

# Social Care Wales Pilot workforce survey - Overall report of findings



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This study was conducted in accordance with ISO 20252:2019.

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# Introduction

Opinion Research Services (ORS) were commissioned by Social Care Wales to scope and pilot a survey to provide broad, ongoing intelligence about the workforce in social care and social work in Wales. The survey is intended to support the identification of trends and patterns to inform policy and operational decisions for Social Care Wales, Welsh Government and sponsored bodies, local authorities and other stakeholders in the field of social care and social work.

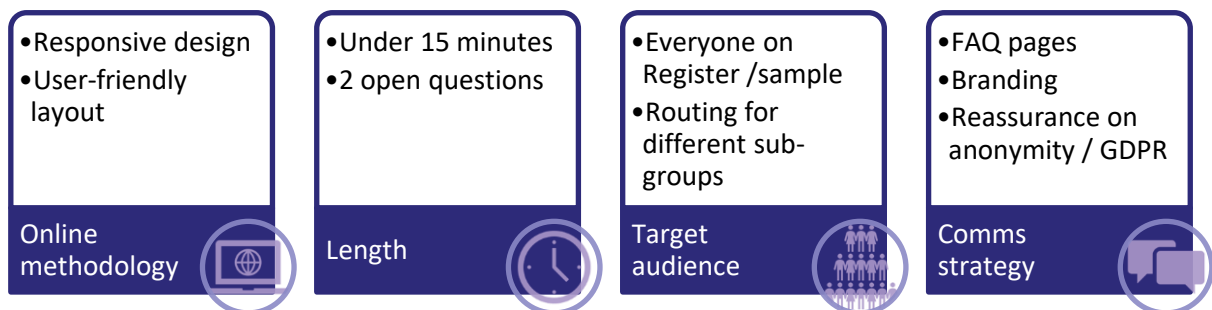
The project was commissioned in May 2022 and consisted of two main phases:

- A scoping phase
- A pilot phase.

The scoping phase was conducted between May and September 2022 and consisted of:

- A review of documents/comparable research
- Social Care Wales staff workshop
- 25 stakeholder interviews
- 5 focus groups with front-line staff.

A scoping phase report was provided in September 2022 which concluded there was sufficient demand for a workforce survey and recommended that an online pilot survey went ahead in 2023.



ORS subsequently worked with Social Care Wales to design the pilot, including the questionnaire<sup>1</sup> content and an initial sampling approach.

This report focuses on the key findings from the pilot survey. A more detailed exploration of the research design and key learnings for future surveys is provided in a separate technical report.

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<sup>1</sup> A copy of the questionnaire can be seen in the appendices

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## What we did

The scoping phase resulted in a recommendation for an online methodology. There was particular attention paid to ensuring that the online survey was accessible on a variety of platforms including smartphones. This was felt to be critical for the inclusion of care workers who were less likely to have access to a laptop or computer.

Social Care Wales has an email address for all registered people and these were used to send personalised invitations to everyone on the Register. All communications were in a bilingual format.

An initial pilot took place in early March 2023, after which some minor amends were made to the questionnaire. The main survey was launched in mid-March 2023, although some invitations were not sent until April 2023. Two reminder emails were sent to non-responders, and the survey closed on 4 May 2023.

The overall response rate was 6.5%, ranging from 6.0% for domiciliary care workers to 12.1% for domiciliary care managers.

The survey data has been weighted and can be considered to be representative of everyone on the Social Care Wales Register. The text throughout this report therefore refers to 'registered people' as opposed to 'respondents'.

Within the report there may be occasions when the grouped data referred to in the text does not appear to match the more detailed data shown on the charts. This is due to rounding with all data shown without decimal places.

More detail on the research methodology can be seen in appendix 1 or the technical report which has been provided separately.

# Respondent profile

The following tables show the profile of respondents in terms of the workforce type they are classified in on the Register.

*Table 1. Workforce type as classified on Register*

Workforce type	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Domiciliary care worker	1,203	39	41
Adult care home worker	1,035	33	32
Social worker	451	14	14
Residential child care manager	32	1	1
Adult care home manager	122	4	3
Domiciliary care manager	112	4	2
Residential child care worker	130	4	6
Social work student	34	1	1
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

To ensure robust sample sizes per group and to make the report more accessible, we have generally reported the findings using the three broad groups shown in Table 2 – care workers, social workers and social care managers. Where relevant, we have provided additional context – for example, highlighting differences between domiciliary care workers and adult care home workers.

*Table 2. Workforce type groups used for reporting*

Workforce type	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Care workers	2,368	76	79
Social care managers	266	9	5
Social workers	485	16	15
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

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# Executive summary

## Introduction

The overarching purpose of this research was to develop a better understanding of the experiences and perceptions of those working in the social care sector. The ambition is for the project to provide broad, ongoing intelligence about the workforce in social care and social work in Wales. This report is based on the first comprehensive survey of the registered social care workforce in Wales and highlights the key findings.

The social care workforce incorporates a large range of roles and, to simplify the reporting, this is broadly grouped into care workers, social workers and social care managers.

This survey only includes people who are on the Social Care Wales Register. Those working within the social care sector but not necessarily registered – personal assistants, for example – are not included in this research.

## Job satisfaction and morale

The main reason that people join the social care sector is a desire to make a difference to people's lives, as well as believing that the role would suit their skills and they would be good at it. This suggests that most people are motivated to join the care sector because it is an area they want to work in.

Overall, three in five are satisfied with their present job. Social workers have the highest level of dissatisfaction, with almost two in five (38%) being dissatisfied. This dissatisfaction is clearly a cause for concern, and further exploration is required to understand the causes.

The majority of registered people said that their job gave them a sense of work well done at least most of the time, and this undoubtedly supports their original motivation to make a difference. However, there was a significant difference between care workers and social workers (65% compared with 44%). Social workers are less inclined to feel they are completing their work well, and this is likely to be influencing their overall job satisfaction.

In addition to asking about job satisfaction, we asked registered people whether they would recommend their organisation as a great place to work. On this metric, social care managers gave a very different perspective to other staff. Four in five social care managers would recommend their organisation as a great place to work, compared with around half of care workers and social workers (52% and 48% respectively).

Overall, most registered people felt valued by the people and families they support, by their colleagues and by their manager. However, less than half felt valued by partner agencies, such as health staff and police, or the general public. The lack of appreciation from the general public is particularly acute amongst social workers. Just one in five agreed that they felt valued, and this almost certainly has a negative impact on social workers.

All registered people were asked about their own morale and that of their colleagues. Two in three said that their own morale was good either all or most of the time, but most perceived the morale of their colleagues to be less positive. Since an individual's judgement of their own morale is more likely to be correct, it seems that registered people may be underestimating



the morale of their colleagues. It is worth noting that care workers' morale is significantly higher than that of social workers, and this reflects a narrative throughout much of the data that the social work profession is under particular stress.

## Day-to-day work

More than three in four social workers, and around three in five social care managers, said that having too much work to do/not having enough time caused them stress. Similar proportions listed paperwork and bureaucracy as a cause of stress. Care workers appear to be less affected generally by stress while carrying out their work, although they are more likely than other groups to say that difficulties in relationships with colleagues cause them stress while carrying out their job.

Most agreed they were able to meet the needs of the people they care for, although only half felt they had enough time to do their job well. Once again, it was social workers who were significantly less likely to feel that they could meet the needs of their clients, or that they had enough time to do their job well, all of which is likely to contribute to stress and job dissatisfaction.

Overall, almost two in five had personally experienced bullying, discrimination or harassment at some point in their working life. Social workers are the most likely to report negative experiences, with a third of them saying they have been bullied at work.

## Leaving the sector

There are real challenges in maintaining an experienced and qualified workforce, with over a quarter of all registered people expecting to leave the social care sector within the next 12 months, and 44% expecting to leave within the next five years.

One in five social workers are very or quite likely to leave the profession in the next year, and nearly half think it quite likely they will leave within the next five years. Even allowing for a certain amount of over-claiming, this shows there is cause for concern regarding retention. Two in five of those aged 35-54 expect to leave within five years, and this age group is likely to include experienced staff who are difficult to replace.

Care workers are slightly more likely than social workers to leave in the next 12 months, and this is perhaps not surprising as they are working in a much more fluid jobs market.

The most frequently given reasons for expecting to leave the social care sector within the next five years were pay, overwork and poor employment/working conditions. Care workers were most likely to cite pay, whilst social workers and social care managers were more likely to cite overwork. Three in ten of both care workers and social workers cited poor employment and working conditions.

## Skills and training

Four in five registered people agree that they get the right training to do their job well.

The most demand for training may be amongst social workers, where only seven in ten feel they get the right training to do their job well, most (85%) want to improve their skills, and half feel they need more training to progress their careers.

Two in three registered people do not consider there are any barriers to accessing training in their workplace, although once again it is social workers who are considerably more likely to encounter barriers than other workforce types. The two largest barriers faced by social workers are a lack of time and the availability of courses. Amongst care workers, the barriers identified were availability and a lack of information about the training available.

There is latent demand for training, although any additional provision would need to ensure it was well publicised and accessible to staff in bite-sized pieces so that it could better fit into busy schedules.

## Pay and benefits

Three in five are satisfied with the terms and conditions of their main job, although care workers are less satisfied than other groups and generally have less preferential terms. This is clearly linked to the fact that care workers are the least likely to be employed by a single employer on a salary with fixed hours.

There is a high level of dissatisfaction with pay amongst both care workers and social workers, although this is more pronounced amongst care workers.

Work-related benefits vary greatly between roles, with perhaps the most important difference being that only half of care workers receive sick pay, compared with much higher proportions of social workers.

Over half of those currently employed on a zero hours contract would prefer a fixed, regular hours contract, although a significant minority would choose to stay on a zero hours contract.

Registered people were asked how well they were managing financially. Overall, three in ten (30%) felt they were doing alright or even living comfortably. However, when we consider the data by workforce type, it is clear that care workers, in particular, are facing challenges due to the wider increases in the cost of living.

## Making social care more appealing

Our final question asked what should be done to make the social care sector a more attractive and rewarding place to work. Not surprisingly, the most commonly given response – given by three in four registered people – was that the work needed to be better paid.

Social workers are more likely to see workload (32%), better communication and support from managers (20%), the need for more permanent staff (17%) and better/safer working conditions (16%) as key factors to be addressed than those in other roles. Having more qualified and permanent staff in place would enable social workers to feel they had time to do their job properly, as well as take up training, which would contribute to overall job satisfaction and reduce the propensity to leave.

In addition to the top-rated comment about pay, care workers tended to focus on comments regarding terms and conditions such as sick pay, holiday pay, mileage and benefits more generally. This highlights the need for care work to consider the overall package of rewards and not just the hourly rate of pay when competing for staff from other sectors.

# Joining the social care sector

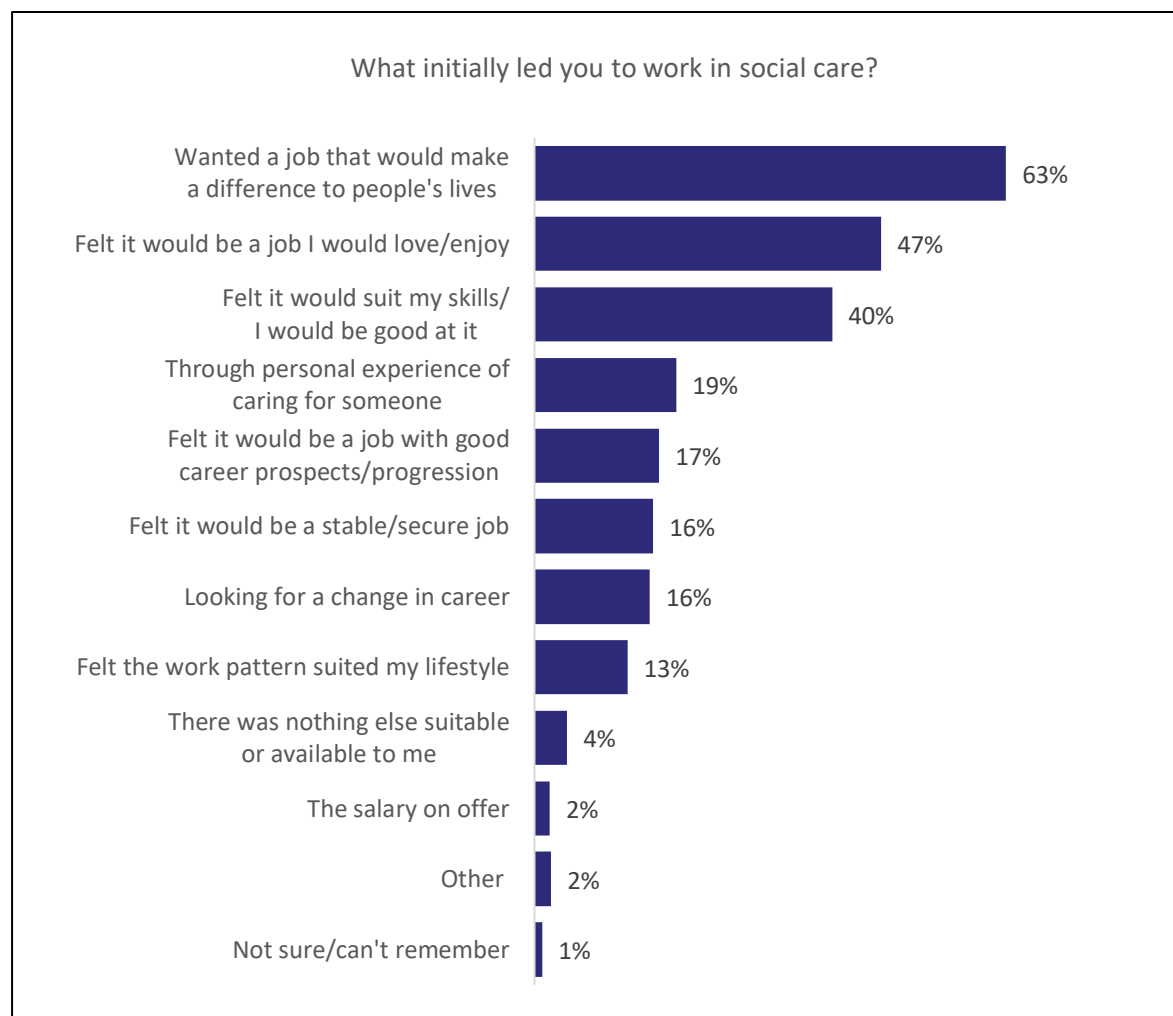
Our initial questions asked people about their reason for wanting to work in social care and how they first found out about the sector.

## Wanting to make a difference is key driver for joining care sector

Over three fifths (63%) of registered people initially began working in social care because they wanted a job that would make a difference to people's lives, and almost half (47%) said they felt it would be a job they would enjoy. Two fifths (40%) felt working in social care would suit their skills or be something they would be good at, while around a fifth (19%) already had personal experience of caring for someone.

This suggests that most people are motivated to join the care sector because it is an area they want to work in, rather than for practical reasons, such as the work pattern suiting their lifestyle (13%), the salary (2%) or 'falling into' the job because there was nothing else suitable or available to them (4%).

Figure 1. Motivations for working in social care



Base: All registered people (3,059).

The top three motivations for working in social care remain the same for all workforce types. However, if we consider different drivers for different workforce types, we can see that social workers are significantly more likely to say that they were drawn to social care because they:

- Wanted to make a difference to people's lives (76%)
- Felt they would be good at it (54%)
- Felt it would be a stable/secure job (28%)
- Felt there were good career prospects/progression (26%)
- Were attracted by the salary (7%).

Care workers are significantly more likely to say they were initially led to work in social care because:

- They had had personal experience of caring for someone (20%)
- They were looking for a change in career (16%)
- They felt the work pattern suited their lifestyle (14%),
- There was nothing else suitable or available to them (5%).

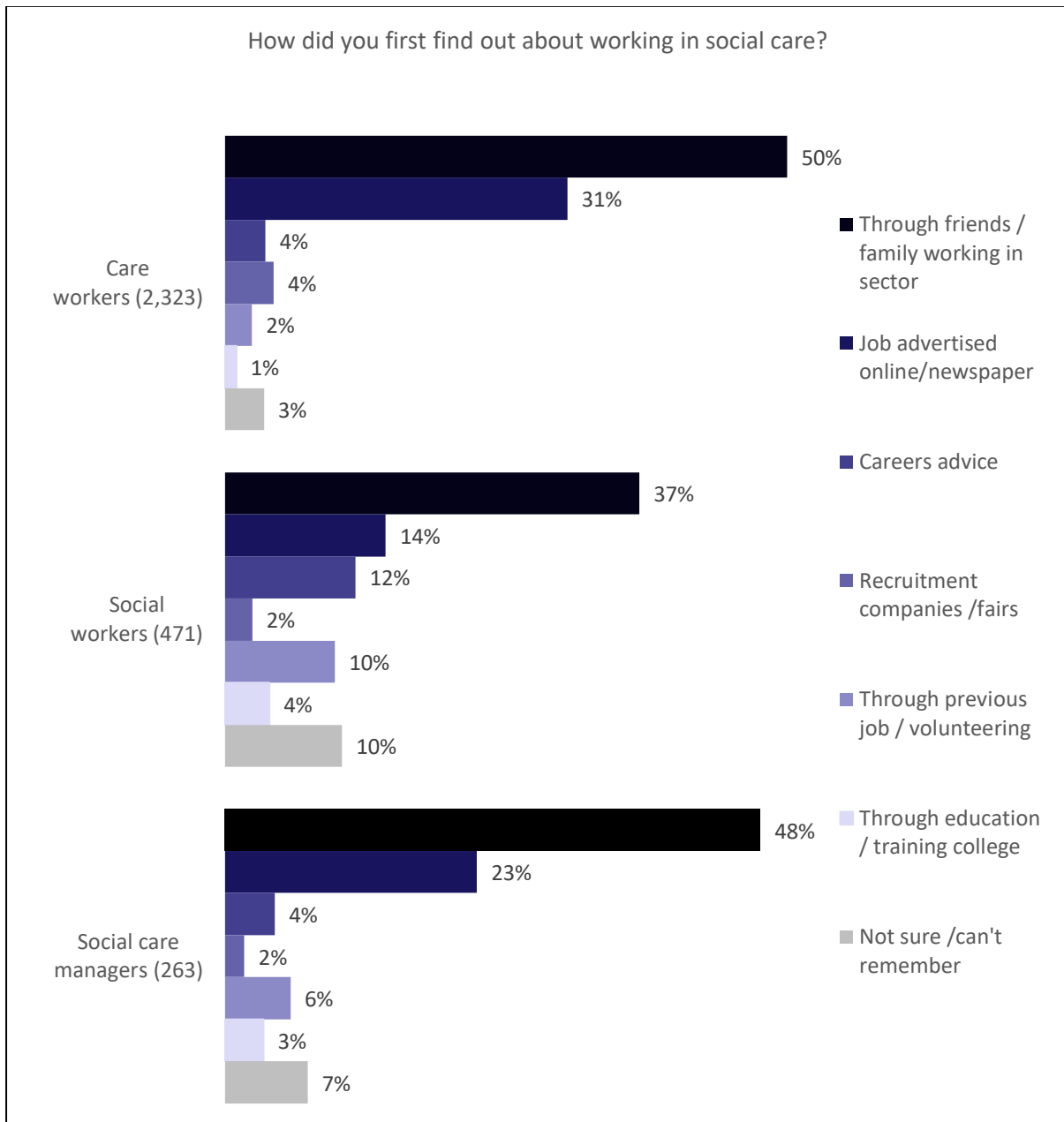
## **Friends and family are key to finding out about social care jobs**

Around half (48%) of all registered people first found out about working in social care through friends and family working in the sector. However, this falls to 37% for social workers, who are significantly more likely to have found out about it through careers advice (12%) or previous job/volunteer work (10%).

Social workers are also significantly less likely to have seen a job advertised online (e.g. on social media/websites) or in a newspaper (14% vs. 28% overall), while this was the case for just under a third (31%) of care workers.

Fewer than 0.5% said they first heard about working in social care through WeCare Wales, an online jobs portal for the care sector in Wales that launched in March 2019. This may become a more prominent source over time.

Figure 2. How registered people first found out about working in social care



Base: All registered people (number shown in brackets).

### High awareness of Code of Professional Practice

All social care managers and social workers are aware of the Social Care Wales Code of Professional Practice. However, while awareness is also high amongst care workers, 8% of this group are not aware of the code. Therefore, this is perhaps an area which would benefit from promotion amongst care workers.

# Job satisfaction

## Social care managers most likely to be satisfied with their job

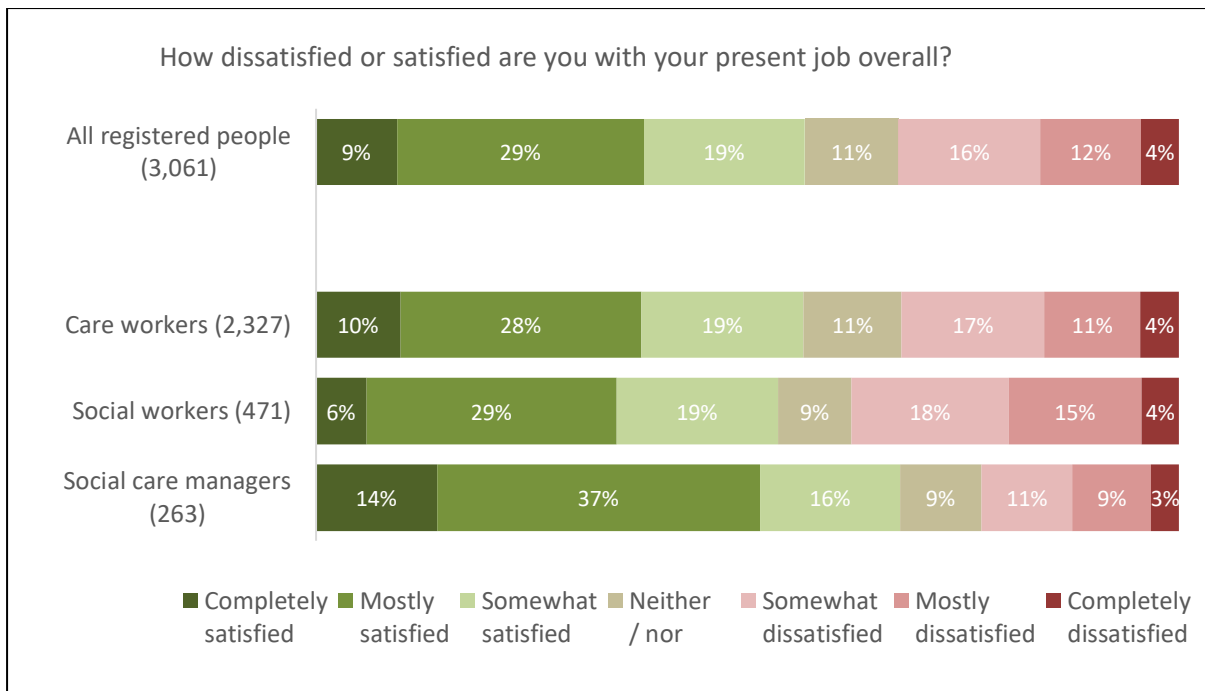
Our survey asked registered people to rate their level of satisfaction with their current job using a seven-point scale. Overall, 57% of registered people are satisfied with their present job, although this leaves one in three (33%) dissatisfied.<sup>2</sup>

Social care managers have the highest level of satisfaction with their present job (68%). Whilst we did not ask questions about their reasons for being satisfied, we could speculate that a certain degree of autonomy and the ability to have an impact, alongside financial security, contributes to their satisfaction.

Social workers have the highest level of dissatisfaction, with almost two in five (38%) being dissatisfied. This dissatisfaction is clearly a cause for concern, and further exploration is required to understand how far this is correlated with the likelihood of leaving the profession.

Amongst care workers, those who work in an adult care home are significantly more likely to be satisfied with their job (59%) than domiciliary care workers (55%).

Figure 3. Level of satisfaction with current job



Base: All registered people (number shown in brackets).

<sup>2</sup> This question came from the harmonised question set provided by What Works Wellbeing <https://whatworkswellbeing.org/about-wellbeing/how-to-measure-wellbeing/>

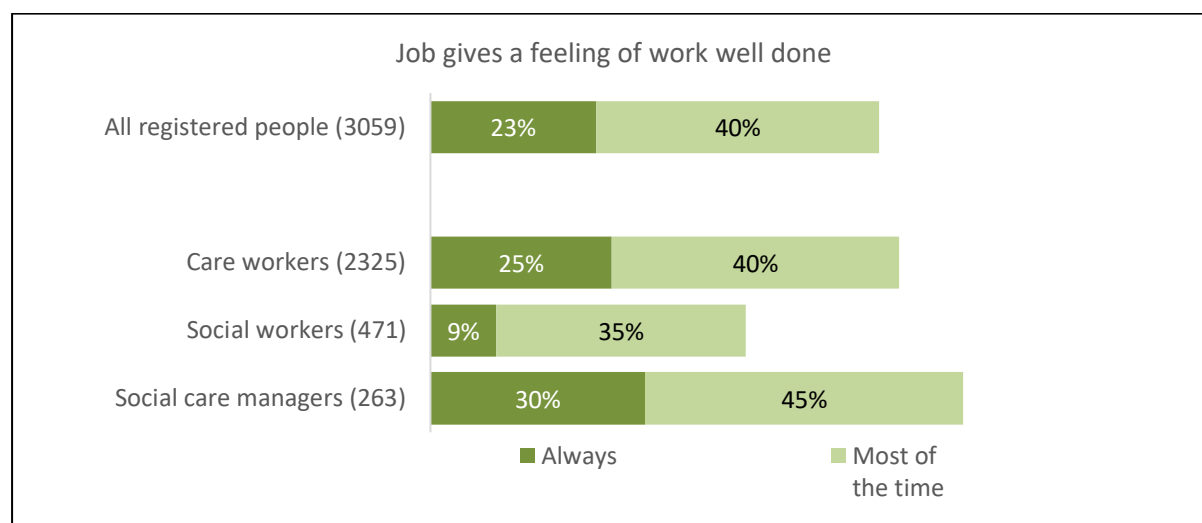
The most recently available benchmarking data (Understanding Society, 2018) indicates that 57% of UK employees are mostly or completely satisfied with their job and 4.4% are mostly or completely dissatisfied with it. This compares with 38% and 16% in our survey. Direct comparisons are difficult though as we do not have any breakdown by industry sector and the benchmark is six years old.

## Two in three care workers experience a sense of a job well done

The majority of registered people (63%) said that their job gave them a sense of work well done at least most of the time<sup>3</sup>, and this undoubtedly reflects back on their original motivation to make a difference. However, there was a significant difference between care workers and social workers (65% compared with 44%) and an even more marked difference when we consider the proportion who say they always get a feeling of a job well done (25% compared with 9%).

Social workers are less inclined to feel they are completing their work well and are more likely to be dissatisfied with their job.

Figure 4. Frequency with which job gives a feeling of work well done



Base: All registered people (number shown in brackets).

## Half would recommend their organisation as a place to work

In addition to asking about job satisfaction, we asked registered people whether they would recommend their organisation as a great place to work. On this metric, social care managers gave a very different perspective to both social workers and care workers.

Four in five social care managers (80%) would recommend their organisation as a great place to work, compared with around half of care workers (52%) and social workers (48%). This clear difference may suggest a disconnect between the perceptions of staff and those of managers within the same organisation. There may be further work required to understand the extent to which social care managers are aware of the wider workforce perception of the workplace, and whether this needs to be addressed.

<sup>3</sup> The Civil Service run an annual staff survey which includes the question – ‘My work gives me a sense of personal accomplishment’. In 2022, 75% of civil servants working in Wales either agreed or strongly agreed with this statement.

<https://www.gov.uk/government/publications/civil-service-people-survey-2022-results>

Social care managers are more likely to have some responsibility for the workplace environment and may be actively involved in staff recruitment, which is likely to affect their perspective in answering this question.

Figure 5. Rating of organisation as a place to work



Base: All registered people (number shown in brackets).

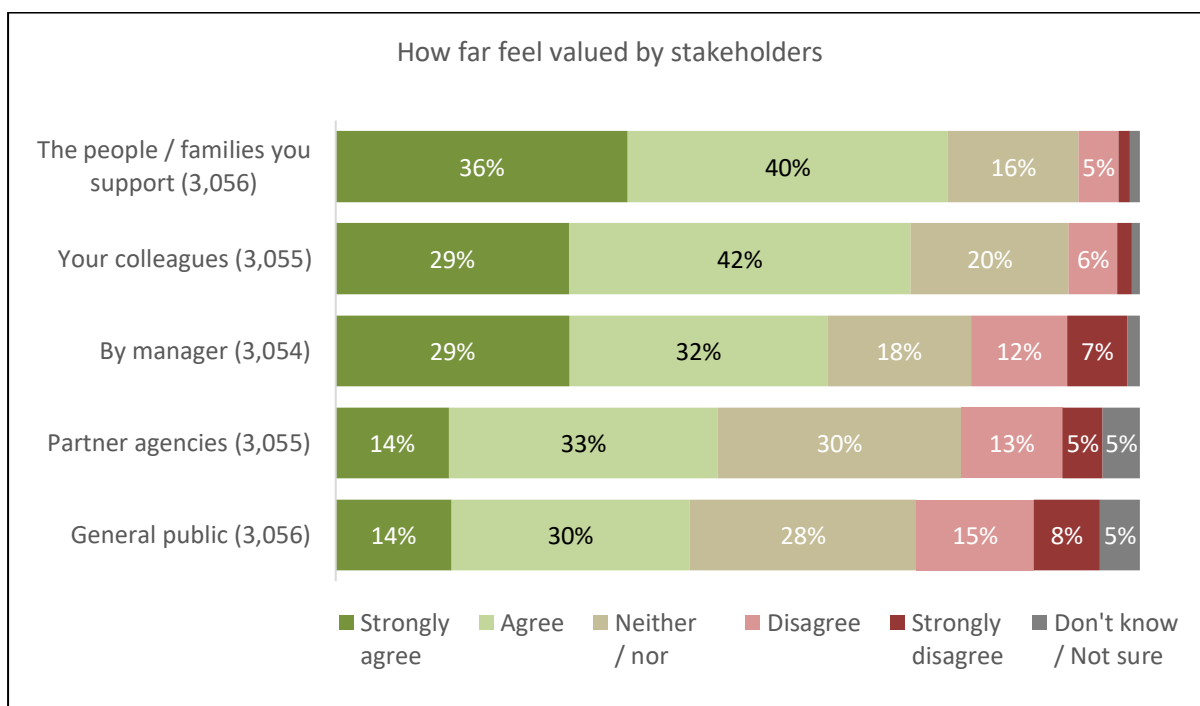


# Feeling valued and supported

## Fewer than half feel valued by the general public

Our survey asked the extent to which those working in social care felt valued for the work they do by different groups in society. Overall, most registered people felt valued by the people and families they support (76%), by their colleagues (71%) and by their manager (61%). However, fewer than half felt valued by partner agencies such as health staff and police (48%) or the general public (44%).

Figure 6. Extent feel valued by key stakeholders



Base: All registered people (number shown in brackets).

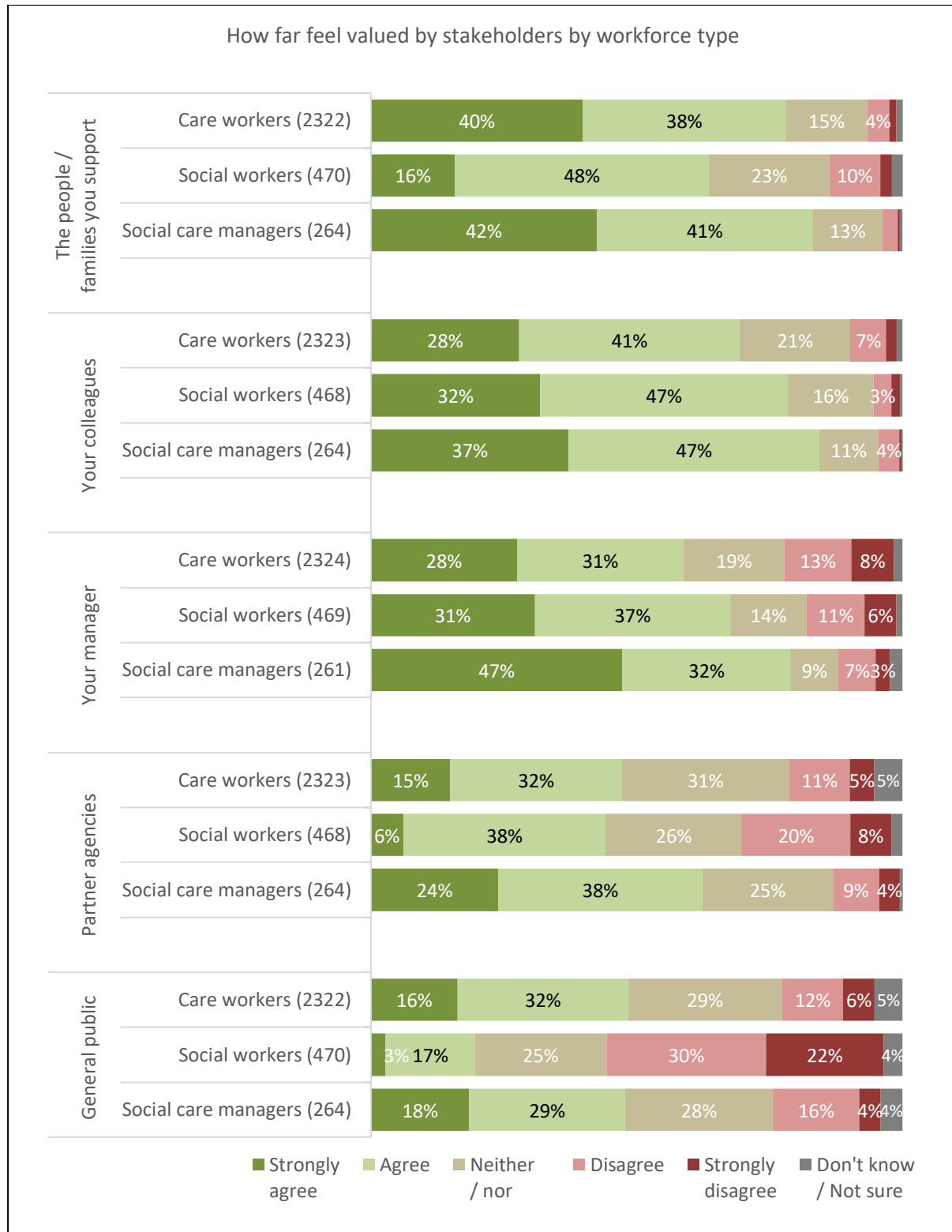
Clearly stakeholder attitudes and the way these are perceived vary by workforce type. Figure 7 shows the extent to which each workforce type feels valued by different stakeholders.

The general public should be considered as a key stakeholder for the social care sector, and our data shows that fewer than half (44%) of registered people feel valued by the public. This falls to just 20% amongst social workers, with half (52%) of them actively disagreeing. This perception, whether real or imagined, is likely to have a negative impact on those working in the sector. This warrants further exploration and needs to be challenged if working in the care sector is to become more attractive to potential staff.

Three in four (78%) care workers felt valued by the people and families they directly supported – though it is interesting to note that domiciliary care workers are significantly more likely to agree they feel valued by those they support (80%) than care home workers (76%). However, fewer than half of care workers felt valued by the general public (48%) or partner agencies (47%).

Those in managerial positions in social care were generally more likely to feel they were valued by all stakeholders than other registered people. Four in five of this group agreed they felt valued by the people they support (83%), their colleagues (84%) and their managers (79%).

Figure 7. Extent to which feel valued by stakeholders by workforce type

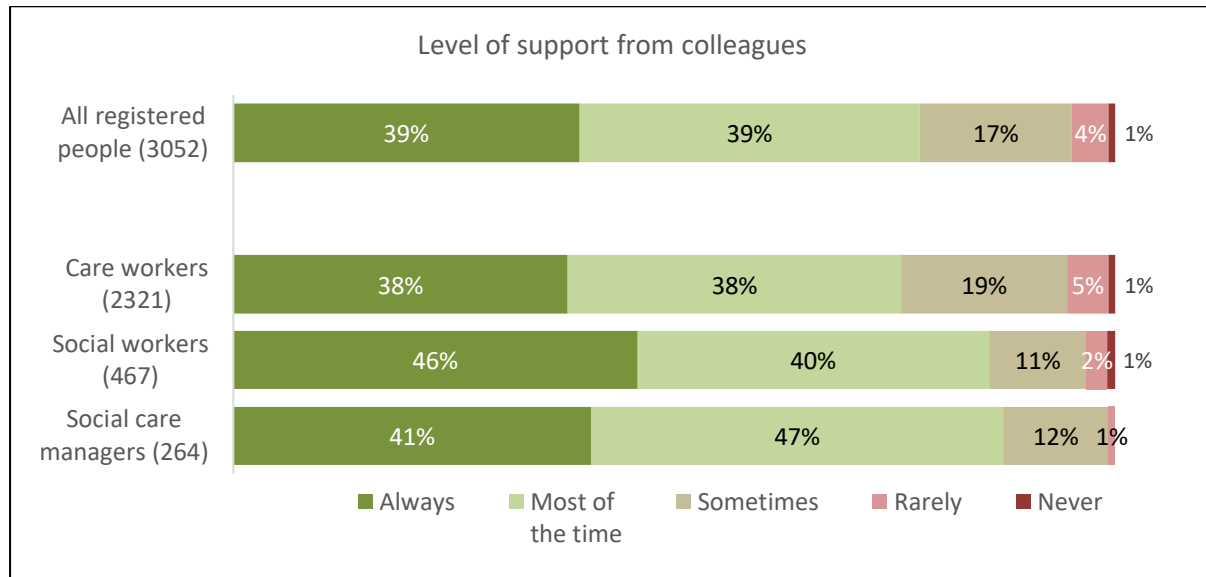


Base: All registered people (number shown in brackets).

## Four in five feel supported by colleagues

In undertaking their work, most people reasonably expect to receive help and support from their manager and colleagues. The vast majority of registered people (78%) feel that they get support from their colleagues either always or most of the time, and this rises to 86% of social workers and 87% of social care managers.

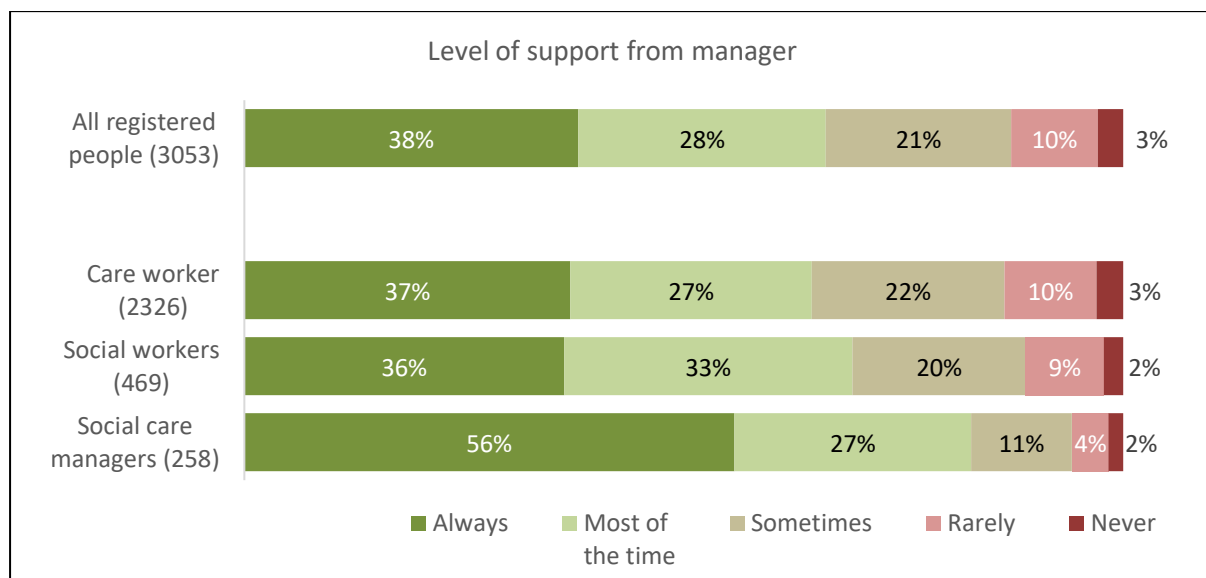
Figure 8. Level of support from colleagues



Base: All registered people (number shown in brackets).

Overall, two in three registered people (66%) consider they receive support from their manager either always or most of the time. As has been seen elsewhere in the report, those in more senior, managerial roles are more likely to consider they receive support (83%), compared with care workers (65%) feeling the same way.

Figure 9. Level of support from manager

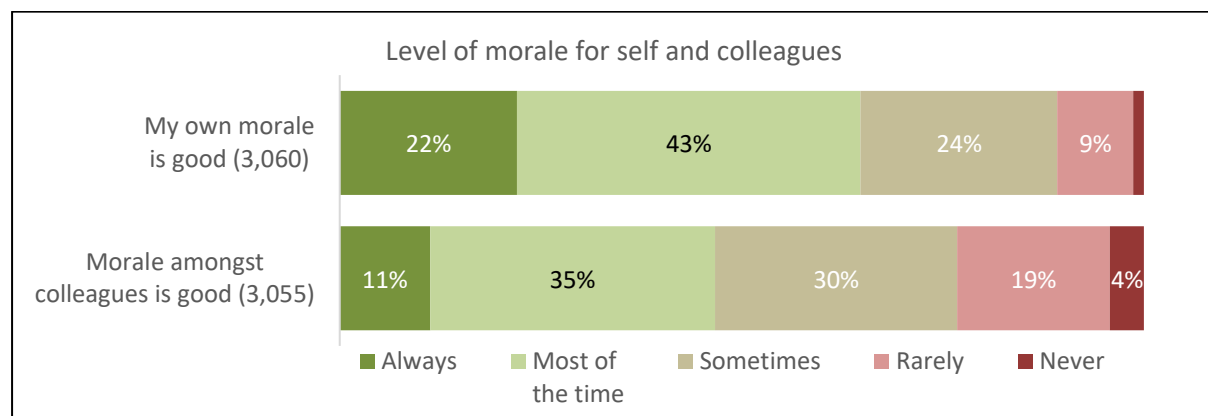


Base: All registered people (number shown in brackets).

## Two in three say their morale is generally good

All registered people were asked the extent to which both their own morale and that of their colleagues was good. Almost two in three (65%) said that their own morale was good either all or most of the time. However, most perceived the morale of their colleagues to be less positive, with just 47% considering it to be always or mostly good. This perception that other people's morale is worse than their own can perhaps be explained by the tendency to talk more about negative experiences and share challenges with colleagues, rather than the things that go well. It is important when assessing the morale of the sector to focus on how each individual feels, rather than how they *think* their colleagues feel. It is possible that sharing this finding could help to instigate some changes in perception.

Figure 10. Extent to which morale is good

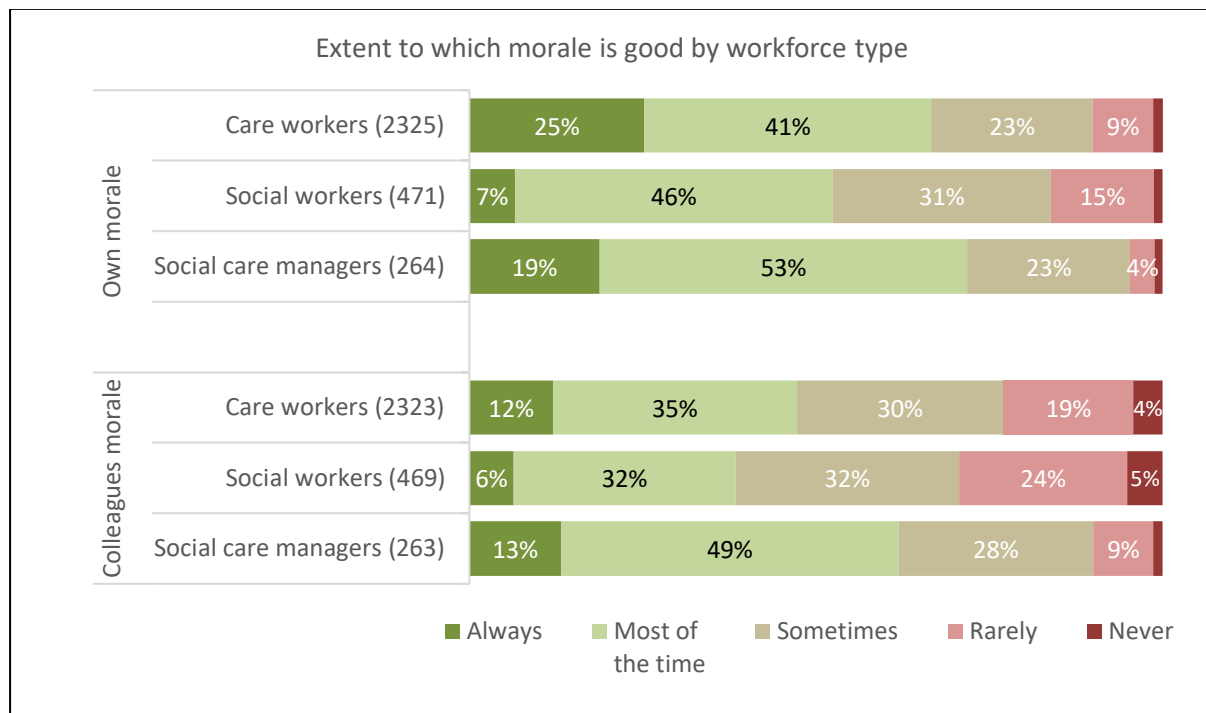


Base: All registered people (number shown in brackets).

When we consider the data by workforce type, we can see higher levels of good morale for care workers than social workers. Amongst care workers, 67% say their own morale is good at least most of the time, contrasting with just 52% of social workers saying the same. Amongst care workers, domiciliary care workers (69%) are significantly more likely than care home workers (65%) to say their own morale is good. When asked about their colleagues' morale, around half (47%) of care workers considered it was good at least most of the time, compared with 38% of social workers.

These findings on morale support a narrative throughout the report that the social work profession is under particular stress.

Figure 11. Morale by workforce type



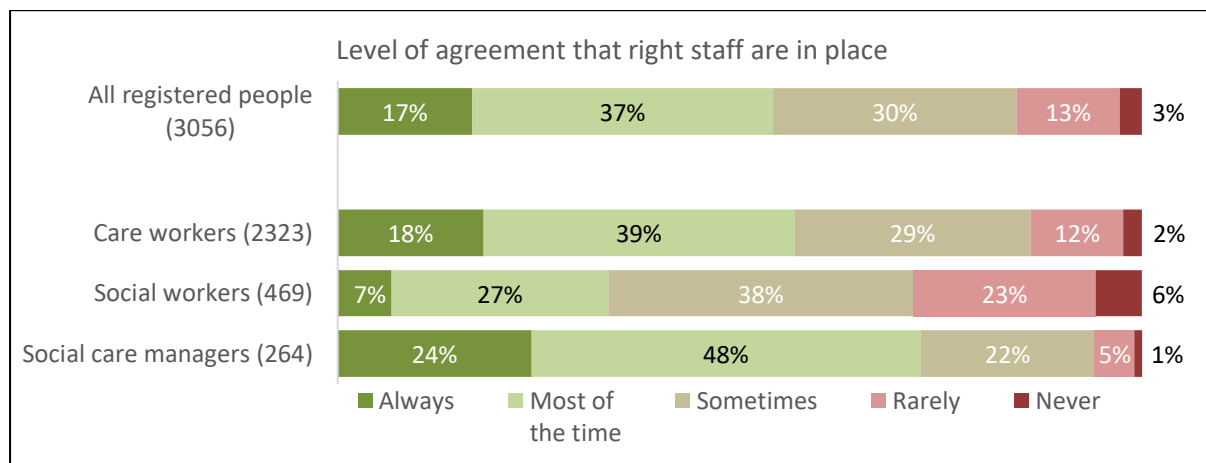
Base: All registered people (number shown in brackets).

### One in three social workers think right staff are in place

Just over half (54%) of all registered people agreed that the right staff are in place to deliver services at least most of the time.

However, there is a clear difference in views according to roles, with just one in three social workers (34%) believing this to be true, compared with 72% of those in senior or management roles. Clearly this question focuses on individual perception. Whilst those in senior roles may have a good overview, it is likely that frontline staff dealing with a busy workload see the more immediate challenges. Communication is likely to be key to narrowing this gap in perception and might help to address some staff gaps.

Figure 12. Level of agreement right staff are in place to deliver services



Base: All registered people (number shown in brackets).

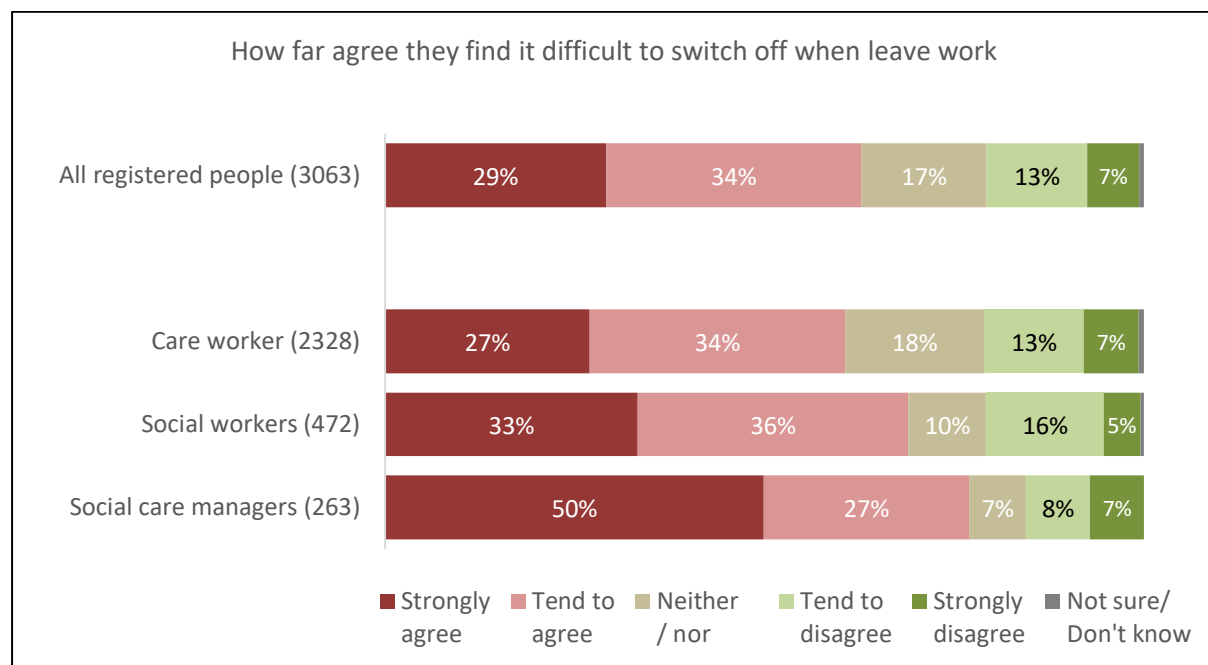
## Stress in the workplace

All registered people were asked to what extent they agreed or disagreed with a series of statements designed to understand the potential stress they were feeling.

### More than three quarters of social care managers find it hard to switch off

Almost two in three (63%) registered people agreed that they found it hard to switch off when they leave work. This rose to 69% for social workers and 77% for social care managers. Around three in five (61%) care workers find it difficult to switch off when they leave work, which highlights that this is not a concern only among highly paid staff but impacts those on low wages as well.

Figure 13. Proportion of people agreeing they find it difficult to switch off when they leave work



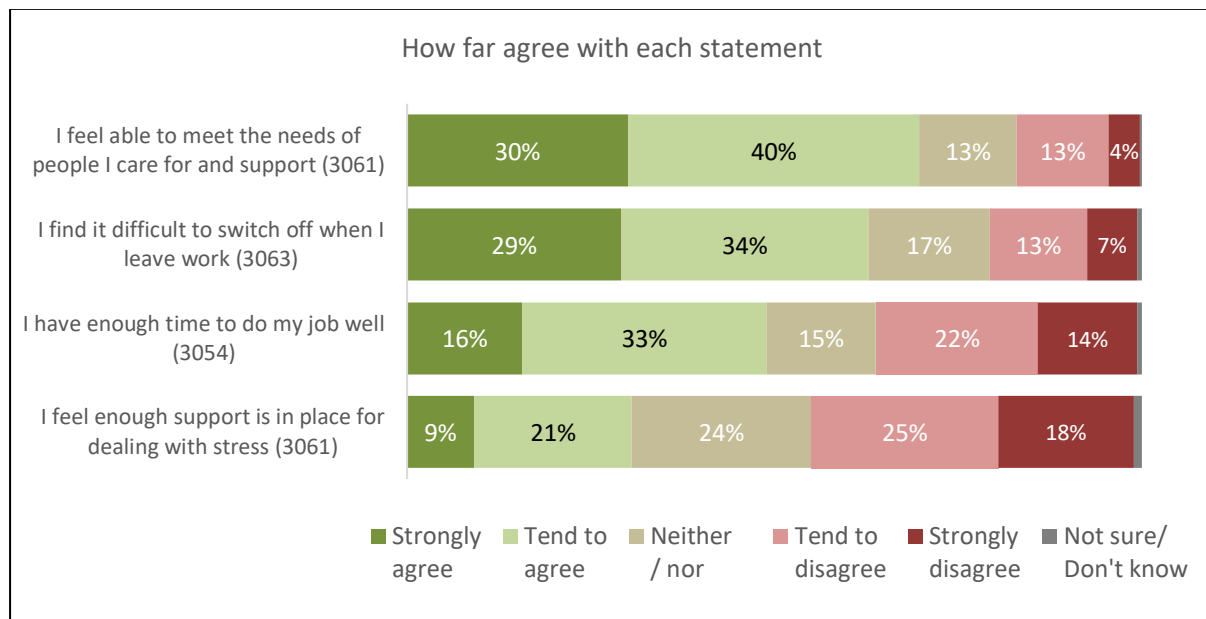
Base: All registered people (number shown in brackets).

Most registered people (70%) agreed they were able to meet the needs of the people they care for. However, only around half (49%) felt they had enough time to do their job well, and just one in three (31%) felt that there was enough support in place to deal with stress.

Once again it was social workers who were significantly less likely to feel that they could meet the needs of their clients (41%), or that they had enough time to do their job well (23%).

Social care managers were the most likely to believe there was enough support for stress in place (45%).

Figure 14. Levels of agreement with a number of stress-related statements.



Base: All registered people (number shown in brackets).

### Three in four social workers have too high a workload

The survey asked registered people whether any of a list of options were causing them stress while carrying out their job (

Figure 15).

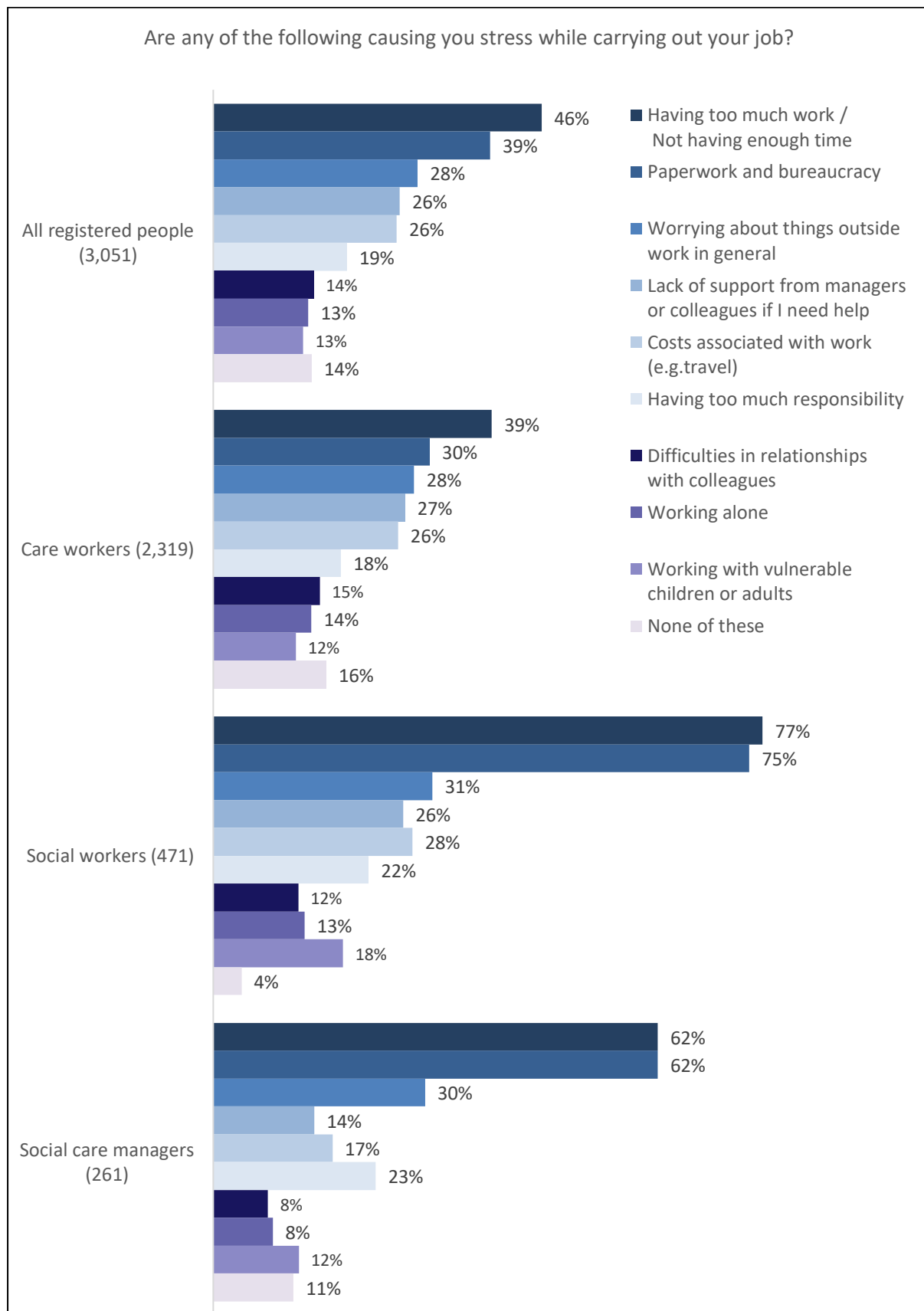
More than three quarters (77%) of social workers, and around 62% of social care managers, said that having 'too much work to do/not having enough time to do it' caused them stress. Similarly, three quarters (75%) of social workers and 62% of social care managers listed paperwork and bureaucracy as a cause of stress. Care workers are much less likely to list these factors as something that causes them stress (39% and 30% respectively), though they are still the top causes of stress for this group.

Care workers appear to be less affected generally by stress while carrying out their work; they are the group most likely to say that nothing causes them stress at work (16%). However, care workers are more likely than all registered people to say that difficulties in relationships with colleagues (15%) cause them stress while carrying out their job.

It is also apparent that the things that cause care workers stress while carrying out their work varies between domiciliary care workers and care home workers, which is unsurprising given the different working environments. Domiciliary care workers are more likely to say that working alone (15%) and costs associated with work, such as travel (36%), are causing them stress, while care home workers are more likely to say that difficulties in relationships with colleagues (16%) cause them stress.

It is noteworthy the third most frequently given response, given by 28% of registered people said that worrying about things outside work (such as responsibilities and stresses at home) causes them stress while carrying out their job. This appears to be something that affects all registered people, regardless of their role (28% care workers; 30% social care managers; 31% social workers).

Figure 15. Causes of stress while carrying out job (top 10 responses)



Base: All registered people (number shown in brackets).



## A third would use Social Care Wales for information on health and wellbeing at work

Our survey asked where people would go to find out more information about health and wellbeing at work and offered a series of options to choose from. Around half of all registered people said they would go to their manager (48%), two fifths (40%) to their employer's website/intranet, and around a third would Google/search on the internet (35%) or go to Social Care Wales (33%).

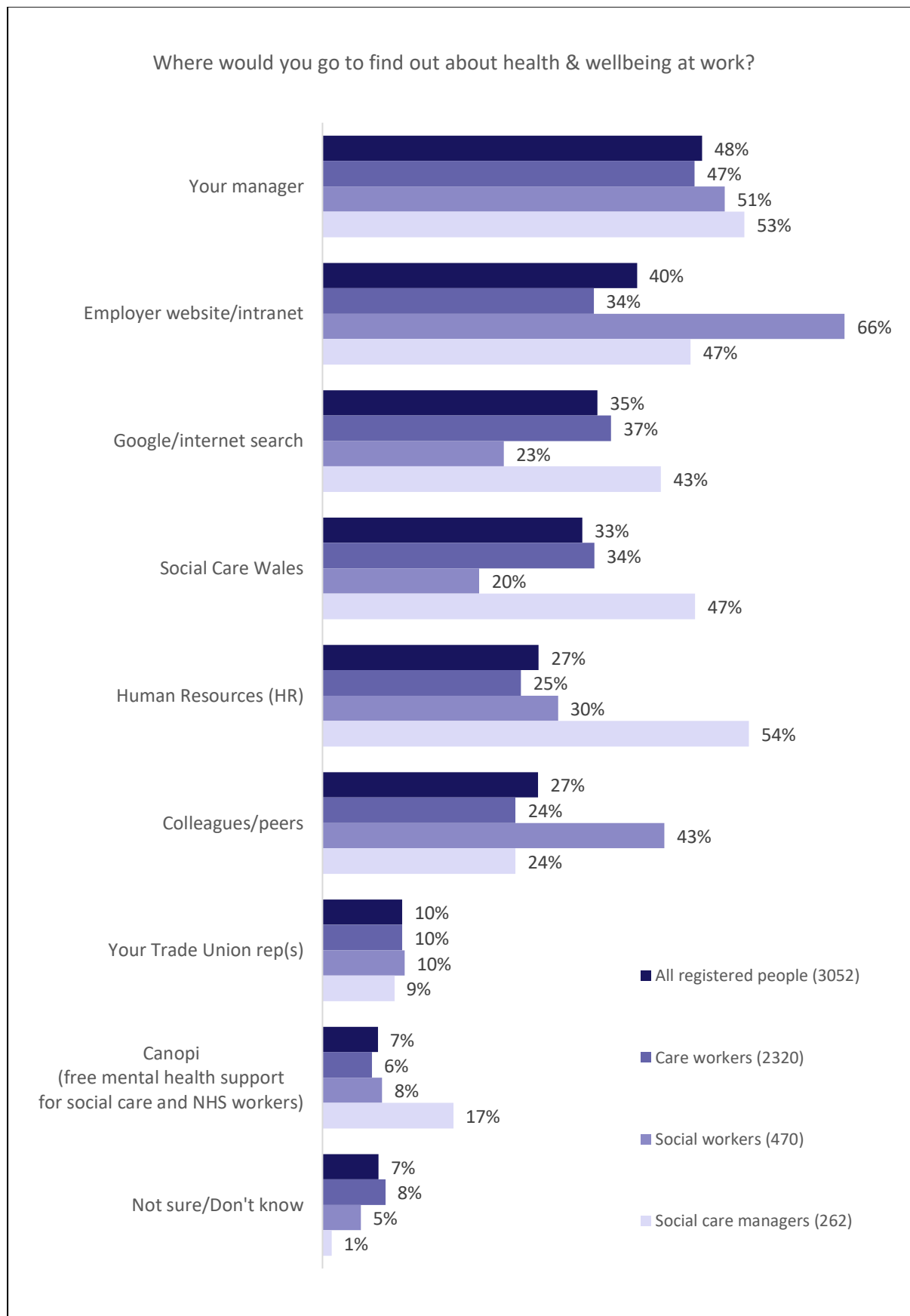
The top sources of information for social care managers were their HR department (54%), their manager (54%), Social Care Wales (47%) and their employer's website/intranet (47%). In contrast, the top sources for care workers were their manager (47%), an internet search (37%) and Social Care Wales (35%). Social workers' top three were their employer's website/intranet (66%), their manager (51%) and their colleagues (43%).

Canopi, which provides free mental health support for social care and NHS workers, is relatively unused by care workers (6%) or social workers (8%), though 17% of social care managers said they would use this service.

A small number of people offered additional options, including their GP (7 people) and the Employee Assistance Programme (5 people). These options could be added to the list for future surveys.

Overall, 7% of registered people wouldn't know where to find information and this is significantly higher amongst care workers, where more than one in twelve wouldn't know.

Figure 16. Sources of information on health and wellbeing at work



Base: All registered people (3,052).

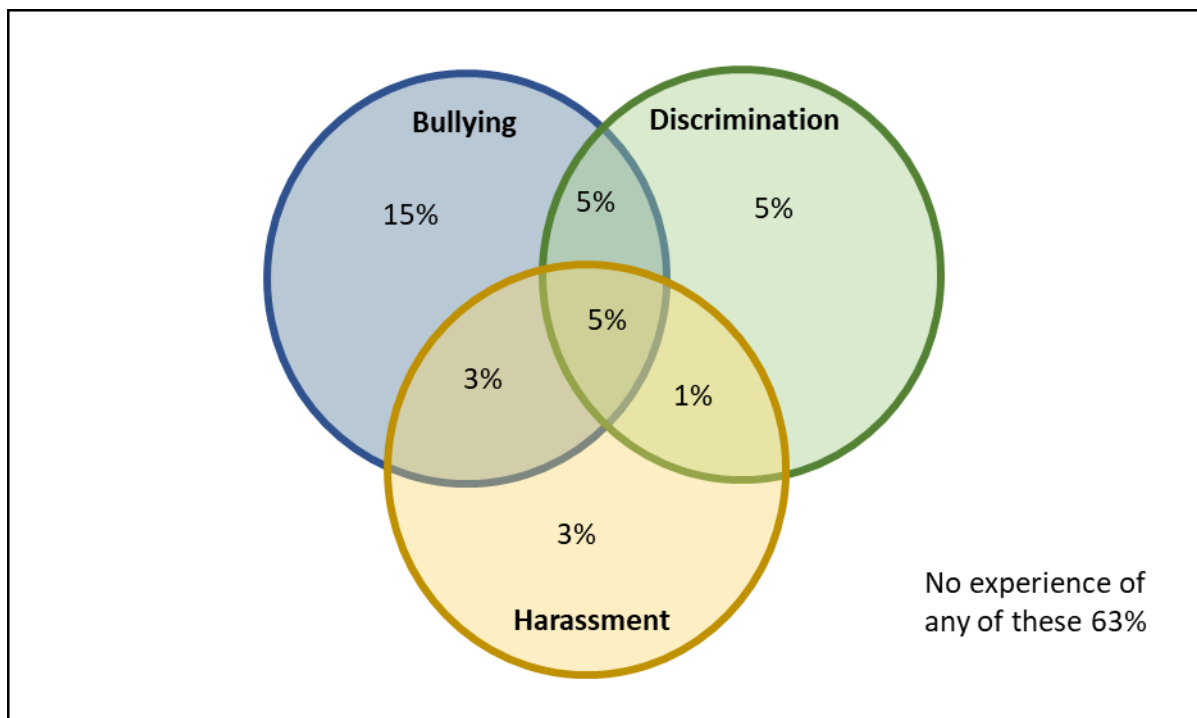
# Bullying, discrimination and harassment

## A third of social workers have experienced bullying at work

Our survey asked whether individuals had personally experienced bullying, discrimination or harassment at work. While over three in five (63%) registered people have no such experiences, this does still leave 37% reporting at least one experience.

The Venn diagram (Figure 17) seeks to show the way in which these behaviours overlap, with 5% of staff stating they had personally experienced all three. Overall, more than a quarter (28%) had been a victim of bullying, 16% of discrimination and 12% of harassment.

Figure 17. Experiences of bullying, discrimination and harassment



Base: All registered people (2,825).

We also looked at this data by key demographic information, including gender<sup>4</sup>, age and ethnicity.

- Men were more likely to say they had been discriminated against (21% v 14%) or harassed (16% v 11%) than women.
- Those aged 55+ were less likely to feel they had been discriminated against than younger workers.

<sup>4</sup> Please note fewer than 0.5% said they were Transgender, Non-binary or gender fluid and so we are unable to analyse by these characteristics.

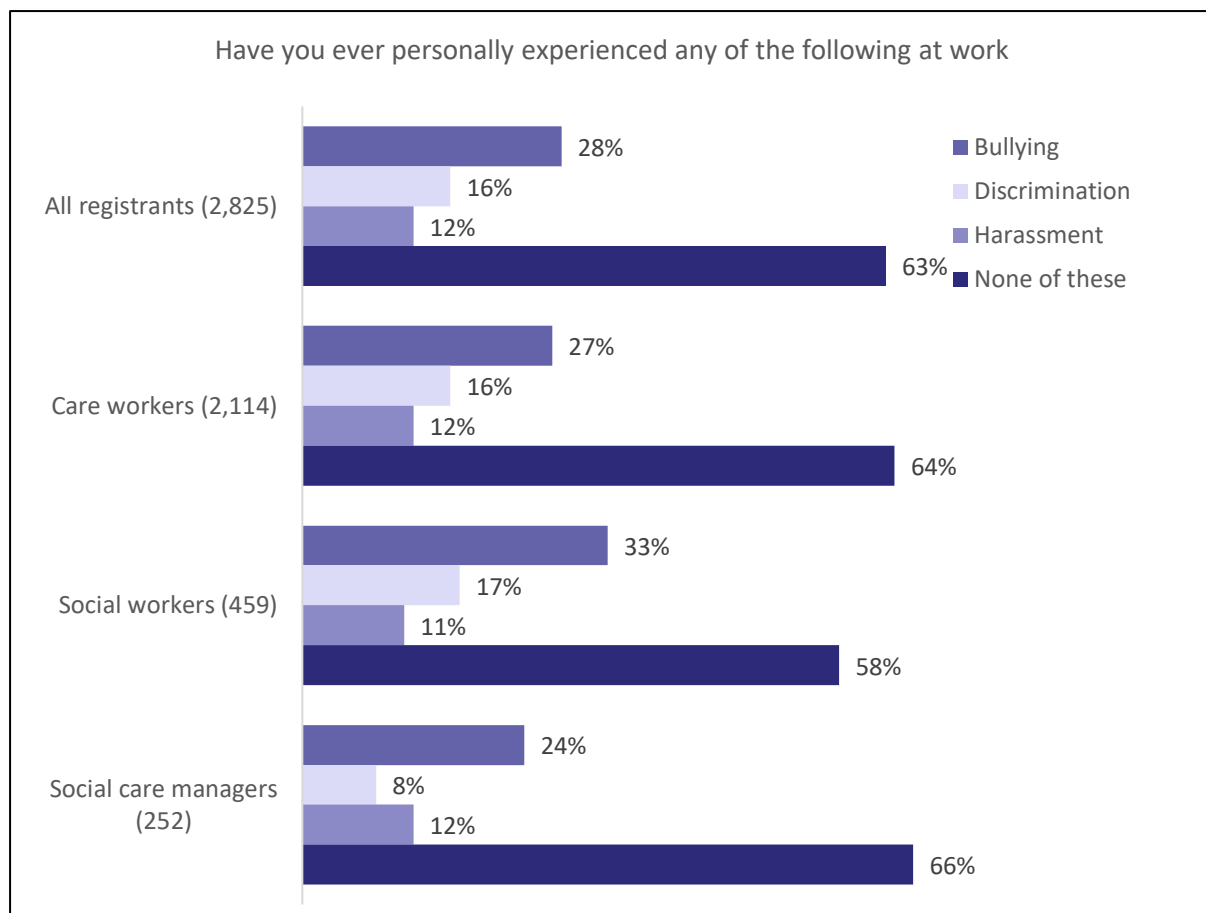
Almost half (45%) of registered people from a Black, Black British, Caribbean or African heritage said they have experienced discrimination compared with 21% of those with Asian heritage and 14% of White workers (14%). Asian workers were the most likely to say they had no negative experiences (73%).

Those of White heritage were more likely than other ethnic groups to say they had experienced bullying (28% against 19%).

There is also a clear correlation between feeling supported by managers and colleagues and never having had any experiences of bullying, discrimination or harassment (71%), while those who feel that their managers and colleagues help and support them only sometimes, rarely or never are significantly more likely to report bullying (42%), discrimination (26%) and harassment (17%).

As Figure 18 shows, social workers are the most likely to report negative experiences. A third (33%) say they have been bullied and 17% have experienced discrimination. Social care managers had lower levels of negative experience, with 24% experiencing bullying and 8% discrimination. Further research is needed to understand the nature of these experiences and how best to provide support.

Figure 18. Experience of bullying, discrimination, and harassment at work by workforce type



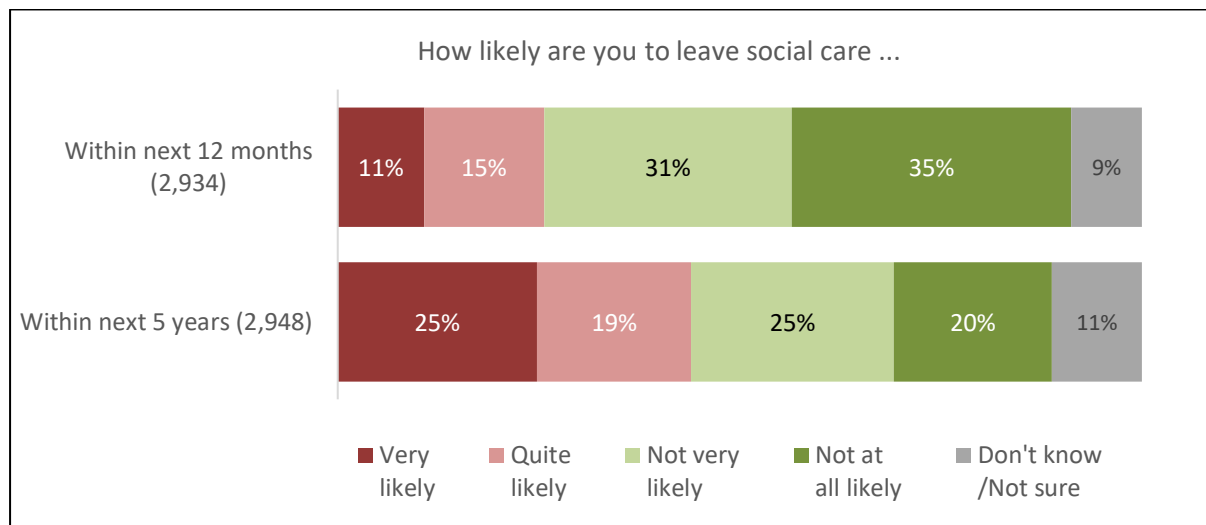
Base: All registered people (number shown in brackets).

# Leaving the social care sector

## One in four likely to leave the sector in the next 12 months

Just over a quarter (26%) of all registered people feel it is quite or very likely that they will leave the social care sector within the next 12 months. This rises to 44% quite or very likely to leave within the next five years (Figure 19). This clearly highlights real challenges in maintaining an experienced and qualified workforce.

Figure 19. Likelihood of leaving the social care sector



Base: All registered people (number shown in brackets).

The number of vacancies and the ability to recruit appropriately trained staff clearly varies by role, and Figure 20 looks at the propensity to leave by different workforce types.

One in five (21%) social workers are very or quite likely to leave the profession in the next year, and nearly half (46%) think it quite likely they will leave within the next five years<sup>5</sup>. Even if this figure includes a certain amount of over-claiming, there is clear cause for concern regarding retention and a real challenge to recruit suitably experienced replacement staff.

If we look at social workers by age, we can explain a certain level of predicted churn from retirement. Almost three in four (73%) of those aged 55+ expect to leave within the next five years and we can reasonably assume that a large proportion of these will be due to retirement. However, 41% of those aged 35-54 also expect to leave within five years, and this age group is likely to include experienced staff who are difficult to replace.

<sup>5</sup> Benchmarking data is being sought for similar professions within the UK and Wales.

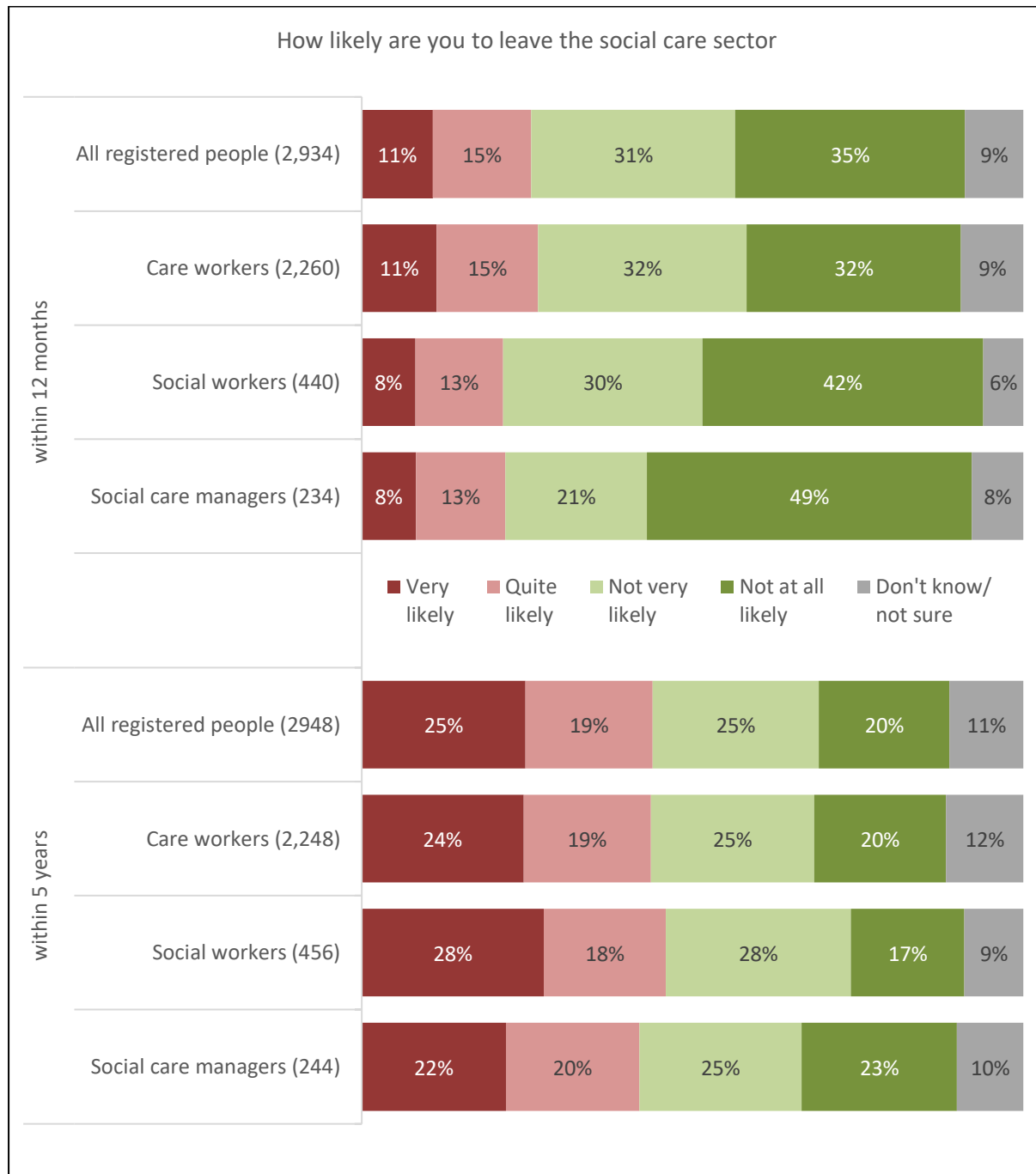
In education, a survey of almost 18,000 National Education Union members in 2023 showed 16% of teachers plan to leave the education profession within two years, and 41% plan to be gone within five years, excluding “don’t know” answers. Almost a quarter of support staff respondents (23%) will no longer be working in education by 2025, and almost half (48%) expect to have left by 2028.

<https://neu.org.uk/latest/press-releases/state-education-recruitment-and-retention>

Care workers are slightly more likely than social workers (26% compared with 21%) to leave in the next 12 months. Male care workers showed a higher propensity to leave than women at both 12 months (36% v 25%) and five years (52% v 42%). It seems that male care workers are more inclined to see care work as a temporary career than female staff, and a targeted approach to retaining male staff could be beneficial to an overall reduction in churn.

There is also a clear difference amongst care workers, with domiciliary care workers significantly more likely than care home workers to want to leave within the next 12 months (29% vs 24%) and the next 5 years (46% vs 41%).

Figure 20. Likelihood of leaving sector by workforce type

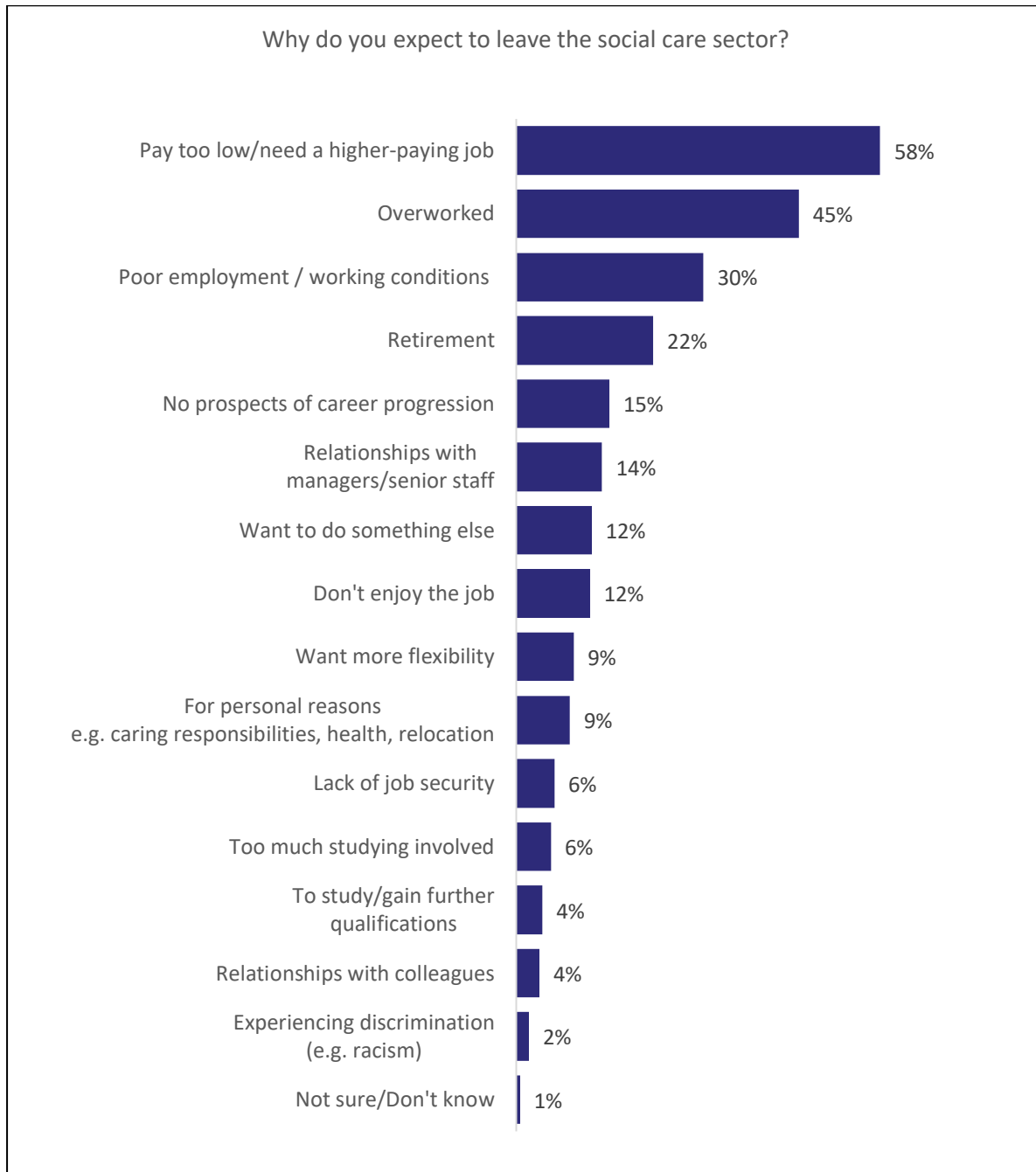


Base: All registered people (number shown in brackets).

## Three in five cite low pay as a reason to leave the sector

The most frequently given reasons for expecting to leave the social care sector within five years were pay (58%), overwork (45%) and poor employment/working conditions (30%). Around one in five (22%) expect to retire, which correlates with the higher proportion of older registered people who say they are likely to leave the social care sector.

Figure 21. Reasons for expecting to leave the social care sector<sup>6</sup>.



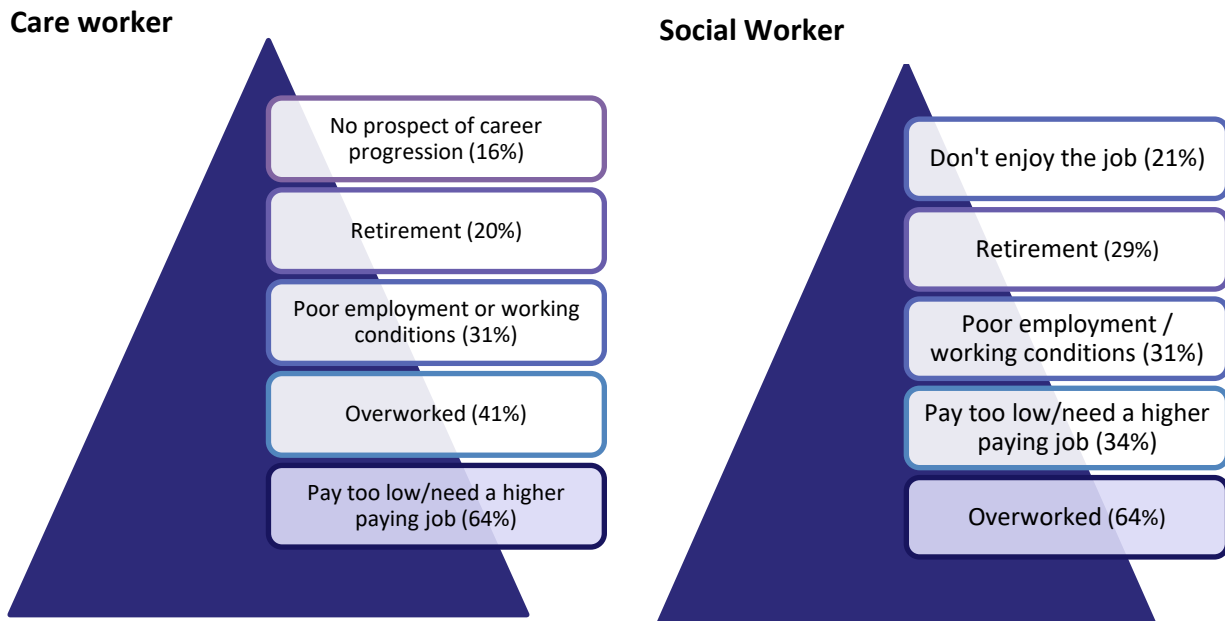
Base: Those likely to leave the social care sector within the next 5 years (1,415)

<sup>6</sup> This question allowed for multiple reasons to be given

The top three reasons for expecting to leave social care remain the same for care workers, social workers and social care managers. However, the order changes slightly, with both social workers and social care managers giving being overworked as a reason more frequently than low pay, whilst low pay is the top reason for care workers.

Care workers are also more likely to say that no prospect of career progression is a reason for being likely to leave (16%), while social workers are more likely to say they don't enjoy the job (21%).

Figure 22. Reasons for wanting to leave social care sector



Base: Those likely to leave the social care sector within next 5 years (Care workers: 1,062; social workers: 236)

Registered people who say they are not managing well financially (finding it quite or very difficult to manage) are significantly more likely to say they are likely to leave because of low pay/need a higher paying job (77%), because of poor employment/working conditions in general (37%) or no prospect of career progression (21%) (top 3 reasons given).

The most commonly given reason for being likely to leave for those who say they are living comfortably or doing alright financially is retirement (40%), followed by being overworked (35%). However, almost three in ten (29%) of those who are managing alright financially still give low pay/need a higher paying job as a reason for being likely to leave.

## Those who have already left the workforce

Our sample included fifty people who had already left the workforce (36 care workers, 12 social workers and 2 social care managers). This group of people have been excluded from the vast majority of questions but were asked their reasons for leaving and what they are doing now.

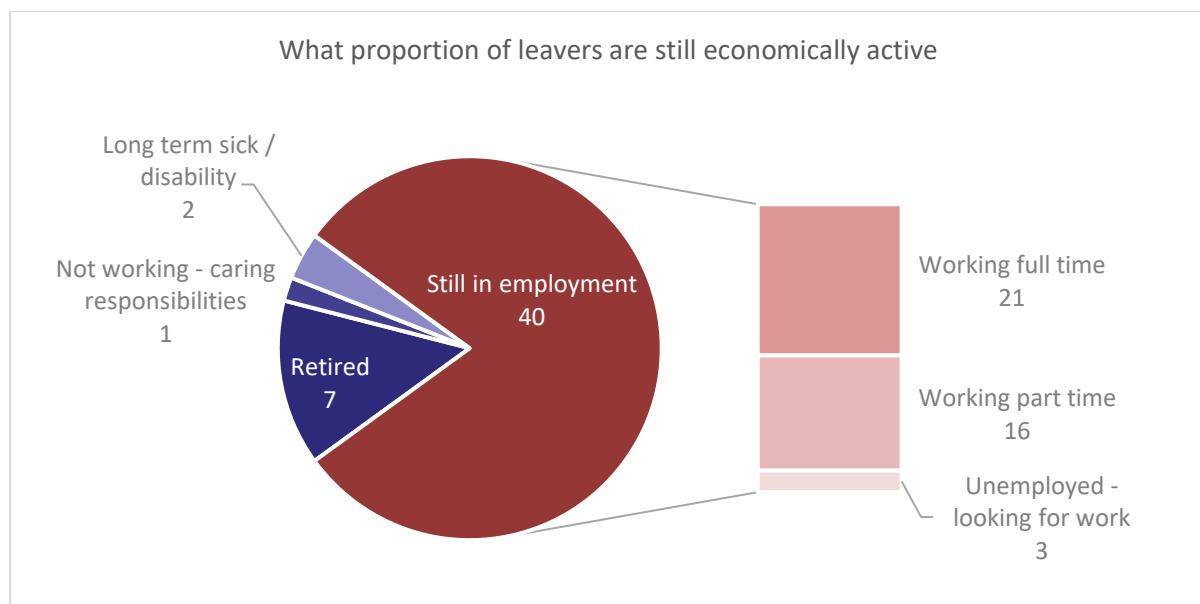
The reasons from this group generally reflect the reasons people give for *expecting* to leave the profession.



- Twenty-two people said they were overworked.
- Twenty-two people said that the pay was too low.
- Nineteen people cited poor employment/working conditions generally.
- Eleven people (26%) had left for personal reasons, such as caring responsibilities or poor health.
- Ten people cited relationships with managers/senior staff.

Leavers were asked what they were doing now and 40 out of the 50 (80%) are still working or looking for work and can be considered to have been lost to the social care sector whilst still in work.

Figure 23. Employment status of those who have recently left social care sector



Base: Those having left social care sector (50)

The 37 people currently in work were asked what they were doing now.

- Eight working in education.
- Eight working in an office / administrative role.
- Three working in nursing/health sector (but not care work).
- Two working in childcare.
- Two working as cleaners.
- Two working in hospitality.
- One in retail.

The other 11 people gave a range of different roles, from bus driver to refugee resettlement worker.

No firm conclusions can be drawn from the number of people completing the survey who had left the social care sector. We cannot know the numbers who received the survey and ignored it because they had already left the sector.

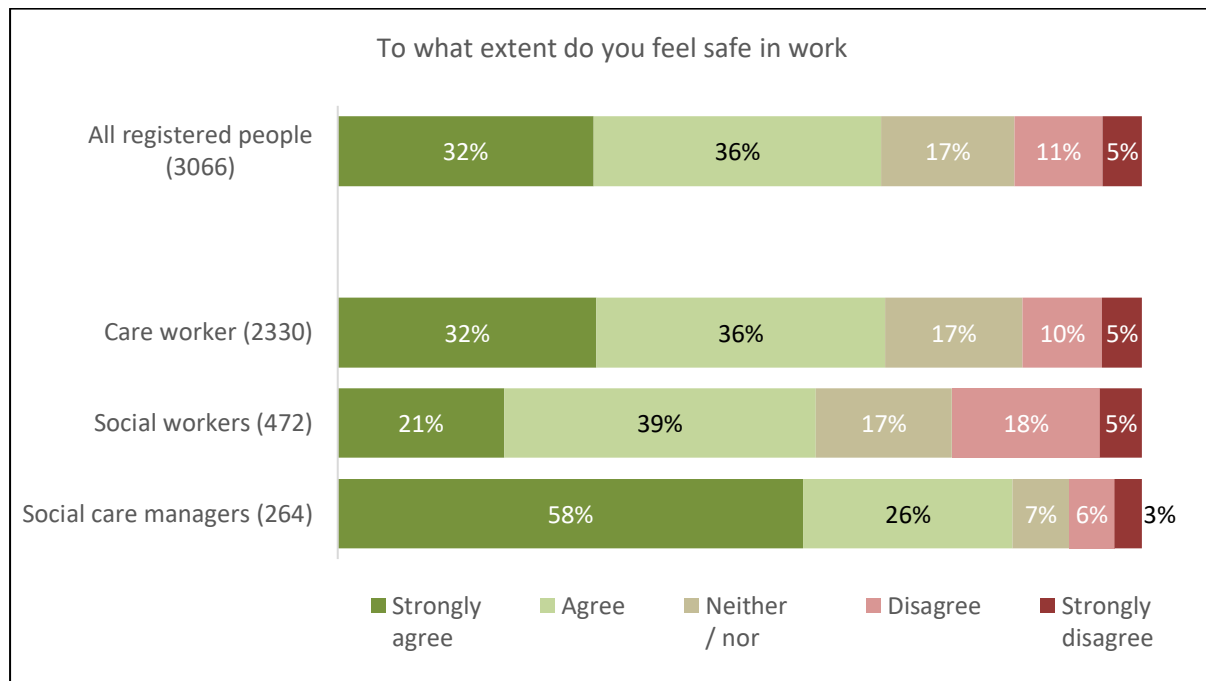
## More than one in five social workers don't feel safe at work

Across the total registered workforce, 16% disagreed with the statement that they felt safe in their work environment. This amounts to more than one in six people.

Clearly there is a large range of work environments across the sector, and staff undertaking home visits (both social workers and care workers) will have less control over their environment. Those working in residential homes may have a more controlled environment but could encounter other risk factors.

Social workers were the least likely to feel safe in work, but our sample isn't large enough to identify if any particular social worker role is a particular driver for this finding.

Figure 24. Extent to which people feel safe in work



Base: All registered people (number shown in brackets).

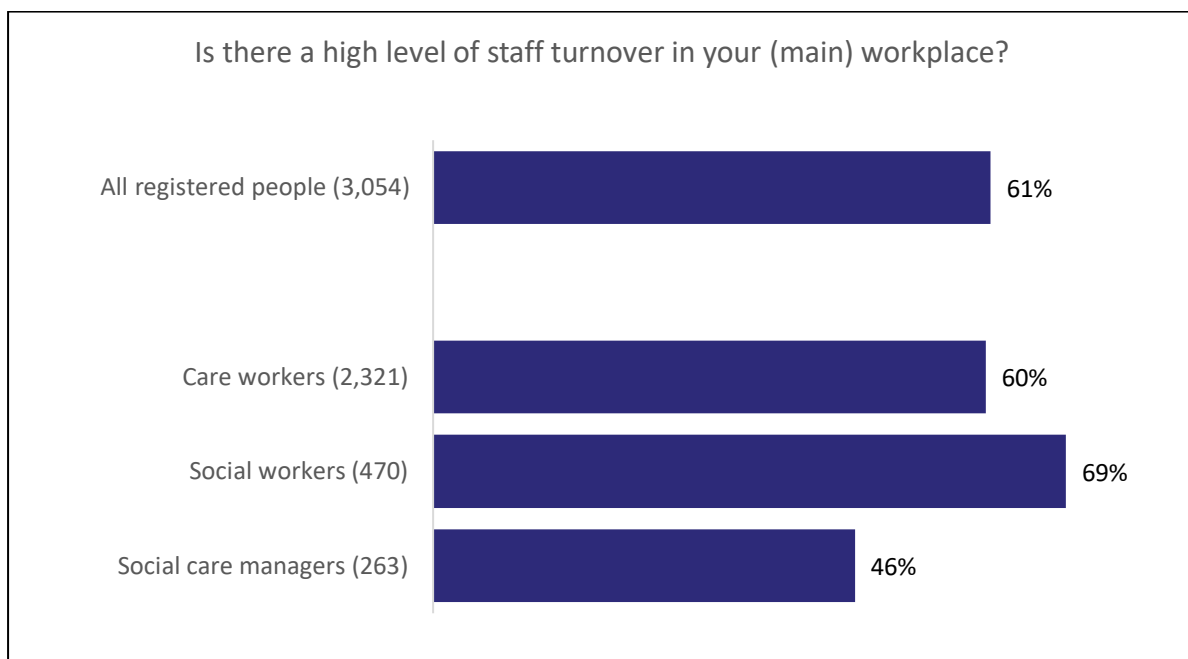
# Recruitment and retention

## 7 in 10 social workers report high turnover in their workplace

Three in five (61%) registered people feel there is a high turnover of staff in their main workplace.

This rises significantly to 69% for social workers and falls significantly to 46% for social care managers. Amongst registered people who are dissatisfied with their current job, 81% (a significantly higher proportion) feel that there is a high turnover in their workplace.

Figure 25. Proportion reporting high levels of staff turnover in the workplace



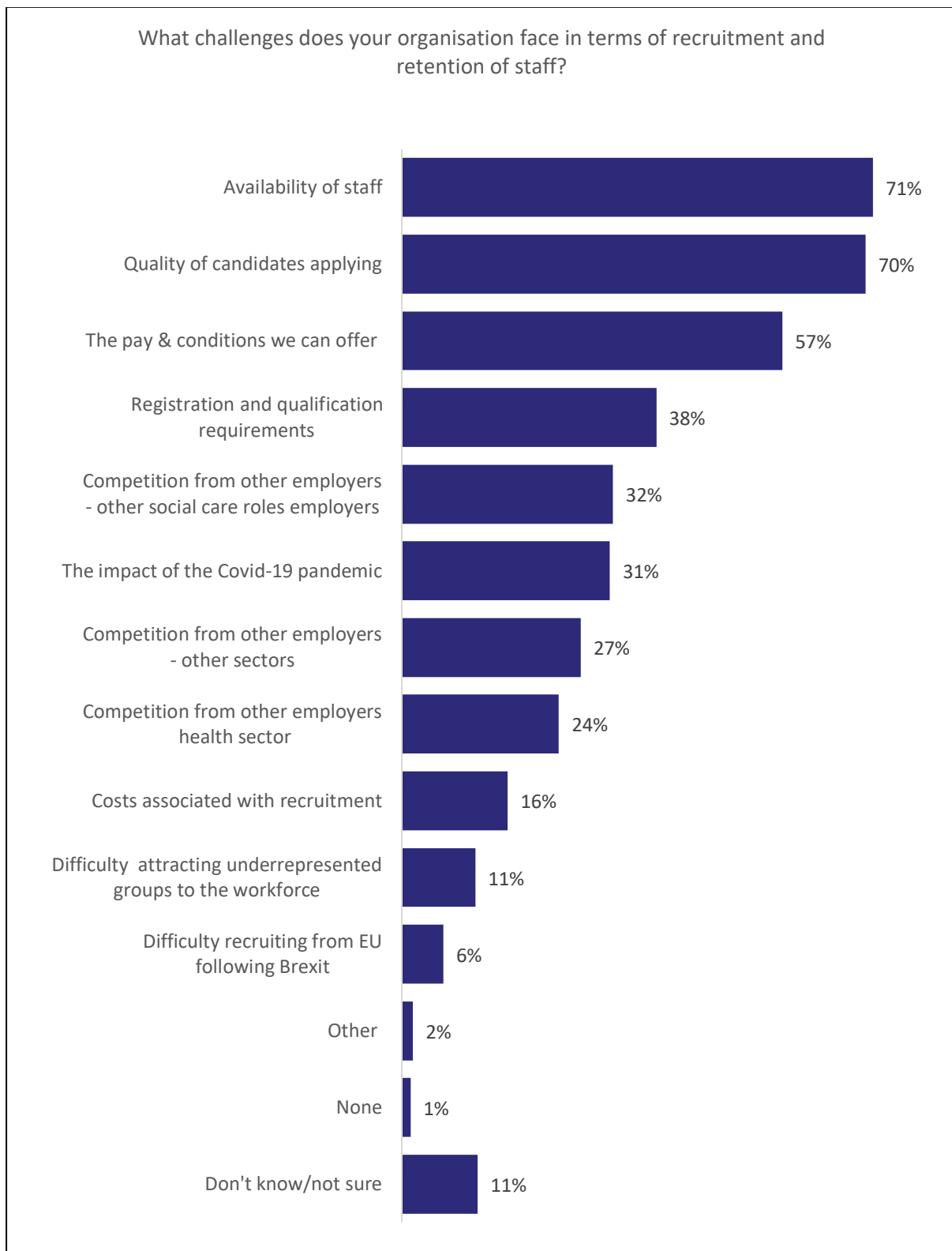
Base: All registered people (numbers shown in brackets).

## Lack of quality candidates is a challenge for recruitment

Those in senior or managerial roles were asked about the challenges faced in recruiting and retaining staff.

The most frequently reported challenges were availability of staff (71%) and the quality of candidates applying (70%). Over half (57%) felt that the pay and conditions they were able to offer weren't attractive to candidates.

Figure 26. Recruitment and retention challenges <sup>7</sup>.



Base: All those who are managers (379).

<sup>7</sup> Respondents could give multiple responses with an average of 4 reasons per respondent

# Leadership

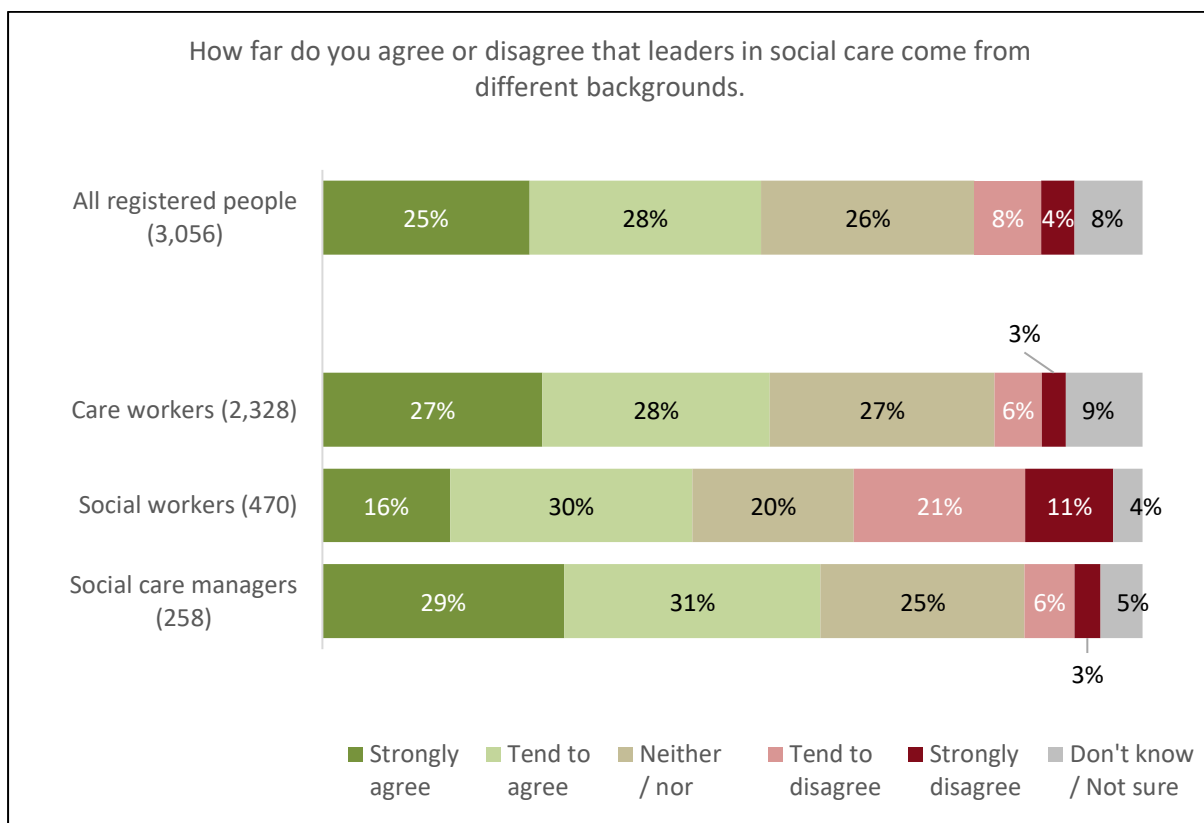
## Half recognise diversity in leadership roles

Over half (53%) of all registered people agree that leaders in social care come from different backgrounds, while just over a tenth (12%) disagree (Figure 27). However, over a third gave a neutral response, which suggests this question was difficult to answer for many who may not be aware of who the leaders are.

Social care managers (61%) and care workers (55%) are significantly more likely to agree that leaders come from different backgrounds, while social workers are less likely to agree (45%). Further, around a third (32%) of social workers actively disagree with this statement.

Men (58%) and those in a minority ethnic group (61%) are significantly more likely to agree that leaders in social care come from different backgrounds.

Figure 27. Level of agreement of diversity in leadership



Base: All registered people (number shown in brackets).

## Ethnic minority groups more likely to aspire to a leadership role

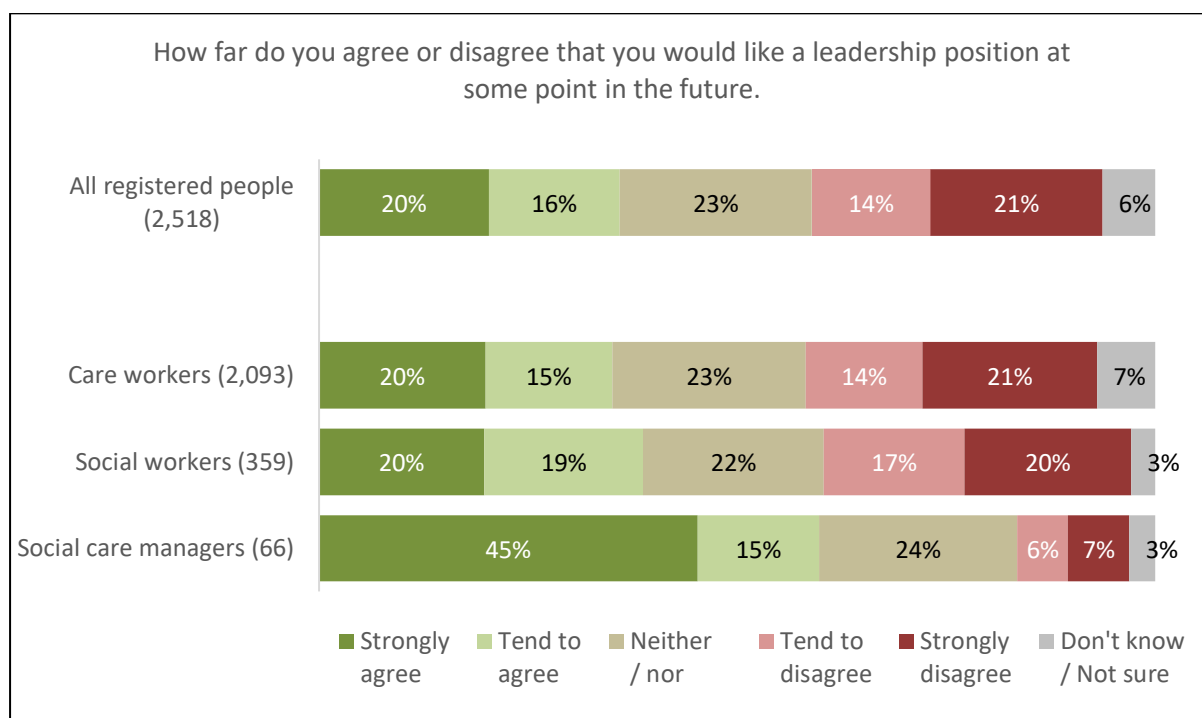
Overall, just over a third (36%) of all registered people who aren't already in a leadership position would like a leadership position at some point in the future. Care workers are significantly less likely to say they would like a leadership position (35%), while those who are

already managers but do not perceive themselves as leaders<sup>8</sup> are significantly more likely to say this (60%).

Amongst care workers, care home workers are significantly more likely than domiciliary care workers to say they would like a leadership position in the future (41% v 30% respectively).

Men (42%), those aged under 35 years (55%) and those in a minority ethnic group (69%) are all more likely to say they would like to be in a leadership position at some point in the future.

Figure 28. Level of interest in holding a leadership position



Base: All registered people who are not already in a leadership position (number shown in brackets).

### Half believe they could become a leader

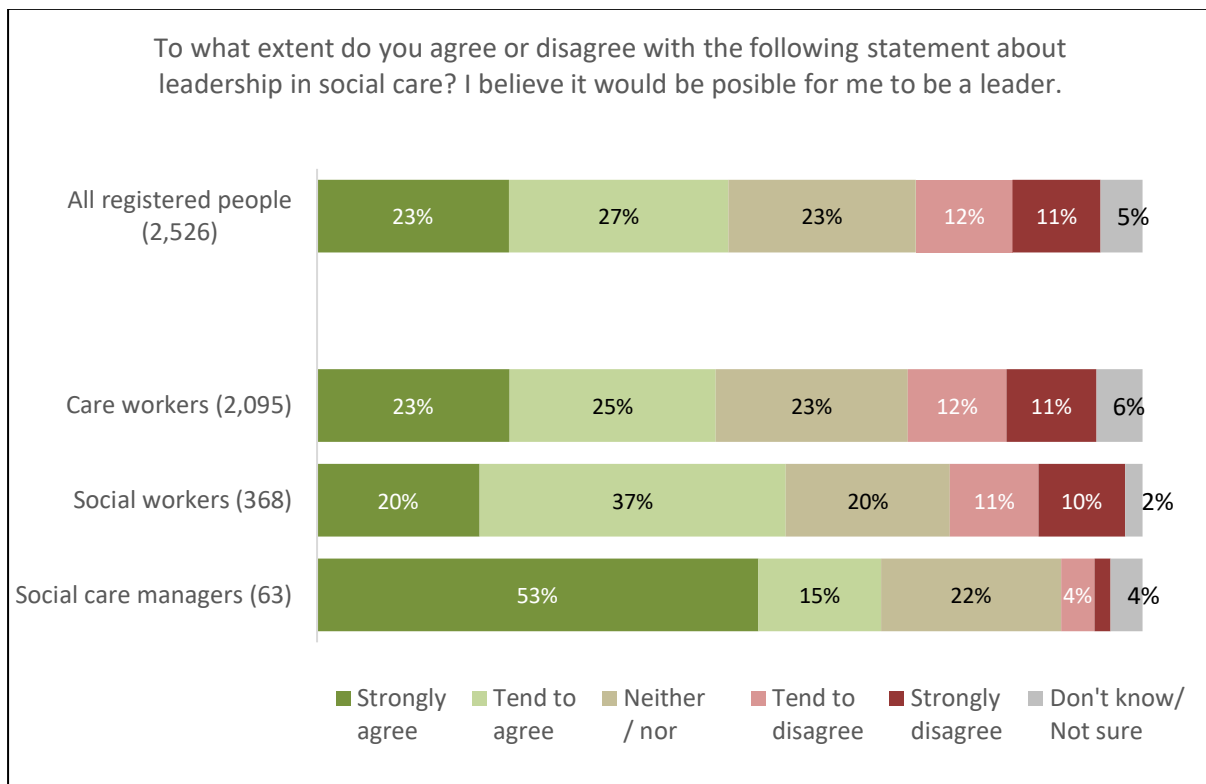
Half (50%) of all registered people who aren't already in a leadership position believe it would be possible for them to be a leader – notably higher than the proportion who said they would like to be in a leadership position at some point in the future (36%).

Care workers (48%) and domiciliary care workers in particular (45%) are significantly less likely to say they believe it would be possible for them to be a leader, while social workers (57%) and those who are already managers (though not in leadership<sup>8</sup>) are significantly more likely to say this (68%).

Men (56%), those aged under 35 years (60%) and those in a minority ethnic group (65%) are significantly more likely to believe it would be possible for them to be a leader.

<sup>8</sup> Those already in a leadership position were able to respond to this question with 'I am already in a leadership position' (invalid response, not included in results). 66 managers gave a valid response to this question, so it is assumed that this group, though managers, do not perceive themselves to be in a leadership position.

Figure 29. Level of agreement with statement: I believe it would be possible for me to be a leader.



Base: All registered people who are not already in a leadership position (number shown in brackets).

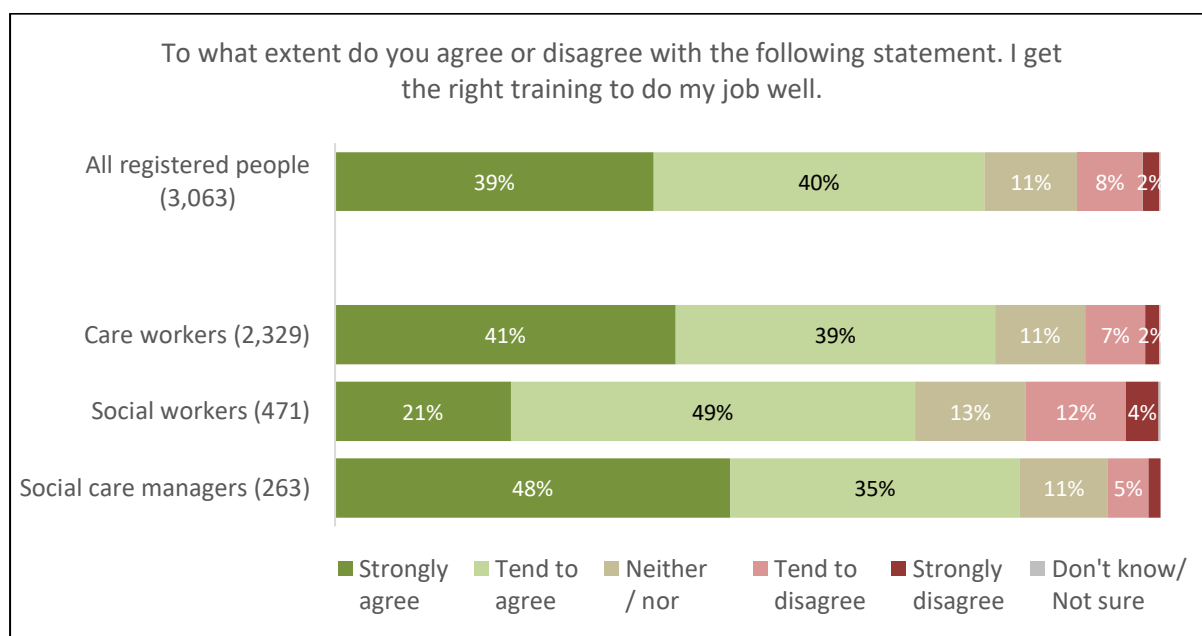
# Skills and training

All registered people were asked to what extent they agreed or disagreed with a series of statements designed to explore existing skills, access to training and potential barriers.

## Social workers less likely to agree they have the right training

Encouragingly, almost four in five (79%) registered people agree that they get the right training to do their job well. However, the level of agreement varies by job role, with social workers less likely to agree that they get the right training (70%) and more likely to disagree (16%).

Figure 30. Extent of agreement with statement - I get the right training to do my job well.



Base: All registered people (number shown in brackets).

## Four in five want to improve their knowledge and skills

Four in five registered people (80%) want to improve their knowledge and skills, and this rises to 85% of social workers and 88% of social care managers. However, a slightly smaller proportion (75%) agree that there are training opportunities available to them. For social workers and social care managers, this suggests some unmet demand.

Overall, there is a high level of agreement with the statement 'I have enough training to fulfil my CPD requirements' (77%) and this rises to 87% amongst social care managers.

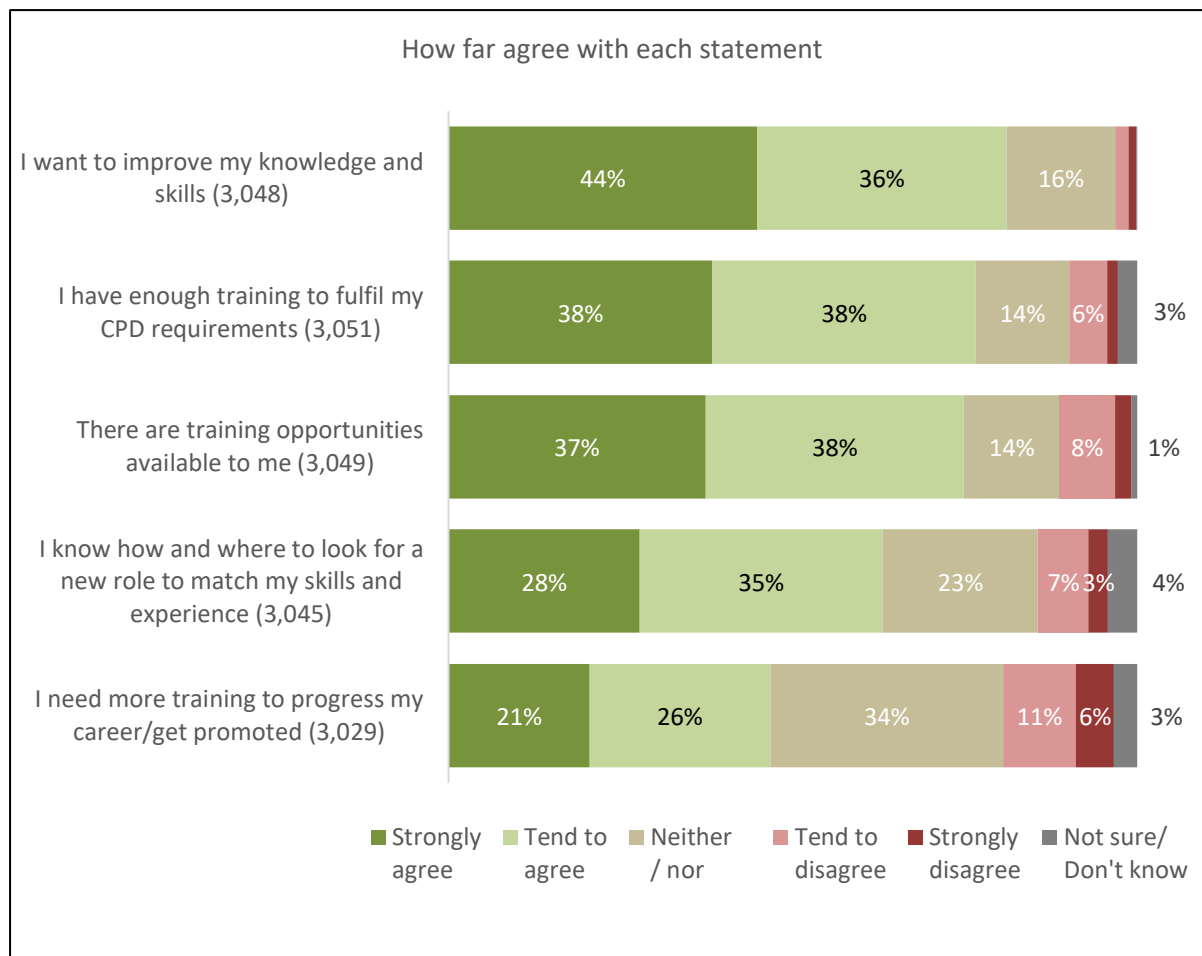
More than three fifths (63%) agree that they know how and where to look for a new role to match their skills and experience. Social care managers are more likely to agree with this statement (76%), while care workers are less likely to agree (62%).

Almost half (47%) agreed that they needed more training to progress their career, and this figure was consistent across all workforce groups.



The most demand for training may be amongst social workers, where only seven in ten feel they get the right training to do their job well, most (85%) want to improve their skills and half (47%) feel they need more training to progress their careers.

Figure 31. Level of agreement with a number of skills and training related statements.



Base: All registered people (number shown in brackets).

### Lack of time is main barrier to training for social workers

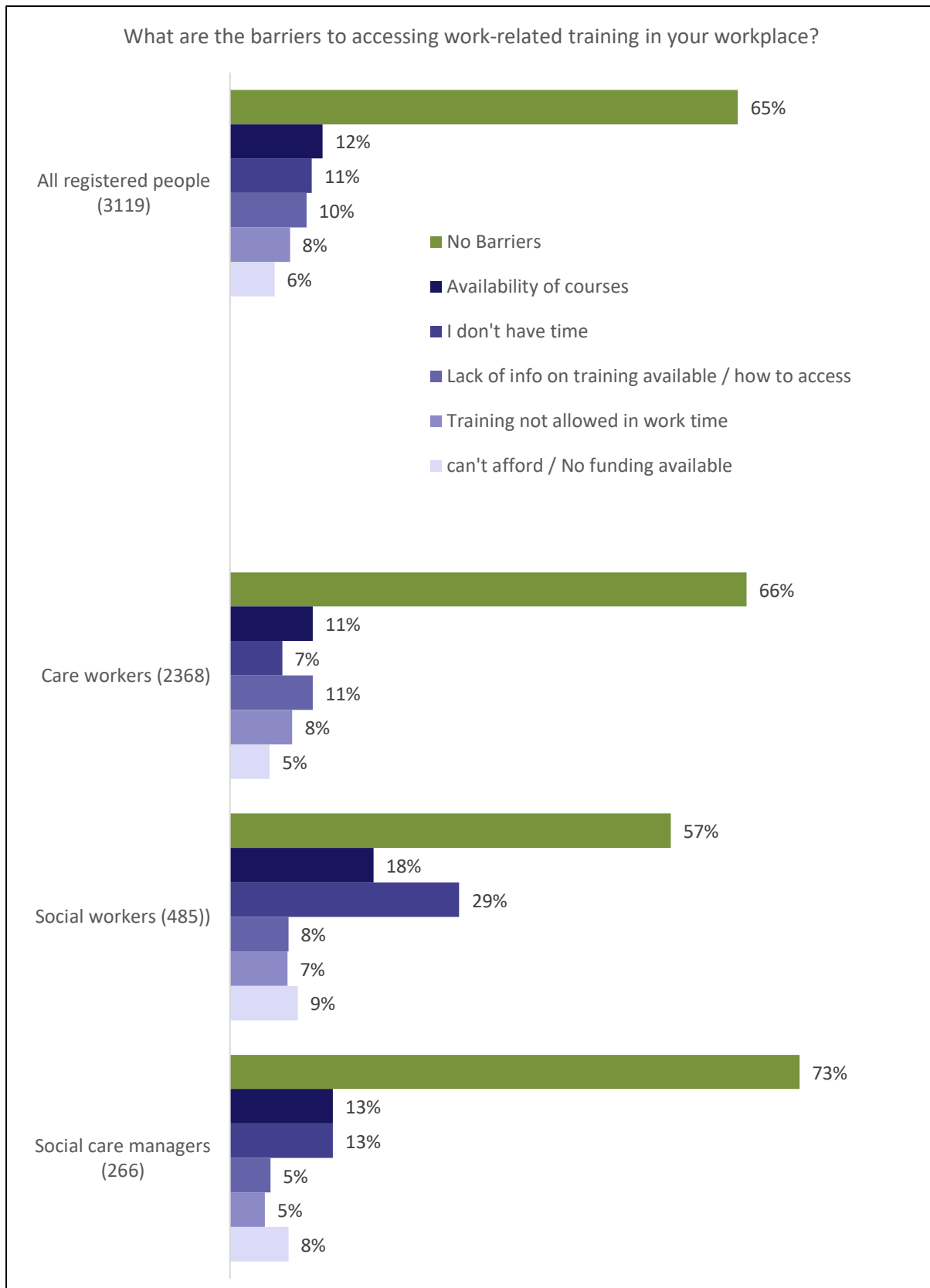
Two in three registered people (65%) do not consider there are any barriers to accessing training in their workplace. It is notable that social workers are considerably more likely to encounter barriers than other workforce types (57% reported no barriers, compared with 66% of care workers and 73% of social care managers).

The two largest barriers faced by social workers are a lack of time (29%) and the availability of courses (18%). It is possible that these two are interlinked – i.e., if there was greater availability, it may be easier for them to fit training into their schedules.

Amongst social care managers, 13% considered time to be a barrier, and an almost identical proportion identified availability as the issue.

Amongst care workers, the key barriers identified by around one in ten were the availability of courses (11%) and a lack of information on training available (11%).

Figure 32. Barriers to accessing work-related training in the workplace



Base: All registered people (number shown in brackets).

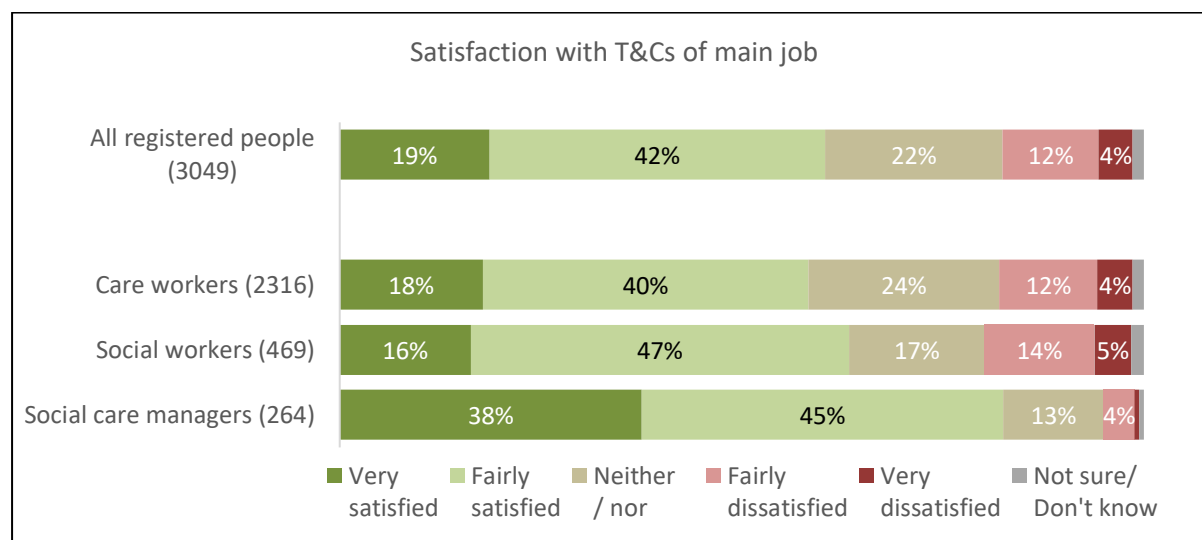
## Terms and conditions

This section of the survey concentrated on employment terms and conditions, including contracted hours, level of pay and benefits.

### Three in five satisfied with terms and conditions for their main role

Three in five (60%) are satisfied with the terms and conditions of their main job within social care<sup>9</sup>. Overall, care workers were less likely to be satisfied (58%) than social workers and social care managers (63% and 83% respectively).

Figure 33. Level of satisfaction with T&Cs of main role



Base: All registered people (number shown in brackets).

### The majority of registered people work for a single employer

For their main job, over nine in ten registered people are employed in social care either by an organisation that provides social care (87%) – such as a local authority, third-sector body or private company – or by an agency (7%). The remaining registered people are spread across a range of different circumstances, which are summarised in Figure 34.

Social care managers (91%) and social workers (71%) are more likely to be employed full-time by one employer on fixed hours and receive a salary. This is the case for just over half (54%) of care workers, whilst 20% of them are employed part-time under the same conditions. It is worth noting that our sample is self-selecting and it is possible that full-time staff or those on

<sup>9</sup> The Civil Service survey <https://www.gov.uk/government/publications/civil-service-people-survey-2022-results> includes the question “I am satisfied with the total benefits package” – 39% of civil servants in Wales agree or strongly agree

more stable contracts could have been more inclined to answer our survey. We could therefore be under-representing these types of worker.

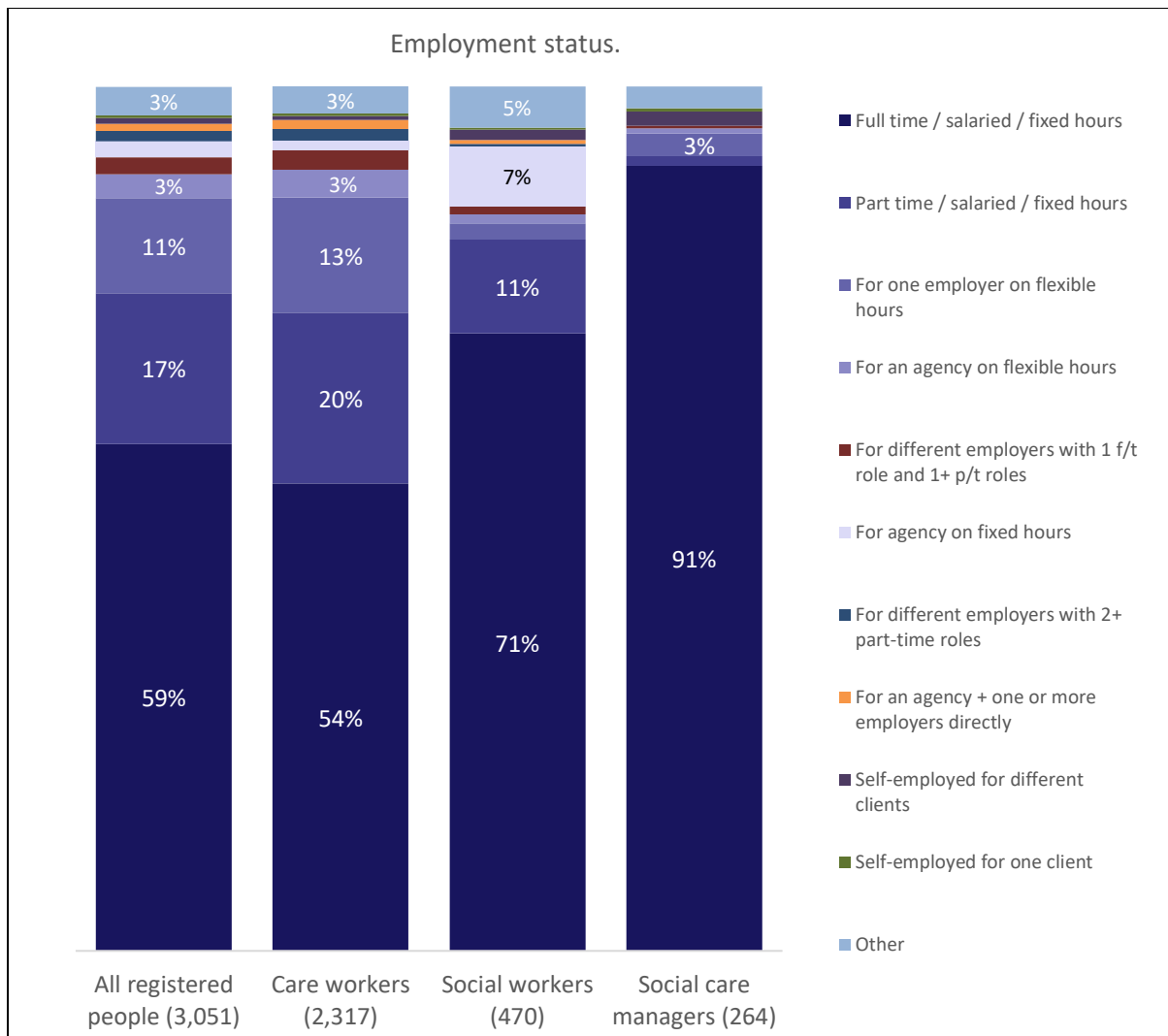
Care workers are more likely to be employed by one employer on flexible hours (13%) than any other group. They are also more likely to work for an agency, or for different employers with more than one role.

Around 4% of registered people work for more than one employer, with around two thirds of these working multiple jobs within social care. However, around 1% of all registered people work a second role outside of social care, in addition to their main job. These second jobs are equally split between health care roles and working outside the health sector.

Half (51%) of those with a second role(s) outside of social care report that the level of pay in their other role is higher than their role in social care, a quarter (25%) around the same and a fifth (19%) lower.

Less than 1% are not working; around half of this group are not working because of health conditions, caring or childcare responsibilities, studying, career breaks or retirement, although one in five of this group are unemployed and available for work.

Figure 34. Employment status



Base: All registered people (number shown in brackets).

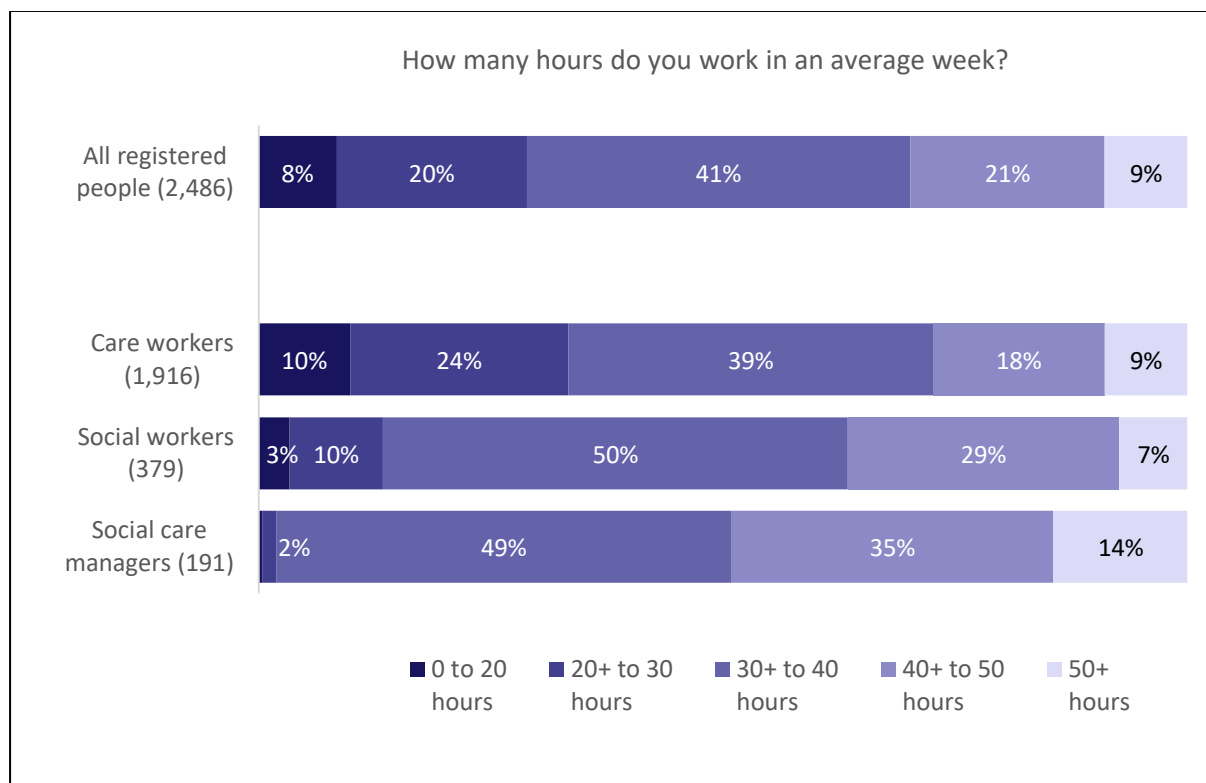
## Half of social care managers working 40 plus hours a week

Across all registered people, over seven in ten (71%) work 30 hours or more, on average, per week. This falls to 66% for care workers, who are more likely than other groups to work part time (10% 0 to 20 hours; 24% between 20 and 30 hours).

Social care managers and social workers are more likely to work 30 plus hours per week on average. Almost all (98%) social care managers work 30 plus hours a week, with around half (49%) working 40 plus hours and 14% working 50 plus hours in an average week. Almost nine in ten social workers (87%) work 30 plus hours, with 37% working 40 plus hours in an average week.

It is probably unsurprising that registered people who are dissatisfied with their current job, those who are likely to leave within the next 12 months, and those who would not recommend their organisation as a good place to work are more likely to work 50 plus hours in an average week. This supports the earlier finding that being overworked is a key motivation for wishing to leave the profession.

Figure 35. Number of hours worked in total in an average week.



Base: All registered people (number shown in brackets).

## Zero hours contracts for over one in ten care workers

Registered people who do not work fixed hours for an employer/agency (or are self-employed) were asked if they were employed on a 'zero hours contract' in any role, and around half (49%) said they were. This equates to one in ten (10%) registered people overall (15% of domiciliary care workers; 9% of care home workers; 2% of social workers; 2% of social care managers). However, it is possible that these figures underrepresent the true proportion

of registered people working on a 'zero hours contract' as this group may be less likely to take part in the survey.

If they were in a position to choose, over half (52%) would prefer a fixed/regular hours contract, although two in five (38%) would choose to stay on a zero hours contract.

## Half of care workers receive no sick pay when ill

We asked all those on the Register about work-related benefits, and these varied greatly between roles (see Figure 36).

Access to a workplace or company pension scheme is high amongst all groups (87% care workers, 88% social workers, and 97% social care managers). Those who have worked in social care for five years or more, and those aged 35-54 years, are more likely to have access to a workplace or company pension scheme.

Almost all (96%) social care managers receive 28 days paid holiday (96%), compared with only around four fifths of care workers (78% care home workers; 84% domiciliary care workers) and social workers (79%) receiving this much.

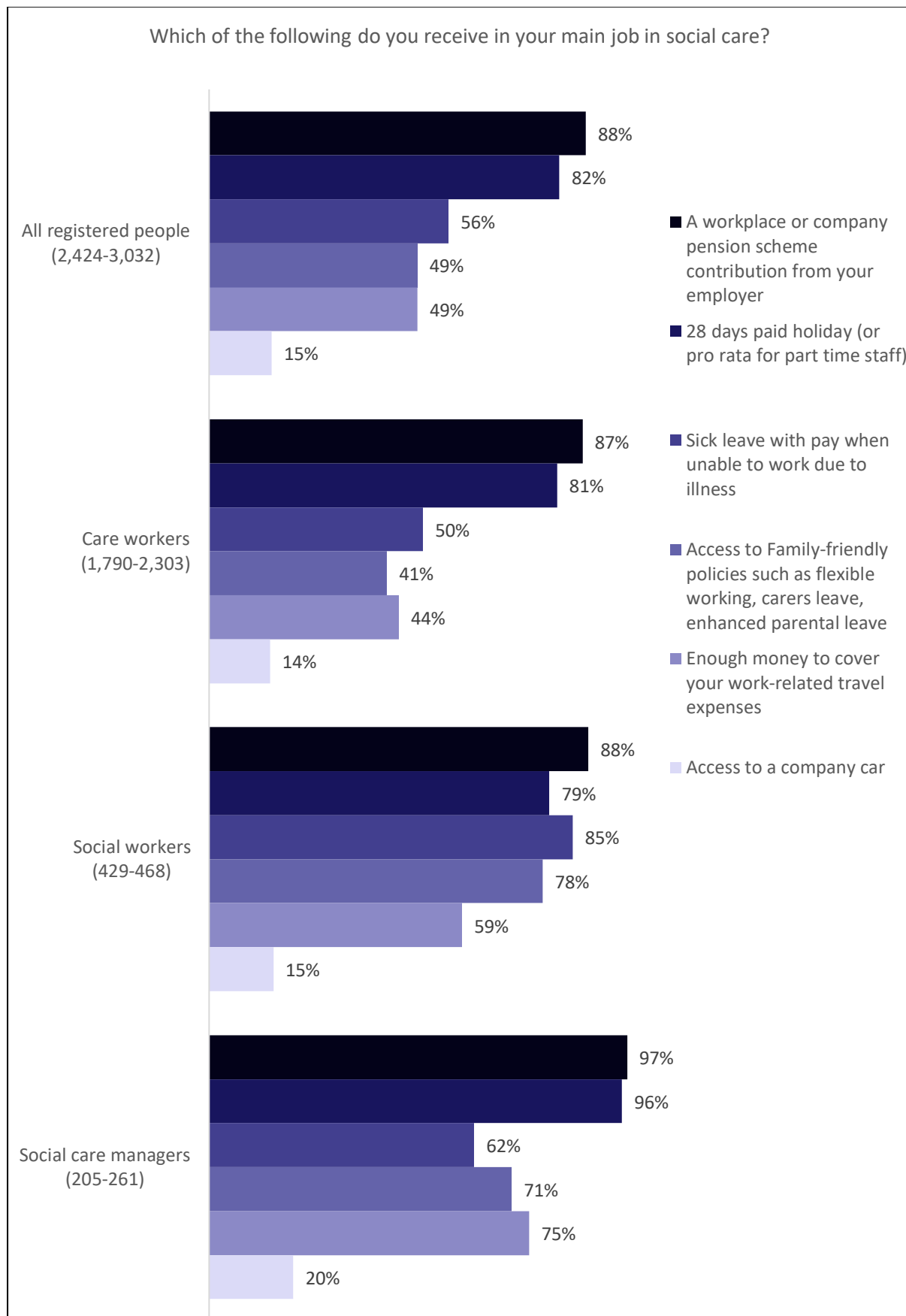
Only half (50%) of care workers receive sick pay – this falls to around one in five for care workers who work for an agency (22%) or are on a 'zero hours contract' (22%). Care home workers are significantly less likely than domiciliary care workers to receive sick pay (41% v 58%). Social workers and social care managers are significantly more likely to receive sick pay when unable to work due to illness (85% and 62% respectively).

Over three quarters (78%) of social workers and 71% of social care managers have access to family-friendly policies such as flexible working, carer's leave and enhanced parental leave. Care workers are significantly less likely to have access to family-friendly policies (41%), and this falls even lower to 38% for care home workers (compared with 45% for domiciliary care workers). Again, care workers working on a 'zero hours contract' are significantly less likely to benefit from family friendly policies (31%).

For those who need to travel for work-related purposes, three in four social care managers (75%) and almost three in five (59%) social workers are able to claim enough money to cover travel expenses. However, this still leaves a sizable proportion who are not able to claim these expenses. For care workers, only 44% are able to claim enough money to cover work-related travel expenses.

Access to a company car, for those who use a car for work, is low across all job roles (14% care workers, 20% social care managers, 15% social workers).

Figure 36. Work-related benefits received in main job in social care



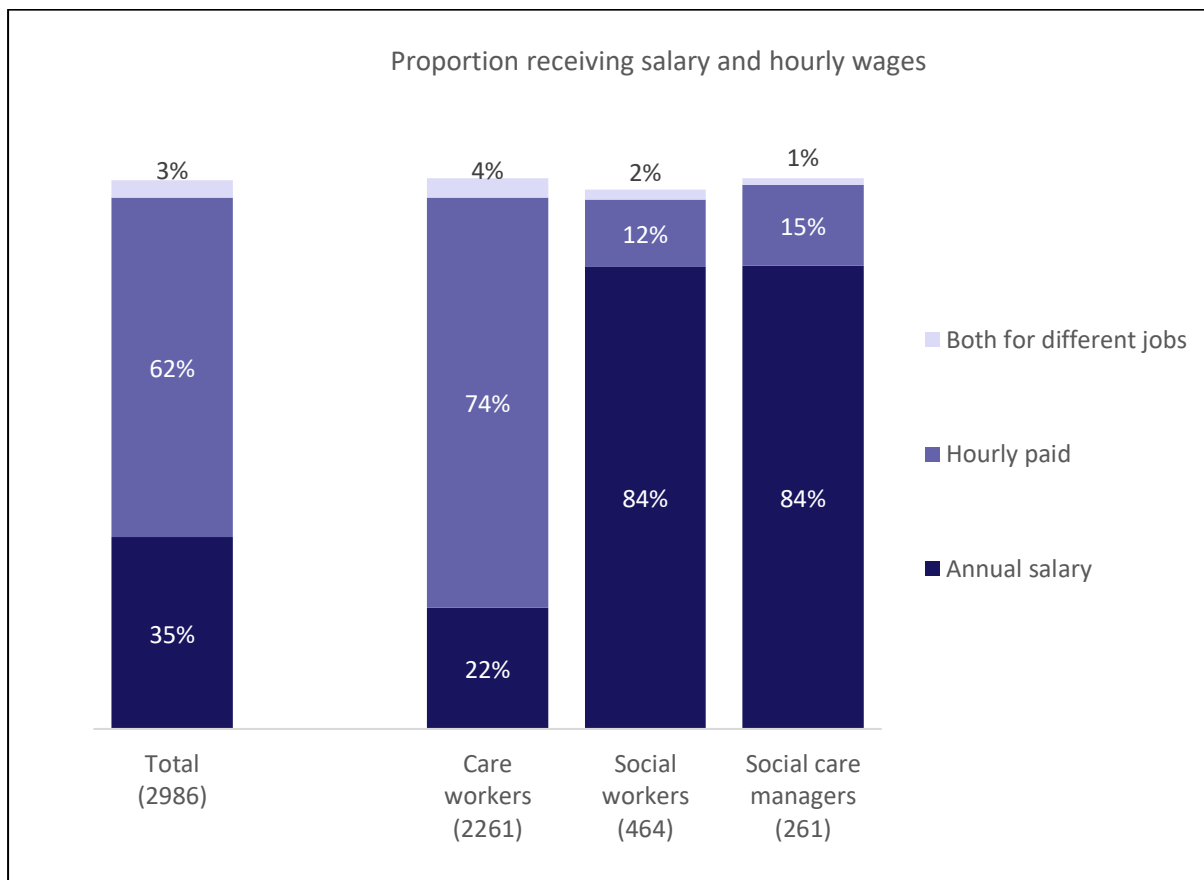
Base: All registered people (range shown in brackets).

## Financial position

The vast majority of social workers and social care managers are paid an annual salary, but most care workers are paid by the hour. A tiny proportion of registered people (3%) had both types of income from different jobs.

It is interesting to note that while those paid hourly are no more or less likely to be satisfied or dissatisfied with their job, they are more likely to say they'll leave their current role in social care within the next 12 months or five years. Whilst the survey does not specifically explore this issue, this perhaps suggests that those who are paid hourly are in more transient jobs that suit their current situation but are not what they expect to do long term.

Figure 37. Salary v wages by workforce type



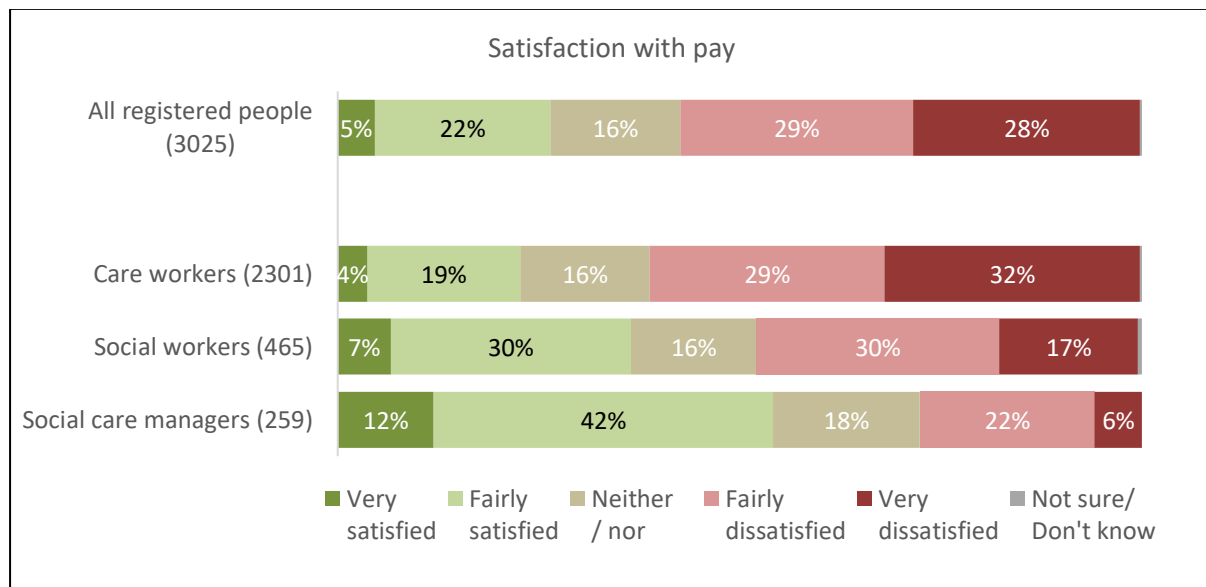
Base: All registered people (number shown in brackets).

There is a considerable difference in the levels of satisfaction with pay across the different workforce types. Around three in five (61%) care workers are dissatisfied with their pay, compared with 47% of social workers and 28% of social care managers. It is only amongst those classed as social care managers that more than half are actually satisfied with their current pay rate<sup>10</sup>.

<sup>10</sup> The Civil Service survey <https://www.gov.uk/government/publications/civil-service-people-survey-2022-results> asks employees how far they agree that, "Compared to people doing a similar job in other organisations I feel my pay is reasonable". A quarter (26%) of civil servants in Wales agree or strongly agree.



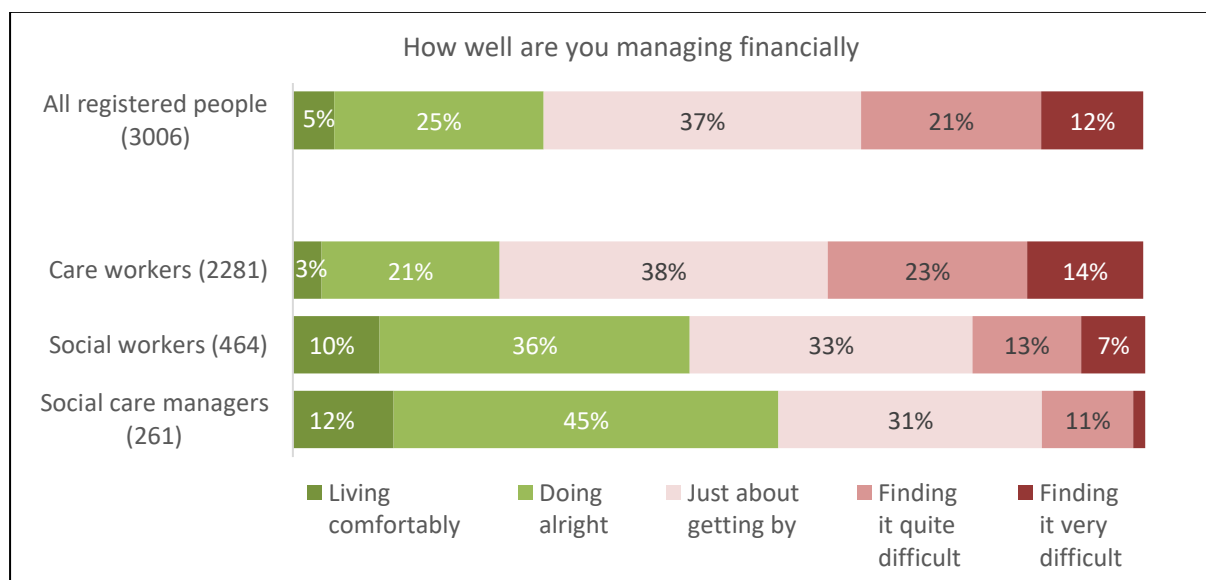
Figure 38. Level of satisfaction with current pay rate



Base: All registered people (number shown in brackets).

Registered people were then asked how well they were managing financially. Overall, almost three in ten (29%) felt they were doing alright or even living comfortably. However, when we consider the data by workforce type, it is clear that care workers in particular are facing challenges. Nearly four in ten (37%) answered that they were finding it quite or very difficult to manage financially. There was no difference between care home workers and domiciliary care workers.

Figure 39. Extent to which people are managing financially



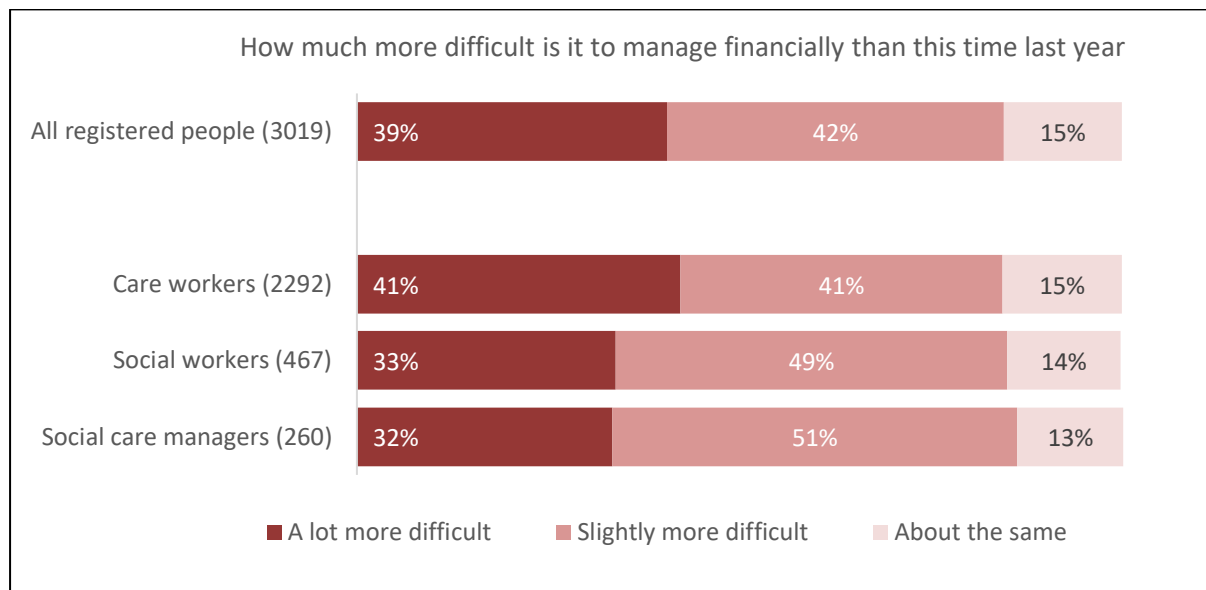
Base: All registered people (number shown in brackets).

Considering the context of the cost-of-living crisis, including the increases in energy bills and the wider inflation impacting food prices during 2022 and 2023, our survey also asked whether registered people were finding it more difficult to manage financially than a year ago. In response to this question, there was less of a clear split between the care workers and

other groups, with around four in five (82%) registered people overall finding it a lot more or slightly more difficult to manage.

However, care workers, and domiciliary care workers in particular, were more likely to state that it was a lot more difficult (43% for domiciliary care workers and 38% for care home workers) than social workers or social care managers. Social workers and social care managers may be more resilient to rising costs, but they are still having to think more about how they manage their finances.

Figure 40. Extent to which managing financially is more difficult than last year



Base: All registered people (number shown in brackets).

# Attitude to working in social care

## Making a difference is what people enjoy most

Our survey asked what people liked about working in the social care sector and the main response was the sense of supporting people and making a difference (51%). Almost all other comments made were a variation on this overall theme. Some commented on the importance of getting to know their clients and interacting face-to-face with people, but the key factor remained the ability to make a difference to someone's quality of life.

Other comments not related to making a difference to people included good colleagues (8%), variety (6%) and job flexibility (3%).

Figure 41. What people like about working in social care.



## How to make the social care sector more attractive

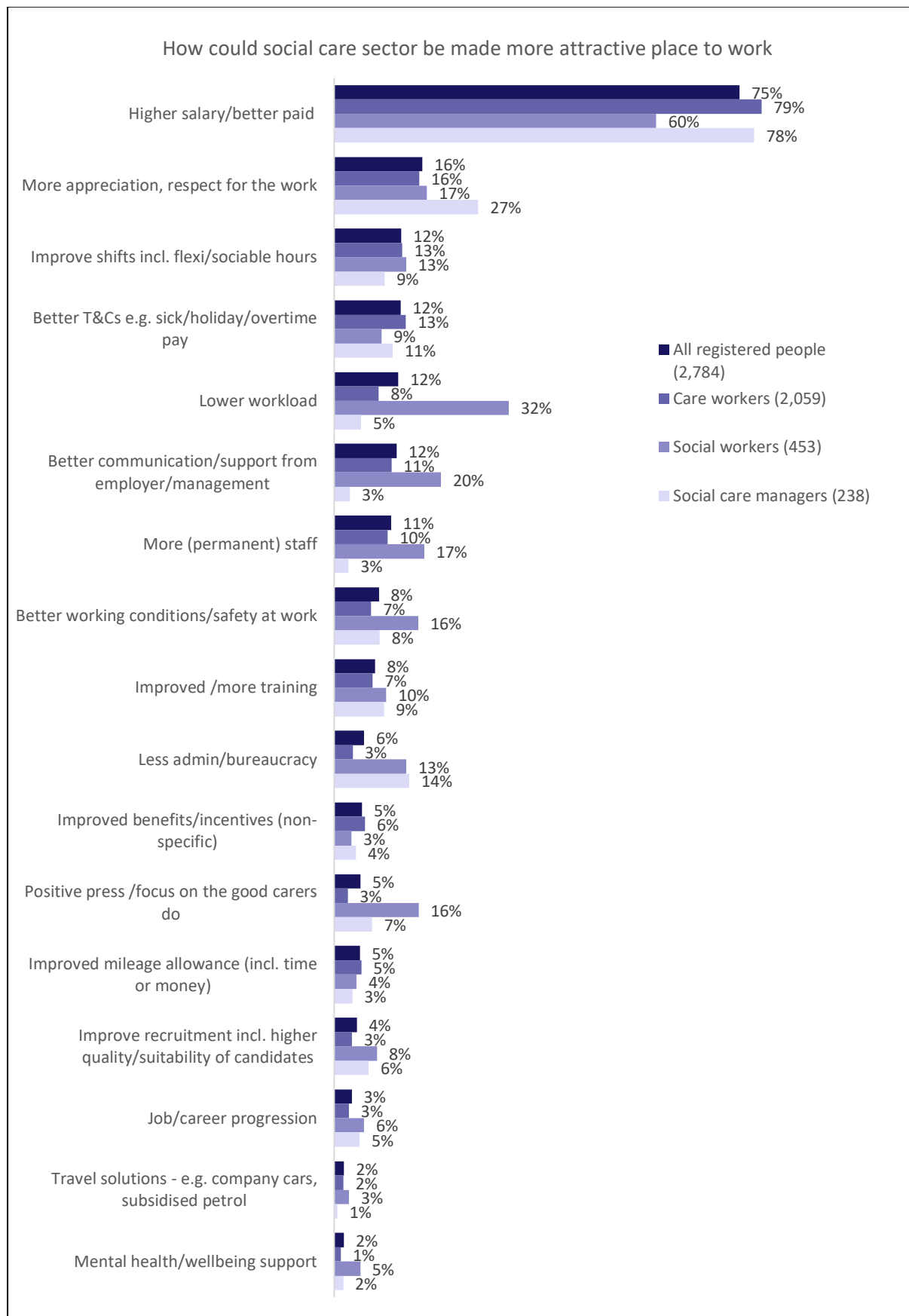
Our final question asked what should be done to make the social care sector a more attractive and rewarding place to work. The responses are summarised in Figure 42. Not surprisingly, the most commonly given response – given by three in four registered people (75%) – was that the work needed to be better paid. No other single comment was made by more than 16% of our sample.

Within the comments, we can unpick some broader themes. Social workers are more likely to see workload (32%), better communication and support from managers (20%), the need for more permanent staff (17%) and better/safer working conditions (16%) as key factors to be addressed than those in other roles. Having more qualified and permanent staff in place would enable social workers to feel they had time to do their job properly, as well as take up training, which should contribute to overall job satisfaction and reduce the propensity to leave. The top comment amongst social workers was also higher salary/better pay, but this was given by significantly fewer social workers than care workers (60% v 79%). Although pay is clearly an important element, tackling some of the other issues so that social workers get greater job satisfaction could reduce the importance of pay.

In addition to the top-rated comment about pay, care workers tended to focus on comments regarding terms and conditions such as sick pay, holiday pay, mileage and benefits more generally. This highlights the need for care work to consider the overall package of rewards and not just the hourly rate of pay when competing for staff from other sectors.

As with all other groups, social care managers were most likely to mention pay (78%), and they were also significantly more likely than other groups to mention the need for people in the sector to feel valued and appreciated (27%). In considering the responses from this group, it is worth remembering that they are likely to be involved with recruitment and line management, and this may be impacting their answers as much as their own role.

Figure 42. How to make social care sector a more attractive place to work



Base: All registered people (number shown in brackets).

## Net promoter score (eNPS)

An employee net promoter score (eNPS)<sup>11</sup> is a metric that assesses employees' job satisfaction by measuring their readiness to recommend their organisation to others.

The eNPS consists of the following question: On a scale of zero to ten, how likely is it that you would recommend working for our organisation? Whilst this question has some limitations, the fact that it has been used across industries for a number of years means it provides organisations with a potential benchmarking question, as well as something which can be used to analyse trends if included in an annual survey.

The survey uses a scale of 0 – 10 and calculates a score of -100 to +100 based on the difference between the proportion of people who would recommend working in the sector and those who would not. The main value of this score is to act as a benchmark for future projects with the ambition to see a more positive score year-on-year.

All registered people were asked on a scale of 0 – 10 how likely they would be to recommend working in social care to a friend or family member. A positive score would show that those working in the industry were more likely to encourage friends and family to join the sector than to discourage them.

The overall eNPS from people on the Register is -47 and the eNPS from social workers is -66. This highlights that those working in the sector, despite their positive reasons for wanting to work in social care, do not feel able to encourage others to apply for similar roles. Increasing the proportion of those people on the Register advocating the sector as a good place to work would help to address recruitment issues.

Figure 43. eNPS for each workforce type



<sup>11</sup> <https://www.aihr.com/blog/employee-net-promoter-score-enps/>

# Demographic information

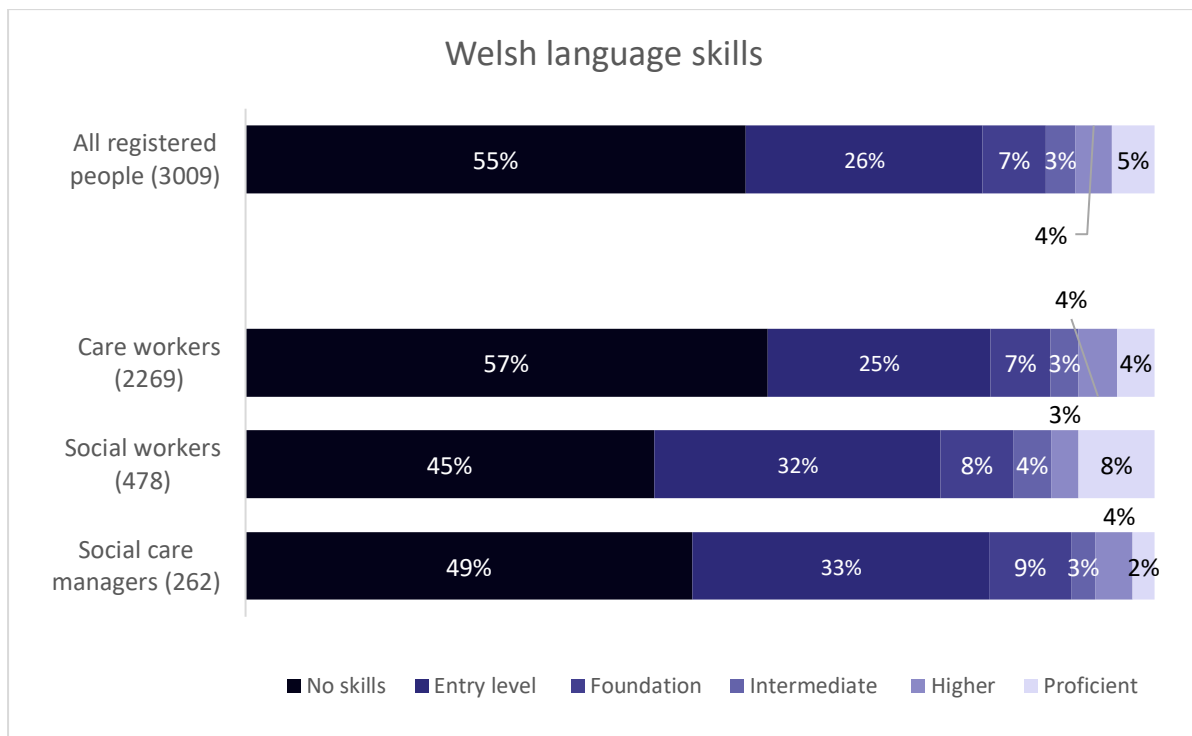
Our survey asked a number of profiling questions (based on standard Office for National Statistics demographic questions where applicable), including age and gender, to support our analysis and help ensure we achieved a representative sample. A summary of core profile data is available in the appendix. However, this section did include some questions worth highlighting here.

## Welsh language

All registered people were asked how they would describe their Welsh language skills using the following range of options.

- Entry level - can introduce yourself and others and can ask and answer questions regarding basic information.
- Foundation - can hold a basic conversation with someone to obtain or exchange straightforward information.
- Intermediate - can hold extended conversations with fluent speakers about familiar subjects involving everyday work.
- Higher - can talk confidently with fluent speakers about familiar subjects relating to work, and can express an opinion, take part in a discussion and talk extensively about general topics.
- Proficient - can talk extensively about complex issues, presenting difficult information or information of an emotional nature, can facilitate and summarise extended or complex discussions.

Figure 44. Level of Welsh language skills



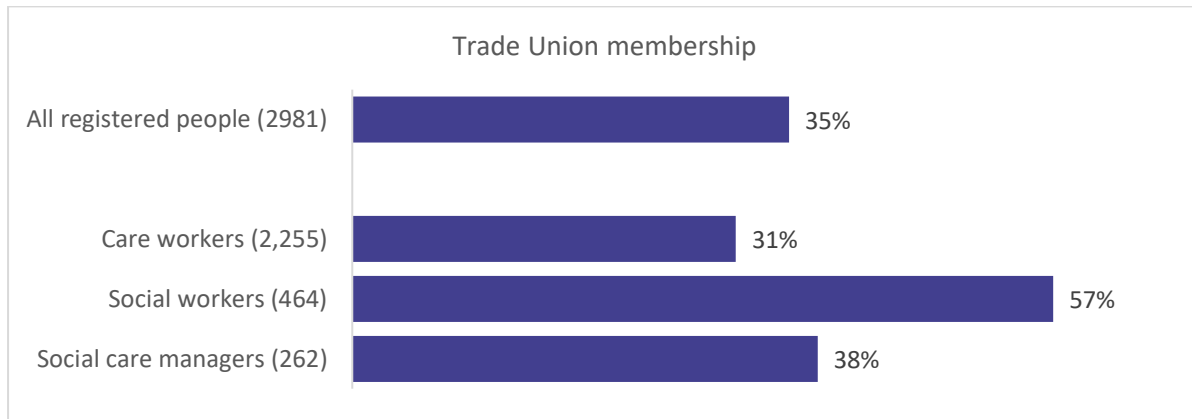
Base: All registered people (number shown in brackets).

Welsh language skills were at their highest in North Wales, where 21% classed themselves as higher or proficient and just 36% had no Welsh. They were at their lowest in South East Wales, where 68% had no Welsh and just 3% placed themselves in the top two levels of proficiency.

## Trade unions

There is considerable variation in trade union membership across different parts of the workforce, with social workers much more likely to belong to a trade union than other groups.

Figure 45. Trade Union membership by workforce type



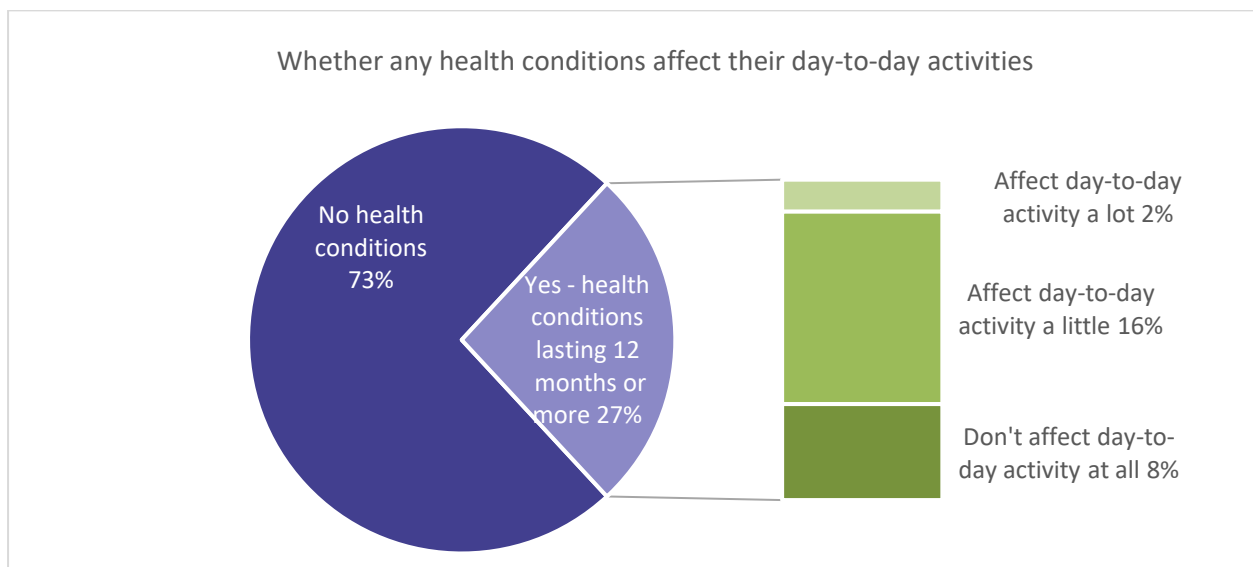
Base: All registered people (number shown in brackets).

Social workers are mainly members of Unison and the Social Workers Union. Care workers are mainly members of Unison.

## Disability

Registered people were asked if they had any physical or mental health conditions lasting or expected to last 12 months or more. Around a quarter had such a condition and 18% said this affected day-to-day activities either a little or a lot.

Figure 46. Proportion living with long-term health conditions



Base: All those with a long term physical or mental health condition.



## Immigration

The vast majority (87%) of registered people were born in the UK. However, this is significantly lower for care workers (85%) than for social workers (94%) and social care managers (92%).

South East Wales had the highest proportion of registered people who weren't born in the UK, with 19% of care workers in the region having been born outside the UK.

The overall numbers of registered people born outside the UK are small, and the three main reasons for coming to the UK were to settle here (71 people), for education or training (37 people), or for marriage or family reunification (39 people). Five people identified as refugees or asylum seekers.

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## Conclusion

People join the social care sector with a desire to make a difference to people's lives, and many care workers progress into the role having previously cared for a relative. However, this desire to have a positive impact may also contribute to dissatisfaction and stress when they find themselves overworked and unable to do as good a job as they would like.

Although the majority are satisfied with their present job, a significant minority are not, with social workers the most likely to be dissatisfied. This dissatisfaction seems to stem from overwork as well as low pay and poor working conditions.

Two in three registered people said that their morale was good, with care workers' morale significantly higher than that of social workers. This finding reflects a narrative throughout much of the data that the social worker profession is under particular stress.

Overall, most registered people felt valued by the people they support, their colleagues and their manager. However they were less likely to feel valued by partner agencies, such as health staff and police, or the general public. The perception of a lack of appreciation from the general public is something which needs to be addressed if working in the care sector is to become more attractive to potential staff.

Four in five registered people want to improve their knowledge and skills, however, there seems to be some difficulties in accessing this training. The two largest barriers to training faced by social workers are a lack of time and the availability of courses. Amongst care workers, the barriers are availability of courses and a lack of information. There is clearly an unmet demand for training, although any additional provision would need to ensure it addressed the current barriers.

Nearly half of social workers expect to leave the profession in the next five years. This highlights some real challenges in maintaining an experienced and qualified workforce. The most frequently given reasons for expecting to leave the sector within the next five years were pay, overwork and poor employment/working conditions. Overall three in ten registered people looking to leave the profession cited poor employment and working conditions.

This report is based on the first comprehensive survey of the registered social care workforce in Wales. The research was a pilot exercise required to test the practicalities of undertaking a workforce survey as well as to develop some benchmarks on key metrics. Subsequent surveys will be able to track trends and inform policy and operational decisions for Social Care Wales, Welsh Government and sponsored bodies, local authorities and other stakeholders in the field of social care and social work.

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# Appendix

## Appendix 1 - Methodology

### Introduction

The scoping phase resulted in a recommendation for an online methodology. It was important that the online survey was accessible on a variety of platforms, including smartphones, and available in both English and Welsh.

ORS designed a draft questionnaire which was then reviewed by Social Care Wales and a number of stakeholders. Cognitive testing was carried out with some minor amends to questions and the phrasing of response options. A copy of the final questionnaire is available in appendix 3.

The questionnaire was scripted using ORS bespoke survey software. This software uses responsive design, ensuring it is easy to use on most platforms.

### Pilot

Following the development of the materials, a short pilot was conducted, with 200 members of the registered workforce invited to complete the online survey.

The pilot invitations were issued on 8 March 2023 and received 16 completed returns (which are included in the final data). There were no queries raised with ORS or with Social Care Wales, and no problems with the survey software or the data collected during the pilot.

However, the survey was taking 25 minutes, on average, to complete. So, in discussion with Social Care Wales, 13 questions were removed (and some response option lists shortened), reducing the overall length to an estimated 15 minutes. The questions removed from the survey are highlighted in appendix 3.

### Bilingual approach

All communications with registered people were bilingual, with Welsh appearing first in email invitations. The survey was available in English and Welsh, with respondents choosing their preferred language at the beginning of the survey.

Thirty-six people (1%) completed the survey through the medium of Welsh.

### Inviting participants

Social Care Wales holds an email address for each registered worker, which was used to invite them to participate in the survey. Each email invitation included a unique link which could be used only by the person receiving the email. This unique link approach meant that ORS was able to monitor who had completed the survey and target reminders at non-responders. This approach to reminders reduces any potential to annoy or confuse those who have already participated.

All respondents received an initial email invite and non-responders received two reminders. The timing of these communications varied according to whether people were in the test group, primary sample or reserve sample.

The invitation email included Social Care Wales branding, an explanation of the purpose of the survey, links to the relevant privacy policies and contact details if any recipients had further questions.<sup>12</sup>

## Census approach

Social Care Wales had just under 48,000 people on the Register at the time of the survey, and the objective was to achieve a robust sample for each category of respondent. For the five smaller workforce groups<sup>13</sup>, it was agreed that a census approach was essential to maximise the potential number of returns. However, for the three larger groups<sup>14</sup>, it was felt that a sampling approach might be sufficient.

Invitations were sent on 17 March to a sub-sample of registered people, which consisted of all of those in the smaller workforce groups and a sample of domiciliary care workers, care home workers and social workers. This decision was reviewed after two weeks based on the overall response rate, and it was decided to switch to a full census approach. All remaining registered people therefore received an invitation three weeks after the survey initially launched.

## Timeline

The expectation was that fieldwork would be conducted in early 2023. However, there were some delays with the development of the questionnaire and the initial test survey was actually sent on 8 March 2023.

The total fieldwork period extended over eight weeks, and the shortest time period – for those in the reserve sample – was four weeks. The survey closed on 4 May, ten days after the final reminder.

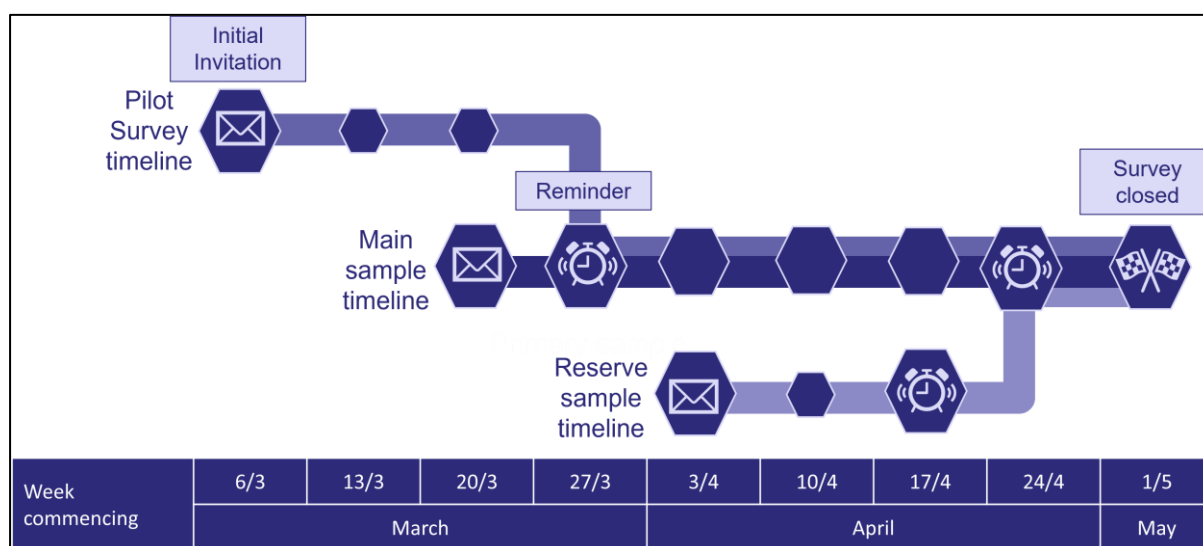
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<sup>12</sup> A copy of the invitation text used can be seen in appendix 4

<sup>13</sup> Residential Child Care Managers/Residential Care Managers, Adult Care Home Managers, Domiciliary Care Managers, Residential Child Care Workers/ Residential Care Workers, Social Work Students

<sup>14</sup> Domiciliary Care Workers, Adult Care Home Workers, Social Workers

Figure 47. Fieldwork timetable



## Response rates

The final overall response rate was 6.5%, and Table 3 shows the response rates for the eight core sub-groups, both as a percentage of the overall sample (response rate) and of those who we know received the survey (delivered response rate). Those in a managerial position had the highest response rates, followed by social workers.

Despite concerns about the likely participation of care workers and their ability to access an online survey, the response rate from this group exceeded 6% and was not substantially lower than the social worker response rate.

Table 3. Response rates by sub-group

Workforce Type	All attempted	Emails delivered	Response volume	Response rate	Delivered Response rate
Domiciliary care workers	19,994	19,804	1,203	6.0%	6.1%
Adult care home workers	15,556	15,527	1,035	6.7%	6.7%
Social workers	6,157	6,153	451	7.3%	7.3%
Residential child care workers and residential care workers	2,934	2,934	130	4.4%	4.4%
Adult care home managers	1,307	1,303	122	9.3%	9.4%
Domiciliary care managers	922	922	112	12.1%	12.1%
Social work students	657	657	34	5.2%	5.2%
Residential child care managers and Residential care managers	308	305	32	10.4%	10.5%
<b>TOTAL</b>	<b>47,835</b>	<b>47,605</b>	<b>3,119</b>	<b>6.5%</b>	<b>6.6%</b>

## Weighting the data

In deciding how to weight the data, we compared the profile of people on the Register with the profile of people who completed the survey. This included the proportion of people:

- in each type of job;
- in each region;
- in each age group;
- by gender;
- by ethnicity.

The main need to weight the data was prompted by the differing response rates by workforce type. For example, domiciliary care managers were more likely to complete a survey than domiciliary care workers. Whilst much of the reporting is based on roles – care worker, social worker and social care manager – Social Care Wales was keen to be able to report on overall findings so we needed to adjust the balance of workforce groups within the survey data set.

Age, particularly amongst care workers, was also found to be out of balance, with a low number of responses from people aged 18-34 and a high proportion from people aged 55+.

After studying the differences, it was agreed that the data would be weighted to correct for workforce type and age. No adjustments were made to correct for any other sample criteria (e.g. gender, region etc.) as these generally fell out naturally in line with the profile of the population (within acceptable margins). The final sample profile can be seen in appendix 2.

Due to the weighting process, the results presented in this report can be considered to be broadly representative of the people registered with Social Care Wales.

## Interpretation of the data

Throughout the report, results are broken down by workforce type, as well as all registered people where appropriate. For this purpose, workforce type has been grouped into three broad categories – care workers, social workers and social care managers. The table below shows which workforce groups have been combined to form the broad groupings.

*Table 4. Workforce type groupings*

Workforce type grouped	Workforce type detailed
Care workers	Domiciliary care workers Adult care home workers Residential child care workers Residential care workers
Social workers	Social workers (Adult and Children) Social work managers Social work students
Social care managers	Adult care home managers Domiciliary care managers Residential child care managers Residential care managers Responsible Individuals (R.I.) <sup>15</sup> Other managers

<sup>15</sup> RIs are not registered group. Where on the Register, it is because they are also in another registered role.

It is important to highlight that care workers make up the bulk of the sample (2,368 of 3,119 responses, 79%). Therefore, the overall results will reflect the responses from care workers more than either of the other two groups. It is important to consider results for the three workforce groups separately to fully understand the experiences and views of each group.

As the data has been weighted, it is considered to be representative of everyone on the Social Care Wales Register. Therefore, the text refers to 'registered people' throughout the report, as opposed to 'respondents'.

Not all of the of the social care workforce is registered, and therefore this survey isn't representative of non-registered workers, which includes roles such as personal assistants and day care workers. The full profile of the social care workforce is detailed in the [Social Care Wales 2022 workforce data report](#).

Only a proportion of the registered sample completed the survey. Therefore, all findings are subject to sampling tolerances. This means that not all apparent differences in the data are necessarily statistically significant. Where differences between sub-groups (i.e. workforce type), or sub-groups and the overall result, have been highlighted in the text, this means we have applied statistical testing and there is a 95% probability that the difference is real and not due to sampling error. Only differences that are 'significant' or 'statistically significant' are referred to in the text.

In some cases, the grouped result referred to in the text is not equal to that of the individual results (shown on the charts) which make up the group figure. This is due to rounding. For example, if the result for 'strongly agree' is 25.6% and the result for 'tend to agree' is 40.7%, individually this gives rounded figures of 26% and 41%, which if simply added together would give 67%. However, the actual grouped result would be 66.3%, which rounds to 66%.

In some cases, figures of 2% or below have been excluded from charts for presentational reasons.

## **ORS Project Team**

Project design, management and reporting was led by Belinda Herbert, Head of Insight, and Catherine Wall, Senior Researcher.

## **Acknowledgements**

ORS would like to thank Emma Taylor-Collins, David Pritchard and Lisa Trigg at Social Care Wales for their help and assistance.

We would also like to thank the 3,119 people who took part in the survey, as well as those who participated in the scoping stage and the cognitive testing, without whose valuable input the research would not have been possible.

## Appendix 2 – Sample profile

The following tables summarise the sample profile for a number of key characteristics. The data has been weighted for workforce type and age. All other criteria were left to fall out naturally.

Table 5. Workforce type: Unweighted counts and weighted percentage

Sample Workforce Type	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Domiciliary care worker	1,203	39	41
Adult care home worker	1,035	33	32
Social worker	451	14	14
Residential child care manager	32	1	1
Adult care home manager	122	4	3
Domiciliary care manager	112	4	2
Residential child care worker	130	4	6
Social work student	34	1	1
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

Table 6. Region: Unweighted counts and weighted percentage

Region	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
North Wales	745	25	25
Mid Wales	212	7	7
South West Wales	699	23	24
South East Wales	1,286	43	44
Outside Wales	37	1	1
Not Known	140	-	-
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

Table 7. Gender: Unweighted counts and weighted percentage

Gender	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Female	2,518	82	83
Male	537	18	17
Not specified	64	-	-
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>



Table 8. Age: Unweighted counts and weighted percentage

Age	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Under 35	480	16	29
35-54	1,454	47	45
55+	1,130	37	27
Not Known	55	-	-
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

Table 9. Ethnic group: Unweighted counts and weighted percentage

Ethnic Group	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Asian	97	3	4
Black	108	4	4
White	2,786	92	91
Mixed & other	34	1	1
Not specified	94	-	-
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

Table 10. Trade union membership: Unweighted counts and weighted percentage

Trade Union membership	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
In a Trade Union	1,120	36	34
Not in a Trade Union	1,861	60	62
Not answered	43	1	1
Prefer not to say	95	3	3
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

Table 11. Length of time worked in social care.

Length of time in social care	Number of respondents (unweighted count)	% of respondents (unweighted valid)	% of respondents (weighted valid)
Less than 5 years	759	24	30
5 years or more	2,348	76	70
Not Known	12	-	-
<b>Total</b>	<b>3,119</b>	<b>100</b>	<b>100</b>

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## Appendix 3 – The questionnaire

The survey was completed using online software. The following section shows the wording used but does not reflect what respondents saw on screen.

The questionnaire below is the original version, with those questions removed after the test stage highlighted in yellow.

This questionnaire was available in a bilingual format.



## The social care workers' survey



Gofal Cymdeithasol **Cymru**  
Social Care **Wales**

### Intro

Welcome to our first annual workforce survey. We hope the survey will become the main way we and our partners find out how people working in social care feel about their jobs.

Several national partners are supporting this survey, including the Welsh Government, the Fair Work Forum, and the Association of Directors of Social Services (ADSS) Cymru.

The survey should take about **15 minutes** to complete.

The results of the survey won't show any specific information about you or who you work for. Only ORS (our survey company) will see this information. ORS will keep any information which could identify you, securely, for no longer than 3 months after completion of the project in summer 2023. If you would like more information, you can visit our webpage

<https://socialcare.wales/research-and-data/survey-of-social-care-workforce/answers-to-questions-about-the-pilot-social-care-workforce-survey-january-2023>

## About your role

**S1. Which of the following best describes your current role? If you have more than one role, please think about your main job.**

- Adult care home manager
- Adult care home worker
- Domiciliary care manager
- Domiciliary care worker
- Residential child care manager
- Residential child care worker
- Other manager
- Social worker - Children's social worker
- Social worker - Adult social worker
- Social worker - Children's and adult social worker
- Social worker - Other social worker/manager
- Social work student
- Responsible Individual
- Other social care or social work role
- None of the above – I have now left the social care sector

**IF S1 DOES NOT = NONE OF THE ABOVE – I HAVE NOW LEFT THE SOCIAL CARE SECTOR**

**S2A. How long have you worked in social care?**

- Under a year
  - Between 1 and 2 years
  - Between 2 and 3 years
  - Between 3 and 5 years
  - At least 5 years but fewer than 10 years
  - More than 10 years
- Following the pilot, the last two options were removed and replaced with single option – More than 5 years.

**IF S1 = NONE OF THE ABOVE – I HAVE NOW LEFT THE SOCIAL CARE SECTOR**

**S2B. How long did you work in social care?**

- Under a year
- Between 1 and 2 years
- Between 2 and 3 years
- Between 3 and 5 years
- More than 5 years

**IF RECENTLY LEFT SOCIAL CARE SECTOR – SKIP TO SECTION F**

**S3. How long have you worked in your current role?**

- Fewer than 12 months
- At least a year but fewer than 2 years
- At least 2 years but fewer than 3 years
- At least 3 years but fewer than 5 years
- At least 5 years but fewer than 10 years
- More than 10 years

Following the pilot, question S3 was removed.

**S4. In which country/countries do you currently work?****(MULTI-RESPONSE)**

- In Wales
- Elsewhere in the UK
- Overseas

**Section A: Working in social care****QA1. What initially led you to working in social care?****(MULTI-RESPONSE)**

- Wanted to help children/older people/vulnerable adults (option removed after pilot)
- Wanted a job that would make a difference to people's lives
- Felt it would suit my skills/I would be good at it
- Felt it would be a job I would love/enjoy
- Felt it would be a stable/secure job
- Felt it would be a job with good career prospects/progression
- Looking for a change in career
- The salary on offer
- Felt the work pattern suited my lifestyle
- Through family or friends already working in the sector (option removed after pilot)
- Through personal experience of caring for someone
- A job came up that was suitable for me at the time (option removed after pilot)
- There was nothing else suitable or available to me
- Other (please specify)
- Not sure/can't remember

**QA2. How did you first find out about working in social care?**

- Careers advice
- Recruitment companies/fairs
- Through WeCare Wales
- Job advertised online (e.g. social media, websites about social care)/in newspaper
- Through friends and family working in the sector
- Other (please specify)
- Not sure/can't remember

**QA3. How likely are you to leave the social care sector...**

- a) Within the next 12 months**
- b) Within the next 5 years**
- Not at all likely
- Not very likely
- Quite likely
- Very likely
- Don't know/Not sure

**IF A3 = LIKELY (VERY OR QUITE)****QA4. Why do you expect to leave the social care sector?****(MULTI-RESPONSE)**

- Want to do something else
- For personal reasons e.g. childcare/caring responsibilities, sickness or disability, moving abroad
- Retirement

To study/gain further qualifications  
 Don't enjoy the job  
 No prospects of career progression  
 There is too much studying involved  
 Poor employment or working conditions in general  
 Lack of job security  
 Want more flexibility  
 Overworked  
 Want to work fewer hours (option removed after pilot)  
 Pay too low/need a higher-paying job  
 Don't like working alone (option removed after pilot)  
 Experiencing discrimination, such as racism  
 Relationships with managers/senior staff  
 Relationships with colleagues  
 Other (please specify)  
 Not sure/Don't know

**QA5. Is there a high level of staff turnover in your (main) workplace? By high turnover we mean there is a high number of staff leaving their jobs.**

Yes  
 No  
 Not sure

**IF YES AT A5.**

**QA6. What do you feel are the impacts of a high number of staff leaving their jobs on remaining staff and managers?**

**(MULTI-RESPONSE)**

Increase in workload  
 Increase in staff stress levels  
 Lower staff morale  
 Poorer working relationships between colleagues and managers  
 Poorer outcomes for those receiving care and support  
 Reduction in development of new processes or working practices  
 More reliance on agency workers  
 More difficult to access training/career progression pathways  
 Other (please specify)  
 There are no impacts (*exclusive option*)  
 Not sure/Don't know

Question A6 removed following pilot

**ASK MANAGERS ONLY**

**QA7. What challenges does your organisation face in terms of recruitment and retention of staff?**

**(MULTI-RESPONSE)**

Costs associated with recruitment  
 Availability of staff  
 Quality of candidates applying  
 Registration and qualification requirements  
 Difficulty in attracting underrepresented groups to the workforce  
 Difficulty recruiting from the EU following Brexit  
 The pay and conditions we are able to offer (e.g. flexibility, pensions)

- Competition from other employers – other social care employers
- Competition from other employers – health employers
- Competition from other employers – other sector
- The impact of the Covid-19 pandemic
- Other (please specify)
- None (*exclusive option*)
- Don't know/not sure

**QA8. To what extent do you agree or disagree with the following statements about leadership in social care?**

- a) **Leaders come from different backgrounds**
- b) **I would like a leadership position at some point in the future**
- c) **I believe it would be possible for me to become a leader**
  - Strongly agree
  - Tend to agree
  - Neither agree nor disagree
  - Tend to disagree
  - Strongly disagree
  - I already am in a leadership position (b and c only)
  - Not sure/Don't know

## Section B: Health and wellbeing

This section concentrates on your wellbeing and day-to-day satisfaction in your job in social care.

**QB1. On a scale of 1 to 7 where 1 means 'Completely dissatisfied' and 7 means 'Completely satisfied', how dissatisfied or satisfied are you with your present job overall?**

- 1 – Completely dissatisfied
- 2 – Mostly dissatisfied
- 3 – Somewhat dissatisfied
- 4 - Neither satisfied nor dissatisfied
- 5 – Somewhat satisfied
- 6 – Mostly satisfied
- 7 – Completely satisfied

**QB2. To what extent do you agree or disagree with the following statement:**

**I would recommend my organisation as a great place to work**

- Strongly agree
- Agree
- Neither agree nor disagree
- Disagree
- Strongly disagree

**QB3. To what extent do you agree or disagree that you feel safe in your work environment?**

- Strongly agree
- Tend to agree
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree

**QB4. For each of the following statements, please select the response which best describes your work situation**

- a) **Your manager helps and supports you**
- b) **Your colleagues help and support you**
- c) **Your job gives you the feeling of work well done**
- d) **Morale amongst colleagues is good**
- e) **My own morale is good**
- f) **The right staff are in place to deliver services**
  - Always
  - Most of the time
  - Sometimes
  - Rarely
  - Never

**QB5. To what extent do you agree or disagree that you feel valued for the work you do by...?**

- a) **Your manager**
- b) **Your employer (question removed following pilot)**
- c) **Your colleagues**
- d) **The people/families you support**
- e) **The families of people you support (question removed following pilot)**
- f) **Social Care Wales (question removed following pilot)**
- g) **Partner agencies e.g. health staff, police etc.**
- h) **General public**
- i) **Welsh Government (question removed following pilot)**
  - Strongly agree
  - Tend to agree
  - Neither agree nor disagree
  - Tend to disagree
  - Strongly disagree
  - Not sure/don't know

**QB6. To what extent do you agree or disagree with each of the following statements?**

- a) **I have enough time to do my job well**
- b) **I find it difficult to switch off when I leave work**
- c) **I feel enough support is in place for dealing with stress**
- d) **I feel able to meet the needs of people I care for and support**
  - Strongly agree
  - Tend to agree
  - Neither agree nor disagree
  - Tend to disagree
  - Strongly disagree
  - Not sure/Don't know

**QB7. Are any of the following currently causing you stress while carrying out your job?**

**(MULTI-RESPONSE)**

- Having too much work to do / not having enough time to do my work
- Having too much responsibility
- Not being given enough independence to do my job well
- Working alone
- Working with vulnerable children or adults



- Difficulties in relationships with colleagues
- Lack of support from managers or colleagues if I need help
- Paperwork and bureaucracy
- Costs associated with work, such as travel
- Worried about the impact of my work on the climate/environment
- Worrying about things outside work in general (e.g. responsibilities and stresses at home)
- Other (please specify)
- No, nothing (*exclusive option*)
- Not sure/Don't know

**QB8. If you wanted to find out more information about health and wellbeing at work, where would you go to find this information?**

**(MULTI-RESPONSE)**

- Employer website/intranet
- Google/internet search
- Human Resources (HR)
- Your manager
- Colleagues/peers
- Social Care Wales
- Canopi (free mental health support for social care and NHS workers)
- Your Trade Union rep(s)
- Other (please specify)
- Not sure/Don't know

**QB9. To what extent do you agree or disagree with the following statements about inappropriate behaviour at work?**

- a) I am aware of my rights in relation to inappropriate behaviour (bullying, discrimination or harassment)
  - b) I feel able to challenge inappropriate behaviour
  - c) I feel able to report inappropriate behaviour
  - d) Cases of bullying, discrimination or harassment are dealt with sufficiently and appropriately
  - e) I know where to go if I have any concerns about the way I, or people I care for and support, are being treated
- Strongly agree
  - Tend to agree
  - Neither agree nor disagree
  - Tend to disagree
  - Strongly disagree
  - Not sure/Don't know

Question B9 was removed following the pilot

**QB10. Have you ever personally experienced any of the following at work?**

**(MULTI-RESPONSE)**

- Yes – bullying
- Yes – discrimination
- Yes - harassment
- No – none of these (*exclusive option*)
- Prefer not to say (*exclusive option*)

## Section C: Skills and training

This section asks about skills and training in social care.

**QC1. To what extent do you agree or disagree with the following statements?**

- a) I have the right skills to do my job well (question removed following pilot)**
- b) I get the right training to do my job well**
- c) I have enough training to fulfil my CPD requirements**
- d) I want to improve my knowledge and skills**
- e) There are training opportunities available to me**
- f) I need more training to progress my career/get promoted**
- g) I know how and where to look for a new role to match my skills and experience**
  - Strongly agree
  - Tend to agree
  - Neither agree nor disagree
  - Tend to disagree
  - Strongly disagree
  - Not sure/Don't know

**QC2. Do you feel there are any barriers to accessing work-related training in your workplace?**

- Yes
- No
- Not sure/Don't know

**IF C2 = YES**

**QC3. What are the barriers?**

**(MULTI-RESPONSE)**

- Availability of courses
- I can't afford it/no funding available/not paid for by employer
- I don't have time
- Employer not allowing time off for training/would have to attend training in my own time
- Lack of information on training available and how to access it
- Other – please specify
- Not sure/Don't know

## Section D: Terms and conditions

**QD1. What is your current employment status for your main job?**

*If you are currently on maternity/parental leave, please tell us what your employment status was immediately prior to starting your leave.*

- Employed in social care by an organisation that provides social care, such as a local authority, third sector body or private company
- Employed in social care by an agency
- Employed in social care by family member (e.g. as a Personal Assistant)
- Self-employed in social care
- On secondment/placement in social care
- Working on a voluntary basis in social care
- Look after friend or family member without being paid
- Employed in a job outside social care
- Self-employed in a job outside social care
- Currently not working

- Other

**IF D1 = CURRENTLY NOT WORKING****QD2. For what reason(s) are you currently not working?****(MULTI-RESPONSE)**

- Sickness or disability
- Caring or childcare responsibilities
- Studying – not in employment
- Career break
- Retired
- Unemployed and available for work
- Currently under investigation
- Other
- Prefer not to say

**IF NOT WORKING, SKIP TO QE3****QD3. Which of these best describes you? I work...**

- Full time for one employer on fixed hours and receive a salary
- Part time for one employer on fixed hours and receive a salary
- For one employer on flexible hours
- For an agency on fixed hours
- For an agency on flexible hours
- For an agency as well as for one or more employers directly
- For different employers with two or more part-time roles
- For different employers with one full-time role and one or more part-time roles
- Self-employed for one client
- Self-employed for different clients
- Other – please write in

**IF D3 = WORK FOR MORE THAN 1 EMPLOYER (OPTIONS 6,7,8) BUT D1 DOES NOT = EMPLOYED IN A JOB OUTSIDE SOCIAL CARE (OPTIONS 8 OR 9)****QD4. Do you currently work in any roles outside social care? (MULTI-RESPONSE)**

- Yes – in a health care role
- Yes – not in a health care role
- No (*exclusive option*)
- Prefer not to say

**IF D4 = YES (OPTIONS 1 OR 2) OR D1 = EMPLOYED OUTSIDE SOCIAL CARE AND D3 = WORK FOR MORE THAN 1 EMPLOYER (OPTIONS 6,7,8)**

**QD4B. Is your pay in your other job, or jobs, higher, lower or about the same as your job in social care? If you work in more than one other role, please consider the total pay you receive from these jobs.**

- Higher level of pay
- Lower level of pay
- Level of pay around the same
- Don't know/Not sure
- Prefer not to say

**QD5. How many hours, in total, do you work in an average week? If you have more than one job, or if you regularly work overtime, please take all of your jobs and hours worked into consideration.**

**IF THE NUMBER OF HOURS VARIES GIVE AN ANSWER FOR A TYPICAL WEEK**

**IF D3 DOES NOT = SINGLE EMPLOYER ON FIXED HOURS WITH SALARY/AGENCY ON FIXED HOURS OR SELF EMPLOYED (OPTIONS 1,2,4, 9, 10)**

**QD6a. Are you employed in any role on a 'zero hours contract'? By this we mean you do not work a set number of hours of work each week and your employer offers you work when it arises.**

- Yes
- No
- Not sure/Don't know

**IF D6A = YES**

**QD6b. If you were in a position to choose, would you choose to work a zero hours contract or would you prefer to work more fixed/regular hours?**

- I would prefer a zero hours contract
- I would prefer a fixed/regular hours contract
- Not sure/don't know

**QD7. To what extent are you aware of your employment rights at work?**

- Very aware
- Somewhat aware
- Not very aware
- Not at all aware
- Not sure/Don't know

**Question D7 removed following pilot**

**QD8. Are you aware of any of the following? Yes/No****(MULTI-RESPONSE)**

- **Universal Declaration of the Rights of the Child (question removed following pilot)**
- **United Nations Principles for Older Persons (question removed following pilot)**
- **The Social Services and Wellbeing (Wales) Act 2014 (question removed following pilot)**
- **The Well-being of Future Generations (Wales) Act 2015 (question removed following pilot)**
- **Mwy na Geiriau/More than Just Words (question removed following pilot)**
- **Social Care Wales Code of Professional Practice**
- **Wales Safeguarding Procedures (question removed following pilot)**
- **My Trade Union rep(s) (question removed following pilot)**

**QD9. Which of the following do you receive in your main job in social care?**

- a) **28 or more days' paid holiday (or pro rata for part time staff)**
  - b) **Sick leave with pay when unable to work due to illness**
  - c) **A workplace or company pension scheme contribution from your employer**
  - d) **Access to family-friendly policies such as flexible working, carers leave, enhanced parental leave**
  - e) **Enough money to cover your work-related travel expenses**
  - f) **Access to a company car**
- Yes
  - No
  - Not sure/Don't know
  - Not applicable (for options e and f)

**QD10. To what extent are you satisfied or dissatisfied with the terms and conditions of your employment in your main job in social care?**

- Very satisfied
- Fairly satisfied
- Neither satisfied nor dissatisfied
- Fairly dissatisfied
- Very dissatisfied
- Not sure/Don't know

## Section E: Income

**QE1. Are you paid an annual salary, or are you paid by the hour? If you have more than one job, please take all of your jobs into consideration.**

- Annual salary
- Paid by the hour
- Annual salary and by the hour for different jobs
- I volunteer - *Skip to QE3*
- Prefer not to say

**QE2a. What is your total gross annual income? Include typical overtime and bonuses but before any deductions for tax.**

**If you have more than one job, please take all these jobs into consideration and if your pay varies each month/week, or if you have only recently started work, please estimate what your average annual income would be.**

- Less than £10,000
- £10,000 - £14,999
- £15,000 – £19,999
- £20,000 - £24,999
- £25,000 - £29,999
- £30,000 - £39,999
- £40,000 - £49,999
- £50,000 - £59,999
- £60,000 - £74,999
- £75,000 or more
- Don't know
- Prefer not to say

**IF QE1 = PAID BY THE HOUR (OPTIONS 2,3)**

**QE2b. What is your hourly rate of pay? If you are paid a different amount for different jobs, please think about how much you are paid for your main role.**

£

- N/A – I am paid a salary
- Don't know/Not sure
- Prefer not to say

**QE3. Have you or your household claimed Universal Credit in the last 12 months?**

- Yes
- No
- Not sure/Don't know
- Prefer not to say

Question E3 removed following pilot

**QE4. How well would you say you are managing financially these days?**

- Living comfortably
- Doing alright
- Just about getting by
- Finding it quite difficult
- Finding it very difficult
- Not sure/Don't know
- Prefer not to say

**QE5. To what extent are you finding it more difficult or easier to manage financially than you were this time last year?**

- A lot more difficult
- Slightly more difficult
- About the same
- Slightly easier
- Much easier
- Not sure/Don't know
- Prefer not to say

**QE6. To what extent are you satisfied or dissatisfied with your current level of pay?**

- Very satisfied
- Fairly satisfied
- Neither satisfied nor dissatisfied
- Fairly dissatisfied
- Very dissatisfied
- Not sure/Don't know
- Prefer not to say

## Section F: Leaving social care

**FOR THOSE WHO HAVE LEFT THE SECTOR IN THE LAST THREE YEARS****QF1. Why did you leave the social care sector?****(MULTI-RESPONSE)**

- Wanted to do something else
- For personal reasons e.g. childcare/caring responsibilities, sickness or disability, moved abroad
- Retirement
- To study/gain further qualifications
- Didn't enjoy the job
- No prospects of career progression
- There was too much studying involved
- Poor employment and working conditions in general
- Lack of job security
- Wanted more flexibility
- Overworked
- Pay was too low/needed a higher-paying job
- Experiencing discrimination, such as racism
- Relationships with managers/senior staff
- Relationships with colleagues

- Other (please specify)
- Not sure/Don't know

**QF2. Are you ...? (single-response)**

- Working full time
- Working part-time
- Unemployed and looking for work
- Not working - on maternity/paternity/shared parental/adoption leave
- Not working - retired
- Not working - looking after the home/children/relatives
- Not working - long term sick or disabled
- Not working - temporarily sick or injured
- Student/training - studying for a recognised qualification

**ASK THOSE WORKING FULL OR PART-TIME****QF3 What type of work do you do now?**

- Education
- Hospitality
- Nursing / health sector but not care work
- Retail
- Youth work
- Other – please write in

**Section G: Working in social care overall**

**QG1. Using a scale of 0-10, where 0 is not at all likely and 10 is extremely likely, how likely (if at all) would you be to recommend working in social care to a friend or family member?**

- 0 – Not at all likely
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10 – Extremely likely
- Don't know/not sure



**QG2. What do you enjoy, and like, about working in social care? If you have left social care, what did you enjoy, and like about your work?**

**PLEASE WRITE IN**

**QG3. What do you think should be done to make the social care sector a more attractive and rewarding place to work?**

**PLEASE WRITE IN**

## Section H: Background

The following questions help us to ensure that we have spoken to a representative cross-section of people working in social care. You do not have to answer these questions, but it helps us to analyse and interpret your responses. The information you provide will not be shared with your employer or anyone else.

**QH1. Are you...?**

- Female
- Male
- Transgender
- Non-binary
- Gender fluid
- Prefer to self-describe (Write in)
- Prefer not to say

**QH2. Which age category do you belong to?**

- Under 25
- 25-29
- 30-34
- 35-39
- 40-44
- 45-49
- 50-54
- 55-59
- 60-64
- 65+
- Prefer not to say

**QH3. What is your ethnic group?**

- Asian, or Asian British
- Black, Black British, Caribbean or African
- Mixed or multiple ethnic groups
- White
- Other ethnic group (please specify)
- Prefer not to say

**QH4. Were you born in the UK?**

- Yes
- No
- Prefer not to say

**ASK IF H4=NO****QH5. What was the main reason you came to live in this country?**

- Settlement (long-term/permanent stay)
- Employment (including military service)
- Education or training
- Marriage, family reunification or family formation
- Forced displacement (refugees, asylum seekers, temporary protection)
- Other reason (please specify)
- Prefer not to say

**QH6A. Do you have any physical or mental health conditions or illnesses lasting or expecting to last 12 months or more?**

- Yes
- No
- Prefer not to say

**IF QH6A = YES****QH6B. Do any of your conditions or illnesses reduce your ability to carry out day to day activities?**

- Yes – a lot
- Yes – a little
- No, not at all
- Prefer not to say

**QH7. Outside of work, do you look after, or give any help or support to, anyone because they have any long-term physical or mental health conditions or illnesses, or problems related to old age?**

- Yes
- No
- Prefer not to say

**QH8. Which languages do you speak fluently?****(MULTI-RESPONSE)**

- English
- Welsh
- Other (please specify)
- Prefer not to say

**QH9a. Which of the following best describes your ability to speak Welsh?**

- No skills
- Entry level (can introduce yourself and others and can ask and answer questions regarding basic information)
- Foundation (can hold a basic conversation with someone to obtain or exchange straightforward information)
- Intermediate (can hold extended conversations with fluent speakers about familiar subjects involving everyday work)
- Higher (can talk confidently with fluent speakers about familiar subjects relating to work, and can express an opinion, take part in discussion, and talk extensively about general topics)
- Proficient (can talk extensively about complex issues, presenting difficult information or information of an emotional nature; can facilitate and summarise extended or complex discussions)
- Prefer not to say

**IF H9A = ENTRY LEVEL – PROFICIENT (OPTIONS 2,3,4,5,6)****QH9b. Would you say you are able to use your Welsh language skills at work...?**

- All of the time
- Most of the time
- Sometimes
- Rarely
- Never
- Prefer not to say

**QH10a. Are you a member of a Trade Union?**

- Yes
- No
- Prefer not to say

**ASK IF H10A=YES****QH10b. Which one(s)? multiple choice**

- GMB
- Royal College of Nursing
- Social Workers Union
- Unison
- Unite
- Other (please specify)
- Prefer not to say

**QH11. Social Care Wales is establishing a group of registered persons interested in helping them with service development. This could mean testing a new website, taking part in a focus group, or giving feedback on new ideas or proposals. Some of these opportunities may be remunerated. If you would like to be involved in this group, please tick below. *Otherwise, just click on 'next' below to continue.***

- I am happy to be invited by Social Care Wales to take part in service development opportunities – *capture/confirm name and contact details (email)*

Thank you for taking time to participate in this important survey

For further information on the survey and to find out what happens next, please visit:  
<https://socialcare.wales/research-and-data/survey-of-social-care-workforce/answers-to-questions-about-the-pilot-social-care-workforce-survey-january-2023>)

## Appendix 4 – Email invitation text

Annwyl [Enw] / Dear [Name]

Subject: **Dweud eich dweud:** Arolwg y gweithwyr gofal cymdeithasol / **Have Your Say:** The social care workers' survey

I gymryd rhan yn yr arolwg hwn am ofal cymdeithasol yng Nghymru, cliciwch [yma](#)

To take part in this survey about social care in Wales click [here](#)

Mae'n debyg bod y ddwy flynedd diwethaf wedi bod gyda'r anoddaf erioed i ofal cymdeithasol yng Nghymru, gyda phethau ddim haws erbyn hyn.

Trwy'r **arolwg newydd** hwn, rydym ni'n gobeithio **cael gwybod sut mae pethau'n mynd yn eich gwaith o ddydd i ddydd** a defnyddio'r wybodaeth hon i sicrhau eich bod yn cael eich cefnogi yn y ffordd fwyaf effeithiol. Byddwn yn rhannu'r canfyddiadau pan fydd yr arolwg wedi'i gwblhau.

Er mwyn cael darlun cyflawn, mae angen i gymaint o bobl a phosib i ymateb i'r arolwg hwn, felly rydym yn gobeithio y byddwch yn cymryd rhan.

Mae'r arolwg yn cymryd tua 15 munud i'w gwblhau. Cliciwch [yma](#) i fynd i'r arolwg.

### Gwybodaeth gyfreithiol bwysig

Mae Opinion Research Services (ORS) yn gwmni ymchwil annibynnol yn Abertawe sy'n rheoli'r arolwg hwn ar ran Gofal Cymdeithasol Cymru.

Mae gan Gofal Cymdeithasol Cymru'r hawl i rannu eich gwybodaeth bersonol ag ORS fel y gallant gynnal yr ymchwil sydd angen arnynt i gefnogi gwelliannau i ofal cymdeithasol. Mae **hysbysiad preifatrwydd** Gofal Cymdeithasol Cymru yn amlinellu sut maent yn rheoli data personol, gan gynnwys eich hawliau a sut i'w hymarfer. Ni fydd ORS yn defnyddio'r wybodaeth hon at unrhyw ddiben arall.

Dim ond ORS fydd yn gallu gweld eich atebion a'r wybodaeth sy'n datgelu eich hunaniaeth. Caiff y rhain eu cadw'n gyfrinachol ac ni fydd neb o Gofal Cymdeithasol Cymru yn gwybod pwy ydych chi nac i bwy rydych chi'n gweithio. Os hoffech chi ragor o wybodaeth, gallwch fynd i'n gwefan.

Os oes gennych chi ymholiadau am yr arolwg, cysylltwch â Catherine Wall yn ORS drwy e-bostio [HaveYourSaySurvey@ors.org.uk](mailto:HaveYourSaySurvey@ors.org.uk) neu 08003247005, neu Emma Taylor-Collins yng Gofal Cymdeithasol Cymru [emma.taylor-collins@socialcare.wales](mailto:emma.taylor-collins@socialcare.wales)

The last two years have probably been the most difficult in living memory for social care in Wales and things are not any easier now. Through this **new survey**, we hope to **find out what things are really like in your day-to-day work** and use this information to make sure you are supported in the most effective way. We will share the findings when the survey is complete.

The more people that respond to this survey the more complete the information will be so we hope that you will take part.

The survey takes about 15 minutes to complete. Click [here](#) to go to the survey.

### Important legal information

Opinion Research Services (ORS) is an independent research company based in Swansea and are managing this survey for Social Care Wales.

Social Care Wales is allowed to share your personal information with ORS so they can carry out the research they need to support improvement in social care. Social Care Wales' **privacy notice** sets out how they manage personal data, including your rights and how to exercise them. ORS will not use this information for any other purpose.

Only ORS will be able to see your answers along with your personally identifying information. This will be kept confidential and nobody from Social Care Wales will be able to identify who you are or who you work for. If you would like more information, you can visit our webpage.

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