Release date: Tuesday 13th April

Theme 7: Care workforce wellbeing
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Well-being of care workers in the UK
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The National Association of Care and Support Workers (NACAS) is the professional membership association for the care workforce. We have lived experiences of delivering care face-to-face and an in-depth understanding of the issues that care workers face everyday. This research contributes to our understanding of the experiences of the workforce and we hope that social care stakeholders and policymakers will use it to improve social care for all.

One of our main aims is to give the social care workforce a voice that can influence policy making at the highest levels. Therefore, the wellbeing of care workers research will now become our annual report where we can track the physical, psychological and economical status of the workforce. That, together with the understanding of how care workers experience perceptions of social care inform our strategy and campaigning.

This year, the report shows, unsurprisingly, that many care workers experience burn-out and feel unsupported in their roles. The ongoing issue of the shortage of funds to the sector is also rather prominent in the answers as a big proportion of respondents do not feel financially secure and struggle with money worries.

As part of our programme with Nesta and Dunhill Medical Trust we want to draw attention to more positive aspects of care. This comes across in the report in the fact that a majority of care workers that took part enjoy their work and many reported that helping people makes them feel good about themselves and is very fulfilling.

Lina Van Aerschot
Psycho-physiological burden, lack of support and unwanted tasks: What makes Nordic care workers in old age care to consider leaving their work
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The care service sector struggles with a shortage of trained personnel and difficulties recruiting enough workers to meet the needs of the growing number of older people. According to recent media discussions and research, care work is increasingly pressurized and burdensome both mentally and physically. And, not only recruiting but also holding onto personnel is an urgent challenge. In this paper, examine factors explaining care workers’ intentions to leave their current work in old age care. We use the Nordcare survey data collected in 2015 among practical nurses working in home care or institutional settings in four Nordic countries, Denmark, Finland, Norway and Sweden. We analyze which aspects of the work and what background factors are related to quitting intentions. The share of care workers who had considered quitting their current job during the last year varied between one third in Norway to almost half of care workers in Sweden. The differences in factors related to intentions to leave were surprisingly small between the four countries. The strongest predictor was work-related burden, i.e. feeling physically tired, having back pain and feeling mentally exhausted after a working day and having difficulties to sleep. Also, not getting support from immediate superior and not finding work tasks interesting or meaningful predicted intentions to leave. Care workers working in the private sector were more likely to have intentions to leave than their colleagues in the public sector. Younger age and longer professional education were also related to quitting intentions.
Social care personal assistants (PAs) are a growing segment of the care workforce. They have a distinctive role in that they are usually directly employed by the person who needs support/care or are self-employed and directly hired. The direct employment relationship is held to offer real opportunities for person-centred care to be provided as employer and employee come to have a deeper working relationship than possible amongst ‘traditional’ care workers.

This presentation is based on selected findings from semi-structured interviews with 105 social care PAs, focusing on their employment conditions. Findings suggest that most PAs enjoyed very high levels of job satisfaction because their closer working relationship to their employer, enabled far greater opportunities to provide very tailored support or care. However, their employment conditions were often unsatisfactory. For example, many did not have job descriptions (those who did often said these were out-of-date); many were not enrolled on to a pension, or had access to sick, or holiday pay. Most worked on a ‘flat rate’ contract with no overtime (many worked anti-social hours) and unpaid overtime was common. Though poor condition of employment are not uncommon in other community based care work, PAs were probably at a greater disadvantage in the event of a dispute with their employer because of their high levels of occupational isolation. The absence of support for PAs in this situation was striking, and there is currently no regulatory oversight of the PA role. The presentation will end by offering recommendations for addressing these problems.