

# Fulfilling lives for all

A vision for a social care system  
that meets everyone's needs





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## 01. About Voyage Care

- 1.1 Voyage Care provides specialist care and support for over 3,500 people with learning disabilities, brain injuries, physical disabilities, autism, and other complex needs.
- 1.2 With 35 years' experience, the quality of care provided by Voyage Care is evidenced by its ratings.



In England, 90% of our registered locations are rated as 'Good' or 'Outstanding' by the CQC

100% of our Scottish and 75% of our Welsh locations are rated as compliant by the Care Inspectorate and Care Inspectorate Wales, respectively.

- 1.3 **With a team of over 10,000 colleagues, support can be provided at home, in the community, in one of Voyage Care's 295 supported living services, or at one of our 257 registered care homes which include:**

**36** National Autistic Society accredited services across the country including **five** with advanced accreditation.

**16** Headway accredited locations that support **over 220** people rehabilitating from brain injuries.

**12** Prader-Willi syndrome specialist services.

- 1.4 Voyage Care delivers specialist person-centred care and support to help enable people to live as independently as possible – where, how and with whom they choose. The people Voyage Care supports, and their loved ones, can be assured that their needs are at the centre of all that Voyage Care does.



### Transforming Nathan's life with high quality, consistent support

Nathan moved into Langley House, one of Voyage Care's specialist autism homes in November 2021.

He has autism and associated complex needs, and when he moved into Langley House he needed constant 1:1 support day and night. He also often presented challenging behaviours related to anxiety and had very little engagement with his new support team and housemates.

Nathan's team have encouraged him to communicate his feelings both verbally and through the use of his whiteboard. They also involve Nathan in his support and empower him to make decisions about what care he receives.

When he joined the household, his communication skills were particularly undeveloped. Nathan's team took the time to understand him. They applied structure and consistent support to his learning, which has paid off as he can now read and count!

His team also worked hard with him to establish a routine, and he is now enthusiastic about doing tasks of daily living, such as vacuuming and meal preparation with minimal support. Nathan's team have a person-centred approach that ensure his goals and aspirations are at the heart of his support. Consistent support has empowered him to develop his social skills and access opportunities in the local community, as a result, his confidence has soared. When the opportunity arose for him to be best man at his brother's wedding, his team worked with him to accomplish this – he successfully managed his anxiety and stood beside his brother on this special day!



## 02. Executive summary

- 2.1 The specialist adult social care sector helps nearly 320,000 people of working age with learning disabilities and complex needs to live as independently as possible.
- 2.2 Great care and support can be transformative for working-aged people with learning disabilities, their families, and the country as a whole. However, the UK is in the midst of an adult social care emergency.



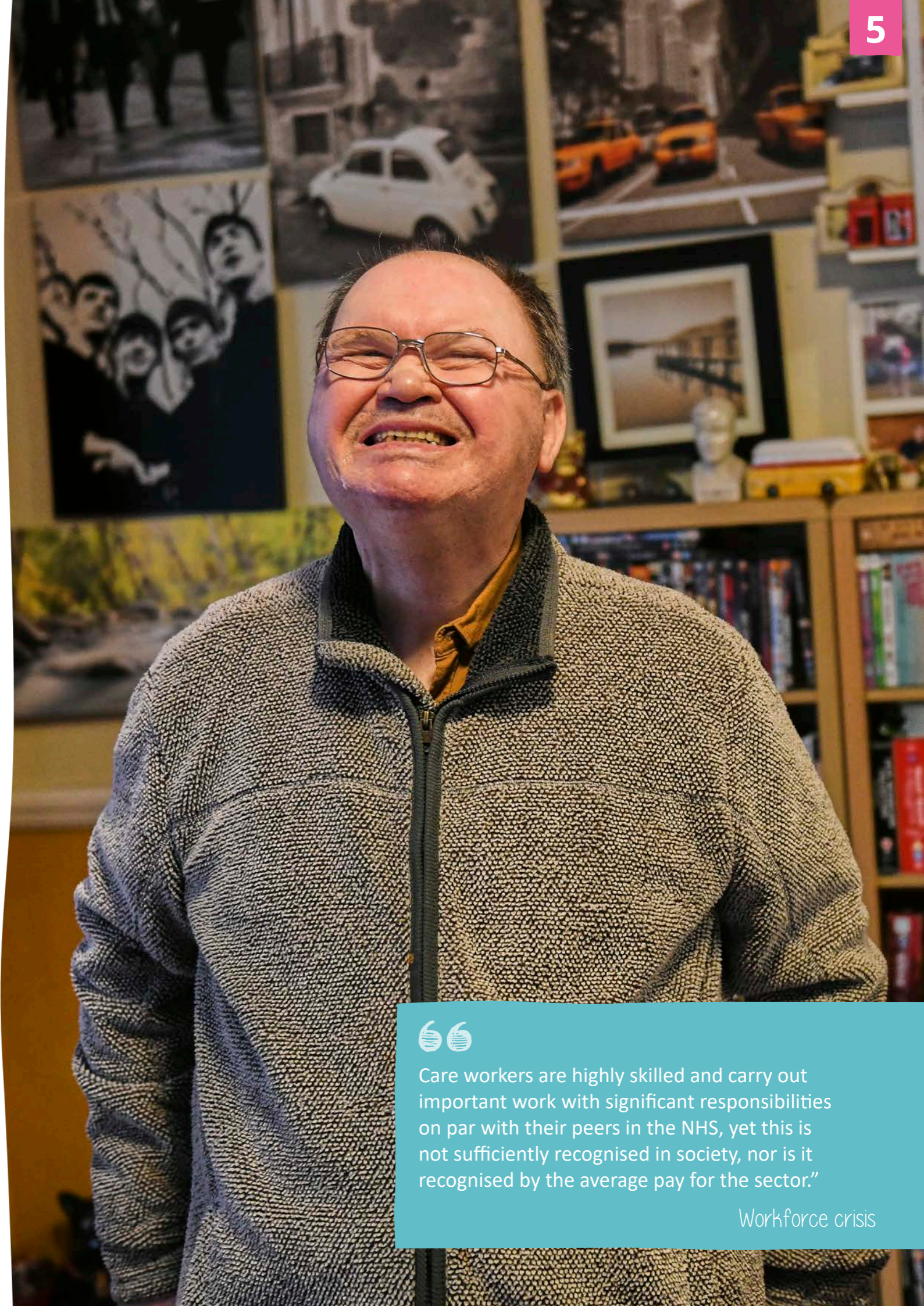
Adult social care affects the lives of over 10 million people in England

Adult social care affects the lives of over 10 million people in England and two thirds of those who have used or had contact with adult social care were dissatisfied with it according to research.

- 2.3 Challenges facing the adult social care sector are complex and multifaceted

### They include:

- **Rising demand for care** – There has been a significant increase in the demand for care over the last decade which is driven in part by working-aged adults. Between 2015/16 and 2022/23 the number of working-age adults requesting care increased by 22%, compared to just 6% for those over 65.
- **Need to widen the focus of social care** - Working-age adults are an increasingly significant proportion of social care provision making up around 88% of spending on long-term learning disability services, yet much debate and discussion around adult social care continues to focus on its role in relieving pressures on hospitals and how to support older people. Greater focus needs to be given to those of working age who increasingly rely on the social care system to live independent and fulfilling lives, whatever their disability or condition.
- **Rising cost of care and lack of public funding** – Sustained pressures on providers from workforce and inflation related costs are not being met by increases in funding from central government, resulting in instability in the social care market. This issue is particularly pertinent for providers supporting those of working age, as they are more exposed to public sector budgets and funding challenges- they have the lowest proportion of self-funders at 2%, compared to care homes for older people that have the highest proportion of self-funders at 48.9%.
- **Short-term funding** – The Government too often finalises local government finance settlements with as little as six weeks' notice before the start of the new financial year, and only use it to cover one year of funding. This prevents local authorities from being able to plan beyond the short- to medium-term, increasing instability in the market and disincentivising private investment in the sector.
- **Workforce crisis** – The adult social care workforce has seen sustained high vacancy and turnover rates for decades. This massively impacts the capacity of providers. The crisis is predominantly driven by insufficient pay and a lack of recognition and career progression in the sector. Care workers are highly skilled and carry out important work with significant responsibilities on par with their peers in the NHS, yet this is not sufficiently recognised in society, nor is it recognised by the average pay for the sector.
- **Postcode lottery** – Too often the care someone is able to secure is dependent on where they live. It is a postcode lottery whereby the support available is linked not to their specific needs but based on the financial means or the commissioning approach adopted by their local authority. It is largely driven by uneven funding raised by council tax across the country and inconsistencies in adult social care commissioning by local authorities.



Care workers are highly skilled and carry out important work with significant responsibilities on par with their peers in the NHS, yet this is not sufficiently recognised in society, nor is it recognised by the average pay for the sector.”

Workforce crisis





## 2.4 To address these challenges, we are making the following recommendations:

### 2.5 Establish a new commissioner for the adult social care system

2.5.1 At the heart of the adult social care system should be the needs and voices of those in need of support. Too often however, they can struggle have their voice heard.

2.5.2 Voyage Care is calling for the development of a new Commissioner for Adult Social Care with a legal mandate to promote and protect the rights of those relying on the adult social care system.

### 2.6 Develop a consistent approach to how councils commission care

2.6.1 To help address to postcode lottery associated with accessing care across the country and the inconsistent and inefficient commissioning methods local authorities have adopted, we recommend:

2.6.2 To increase the consistency of care assessments to ensure access to the correct support:

- Implement an improved nationalised system of training and support for commissioners and assessors to help eliminate the postcode lottery associated with accessing care. Commissioning should always be based on securing the best outcomes for those supported by the social care system.
- Reduce the disconnect between those in public sector bodies that commission care and those with operational knowledge of services.
- Provide greater clarity and standardisation across all commissioners in approaches to assessing care needs. There should be an expanded role for national leadership on this front, but with local authorities and NHS organisations remaining at the heart.
- Implement a national assessment framework for adult social care, like that available for NHS continuing healthcare and NHS-funded nursing care. This framework should be fairly and consistently followed across the country.

2.6.3 To increase contracting and administration efficiency:

- A single national form of contract should be developed for all social care services based on standardised terms, but with flexibility to allow for local service specifications, as is the case with the NHS. The standardised terms could cover termination clauses, and inflation-linked pricing.
- Implement nationally consistent standards and systems for payment
- Implement national standards for the monitoring of contractual performance.
- Greater support for the digitisation of social care to facilitate all of the above.

2.7 Ensure greater predictability of funding for the sector

2.7.1 To increase local authorities' ability to plan for the medium to long term and increase stability and investment in the sector we are calling for:

The Government, working with local authorities, to set a multi-year funding settlement for social care, like that for the NHS.

Failing that, the Government should commit to a timetable which would see local government finance settlements agreed well in advance of the start of the new financial year. This should be accompanied by a commitment by councils to agree fee settlements with providers well in advance of the start of the new financial year, with the new year rate being applied automatically from the start of April.

Funding needs to be targeted in a strategic way, ensuring the right balance between the needs of the elderly, children and those of working age in the care system. A standardised national fair funding mechanism which correlates directly with the National Living Wage (NLW) and general inflation forecasts to provide predictability, fairness and equality.

This should include a tariff system, which is regionalised but allows for a fair rate to be set for services provided. It should also include a minimum hourly rate for supported living fees that reflect the regional cost of living and the minimum hourly wage.

### 2.8 Establish a compulsory national register of those working in the adult social care system.

2.8.1 Whilst it cannot be stressed enough that underpayment is a key driver of the social care workforce crisis right across the sector, greater recognition of the skilled work social care workers undertake is also required to ensure they are valued and to elevate the career's reputation, helping to drive recruitment and retention.

2.8.2 Voyage Care wants to raise the status of those working in the adult social care system to ensure there is parity of esteem with workers in the NHS.

2.8.3 The Department for Health and Social Care's (DHSC) newly announced digital skills passport, outlined in the Next Steps policy paper, will not professionalise the sector and raise the status of care workers in the way that a national register would.

2.8.4 We are therefore calling for the Government to take the extra step and establish a compulsory register of care workers in England that contains records of workers' DBS checks, employers, and qualifications, like that which already exists in Wales.

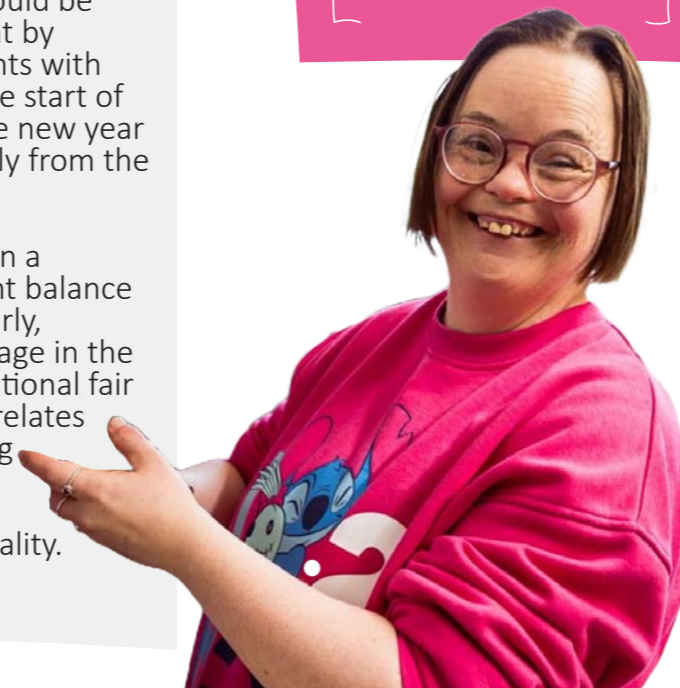
2.8.5 Like the digital skills passport, the register, with its record of workers' qualifications, would provide assurances to the public about the staff providing care. It would also enable staff to have their skills and knowledge properly recognised and require continued development within the workforce.

2.8.6 The register, though, would go one step further than the digital skills passport in improving recruitment efficiency and would enable staff to transition smoothly between employers. This is because providers would be able to easily identify qualifications of potential staff, reducing the need for re-training, and things like references and DBS checks, which are often a source of significant delay in care worker recruitment, will already be validated on the register. The latter would still be a barrier if only the skills passport were to be established.

We're calling for my voice to be heard by a new commissioner for adult social care.

We're calling for a national register for those working in adult social care.

We're calling for the same access & funding as people in other parts of the country.





# 03. Challenges facing adult social care

- 3.1 The UK is in the midst of an adult social care emergency. Adult social care affects the lives of over 10 million people in England and, according to the British Social Attitudes survey, two thirds of those who have used or had contact with adult social care were dissatisfied with it.
- 3.2 Funding is failing to meet the levels of demand, with many people not receiving the support they need. The National Audit Office has noted that levels of unpaid care remain high and too many adults have unmet needs.
- 3.3 This is despite the fact that, as well as adult social care being instrumental in enabling working-aged people with learning disabilities to live fulfilling lives, it contributes £51.5 billion of economic activity in England alone when including indirect and induced effects, surpassing other sectors such as electricity and power. In fact, for every £1 invested in social care, £1.75 is generated in the wider economy.
- 3.4 The difficult situation is only expected to worsen as forecasts predict a growing demand for care.

**30%** of requests for local authority funding for social care result in no support, rising to 34.3% of requests from those aged 18-64.



**£** For every £1 invested in me, £1.75 goes back into the wider economy

1. Department of Health and Social Care, People at the Heart of Care: Adult Social Care Reform White Paper, December 2021. Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/1061870/people-at-the-heart-of-care-asc-reform-accessible-with-correction-slip.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1061870/people-at-the-heart-of-care-asc-reform-accessible-with-correction-slip.pdf)

2. The King's Fund and Nuffield Trust, British Social Attitudes survey: Public satisfaction with social care hits new low, March 2024. Available at: <https://www.nuffieldtrust.org.uk/news-item/british-social-attitudes-survey-public-satisfaction-with-social-care-hits-new-low#:~:text=The%20survey%2C%20carried%20out%20by,at%20a%20historically%20high%20level.>

3. National Audit Office, The adult social care market in England, March 2021. Available at: <https://www.nao.org.uk/wp-content/uploads/2021/03/The-adult-social-care-market-in-England.pdf>

4. The King's Fund, Social Care 360, Key Facts and figures about social care, May 2023. Available at: <https://www.kingsfund.org.uk/audio-video/key-facts-figures-adult-social-care>



Adult social care contributes **£51.5 billion** of economic activity in England alone.




# 04. Rising demand for care

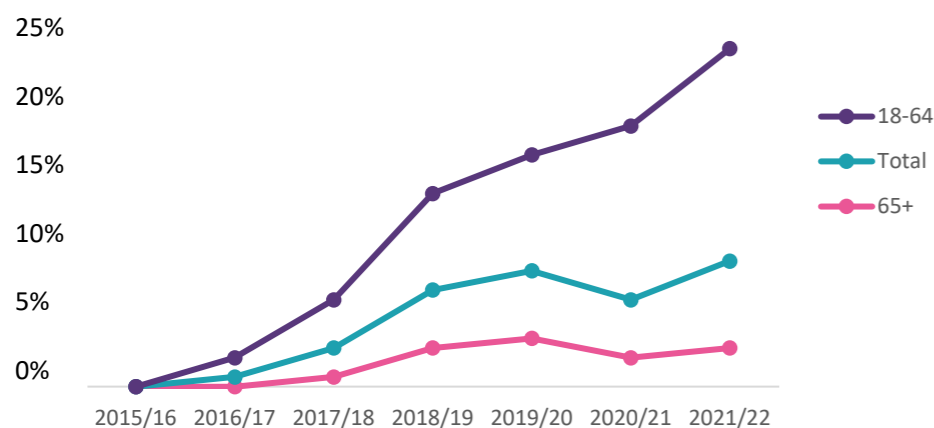
- 4.1 In 2022/2023 2.0 million people requested social care support from their council, which is 170,000 more than in 2015/16. The Department of Health and Social Care projects that if current patterns continue in England, around 29% more adults aged 18 to 64 and 57% more of those aged 65 and over will require care in 2038 compared with 2018<sup>9</sup>
- 4.2 Furthermore, it is estimated that demand for adult social care workers will rise from 1.2 million full time equivalent (FTE) posts in 2021 to 1.8 million in 2030 because of increased requirements for support.
- 4.3 The increased demand for social care is not exclusively driven by an ageing population. The most recent data from the Family Resources Survey shows that the prevalence of disability among working-age adults was 23% in 2021/2022, up from 16% in 2010/2011, whilst the same figure for those of state pension age has remained fairly static over the same period.
- 4.4 In October 2023 the Care Quality Commission (CQC) found that the number of requests for social care support from working age adults per 100,000 population increased by 15% over the last 5 years, equating to over 87,000 more requests. At the same time, the number of new requests to councils for support for older people increased by around 47,000 over the same 5-year period and, at a rate per 100,000 population, it has remained relatively unchanged.

4.5 Analysis of NHS Digital data by the Institute for Government revealed that between 2015/16 and 2021/22 the number of working-age adults requesting care increased by 22.10%, compared to just 4.3% for those aged over 65.



 New requests for social care support from working age adults in England have risen by 22% since 2016.

Change in requests for support from new clients since 2015/16, by age group



Source: Institute for Government analysis of NHS Digital 'Adult Social Care Activity', ('18' table), 2021/22, supported by CIPFA. Notes: 2015/16 was the first year that NHS Digital published this information. • Get the data • Embed • Download image

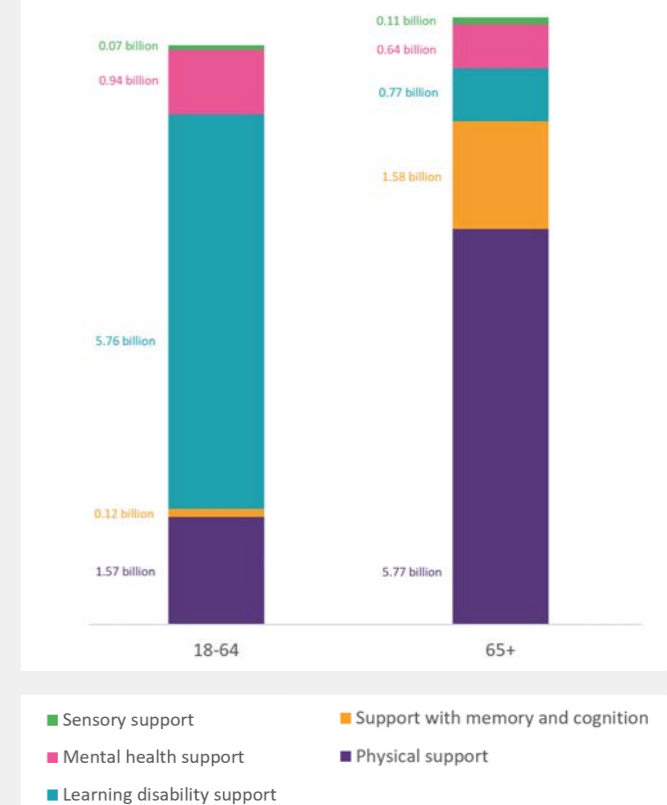
5. Future Social Care Coalition, Carenomics, September 2023. Available at: <https://futuresocialcarecoalition.org/wp-content/uploads/2023/09/FSCC-Carenomics-2.pdf>  
 6. The King's Fund, Social Care 360, March 2024. Available at: <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/social-care-360>  
 7. The King's Fund, Social Care 360, March 2024. Available at: <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/social-care-360>  
 8. House of Commons Library, Adult social care funding (England), January 2023. Available at: <https://researchbriefings.files.parliament.uk/documents/CBP-7903/CBP-7903.pdf>



# 05. Need to widen the focus of social care

- 5.1 The King's Fund states that approximately half of all social care expenditure in England is on working-age adults, with nearly 320,000 adults of this age receiving support from adult social care services. Meanwhile, the NAO reports that in 2019-2020 around 88% of spending on long-term learning disability support was for adults aged 18–64<sup>10</sup>
- 5.2 The total number of new requests for social care support from those of working age in England is rising more rapidly than that of those from older people, with a rise of 22% between 2015/2016 and 2022/23 for working-aged people compared to an increase of 6% for those aged over 65 over the same time period.
- 5.3 This demonstrates how social care for working-age adults is an increasingly important proportion of social care provision.
- 5.4 Much debate and discussion around adult social care continues to focus on its role in relieving pressures on hospitals and how to support older people and the challenges faced in the children's social care system. Greater focus needs to be given to the needs of those of working age who increasingly rely on the social care system to live independent and fulfilling lives, whatever their disability or condition might be.

Just under half of social care expenditure is on working age adults



9. The Health Foundation, Health and social care funding projections 2021, October 2021. Available at: <https://www.health.org.uk/publications/health-and-social-care-funding-projections-2021>  
 10. Department for Work and Pensions, Family Resources Survey; Financial Year 2021 to 2022, March 2023. Available at: <https://www.gov.uk/government/statistics/family-resources-survey-financial-year-2021-to-2022>  
 11. Care Quality Commission, State of Care 2022/23, October 2023. Available at: [https://www.cqc.org.uk/sites/default/files/2023-10/20231020\\_stateofcare2223\\_print.pdf](https://www.cqc.org.uk/sites/default/files/2023-10/20231020_stateofcare2223_print.pdf)  
 12. Institute for Government, Performance Tracker 2022/23: Spring update, February 2023. Available at: <https://www.instituteforgovernment.org.uk/performance-tracker-2022-23/adult-social-care>

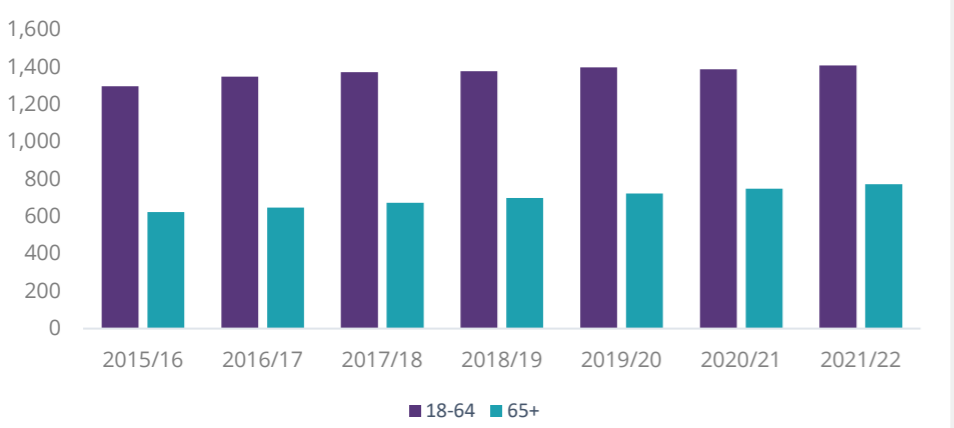


# 06. Rising cost of care and lack of public funding

- 6.1 Once adjusted for inflation, between 2015/16 and 2022/23 the average weekly cost of residential and nursing care rose by 7.3% for working-age adults and 21% for adults aged over 65.
- 6.2 Despite the rising cost of, and demand for, adult social care, government funding for local authorities for such care fell by 55% in 2019-20 compared with 2010-11, resulting in a 29% real-terms reduction in local government spending power (government funding plus council tax revenue).
- 6.3 We acknowledge that the Government has taken some steps to address this issue, including the record £7.5 billion investment announced in the 2022 Autumn Statement, which included the Market Sustainability and Improvement Fund. This fund was designed to support local authorities to make “tangible” improvements to adult social care capacity and improve market sustainability by increasing fee rates paid to providers and increasing the workforce capacity.
- 6.4 However, the sector generally agrees that the Government has not gone far enough, with Hft and Care England’s 2023 Sector Pulse Check reporting that 84% of adult social care providers say that government funding initiatives implemented over the past year have had no impact upon their financial sustainability.

- 6.5 The House of Commons Health and Social Care Committee previously argued that the Government needs to allocate an additional £7 billion per year by 2023/24 to cover demographic changes and uplift staff pay in line with the national minimum wage. However, even this substantial increase would not cover any improvement to access to care, which is urgently needed – and the National Living Wage has increased even more since this analysis.
- 6.6 More recently the Local Government Association has called for an extra £13 billion to address the pressure on the social care system and to ensure councils can meet all of their statutory duties under the Care Act.
- 6.7 Meanwhile, research by The Health Foundation has found that an additional £8.3 billion will be needed by 2032/33 just to meet the increasing demand, and an additional £11.6 billion of funding would be required by 2032/33 to meet demand and improve access to care.
- 6.8 This lack of funding is having a massive impact on care provision. As a result of cost pressures and reduced support from central government, the think-tank the Institute for Government found that 64% of councils reported that providers in their area had closed, ceased trading, or handed back contracts in the four months to November 2022 compared to 25% in the six months to March 2020.

Average weekly cost of residential and nursing care. Costs adjusted to 2021/22



Source: NHS Digital  
Inflation calculated using September 2022 GDP deflators from HM Treasury. The GDP deflator in 2020/21 was heavily affected by the impact of COVID-19 on the economy.



13. The King’s Fund, Social Care 360. March 2024. Available at: <https://www.kingsfund.org.uk/publications/social-care-360>  
 14. National Audit Office, The adult social care market in England, March 2021. Available at: <https://www.nao.org.uk/wp-content/uploads/2021/03/The-adult-social-care-market-in-England.pdf>  
 15. The King’s Fund, Social Care 360. March 2024. Available at: <https://www.kingsfund.org.uk/publications/social-care-360>  
 16. The King’s Fund, Social Care 360, March 2024. Available at: <https://www.kingsfund.org.uk/publications/social-care-360>



90%

Between 2018 and 2038, total costs of care are set to rise by 90%

- 6.9 The Department of Health and Social Care has assessed that the majority of local authorities have paid below the sustainable rate per week for care home placements for adults aged 65 and over, and below the sustainable rate per contact hour for homecare. The Department also stated does not challenge local authorities who pay low rates.
- 6.10 It is unsurprising, then, that the latest Sector Pulse Check report by Care England revealed that increasing cost pressures have resulted in 71% of providers being in deficit or facing a decrease in their surplus in 2023.

79% of providers said that Local Authority fee increases did not cover the increasing costs of workforce pay in 2023

- 6.11 This issue is particularly pertinent for providers supporting those of working age, as they are more exposed to public sector budgets and funding challenges.
- 6.12 Voyage Care receives over 95% of its fees from public sector bodies. This is typical in working-age adult care homes which, according to the ONS, have the lowest proportion of self-funders at 2%, compared to care homes providing care for older people that have the highest proportion of self-funders at 48.9%.

- 6.13 This means providers supporting working-age adults are generally unable to cross-subsidise shortfalls in public fees with self-funders.
- 6.14 In addition, the specialist care sector, catering for those with complex needs, generally operates in smaller domestic settings which functionally operate to encourage the independence of the people it supports. This means they are less able to benefit from purchasing efficiencies or the aggregating of costs than the NHS or the aged care sector, where bulk purchasing arrangements, less personalisation and larger facilities tend to dominate.
- 6.15 The extent to which under-funding is negatively affecting the adult social care sector is only expected to worsen. The Department of Health and Social Care projects that between 2018 and 2038, the total costs of care are set to rise by 90% for adults aged 18 to 64, from £9.6 billion to £18.1 billion, and 106% for adults aged 65 and over from £18.3 billion to £37.7 billion to address the pressure on the social care system and to ensure councils can meet all of their statutory duties under the Care Act.

17. National Audit Office, The adult social care market in England, March 2021. Available at: <https://www.nao.org.uk/wp-content/uploads/2021/03/The-adult-social-care-market-in-England.pdf>  
 18. Department of Health and Social Care, Market Sustainability and Improvement Fund 2023 to 2024, June 2023. Available at: <https://www.gov.uk/government/publications/market-sustainability-and-improvement-fund-2023-to-2024/market-sustainability-and-improvement-fund-2023-to-2024>  
 19. Hft & Care England, 2023 Sector Pulse Check, January 2024. Available at: <https://www.careengland.org.uk/sector-pulse-check-2023/>  
 20. Health and Social Care Committee, Social care: funding and workforce, October 2020. Available at: <https://committees.parliament.uk/publications/3120/documents/29193/default/>



# 07. Short-term funding

- 7.1 Successive governments have attempted to address local authorities' need for more funding for social care through a series of short-term grants and funding mechanisms. However, the Institute for Government has said that the Government has "fallen back on an old response of issuing short-term, emergency pots of money" that are "too late to make much of a difference".
- 7.2 In a recent blog post, Camille Oung, a Fellow at the Nuffield Trust, said "failure to put in place a sustainable long-term revenue source to fund social care means that it will be dependent on sporadic injections of money that offer brief respite in a crisis, but do little to enable long-term strategic reform."



A failure to put in place a sustainable long-term revenue source to fund social care means that it will be dependent on sporadic injections of money that offer brief respite in a crisis, but do little to enable long-term strategic reform."

Camille Oung, Fellow at Nuffield Trust

- 7.3 These short-term emergency pots of money are often primarily intended to increase capacity in adult social care to improve the speed of discharge out of hospital into care services in winter alongside addressing pressures in the children's social care sector. There is a danger that those of working age reliant on the care system find themselves squeezed between the needs of these two groups.
- 7.4 However, as social care providers are unable to make long-term decisions or investments based on short-term cash injections of this nature, they do not meet the needs of the people we support.

- 7.5 Alongside this, central government too often finalises the local government finance settlements with as little as six weeks' notice before the start of the new financial year, and only use it to cover one year of funding. The short-term and short-notice nature of social care funding as a whole massively impedes local authorities' ability to plan for the medium to long term.
- 7.6 As local authorities are unable to plan how much they will be able to spend on commissioning care, providers are in turn unable to plan what they can provide.
- 7.7 This year, just 1 in 3 local authorities with whom Voyage Care works had informed us of fee rates for 2023/24 before the start of April 2023, despite the fact that costs are being borne from the start of the financial year. In addition to this, many funders don't automatically start fee uplifts from the start of the financial year.
- 7.8 The Institute for Government said that "the current model of funding adult social care is not well suited to generating anything more than short- to medium term certainty for providers". It adds that this financial instability disincentivises private investment in the adult social care market.
- 7.9 Ultimately, short-term funding reduces value for money and stability within the adult social care sector. Consequently, Care England states that in 2023, 43% of providers were forced to close parts of their organisation or hand back care contracts to local authorities; 19% made staff redundancies; 18% offered care to fewer people; and nearly two in five (39%) providers, including over half (56%) of all smaller providers considered exiting the market entirely.
- 7.10 This will leave some of the most vulnerable in society at risk of not being able to access the support they need.



I push my team to ensure independence for the people we support. Choice is offered when it can be, every minute of every hour of every day. I want the people we support to have a happy and fulfilling life."

Kauleigh, Service Manager



21. Hft & Care England, 2023 Sector Pulse Check, January 2024. Available at: <https://www.careengland.org.uk/sector-pulse-check-2023/>

22. Office for National Statistics, Care homes and estimating the self-funding population, England 2022 to 2023, July 2023. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/socialcare/articles/carehomesandestimatingthefself>

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23. Committee of Public Accounts, Adult Social Care Markets, June 2021. Available at: <https://committees.parliament.uk/publications/6289/documents/69334/default/>

24. Institute for Government, Adult social care Short-term support and long-term stability, March 2023. Available at: [https://www.institutefor.gov.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term\\_0.pdf](https://www.institutefor.gov.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term_0.pdf)

25. Hft & Care England, 2023 Sector Pulse Check, January 2024. Available at: <https://www.careengland.org.uk/sector-pulse-check-2023/>





## 08. Workforce crisis

- 8.1 The adult social care workforce is in a severe and sustained crisis. The vacancy rate is near its highest since records began, at 9.9% in 2022/23, which is equivalent to 152,000 vacancies. Meanwhile, the turnover rate of colleagues working in the adult social care sector was 30% in 2022/23, equating to 490,800 people leaving their jobs over the course of the year<sup>24</sup>. It forms part of a wider challenge in the health and social care sector more broadly, with the NHS having an overall vacancy rate of 8.4% in September 2023, which is equivalent to 121,000 vacancies.
- 8.2 This massively affects the capacity of providers and prevents consistency in support and improvements in training, especially for those providing care for people with complex needs and disabilities. The Association of Directors of Adult Social Services found that in the first three months of 2022, 2.2 million hours of homecare could not be delivered due to insufficient workforce capacity. Several reasons for this workforce crisis have been identified.

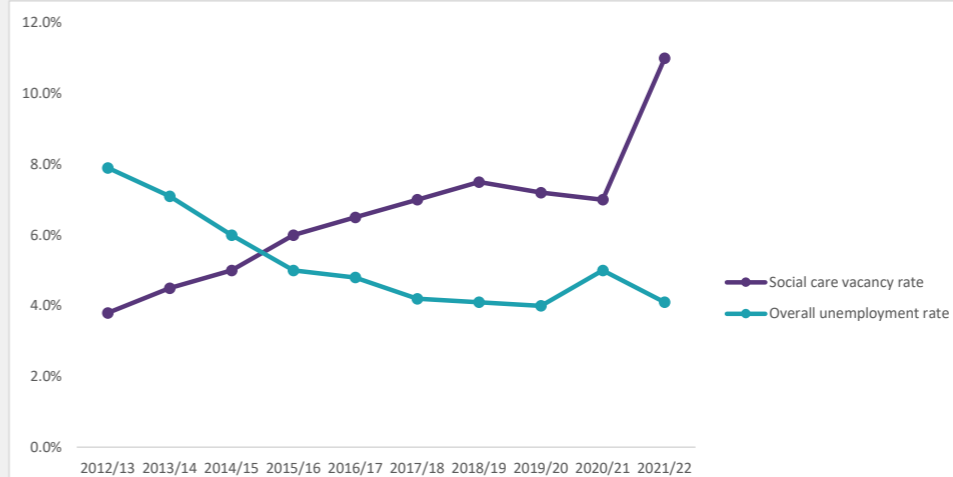
### 8.3 Insufficient pay

- 8.3.1 The average care worker pay has increased from £6.75 per hour in September 2012 to £10.11 in March 2023. Despite this increase, pay rates for care workers are still some of the lowest in the UK economy. Skills for Care reports that in 2022/23 the average sales and retail assistant earned 1p more per hour than the average care worker. Furthermore, despite requiring a similar level of skill, the average care worker pay is £1 less per hour than healthcare assistants (HCAs) in the NHS that are new to their role, rising to £1.53 less than HCAs with more than two years' experience. To add insult to injury, with five years' experience a care worker's pay only increases by an average of 6p.

**£1** The average care worker pay is £1 less per hour than healthcare assistants (HCAs) in the NHS.

- 8.3.2 As a result, many providers report that care workers are leaving the profession because they can get better pay in other sectors such as retail.

Percentage of the population that are unemployed, and percentage of social care posts that are unfilled



Source: Skills for Care  
Reproduced from Skills for Care analysis. Social care vacancy data are for the independent and local authority sectors only.

The King's Fund

29. Camille Oung, Nuffield Trust, Social reform across the UK: why does it keep failing?, February 2023. Available at: <https://www.nuffieldtrust.org.uk/news-item/social-care-reform-across-the-uk-why-does-it-keep-failing>

30. Institute for Government, Adult social care Short-term support and long-term stability, March 2023. Available at: [https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term\\_0.pdf](https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term_0.pdf).

31. Hft & Care England, 2023 Sector Pulse Check, January 2024. Available at: <https://www.careengland.org.uk/sector-pulse-check-2023/>

32. Skills for Care, The state of the adult social care sector and workforce in 2022, October 2022. Available at: <https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-state-of-the-adult-social-care-sector-and-workforce-2022.pdf>

- 8.3.3 The centre-right think tank Policy Exchange has called for actions to support the social care workforce through the development of a Social Care Minimum Wage and a long-term plan for the care workforce. This is in addition to calls from the centre-left Institute for Public Policy Research (IPPR) for an NHS-style long-term plan to improve the quality of social care and “a living wage guarantee for care workers, eventually bringing pay in line with NHS pay scales”.
- 8.3.4 Whilst we welcome the Government’s increase of the National Living Wage from £10.42 to £11.44 an hour from April 2024, which will see many care workers receive an above-inflation pay rise of 10%, it cannot be stressed enough that this increase will have a direct impact on care provider cost pressures.
- 8.3.5 Whilst Voyage Care pays its care workers at rates above the NLW, the care sector is predominantly a minimum wage sector, therefore any NLW increases have a significant impact on the fees required by providers.
- 8.3.6 A greater proportion of social care costs that are directly related to staffing compared to the NHS. For Voyage Care approximately 70% of costs are related to staffing, compared to just 45.2% for the NHS in 2021/22. Despite this, the adult social care sector has not seen a long-term funding plan, like that of the NHS, in order to fund its wage increases.

### 8.4 Undervalued colleagues

- 8.4.1 Whilst pay has a massive impact on the recruitment and retention of adult social care workers, the House of Commons Health and Social Care Committee notes that: “Poor recognition remains an issue for the sector, with social care workers feeling undervalued. Social care workers we spoke to suggested that this was a key factor behind the high turnover and vacancy rates in the social care workforce”. It continued: “Improving the level of recognition afforded to social care workers must be a key focus for the Government to safeguard the future of the social care workforce”<sup>27</sup>.
- 8.4.2 At present, new care workers are expected to achieve a non-accredited care certificate as part of their induction. Despite this, only 42% of those who started in the sector since this standard was put in place have achieved a certificate, and 32% have not yet taken part in any care certificate learning.
- 8.4.3 The latest Skills for Care report found that, of employers with a turnover rate of less than 10%, 94% invested in learning and development. The report also identified five factors that can more than double colleague retention. These include being able to access training and having a relevant qualification. When none of these factors apply the turnover rate is a considerable 48.7%, falling to 20.6% when all of the factors apply.

33. NHS England, NHS Vacancy Statistics England, April 2015 – September 2023, November 2023. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-vacancies-survey>

34. ADASS, ADASS Waiting for Care Report May 2022, May 2022. Available at: <https://www.adass.org.uk/waiting-for-care-adass-report-may-2022>

35. Skills for Care, The state of the adult social care sector and

workforce in 2023, October 2023. Available at: <https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2023.pdf>

36. Care Quality Commission, State of Care 2023, The health and care workforce, October 2023. Available at: <https://www.cqc.org.uk/publications/major-report/state-care/2022-2023>

26. Office for National Statistics, Care homes and estimating the self-funding population, England 2022 to 2023, July 2023. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/socialcare/articles/carehomesandestimatingtheselffundingpopulationengland/2022to2023>

27. Committee of Public Accounts, Adult Social Care Markets, June 2021.

Available at: <https://committees.parliament.uk/publications/6289/documents/69334/default/>

28. Institute for Government, Adult social care Short-term support and long-term stability, March 2023. Available at: [https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term\\_0.pdf](https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term_0.pdf)





67%

67% of care providers highlighted that the key driving force behind members of their workforce leaving was due to there being better career opportunities elsewhere.

- 8.4.4 Speaking to the trade union, UNISON, care worker Sam Thornton, who has been supporting people with learning disabilities for more than 30 years, said: “The job I do is as skilled as a nurse in a hospital but we’re not valued. The responsibilities we have are mind-blowing at times, people’s lives are in our hands”.
- 8.4.5 The lack of clear career progression in the social care sector has previously been cited as a reason for care workers feeling unrecognised and undervalued. According to Care England, 67% of care providers highlighted that the key driving force behind members of their workforce leaving was due to there being better career opportunities elsewhere.
- 8.4.6 We therefore welcome the Department for Health and Social Care’s plans to introduce a care workforce pathway, Care Certificate, and digital skills passport, as outlined in its “Adult social care system reform: Next steps to put People at the Heart of Care” policy paper. It is a step in the right direction to improve career progression prospects within the sector as a whole and to improve care worker retention, but it still falls short of what is needed to address the difficulties faced in the sector.
- 8.4.7 Until very recently there has been no clear career progression that reflects and rewards the complexity, responsibility, and autonomy of existing jobs in adult social care. This contributes to the misconception that care work is an unskilled job with little emphasis on, and opportunity for, professional development.
- 8.4.8 We have seen first-hand how proper opportunities for career progression increase colleague retention in social care.
- 8.4.9 Urvi is just one example among many at Voyage Care. More robust reform is required for this to become the norm across the sector.



## Meet Urvi Patel, Operations Director...

Urvi has worked at Voyage Care for over 20 years. She first joined as a support worker and after a series of well-deserved promotions is now one of our operations directors with a specialism in community based support.



It awoke my passion to care and support people, and do all I could do to ensure they get the very best care they deserve... You are always encouraged and supported to be your best self in what you want to achieve at work.”

Urvi, Operations Director



37. Policy Exchange, What do we want from the next Prime Minister? A series of policy ideas for new leadership: Health and Social Care, August 2022. Available at: <https://policyexchange.org.uk/wp-content/uploads/2022/08/What-do-we-want-from-the-next-Prime-Minister-Health-and-Social-Care.pdf>

38. Institute for Public Policy Research, State of Health and Care, March 2021. Available at: <https://www.ippr.org/files/2021-03/state-of-health-and-care-mar21.pdf>

39. Department of Health and Social Care, DHSC evidence for the NHS PRB: pay round 2023 to 2024, February 2023. Available at: <https://www.gov.uk/government/publications/dhsc-evidence-for-the-nhsprb-pay-round-2023-to-2024>

40. Health and Social Care Committee, Social Care: Funding and Workforce, October 2020. Available at: <https://committees.parliament.uk/publications/3120/documents/29193/default/>





# 09. Postcode lottery

- 9.1 Too often the care those in need of it are able to secure from a local authority is dependent on where they live. It is a postcode lottery whereby the support available is linked not to their specific needs but based on the financial means or commissioning approach adopted by their local authority.
- 9.2 For example, the Institute for Public Policy Research has shown that the proportion of care provided at home varies considerably across different councils, ranging from 46% in Barnsley to 84% in Hammersmith and Fulham.
- 9.3 Furthermore, given that social care is funded locally, and budgets are not ringfenced, there is vast regional inequality in the amount of support for care that people can receive across the country. In the East of England 68% of those aged over 65 who receive care are fully-funded by the local authority, this is over six times that in the North East, where only 11% were fully-funded.
- 9.4 Meanwhile, while every region has a significant reduction in the numbers of people receiving long-term care each year to some degree, this ranges from a 1.2% decrease in the North East to an 11% reduction in the South West.
- 9.5 The reasons for this postcode lottery are outlined here:

- 9.6 Uneven investment**
  - 9.6.1 One reason for the postcode lottery is uneven access to public and private funding.
  - 9.6.2 Councils with more properties in a higher council tax band can raise more money through council tax and the Adult Social Care Precept than those with lower band properties. This leads to the quantity and quality of the service available being determined by where someone lives, with cash-rich local authorities having better adult social care provision. This is despite the fact that poorer communities, that tend to have more lower band properties, are typically in greatest need of council-funded social care provision. As Sally Gainsbury, Senior Policy Analyst at the Nuffield Trust has rightly noted: "Local authorities were already struggling to meet growing need for care services before rising cost pressures hit, so inevitably this means more people unable to access care they need, particularly in more deprived areas."
  - 9.6.3 The National Audit Office found that, against a backdrop of tight funding settlements, the Government is increasingly reliant upon the care precept to raise permanent funding. They stated that this is

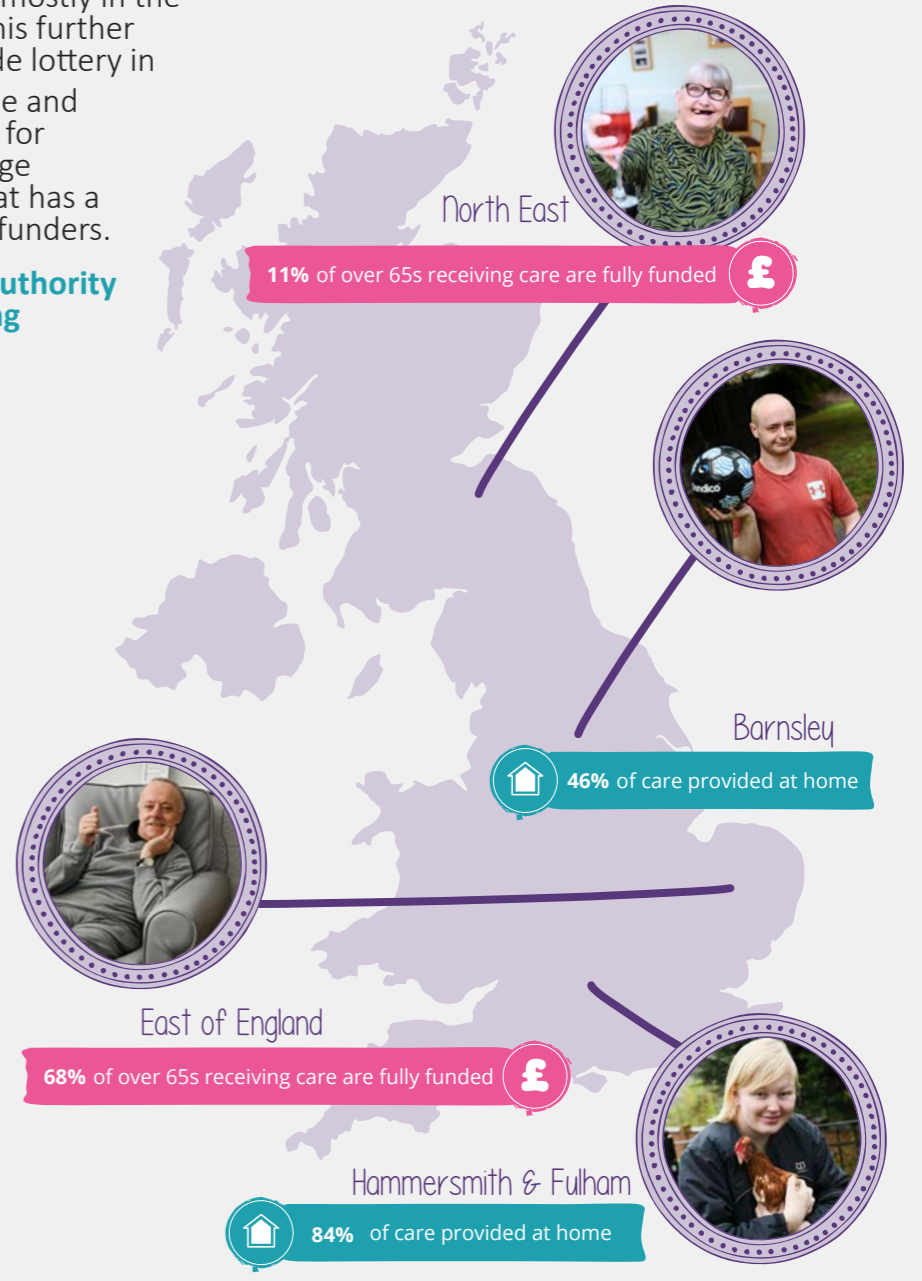
41. Fabian Society, Support Guaranteed: The roadmap to a National Care Service. DATE. Available at: <https://fabians.org.uk/wp-content/uploads/2023/06/Fabians-Support-Guaranteed-Report-WEB.pdf>  
 42. Skills for Care, The state of the adult social care sector and workforce in 2023, October 2023. Available at: <https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2023.pdf>

43. UNISON, Government must invest in social care to drive the economy, says report, September 2023. Available at: <https://www.unison.org.uk/news/press-release/2023/09/government-must-invest-in-social-care-to-drive-the-economy-says-report/>  
 44. Care England, Sector Pulse Check, March 2023. Available at: <https://www.careengland.org.uk/wp-content/uploads/2023/03/Hft-Sector-Pulse-Check-2022-Single-Pages-Digital.pdf>

- likely to "disadvantage those areas with a lower tax base and greater demand for local authority-funded provision"
- 9.6.4 In addition to this, self-funders pay higher fees than those receiving care who are funded by local authorities. The higher fees paid by self-funders are at a level that enables providers to be sustainable. The Institute for Government says that this means providers are most likely to invest in areas where there is a high prevalence of self-funders. Consequently, private investment in the adult social care sector tends to flow towards parts of the country that have a high population of wealthy older people – mostly in the South East and London. This further contributes to the postcode lottery in the quality of care available and is particularly problematic for providers in the working age adult social care sector that has a minute proportion of self-funders.
- 9.7.3 We see variable processes in assessing needs and the levels of support offered in different areas of the country for individuals with comparable needs, that are assessed as complex in one area and not in another.
- 9.7.4 Our experience has shown, care needs assessments undertaken by local authorities, which form the basis of the agreement between them and providers, are inconsistent and often do not reflect the true picture of someone's need – and when this becomes apparent commissioners are reluctant to revisit care packages.

## 9.7 Inconsistencies in Local Authority Social Care Commissioning

- 9.7.1 Another contributor to the postcode lottery in adult social care is the inconsistency in commissioning of social care between local authorities across the country.
- 9.7.2 There is vast variation in the amount, type, cost, and quality of care commissioned by local authorities across England. In fact, The King's Fund found that there is a more than a six-fold difference between local authorities in the rates of people supported in care homes, and an eight-fold variation in their provision of home care:



45. Fabian Society, Support Guaranteed: The roadmap to a National Care Service. DATE. Available at: <https://fabians.org.uk/wp-content/uploads/2023/06/Fabians-Support-Guaranteed-Report-WEB.pdf>  
 46. Skills for Care, The state of the adult social care sector and workforce in 2023, October 2023. Available at: <https://www.skillsforcare.org.uk/Adult-Social-Care-Workforce-Data/Workforce-intelligence/documents/State-of-the-adult-social-care-sector/The-State-of-the-Adult-Social-Care-Sector-and-Workforce-2023.pdf>

47. UNISON, Government must invest in social care to drive the economy, says report, September 2023. Available at: <https://www.unison.org.uk/news/press-release/2023/09/government-must-invest-in-social-care-to-drive-the-economy-says-report/>  
 48. Care England, Sector Pulse Check, March 2023. Available at: <https://www.careengland.org.uk/wp-content/uploads/2023/03/Hft-Sector-Pulse-Check-2022-Single-Pages-Digital.pdf>



- 9.7.5 There is an intrinsic conflict, as they are both assessor and funder. This means providers are driven to stick within pre-agreed fee arrangements even where that demonstrably doesn't fully meet the need of the individual. If this disparity is not addressed it can lead to the individual's deterioration, resulting in increased social care requirements later down the road.
- 9.7.6 In addition to this, our experience is that each local authority uses its own contract, with little standardisation in the forms used and the content in them. There are also instances where multiple different contracts are used within one local authority. Not only does this pose a challenge to both the council and the provider in writing, negotiating and reviewing these contracts; it also creates significant challenges in the gathering and reporting of data as each contract often has its own key performance indicators and quality measures, ultimately adding to the inefficiency of the system.
- 9.7.7 The Department of Health and Social Care believes that local authorities could have been 0.9% more efficient through their commissioning between 2020/21 and 2022/23.
- 9.7.8 The Institute for Public Policy Research states: "If every local authority provided home care equal to better-performing similar councils, 80,000 more people over 65 in England could be receiving care at home. Levelling up home care across the country would also save English local authorities £1.1 billion per year from their social care budgets, with new analysis showing community care is around one third of the cost of more institutional residential and nursing home options."



Levelling up home care across the country would save English local authorities **£1.1 billion** per year.

- The Institute for Public Policy





# 10. Voyage Care's recommendations

## 10.1 Establish a new Commissioner or they Adult Social Care system

- 10.1.1 The needs and voices of those requiring support should be at the heart of the adult social care system. Mirroring a similar mandate for the Children's Commissioner for England, a Commissioner for the Adult Social Care system would promote and protect the rights of those relying on its support.
- 10.1.2 We are calling for which independent Commissioner that could help address issues identified by the Equality and Human Rights Commission (EHRC), which warned that adults receiving social care in England and Wales were being failed when they tried to challenge decisions made by local authorities. The EHRC found that nearly half of carers (47%) felt that raising a complaint would make little difference, and that formal complaints procedures can often take over two years with no legal obligation to provide care in the interim.
- 10.1.3 In a press release publishing its findings, the EHRC noted that: "local authority processes are confusing and slow, with risks that people do not get the care they need. Social care users, and their loved ones, find making complaints difficult and stressful, often at a time when they are in crisis."
- 10.1.4 In addition, the Local Government and Social Care Ombudsman has called for a stronger public voice within the adult social care system.
- 10.1.5 There is no legal requirement for an independent stage in formal complaints processes in England. In fact, in 30% of cases the person responsible for considering formal complaints regarding adult social care decisions is a member of the team that made the original decision, or the original decision maker themselves. This damages peoples' confidence in the process and many say they think they would not get a fair resolution to their challenge.

- 10.1.6 The House of Lords Adult Social Care Committee called for "a Commissioner for Care and Support to act as a champion for older adults and disabled people and unpaid carers, and to accelerate a more accessible adult social care system".
- 10.1.7 Sir Andrew Dilnot, who chaired the commission on social care which reported in 2011, has rightly argued that there is a need for "a single person whose job it is to think or worry about social care and do that publicly".



There is a need for a single person whose job it is to think or worry about social care and do that publicly."

Sir Andrew Dilnot

- 10.1.8 A Commissioner for the Adult Social Care system could be a resolution to all of this. It would provide an independent body through which appeals processes could be conducted. They would also advocate for working-aged people supported by the adult social care system as they become an increasingly important proportion of people receiving care.
- 10.1.9 Importantly, although calls have been made by others to establish a Commissioner for Older People, this would not cover the large number of working age adults supported within the social care system.

## 10.2 Develop a consistent approach to how councils commission social care

- 10.2.1 Whilst it is clear that the sector is underfunded, there are opportunities to use current funding and systems more efficiently.



- 10.2.2 As previously discussed, the care people are able to receive is vastly varied across different local authorities.
- 10.2.3 At present local authorities all have different commissioning methods and contracts for adult social care, meaning providers have to jump through different hoops for different councils, resulting in a very inconsistent and inefficient system. In fact, Care England's Sector Pulse Check report called the current commissioning landscape for adult social care "messy and complicated".
- 10.2.4 Whilst recognising the need for councils to be able to reflect the individual needs of those requiring support, Voyage Care is calling for a more consistent social care commissioning model by local authorities, as is the case in the NHS.

- 10.2.5 Such a step would further drive efficiencies in local government, reduce back office spend for both commissioners and care providers, and would ensure more of every pound spent on social care goes to improving the lives of those in need of support.
- 10.2.6 Our call chimes with that of the Institute for Public Policy Research, which has called on the Government to set a new binding commissioning charter for social care that supports outcome-driven commissioning decisions, and to rebuild "genuine commissioning expertise in local authorities".

49. Nuffield Trust, Nuffield Trust response to CQC State of Care report, October 2023. Available at: <https://www.nuffieldtrust.org.uk/news-item/nuffield-trust-response-to-cqc-state-of-care-report-2>.

50. National Audit Office, The adult social care market in England, March 2021. Available at: <https://www.nao.org.uk/wp-content/uploads/2021/03/The-adult-social-care-market-in-England.pdf>.

51. Institute for Government, Adult social care Short-term support and long-term stability, March 2023. Available at: [https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term\\_0.pdf](https://www.instituteforgovernment.org.uk/sites/default/files/2023-03/adult-social-care-short-term-long-term_0.pdf).

52. Equality and Human Rights Commission, Challenging adult social care decisions in England and Wales, February 2023. Available at: <https://www.equalityhumanrights.com/sites/default/files/inquiry-challenging-adult-social-care-decisions-in-england-and-wales-report.pdf>.

53. Equality and Human Rights Commission, System for challenging social care decisions 'failing those who need it', February 2023. Available at: <https://www.equalityhumanrights.com/en/our-work/news/system-challenging-social-care-decisions-%E2%80%98failing-those-who-need-it%E2%80%99>

54. Local Government and Social Care Ombudsman, Review of Adult Social Care Complaints 2022-23, September 2023. Available at: <https://www.lgo.org.uk/assets/attach/6481/ASC-Review-2022-23.pdf>.

55. Equality and Human Rights Commission, Challenging adult social care decisions in England and Wales, February 2023. Available at: <https://www.equalityhumanrights.com/sites/default/files/inquiry-challenging-adult-social-care-decisions-in-england-and-wales-report.pdf>.

56. Equality and Human Rights Commission, System for challenging social care decisions 'failing those who need it', February 2023. Available at: <https://www.equalityhumanrights.com/en/our-work/news/system-challenging-social-care-decisions-%E2%80%98failing-those-who-need-it%E2%80%99>





A professional register would help raise the status of working in care, and highlight the fantastic and life-changing work colleagues across the sector do on a day to day basis.”

Karolina, CEO of the Care Workers' Charity

10.2.7 A precedent for a more uniform approach to the provision of care can be pointed to in the Government's special educational needs (SEND) and alternative provision (AP) plan, which seeks to ensure a more consistent approach across the country, and enables the support affected children can access and receive across the country to be comparable.

10.2.8 The Institute for Government has stated that providers are more likely to invest in a location when they have a strong relationship with local authorities and have confidence that they will receive business from commissioners. Meanwhile, local authorities are more likely to make commissioning decisions when they are certain that providers will continue to operate. A more predictable commissioning approach could help provide the stability required to build trust and unlock investment within the sector.

10.2.9 A consistent approach to how local authorities across England commission care is necessary and would serve to reduce the instability currently seen in the market, with care providers going out of business when local authorities attempt to limit expenditure on services.



To practically address the above, we are calling for the following:

#### 10.2.10 Consistency of care assessments that ensure access to the correct support:

Implement an improved nationalised system of training and support for commissioners and assessors to help eliminate the postcode lottery associated with accessing care. Commissioning should always be based on securing the best outcomes for those supported by the social care system.

Reduce the disconnect between those in public sector bodies that commission care and those with operational knowledge of services to ensure services commissioned directly match local needs.

Provide greater clarity and standardisation across all commissioners in approaches to assessing care needs. There should be an expanded role for national leadership on this front, but with local authorities and NHS organisations remaining at the heart.

Consistently implement a national assessment framework for all adult social care, like that available for NHS continuing healthcare and NHS-funded nursing care and the National Framework for the Commissioning of Care and Support in Wales. This framework should be fairly and consistently followed across the country.

#### 10.2.11 Increased contracting and administration efficiency:

A single national form of contract should be developed for all social care services based on standardised terms, but with flexibility to allow for local service specifications, as is the case with the NHS. The standardised terms could cover termination clauses, and inflation-linked pricing. Implement nationally consistent standards and systems for payment.

Implement national standards for the monitoring of contractual performance.

Greater support for the digitisation of social care to facilitate all of the above.

#### 10.3 Ensure greater predictability of funding for the sector

10.3.1 Ultimately, the key limiting factor to increasing the efficiency of social care commissioning by local authorities is that they do not have any certainty of what funds will be available beyond the current financial year. The short-term and short-notice nature of social care funding as a whole massively impedes local authorities' ability to plan for the medium to long term. We are therefore calling for:

The Government, working with local authorities, to set a multi-year funding settlement for social care, like that for the NHS, as called for by Care England's 'roadmap to a sustainable future for adult social care' report.

57. Local Government and Social Care Ombudsman, Review of Adult Social Care Complaints 2022-23, September 2023, Available at: <https://www.lgo.org.uk/assets/attach/6481/ASC-Review-2022-23.pdf>.

58. Equality and Human Rights Commission, Challenging adult social care decisions in England and Wales, February 2023, Available at: <https://www.equalityhumanrights.com/sites/default/files/inquiry-challenging-adult-social-care-decisions-in-england-and-wales-report.pdf>

59. House of Lords Adult Social Care Committee, A "gloriously ordinary

life": spotlight on adult social care, December 2022, Available at: <https://committees.parliament.uk/publications/31917/documents/193737/default/>

60. House of Lords Adult Social Care Committee, Corrected oral evidence: Adult social care, October 2022, Available at: <https://committees.parliament.uk/oralevidence/10950/pdf/>; Care England, Sector Pulse Check, March 2023, Available at: <https://www.careengland.org.uk/wp-content/uploads/2023/03/Hft-Sector-Pulse-Check-2022-Single-Pages-Digital.pdf>



Failing that, the Government should commit to a timetable which would see local government finance settlements agreed well in advance of the start of the new financial year. This should be accompanied by a commitment by councils to agree fee settlements with providers well in advance of the start of the new financial year, with the new year rate being applied automatically from the start of April.

Funding needs to be targeted in a strategic way, ensuring the right balance between the needs of the elderly, children and those of working age in the care system.

Adopt a standardised national fair funding mechanism which correlates directly with the NLW and general inflation forecasts to provide predictability, fairness and equality. This should include a tariff system, which is regionalised but allows for a fair rate to be set for services provided. It should also include a minimum hourly rate for supported living fees that reflect the regional cost of living and the minimum hourly wage.

#### 10.4 Establish a compulsory national register of those working in the adult social care system

10.4.1 Whilst it cannot be stressed enough that underpayment is a key driver of the social care workforce crisis, greater recognition of the skilled work social care workers undertake is also necessary in order to ensure they are valued and to elevate the career's reputation, helping to drive recruitment and retention.

10.4.2 Voyage Care wants to raise the status of those working in the adult social care system to ensure there is parity of esteem with workers in the NHS. At present however, the status, importance and skills of adult social care workers is not recognised through a requirement for national registration in the same way that nurses are required to register with the Nursing and Midwifery Council, or doctors who are required to register with the General Medical Council. A national register would increase the professional status and respect of social care workers, as it has for the aforementioned professions.

61. Care England, Sector Pulse Check, March 2023. Available at: <https://www.careengland.org.uk/wp-content/uploads/2023/03/Hft-Sector-Pulse-Check-2022-Single-Pages-Digital.pdf>

62. Institute for Public Policy Research, Community first social care, August 2021. Available at: <https://www.ippr.org/research/publications/community-first-social-care>

10.4.3 Karolina Gerlich, CEO of the Care Workers' Charity said "a professional register would help raise the status of working in care, and highlight the fantastic and life-changing work colleagues across the sector do on a day to day basis."

10.4.4 The DHSC's Next Steps policy paper notes that the newly announced digital skills passport will act as a "verified record of [care workers'] qualifications and training, which they can take with them throughout their careers" and will "establish a foundation for registration of staff in the future and will reduce unnecessary repeat training, giving employers the confidence to invest in their staff". However, it will not professionalise the sector and raise the status of care workers in the way that a national register would.

10.4.5 We are therefore calling for the Government to take the extra step and establish a compulsory register of care workers in England that contains records of workers' DBS checks, employers, and qualifications, like that which already exists in Wales.

10.4.7 Like the digital skills passport, the register, with its record of workers' qualifications, would provide assurances to the public about the staff providing care. It would also enable staff to have their skills and knowledge properly recognised and require continued development within the workforce.

10.4.8 The register, though, would go one step further than the digital skills passport in improving recruitment efficiency and would enable staff to transition smoothly between employers. This is because providers would be able to easily identify qualifications of potential staff, reducing the need for re-training, and things like references and DBS checks, which are often a source of significant delay and unnecessary administrative costs in care worker recruitment, will already be validated on the register. The latter would still be a barrier if only the skills passport were to be established.

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## Social Care Wales National Register

The purpose of the Social Care Wales National Register is ensure only those who are competent and qualified can deliver care and support in roles where registration is required. All domiciliary care workers and care home workers, including care managers, must register within 6 months of employment, by law.

The register is intended to promote professionalism within the care workforce, and allows registered persons to demonstrate skills and knowledge, evidencing their continued professional development. All those registered are required to complete 45 hours of CPD per three year period of registration, which is recorded on the register.

There are clear criteria for registration for both care workers and care managers; employers must endorse applications and verify the information provided.



More detail on the Social Care Wales National Register can be found at <https://socialcare.wales/registration>.



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## 11. Conclusion

- 11.1 Adult social care reform will inevitably be a major issue for the next government.
- 11.2 There are countless examples of where adult social care supports working-aged people with learning disabilities and complex needs to live fulfilling lives, with autonomy over where and with whom they live, and support to meet their goals and aspirations.
- 11.3 However, the system as a whole does not ensure that this person-centred approach is the norm across the country. All too often we see insufficient and inappropriate prescriptive care arrangements, with little to no input from the very individuals the care is supposed to be supporting.
- 11.4 It is essential that sufficient resources and policies are put in place as soon as possible to ensure that those that we support are at the heart of social care reform.
- 11.5 Improving the sector is not just a question of more funding, it is about implementing practical and pragmatic solutions that can be deployed in partnership with commissioners; delivering improved outcomes for those relying on the care system and increased efficiency for the whole sector and those it supports.
- 11.6 The recommendations we have set out will go some way to achieving this vision and making it a reality for more people who rely on care and support from the adult social care system. It is now time to act.





**For further information please  
contact**

**Caroline Byram**

Director of Sales  
Communications and Property at  
Voyage Care

[CarolineByram@voyagecare.com](mailto:CarolineByram@voyagecare.com)

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HAWK 20

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