



The regeneration effects of “fair wages”:

The economic benefits to Stoke-on-Trent of closing the gap between private and public sector pay for residential care work

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Executive Summary

This study calculates the economic impact on Stoke-on-Trent of a “fair wages policy” for local care workers employed in the private sector. “Fair wages” would mean bringing contracted-out wage rates for local residential care workers into line with the national local authority wage rates, which are agreed by UNISON and Local Authority employers.

To calculate the economic impact of “fair wages”, we used the New Economic Foundation (NEF) LM3 model, which measures *both* the direct benefits to residential care workers *and* the indirect benefits to the local economy. The model was implemented using data generated by a postal survey of care workers. The survey found evidence in 2004 of a £1 hourly differential between the private sector wage rates and the local authority rates. Private sector care workers were paid approximately **£4.70** per hour and the local authority care workers were typically paid **£5.70** per hour. The survey also provided evidence on the spending patterns of residential care workers in Stoke-on-Trent, in particular on the relative proportions of local and non-local spending. By combining our survey evidence on care workers’ spending in local businesses with estimates of local business spending in the local economy, we calculated *a local economy multiplier for care workers’ income of 1.63*. This means that for every £1 of additional income paid to public-sector care workers the local economy benefits by an additional £0.63 of income creation. (Or for every £1 of additional income paid to private-sector care workers under a “fair wages” policy the local economy would benefit by an additional £0.63 of income creation.) This multiplier of 1.63 is in line with other studies, in which the multiplier has been calculated as 1.67 in Sheffield and 1.77 in Newham.

This multiplier suggests that bringing the pay of approximately 500 private sector residential care workers in Stoke-on-Trent into line with the wage rates of local authority colleagues will boost the local economy by around **£1.5 million** annually. From the perspective of regeneration in Stoke-on-Trent, this research confirms that *increasing the pay of low-paid workers is a particularly effective way to boost expenditure in the local economy* . Because low-paid workers spend a greater proportion of any extra income locally than do more highly paid workers, increasing low pay gives a relatively large stimulus to local business and employment.

1. Introduction

Economists at Staffordshire University have completed research that highlights the economic costs of low pay in Stoke-on-Trent, which extends to a wider travel-to-work area throughout North Staffordshire and certain parts of South Cheshire. This work was conducted with the New Economics Foundation (NEF) on behalf of UNISON. The particular aim of this project was to calculate the impact on the local economy of raising the contracted-out wage level in care homes to the Local Authority rates agreed with UNISON. The calculations were conducted according to the New Economics Foundation's LM3 method (Path B), which has previously been applied in a similar urban area (Sheffield) and to low pay (Tower Hamlets) and is consistent with the methodology for local economy multiplier measurement (Sacks, 2002: 12).

The Social Services Department at Stoke-on-Trent City Council was chosen as the focus of analysis, because it has contracted out a significant proportion of its work to the private sector as well as retained work under public sector provision. The latest estimates for 2004 show that 65% of places in Stoke-on-Trent residential care homes are in the private sector, which is in addition to 100% of the nursing home places that are in the private sector in the city (direct communication from Stoke-on-Trent UNISON, 9/11/04). This enables direct comparisons of wage rates and other benefits in the public and private sectors.

The overall purpose of the research has been to analyse the impact of low pay on the local economy, to support effective campaigning and policy change, and to contribute to the wider discussion of regeneration and public procurement.

The particular contribution from Staffordshire University Business School was to apply the LM3 model devised by the New Economics Foundation to assess the local multiplier effects of raising the pay (and conditions) of workers in private sector firms contracted by the Stoke-on-Trent Social Services Department to the level of public sector workers engaged in work for the Department. It has shown that the effect of such a "Fair Wages Policy" would be to boost the local economy to an extent greater than the immediate or first-round effects of benefiting private sector employees.

2. The LM3 Methodology

Higher pay will benefit low-paid private-sector care workers. In turn, a high proportion of additional pay is spent locally, which creates additional revenue (income) for local businesses. The local economy benefits still further when these local businesses spend part of their increased income in the local economy. This creates still further local income and thus still further local spending ... and so on. Every £1 of extra pay benefits not only the care workers themselves but ripples out to create additional benefits for the entire local economy. Economists call this process the “multiplier effect”.

There are two potential ways of measuring the local income multiplier with the NEF LM3 approach: Path A measures how organisations spend their income and subsequent spending patterns; whereas Path B measures how groups of individuals spend their income and subsequent spending patterns (Sacks, 2002: 83). In this research Path B is most appropriate. The focus of this study is on how the local authority and private sector workers spend their income and, in turn, how that money is spent elsewhere in the local economy. The LM3 model is divided into three rounds:

- Round 1 estimates the additional income for private-sector care workers of raising their pay rates to nationally-agreed rates;
- Round 2 estimates the consequent additional spending in local businesses (hence, additional income for local businesses); and
- Round 3 estimates the consequent additional local spending by local businesses.

In both rounds 2 and 3, income tax and national insurance are classed as non-local expenditure and so reduce the multiplier effect. In addition, further effects beyond Round 3 are ignored for two reasons: firstly, because they are difficult to measure; and, secondly, because they are so small that omitting them leads to only a negligible under-estimate of the overall local multiplier effect.

Round 1: the pay differential (potential new income)

In Round 1, the LM3 method was modified to estimate the pre-tax wage differential between the two groups: *i.e.* local authority care workers and private sector care workers. This approximates a representative wage differential taking into account differences in grading structures, proportions of staff employed in different grades, etc

between the two sectors. The wage rate for residential care workers in 2003-04 on manual grade 5, spinal point 7 as agreed locally was £5.71 (confirmed during an interview with Colin Walton of UNISON on 9/11/04). If the standard hourly private-sector wage were to be raised to this level, then there would be a corresponding first-round creation of income in the local economy.

Round 2: spending of the income created in round 1

In Round 2, the aim is to calculate

1. the proportion of pay of both local authority workers and private sector workers that is spent locally, and
2. the composition of such local spending (*i.e.*, the main sectors or types of business in Stoke-on-Trent benefiting from such local spending).

We define the local economy as the North Staffordshire and South Cheshire region in which Stoke-on-Trent is the major urban area and the place of residence for the care workers (see Table A4 in Appendix 2). The main data source was a questionnaire survey of UNISON members, which was conducted on the assumption that spending patterns could be generalised to all care workers.

Round 3: business spending

In Round 3, the questionnaire data on the composition of residential care workers' local spending is combined with data in Appendix 5 of the *LM3 Handbook* (Sacks, 2002) that gives nationally representative proportions of local spending by sector or type of business. In this way, we estimate the proportion of the additional revenue (income) received by local businesses that is spent locally, which gives rise to a further round of spending and income creation. Although the proportions of local spending by type of business are obtained from national data, the proportions in Stoke-on-Trent are unlikely to be sufficiently different to make a substantial difference to the results of the LM3 method. Moreover, LM3 methodology is indicative by nature and working from existing data will allow consistency between this study and previous work in the area, (Sacks, 2002: 47).

3. Implementing the LM3 Model (Path B)

The methodology of LM3 is well established and forms part of the work by the New Economics Foundation (Sacks, 2002: iii). The LM3 model has been successfully applied to urban areas such as Sheffield (Sacks, 2002: 23) and wider localised economies (Weban-Smith, 2004: 6). The issue of data collection in a local economy can be problematic because very little published data exists. The initial plan for this study was to collect the data needed to implement the LM3 method via face-to-face interviews. (An interview team was recruited to reflect gender, ethnic and possible linguistic diversity among care workers). However, this data collection technique proved impossible to implement, since many residential workers are employed in shifts and most found it difficult to attend an open meeting. The fallback position to interview care workers at their place of work was also rejected, because this may have led to biased responses. The postal questionnaire was the next preferred data collection technique and this was completed in the summer of 2004. A blank questionnaire is shown in Appendix 1. In total 15 replies were received. Each respondent received a £5 gift voucher in return for the completed form (UNISON, 2004).

The gender of the respondents is shown in Table A1 (Appendix 2) and confirms that the overwhelming majority of the care workers are female, which is in line with findings elsewhere (Wills, 2003). The age of the respondents is shown in Table A2 and shows a range of ages above the 30 years threshold. The wide range of experience is also shown in Table A3. The residency profile in Table A4 shows that all 15 respondents reside in Stoke-on-Trent post code areas, which confirms that this is a study of the local economy. The near even split between full-time and part-time employment contracts is shown in Table A5. The mean contract hours for the full-time workers in the study are 36; and 20 for the part-time workers in the study. Only two workers could be identified as working in the private sector as shown in Table A6, but these respondents provided sufficient evidence for the study on pay and conditions. The majority of the respondents worked in residential care homes for the elderly as shown in Table A7.

For Round 1, the questionnaires provided sufficient information to confirm that in 2004 care workers in the private sector were paid a standard rate of £4.70 per hour

and that both the modal and the median wage in the Local Authority sector was £5.70. The latter figure is in line both with nationally agreed wage rates in 2004 (*i.e.* manual grade 5 spinal point 7) and with research conducted in Tower Hamlets by researchers from Queen Mary College, University of London (UNISON, 2003: 1). Therefore, pre-tax the wage differential between the two groups in 2004 was exactly £1 per hour; or £36 per week for the full-time care worker with an average 36 hour week and £20 per week for the part-time care worker with an average 20 hour week. In 2004, the national minimum wage for adult workers over 22 years of age was **£4.50** (DTI, 2004).

In Round 2, the questionnaire returns enabled us to calculate that the care workers spend **56.0%** of their income locally, which is higher than the NEF pilot estimate of 45.4% (Sacks, 2002: 113). Presumably, this is because the NEF pilot study included all income groups, where the higher income groups have a higher propensity to spend outside the local economy (for example, on holidays and wider leisure activities).

In Round 3, the questionnaire returns enabled us to calculate that the type of businesses where the care workers spend their money themselves spend **12.0%** of their revenue (income) in the local economy. This is slightly higher than the 11.0% suggested by the NEF study, but still well in line with other LM3 estimates.

In total, a Round 2 effect of 56% followed by a Round 3 effect of 12% results in a LM3 local multiplier of **1.63**. Table 1 provides a comparison of this multiplier figure against the benchmark of the NEF pilot study and multipliers from two other similar urban areas, namely Newham in East London and Sheffield in South Yorkshire.

Table 1: Comparison of local economy multipliers

Local Economy	Local Economy Multiplier
NEF pilot study	1.50
Stoke-on-Trent	1.63
Sheffield	1.67
Newham	1.77

Source (other than for Stoke-on-Trent):
Sacks (2002: 23-24).

Using the NEF benchmark of the local economy across various income groups, the multiplier of 1.63 in Stoke-on-Trent can be seen to reflect a greater return for the local economy due to fewer leakages (Ward and Lewis, 2004) and is in line with the other studies.

Table 2 shows the main findings and round-by-round calculations: Round 1 is the pre-tax wage differential of £1; Round 2 is the proportion of each £1 of additional income that is spent locally; and Round 3 is the proportion of each £1 of additional revenue (income) received by local businesses that is spent locally.

Table 2: Calculation of the Staffordshire University multiplier of 1.63 *

Round	Money flows (income created in each round)
1	£1.00
2	£0.56
3	£0.07
Total benefit to the local economy of £1 of extra spending	£1.63

* Rounds 3 (12% of £0.56) and the total are rounded

The corollary of this multiplier effect is that there is more to increasing the pay of private-sector care workers than either the benefit to these low-paid workers themselves or the cost of enacting “fair wages”. Policy makers should also take into account that for every £1 of additional pay taken home by private-sector care workers the local economy will benefit by a total of £1.63 of additional income and spending.

The sampling frame (*i.e.*, population) of care workers in Stoke-on-Trent is about 800: 300 in the public sector and 500 in the private sector. Of course, irrespective of population size, we cannot establish in any statistical sense that our 15 respondents constitute a representative sample. However, the research strategy was initially predicated on intensive interviewing of a relatively small number of care workers. A representative sample was to be secured by interviewing care workers from both sectors and with differing demographics (e.g., age and ethnicity) and checked by comparing our results with existing data and through discussion with informed

practitioners. However, because of zero attendance at the event organised for potential interviewees, we resorted to a questionnaire survey.

Questionnaires were sent to all members of UNISON for whom addresses were available (around 50 in the public sector and 25 in the private sector). In spite of an incentive (a £5 gift voucher) only 15 questionnaires were returned. However, this was around the number of returns that we might have expected from interviewing and the same criteria can be used to establish that our sample is reasonably representative.

1. Returns were received from care workers in both sectors and with variation in demographics.
2. Pleasingly, data on pay rates and benefits were consistent within the two groups, so that differences between the two sectors were clear and not obscured by intra-group variation.
3. The differential was confirmed by comparison with existing research and was endorsed as plausible by local “informed opinion”.

While the returns were sufficient to support a confident conclusion about the wage differential between private and public sector care workers, the returns did not suggest any systematic differences in inter-group spending patterns – in particular, with respect to the crucial local/non-local distinction. Accordingly, our data cannot support separate LM3 analysis for public and private sector care workers.

Moreover, in Stoke-on-Trent there are approximately 500 full-time equivalent residential care workers who work in the private sector for typically 37 hours per week at £1 less per hour than their public sector colleagues. If it is assumed that there is a 50 week year then, with a multiplier of 1.63, this equates to around a **£1.5 million** reduction in local economic activity each year.

This indicative figure is relevant to urban renewal and economic regeneration in Stoke-on-Trent. One way to achieve the aim of a stronger local economy is to increase the pay of low-paid workers who not only spend a relatively large proportion of their overall pay (reflecting a low propensity to save; Sloman, 2003, pp.468-69) but also spend a greater proportion of their pay in local businesses such as neighbourhood shops and local services (reflecting a high propensity to spend in the local economy; Sacks, 2002, p.9).

4. Other benefits and entitlements

The questionnaire gleaned other information on low pay in the local economy (Wills, 2001: 2). In particular, it revealed that the private sector care workers received no overtime premium or premiums for unsocial hours. In contrast, according to the national agreement, local authority workers receive “time and a half” for overtime. This is a serious issue for the local economy, since many low-paid workers rely on boosting their pay through overtime or working unsocial hours. Case 1, the testimony of one private-sector worker in Stoke-on-Trent, highlights the issue of low pay.

Case 1: Care workers in the private sector.

I am the highest paid employee out of 14 members of staff. I am a senior carer in charge of (weekends and afternoons) 17 residents, 90% have dementia and 2 care staff (2 altogether on duty). My wages are the highest at £4.90 per hour, because I get 10p per hour more for being a senior and 10p an hour more for being NVQ qualified. Pay in the private sector is diabolical. Stress is at a maximum.

Because private sector care workers do not receive premium rates and Local Authority workers do receive premium rates of pay for overtime and unsocial hours, our estimated weekly wage differential between the two groups is probably too low.

The issue of low pay is relevant to both groups of care workers. The national pay award of £5.87 per hour for 2004-05 from £5.71 per hour only makes a marginal difference to local authority care workers (confirmed during an interview with Colin Walton of UNISON on 9/11/04). See Case 2, the testimony of one local authority care worker:

Case 2: Care workers and household income.

My husband has had to take early retirement and he has the measly total of £480 per month. So we just about keep our heads above water. But we have nothing to spare for leisure and pleasure; we have not had a holiday for ten years.

Although the main focus in this report has been on low pay in the private sector, Case 2 puts into perspective the modest aim of raising private sector pay rates to public sector levels.

5. Possible counter-arguments

There are two possible objections to our calculation of the multiplier and consequent quantification of the wider economic benefits of a “fair wages” policy for Stoke-on-Trent:

1. the possible effect on employment in private sector care homes; and/or
2. the impact of higher wages on the profitability of private sector care homes, which might offset the multiplier effects of higher wages.

We consider these two points in turn.

The conventional wisdom is that higher pay costs jobs (i.e., higher wages reduce demand for labour). However, this conventional wisdom has begun to lose credibility as an excuse for not raising the wages of very low-paid workers. First, enacting minimum wage legislation has not had the impact on jobs forecast by opponents of this reform (Machin and Wilson, 2004). Secondly, recent studies have called into question both the theoretical and empirical basis of the conventional wisdom. This is reflected in the following summary of the present state of knowledge (Bhaskar and To, 1999, p.190; emphasis added).

Recent empirical work on minimum wages has called into question the long accepted belief that minimum wages inevitably reduce employment. Many of these studies suggest that moderate increases in the minimum wage need not reduce employment and *may in fact raise employment*.

The employment effect in care homes of wage increases consequent upon the introduction of the national minimum wage has been studied by Machin and Wilson (2004). They find only weak evidence of ‘modest’ reductions in employment growth (half of their results are not statistically significant at the conventional five or ten percent levels) (Machin and Wilson, 2004: 108-109). Moreover, they find no evidence of home closure effects in the two and a half years or so following minimum wage introduction. This is consistent with modest employment effects ‘as many commentators believe that more serious impacts of minimum wages can take some

time to work through (e.g. if there are adjustment costs in employment)' (Machin and Wilson, 2004: 108-109 and 103).

The conclusion that pay increases for very low paid care workers do not reduce the employment level but, at most, have a modest effect on employment growth is also endorsed by recent research cited by the Low Pay Commission (2005, p.81):

The total number of jobs in the residential social care sector has been rising slowly since the introduction of the minimum wage, with a shift towards full-time jobs.

Both general evidence on the employment effects of raising low wages, and specific evidence from care homes, suggest that negative employment effects have the potential for only a modest offset to the local economic benefits of a "fair wages" policy.

The second objection also raises difficult empirical issues. If for every £1 of wage improvement profitability is reduced by £1 then, to the extent that reduced profits mean reduced expenditure in Stoke-on-Trent, our multiplier is an overestimate. Unfortunately, we have no data with which to calculate this effect and are pessimistic about the likely willingness of private care home owners to supply the necessary data. Accordingly, the best we can do is to consider this problem on the basis of plausible assumptions. First, it is well known that margin pressure is a spur to business efficiency (or, as the proverb has it, "necessity is the mother of invention"). If very low wages are no longer available as the means to turn a profit then home owners may well be induced to maintain margins by improved efficiency. To the extent that this happens, increased wages will not result in reduced profits and, correspondingly, the multiplier will not be reduced. Secondly, to the extent that owners of private care homes live elsewhere, then spending from profits in Stoke-on-Trent is negligible, which means that we can ignore the effects of "fair wages" on profits in calculating multiplier effects for Stoke. Thirdly, even if we assume that increased wages reduce profit, and that this correspondingly will reduce spending in Stoke, we need to take into account that the proportion of profit spent locally is likely to be much lower than the proportion of low wages spent locally. Unfortunately, guidelines exist on the proportion of business revenue spent locally but not on the proportion of profits spent

locally (Sacks, 2002). Of course, profit comes from revenue but is not necessarily spent in the same way. However, if we assume that local spending from profit is similar to local business spending from revenue, then for small businesses a figure of 20 percent is reasonable (Sacks, 2002). On this assumption, there will be £0.20 less local spending in Round 2 of the multiplier and about £0.02 in Round 3, which reduces the total benefit to the local economy of £1 of extra spending from £1.63 to a little over £1.40 (see Table 2). In conclusion, even on our least favourable assumptions, the multiplier effect of “fair wages” is likely to be substantial and the conclusions presented in this study are not fundamentally altered.

6. Conclusions

Research in 2004 on Stoke-on-Trent residential care workers has found *a local multiplier of 1.63*. Two groups have been identified, namely private sector and Local Authority care workers. The former were typically paid **£4.70** per hour (minimum wage for adults over 22 years of age at the time was £4.50) and the latter were paid **£5.70** per hour, suggesting an hourly wage differential of £1. Using the LM3 methodology, we find that the local economy is deprived of £1.63 for every hour worked in private-sector care or, in total, about **£1.5 million** annually. In Section 5, we find that the quantitative implications of possible counter-arguments are not sufficiently large to make a fundamental difference to these conclusions.

The multiplier of 1.63 is in line with other studies in similar urban areas (for example, a Sheffield study generated a multiplier of 1.67). The £1 pay differential may underestimate the impact of low wages paid in the private sector, since other benefits and entitlements such as overtime premiums are also systematically greater in the public sector. That is, one hour of overtime worked by a Local Authority care worker will result in an hourly wage of £7.60, whereas the private sector care worker will still receive £4.70 for one hour of overtime, which is a wage differential of £2.90. The average overtime for full-time and part-time workers in this study is five hours (see the notes to Table 5 in Appendix 2).

From the perspective of regeneration in Stoke-on-Trent, this report confirms that *increasing the pay of low-paid workers is a particularly effective way to boost expenditure in the local economy*. Because low-paid workers spend a greater

proportion of any extra income in the local economy than do more highly paid workers, increasing low pay gives a relatively large stimulus to local business and employment.

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Appendix 1: The Questionnaire



Measuring local money flows in Stoke-on-Trent

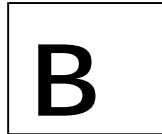
Please tick, circle or enter your response.

1. Are you female or male?
2. Age: under 20; 20-29; 30-39; 40-49; 50-59; above 60.
3. Experience (of working as a care worker): _____ years
Note, include total years as a care worker, *i.e.* does not have to be continuous service and therefore find the total even if there is broken periods service.
4. Home post code: _____
5. Are you employed by a local authority or in the private sector?
6. Are you employed full-time or part-time?
7. Hours worked per week: _____ hours (Excluding overtime)
_____ hours (Including overtime)
8. Sector of care work:
 - i. Young adult centre/teenage homes
 - ii. Day centres for disabilities
 - iii. Care workers in the community
 - iv. Assessing for disabilities
 - v. Release from hospitalisation
 - vi. Elderly care centres
 - vii. Other (please state) _____
9. Gross (*i.e.* before deductions) hourly wage rate: £ _____

10. (i). If your standard hourly rate of pay rose by £1 per hour and you had the choice would this affect the total number of hours you work? Yes or no
- (ii). If you answer yes, would you work:
- i. more hours;
 - ii. less hours;
 - iii. the same; don't know
11. Which, if any, of the following benefits and entitlements do you receive?

Entitlement:	Yes	No	Don't know
Holiday pay (above statutory minimum of 20 days)			
Sickness pay			
Compassionate leave (e.g. to attend funeral of close relative)			
Carer's leave (e.g. to care for sick dependent)			
Payment for 'on-the-job' training			
Uniform allowance			
Enhanced maternity leave			
Overtime (premium rate of pay) If yes, how much £ _____			
Unsocial hours premium If yes, how much £ _____			
Employer's contribution to your pensions			

Do you have any other comments: if so please write below.



Measuring local money flows in Stoke-on-Trent

Household Spending Survey: 2004

*Thank you for taking the time to complete this form.
Please note your results will be kept in strictest confidence.*

We need percentages. For the purposes of this research, it does not matter whether you give us %
of your household expenditure on a weekly, monthly or annual basis.
For each percentage, please record whether it is weekly (W), monthly (M) or annual (A).

By "local" spending, we mean spending in the North Staffs/South Cheshire area.

Item		Total % (Local + Non- local)	% Local (in the North Staffs area)	% Non-local	Please name the main local business/es you use for each category.
Income tax & N I	(Write in £, if easier for you)				
Supermarkets e.g. Tesco, Iceland (excl. restaurants)	W M A				
Department stores Spencer, Woolworths	e.g. Marks & W M A				
Clothing: shoes & accessories	W M A				
Electronics e.g. Dixons	W M A				
DIY/Household good e.g. B&Q, MFI	W M A				
Convenience store e.g. Coop	W M A				
Pubs and restaurants	W M A				
Health and beauty e.g. Boots	W M A				

Fuel and petrol e.g. BP, Shell	W M	A				
Loan Repayments and banks	W M	A				
Rent/mortgage	W	M	A			
Council Tax	W	M	A			
Other 1 (please specify)	W	M A				
Other 2 (please specify)	W	M A				
Other 3 (please specify)	W	M A				

Any comments:

If you have any queries about this form, please see contact Staffordshire University on (01782) 294211 or i.jackson@staffs.ac.uk

Thank you for your help.
Please return this questionnaire in the pre-paid envelope.

Notes:

1. Circle as appropriate
2. Circle as appropriate
3. Include total years as a care worker, *i.e.* does not have to be continuous service and therefore find the total even if there is broken periods service
4. Complete as appropriate or address if post code unknown
5. Circle as appropriate
6. Circle as appropriate; part-time is approximately 20 hours or less
7. Hours worked in a typical week or contracted hours; excluding overtime
8. Tick as appropriate
9. Complete as appropriate; do not round-up to nearest £; do not accept net figure without noting as such
10. Tick as appropriate
11. i. Circle as appropriate
ii. Circle as appropriate (this may not be a choice for the care worker)

Appendix 2: The Results

Table A1: Gender of the respondents

Gender	Number	Percent
Male	1	6.6
Female	12	80.0
No Answer	2	13.2
Total	15	100

Table A2: Age profile of the respondents

Age	Number	Percent
Under 20	0	0
20-29	0	0
30-39	5	33.3
40-49	5	33.3
50-59	3	20.0
Over 60	2	13.4
Total	15	100

Table A3: The total number of years of experience of the respondents

Experience (years)	Number	Percent
Under 5	0	0
5 to 10	3	20.0
11 to 15	4	26.8
16 to 20	3	20.0
21 to 25	3	20.0
Over 25	1	6.6
No answer	1	6.6
Total	15	100

The average experience is over 15 years.

Table A4: Residency profile by home post code

Post code	Number	Percent
ST1	0	0
ST2	0	0
ST3	5	33.3
ST4	1	6.6
ST5	0	0
ST6	6	40
ST7	1	6.6
ST8	2	13.3
Total	15	100

Table A5: Contract type of respondents either full-time or part-time

Employment type	Number	Percent
Full-time	7	46.7
Part-time	8	53.3
No answer	0	6.6
Total	15	100

Of full time 5 = 37 hours; 1 = 35 and 1 = 33 (average = 36 hours)

Of part-time average = 20.25 hours.

The average hours worked per week excluding overtime is almost 28 hours (full and part-time). The average hours worked per week including overtime is 33 hours (full and part-time).

Table A6: Public or private sectors

Ownership	Number	Percent
Public	10	66.6
Private	2	13.2
No answer	3	20.0
Total	15	

Table A7: Sector of work

Type of care work	Number	Percent
Young	0	0
Day centre	0	0
Community	0	0
Disability	1	6.6
Hospitalisation	0	0
Elderly	13	86.7
Other	1	6.6
Total	15	100