REPORT
SKILLS FOR CARE

DESK RESEARCH

MIGRANT WORKERS IN ADULT SOCIAL CARE IN ENGLAND

Prepared for:

Skills For Care

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1. INTRODUCTION

1.1. SKILLS FOR CARE

Skills for Care (SfC) is a not-for-profit organisation that aims to improve adult social care services across England by supporting employers' workforce development activities. It is part of Skills for Care & Development (SfC&D), the sector skills council for social care, children and young people in the UK. The other five members of the SfC&D Alliance are: Children's Workforce Development Council; GSCC; Care Council for Wales; Scottish Social Services Council; Northern Ireland Social Care Council.

SfC's goals are to:

- Put employers at the forefront on social care workforce issues
- Create a trained and qualified workforce providing high quality care
- Provide an expert voice on the social care workforce

1.2. RESEARCH BACKGROUND

The Government is placing new restrictions on unskilled workers which it is felt may cause more problems in recruitment and retention of social care workers, particularly migrant workers. Migrant workers have traditionally worked in social care mainly in low paid care and support roles but also in social work. As the influx of migrant workers has increased, national data collection systems have not kept pace. SfC does not collect information on migrant status although this will be done in future. Following a desk research scoping exercise in 2007, SfC requires a desk research review of this data and other relevant data on migrant workers that has been published since then. The report will summarise the key points of the information and identify gaps in current knowledge.

1.3. RESEARCH OBJECTIVES

To review existing information on migrant workers working in adult social care in England and to summarise in a report what the available information says and identify gaps in SfC knowledge.

Specifically the desk research will:

1. Review 104 identified sources from Skills for Care & Development desk research in 2007
2. Consider 2008 published sources of relevance including September 2008 report by the Migration Advisory Committee and UK Borders Agency.
3. Provide detail responses to specific areas identified in 'Topics to be explored' from SfC's research brief which comprise:
   a) Definitions of migrant workers
   b) Available statistics on numbers of migrant workers in adult social care

c) Employer attitudes to migrant workers
d) Migrant worker pay
e) Recruitment channels and processes being used
f) Terms of employment
g) Future anticipated trends in migration and use of migrant workers in adult social care
h) The quality of the available research and information

4. The geographical coverage of the research is focused on England but some UK-wide and UK country-specific data and information needs will need to be distinguished.
5. Statistical data where possible will be split into the 4 UK countries and England data to be split into the 9 English Government office regions.

1.4. METHODOLOGY

Following a briefing meeting with SfC a programme of desk research was carried out including a review of SfC supplied reports and information covering migrants in the social care workforce for adult care in England. The documents comprised research, reports and publications by Alliance partners, Government, research & policy research institutes, trade associations and other organisations and bodies. Additionally a brief scoping exercise was conducted both online and at the British Library to collect more recent information to update and add to the SfC data.

Part of the desk research included reviewing the SQW database of over 100 documents collected as part of a scoping exercise and report by SQW for Skills for Care & Development in 2007. These documents and report form a core part of this research and the SQW report is mentioned in this context in the report. Additionally up to 200 additional documents and items were reviewed in the course of the work. These include both web-based and downloaded documents with the full set included in a CD which accompanies this report.

This report includes the following Appendices:

Appendix A: Glossary
Appendix B: References used directly in the report

A CD accompanies the report including electronic files of the documents reviewed and the references above.

2. SUMMARY

1. There is no single or common definition of ‘migrant worker’ or even ‘migrant’. A range of definitions have been offered

- Migrant workers have been defined in different categories including ‘economic’, ‘aspiring’ and ‘global’ migrants. Also in terms of when they arrived in the UK i.e. ‘recent’ and ‘non-recent’
- The most frequently used definition for ‘migrant’ is someone who was born outside of the UK and comes here for the purpose to work
- There are differences in the use of the words ‘care’, ‘skills’ and ‘worker’ within the social care sector and a view that it is time to update the language of the sector overall.

2. There is no single source of information for statistics on migrant social care workers, migrant workers or even migrants in the UK.

- The absence of reliable statistics makes it difficult to understand the extent of migrant social care workers in the sector and to make informed decisions on workforce development.
- There are ten principal Government statistics instruments covering migrants and migrant workers including both new and existing procedures which the Government has revamped.
- The Labour Force Survey (LFS) remains the most frequently referenced by social care researchers for determining statistics for migrant social care workers although it has weaknesses.
- Skills for Care’s (SfC) own National Minimum Data Set for Social Care (NMDS-SC) will in future collect information on migrant status specifically in the social care sector.

3. There are a number of estimates put forward by research organisations on migrant social care workers.

- Migrants account for up to 18% (135,000) of all care workers compared to the entire UK labour force (13%) in social care.
- This has more than doubled in the past ten years and reached a high of up to 28% in 2006 when it peaked.
- It is estimated that up to 30,000 senior care workers hold work permits representing up to 30% of all care workers in the adult social care workforce
- About 120,000 migrant workers have entered the UK since the early 2000s who work/worked as care workers.
- The migrant nurse care workforce has been in decline since the Government imposed restrictions in 2006. They account for up to 35% of the nursing workforce in older adult care.
- Migrant care workers come mainly from Poland, Zimbabwe, Philippines, Nigeria and India. Migrant care nurses come mainly from India, Philippines, Zimbabwe and South Africa.
- Females dominate in the migrant care workforce with recent migrants mainly younger workers.
- London and the South East dominate in terms of the number of migrant care workers in adult care with Scotland and York & Humber showing the lowest

numbers. However with migrant nurses in adult care there is a high number outside of London and the South East in the North East and Northern Ireland.

- The private care sector leads in the employment of migrant workers. The percentage of recent migrants working in this sector is even higher at 79% of total recent migrants.
- Slightly more migrant care workers work in elder care in nursing homes (about 22%) followed by home care agencies (about 19%) and then care only homes (about 17%).
- More migrant nurses are working in elderly care in nursing homes (about 36%) followed by care only homes (about 29%) and home care agencies (about 22%).
- About 4 in 10 migrant care workers belong to categories that are under immigration control.

4. Migrant care workers are more qualified on average than UK-born staff with 67% having NVQ3 or higher. They are also more likely to be enrolled in training courses to further their qualifications.

5. In November 2008 the government introduced the Tier 2 Points Based Scheme (PBS) shortage lists for senior care workers from outside the European Economic Area (EEA).

- Applicants must be in possession of a Certificate of Sponsorship issued by a licensed employer which confirms that the job is at NVQ Level 3 or paid at or above the appropriate rate for the job, £8.80/hour although transitional measures are currently in place.
- Care home employers and trade associations particularly are worried that the new restrictions will severely restrict migrant senior care workers in future who fall outside the permitted criteria mainly on hourly pay.

6. There is limited information about the length of stay of migrant care workers. Some consensus of information indicates that:

- Care workers from Zimbabwe or South Africa are usually older, sometimes with a family and may usually decide to settle in the UK.
- Care workers from A8 countries are younger and use a start in social care as an ‘entry point’ where they will move from, sometimes after two years, to other work.
- Staff with visas would usually stay the full length of the visa.

7. There is very little information on illegal migrant care workers and this relates to 2006 and earlier.

- UK immigration and employment laws have been tightened significantly since then placing the onus of responsibility on the employers with heavy fines and imprisonment which appears to have been effective.
- It is believed that illegals exist within the migrant social care community mainly by default than intent i.e. through migrants’ or employers’ failure to understand or respond to registration requirements correctly.

8. Generally the view among employers is very positive towards migrant labour that is seen to help UK business expand.

- Migrant social care workers are perceived as enthusiastic, hard working and

generally more qualified, younger and had less time off work than UK-born colleagues. They provide a high quality of service in the social care sector.

- Migrant care workers were not specifically targeted and chosen by employers but instead because employers found it difficult to recruit indigenous workers who were as motivated and interested in the same jobs which were perceived in the local labour market as low skilled and low paid.
- There are no employer-specific negative attitudes towards migrant care workers but more towards the difficulties administratively in recruiting them, obtaining references and their overall communication skills.
- The main problem employers cite is communication where English is not their first language.
- Among migrant care workers themselves, there is the feeling at times that they have poor media coverage and people harbour prejudices towards them.
- There is little evidence of disputes between migrant social care workers and non-migrant workers.

9. The principal strengths and weaknesses of employing migrant social care workers:

- Principal strengths:
  - Willing pool of labour that wants to work in care sector
  - Enthusiastic and set an example to other staff
  - Bring richness of another culture to an increasingly diverse cultural setting
  - Higher than average qualifications and very receptive to training and qualification enhancement
  - Pleasant, eager staff that are perceived positively by employers, other staff, residents and families.
- Principal weaknesses:
  - More time consuming and difficult administratively to recruit and employ because of formalities and work required for visas, registration and checking references
  - Some non-migrant staff think migrant eagerness to ‘do anything’ limits their chances to career advance
  - Cultural and language differences can cause misunderstandings among other staff and residents
  - Language issues can be a major problem
  - Over qualification can lead to early job dissatisfaction and desire to change jobs sooner than later.

10. There is a lack of hard data on the pay of overseas workers in the social care sector although the NMDC-SC will incorporate information in future.

- There is some evidence of lower pay rates among migrant workers generally and from comparative studies of NMDS-SC pay data but information is still limited and very generalised.
- The restrictions placed on migrant social care workers makes it difficult to change jobs and move flexibly between job offers. This leads to less differentiation between them and unqualified local workers possibly resulting in lower pay for comparative job qualification levels against UK-born workers.
- Analysis of LFS data suggests that recent migrants are more represented in the

lowest income levels in care jobs.

- Despite the introduction of the National Minimum Wage (NMW) a significant proportion of both types of workforce are still paid below NMW rates: 22% of UK-born workers and 31% of recent migrants.
- A survey found a higher proportion of Internationally Recruited Nurses (IRN) working in care were on lower pay bands than their UK counterparts.

11. Social care employers use a range of methods to recruit employees including agencies, local and overseas, Jobcentre Plus, local newspapers, job/recruitment fairs, leaflets, web-sites, local radio and events at local universities. Word of mouth is also effective within migrant communities.

- Some employers prefer to source migrant workers from the local labour market with smaller employers tending to use recruitment agencies for permanent and short-term employment needs.
- There was no information found in the literature search on the use of specialist recruitment agencies outside of overseas recruitment agencies.
  - A number of employers use overseas agencies to help filter potential candidates before visiting and interviewing them in the source country.
  - Larger employers recruited directly overseas. Some used EURES.
  - Some employers report of poor experiences using overseas recruitment agencies including suggestions of ways to 'underpay' them and creating expectations in the minds of the applicants that were not realistic.
- Nursing care staff are no longer a qualifying shortage occupation for international recruitment and reliance is placed on recruitment within the UK.

12. In future the main factors which will impact on the recruitment of migrant social care workers include:
    - The Government PBS restrictions
    - Ethical recruitment issues
    - Pay and career prospects in the sector
    - Encouragement of local labour to enter the social caring profession.

13. Migrant social care workers may be employed directly as an employee, or as self-employed or through an agency as agency staff.

- Student migrant care workers from outside the EEA can work up to 20 hours per week during term time. Nursing students can work beyond 20 hours if the job is part of their course. EEA and UK students have no restrictions.

14. There was no evidence to suggest migrant care workers worked excessively long hours although on the whole they do work longer hours than UK-born care workers.

- Fewer work part time with 31% of migrant care workers in adult care compared with 52% of UK-born care workers.
- It was found that overseas staff were more likely than local workers to voluntarily sign agreements to work longer hours.

15. Employers confirmed they followed standard procedure in induction and training of both migrant and non-migrant care workers without emphasis on one or the other.

- The extent of the induction period varied from two days to two weeks and was more informal in practice than formal.
- Other training also varied among employers with some employers preferring to let workers learn ‘on the job’ particularly for the lower or un-skilled jobs.
- A REC survey found that 87% of overseas recruitment agencies helped develop the skills of nursing candidates by providing training directly.

16. There is overwhelming agreement among employers that English language training needs to be further supported among their migrant care workers or the quality of care will suffer.

- They need further help with pronunciation, grammar, writing and listening skills.
- Employers are seeking more ESOL funding from the government.
- An independent survey among employers of migrant workers generally found that two-thirds of them did nothing to help their workforce develop English language skills

17. Future trend scenarios appear to suggest four major themes to apply to migrant social care workers:
    - Greater impact of PBS and immigration controls affecting all migrant workers
    - Continuing accelerating demand for care workers in an ageing society restricted by funding
    - On-going debate on whether to rely on migrant care workers or to invest in local UK labour for longer term
    - The need to improve training particularly in English and communications.

CONCLUSIONS AND RECOMMENDATIONS

There is a broad range of literature describing research on migrant social care workers and more research is underway. Nevertheless more information is required specifically in the form of statistical data. The NMDS-SC in future will include migrant data which should help go a long way toward meeting the needs in addition to revamped Government statistical instruments.

The key messages for adult social care employers in optimising use of migrant workers now and in future appears to be mainly in providing further help in training specifically in English language skills and communications. Additionally it would encourage migrant applicants if a fact sheet of information was offered early on covering the job and the community with cultural information including social life and what, in a very practical way, the applicant is likely to expect.

Employers could further encourage career enhancement to help persuade migrant social care workers to remain in the sector and thereby to contribute in a more skilled way in future through improvements in NVQ levels and other qualification courses and achievements. Employers need to stay aware of changes in immigration rules relating to their employees and help by advising them in the completion of the necessary formalities. Greater dissemination and broadcasting of information to the

employers about immigration policy and rules is required from the Government.

It may help SfC to keep abreast of research being produced in this area in future to identify those researchers and institutes/organisations leading in the area of research in migrant social care research and to develop and maintain close links with them.