDR2016.pdf>)

Although most care service managers who took part in the survey had not experienced increased difficulty recruiting and retaining staff in the last 12 months, the qualitative research confirmed that staffing was nonetheless a significant challenge for the sector.

Managers discussed recruitment challenges in terms of both the numbers of applications they received for posts and the quality of candidates. On numbers, and consistent with the quantitative findings, there was particular mention of a lack of applicants for nursing posts. In terms of quality, participants commonly said that applicants often had no suitable qualifications and, indeed, appeared to see care work as an easy option.

In terms of other factors participants identified as having contributed to recruitment challenges in the sector, low pay was commonly mentioned. In contrast, the UK's decision to leave the EU was cited spontaneously by only a small number of participants. These were all managers of services, the specific circumstances of which meant they had a long tradition of employing, and/or were unusually reliant on, non-UK EU staff.

Consistent with the survey findings, few managers who took part in the qualitative research reported problems with staff turnover at their service. That said they were sometimes quite qualified in their comments, saying, for example, that there was "room for improvement" or that their situation was "not as bad as some".

Further, they often described having two broad 'streams' of staff: an older grouping that had been with the service for a long time (usually between 10 and 20 years) and a younger grouping, members of which tended to stay for shorter periods, whether because they proved not to be suitable for their roles, because they found the work too challenging or because they saw it purely as a 'stop gap'. There was a sense from some of the interviewees that the number of staff not up to the job, or finding the work too challenging, was increasing somewhat.

As with recruitment, pay was commonly identified as another factor contributing to staff turnover, with managers and workers recounting occasions when members of their team had gone to work for higher paying providers – in particular, a few private sector managers and workers said that some of their staff/colleagues had gone to work for local authorities.

Brexit was not mentioned spontaneously as a factor currently impacting on retention.

Generally, managers felt that difficulties in recruiting or retaining staff were having a negative impact on their services, compromising the provision of care and putting a strain on their time and resources. Most managers that had encountered such difficulties had taken some steps to try to address them. The single most common such step was the use of agency staff but this was not seen as a viable long-term solution due to the greater costs associated with employing agency staff. In terms of longer-term steps managers had taken, the most common was to have enhanced or increased their service's training offer.

Steps managers had taken to try to limit staff turnover in their services included enhancing the induction process to include monthly one-to-one meetings with staff members to help them settle in; and improving pay and other conditions. They felt these strategies had been largely effective.

While only a small number of the qualitative participants spontaneously identified Brexit as a factor currently impacting on recruitment in the sector, more were concerned that it may impact on recruitment and retention in the future. As might be expected, managers whose services had a relatively high ratio of EU to local staff were the most likely to express this concern.

There was a sense in which some managers felt the contribution of their EU workers was greater than their basic numerical representation might suggest. Specifically, managers spoke of these employees' strong "work ethic", exemplified through a willingness to 'go the extra mile' to get the job done and to continually learn and develop. Relatedly, managers sometimes said that non-UK EU workers appeared to be motivated by an "ethos" of care, manifest in a high level of commitment to their work. Less commonly, there was reference to non-UK EU workers being more highly qualified and/or experienced than local applicants. This perspective was advanced mainly by managers of childcare services, who described how their EU workers often had specialist degrees in childcare or in teaching.

All of the non-UK EU workers interviewed were keen to remain in Scotland for the foreseeable future. All had begun considering applying for UK citizenship, though there was evident confusion about the temporal eligibility criteria. Awareness of 'settled status' as an alternative to citizenship was low.

Both managers and workers displayed at best a limited awareness of the UK Government's and European Commission's current position with respect to the future status of EU workers in the UK. Further, there was repeated reference to a lack of information on the subject that might enable services and workers to plan ahead. In the perceived absence of information and planning from government, none of the managers interviewed had formally taken steps to prepare for Brexit.

Both managers and staff were asked what they thought could be done to attract more people to work in the social care sector. In response they commonly suggested emphasising: the meaningful and rewarding nature of the work, and the impact it can have on people's lives; the opportunity to learn new skills; and the flexible hours available.

In terms of other measures or changes they thought might encourage more people to work in the sector, better pay was frequently suggested, along with improvements to the overall benefits package, and efforts to improve public perceptions of the sector.

Conclusions

The estimate of the percentage of non-UK nationals employed within adult social care and childcare services in Scotland emerging from this study is in line with that recorded in some previous research, at 5.6%. This aggregate result conceals some

notable sub-sectoral variation, however; in particular, the higher prevalence of non-UK EU nationals in nurse agencies (16.5%) (as well as in auxiliary and care roles).

These results take on added significance in the context of the survey finding that half of services that had tried to recruit NMC registered nurses over the last 12 months, and around two in five that had tried to recruit care staff or practitioners, had found this more difficult than previously.

While the survey suggested that retention was somewhat less of an issue than recruitment in the sector, it was nonetheless notable that 25.7% of respondents reported increased difficulty retaining care staff or practitioners – another group among whom non-UK EU nationals are relatively prevalent. As in respect of recruitment, the problem appeared most acute in the private sector.

In respect of the recruitment and retention of non-UK EU staff specifically, the survey findings were somewhat more positive than those for workers in general. And while respondents did report non-UK EU workers having left their service in the last 12 months, Brexit-related concerns appeared to have been a factor in only a small number of these cases.

The qualitative research reinforced the survey findings that Brexit appeared to have had a limited impact on the sector to date. Nonetheless it did point to concerns that Brexit could prove more of a challenge in the future, with both managers and workers unsure as to what had been decided thus far. These findings suggest a clear need for both audiences to be provided with more information about the UK Government and European Commission's agreement on the matter.

Beyond the Brexit issue, the qualitative research highlighted other ways in which the sector might best be supported to meet current, and potential future, recruitment- and retention-related challenges. Asked what they thought could be done to attract more workers to the sector, managers and employees suggested campaign work to raise the profile and reputation of the care sector, with messaging focusing in particular on: the importance and rewarding nature of the work; the provision of training and the opportunity to learn new skills; and the flexible hours available in many types of service. They also called for higher pay for workers at all levels, but particularly 'frontline' staff.

In addition to these suggestions made by participants themselves, the qualitative research pointed to an evident need for more guidance for managers on effective recruitment strategies to ensure higher quality applicants and thereby reduce the burden of the process on services; as well as greater sharing of best practice in respect of training, development, and other strategies to promote retention.

1. Introduction

Background to the research

The United Kingdom European Union referendum (or the ‘Brexit’ referendum as it is more commonly known) took place on 23 June 2016. The referendum saw a simple majority of 51.9% voting in favour of leaving the EU. On 29 March 2017 the government initiated the official EU withdrawal process, putting the UK on a course to leave the EU by 30 March 2019.

In the interim, the potential impact of Brexit on the UK workforce has been a prominent theme of political and economic discourse. To date the discussion has focused mainly on those sectors of the economy that are particularly dependent on EU workers, with the NHS being the most obvious example. In its submission to a Health Select Committee Inquiry in late 2016, the Nuffield Trust reported that the UK had been identified in comparative studies over many years as having an “exceptionally high reliance” compared to other developed countries on importing foreign staff in order to meet its needs, with 11 per cent of doctors currently registered with the GMC having qualified within the EEA, and 4 per cent of nurses registered with the NMC having originally trained in the EU.³

There has been comparatively less focus on the potential impact of Brexit on the social care sector. Yet this sector may be similarly dependent on migrants from the EU to meet its staffing need. Indeed, a previous estimate suggests that, across the UK, around 6% of staff in the sector are EU nationals⁴. Similarly, a 2017 survey undertaken by Scottish Care (the membership organisation for independent sector social care services) indicated that around 6% of care home workers (and 8% of nurses in care homes) employed by their members were EU27 nationals⁵. Anecdotally, Scottish Care have indicated that in care at home and housing support services, around 8% of workers are EU27 nationals⁶.

These figures may underestimate to some extent the current contribution of EU nationals to the sector; both because they exclude workers who have been in the UK long-term and acquired British citizenship, and because they are time bound – trend data suggest that UK reliance on EU workers has been rapidly increasing over recent years, at least in part owing to restrictions on migration from outside the EU. The Nuffield Trust paper cited above reported that, “whereas Asian and African countries were the most significant sources of migrant labour around the turn of the millennium, since 2011 Poland and Romania have become the most common countries of origin.”

Thus, any changes to residence rights of EU nationals in light of Brexit could have a significant impact on the sustainability of the social care sector, and at a time when

3 <https://www.nuffieldtrust.org.uk/files/2017-05/brexit-submission-to-health-select-committee-formatted-final.pdf>

4 Ibid

5 Scottish Care (2017), Care Home Workforce Data Report: <http://www.scottishcare.org/wp-content/uploads/2017/07/Care-Home-Workforce-Data-2017.pdf>

6 These data do not appear to have been published so should be treated with caution

it already faces recruitment challenges. Research conducted by Scottish Care in spring 2018 highlighted inter alia a 28% vacancy rate for nurses in social care⁷.

Feeding into these workforce challenges is of course accelerating demand for care services as a consequence of demographic changes and, in particular, the ageing population, alongside funding constraints. Current projections suggest that Scotland's population will rise to 5.78 million by 2037, and that the number of people aged 65 and over will increase by 59%, from 0.93 million to 1.47 million⁸. A likely corollary of this shift is a growth in the proportion of people with multiple long-term conditions and increasingly complex care needs. Indeed, as the Scottish Government has recently highlighted, the growing prevalence of dementia alone presents a significant challenge in terms of the volume and type of health and social care that is required for the future. The Accounts Commission has recently projected that the number of people in Scotland needing home care will increase by 33% by 2030 and the number of long stay care home residents will increase by 35%⁹.

In December 2017, in negotiations on the UK's withdrawal from the EU, the UK Government reached an agreement with the European Union on the rights of EU citizens living in the UK. Under this agreement (which is contingent on a final deal being agreed by the UK and the EU by October 2018), people who, by 31 December 2020, have been continuously and lawfully living in the UK for five years will be able to apply to stay indefinitely by getting 'settled status'. People who arrive by 31 December 2020, but won't have been living here lawfully for five years when the UK leaves the EU, will be able to apply to stay until they have reached the 5-year threshold; at which point they too can apply for settled status.

Whether or not the agreement will provide reassurance to the non-UK EU nationals concerned remains to be seen. In the interim, the Nursing and Midwifery Council (NMC) has published figures showing a significant (29%) increase in the number of EU nurses and midwives leaving the sector. The NMC surveyed 3,496 people who left between June and November 2017 to find out their reasons for leaving. EU nurses and midwives cited leaving the UK and Brexit as their top reasons, while UK registrants cited retirement, staffing levels and changes to personal circumstances.¹⁰ In terms of the social care sector, scenario-based modelling by the charity Independent Age has suggested that, even in the event of a softer Brexit and the sector remaining attractive to EU workers, the Government's commitment to reduce levels of net migration could leave the care sector in England with a workforce gap of more than 750,000 people by 2037¹¹.

7 <http://www.scottishcare.org/scottish-care-news/new-research-on-care-home-workforce-highlights-critical-recruitment-retention-and-sustainability-concerns/>

8 Scottish Government (2016) A National Clinical Strategy for Scotland: <http://www.gov.scot/Publications/2016/02/8699>

9 Accounts Commission (2016) Changing Models of Health and Social Care: http://www.audit-scotland.gov.uk/uploads/docs/report/2016/nr_160310_changing_models_care.pdf

10 <https://www.nmc.org.uk/news/news-and-updates/new-nmc-figures-continue-to-highlight-major-concern-as-more-eu-nurses-leave-the-uk/>

11 <https://www.independentage.org/policy-and-research/research-reports/brexit-and-future-of-migrants-social-care-workforce>

In light of such evidence and potential associated challenges, the Scottish Government commissioned Ipsos MORI to conduct research aimed at providing an assessment of the contribution of non-UK EU27 workers in the social care sector in Scotland, and the extent to which it had become easier or more difficult to recruit and retain these workers over the course of the last year.

Research objectives

The specific objectives of the research were two-fold; namely, to:

- 3) provide robust estimates of the number of non-UK EU workers in specified care sub-sectors (adult day care, care at home, day care of children, childminding, housing support, and nurse agencies).
- 4) provide insights into the specific roles and contributions of those workers from the perspective of both employers and non-UK EU workers.

Structure of the report

The next chapter of the report sets out the methodology adopted for the research, and provides guidance on interpreting the data. Chapter 3 addresses the first objective, above, providing robust estimates of the number of non-EU workers in specified care sub-sectors. Chapters 4 and 5 address the second objective, drawing on the quantitative and qualitative research respectively. Chapter 6 sets out key conclusions emerging from the research.

Acknowledgements

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2. Methodology

The research comprised two consecutive strands:

- 1) a mixed-mode survey of employers from across the social care sector
- 2) follow up qualitative interviews among a selection of employers who took part in the survey, as well as a small number of workers

Survey of employers

As described above, the over-arching objective of the survey was to provide robust information on the number of non-UK EU workers in specific social care sub-sectors (adult day care, care at home, day care of children, childminding, housing support, and nurse agencies).

Sampling

The Scottish Government provided Ipsos MORI with details of services from the Care Inspectorate database of providers. The sample frame included the basic public-domain details of the in-scope service providers such as email addresses and telephone numbers. It also included information on employer type (public, private, voluntary) and details on registered capacity and number of staff, all of which were used for setting quotas for the telephone fieldwork. Services in the sample frame were categorised to match the categories used in the Scottish Social Services Council workforce data 2015¹² in order to set survey targets (Table 2.1).

Table 2.1: Typology of specified care sectors

Sub-sector	Care-service
Adult Day Care	Support service subtype other than care at home
Care Home for Adults	Care Home for Adults
Childminding	Childminding
Day Care of Children	Childcare agency, Day Care of Children Service
Housing support/Care at home	Adult Placement Service, Housing Support Service, Support Service subtype (care at home)
Nurse Agency	Nurse agency

¹² The 2015 data was the latest available at the time the sampling strategy was designed (The 2015 report is available from: <http://data.sssc.uk.com/wdr>). More recent (2016) data was used at the analysis stage to produce the estimates of the total number of non-UK EU staff working in the social care sector, as described below.

Further cleaning and editing of the sample information was carried out, with duplicate entries (as identified through email addresses and phone numbers) removed. Survey recipients were invited to respond in relation to a specific named service only.

The following variables were created:

- **Employer type** (public, private, voluntary).
- **Nuts2 region** (Eastern Scotland, South Western Scotland, North Eastern Scotland, Highlands and Islands). This was derived based on local authority.
- **Threefold urban/rural classification** (Urban, Accessible Rural, Remote Rural). This was matched into the data using postcodes of services. In some cases, there was missing information on postcodes which meant not all services could be classified and there were limitations on the associated analyses possible.

The sampling strategy balanced the need for precision across all sectors with the ability to analyse results by sub-sector and subgroup variables such as employer type and size of employer. Targets were set based on trying to ensure confidence intervals of no more than +/-3% at the sub-sector level for a finding of 10% (with a 95% confidence level). Population figures were taken from the latest available Social Services Workforce Data Report 2015¹³. Given the small number of organisations in two sub-sectors – Nurse Agencies and Adult Day Care – it was recognised that this would equate to a very high response rate.

Table 2.2: Population information by sub-sector and ideal sampling targets

Sub-sector	Staff (SSSC 2015)	Services (SSSC 2015)	Average staff per service	Ideal number of interviews
Adult Day Care	8,080	492	15.8	218
Care Homes for Adults	53,980	1,149	46.7	290
Childminding	5,570	5,509	1.0	359
Day Care of Children	33,460	3,710	9.0	348
Housing Support/ Care at Home	69,690	2,041	33.8	322
Nurse Agency	3,120	71	33.8	50
Total	173,900	12,972	13.2	1,588

¹³ Scottish Social Services Council (2016), Scottish Social Services Sector: Report on 2015 Workforce Data, <http://data.sssc.uk.com/wdr>

The survey used a mixed mode approach to maximise the number of returns and the precision of the estimates among each sub-sector. Organisations were first invited to participate online, with a telephone survey following afterwards.

The online survey was sent to 50% of all services. Reflecting the sampling approach, a higher proportion of services were sampled in the sub-sectors with the most challenging response rate targets, namely Adult Day Care, Care Homes for Adults, and Nurse Agency. All services with available contact details were included in the issued sample for these sub-sectors in order to maximise the number of surveys returned. The survey was issued to comparatively less of the total available sample for the remaining sectors e.g. 26% of childminders were issued the survey.

The scripts for the online and telephone survey were developed by Ipsos MORI's scripting team in IBM Dimensions. The telephone fieldwork was run from Ipsos MORI's Edinburgh Telephone Centre, using Computer Assisted Telephone Interviewing (CATI). Fieldwork was targeted to try to achieve the target number of interviews by sub-sector overall and two additional quotas were set to help ensure the achieved sample was representative.

- average number of staff per organisation (above and below the median values) for all sub-sectors bar childminding
- employer type (public, private and voluntary) for the three largest sub-sectors, namely Housing Support, Day Care of Children, and Care Homes

In all, the survey was open for a period of just over five weeks, from 10 January to 16 February 2018. An e-mail address and phone number for the survey was in operation throughout, so that the research team could answer queries and resolve any technical problems.

Questionnaire design

The survey questionnaire was developed by Ipsos MORI in consultation with the Scottish Government. It was deliberately kept as short as possible to help encourage participation among the target audience and thus help ensure the robustness of the results.

The core of the questionnaire comprised a series of pre-coded items to collect the total number of staff currently working in the services sampled – including, separately, the numbers of auxiliary staff, care staff/practitioners, NMC registered nurses and managers – and the proportions in each case who were non-UK EU nationals.

In addition, the questionnaire included a small number of questions to collect information on:

- the extent to which employers had found it easier or more difficult to recruit and retain workers over the preceding 12 months

- the extent to which employers had found it easier or more difficult to recruit and retain *non-UK EU workers* specifically over the preceding 12 months
- whether any non-UK EU workers had left the service in the last 12 months and the reasons for this

The questionnaire was piloted among a small sample of employers from across the care sector to ensure it was clear and easily understood. In light of the pilot findings, minor revisions were made to the questionnaire in advance of the main stage fieldwork commencing.

Response rate and achieved sample profile

The survey achieved 1,572¹⁴ responses from services, covering 39,999 staff. Table 2.3 shows the profile of the issued over the achieved sample. The population figures are based on the 2016 SSSC data – the latest available at the time of analysis.

Table 2.3: Issued versus achieved sample profile

	Population	Issued sample		Achieved sample (all)		Response rate
	N	N	% of issued sample	Number of responses	% of overall response	%
Sub-sector						
Adult Day Care	492	333	5%	117	7%	35%
Care Home for Adults	1,149	1,004	16%	305	19%	30%
Childminding	5,509	2,242	35%	315	20%	14%
Day Care of Children	3,710	1,472	23%	360	23%	24%
Housing Support/Care at Home	2,041	1,276	20%	449	29%	35%
Nurse Agency	71	60	1%	26	2%	43%
Employer type						
Public	2,430	1,203	19%	278	18%	23%
Private	8,032	3,900	61%	822	52%	21%
Voluntary	2,510	1,284	20%	472	30%	37%
NUTS2 region						
North East	1,262	663	10%	151	10%	23%
Eastern	5,349	2,449	38%	628	40%	26%
South West	4,840	2,491	39%	628	40%	25%
Highlands and Islands	1,517	784	12%	165	10%	21%
Urban-rural threefold classification						
Rest of Scotland	10,618	3,379	53%	1,010	64%	30%
Accessible Rural	1,525	419	7%	147	9%	35%
Remote Rural	825	256	4%	69	4%	27%
Missing postcode	N/A	2333	37%	346	22%	15%
Total	12,972	6,387	100%	1,572	100%	25%

¹⁴ 1,574 surveys were returned however two were deleted, one because the respondent hadn't answered most questions and the other because the service was located outside of Scotland

The achieved sample was close to the issued sample for all of the key variables covered. The proportion of childminders covered within the survey is smaller due to the disproportionate sampling of sectors and services with larger number of employees (childminders have an average staff size of 1).

Data cleaning and analysis

Data preparation

Given the number of logic checks that were incorporated into the online and telephone scripts, the data cleaning required was minimal. A small number of cases were dropped from the final dataset due to the high proportion of missing data. Outlier values were manually checked and key analysis variables were derived.

Total staff for each service was derived from the counts given at the breakdown of staff within each category (auxiliary, care staff, nurses, managers, other staff). This was checked against the total staff figure given within the survey. Similarly, the total number of non-UK EU staff was calculated in the same way. Weights were created to correct for disproportionate sampling by sector during the analysis.

Analysis

The analysis approach was straightforward. The percentage of staff who were non-UK EU staff was calculated from the survey data. With the exception of staff from nurse agencies, the population figures from the Social Services Council Workforce Data Report 2016¹⁵ were used to create the estimate of the total number of staff.

The differing approach for nurse agencies was due to a discrepancy between the two datasets, with the 28 nurse agency services surveyed reporting a total headcount of 2,718 – higher than the 2,400 headcount reported for 71 services in the SSSC data. The discrepancy reflects differences in the questions asked in the two studies. In the survey, respondents were asked to include all workers, whereas the Care Inspectorate analysis collects data on nurses only¹⁶, as registration is only with respect to agency nurses. To address this, the average number of staff in the nurse agencies surveyed was multiplied by the number of services in the SSSC data to produce the total number of nurse agency staff.

The estimates presented in this report include lower and upper confidence intervals.

¹⁵ Scottish Social Services Council (2017), Scottish Social Services Sector: Report on 2016 Workforce Data, <http://data.sssc.uk.com/images/WDR/WDR2016.pdf>

¹⁶ It is, however apparent that some agencies do provide the Care Inspectorate with returns for a variable number of non-nurses.

Qualitative interviewing

The objective of the qualitative research was to complement the survey findings with insights into the role and contribution of non-UK EU workers in the social care sector. More specifically, the work sought to provide a deeper understanding of employers' and workers' circumstances, experiences and perspectives, including any specific challenges they were facing, or concerns they had, in light of the UK's decision to leave the EU.

Sampling and recruitment

Prospective employees for interview were identified from among a pool who had taken part in the survey and agreed at that stage to be recontacted for follow up research. Further, they were purposively selected based on their working in sub-sectors that the survey (and wider research) had indicated were particularly reliant on non-UK EU workers; namely, nurse agencies, care homes for adults and children's day care services.

A total of 20 employers were interviewed from across these sub-sectors; 2 from nurse agencies, 10 from care homes and 8 from children's day care services. The achieved sample also represented a mixture of service types (local authority, third sector and private sector), size and locations, as set out in table 2.4.

Table 2.4: Profile of achieved qualitative sample of employers

	Nurse agency	Care home	Children's day care	Total
Local authority	0	1	1	2
Private Sector	2	7	6	15
Third sector	0	2	1	3
<hr/>				
1-10 employees	0	0	2	2
11-50 employees	0	3	6	9
51+ employees	2	7	0	9
<hr/>				
East	0	3	4	7
South West	0	2	1	3
Highlands and Islands	2	1	0	3
North East	0	4	3	7

The employers interviewed were invited to identify a non-UK EU worker from among their staff who might be willing to participate in a similar interview. In the event, a total of 10 workers were interviewed, with the achieved sample again representing a mixture of sub-sectors, service types, locations and sizes.

All of the qualitative interviews were conducted by telephone with a view to minimising any burden on participants. The workers were offered a £15 high street voucher to encourage their participation and as a 'thank you' for their time. Fieldwork took place between 19 March and 25 April 2018.

Analysis

The qualitative interviews were digitally recorded with participants' permission and in most cases transcribed for analysis purposes. The transcripts (along with raw interview notes) were then systematically analysed to identify the substantive themes which emerged in relation to each question in the discussion guide, along with key points and illustrative verbatim comments. This ensured that the analysis of the data was rigorous, balanced and accurate, and that key messages or concepts were brought out. It was also flexible enough to allow links and connections across different themes or sub-themes to be made, and for moments of interpretive insight and inspiration to be recorded.

Interpreting the data

Survey data

Survey findings represent the views of a sample of the population concerned, and not the entire population, so they are subject to sampling tolerances, meaning that not all differences will be statistically significant. Throughout the report, differences between sub-groups are commented upon only where these are statistically significant, i.e. where we can be 95% certain that they have not occurred by chance.

Where percentages do not sum to 100%, this may be due to computer rounding, the exclusion of 'don't know' categories or multiple answers. Throughout the report, an asterisk (*) denotes any value of less than half a percent and a dash (-) denotes zero.

Qualitative data

Unlike survey research, qualitative social research does not aim to produce a quantifiable or generalisable summary of population attitudes, but to identify and explore the different issues and themes relating to the subject being researched. The assumption is that issues and themes affecting participants are a reflection of issues and themes in the wider population concerned. Although the extent to which they apply to the wider population, or specific sub-groups, cannot be quantified, the value of qualitative research is in identifying the range of different issues involved and the way in which these impact on people.

3. Size of the non-UK EU workforce

This chapter provides estimates for the size of the non-UK EU workforce. It draws on the survey data, along with population figures from Scottish Social Services Council (SSSC) for 2016.

Overall size of the non-UK EU workforce

The estimate of the percentage of people employed within adult social care and childcare that are non-UK EU nationals is 5.6%. Overall, there are around 176,000 people working within adult social care and childcare, so the prevalence estimate of 5.6% equates to 9,830 workers.¹⁷

All estimates based on survey responses are subject to sampling error. Confidence intervals indicate the likely level of precision. The lower confidence interval (LCI) of the main estimate is 4.5% and upper confidence interval (UCI) is 6.6%. This equates to between 7,950 and 11,700 workers.

A small proportion (0.2%) of staff were from the Republic of Ireland. Appendix A provides a breakdown of the estimates of the number of workers from the Republic of Ireland.

Sub-sectors

The prevalence of non-UK EU staff within adult social care and childcare differed by sub-sector, ranging from 0.3% for childminding services to 16.5% (+/- 11.3%) for nurse agencies, with the remaining sub-sectors between 3.8% and 6.8%.¹⁸ (Table 3.1) Among all adult social care sub-sectors (Adult Day Care, Care Homes for Adults, Housing Support/Care at Home and Nurse Agencies) the percentage of non-UK EU staff was 5.5% (+/-1.3%). Among all sub-sectors relating to childcare (Childminding and Day Care of Children) the percentage was 5.9% (+/-1.7%).

In terms of absolute numbers of staff, the sectors with the most non-UK EU staff were Care Home for Adults (3,150), Housing support/Care at Home (2,850), and Day Care of Children (2,290). The sectors with the fewest were Childminding (20) and Adult Day Care (300).

¹⁷ Those working in adult social care and childcare services account for 176,000 of the 200,000 staff working in the social care sector as a whole. This equates to approximately 90% of the workforce. We can use the survey findings to estimate the proportion of workers who are non-UK EU nationals for the whole of the social services sector if we accept the assumption that the non-surveyed sectors are similar (with regard to prevalence of non-UK EU staff) to the sectors surveyed. For example, one approach would be to impute estimates based on the public/private split of these sectors. The public sector makes up 73% of the people in the two non-surveyed parts of the social care sector while the private sector makes up just 8.4%. If we assume that the percentage of non-UK EU migrants is the same across the employer types in these other two parts as in adult social care and childcare, then the estimate of the percentage of non-UK EU migrants across all parts of social services would be 5.3%.

¹⁸ The higher margin of error is a result of the smaller number of nurse agencies (See Table 2.3). This is the reason why both the sampling and fieldwork approach attempted to maximise the number of nurse agencies who took part in the survey.

Table 3.1: Estimates of proportion of non-UK EU staff by sub-sector¹⁹

	Adult Day Care	Care Home for Adults	Childminding	Day Care of Children	Housing support/ Care at home	Nurse Agency	Total	All adult social care	All child-care
Population figures									
Total services	492	1149	5,509	3,710	2,041	71	12,972	3,753	9,219
Average staff per service	15.8	46.7	1.0	9.0	33.8	104.5	13.6	36.7	4.2
Total staff	7,780	53,680	5,510	33,430	68,970	7,420	176,790	137,850	38,940
Survey figures									
Total services (unweighted)	117	305	315	360	449	26	1,572	897	675
Total staff (unweighted)	2,304	12,511	335	4,278	17,853	2,718	39,999	35,386	4,613
Average staff per service	19.7	41.0	1.1	11.9	39.8	104.5	25.4	39.4	6.8
Estimates									
% of staff from non-UK EU	3.8%	5.9%	0.3%	6.8%	4.1%	16.5%	5.6%	5.5%	5.9%
Total staff from non-UK EU	300	3,150	20	2,290	2,850	1,230	9,830	7,520	2,310
Confidence intervals									
Lower %	0.8%	3.6%	0.0%	4.4%	2.5%	5.2%	4.5%	4.2%	4.2%
Upper %	6.9%	8.1%	0.9%	9.3%	5.8%	27.9%	6.6%	6.8%	7.6%
Lower estimate	60	1,940	0	1,460	1,730	380	7,950	5,730	1,640
Upper estimate	530	4,360	50	3,120	3,970	2,070	11,700	9,310	2,970

¹⁹ Population headcount data supplied by Scottish Social Services Council have been rounded to 10 using statistical rounding, and therefore the total figure may differ from the sum of components.

Employer type

Table 3.2 presents the estimates by employer type. In both percentage and absolute terms, non-UK EU workers were more prevalent in private sector services (6.4% +/- 1.6%; 5,410 staff), than in voluntary sector services (5.4% +/- 1.8%; 2,730) and public sector services (3.7% +/- 2.1%; 1,510). (Here, as throughout the report, differences between sub-groups have been commented upon only where these are statistically significant; that is, where we can be 95% certain that they have not occurred by chance)

Table 3.2: Estimates of proportion of non-UK EU staff by employer type²⁰

	Public	Private	Voluntary	Total
Population figures				
Total services	2,430	8,032	2,510	12,972
Average staff per service	16.9	10.6	20.1	13.6
Total staff	41,030	85,240	50,520	176,790
Survey figures				
Total services (unweighted)	278	822	472	1,572
Total staff (unweighted)	7,325	19,900	12,774	39,999
Average staff per service	22.6	11.6	23.6	15.4
Estimates				
% of staff from non-UK EU	3.7%	6.4%	5.4%	5.6%
Total staff from non-UK EU	1,510	5,410	2,730	9,830
Confidence intervals				
Lower %	1.6%	4.8%	3.6%	4.5%
Upper %	5.8%	7.9%	7.2%	6.6%
Lower estimate	650	4,070	1,800	7,950
Upper estimate	2,360	6,760	3,660	11,700

²⁰ Population headcount data supplied by Scottish Social Services Council have been rounded to 10 using statistical rounding. The estimated number of non-UK EU staff by sub-group has been calculated using the prevalence figure from the survey results and the population figures from the SSSC. The total figure may differ from the sum of the sub-sectors.

Types of Staff

Non-UK EU staff were more prevalent among NMC registered nurses, auxiliary staff and care staff/practitioners than managers and other staff.²¹ Around 7.3% of NMC registered nurses (+/- 1.2%), 5.9% of care staff/practitioners (+/- 1.1%) and 5.7% of auxiliary staff (+/- 1.1%) were from non-UK EU countries. The corresponding percentage for managers was lower at 3.7% (+/-0.9%). This equates to 8,010 Care Staff, 1,110 Auxiliary Staff, 470 NMC registered nurses and 300 Managers (Table 3.3).

Table 3.3: Estimates of proportion of non-UK EU staff by staff categories²²

	Auxiliary	NMC Registered nurses ²³	Care staff/ practitioners (excl. nurses)	Managers	Others undefined	Total
Population figures						
Total staff	19,470	6,500	136,920	8,080	5,840	176,790
Survey figures						
Total staff (unweighted)	4,444	1,809	30,261	2,411	1,074	39,999
Estimates						
% of staff from non-UK EU	5.7%	7.3%	5.9%	3.7%	1.6%	5.6%
Total staff from non-UK EU	1,110	470	8,010	300	100	9,830
Confidence intervals						
Lower %	4.6%	6.1%	4.8%	2.8%	1.0%	4.5%
Upper %	6.8%	8.5%	6.9%	4.6%	2.2%	6.6%
Lower estimate	900	390	6,530	230	60	7,950
Upper estimate	1,320	550	9,500	380	130	11,700

²¹ Auxiliary staff include administrative, support and ancillary staff (catering, domestic, gardening). Care staff include those providing direct care and support, supervisors of these staff and those responsible for the development and implementation of care plans and assessment of care needs. Managers include those with responsibility for the management of care and service provision in one or more discrete service delivery areas and those responsible for overall management of care and service provision.

²² Population headcount data supplied by Scottish Social Services Council have been rounded to 10 using statistical rounding. The estimated number of non-UK EU staff by sub-group has been calculated using the prevalence figure from the survey results and the population figures from the SSSC. The total figure may differ from the sum of the sub-sectors.

²³ NMC Registered nurses identified by SSSC using Job Function categories C4E (Registered Nurses) and C5G (Senior/Charge Nurses).

Region

In terms of NUTS2 regions, non-UK EU staff account for the highest proportion of care staff in the North East (9.1% +/-4.3%) and the East (7.8% +/- 2%), compared to in Highlands and Islands (3.8% +/-2.7%) and the South West (3.5% +/-1.3%). This corresponds to approximately 5,030 workers in the East, 2,720 in the South West, 1,560 in the North East and 670 in the Highlands and Islands (Table 3.4).

Table 3.4: Estimates of proportion of non-UK EU staff by region²⁴

	North East	East	South West	Highlands and Islands	Total
Population figures					
Total services	1,262	5,349	4,840	1,517	12,968
Average staff per service	13.6	12.0	16.0	11.5	13.6
Total staff	17,170	64,430	77,660	17,520	176,790
Survey figures					
Total services (unweighted)	151	628	628	165	1,572
Total staff (unweighted)	3,643	13,813	19,192	3,351	39,999
Average staff per service	13.0	13.4	18.7	13.0	15.4
Estimates					
% of staff from non-UK EU	9.1%	7.8%	3.5%	3.8%	5.6%
Total staff from non-UK EU	1,560	5,030	2,720	670	9,830
Confidence intervals					
Lower %	4.8%	5.8%	2.2%	1.1%	4.5%
Upper %	13.4%	9.8%	4.8%	6.6%	6.6%
Lower estimate	820	3760	1680	190	7950
Upper estimate	2300	6300	3760	1160	11700

²⁴ Population headcount data supplied by Scottish Social Services Council have been rounded to 10 using statistical rounding. The estimated number of non-UK EU staff by sub-group has been calculated using the prevalence figure from the survey results and the population figures from the SSSC. The total figure may differ from the sum of the sub-sectors.

Urban/Rural classification

Urban rural threefold classification was calculated using postcode data. This was missing in 346 cases. The proportion of non-UK EU staff in the categories of social services sampled is 4.9% (+/- 4.9%) in remote rural Scotland, 5.6% (+/- 3.5%) in accessible rural Scotland, and 5.7% (+/- 1.4%) in the rest of Scotland. This is equivalent to 8,910 workers in the rest of Scotland, 780 in accessible rural areas and 320 in remote rural areas (Table 3.5).

Table 3.5: Estimates of proportion of non-UK EU staff by urban rural threefold classification²⁵

	Rest of Scotland	Accessible Rural	Remote Rural	Missing data	Total
Population figures					
Total services	10,618	1,525	825	0	12,968
Average staff per service	14.7	9.1	7.9	0.0	13.6
Total staff	156,360	13,890	6,520	0	176,790
Survey figures					
Total services (unweighted)	1,010	147	69	346	1,572
Total staff (unweighted)	34,001	3,866	871	1,261	39,999
Average staff per service	29.3	21.0	10.5	1.8	15.4
Estimates					
% of staff from non-UK EU	5.7%	5.6%	4.9%	NA	5.6%
Total staff from non-UK EU	8,910	780	320	NA	9,820
Confidence intervals					
Lower %	4.3%	2.1%	0.0%	NA	4.5%
Upper %	7.1%	9.2%	9.8%	NA	6.6%
Lower estimate	6,780	290	0	NA	7,950
Upper estimate	11,030	1,270	640	NA	11,700

²⁵ Population headcount data supplied by Scottish Social Services Council have been rounded to 10 using statistical rounding. The estimates number of non-UK EU staff by sub-group has been calculated using the prevalence figure from the survey results and the population figures from the SSSC. The total figure may differ from the sum of the sub-sectors.

4. Perspectives on recruitment and retention

This chapter builds on the findings presented above by exploring survey respondents' views on recruitment and retention in the social care sector, including the extent to which they had found it easier or more difficult over the last year to recruit and retain non-UK EU workers.

Recruitment

Ease of recruiting staff in general

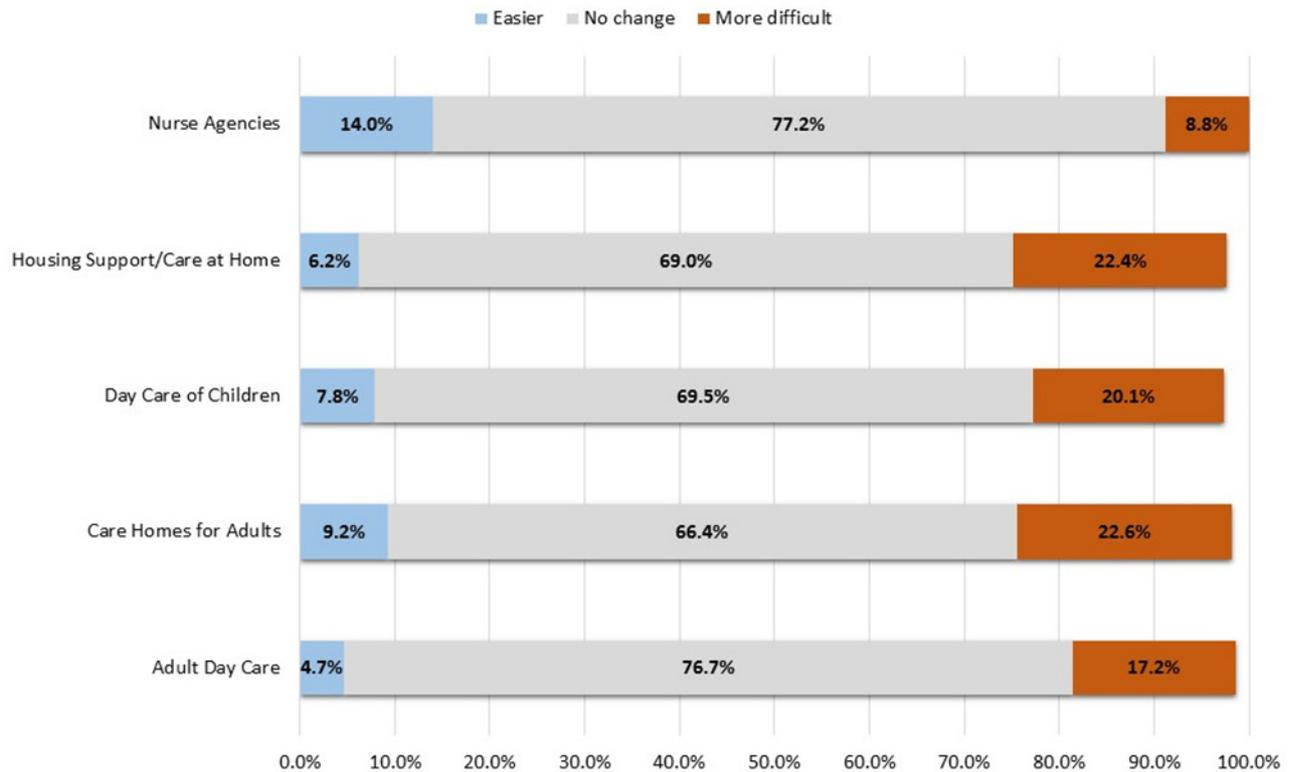
The perceived ease of recruiting staff over the last 12 months varied notably depending on the types of post being recruited for. As Table 4.1 shows, over half (51.7%) of those who had tried to recruit NMC registered nurses and over two in five (44.2%) of those who had tried to recruit care staff or practitioners said the process had become more difficult in the last year; this compared with the 21.1% who said the same about recruiting auxiliary staff and the 19.4% who did so about recruiting managers.

Table 4.1: Ease of recruiting in the last 12 months by post type

	Auxiliary staff	NMC Registered nurses	Care staff/ practitioners	Managers	Other
	%	%	%	%	%
A lot easier	3.2	3.1	3.1	1.7	2.3
A little easier	4.4	4.2	5.9	3.6	3.6
No change	69.1	34.7	45.1	70.7	65.5
A little more difficult	9.5	9.6	17.7	6.0	10.2
A lot more difficult	11.6	42.1	26.5	13.4	13.4
Don't know	2.2	6.3	1.7	4.5	4.9
Easier	7.6	7.3	9.0	5.3	5.9
More difficult	21.1	51.7	44.2	19.4	23.6
<i>Base</i>	<i>698</i>	<i>174</i>	<i>1,097</i>	<i>625</i>	<i>268</i>

The results for **auxiliary** posts showed some variation by sub-sector: respondents working in care homes for adults and housing support/care at home services were over two times more likely than those working in nurse agencies to report increased difficulties recruiting for such posts (22.6% and 22.4% versus 8.8% respectively).

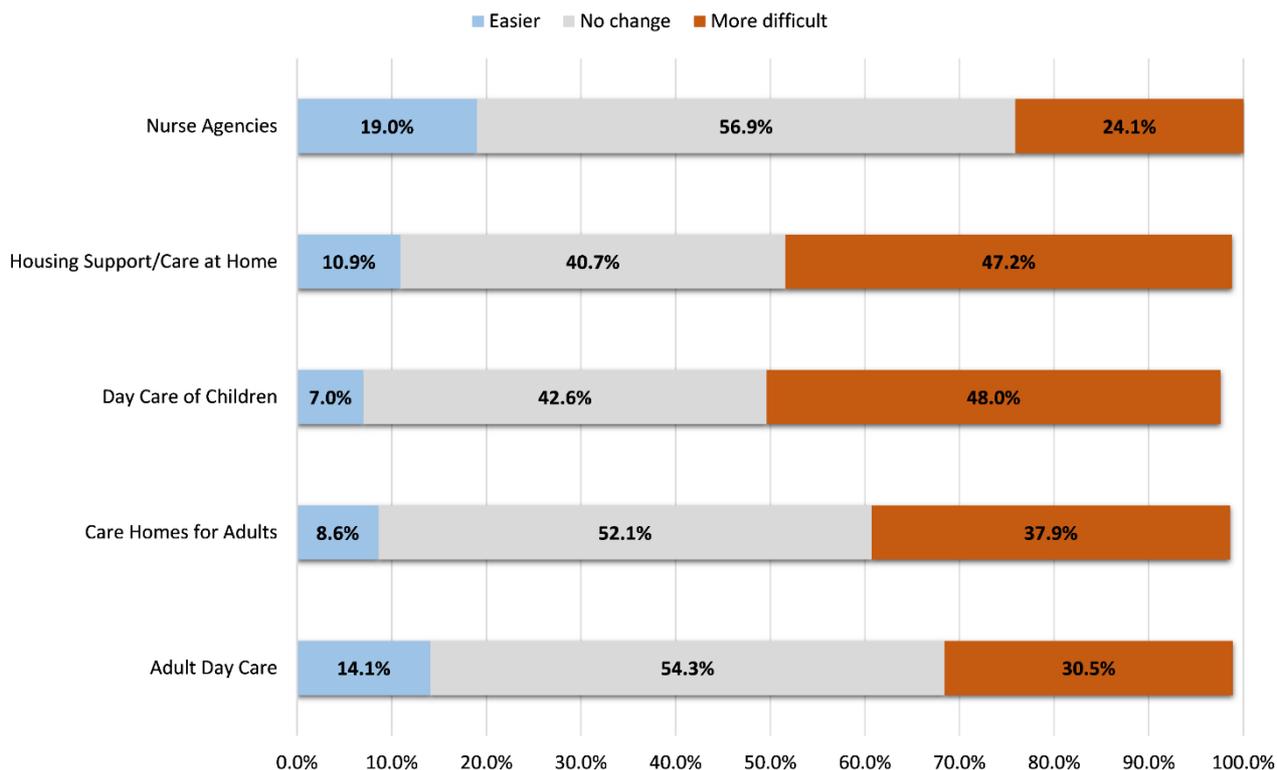
Figure 4.1: Ease of recruiting auxiliary staff in the last 12 months by sub-sector



Base: All services that have tried to recruit auxiliary staff in the last 12 Months (698)

Similar sub-sectoral variation was evident in respect of **care staff or practitioner posts**. Respondents working in day care of children and housing support/care at home services more likely than those working in adult day care services and nurse agencies to report increasing difficulties recruiting for these posts (48.0% and 47.2% versus 30.5% and 24.1% respectively) (Figure 4.2). The figure among respondents working in care homes for adults stood at 37.9%, below the average of 44.2%.

Figure 4.2: Ease of recruiting care staff in the last 12 months by sub-sector



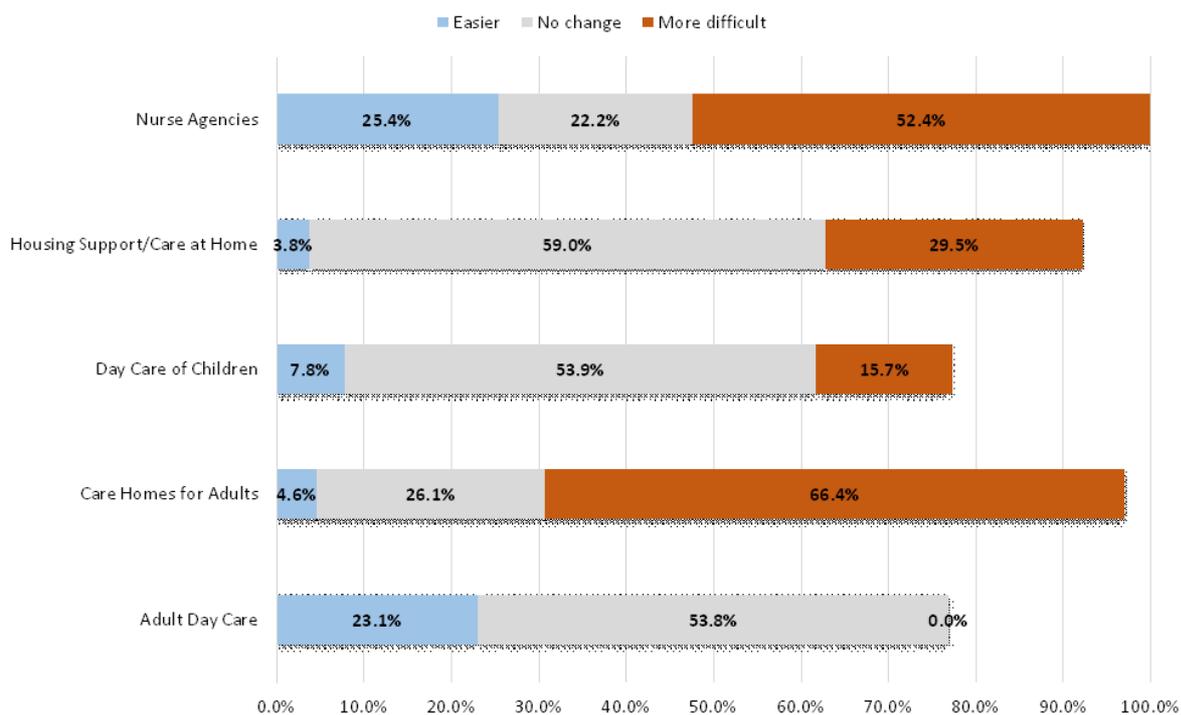
Base: All services that have tried to recruit care staff/practitioners in the last 12 Months (1097)

Additionally, respondents working in private sector services were more likely than average to report increased difficulties recruiting such staff (51.8% versus 28.8% of those working for local authorities and 44.3% of those working in the voluntary sector)

As noted previously, the type of post that respondents had most commonly experienced increased difficulty recruiting for was **NMC registered nurses**. Figure 4.3 shows that this difficulty was felt most acutely among respondents working in care homes for adults and nurse agencies (66.4% and 52.4% versus 15.7% of those working in day care of children and 29.5% of those working in housing support/care at home services respectively). (Small base sizes for adult day care services precludes analysis of the results for this group)²⁶.

26 While all those responding to this question employed NMC registered nurses, it should be noted that 96% of NMC registered nurses working in the social care services sector are estimated to be employed in Care Homes for Adults and Nurse Agencies; and 91% are estimated to be employed in the private sector (Scottish Social Services Council (2017), Scottish Social Services Sector: Report on 2016 Workforce Data, <https://data.sssc.uk.com/images/WDR/WDR2016.pdf>)

Figure 4.3: Ease of recruiting NMC registered nurses by sub-sector



Base: All managers who had tried to recruit NMC registered nurses in the last 12 Months (174)

There was further variation by employer type. Respondents working in the private sector were more likely than those working in local authorities and the voluntary sector to report increased difficulties recruiting NMC registered nurses (65.7% versus 13.5% and 15.9% respectively).

For **managerial posts**, there was no sub-sectoral variation in the results but respondents working in the private sector, along with those working in the voluntary sector, were again more likely than their local authority counterparts to report increased difficulties over the last year (27.0% and 18.1% versus 8.5% respectively).

Ease of recruiting non-UK EU staff

The majority of managers reported no change over the last 12 months in the number of applications they had received from non-UK EU27 nationals, with the figure ranging from 63.0% in the case of applications for care staff or practitioner posts, to 85.2% in the case of managerial posts (Table 4.2). Indeed, in respect of care staff and practitioner posts, 15.1% of managers reported having received *more* applications from EU nationals.

The minority saying they had received fewer applications from non-UK EU nationals ranged from 3.5% in respect of applications for managerial posts to a significantly higher 13.1% for care staff or practitioner posts and 14.5% for NMC registered nursing posts.

Table 4.2: number of applications received from non-UK EU27 nationals in last 12 months by post type

	Auxiliary staff	NMC Registered nurses	Care staff/practitioners	Managers	Other
	%	%	%	%	%
A lot more	2.6	2.0	2.7	0.9	2.3
A little more	7.3	3.7	12.4	1.4	3.5
No change	70.4	67.5	63.0	85.2	76.5
Slightly fewer	4.9	6.0	5.0	0.9	1.6
Far fewer	6.2	8.5	8.1	2.6	4.7
Don't know	8.5	12.3	8.7	9.1	11.4
More	9.9	5.7	15.1	2.3	5.8
Fewer	11.1	14.5	13.1	3.5	6.3
<i>Base</i>	<i>803</i>	<i>201</i>	<i>1,142</i>	<i>892</i>	<i>310</i>

Small base sizes for nurse agencies precluded full and robust analysis of the above results by sub-sector. However, it appears that respondents working in nurse agencies and in care homes for adults, are more likely than average to have experienced increased difficulties recruiting non-UK EU:

- auxiliary staff (26.9% and 16.4% versus an average of 11.1%);
- care staff/practitioners (33.3% and 17.0% versus 13.1%); and
- NMC registered nurses (26.7% and 16.9% versus 14.6%)

In the case of care staff/practitioners and NMC registered nursing posts, a higher than average proportion of respondents working in housing support/care at homes services similarly reported increased difficulties recruiting non-UK EU nationals to these roles (16.0% and 18.9% compared with the averages of 13.1% and 14.6% respectively).

Retention

Ease of retaining staff in general

The survey results suggest that retention was presenting somewhat less of a challenge for managers than recruitment. Over four in five respondents reported that there had been no change over the last 12 months in the ease with which they had been able to retain auxiliary staff (81.7%), managers (85.5%) and 'other' types of staff (82.8%). Fewer, though still a majority, said the same in respect of NMC registered nurses (70.3%) and care staff or practitioners (66.6%). Still, it was

notable that just over a quarter (25.7%) reported *increased* difficulty retaining care staff or practitioners.

Table 4.3: Ease of retaining staff by staff grouping

	Auxiliary staff	NMC Registered nurses	Care staff/practitioners	Managers	Other
	%	%	%	%	%
A lot easier	4.6	3.1	3.4	2.9	2.8
A little easier	2.4	4.9	3.7	2.2	1.9
No change	81.7	70.3	66.6	85.5	82.8
A little more difficult	7.4	9.0	15.6	4.3	5.1
A lot more difficult	2.9	9.2	10.1	3.6	4.4
Don't know	0.9	3.7	0.6	1.3	2.9
Easier	7.0	8.0	7.1	5.1	4.7
More difficult	10.3	18.1	25.7	7.9	9.5
<i>Base</i>	653	206	981	628	300

Again, some small base sizes, particularly for nurse agencies, preclude full robust sub-sectoral analysis of the results but it can be said that respondents working in care homes for adults were more likely than average to have experienced increased difficulties retaining NMC registered nurses over the last year (24.2% versus the average of 18.0%).

Additionally, respondents from the private sector were consistently more likely than those working in other sectors to report increased difficulties retaining staff (Table 4.4).

Table 4.4: Percentages reporting increased difficulties retaining staff over last year by employer type

	Auxiliary staff	NMC Registered nurses	Care staff/ practitioners	Managers	Other
	%	%	%	%	%
All employers	10.3	18.1	25.7	7.9	9.5
Private sector	13.5	23.8	32.7	10.8	10.6
Voluntary sector	8.1	7.5	24.6	8.5	10.2
Local authority	7.2	3.7	26.4	2.6	3.6

Ease of retaining non-UK EU staff

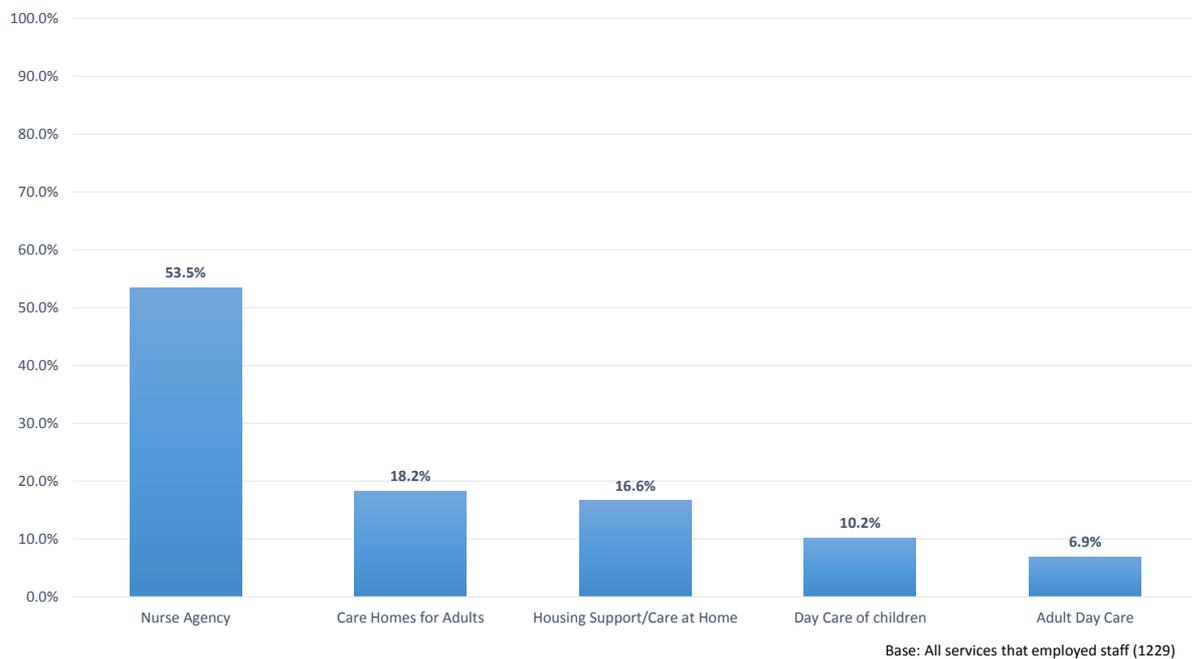
In terms of the retention of non-UK EU staff specifically, the results were even more encouraging than those for retention generally. Around eight in ten respondents reported no change in the ease with which they had been able to retain non-UK EU registered nurses (82.1%) and care staff and practitioners (84.1%). Around nine in ten said the same about non-UK EU auxiliary staff (88.3%) and managerial staff (91.4%). The proportion reporting that it had become more difficult to retain non-UK EU staff was consistently below the 10% mark, ranging from just 2.5% in respect of managers to 8.2% for care staff or practitioners.

Table 4.5: Ease of retaining non-UK EU staff by staff grouping

	Auxiliary staff	NMC Registered nurses	Care staff/ practitioners	Managers	Other
	%	%	%	%	%
A lot easier	1.6	1.0	1.5	0.2	0.4
A little easier	1.8	1.7	2.0	1.2	1.5
No change	88.3	82.1	84.1	91.4	88.0
A little more difficult	2.8	2.0	5.9	1.9	2.0
A lot more difficult	0.8	6.1	2.3	0.6	1.7
Don't know	4.7	7.2	4.3	4.7	6.3
Easier	3.4	2.7	3.5	1.4	1.9
More difficult	3.6	8.1	8.2	2.5	3.7
<i>Base</i>	<i>402</i>	<i>154</i>	<i>646</i>	<i>409</i>	<i>198</i>

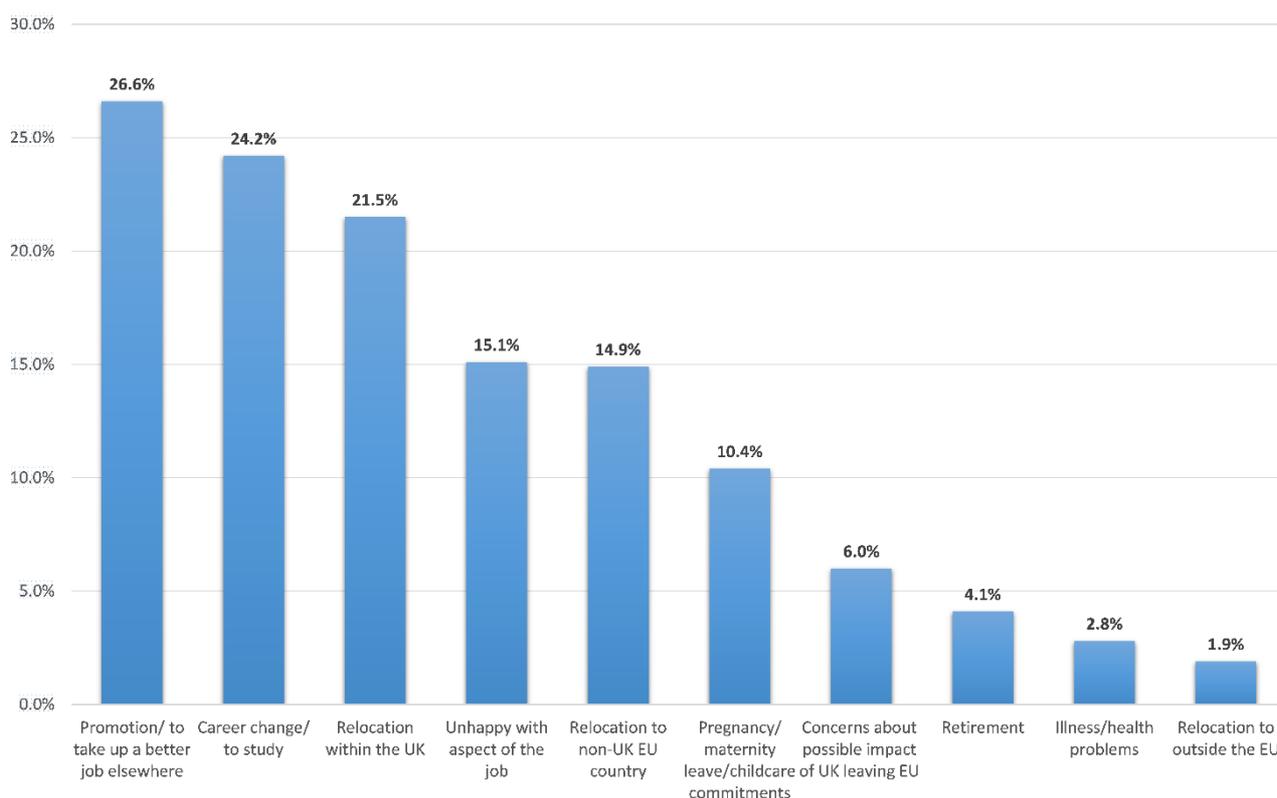
Again, small base sizes prevent full, robust sub-group analysis of the results. However, respondents working in nurse agencies and housing support/care at homes services appeared more likely than average to have experienced increased difficulties retaining care staff/practitioners from EU countries (23.4% and 9.4% versus 8.2% on average). No other such sub-sectoral differences were detectable. Just over one in ten (13.9%) respondents in total said that non-UK EU staff had left their service in the last 12 months – though the figure ranged from a low of 6.9% among those working in adult day care services, to 53.5% among those working in nurse agencies, reflecting the varying penetration of non-UK EU nationals in these different sub-sectors (Figure 4.4).

Figure 4.4: Services reporting that non-UK EU staff had left in last 12 months



Respondents cited a wide range of reasons why non-UK EU staff had left their service over the last year but the most common of these were promotion or to take up a better job elsewhere (26.6%); to pursue a career change or study (24.2%); and relocation within the UK (21.5%). Relocation to a non-UK EU country was mentioned by 14.9% and Brexit-related concerns by 6.0% (Figure 4.5).

Figure 4.5: Reasons for non-UK EU staff leaving the sector in the last 12 months



Summary

The survey highlighted some notable variation in the ease of recruiting different categories of staff the social care sector. Over half (51.7%) of those who had tried to recruit NMC registered nurses and over two in five (44.2%) of those who had tried to recruit care staff or practitioners said the process had been more difficult in the last year; this compared with the 21.1% who said the same about recruiting auxiliary staff and the 19.4% who did so in relation to recruiting managers. Private sector care homes had experience particular challenges recruiting register nurses and care staff or practitioners.

Overall, retention was presenting somewhat less of a challenge for managers than recruitment. Still, private sector providers again reported greater difficulties in this regard than their voluntary or public sector counterparts. Indeed, they were more likely to report increased difficulties retaining *all* types of staff.

The picture in respect of the recruitment and retention of non-UK EU staff specifically was more positive. Majorities of managers reported no change in the number of applications they had received from non-UK EU worker for any type of post in the last 12 months. More still reported no change in the ease with which they had been able to retain non-UK EU workers.

In terms of reasons non-UK EU staff had left the sector, these were many and varied. Brexit was mentioned but much less commonly so than other more ‘everyday’ reasons such as promotion, career change and relocation.

5. Qualitative findings

The qualitative research, discussed in this chapter, provides for a fuller understanding of the survey results and of care service managers' and workers' perspectives and experiences of recruitment and retention – including in relation to the UK's decision to leave the EU.

Recruitment

Although most care service managers who took part in the survey had not experienced increased difficulty recruiting and retaining staff in the last 12 months, the qualitative research confirmed that staffing was nonetheless a significant challenge for the sector. Indeed, recruitment specifically was commonly cited by the managers interviewed as the main such challenge, alongside funding (or a perceived lack thereof) and the generally difficult nature of care work.

Managers discussed recruitment challenges in terms of both the numbers of applications they received for posts and the quality of candidates. On numbers, and consistent with the quantitative findings, there was particular mention of a lack of applicants for nursing posts – “nobody seems to apply” was how one participant put it – which had left several services reliant on agency staff, and facing budgetary pressures as a consequence.

“It puts great financial strain on the budget as agency staff are so much more expensive.”

Care home manager (private sector), North East

In terms of the quality of candidates, participants commonly said that those applying to their service often had no suitable qualifications and, indeed, appeared to see care work as an easy option or something “anyone” could do. Several went further, expressing a view that some candidates appeared to apply, not because they wanted to work in the service, but simply to make the job centre think they were actively seeking work. The consequences of this were two-fold: many of the candidates either failed to make it to, or past, the interview stage; and services had to “waste” considerable time and energy ‘sifting’ for more suitable candidates.

“[The work is] not taken seriously enough...people think it's just looking after babies...We're looking for a lead practitioner and it's quite tricky. You get maybe 10, 12 people come forward for the position. Out of that 10 or 12 maybe two were actually qualified.”

Day care of children manager (private sector), North East

“I think what's happening is there is so many people unemployed at the job centre and they are told to go to these interviews...they basically see an advert for a carer, think, ‘och, I can do that’, then when I actually tell them what's involved in the job and show them round, they think, ‘Oh, I don't think that's for me.’”

Care home manager (private sector), South

West

"We've got people who say they have got seven years care experience but there is nothing on their CV. We also have people that will apply, you invite them for an interview and they don't appear, and they reapply and reapply and in the end we block them because they are playing the system. "

Care home manager (Voluntary sector), North East

Apart from a lack of genuine and suitably qualified candidates, participants identified a number of other factors they believed had contributed to recruitment challenges in the sector, and their own services specifically. Chief among these was low pay – combined with wage competition from other providers. One care home manager, for example, described how other homes in her area that were particularly “desperate” for staff were offering around £18 per hour; a rate she was unable to match. Other managers made spontaneous reference to higher rates of pay offered by nurse agencies.

"I'm actually struggling with my activity staff just now. I should have four and I've currently got one. The pay is minimum wage, and it's a hugely challenging job...it's bad enough to work for the Living Wage."

Care home manager (private sector), South West

"Some care staff are getting paid £8 an hour. We pay £10, you know, £12 at the weekend...it's a huge difference if you're paying bills and things, it's quite a difference."

Nurse Agency Manager (private sector), Highlands and Islands

Managers in more rural or peripheral areas cited their location as another factor contributing to recruitment challenges. They described how poor public transport connections meant their service was difficult to get to without a car and therefore less desirable as a place to work than more ‘connected’ services.

"We're kind of in between a city and a village...it's one of those places you go through as opposed to go to. So we find that some people will come from villages roundabout on their way into town and they will drop children here [but] if the staff member doesn't drive, then it does limit how you recruit."

Day care of children manager (private sector), North East

The UK's decision to leave the EU was cited spontaneously as a factor impacting on recruitment by a small number of participants. These were all managers of services, the specific circumstances of which meant they had a long tradition of employing, and/or were unusually reliant on, non-UK EU staff. One such service was a care home for people with learning disabilities that was located in a relatively rural area and thus had a high proportion of residential staff. These staff had traditionally come from the EU but applications from EU workers had been “drying

up”; a situation the manager attributed to the UK’s decision to leave the EU and a consequent “negative air about working in the UK.” He described how local people were less keen to take up residential posts, so, “for the first time since [he could] remember”, there were vacancies in his staff accommodation. Ultimately, he felt the situation was limiting his service’s ability to “grow, expand and develop.”

The other services that were unusually reliant on non-UK EU staff and consequently saw Brexit as presenting recruitment challenges were Montessori schools. A manager of one such school described how Montessori was much better known and respected in continental Europe (and further afield) than in the UK – and, indeed, that nursery care generally was something of a higher status profession there than here. This meant that she received more job applications from EU than UK workers, and that EU candidates tended to be “higher calibre”.

"All our EU national staff have degrees in something related to early years education, because they have a more general degree in Greece and Spain and Germany where you can actually focus on pedagogy, which doesn't exist in Scotland...In Scotland if you have a brain you go into academia or teaching older kids, you don't go into nursery teaching because it is really poorly paid...We do get Scottish people but it's kind of like a tenth of our staff."

Day care of children manager (private sector), East

This manager went on to comment that if her service was no longer able to employ non-UK EU staff it "just wouldn't function."

Retention

Consistent with the survey findings, few managers who took part in the qualitative research reported problems of staff turnover at their service. That said they were sometimes quite qualified in their comments, saying, for example, that there was “room for improvement” or that their situation was “not as bad as some”.

Further, they often described having two broad ‘streams’ of staff: an older grouping that had been with the service for a long time (usually between 10 and 20 years) and a younger grouping, members of which tended to stay for shorter periods, whether because they proved not to be suitable for their roles (for reasons described above), because they found the work too challenging or because they saw it purely as a ‘stop gap’ – for example, because they were studying or travelling. There was a sense from some of the interviewees that the number of staff not up to the job, or finding the work too challenging, was increasing somewhat.

"We are getting a lot of kids in who are at Uni and they want part time...they don't often tell you they are at Uni, and then they will say, 'Right, I'm going to Uni full time now, I need to leave.'"

Care home manager (private sector), South West

"We are actually finding just now that staff have no inkling of what it's actually like to come and work and be responsible and the need for reliability... They think, 'och, I'm not going in today; I'm just not going to bother', and they don't understand the knock-[on] effect on that in a care home."

Care home manager (private sector), South West

Aside from such issues, pay was commonly identified as another factor contributing to staff turnover. Specifically, managers and workers recounted occasions when members of their team had gone to work for higher paying providers – for example, a few private sector managers and workers said that some of their staff/colleagues had gone to work for local authorities. Another manager said members of their staff has been attracted by the “lure of what they could be paid in a nurse agency.”

"Having better pay maybe wouldn't get so many people to leave for the council nurseries and would get the staff staying for longer at least, and the consistency of the care would be better as well because there is so many changes it can affect the children."

Day care of children worker (private sector), East

Brexit was not mentioned spontaneously as a factor currently impacting on retention. However, there was reference to other policy and broader societal developments that were putting pressure on staff and services generally.

Care home managers spoke of increasing demand for their services arising from both the ageing population and the government's emphasis on independent living, both of which meant that the residents they took on had increasingly complex care needs. Nursery staff, meanwhile, spoke about the government's focus on increasing funded childcare hours and the challenging resourcing implications of this. They also referred to increasing “paperwork” and the demands of the regulatory regime that produced added pressures.

"There is just not enough beds for the need that is out there... People are staying out in the community longer. People then are living longer, but their needs are going up."

Care home manager (private sector), North East

"There is that tricky thing as well with the government trying to provide more funded hours for children...we know a lot of proprietors [in England] have had to close down because it is impossible to provide those hours on the money that they're offering."

Day care of children manager (private sector), East

More generally, there was repeated reference to challenges wrought by austerity and an associated perceived lack of funding for the care sector, which was seen as impacting on the quality of services provided – as well as tying managers' hands somewhat when it came to dealing with any staffing challenges they were facing.

“What it all comes back to, you know, is money though...If care in Scotland was [better] funded...God, we could lead the world on care, but we're working on tight staffing numbers.”

Care home manager (voluntary sector), East

Responding to recruitment and retention challenges

Generally, managers felt that difficulties in recruiting staff were having a negative impact on their services. There was a sense that such challenges were not only compromising the provision of care but also putting a strain on their time and resources.

“If you have got 21 people and you need five people to look after them and you've only got three, care is going to suffer...On a unit like that you can't have any less than three carers, but sometimes we would have to work with one.”

Nurse agency manager (private sector), East

Similar views were expressed by the workers interviewed. While all spoke very positively about their services and caveated any concerns they expressed with a resounding optimism, they were clearly nonetheless acutely conscious of staffing pressures. In some cases, workers explicitly mentioned staffing shortages in general or, a lack of specific types of staff, such as nurses. In others they made direct reference to ongoing recruitment struggles in their organisations. One employee reported frequently asking her manager to “organise” more staff.

“Well, think it is that you're always needing nurses. We do have some of the full-time nurses and band nurses, however there's still not enough, but I am sure that our recruitment will work out that.”

Care home worker (private sector), North East

“When we've got any problem with short staff we can speak to [my manager] all the time: ‘please can you organise for us more staff’ because it's difficult when we are short staffed.”

Care home worker (private sector), North East

Not all of those interviewed regarded the recruitment challenges they cited as a concern, however. Some managers highlighted the transient nature of such challenges, commenting that difficulties came and went intermittently. They perceived the fluctuations in numbers of suitable applicants as somewhat random, unpredictable and not necessarily a growing problem.

“Right at this minute I am completely staffed. All of a sudden there seemed to be available staff out there.”

Care home manager (private sector), North East

"I don't know if it depends on the time of year or whatever."

Day care of children manager (voluntary sector), North East

Although retention was not perceived to be a major issue on its own, it was seen as exacerbating staff shortages resulting from recruitment difficulties. Some of the EU workers interviewed described feeling unsure as to whether staff members who had recently left their service would be replaced. A manager of a private sector nursery felt that retention issues were compromising the quality of care as staff changes were unsettling for the children.

"It is not good because we [have been] short staff[ed] for a while. You never know if you get somebody quickly or not."

Care home worker (private sector), North East

"Yes, some girls have gone off and done other things and we've just not [been able to] replace [them]."

Day care of children manager (private sector), North East

Most managers that had encountered recruitment or retention challenges had taken some steps to try to address these. A range of such steps were cited with a corresponding diversity of outcomes and impacts.

The single most common action was the use, to varying extents, of agency staff. However, while this was helping to address recruitment issues in the short-run, participants commented that it was not a viable long-term solution due to the greater costs associated with employing agency staff, as mentioned above. One private sector care home manager went as far as to suggest that his service may be forced to "downsize" as a result of reliance on agency staff.

In terms of longer-term steps managers had taken to try to address recruitment challenges, the most commonly mentioned was enhancing or increasing their service's training offer. Managers stated that they had taken on greater responsibility for training new staff to widen the pool of suitable candidates, for example, by providing SVQ L2 training and, in some cases, offering specialist training in conditions such as dementia. Managers in the North East referred to an effective training scheme their service was part of that had been developed by staff at Robert Gordon University.

"If we came across a candidate that actually maybe didn't have quite the required qualifications we would be looking to put the training in place to get them up to the standard that you need."

Day care of children manager (private sector), North East

Other, less common strategies mentioned were more widespread advertising of positions both on- and off-line, and more targeted recruitment drives at universities,

colleges, hospitals, job fairs and job centres, to increase the likelihood of suitable candidates applying.

"We advertise in job centres, we advertise at job fairs, we advertise at hospitals and colleges and we advertise online."

Care home manager (voluntary sector), East

"We've been sort of advised now to move on to the job centre and actually say, 'right, this is what we're looking for', rather than just letting anybody apply for jobs."

Care home manager (private sector), South West

"We've used a site called Workable from head office and that's got it out to quite a few different people, because that automatically puts it on different web[sites], like Indeed and Total Jobs and things like that, and I think that did help a little bit."

Care home manager (private sector), North East

Managers for whom recruitment had *not* presented significant challenges in recent times tended to explain this with reference to their having pursued some of the above-mentioned strategies – including word-of-mouth publicity, and targeted recruitment via universities. Others explained it with reference to the high profile or strong reputation of their business.

"I think it is targeting areas...target the universities where people are doing that course or they are doing similar courses that show that they have got an interest in that kind of field anyway."

Day care of children manager (voluntary sector), North East

"Our home has just got one of the top 20 care homes in Scotland, so I think that in itself, when people go on to look for care homes in [this local authority] we are the very first one that you see. So because of that I think people do then think, 'oh, I want to work there'"

Care home manager (private sector), North East

Those managers who felt *retention* was having an impact on their service, had taken various steps to try to limit staff turnover. These included enhancing the induction process to include monthly one-to-one meetings with staff members to help them settle in; and improving pay and other conditions, such as making holidays more flexible to accommodate non-UK staff who may wish to visit their families abroad for prolonged periods. They felt these strategies had been largely effective.

"Flexibility with their holidays and their off duty. A lot of them would prefer to go home for quite a long spell of time and that can mean six weeks of holiday at one time or longer."

Care home manager (private sector), North East

Similarly, amongst staff who had no retention problems, common explanations offered for this were the collaborative and communicative working environment, competitive rates of pay, and training and development opportunities.

"We have lots of meetings, whether it be flash meetings or whether it's proper staff meetings in different areas, we broke the areas up so we're having meetings for nurses and then meetings for the domestic, and meetings for the kitchen, and just constantly feeding back to them...I think we've got a good training scheme in place now, a lot of courses that they can go on and improve their skills."

Care home manager (private sector), North East

"It does come down to a better rate of pay [and]...we are quite an open nursery where we encourage [staff] if there is any issues to come and speak to me in the first instance, so we try and keep it very proactive as opposed to reactive, and I think just kind of all working together and trying to build a teamWe do a lot of in-house training. We utilise the training that Aberdeenshire council provide and we also utilise obviously the apprenticeship training as well."

Day care of children manager (private sector), North East

Brexit and the contribution of EU workers

While only a small number of the qualitative participants spontaneously identified Brexit as a factor currently impacting on recruitment and retention in the sector, more were concerned that it may impact this way in the future. As might be expected, managers whose services had a relatively high ratio of EU to local staff were the most likely to express this concern.

"It concerns me, just [because of] the level of staff that I have that have come over [from the EU] prior to this and the difficulty in filling positions with local people."

Care home manager (private sector), North East

"Obviously my concern is does that now mean that they are no longer allowed to be here? I think having kind of looked into it my understanding is that if they are settled it's fine. But it's more for new people looking to kind of come in."

Care home manager (private sector), North East

"I think there is a concern because if we lost that pool of people then I think it would be a massive loss to the care sector."

Care home manager (voluntary sector), East

There was a sense in which some managers felt the contribution of EU workers was greater than their basic numerical representation in the workforce might suggest. Two separate points were made in this regard. First, it was noted that in some services, EU worker were more likely than other staff to be full time and/or residential; in other words, to contribute a higher overall number of *hours*' work.

Secondly, and in more qualitative terms, managers spoke of their EU employees' strong "work ethic", exemplified through a willingness to 'go the extra mile' to get the job done and to continually learn and develop. Similar findings have been reported in other recent labour force research.²⁷

"They have made a proactive choice to come to the UK to work in the sector so they have an energy and enterprise about them."

Care home manager (private sector), East

"[EU workers] are extremely hard working; their work ethic is incredible. I'm not saying that the locals aren't but it's less obvious."

Care home manager (private sector), North

East

"They seem to want to work and to learn and if I put a training thing on they are usually some of the first ones to have gone on there and completed it. They are really keen to improve."

Care home manager (private sector), North East

Relatedly, managers sometimes said that non-UK EU workers appeared to be more motivated than other staff by an "ethos" of care (rather than by more material considerations), and that this was manifest in a high level of commitment to their work. Comments made by workers themselves when they were describing what attracted them to the sector confirmed this to an extent.

"They tend to be very passionate and caring and are all of high quality."

Day care of children manager (private sector), East

"They are less motivated by salary and flexibility of hours than local staff, and more by the ethos and philosophy of the service."

Care home manager (private sector), East

"In Poland I was an accountant but I wanted a change of direction and to work more with people...and to help them in their lives."

Care home worker (private sector), East

"I like to look after [the residents]...looking after other people just gives me this feeling that actually I'm doing something good when I cannot look after my own family."

Care home worker (private sector), North East

²⁷ Scottish Government (2018) Farm Workers in Scottish Agriculture: Case Studies in the International Seasonal Migrant Labour Market: <http://www.gov.scot/Resource/0053/00533236.pdf>

Less commonly, there was reference to non-UK EU workers being more highly qualified and/or experienced than local applicants. This perspective was advanced mainly by managers of childcare services, who, as well as describing how their EU workers often had specialist degrees in childcare or in teaching, highlighted other unique skills they brought to the classroom, not least the ability to speak and teach in different languages.

"[They have] good quality CVs and their interviews are always of a very, very high quality."

Care home manager (voluntary sector),

East

"They can speak Polish and Spanish to Polish and Spanish children in the nursery."

Day care of children manager (private sector), East

"Literacy is a huge thing at this age, and so we do quite a lot of songs in different languages, so having the staff that have that as a mother tongue is brilliant."

Day care of children manager (private sector), North East

For their part, workers too expressed some concern about Brexit. It was common for them to say that they were not sure how their residency or work status might be affected, and whether or not they would be able to stay in the UK.

"I don't think it's been properly explained what is going to happen so, yes, so there are some concerns but it's uncertain."

Day care of children worker (private sector), Highlands and Islands

"I'm worried that things will change and if I go back [to Poland for a visit], I might be declined entrance [to the UK]".

Care home worker (private sector), East

One of the workers was married to a non-EEA citizen who worked in the same service as her, and she noted that his residency status was entirely dependent on hers. The manager of her service made the same point and commented that circumstances such as this meant the potential impact of Brexit on the sector could be greater than might be assumed simply by counting the number of non-UK EU national workers.

A minority of workers were unconcerned about Brexit – though this appeared to be based on their simply assuming that “everything will be fine” because they had been in the country for a number of years or because they had bought property here – rather than on a more informed awareness of the UK Government’s and European Commission’s current position.

"I'm not worried about Brexit, nothing to worry about; the law doesn't work that way, I'm quite sure. I was welcomed to the country, so nobody will get rid of me."

Care home worker (private sector), East

"I don't think that somebody move Polish people from Scotland when you've got your private house or flat, you've got a job, you stay here for a long time, I don't think so."

Care home worker (private sector), North East

All of the workers interviewed were keen to remain in Scotland for the foreseeable future, often commenting that they regarded the country as their "home." All had begun considering applying for UK citizenship, though there was evident confusion about the temporal eligibility criteria. Further there was concern about the perceived high cost of the process, with a couple of participants implying this might be prohibitive for them.

"I will be three years in two months here and my family in another two, so I'm allowed to [apply for citizenship] after three years being here."

Care home worker (private sector), East

"I might [apply for citizenship] in a few years' time. I'm not allowed yet, I need to be in the country over six years. But it costs quite a lot of money, about two grand for getting that done, and obviously you need to pass a lot of tests and the tests are expensive too. Because it's so expensive then I [stopped thinking] about [it]."

Care home worker (private sector), East

Awareness of 'settled status' as an alternative to citizenship was low among the workers interviewed – just two of them had heard of this option.

Information needs

As is evident in the foregoing discussion, both managers and workers displayed at best a limited awareness of the UK Government's and European Commission's current position with respect to the future status of EU workers in the UK. Indeed, it was common for both audiences to observe that "nothing had been agreed" or "nobody knows what's going to happen." There was repeated reference to a lack of information on the subject that might enable services and workers to plan ahead.

"We're not getting any information at all about what Brexit even is. I feel very disconnected from it as an employer...I honestly think that people are just like, 'It's not going to happen'...It's not been widely discussed; certainly, within the teaching sphere, we have all just been like, 'of course we're not going to [leave the EU], that's ridiculous'...or else just paralysed with not knowing what to do."

Day care of children manager (private sector), East

"I don't think there's enough advice being given out, you know, it's very much kind of 'see what happens' at the minute. I think there is probably a lot more research that I could be doing as well but when you're already busy..."

Care home manager (private sector), North East

"I don't think it's been properly explained what is going to happen and/or explained or already discussed so, yes, so there are some concerns but it's uncertain."

Day care of children worker (private sector), East

Among managers there was specific demand for more information on what employers should currently be doing in respect of their non-UK EU workers, as well as what "staff could do to remain and what the cost implications were of that and what the government was going to do to cover those costs". One manager suggested that the Scottish Government should consider reinstating a visa scheme for EU nationals along the lines of the former 'Fresh Talent – Working in Scotland Scheme', to help ensure the flow of workers to the country.

In the perceived absence of information and planning from government, none of the managers interviewed had formally taken steps to prepare for Brexit – though they commonly described having shared with their EU workers any information they had received on the subject or attempted to reassure them that they would support them to remain in Scotland in whatever way they could. This was very much reflected in comments made by workers themselves.

"We put posters up and things, we quite often get posters about it saying, 'go to such and such', and we'll put phone numbers up, and I do managers, surgeries so that if they have got any worries, they can come and talk."

Care home manager (private sector), South West

"It's trying to make sure that we are supporting them, because we don't want to lose them....Just making sure that they know that we are here if they need any help and if we can help them in any way we will."

Care home manager (private sector), North East

All but one of the managers said that current uncertainties around Brexit had not made any them less inclined to recruit EU workers. The exception was a manager of a nurse agency, who commented that it would "depend on how much extra work it creates or how difficult it's made...agencies might struggle with that a little bit."

Looking to the future

Managers were asked how they saw both the sector overall, and their service specifically, changing over the next five years. Responses tended to be negative or neutral, particularly in relation to the sector as a whole.

"The sector is on its knees. It's crisis time."

Care home manager (voluntary sector), East

"How do I see it? With lots of problems financially if we're not careful. If not, collapse, if we're not careful."

Care home manager (private sector), North East

Indeed, very few managers had a positive outlook for the sector or their service over the next five years. Policy changes, financial problems and recruitment issues, as described above, were the main reasons cited for this.

Both managers and staff were also asked what they thought could be done to attract more prospective employees to the sector. They commonly suggested that there should be a focus on the meaningful and rewarding nature of the work, and the impact it can have on people's lives. Those working in the childcare sector mentioned the 'lifelong' impact their work could have.

"You would want people to come in, know that what they're doing is really, really important. The impact that this has on a child growing up and progressing through the rest of their [life]...what we do now is going to affect these children in their 20s, their 30s, their 40s."

Day care of children manager (private sector), North East

"I would highlight the importance and reward of the work, so people who work in childcare feel, I think, rewarded from the children...we can make lots of changes for the future. It's great to see the children developing."

Day care of children worker (private sector), South West

"It's your approach, and how you approach people with dementia and the fantastic response you'll get if you just do it right...If you're willing to learn to do that and put your life into that, then it's such a challenging and rewarding job though...the rewards outweigh the challenges really."

Care home manager (private sector), South West

In addition to the rewarding nature of work, participants felt there should be more of an emphasis on its being enjoyable and varied.

"The fun that can be had in the job!"

Day care of children manager (private sector), East

"No two days are the same."

Day care of children manager (voluntary sector), North East

The opportunity to learn new skills – be it through training or on the job learning – was another suggested area of focus in any messaging. There was a sense that care and related roles were becoming increasingly skilled and that the sector provided access to a wide range of training opportunities.

"It's a great place to work, it's good to gain different skills. It's excellent just to learn from each other because we are all different. We can all learn something new every day."

Care home worker (private sector), North East

"I think to attract people...I would say it's the state of the nursery environment and what we're doing... and then over the years we just then address things that we need to like training and things like that, but it's all there for people."

Day care of children manager (private sector), South West

Finally, respondents suggested emphasising the flexible nature of the work, made possible by the fact that some types of care needed to be provided 24 hours a day, seven days a week.

In terms of other measures or changes that might encourage more people to work in the sector, better pay, particularly for frontline staff, was frequently suggested by both managers and workers. There was a consensus that the pay did not reflect the level of responsibility and "emotional labour" often attached to the work.

"They need to look at the wages because I think those that are doing the most hands on care are probably least paid."

Day care of children manager (voluntary sector), South West

"From my point of view, I'm working as a senior nurse assistant and I do get a lot of responsibilities...it's almost the same job role [as a nurse], and I'm on about half [the] wages...you can get better paid in a shop."

Care home worker (private sector), North East

One childcare manager went so far as to suggest that increased pay might also have a positive impact on the quality of work.

"As much as these girls have gone into [the job] knowing that it is never going to make you rich...I think it would be nice just for them to be rewarded for the work that they do. I think if they were paid accordingly you would find that maybe there was a bit more effort put into their day to day tasks."

Day care of children (private sector), North East

Improvements to the overall benefits package – including sick pay, the provision of uniforms free of charge and payment of registration fees – and an enhanced training offer were similarly highlighted as changes that could make the sector more attractive. There was also reference to "small things" that might similarly make a difference, such as providing staff with hot meals during their shifts.

"Do you get sick pay? Do you get training? There are all these extra things that if the company is offering that, then that's all part and parcel of the pay that you get because a lot of companies out there will say they are giving more pay per hour but you've got all your training that you have to do that you don't get paid for and they don't provide. You pay for your own uniforms, all these things mount up."

*"It's £120 a year to pay to be on the register. We pay that back to them, so that attracts people to the jobs...£120 a year is quite a lot of money."*²⁸

Care home manager (private sector), South West

While, as noted above, there were those who felt the caring professions were becoming increasingly skilled, others felt that there was scope for further improvement in this regard to make more formal career pathways available.

A final, related theme raised spontaneously by participants concerned the profile and public perception of the sector. There was a sense that the sector had a generally low profile and was considered low skilled and that this needed to be challenged to encourage more, and higher quality, candidates to apply.

"We have to have a change of how people see nursing homes, especially nurses, ...it's not [something that you do] because you can't do anything else. I think just being given a better public view of what we offer and being recognised."

Care home manager (private sector), North East

"It's how you promote the sector as a career in schools. It's not seen as a desirable sector to move into and the quality of candidates that tends to apply isn't what we require."

Care home manager (voluntary sector), East

Summary

The qualitative research confirmed that recruitment and, to a lesser extent, retention, were presenting significant challenges for managers in the care sector and, indeed, their workers.

Recruitment and retention difficulties were commonly explained in terms of both a basic shortage of applicants, particularly for nursing roles, and, in the case of people that did apply, and that sometimes went on to take up positions, a lack of relevant skills, experience or aptitude. Low pay was also seen as a contributing factor and may in part explain the greater difficulties experienced by private sector services, evident in the quantitative data – participants highlighted that pay was often significantly lower in these services than in local authority run establishments.

Strategies that managers had implemented to address recruitment and retention challenges, and that had proven effective, included improving their pay, conditions and training offer; being more strategic in their approach to recruitment; and ensuring a communicative and collaborative working environment.

The qualitative research also confirmed that Brexit appeared to have had a limited impact on the sector to date but nonetheless was a source of concern for the future, with both managers and workers of the view that little had yet been decided.

²⁸ £120 is the cost of the registration fee for NMC registered nurses. Fees for SSSC registration vary but, for frontline care workers, stand at £25.

Reflecting this, there were repeated calls for more information on the matter such that both managers and workers might begin planning accordingly.

Beyond this issue, the qualitative research highlighted other ways in which the sector might best be supported to meet current, and potential future, recruitment- and retention-related challenges. Asked what they thought could be done to attract more workers to the sector, manager and employees suggested:

- campaign work to raise the profile and reputation of the care sector – such that more people are encouraged to consider it as a career pathway – with messaging focusing on: the importance and rewarding nature of the work; the provision of training and the opportunity to learn new skills; and the flexible hours available in many types of service

- higher pay for workers at all levels, but particularly ‘frontline’ staff

In addition to these suggestions made by participants themselves, the qualitative research pointed to an evident need for more guidance for managers on effective recruitment strategies to ensure higher quality applicants and thereby reduce the burden of the process on services; as well as greater sharing of best practice in respect of training, development, and other strategies to promote retention.

6. Conclusions

The estimate of the percentage of non-UK nationals employed within adult social care and childcare in Scotland emerging from this study is in line with that recorded in some previous research, at 5.6%. This aggregate result conceals some notable sub-sectoral variation, however; in particular, the higher prevalence of non-UK EU nationals in nurse agencies (16.5%) (as well as specifically for nurses and for those in auxiliary and care roles).

These results take on added significance in the context of the survey finding that over half of managers who had tried to recruit NMC registered nurses, and around two in five who had tried to recruit care staff or practitioners over the last 12 months had found this more difficult than previously. In other words, any future impact of Brexit on EU nationals' ability or propensity to remain in the UK would have the potential to exacerbate an already challenging situation for the sector.

While the survey suggested that retention was presenting somewhat less of a challenge than recruitment in the sector, it was nonetheless notable that just over a quarter (25.7%) of respondents reported increased difficulty retaining care staff or practitioners – another of the groups among whom non-UK EU nationals are relatively prevalent – with the problem again appearing most acute in the private sector. Findings from the qualitative research suggest that a possible explanation for this could be wage competition from local authority providers.

The picture in respect of the recruitment and retention of non-UK EU staff specifically was uniformly more positive. Majorities of managers reported no change in the number of applications they had received from non-UK EU workers for any type of post in the last 12 months. More still reported no change in the ease with which they had been able to retain non-UK EU workers. And while respondents did report non-UK EU workers having left their service in the last 12 months, Brexit-related concerns appeared to be a factor in only a small number of these cases.

The qualitative research reinforced the survey findings that Brexit appeared to have had a limited impact on the sector to date. However, the work did highlight concerns that Brexit could prove more of a challenge in the future, with both managers and workers of the view that little had yet been decided, and unsure of how, if at all, the status of non-UK EU workers might be affected. These findings suggest a clear need for both audiences to be provided with greater information about the UK Government's and European Commission's agreement on the matter, including in relation to the options of citizenship and settled status, such that they might begin planning for the future accordingly.

Beyond this issue, the qualitative research participants identified other ways in which the sector might best be supported to meet current, and potential future, recruitment- and retention-related challenges. These included:

- campaign work to raise the profile and reputation of the care sector, such that more people are encouraged to consider it as a career pathway, with messaging focusing on:
 - o the importance and skilled nature of the work
 - o the rewarding and enjoyable nature of the work
 - o the provision of training and the opportunity to learn new skills
 - o the flexible hours available in many types of service
- higher pay for workers at all levels, but particularly 'frontline' staff – both as a means of recognising the difficult and important jobs they do, and to further improve perceptions of the sector as a viable career choice.

In addition to these suggestions made by participants themselves, the qualitative research pointed to an evident need for:

- more guidance for services on effective recruitment strategies to ensure higher quality applicants and thereby reduce the burden of the process
- the sharing of best practice in respect of training and development, and other strategies to promote retention – of which there was clearly a great deal

Appendix A: Republic of Ireland estimates

Table A1: Estimates of proportion of ROI staff by sub-sector

	Adult Day Care	Care Home for Adults	Childminding	Day Care of Children	Housing support/ Care at home	Nurse Agency	Total	All adult social care	All child care
% of staff from ROI	0.2%	0.2%	0.6%	0.2%	0.2%	0.9%	0.2%	0.2%	0.2%
Total staff from ROI	14	94	33	55	158	68	422	335	88

Table A2: Estimates of proportion of ROI staff by employer type

	Public	Private	Voluntary	Total
% of staff from ROI	0.2%	0.2%	0.3%	0.2%
Total staff from ROI	88	202	130	422

Table A3: Estimates of proportion of ROI staff by region

	North East	East	South West	Highlands and Islands	Total
% of staff from ROI	0.5%	0.3%	0.2%	0.1%	0.2%
Total staff from ROI	80	186	146	13	422

Table A4: Estimates of proportion of ROI staff by urban rural threefold classification

	Rest of Scotland	Accessible Rural	Remote Rural	Missing data	Total
% of staff from ROI	0.2%	0.1%	0.8%	NA	0.2%
Total staff from ROI	345	16	53	NA	422



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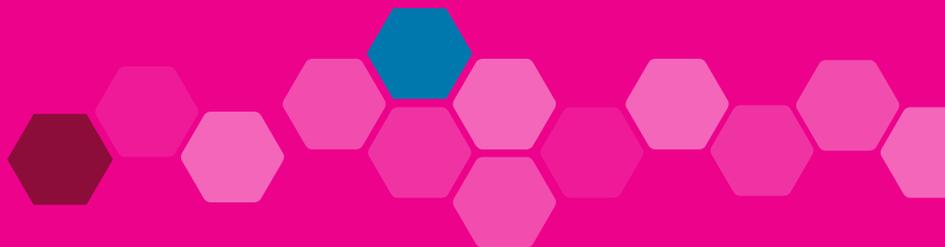
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