

Waving or drowning?

**The state of services and staff in the
Community and Voluntary sector**

February 2016

**From a survey of UNISON's members in the
community and voluntary sector**

Contents

Introduction	3
Executive summary.....	3
Key outcomes	4
What should be done	5
Methodology	6
The services	7
Childrens' services	7
Disabled peoples' services	7
Campaigning & Advocacy services.....	8
Housing services	9
General comments about services	10
The staff.....	12
Working life	12
Working time	12
Pay.....	12
Hourly pay.....	13
Living wage.....	13
Pensions	13
Personal finances.....	13
Health and safety	14
Ill health	14
Training	14
General comments about work.....	16

Introduction

The community and voluntary sector is crucial to our society. It has always given support to local communities: with innovative services, by mobilising volunteers, and by campaigning for social justice. Not-for-profit housing associations house and support many low income people. Although donations and grants have traditionally supported the work of the sector to a certain extent, in recent years it has had to rely increasingly on contract funding from providing public services.

This has made the sector particularly vulnerable to public spending cuts, resulting from the ideologically-driven austerity agenda to 'shrink the state'. It is also under political attack from the right wing, which aims to muzzle its campaigning voice.

But what does this mean in practice? UNISON is the biggest trade union in the community and voluntary sector, with a growing membership now numbering over 67,000. Our survey of over 4,000 members in the sector gives a unique perspective from the staff working in this difficult environment – about the impact of the cuts on the services and on the dedicated workers who deliver them.

Executive summary

The outcomes of the survey should be a major cause for concern for policy makers, employers, service user groups, and anyone concerned with the health of the community and voluntary sector.

The damning picture painted is of a dedicated workforce stretched past breaking point to deliver crumbling services to vulnerable people. As services suffer, service users are drifting to the margins of society as they receive less support and are less able to have their voice heard.

But there is also a growing divide between the appealing public face of the not-for-profit sector, and the reality facing its staff on a daily basis. Intolerable levels of stress and violence at work are going alongside chronic understaffing, and poverty pay resulting in staff sinking into debt. At the same time, many staff say that senior management are becoming more aloof and insulated from the harsh day-to-day reality of providing vital services.

Staff are deeply concerned about the major cuts to their services and the impact they have on vulnerable service users. Their demands of their employers are also loud and clear. They say "we need more staff", "we need proper pay", and, more than anything else, "we need you to listen to us!"

But society at large and the public sector in particular need to take notice of the problems facing the sector. If we want a community and voluntary sector that works, then public sector care contracts must be properly funded.

Key outcomes

Service quality

The survey asked questions about the changes since our last survey two years ago. Many of the responses are marginally better than our last survey. This does not imply that services are improving, but (typically) that they are deteriorating at a slightly slower rate.

- Under-staffing and high staff turnover are clearly widespread and having a major impact on the quality of services. But three staff in every ten would not feel confident telling senior managers about problems in their service. There is a growing divide between top managers and front-line staff.
- Childrens' services are a vital area of public interest, but there was an increase in the number of staff who did not have enough time to follow up concerns about the welfare of the children they are responsible, and over a third had insufficient time to plan. Over three-quarters believe that vulnerable children may be slipping through the safety net.
- For disabled people, services are being reduced to covering clients' basic physical needs, but without the social interaction that makes them feel like a valued part of our society. More service users are being left at risk.
- In campaigning and advocacy, the deterioration in the quality of service has accelerated. This is particularly concerning because – in an environment where services are being squeezed – it may imply that service users are less able to have their voice heard when things go wrong. Those who were digitally excluded are particularly at risk.
- In not-for-profit housing, there are fewer non-statutory services provided, and more tenants are suffering because of the dysfunctional welfare system. Many tenants are simply poorer, and they have less support despite an increase in debt management advisors.

Staff treatment

Staff are continuing to deliver services despite sinking into debt, doing unpaid work, having inadequate management support and impossibly high workloads.

- Morale is low, with only around a third planning to stay in their current job.
- Nearly half have experienced violence or aggression, but only a quarter feel threatened. It's simply part of working life for many.
- Two in five feel that communication from their management is inadequate.
- Two-thirds don't feel supported by management, and half of these don't feel confident enough to report failings in their service.
- Two in five can't meet their household bills, and half of that number are in over £10,000 of personal debt.
- Only around a third of staff saw their pay rise last year, and around a third are paid less than the Living Wage. Around two in five would work more paid hours if they were available.
- Over two in five are doing unpaid overtime, at an average of nearly a day a week.

What should be done

Whilst money may not solve every problem, there is clearly far too little money going into the system. This is the root cause of understaffing and the declining quality of service that the community and voluntary sector is providing. But even within this, more can be done. Adopting the points below will start to address these problems:

1. Contracts to provide services to the public sector must be adequately funded.
2. Management must be properly trained, and prioritise supporting front-line staff.
3. Especially in larger employers, top management have to communicate better and more honestly with staff, who will not be convinced by the latest rebranding exercise.
4. There needs to be proper support for a 'no tolerance' attitude to violence and aggression in the workplace, to stop it becoming an accepted part of working life.
5. The rise in zero-hour contracts must be reversed – these are responsible jobs.
6. Staff are sinking into debt and need a pay rise. As a first step, all staff deserve to be paid at least the Living Wage Foundation's Living Wage.
7. Staff are dedicated, but they are working for a living. Their goodwill should not be exploited by expecting them to support under-resourced employers with large amounts of unpaid overtime and inadequate work-related training.
8. All staff should be entitled to sick pay above the statutory minimum so they are not financially compelled to work whilst unwell. The first three days off sick should be paid, and attendance management should be used as a supportive tool, not a punitive measure.
9. Part time staff should be explicitly encouraged to join occupational pension schemes.

"I, like so many working in social care have no social life. We cannot join clubs/groups/classes because of the unpredictable shift patterns. We cannot afford much more than rent, food and bills. Most of us have no savings and no future. It would be nice if our employer recognised just how much people like me sacrifice to support people with learning disabilities." **Support Manager (Learning Disabilities), Scotland**

Methodology

Every two years UNISON surveys our members employed in the community and voluntary sector to understand the changing environment in which they work and deliver services to the public. 36,000 members were emailed and invited to complete an online survey, which was open for just over a month. There was a small prize draw for those participating in the survey. There were a range of questions about the quality of services and the working lives and terms and conditions of the respondents. Many of these ask about changes over the last two years, to be better able to identify changes and trends.

There were 4,092 responses to the survey. The respondents work for a range of different not for profit employers:

- 41% from large charities (500+ staff),
- 34% from small charities or community organisations, and
- 25% from housing associations

The results came from staff across the UK:

East Midlands	4%
Eastern	6%
Greater London	18%
North West	12%
Northern	5%
South East	8%
South West	8%
West Midlands	6%
Yorkshire & Humberside	9%
Scotland	14%
Cymru/Wales	7%
Northern Ireland	3%

The definition of part-time work (from the ONS Annual Survey of Hours and Earnings) is 30 or less basic weekly paid hours less (for non-teaching occupations). A disproportionate number of part-time workers were women.

	UNISON's CVS membership	All respondents	Part time respondents
Female	73%	68%	79%
Male	27%	32%	21%

The results of this survey are in this report. The report of the previous survey results is online at www.unison.org.uk/catalogue/21929.

The services

The questions typically asked staff about changes over the last two years.

Childrens' services

It is deeply concerning that the deterioration in the quality of childrens' services is continuing, and that even more staff have too little time to follow up causes for concern.

There was not enough time to prepare proper risk assessments / support plans, according to **36%**, and **17%** said they did not have enough time to monitor children and follow up any concerns (for example of neglect or abuse). This is up from 15% two years ago.

14% saw an increasing risk of error in administering medication, and **78%** were concerned that vulnerable children may be slipping through the net – up from 72% two years ago.

44% said they were less able to provide outside activities (such as visits), and **50%** were less able to provide resources (such as toys).

Disabled peoples' services

The cuts to disabled people's funding are leading to a system where vulnerable people are kept physically alive but their social and emotional needs are unmet and they are drifting to the fringes of society.

44% said that less frequent case reviews were leading to inadequate or inappropriate support. **60%** were concerned that some clients are being left at risk because their package of care has been reduced.

53% said that service users were becoming more socially isolated. Of these, **59%** were concerned that this could result in self-harm and depression. More clients are being moved into 'the community' without proper support services in place, according to **48%**.

35% of respondents found delays in replacing faulty equipment (e.g. wheelchairs).

38% were unable to provide clients with all the help they needed, and **43%** said they had less time with each service user. They described the impact of this as:

1. A reduction in services to the minimum: maintaining basic physical needs of service users;
2. An increasing amount of social isolation for service users;
3. Not serving the mental or emotional needs of clients; and

4. Creating more mistrust

What the staff said:

“There is not enough time to build up trust and rapport. Service users tend to feel rushed through the service.” **Senior Wellbeing Advisor, South East**

“They become isolated and confused by rapid staff turnover. The job becomes more about short-term practical support rather than long-term emotional support.” **Support Worker, Greater London**

“They become lethargic and disinterested in their surroundings. They neglect general and personal hygiene and are more prone to dips in mental health and reliant on medication” **Support Worker, East Midlands**

“The service users are now unable to attend some events and it can be very lonely when they are forced to go for large periods of time without interaction.” **Support Worker, Scotland**

“We see sadness, attention-seeking behaviours, a refusal to eat and drink” **Care Support Worker, North West**

“There is a loss of trust in support workers and the service itself.” **Support Worker, South West**

“Being short staffed we don't have the time to sit and talk or even keep up with the paper work. In effect, they are on their own!” **Mental Health Support Worker, North West**

“It is becoming incredibly hard to safeguard vulnerable people” **Service Co-ordinator, Greater London**

Campaigning & Advocacy services

It is clear that services are being withdrawn and more clients have to seek help online and over the phone. This further disadvantages people who are marginalised and in most need of help.

According to **63%** of responses, services are being centralised, so clients have to travel further to get help, and **83%** said it was getting harder for clients to get representation and advocacy, as well as basic advice.

83% said clients were having to phone up or go online more rather than get help face-to-face. The top **5** groups that are losing out are elderly clients, disabled clients, those with mental health issues, clients with learning disabilities, and those who were digitally excluded.

38% said that their employer was prioritising services on contracts to public bodies over campaigning & advocacy. Significant changes to legal aid have recently been introduced, and **60%** said this had impacted on their service.

What the staff said:

“People are being left at the peril of the legal system, having no representation or advice. The consequences are huge, especially with regards to no legal aid for issues with child proceedings, meaning people are more likely to have their children taken away.” **Independent Mental Health Advocate, Cymru / Wales**

“People are going to court unprepared for the hearing because they do not have legal representation. Judges are having breakdowns because they cannot cope with the stresses of their job. Some people, such as fathers, are not going to court because they cannot afford to issue an application and do not have any confidence in the justice system. It is, to be quite frank, absolutely shambolic.” **Chair of a small charity, Greater London**

“More people are giving up fighting for their rights.” **Improvement Officer (Housing), North West**

“People are unable to get specialist legal advice, especially on family matters and employment. For family matters, mediation is not appropriate for many, and domestic violence is hard to prove to determine entitlement to legal aid. People expect specialist legal advice from my charity but we lost 11 specialists with legal aid cuts two years ago. Now we only have a benefits specialist.” **Research and Campaigns Coordinator, Eastern**

“People have nowhere to turn to get advice and specifically parents with disabilities whose children are on the child protection register often have no support or poor representation.” **Independent Mental Capacity Advocate, West Midlands**

“Women who are experiencing violence - the most vulnerable women - are denied access to basic legal services because they don't reach the threshold. There are less legal services able to offer legal aid and do the good things they did previously, including pro bono work. It has had a massive impact on the women who come into the service I work in.” **Advocate, Greater London**

Housing services

Many social housing tenants are suffering financially, more often because of the complexities of the welfare system than simply financial hardship. As fewer services are provided by housing associations, there is more anti-social behaviour (though this may be linked to other reasons as well).

43% said more tenants were being evicted or forced to move out because of financial reasons, despite **61%** saying more debt management advisors were employed.

33% said there had been a reduction in non-statutory services (such as play schemes and community centres) provided by their housing association and **46%** reported a rise in anti-social behaviour from tenants.

65% said more tenants were falling behind with their rent.

1. Overwhelmingly, this was reported to be caused by problems linked to the welfare system. Changes to the system (including the introduction of the bedroom tax and benefit caps) came top, but moving to Universal Credit (where rent payments are no longer paid directly to the landlord) and delays in welfare payments and sanctions were also causing major problems.
2. But a lot of tenants are just very poor. The next biggest set of problems were just financial - financial difficulties and the high cost of living, unemployment, and having to pay other bills and debts.
3. The third highest group of reasons was linked to a need for more support for tenants, and the complex welfare system. These included poor money management by tenants, the complex benefit system and a lack of support, and irregular work and zero hours contracts.

General comments about services

51% of respondents said that they had less time with each service user - up from 43% two years ago. **49%** were not able to provide service users with all the help they need.

High staff turnover is having an effect on the quality of their service, according to **59%**, and **71%** felt their service was under-staffed.

What the staff said:

“Almost all supporting services which we linked our clients into have now ceased. This has meant that we are trying to cover many areas of support and information, advice and guidance which used to fall outside our remit and where we could refer to local authority run services.” **Young people support worker, South West**

“As staff leave their work load is being passed on to me. Which means I am under ever increasing pressure to divide my time between office work and clients. Clients are not getting the time and energy they pay for or deserve. I tell my manager but it makes no difference. All she says is ‘What can I do?’” **Sheltered housing scheme coordinator, Yorkshire & Humberside**

“Customers fear social worker/social services contact as they believe they are being targeted by funding cuts, despite their care needs having increased due to age and associated health conditions.” **Local manager in a disabilities charity, Yorkshire & Humberside**

“Due to very low wages and travel allowance I cannot always arrange to visit a family/individual. I simply cannot always afford petrol/diesel.” **Floating support worker, Northern Ireland**

“Families are no longer able to pop into the centre without prior notice/ or use the phone for benefit issues. This is due to not having admin staff to answer door on reception or man the phones.” **Family support worker, North East**

“I can honestly say that the demand for our service had risen by 30%, and our capacity to deliver high quality services had diminished by the same amount.” **Assistant Director of education charity, Cymru / Wales**

“Those who are unable to afford bus fares, childcare, etc, are no longer able to access services.” **Training coordinator, Scotland**

“I am a TUPEd member of staff from the NHS. The staffing ratio from the old to the new service has been cut by 75%.” **Mental health residential support worker, South East**

“It has resulted in the use of untrained agency staff who are unaware of the clients’ needs and are less motivated.” **Nursing assistant, East Midlands**

“Our company has also had to hand back many clients through lack of capacity to cope following staff resigning over pay cuts and stressful working conditions.” **Community care assistant, South West**

“The children I work with are doubly incontinent, the amount of pads they are funded has been decreased to 4 per day.” **Senior health care assistant, Greater London**

“The fact that we are not able to go in depth, means we are now merely scratching the service with our clients and we know from experience that when they come for advice, there tends to be other underlying issues, they used to be explored.” **Money advice caseworker, Yorkshire & Humberside**

“Many people cannot attend day services for as many days each week as they previously did due to cuts in their funding,” **Senior support worker supporting adults with learning disabilities, North West**

“We never get time to even sit for a few minutes with a resident in the nursing home.” **Care assistant, Northern Ireland**

“The quality of support is poor although staff are fighting hard to cope. At this rate the staff themselves will be service users before long.” **Social worker (children), Cymru / Wales**

“Young people are struggling to find housing, representation and access to support services. This generation is being swept under the carpet and advocacy services are being cut, meaning that these young people are losing their voice in their own lives as well as politically.” **Adviser advocate, Cymru / Wales**

“We have zero hour contracts. When staff leave they are not replaced, thus increasing the stress of the staff remaining as they expect the same outputs. There is more stress related sick leave.” **Project worker for sexually abused young people, London**

The staff

The questions typically asked staff about their current situation.

Working life

Whilst staff are clearly dedicated and some employers are trying hard to support them, the overall picture is of general demoralisation. This is bound to affect service standards in the long-run, as well as the workers themselves. Communication is poor and distrust of senior management is rising.

64% of respondents did not feel properly supported by their management, and **59%** thought they being were asked to do an unrealistic amount of work.

Information from their employer was poor or inadequate, according to **40%**. According to **30%** if there was a problem with the quality of your service, they would not feel confident telling senior managers about it. This is up from 23% two years ago.

40% described their current state of morale as poor or very poor and **30%** were intending to leave their current job during the next year - and another **35%** were considering it.

Working time

There is a large amount of unpaid overtime being worked by staff, and many are clearly looking for opportunities to increase their income.

On average, respondents were contracted to work **31.9** hours a week. However, they actually worked an average of **36.6** hours a week – not necessarily all paid. **43%** did unpaid overtime, and for these workers, the average weekly amount of unpaid overtime was **6.7** hours.

Most members (**75%**) only have one job, but **5%** have more than 4 jobs. **38%** said they would work more paid hours if they were available (this was **42%** for part-time workers). **11%** of respondents were on 'zero hour' contracts – up from 9% two years ago.

Pay

In the last year, only **35%** of members saw their take-home pay rise. Only **26%** get service-related pay increments.

Hourly pay

Average pay is **£10.34** an hour (£11.97 in London and £10.10 outside). There is a small gender pay gap – women are paid **£9.97** on average, and men **£10.12**. However there is a much bigger gap (12%) between the average pay of full-time workers (**£10.49**) and part-time workers (**£9.22**). Interestingly, part-time women were paid £9.36 – above the average.

Living wage

A high proportion of staff do not get paid a Living Wage, and with the scarcity of pay rises this number is increasing.

32% of respondents were paid below the Living Wage Foundation’s “Living Wage” at the time of the survey (£9.15 in London and £7.85 outside).

However, the Living Wage went up shortly after the survey closed. Comparing pay against the Living Wage at November 2015 (£9.40 in London and £8.25 outside), **40%** of respondents were below this minimum income level. In 2013, only 24% of respondents said they were paid below the Living Wage.

What does this mean across the sector? The NCVO estimates that 821,000 staff work in the community and voluntary sector (excluding housing associations). So if 32% being paid less than the living wage is typical, around **263,000** staff in the sector are not paid a living wage. Using the post-November 2015 figures, **330,000** staff may not be paid a living wage.

Pensions

Around a quarter of staff don’t have a pension, which is concerning, and part-time staff in particular are excluded. This may be due to low pay, inferior communications to part-time staff, or other reasons – but it needs to be addressed.

76% said they pay into a pension scheme – despite a requirement for auto-enrolment into pension schemes by employers. Slightly more men (79%) than women (75%) pay into a pension scheme, but only **63%** of part-time staff have a pension.

Personal finances

The general picture is of many staff sinking into ever increasing debt as their income does not cover their basic daily expenses.

84% of respondents said their pay was not keeping up with the cost of living, and **42%** said they could not always meet their household bills. **20%** of respondents were in more than £10,000 of personal debt (excluding mortgages). This is up from 18% two years ago.

Health and safety

It is quite shocking that for around half of respondents, aggression in the workplace is becoming a fact of daily life.

Whilst **48%** had experienced an incident of violence or aggression at work in the last two years, only **27%** felt threatened by violence or aggression at work. This backs up worrying anecdotal evidence that aggression is increasingly seen as a normal part of working life in the sector.

The types of aggression were described as physical abuse (**24%**), verbal threats (**19%**), and verbal abuse (**58%**).

Ill health

The large number of staff going into work whilst sick – working in a care sector – backs up anecdotal evidence given by UNISON members that they cannot afford to take time off sick, and that punitive sickness absence procedures are too often used against them.

85% said that they had gone into work whilst unwell in the last two years (up from 78% two years ago). Only **63%** get sick pay above the statutory minimum. **77%** felt stressed because of their work.

Training

Whilst training is clearly available to many staff – some of it is required by law – there were still significant gaps reported. Nearly a quarter of staff had to undertake training in their own time.

16% felt that they still needed training in key areas of their job, **44%** needed training in minor areas. **23%** had had to undertake work-related training in their own time (unpaid) in the last year.

Only **79%** of staff who have to administer medication said they had been fully trained for it.

40% of those who started work in the last year did not get an adequate induction.

General comments about work

When respondents were asked what their employer could do to make their working life better, there were four key areas identified:

1. Better communications;
2. More openness and honesty;
3. More reasonable workload and staffing levels; and
4. Better support from managers.

What the staff said:

“There is an excellent front line workforce who are belittled, bullied and made to feel inadequate by the senior management.” **Income maximisation assistant (housing), Scotland**

“I only see my line manager when I have done something wrong. It can be up to six weeks between each visit when she will do a supervision. This is a box ticking exercise. I once asked if I told her my work issues would it make any difference she said ‘No’.” **Sheltered housing scheme coordinator, Yorkshire & Humberside**

“Actually listen to the people on the shop floor, not just invite some people who probably were too scared to tell the CEO where it is going wrong.” **Assistant charity shop manager, North West**

“We always seem to find things out third hand at the last minute.” **Support worker (mental disabilities), South West**

“I have not had a pay rise in 8 years.” **Care home manager, Greater London**

“I have had a pay cut of £6,000 per year.” **Sheltered housing warden, Scotland**

“I was TUPE transferred and have been told I will never get a rise. This is not a good motivation to feel appreciated, especially when you are 100% committed, never had a sick day and put your all into making sure my clients live a meaningful life, full of opportunities to fulfil their dreams.” **Service manager (supported living), Yorkshire & Humberside**

“The level of pay is far too low for the responsibility I undertake and the amount of work.” **Admin assistant/tutor, Cymru / Wales**

“Stop employing volunteers to take over our jobs so they have to pay less for the workforce.” **Support assistant, Yorkshire & Humberside**

“The person I support chooses to eat at a restaurant every night and I accompany them I had to pay my own dinner even though I may not choose to eat out every night at home...this is costly and a subsidy would help.” **Support worker (physical disabilities), Scotland**

“Recognise and appreciate the good work (a verbal “well done” would be helpful)”. **Support worker, Greater London**

“Reward staff loyalty rather than treating staff as a disposable resource.” **IT systems analyst, Eastern**

“Expecting you to use your days off to help work when getting seriously underpaid.” **Assistant charity shop manager, North West**

"I am at work from 3pm to 3pm without a break except from 11pm to 7am when we are supposed to sleep. I find it ever so tiring starting another shift at 7 or earlier if the service user wakes up before, which in general they do. I can't function properly and when I do get home I go straight to bed as too tired to do anything such as eat or have a life." **Support worker (mental disabilities), Scotland**

"Working is a problem for staff as the workload is too much and with having no break for 12hrs takes its toll on the service user and staff member." **Support worker, West Midlands**

"Accept we have lives out of work, by not demanding explanations from us when we object to working extra hours, as if we can't refuse." **Personnel administrator, North West**

"I am expected to manage it all on my own - 25 staff members and 8 people we support. This service once had two managers and an assistant, they struggled to cope with the work load then, and they were being paid higher salaries." **Support manager (learning disabilities), Scotland**

"Stop being forced to carry out online inadequate training in my own time unpaid." **Support worker (mental disabilities), South West**

"I am generally quite healthy but do have the occasional cold, and have come to work with cold/flu-like symptoms as I feared triggering performance review. I work with vulnerable older adults so in reality I should be staying home when unwell to prevent passing on germs to my clients who may have lower immune systems." **Housing support worker, Cymru / Wales**

"Employ more staff, provide more training, especially around physical threats of violence and provide support when having to visit aggressive customers." **Support assistant, Yorkshire and Humberside**

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