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Interviewer: A little bit about your current job role and whether you work in the community or in a residential setting? Tell me a little bit about the care work that you do?

Respondent: Okay, so I have two jobs. I have one that I work for a gentleman, he’s got his own home and I go in and I give him a shower, I feed him his breakfast, make him lunch and then we go back again and we make him dinner and then we make sure we clean up all his mess, blah blah blah. And then basically my other job role is support worker/carer. The support side is individuals with mental health and learning disabilities. And we take them shopping, we help them with bills, we help them with everything that we can physically do, that they struggle with. And then basically we do that hoping that we can get them back in the community.

And we do outreach as well. So the guys that lived in the houses, eventually they will go on the council register and then they will move on. And then obviously the care side is, we go on outreach and we go to individual homes, so where they actually live. And we go in in the morning, we get them washed, dressed, sometimes you have to use, obviously slide sheets to move them, hoists and all that sort of stuff. And obviously make sure they’re clean, make sure they took their medication. Sometimes obviously some people you’ve got to give them their medication. There’s loads.

Interviewer: That does sound a lot. Are both of those roles for organisations?

Respondent: Yeah, although no, my private job is a private client, he pays for his own care.

Interviewer: But the other one is for an organisation?

Respondent: Yeah, that’s correct.

Interviewer: I’ll focus on that one, if that’s okay then, on the one that’s the organisation.

Respondent: Yeah, that’s fine.

Interviewer: With that one, do you know… you don’t have to tell me the name of the organisation or anything, but is it a charity or is it council funded, do you know anything about the actual organisation itself?

Respondent: Yeah, so I’ve been there like six/seven years, so it’s just like a normal care company. The lady who runs the company, she’s bought all her houses for the service users to live into. And then basically that’s the support side. And obviously the care side is… obviously they all live in their own individual houses. So the owner obviously doesn’t own their properties, but she is the person that you go to.

Interviewer: Do you know, is it quite a large organisation or…

Respondent: Yeah, they’ve got lots of houses, 14-16 houses and then we have a hell of a lot of people that we care for in (name of place). And it goes out to (name of place), East (name of place), (name of place), [Coxey 0:02:55], so it goes quite far out.

Interviewer: Brilliant and which geographical area is it that you’re based?

Respondent: In (name of place).

Interviewer: That’s great. When did you get into care work?

Respondent: When I was 18.

Interviewer: What was it that brought you into this particular job that you’re in now? Did you leave another provider to come here or?

Respondent: Yeah, so my first job was working in a care home. Unfortunately I didn’t like the way it was run. I didn’t think they were treated with enough time or anything like that. So then I went onto care companies instead of residential and I’ve done that through all the other years, through different companies. But I went to the support/caring because my daughter has mental health. So it was more to learn about mental health. Because even though people go and do caring, they don’t actually learn much about mental health and learning disabilities in the care sector.

And I think it’s very, very good with our company, because we do the support side, which is just mental health and learning disabilities of all ages, when we go and do the care side, if one of them have mental health, we are trained for them as well.

Interviewer: So it’s like a double win really in that sense.

Respondent: Yeah, basically.

Interviewer: Do you mind me asking what your hourly rate of pay is in the job, the one that you’re employed by for the organisation?

Respondent: Yeah, that is £10.42.

Interviewer: This is the focus of our project really, is to find out about this and get people’s perceptions on that. How do you feel about your current rate of pay?

Respondent: I think it should be higher. Obviously my last company we were on £15 an hour.

Interviewer: That’s quite a big difference.

Respondent: But it’s difficult to say because the support side is kind of a little bit easier than it is on the care side. So the care side you do get, I think… it works out differently depending on what hours you do. I think we get £11.50 for the care side and £10.42 for the support side. But I do think it should be a minimum of £15 really per hour.

Interviewer: Do you feel that people who have got, people like yourself who have got more experience should be getting more or do you think people just generally need to be getting more in the sector?

Respondent: I just think anyone who does the job role should all be on the same really, it doesn’t matter. But obviously people that… you need some sort of experience, even if it’s just a year, maybe the first year, maybe should be maybe 40p less or something, but not much, because you’re all learning through the experience. It doesn’t matter if you’ve got all your NVQs it’s still… that’s just like writing a book. Actually doing it is the experience.

Interviewer: When was your pay last increased? Was it increased in April with the minimum wage changes or?

Respondent: Yeah, yeah, it went up then, yeah.

Interviewer: Do you know what it was increased from?

Respondent: It was only a few pennies. I was on £9.90-something and now obviously… so it’s gone up by about 50p.

Interviewer: If you don’t know the answer to this it’s fine. Do you know if your employer has signed up to pay the Real Living Wage?

Respondent: I don’t know, I’ve got no idea.

Interviewer: That’s okay, don’t worry, most people have said that. Do you receive any other benefits in your role, any bonuses, sick pay, any pension contributions?

Respondent: The only thing, when I pay my pension, they put in a pension as well, but other than that, no.

Interviewer: If you were off sick then, would it go straight to statutory sick pay?

Respondent: Yeah, statutory sick pay.

Interviewer: You wouldn’t even get like a week of pay or anything like that?

Respondent: No.

Interviewer: Okay, and so the pension contributions, is that a set amount per month that they…

Respondent: It depends how much I pay into it, depending on how many hours I do. So if I pay, I don’t know, say £21, they put in maybe £21, they normally match whatever I put in.

Interviewer: So if you put in more they would match it more?

Respondent: Yeah.

Interviewer: That’s really helpful. And do you do any sleep-in shifts CW15, in your role, where you’re having to sleep over?

Respondent: Well, I don’t, but you do have sleep-ins, yeah, sleep-ins are £35 a night.

Interviewer: But you don’t tend to do those?

Respondent: I don’t, I choose not to do those.

Interviewer: That’s really helpful. In terms of any other payments, did your employer pay for your DBS check or your uniform? Did they pay when you completed your induction training?

Respondent: So DBS, I already had one on the update system, so they didn’t need to. But they do, yeah, they pay for one DBS and then that’s how they do it. And we don’t wear uniforms, so we just have a lanyard because that’s just what our company does. So we just wear our own clothes with a lanyard. But we do get paid mileage. Not for the first job, but every job after.

Interviewer: Right, I see. Are you typically moving between lots of different houses per day then?

Respondent: You can do, completely depends on… see our company is quite easy-going. You can say you want to be outreach or in-house. So people with cars, they normally do outreach, so they travel around and they get 45p a mile plus their hourly rate. So they normally do that. I sometimes do maybe two houses a day or maybe three, but I normally just try to stay in one place if possible.

Interviewer: It’s quite an interesting role in that sense. You’ve got a real mixture there in terms of where you are and where you’re required to be.

Respondent: Yeah.

Interviewer: What would a typical week look like then in terms of the hours you’d work and where you’d be?

Respondent: At the moment I’ve had to cut my hours, just due to my daughter’s mental health. For example for now, I’m only doing three days a week. At the moment I am stable and I’m just at one house. So at the moment I’m just doing 16 hours. I normally stay at one house and I just do… no, 17 hours, I do 10:00 until 4:00, Monday/Tuesday/Wednesday, so that’s what I’m doing at the moment. But obviously you can do more hours. You can go between houses. I used to do Monday at one house, Tuesday at another house and then do it that way. But the guys have got used to me at one house, so I’m kind of staying there. And then if I need to go and do a care call, then you obviously leave that job. It’s like having different jobs. And then you kind of leave that house and then you go obviously to your outreach.

Interviewer: If you’re going to do outreach when you get there, do you have to log in and log out or scan a barcode or check?

Respondent: Yeah, we have a phone app, so they give us a work phone. We have a work phone that checks us into each individual client. So it’s got a check-in button, the time, so it knows where you are, for safety reasons as well. So you check in when you get there, you check out when you leave. Obviously if you stay logged in, they do call you just to ask if you’re okay.

Interviewer: That’s good. One of the people I was interviewing yesterday was saying how if they were only required to be at that particular place for maybe half an hour, they wouldn’t get the full hours payment for that client. Does it work in the same way with you?

Respondent: Yeah. If you were only… for example medication, they’re half an hour calls. So you would only get paid half an hour. See with our company, what they do is if you’ve got two clients that are on medication, then obviously it just literally overlaps one another. So then obviously then you’re getting paid for your hour.

Interviewer: Got you, that makes sense.

Respondent: They used to be 15 minutes, but they’ve changed it for that reason. Apparently HEC said that they don’t mind paying the extra, so it gives the individual more time.

Interviewer: That makes sense, that’s really helpful. In terms of your hours and your rotas, do you have a lot of choice over, I know you’ve said that you’ve adapted your hours to work around your daughter. Are they quite flexible with you in terms of the hours that you work and the rotas that you get?

Respondent: Yeah, because we’ve got so many clients, I’ll just say for example, if it was snowing really, really hard, for example, and I had to go five miles, and I physically couldn’t get there, but somebody lived very close to that client, they would switch us. So then I would go to a closer destination and so yeah, we have… there is quite a lot of flexibility in our company. For example, say you didn’t get on with one of the clients or whatever, or the client didn’t get on with you very well, as long as you speak to your manager, they would switch people around.

Interviewer: Right, so they’re quite flexible in that sense.

Respondent: Yeah.

Interviewer: Do they ever cancel shifts? Would they ever ring up and cancel a shift?

Respondent: Yeah, they have done, but normally if it’s the same day, so if you turn up at a property and that person has declined, they normally find somewhere else for you to go and you’ll get paid for the first 15 minutes.

Interviewer: Okay, that’s good. When you’re travelling between clients, do they pay for the travel time CW15, as well as the petrol, or is it just the petrol?

Respondent: No, so they give you 45p a mile plus your hourly rate. If you were driving for an hour, you’re getting paid your hourly rate.

Interviewer: Right okay, so you’re not just getting paid for the time you’re actually in with the client, okay, that’s quite different then from some of the people I’ve spoken to. There’s so much variety, isn’t it?

Respondent: Yeah, some companies don’t. For your first client you don’t obviously. Say for example, say I was in (name of place), we haven’t got anyone that’s miles away. But say we had a (name of place) to (name of place), you wouldn’t obviously get paid for that travelling, no, because that’s your first client. But anything after that first client, in between them you would get your mileage plus your hourly rate. And obviously coming home from your last job, you don’t get paid obviously either, for your hourly rate. But everything in between you do, if that makes sense?

Interviewer: That does make sense, that’s really helpful. And would the mileage that you get paid, would that just go on your wage slip, you just see that as a kind of flat rate anyway…

Respondent: Yeah.

Interviewer: If I was going to ask you, would you say that the rate of pay… how would you compare the rate of pay for a care worker compared with like other similar jobs in the area or other… just other jobs in your area? Where would you rate it or how would you describe it in that sense?

Respondent: So for example, Lidl’s, they get paid like £13 an hour, where obviously in our job, we’re on £10.42. So yes, there is shop work that you get a lot more money for. And yes, I can understand it is hard working in a shop, but then it’s very hard as well being a carer and doing the support side as well. Because the support side, to be quite honest, when you’re working with someone who has got mental health, serious, you can get attacked many times, which I have, for £10.40, you know? People don’t think of the support side. A lot of people think about the care side, but sometimes you’ve got to think that support side too. It’s still classed as a care, you know?

Interviewer: Absolutely and again, lots of people have said the same thing, for that money, there’s a lot of risk, physical risk involved.

Respondent: A hell of a lot, yeah.

Interviewer: Would you say that the rate of pay is kind of good for a care worker in the local area or…

Respondent: No, not really.

Interviewer: Do you know if other providers in the area are paying more?

Respondent: Yeah, yeah.

Interviewer: That’s really helpful, thank you. In terms of your income from your care work, is your income the main income in the household?

Respondent: Yeah, so I’m the only person who works in the house, because my husband is full-time carer for our daughter. So yeah, she’s classed as a 2:1 but obviously… that’s why I’ve cut my hours, I can only do three days at the moment, because you physically can’t live on just carer’s allowance.

Interviewer: Yeah, that’s tricky. Are you in receipt of any additional in-work benefits that you can claim?

Respondent: Yeah, I’m getting universal credit at the moment. I’m entitled to that at the moment, so that’s quite good.

Interviewer: That’s good. Would you say that your income from your care work, does it meet your household needs?

Respondent: No. (Laughs) Definitely not. That’s why I’ve got my second job.

Interviewer: I can imagine, and this is one of the reasons we’re wanting to do this study is to highlight these challenges.

Respondent: And obviously the second job is more pay, it’s £15 an hour.

Interviewer: That supplements your income from the job that you’re in, from the one with the organisation.

Respondent: Yeah.

Interviewer: And how has the rising cost of living affected you guys?

Respondent: A lot, especially with electric, because having a child with SEN needs, that needs obviously to have lights on and has to have special sounds and sensory lights, all costs a heck of a lot. Yeah, it has affected us a lot with our electric and obviously food as well, she has an eating problem, so that obviously is costing a lot more to feed now as well.

Interviewer: Yeah, it’s so challenging. To what extent would you say… some of these questions are just generic questions I’m asking. Some of them you’ve probably already alluded to, but to what extent would you say you’re satisfied with your pay?

Respondent: I’m not satisfied with the pay, no. I think it should be £15, minimum, I think all carers should get a minimum of £15 an hour, that’s support staff too.

Interviewer: Are you on like a permanent contract with the organisation?

Respondent: Yeah, I’ve been there for nearly seven years now.

Interviewer: And you’re guaranteed the same number of hours that you…

Respondent: So I am guaranteed whatever I ask for. So I’ve had to go down to a bank contract now, so that’s zero hours. But because I’ve been there so long, I tell them how many I need and they do give them to me.

Interviewer: You’re guaranteed that, that’s good.

Respondent: Yeah.

Interviewer: Is that likely to stay like that do you think? That you’re likely to get…

Respondent: Yeah, for now, obviously as soon as we get the EHCP plan for our daughter, and she goes to a special needs school, then I’ll be able to re-up my hours again and go back full time. But for now I can’t… my company are pretty good to me. My manager is probably one of the best to be honest. My boss isn’t, he’s a bit of a waste of space, but you know, my manager is lovely and she literally will do anything for you.

Interviewer: That’s good, it’s those kinds of things that keep you in the job when the pay is poor.

Respondent: Yeah.

Interviewer: How do you feel about your hours? Are you quite happy with what you’ve got at the moment?

Respondent: Yeah.

Interviewer: And you typically work the same pattern over each week?

Respondent: Roughly, roughly the same, yeah. It’s the same hours, sometimes just different people. But because I’ve been there so long, I know most of the individuals.

Interviewer: That’s good. Would you ever have to do hours at short notice or weekend work?

Respondent: Yeah, sometimes, yeah, sometimes they have called, especially with Covid, during the pandemic, I had to help out a hell of a lot, because everyone was dropping like flies. But yeah, they do call you at short notice and ask you, but they don’t force you, they just ask.

Interviewer: That’s good. Tell me a little bit about what your job involves on a daily basis and what sorts of things you enjoy in your current role and what some of the challenges are, or some of the things that you don’t enjoy?

Respondent: Okay, so the support side I enjoy, obviously, because I feel that I’m benefitting them, because some of them can’t physically do cooking, can’t change their beds. And there is one guy, at the moment actually, I’ve been working with him a couple of years. It’s amazing, because he can actually put his pillows in his pillowcase, that he’s never been able to do. So it makes you feel really rewarded that you helped someone. And then obviously the care side, without us, they physically wouldn’t be able to get out of bed, they would be in their own mess and they wouldn’t be able to eat. So I quite enjoy that.

Obviously some of the old people are quite, you know, a bit moody, but I don’t blame them, stuck indoors all the time. But I do think there should be more for the older generation. People that are maybe bedridden and that, they still should enjoy things, that care companies maybe… there should be some sort of funding that we can go in and play games, more time for them. Because some of them don’t want you to leave because you’re the only person they see each day.

Interviewer: That’s so hard.

Respondent: It’s quite upsetting sometimes, yeah.

Interviewer: One of my questions actually is do you feel that there’s time to build the relationships that you’d want to build with the clients that you work with?

Respondent: In the company I’m with now, yes, you have time. But the companies before that I was with, no, because you didn’t have enough time. So the other companies you may have just 45 minutes to get someone out of bed, dressed, medication, breakfast and leave, and then get to the next job without no time. Where obviously in this job that I’m with now, and that’s why I’ve stayed there, is they give you at least an hour, an hour and 45 minutes to do that. And then you’ve still got 15 minutes to travel to your next job. So that is one good thing that I find.

Interviewer: Are you able to build… is that one of the things that you enjoy about your role, is being able to build these relationships?

Respondent: Yeah, 100%, build yeah. The only thing I don’t like is when you go to your company and you go, “So-and-so is really happy today, really happy to see me,” and they go, “Remember you can’t be friends with people.” And you’re like, oh… but you could be their only friend, you know, but companies don’t like that. Then they try to move you from that person and put someone else in because they don’t want you to befriend them.

Interviewer: Do you find you have to just keep quiet…

Respondent: Yeah.

Interviewer: Just not say anything… that’s hard isn’t it though, because it’s one of the things that they get a lot out of and also you as well.

Respondent: A 100%, yeah.

Interviewer: What about things that you don’t enjoy, is it just the fact that sometimes you don’t have the time or are there any other stressful parts to the job?

Respondent: Yeah, so for example, sometimes, say you’re on the end of your shift and someone has had a fall, or something like that, and that client really wants you to go to hospital with them. You’re physically not allowed, yeah, things like that. That’s what I don’t like about it. And for example, if… there’s loads of things. Obviously sometimes, like I say, the older generation can be quite moody, if you’re slightly late or things like that, which obviously sometimes you can’t help being late because that person before might not have wanted you to leave.

I had a client once just down the road from me, bless her, she only had one leg and she used to cry when I used to leave. So it’s very, very difficult, and then I have another gentleman, he wouldn’t have breakfast unless you ate breakfast with him. So he used to make you slightly late for your next job, but then that person would be upset that you were slightly late. And throughout the day you’d end up really late and then you won’t be home until about two hours after your shift had finished. (Laughs) Unpaid.

Interviewer: It’s tricky, so the time element is a factor sometimes.

Respondent: Yeah, 100%, you need a lot more time with your clients and you do, they don’t get enough time, 100%.

Interviewer: That’s tricky. That’s really helpful CW15. Tell me a little bit about any training that you’ve had in your role and how do you feel about the training that you’ve had?

Respondent: When I first started we used to have face-to-face training, which I preferred. But since Covid it’s all online training. I don’t agree with this. I really don’t, and I’ve said this, I do not agree with this online training. You could look up Google, you could do anything you wanted to do. You could get someone else to do it for you, there’s no evidence. And that’s what I don’t like and I have been saying this for quite a while now, that we need to be doing face to face.

Over this [\*\* 0:23:26], what they’re doing, it’s not good, you know? It doesn’t go into your head. When you’re physically there and you’re doing training with all your other colleagues in there, one, you’re having fun and you’re interacting, and two, you take it in so much better than what you do just sitting there, just watching a video.

Interviewer: That’s so true, it’s very distracting when it’s online isn’t it?

Respondent: A 100%, yeah.

Interviewer: Do you feel in addition to having more face-to-face training, are there any other courses or topics of training that would be useful?

Respondent: I just think we need… everyone needs to go back to face-to-face training, I don’t think this online is good, I really don’t. And I think you will… I reckon eventually down the line of all care, you will see it start going downhill, people doing it online. Because you’ll have people start a job, they pretend they know everything, but really their friend or whatever has done it for them. And then that’s not good. So I really think you need to go back and do it face to face.

Interviewer: That’s really good feedback. What about opportunities to progress and develop in your career? What kind of opportunities are there?

Respondent: So you can become a supervisor. They give you… you can go and do NVQs if you haven’t got one. They give you support for that as well. Obviously at the moment they have them because obviously Covid and that, they haven’t managed to do that for a few years now. But before that, they’d done all that. You can, you can if you really get to supervisor though, you can’t really get much further, which is only an extra 40p, and you have a lot to do. You’ve got to do support, care and you’ve obviously got to do everyone’s rotas and you’ve got to be there for everyone, on call, etc. It’s just not worth jumping that ladder for an extra 40p an hour.

Interviewer: Is that all it is, an extra 40p an hour?

Respondent: Yeah.

Interviewer: Do you want career progression…

Respondent: Not in this job role, no, it’s not worth it. You’d have so much put on you for an extra 40p, it just wouldn’t be worth it. You’d be so much more stressed in your job role that you’d probably end up, well, I’d probably end up quitting, to be fair. It would be too much stress and yeah, I don’t… maybe if it was a lot more money and you had more time, but unfortunately they don’t give you enough time either. Like my supervisor, I get on really well with her and you know, she has about six hours a week just to make sure that everyone has got their rotas. And then she’s got so many hours to do this and so many hours to do that. It’s just such a time wrecker, it’s all to do with time, there’s just not enough.

Interviewer: And like you say, for 40p extra an hour, it’s like why would you bother.

Respondent: Yes, there’s no point.

Interviewer: Do you see yourself continuing to work in a care worker, support worker role CW15?

Respondent: Yeah, I love… yeah, even if it were £2 an hour, I would still do it because I love doing it.

Interviewer: It’s so interesting because so many people have said almost identical to what you’ve said, that I love it, the pay is crap, but I love it. (Laughs)

Respondent: A guy two doors along from me, sometimes when his carers don’t turn up, I’m just his neighbour, I’ll go around there and I look after him for free and I sort him out, make sure he’s all done. Because at the end of the day it’s morals, isn’t it? Making sure that people can live their life. We’re only here once and yeah, I just… I couldn’t leave anyone in that situation, I just couldn’t do it.

Interviewer: The industry wouldn’t function without people like yourself.

Respondent: No, 100%.

Interviewer: So sweet. You said you would continue working as a care worker, is there anything that would stop you working as a care worker? Anything that would push you into a different line of work?

Respondent: No, I don’t think so. No.

Interviewer: Just because of the enjoyment level that you get from doing it.

Respondent: Yeah.

Interviewer: That’s great. The last little bit CW15, it will take about four or five minutes. It’s literally like a list of questions where I’ve got some statements and I read out the statements and you have to say which one you agree with?

Respondent: Yeah.

Interviewer: Then that’s us done. Thinking about your role and the difference you are able to make to people’s lives, which of the following describes how you feel? I am able to make as much of a difference as I’d like / I’m able to make some difference / I’m able to make some difference, but not enough / I’m not able to make a difference?

Respondent: I’d say the second one.

Interviewer: Okay. Thinking about your relationships with the people drawing on care and support, which of the following describes how you feel? My relationships are as good as I want them to be / Good enough / Not as good as I would like / Not at all good.

Respondent: I’d say three.

Interviewer: Not as good as you would like?

Respondent: Yeah.

Interviewer: Which of the following describes how much autonomy and freedom you have in your role? I have as much autonomy as I want / I have adequate autonomy / I have some autonomy but not enough / I have no autonomy?

Respondent: Does that mean freedom of…

Interviewer: It’s like freedom and independence to make decisions and determine tasks, it’s quite vague I suppose. The independence to make decisions by yourself, things like that.

Respondent: Oh yeah, I do that all the time, yeah.

Interviewer: Would you say I have as much as I want / I have adequate autonomy…

Respondent: Yeah, I’d say the top one, the first one.

Interviewer: Okay. Thinking about the time you need to do your job well; I have all the time that I need / I have adequate time / I do not have enough time / I do not have enough time and it’s having a negative effect on me.

Respondent: It depends who you’re with, how much… because every day is different. I’d go for three.

Interviewer: You do not have enough time, okay.

Respondent: Yeah, I still need more.

Interviewer: Thinking about how much you worry about work outside of work. I hardly ever worry about work / I occasionally worry about work / I often worry about work / I constantly worry about work?

Respondent: I worry about my clients, not particularly work, but the guys, the people I work for, yeah.

Interviewer: Thinking about looking after yourself at work, this is like taking a comfort break, taking time to eat, drink and rest. I am able to look after myself as well as I want / I’m able to look after myself well enough / Sometimes I’m not able to look after myself well enough / I’m rarely able to look after myself well enough.

Respondent: We don’t get breaks.

Interviewer: Nothing at all?

Respondent: No.

Interviewer: Would you say ‘I’m rarely able to look after myself’ in that sense? Or sometimes?

Respondent: We just eat and drink when the clients eat and drink. You can’t go and eat and drink on your own, you’ve got to be with someone, so yeah, probably what you just said, yeah.

Interviewer: Okay. Which of the following describes how safe you feel at work? I feel as safe as I want / Generally I feel adequately safe / I feel less than adequately safe / I don’t feel safe at all?

Respondent: The second one.

Interviewer: Okay, thinking about your professional relationships at work, which of the following describes how you feel? My professional relationships are as good as I want them to be / Good enough / Not as good as I would like / Not at all good?

Respondent: As good as I would like.

Interviewer: Thinking about supported you are in your role, this is like supported, respected by your manager. I feel highly supported by my manager / I feel adequately supported by my manager / I do not feel as supported as I would like by my manager / I do not feel at all supported by my manager?

Respondent: My manager is quite supportive, so I’d probably say the top one, she’s quite good.

Interviewer: That’s good. Thinking about the skills and knowledge you need to do your job well. I have the skills and knowledge I need / I have adequate skills and knowledge / I have some skills and knowledge, but not enough / I do not have the skills and knowledge I need?

Respondent: I have the skills and knowledge.

Interviewer: There’s just a couple more. Thinking about your career aspirations and how you’d like to develop and progress. I have opportunities to advance my career as I would like / I have adequate opportunities to advance my career / I have some opportunities to advance my career, but not enough / I have no opportunities to advance my career?

Respondent: There’s just no point. (Laughs ) So I don’t know what you’d say really.

Interviewer: I don’t know really.

Respondent: The bottom one.

Interviewer: Maybe the bottom one, yeah.

Respondent: The bottom one, really, yeah.

Interviewer: Thinking about the income from your work in social care, how much financial security do you feel like you have? I have as much…

Respondent: No.

Interviewer: Yeah, so probably the bottom one, I don’t have any financial security.

Respondent: Yeah.

Interviewer: And then thinking about how your role is valued in social care. My role is highly valued by others / My role is adequately valued by others / My role is not as valued as I would like by others / And my role…

Respondent: That one.

Interviewer: Okay, that one, that’s great. That’s the end of the questions CW15. I just wondered if I could quickly, I just need to capture a couple of little demographic things if that’s okay? Obviously gender is female. You don’t need to tell me your age, but would you be able to tell your age bracket?

Respondent: I’m between 30 and 40.

Interviewer: And nationality, white British?

Respondent: Yeah.

Interviewer: Do you have any disabilities?

Respondent: I’m dyslexic.

Interviewer: Okay, and any educational qualifications?

Respondent: What, from school?

Interviewer: Just general, you have NVQ…

Respondent: Yeah.

Interviewer: NVQ. And your household situation is you live with your husband and your daughter, that’s right, wasn’t it?

Respondent: I’ve got a son as well, so a husband and two children.

Interviewer: And how far do you have to travel to work?

Respondent: I have a bike, it’s probably about 10 minutes, roughly, not far.

Interviewer: That’s lovely, that’s so, so helpful CW15. I’m going to stop the recording.

END OF AUDIO