Supporting Working Carers:
The Benefits to Families, Business and the Economy

Final Report of the Carers in Employment Task and Finish Group
Preface

The Employers for Carers and Department of Health Task and Finish Group was set up in 2012 to explore ways in which carers – people looking after a family member or friend who is sick, ill or disabled – can be supported to combine work and care. It has gathered national evidence from an expert Steering Group and a wider reference group, evidence from Europe and evidence directly from employers and business. This is a report of its findings and recommendations.

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This report is a landmark statement from business and Government that more can and should be done to support people who want to combine caring for a family member with working. Currently, too many people feel unable to do this. This is damaging not just to these people and their families, but also to businesses and the wider economy.

It is only through a combination of support within and outside of the workplace that this issue can be properly addressed. There are of course already many employers who recognise that they can ill afford to lose key staff like this and that there is a business imperative to support families to balance work and care. We now need to spread this good practice. It is equally important that the care sector grows and evolves to offer more flexible services that support carers to work. This is an opportunity to see care as a growth sector, which could generate jobs across the UK.

If we can get this right, there are substantial gains to be made. Individuals will gain from the health and financial benefits of work and maintaining a life of their own alongside caring; businesses and their clients will gain from retaining talented employees; and the wider economy will gain from growth in the care sector.

This report makes a number of valuable recommendations that will help to drive forward this agenda. I look forward to continuing to work with employers to deliver the vision set out here.

Norman Lamb MP, Minister of State for Care and Support, Department of Health
The Task and Finish Group believes that the issue of supporting carers to remain in work is not only a problem, but also an economic opportunity. Supporting carers to remain in work can bring considerable benefits to carers themselves, employers and the wider economy. The Group therefore believes that there are a number of concrete, realistic and affordable steps that the Government, local authorities and employers can and should take to support carers to remain in work.

Many carers currently struggle to combine work and care. Analysis by the London School of Economics has estimated that there are currently 315,000 working age carers who have left work and remain out of employment. As the population ages, and the number of carers rises, the effects of losing carers from the workforce will grow. This is damaging to employers and the wider economy. Employers are losing talented people in whom they have invested significant time and money. The peak age for caring – 45-64 – is also the point at which people are most likely to have developed the skills employers need to succeed. The public expenditure costs of carers feeling unable to continue working have been estimated to be £1.3 billion a year.

Supporting carers to remain in work could unlock significant economic gains. As well as reversing the losses currently incurred, a survey carried out by the Task and Finish Group has demonstrated that employers who have policies in place to support carers see improved service delivery, cost savings and increased productivity. The growth of the care and support services sector to meet carers’ needs and support them to work would also benefit the wider economy. A third of carers say that they have given up work or reduced their hours because services are inadequate or too expensive. This suggests that there is considerable demand that would be released if the care and support sector better met carers’ needs.

We also need to improve the support carers receive from their employers. A quarter of carers responding to Carers UK’s 2013 State of Caring Survey said that although their employer was sympathetic, they did not offer support. Only 1 in 5 medium-sized employers responding to a survey carried out by the Task and Finish Group had formal company-wide policies in place.

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2 Ibid.
4 Carers UK (2013) The State of Caring Survey
The Task and Finish Group welcomes the progress that is already happening. Many employers are already providing excellent support for carers. The Government’s Care Bill will introduce new duties on local authorities that will enhance carers’ rights, and support the development of a diverse, sustainable and high quality market in care and support services.

However, there is more that can and should be done. The Government and employer bodies should work together to champion the case for supporting carers, and provide information that will help employers to understand how they can support carers in their workforce. Government and local authorities also need to work with the care sector to develop a market in care and support services that enables people to combine work and caring.
Recommendations

The Task and Finish Group recommends that:

**Employment practices:**

1) The Confederation of British Industry and British Chambers of Commerce should assist employers to support carers in their workforces by making available information provided by Employers for Carers on the business case for supporting carers and the ways in which employers can help and retain them.

2) The Chartered Institute of Personnel and Development (CIPD) should raise awareness amongst, and capture expertise from, HR practitioners about supporting carers in the workplace.

3) The Department for Business, Innovation and Skills should work to embed good practice around flexible working, including through the ACAS Code of Practice on Flexible Working, and should continue to monitor the impact of flexible working practices through studies such as the Workplace Employment Relations Survey (WERS) and the Work-Life Balance Survey and continue to identify the impact on carers.

4) The Department for Work and Pensions should improve provision of information and support to businesses to enable them to support carers in their workforce including through a page on gov.uk signposting to Employers for Carers.

5) The Department for Business, Innovation and Skills and the Department for Work and Pensions should support inter-departmental working and continue to work with business on promoting flexible working, which has significant benefits to carers, following the introduction of the universal right to request flexible working arrangements.

6) The Department of Health should include a pledge in the Responsibility Deal Health at Work Network on the promotion of the health and wellbeing of unpaid carers as part of its work on the health and wellbeing of vulnerable groups in the workforce.

7) The Department of Health should champion membership of Employers for Carers among Government departments.

8) Skills for Care should continue to work with employers in England, and in partnership with other Sector Skills Councils, to develop and implement carer focussed workforce support for care sector businesses (including small and medium-sized enterprises and start-ups) to ensure that workforce skills needs in relation to supporting people as employees and carers are addressed on an on-going basis.
Care and support services:

9) The Local Government Association and the Association of Directors of Adult Social Services should encourage effective joint working between local authorities and care providers, and the sharing of best practice on how they can work with Local Enterprise Partnerships (LEPS), Health and Wellbeing Boards, Chambers of Commerce, local business and other stakeholders in their area to support carers to remain in employment.

10) The Department of Health should work with key stakeholders in a number of local authority areas to explore ways in which people can be supported to combine work and care, and the market for care and support services can be stimulated to grow to encompass their needs.

11) Government guidance on promoting a diverse range of services and providers should include explicit reference to services that enable carers to work.

12) The Treasury should consider how care market growth can be embedded in ongoing and future strategies.

13) The Treasury and the Department for Business, Innovation and Skills should keep under review the option of potential initiatives to incentivise and accelerate growth in the care and support sector.

The Task and Finish Group understands that the action plan to the national Carers Strategy will be updated later this year. It believes that the actions arising from these recommendations should be included in that action plan with key milestones for delivery where appropriate.
1. Introduction

The world is ageing and demand for care is growing. By 2050 it is projected that the world’s population of people aged 85 or older will increase more than fivefold, Europe will have the oldest population in the world, and in the UK 11 million people alive today will live to be 100.\(^5\) Demand for care will rise dramatically in line with this trend, putting pressure on England’s population of 5.4 million unpaid carers.\(^6\)

It has been estimated that nearly 3.5 million people may be caring in the next 25 years,\(^7\) and that by 2017 the UK will reach the tipping point for care when the numbers of older people needing care will outstrip the numbers of working age family members currently available to meet that demand.\(^8\)

But demographic change also means that people are juggling increasingly complex family lives with increasingly demanding working lives. Growing numbers of families are managing multiple caring responsibilities for children or grandchildren and for older parents. By 2050 globally three times more people of working age will be looking after two billion ageing family members\(^9\) – and the majority will have to combine that care with paid work.

Currently 3 million people in the UK combine paid work with care, many of them at the peak of their careers, and that number will rise in the next 50 years as the dependency ratio falls from 4 to 1 to 2 to 1.\(^10\) These demographic shifts and falling birth rates make it more important than ever to maximise labour market participation in order to maintain and grow the country’s economy.

Supporting people to combine work and care has now become an economic as well as a social imperative. There are significant costs to individuals and families, to employers and business and to the wider economy of carers feeling that they have few options other than to leave work.\(^11\) Some carers choose not to work in order to focus on their caring responsibilities, but many carers feel unable to work because they are not getting the help they need at work, and more still feel they are not getting the help they need from formal care and support services.

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\(^5\) DWP (2011) Number of Future Centenarians by Age Group

\(^6\) 2011 Census, ONS.

\(^7\) Carers UK (2001) It Could Be You – A report on the chances of becoming a carer


\(^9\) United Nations, Department of Economic and Social Affairs, Population Division (2007) World population ageing


\(^11\) Carers UK, DWP and Ipsos MORI (December 2009), One million give up work to care – Carers Rights Day
However there are significant social and economic gains to be made from supporting carers to juggle their work and family lives:

- Individuals and families will not face the financial, health and social disadvantages of being outside the labour market.
- Employers will realise quantifiable benefits including retention of skills and experience, increased employee resilience in terms of health, productivity and engagement, and better results through improved performance.
- The economy will benefit from improved output at lower cost, higher public revenues and a reduced benefits bill.
- There will be a new and previously unrealised opportunity to turn the need for public investment in care services on its head and grow a vibrant, technology-enabled care sector that supports individuals and families, employers and business, while delivering benefits for the whole economy.
2. What is the problem?

Many carers are unable to work, and this has an impact on individuals and families, on business and on the wider economy.

Impact on individuals and families

Many carers currently struggle to combine work and care, and as a result many have to leave work, reduce their hours or take low paid, part-time jobs. Analysis by the London School of Economics has estimated that there are currently 315,000 working age carers who have left work and remain unemployed.

A recent Carers UK/YouGov poll suggested that this estimate may significantly underestimate the number of carers leaving work. The results of the poll of 2073 people suggested that just over 1 in 5 UK adults have seen their work negatively impacted as a result of caring (22%). The impact was highest amongst 45-54 year olds, where more than 1 in 4 reported that caring had taken a toll on their work (27%).

An earlier Carers UK survey found that of carers who had given up work or reduced their working hours to care, a fifth were in the region of £10k-£15k a year worse off, with a further fifth losing out on between £15k-£20k of earned income. Working carers who are older are more likely to suffer a drop in income of at least £30k when they take on greater caring responsibilities, reflecting the fact that many carers aged 55-64 have skilled or senior level jobs.

Impact on employers and business

Carers leaving work to care because they feel they have few other options results in unwanted loss of talent. Many carers lost to the labour market will have valuable skills and experience because they are concentrated in the 45-64 age range. This means employers can incur substantial costs in terms of recruitment and lost productivity because they will often have invested significant amounts in training and developing these employees. Not only do they directly contribute to creating value for their employers, they also manage and help develop other employees which is also a lost opportunity. The Corporate Leadership Council estimates that the cumulative costs to employers of an employee leaving work are equal to an employee’s last salary, while Hay Group suggests it could cost anywhere from 50-150% of their salary. Employee turnover also affects quality of customer service and customer retention, and so overall economic output.

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12 4.47% of UK adults from a sample of 2073 polled said that they had given up work to care – the equivalent of 2,315,433 adults.
14 Employee Engagement Task Force Nailing the evidence workgroup (12 November 2012) Engage for Success: The Evidence
There is also a risk of lost potential in the workplace where skilled workers are operating at a lower skill level to get the flexibility or locally based employment that enables them to care. This can lead to lost productivity and reduced capacity. Absenteeism (to care or because of sickness) is also a serious burden on public and private sector organisations across the UK, with the CBI estimating the direct costs of absence at £14 billion in 2013.¹⁵

**Impact on the wider economy**

The public expenditure costs of carers leaving paid work have been estimated to be £1.3 billion a year, based on the costs of Carer’s Allowance payments and lost tax revenues.¹⁶

However, the true cost through the benefits system may be even greater, as the number of people claiming Carers Allowance has increased every year since its introduction, and carers who have given up work to care and have no other, or low level, household income are also likely to receive other benefits and financial support, including Income Support, Housing Benefit and support with Council Tax. Additionally, there is the lost revenue to the Exchequer through carers’ tax and pension contributions. These costs are reflected in the Department for Work and Pensions’ estimate that the benefit to the Exchequer of a randomly selected person who would otherwise have claimed jobseeker’s allowance moving into employment would be approximately £9,800 per annum.¹⁷

Caring can mean long periods out of the workplace, leading to the associated ‘scarring’ effects of detachment from the labour market. Almost 30% of respondents to Carers UK’s *State of Caring Survey 2011* spent over ten years out of work as a result of caring. As noted above, this is most likely to affect people at the peak age for caring, between 45-64, when they are also often at the peak of their careers. 39% of *State of Caring* respondents who had given up their jobs to care did so between 40 and 54.¹⁹ Giving up work at this age also means carers can struggle to return to the workplace when their caring responsibilities come to an end, and they can face long-term financial hardship into retirement.

Less defined but also significant is the impact on health and wellbeing and its associated costs for health and care services. Unemployment is proven to have an impact on health and wellbeing,²⁰ and carers are known already to have additional health needs, with research showing that when unsupported, caring can take a serious toll on physical and mental health.²¹

**The impact of demographic change**

Demographic trends mean that without action these problems will only increase in coming years making the need to address them even more urgent. Public policy increasingly reflects the challenge of meeting the rising demand for care resulting from demographic change. Our population is ageing rapidly, people are also living far longer with long-term conditions and disabilities, and the number of working-age adults with learning disabilities will rise by almost a third over the next 20 years.²²

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¹⁵ CBI (2013) *Fit for purpose: Absence and workplace health survey 2013*

¹⁶ Pickard, L., *Public expenditure costs of carers leaving employment* (2012) LSE Health & Social Care, London School of Economics and Political Science (http://blogs.lse.ac.uk/healthandsocialcare/2012/04/25/dr-indapickard-public-expenditure-costs-of-carers-leaving-employment/). The calculation is based on the study’s estimate of the number of carers who have left work and remain out of employment being 315,000.

¹⁷ The estimate provided is based on the assumption that the individual’s earnings in employment are consistent with the average earnings reported by employed former jobseeker’s allowance claimants in DWP Research Report No. 791.

¹⁸ This estimate includes benefit savings, increases in tax revenues and national health service cost savings estimates. Benefit savings and increases in tax revenues were estimated for 2012-13 using the DWP Policy Simulation Model. National health service cost savings were estimated using the methodology outlined in DWP Working Paper No. 86.

¹⁹ Carers UK (2011) *The State of Caring Survey*


²¹ Carers UK (2012) *Facts About Carers*

The opportunity for informal care, particularly by the adult children of disabled older people, may decline in future as a result of factors such as women's rising participation in the labour market. Total expenditure on long-term care services, including health, social care and disability benefits has been projected to rise from £20.6 billion in 2010 (1.6% of GDP) to £44.8 billion in 2030 (2.3% of GDP), although this projection does not account for the Government's proposals to introduce a cap on care costs and raise the threshold for means tested support. The Office of Budget Responsibility has estimated that public expenditure on long-term care will rise from 1.19% of GDP in 2012/13 to 1.65% in 2030/31. If the supply of informal care does not increase to meet demand, the need for formal services could rise even faster than these projections suggest.

Already the vast majority of care in England is provided by family, friends and relatives, who make up England's 5.4 million carers. Both the NHS and social services rely on carers' willingness and ability to provide care. This growth in the number of carers is likely to continue in the future. Given projections of the demand for care and support as the older and disabled population grows, informal care will be more important than ever in supporting our health and care systems.

However, demographic change also means that many of us are juggling increasingly complex family lives with increasingly demanding working lives. Services that support people to manage these multiple responsibilities are now as much about economic productivity as they are about social cohesion. Many global economies will need their shrinking workforces to work longer to meet growing care and pensions bills and action is already being taken in many countries to extend the retirement age.

**Why do carers leave work?**

These factors have significant effects for individuals and families, for business and for the wider economy. Carers identify two main factors that influence their decision to leave work: workplace support, and the external care services that support carers to juggle work and care.

**Workplace support**

Caring is often a hidden issue in the workplace and subsequently carers can be poorly supported. In Carers UK's 2013 State of Caring Survey, nearly 22% of working carers said that their employer was not supportive of their caring role and 25% said that, although their employer was sympathetic, they did not offer support. More than 12% did not have flexible working available to them, nearly 5% had an unsupportive line manager, and 7% had not felt able to disclose their caring responsibilities.

A survey of employers conducted for this report on the business benefits of supporting working carers found that, of 47 medium size employers with staff numbers of 100-499, less than 1 in 5 had in place organisation-wide policies to address support for carers. A separate study found that among employees surveyed with caring responsibilities for people with whom they did not live – ‘distance carers’ – nearly one in five (18%) were not receiving any workplace support and a similar number (19%) were not sure about the type of support available. Nearly half (48%) of carers surveyed wanted to see better information about what workplace support was available, and, related to this, more publicity about and recognition of caring issues in the workplace (44%).

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23 Personal Social Services Research Unit (PSSRU) (December 2011) Projections of Demand for and Costs of Social Care for Older People in England, 2010 to 2030, under Current and Alternative Funding Systems, Report of Research for the Commission on Funding of Care and Support, Discussion paper 2811/2
24 Fiscal Sustainability Report, Office for Budget Responsibility, July 2013.
25 2011 Census, ONS
26 Carers UK (2001) It Could Be You – A report on the chances of becoming a carer
29 Carers UK, Employers for Carers and Nomura (2011) Caring at a Distance: Bridging the Gap
Similarly research on sandwich caring – looking after children or grandchildren at the same time as caring for an adult dependant – found that nearly one in five working carers (19%) had no specific support available in their workplace, while just over one in 10 (13%) were not aware of what support was available.30

Care and support services

The care and support sector is complex and fragmented. Many carers find that the care and support services they and their families need are inadequate, unaffordable or hard to access, and that information about them is difficult to find or navigate. One of the main reasons carers give for stopping working or reducing their hours is a lack of suitable practical support. Almost a third (31%) of working age carers responding to a 2011 survey31 had given up work to care or reduced their working hours because support services were not flexible enough, the person they care for did not qualify for support, there were no suitable services in their area, services were too expensive or services were not reliable enough.

Care and support services are often perceived to be of poor quality, or are not shaped around the needs of the carer. This echoes an earlier major study of working age carers which found that only a quarter felt they had adequate support from formal services to enable them to combine work and care. Almost half of working carers said they were affected by a lack of flexibility and sensitivity in the delivery of services, and most said they needed at least one type of formal service which they were not receiving.32 In addition only 5.6% of all working age carers actually receive carer-specific services provided, following a carers’ assessment, through their local authority.33

Carers also report that care and support services are not of high enough quality or sufficiently reliable, or are not shaped around their working lives, with day care services for example often operating only between 10am and 4pm.34 Nonetheless, it is important to note that satisfaction levels are fairly high with the services that carers are using. A survey of 57,900 carers using services in 2012/13 found that 36% were extremely satisfied or very satisfied with the services they received, 5% were quite dissatisfied, and 4% reported they were very or extremely dissatisfied. Overall the satisfaction level has fallen since the previous survey in 2009/10.35

However more can and should be done. The Task and Finish Group therefore welcomes the Government’s reforms announced in the Caring for Our Future White Paper and the Care Bill, which should improve the quality, diversity and affordability of services available, and help people to access them more easily through improved provision of information and signposting.

Access to assistive technology

Research demonstrates that working carers can benefit from the use of assistive technology products and services, but many carers are unaware of assistive technology solutions or of how to access them. In a recent report, over 60% of carers surveyed said telecare/telehealth solutions had given them peace of mind as a carer, and one in eight carers said these solutions helped them stay in work or return to work alongside caring.36 However, almost two thirds

30 Carers UK and Employers for Carers (2012) Sandwich Caring: Combining childcare with caring for older or disabled relatives
31 Carers UK (2011) The State of Caring Survey 22% of respondents said that services were not flexible enough, 11% said the person they cared for did not qualify for local authority support, 18% said there were no suitable services locally, 20% said services were too expensive and 17% said services weren’t reliable enough. 31% chose at least one of these options.
34 Carers UK (2013) The State of Caring Survey
36 Carers UK and Tunstall Healthcare (2012) Carers and Telecare
of carers who were not using telecare/telehealth were unaware of the support technology can provide, and one in four said they would like such help but did not know where to find it. Only 6% of carers said they would not want a technology solution.\(^37\)

Further research with carers has shown that carers’ perceptions of technology can be negative because of a lack of awareness and understanding of its benefits, but recommendations on technology solutions from trusted sources such as their employer would greatly increase their confidence in accessing and acquiring such solutions.\(^38\)

Assistive technology developers and developers of ICT solutions currently struggle to market their products effectively outside the statutory health and care sectors, and these solutions are rarely available on the high street.

Effective assistive technology solutions do not necessarily need to be complex, IT-based systems. For instance, pill dispensers that remind people to take their pills can play an important role in assuring carers that the person they care for is taking their medication, and can therefore give carers the peace of mind they need to be able to continue working. Similarly, fall alarms that alert the carer if the person they care for suffers a fall can also play an important role in helping carers to feel comfortable leaving the home to go to work.

\(^{37}\) Carers UK and Tunstall Healthcare (2012) *Carers and Telecare*

\(^{38}\) Carers UK for DAP Connect (2013) *Project Report*
3. What is the opportunity?

Supporting carers to remain in work would benefit individuals and families, employers and business and the wider economy.

Regaining output currently lost to caring

The Personal Social Services Research Unit (PSSRU) has estimated that the public expenditure costs of carers leaving employment is £1.3 billion per annum. Based on this analysis, Age UK has estimated the additional output from carers being able to work at £5.3 billion per annum. This figure is based on an estimate that 315,000 working age carers in England have left employment to provide unpaid care, and then remain out of employment.³⁹ Although it could be argued that this £5.3 billion figure should be set against the value of caring no longer being done by carers who are now working, it is not possible to estimate this value, and in any case it can be offset further against the value of increased activity in the care sector.

However, as noted earlier a recent Carers UK/YouGov Poll suggests just over 1 in 5 UK adults have seen their work negatively impacted as a result of caring including 2.3 million who have given up work.⁴⁰ This suggests that PSSRU’s estimate of the costs of carers leaving employment may be significantly lower than the real costs.

Additional benefits to Government revenues

The PSSRU has estimated that the public finances would gain £1 billion in additional tax revenues from carers returning to the workplace, and would save £300 million through Carer’s Allowance it no longer needed to pay. This figure does not include the costs of other benefits carers who are not working are likely to claim.

Work is seen as a positive enabler, by Government and by carers themselves, and supporting carers in and into work could result in savings not only in welfare benefits but also in health and care costs. As previously noted, unemployment in itself is proven to have an impact on health and wellbeing, and carers are also already known to have additional health needs.

These effects on Government spending have not been estimated. However, a survey for Carers Week 2012 showed that the overwhelming majority of carers (83%) say that caring has had a negative effect on their physical health, and 87% say that caring has had a negative impact on their mental health, including stress and depression.⁴¹ Mental ill-

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⁴⁰ 4.47% of UK adults from a sample of 2073 polled said that they had given up work to care – the equivalent of 2,315,433 adults.

⁴¹ Carers Week (2012) In Sickness and In Health
health among the workforce generally has been estimated to cost employers in the UK £30 billion a year through lost productivity, recruitment and absence.42

**Reduced loss of talent and increased business productivity**

If carers were supported to remain in work there may be less unwanted labour market turnover, with additional benefits to businesses able to maintain the working hours and productivity of employees with caring responsibilities. In 2006, one major utility company reported savings of more than £1 million per year as a result of retaining carers through workplace support.43

**Benefits to business**

Businesses will individually benefit in other ways from developing a workplace culture that is supportive and understanding of people's individual needs for flexibility due to caring, childcare or any other circumstances. Promoting and effecting this culture change can ‘normalise’ caring within the workplace and facilitate its acceptance as part of an employee's life course which will probably include family responsibilities from childcare through to care for older parents. Policies and practices should then flow from this, supporting carers, their colleagues and line managers. Such progressive people policies have been proven to create greater workforce engagement and productivity. A major technology company reported increases in both engagement and productivity leading to a 5% increase in customer satisfaction.

In a survey on the business benefits of supporting working carers conducted for this report,44 most respondents said supporting carers in their workforce had either a ‘major’ or ‘some’ benefit through:

- Increasing staff morale and loyalty (93%)
- Staff retention (92%)
- Reducing sick leave and absenteeism (88%)
- Improving staff engagement (85%)
- Improving people management (80%)
- Making team working more effective (75%)
- Improving service delivery (72%)
- Increasing productivity (69%)
- Reducing recruitment and training costs (65%)
- Improving the ability to attract (61%)
- Producing cost savings (55%)

Respondents also made the link between these benefits and higher revenues, lower operating costs, improved quality of customer service and customer retention.45

Many organisations are now taking actions designed to release the benefits of an actively engaged workforce, including offering support for working carers. Securing high levels of employee engagement is now the top workforce priority for UK businesses, ahead even of containing labour costs, according to the CBI.46 Active monitoring of employee engagement is rising year-on-year and 66% of senior HR professionals now say they measure engagement up from 55% only two years previously.47

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44 The survey received 223 responses from micro, small, medium and large employers: 46% were from the private sector, 38% from the public sector and 17% from the third sector


47 Employee Engagement Task Force *Nailing the evidence* workgroup (12 November 2012) *Engage for Success: The Evidence*
The economy will benefit from growth in the care sector

As the supply of services grows to meet demand from working carers and their employers, care could be a major employment opportunity, and care businesses a major growth opportunity. There are already an estimated 1.56 million people working in the adult social care workforce, more than in the NHS. By 2025, it is estimated that at least an additional 400,000 (and up to an extra 1.3 million) staff will be needed to support demographic demand, without significant service redesign.  

However, these figures do not cover the plethora of services delivered outside the statutory system that provide families with support – low level home care and domestic services that can mean independence for the user, and peace of mind and time for their families and carers. The challenges of caring at a distance and the demands of the labour market were highlighted in a report published in 2011. People working and caring at a distance placed significant value on services that supported the independence of the person they were caring for, and gave the carer the peace of mind that enabled them to work productively. These services ranged from domestic services, gardening and companionship to assisted living solutions such as telecare.

As people juggle multiple responsibilities for family and work they are increasingly paying others to carry out a range of domestic and care tasks in order to free them up for other demands. This same appetite for care and support services was also found in the latest Employers for Carers report on sandwich caring and in the latest State of Caring Survey, in which 31.4% of working carers said they would pay for household services other than care, and 26.4% said they would pay for technology services.

Expansion of care and support services could generate growth and jobs in every region of the country. Care is increasingly being recognised as a key sector for development, and Skills for Care’s Workforce Development Strategy already supports workforce commissioning, planning and development, and initiatives to raise standards, enhance terms and conditions and improve recruitment and retention in England. Some care providers (such as BUPA) are promoting care apprenticeships to attract a younger workforce, and some local authorities (such as Poole) are working hard in partnership with local care and training providers to enhance the perception of the care sector as a place to work and grow a career.

In order to generate this expansion of the care and support services sector, it is important to examine the potential role of innovative forms of financing. For instance, social impact bonds can play an important role in fostering innovation in service provision. Similarly, microfinance can be integral to growing microenterprises. Local authorities can play an important role in facilitating the development of new investment models, and the Task and Finish Group therefore recommends that the Government work with a number of local authorities to trial different approaches.

Additional potential gains in tax revenues and NI contributions

A care sector which grows new models of service delivery, and is perceived more positively as a provider and an employer, will bring additional opportunities for revenue to the public purse from bringing workers into the care sector from the grey economy. The shadow or grey economy is a significant issue across Europe and globally, with care and household services an area in which undeclared – or cash in hand – labour is rising as a result of the squeeze on public services and growing demand. In the UK, 42% of all activity in the informal or grey economy is concentrated in routine housework (28%), gardening services (3%) and caring (11%) and the importance of designing appropriate policy initiatives to tackle this has already been highlighted.  

Incentives that help stimulate the care market could also transform informal or grey labour into formal labour in the sector.

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48 The size and structure of the adult social care sector and workforce in England 2011 (2011) Skills for Care
49 Carers UK, Employers for Carers and Nomura (2011) Caring at a Distance: Bridging the Gap (2011)
50 Carers UK and Employers for Carers (2012), Sandwich Caring: Combining childcare with caring or older or disabled relatives (2012)
51 Carers UK (2013) State of Caring Survey
52 European Commission Consultation (April 2012) ‘Exploiting the employment potential of personal and household services. Towards a job-rich recovery’, Consultation document
53 ONS (2005) Identifying sources of entrepreneurship and the informal economy
The multiplier effect

There is a positive multiplier effect that can be triggered by demand for care that supports labour market participation, as the need or wish of carers to work unlocks demand for care and support replacement services, including assistive technologies.

- **Employees acquire caring responsibilities**
  2.3 million people move in and out of caring roles each year (Carers UK, 2001), and 1 in 6 will give up work to care (Carers UK, DWP, Ipsos Mori, 2009). The number of carers is set to increase as demographic change means more people need care.

- **Carers seek care and support services that enable them to work**
  41% of carers would work if they had suitable care and support services, with barriers to work more to do with services than employer support (Yeandle et al, 2007).

- **Carers work**
  Of the UK’s 6.5 million carers, 80% are of working age. Currently 3 million work, but 1.4 million do not (Census 2011). Research shows that many carers would work if they had suitable support.

- **Carers require more care and support services or they will not feel able to continue working**
  If more people need to work, and more people need to care, more people will need care and support services to make this possible.

- **Employers increasingly recognise, and require, care and support services as a ‘condition for employment’ like childcare**
  Employers are increasingly aware of the need for service provision that enables their employees to work much as they did with childcare. Members of Employers for Carers have argued this, with the EfC Leadership Group saying ‘Employers should have a right to expect accessible, reliable and affordable care services that are there when their employees need them’ (Employers for Carers, 2011).

- **Increased demand incentivises service providers to grow and innovate**
  Increased demand for care and support services should stimulate investment in the supply of care and support services, resulting in a more competitive, dynamic and high quality market.

- **There are more and better quality services**
  Increased investment should generate higher quality care and support services, including through the development of the skills of workers in this sector.

- **Carers feel more able to combine work and care, so more carers work**
  When people can access the services they need – often through private purchase - they mostly choose to combine work and care (Carers UK, 2013).
To unlock this multiplier effect, carers will need access to high quality, flexible, local and affordable services, designed with their needs in mind, as well as the needs of the people they care for. This will require a diverse market of care and support providers – public, private and voluntary sector – to deliver a sufficient supply of services, with new entrants to the market supported, including mutuals, micro businesses and small and medium-sized enterprises. Disincentives to market entry and/or business, such as perverse commissioning structures and complex regulation and registration processes, will also need to be tackled. The Task and Finish Group therefore welcomes the Care Quality Commission’s commitment to create a more effective and efficient registration process.

A new market for health and care technologies

As noted, services delivered through assistive technologies, including telecare, telehealth and assistive ICT solutions, have a significant part to play in enabling carers to combine work and care.\footnote{54 Carers UK and Tunstall Healthcare (2012) Carers and Telecare}

The Government’s Plan for Growth included a commitment to improving the take up of assisted living technology.\footnote{55 HM Treasury and the Department for Business, Innovation and Skills (2011) Plan for Growth} This includes an £18 million investment in the Delivering Assisted Living Lifestyles at Scale (DALLAS) programme to work with the Technology Strategy Board (TSB) to develop assisted living solutions through supporting R&D, collaboration, innovation and interoperability. Technology developers and providers are increasingly recognising the value of targeting assistive technologies at carers, including those managing multiple or distance caring responsibilities. Carers are the focus of a number of research projects funded by the TSB’s Assisted Living Innovation Platform and DALLAS programme, and similarly for equivalent European programmes. Commercial telecare and telehealth providers are exploring tailored packages for carers and a growing number of technology start-ups and not-for-profit organisations are developing technology products and services that can support individuals and families to manage their complex and busy lives.

In statutory services, local authorities and the NHS are being incentivised to deliver telehealth and telecare through the 3 Million Lives initiative, resulting in solutions that can also support carers.

Employers are also recognising the value of new technologies both to support the UK workforce to work more flexibly, but also to deliver flexible services that can enable them to work. Carers UK has been working with the London Fire Brigade to develop \textit{Connect}, a virtual carers network offering information not only on workplace support but on service support, and is now piloting a care co-ordination ‘app’.

\textbf{Evidence from Europe: Overview}

Some new policies being implemented in other European countries, in particular France and Belgium, are already supporting carers to remain in work, and the Department of Health commissioned Carers UK to develop and present the evidence on international practice in this area.\footnote{56 Pour la Solidarité (2013) European Evidence Paper on the development of Personal and Household Services and its potential for employment in Europe. http://www.employersforcarers.org/resources/research/item/808-supporting-working-carers-the-benefits-to-families-business-and-the-economy}

In long term care, the EU is increasingly emphasising the value of what it calls Personal and Household Services (PHS).\footnote{57 European Commission Consultation document, \textit{Exploiting the employment potential of personal and household services. Towards a job-rich recovery}, April 2012} These include both preventive services in domiciliary care – domestic services, shopping, gardening – as well as personal care. These are the low level services that keep people independent and make families resilient (and are currently often provided ‘cash in hand’ in the grey economy). They are among the most significant forms of support desired by respondents to three recent surveys, with at least 33% in each saying that these services would enable them to work.\footnote{58 Carers UK (2013) \textit{State of Caring Survey}, Carers UK, Employers for Carers and Nomura (2011) \textit{Caring at a Distance: Bridging the Gap} and Carers UK and Employers for Carers (2012) \textit{Sandwich Caring: Combining childcare with caring or older or disabled relatives}}
If these services are considered alongside conventional care and support services (e.g., personal care) there is considerable potential for job creation. Recent European Commission figures show that if every working person in the EU – 215 million people – ‘externalised’ or paid someone to do just one hour a week of the tasks they were struggling to manage, this would create 5.5 million new personal and household services jobs, covering a range of services supporting families across a lifespan of care.\(^{59}\) Supporting carers to remain in work thus has additional potential for significant economic benefits, reinforcing the argument that this should be regarded as an opportunity, not a problem. It is clear that the right interventions by Government, employers, the care sector and other stakeholders have the potential to unlock substantial benefits, including:

- The creation of new jobs
- The creation of new businesses and economic activity
- The creation of indirect management jobs
- Additional revenues from corporate tax
- Reductions in expenditure on welfare benefits
- Reductions in certain social costs linked to the grey economy. New jobs are particularly taken up by women and older workers who want to enter or re-enter the labour market or people who might otherwise work ‘cash in hand’ in the grey economy
- Increased tax and social security contributions
- The effect of these aspects on stimulating growth and contributing to GDP.

### The Belgian Experience

**Policy**

A ‘service voucher’ system was launched in 2004 by the Belgian federal government to encourage the demand and supply of domestic services, with the overall objective of creating employment and improving individuals’ work-life balance. This enables people to purchase domestic help from a licensed company and covers services such as cleaning, laundry, ironing, cooking, and transport (for people with low levels of mobility) but excludes personal care. Individuals are able to purchase a voucher for €7.50. Each voucher entitles the user to purchase €21.50 of services from registered service providers. The gap between the cost of the voucher to the user and the value of the services it purchases (€14.00) is funded by the Government.

**Outcomes**

164,789 jobs (4.7% of all Belgian jobs) were created between 2004 and 2011 in the domestic services sector alone, corresponding to 96,289 full-time equivalent jobs. Since the inception of this scheme, 2,204 new companies have been established in this sector.

**Costs**

The total cost of the scheme was €1.6 billion in 2011, 0.4% of Belgian GDP. Taking into account the additional tax revenues accruing from the additional economic activity generated by the scheme, the net cost of the scheme has been estimated at between €384 million and €523.3 million per annum.

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\(^{59}\) European Commission Consultation document, ‘Exploiting the employment potential of personal and household services. Towards a job-rich recovery’, April 2012
The French Experience

Policy
In 2005 the French government created the ‘universal service employment voucher’, with the following effects:

- Users can deduct up to 50% of the cost of employing a worker directly, up to €12,000. Users with dependants can deduct up to €15,000. Users with disabilities can deduct 80% of the cost up to a maximum of €20,000.
- Organisations providing vouchers to their employees are entitled to tax credits up to 25% of the total value of the vouchers provided.
- Organisations providing services are exempted from social security contributions, and benefit from a reduced VAT rate of 5.5%.

The scheme aimed to improve individuals’ work-life balance, assist vulnerable groups, and stimulate economic activity.

Outcomes
These interventions have created a total of €17.8 billion in added value in the French economy. 330,000 jobs have been created since 2005 in a wide range of personal and household services, including what would be recognised as care and support in the UK.

Costs
The total cost of these interventions in France was €6.2 billion in 2010 (0.31% of GDP). The total earn-back effects have been estimated at €9 billion per annum, indicating that the interventions led to the French government gaining €2.8 billion per annum.

While recognising that in the current financial climate it may be challenging to apply some of these approaches, the Task and Finish Group believes that there are some useful learning points from these overseas examples. It therefore wishes to consider alternative, more targeted interventions with the potential to unlock similar outcomes and recommends that the Government works with selected local authorities in different areas to investigate alternative methods for supporting carers to remain in work, and for developing the care and support market more generally. Investment now may lead to a financial profit as well as creating huge social and health value.
4. What more can be done?

Clearly, supporting carers to remain in work has the potential to deliver significant gains to individual carers, their employers, and the wider economy. However, the Task and Finish Group believes that further action is required in two key areas in order to unlock these benefits.

First, in the area of employment practices, there are still too many employers who are not aware of the benefits they can derive from supporting carers in their workforce, or how they can support carers. This is reflected in the findings outlined in this report: 22% of working carers feel that their employer is not supportive of their caring role; and fewer than 1 in 5 medium size employers have in place organisation-wide policies to address support for carers.

There is more that can and should be done to persuade employers to support carers in their workforce, and to give them more information on how they can do so most effectively. It is important that employers themselves take the lead on this: business organisations such as the Confederation of British Industry and the British Chambers of Commerce should make available information on the business case for supporting carers, and the different means by which employers can do so. The Chartered Institute of Personnel and Development (CIPD) should also be working to raise awareness among HR practitioners around this area.

Both central and local Government also have an important role to play in providing information to employers, and in championing this issue. The Public Health Responsibility Deal is an important mechanism through which employers can be encouraged to support the health and wellbeing of their employees, and it is vital that supporting carers is incorporated within it. More widely, the Government should continue to work with business to promote flexible working, and make available on gov.uk information to help employers to support carers in their workforce.

The extension of the right to request flexible working to all employees should also help carers, the majority of whom of course already have this right, by normalising flexible working practices. In order to evaluate the effect of this change and to influence flexible working policies going forward, it will be important to continue to monitor the impact of flexible working practices both generally and, in particular, on carers.

Local government should also be working with employers in their area to promote the case for supporting carers to remain in work. The Task and Finish Group is aware of good practice examples in a number of local authority areas where local authorities have worked with other organisations and businesses effectively to support carers. It is important that the Local Government Association (LGA) and the Association of Directors of Adult Social Services (ADASS) disseminate these examples of good practice to all local authorities.

The second area in which action is required in order to improve support for carers is in the development of a market of care and support services that supports carers to balance their caring responsibilities with full time work. This
The report has highlighted the fact that nearly a third of working age carers responding to a recent survey said they had given up work because services were inadequate or too expensive. Too often, services do not offer the flexibility carers need to combine work and care.

The Task and Finish Group therefore welcomes the new duty in the Care Bill on local authorities to develop high quality, sustainable and diverse local markets in care and services, and believes it is vital that the guidance around this duty explicitly encourages local authorities to shape markets that enable carers to work.

Legislation and guidance can only achieve so much. Local authorities should work with providers in their area and use the recently established Local Enterprise Partnerships and health and wellbeing boards to promote this agenda, and to support the development of services that meet carers’ requirements, including through promoting innovative forms of social care financing. There are already excellent examples of local authorities doing this successfully.

There is also an important role for central government in this process. The development of new local health and care architecture is a significant opportunity to find new ways in which local authorities and others can work together to support carers. Central government needs to play an important coordinating role, encouraging and working with authorities in a number of areas to develop and test different approaches to supporting carers.

More widely, this report has highlighted the significant potential for growth in the care and support services market. It is therefore vital that the Treasury consider this market as part of its ongoing and future strategies for stimulating growth.

The Task and Finish Group firmly believes that as employers and central and local government, we have an excellent opportunity to unlock considerable benefits for businesses, the wider economy and, most importantly, carers themselves.
5. Conclusions and recommendations

The Task and Finish Group acknowledges that there is already a great deal of work underway to tackle the problems identified here, and it welcomes this contribution from a wide range of organisations to enable people to combine work and care.

Many employers already provide a great deal of support for carers, as is demonstrated by the case studies that were collected by the Task and Finish Group. Employers of all types and sizes also continue to receive valuable support from Employers for Carers and Carers UK to support carers. This includes pioneering good practice in the workplace, providing practical advice and support for other employers, promoting the business benefits of supporting carers, and wider work to influence employment policy and practice to create a carer friendly culture.

Other organisations, such as Working Families, have also made a major contribution to the agenda around promoting flexible recruitment processes and job design, including by promoting examples of good practice, for instance including flexible work and leave arrangements in recruitment literature. More widely, the voluntary sector plays an invaluable role in supporting carers through the provision of information and signposting to services and return to work programmes.

The Group also welcomes the initiatives that the Government is implementing that will improve support for carers in the workplace. These include the extension of the right to request flexible working to all employees in the Children and Families Bill, and the work being carried out by the Department for Work and Pensions and the Department for Business, Innovation and Skills to change the culture around flexible working.

There are a number of wider reforms being implemented by central Government that will help carers to remain in work. The Care Bill will introduce new duties on local authorities to meet carers’ eligible needs for support, and to shape high quality, diverse and sustainable care markets. It will also require local authorities to provide information on services available to everybody in their area, regardless of whether they are self funders. The introduction of online quality profiles will help people to decide which services would best meet their needs, while reforms to the funding of adult social care will offer people protection from catastrophic care costs, and give greater support to people with the greatest financial need.

The Group also welcomes the Care Quality Commission’s ongoing review of its registration processes, which will be an important means of minimising the barriers to entry to this market for smaller and voluntary organisations. This will be reinforced by the implementation of recommendations from the report, No Stone Unturned in Pursuit of Growth, relating to local mechanisms for incentivising investment and supporting growth. Finally, the Government’s Plan for Growth also identifies the growth potential of the care and support market.

60 HM Treasury and the Department for Business, Innovation and Skills (2011) Plan for Growth
Recent changes to the architecture of local government should also lead to improved support for carers. Local Enterprise Partnerships will have an important role to play in promoting the care and support sector, and will be supported in many areas by regional assistive technology networks. Many local authorities have also developed local carers’ strategies in cooperation with the voluntary sector in order to develop and sustain local support for carers. These are just a few of the wide variety of activities already going on in this area. The Task and Finish Group recognises that significant progress is being made, but nonetheless believes that more can and should be done.

The Task and Finish Group concludes that:

- All relevant organisations should recognise the value of supporting people to combine work and care.
- All relevant Government departments should recognise, and build on, the strengths of earlier work, including *Recognised, Valued and Supported: Next Steps for the Carers Strategy* (2010), and act cohesively to support people to combine work and care and ‘carer proof’ relevant policies and practices.
- Employers, business and employer organisations should act to support people to combine work and care and ‘carer proof’ all relevant policies and practices. Employers – large and small, public and private sector – and their representative bodies should enable people to combine work and care by:
  - Promoting and enabling flexible attraction policies to recruit carers
  - Promoting and enabling flexible working to retain carers
  - Signposting employees to information on care and support services that enable them to combine work and care and diminish the chances of dropping out of the labour market at the onset of caring responsibilities
  - Promoting the business benefits of supporting carers
- Local authorities should act to support people to combine work and care and ‘carer proof’ all relevant policies and practices. Relevant representative bodies such as the LGA and ADASS should provide leadership on carers and employment for their members, and make them aware of the recommendations of this report.
- The establishment of Local Enterprise Partnerships and Health and Wellbeing Boards is an excellent opportunity to encourage local businesses to support their employees to combine work and care and to promote the business case. The Task and Finish Group welcomes the decision of Health and Wellbeing Boards such as Hertfordshire and Poole to include supporting carers among their priorities, and of Poole’s Local Enterprise Partnership to engage the care sector as a partner.

The Task and Finish Group therefore recommends that:

**Employment practices:**

1) The Confederation of British Industry and the British Chambers of Commerce should assist employers to support carers in their workforces by making available information provided by Employers for Carers on the business case for supporting carers and the ways in which employers can help and retain them.
2) The Chartered Institute of Personnel and Development (CIPD) should raise awareness amongst, and capture expertise from, HR practitioners about supporting carers in the workplace.
3) The Department for Business, Innovation and Skills should work to embed good practice around flexible working, including through the ACAS Code of Practice on Flexible Working, and should continue to monitor the impact of flexible working practices through studies such as the Workplace Employment Relations Survey (WERS) and the Work-Life Balance Survey and continue to identify the impact on carers.
4) The Department for Work and Pensions should improve provision of information and support to businesses to enable them to support carers in their workforce including through a page on gov.uk signposting to Employers for Carers.
5) The Department for Business, Innovation and Skills and the Department for Work and Pensions should support inter-departmental working and continue to work with business on promoting flexible working, which has significant benefits to carers, following the introduction of the universal right to request flexible working arrangements.

6) The Department of Health should include a pledge in the Responsibility Deal Health at Work Network on the promotion of the health and wellbeing of unpaid carers as part of its work on the health and wellbeing of vulnerable groups in the workforce.

7) The Department of Health should champion membership of Employers for Carers among Government departments.

8) Skills for Care should continue to work with employers in England, and in partnership with other Sector Skills Councils, to develop and implement carer focussed workforce support for care sector businesses (including small and medium-sized enterprises and start-ups) to ensure that workforce skills needs in relation to supporting people as employees and carers are addressed on an ongoing basis.

**Care and support services:**

9) The Local Government Association and the Association of Directors of Adult Social Services should encourage effective joint working between local authorities and care providers, and the sharing of best practice on how they can work with Local Enterprise Partnerships (LEPs), Health and Wellbeing Boards, Chambers of Commerce, local business and other stakeholders in their area to support carers to remain in employment.

10) The Department of Health should work with key stakeholders in a number of local authority areas to explore ways in which people can be supported to combine work and care, and the market for care and support services can be stimulated to grow to encompass their needs.

11) Government guidance on promoting a diverse range of services and providers should include explicit reference to services that enable carers to work.

12) The Treasury should consider how care market growth can be embedded in ongoing and future strategies.

13) The Treasury and the Department for Business, Innovation and Skills should keep under review the option of potential initiatives to incentivise and accelerate growth in the care and support sector.

The Task and Finish Group understands that the action plan to the national Carers Strategy will be updated later this year. It believes that the actions arising from these recommendations should be included in that action plan with key milestones for delivery where appropriate.