The impact of the challenges to the social care sector in 2020

March 2021

Analysis by Cebr for Hft

#SectorPulseCheck
Once again, Cebr has been commissioned by Hft to produce our annual Sector Pulse Check, which provides a yearly snapshot of the social care sector. We would like to thank all those who took the time to provide feedback for this important piece of research.

After a year like no other – when Covid-19 dominated the news, parliamentary agenda and seeped into every aspect of our personal lives – the 2020 Sector Pulse Check focuses heavily on the unique challenges coronavirus posed for the learning disability social care sector. Perhaps most palpably, the pandemic has had consequences for providers which were not only financial, but human, and it is with a heavy heart that we think of the social care recipients and members of the workforce who so sadly lost their lives to coronavirus.

Even through this adversity, the social care heroes on the front line continue to provide outstanding care, and it is not surprising that this has taken a toll. The human impact of the pandemic is therefore also evident in the 62% of providers reporting an increase in absence relating to mental health over the past year. More must clearly be done to ensure our workforce are able to access adequate mental health support now so their wellbeing is safeguarded for the future.

As some of us turned to our screens for work, shopping and socialising, social care providers went to great efforts to ensure that people with learning disabilities were not lonely and isolated during the pandemic. It has been concerning to find therefore, that digital access and skills remain a barrier to ensuring providers can effectively support those in their care to remain connected throughout the pandemic. With a world which is likely to become increasingly ‘digital by default’ it is vital that the social care sector and people with learning disabilities are not excluded from this shift.

The learning disability social care sector has clearly gone to great lengths to meet the challenges of the past year, but it is important to remember that this is against a backdrop of continued financial insecurity. This year, 56% of providers reported they are either in deficit or their surplus has decreased.

While it is absolutely right that social care staff should be paid more for the invaluable work they do, rising wage bills were cited as the main cost pressure faced by providers for the third year running. It speaks volumes that lack of fee income came a close second, demonstrating that a proper wage for the workforce must be factored into the rates paid by local authorities for social care.

Last year providers warned us that due to these continued funding pressures, 52% would have to close down some parts of the organisation. It is deeply concerning that this prediction was surpassed with 62% of providers in fact taking this action. Not only this, but for the past three years, around a third of providers have reported having to make redundancies in response to cost pressures. Year on year, it is clear that social care providers are being forced to take drastic action in order to remain sustainable, but this is at the cost of diminishing capacity. In the face of increasing demand, this brings the financial needs of the sector into sharp relief.

It is indisputable that the pandemic has helped to raise the profile and understanding of the issues faced by those providing social care. However, it is clear that there are still significant gaps, with the people we support experiencing prejudicial health inequalities throughout the last year and financial insecurity widespread across our sector. As we hopefully see the pandemic abate, let 2021 be a year when the government finally keeps its promises and social care receives the funding and recognition it truly deserves. We hope that the findings and recommendations within this report spur the changes that are so desperately needed.

Kirsty Matthews,
Chief Executive, Hft
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## Authorship and acknowledgements

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The report does not necessarily reflect the views of Hft.

London, January 2021
Executive Summary

Hft and Cebr have produced their fourth annual Sector Pulse Check. This report offers an annual snapshot of the financial health of the social care sector as well as outlining the impact of some of the key challenges posed by the Covid-19 pandemic.

- Overwhelmingly, the sector continues to be in a precarious financial position with 56% of providers reporting they are either in deficit, with costs exceeding funding, or that their surplus has decreased slightly or significantly.

- For the third year running, the most commonly cited cost pressure was rising wage bills, with lack of fee income at a close second, highlighting the urgent need for commissioning rates to reflect a fair and proper wage for the workforce.

- Last year 52% of providers warned that cost pressures could force them to close down some parts of the organisation or hand back marginal contracts and services to their local authority. This prediction was in fact exceeded, with 62% of care providers taking this action.

- For the third year running, around a third of providers report having made redundancies over the past year. As a result of cost pressures associated with the pandemic, 47% said they are now more likely to make redundancies.

- 81% of organisations surveyed said that they agree or strongly agree with the statement that the people they support have felt lonely and isolated as a result of the Covid-19 pandemic.

- While almost all providers (98%) have made extra efforts to ensure those they support remain connected, digital barriers persist, with 77% citing a lack of digital skills among those they support as a large barrier and 56% citing a lack of digital skills among staff.

- The Covid-19 pandemic has clearly taken a toll on the workforce, with 62% of providers reporting a rise in absenteeism related to mental health conditions.

- Notably, social care providers have responded quickly to this concerning trend with all providing some form of mental health support to their workforce.
Introduction

This report uses survey data to highlight key issues and challenges faced by care providers working in the sector, including cost pressures, care quality and the impact of coronavirus. Hft and Cebr have conducted a survey of CEOs and people in senior positions within the care sector looking at the key challenges organisations have faced over the past year. The survey ran from 14 December 2020 to 6 January 2021 and received 72 responses across various types of care providers.

Although the care organisations included in this survey often provide other types of care, it is primarily representative of the learning disabilities sector, with 97% of respondents providing care for people with learning disabilities. Figure 1 also breaks down the respondents by service type. 96% of the organisations surveyed provide supported living or domiciliary care, and 71% provide residential care.

Figure 1: Types of care provider covered by the survey

Source: Hft Survey, Cebr analysis
Financial position and cost pressures

Financial position

To understand more about how organisations’ financial positions have changed over the past year, Cebr asked survey respondents how much their surplus funding left over each year (which can be used for reinvestment) has changed.

Figure 2: How the surplus funding levels have changed over the past year
(Source - Hft Survey, Cebr analysis)

As in previous years, the responses in Figure 2 demonstrate the precarious financial position of the learning disability social care sector, with the majority - 56% of providers – reporting they are either in deficit, with costs exceeding funding, or that their surplus has decreased slightly or significantly.

56% of providers report they are either in deficit, with costs exceeding funding, or that their surplus has decreased slightly or significantly.
Of those who said their surplus had declined in 2020, the average decrease was 7.8% with 25% stating that they would be running a deficit within the next one to two years. 50% said they would start to run a deficit in the next one to three years, compared to 35% in last year’s survey. This highlights the worsening financial situation many care providers are facing. On average in 2020, those seeing their surplus decline said that it would be 3.2 years before their surplus declines to the point at which they would be running a deficit.

Figure 3: Expected number of years before beginning to run a deficit for organisations experiencing a decline in their surplus

Source: Hft Survey, Cebr analysis

Of the 13% of care organisations which said they already ran a deficit in 2020, with costs exceeding funding, two thirds said that their deficit has increased over the past year (by 9.6% on average). Meanwhile, one third said that it has stayed the same compared to previous years.

Encouragingly, a slightly higher proportion of providers seem to be weathering the storm than in previous years, with 28% stating their surplus had increased in 2020. This is more than double the share of organisations which said that their surplus increased in 2019 (12%).

For some providers, additional funding allocated in response to Covid-19 may have provided short-term financial relief. However, this is likely to be a temporary reprieve as a result of the unique circumstances presented by the pandemic with financial uncertainty remaining at large in the sector.
Cost pressures

Considering the source of financial pressures in 2020, 79% of organisations said rising wage bills were the main cost pressure and have been so for the past three years (at 95%, 88% and 94% in 2019, 2018 and 2017, respectively).

63% said that a lack of fee income was placing pressure on their finances, while 59% said unfunded Covid-related costs were among their main commercial pressures.

Figure 4: Main cost pressures facing social care organisations at present
(Source - Hft Survey, Cebr analysis)

Undoubtedly, the coronavirus pandemic placed considerable and unexpected pressure on care organisations in 2020. The cost of providing PPE for staff who interact with individuals receiving care has been substantial, as has been the cost of practical restructuring measures such as the creation of separate areas for Covid-positive residents.
Impact on wage bills

Organisations in the social care sector were asked how much of an impact different factors were having on their wage bills. By far the factor with the most significant impact was the increase in the level of the National Living Wage, which 49% said is having a significant impact.

While most care providers recognise that social care staff should be paid more for the invaluable work that they do, this is not always factored in to fees paid by local authorities for the social care packages commissioned. Indeed, this correlates with the second most referenced cost pressure among providers – lack of fee income – and is illustrated by some of the verbatim responses from providers.

Agency costs had the second most substantial impact on wage bills in 2020, with 23% saying they had a significant impact. Meanwhile, increases in wage bills for higher paid staff (not on the minimum wage) were quoted by 13% of organisations as having a significant impact on wage bills.
Figure 5: Factors impacting care providers' wage bills
(Source: Hft Survey, Cebr analysis)

1 = No impact, 5 = Significant impact
Impact of the sleep-in night shifts ruling

Debate over how workers who are allowed to sleep on their shifts should be paid has been ongoing for many years. The Supreme Court is set to make a decision in 2021 on whether sleep-in workers should receive the minimum wage for hours during which they are asleep.

If the ruling says that sleep-in time is working time and requires national minimum wage back-payment, it will notably raise costs for care organisations. 18% of survey respondents said that if they had to make sleep-in payments, it is very likely they would have to curb investment, and a further 34% said this was likely. A third (33%) of care organisations said that it was likely or very likely that they would be able to offer care to fewer individuals if they had to pay for sleep-ins. 2% even said that bankruptcy was a very likely outcome.

Figure 6: Share of organisations which said the following outcomes are likely or very likely if the sleep-in nights ruling deems that sleep-in time is working time and requires national minimum wage back-payment
(Source - Hft Survey, Cebr analysis)
Measures to deal with cost pressures

As shown in the previous section, over half of providers (56%) are either seeing their surpluses fall or are operating in a deficit. Therefore, many care providers have had to find ways to deal with financial pressures on tight budgets.

One of the most concerning trends is that 62% of providers had to close down some parts of the organisation or hand back marginal contracts and services to their local authority over the past year. This was the second most common action taken in response to financial pressures. The proportion of care providers needing to do this seems to be growing, with 45% of providers taking this action last year and 59% in 2018.

In addition to this, just under a third of providers have made redundancies over the past year, presenting a strikingly consistent picture to the two years prior at 33% and 35% respectively. On average, those who have made staff redundancies during 2020 let go of 4.1% of their workforce.

Over one in ten (11%) survey respondents have had to offer care to fewer individuals over the past year in order to manage costs. The organisations which said that they had offered care to fewer individuals on average reported that there was a 6% reduction in the number of individuals in their care.

As a result of cost pressures...

- **62%** of providers had to close down some parts of the organisation or hand back marginal contracts and services to their local authority over the past year.

- **In 2020 over one in ten (11%)** providers offered care to fewer individuals.

- Around **1/3 of providers** have had to make staff redundancies for the past three years.
For the fourth year running, internal efficiency savings have been the most common means to deal with cost pressures, with 82% of care organisations stating that they had to take this action.

The trends seen in the share of organisations having to make cost cutting measures over the past year are expected to continue. When asked what cost cutting measures they envisage they will have to make in the future, 51% said closing down some parts of the organisation or handing back marginal contracts and services to local authorities. Additionally, a third (33%) said they expect to make staff redundancies and 13% are likely to offer care to fewer individuals in the future.
Taking a cumulative view, it is clear that the capacity of social care providers is diminishing as a result of ‘last resort’ measures. While some cost saving actions – such as handing back marginal contracts and making staff redundancies – may have contributed to the growing surpluses of some organisations, this is at the expense of capacity at a time when demand continues to grow.
The financial impact of Covid-19

The coronavirus pandemic dominated the news in 2020 and its impact was felt keenly by the social care sector, not least due to the financial consequences. On average, cost pressures associated with the Covid-19 pandemic are estimated to have raised costs for care organisations by 14% for the financial year ending in March 2021.

We asked survey respondents what the most significant costs resulting from the Covid-19 pandemic have been. By far the most frequently cited option was Personal Protective Equipment (PPE) costs, which 42% said was the most significant Covid-related cost. 39% of respondents also said that costs to cover staff absence were the most significant cost related to Covid-19.

**Figure 9: Significance of Covid-related costs**
(Source - Hft Survey, Cebr analysis)
These increased costs related to the coronavirus pandemic have caused considerable financial pressure for care providers. As a result, 39% of survey respondents said that they are slightly more likely and 12% said they are much more likely to close down some parts of their organisation or hand contracts back to local authorities. 47% said they are more likely to make staff redundancies.

**Figure 10: Share of organisations which said the following outcomes are much more or slightly more likely as a result of Covid-related cost pressures**

(Source - Hft Survey, Cebr analysis)

- Closing down some parts of the organisation or handing back marginal contracts and services to Local Authorities: 51%
- Staff redundancies: 47%
- Curbing investment: 45%
- Changing the model of care or target client group: 39%
- Offering care to fewer individuals: 35%
- Merging with another organisation: 21%
- Bankruptcy - organisation forced to close: 21%
- Reducing the quality of care your organisation is able to provide: 13%

Recognising that care providers have needed more financial support to deal with the cost pressures associated with the pandemic, the government has made additional funding available. The vast majority of providers have accessed some sort of additional funding, with 88% and 93% of survey respondents stating that they have used the Coronavirus Job Retention Scheme (furlough scheme) and infection control fund respectively. Meanwhile, just 19% said that they have tapped into the £750m support package for charities from the Department for Digital, Culture, Media and Sport.

As shown in Figure 11, larger organisations have been more likely to take advantage of these schemes, with 100% of organisations with 500 staff or over using the infection control fund, compared to 80% of organisations with fewer than 250 employees.
Feedback from providers was muted when asked how effective these financial schemes were, with the most common response being ‘quite effective’, although of those who used the support package from the Department for Digital, Culture, Media and Sport, one in four (26%) said it was not at all effective.

**Figure 11:** Share of organisations which have used the following financial schemes and additional funding provided by the government amid Covid-19, split by number of employees

(Source - Hft Survey, Cebr analysis)

**Figure 12:** Effectiveness of government financial schemes and additional funding in meeting Covid-related costs, for organisations which used the following schemes

(Source - Hft Survey, Cebr analysis)
This year’s Sector Pulse Check reveals that the learning disability care sector continues to be in a precarious financial situation, with years of financial pressures forcing providers to take drastic action in order to remain sustainable but ultimately resulting in reduced capacity. While the Covid-19 pandemic has seen some additional funding enter the sector, it falls far short of solving an enduring and underlying financial crisis.

Hft recommends that the following actions are taken to ensure the future financial sustainability of the social care sector:

• In the short-term, the government must provide immediate funding to stabilise the social care system and ensure it does not collapse in the worst affected areas

• In the medium term, the government must bring forward a long term funding solution for social care that is both equitable and sustainable at the earliest possible opportunity to ensure that social care providers can cease making staff redundancies, handing back contracts and continue to provide essential, high-quality social care for people with learning disabilities

• Any proposed solution must recognise the value of the social care workforce and ensure sufficient funding to enable providers to pay the National Living Wage

Verbatim comments from providers further illustrate the muted response to financial assistance from central government, with some implying it did not meet the needs of the sector.

"Infection Control grant did not cover costs for intended use.

"The real impact has been devastating and totally underestimated by political decision makers."
The impact of the pandemic on loneliness and isolation

The pandemic has had an impact beyond finances, with social distancing and restrictions taking their toll on mental health and feelings of loneliness and isolation amongst individuals who receive support.

91% said that not being able to go out into the community (eg. to go shopping or to the park) has had a fairly large impact or very large impact on the people they support. Additionally, 88% of survey respondents said that not being able to see family, friends or other loved ones has had a fairly large or very large impact on the people they support amid the Covid-19 crisis.

Overall, 81% of organisations surveyed said that they agree or strongly agree with the statement that the people they support have felt lonely and isolated as a result of the pandemic.

Figure 13: Impact of restrictions on feelings of loneliness and isolation for people receiving support
(Source - Hft Survey, Cebr analysis)
Supporting people to remain connected

However, in spite of this, care providers have gone to great lengths to ensure that as the world moved online and the public was told to stay at home, those they support were also able to remain connected. Nearly every survey respondent (98%) said that their organisation has made extra efforts to enable those they support to remain in touch with loved ones including family and friends. The ways in which they have done this are shown in Figure 14.

Figure 14: Actions taken by organisations making extra efforts to enable those they support to remain in touch with loved ones
(Source - Hft Survey, Cebr analysis)

<table>
<thead>
<tr>
<th>Action</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Permitting Covid-safe visiting where appropriate</td>
<td>98%</td>
</tr>
<tr>
<td>Supporting families and loved ones to use technology to stay in touch with the people you support</td>
<td>96%</td>
</tr>
<tr>
<td>Enabling people you support to use online platforms to communicate with loved ones</td>
<td>94%</td>
</tr>
<tr>
<td>Invested in additional home-based activities to keep people engaged</td>
<td>83%</td>
</tr>
<tr>
<td>Moving day or community services online (if provided)</td>
<td>64%</td>
</tr>
<tr>
<td>Investing in additional safety equipment (eg. pods or screens) to allow safe face to face visiting</td>
<td>52%</td>
</tr>
</tbody>
</table>
Self-isolation solution

Hft supports three women to live as independently as possible at a service in Devon, where the housemates enjoy spending time together in their communal living room and kitchen. When all three women tested positive for Covid-19 last year, the charity’s Personalised Technology team supported staff teams to help everyone isolate in their bedrooms to minimise contact and reduce the risk of cross contamination, while reducing any impact to their wellbeing.

The team installed two buttons connected to the staff pager, which called for support from staff members when pressed. Three smart speakers with video display were also introduced, working alongside the call for support buttons to enable staff to determine via video call when face to face support was needed. These smart devices were also vital in keeping the three housemates entertained and connected to each other, with staff providing activities for the group through quizzes and even a ‘tell a joke’ function!

With the help of technology, staff were able to tailor the support provided to the three women during a challenging period for everyone involved. The housemates had the reassurance of being able to call for support when necessary, ensuring their safety and reducing staff exposure to the virus. Technology was also key in maintaining communication and engagement, as well as providing light relief and a boost to wellbeing during a frightening and uncertain time.

It is clear that technology has been vitally important for people with learning disabilities during the pandemic, with 94% of providers enabling those they support to use online platforms to communicate with friends, family and loved ones.
In addition, organisations providing day or community services have even taken steps to move online, with 64% stating that they have been able to convert their offer to a digital one. For people with learning disabilities, being able to maintain social connections can have a huge impact on their mental health and help to combat feelings of loneliness and isolation.

Michael’s story -
“It’s helped me through a bit of a rough time”

Michael is 36 years old and lives in West Yorkshire. Prior to the pandemic, he had a very active social life and regularly attended events run by his local branch of Luv2meetU, a friendship and dating service for adults with learning disabilities or autism, run by Hft. As a longstanding member, he frequently enjoyed meeting up with new people at a range of activities in his community, while also spending some of the week at work in a department store café.

Due to issues with his immune system, Michael was forced to give up his job when the pandemic took hold. This, coupled with radical changes to his social life, meant he was left feeling lonely and without a support network. Michael lives in his own flat within a supported living service and isn’t close with other people there, so struggled to adapt to a lack of social contact.

When Luv2meetU converted its event programme into a virtual calendar, Michael was immediately keen to get involved. Since the launch of the virtual offering last May, he’s been a regular fixture at events, attending activities including a weekly quiz and a regular cooking session, where he recently showcased his prawn and rice salad recipe!

Thanks to the virtual programme, Michael has been able to stay connected with Luv2meetU members, and has even made new friends based around the country. While Michael agrees nothing compares to face to face interaction, the provision of digital events has resulted in a much needed boost to his wellbeing, during a time which has been particularly isolating for people with learning disabilities.

Not being able to see anyone has been really difficult and I’ve been quite lonely over the last year. Luv2meetU has been really important and the events have kept me going. They ring me up and check I’m alright. It’s a great group of people and we can actually properly chat. - Michael

You can find out more about Luv2meetU at www.luv2meetu.com
Barriers to keeping in touch

Despite the reliance on technology throughout the pandemic, many care providers reported digital barriers which prevented them from ensuring those they support remain connected.

One key barrier cited was a lack of digital skills among the individuals supported, which three quarters (77%) of care organisations reported as a large constraint. Second to this, the loved ones of the people who receive support often lack digital capabilities as well, with this factor being listed by 66% of survey respondents as a large barrier. Other highly selected barriers are the cost of purchasing technology and the digital skills of staff.

Figure 15: The extent to which the following issues are a barrier to implementing measures to ensure supported individuals remain in touch with loved ones
(Source - Hft Survey, Cebr analysis)

When asked what issues were a barrier to ensuring individuals they support remain in touch with family, friends and loved ones:

- **77%**: Over three quarters of providers said a lack of digital skills amongst those they support was a fairly, or very large barrier.
- **66%**: Over six in ten providers said a lack of digital skills amongst family and loved ones was a fairly, or very large barrier.
- **58%**: Almost six in ten providers said the cost of purchasing new or additional technology was a fairly, or very large barrier.
- **56%**: Over half of providers said a lack of digital skills amongst their staff was a fairly, or very large barrier.
- **35%**: Over three in ten providers said poor internet connectivity was a fairly, or very large barrier.
The pandemic presents unique challenges to the whole of society, not least of having to stay apart from one another and limiting socialising to predominantly online interactions. Clearly, access to technology and digital skills has become paramount. While nearly all providers have made some efforts to ensure those they support remain in touch with family, friends and loved ones throughout the pandemic, significant digital barriers hinder this, meaning people with learning disabilities are at risk of feeling lonely and isolated.

As we slowly understand the long term impact of the Covid-19 pandemic - which may include moves to not only socialise but also work and access goods and services online – it is more important than ever that social care providers and people with learning disabilities are provided with the tools and skills to be included in this rapid shift.

Hft therefore recommends:

• The government should provide immediate additional funding for the learning disability social care sector to enable providers to purchase digital devices for those they support and to provide digital training

• In the longer term, Personal Independence Payments (PIP) should be opened up so that people with learning disabilities can lease or buy technology and assistive technology, on the same principle as is currently used for claimants to lease cars through a ‘Tech for Life’ scheme. This would ensure individuals with learning disabilities have access to technology which changes with their needs, in the long term

• The core and mandatory training received by social care staff (as set by Skills for Care) must be updated to include digital skills training and training in assistive technology
Workforce mental health

Our research has already revealed that the mental health of the workforce is a significant worry, with providers stating that 17% of absenteeism was due to mental health in 2019. Following a year when the workforce has played a leading role on the frontline of the pandemic, it is not surprising that this has taken its toll.

Concerningly, 62% of providers have seen a rise in employee absenteeism related to mental health conditions (e.g. stress, depression, anxiety) since the beginning of the Covid-19 pandemic. The average amount that absenteeism related to mental health conditions has increased, for those who have seen a rise, is 10%.

Figure 16: Actions taken by organisations to promote positive mental health, 2020 and 2019
(Source - Hft Survey, Cebr analysis)
During the first lockdown, I experienced such a change to my personal routine. I wasn’t leaving my flat as often and I felt like the walls were closing in. I would be trying to fill out a report on my computer and feel completely overwhelmed. - David

During the virtual meeting, he had the opportunity to discuss his experience of working on the frontline during the pandemic with other people facing the same challenges. Attendees were also equipped with background information on mental health issues and tips on how to cope with stress and anxiety.

It was really useful to talk to like-minded people in similar situations who were also struggling. We could all empathise with each other and I realised it wasn’t just me feeling this way. I was given lots of resources and I learned about things like lockdown fatigue. I’ve since been able to put this knowledge into practice and now feel like I have much more stability. As a support worker, it’s important to stay upbeat and resilient – the people we support deserve the best of us, and we can’t provide that if we’re not feeling good ourselves. - David
Figure 17 also shows the actions taken by organisations to promote positive mental health, by business size. All but one of the actions were more likely to have been taken by large organisations (with 500 or more employees) than by small organisations (with fewer than 500 employees). This highlights that large organisations are likely to have greater access to resources for promoting positive mental health.

<table>
<thead>
<tr>
<th>Action</th>
<th>&lt;500</th>
<th>500+</th>
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<tbody>
<tr>
<td>Signposting to mental health services</td>
<td>93%</td>
<td>100%</td>
</tr>
<tr>
<td>Mental Health Awareness training</td>
<td>86%</td>
<td>89%</td>
</tr>
<tr>
<td>Award or other recognition schemes</td>
<td>50%</td>
<td>78%</td>
</tr>
<tr>
<td>In-house mental health first-aiders</td>
<td>57%</td>
<td>67%</td>
</tr>
<tr>
<td>Specific support for people working remotely*</td>
<td>64%</td>
<td>56%</td>
</tr>
<tr>
<td>Improved employee benefits package*</td>
<td>43%</td>
<td>56%</td>
</tr>
<tr>
<td>Changing the office environment to promote positive mental health</td>
<td>29%</td>
<td>37%</td>
</tr>
<tr>
<td>Subscription to online services</td>
<td>29%</td>
<td>30%</td>
</tr>
<tr>
<td>Additional paid leave</td>
<td>18%</td>
<td>22%</td>
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Recruitment and retention

A key issue identified in previous pulse check reports covering the social care sector is a shortage of staff. In this year’s survey, we asked social care providers if they saw more support worker applications during the first three months of the pandemic. 64% of respondents said that they had, with the average rise in applications being 14%.

There was a considerable rise in the number of people looking for work in 2020, as unemployment, redundancy or furlough left people looking for new work, which 79% of organisations saw as the biggest motivator for support workers applying for roles. Other key motivators include increased social responsibility and awareness of roles in the social care sector.

Figure 18: Reasons quoted by organisations which saw more support worker applications during the pandemic.
(Source - Hft Survey, Cebr analysis)

Unfortunately, not all who have joined social care organisations as employees have remained working there. On average, survey respondents said that there has been a 13% labour turnover rate among staff who joined their organisation between April and June 2020.

By far the most common reason for new starters leaving is that the role is not what they expected it to be (48%), which is followed by low pay (13%).
The social care workforce is invaluable to the sector, providing highly-skilled care to people with learning disabilities and supporting them to live independent and fulfilling lives.

Over the past year, the importance of this work has come into sharp relief as staff have continued to work through considerable adversity, adapting to frequent changes in guidance, negotiating exposure to the virus and bearing a huge emotional weight.

It is clear that this has taken a toll on the workforce and while it is notable that social care providers have stepped in to provide support, it is vital that the efforts of staff are recognised at a national level and their wellbeing is safeguarded.

Hft therefore recommends:

- The government must fund specific mental health support for the social care sector, to ensure all staff are able to access support on a par with the NHS workforce and regardless of individual organisational capacity. The funding should be sufficient so as to provide for:
  - The entirety of the social care workforce to receive mental health and resilience training to support their own wellbeing
  - Mental health first aid training for one in ten members of the workforce
  - Backfill payments to cover for staff while they are receiving training
  - The core and mandatory training received by social care staff (as set by Skills for Care) must be updated to include mental health and resilience training to support their own wellbeing
Conclusion and recommendations

2020 will forever be a year marked by the impact of Covid-19, and for the learning disability social care sector it brought profound challenges which will have long term consequences.

While additional funding provided by the government has eased the financial burden of the pandemic for some, with one respondent saying that “Covid costs/income have [been] pretty much in balance”, our report found that for others in the sector Covid-19 cost pressures have increased the likelihood of staff redundancies, closing parts of the organisation and curbs to investment.

However, the impact of Covid-19 has been most plain to see in the human consequences. This year’s report revealed that while providers were going the extra mile to prevent the people they support from feeling lonely and isolated, a lack of digital skills and the cost of technology proved to be significant barriers at a time when access to, and the use of, online platforms, laptops, and assistive technology was so vital for friendship and connection. As we begin to understand the full impact of Covid-19 on our digital interactions, it must be guaranteed that people with a learning disability and learning disability social care providers are not excluded from any technological shift.

Hft recommends:

• The government should provide immediate additional funding for the learning disability social care sector to enable providers to purchase digital devices for those they support and to provide for digital training

• In the longer term, Personal Independence Payments (PIP) should be opened up so that people with learning disabilities can lease or buy technology and assistive technology, on the same principle as is currently used for claimants to lease cars through a ‘Tech for Life’ scheme. This would ensure individuals with learning disabilities have access to technology in the long term, which changes with their needs

• The core and mandatory training received by social care staff (as set by Skills for Care) must be updated to include digital skills training and training in assistive technology

The human impact of Covid-19 on the sector is also demonstrated in the concerning number of social care providers who reported an increase in mental health related absence since the beginning of the pandemic. While providers have considerably increased the mental health support provided over the past year, the efforts of the workforce and adversity they experienced must be recognised at a national level through additional funding, specifically targeted to improve the wellbeing of the workforce and safeguard it as the pandemic continues.
Hft recommends:

- The government must fund specific mental health support for the social care sector, to ensure all staff are able to access support on a par with the NHS workforce and regardless of individual organisational capacity. The funding should be sufficient so as to provide for:
  - The entirety of the social care workforce to receive mental health and resilience training to support their own wellbeing
  - Mental health first aid training for one in ten members of the workforce
  - Backfill payments to cover for staff while they are receiving training
  - The core and mandatory training received by social care staff (as set by Skills for Care) must be updated to include mental health and resilience training to support their own wellbeing

It is vital to acknowledge that the numerous challenges presented by the previous year took place against the backdrop of the continued, overwhelming financial uncertainty among providers.

Financial pressures, which have also been identified in previous years, continue to cause concern for care organisations. As one provider succinctly summarised:

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Our main cost pressures continue to be the sleep-ins crisis, national minimum wage pressures, and under-funding by the local authority

Consequently the majority of providers are either in deficit or are seeing their surplus decreasing, leaving them with no choice but to take truly ‘last resort’ actions such as making redundancies, closing parts of their organisation or handing back contracts. After a year of operating on the frontlines of the pandemic, this is a sure and absolute sign that the government must finally step up to the mark and provide a long term and sustainable funding solution for the learning disability social care sector.

Hft recommends:

- In the short term, the government must provide immediate funding to stabilise the social care system and ensure it does not collapse in the worst affected areas

- In the medium term, the government must bring forward a long term funding solution for social care that is both equitable and sustainable, to ensure that social care providers can cease making staff redundancies and handing back contracts, and continue to provide essential, high-quality social care to people with learning disabilities

- Any proposed solution must recognise the value of the social care workforce and ensure sufficient funding to enable providers to pay the national living wage
We are a national charity that creatively supports adults with learning disabilities to live the best life possible.

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