



of the adult social care sector and workforce in England, 2020

Acknowledgements

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This report was researched and compiled by Will Fenton, Gary Polzin, Roy Price, Rosy McCaffrey and Tanya Fozzard of our Workforce Intelligence team at Skills for Care. Feedback on any aspect of the report is welcomed and will improve future editions. Please contact our Workforce Intelligence team: analysis@skillsforcare.org.uk

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Foreword from our CEO

I'm delighted to introduce our annual 'Size and structure of the adult social care sector and workforce' report. This is the first time I've done so as Skills for Care CEO, but I know from my experience in the sector how important and valued this comprehensive report is as we all tackle some significant challenges.

This report is a key resource for thousands of employers, the Department of Health and Social Care (DHSC) who fund the Adult Social Care Workforce Data Set (ASC-WDS), the media and other policy makers as we monitor emerging trends in our growing workforce across England.

I've always believed that we can't make coherent decisions about our sector unless we have the sort of robust and reliable data this report offers. We have seen demand for this intelligence increase since the last report was published which reflects the much greater interest in social care at Westminster, in the media and with the general public. We know the data that employers provide to us has already proved vital in informing and shaping government policy, joint social care and health planning, local authority commissioning and the success of businesses operating in our ever-changing sector

Thousands of employers provide their data through ASC-WDS, and as ever we thank them for their continued support without which this report simply wouldn't be possible. Increasingly, those organisations recognise the benefits that using the ASC-WDS service and sharing data brings both to them as a service provider by providing them with an accessible platform to support their staff development, and by being part of a data set which strategically influences the sector as it continues to evolve to meet demand.



We've made it easier for employers and policy makers to use the data provided in this report via our data visualisations that help them understand more about different geographies or service types.

Whilst this data was collected before COVID-19 struck, this report is a reminder that we have a large and growing workforce, and their needs have to be taken into account as we share what the sector looks like post pandemic.

I'd also like to take this opportunity to pay tribute to the professionalism and sacrifice of our workforce who have worked so hard during the most challenging times our sector has ever faced.

I hope you will use the data in this report to shape how your organisation responds to the post pandemic world.

This report could not have been published at a more opportune time as we begin to consider what our sector will look like now and into the future. Having access to high quality data at our fingertips means we will make decisions that will help make sure people who access care and support services can live the lives they want to which is our number one priority.

Oonagh Smyth CEO, Skills for Care

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Introduction



Introduction

We have produced this report to provide a comprehensive overview of the size and structure of the adult social care sector and workforce in England as at 2019/20.

The report drew on several data sources to produce estimates to inform this overview. The majority of detail was drawn from the Adult Social Care Workforce Data Set (ASC-WDS). The ASC-WDS is an online data collection service which gathers information about the adult social care workforce in England. The service was formerly known as the National Minimum Data Set for Social Care (NMDS-SC). For more information about the ASC-WDS please visit the Workforce Intelligence website1.

Summary of key findings

Employers

- An estimated 18,200 **organisations**₂ were involved in providing or organising adult social care in England as at 2019/20.
- An estimated 38,000 establishments₃ were involved in providing or organising adult social care in England as at 2019/20.
- It is estimated that approximately 70,000 (31%) direct payment recipients⁴ were employing their own staff in 2019/20.

Workforce size

- The number of adult social care jobs in England as at 2019/20 was estimated at 1.65 million.
- The number of adult social care jobs was estimated to have increased by around 1% (17,000 jobs) between 2018/19 and 2019/20.
- Since 2012/13, the number of adult social care jobs has increased by 9% (130,000 jobs).
- The rate of increase for adult social care **jobs** has slowed between 2014/15 and 2019/20, the workforce grew by around 15,000 jobs per year compared to an average increase of 26,000 per year between 2012/13 and 2014/15.
- The number of full-time equivalent (FTE) jobs was estimated at 1.16 million.
- The number of **people working in adult social care** was estimated at 1.52 million.

Workforce structure

- Since 2012/13, the workforce has continued to shift away from local authority jobs (a decrease of 25%, or 37,000 jobs) and towards independent sector jobs (an increase of 11%, or 130,000 jobs).
- The number of jobs in domiciliary services increased at a faster rate between 2012/13 and 2019/20 (an increase of 95,000 jobs or 15%) than jobs in residential services (an increase of 25,000 jobs or 4%)
- Registered nurses were one of the only job roles in adult social care to see a significant decrease over the period (down 15,500 or 30% since 2012/13).

Workforce forecasts

If the adult social care workforce grows at the same rate as the projected number of people aged 65 and over in the population, then the number of **adult social care jobs** will increase by 32% (or by 520,000 jobs) to around 2.17 million jobs by 2035.

2 The total number of PAYE or VAT-registered whole organisations (i.e. enterprises). See Section 2 for definitions.

¹ www.skillsforcare.org.uk/adult-social-care-workforce-data/Workforce-intelligence

³ The total number of PAYE or VAT-registered establishments (i.e. local units). See Section 3 for definitions.

⁴ Estimates of the number of direct payment recipients employing staff and estimates of the number of jobs in this area should be treated with caution. See Section 4.

COVID-19 note

It should be noted that the data used in this report for 2019/20 was collected prior to the height of the COVID-19 pandemic in England. The ASC-WDS data used for the 2019/20 period was collected over the course of the year (April 2019 to March 2020). We carefully analysed data submitted in March 2020 to ensure it did not significantly impact the findings.

Therefore, this report does not show how COVID-19 has impacted the adult social care workforce. Rather it should be used as a baseline to reflect the composition of the workforce **prior to COVID-19** and to give context to any further research or data collected after March 2020.

We are analysing ASC-WDS data on a monthly basis to monitor the impact of COVID-19 on the sector and workforce. The outputs from this analysis can be found on the COVID-19 section of our Workforce Intelligence website⁵. At the time of publication, analysis of ASC-WDS data indicated the following:

Sickness

The average number of days lost to sickness was around 8.0% between March and June 2020, compared to 2.4% pre-COVID-19. Sickness days will include those self-isolating and shielding as well as those who were unwell (including COVID-19 and non-COVID-19 related illness).

Staff vacancies

The staff vacancy rate of employers updating ASC-WDS data between March and June 2020 was 6.6%. This figure was lower than before COVID-19 when the rate was around 8.3%.

A reduction in the demand for services is likely a contributing factor for this decrease in vacancies. Skills for Care survey data in May 2020 found that 46% of responding employers were experiencing a decrease in demand, alongside evidence of falling occupancy rates in care homes.

Total staff

At the time of writing, there was no evidence that the reduction in demand had resulted in a reduction in the number of people working in the sector. Based on employers updating ASC-WDS between March 2020 and June 2020, there were just as many reporting an increase in staff numbers as those reporting a decrease.

We will continue to monitor these trends, and other workforce trends, over the coming months and will make them available on our Workforce Intelligence website₅.

Please note the analysis in this COVID-19 section covers only those employers who have updated ASC-WDS data since March 2020. The remainder of this report uses weighted and modelled figures to represent the adult social care sector as a whole.

Change of methodology

Please note that we changed the time period that we cut the ASC-WDS data for this report in order to allow data to be published closer to the time period it references.

The previous report used ASC-WDS (formerly NMDS-SC) data as at September 2018 and the figures were referred to throughout as 2018.

For this report we have used local authority data as at September 2019 (the latest available) and independent sector data as at March 2020 and the figures will be referred to as 2019/20.

Previous figures were also changed retrospectively to match these time periods and published in this report. As such, all trend information should be taken from this report rather than referred back to/compared with previous versions.

This change is designed to improve the timeliness of our reporting and to give readers a more up-to-date picture than the previous methodology.

Organisations



Number of adult social care organisations (enterprises)

The total number of PAYE or VAT-registered whole organisations (enterprises) involved in providing or organising adult social care in England as at 2019/20 was estimated at **18,200.**

The definition of organisations ranges from large national employers, large charities, and local authority adult social services departments, to small independent care homes. For example, a large company running multiple care homes would count **once** in these figures.

The estimates do not include individuals employing their own care and support staff (see Section 4 – Individual employers) or non-CQC establishments that are not registered for PAYE or VAT, such as some sole traders and individuals who are self-employed.

We have confidence in the quality of these estimates. However, it should be noted that non-CQC-regulated organisations were only included if they were coded under social-care-specific SIC codes in ONS's IDBR. Some assumptions and estimations were necessary to remove any children's establishments and non-social care organisations incorrectly coded under social care SIC codes (see Appendix 1 for more detail about the methodology).

Table 1 shows a breakdown of the number of organisations by service type and organisation size.

Table 1. Number of adult social care organisations in England by service type andsize, 2019/20

Source: Skills for Care estimates in 2020 and ONS IDBR data from 2019

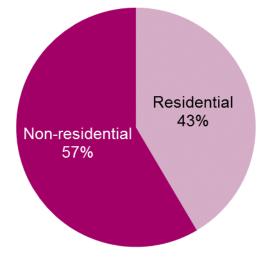
		Size group (employees)						
Service type	Total	1 - 4	5 - 9	10 - 19	20 - 49	50 - 99	100 - 249	250 +
Residential services (SIC2007 87)	7,800	2,300	650	1,200	2,000	1,000	425	275
Non-residential (SIC2007 88)	10,500	4,600	1,900	1,600	1,200	550	325	150
Total adult social care	18,200	6,900	2,500	2,800	3,200	1,600	750	425
Total adult social care (%)		38%	14%	15%	18%	9%	4%	2%

Columns may not sum to totals due to rounding

Chart 1 shows that 57% of adult social care organisations were providing non-residential services and 43% were providing residential services.

Chart 1. Proportion of adult social care organisations in England by service type, 2019/20

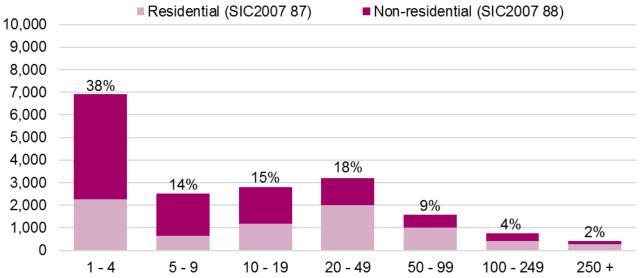
Source: Skills for Care estimates from 2020 and ONS IDBR data from 2019



In terms of size, Chart 2 shows that the majority of adult social care organisations were micro (1 to 9 employees) or small (10 to 49 employees). Around 38% of organisations had 1 to 4 employees and around 85% had fewer than 50 employees.

Chart 2. Estimated number of adult social care organisations in England by size group (number of employees), 2019/20

Source: Skills for Care estimates from 2020 and ONS IDBR data from 2019



Organisations that were large (250+ employees) made up just 2% of the total. The average number of jobs at these organisations was over 1,100 and some organisations employed up to 20,000 members of staff. It is estimated that large organisations (250+ employees) employed almost half (approximately 49%) of the total adult social care workforce as at 2019/20.

Trend data – adult social care organisations

The coverage of the IDBR was extended in 2015/16 to include more micro organisations (with 1 to 4 employees) than were included in previous years. As such, a precise trend between 2014/15 and 2019/20 was not available.

This section focusses specifically on those organisations with 5 or more employees (60% of the total) to allow for trends to be examined.

Table 2 shows that the number of adult social care organisations (with 5 or more employees) increased steadily between 2012/13 and 2015/16, from 11,150 to 11,850 organisations (a 6% increase). However, between 2015/16 and 2019/20 the number of adult social care organisations (with 5 or more employees) decreased by 5%. In 2019/20, there was little change (-0.1%) in the number of organisations.

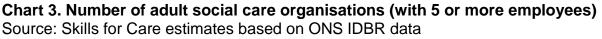
Overall, the number of organisations (with 5+ employees) remains at a similar level in 2019/20 as it was in 2012/13 (increasing by 150 or 1% over the period).

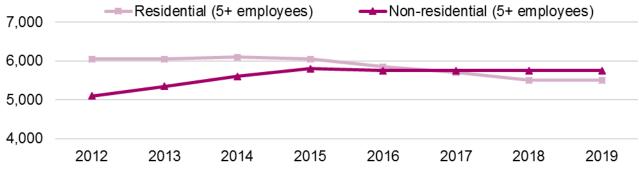
Year	Residential	% change	Non-residential	% change	All organisations (5+)	% change
2012/13	6,050		5,100		11,150	
2013/14	6,050	0.3%	5,350	4.2%	11,400	2.1%
2014/15	6,100	0.6%	5,600	5.5%	11,700	2.9%
2015/16	6,050	-1.0%	5,800	3.3%	11,850	1.0%
2016/17	5,850	-3.3%	5,750	-0.7%	11,600	-2.1%
2017/18	5,700	-1.9%	5,750	-0.4%	11,450	-1.2%
2018/19	5,500	-3.4%	5,750	0.7%	11,300	-1.4%
2019/20	5,500	0.1%	5,750	-0.3%	11,300	-0.1%
Total	-550	-8%	650	13%	150	1%

 Table 2. Number of adult social care organisations (with 5 or more employees)

 Source: Skills for Care estimates based on ONS IDBR data

The decrease in organisations between 2015/16 and 2019/20 was largely driven by a reduction in the number of residential organisations (a decrease of 550). The number of non-residential organisations decreased by 50 over the same period. The number of residential organisations is now below 2012/13 levels at around 5,500, after increasing to 6,100 by 2014/15. In contrast, the number of non-residential organisations has increased substantially over the period by 650 organisations (an increase of 13%).





Establishments



Number of adult social care establishments (local units of employment)

The total number of PAYE or VAT-registered establishments (i.e. 'Local units') involved in providing or organising adult social care in England as at 2019/20 was estimated at **38,000.**

The definition of 'Establishments' used in this section includes *all* local units of employment as opposed to including *only* those whole organisations counted in the previous section. For example, each individual care home within a large, care-providing organisation will have been counted in this section, whereas only the care-providing organisation *as a whole* will have been counted in the previous section.

Table 3 shows a breakdown of the 38,000 adult social care establishments in England as at 2019/20. It shows that around 15,500 of these establishments were Care Quality Commission (CQC) regulated and were offered residential services. The service types included in this category were: care homes with nursing (4,350), care-only homes (11,100) and Shared Lives services (135).6

Approximately 3,800 non-CQC regulated establishments were also offering residential services. This category included: homeless shelters, women's refuges, drug and alcohol support centres and a diverse range of other residential services.

There were around 10,000 CQC regulated non-residential establishments. The service types included in this category were: domiciliary care services (9,500), Supported Living services (1,750), Extra Care housing services (500) and nursing agencies (150).5

Approximately 8,500 non-CQC regulated establishments offered non-residential services. This category included: day care, carers' support services and a wide range of community support and outreach services for vulnerable people.

Table 3. Estimated number of adult social care establishments in England byservice type, 2019/20

Source: Skills for Care estimates based on CQC and IDBR data

Service type		Count	Percentage
	CQC regulated	15,500	41%
Residential	Non-CQC regulated	3,800	10%
	Total	19,500	51%
	CQC regulated	10,000	27%
Non-residential	Non-CQC regulated	8,500	22%
	Total	18,500	49%
Total - estimated PA	38,000		

⁶ Establishments may have been offering multiple services; therefore, the sum of the individual services may not add up to the total number of establishments.

Chart 4 shows a relatively even split between residential and non-residential establishments.

Chart 4. Estimated proportion of adult social care establishments in England by service type, 2019/20

Source: Skills for Care estimates based on CQC and IDBR data

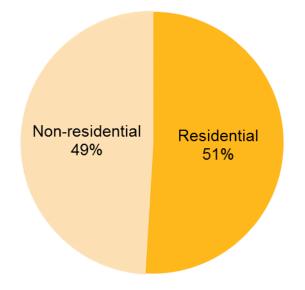
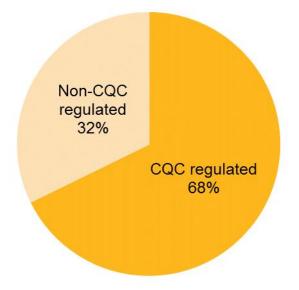


Chart 5 shows that around one-third of adult social care establishments were non-CQC regulated. The majority of these non-regulated establishments offered non-residential services (see Table 3).

Chart 5. Estimated proportion of adult social care establishments in England by regulation status, 2019/20

Source: Skills for Care estimates based on CQC and IDBR data



Trend data – adult social care establishments

The coverage of the IDBR was extended in 2015/16 to include more micro establishments (with 1-4 employees) than were included in previous years. As such, a precise trend between 2014 and 2019 was not available.

This section focuses on CQC regulated establishments only - these are unaffected by IDBR data (68% of the total) and therefore allow trends to be examined.

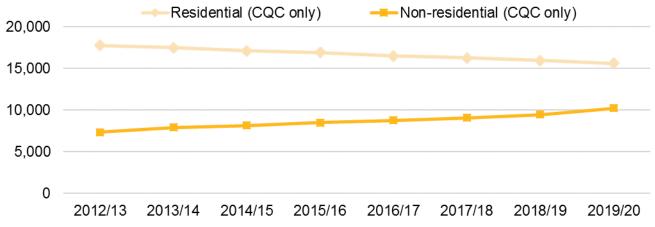
The number of CQC regulated adult social care establishments increased by around 700 (an increase of 3%) between 2012/13 and 2019/20. The increase was also relatively large (380 establishments, or 1.5%) between 2018/19 and 2019/20.

Table 4. Number of CQC regulated adult social care establishments, 2012/13-2019/20Source: Skills for Care estimates and CQC data

Year	Residential	% change	Non-residential	% change	All establishments	% change
2012/13	17,750		7,350		25,100	
2013/14	17,500	-1.2%	7,900	7.0%	25,400	1.2%
2014/15	17,100	-2.3%	8,150	3.4%	25,250	-0.6%
2015/16	16,900	-1.3%	8,500	4.1%	25,400	0.5%
2016/17	16,500	-2.3%	8,750	3.0%	25,250	-0.5%
2017/18	16,250	-1.7%	9,050	3.7%	25,300	0.2%
2018/19	15,950	-1.8%	9,450	4.5%	25,400	0.4%
2019/20	15,600	-2.2%	10,200	7.8%	25,800	1.5%
Total	-2,150	-12%	2,850	38%	700	3%

Chart 6 shows the change in the number of CQC regulated adult social care establishments between 2012/13 and 2019/20 by service type. The chart shows that the number of non-residential CQC regulated establishments increased by 2,850 over the period (an increase of 38%), whereas the number of residential CQC regulated establishments decreased by 2,150 establishments (a decrease of 12%). This trend continued between 2018/19 and 2019/20.





The reason for this shift may be related to the government policy of promoting independence for people who have care and support needs. For example, the increase in non-residential care establishments may be a result of the flexibility offered by personal budgets, with more people choosing care options that support them to continue to live at home.

Analysis of CQC data going back to 2012/13 shows that the total capacity for residential care homes remained fairly stable over the period, despite the decrease in the number of establishments. This suggests that the decrease in residential establishments may have been due to a consolidation in this part of the sector, whereby a similar amount of care was being provided, but by a smaller number of establishments.

In addition to this, ASC-WDS data shows that the average number of staff employed per residential care home has **increased** since 2012/13 and that the total number of jobs for residential services has **increased** over the period (see Section 6 - Trends). The average number of jobs per bed has also **increased** over the period, suggesting a higher level of dependency in those using such services. Again, this points to a consolidation in this part of the sector, rather than a genuine decrease in activity.

It remains to be seen if COVID-19 will have an impact on the demand for different types of care in the medium and long term.

Notes on establishment estimates

The preceding estimates for establishments include all CQC regulated locations registered as 'social care' by the CQC as at March 2020. Also included are our estimates, created using the Inter-Departmental Business Register (IDBR) from 2019, of the number of non-CQC regulated establishments.

These estimates do not include individuals employing their own care and support staff (see Section 4 – Individual employers) or non-CQC establishments which are not registered for PAYE or VAT, such as some sole traders and individuals who are self-employed.

We are confident in the quality of these estimates. However, it should be noted that non-CQC establishments were only included if they were coded under social care-specific SIC codes in the ONS' IDBR. Also, some assumptions and estimations were necessary to remove any children's establishments and non-social care establishments incorrectly coded under social care SIC codes (see Appendix 1 for more detail about this methodology).

Individual employers (Direct payment recipients employing their own staff)



Direct payment recipients employing their own staff

It is estimated that approximately 70,000 (31%) direct payment recipients were employing their own staff in 2019/20.

The direct payment recipient market is still relatively new and has continued to evolve over recent years. Evidence suggests that the total number of people using their direct payments to employ staff has reached a plateau since 2013 (at around 30%), having previously been increasing substantially since 2008. Many direct payment recipients are buying in the services they require rather than directly employing staff.

The focus of this section is on the proportion of people in receipt of a direct payment that employs workers themselves. We used the data to estimate the number of jobs which involved working for direct payment recipients and, in turn, to estimate the total size of the adult social care workforce. We also collected detailed workforce statistics about these employers and their personal assistants. These findings can be found on the Workforce Intelligence website⁷.

Chart 7 shows that, as at 2019/20, an estimated 31% of direct payment recipients were employing their own staff. Almost all of these employers were receiving direct payments for their own care and support needs (around 47% of the 160,000 people receiving a direct payment for their own care and support needs were employing staff). Around 80,000 carers also received a direct payment. The majority of these payments were 'one-off payments' used for short breaks and respite services, rather than to employ staff.

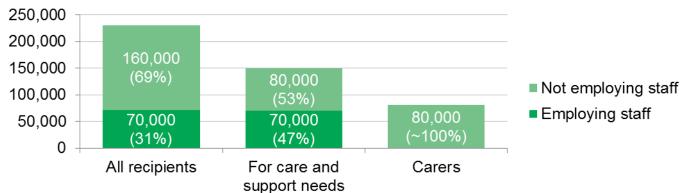


Chart 7. Estimated percentage of direct payment recipients employing staff, 2019/20 Source: NHS Digital data and Skills for Care estimates

These estimates are based on data from the Association of Directors of Adult Social Services (ADASS) Annual Budget survey in 2020 (sample size 109) and on previous Skills for Care research. As responses were not received from all councils, we used a 95% confidence interval to estimate the range for the proportion of direct payment recipients employing staff at between 29% and 33%.

7 www.skillsforcare.org.uk/IEPAreport

Trends in direct payment recipients employing their own staff

The total number of direct payment recipients employing their own staff was estimated, by Skills for Care, to have remained stable between 2014/15 and 2019/20 at around 70,000.

After a fairly slow uptake when it was first introduced, the total number of direct payment recipients increased rapidly between 2008 and 2014. A directly comparable trend for between 2014 and 2015 is not available because NHS Digital changed the data source for collecting this information in 2015 and the two sources are not directly comparable. Between 2018 and 2019, the number of direct payment recipients decreased from 237,000 to 230,000.

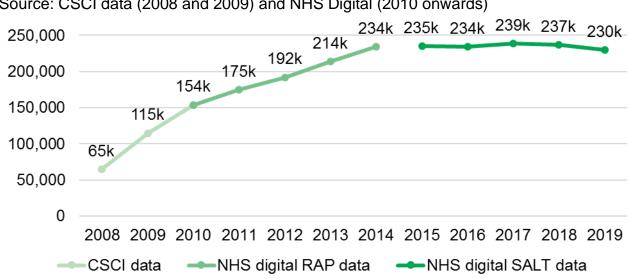


Chart 8. Number of direct payment recipients 2008-2019

Source: CSCI data (2008 and 2009) and NHS Digital (2010 onwards)

Chart 9 provides an estimated trend of the proportion of direct payment recipients that were employing staff between 2008/09 and 2019/20. This trend should still be valid between 2014/15 and 2015 onwards. One of the main reasons identified for lack of comparability between years was the absence of people receiving 'one-off' payments for their care and support needs in 2015. This group were unlikely to have employed staff (in a survey we carried out with local authorities, only 2% of this group were employing staff).

These estimates are based on surveys of local authorities we conducted at Skills for Care in 2014/15 and 2015/16, as well as data from the Association of Directors of Adult Social Services (ADASS) Annual Budget survey in 2018/19 and 2019/208, which asked what proportion of direct payment recipients were employing staff in each area.

The figure for 2008/09 (49%) is the result of our analysis of a survey carried out by the Social Policy Research Unit in 2008/09 (the 2008/09 figure comes with a degree of

8 Sample sizes 47, 33, 92 and 109 respectively, of 150 local authorities.

uncertainty: taking into account the confidence interval, we estimate a range between 41% and 57%).

The difference between the 2008/09 (49%) and 2014/15 (31%) estimates provides statistical evidence that the proportion of direct payment recipients employing staff decreased throughout this period.

Using the results of all of these surveys, we created updated models to estimate the proportion of direct payment recipients employing staff from 2008/09-2019/20. These models assume that the change in the proportion of direct payment recipients employing staff occurred proportional to the total number of direct payment recipients between each survey period. Chart 9 highlights these trends.

Chart 9. Estimated proportion of direct payment recipients employing their own staff Source: Skills for Care estimates

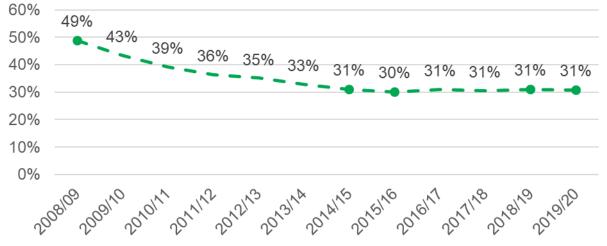
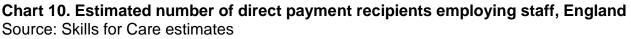
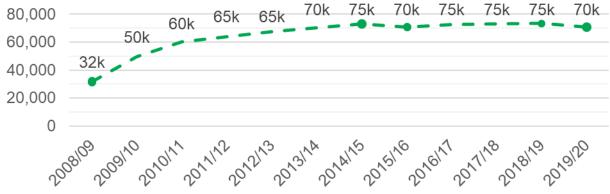


Chart 10 shows that the total number of direct payment recipients employing staff is estimated to have increased between 2008/09 and 2019/20. The total number of direct payment recipients employing their own staff appears to have reached a plateau, with the total number remaining at a similar level (between 70,000 and 75,000) between 2014/15 and 2019/20.





We plan to continue carrying out research in this area which will be used to inform next year's report.

Other individuals employing their own staff

Personal budget holders who do not receive direct payments

In 2019, NHS Digital data showed that there were around 504,000 people receiving longterm support via a personal budget or direct payment. Of these, around 150,000 (30%) were receiving direct payments, as covered in the previous section₉. The remaining 355,000 (70%) were not receiving direct payments.

The majority of those personal budget holders who did not receive direct payments will have had their care and support workers included in other parts of the workforce in this report, as many budget holders purchase their care from domiciliary care providers.

The number of people receiving personal budgets has increased in recent years. This could be linked to the growth in the number of non-residential services in the sector. It could also be the case that more people are choosing care options that support them to continue to live at home (see Section 3 - Establishments).

Any workers employed by personal budget holders **not** in receipt of a direct payment (as opposed to workers provided by an agency) are **not** covered in this report. However, it is assumed that this figure is relatively small.

Self-employed personal assistants

Using the data collected from local authorities in 2015/16, several hundred direct payment recipients were recorded as using 'self-employed' personal assistants. These direct payment recipients have been included as 'employing staff' for the purposes of this report.¹⁰

Self-funders and other funding streams

There is very little information available about the number of individuals employing care and support staff via other funding streams or as self-funders and therefore this part of the workforce is **not** covered in this report.

However, as with personal budget holders who are not in receipt of direct payments, care and support workers of those purchasing care from agencies (via other funding streams or as self-funders) will have been captured within other parts of the workforce in this report.

9 These figures do not include people receiving 'one-off' payments or carers.

10 Under most circumstances HMRC consider personal assistants to be employees and not self-employed.

Workforce



Overview of data sources

This section provides estimates of the number of jobs, full-time equivalent jobs and people employed in the adult social care workforce in England as at 2019/20.

Below is a brief overview of the data sources used to create these estimates. For a detailed description of the methodologies used and for a review of the data quality, see Appendix 1.

Independent employers (i.e. all commercial and not-for-profit employers)

Estimates of the total number of available jobs working for independent employers were made using the Adult Social Care Workforce Data Set (ASC-WDS) as at March 2020 (for example the 2019/20 figures contain March 2020 independent sector data). ASC-WDS data was used to model the number of jobs offered by different types, sizes and locations of establishments. These models were then used to estimate the total number of jobs in all independent adult social care operations in England.

Local authorities

Since 2011, the ASC-WDS (previously known as NMDS-SC) has been used to provide figures on the size of this part of the workforce (in 2011, the NMDS-SC replaced the SSDS001 as the adult workforce data return for local authorities). From 2012/13 to 2019/20 all local authorities completed the ASC-WDS, allowing for very accurate figures to be produced₁₁. These figures are collected as at September each year (for example the 2019/20 figures contain September 2019 local authority data).

Direct payment recipients

Estimates of the number of workers employed by direct payment recipients were calculated using various data sources including NHS Digital data and additional Skills for Care research projects. Please see Appendix 1 for a detailed description of the methodology used.

NHS

The number of adult social care related jobs employed within the NHS (for example, occupational therapists) have been included using NHS workforce statistics (September 2019) published by NHS Digital.

Unpaid carers

Whilst unpaid carers play a major role in adult social care, they are not usually included in employment statistics and are therefore not included in the workforce estimates in this report. Latest figures, published by Carers UK in 2019, estimated that there are 8.8 million adults providing care in the UK₁₂.

A detailed report published by NHS Digital using NMDS-SC data on staff employed by adult social services departments can be found at https://digital.nhs.uk
 https://www.carersuk.org/images/Facts_about_Carers_2019.pdf

Number of adult social care jobs

The number of adult social care jobs in England as at 2019/20 was estimated at **1.65 million.**

Type of employer

Table 5 shows that over three quarters (79%) of jobs in adult social care were with independent employers. Jobs in local authorities accounted for 7% of all jobs and adult social care jobs in the NHS₁₃ accounted for 6% of the total.

The proportion of the workforce employed by direct payment recipients accounted for 8% of all jobs. This estimate should be treated with some caution given the uncertainty surrounding the estimated number of direct payment recipients employing their own staff (see Section 4 – Individual employers). In addition, there is some uncertainty around the average number of workers employed by each of these direct payment recipients (estimated at approximately 1.9 jobs per individual employer).

Given this uncertainty we estimate, using confidence intervals, that the number of jobs working for direct payment recipients is likely to be between 131,000 and 143,000 and therefore 8% to 9% of the total number of jobs (see Appendix 1 for further details).

Table 5. Estimated number of adult social care jobs by employer type in England,2019/20

Source: Skills for Care estimates

Employer type	Number of jobs	Percentage of jobs
Independent	1,295,000	79%
Local authority	113,200	7%
Jobs for direct payment recipients	135,000	8%
NHS	102,000	6%
Total	1,650,000	

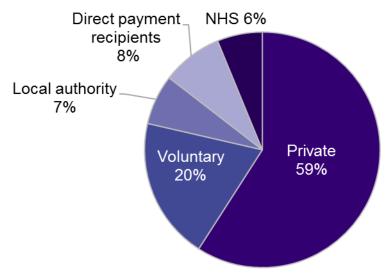
Since 2012/13, the employer type distribution has changed considerably. The sector has seen a shift away from local authority jobs (10% of the workforce in 2012/13) and towards jobs working for independent employers (77% in 2012/13). For more detail see Section 6 - Trends.

Jobs working for independent employers could not be accurately split into 'private' and 'voluntary' as they were in previous years as this information is not reported by the Care Quality Commission (CQC). Estimates from ASC-WDS suggest that approximately 59% (975,000) of the jobs working for independent employers were in private establishments

¹³ The following NHS jobs were classified as 'adult social care' jobs for the purposes of this report: occupational therapists, occupational therapy support staff, healthcare assistants and social service staff (qualified and support).

(around 59% of all jobs) and 25% (320,000) were in voluntary establishments (around 20% of all jobs), as shown in Chart 11.

Chart 11. Percentage of adult social care jobs in England by employer type, 2019/20 Source: Skills for Care estimates



Main service

Table 6 and Chart 12 show a breakdown of adult social care jobs by main service group. The majority of jobs were split between residential and domiciliary employers (just over 40% each), while 2% of jobs were in day care services and 13% were community based.

Table 6. Estimated number of adult social care jobs by service in England, 2019/20)
Source: Skills for Care estimates	

Main service group	Number of jobs	Percentage of jobs
Residential	680,000	41%
Domiciliary	715,000	43%
Day	35,000	2%
Community	220,000	13%
Total	1,650,000	

Chart 12. Percentage of adult social care jobs in England by main service, 2019/20 Source: Skills for Care estimates

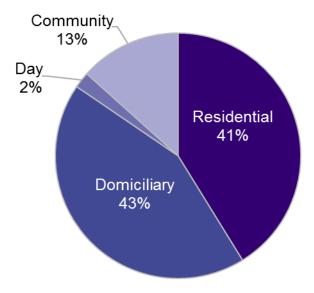


Chart 13 provides a more detailed split of the 680,000 residential adult social care jobs. This category includes CQC regulated care-only homes (310,000 jobs), CQC regulated care homes with nursing (285,000 jobs) and 10,000 jobs for CQC regulated Shared Lives services¹⁴. There were also around 72,000 jobs for non-CQC regulated residential services.

Chart 13. Estimated number of adult social care jobs, residential, England, 2019/20 Source: Skills for Care estimates

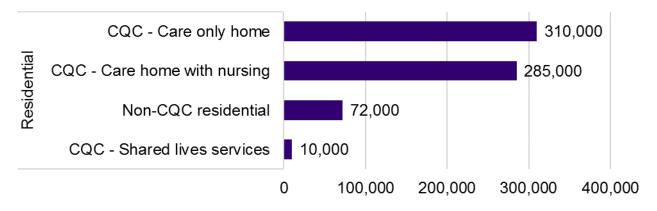


Chart 14 shows a breakdown of the 715,000 domiciliary adult social care jobs. It highlights that 560,000 of these jobs were in CQC regulated locations. This included 520,000 jobs in locations offering the CQC regulated 'domiciliary care' service, 120,000 in locations offering 'Supported Living services', 29,000 in locations offering 'Extra Care housing

14 This estimate includes self-employed carers and draws on data published by Shared Lives Plus.

services' and 12,000 in locations operating a nursing agency.15 Around 16,500 jobs were in non-CQC regulated services, such as domestic services, home-help and meals on wheels services. Around 135,000 involved jobs working for direct payment recipients.

Chart 14. Estimated number of adult social care jobs, domiciliary care, England, 2019/20

Source: Skills for Care estimates

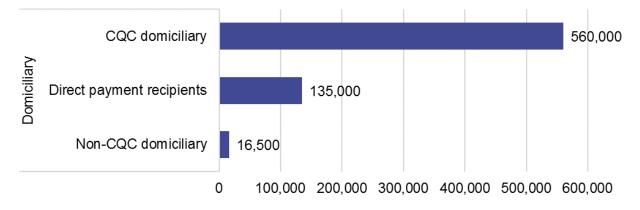
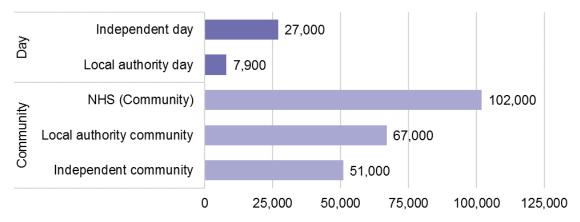


Chart 15 shows that of the 35,000 adult social care jobs in day care services, approximately 27,000 workers (78%) were employed by independent employers and 7,900 (22%) by local authorities.

The chart also provides a breakdown of the 220,000 community-based adult social care jobs. This category includes a wide range of services, such as carers' support services, organisation of short breaks and respite care, community support and outreach services, disability adaptations and assistive technology services, occupational and employment-related services and information and advice services. An estimated 51,000 (23%) of these workers were employed by independent employers, 67,000 (30%) by local authorities and 102,000 (46%) within the NHS.

Chart 15. Estimated number of adult social care jobs, day and community care, England, 2019/20

Source: Skills for Care estimates



¹⁵ CQC regulated locations can offer more than one service therefore individual services may sum to more than the total.

Job role groups

Table 7 shows that around three-quarters of adult social care jobs involved the provision direct care (76%). This group includes care workers, senior care workers, support workers, those working for direct payment recipients and a range of other jobs involved in providing direct care and support.

Managerial and supervisory roles accounted for 7% of jobs. This group included: senior managers, middle managers, line managers, registered managers and other managerial roles not directly involved in providing care.

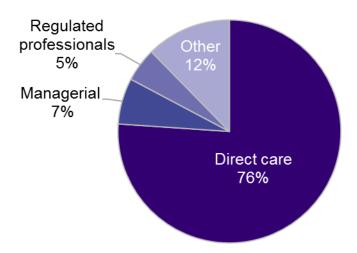
Regulated professions accounted for 5% of jobs. This group included several rather different jobs which all require a professional qualification. The jobs included in this category were: social workers, occupational therapists, registered nurses, safeguarding and review officers and allied health professionals.

Jobs that fell into the 'Other' category accounted for 12% of jobs. This category included: administrative jobs, ancillary jobs (for example, catering, cleaning, transport, and maintenance roles) and other jobs not directly involved in providing care.

Table 7. Estimated number of adult social care jobs by job role in England, 2019/20	
Source: Skills for Care estimates	

Job role group	Total jobs	Percentage of jobs
Direct care	1,250,000	76%
Managerial	110,000	7%
Regulated professionals	81,000	5%
Other	203,000	12%
Total	1,650,000	

Chart 16. Percentage of adult social care jobs in England by job role, 2019/20 Source: Skills for Care estimates



Individual job roles

This section provides a more detailed breakdown of the adult social care workforce in terms of the types of job roles involved.

Chart 17, on the following page, shows a breakdown of the number of jobs in the sector by job role. The size of each rectangle is proportional to the number of jobs in each particular role and the rectangles are shaded according to the job role group that each role corresponds to (direct care, managerial, regulated profession or other).

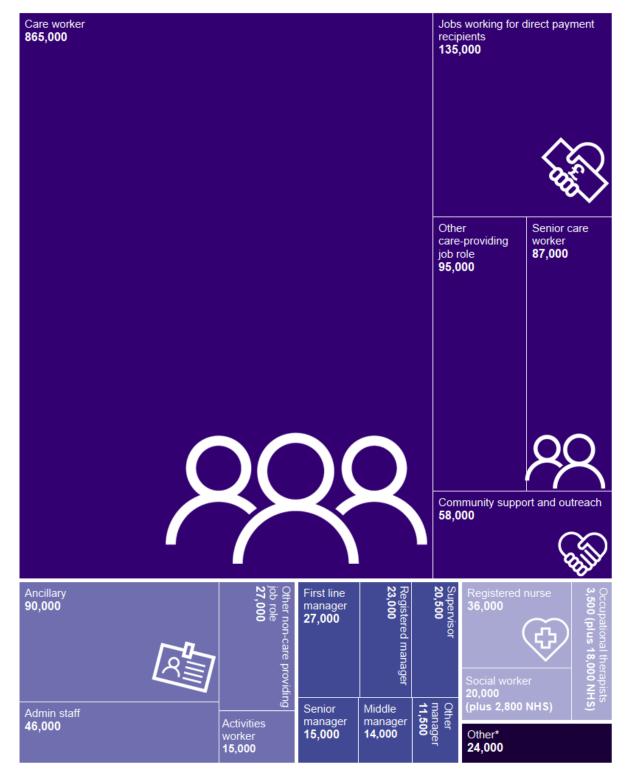
The chart shows that 'Care worker' was by far the most common job role in the adult social care sector, with an estimated 865,000 of these roles being carried out as at 2019/20. Care workers accounted for over half (53%) of all jobs in the adult social care sector. It also shows that 'Jobs working for direct payment recipients' (135,000) was the second most common job role and 'Ancillary' jobs the third most common (90,000).

In Chart 17, the 'Other' category included 11 job roles that were estimated to have fewer than 5,000 jobs. This included roles such as allied health professionals, occupational therapy assistants and advice, guidance and advocacy roles.

For job role trends, please see Section 6 – Trends.

Chart 17. Estimated number of adult social care jobs by individual job roles in England, 2019/20

Source: Skills for Care estimates



* 'Other' includes 11 job roles where it was estimated there were fewer than 10,000 jobs.

Regulated professions

The sub-sections below focus on the three main regulated professions in the adult social care sector. Although these roles make up a relatively small proportion of the total adult social care workforce, they are vital in terms of the success of the social care system and also in terms of integrated health and social care planning and delivery.

Registered nurses

As at 2019/20, there were an estimated 36,000 registered nurse jobs in the adult social care sector. The majority of these jobs were in care homes with nursing in the independent sector (33,000) and around 1,600 involved working for independent sector non-residential care providers. This figure does not include registered nurse jobs in the NHS.

Occupational therapists

There were 3,500 occupational therapists identified as working in adult social care settings (2,900 of which were employed by local authorities), with at least a further 600 qualified occupational therapists working in a range of other practitioner or management roles (other than designated occupational therapist posts). Although the majority of occupational therapists work within adult social care, their roles will also involve assessing the needs of disabled children. There are 18,000 occupational therapist roles identified as working within the NHS.

Social workers

As at 2019/20, there were an estimated 20,000 social worker jobs in the adult social care sector. The majority of these jobs (17,500) involved working for local authorities, around 2,000 were in the independent sector. Data from NHS Digital shows that there were also around 2,800 social worker jobs in the NHS. As with occupational therapists, these jobs have been included as they are considered to be related to the delivery of social care.

Employment type

Table 8 shows that 94% of adult social care jobs were filled by directly employed workers (permanent or temporary). Around 6% of jobs were not filled by directly employed workers. This includes bank and pool workers, agency staff, volunteers and students.

Table 8. Estimated number of adult social care jobs by employment type in England,2019/20

Source: Skills for Care estimates

	Number of jobs	Percentage of jobs
Directly employed	1,505,000	94%
Permanent	1,455,000	90%
Temporary	50,000	3%
Not directly employed	140,000	6%
Total	1,650,000	

It should be noted that the ASC-WDC is completed as a 'snapshot in time' and therefore these estimates should be interpreted as an indication of the average number of each type of worker being utilised at any one time. The total number of not directly employed workers used throughout the year will be much larger. For example, an establishment may have used several agency staff throughout the year, but it is possible that none of these were in post on the date that the ASC-WDS was completed.

Number of full-time equivalent adult social care jobs

The number of full-time equivalent (FTE) adult social care jobs in England, as at 2019/20, was estimated at **1.16 million.**

In this section, we have produced full-time -equivalent (FTE) estimates of the size of the adult social care workforce. We created these estimates by applying the data of contracted and usual hours worked which is captured in the ASC-WDS, to estimates of the total number of jobs presented previously in this section (37 hours per week is classed as 'full-time' in this case).

Chart 18 shows that the overall ratio of jobs to FTE jobs was around 0.71 (i.e. on average, 100 jobs equates to 71 full-time jobs). This ranged from 0.44 for direct payment recipients to 0.87 for NHS jobs. In local authorities, the ratio of jobs to FTE jobs was 0.81.

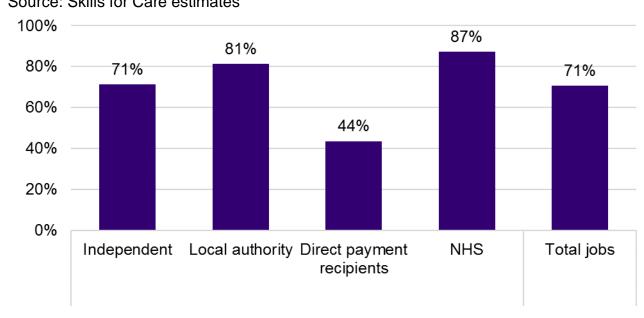


Chart 18. Estimated adult social care jobs: FTE jobs ratio by employer type in England, 2019/20 Source: Skills for Care estimates

Table 9 shows the total number of jobs and the number of FTE jobs by employer type. It shows that, as at 2019/20, there were an estimated total of 1.16 million FTE adult social care jobs.

This estimate is considerably smaller than the total number of jobs (1.65 million) in the sector and reflects the part-time nature of many adult social care jobs. This is especially true of jobs working for direct payment recipients which make up a significantly smaller percentage of FTE jobs (5%) than all jobs (8%).

Table 9. Estimated adult social care jobs and FTE jobs by employer type in England, 2019/20

Source: Skills for Care estimates

Employer type	Jobs	Percentage of jobs	FTE jobs	Percentage of FTE jobs
Independent	1,290,000	79%	920,000	79%
Local authority	113,200	7%	90,000	8%
Direct payment recipients	135,000	8%	60,000	5%
NHS	102,000	6%	90,000	8%
Total jobs	1,650,000		1,160,000	

Number of people working in adult social care

The number of people working in adult social care in England, as at 2019/20, was estimated at **1.52 million**.

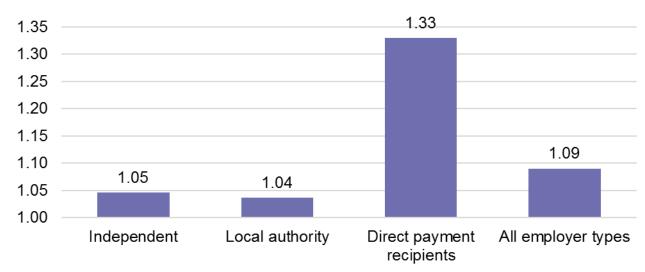
In this section, we make the distinction between the number of jobs and the number of people doing those jobs. The purpose of this is to take account of people carrying out more than one job in adult social care.

We achieved this by creating a unique reference number for each worker in the ASC-WDS, using the workers' National Insurance Number (NINO) and their date of birth. If the same NINO and date of birth combination appears more than once in the dataset, this indicates that the same person has more than one adult social care job.₁₆

We also carried out some additional research in early 2020 to estimate the average number of jobs held by people working for direct payment recipients. This data was also used to estimate the number of people employed by more than one type of social care employer.

Chart 19 shows the estimated number of jobs per worker by type of employer. It shows that people employed by direct payment recipients were much more likely to hold more than one adult social care job (133 jobs per 100 people) than the overall average (109 jobs per 100 people). This is not surprising given the part-time nature of many of these roles.¹⁷

Chart 19. Estimated number of adult social care jobs per person by type of employer, 2019/20



Source: Skills for Care estimates

Table 10 shows a breakdown, by type of employer, of the estimated 1.52 million people working in adult social care. It shows that the majority (81%) of people were working for

¹⁶ Unique reference numbers were used to ensure that individuals remain anonymous and NINOs are not disclosed.

¹⁷ We collected detailed workforce statistics about individual employers and their personal assistants in 2019/20. These findings can be found here: <u>www.skillsforcare.org.uk/IEPAreport</u>

independent employers. The percentage working for direct payment recipients was around 7%. This proportion was smaller than for the number of jobs (8%) due to the relatively large number of these workers holding more than one job.

Table 10. Estimated number of people working in adult social care jobs by type ofemployer in England, 2019/20

Source: Skills for Care estimates

Employer type	Number of people	Percentage of people
Independent	1,240,000	81%
Local authority	109,000	7%
Direct payment recipients	105,000	7%
NHS*	102,000	7%
Total**	1,520,000	

* NHS data is only available at job level; jobs per person estimates were not available.

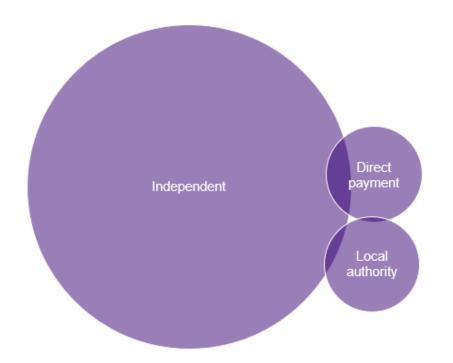
**Employer type counts do not sum to the total due to people with jobs in more than one type of employer.

Chart 20 provides a graphical illustration of the number of people working in adult social care by employer type. The crossover between circles represents (approximately) those people who work in more than one sector.

Our estimates show that approximately 7,500 people held both independent and local authority jobs, while approximately 28,000 people were working for direct payment recipients and for independent or local authority employers.

Chart 20. Illustration of employer type breakdown of people working in adult social care jobs in England, 2019/20

Source: Skills for Care estimates



Trends



Trends

Trend data – the number of adult social care jobs and FTE jobs

The number of adult social care jobs in England increased by around 1% (an increase of 17,000 jobs) between 2018/19 and 2019/20, from 1.63 million to 1.65 million.

The main changes in the adult social care sector since 2012/13 highlighted in this section are:

- (1) an increase in the size of the workforce (up 9%)
- (2) an increase in independent sector jobs (up 11%, or 130,000 jobs)
- (3) a decrease in local authority jobs (down 25%, or 37,000 jobs)
- (4) an increase in jobs within independent sector care homes with nursing (up 4%, or 9,500 jobs)
- (5) an increase in the number of jobs in domiciliary care (up 95,000, or 15%).

The impact of COVID-19

It should be noted that the data we used in this report for the 2019/20 period was collected prior to the height of the COVID-19 pandemic in England. The ASC-WDS data used for the 2019/20 period was collected over the course of the year April 2019 to March 2020 and data submitted in March 2020 was carefully analysed to ensure it did not significantly impact the findings.

Therefore, this section does not show how COVID-19 has impacted the adult social care workforce. It should be used as a baseline for the composition of the workforce prior to COVID-19 and to give context to any further research or data collected after March 2020.

We are analysing ASC-WDS data on a monthly basis to monitor the impact of COVID-19 on the sector and workforce. The outputs from this analysis can be found on the COVID-19 section of our Workforce Intelligence website₁₈. At the time of writing, there was no evidence of a reduction in the number of people working in the sector. From employers updating ASC-WDS between March and May 2020, just as many reported an increase in staff numbers as those reporting a decrease.

We will continue to monitor these trends, and other workforce trends, over the coming months and will make them available on our Workforce Intelligence website₁₈.

Changes between 2018/19 and 2019/20

The number of adult social care jobs in England increased by around 1% (17,000 jobs) between 2018/19 and 2019/20 from 1.63 million to 1.65 million.

The number of adult social care jobs working for independent employers increased between 2018/19 and 2019/20 by around 1.2% (an increase of 15,000 new jobs). The number of adult social care jobs in the NHS also increased (by 5.8%, or 6,000 jobs) over the same period. Jobs in the local authority sector increased for the second consecutive year (by 1,000 jobs, or 1.0%) after decreasing year-on-year since 2012/13 prior to 2018/19.

We estimate that between 2018/19 and 2019/20, the number of jobs working for direct payment recipients has decreased (by 3.4% or 5,000 jobs) for the first time since 2016/17. It should be noted that estimates for this part of the sector are not precise and therefore this relatively small change should be treated with caution.

Table 11. Estimated change in adult social care jobs by employer type in England,2018/19-2019/20

Employer type	2018/19	2019/20	2018/19-2019/	20 change		
Independent	1,280,000	1,295,000	15,000	1.2%		
Local authority	112,100	113,200	1,000	1.0%		
Jobs for direct payment recipients	140,000	135,000	-5,000	-3.4%		
NHS	96,000	102,000	6,000	5.8%		
All sectors	1,630,000	1,650,000	17,000	1.0%		

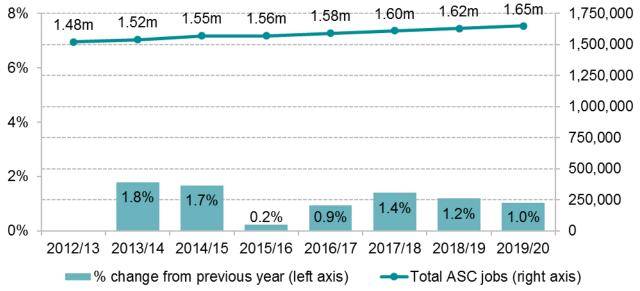
Source: Skills for Care estimates

Changes between 2012/13 and 2019/20

Chart 21 shows the change in the number of adult social care jobs in England since 2012/13. Our findings reveal that the workforce has been increasing since 2012/13, at an average rate of 1.2% per year. We estimate that overall, the number of jobs increased between 2012/13 and 2019/20 by 130,000 (a 9% increase).

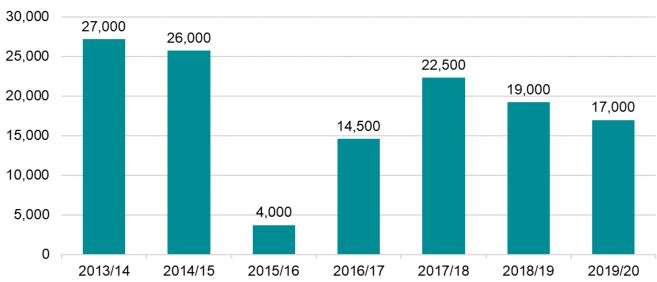
Chart 21. Estimated number of adult social care jobs and percentage change in the number of jobs in England, 2012/13-2019/20

Source: Skills for Care estimates



The rate of increase for adult social care jobs has slowed. Between 2014/15 and 2019/20, the workforce grew by around 15,000 jobs per year, compared to an average increase of 26,000 per year between 2012/13 and 2014/15.

Chart 22. Estimated annual increase in adult social care jobs in England, 2012/13-2019/20

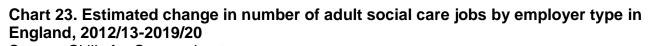


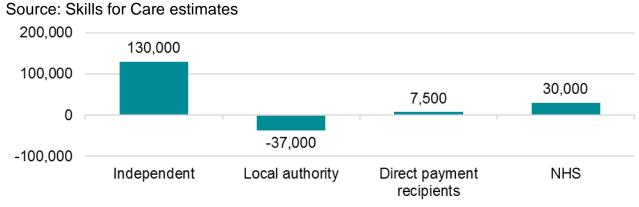
Source: Skills for Care estimates

Employer type trends

Chart 23 shows the change in the number of jobs between 2012/13 and 2019/20 by employer type. It shows that jobs for all employer types (except for local authorities) have grown since 2012/13.

The majority of this increase is due to the creation of new jobs working for independent employers: these increased by around 11% (an increase of 130,000 new jobs). Jobs working for direct payment recipients also increased by around 5% (an increase of 7,500 new jobs). The number of local authority jobs decreased over the period by around 25% (a decrease of 37,000 jobs). Chart 24 to Chart 27 look at these changes in further detail.





The number of adult social care jobs for independent employers has increased year-onyear since 2012/13, by roughly 2% per year. Chart 24 shows that the percentage of adult social care jobs in the independent sector has increased since 2012/13 (from 77% to 79%).

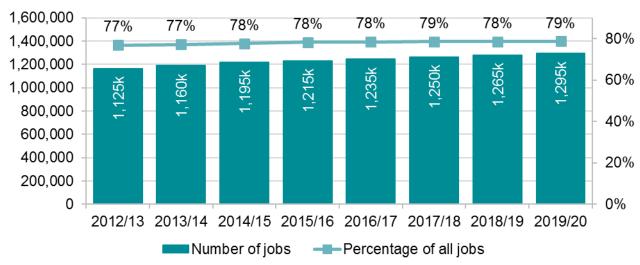




Chart 25 highlights the decrease in the number of adult social care jobs in local authorities over the period. 2012/13 to 2017/18 saw an average decrease of 8,000 jobs each year. However, from 2017/18 to 2019/20, jobs have increased by an average of 2,000 jobs per year. The percentage of jobs working in local authorities was 7% in 2019/20. This figure is lower than it was in 2012/13, when local authority jobs accounted for around 10% of all adult social care jobs.

Information collected from councils between 2013 and 2017 suggested that outsourcing, restructures, service closures, budget cuts and redundancies were amongst the reasons for the decrease in jobs.

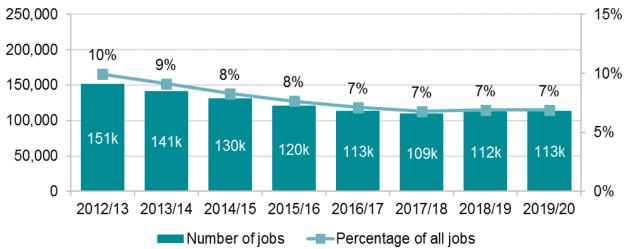
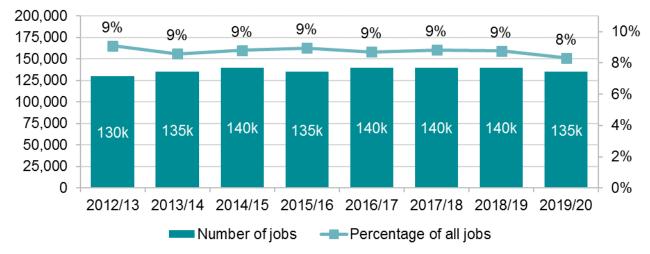


Chart 25. Estimated trend for local authority jobs, 2012/13-2019/20 Source: Skills for Care estimates

Chart 26 shows the trend for the number of jobs working for direct payment recipients since 2012/13. These estimates should be treated with caution, as explained in Section 4 – Individual employers.

Chart 26 shows that jobs working for direct payment recipients accounted for an estimated 8% of the entire workforce in 2019/20, and that this has remained stable since 2012/13. It is noteworthy that small changes cannot be detected in this part of the sector due to a lack of precise data.

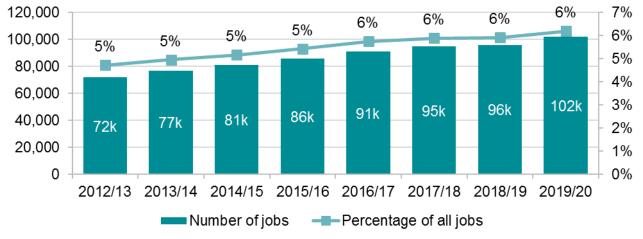
Chart 26. Estimated trend of jobs working for direct payment recipients, 2012/13-2019/20



Source: Skills for Care estimates

The number of adult social care jobs in the NHS₁₉ grew steadily between 2012/13 and 2019/20, increasing by over 30,000 jobs. This trend may reflect increased health and social care integration, which sees higher numbers of healthcare assistants and social workers being employed by the NHS.





¹⁹ This includes qualified occupational therapy jobs, qualified social services jobs, healthcare assistants (excluding maternity jobs), support for occupational therapy jobs, and support for social services jobs.

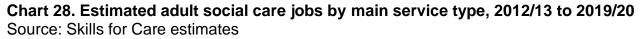
Main service group trends

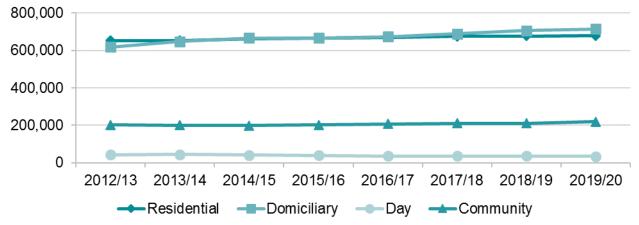
Chart 28 highlights the considerable increase in the number of domiciliary care jobs between 2012/13 and 2019/20 (an increase of 95,000, or 15%).

The rate of increase was greatest between 2012/13 and 2014/15 (with the number of jobs increasing by 49,000, or 8%). The rate of increase slowed between 2014/15 and 2019/20, with the number of domiciliary jobs increasing by around 9,000 jobs per year over the period.

The increase in the number of domiciliary jobs was the largest contributing factor to independent sector growth, which, in turn, led to an increase in adult social care jobs over this period. Between 2018/19 and 2019/20, the rate of increase was 8,000 jobs, or 1%.

Jobs in residential services increased steadily between 2012/13 and 2019/20, by around 1% per year (an increase of 25,000 jobs, or 4% overall) despite a decrease in 2013/14 (see the following pages for a breakdown of these figures into care homes with and without nursing). The numbers of jobs in day care and community services remained broadly the same throughout 2012/13 to 2019/20.





Care homes without nursing

The number of independent sector care homes without nursing has decreased since 2012/13 by around 12% (from 12,175 to 10,725). However, over the same period, the number of jobs at these establishments increased slightly from 290,000 in 2012/13 to 295,000 in 2019/18 (an increase of an estimated 1%). The number of jobs working in independent sector care homes without nursing did not change between 2016/17 and 2019/20.

Table 12. Number of independent sector care homes *without nursing* and jobs at these establishments, 2012/13-2019/20 Source: Skills for Care estimates

Year	Establishments	% change	Jobs	% change
2012/13	12,175		290,000	
2013/14	12,075	-1%	290,000	0%
2014/15	11,775	-2%	290,000	0%
2015/16	11,600	-1%	290,000	0%
2016/17	11,425	-1%	295,000	2%
2017/18	11,225	-2%	300,000	1%
2018/19	11,025	-2%	295,000	-1%
2019/20	10,725	-3%	295,000	0%
2012/13 to 2019/20	-1,450	-12%	3,000	1%

Care homes with nursing

The number of jobs for independent sector care homes with nursing increased between 2012/13 and 2015/16 by around 10,000 jobs (an increase of 5%), to 285,000. However, since 2015/16, the number of such jobs has reached a plateau at around 285,000 jobs.

The number of independent sector care homes with nursing did not change between 2012/13 and 2015/16 at 4,600 establishments. However, this figure began to decrease from 2015/16 onwards. Between 2015/16 and 2019/20, the number of care homes with nursing decreased by around 250 (to 4,325).

As mentioned in Section 3 – Establishments, this suggests a consolidation in the sector, for both care homes *with and without nursing*, whereby a similar amount of care was being delivered at fewer locations.

The number of registered nurse jobs in care homes with nursing decreased by around 10,000 (a decrease of 24%) between 2012/13 and 2019/20. This may be related to recruitment and retention issues with this job role and/or also to the increasing numbers of nursing assistants employed. For more information, see Page 48.

Table 13. Number of independent sector care homes with nursing and jobs at these establishments, 2012/13-2019/20 Source: Skills for Care estimates

Year	Establishments	% change	Jobs	% change
2012/13	4,600		275,000	
2013/14	4,600	0%	275,000	1%
2014/15	4,600	0%	285,000	3%
2015/16	4,575	0%	285,000	1%
2016/17	4,425	-4%	285,000	-1%
2017/18	4,400	0%	285,000	0%
2018/19	4,350	-1%	285,000	0%
2019/20	4,325	-1%	285,000	0%
2012/13 to 2019/20	-275	-6%	10,000	4%

Job role trends

This section looks at the change in the number and distribution of job roles in the adult social care sector between 2012/13 and 2019/20.

Table **14** shows that the proportion of jobs providing direct care increased between 2012/13 and 2019/20, from 74% to 76%. The proportion of all jobs in managerial roles or regulated professions decreased by 1% over the period.

In absolute terms, the number of direct care jobs increased by around 132,000. The number of managerial jobs decreased by 5,800 and 'Other' job roles increased by around 13,500. Regulated professional roles decreased by around 10,000 (the majority of this decrease resulted from the decrease in registered nurse numbers, see Page 48).

Table 14. Estimated job role group breakdown of adult social care jobs in England,2012/13-19/20

Source: Skills for Care estimates

	Direct care	Managerial	Regulated professions	Other	Total
2012/13	74%	8%	6%	12%	1,520,000
2013/14	74%	7%	6%	12%	1,540,000
2014/15	75%	7%	6%	12%	1,570,000
2015/16	76%	7%	5%	12%	1,570,000
2016/17	76%	7%	5%	12%	1,590,000
2017/18	76%	7%	5%	12%	1,610,000
2018/19	76%	7%	5%	12%	1,630,000
2019/20	76%	7%	5%	12%	1,650,000

The total increase in the number of jobs between 2012/13 and 2019/20 was estimated at 130,000. Almost all of this increase is as a result of the increase in the number of jobs providing direct care. Several changes to the composition of the sector over the period are responsible for this trend, including.

- the shift from local authority jobs (where around 55% of jobs were providing direct care) to independent sector jobs (where 73% were providing direct care).
- the increase in the average size of residential establishments which allow for economies of scale in terms of managerial and support staff.
- the increase in domiciliary care jobs (where 89% of jobs were providing direct care) and jobs working for direct payment recipients (where all jobs were providing direct care).

Individual job roles

Table 15 shows that, in terms of roles providing direct care, the number of care worker jobs increased by around 15,000 (an increase of 2%) between 2018/19 and 2019/20, whereas the number of senior care worker roles did not change.

In regulated professional roles, the number of local authority social worker jobs increased by 425 (an increase of 3%), whilst occupational therapist job numbers increased by 250 jobs. In contrast, registered nurse jobs decreased by 3,000 (a decrease of 7%).

Table 15. Change in the adult social care jobs by job role in England, 2018/19-2019/20

Source: Skills for Care estimates

Job role	Number of jobs (2019/20)	Change in number of jobs (2018/19 to 2019/20)	Percentage change in jobs (2018/19 to 2019/20)
All job roles	1,650,000	20,000	1%
Care worker	870,000	15,000	2%
Senior care worker	87,000	0	0%
Registered manager	23,000	0	0%
Social worker (LA)	17,000	425	3%
Occupational therapist (LA)	3,000	250	10%
Registered nurse	36,000	-3,000	-7%

Since 2012/13, the number of care worker jobs increased by 13% (an increase of 100,000 jobs). Senior care worker jobs grew at a slower rate (up 7%, or 5,000 jobs). The number of social worker and occupational therapist roles²⁰ in local authorities both saw increases (social worker jobs increased by 900 and occupational therapist jobs by 250).

Registered nurses were one of the only jobs in adult social care to see a significant decrease over the period (down 15,500, or 30%, since 2012/13). The number of registered nurse jobs has gradually decreased year-on-year since 2012/13 to 2019/20 (from 51,000 to 36,000). This may be related to recruitment and retention issues, but also may have come about as a result of some organisations creating 'nursing assistant' roles to take on some tasks previously carried out by nurses. We are now collecting information about nursing assistants and associated roles and will monitor changes in the number of these.

Table 16. Change in adult se	ocial care jobs by job role in Eng	gland, 2012/13-2019/20
Source: Skills for Care estimation	tes	-
	Change in	Percentage

Job role	Number of jobs (2019/20)	Change in number of jobs (2012/13 to 2019/20)	Percentage change in jobs (2012/13 to 2019/20)
All job roles	1,650,000	130,000	9%
Care worker	870,000	100,000	13%
Senior care worker	87,000	4,000	5%
Registered manager	23,000	1,000	7%
Social worker (LA)	17,000	900	5%
Occupational therapist (LA)	3,000	400	15%
Registered nurse	36,000	-15,500	-30%

Full-time equivalent job trends

Table 17 shows the trend of the number of full-time equivalent (FTE) adult social care jobs between 2012/13 and 2019/20. The table shows that, in addition to the number of jobs increasing (by 9% over the period), the number of FTE jobs also increased since 2012/13 (by 10%).

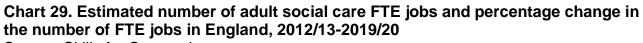
This finding is important. It highlights that the number of hours worked in the sector has increased over the period (an increase in the number of jobs alone does not necessarily indicate this).

Table 17. Estimated number of full-time equivalent (FTE) adult social care jobs, 2012/13-2019/20

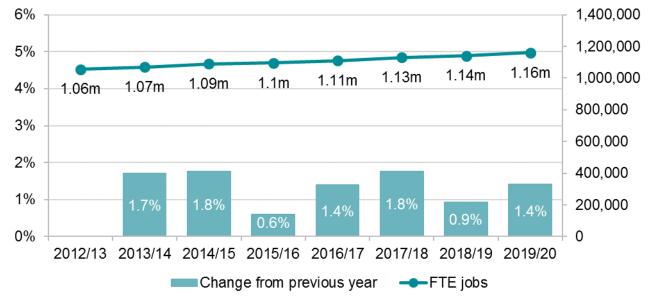
Source: Skills for Care estimates

Year	Jobs	FTE jobs	Jobs:FTE ratio
2012/13	1,520,000	1,055,000	0.69
2013/14	1,540,000	1,070,000	0.69
2014/15	1,570,000	1,090,000	0.69
2015/16	1,570,000	1,095,000	0.70
2016/17	1,590,000	1,110,000	0.70
2017/18	1,610,000	1,130,000	0.70
2018/19	1,630,000	1,140,000	0.70
2019/20	1,650,000	1,160,000	0.70

Chart 29 shows that the number of FTE jobs increased year-on-year between 2012/13 and 2019/20. The year on year increases followed a similar pattern to the number of jobs, with 2014/15 and 2017/18 having the smallest increases (0.6% and 0.9%) respectively.







Workforce forecasts



Projections of the adult social care workforce

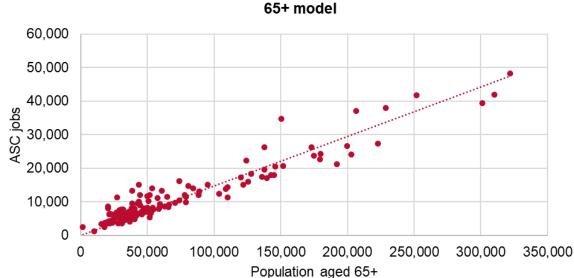
If the adult social care workforce grows proportional to the projected number of people aged 65 and over in the population, then the number of adult social care jobs will increase by 32% (520,000 jobs) to around 2.17 million jobs by 2035.

This section presents demand-based projections for the size of the adult social care workforce between 2019/20 and 2035. These projections should be treated as 'base case' projections as they only account for demographic and population change over the period. They do not account for any political, economic, technological, or social factors that may also have an impact on the size of the workforce in the future. Neither do these projections include the impact of COVID-19. We know that demand for care services has fallen in the short term and it remains to be seen what the long-term impact on demand will be. However, the medium- and long-term projected increase in the number of people aged 65 and over remains; this will continue to provide upward pressure on demand for adult social care services.

The projections use models that compare the number of adult social care jobs in each local authority area in England with the corresponding number of people aged 65 and over in the population. These two factors were found to be strongly correlated (on average, the more people aged 65 and over in an area, the larger the adult social care workforce was). This relationship is demonstrated in the chart below, in which each dot represents a local authority area and each dotted line represents the relationship between the two factors.

The '65+ model' below shows that, on average in 2019/20, for every seven people aged 65 and over in the population, one adult social care job is required.





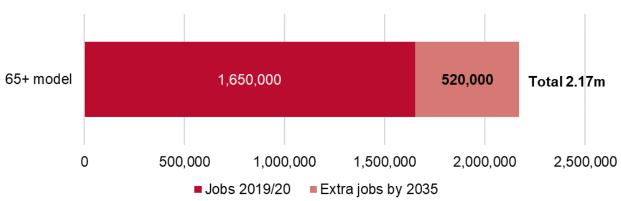
The results from this model were then applied to Projecting Older People Population Information (POPPI) estimates of the number of people aged 65 and over in 2025, 2030 and 2035 to create forecasts for the number of adult social care jobs over the period. Table 18 and Chart 31 below show the results from this model. The model projects that if the adult social care workforce grows proportional to the projected number of people aged 65 and over in the population, then a 32% increase (520,000 new jobs) will be required by 2035.

Table 18. Adult social care jobs projections between 2019/20 and 2035, based on the number of people in the population aged 65 and over

Model	2019/20	2025	2030	2035	% increase in jobs 2019/20-2035
65+ model	1,650,000	1,800,000	2,000,000	2,170,000	32%

Source: Skills for Care estimates

Chart 31. Adult social care jobs demand-based projections between 2019/20 and 2035



Source: Skills for Care estimates

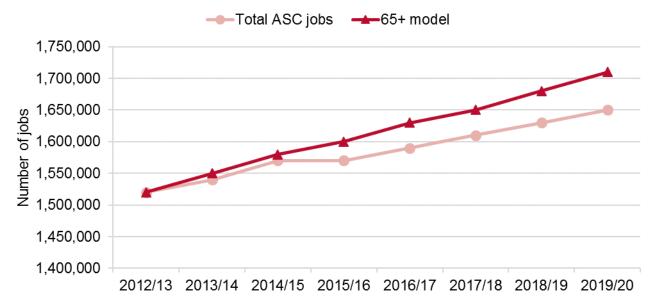
In previous editions of this report an additional model was also presented which used the 75 and over population to model the number of jobs. The projections made using this model are becoming less reliable in recent years. The projected number of people aged 75 and over has grown faster than the 65 and over population between 2017/18 and 2019/20 but the number of adult social care jobs has continued to increase at a rate more in line with the 65 and over population. As such the results from the 75+ model have not been presented in this report. We will continue monitor its performance in future years.

Chart 33 shows the projected number of adult social care jobs based on the population aged 65 and over (using information available in 2012), compared to the actual jobs trend in the same period. The number of jobs has grown at a slower rate than was forecast by the model by around 60,000 jobs. There are various factors that can influence this difference. One contributing factor is that the number of staff vacancies has grown in the sector over the period (the number of vacancies in local authority and independent sector employers increased by around 35,000 between 2012/13 and 2018/19). This suggests that the supply of workers has been struggling to keep up as demand for social care services

grows. Other factors could include improvements in the health of the population (over 65s becoming less likely to require care), technological advances and different models of care being used.

Chart 322. Adult social care job projections 2012/13 to 2019/20, based on population aged 65, compared to actual job trends for the same period.

Source: Skills for Care estimates



As stated earlier in this section, there are numerous factors that could influence the size of the adult social care workforce over the next 15 years that have not been factored into this modelling. However, these results do provide a useful baseline in terms of the likely demand created by the aging population.

Appendix 1

Methodology

(1) Adult social care employers

(a) Number of adult social care organisations

The number of adult social care organisations was estimated using the Office for National Statistics' (ONS') Inter-Departmental Business Register (IDBR) data.

Organisations in the following Standard Industrial Classification (SIC) codes (See Table 19) were classed as adult social care organisations (although it is acknowledged that some social care operations may fall into other categories).

Table 19. SIC codes used to estimate the number of adult social care organisations and establishments

Source: Standard Industrial Classification (SIC) codes

SIC	Description	Adult / children split
87100	Residential nursing care activities	Assumed 100% adults
87200	Residential care activities for mental retardation, mental health and substance abuse	Assumed 100% adults
87300	Residential care activities for the elderly and disabled	Assumed 100% adults
87900	Other residential social work activities	Mixed adults & children
88100	Social work activities without accommodation for the elderly and disabled	Assumed 100% adults
88990	Other social work activities without accommodation n.e.c	Mixed adults & children

The proportion of 87900 (Other residential social work activities) and 88990 (Other social work activities without accommodation) categories which provided care for adults were estimated using data from Companies House. We took a random sample of 500 employers from each of these categories and used internet searches to categorise whether each employer made provision for social care for (i) adults, (ii) children, or whether they were (iii) not providing social care.

We then applied the proportions of employers providing *adult* social care from these samples to the whole categories (87900 and 88990) to estimate how many of these employers were delivering adult social care services.

(b) Number of adult social care establishments

We were able to estimate the number of adult social care establishments with a greater degree of detail than the organisational estimates because they were used as the framework for estimating the size of the workforce.

Residential segment

The numbers of care homes with nursing, care-only homes, Shared Lives services, and other CQC-regulated residential activities were taken from the Care Quality Commission (CQC) register as at April 2020. This number represents the CQC-regulated portion of adult social care establishments.

We estimated the number of non-CQC regulated establishments by subtracting the number of CQC-regulated residential establishments from the total number of establishments (local units) reported by the IDBR under SIC codes 87100, 87200, 87300 and 87900. Establishments providing care for children and/or non-social care were then removed using the Companies House data research previously described.

Non-residential segment

The numbers of domiciliary care services, nursing agencies, supported living services, Extra Care housing services, and other CQC- regulated non-residential services were taken directly from the CQC register as at April 2020. This number represents the CQC regulated portion of adult social care establishments.

We estimated the number of non-CQC-regulated establishments by subtracting the number of CQC-regulated, non-residential establishments from SIC2007, category 88100. This number was then added to the number of establishments in SIC2007 category 88900, with children's and non-social-care establishments excluded using the method previously described.

Direct payment recipients employing staff

We took the total number of direct payment recipients from data published by NHS Digital. This figure was adjusted to include only those employers directly employing their own staff. Our estimates are based on Skills for Care surveys of local authorities from 2014 and 2015 and data from the Association of Directors of Adult Social Services (ADASS) Annual Budget survey in 2019 (sample sizes 47, 33, 92 and 109 out of 151 local authorities) which asked respondents about the proportion of direct payment recipients employing staff in their area. We worked with the ADASS who carried out another survey in 2017 on the same subject. This survey was anonymous, so its findings could not be applied directly in this report. However, the results from the 77 local authorities that completed data were in line with previous Skills for Care surveys. We have confidence in the estimates produced from this information.

(2) Adult social care workforce

(a) Number of adult social care jobs

Independent employers

CQC regulated establishments

The CQC's register provides accurate and up-to-date information on the number of registered adult social care establishments, by type, geography, and capacity (for care homes). In addition, NMDS-SC records can be matched with CQC data to show the precise proportion of each segment that the NMDS-SC covers.

We were therefore able to use this combined data to produce workforce models that were, in turn, used to estimate the number of jobs at all CQC-regulated establishments, based on their capacity (for care homes), location, service type, and activity.

The CQC register list does not contain 'Type of employer' (e.g. private, voluntary, or local authority) information. We removed local authority establishments manually from the data by removing via their 'Provider name' from the CQC register (local authority figures were estimated separately).

Estimates of the number of jobs for 'Shared Lives' services were made using a different methodology. Shared Lives Plus published a comprehensive report in 2018 on the Shared Lives workforce. The average number of self-employed carers and support staff from this report were applied to the total number of CQC regulated Shared Lives services from the CQC list.

Non-CQC regulated establishments

We split estimates of the number of non-CQC regulated establishments using IDBR data to remove local authority establishments (local authority figures were estimated separately).

We then extrapolated the number of ASC-WDS establishments offering this type of service to reflect the estimated total number of non-regulated services. We stratified the data by size and location, using the IDBR to account for any skew in the ASC-WDS.

Local authorities

The SSDS001 was replaced by the NMDS-SC from September 2011 as the adult workforce data return for local authorities following an open National Statistics consultation decision. In 2019, the NMDS-SD was updated and renamed the Adult Social Care Workforce Data Set (ASC-WDS).

Since 2012, all local authorities have provided an NMDS-SC return and therefore NMDS-SC data was used for this part of the workforce with very little estimating required.

NHS

We took numbers for this part of the workforce from data published by NHS Digital. We identified job roles that were considered to be adult social care-related job roles, as per those listed below:

- Qualified occupational therapy jobs.
- Qualified social services jobs.
- Healthcare assistants (excluding maternity jobs).
- Support for occupational therapy jobs.
- Support for social services jobs.

Jobs for direct payment recipients

We estimated the average number of jobs per direct payment recipient employing staff using Skills for Care surveys (2014, 2017, 2019, and 2020) of over 5,000 recipients, which were collected via direct payment support organisations (DPSOs). We multiplied this figure (1.9 jobs per employer) by the estimated total number of direct payment recipients employing staff in order to estimate the total number of jobs working for direct payment recipients.

(b) Number of people working in adult social care

The ASC-WDS contains a unique global identification number based on each employee's National Insurance number and date of birth (in coded format). This number indexes individual workers anonymously and allows us to count the number of jobs held by each individual person recorded in the ASC-WDS.

Independent employers

The number of people employed by independent bodies who held more than one job was calculated using data collected by the ASC-WDS.

Adjustments were then made to these figures to account for the following:

- workers recorded in the ASC-WDS having jobs in non-participating adult social care establishments
- participating establishments updating their records at different intervals and, in the interim, workers changing jobs and being recorded in the ASC-WDS in jobs they have left.

Local authorities

In 2019, 97 of the 151 councils provided National Insurance numbers and dates of birth for all of their workers in the ASC-WDS, based on 95% of their workers. We counted the incidences of people with more than one council job and assumed that the rate was the same for the remaining councils.

Direct payment recipients

Our surveys of DPSOs (2014, 2017, 2019, and 2020) were used to make this estimate. These surveys collected data relating to over 6,000 personal assistants (PAs). PAs were asked how many PA jobs they held and how many adult social care jobs they held in total. This data was used to estimate the number of jobs held by personal assistants (an average of 1.29).

Cross over between types of employer

We made estimates about the number of people working in adult social care jobs with more than one *type* of employer.

We estimated the number of people with jobs in local authorities and independent bodies using the ASC-WDS. We estimated the number of people with jobs working for direct payment recipients and also working in the independent or for local authority employers using data from the DPSO survey previously mentioned.

Our estimates should be treated as at a preliminary stage and we will continue to refine and improve them in the future.

(c) Trend data

We have ensured that, wherever possible, the trend data presented in this report is comparable across years, and that we have used consistent methods. To achieve this, we reviewed some previously published data for this report. As a result, the trend data in this report may not match previously published numbers.

Data presented in areas other than the Trends section of this report also may not be compared directly to previously published numbers. Please contact us if you are interested in additional trend data not provided in this report.

For the following areas, we were unable to use consistent methods. However, we did take great care to ensure that they were as comparable as possible:

Local authorities

As previously mentioned, the ASC-WDS replaced the SSDS001 as the adult workforce data return for local authorities from 2011. Although the two data sources are not directly comparable, steps were taken to ensure that trends produced were as reliable as possible.

Due to the lack of comparability, it is acknowledged that the true change in the number of jobs between 2010 and 2011 may not have been exactly as quoted in this report. However, we have confidence in the conclusion that there was a relatively large decrease in the number of these jobs between 2010 and 2011. Figures from 2011 onwards are directly comparable.

CQC regulated establishments

In 2011, CQC data changed format. Previously, each establishment was assigned a 'Main service', whereas now all services offered by establishments are listed without an indication of their 'Main' service. Hence, we were required to apply methodological changes to account for this change. Unfortunately, it was not possible to replicate this new methodology for non-residential services and as such results are not directly comparable.

Delays in registrations at the CQC may also have affected the trend of CQC regulated establishments and jobs trends between 2011 and 2012.

NHS

Accurate trends for the number of adult social care-related jobs in the NHS were provided by the Health and Social Care Information Centre (HSCIC) from 2011 onwards. Whilst data for 2009 and 2010 is not directly comparable, the differences are small, and we deem this lack of comparability unlikely to impact the overall trends presented.

Direct payment recipients

For this year's Size and Structure report, we estimated a trend in the proportion of direct payment recipients (people receiving a direct payment for their own care and support needs) employing staff using estimates, from 2008, 2014, 2015, 2018, and 2019, making the estimates in this report the most comprehensive and robust to date.

However, these estimates do include a degree of uncertainty despite this, and the trend produced should not therefore be treated as exact. We have confidence that the decrease is 'real' based on our findings in these surveys, together with anecdotal evidence from sector experts. However, we have estimated the exact *scale* of this decrease.

The trend line we have produced between these years should also be treated with caution as separate data was not available for these years. We hypothesised that the decrease was most likely to have happened in proportion to the increase in the total number of direct payment recipients (i.e. that the majority of this change was likely to have come from new direct payment recipients, rather than existing recipients changing from employing staff to not employing staff). However, there is no firm evidence to confirm this hypothesis.

We also worked with the Association of Directors of Adult Social Services (ADASS). ADASS who carried out a survey in 2017 on the same subject. This survey was anonymous, so the findings could not be directly used in this report. However, the results from the 77 local authorities that completed data was in-line with the previous Skills for Care surveys.

(3) Data quality overview

This section provides an overview of the quality of the workforce estimates in this report. Due to the fragmented nature of adult social care and the various data sources required to produce this report, there is some variation in the quality of the estimates for different parts of the sector.

These differing levels of confidence should be taken into account when interpreting the estimates throughout the report. Table 20 provides a summary of this section.

CQC regulated independent sector employers

The CQC collects a comprehensive list of all regulated employers. Therefore, figures for the number of employers in this part of the sector are highly accurate and timely.

In terms of estimating the number of jobs, the CQC collects capacity data for 'Care-only homes' and 'Care homes with nursing'; this allows for very robust workforce models to be created and accurate estimates of the number of jobs for these employers to be made.

For other residential and non-residential establishments, the CQC does not collect a capacity measure. Without this useful predictor, the estimate for the number of jobs is not as robust for care homes. We have created proxy measures for the capacity of these establishments. However, our estimates continue to rely on the assumption that the ASC-WDS is representative in terms of the size of establishments. We tested this assumption with respect to residential establishments (which was possible because capacity data is available for these employers) and only found a very slight skew towards larger establishments. Given these results, it seems reasonable that the same is true for non-residential establishments and that the estimates we have produced are not significantly skewed.

We were also able to cross-check these estimates against employer size proportions from the IDBR. Although this comparison is not 100% like-for-like, no evidence was found to suggest that the NMDS-SC was significantly skewed for non-residential establishments.

Non-CQC regulated independent sector employers

These estimates were created by subtracting the number of CQC regulated employers from the total number of employers in social care SIC codes as recorded by the IDBR. We removed children's and other non-adult social care establishments with the use of proportional estimates sourced by searching the internet for a sample of Companies House data. Not all establishments could be found via internet search. Therefore, the quality of these estimates relies on the assumption that establishments that could not be found were 'missing at random' (i.e. those not found followed similar proportions to those that *were* found). We believe this is a reasonable assumption and will be exploring ways to check this assumption in future.

In terms of the number of jobs for non-CQC regulated independent sector employers, the ASC-WDS holds data on a relatively small number of these employers (around 600 residential and 1,700 non-residential employers). Therefore, the 'Number of jobs' estimates we have made are not as robust as for CQC regulated establishments where coverage is much higher. However, estimates for non-CQC-regulated independent sector employers were stratified by size using the IDBR to assure their quality.

Local authority

In 2019, the ASC-WDS received a full return from all 151 local authorities. As such, the estimates we made for this part of the sector were highly accurate and robust.

Direct Payments recipients employing staff and their workforce

We calculated the estimated range of direct payment recipients employing staff (29% to 32%) by creating a 95% confidence interval from the data received over the past two years. However, this range should only be interpreted as an 'estimated likely range' because local authorities were not randomly sampled (they chose to respond). Hence there is the potential that the data received was skewed, although it should be noted that these upper and lower estimated bounds are within those reported previously. We deem it unlikely that the data received was significantly skewed and this assumption is supported by the survey carried out by ADASS in 2019, as previously mentioned.

In terms of 'Number of jobs' estimates for these employers, the uncertainty above is compounded by the additional unpredictability around the average number of jobs for each direct payment recipient. The average found in Skills for Care surveys on this subject was 1.92. However, we estimated a likely range of between 1.89 and 1.96 jobs per recipient (95% confidence interval). In order to account for both areas of uncertainty, we created 10,000 simulations for both figures to estimate the range of 131,000 to 143,000 jobs for direct payment recipients (again these were calculated with 95% confidence intervals but were not presented as such due to the non-random nature of the samples.

This area of the report carries the most uncertainty and we are currently exploring ways of collecting further data and increasing the confidence around such estimates in the future.

NHS

These figures were taken from NHS workforce statistics (September 2019) published by NHS Digital and are therefore of high quality. The only source of uncertainty lay in the definitions of which job roles could be classified as adult social care jobs. It is not possible to be precise about the numbers of staff working in adult social care roles employed in the NHS. This is because many NHS jobs include elements of social care work and also because NHS-wide job classification does not lend itself to identifying those involved in social care work for adults. For the purposes of this report, healthcare assistants (excluding maternity services), occupational therapists, social service staff and their assistants were all counted as adult social care staff.

Table 20 summarises the findings of this section regarding the quality of the estimates provided in this report.

Table 20. Data quality overview, 2019/20Source: Skills for Care estimates

Type of employer	Main service group	Number of employers quality	Number of jobs quality	Кеу	
CQC independent	Care only home	*****	****	*****	Complete data
CQC independent	Care home with nursing	*****	****	****	L ↑
CQC independent	Shared lives + other		****		
CQC independent	Non-residential	*****	****		
Non-CQC independent	Residential	***		**	Incomplete data
Non-CQC independent	Non-residential	***	***		•
Local authority			*****		
Direct payment recipien	ts	****			
NHS			***		



Skills for Care West Gate 6 Grace Street Leeds LS1 2RP

T: 0113 245 1716 E: info@skillsforcare.org.uk

skillsforcare.org.uk



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