



Influencing Policy for Women to Thrive
Affiliated to the International Council of Women

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NCWNZ submission to the Inquiry into Equal Employment Opportunities in the Aged Care Sector in New Zealand

The National Council of Women of New Zealand (**NCWNZ**) is an umbrella organisation representing 51 nationally organised societies and national members. It has 23 branches throughout the country attended by representatives of those societies and some 150 other societies as well as individual members. NCWNZ's function is to represent and promote the interests of New Zealand women through research, discussion and action.

This submission has been prepared by the NCWNZ Employment Standing Committee after consultation with the membership of NCWNZ.

Since 1897 NCWNZ has sought to improve care for older people: from a multi-party consensus on long-term care for the elderly; reviews of legislation governing rest homes and residential care services and then in 2000, after a nation-wide survey of 700 members, a National Strategy on Ageing paying attention to planning and provision of health care services both at home and in residential care.

In 2005, in our most recent policy document - a submission to the Ministry of Health on Ageing New Zealand and the services and workforce implications through to 2021- NCWNZ stated:

Before changes are made to training there needs to be consultation with all affected parties i.e. Royal Colleges and other professional bodies, universities, polytechnics, any other providers of courses in elder care.

Specialist training should be available in geriatric and psycho-geriatric nursing care so there is an equitable level of care available in all situations.

Retraining of workers should be on going and readily accessible. Training should take account of cultural diversity.

NCWNZ has for some time been concerned about the level of reimbursement available to care workers who travel to rural clients using their own vehicle.

At its 2004 conference NCWNZ passed this policy:

That NCWNZ request the government to include the costs of travel in the remuneration for government-contracted providers of home-based care.

During October the Employment Standing Committee canvassed NCWNZ members for the EEO Inquiry into Employment in Aged Care. Our questionnaire is based on the documents used by the EEO.

From Analysis to Action

Our members say we need to address this issue urgently as our rapidly ageing population will require greater access to appropriate aged-care services. Below are our suggestions:

- A meaningful career pathway with pay increments linked to training, experience and special skills.
- Centralised aged care funding with consistency through all providers.
- Positive planning for being old – including looking at house designs.
- Public education of options: amazing help is available; it's about how to access it.
- More discussion about ageing to bring it 'out in the open', perhaps with celebrity ambassadors for aging such as older sports people
- A national care giver day to raise consciousness in the community

Pay rates:

Our members report the base rate for home carers starts at \$13.00 with increments up to \$16 depending on qualifications.

They report retirement home workers also receive \$13.00 - \$16.00 although one branch reported workers in a local retirement village are higher paid, because the village is a commercial proposition and needs to attract staff.

These rates they consider to be too low for the skills & quality of care required of a care worker. An absolute minimum of \$15 an hour was suggested.

These preferred skills include:

- They must be caring people
- Have good verbal skills in both communication & language
- Be clear speakers to cope with hearing loss
- Be able to lift and do heavy transfers skilfully
- Be perceptive of the client's state of health
- Have the ability & transport available to travel between clients.

It is felt pay rates need to reflect cost of living increases and compensate for work which is physically demanding and can be emotionally draining as well. One care worker observed:

"I worked for a couple privately while they went through official channels to access help and learned later that once the work was formalised the client paid \$27.50 an hour, but the carer received only \$13.50. Even for a complex high needs case the rate was only \$14.50 per hour".

Transport costs:

We believe the travel allowance should be enough to cover real and actual costs, especially when one is required to travel outside the caregiver's own suburban living area and taking into account the huge distances between clients required of caregivers in rural areas.

We understand that they are paid the cost of travel to their first client of the day, but this may not cover travel during the day.

Casualisation:

Our members' comments on this topic ranged from concerns about the punitive effects of secondary tax rates as a result of having more than one employer, through to the effect of broken shifts on a worker's day and pay and also the resultant lack of consistency for clients who experience a confusing chain of different people coming through their homes.

A sample of comments:-

"It would be better if working for one or two or even three employers was considered as one income as to set yourself up as self employed and contracting out is too complex".

"We express concern for the effect of classifying a second job as Secondary Employment, which means that a care worker working for more than one employer for 30 hours a week because she cannot get a full time job, pays a higher tax than someone who works at one job for 30 hours per week".

"Low hourly rates and uncertain hours mean that Care Workers do not necessarily stay for long in a particular place of work. This is not good for clients, who need consistency of care by someone whom they have got to know and trust".

"Care workers in homes may work 25-33 hours per week. Some are satisfied with that level of income and others need more so have to work weekends as well".

"In our day-care centre the hours are variable and often necessitate broken shifts which result in my whole day being taken up by the pressure of work".

Assessments

Home care enables people to stay in their homes for longer so it is a very valuable community service. It is also a cheaper option than rest home care - a factor which needs to be taken into consideration when the health dollar is stretched and the population of elderly is increasing.

For these reasons our members feel the needs assessment pathway is clear:

Domiciliary visits must be based on assessed need: first a personal visit to have the assessment carried out, then actions/services put in place until the next needs assessment. This would determine where a change of services may be indicated.

Cuts to this service or telephone-only assessment service are not satisfactory.

Members reported on the ongoing reduction in hours allocated, commenting that increasingly insufficient time is allowed to complete the necessary tasks, with no time being given for having some social time with clients for whom the care worker is a welcome link with the outside world. This need for a chat is mentioned throughout our responses.

The work is getting more and more complex as people are required/desire to stay at home longer.

One interviewee commented that hours seem to be reduced to the long-term clients, simply by a phone call and with no needs assessment, and extra hours given to new clients who are perceived as being more needy.

Registration of residential aged care homes and facilities should be compulsory with regular oversight of their services including staff.

Supervision

Our members commented that at times communication between the caregiver & their supervisor is unreliable with a resulting lack of co-ordination in services. Concern was expressed over lack of continuity/co-ordination when several care workers, perhaps from different agencies, are dealing with a single client, each care worker providing a separate service/carrying out separate tasks.

Working conditions that concern us include the lack of peer support and inadequate provision for leave when children are ill.

Others mentioned include: inadequate staffing levels, more resources for aids such as hoists, planned breaks for lunch, etc. and more recognition from employers.

We suggest a monitoring system with each care provider recording notes on her visit for the next care worker to read. Any NZQA training programme to include a curriculum component relating to observation skills and record-keeping - (to be carried out at each visit to a client by each separate caregiver).

One lady had a care worker come once a week and as a solo woman considered it a very valuable service, her family living in different parts of the world. She said the work was well done, and occasionally there was time for five-minute chat.

As someone requiring long-term care at home she valued the carer "*helping me do what I used to be able to do, rotating the big jobs but keeping a handle on the everyday tasks that are part of keeping a home nice*".

Training/Career Path

Our members emphasize that the elder care work force needs to be well-trained professionals with a structured career path (we suggest looking at the career path of nurses). A range of qualifications to reflect the degree of skill and competency of workers is required. It is also important that workers who have completed training courses are given higher pay rates and responsibilities.

Recognition needs to be given to the fact that it's a job which demands training, professional skills but also those personal qualities that enable a worker to be caring, understanding and able to cope with unhappy, unwell or difficult clients.

Funding should come from a mix of the Ministries of Health and Social Development, DHBs, ACC and employers.

Training needs to be within work time, and fit in with the family lives of care workers, most of whom are women, so child care help might be needed.

Recognition/Value

Most of our members say one of the simplest ways to show workers their value is to pay them well for what they do.

Also the question was asked: What value does the community place on a service which keeps a relatively well person in their own home and out of expensive and oversubscribed residential care?

And answered thus: It is impossible to value how important it is to enable a person to stay in their own home for as long as possible. The dignity and self worth that comes with semi independence, the possibilities of still being able to contribute to their local community – these activities are impossible to accomplish in an institution.

Recruitment/Retention

To make care giving more attractive to younger people they need stable hours, with better wages and training to be available.

Recruitment would be easier if rates of pay were increased, to at least \$15 per hour. Reasonable travel allowances are also a factor for care workers who travel to clients' homes, particularly in rural areas.

Some of our members consider working as a carer is suitable as a part-time job in semi-retirement but no way is it an attractive option as a career for a younger person and particularly anyone that is the main breadwinner.

It is desirable to change attitudes to caring work – see it as challenging, worthwhile, be able to train, study, get a qualification, get on a ladder to better pay and so on.

Positive aspects of being a care worker include the feel-good factor, it's sociable, you are not stuck in an office, every day is different with a different set of challenges, you get the chance to learn on the job and you can work your hours around your family.

Migrant Workers

As many workers in this field are immigrants with English as a second language, consideration needs to be given to language classes and an introduction to NZ culture.

Some members also expressed concern that migrant workers could be exploited.

One Worker's view

Jane works between 20 to 30 hours a week doing both personal care and home care, managing her hours around the school day.

She feels the minimum wage does not reflect what folk such as herself bring to the job eg life skills.

Usually the time allocated per client is enough for the work designated and she can also sit down for a chat: "*I really enjoy the interaction with people who have wonderful life stories*".

Jane says the job is isolating as far as peer interaction goes. She has only occasional interaction with her employer. She would like to feel part of a team, share experiences and have support.

She says good pay always makes a person feel valued, and that their work is important.

She walks to one of her clients, others are 20-25 minutes away and even longer, it varies from city to country.

Often the travel time is taken from the client's allocation; there is not a separate time allowance.

The travel allowance starts after she has travelled 20km from her home.

Jane says her job has a very uncertain work path and can vary substantially from week to week, almost day to day.

"Recently I was working 35 hours a week then within a few weeks, 4 people passed away, giving a total loss of around 15 hours per week which still have not been replaced. New people coming on the scene are given work ahead of someone like me. There needs to be guaranteed hours per employee so that gaps that appear are filled prior to new workers being handed jobs.

There is no security at all – a phone call that some one has gone into a rest home or passed away can reduce hours effective immediately and with no idea when income will build up again.

There is a casual attitude to the workers as people. It comes down to a roster with names to be shifted around – as long as the roster is correct – who the person is, and how the roster is affecting the workers day to day life is not taken into consideration".

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