2. How many of my staff are likely to be carers?
1 in 8 workers in the UK are currently combining paid work with unpaid care. Two-thirds of these people are working full-time and a third are working part-time. This means that in any organisation employing 100 people, there are likely to be at least 12 carers.

Within adult social care organisations the likely incidence of unpaid carers in the workforce is:

<table>
<thead>
<tr>
<th>Type of employer</th>
<th>Potential number of unpaid carers in the workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>Micro employer (1-9 staff)</td>
<td>1</td>
</tr>
<tr>
<td>Small employer (10-49 staff)</td>
<td>1-6</td>
</tr>
<tr>
<td>Medium employer (50-249 staff)</td>
<td>6-21</td>
</tr>
<tr>
<td>Large employer (250+ staff)</td>
<td>21+</td>
</tr>
</tbody>
</table>

These figures represent a minimum number of carers in a workforce, as we know that the number of carers is generally higher than reported. The peak age for unpaid caring is 45-64, arguably the time when many employees will have gained vital skills and knowledge and be a valuable asset to their workplace. Within adult social care almost half of the workforce (46%) fall into this age bracket.

Unpaid caring affects both men and women: 47% of economically active unpaid carers in the UK are men and 53% are women. Of these, men are more likely than women to be employed full-time (62% vs 38%). The picture with regards to the social care workforce is somewhat different though as according to National Minimum Data Set for Social Care (NMDS-SC) data more than eight out of ten workers are female. Two in five women in the sector work full-time, a third work part-time and the remainder are contracted to work on a temporary basis (i.e. bank, pool and agency staff). This profile of the social care workforce (a high majority of women working part-time) indicates that there are likely to be significantly higher numbers of working carers across social care as a whole than in some other sectors.

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7 Taken from bespoke analysis of Skills for Care's National Minimum Dataset for Social Care (NMDS-SC).
8 Carers, Employment and Services Report Series (2007), University of Leeds for Carers UK.
9 Taken from bespoke analysis of Skills for Care’s National Minimum Dataset for Social Care (NMDS-SC).
Identification of the prevalence of carers is complex, partly because unpaid carers who are in paid employment can also be ‘hidden’ and this could be for a number of reasons. They may not see themselves as a carer (but rather as a wife, husband, partner, friend, daughter or son) or they may not be comfortable sharing information about their caring responsibilities with their employer because they fear that their commitment to their job will be questioned. Also, employees can often become carers whilst they are employed by an organisation, thus ‘slipping’ into a caring role which goes un-noticed by the employer or perhaps the employee themselves.

‘It would help if on your application form there was something there to say you’re a carer, otherwise you’ve actually got to go and tell someone – which you don’t always feel comfortable doing.’

Carer

Those working in social care and undertaking caring responsibilities can often fail to recognise that they are, or have become carers themselves. If they do recognise themselves as carers, it can be problematic asking for support or help through the teams or services that they are part of as an employee. For example, how easy might it be for the operations manager of a carers support organisation to ask for support as a working carer herself? How difficult might it be for a social worker to ask for a Carers Assessment, knowing that a fellow colleague may be responsible for doing this with him?

In East Sussex County Council (ESCC), it had been recognised that staff had been reluctant to identify and acknowledge their caring role and been put off by believing that ‘everyone would know their business.’ The Council reviewed it’s Flexible Working Strategy, including a Toolkit for Managers to support staff with caring responsibilities. This includes a section on ‘Support to access a Carers Assessment; why have one and where to go to get one’.

Within the guidance it is acknowledged that social care staff with caring responsibilities would prefer to have their assessment completed by someone outside their own team environment. The strategy states that ESCC will inform staff of their statutory right to request a Carers Assessment, information on carers services and support and encourage staff to access this. Staff are assured that in all cases issues of confidentiality, professional boundaries and conflict of interest will be considered. ESCC advise managers to ensure that the staff member should not know the social worker undertaking the assessment or if they do then it should be in a professional capacity only. This means that often the Carers Assessment will be undertaken by a social worker from another team/geographical area.
Similarly, whilst carers often do not declare themselves, employers can overlook their possible existence. This may be due to a lack of awareness of carers or of caring as an issue, or because of assumptions which are often made about carers such as:

- It is assumed that carers are female and of a ‘certain age’
  
  **FACT:** 42% of carers are men; six out of ten male carers work, 90% of these full-time.\(^{11}\) 
  It is estimated that there are over 229,000 young adult carers aged 18-24 in the UK.\(^{12}\)

- It is assumed that those who find themselves caring who are from a Black, Asian or Minority Ethnic group (BAME) are doing it ‘willingly and out of duty’.
  
  **FACT:** BAME carers provide more care proportionately than White British carers, putting them at greater risk of ill-health, loss of paid employment and social exclusion. This has been highlighted in recent research\(^{13}\) which also reveals that the majority of BAME carers, who comprise 10% of carers in England, are of working age. Certain groups also experience greater levels of isolation, namely Pakistani and Bangladeshi carers.

- It is assumed that carers will not be found in the more senior roles within an organisation or indeed within certain prestigious professions.
  
  **FACT:** Caring can happen to any of us, at whatever level in the workplace, although carers may often end up in lower paid jobs, if unsupported, because of difficulties in combining work and caring.

Studies\(^{14}\) have shown that more than half of carers caring for people who required a lot of support felt they had to give up work to care. Many retired early due to caring responsibilities, an average of 8 years early. Carers also lost an average of £11,000 per year in earnings because of giving up work, cutting their hours or taking a more junior job.\(^{15}\)

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\(^{11}\) Carers, Employment and Services Report Series (2007), University of Leeds for Carers UK.  
\(^{12}\) Becker F and Becker S 2008 Young Adult Carers in the UK. London. The Princess Royal Trust for Carers.  
\(^{13}\) Half a Million Voices: Improving Support for BAME Carers, Carers UK, 2011.  
\(^{14}\) Real Change, Not Short Change, Carers UK, 2007.  
\(^{15}\) Real Change, Not Short Change, Carers UK, 2007.
Becoming a carer is not dependant on or triggered by social background, job role or location; it can and will happen to most of us in our lives at some point, either temporarily or for a longer period. If unsupported, it will also have an impact on career, income and health.

Think about your workforce, do you know the answer to the following questions?

- How many unpaid carers are there likely to be in my workforce either now or in the future?
- Have I made assumptions about who these might be and why?
- Do I know who the carers are in my workforce?
- Would those people necessarily identify or recognise themselves as carers?
- Have some people’s circumstances changed to mean they have become a carer since they begun work with the organisation?
- Do I know if people have reduced their hours or retired early due to their caring responsibilities?
- How many people have asked for a career break and never returned? What were their reasons?
- Do I know if people have left my workforce due to their caring responsibilities?