

SHOW YOU CARE

EXECUTIVE SUMMARY



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About the Authors

Dr Eddie Donaghy, Research Fellow based at the University of Edinburgh

Eddie.donaghy@ed.ac.uk

Dr Eddie Donaghy is a social scientist and health services researcher based at the University of Edinburgh. Most of his research experience has been around how to improve the provision of care in the community for people with complex health and social care needs. He is a qualitative and mixed methods health researcher.

Dr Donaghy has worked on a number of Scottish Government funded research projects that have investigated how to take a social prescribing approach that addresses peoples' social care needs in the community to help with health problems such as living with chronic illnesses and mobility and mental health problems. He has investigated health and social care policies in Scotland and England and how they attempt to meet the needs of older people and people with complex care needs in the community. He has also worked as a Project Manager in the NHS around improving transitions of care from hospital to the community for people with complex care needs who are at risk of early unplanned hospital readmissions.

Megan Fisher, GMB Scotland Assistant Organiser, Women's Campaign Unit

Megan.Fisher@GMB.org.uk

Megan Fisher began working with GMB Scotland in 2018. Initially employed to support the Organising Team in growing the union in private care, she has since taken on the role of Assistant Organiser as part of the union's recently established Women's Campaign Unit.

The Women's Campaign Unit is dedicated to organising women workers in order to end pay injustice and inequality in Scotland. It aims to challenge employers and the Scottish Government to truly recognise the value of women's work.

Foreword from GMB Scotland Secretary Gary Smith

Since the emergence of COVID-19 we have called Scotland's social care sector "the crisis within a crisis", the scandalous treatment of these key workers and their service users over the last six months is arguably one of the most shameful episodes in our country's modern history.

This report is released against that unprecedented backdrop. "Show You Care – Voices from the frontline of Scotland's broken social care sector", produced by Dr Eddie Donaghy, social scientist and health services researcher at the University of Edinburgh, and GMB Scotland's Women's Campaign Unit, is the presentation of a significant engagement with over 1,600 of our members in Scotland's social care sector employed across our local authorities and privately operated residential care homes.

The numbers are shocking but the testimonies from the workers are searing; their voices bring emotion and personal experience to the reader of life on the frontline of our social care sector while describing many challenges that must be overcome if Scotland ever hopes to be a nation of fair work. Some of those contributions reinforce what the industry and politicians already knew about our care sector pre-COVID but others are more sobering evidence of how an already exhausted and disenfranchised workforce have been treated like an afterthought in the face of this pandemic.

Like COVID-19, the underlying diseases in our social care sector haven't gone away. Care workers today remain mired in chronic exploitation – low pay, excessive working hours, unpaid working time, precarious contracts, under-staffed and under-resourced – and the balance of power is massively weighted towards the employer's interests, not the workers or service users.

Earlier this year when discussing economic and social reform in this COVID era, Scotland's First Minister Nicola Sturgeon said, "when things come apart...there is an opportunity to put them back together differently and see a new way of doing things." The existing model of care is broken in many places but despite continued threats affecting our social care sector, the opportunity to change this is within our reach.

That's why GMB Scotland is calling for government and industry to work with us towards a £15 an hour minimum wage as part of a comprehensive national plan for care. "Fight for Fifteen" isn't a lofty aspiration, it is a realistic objective and an important statement of intent. It should motivate anyone who recognises that the status quo in our care sector is no longer acceptable and that change is both possible and necessary.

Most importantly, I would also like to take this opportunity to directly express my gratitude to our members across the social care sector, not just for everything you are doing for all of us but also for your participations and testimonies in this report and also in the media over the last six months. I am under no illusions about how difficult it is for you to make your voices heard in this industry. You have displayed immense courage in so many ways and you represent the very best of our union and society.

Your dedication to your profession and your service users is both inspiring and humbling, and it is driving our union's absolute determination to deliver proper value for the work you do and to bring long overdue change to Scotland's social care sector.

A handwritten signature in black ink, appearing to read 'Gary Smith', with a large, stylized initial 'G' and 'S'.

Gary Smith

GMB Scotland Secretary

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1.0 The crisis in Scotland’s social care sector prior to COVID-19

Before the emergence of COVID-19 and the government lock-down, it was widely recognised that there was something seriously wrong with Scotland’s social care system. Social care in Scotland faces a “*fundamental crisis*”, experts warned after a Care Inspectorate report in 2017 found more than a third of care services had unfilled staff vacancies the previous year (Care Inspectorate, 2017). This against forecasts showing not only increasing demand for adult social care services in Scotland, but also an increased demand from people with more complex care needs (Audit Scotland, 2016, 2018; Public Health Scotland, 2018).

The crisis in Scotland’s adult social care system is underpinned by a workforce that are some of the lowest paid workers in Scotland. Many earn less than £10 per hour. The vast majority, 83%, are women. Most have unpaid caring responsibilities out-with their work. This in a job that entails providing care, often complex care, to some of Scotland’s most vulnerable citizens.

Following numerous reports and statements on Scotland’s social care crisis, the emergence of COVID-19 and its consequences have shone a blinding light onto Scotland’s social care system. This report will highlight how poor terms and conditions, poverty pay and lack of investment in the service contributes to poorer quality care, a staffing crisis and, ultimately, a care sector that is not meeting current demand, with many arguing that Scotland’s social care system is not fit for purpose.

2.0 Initial approach to Care Sector in COVID-19

Following the announcement of government lockdown measures in March 2020, in order to increase NHS bed capacity, nearly 1,000 hospital patients in Scotland were discharged directly to care homes – without being tested for the virus. The announcement of a policy to test all hospital patients twice before discharge to care homes was made on 22nd April 2020.

In some cases, it took weeks for care workers to receive basic PPE. This only happened because thousands of care workers spoke out, writing directly to the First Minister.

In the week ending 19th April 2020, almost half, 46% of all COVID-19 deaths in Scotland were in care homes. On June 3rd 2020, National Records of Scotland (NRS) announced the statistic that more people had died of COVID-19 in Scotland’s care homes than in the country’s hospitals. NRS recorded 1,818 deaths linked to the virus in Scotland’s care homes since the outbreak began (National Records of Scotland,

June 2020). This was the very group of vulnerable people that government measures were supposed to protect from the virus.

Estimates as of 11th June 2020, were that only around one quarter of care home staff in Scotland had received testing for COVID-19.

Only on 25th June 2020 were social care workers finally afforded proper sick pay. GMB Scotland's surveying of its social care membership found that over 75% of workers were scared to be tested for fear of testing positive and having to be off work, in receipt of only statutory sick pay of less than £96 a week. The level of financial detriment that workers were being left in was fundamentally undermining the testing regime and exposes a lack of coherent planning.

2.1 GMB Scotland social care workers reflect on the under-preparedness for COVID-19

Social care workers reflected on being under-prepared for the consequences of COVID-19 by management/employers. They reported a lack of new guidance and protocols to protect themselves and service users and, crucially, a lack of PPE at the beginning of the pandemic. These comments from Angie, a care home worker in Glasgow, summed up the experiences of care workers interviewed for Show You Care during the lockdown:

“At the start of the COVID-19 lockdown we heard nothing from care home management on new guidance. There was no contingency plans. When we did get information it was in dribs and drabs. At the start of the outbreak a care home colleague, who has asthma, started wearing a surgical mask, she was in the vulnerable group. She was told by management to stop wearing it because it would scare the clients. Later, we got paper masks, not the proper surgical masks, paper. We were only allowed one a day and they were useless.”

Ross, a care home worker in Tayside, believed that the way care workers were treated over PPE at the beginning of lockdown, reflected the way the social care sector is treated generally- “*back of the queue as ever*”. Recent reports and statements from various social care stakeholders in Scotland would appear to concur with the concerns Ross expressed.

2.2 Conclusions on COVID-19 planning for social care

Against this backdrop, the initial months of lockdown produced numerous TV features, newspaper editorials and opinion pieces on the perilous state of social

care and the plight of social care workers in the face of the pandemic. One piece in the *Times* newspaper sums up the views expressed:

Everyone applauds the doctors, nurses, emergency staff, teachers and shelf-stackers but the care workers are too easily shunted to the side and neglected. Many work long hours as “unskilled” workers. The workload is exhausting, turnover is rapid and vacancies were already running at 20%. Care staff have often been the last to receive personal protective equipment (PPE) despite dealing with serious cases (The Times 8th April 2020).

The lack of planning around social care provision in Scotland’s response to the pandemic is emblematic of the status of social care, and especially social care workers, in Scotland.

3.0 Show You Care: The largest survey of frontline social care workers in Scotland

The pandemic has highlighted the tragic consequences of under-investment in Scotland’s social care system, namely, undervaluing and underpaying its social care workforce. And, ultimately, treating social care as the NHS’s poor relation. It was for this reason, in 2019, prior to the emergence of COVID-19 and the lockdown, that GMB Scotland launched the project Show You Care. The project aimed to examine the experiences of GMB Scotland members working in adult social care and to identify the barriers to delivering quality social care in Scotland.

The project’s findings published here are an account of the experiences of GMB Scotland members working in adult social care prior to and during the COVID-19 crisis.

GMB Scotland’s Show You Care research project is the largest and most comprehensive engagement with front-line social care workers undertaken in Scotland to date. In our questionnaire survey, we heard from over **1600** GMB Scotland adult social care workers from the Scottish Highlands and Islands, all of Scotland’s major towns and cities, through to the Scottish Borders.

3.1 Key details of survey participants

- Average years of service: 15.16 years
- Age ranges: 16–29yrs (5%); 30–49yrs (34%); 50+yrs (61%)
- Gender: Female (92.5%); Male (7%); Non-binary/prefer not to say (0.5%)
- Ethnicity: White Scottish (83%); White British (12.5%); BAME (1.5%); Other (0.5%)
- Average weekly hours worked: 31 hours per week

- Average hourly rate of pay: £10.64
- Providing unpaid care for family: 54%

4.0 Key findings

- The key finding from GMB Scotland's social care workers surveyed in Show You Care was that as things currently stand in Scotland, there are simply too many barriers in front of them to continuously deliver quality social care.
- The survey findings reveal a workforce that frequently lacks the time needed to deliver compassionate and dignified care (often to service users with very complex needs) due to chronic understaffing, high staff turnover, and unrealistic management expectations about the time needed to deliver quality social care.
- The survey findings highlight a workforce that feels undervalued by management and the care system as a whole.
- Being woefully underpaid for the skilled job they do underlined care workers feelings of being undervalued.
- The lack of training opportunities and having to do training in their own time underpinned feelings of being undervalued.

5.0 Summary of statistics from questionnaire survey and interviews

Social care workers feel undervalued given the vital caring role they perform

- The overwhelming majority, **82%** of GMB social care workers surveyed reported feeling undervalued by their management/employer all or most of the time.
- Almost half, **45%** reported they could not easily raise concerns with their manager/employer, with over three quarters of this group, **80%**, reporting they didn't feel they'd be listened too.
- A large majority of social care workers, **70%** said they felt valued all or most of the time by service users.
- Unsurprisingly, the vast majority, **77%**, had thought about leaving their current social care job at some point (more than half, **60%**, gave the reason for thinking about leaving as not feeling valued by management/employer).

The lack of time to deliver compassionate and dignified care

- More than three quarters, **81%** of home care workers and **74%** of care home workers reported frequently having to rush their jobs due to the lack of sufficient time allotted to service users.

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- Over three quarters, **84%** of home care workers and **74%** of care home workers believed a lack of time allocated to clients compromised the quality of care provided.
- Over three quarters, **78%** of home care workers and **74%** of care home workers reported that they frequently did not have enough time with clients to deliver compassionate and dignified care.
- Over three quarters, **79%** of care home staff surveyed reported understaffing in their workplace with over half, **73%** stating this impacted negatively on the quality of care delivered.
- Nearly half of social care workers, **46%** reported they worked unpaid hours to fulfil their allotted caring duties.

Time pressures in delivering care make the job very stressful

- The majority, **55%** found the social care role very stressful due to the high demands of the job, with over half **60%** citing stress as a reason for thinking of leaving their social care job.

Poor training support and personal safety issues

- The majority, **73%** of home care and care home staff reported they frequently had to do training in their own time. This for a job that entails working with some of Scotland's most complex and vulnerable citizens.

Safety concerns in the workplace

- Worryingly, **64%** of home care workers and **55%** of care home workers reported experiencing concerns over their personal safety when carrying out social care duties.

Inadequate funding for social care

- An overwhelming majority of those surveyed, **89%** believed that social care in Scotland is not properly funded.

For people who are the cornerstone of Scotland's social care system, and its strongest asset, the above statistics are of deep concern.

The findings from the semi-structured interviews replicated the above survey findings. The key difference with the social care workers we engaged with in Show You Care was that the semi-structured interviews (n=24) occurred during the COVID-19 lockdown.

6.0 The crisis in Scotland’s social care sector before COVID-19

We highlight a range of social care stakeholders who have commented on one of the biggest challenges facing Scottish society: The crisis in Scotland’s social care system.

6.1 Current approaches are unsustainable

In 2016, Audit Scotland produced a report for the Accounts Commission. Noting that social work departments provide and fund social care, the report observed that “*current approaches will not be sustainable in the long term*” (Audit Scotland, 2016; p.5).

6.2 Scottish doctors are concerned about Scotland’s social care system

Most recently, in April 2020 (during lockdown), the Scottish section of the British Medical Association (BMA), published this statement on their website about social care in Scotland “*Social care is an increasing area of concern for the BMA. We believe that significant pressures in social care are a direct result of inadequate resourcing. To look after patients well, doctors need social care to be well-funded and adequately staffed*” (BMA Scotland, 2020).

6.3 Serious recruitment and retention problems in social care

In 2018, the CEO of Scottish Care, reflecting on their own research stated, “*The survey published today is the last in a long line of research we have produced in 2018 and illustrates that we are way beyond the point of crisis in terms of recruitment and retention in Scotland’s social care sector*” (Scottish Care, 2018).

6.4 Third sector withdrawal from social care

In 2019, the Coalition of Care and Support Providers in Scotland (CCPS) following their own research stated, “*This research has come at a time of increasing concern regarding the sustainability of organisations (both voluntary and private) that have been involved in contracting public services from government in the social care sector*” (CCPS, 2019; p.5).

6.5 Urgent action needed on funding

In 2018, Age Scotland stated “*It is essential that the Scottish Government resource social care properly. The Scottish Government must urgently take action and*

ensure social care is adequately funded for every older person who needs it” (Age Scotland, 2018).

7.0 Scotland’s permanent social care crisis is in danger of becoming ‘normalised’

The above and numerous other reports and statements have almost become routine over the last decade to such an extent that, worryingly, the crisis in Scotland’s social care system has almost become ‘*normalised*’. As one academic in social care research interviewed for Show You Care stated “*we’ve been kicking the can down the road for too long when it comes to properly addressing change in Scotland’s social care sector*”. A number of stakeholders interviewed for this project believed this is concerning, as it has led to an almost ‘*unconscious acceptance*’ that Scotland’s social care crisis is just a fact. They pointed out that a ‘*ticking time bomb*’ awaits if fundamental change is not introduced to address Scotland’s growing demand for adult social care and, crucially, the terms and conditions of social care workers are not improved.

8.0 Rising demand for adult social care and for people with greater complex needs

By 2035 there will be approximately 740,000 people aged 75 years and over in Scotland – a 68% increase on 2015 (Public Health Scotland, 2018). Audit Scotland estimates an increase of 18–29% in demand for health and social care services in Scotland by 2030 (Audit Scotland, 2018). What is driving this rising demand? People living longer into older age but with more complex health conditions, notably long-term illnesses (COPD, diabetes, dementia) and more people living with increasing frailty (Barnett et al, 2012; Hanlon et al, 2018).

One care stakeholder, Scottish Care, commented on the skill set required to address the growing complex care needs in adult social care:

“This is a workforce which, in reality, provides the largest proportion of palliative and end of life care in Scotland – but whose voice is often unheard and unacknowledged. A workforce which, sadly, is all too often associated with a “shopping and mopping” service – and which is not recognised or appreciated for the complex support delivered by them day in, day out” (Scottish Care, 2017).

Experienced social care workers interviewed for Show You Care, many with 20–25 years experience of frontline working in the sector, reflected that the people they are providing care for today have far higher care needs than the people they delivered care to 10–15 years ago. As Susan, with over 20 years experience as a social care worker in Tayside, observed:

“I think the general public still see us as cleaners. But I’m going into peoples’ homes who are very frail, with mobility problems. I’m checking their safety around the house and the equipment. There’s more specialist equipment used in the home now. I see dementia patients. People with incontinence issues. Many clients are on oxygen. We do end of life care as well now. I think some of them need nursing care but we are doing it. Home care is a totally different job now than when I first started working.”

9.0 Women’s work and low pay discrimination in Scotland’s social care workforce

The overwhelming majority, 83% of Scotland’s social care workforce are women. In the Show You Care 92% of those participating in the survey were women. These women are some of the lowest paid workers in Scotland, most work with very poor terms and conditions causing high staff turnover and staff vacancies. Numerous stakeholders such as the Fair Work Convention have highlighted the lack of status and chronic undervaluing of social care is not unconnected to perceptions of care work as ‘women’s work’ (Fair Work Convention, 2019). This is discriminatory, unfair and must be addressed.

10.0 The false economy of underinvesting in Scotland’s social care system

The underinvestment in social care does not solely affect the social care sector. High numbers of (mainly) older people are delayed unnecessarily in hospital due to a lack of social care in the community. This is detrimental to the health and well-being of those delayed in hospital. It is also significantly more expensive than more appropriate community care. Prior to the lockdown, official records showed that the average number of delayed discharges in Scotland in February 2020 was the highest since current records began in 2016 (Public Health Scotland: Data and Intelligence, 2020).

11.0 Conclusions

11.1 End low pay and poor contractual arrangements

Scotland’s social care workers have shown their skills and bravery during the COVID-19 crisis. Yet these skilled workers remain undervalued and underpaid. The average hourly rate of pay of the over 1600 who participated in our questionnaire survey was £10.64 an hour.

The average hourly wage in the UK is £14.80 (Statista, 2019). The Show You Care report makes it clear that the levels of skill, training and responsibility social care workers

undertake must be properly valued and reflected in their pay. GMB believes that there needs to be a minimum care wage of £15 per hour.

Further recommendations:

- (i) Have uniformity of terms and conditions across Scotland which include, but are not limited to, protection for council staff on better conditions, permanent and full time contracts where desired, flexible working arrangements, good pension contributions and drive for workers to join the pension scheme, better staff ratios, an equality proof job evaluation scheme, permanent full sick pay across the entire sector.
- (ii) Establish an independent National Care Service which recognises trade unions and national collective bargaining. This should involve discussions on the future role of the Scottish Social Services Council (SSSC) and the Care Inspectorate; this would include options for progression if desired.
- (iii) The Scottish Government to ensure trade unions are included throughout all aspects of development and implementation of changes in the social care sector.

Social care workers in Show You Care also highlighted frequent changes to their contracts, sometimes without any notification from their employers. Low pay and workers' contractual rights must be improved if we are to solve Scottish social care's recruitment and retention problem.

11.2 Social care workers need time to deliver dignified and compassionate care

Two of the five standards the Scottish government cites as key components when delivering health and social care are dignity and compassion (Scottish Government, 2018). The social care workers surveyed in Show You Care desperately wanted more time to deliver dignified and compassionate care continuously. Service users certainly deserve this. Put simply, social care workers are looking after too many service users with not enough time allocated to their often complex care needs.

The reason? Understaffing and high staff turnover. Add to that the high levels of sickness due to the stresses involved in delivering social care – “*always up against the clock*” – as one social care worker put it, and one understands the barriers to providing quality social care. The lack of enough time with service users affects the quality of care provided. High levels of stress in social care roles (caused by having

to constantly rush to complete tasks) and a lack of time to deliver the best care possible were the two biggest reasons in the survey for social care workers thinking about leaving the social care sector.

- (iv) The Scottish Government should set a figure for improved investment in Scotland's social care sector.
- (v) Any future commissioning to be driven not by profit but in order to ensure a high quality of care, delivered by a professional and properly valued and rewarded workforce.

On 3rd June, First Minister Nicola Sturgeon said, "I am in support of the establishment of a National Care Service that is on par with our National Health Service with a focus on not for profit care. I do not want care services run like hospitals with councils cut out of the loop, but I want a clear national plan and infrastructure that builds services around the everyday needs of people in their own homes or in their own community, with clear lines of accountability and redress." (Daily Record, 2020).

11.3 Improve training for professional development and support safety of workers

Scotland's social care sector already has a skilled workforce and, as with all workforces caring for vulnerable people, they require ongoing training. However, training, development and career progression emerged as a problem for GMB Scotland members working in adult social care. These skilled workers deserve the opportunity of better training, and the opportunity for professional development. This training should occur in their employer's time, not during a social care worker's time off.

Crucially, no worker should be unsupported when feeling unsafe or threatened delivering adult social care in Scotland.

11.4 Value and reward social care workers to secure Scotland's social care future

Scotland needs and deserves a social care system based on rock solid foundations. The fulcrum of these foundations is its workforce, Scottish social care's greatest asset. A **valued** social care workforce should be rewarded in their pay and terms and conditions for the amazing job they do. This would also make a statement about how Scotland views the rights of low paid women and the importance of gender equality in the workforce and wider Scottish society.

It is an old adage, but the phrase ‘*a fair day’s wage for a fair day’s work*’ has never been more apt in the context of Scotland’s social care workforce. Especially given their responsibilities in caring for some of Scotland’s most vulnerable citizens. Notably during the lockdown.

Writing in the Sunday Herald on 26th April 2020, First Minister Nicola Sturgeon stated that Scotland “*should look seriously at social and economic reform*” in its planning for recovery from the COVID-19 crisis. She reflected that “*when things come apart... there is an opportunity to see them put back together differently and see a new way of doing things*”.

11.5 Urgent action and real change is needed now

The frontline GMB Scotland social care workers who participated in this project and the many social care stakeholders quoted in this report would agree with the First Minister’s sentiment. They would all concur that urgent investment in Scotland’s social care system, especially in improved terms and conditions for its workforce should be the place to start. As one social care stakeholder told Show You Care, “*It’s time for the Scottish Government to stop talking the talk and start walking the walk on real time change in Scotland’s social care sector*”.

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