

Individual employers and the personal assistant workforce March 2023

Acknowledgments

Skills for Care would like to thank all 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 Carol Reeves at Skills for Care, Bernadette Simpson at NHS England, and also Alex Wade and Greg Morris at Mark Bates Ltd, who assisted in producing and distributing this survey.

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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.

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Key findings

Terminology used in this report

For the first time Skills for Care is publishing data from adult social care direct payments, personal health budget holders and other funding sources in one report.

The following explains what is included within each group:

- 1. People in receipt of an adult **social care direct payment** from their local authority.
- 2. People in receipt of a **personal health budget** from the NHS.
- 3. **Total.** This is a total of those in groups one and two above, and also those who are funded via an Access to Work grant and are using their own money to fund a personal assistant.

Comparisons have also been made to care workers in the independent adult social care sector, to demonstrate differences between more traditionally commissioned arrangements and direct employment of PAs.

Individual employers

What is an individual employer? The term individual employer is used in this report to refer to someone who uses their health or social care budget to directly employ one or more personal assistants (PAs) to meet their needs.

Social care direct payment funded employers

Information from NHS England (formerly NHS Digital) SALT data return shows that around 215

Personal health budget funded employers

A total of 144,682 people received personal health budgets by the end of Quarter three 2022-23³. This included 128,067 adults and 16,615 children and young people.

Almost a fifth (19%) of all Personal Health Budgets were delivered as direct payments (27,343). And a significant number were used to directly employ PAs. Currently no data is collected, at a national level, on numbers of personal health budget holders employing PAs or numbers of PAs employed. *This means that creating an estimate of PAs working for personal health budget funded employers is not possible.*

Turnover and vacancy rates

The average turnover rate of PAs working for social care direct payment funded employers was 19.9% and was 23.0% for PAs working for personal health budget funded employers. Both were considerably lower than the turnover rate for care workers in the independent sector (37.0%).

The average vacancy rate of PAs working for social care direct payment funded employers was 11.4% and was 13.4% for PAs working for personal health budget funded employers. The vacancy rate amongst care workers in the independent sector was 13.1% as at January 2023⁴.

Skills for Care has a range of resources to support people employing their own care and support staff.⁵

Personal assistants

What is a personal assistant (PA)? A PA, for this report, is employed directly by a person (or their representative) who is in receipt of a personal budget from health or social care. A PA works directly with the individual to support their assessed health, care and wellbeing needs, in a personalised way, to

PAs of social care direct payment funded individual employers held an average of 1.29 PA filled posts each, meaning that around 100,000 people were carrying out 130,000 filled posts in 2022/23.

PAs of personal health budget funded employers worked for more than one employer, having, on average, 1.20 jobs each.

Around 57% of PAs of social care direct payment funded employers were a friend or family member before their employment, the other 43% did not know their employer before accepting their role. This was the reverse for PAs of personal heath budget funded employers, where 42% were a friend or family member before their employment and 58% did not know the employer before accepting their role.

1.3 Personal budgets and direct payments in health and social care

Personalised care means people have choice and control over the way their care is planned and delivered. It is based on 'what matters' to them and their individual strengths and needs.

Personalisation is 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. Where personal budgets and personal health budgets are delivered via a direct payment, people can directly employ personal assistants.

What is a social care personal budget?

A personal health budget is the amount of money your local council will pay towards any social care and support you need. The amount of money in your personal health budget is decided by your local council after getting a needs assessment to work out:

what kind of care and support you need how much it will cost how much you're able to afford yourself

You can ask the council to either:

manage your personal health budget for you pay the money to another organisation . such as a care provider pay the money directly to you or someone you choose . this is known as a direct payment

You can also choose a combination of these options.

As published in the size and structure of the adult social care sector and workforce in England 2022, the number of direct payment recipients increased rapidly, from around 65,000 in 2008, to around 215,000 by 2022. Skills for Care estimates that around 69,000 of these people are directly employing their own staff, creating around 130,000 PA jobs.

What is a personal health budget?

A personal health budget (PHB) uses NHS funding to create an individually agreed plan that offers people of all ages greater choice and flexibility over how their assessed health and wellbeing needs are met.

Through a personalised care and support planning conversation the care, support, and services the PHB will be spent on are identified. This can include a range of things to give people access to care, support and services that are holistic, innovative and build on their strengths.

PHBs are flexible and can be used in a variety of ways:

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For one-off budgets to enable people to reach specific goals or outcomes enabling supported self-management e.g., hospital discharge, mental health recovery.

They can be:

Pooled, to support individuals to come together with an overarching health and wellbeing goal e.g., health weight management programme for people with a learning disability and or autism.

Integrated with social care and/or education personal budgets.

Used to target and address wider system priorities such as identified health inequalities.

The following groups currently have a legal right to have a PHB. adults in receipt of NHS Continuing Healthcare, children and young people eligible for continuing care, people eligible for after-care services under section 117 of the Mental Health Act and people eligible for an NHS wheelchair. The roll-out of PHBs is not confined to these ±a @Af A@ac^Af* | [*] • £A^[] | A@ac^Af @Af* A@ac^Af* | A@ac^Af* |

Direct payments

A direct payment is one way of managing these budgets. It's when you get the money directly to buy the agreed care and support you need rather than the council or the NHS arranging it for you.

Direct payments give you more flexibility over how your care and support is arranged and provided. For example, you could choose to employ personal assistants.

Ensuring more people can benefit from personalised care is one of the key aims of the NHS Long Term Plan. This includes the ambition to increase the uptake of PHBs to 200,000 people by 2023/24 which is outlined further in Universal Personalised Care. As at the end of Quarter 3 2022/23 144,682 people received Personal Health Budgets of which 19% (27,490) were delivered as direct payments.

1.4 Skills for Care survey research

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2. Individual employers

Data on the number of social care direct payment recipients comes from the NHS

Chart 1. Age of employer by funding source

Source: Skills for Care survey, 2023

Analysis of NHS England SALT data shows that 66% of people accessing direct payments were 18 to 64 years old and 34% were 65 and over, please note that this is all direct payment recipients and not just those who use their direct payment to employ a PA. This survey found that 80% of responding employers were aged 16 to 64 and 20% were aged 65 and over.

Chart 2 shows the care and support needs of responding employers. Respondents could select their main/primary care and support need as well as any other care and support needs because of this percentages will sum to more than 100%.

Chart 2. Care and support need

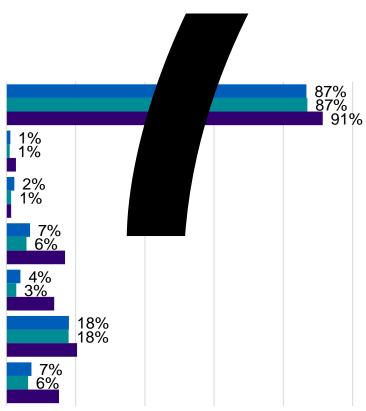
Source: Skills for Care survey, 2023

Analysis of NHS England SALT data shows that results of this survey were representative of the primary care needs of people accessing direct payments.

Chart 3 below shows what employers completing the survey spend their money on. Respondents could select more than one option. All employers reported spending their money on employing staff or engaging with self-employed PAs, which is to be expected given that is the criteria of completing the survey.

Chart 3. Spend of direct payment or personal health budget (PHB)





2.2. Recruitment and retention

The adult social care sector and workforce report 2021/22¹² showed that the sector was facing unprecedented challenges in workforce supply and demand and that the number of vacant posts in adult social care had increased by 52% in one year and it was the highest rate since records began in 2012/13.

The high-quality workforce intelligence that we collect and analyse is key to understanding recruitment and retention issues. This workforce intelligence helps to keep recruitment and

¹² www.skillsforcare.org.uk/stateof

retention at the forefront of health and social care debates, providing statistical, rather than just anecdotal, evidence.

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.¹³

2.2.1.

Chart 5. Vacancy rate of personal assistants and care workers

Source: Skills for Care survey, 2023 and Ù\ ¾• Át ¦ ÁÔæ\^q Á}¸ ^ã @^åÁŒÙÔ-WDS data, January 2023.

Skills for Care has published a toolkit¹⁵ to support individual employers, this includes information about recruiting PAs¹⁶, writing a job description, advertising and interviewing for the role.

2.2.3. Recruitment and retention challenges

Given the unprecedented challenges in workforce supply and demand this year it was decided to ask employers more about recruitment and retention challenges.

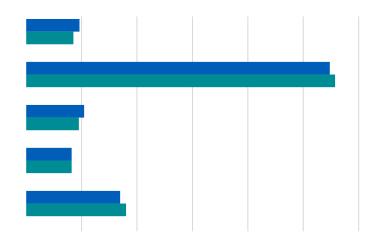
We asked, when comparing the current situation to last year how have you found recruiting PAs. Of the 1,300 employers who responded to this question 60% said that it was more challenging, this number was higher for personal health budget funded employers (69%).

Chart 6. Recruitment challenges compared to last year

Source: Skills for Care survey, 2023

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Chart 9. Main reason for retention being more challenging than the previous year Source: Skills for Care survey, 2023



2.3. Information about training, development, and support

Employers were asked about training, development and support they have received to help understand where individual employers go for information and support. This information is helpful to target our offer and also pass on information where this can support improvements. It is also beneficial to know more about how easy it is for employers to access training and development for themselves or their PAs, what training has been undertaken and what challenges they may face so that their experiences can be made better/improved.



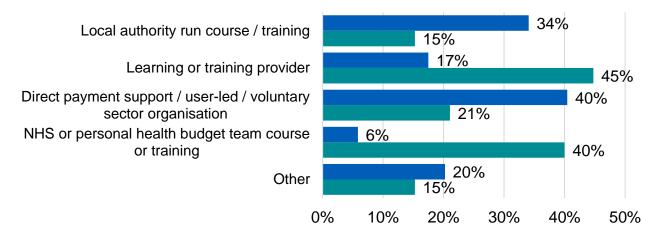
Source: Skills for Care survey, 2023

Employers were asked to rate how satisfied they were with the level of information and support they received. C43p. $\,$. $\,$.

Chart 15. Provider used to access training and development opportunities for employers and PAs

Source: Skills for Care survey, 2023

- Social care direct payment funded employers
- Personal health budget funded employers



3.1. Employment overview

Social care direct payment funded individual employers, on average, employed 1.87 PAs each, and there were an estimated 130,000 filled posts in 2022/23.

PAs of social care direct payment funded individual employers held an average of 1.29 PA posts each, meaning that around 100,000 people were carrying out 130,000 filled posts in 2022/2



This contract type is often used by health and adult social care employers (especially

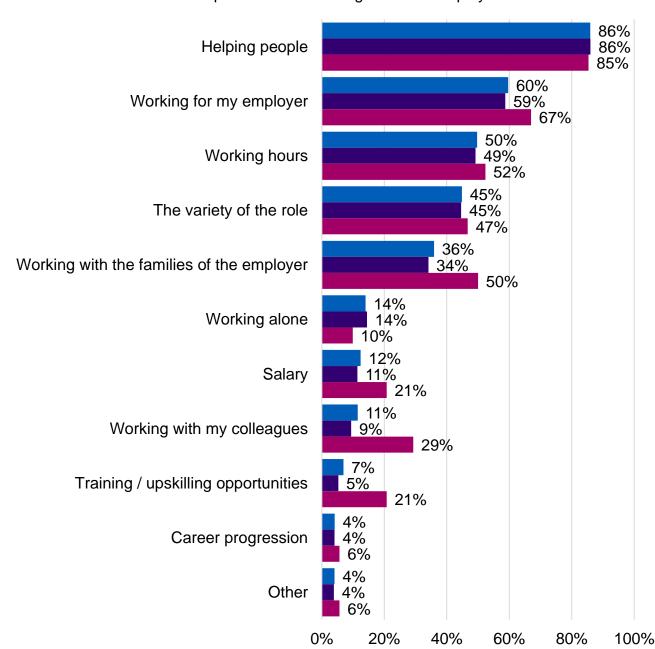


Chart 22. Experience in sector by specified job role Source:

Chart 25. Factors that people find most rewarding about being a PA

Source: Skills for Care survey, 2023

- Total PAs responding
- PAs of social care direct payment funded employers
- PAs of personal health budget funded employers



3.3. Demographics

3.3.1. Age

The average age of a PA was 47.0 years old, with 10% of the workforce being aged 65 and over. The average age of a care worker was slightly younger at 42.9 years old, with a larger proportion being under 25 years old (11% compared to 7% for PAs).

Chart 26. Age bands of personal assistants and care workers

Source: Skills for Care survey, 2023 and Skills for Care workforce estimates, 2021/22

3.3.2. **Gender**

The 2021 Census showed that 48% of the population in England were male and 52% female. Of the economically active population in England, 53% identified as male and 48% as female²¹. 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 82% identifying as female.

Chart 27. Gender of personal assistants

Source: Skills for Care survey, 2023

However, there is some variance between family/friend PAs and non-family/friend 871 0t45.r

3.3.3. Ethnicity

Chart 28. Ethnicity of personal assistants and care workeri72re workssistants and c b6(s)-30 G

3.3.4. Nationality

Around 93% of PAs had British nationality and 7% a non-British nationality (5% with an EU nationality and 2% with a non-EU nationality). However, the independent sector had a higher reliance on non-British care workers (20%) as shown in Chart 29.

Chart 29. Nationality of personal assistants and care workers

Source: Skills for Care survey, 2023

Table 4. Proportion of British personal assistants and care workers by region

Source: Skills for Care survey, 2023 and Skills for Care workforce estimates, 2021/22

	Proportion of people with a British nationality Social care independent			
	Total PAs responding	sector care workers		
England	93%	80%		
Eastern	95%	78%		
East Midlands	93%	84%		
London	79%	59%		
North East	94%	95%		
North West	96%	91%		
South East	89%	74%		

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were also in the top 3 training categories selected by care workers, highlighting their importance across the sector.

Chart 32. Top 10 training categories reported by personal assistants

Source: Skills for Care survey, 2023

The top three highest recorded categories of training were the same for PAs working for employers funded via a social care direct payment or by a personal health budget, however those PAs working for a person on a personal health budget recorded higher levels of dæ 3 * ÉMoving and Handling 85% compared to 61%, Health and Safety 74% compared to 64% and First Aid 73% compared to 66%.

3.5.3. Health and social care qualifications held

Chart 33



4. Further resources

We provide outstanding workforce intelligence which the Government, strategic bodies, employers, and individuals rely upon to help them make decisions that will improve outcomes for the people who use care services. We add insight and interpretation via our workforce intelligence reports, data visualisations and other outputs.

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. Commission our services

Our Workforce Intelligence team are the experts in adult social care workforce insight. The data we collect in the ASC-WDS gives an unrivalled overview of the adult social care workforce in England. We have over 15 years of experience in analysing and interpreting social care data - it's what we do.

Beyond the wealth of information already available publicly on our website you can commission the services of the Workforce Intelligence team to produce bespoke reports and analysis for your organisation or area.

How we can help you

We can partner with you or form part of your project team on tenders and bids. By using our expertise and sector knowledge we can add value to your research or project.

We can use advanced analytics techniques to help you understand how key outcomes such as CQC scores, turnover and vacancy rates can be improved.

We can produce bespoke reports and analysis and help you solve problems and provide data solutions to help you improve your services.

We can provide a detailed analysis into the adult social care workforce in your local area or look at performance in comparison to other areas.

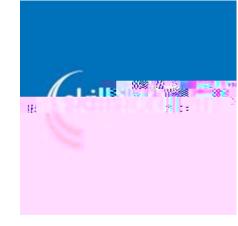
Request a feed of data to enhance or improve a product or service.

Our values

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the Skills for Care strategy, our vision, mission, values and plan to achieve our mission, please visit <u>strategy.skillsforcare.org.uk</u>.

As a Workforce Intelligence team we:



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