

Voluntary Organisations Disability Group

Representation to the Department of Health and Social Care: Making vaccination a condition of deployment in the health and wider social care sector

October 2021

About VODG

VODG is the national infrastructure body representing organisations within the voluntary sector who work alongside disabled people. Our members' work is focused on enabling disabled people of all ages to live the lives they choose. VODG believes that an ambitious, trusted and vibrant voluntary sector that works together plays a unique role in achieving this aim. VODG members work with around a million disabled people, employ more than 85,000 staff and have a combined annual turnover in excess of £2.8 billion.

VODG welcomes the opportunity to submit this representation to the Department of Health and Social Care (DHSC). This submission is informed by engagement with our member organisations via a dedicated meeting on this consultation. We use this paper to draw out the views of our members – voluntary sector providers of disability care and support.

1. Introduction

The provision of essential services to disabled people in ways that promote independence, choice and control, as well as supporting their carers is a statutory obligation. The hallmark of a fair and equitable society includes fully meeting people's needs and enabling disabled people to have full choice and control over their lives, and to be included in society.

Services to enable disabled people in England to live independently are delivered in a variety of settings and care and support is provided via a diverse range of services. As a membership body representing more than 100 voluntary sector providers of disability services, the majority of which are in the social care sector, VODG welcomes any move that strengthens safety in the sector so long as it is proportionate to the risks and is considerately implemented to mitigate any negative impact on social care providers and people who draw on social care.

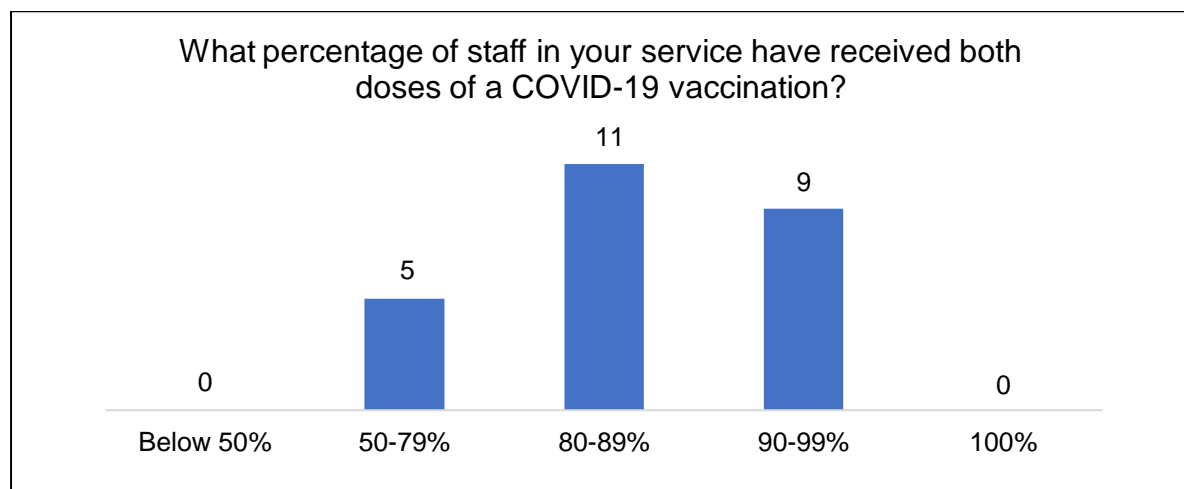
Overall, VODG members expressed support for the COVID-19 vaccine and the role it plays in keeping the people they support safe. Yet there are differing views on the

question of mandating both the COVID-19 and flu vaccine for their staff. Viewpoints on both sides are driven largely by concerns over workforce challenges and how best to ensure their organisations have sufficient staff to deliver their services. Those who oppose the proposal raised major concerns about the implications for the sustainability of their organisation and the wider sector. A key issue is timing, and preparedness across the sector, as the proposals will reduce the workforce. Skills for Care report over 100,000 vacancies in any one day in the sector.¹ The Care Quality Commission describes an ‘exhausted and depleted’ workforce.²

VODG, like the Association of Directors of Social Services, welcomes the additional £162.5m government funding to boost social care workforce recruitment and retention. However, as ADASS calculates this equates to around £100 per worker, and the funding is insufficient to tackle the current workforce pressures and risks pulling support away from disabled people.³

During a VODG member meeting held to specifically gather members’ views on mandating vaccinations, we polled members on the levels of vaccination within their services as of 5 October 2021. The results (see Box 1) show that 64% still had more than 10% of their workforce who would need to be vaccinated, redeployed or replaced.

Box 1: results of VODG member poll on vaccination levels within services



As an infrastructure body putting forward the collective views of multiple organisations, VODG aims to highlight and represent the full breadth of views put

¹ Skills for Care (2021) *The State of the Adult Social Care Sector and Workforce*.
www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2021.pdf

² CQC (2021) *The state of health care and adult social care in England 2020/21*
www.cqc.org.uk/sites/default/files/20211021_stateofcare2021_print.pdf

³ VODG (2021) *VODG responds to £162.5m funding for workforce recruitment and retention*.
www.vodg.org.uk/news/vodg-responds-to-162-5m-of-funding-for-workforce-retention-and-recruitment/

forward in response to the proposals. While we do not present a position for or against the proposal, we do present three essential actions that must be considered to minimise the negative impact for care providers and those they support if the proposal should go ahead:

1. Urgently address the immediate workforce challenges facing the care sector. Central to this is making funds available for care workers to be paid a fair wage, which recognises the demands of their role and the value of their contribution to society. Analysis by VODG member Community Integrated Care, in partnership with Korn Ferry, found that social care workers are undervalued by as much as 39% – nearly £7,000 per year – in comparison to their peers in equivalent positions in other publicly funded sectors.⁴
2. Ensure sufficient funds are available to meet the additional costs providers will face in implementing the regulations, including, but not limited to, costs incurred in recording and monitoring staff vaccinations, losing and replacing staff, and responding to legal challenges from employees who refuse to be vaccinated.
3. Produce clear and thorough guidance, co-produced with care providers so that there is no confusion or ambiguity around the process and timings.

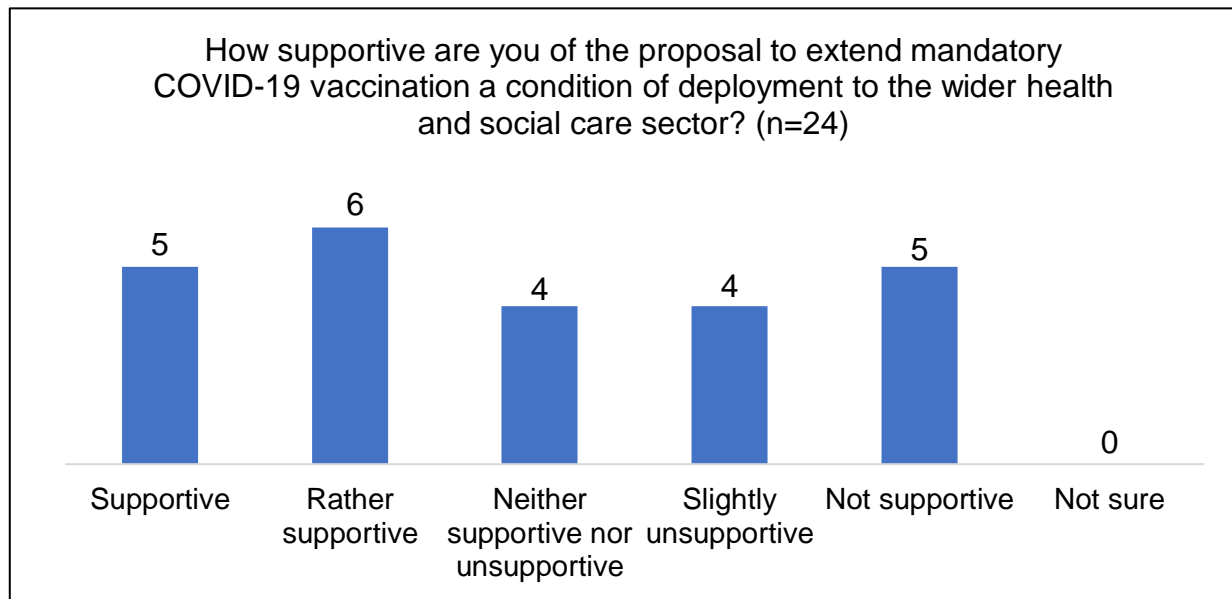
2. Views on the proposal

VODG members proactively expressed their support for the COVID-19 vaccine and the importance of staff getting vaccinated to protect the people that they support. However, there was also wide recognition of the problems that would be created by extending mandatory vaccinations to the wider sector. Much of the discussion centred around the likely impact that mandating COVID-19 and flu vaccinations would have on existing workforce pressures.

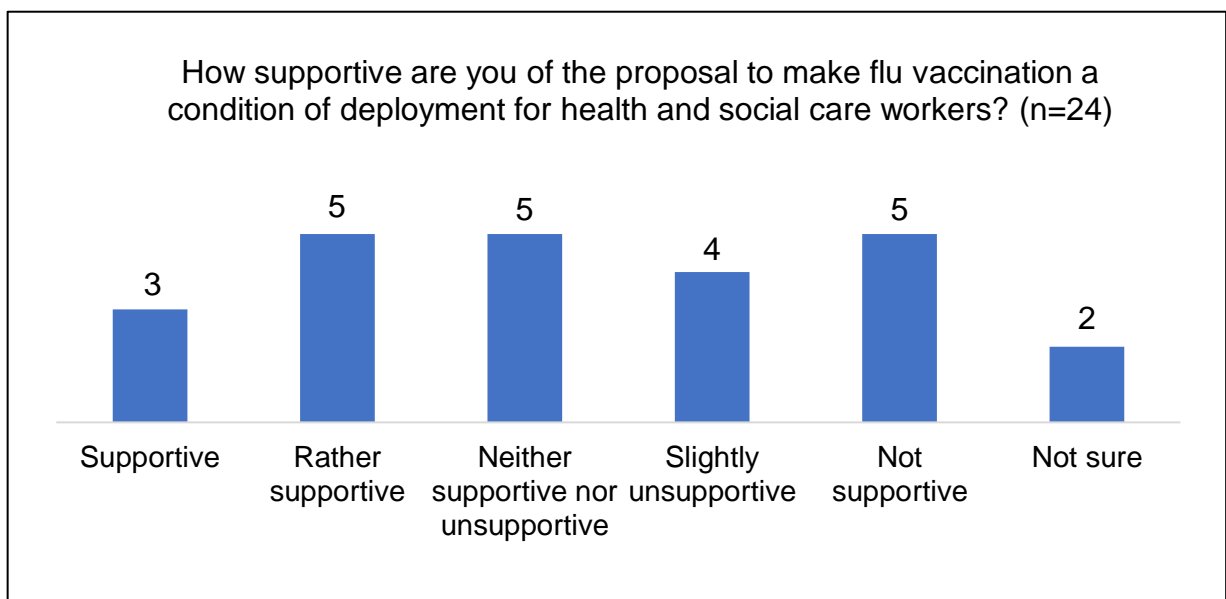
During the VODG member meeting held to discuss this consultation, we polled members on their support for this proposal. The results, as of 5 October 2021, and as shown in Boxes 2 and 3 below, reveal a wide range of views held, with a fairly split consensus of support. While only representing a small sample of views, the VODG member poll reflects concerns around the divisiveness of the proposal.

⁴ Community Integrated Care (2021) *Unfair to Care*. www.unfairtocare.co.uk/

Box 2: VODG member support for the proposal regarding COVID-19 vaccinations



Box 3: VODG member support for the proposal regarding flu vaccinations



Support for the proposals

Support for the proposal was expressed as a way to address issues around self-isolation requirements due to unvaccinated staff members being exposed to COVID-19. Staff absences relating to self-isolation requirements have added another layer to workforce supply problems for social care providers and are a key factor in the 97% increase in percentage of days lost to sickness since the emergence of the

pandemic.⁵ However, members also recognise that being fully vaccinated does not completely remove the risk of infection, and therefore staff who support clinically extremely vulnerable people will still need to self-isolate to protect the safety of those they support.

Additionally, in previous engagement with members about wider workforce challenges, we heard about care staff moving to roles within the NHS to avoid the mandatory vaccination regulations within care homes. Therefore, there is support for a more consistent approach to mandatory vaccination regulations across both health and social care.

During our discussions regarding the previous consultation on mandatory COVID-19 vaccinations in care homes, members support for the proposal was based on difficulty in 'winning the hearts and minds' of staff members. VODG members saw the proposals as a way to enforce vaccination to ensure they could keep those they support as safe as possible and meet their requests, as well as those of their families, to be cared for by vaccinated staff.

Similarly, members' support for mandatory flu vaccinations is primarily based on difficulty achieving sufficient vaccination levels among their workforce using communication tactics. Members were also hopeful that mandating flu vaccinations could reduce sickness absence due to staff contracting the flu.

Lack of support for the proposals

During the discussion, the views of those members who are against the proposal came through stronger. The overriding concern is that extending mandatory vaccinations to the wider social care sector would add yet another layer to continually increasing staffing challenges which, VODG members reported, is heading rapidly towards a crisis, if not already there for some organisations. With a substantial number of their staff determined not to be vaccinated, members are concerned about losing good people, at a time when they are struggling to recruit people with the right skills and values.

Some members' opposition to the proposal is driven by difficulties in implementing existing mandatory vaccination regulations within their care homes. Fears around increasing recruitment challenges have already been realised by some care home providers. They have also faced financial and resource costs in managing redeployment (which has not always been taken up), and in responding to grievances from employees who are refusing to be vaccinated.

Furthermore, a VODG member has analysed data to understand the impact that the existing mandatory vaccination legislation has had on vaccine take up in their care homes. This revealed only a very minor increase in uptake and this has led to

⁵ Skills for Care (2021) *Days lost due to sickness – monthly tracking*. www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/publications/Topics/COVID-19/days-lost-due-to-sickness.aspx [accessed on 05/10/2021]

concern about implementing the regulations in their supported living services where they have even fewer staff who are vaccinated, which means they risk losing up to 10% of their workforce.

Members who did not support mandating flu vaccinations highlighted lower levels of flu vaccination uptake compared to COVID-19 vaccinations, in part due to a greater hesitancy amongst care staff. There is expected to be much more push back and consequently an even greater impact on workforce supply.

The care sector has faced historic difficulties with the availability of the flu vaccine, leading to concerns around ensuring their staff can receive the vaccine in good time. Most care providers have not had access to tools to encourage uptake of the flu vaccination that are available for NHS staff, including incentives, and care staff have often faced difficulties in accessing the vaccine. This has led VODG members to feel that this addition to the proposals is “*coming from nowhere*”.

There are also concerns about adding yet another pressure on providers to record and respond to new requirements, at a time when there are already significant cost pressures on all care providers.

3. Implementation of the proposal

Concerns were raised about the timing of the proposals. Firstly, the regulations would be coming in at a time when providers are under immense financial strain and facing increasing resourcing and workforce pressures. This could put many providers at serious risk, in a market that is already “*teetering on the brink of becoming unsustainable*”⁶. In the six months to April 2021, 53% of local authorities reported that providers in their area had closed, ceased trading or handed back local authority contracts. These decisions have impacted upon 2,487 people.⁷ Moreover, local authorities are reporting that these have accelerated over the past few months due to workforce shortages, with one county council receiving 50 contract hand backs of care in the last month.⁸

Secondly, the consultation is taking place before the existing mandatory vaccination regulations have come into force. This means that there is no time to assess the full impact before making the decision to extend the regulations wider. Any negative consequences for the sector will therefore be far harder to manage.

⁶ Association of Directors of Adult Social Services (ADASS) (2021) *ADASS submission to the budget and comprehensive spending review September 2021*. www.adass.org.uk/media/8873/adass-sr-2021-final-submission-30_9_21_.pdf

⁷ Association of Directors of Adult Social Services (ADASS) (2021) *Activity Survey 2021*. www.adass.org.uk/media/8714/adass-activity-survey-2021-cpdf.pdf

⁸ Association of Directors of Adult Social Services (ADASS) (2021) *ADASS submission to the budget and comprehensive spending review September 2021*. www.adass.org.uk/media/8873/adass-sr-2021-final-submission-30_9_21_.pdf

Additionally, the providers of care homes and other care settings will be grappling with the implementation of the new regulations in their care homes while also preparing for the possibility of extending vaccination requirements to their other care settings. In particular, while in the process of redeploying staff from care homes to other settings unaffected by the existing regulations, they will have to begin considering whether they can redeploy those staff again or whether they must now terminate their employment.

It is also important for government to be clear on the role of the proposals on the further roll out of 'booster' vaccinations which at present is confused. Similarly, we are concerned that the Care Quality Commission is not preparing additional guidance for its inspectors around the implementation of the new mandatory COVID-19 vaccination regulations, and that there is a risk that inspectors will interpret 'fair and proportionate' differently. We believe that DHSC should encourage CQC to be clearer in its approach to regulating services in relation to mandatory vaccinations, including the provision of the written and published resources.

An important focus for VODG and our members is on the impact of policy on equity and diversity. It was felt that certain groups may be disproportionately impacted, such as young women who were fearful of the impact on fertility, eastern European staff, and staff from Black and minority ethnic communities. A recent (September 2021) survey of VODG member CEOs found that 67% of members thought that mandatory vaccination would have a disproportionate impact on groups of people with specific protected characteristics.⁹ However, members who have a national reach observed that there were no specific pockets where vaccine take-up was particularly low - vaccine hesitancy was widespread across the areas in which they operated.

It was also noted that DHSC's Equality Impact Assessment has not explored the impact on ethical vegans who oppose the vaccine due to animal testing, yet members have received grievances from staff who are ethical vegans and therefore object to enforcement of any vaccination. There is a need to understand how equality impact considerations will be addressed, particularly regarding who will be exempt and how this will be verified and recorded.

Impact on the social care workforce and continuity of care

Delivered by over 1.5 million people¹⁰, social care services are a lifeline for many disabled people. The COVID-19 pandemic has led to wider public recognition of the social care workforce, shining a light on the valuable work that individuals and

⁹ Voluntary Organisations Disability Group (2021) *VODG research reveals extent of workforce concerns among disability charity leaders*. www.vodg.org.uk/news/vodg-research-reveals-extent-of-workforce-concerns-among-disability-charity-leaders/

¹⁰ Skills for Care (2021) *The state of the adult social care sector and workforce in England*. www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2021.pdf

organisations carry out across the country to support people in vulnerable circumstances each day.

However, the sector is experiencing long-standing workforce challenges. Pre-pandemic the sector vacancy rate was 7.3%, representing approximately 112,000 vacancies at any one time and far higher than the rate of the wider UK economy - 2.7%.¹¹ Moreover, 30.4% of staff left their roles in the 2019/20 financial year, and 149,000 people left the sector entirely.¹² These challenges have only been intensified by recent external factors and policy developments. A move to extend mandatory vaccination across the sector would likely result in further recruitment challenges.

VODG's recent survey of member CEOs revealed a vacancy rate of 10% across our membership. Workforce challenges were a key priority for 91% of members who responded to the survey, with 62% citing it as their top priority. More than two thirds of VODG members reported that recruitment of staff has become much more difficult since the emergence of the pandemic. This, for many, is leading to concerns about sustaining high quality care for the disabled people they support.¹³

VODG members reported, both in the workforce survey and in the dedicated meeting to discuss these consultation proposals, that the existing mandatory vaccination legislation for care homes is exacerbating workforce recruitment and retention issues. The survey showed that 89% felt the legislation would have an impact on retention and 69% on recruitment.¹⁴ Furthermore, members reported that some staff have left for jobs in other sectors and potential new recruits have rejected job offers because they are aware that this proposal is being consulted on. This proposal will also have an impact on those providers who benefit from the time and help provided by volunteers. The impact on volunteering across both health and social care could be immense and we encourage DHSC to ensure its proposals do not weak our strong volunteering base.

There are concerns that extending the regulations to other care settings could have a larger impact on workforce supply as rates of COVID-19 vaccinations amongst staff are lower in settings outside of care homes. VODG's recent snap survey found that, while the median vaccination rate in care home settings is 87%, in supported living settings this drops to 79%. This means that, if staff are not persuaded to get

¹¹ Skills for Care (2020) *The state of the adult social care workforce in England, 2020*. www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-state-of-the-adult-social-care-sector-and-workforce-2020.pdf

¹² Ibid.

¹³ Voluntary Organisations Disability Group (2021) *VODG research reveals extent of workforce concerns among disability charity leaders*. www.vodg.org.uk/news/vodg-research-reveals-extent-of-workforce-concerns-among-disability-charity-leaders/

¹⁴ Ibid.

vaccinated and cannot be redeployed, then some members may have to replace up to 40% of their workforce in supported living services.

In order to continue delivering the essential services they provide for disabled people, VODG members told us are having to increasingly draw on agency staff to meet safe staffing levels, some for the first time. This is not a sustainable solution as agency staff typically cost 30% more¹⁵. Moreover, due to increased demand for agency staff across the whole sector, these costs are currently rising at a concerning rate, as one member put it, to “eye-watering” levels. We have even heard reports of agencies headhunting staff for significant increases in pay which is further depleting the sector’s workforce.

As well as driving up prices, members told us that increasing demand for agency staff has led to widespread availability issues. They reported that in some localities there are no agencies with any available staff, yet agencies are a last resort and there are no further means of maintaining adequate staffing levels. The impact on people drawing on social care is undeniable – without staff they simply cannot receive the care they need.

This impact will be felt on top of already growing backlogs of care. Nearly 300,000 people waiting for social care assessments, care and support or reviews, a figure which increased by just over a quarter in the three months prior to August 2021. Moreover, 11,000 people had been waiting more than six months for a care assessment, 4,000 more than in the previous three months.¹⁶

Unlike other industries, such as hospitality and retail, providers of state commissioned services cannot respond to workforce pressures by increasing fees for their services in order to increase pay for their staff. VODG member, Autism at Kingwood, has revealed the breakdown of costs that have to be covered by the local authority payments they receive, which range between £16.39 and £18.40 per hour of support. The breakdown shows that the cost of providing support, including paying their current rate of pay for support workers of £8.90 per hour, comes to a total of £18.93. This means that they run at a loss of between 53p and £2.54 per hour of support provided.¹⁷ The breakdown reveals how care providers, particularly those in the voluntary sector, are in no position to increase their rates of pay for care workers, this can only come from an increase in local authority rates.

Moreover, research using Korn-Ferry’s world-leading methodology for evaluating job roles has already shown that the skills and qualities required by care workers, together with the demands and expectations placed on them, means they would need a 39% pay increase to be on equal terms with their other publicly funded

¹⁵ Ibid.

¹⁶ Association of Directors of Adult Social Services (ADASS) (2021) *Rapid Survey Findings 2021*. www.adass.org.uk/media/8863/final-rapid-survey-report-070921-publication.pdf

¹⁷ Autism at Kingwood (2021) *Better pay for social care*. www.kingwood.org.uk/about-kingwood/betterpay4socialcare/

counterparts. The research found that the NHS pays staff at equivalent levels on average around £7.5k more per annum than a care worker at the equivalent level, plus other benefits and entitlements.¹⁸ Meanwhile, care workers are paid on average £8.50 per hour, which is less than a shop assistant or a cleaner.¹⁹

As a member remarked during the discussion on the proposals, with full agreement from others: *“Why would you want to go into a sector that is so badly paid with so many expectations?”*

Minimising the negative impact

During the meeting to discuss the proposals, VODG members raised important considerations which would be necessary to minimise the negative impact of implementing the proposed regulations. These related to three main themes: government intervention to address workforce challenges, funding to meet costs of implementing the regulations, and clear and comprehensive guidance for providers.

Firstly, and most importantly, the government needs to act quickly to protect the further decline of workforce supply within the care sector. The continued increase in expectations on care staff, without the recognition they deserve, will drive staff away and prevent others from viewing social care as an attractive sector to work in.

Considering the potentially catastrophic impact of increasing workforce challenges, alongside increasing pressures over the winter period, the government should consider holding off from implementing any new mandatory vaccination regulations until winter pressures have eased.

The government must also provide long term funding to improve pay and working conditions for social care staff, in order to attract high quality candidates, with the right skills and values. We have continually argued, alongside members and other stakeholders in the sector, that social care must be commissioned, as a minimum, at the Real Living Wage.

Secondly, additional funds must be made available to cover the increased financial costs providers will face in implementing mandatory vaccination. VODG members were concerned about the cost of recording and monitoring both COVID-19 and flu vaccinations for their staff. They would also face administration and legal costs due to redundancy and employee grievances from staff who refuse to be vaccinated, which members are already experiencing with staff in their care home settings. The vast majority of care providers, particularly in the voluntary sector, are in no position to foot the bill for these costs.

¹⁸ Community Integrated Care (2021) *Unfair to Care: Understanding the social care pay gap and how to close it*. www.unfairtocare.co.uk/wp-content/uploads/2021/07/Unfair-To-Care-Summary-Report-Single-Pages.pdf

¹⁹ Skills for Care (2020) *Pay in the adult social care sector*. www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence/documents/Pay-in-the-adult-social-care-sector.pdf

Moreover, there must be funding for providers to meet the costs of recruiting new staff. These costs are unfair and unaffordable at a time when vacancy and turnover rates are already high and recruitment campaigns are increasingly unsuccessful.

Lastly, it is essential that the implementation of these proposals is aligned to clear and thorough guidance, as well as carefully considered timelines which are sensitive to the immense pressures care providers are already experiencing. The guidance needs to be clear on the scope of the legislation and how it will be regulated in the full range of ways in which CQC-regulated social care is delivered.

VODG are grateful to have supported the co-produced guidance for vaccination of people working or deployed in care homes. If the proposals are brought in, it is imperative to co-produce guidance again with care providers and other key stakeholders to ensure it meets the needs of those who will be using it. VODG members expressed confusion regarding the existing guidance, particularly around medical exemptions, specifically who is exempt and how can this be verified and recorded. This ambiguity must be addressed for both the existing guidance and any future guidance on extending the regulations to the wider sector.

Members would also like to see guidance on how to respond to challenges from employees, including formal grievance letters. Such letters have been received by many VODG members and are adding a huge stress and strain at a time when they are already stretched to their limits.

Addressing these three considerations in the implementation of the proposals, should they go ahead, is essential to minimise the impact on care providers and, consequently, on the people they support by protecting the sustainability of the sector.

4. Conclusion

VODG recognises there are strong considerations both for and against the proposal to extend mandatory vaccinations to the wider sector. However, we are also mindful of the very difficult operating conditions within the care sector, which are only set to increase over the winter period. Challenges with workforce supply and the retention of staff is exacerbated by fierce competition for staff across low pay sectors. If the government chooses to proceed with the proposals, we call for additional support to enable care providers, and those they support, to cope with the negative impact of the regulations on their workforce capacity and financial stability. Moreover, as more and more issues related to the implementation of the mandatory vaccination regulations in care home workers, as now regulated for, come to light, we would encourage the government to delay the implementation of the first regulations, as well as any potential regulations arising from this consultation, to take place once the immediate winter pressures have eased. In the meantime, the sector's workforce should continue to be encouraged to take up the vaccine through effective communication and engagement approaches.

VODG is closely monitoring this policy development and stands by to work with officials to develop an approach that protects those in some of the most vulnerable circumstances to COVID-19 whilst ensuring continuity of care that supports people to live the lives they choose.

Ends

For more information or to arrange a further a discussion with VODG or our members, please contact research.policy@vodg.org.uk