

Health and Social Care Committee Inquiry – Impact of a no deal Brexit on health and social care

Written evidence submitted by: Association of Directors of Adult Social Services
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About Us

The Association of Directors of Adult Social Services is a charity. Our objectives include;

- Furthering comprehensive, equitable, social policies and plans which reflect and shape the economic and social environment of the time
- Furthering the interests of those who need social care services regardless of their backgrounds and status and
- Promoting high standards of social care services

Our members are current and former directors of adult care or social services and their senior staff.

Background

Challenges in adult social care

1. It is now well understood that adult social care, and local government as a whole, is in an extremely challenging financial position. Some local authorities have reported that they are in a perilous position whereby they are faced with having to strip back services to a core offer.¹
2. As reported in our 2017 ADASS Budget Survey, this situation could have been significantly worse without the introduction of the Adult Social Care Precept and the additional 2017 Spring Budget funding. Without access to this additional funding, significantly more councils' finances would have come close to collapse and the impact on older and disabled people, on the care market and on the NHS, would have been even more significant.
3. Our 2018 Budget Survey results clearly show that despite the increased access to funding in 2018/19, Directors of Adult Social Services (DASSs) are still faced with having to find significant levels of savings in order to support their local authority to meet their legal requirement to deliver a balanced budget.
4. Adult social care markets are acknowledged to be fragile, with continued provider closures and contract hand-backs, along with associated risks to quality. The fragility of local care markets has resulted in providers ceasing trading across home and residential care in more than 100 council areas in the past six months, impacting more than 5,300 people. It has also resulted in providers handing back contracts to more than 60 councils, impacting just under 3,000 people who receive services in 2018/19. The fragility of care markets has been further highlighted by the well-publicised financial challenges faced by two of the largest care providers nationally.

¹ [East Sussex council set to cut services to bare legal minimum, Guardian, 3 August 2018](#)

Adult social care workforce

5. The background and context of a system facing growing pressures to maintain quality provision to an increasing number of people who require care, is an important consideration when assessing the impact of a no-deal Brexit on the adult social care sector. As noted by the Migration Advisory Committee (MAC) in their report EEA Migration into the UK: final report (2018) they have serious concerns about social care saying the sector needed something wider than just a migration policy to fix its many problems.
6. In 2018 The National Audit Office published their report 'The adult social care workforce in England'. In reference to The Department of Health & Social Care's role in overseeing the adult social care workforce the following statement was made; "Social care cannot continue as a Cinderella service – without a valued and rewarded workforce, adult social care cannot fulfil its crucial role of supporting elderly and vulnerable people in society. Pressures and demands on the health and social care systems are increasing, so the Department needs to respond quickly to this challenge by giving the sector the attention it deserves and needs, instead of falling short and not delivering value for money."
7. Within its many financial constraints adult social care is therefore operating with growing concerns about the workforce, whilst awaiting the publication of a long overdue Adult Social Care Green Paper, Workforce Strategy and the implementation of a national Adult Social Care recruitment campaign.
8. The sector is reliant upon dedicated, well skilled and caring professionals who provide care and support to help enable people to live good lives. The social care workforce also delivers critical services which have an impact upon the delivery of NHS care. The implications of Brexit on the workforce, both now and in the future, could place social care under increasing pressure at a time when many already claim the sector is in crisis.

The current and future workforce

9. The 2018 Skills for Care report 'Size and Structure of the Adult Social Care Sector and Workforce in England' notes that the number of adult social care jobs in England was estimated to be 1.6 million with the number of people working in the sector estimated at 1.47 million. This makes adult social care a bigger employer than the NHS. Of the 1.6 million jobs around 1.13 million were full time equivalent roles. 2016 / 17 alone saw an increase by around 1.2% (19,000 jobs).² This makes adult social care a large and growing employment sector, contributing much too both the local and national economy. The Economic Value of the Adult Social Care Sector – England (2018) estimated that in 2016 the adult social care sector GVA was £20.3 billion. The total direct, indirect and induced value of adult social care in England was £38.5 billion.

² Skills for Care (2018) 'Size and Structure of the Adult Social Care Sector and Workforce in England'

10. Since 2009 the number of adult social care jobs has increased by 21% (275,000 jobs). Skills for Care forecast that if the adult social care workforce grows proportionately with the over 65yrs population there will need to be a further 40% increase in the number of jobs in the sector by 2035. This would mean 650,000 further roles creating a workforce in excess of 2.25million. This would increase demand for all groups in the social care workforce, i.e. social care workers, other support staff, managers in social care, registered nurses, occupational therapists, social workers and other allied health professionals.

Workforce Challenges

11. Turnover in 2018 stands at 30.7% (390,000 jobs)³ and two thirds of new starters are from within the sector rather than new entrants into the market. The turnover rate of all care staff has been increasing since 2012-13. In 2016-17, the turnover rate of all care staff was 27.8% and was particularly high for care workers (33.8%) and registered nurses (32.1%). In 2016-17, turnover rates were higher in homecare (32.2%) than residential care homes (26.3%).⁴
12. Of key concern is that funding is insufficient to cover the costs of the welcome National Living Wage. It is equally shameful that care is considered a minimum wage career when it is so vital, skilled and essential.
13. A high vacancy and turnover rate can affect the quality of care that service users receive. People receiving homecare may experience shorter visits than necessary if care workers have higher workloads and service users may lose continuity of care. The CQC found a link between high vacancy and turnover rates, and poorer levels of care being provided.⁵
14. It is clear that there are already substantial challenges to recruit and retain staff in adult social care which makes Brexit an even greater risk. As stated in the Migration Advisory Committee report EEA migrants contribute much more to the health service and the provision of social care in financial resources and through work than they consume in services. EEA workers are an increasing share of the health and social care workforces.
15. When breaking current workforce figures down (in the context of Brexit) into EU and non-EU workers the adult social care workforce looks as follows:
- 83% British
 - 8% EU (104,000)
 - 10% Non EU (130,000)
16. Based upon expected growth in the sector if the proportion of EU workers remained static at the current rate of 8% that would equate to 178,000 jobs by 2035. This is potentially a substantial gap to fill in a market which already struggles to recruit and retain.

³ Skills for Care (2018) [Size and structure of the adult social care sector and workforce in England](#)

⁴ Ibid.

⁵ Care Quality Commission (2017) [The state of adult social care services 2014 to 2017: findings from CQC's initial programme of comprehensive inspections in adult social care](#)

17. The distribution of non-British EEA nationals in the social care workforce is unevenly spread across England, with much higher proportions (and therefore exposure to the effects of Brexit on workforce) in the London and the South East, South West and Eastern regions. In general terms, this means that the impact across the UK is more likely to hit dense urban areas than rural areas. An average percentage of 8% of the workforce is therefore likely to be demonstrably higher in particular areas making the risk in these areas even greater.
18. In summary, although the proportion of EU workers in the sector stands at just 8%,(with significant regional variations) when it is set against a current backdrop of high vacancy rates, high turnover, recruitment and retention issues and significant growth projections, it then becomes more important to ensure that a solution is in place and the sector is not further hampered by the loss of an important section of the workforce. This will be particularly the case in those areas with a higher proportion of EU workers. A potential further reduction in the pool of talent available as a result of Brexit will exacerbate this already major challenge.
19. A potentially unforeseen result of a no deal Brexit may be the displacement impact. We could see current care workers taking up other jobs out of the sector that are released through the lack of EU nationals. This is potentially the case when thinking about the hospitality and retail sectors which are already competitors for social care staff.
20. Workforce is an obvious primary concern for social care but there are other issues associated with Brexit to be considered when thinking about the care of older and disabled people. There is concern that being outside of the European Union could mean limited access to new medicines and a time delay in new medicines being introduced to the UK market. The pharmaceutical industry has raised concerns that leaving the EU would result in the UK losing out on some trials that might otherwise benefit individuals as we would no longer be part of the harmonised procedure across the EU. As well as medicines some assurance is also sought that there would be continued and timely access to products and devices which have been licensed by other EU countries, or any supplies that need to be imported from the EU to the UK.

Conclusions

21. The Migration Advisory Committee warning is clear. Social care is a sector that struggles to recruit and retain workers which is a cause for concern as demand is rising inexorably. Its basic underlying problem is that poor terms and conditions paid to workers in this sector, in turn caused by the difficulty in finding a sustainable funding model. They are concerned that even if special immigration schemes for social care were introduced the sector would still struggle to retain enough migrants if work in it is not made more attractive.
22. Brexit therefore has the potential of creating further pressures on a health and social care sector and system which is already under intense strain. If we think of this across the health and social care where competition for staff already exists, then any reduction to the supply pool will have a knock on effect on the whole system as health and social care are inextricably linked.

23. As ADASS we hope that the vital role and importance which social care staff play in the community is recognised. We have a committed, dedicated, skilled, compassionate and resilient workforce working in often difficult and challenging situations. Staff from the EU are a current part of the workforce and if they are to continue providing services to the most vulnerable in society then we need to retain these staff as well as attracting more in the future.
24. Brexit has to mean a new deal for British people of all ages. This is not possible without a long term sustainable financial settlement for adult social care and ADASS looks forward to the publication of the Adult Social Care Green Paper, Workforce Strategy and national Recruitment and Retention Campaign.

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