

Care Workers versus Covid

a case study by Unison in North West England

‘The truth of the modern economy is that you only get what you organise for’

Summary of an article in Dan Smith
Tribune Autumn 2020

During 2020 workers have been at the forefront in the struggle against Covid.

Despite inadequate PPE, broken promises around testing and an absence of occupational sick pay, they have put themselves at risk every day for those who need it. According to the Office of National Statistics, care workers are twice as likely to die from Covid as NHS staff - and rates of infection are higher in workplaces where workers do not receive occupational sick pay - workers feeling they cannot afford to live off statutory sick pay of £95.85 a week.

According to Skills for Care, over 1.5 million people are employed within adult social care in the UK - 82% of them women, and over 200,000 based in the North West.

Why is it difficult to organise?

- Workers are divided across different workplaces, different providers and different local authorities.
- Union membership is about 20% more in residential care and supported living where there are common workplaces, but in domiciliary care there are fewer opportunities for workers to meet and unionise.
- The precarious nature of the work makes it harder to organise - 24% of the workforce are on zero hour contracts (41% in domiciliary care) .
- The fragmented model of social care commissioning - care is funded by individuals, public bodies, or direct payments from personal budget holders - so it's chaotic and removed from democratic oversight and accountability - which means it is difficult to identify and influence decision makers.
- Traditional trade union democracy has excluded the female workforce, many of whom have additional domestic caring duties.
- The lack of job security means workers are fearful of getting involved in union activity,



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Care workers
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What happened with previous campaigns?

Organising needs large scale and long term resources that mirror the financial might of providers. Unison's previous organising within social care targeted unscrupulous private and voluntary sector providers - those cutting pay and conditions to maximise private profits.

This did result in victories - recognition agreements, sign-ups to the Ethical Care Charter and the Real Living Wage but were often temporary or impossible to monitor under the commissioning model of outsourced social care - as care providers gave up their contracts with the local authority.

Unison launched political campaigns, passed motions, and authorities provided additional funding to providers so they could pay the Living Wage - but many providers pocketed the money and refused to pass it on to frontline staff. Multinational companies were resistant to pressure as they are not so dependent on contracts from individual local authorities. Austerity also meant councils did not have the capacity sanctions to flaunting of commissioning requirements.

So then what?

Unison realised that on a regional level, they could not achieve long term wins for care workers by targeting multinational providers organised on a global scale - and needed to target decision makers they might have a chance of influencing - i.e. local authorities that commission social care - by exposing bad practice in the private and voluntary sector and strengthening commissioning, contract monitoring and developing in house alternatives.



**So they launched a Care Workers
versus Covid 19 campaign.**

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What happened with previous campaigns?

They did a major worker survey to identify key issues and concerns, to generate organizing leads, gather workers testimonies and information and data to back up their political and media strategy.

They followed up online survey completion with a one to one phone call within days. They gathered stories of workers being told by management to make masks out of paper or being forced to attend their jobs despite being advised to shield because they could not live on Statutory sick pay.

They also got results analysed by the Wellcome Trust - who were allies, to call on the government to provide normal income for workers absent due to Covid 19. Proper sick pay isn't just the moral thing to do, it's necessary to guarantee the health of workers and service users.

This became their clear campaign demand - that could unite workers and members of the public.

The campaign was aimed at the 23 local authorities in the North West that commission social care (the targets) - including asking for guaranteeing testing, PPE, protection from dismissal, support with childcare and councils to provide additional funds to protect normal pay for workers off due to Covid 19.

Because councils had outsourced social care, they had also outsourced their ability to directly determine the terms and conditions of the social care workforce.

They utilised traditional bargaining activities (tactics) - lobbying through the branches, writing to council leaders and senior officers. They also phone banked care workers - using the anger - hope - action conversation framework - identifying issues that mattered to workers and discussing how collective action could build power and improve things at work. They got their supporters to sign and share petitions, meet politicians and provide personal testimony, organised meetings to speak to the media, made social media videos and lobbied local councillors.

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Tactics that were most effective were care workers writing directly to their councillors - rejecting a 38 Degrees style bulk email, which politicians become immune to, and concentrated on personal experience from the frontline. This helped secure cross-party support to pass motions at council meetings. They created media campaigns sharing workers stories and first-hand experience of trying to survive on SSP. The government then announced the Infection Control Fund (Political change), primarily aimed at residential care, but 25% could be used according to 'need', so the campaign pushed for that to cover domiciliary and supported living care.

Using worker power and voice, they were able to reach an agreement that full normal wages should be maintained for care workers across all care settings. Result - 17 of 23 councils signed up to the Care workers versus Covid 19 campaign.

To continue with this gain, it has to be shown how conditions of employment are intrinsically linked to quality of care and that the profit motive needs to be removed from the sector. This needs a board based coalition of support - workers, service users, carers' groups, family organisations and politicians.

Councils want examples of social care being proactively bought back in house (not as a result of company collapses) so Unison worked with Liverpool City Council to look at insourcing social care - resulting in a report ' Who Cares? Reinventing Adult Social Care' showing that even within current budgets, the current homecare contract could easily be run in house - with no 25% admin costs and director level pay.

**I'm supporting
care workers to
stop the spread.**

 Protect health

 Protect employment

 Protect pay

 Protect our families

www.twitter.com/CareVsCovid19







Next steps

They are now developing a Stand up for Social Care Councillors network to collectively improve social care standards and develop alternative models - putting service users and care workers before private profit.

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