

Department of Health and Social Care

Care workforce pathway for adult social care: call for evidence

National Care Forum Submission 31st May 2023

1. The National Care Forum – who we are

The National Care Forum (NCF) is the leading membership organisation for not-for-profit social care providers in the United Kingdom, bringing together over 169 of the UK's leading care and support organisations. Our members offer thousands of services across the country, which are not-for-profit and always at the heart of community provision. Collectively, these organisations deliver more than £2.3 billion of social care support to more than 277,000 people and collectively employ more than 124,000 social care colleagues.

The NCF has a strong focus on person-centred care and our members provide a wide range of social care services to individuals of all ages, including residential care, nursing care, home care, and community-based support. The NCF promotes collaboration, shares best practices, and advocates for positive change in the social care sector. For more information, please visit [our website](#).

2. Context

The current workforce pressures facing social care are at the forefront of care and support providers' minds. Our members consistently tell us just how challenging the current environment is, given the tight labour market and the particular issues they face recruiting and retaining staff in social care. [Skills for Care reports](#) that the number of vacant posts in adult social care has increased by 52% in one year and it is now the highest rate since records began in 2012/13. At present, there are 165,000 unfilled vacancies in social care, with the vacancy rate sitting at 11%¹.

Looking ahead, the need for care and support workers is only going to increase over the next decade. [Skills for Care data](#) suggests that we could need an additional 480,000 people working in social care by 2035 in order to keep pace with growing demand. In addition to this, there is an ageing workforce, and the possibility that we could lose a further 430,000 people from the workforce in the next 10-years (if social care workers aged 55 and over decide to retire)². Taking the above into consideration, it is clear that government support, funding and leadership is vital. Social Care needs to recruit people into the workforce and retain those workers more consistently and effectively.

Consistency of care is vital in social care. Having care workers that you have a relationship with, that you can trust, that know you and your care needs can be transformational for someone that draws on care and support. It allows better communication, and a greater understanding of what works for an individual and their loved ones. Ultimately, it leads to person centred and better care. Our members believe that relational care is a valuable model, and key to ensuring this model is a low turnover rate and retaining staff with the right values. Unfortunately, turnover rates, like vacancy rates, are high – with [Skills for Care](#) estimating that rates currently sit at 29%³. This means that

¹ Skills for Care "[State of the adult social care sector and workforce in England](#)" 2022

² Ibid.

³ Skills for Care "[Workforce Intelligence Data](#)" 2022

400,000 people left their jobs last year, but 63% are recruited from elsewhere within the sector. This brings significant costs to employers and impacts negatively on people receiving care and support.

3. Our response

The proposed care workforce pathway seeks to “address the challenges faced by the adult social care workforce in terms of recruitment, retention, and training” such as those highlighted above. In particular, it aims to explore ways to improve career progression, enhance workforce development, and ensure high-quality care for individuals receiving adult social care services. In the preparation of our response to the consultation, the NCF held a discussion session with the HR leaders from across our members as well as a dedicated webinar where we consulted our members. This consultation response reflects the views that providers shared during this session.

4. Moving in the right direction

NCF welcomes the attempt to produce a clear workforce pathway for adult social care. At present, misguided perceptions of care work as ‘low skilled’ continue to persist in the wider population, despite the pandemic highlighting just how vital and skilled care workers are⁴.

In light of this, the proposed pathway is a clear step in the right direction in terms of the professionalisation of the social care workforce and is a welcome move towards formalising what a ‘career’ in social care might look like. This move may go some way towards a) shifting wider perceptions of social care whilst b) supporting job satisfaction and outcomes in care. However, the pathway’s success will depend on a range of factors as detailed below.

5. Ensuring pay differentials – recognising skills with pay

Care and support providers are constrained in their ability as employers to offer more attractive pay, terms and conditions and maintain pay differentials which recognise and reward the attainment of additional skills, specialisms, and responsibilities - with one key constraint being the below operating cost prices that local authority and NHS commissioners pay care and support providers.

The proposed workforce pathway is silent on the crucial questions around pay. If the pathway is to be successfully implemented, then employers need guarantees that the fundamental issue of pay will be addressed. In particular, employers need reassurance that they will not be required to implement a structured career pathway without the ability to pay the differentials that recognise a worker’s journey of developing skills, specialisms, and additional responsibilities through the pathway.

As one of our members said at our consultation webinar: *“To attract people to take on these roles and responsibilities and to recognise their skills and experience, we must also provide appropriate compensation. While this may seem obvious, how can we secure the necessary funding to ensure that we don't overlook this critical aspect and jeopardize the success of this initiative?”*

The proposal has simply not addressed this crucial issue of pay and includes nothing on the need to ensure that care and support providers are able to offer more attractive pay, terms and maintain pay differentials which recognise and reward the attainment of additional skills, specialisms, and responsibilities.

⁴ Nuffield Trust [“New horizons: What can England learn from the professionalisation of care workers in other countries?”](#) 2022

As someone moves from ‘care and support practitioner’ to ‘advanced care and support practitioner’ to ‘senior care and support practitioner’ there is currently no proposed pay incentive for an individual to take on the roles’ additional risks, responsibilities, and training requirements. Care and support employers need absolute guarantees that Local Authority and NHS commissioners will be funded to and required to recognise the pay requirements and differentials of the care workforce pathway in the prices they pay to providers for care and support. As is, it is not clear how the government plans to enable care providers, as employers, to appropriately remunerate care workers for progressing their career.

Currently, the skills, knowledge, and expertise of social care workers are not reflected by the level of pay that they receive: 80% of jobs in the wider economy pay more than jobs in social care⁵. Compare this to NHS roles too and there is a significant difference, pay for the average care worker is £1 less per hour than a healthcare assistant in the NHS who is new to their role. At present, experience is also undervalued, [Skills for Care data](#) indicates that, on average, care workers with five years’ (or more) experience in the sector are only paid 7p per hour more than a care worker with less than one year experience⁶. Herein lies the fundamental challenge for social care employers, at present, care workers are faced with a difficult choice: either stay in social care where (on average) 5 years’ experience means you only get 7 pence *more* an hour than a care worker that has just started in their role, or leave social care and join the NHS where healthcare assistants who are new to their roles earn £1 an hour more than the average care worker.

6. The Care Workforce Pathway and the NHS Workforce

Another key area of concern is that the pathway, as described, does not seem to consider or future-proof an integrated health and care workforce; given the workforce pressures across the health and care systems, it is a missed opportunity. The care workforce pathway needs to be developed with conscious regard to how it can support a joint health and care workforce, developing roles that can work across both parts of the system and roles that can complement and maximise the capacity and productivity of the existing workforce. The pathway proposal does not, for example, map the proposed roles in social care against equivalent roles in health; doing so would give a good indication of how the pathway functions within a the joined-up health and care context. Similarly, the more we move towards integration, without a clear plan for social care in this integration, the more obvious it will become that care staff are getting paid less than what their equivalents do in the NHS.

Further clarity around how the social care workforce pathway will function in the context of broader policies is also necessary. For example, currently the DHSC is working alongside Skills for Care to develop a national framework for delegated healthcare activities which would further blur the lines between the health and the social care workforce⁷. As more of these blurred roles emerge within social care, clarity around what this means for the pathway is vital, not only in terms of pay differentials but also in terms of the skills and competencies. Where would a care worker undertaking a delegated activity fit in within the proposed career structure that the department has given?

⁵ Skills for Care “[State of the adult social care sector and workforce in England](#)” 2022

⁶ Ibid.

⁷ Skills for Care “[Delegated Healthcare Activities](#)” 2023

The issues we have raised in relation to pay, and integration are essential elements of the success of the care workforce pathway – their absence risks making the whole functioning of the pathway potentially meaningless.

The remainder of our concerns centre on the need for more detail, as it is currently difficult to comment on these aspects of the pathway because there is little detail about how the different elements will interact. For example, the call for evidence needs to explore how the pathway is intended operate at a system level in ICSs, but also at place and neighbourhood level. It would be helpful to have a more clarity on the specific details exploring the role statutory boards will play in supporting and enabling the implementation of any career progression pathway in local systems.

7. Care Certificates, Qualifications, and the Pathway

It also vital that the pathway addresses how it will work alongside wider workforce policy. For example, at present the proposal fails to detail how the pathway will sit alongside the other workforce announcements in [Next Steps to put People at the Heart of Care](#) including the implementation of a new care certificate qualification and a ‘skills passport’⁸. Before outlining what training/qualifications are necessary to advance along the pathways, more specific detail of the required skills and competencies for each role is needed.

Policy makers need to carefully consider whether the pathway aligns with other workforce ambitions including mandated training, learning and development ambitions and the standardisation of qualifications. Success of the pathway will hinge upon its whether it complements and supports the overall development of the social care workforce and ongoing efforts to upskill the workforce.

8. Ensuring a diverse range of roles

The pathway rather artificially only looks at certain frontline roles and doesn’t give detail on how it imagines diverse roles within adult social care or the flexibility that providers often grapple with, will fit within it. Nor does it give a sense of what progression to higher managerial roles might look like. Due to the challenges of guaranteeing pay differentials, employers have roles which are often a combination of the current roles in the pathway. Likewise, various local and smaller providers do not have the conventional and formally structured workforce that a large-scale provider organisation might – how does the pathway account for these differences in size and structure?

Perhaps more importantly, the needs of those that draw on care and support are not universal; they are specific to individuals. As such, staff that support people in social care should be able to follow an exciting, flexible, and diverse career path if they so wish and one that allows them to move between specialisms, combine roles, and forge their own career path of interest. This might be a role that focuses on community rehabilitation, or it may be a role with clinical specialism, or financial, or a research-oriented role.

As is, it is not clear enough how staff might specialise in a flexible way under the current pathway, nor is it apparent how the pathway intends to make a career in social care exciting and appealing.

⁸ Department for Health and Social Care “[Adult social care system reform: next steps to put People at the Heart of Care](#)” 2023

This is not to say providers wouldn't continue to enable these specialist roles, but that the pathway in its current form doesn't give enough detail to actually be helpful to these providers.

The pathway also needs to allow for flatter structures where staff can, not only move *up* to more senior roles in a hierarchical sense, but across to roles that interest them, and employers can support them to do so. This would ultimately lead to more tailored, person-centred support that meet individuals' needs. Ultimately, the pathway needs to comprehensively recognise the breadth of the roles that exist across social care, be ambitious about the roles that could exist and provide clarity around how this aligns with proposed roles.

9. Implementation Support for Care and Support providers

NCF's members invest significantly in learning and development opportunities for their staff, and training packages. In the not-for-profit care and support sector there is an engrained culture of looking after your staff and making a significant investment in their learning and development. We hear regularly from members of the NCF HR Forum about efforts made to recruit, train, and retain staff in social care. However, investment in learning and development carries a significant cost to providers which is increasingly difficult in the context of the government's decisions around reform.

Current levels of investment in learning and development have been undermined by the existing funding shortfall in social care – which is unsustainable and cannot continue. Any expectation that providers could and should bear the financial responsibility for the pathway's implementation would be misguided, particularly given the increased cost that the pathway will likely incur.

There is a lack of detail in the consultation documents as to whether the Government has made any funding available to support providers in the delivery and implementation of the proposed pathway. Infrastructure, restructuring, training, and HR systems will be vital to the success of the pathway, all of which require both initial financial investment as well as significant associated costs. Our members advise that the government needs to invest in social care and support providers in order to attract a diverse and skilled workforce to the different roles outlined in the proposed pathway. It should, in particular, help providers invest in the learning and development of their staff.

Investing in learning and development opportunities has been shown to be an effective way of recruiting and retaining staff and many of our members already do this, with significant amounts of resource devoted to high quality, effective training, and learning and development. Skills for Care discuss this in detail in their research on turnover; they asked employers with a turnover rate of less than 10% to consider what they believe contributed to their successful retention of staff. The most common activity that improved retention was "investing in learning and development" with 94% of those asked highlighting that it had had a positive impact⁹.

Clearly the care workforce pathway will bring a considerable number of new requirements and possibly new qualifications, and the care sector employers will need funding and support to implement this over time and a clear picture of how current training, learning and development, and qualifications map to the new pathway. It is imperative that the government delivers and ringfences funding for adult social care providers to implement the pathway to a level that accurately reflects

⁹ Skills for Care "[Recruitment and retention in adult social care: secrets of success](#)" 2017

the cost of delivery. Beyond the cost of implementing the pathway as is, there is a more fundamental question around pay that needs to be addressed.

10. Conclusion

The proposed pathway is a clear step in the right direction in terms of the professionalisation of the social care workforce and is a welcome move towards formalising what a ‘career’ in social care might look like. This move may go some way towards a) shifting wider perceptions of social care whilst b) supporting job satisfaction and outcomes in care. However, the pathway’s success will depend on a range of factors. Pivotal, the pathway needs to be funded appropriately if it is going to be a success. Funding is needed to ensure that care and support providers are able to offer more attractive pay, terms, and conditions to employees, as well as maintain pay differentials which recognise and reward the attainment of additional skills, specialisms, and responsibilities. Funding is also needed in terms of future-proofing the social care sector for an integrated health and care workforce. Beyond this, a great deal more detail is needed around the skills and competencies associated with each role, as well as how the pathway sits in the wider context of health and social care policy nationally.

Ultimately, the care workforce pathway should not be developed and implemented in isolation; it should sit as part of a wider strategy for the adult social care workforce. The NCF has repeatedly called for the government to commit to a fully funded, 10-year national workforce plan for adult social care which improves pay, terms, and conditions for the sector¹⁰.

¹⁰ National Care Forum [“NCF calls for ring-fenced funding to adult social care”](#) 2023