

# Individual employers and the personal assistant workforce

March 2021

## Acknowledgments

Skills for Care would like to thank all of the individual employers and personal assistants that engaged with this survey. The success of this survey, and the impact that the results can make, are dependent on these responses, and this year there was another excellent response rate. Thanks also to Alex Wade at Mark Bates Ltd, who assisted in producing and distributing this survey.

This report has been researched and compiled by Skills for Care's Workforce Intelligence Analysis team: Will Fenton, Gary Polzin, Roy Price, Rosy McCaffrey and Tanya Fozzard.

Feedback on any aspect of this report is welcomed as it will help to improve future editions. Please contact our analysis team: [analysis@skillsforcare.org.uk](mailto:analysis@skillsforcare.org.uk).

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## COVID-19

The majority of the information in this report was collected in January/February 2021 and therefore refers to the situation at that point in time, during the pandemic.

Staff turnover rates and sickness rates are completed 'over the 12 months prior to completion' so contain information for some months before the pandemic as well as during it. Skills for Care will continue to monitor the impact of COVID-19 and Brexit on a monthly basis on dedicated webpages.

<https://www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/Topics/Topics.aspx>

## Key findings

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### Individual employers



**What is an individual employer? An individual employer is someone who needs care and support and who directly employs one or more personal assistant (PA) to meet their needs.**

- **Around 230,000** adults, older people and carers were **receiving direct payments** in 2020. Skills for Care estimates that around 70,000 of these were directly employing their own staff<sup>1</sup>.
- The estimated **number direct payment recipients employing PAs has remained stable** at around 70,000 between 2014 and 2020. This figure had increased by around 35,000 from 2008 to 2013, in line with the increased take up of direct payments over the same period. The number of PAs employed by direct payment recipients has followed the same trend.
- Individual employers had, on average, 1.85 PAs each, creating around 130,000 jobs.
- The **average turnover rate of PAs was 18.2%**. This was considerably lower than the turnover rate for care workers in the independent sector (38.1%).
- **Family/friend PAs were less likely to leave** (14.3%) than non-family/friend PAs (22.9%). This may be influenced by the relationship between PAs and their employer.
- The **average vacancy rate of PAs was 7.9%**. This was the same as the vacancy rate amongst care workers (8.3%).

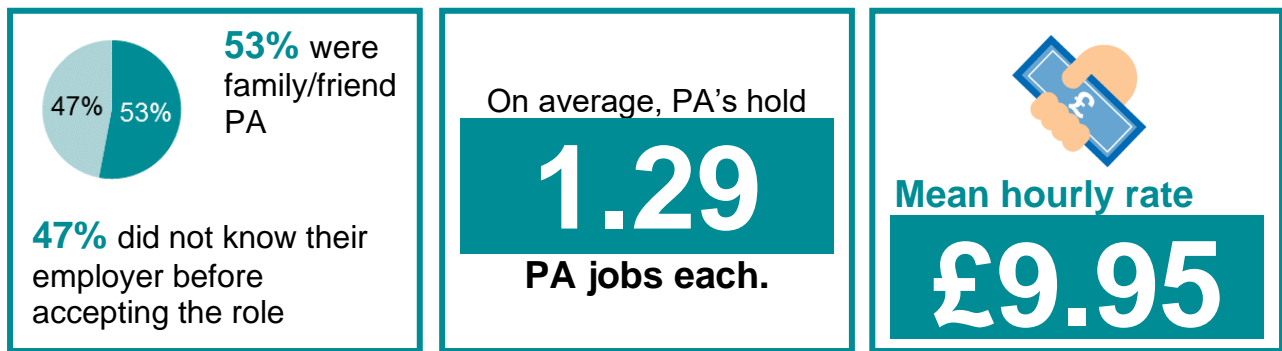
Skills for Care has a range of resources to support people employing their own care and support staff.<sup>2</sup>

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<sup>1</sup> The estimates on the *total* number of individual employers and PAs, only include those in receipt of social care direct payments from a local authority to employ PAs. We recognise that some people also employ PAs via other funding streams, such as personal health budgets, or by using their own funds – this data is not collected anywhere so we're unable to include them in these estimates.

<sup>2</sup> <https://www.skillsforcare.org.uk/Recruitment-retention/Employing-your-own-care-and-support/Employing-your-own-care-and-support.aspx>

## Personal assistants



**What is a personal assistant (PA)?** A PA, for this report, is employed directly by a person who needs support. They can also be employed by a family member or representative when the person they are supporting does not have the physical or mental capacity to be the employer. A PA works directly with the individual they are supporting, in a person-centred way, to enable them to live their life according to their wishes and interests.

The following information is derived from the 2021 Skills for Care survey data and is compared to care workers in the independent sector as at March 2020.

- Around 53% of PAs were family or a friend of the individual employer. The other 47% did not know their employer before accepting their PA role.
- PAs had, on average, 1.29 PA jobs (21% of PAs held more than 1 PA job).
- The most common areas of support that PAs provided were support with personal care (68%), closely followed by household duties (67%) and mobility/moving and assisting (65%).
- **Around 20% of PAs were on zero-hours contracts.** This was much lower than care workers in the independent sector (35%).
- PAs, on average, had more experience in their role (4.3 years), compared to care workers (3.1 years). Also, **PAs had considerably more experience in the sector (8.6 years)** compared to care workers (6.5 years).
- On average, **PAs took fewer sickness days** (1.9 days) in the previous 12 months than care workers in the independent sector (4.8 days).
- The **mean hourly pay rate for PAs was £9.95** (as at February 2021). This was much higher than the mean hourly rate for care workers in the independent sector (£9.20 as at December 2020).
- PAs were **less likely to hold a relevant social care qualification** (37%) compared to care workers (47%).

Skills for Care has a range of resources to support personal assistants, including an information hub<sup>3</sup>.

<sup>3</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Working-as-a-personal-assistant/Working-as-a-personal-assistant.aspx>

## 1. Introduction

It is crucial that the adult social care sector has clear, robust workforce intelligence about its size and shape; this will help to reinforce its position as a major part of the economy. Good quality information about the workforce is vital in helping to improve the planning and quality of social care services, which will, in turn, improve outcomes for the people who use these services, both now and in the future.

### About Skills for Care

Skills for Care helps to create a skilled, valued and well-led adult social care workforce. We support adult social care employers and individuals employing their own staff, to deliver what the support people need and what commissioners and regulators expect. We do this by helping employers get the best from their most valuable resource - their people.

Using our workforce intelligence, in conjunction with what we hear from employers, we understand the adult social care workforce, its strengths, issues (both present issues, future risks and opportunities). Based on this understanding, we provide practical support to individual employers who employ their own care and support, for people who are working as a PA and for organisations that support individual employers and PAs.

For more information please see the Skills for Care information hub for individual employers and personal assistants<sup>4</sup>.

### Skills for Care is the leading source of adult social care workforce intelligence

Our expertise comes from the workforce intelligence that we collect in the Adult Social Care Workforce Data Set (ASC-WDS), formerly the National Minimum Data Set for Social Care (NMDS-SC), from our experience of analysing and interpreting adult social care data, from our network of Locality Managers based throughout England, and from user research, talking with, and learning from, employers. This workforce intelligence expertise is at the centre of everything we do at Skills for Care.

For more information about the ASC-WDS and our workforce intelligence please see chapter four of this report.

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<sup>4</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Information-for-individual-employers/Information-for-individual-employers.aspx>

## Personal budgets and direct payments

People are usually given a personal budget to spend if their local council decides they're eligible for help with any social care and support. The money in their personal budget can be paid directly to them so they can make decisions about how it's spent. This is known as a direct payment.

Direct payments are the main mechanism to deliver the personalisation agenda for adult social care in England. Personalisation was a step change from the traditional service-led approach of care, to offering choice and control to people, with an increased emphasis put on wellbeing and lifestyle.

The number of direct payment recipients increased rapidly, from around 65,000 in 2008, to around 230,000 by 2020. Skills for Care estimates that around 70,000 of these people are directly employing their own staff, creating around 130,000 PA jobs.

Skills for Care has a range of resources to support people employing their own care and support<sup>5</sup>, including an information hub<sup>6</sup> and funding for training of individual employers<sup>7</sup>.

## Skills for Care survey research

Skills for Care, as the leading source of social care workforce intelligence has continued to complete a research study in this field to replicate the success of the previous individual employer and PA surveys (done in 2017, 2019 and 2020). We have used the results of this survey and data from Adult Social Care Workforce Data Set (ASC-WDS), formerly the (NMDS-SC), to produce this report. The survey was designed to mirror data in the ASC-WDS, so we could compare the PA workforce to care workers and the wider adult social care workforce. However, we do acknowledge that care workers and PAs have different roles and ways of working.

Skills for Care surveyed approximately 20,500 individual employers and their PAs, via one national organisation that supports them, as well as an online survey. There were 1,636 individual employer and 1,915 PA responses from people with varying care needs, ages and from each region of England. This included 1,452 employers solely in receipt of a direct payment from a local authority. The remainder received a combination of direct payments from the local authority, self-funding and/or an NHS personal health budget. This has created a strong foundation for producing statistics about this part of the sector.

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<sup>5</sup> <https://www.skillsforcare.org.uk/Recruitment-retention/Employing-your-own-care-and-support/Employing-your-own-care-and-support.aspx>

<sup>6</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Information-for-individual-employers/Information-for-individual-employers.aspx>

<sup>7</sup> <https://www.skillsforcare.org.uk/Learning-development/Funding/Individual-employer-funding/Individual-employer-funding.aspx>



## Impact of this research and report

The information collected in, and insight derived from, this research is used by the Department of Health and Social Care and Skills for Care to help make decisions, better support, and help plan for the future of this valuable part of the adult social care sector. Results for this report help us to better understand how the PA workforce operates and how best to support both employers and PAs in the sector.

In previous years we asked academic and policymaking colleagues how this report has had an impact on their work and the sector.

### **Claire Bickford from Penderels Trust said:**

*“Penderels Trust have used the report to influence the work that we do. From a new business writing perspective the stats are particularly useful when raising the importance of having good quality support services in place, what these services should look like and the percentage of the population that they apply to. I use the report in a similar way through the work that we do with our PA Recruitment team. It’s good to have meaningful quantitative data in one place and under the SfC brand it holds credibility.”*

### **Matthew Egan from Unison said:**

*“I have referenced the stats, particularly around turnover rates, prevalence of zero hours contracts and pay rates and how they contrast with the experiences of other care workers when contributing at external meetings about the care workforce. Generally speaking the Skills for Care workforce stats are easily the most authoritative out there, particularly given how fragmented the sector is, and they are very useful.”*

### **Andrew Walker, and Individual Employer and Consultant said:**

*“I have used the findings to inform a recent presentation given at a PA Framework local network event in London, uses the findings to give local advice and influence change, for example, I work locally with the Clinical Commissioning Group (CCG) and campaign for improvements.”*

### **Mark Wilberforce from ‘Social Policy Research Unit, University of York & NIHR School for Social Care Research’ said:**

*“We have used this report to develop our research plans and proposals for advancing our social care studies, ensuring that we built upon the existing knowledge-base. We also used the statistics directly within research applications since they are authoritative and credible source of data. More generally, I have used the figures in briefing and research presentations, as well as in lecturing social work and social policy students.*

## 2. Individual employers

Information from NHS Digital shows that around 230,000 adults, older people and carers were receiving direct payments from local authorities, in England, in 2020. Skills for Care estimates that approximately 30% of these, or 70,000 individuals, directly employed their own staff <sup>8</sup>

**Individual employers, on average, employed 1.85 personal assistants (PA) each, creating around 130,000 PA jobs.**

‘The size and structure of the adult social care sector and workforce’ report includes information about direct payment recipients and PA job trends over a ten-year period.

The direct payment recipient market is still relatively new and has continued to evolve over recent years. The estimated number of individual employers, using direct payments, has remained stable between 2014 and 2020 (at around 70,000). This figure had increased by around 35,000 from 2008 to 2013, in line with the increased take up of direct payments over the same period. The number of PAs employed by direct payment recipients has followed the same trend.

We recognise that some people also employ PAs using their own funds or via other funding streams. However, there is no available information on this part of the sector.

### 2.1. Recruitment and retention

It is vital that the adult social care sector can attract and retain staff with the appropriate skills, values and behaviours, to raise and deliver quality standards for the people who use social care services.

Skills for Care research found that employers using values-based recruitment can attract staff who perform better, with lower sickness rates, and greater levels of success in developing the skills needed in their roles. This approach may also result in reducing the cost of recruitment and training, as well as reducing turnover. For further information on recruiting for values please visit the Skills for Care website.<sup>9</sup>

#### 2.1.1. Leavers and staff turnover rates

The turnover rate of PAs was 18.2%. This was considerably lower than care workers in the independent sector, which was 39.1%. There could be several reasons for

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<sup>8</sup> [www.skillsforcare.org.uk/sizeandstructure](http://www.skillsforcare.org.uk/sizeandstructure)

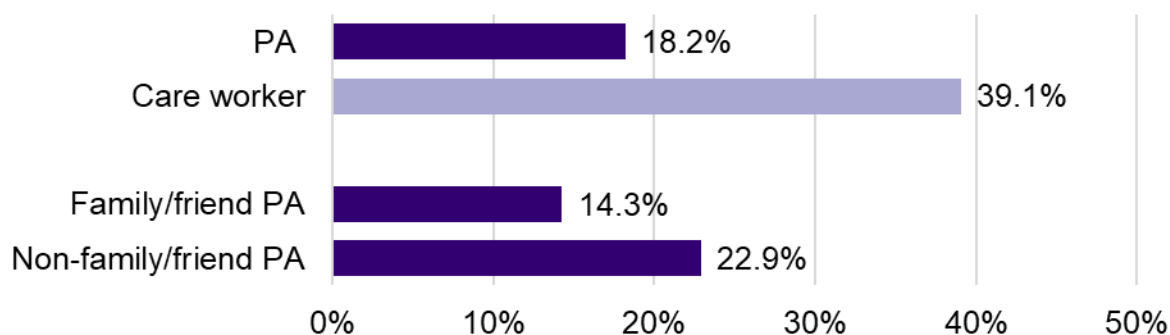
<sup>9</sup> [www.skillsforcare.org.uk/vba](http://www.skillsforcare.org.uk/vba)

this, including the close relationship between PAs and their employers, differences in the work carried out by the two roles, and better terms and conditions for PAs. For example, PAs had higher pay rates (see Chart 17) and a lower reliance on zero-hours contracts (see Chart 6), which could result in better retention.

The turnover rate of PAs employed by family or friends was lower (at around 14.3%) than those who did not know their employer before starting their role (at around 22.9%). This reflects findings from our 'Secrets of success' report, 2017,<sup>10</sup> which found that many individual employers who had low turnover rates would recommend employing people that they already know.

### Chart 1. Turnover rate of personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2019/20

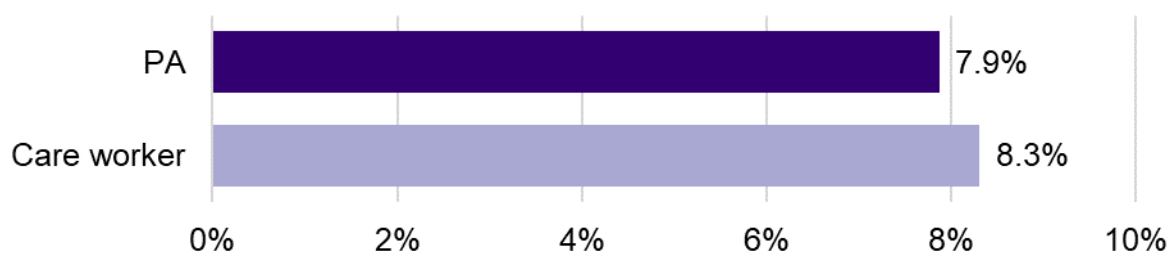


#### 2.1.2. Vacancy rates

Chart 2 shows that the vacancy rate for individual employers was 7.9%. This rate was similar to the rate for care workers (8.3%) in the independent sector, where recruitment is an ongoing issue.

### Chart 2. Vacancy rate of personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2019/20



<sup>10</sup> [www.skillsforcare.org.uk/Secretsofsuccess](http://www.skillsforcare.org.uk/Secretsofsuccess)

Skills for Care has published a toolkit<sup>11</sup> to support individual employers, this includes information about recruiting PAs<sup>12</sup>, writing a job description, advertising and interview for the role.

The Government recognised the recruitment and retention challenge in adult social care and, the next phase of the Department of Health and Social Care's (DHSC) national adult social care recruitment campaign launched in early February 2021. The campaign is designed to inspire people with the right values and attitude to consider a career in care.<sup>13</sup>

The campaign will highlight the rewarding, varied and flexible roles available across the sector, as well as show people that all you need to start are the right qualities, as there's training for everything else.

## 2.2. Training, development and support

### 2.2.1. Finding and arranging training

We asked individual employers about the ease of finding and arranging training for their PAs, and who provided this learning. **About two fifths of Individual Employers (41%) that responded found it difficult to find and arrange training for their PAs.**

**Almost three quarters of respondents (72%) showed they had not accessed training or that training was not applicable to them.** Of those that did arrange training for their PAs,

**Chart 3** shows how this was accessed. Over a third (39%) said they used their local authority, and 29% said they used 'direct payment support/user led/ voluntary sector organisations'.

The most common responses in the 'other' category were accessing training through family or simply that their staff were already trained when they joined. The latter suggests that the skills and experience of workers are retained within the adult social care sector, despite the high independent sector turnover outlined above. For more information on the experience in sector of PAs, as a comparison, please see Chart 9.

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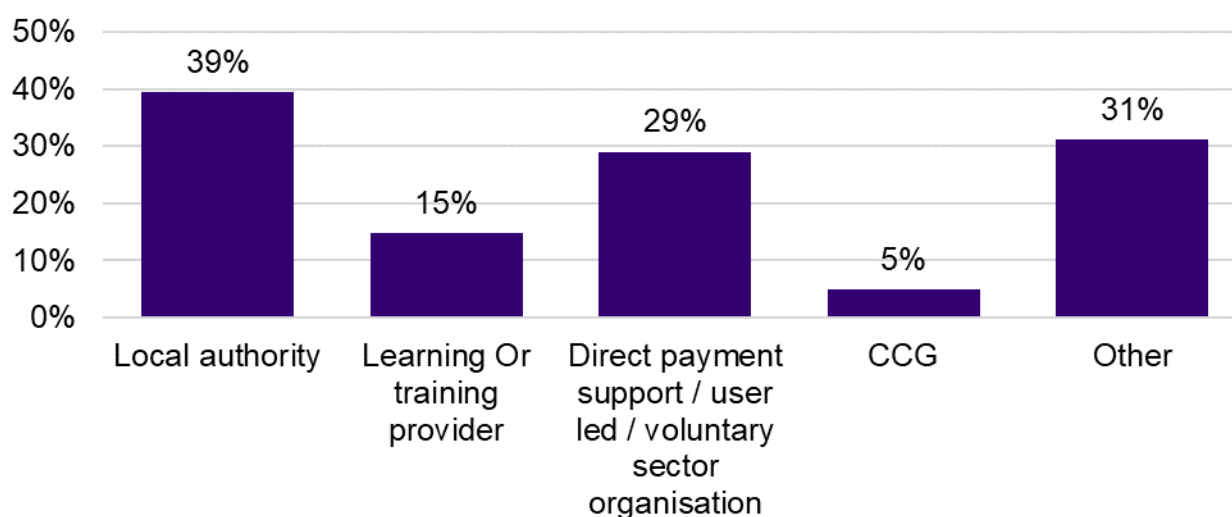
<sup>11</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Information-for-individual-employers/Information-for-individual-employers.aspx>

<sup>12</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Information-for-individual-employers/Recruiting-a-PA.aspx>

<sup>13</sup> [www.everydayisdifferent.com](http://www.everydayisdifferent.com)

### Chart 3. How individual employers accessed training

Source: Skills for Care survey, 2021



Individual employers can apply to Skills for Care for funding to pay for training for themselves and their PAs<sup>14</sup>. And user led organisations can apply to Skills for Care for a grant to deliver training to individual employers and PAs<sup>15</sup>.

#### 2.2.2. Accessing information and support as an employer

We asked individual employers about how they accessed information and support as an employer. Employers could select more than one, so percentages add up to more than 100%.

Half had accessed information via their local authority. Almost half (46%) from 'direct payment/ user led/ voluntary sector organisation' and 9% from a peer network. Over half (57%) of individual employers said that they were satisfied with the level of information and support that they could access. A further 28% were 'neither satisfied nor dissatisfied', which highlights an opportunity for further improvements.

#### 2.2.3. Individual employer training

<sup>14</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Funding-for-training/Funding-for-training.aspx>

<sup>15</sup> <https://www.skillsforcare.org.uk/Learning-development/Funding/User-led-organisation-funding/User-led-organisation-funding.aspx>

We also asked individual employers if they had undergone any training to help them in their role as an employer. The majority of employers said no (90%). Of those that did, 28% had a formal qualification, almost a quarter (24%) had specific subject awareness training and almost fifth (18%) had a structured awareness training.

### 3. Personal assistants

Skills for Care estimates that there were approximately **130,000 PA jobs for direct payment recipients across England** in 2020.

Please note, personal assistants employed by people only using their own funds or funding streams other than direct payments are not included in this estimate. There are not any national collections on these employers and therefore their PAs cannot be included in this estimate. There is evidence to suggest however that using direct payments as funding source is the most common funding source for employing PAs.

Respondents to Skills for Care's survey were either in receipt of a direct payment only (84%), self-funding their PA only (2%), or a mixture of both and other funding sources including personal health budgets (16%). Those solely using personal health budgets have been included in this report.

**Around 53% of the PAs who responded to the survey were family or a friend of their employer, and the other 47% did not know their employer before accepting their PA role.** For the purposes of this report, those that did not know their employer before starting work are called 'non-family/friend'.

Skills for Care has a range of resources to support personal assistants on its information hub<sup>16</sup>, including information on being a PA, your local PA register or support organisation, statutory rights and entitlements as a PA and a practical guide to learning and development.

#### 3.1. Employment overview

**PAs had, on average, 1.29 PA jobs each.** This means that the 130,000 PA jobs were carried out by around 100,000 people. The following section includes information about the support that PAs provide, their employment status and the hours they work.

##### 3.1.1. Support provided to employer

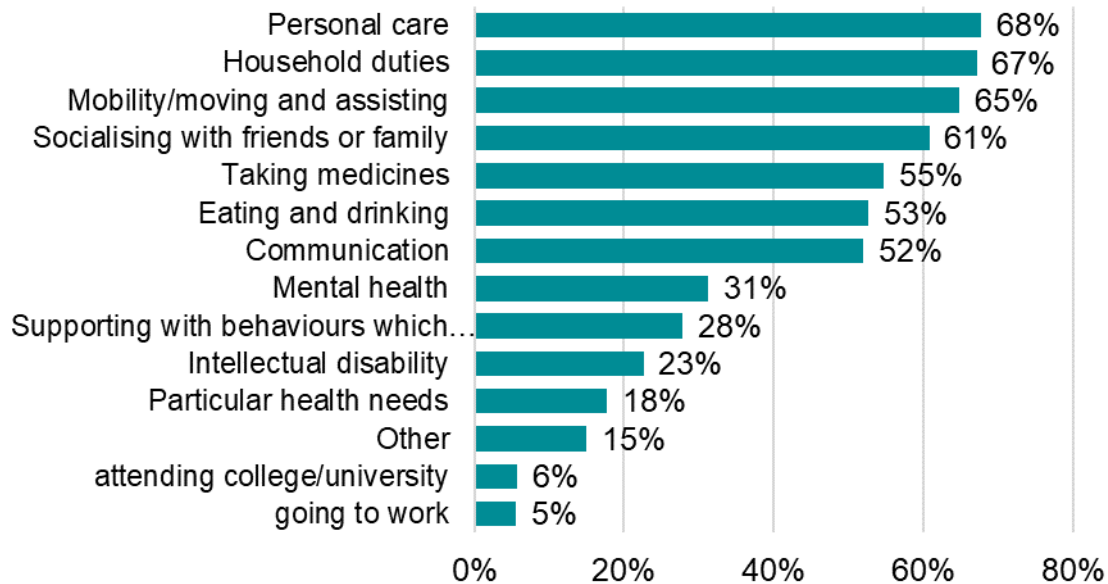
We asked PAs about the support that they provide. They could select more than one response and, as such, the total in Chart 4 exceeds 100%. The most common support provided was with personal care (68%), closely followed by household duties (67%) and mobility/moving and assisting (65%).

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<sup>16</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Working-as-a-personal-assistant/Working-as-a-personal-assistant.aspx>

### Chart 4. Support personal assistants provided their employer with

Source: Skills for Care survey, 2021

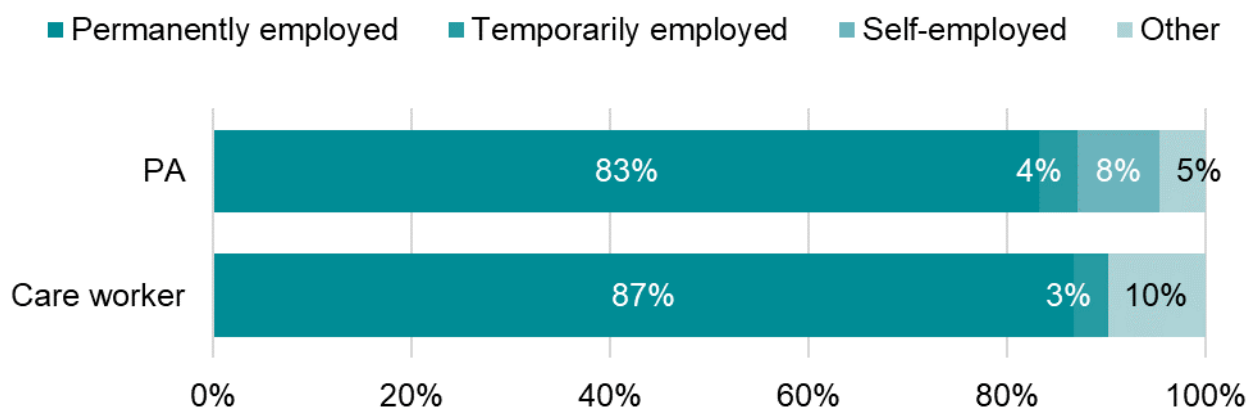


#### 3.1.2. Employment status

The majority of PAs (83%) were employed on a permanent basis, which was lower than care workers in the independent sector (87%). Chart 5 shows the proportion of PAs employed with each status type, compared to care workers.

### Chart 5. Employment status of personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2019/20



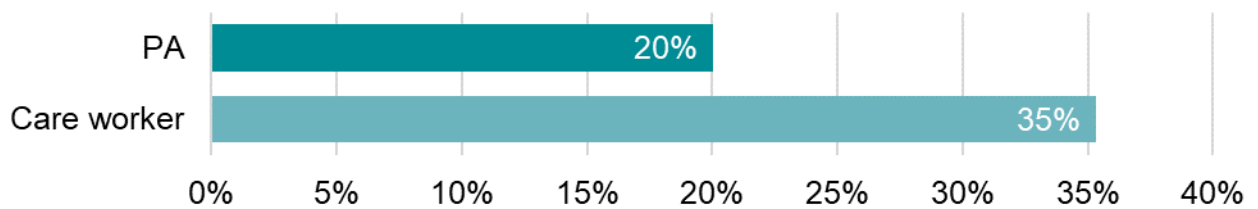


### 3.1.3. Zero-hours contracts

Around a fifth (20%) of PAs reported that they were on zero-hours contracts (also known as no guaranteed hours). This is lower than the proportion of care workers on zero-hours contracts (35%), as shown in Chart 6.

#### Chart 6. Zero-hours contracts for personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



Some adult social care employers, especially domiciliary care providers, use zero-hours contracts to deal with fluctuating demand. This is less likely to be a problem for individual employers, which could contribute to the lower usage of these contracts.

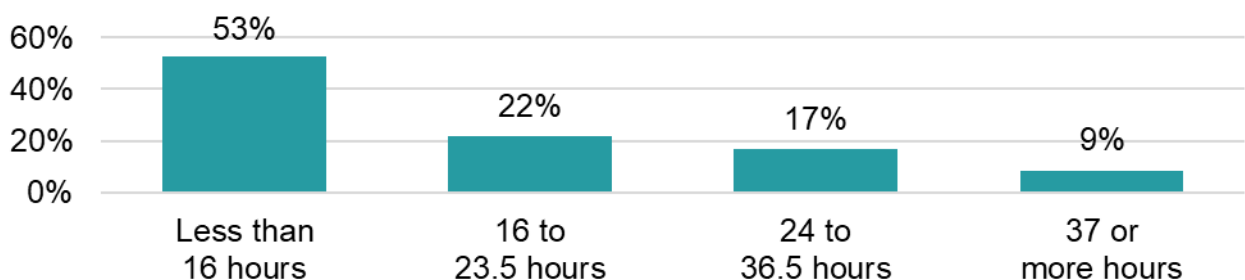
Given that individual employers have lower turnover rates and use zero-hours contracts less frequently, they are likely to benefit from a better continuity of support than people receiving support via the independent sector. Continuity of support is highly valued by people receiving care<sup>17</sup>.

### 3.1.4. Usual hours worked

Chart 7 shows the usual hours worked in a week by PAs and is grouped into bands. The majority of PAs (53%) worked for less than 16 hours per week, and 9% worked more than 37 hours per week. This was very different to the case for care workers in the independent sector, where nearly half (45%) worked 24 or more hours, compared to just 25% of PAs.

#### Chart 7. Usual hours worked by a personal assistant

Source: Skills for Care survey, 2021



<sup>17</sup> <https://www.skillsforcare.org.uk/Recruitment-retention/retaining-staff/retaining-your-staff.aspx>

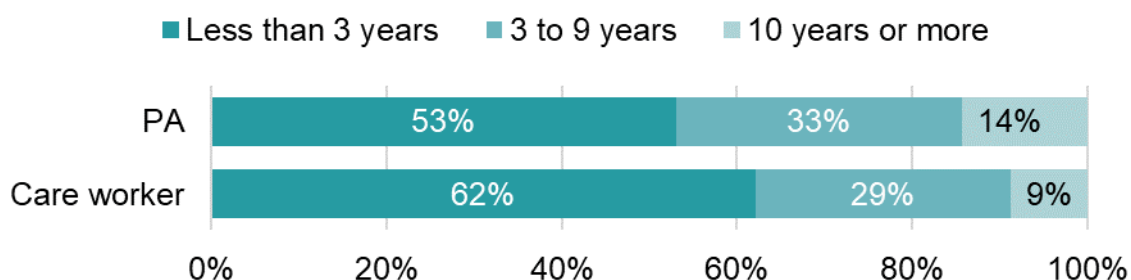
## 3.2. Recruitment and retention

### 3.2.1. Experience in role

PAs had an average experience in role of 4.3 years. This is slightly more than care workers in the independent sector (3.1 years).

#### Chart 8. Experience in role by specified job role

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



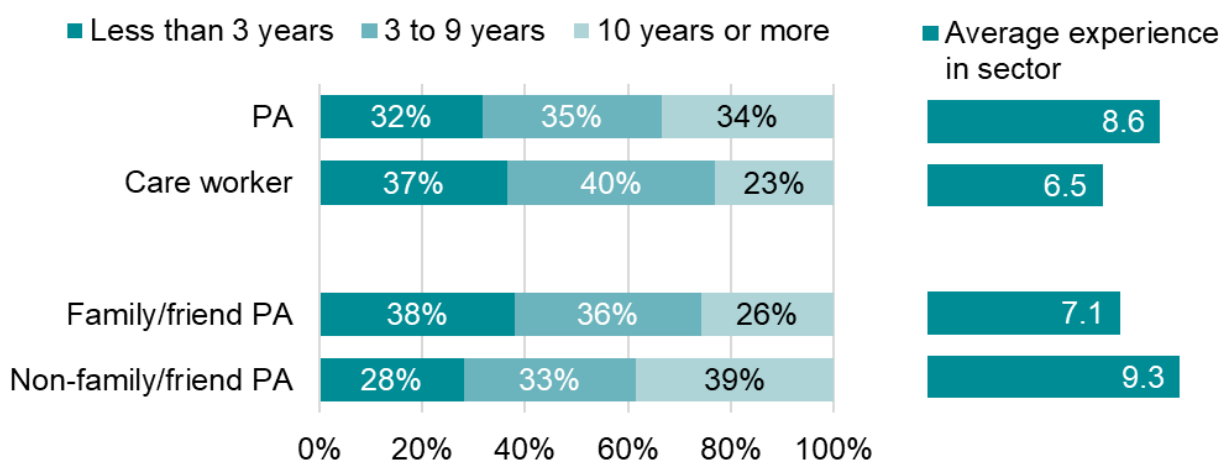
### 3.2.2. Experience in sector

Despite the relatively similar amount of experience in role between PAs and care workers, there were more noticeable differences in the experience in sector of PAs and care workers, as shown in Chart 9.

PAs had an average of 8.6 years of experience in the adult social care sector, compared to 6.5 years for care workers. Non-family/friend PAs had around 9.3 years of experience in the sector, compared to 7.1 years for family/friend PAs.

#### Chart 9. Experience in sector by specified job role

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



This suggests that although non-family/friend PAs had a higher turnover rate, many of them move between adult social care roles and, therefore, their experience, qualifications and skills have been retained by the sector.

### 3.2.3. Source of recruitment

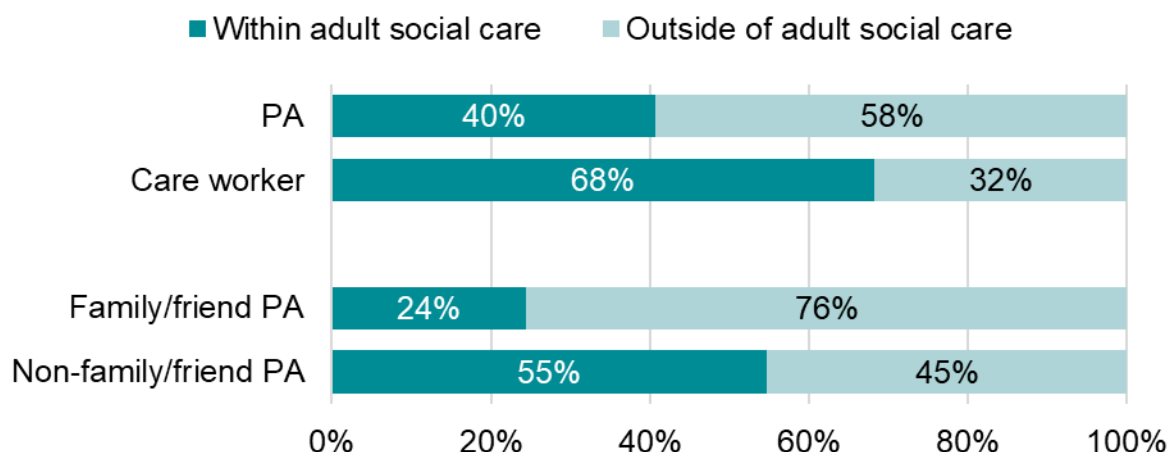
We asked PAs what their last role was and how they found their current role. Chart 10 shows these sources of recruitment grouped into 'from within adult social care' or 'outside of adult social care'.

Overall, PAs were less likely to have previously been employed within adult social care compared to care workers. Around 40% of PAs were recruited from within the sector compared to 68% of care workers.

However, there were even greater differences between family/friend and non-family/friend PAs. Only 24% of family/friend PAs reported that they had previously worked in adult social care, compared to around 55% of non-family/friend PAs. This is likely due to some family/friend PAs deciding to enter to sector and become a PA to care for somebody they know.

#### Chart 10. Source of recruitment for specified job role

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



Along with experience in sector (as shown in Chart 9), this highlights that some experienced workers are being attracted from the wider adult social care sector into PA roles. Possible reasons for this could be availability of part-time hours (Chart 7), favourable terms and conditions (Chart 6) or better pay (Chart 17). It could also be that if a family/friend requires support, people are likely to move jobs to support them.

Many PAs stated that they either found their roles by being approached directly by the potential employer, knowing the employer already (family/friend) or through a

social care organisation (such as the local authority). Only 4% reported using specific job sites and 2% recruitment agencies.

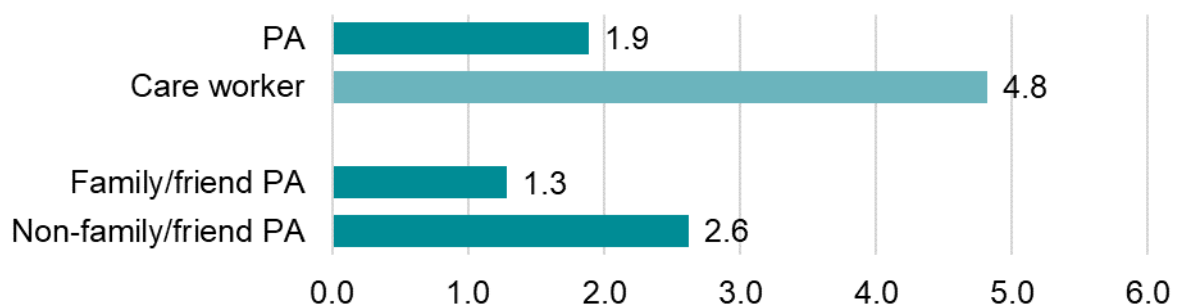
### 3.2.4. Sickness

Chart 11 highlights the different average sickness days for PAs (both family/friend and non-family/friend) and care workers. On average, PAs took 1.9 sickness days in the previous 12 months. This was slightly higher than previous years, likely impacted by COVID-19, but was much lower than the average for care workers in the independent sector (4.8 days). However, sickness is not universally high amongst care workers – around 58% had zero sickness days.

Sickness rates are often associated with job satisfaction and staff wellbeing. These findings could suggest higher job satisfaction for PAs. However, they may also reflect the close relationship between PAs and their employers, particularly for family/friend PAs.

#### Chart 11. Average sickness days by specified job role in the last 12 months

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



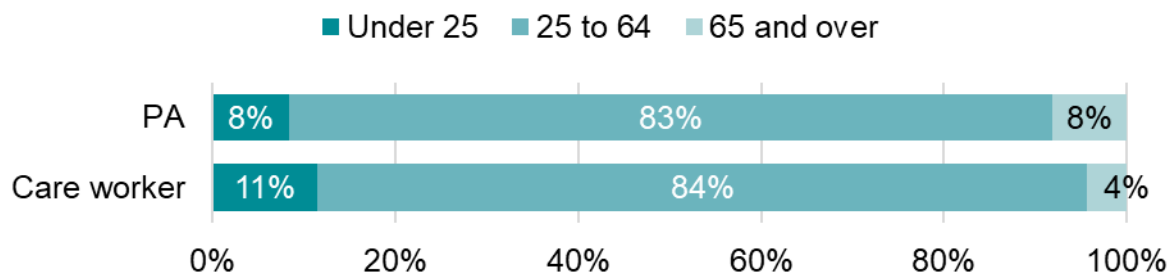
### 3.3. Demographics

#### 3.3.1. Age

The average age of a PA was 46 years old, with 8% of the workforce being aged 65 and over. The average age of a care worker was slightly younger at 42.3 years old, with a larger proportion being under 25 years old (11% compared to 8% for PAs).

#### Chart 12. Age bands of personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



#### 3.3.2. Gender

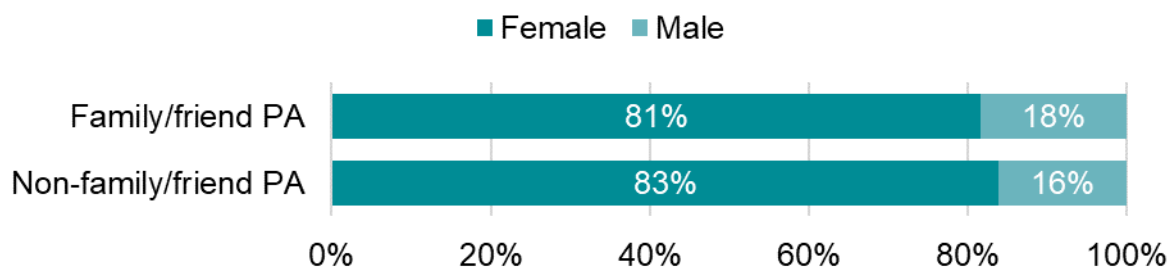
Of the economically active population in England, 53% identified as male and 47% as female<sup>18</sup>. Across the adult social care workforce, there has historically been a larger proportion of females than males. Around 84% of care workers in the independent sector were female, and this is mirrored in the PA workforce, with 83% identifying as female.

<sup>18</sup> Office for National Statistics (September 2018) Annual population survey

However, there is some variance between family/friend PAs and non-family/friend PAs. Family/friend PAs were more likely to be male (18%) compared to non-family/friend PAs (16%).

### Chart 13. Gender of personal assistants by relationship to employer and nationality

Source: Skills for Care survey, 2021

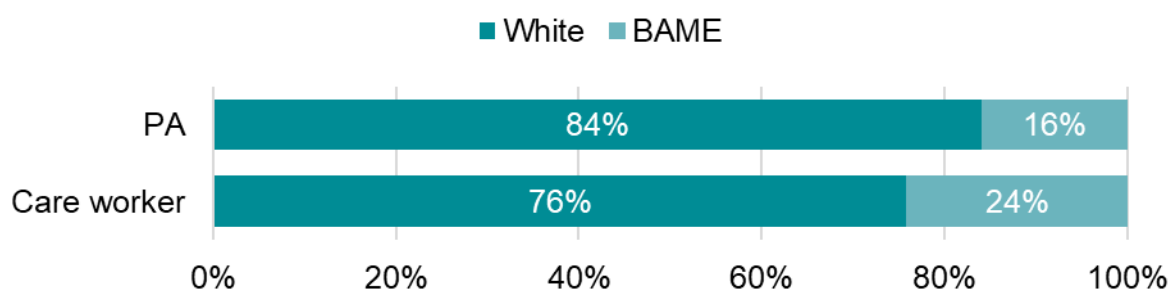


#### 3.3.3. Ethnicity

Around 84% of the PA workforce identified as being of white ethnicity and 16% of workers identified as having an ethnicity that was black, Asian, mixed or minority ethnic (BAME). Chart 14 shows that the ethnic diversity of PAs was lower than for care workers, where 24% identified as having a BAME ethnicity.

### Chart 14. Ethnicity of personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



At a regional level, there was much more variation. London had the highest level of ethnic diversity, with 44% of PAs identifying as white and 56% BAME. The Yorkshire and the Humber region had a much higher representation of Asian workers (11%) compared to the rest of the country (an average of 5%, excluding London). Table 1 highlights the different proportions of PAs with white ethnicity across the regions of England.

**Table 1. Proportion of white ethnicity personal assistants and care workers by region**

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020

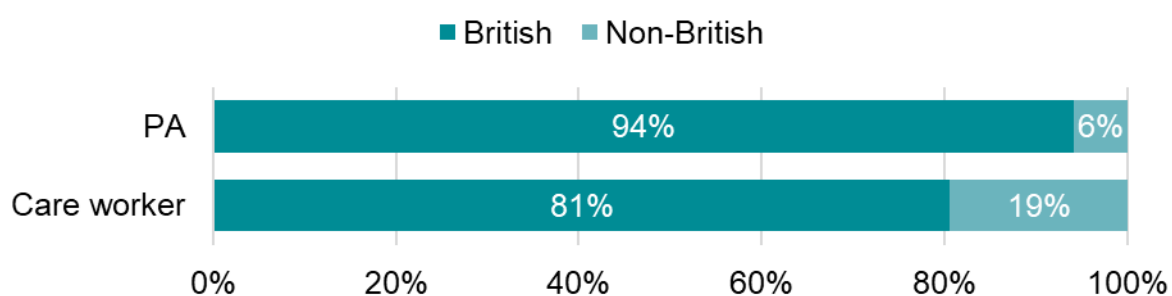
	Personal assistant	Care worker
<b>England</b>	<b>84%</b>	<b>81%</b>
Eastern	84%	79%
East Midlands	89%	86%
London	44%	59%
North East	91%	96%
North West	91%	91%
South East	91%	74%
South West	99%	85%
West Midlands	87%	85%
Yorkshire and the Humber	83%	92%

### 3.3.4. Nationality

Around 94% of PAs had British nationality and 6% non-British nationality. However, the independent sector had a higher reliance on Non-British care workers (81%) as shown in Chart 15.

**Chart 15. Nationality of personal assistants and care workers**

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



Skills for Care is continuing to monitor the impact of Brexit on the number of EU and non-EU workers in adult social care. This survey found that approximately 4% of PAs were from the EU, compared to 8% of care workers. Around 2% of PAs were from non-EU countries, compared to 11% of care workers.

At the time of writing, 'personal assistant' was not listed as an eligible occupation on the 'Skilled Workers' route of the new points-based immigration system. Therefore, personal assistants have not been able to immigrate into the UK to take up these roles since 1 January 2021. Even if the occupation was eligible for the 'Skilled Workers' route, virtually none of these jobs meet the salary threshold and the

occupation would therefore need to be listed on the shortage occupation list to allow for immigration into these roles (or for an alternative route to be made available).

Much like ethnicity, there were regional differences in nationality across England. London had the lowest proportion of British PAs (83%) compared to East Midlands, North East which each had the highest proportion (99%). Similar regional differences were observed for care workers in the independent sector.

**Table 2. Proportion of British personal assistants and care workers by region**

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020

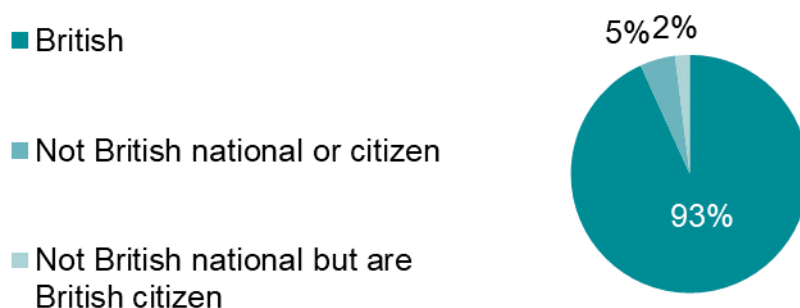
	Personal assistant	Care worker
<b>England</b>	<b>94%</b>	<b>81%</b>
Eastern	92%	79%
East Midlands	99%	86%
London	83%	59%
North East	99%	96%
North West	95%	91%
South East	92%	74%
South West	96%	85%
West Midlands	95%	85%
Yorkshire and the Humber	98%	92%

### 3.3.5. Citizenship

We asked PAs if they held British citizenship if their nationality was not British. Around 2% of PAs reported that they were not British but held British citizenship, and 5% said that they were not British and not holding British citizenship.

**Chart 16. British citizenship status of personal assistants**

Source: Skills for Care survey, 2021



Personal assistants arriving in the UK before 31 December 2020 have the right to apply for UK immigration status through the 'EU Settlement Scheme' and will be able



to remain in the workforce<sup>19</sup>. However, the new points-based immigration system will prevent new workers coming to the UK to take up personal assistant roles.

### 3.3.6. Disability

Results of the PA survey showed that 6% of the PA workforce recorded that they had a disability. This was higher than care workers, at 1% with a disability. PAs were also given the opportunity to select 'prefer not to say' – 3% of respondents gave this response.

However, it should be noted that it is hard to tell if the difference in proportions of staff with a disability is due to higher levels of disability amongst PAs or due to the way the information was collected. The ASC-WDS is completed by the employer on behalf of the care workers (who may not always know their workers' disabilities), whereas the PA survey was completed by the PA themselves.

## 3.4. Pay rates

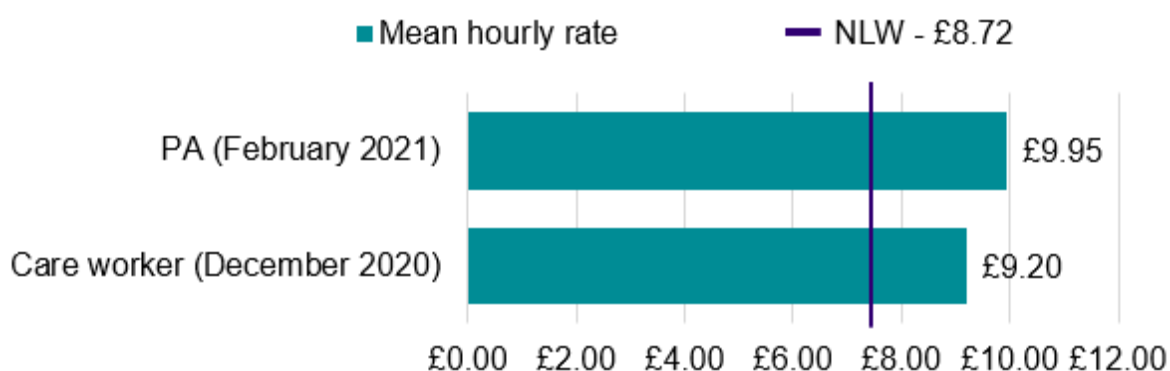
### 3.4.1. Basic hourly rate

The mean hourly pay rate for PAs in England was £9.95 (as at February 2021). This was much higher than the mean hourly rate for care workers in the independent sector, £9.20 (as at December 2020).

Chart 17 highlights the differences between these rates in comparison to the National Living Wage (NLW), which was £8.72 at the time. Based on mean hourly pay, PAs earned £1.23 more per hour than the NLW, compared to just 48 pence more per hour for care workers.

#### Chart 17. Basic hourly rate of pay for personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



<sup>19</sup> <https://www.gov.uk/settled-status-eu-citizens-families>

Pay rates for PAs follow the same regional patterns as the rest of the adult social care sector, with a general north/south divide. PAs in London and the southern regions were paid more than those working in the northern regions.

Non-family/friend PAs were paid, on average, 44p more than family/friend PAs. This could be a result of employers with more complex needs requiring a PA with more experience or specialist skills, and therefore demanding a higher rate of pay. Also, employers that partially self-fund as well as receiving a direct payment, on average, provide better rates of pay (£10.27).

PAs who held a social care qualification earned, on average, 25p more than those who did not hold a social care qualification. This reiterates that some employers with complex needs may be paying PAs more, to ensure that they employ people who can meet those needs.

### 3.5. Qualifications and training

This section looks at the qualifications and training levels of PAs. Learning and development ensures that PAs have the right skills and knowledge to carry out their role effectively and can better support their employers.

It is not always necessary for PAs to hold formal qualifications before starting employment. Increasingly, employers are seeing positive improvements to recruitment and retention rates when they recruit people based on their values and behaviours, rather than just their experience and qualifications<sup>20</sup>.

#### 3.5.1. Care Certificate

The Care Certificate is a set of standards that sets out the knowledge, skills and behaviours expected of social care and health workers. The Care Certificate is designed for workers who are new to social care or health, within CQC regulated providers. Therefore, PAs, employed by direct payment recipients, do not need to complete the Care Certificate – it is up to their employer to judge if they think some, or all, of the standards within the Care Certificate would be beneficial.

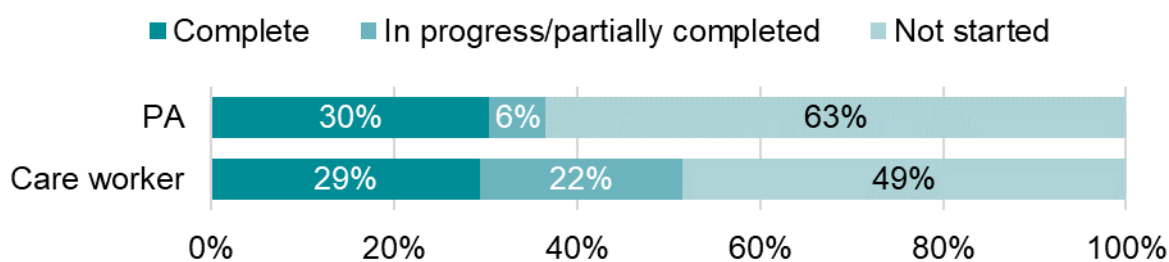
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<sup>20</sup> [www.skillsforcare.org.uk/vba](http://www.skillsforcare.org.uk/vba)

Chart 18 shows engagement with the Care Certificate by PAs compared to care workers. Overall, care workers had a higher proportion of engagement at 51% (29% completed and 22% in progress/partially completed), compared to PAs who had around 36% engagement.

### Chart 18. Care Certificate engagement by personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020



A much larger proportion of non-family/friend PAs had engaged with the Care Certificate (45%) compared to family/friend PAs (27%). Please note that PAs could have also engaged with the Care Certificate with a previous employer.

For more information about the Care Certificate for PAs, read our 'FAQ's about PAs doing the Care Certificate'<sup>21</sup>.

### 3.5.2. Training

Chart 19 shows the top 10 training categories reported by PAs. PAs could select more than one training area, hence the categories sum to more than 100%.

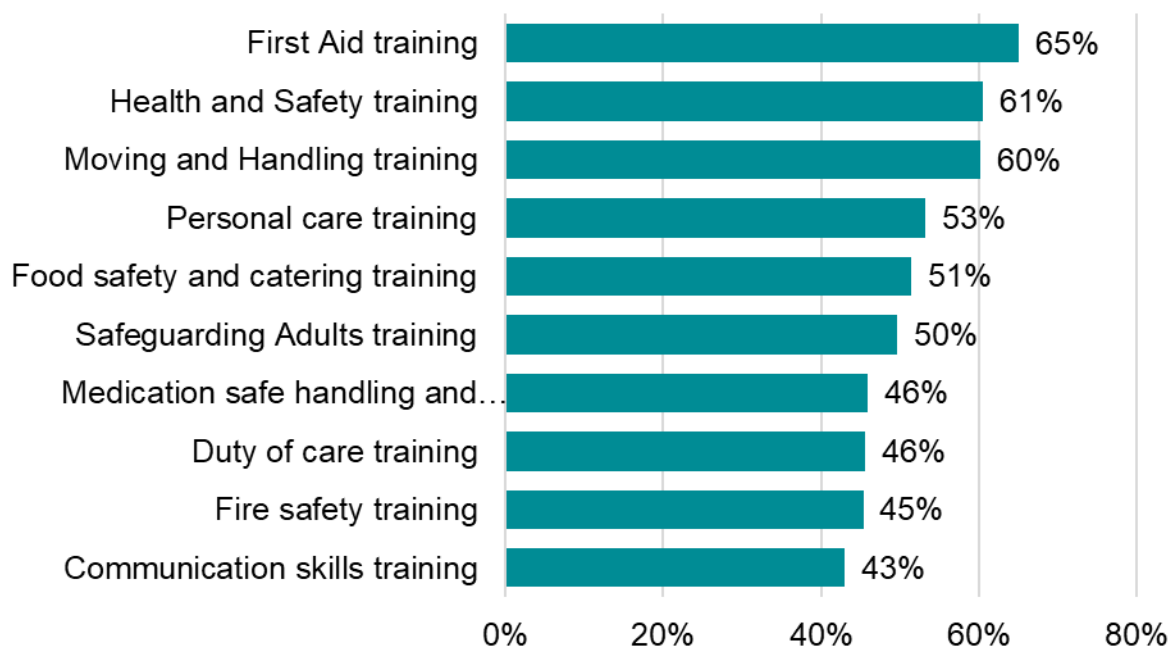
The top training category reported was 'first aid' (65%), followed by 'health and safety' (61%) and 'moving and handling' (60%). 'Moving and handling' and 'health and safety' were also in the top 3 training categories selected by care workers, highlighting their importance across the sector.

Non-family/friend PAs reported that they did more training than family/friend PAs in almost all training categories. Notably, significantly more non-family/friend PAs had undertaken 'Moving and Handling' training (64%), compared to family/friend PAs (53%). Similarly, more had completed 'Safeguarding Adults' training (56% versus 40%). Please note that this training could have been with a previous employer.

<sup>21</sup> <https://www.skillsforcare.org.uk/Employing-your-own-care-and-support/Resources/Information-for-individual-employers/4-Managing-your-PA/Induction/FAQs-for-PAs-about-doing-the-Care-Certificate-as-part-of-induction.pdf>

### Chart 19. Top 10 training categories reported by personal assistants

Source: Skills for Care survey, 2021



#### 3.5.3. Social care qualifications held

Chart 20 shows the highest level of social care qualification held by PAs and care workers. Overall, 63% of PAs did not have a relevant social care qualification, which is more than the percentage of care workers (53%).

### Chart 20. Social care qualification held by personal assistants and care workers

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020

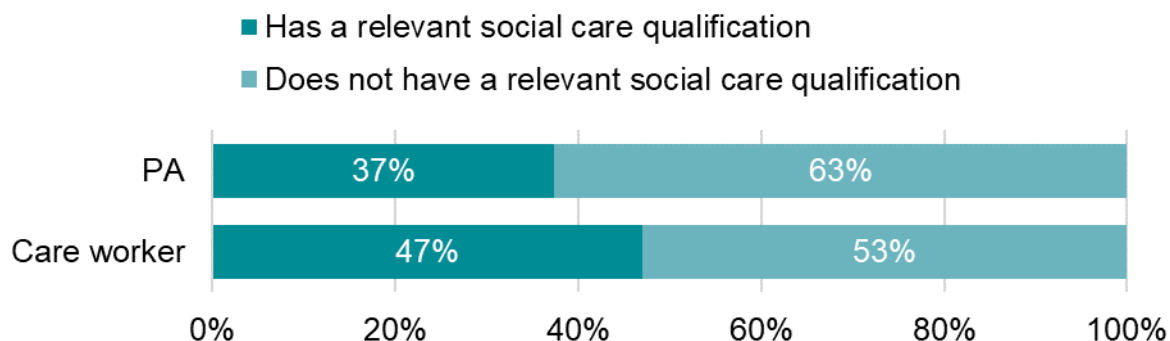


Chart 21 shows that of those that held a social qualification around 22% of PAs had a level 4 and above qualification, which was a higher proportion than care workers (2%). This could suggest that some PAs move from other roles, where they have been highly qualified, into PA roles, potentially as a career change or to care for a

relative or friend. These PAs could also be supporting their employer by taking on some of the responsibilities of a manager/supervisor in managing larger teams of PAs.

### Chart 21. Level of social care qualification held by personal assistants and care workers, of those with social care qualifications

Source: Skills for Care survey, 2021 and Skills for Care workforce estimates, 2020

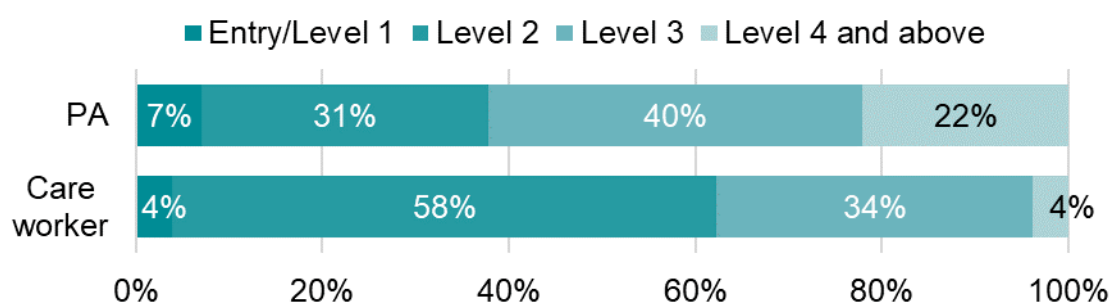
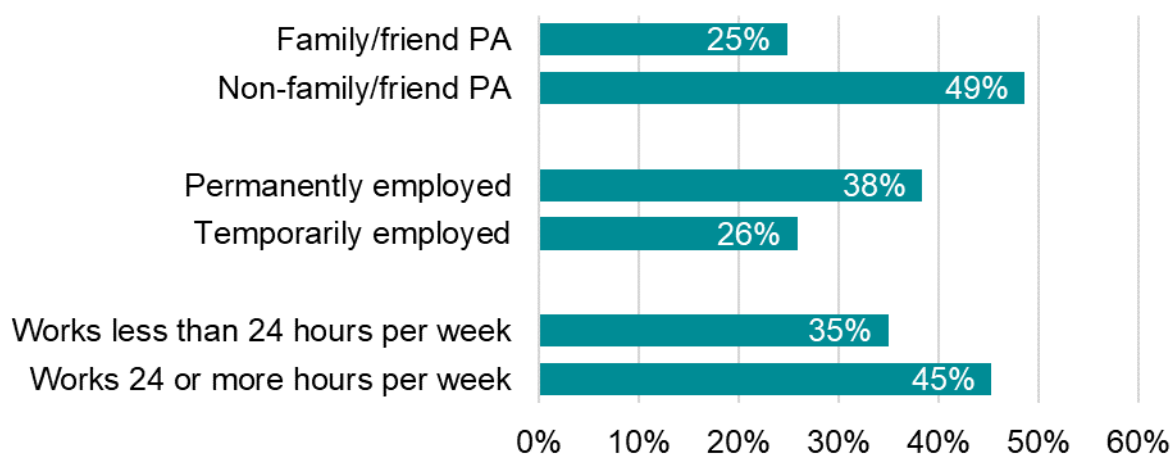


Chart 22 shows the proportion of PAs who held a social care qualification by various factors. Non-family/friend PAs were more likely to have a social care qualification (49%) compared to family/friend PAs (25%).

PAs who were permanently employed were more likely to hold a social care qualification (38%) than those that were temporarily employed (26%). There was also a difference between PAs who worked less than 24 hours (35% had a qualification) and those that worked 24 or more hours (45%).

### Chart 22. Proportion of personal assistants that held a relevant social care qualification

Source: Skills for Care survey, 2021



#### 3.5.4. Non-social care qualifications held

It is worth noting that 61% of PAs reported that they held a non-social care qualification. Of these, 46% held a qualification at level 4 or above, with 30% holding a level 6 qualification (undergraduate degree level) or higher. This proportion was slightly higher for family/friend PAs (32%). This may be because people left a previous job, with a higher level of education, to become a PA for a relative or friend.

Many of the skills required to be a PA may overlap with other career paths, and so family/friend PAs who do not have a social care qualification, could still have the right skills and knowledge to support their employer. Additional training, as outlined in Chart 19, can help them to develop their skills once they start work.

## 4. Further resources

Skills for Care provides outstanding workforce intelligence relied upon by the Government, strategic bodies, employers and individuals to help them make decisions that will improve outcomes for the people who use care services.

We use the information collected in the Adult Social Care Workforce Data Set (ASC-WDS), which was previously named National Minimum Data Set for Social Care (NMDS-SC), to create robust estimates for the size of the whole adult social care sector and characteristics of the workforce. We add insight and interpretation via our workforce intelligence reports, data visualisations and other outputs.

[www.skillsforcare.org.uk/workforceintelligence](http://www.skillsforcare.org.uk/workforceintelligence).

### 4.1. Interactive visualisations

Interactive visualisations have been created to enable you to see and understand our publications and workforce intelligence in a more visual and interactive way.

By clicking on and moving around the visualisations you can discover and compare the characteristics of the adult social care workforce in the applicable topic areas.

They have been designed with users, to ensure that they are simple to use, but full of useful information. To access the visualisation about individual employers and personal assistants please see our relevant topic website

<http://www.skillsforcare.org.uk/IEPAreport>.

### 4.2. Our analysis services

Our analysis team provide an external analysis service and are able to produce a range of in-depth reports, which can be tailored to your specific requirements.

#### How we can help you

We use our expertise and sector knowledge to turn adult social care data into meaningful information and insights. You can commission us to help you:

- understand the sector and prepare for the future
- identify recent trends and use them to project forward into the future
- compare your organisation/area to others to explore how you are performing
- discover how key outcomes (such as CQC scores, turnover rates and vacancy rates) can be improved
- win tenders and bids by partnering with us.

## Why we're the right people to talk to

We're the experts because:

- the data we collect in the Adult Social Care Workforce Data Set offers an unrivalled overview of the adult social care workforce in England
- we have more than 10 years of experience in analysing and interpreting social care data - it's what we do
- our analysts have worked with leading universities and data scientists to create our workforce models.

Skills for Care is committed to improving both the sector and outcomes for the people that use adult social care services. Our team combines this commitment with many years of experience in understanding the sector.

For more information about these services please email [analysis@skillsforcare.org.uk](mailto:analysis@skillsforcare.org.uk).

### 4.3. Keeping informed



To sign up to our workforce intelligence quarterly newsletter or to be kept up to date with our work for 'employing your own care & support', please register on the Skills for Care website<sup>22</sup> and tick your areas of interest.

You can also follow us on twitter @SfC\_NMDS\_SC or visit

[www.skillsforcare.org.uk/contactWI](http://www.skillsforcare.org.uk/contactWI).

### 4.4. Support for individual employers and PAs

Our 'Information hub for individual employers and PA's brings useful information and resources from lots of different places. It can help individual employers to recruit, manage and develop PAs, and also has sections for PAs and supporting organisations. Visit: [www.skillsforcare.org.uk/iepahub](http://www.skillsforcare.org.uk/iepahub).

Skills for Care also distributes funding for individuals, to pay for training for them and their PAs. Find out more at: [www.skillsforcare.org.uk/iefunding](http://www.skillsforcare.org.uk/iefunding).

### 4.5. Accolades awards

The Accolades are national awards for adult social care providers, services and individual employers in England. They identify and celebrate those who are committed to getting the best from their most valuable resource - their people. Sign up to our eNews<sup>25</sup> to get all the very latest Accolades news and information.

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<sup>22</sup> <https://id.skillsforcare.org.uk/Account/Register>





Skills for Care  
West Gate  
6 Grace Street  
Leeds  
LS1 2RP

**T: 0113 245 1716**

**E: [info@skillsforcare.org.uk](mailto:info@skillsforcare.org.uk)**

**[Skillsforcare.org.uk](https://www.skillsforcare.org.uk)**

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