





The Approved Mental Health Professional Workforce in the social care sector

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Foreword

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The importance of the Approved Mental Health Professional (AMHP) continues to endure with its clear statutory function and established role as a vital safeguard for people who are considered for assessment under the Mental Health Act 1983 (MHA).

The MHA Code of Practice (14.35) states that 'local authorities are responsible for ensuring that sufficient AMHPs are available to carry out their roles under the Act, including assessing patients to decide whether an application for detention should be made. To fulfil their statutory duty, local authorities should have arrangements in place in their area to provide a 24-hour service that can respond to patients' needs'.

In terms of addressing the 'sufficiency' question, DHSC published the <u>National workforce</u> <u>plan for approved mental health professionals (AMHPs)</u> in 2019 which laid out a series of recommendations to address a range of aspects designed:-

- to improve the working environment for AMHPs
- to improve recruitment and retention of a range of multi-professional AMHPs to support Local Authorities
- to support effective training and development of AMHPs
- to promote the AMHP role in both multi-disciplinary and partnership arrangements

This annual national AMHP workforce survey published by Skills for Care has subsequently become a vital resource for local and national workforce planners and policy leads to rely upon when continuing to progress the various aspects of the national AMHP workforce plan. The survey questions are designed to provide valuable insights into workforce capacity, recruitment and retention, operational variation, partnership arrangements between health and social care, skill mix across the AMHP cohort, workforce demographics etc.

Now in its sixth year, the publication of this report provides a rich set of information which offers greater understanding on workforce trends and patterns. Of course, we also need to seek better understanding of the 'activity demand' experienced by Local Authorities in respect to their statutory MHA responsibilities and the sustainability of the AMHP services across the country.

I am extremely grateful to Skills for Care and the national AMHP Leads Network for their coordination and contributions to this National AMHP Workforce publication.

Introduction

Skills for Care, as the leading source of adult social care workforce intelligence, helps to create a skilled, valued and better-led adult social care workforce. We provide the practical tools and support to help adult social care organisations in England recruit, retain, develop and lead their workforce. We work with employers and related services to ensure dignity and respect are at the heart of service delivery.

This report presents data collected via a dedicated Approved Mental Health Professional (AMHP) leads survey, as at April 2024. Skills for Care conducts this survey on behalf of the Department of Health and Social Care and the Approved Mental Health Professionals Leads Network. This report also includes data on social workers from local authorities collected via the Adult Social Care Workforce Dataset (ASC-WDS) as at September 2023.

We have carried out this survey since 2018 and it has provided important information for the Department of Health and Social Care and the AMHP Leads Network to better understand this key role. The survey provides data on the overall number of AMHPs and intelligence about their role and working patterns. The findings from this survey have been used along with data collected by the ASC-WDS on the characteristics of individual social workers. The survey did not run in 2021 as there was a separate activity around distributing funding to train new AMHPs during that year.

An AMHP is a registered professional (social worker, nurse, occupational therapist or psychologist) who has undertaken additional training, approved by the Secretary of State and regulated by Social Work England (formerly by The Health and Care Professions Council - HCPC), to carry out specific duties under the Mental Health Act 1983. In addition, the AMHP will have been approved by a local social services authority to act on its behalf in carrying out these duties.

AMHPs are (amongst other duties) responsible for setting up and co-ordinating assessments under the Mental Health Act and, if necessary, making applications to detain ("section") people in hospital for assessment and treatment of their mental health needs.

This year the survey was completed by 93% of local authorities in England (137 out of 148), an increase from 85% of local authorities last year. The results of this survey, and data from the ASC-WDS, enables Skills for Care, the Department of Health and Social Care, the Approved Mental Health Professionals Leads Network and other stakeholders to have clear, robust workforce intelligence and to better understand this key role. This information is vital to help improve the planning and quality of social care services, which will improve outcomes for people who use these services, both now and in the future.

Key findings

The latest survey of AMHPs in the social care workforce received responses from 137 local authorities in England. The findings from this survey, and those from previous years, are presented in this report as well as data from the Adult Social Care Workforce Dataset (ASC-WDS) covering social workers who are AMHP qualified employed by local authority adult social care services departments within local authorities.

Over the previous five years, the estimated number of AMHPs has remained stable at around 3,800. We estimate the full-time equivalent ratio was 0.40 and there were around 1,500 FTE AMHPs in 2024, which was similar to last year.

The survey found that to fully staff their 24-hour response service there would need to be an increase of 35% in the number of full-time equivalent AMHPs. Despite this requirement the vacancy rate was 12.7%, therefore the number of posts being advertised is less than the overall requirement for a fully established 24-hour AMHP service.

AMHP leads anticipate an additional 39.5% AMHPs starting over the coming 5 years, of which the majority will be newly qualified/first time in the role and 25.5% will leave the role over this same period.

Data from the ASC-WDS showed that around a third of the AMHP workforce (32%) were aged 55 and above and therefore could retire over the coming 10 years. The survey found that 3.1% of AMHPs had retired in the previous 12 months, so succession planning is key to ensuring a stable workforce. The survey also found that 8.6% of the AMHP workforce were newly qualified/first time in the role in the previous 12 months.

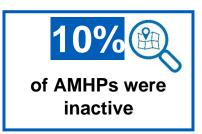
Half of respondents stated that their local authority ran a singular line managed AMHP duty system covering 24-hours 7 days of the week indicating a range of different delivery models.

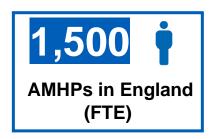
1. Findings from the AMHP Survey

Overview of findings from the AMHP survey, 2024

- The survey found that 95% of AMHPs were social workers.
- The majority of AMHPs were employed in the local authority sector (79%), 16% were employed in the NHS and 5% were either agency or freelance.
- Around two thirds (59%) of AMHPs combine their role with another role. Around a third
 of AMHPs solely perform the role of an AMHP (28%) and the remaining 14% were not
 primarily working or regularly working as an AMHP.
- The survey showed that 15% of AMHPs only work out-of-hours, for example in emergency duty teams.





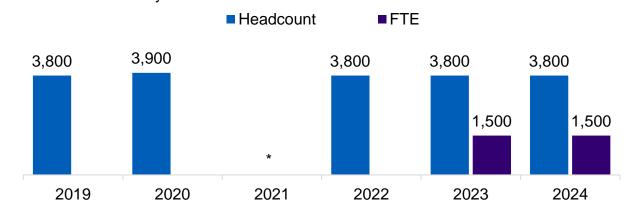


1.1 Introduction

The survey collected data from 137 148 local authorities in 2024, a 93% return rate. For this survey, Westmorland and Furness was included with Cumberland, Rutland was included with Leicestershire, the Isles of Scilly were included with Cornwall, City of London was included with Hackney and West Northamptonshire was included with North Northamptonshire as these local authorities operate a shared service without any of their own AMHPs.

The raw data from the 137 local authorities showed an overall headcount of 3,504 AMHPs **approved** by local authorities. Skills for Care's modelled estimate for the overall headcount of approved AMHPs in England was 3,800. Chart 1 compares the estimated overall headcount of AMHPs between 2019 and 2024, as well as the estimated number of full-time equivalent (FTE) AMHPs. The number of FTE AMHPs was asked in recent surveys and not available prior to 2023.

Chart 1. Estimated number of AMHPs and percentage change by year Source: AMHPs survey 2024



To estimate the number of AMHPs from local authorities that did not respond to the survey, or were received incorrectly in previous years, we have modelled the relationship between social worker filled posts (using data from the ASC-WDS) and the number of AMHPs (using the survey). These estimates were checked against the average number of AMHPs between years if a local authority had responded previously.

Map 1 shows the number of AMHPs per 10,000 people aged 15 and above in each local authority area. The South East region had the lowest number of AMHPs per people at around 0.57 whereas the North West had the highest at 1.05, as shown in Chart 2. Please note there are multiple factors which influence the demand for AMHPs, this is not a suggestion of an optimal number, but this presents the variation across England.

Map 1. Number of AMHPs per 10,000 people aged 15 and above by local authority Source: AMHPs survey 2024

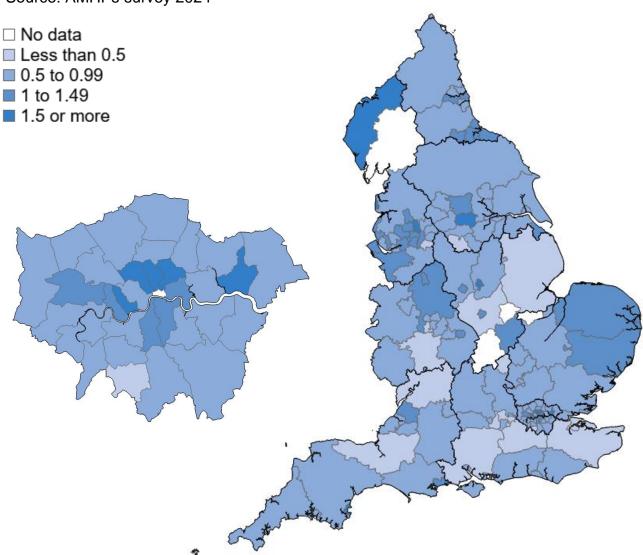
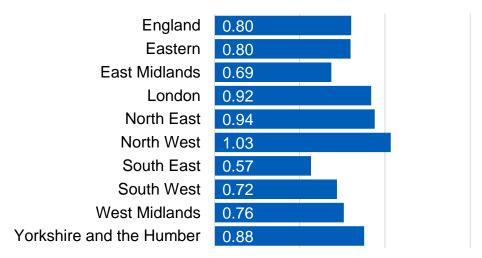


Chart 2. Number of AMHPs per 10,000 people aged 15 and above in each region

Source: AMHPs survey 2024

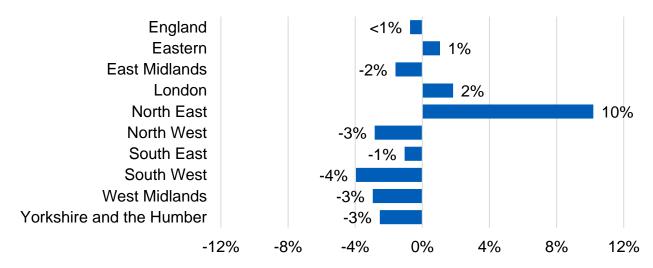


1.2 AMHP headcount comparison 2023 to 2024

The chart below shows the change in the estimated number of AMHPs between 2023 and 2024. The overall number of AMHPs (headcount of around 3,800) was almost the same in each year. The North East showed the largest increase at 11% (around 22 more AMHPs), whereas the South West showed the largest decrease at 3% (around 12 fewer AMHPs).

Chart 3. Change in the estimated number of AMHPs between 2023 and 2024

Source: AMHP survey 2024

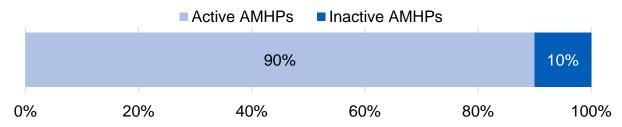


1.3 Findings from the AMHPs Survey

The survey found that 10% of AMHPs were inactive, which equates to around 380 of the estimated 3,800 AMHPs in the workforce. Inactive AMHPs were those who are approved by a local authority and employed in local services but were not practicing as an AMHP. This could include people working entirely as a manager or on maternity leave.

Chart 4. Proportion of AMHPs who were inactive

Source: AMHP survey 2024



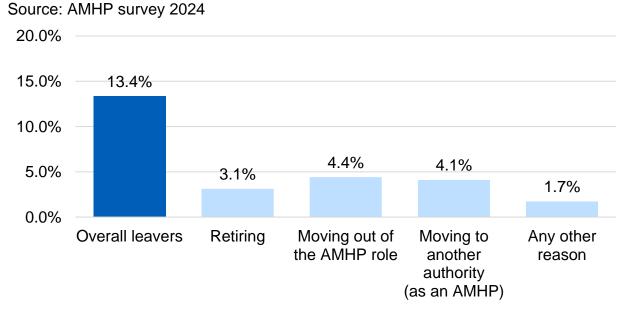
The survey found that 13.5% of AMHPs had started active service in the previous 12 months, which equates to around 510 of the estimated 3,800 AMHPs in the workforce. The majority of these starters were those who were newly qualified and this was their first time in the AMHP role (8.6% of starters), followed by those transferring between local authorities (3.7% of starters).

Chart 5. Proportion of AMHPs who started in the previous 12 months by category

Source: AMHP survey 2024 20.0% 15.0% 13.5% 8.6% 10.0% 5.0% 3.7% 1.0% 0.3% 0.0% Overall Newly qualified From another Returning to Any others / First time in the AMHP role starters authority role

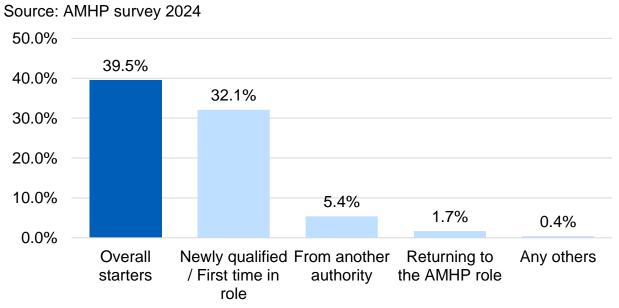
The survey found that 13.4% of AMHPs had left the role in the previous 12 months, which equates to around 510 of the estimated 3,800 AMHPs in the workforce. Many of these leavers had moved out of the AMHP role (4.4%), but many also moved within the role to another authority (4.1%). Around 3.1% of AMHPs left due to retiring, which equates to around 120 of the estimated 3,800 AMHPs in the workforce.

Chart 6. Proportion of AMHPs who left in the previous 12 months by category



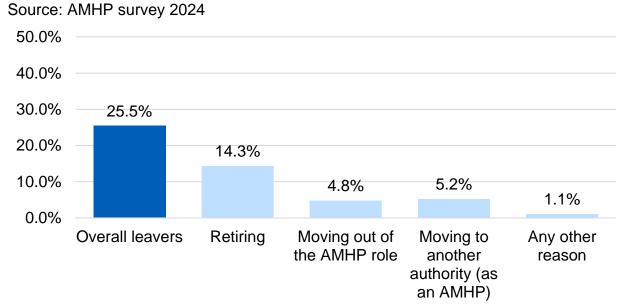
The survey asked AMHP leads to anticipate how many AMHPs will start in their authority over the coming 5 years. The survey found an expected 39.5% additional AMHPs would join the workforce over the coming 5 years, and the majority of these starters would come from people who were newly qualified. However, the survey also found that 25.5% of AMHPs were anticipated to leave in the coming 5 years, therefore the workforce is anticipated to increased by 14% over this period.

Chart 7. Anticipated AMHP starters in the coming 5 years by category



The survey also asked AMHP leads to anticipate how many AMHPs will leave their authority over the coming 5 years. The survey found an expected 25.5% AMHPs would leave the workforce over the coming 5 years, and the majority of these leavers would be people retiring (14.3% of AMHPs).

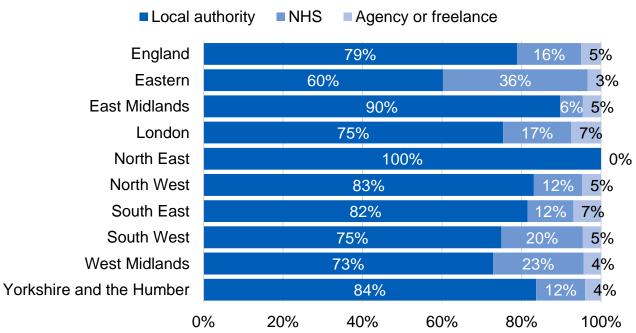
Chart 8. Anticipated AMHP leavers in the coming 5 years by category



The survey showed that the majority of AMHPs were employed by the local authority (79%), compared to 16% who were employed by the NHS and 5% who were agency or freelance workers. This pattern was reflected in each region, however there was some variance, for example the Eastern region had much higher proportion employed by the NHS (36%) where the North East had 0% employed by the NHS.

Chart 9. Proportion of AMHPs by employer

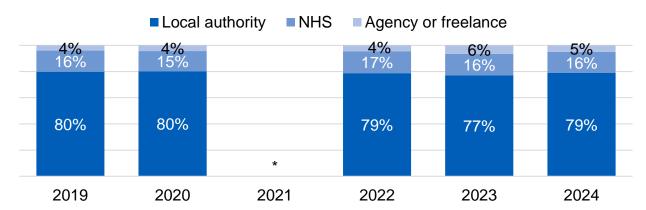




The chart below shows the proportion of agency AMHPs increased from 4% in 2022 to 5% in 2024. The increased use of agency staff could indicate difficulty recruiting into full-time positions and have financial implications for local authorities.

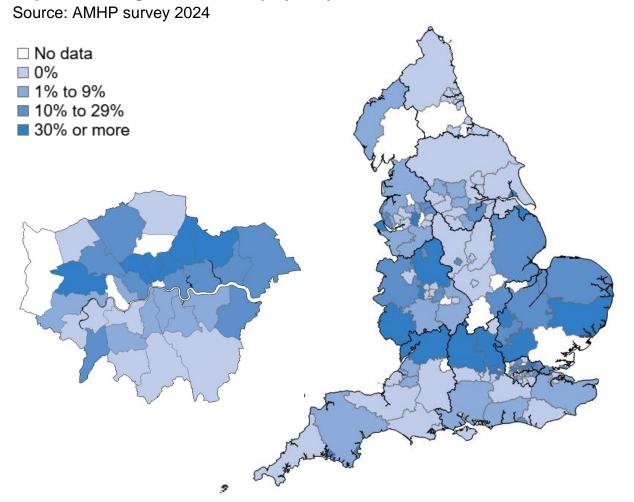
Chart 10. Proportion of AMHPs by employer between 2019 and 2024

Source: AMHP survey 2024



The map below shows the percentage of AMHPs employed by the NHS in each local authority area. Many areas reported none of their AMHPs were employed by the NHS, such as all areas within the North East. However, the map also shows a high concentration from Herefordshire in the west to Suffolk in the east.

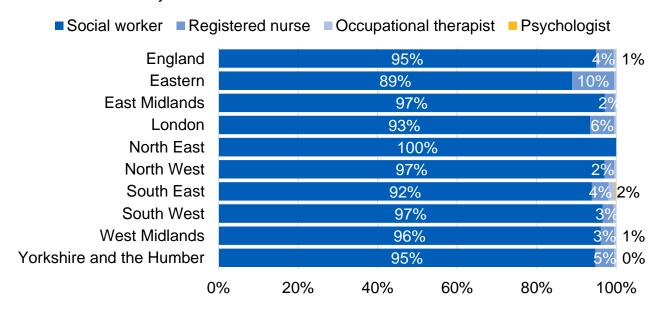
Map 2. Percentage of AMHPs employed by the NHS



The survey found that 95% of AMHPs were social workers, with 4% registered nurses along with less than 1% occupational therapists and very few psychologists. In half of local authority areas that were surveyed, all AMHPs were social workers, which means no AMHPs from these local authorities were from nursing, occupational therapy or psychology professions. The Eastern region had the highest proportion of AMHPs whose primary role was as a registered nurse (10%).

Chart 11. Proportion of AMHPs by profession

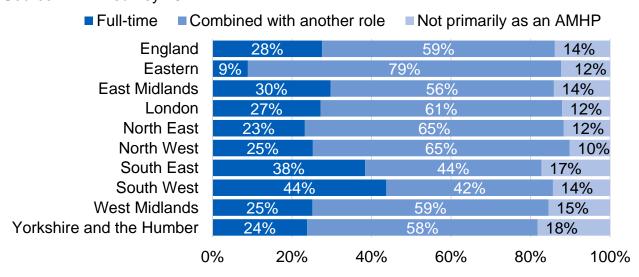
Source: AMHP survey 2024



Around two thirds (59%) of AMHPs combine their role with another role, while around one in three AMHPs solely perform the role of an AMHP (28%). Around 14% were not primarily working as an AMHP. Therefore, of the estimated 3,800 AMHPs overall, around 530 were not regularly performing the role (e.g. sessional, senior management working occasional duty shifts).

Chart 12. Proportion of AMHPs by status of role

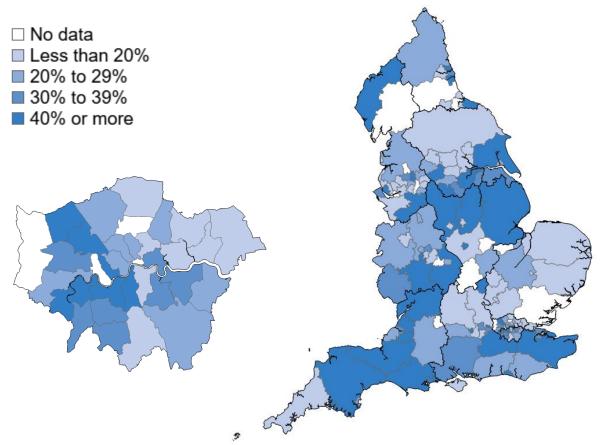
Source: AMHP survey 2024



The map below shows the percentage of AMHPs which were "full-time", meaning they acted as the AMHP as their primary function even if not working full-time hours, by local authority area. This map demonstrates the diversity of AMHP teams across England.

Map 3. Percentage of AMHPs which were "full-time"

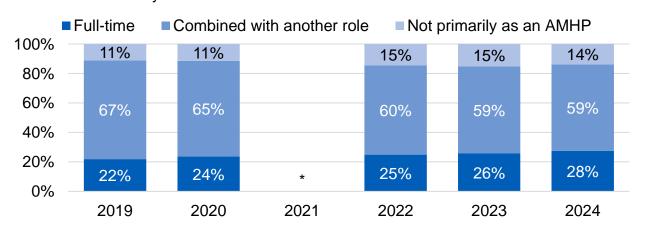
Source: AMHP survey 2024



Since 2019, the proportion of AMHPs who were "full-time" has consistently increased whereas those combining the AMHP role has decreased. The latest survey in 2024 also showed a sustained increase in the proportion of AMHPs who were not regularly performing the role.

Chart 13. Comparing status of role over time

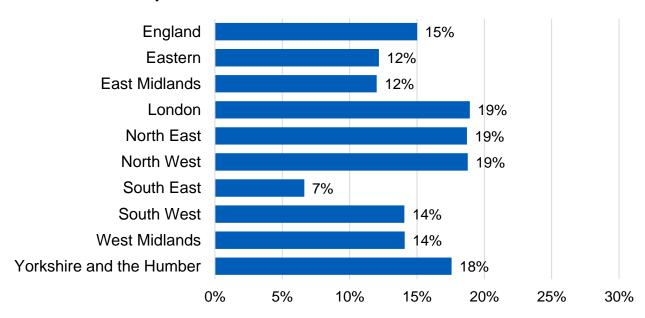
Source: AMHP survey 2024



The survey showed that 15% of AMHPs only work out-of-hours, for example in emergency duty teams. This proportion varied from 7% in the South East to 19% in the North East.

Chart 14. Proportion of AMHPs that only worked out-of-hours

Source: AMHP survey 2024



The survey also asked local authorities whether they shared their daytime and/or out-of-hours AMHP service with any other authority. Of the 137 local authorities that responded 68% of authorities did not share services, 27% shared out-of-hours services, 2% of authorities shared both daytime and out-of-hours services and 2% shared services during office hours only. None of the authorities in the West Midlands shared their AMHP services.

Chart 15. Proportion of local authorities that share AMHP services

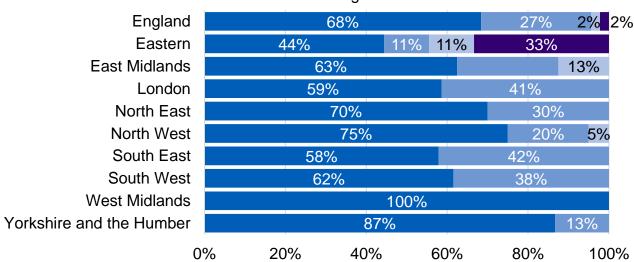
Source: AMHP survey 2024

■ Do not share services

■ Share services out-of-hours

Share services daytime and out-of-hours

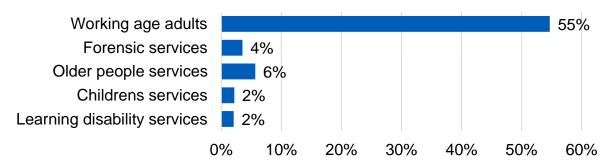
■ Share services during office hours



The survey asked for the headcount of AMHPs that worked in specific services such as working age adults, forensic, older people or children's services. The responses in the chart below show the majority of AMHP teams provide services to working age adults. Respondents were also given a free-text option for this question, into which 'safeguarding' and 'deprivation of liberty safeguards / DoLS' were frequently given.

Chart 16. Proportion of AMHPs by service type

Source: AMHP survey 2024



The survey asked respondents for number of full-time equivalent AMHPs, in addition to the headcount. To help respondents calculate this, we provided a tool which would give their overall FTE figure based on the total hours worked per AMHP over their rota period. Full-time was classified as working 40 hours per week.

Skills for Care have noted that it was difficult for respondents to answer this question as we are aware of the variety of working patterns that AMHPs undertake.

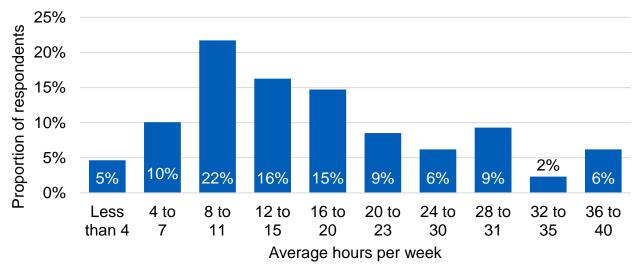
The estimated AMHP headcount was 3,800 and the estimated FTE ratio was 0.40, which equates to around 1,500 full-time equivalent AMHPs in 2024. This ratio is similar to last year, and therefore the number of FTE AMHPs were around the same in 2023.

As we have collected the FTE number of AMHPs over multiple years, we have used these returns to quality check the responses and fill gaps from areas that did not respond. Therefore, the FTE figures in this report are an estimate based on the data available at the time and may be different to previous reports.

On average, we estimated that AMHPs worked 16 out of 40 hours per week in their statutory role. However, there was a wide range of responses across areas. Around 18% had an FTE ratio of 0.7 or more, therefore their AMHPs worked 28 or more hours per week in their statutory role. Around 36% of respondents had an FTE ratio less than 0.3, therefore their AMHPs worked less than 12 hours per week in their statutory role. The chart below includes 129 local authority areas.

Chart 17. Proportion of respondents by AMHPs average hours per week in their statutory role

Source: AMHP survey 2024

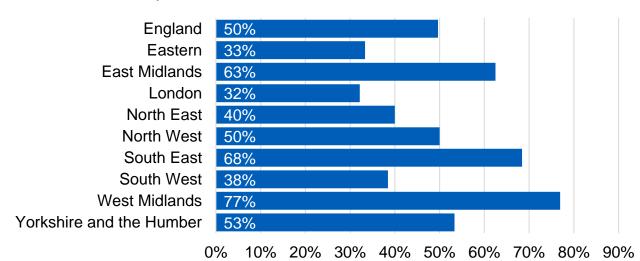


The survey asked respondents for the number of FTE AMHPs needed to fully staff their 24-hour response service. From the 117 respondents to this question, they required an increase in staff of 35%. This does not imply that local authorities are not meeting their statutory duty to provide 24-hour services.

We also asked for the number of AMHP vacancies in their AMHP rota. From 117 respondents to this question, they had a vacancy rate of 12.7%. Therefore, the number posts being advertised is less than the overall requirement for a 24-hour AMHP service.

The survey asked respondents if their local authority ran a singular line managed AMHP duty system covering 24-hours 7 days of the week or did it have a partnership arrangement. Half of respondents had a singular line managed system, but this proportion varied regionally with the West Midlands having the highest proportion of 24/7 services (77%) and Eastern having the lowest (33%).

Chart 18. Proportion of local authorities in each region with a 24/7 AMHP services Source: AMHP survey 2024



2. Findings from the ASC-WDS

Overview of social workers and qualified AMHPs from ASC-WDS data

- The information below covers social workers employed by local authorities in England only.
- Skills for Care estimate that, of those qualified as an AMHP, 32% were aged 55 and over compared to 24% of social workers.
- Around 13% of AMHPs were of Black / African / Caribbean / Black British ethnic groups, compared to 18% of social workers.
- Over half (53%) of those qualified as an AMHP had ten or more years experience in the social care sector.

£43,300

Average FTE salary of AMHPs

32% of AMHPs aged 55 and above compared to 24% of social workers

53%

AMHPs have 10 years or more experience in sector

2.1 Introduction

The Adult Social Care Workforce Data Set (ASC-WDS) is an online data collection service that covers the adult social care workforce in England. Prior to 2019 it was known as the National Minimum Data Set for Social Care (NMDS-SC) service, which had been collecting information about social care providers and their staff since 2006. The data collected in the ASC-WDS is vital to the Government, the Department of Health and Social Care, local authorities and the Care Quality Commission as it has allowed them to plan, fund and monitor the sector.

The ASC-WDS collects information on the size and structure of the whole adult social care sector, including the types of care services provided. It also collects information about the workforce, providing a detailed picture of areas such as retention, demographics, pay rates, and qualifications. For more information about the ASC-WDS please visit the Workforce Intelligence website.

This chapter focuses on social workers and AMHPs who are employed by local authority services in England, as collected in the ASC-WDS. Social workers are shown alongside AMHPs because the survey analysed in the previous chapter showed that 95% of AMHPs were social workers.

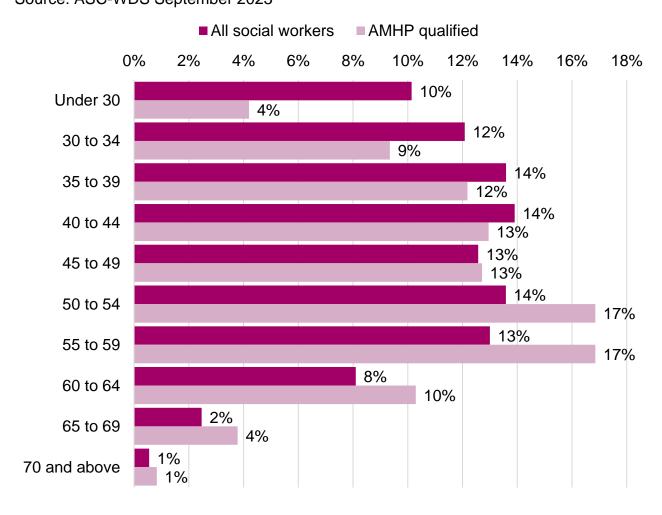
Within the ASC-WDS, we were able to identify 1,726 social workers that were employed within local authorities and defined as an AMHP or held an AMHP qualification as at September 2023. We have used these records to identify some of the key characteristics of AMHPs.

2.2 AMHP Demographics

2.2.1 Age

The ASC-WDS showed that around 24% of social workers were aged 55 and above, this proportion is higher for those qualified as an AMHP (32%). From a workforce planning perspective this group may retire within the next ten years. The ASC-WDS also showed there were notably fewer qualified AMHPs aged under 30 compared to social workers.

Chart 19. Proportion of social workers and qualified AMHPs by age group Source: ASC-WDS September 2023

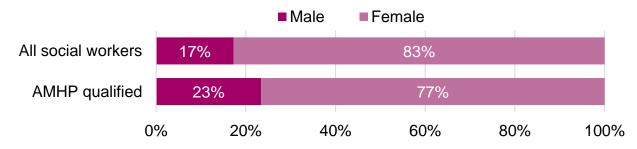


2.2.2 Gender

Across England, the AMHP role had a higher proportion of people identifying as male (23%) compared to social workers overall (17%). This difference was greatest in the Yorkshire and the Humber region (15% male social workers / 26% male AMHPs) and lowest in the East Midlands (14% male social workers / 15% male AMHPs). The 'other' gender identity responses are not included in the analysis because the national base is very low, and we are still understanding its representativeness.

Chart 20. Proportion of social workers and qualified AMHPs by gender

Source: ASC-WDS September 2023

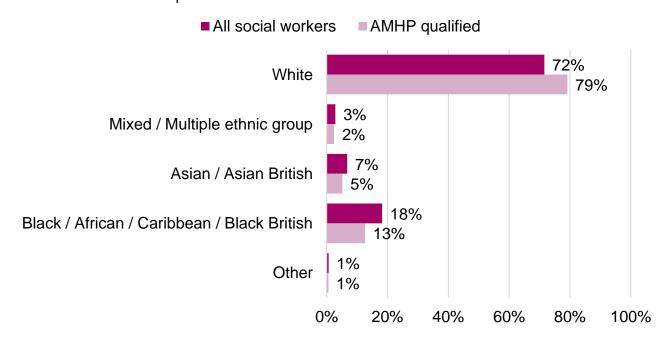


2.2.3 Ethnicity

The ASC-WDS showed that 72% of social workers identified as being of white ethnicity compared to 79% of AMHP qualified social workers. The second highest ethnic group of the two roles were people that identified as Black/African/Caribbean/Black British, with 18% of social workers and 13% those who were AMHP qualified.

London showed the highest ethnic diversity (40% of AMHPs with a white ethnic background) and the North East showed the least ethnic diversity (93% of AMHPs with a white ethnic background). These proportions generally reflect the population of these regions.

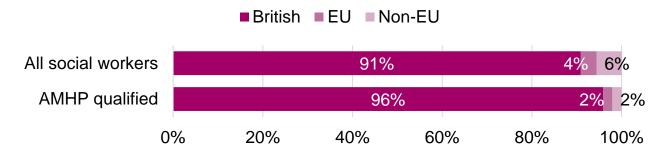
Chart 21. Proportion of social workers and qualified AMHPs by ethnicity Source: ASC-WDS September 2023



2.2.3 Nationality

The ASC-WDS showed that 91% of social workers and 96% of those qualified as an AMHP had a British nationality. The chart below shows that 2% of AMHPs held an EU nationality and the remaining 2% held a non-EU nationality.

Chart 22. Proportion of social workers and qualified AMHPs by nationality Source: ASC-WDS September 2023

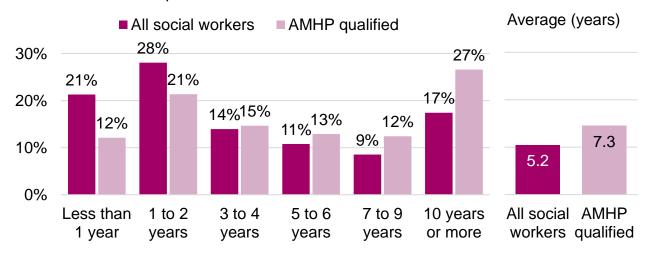


2.3 Experience in current role

ASC-WDS data also allows us to look at how long social workers have been working in their current role. The average experience in current role for an AMHP was 7.3 years compared to 5.2 years for all social workers. Of those with an AMHP qualification, 27% had ten years or more experience, compared to 17% of those without the AMHP qualification.

A reason for this trend is that only social workers with at least two years post-qualification experience can embark on AMHP training. This requirement could also explain why there are fewer AMHPs aged under 30 years as there were relatively fewer social workers in this age band.

Chart 23. Proportion of social workers and qualified AMHPs by experience in role* Source: ASC-WDS September 2023

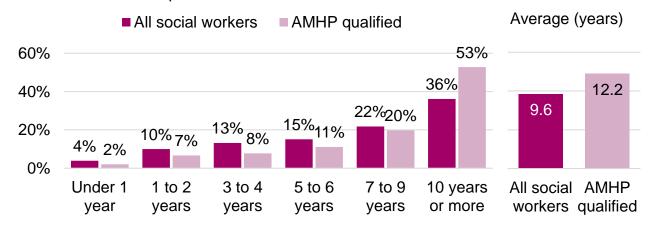


^{*}Those with less than two years in their current role in may have been trained as an AMHP in a previous role.

2.4 Experience in sector

Chart 24 shows that social workers with an AMHP qualification had more experience in the adult social care sector than social workers in general. The average experience in sector for an AMHP is 12.2 years compared to 9.6 years for all social workers. The largest difference was in the 10 or more years' experience group where 53% of AMHPs have this level of experience compared to 36% of social workers. Again, this suggests that social workers can progress to becoming AMHPs later in their career.

Chart 24. Proportion of social workers and qualified AMHPs by experience in sector Source: ASC-WDS September 2023



2.5 Pay

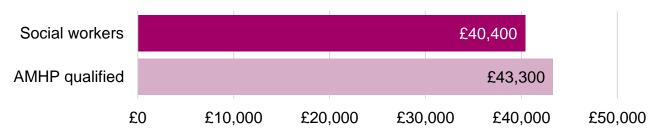
Chart 25 compares the average salary of a social worker to those identified as an AMHP. As AMHPs tend to have a greater amount of experience in the sector (shown above), only those with five years or more experience in adult social care were included in both groups. It is also acknowledged that many local authorities pay a premium for practicing AMHPs as either a fixed payment or an incremental increase, but this is inconsistent across the sector¹.

Across England, the median pay for an AMHP was £43,300, which was 7% higher than the £40,400 for all social workers.

Chart 25. Median FTE salary of social workers and qualified AMHPs

Source: ASC-WDS September 2023

Note. Only those with five years or more experience in the sector were included.

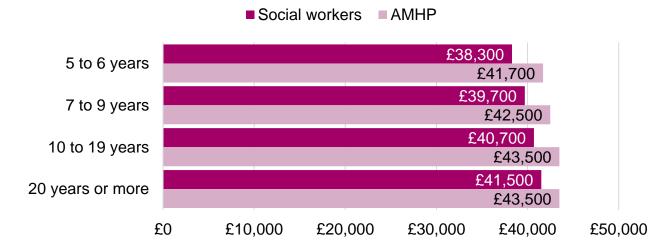


¹ Who wants to be an Approved Mental Health Professional? – King's College London – 2018 https://kclpure.kcl.ac.uk/portal/files/101007101/Stevens_et_al_2018_AMHP_Report.pdf

As shown in Chart 26 below, this increase is still substantial for social workers with the most experience in the sector, at 5% for those with 20 years or more experience.

Chart 26. Median FTE salary of social workers and qualified AMHPs by experience in sector

Source: ASC-WDS September 2023



Further resources

We provide outstanding workforce intelligence which the Government, strategic bodies, employers, and individuals rely upon to help them make decisions that will improve outcomes for the people who use care services. This chapter provides an overview of some of the reports and resources published by our Workforce Intelligence team. The ASC-WDS is recognised as the leading source of workforce intelligence for adult social care. We're grateful to all the employers who have completed ASC-WDS data. Without their contributions, our workforce intelligence wouldn't be possible.

Interactive visualisations

We've created interactive visualisations to enable you to see and understand our publications and workforce intelligence in a more visual and interactive way. By clicking on and moving around the visualisations, you can discover and compare the characteristics of the adult social care workforce in applicable topic areas. To access the visualisations, please refer to the relevant pages within www.skillsforcare.org.uk/Wlpublications.

Key workforce intelligence publications

The size and structure of the adult social care sector and workforce in England

This data visualisation provides estimates of the number of organisations and establishments involved in providing or organising adult social care, as well as the size and structure of the workforce, including people and filled posts estimates, trend data, and future projections.

To access this webpage, please visit <u>www.skillsforcare.org.uk/sizeandstructure</u> Latest version, July 2023. Updated information is due in July 2024

Regional information

We have published a data visualisation showing regional level information, one region at a time. This report provides an annual overview of adult social care services and the workforce in each region. Also available is a regional comparison data visualisation, comparing key variables. Alongside these data visualisation are nine regional written summaries.

To access these, please visit <u>www.skillsforcare.org.uk/regionalreports</u> *Latest version, October 2023. Updated information is due October 2024*

Local area information

There are six pages of local area information:

- 'My local area' page is a detailed interactive visualisation showing local areas in England one at a time.
- 'Local area comparison', is where you'll find the local authority comparison interactive visualisation which allows you to compare multiple local areas in England.
- 'Local area summary reports' page contains written summary reports for each area.
- 'My ICB area', showing the latest information from ASC-WDS split into Integrated Care Board (ICB) areas.
- 'ICB comparison area' page is where you can compare multiple ICB areas in England.
- 'My ICB area (MH and LD&A)', showing the latest information from ASC-WDS for the mental health and learning disability and/or autism workforces split into Integrated Care Board (ICB) areas.

To access these data visualisations and reports, please visit www.skillsforcare.org.uk/local-information

Latest versions, October 2023. Updated information is due in October 2024.

Key topic areas

The Workforce Intelligence website includes information on the following popular topic areas. Each topic includes a summary of the workforce information available, and signposts to the latest publications and relevant resources. Many of the topic areas include an interactive visualisation:

- Monthly tracking of key metrics
- Apprenticeships
- Pay rates
- Personal assistants
- Nurses in social care

- Learning disability and/or autism workforce
- Recruitment and retention
- Registered managers
- Social work
- Workforce nationality

To access these topics, visit www.skillsforcare.org.uk/topics

Commission our services

Our Workforce Intelligence team are the experts in adult social care workforce insight. The data we collect in the ASC-WDS gives an unrivalled overview of the adult social care workforce in England. We have over 15 years of experience in analysing and interpreting social care data - it's what we do.

Beyond the wealth of information already available publicly on our website you can commission the services of the Workforce Intelligence team to produce bespoke reports and analysis for your organisation or area.

How we can help you

- We can partner with you or form part of your project team on tenders and bids. By using our expertise and sector knowledge we can add value to your research or project.
- We can use advanced analytics techniques to help you understand how key outcomes such as CQC scores, turnover and vacancy rates can be improved.
- We can produce bespoke reports and analysis to help you solve problems and provide data solutions to help you improve your services.
- We can provide a detailed analysis into the adult social care workforce in your local area or look at performance in comparison to other areas.
- Request a feed of data to enhance or improve a product or service.

Our values

Skills for Care is guided by core values. Throughout everything we do, we're inclusive, motived, passionate, ambitious, collaborative and trustworthy. For more information about the Skills for Care strategy, our vision, mission, values and plan to achieve our mission, please visit skillsforcare.org.uk/Our-strategy.

As a Workforce Intelligence team, we:

- help people to understand what's already available without commissioning our services and what options are available
- aren't selling the data, we're selling our analysis and sector expertise
- carry out bespoke work in particular areas that we can't cover in general outputs
- have a 'good for the sector' aim on all projects we work on
- channel any money we earn straight back into the sector.

All analysts leading on the production of this report are certified statisticians, meaning we work to the standard of the 'five safes'. We always make sure that our research and outputs are appropriate and trustworthy, and that there's no risk of misuse or confidentially breach. When creating outputs, we always adhere to statistical disclosure controls.

The Skills for Care Workforce Intelligence team are committed to the three pillars of trustworthiness, quality and value, and principles of the Code of Practice for Statistics. To learn more about our values and read our full statement visit www.skillsforcare.org.uk/WI-values.

For more information about these services, please email analysis@skillsforcare.org.uk.

Keeping informed



To be kept up to date with Workforce Intelligence news, please join our mailing list by registering with us and selecting 'Workforce Intelligence publications'.

You can also follow us on Twitter: <a>@SfC_Data or <a>@skillsforcare

Or visit www.skillsforcare.org.uk/contactWl