

A collage of six black and white photographs showing various social care workers in different settings. Top left: Two women sitting at a desk, smiling. Top middle: A woman and a man standing outdoors. Top right: A man and a woman sitting at a desk, smiling. Bottom left: Two women sitting at a desk, smiling. Bottom right: Two women standing in a hallway, looking at a tablet together.

The state of the adult social care sector and workforce in England

Executive summary

2026

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Foreword from our CEO

This feels like a defining moment for adult social care. The Prime Minister has set out an ambition to build a National Care Service, free at the point of use, with greater recognition for care workers and a stronger relationship with the NHS. That ambition reflects the fact that there can be no sustainable reform of care without a sustainable, skilled and valued workforce. Through its analysis of our rich Adult Social Care Workforce Data Set, this report shows both progress and challenges. Vacancies and turnover have fallen, but workforce growth is slowing, fewer British people are joining and international recruitment has fallen significantly. The task ahead is not simply to fill vacancies, but to build a workforce people choose to join, develop and stay in.



We see from the data that better pay, terms and conditions matter. So do good induction, training, qualifications, secure hours and opportunities to develop. And leadership – in the form of experienced registered managers – matters enormously. Many of these factors are associated with both better retention and higher-quality care. Workforce investment and quality improvement are not competing priorities - they are two sides of the same coin. The Care Workforce Pathway gives us an important foundation on which to build. Its early adoption demonstrates employers' appetite for a clearer career structure, and for a shared language around skills, development and progression. As the Fair Pay Agreement develops, we have an opportunity to connect pay, recognition, skills and careers in a way the sector has never achieved before.

We see from the report that social care workers are taking on delegated healthcare activities, with important implications for workforce planning, regulation and funding. It also highlights a broader challenge: are our ambitions for prevention, personalisation, choice and care closer to home being matched by the way the workforce is developing? Growth in community-based services and personal assistants suggests the workforce is changing, but not always in ways that are fully recognised in policy or funding arrangements.

Finally, our projections show the scale of future demand, but prevention, technology, productivity and service redesign can all change the workforce we will need. The challenge now is to turn evidence into choices about future models of care, the people and skills required to deliver them, and the infrastructure that will make all this a reality. The data and insights in this report inform workforce planning, investment and organisational strategy across the sector and have helped shape the Skills for Care-led, sector-owned Adult Social Care Workforce Strategy.

That strategy reflects a growing recognition that, while Government of course has a role, the sector itself also has power to drive change for its workforce and cannot simply wait for change to happen to it. This will ensure people who draw on care and support can live the lives they want, with choice, independence and consistently high-quality care whenever and wherever they need it.

Professor Oonagh Smyth, Chief Executive, Skills for Care

Introduction

This executive summary accompanies the '[The state of the adult social care sector and workforce in England, 2026](#)' report. The following pages provide key findings from each chapter, follow these links at the bottom of each page for more information about each of the findings, along with other extended analysis.

Skills for Care is the leading source of adult social care workforce intelligence. Our expertise comes from the workforce intelligence we collect and our experience of analysing and interpreting social care data. We also work with our network of locality managers based throughout England, who talk with, and learn from, adult social care employers. This workforce intelligence expertise is at the centre of everything we do at Skills for Care.

Skills for Care is an official statistics producer which means that we follow the [Code of Practice for Statistics](#) as set out by the [Office for Statistics Regulation](#) (OSR). Our Workforce Intelligence Analysts are committed to the three principles of trustworthiness, quality and value.

About the Adult Social Care Workforce Data Set (ASC-WDS)

The ASC-WDS is an online data collection service that covers the adult social care workforce in England. The data collected is vital to the Government, the Department of Health and Social Care, local authorities and the Care Quality Commission (CQC) as it has allowed them to plan, fund and monitor the sector for the past 19 years.

The independent sector data in this summary was collected between April 2025 and March 2026, and local authority information dates from September 2025. Information about direct payment recipients employing personal assistants was collected in Spring 2026. As at March 2026, over half of the CQC-regulated workforce were recorded in the ASC-WDS (54.1%) and coverage varied by care sector, service, job role and geographical area. Visit our [Methodology webpage](#) to see how we estimated the size and characteristics of the whole workforce.

Terminology used in this report

Adult social care, and the terminology used to describe it, continues to change. We have created a [glossary of terms](#) to maintain consistency and comparability with previous reports.

Monthly statistics: workforce trackers

We produce three trackers to monitor activity in the adult social care workforce throughout the year. These trackers focus on the independent sector adult social care workforce and are updated on a monthly or quarterly basis.

- [Filled posts in the adult social care workforce in England: monthly statistics.](#)
- [Recruitment and retention.](#)
- [International recruitment.](#)

1. Size and structure

Understanding the size and structure of adult social care, in terms of employers and filled posts, is fundamental to understanding the sector. It allows us to evaluate the impact of current policies and external influences, and guides workforce planning for the future.

19,000

organisations in
adult social care

41,000

establishments in
adult social care

1.69m

total posts (filled
and vacant posts)

1.59m

filled posts in adult
social care

Size of the adult social care workforce

- An estimated 19,000 organisations were involved in providing or organising adult social care in England. Those organisations delivered services in an estimated 41,000 establishments.
- There were 30,100 CQC-regulated establishments, an increase of 100 from 2024/25.
- The total number of posts (filled and vacant posts) in adult social care in England in 2025/26 stood at 1.69 million, an increase of 0.6% (10,500 posts) from 2024/25.
- As at 2025/26, there were 1.59 million filled posts in adult social care in England, an increase of around 1.4% (22,000 filled posts) from 2024/25.
- There were 96,000 vacant posts, a decrease of 11,500 (10.5%) from 2024/25.
- The number of full-time equivalent (FTE) filled posts was estimated at 1.24 million.
- The number of people working in adult social care was estimated at 1.46 million.

Economic contribution

- The total wage bill for adult social care in England was £33.6 billion, an increase of 7.5% from 2024/25.
- The sector was estimated to contribute £81.8 billion gross value added (GVA) to the economy in England (up 7.3% from 2024/25).

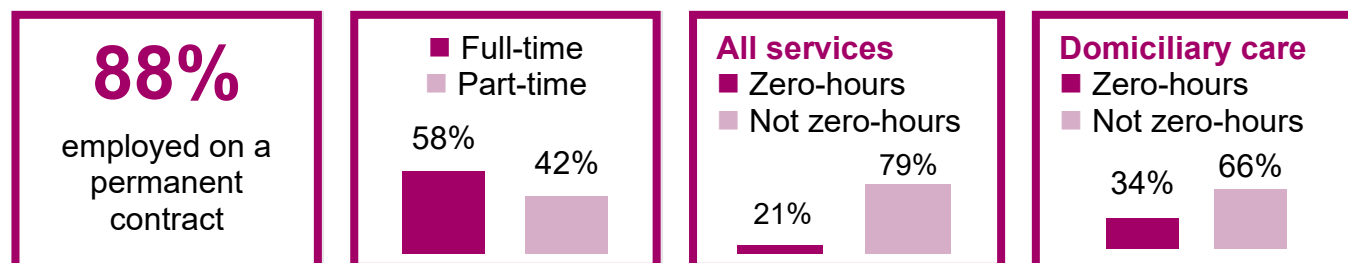
Structure of the adult social care workforce

- In terms of employer type, 84% of the adult social care workforce were employed in the independent sector (1.34 million filled posts), 8% were employed by local authorities (120,500 filled posts) and 8% (129,000 filled posts) were personal assistants, directly employed by individuals in receipt of a direct payment from their local authority.
- In terms of service types, domiciliary care services accounted for the largest proportion of filled posts in 2025/26 (46% or 725,000 filled posts), followed by residential services (45% or 715,000 filled posts).
- The job role group, 'care worker and support worker' was the most common job role in the adult social care sector workforce in 2025/26. There were 925,000 care worker and support worker filled posts, 58% of the overall workforce.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

2. Employment overview

Understanding employment information is useful because it provides insight into the employment practices, which play a part in the sector's ability to recruit and retain staff.



Employment status and working hours

- Over half (58%) of the workforce worked full-time hours (920,000 filled posts) and 42% worked part-time (670,000 filled posts). This differs from the wider [economically active population of England](#), where 75% of the workforce work full-time and 25% part-time.
- 9% of the adult social care workforce were 'indirectly employed' staff, meaning those workers on bank, pool, agency and/or other contract types. This included 16% of registered nurses.
- Around a fifth (21%) were employed on a zero-hours contract (325,000 filled posts). This was highest among workers in domiciliary care services where 34% were employed on a zero-hours contract (202,000 filled posts) and was even higher for care workers in domiciliary care services where 44% were employed on a zero-hours contract.
- In 2025/26, the proportion of workers in local authority and independent sectors employed on a zero-hours contract was 20%, down from 22% in 2020/21.

Delegated healthcare activities (DHAs)

- An estimated 17,000 CQC-regulated establishments across England had non-nursing staff who carried out DHAs (59%).
- At these establishments, 46% of direct care workers, including 54% of senior care workers were recorded as carrying out DHAs.

Care worker employment conditions, as at March 2026

- Around a quarter (26%) of responding independent sector employers reported that they contribute more than the minimum 3% to the workplace pensions of their care workers.
- Around a quarter (24%) of responding independent sector employers reported that they pay care workers more than [Statutory Sick Pay](#) if they cannot work because of illness.
- The median number of annual leave days given to full-time care workers was 28. Around 42% of responding local authority establishments gave full-time care workers 29 days or more of annual leave, compared to 12% of responding establishments in the independent sector.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

3. Recruitment and retention

The high-quality workforce intelligence that we collect and analyse is key to understanding recruitment and retention issues. It helps to keep recruitment and retention at the forefront of social care debates, providing statistical, rather than just anecdotal, evidence. It's also been used to develop [resources to support recruitment](#) within the sector.

22.1%

turnover rate
in the last
12 months

50%

of recruitment was
from within adult
social care

9.0

average years of
experience in the
sector

6.2%

vacancy rate
(96,000
vacant posts)

Staff turnover rates in the past 12 months

- We estimate that the turnover rate of directly employed staff working in the adult social care sector was 22.1%, equivalent to approximately 320,000 leavers over the year.
- The turnover rate for care workers and support workers (26.9%) the lowest point over the reporting period.

Vacancy starter rates

- The vacancy rate across all sectors of the adult social care workforce has consistently decreased from a peak of 10.4% in 2021/22, to 6.2% in 2025/26. This is a decrease of around 54,000 vacant posts over the previous three years.
- Domiciliary care services had the highest vacancy rate (8.7%) in 2025/26, whilst residential care had the lowest (3.8%).
- Half of new starters in 2025/26 (50%) were recruited from within adult social care.

Average sickness

- The average number of sickness days lost was 4.9 per employee; equivalent to approximately 7.2 million days lost due to sickness in 2025/26.
- Social workers had the highest average sickness days (9.4), with community support and outreach workers and occupational therapists averaging 7.5 days.

Experience of the adult social care workforce

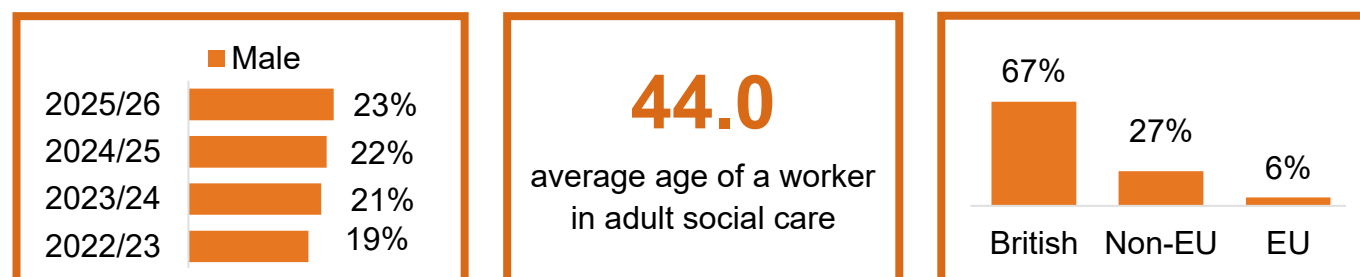
- On average, workers had 4.8 years of experience in their current role.
- Workers across all job roles had on average 9.0 years of experience in the sector.

We track starter, turnover and vacancy rates in the independent sector on a monthly basis throughout the year. To see this and our other workforce trackers, [visit our website](#).

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

4. Demographics

Skills for Care supports culture and diversity in adult social care; our objective is to create equity among all those working in social care, so that people feel valued for the work they do.



Readers should note that the substantial growth in international recruitment between 2022/23 and 2025/26 has contributed to the change in workforce demographic trends.

Gender

- In 2025/26, 23% of the workforce identified as male, the fourth consecutive annual increase. The proportion was highest among senior management and support worker roles, at 32%.

Age

- The mean average age of the workforce was 44.0 years. Just over a quarter (27%) of adult social care workers were aged 55 and over. This highlights both the experience within the current workforce and the importance of understanding and planning for future workforce changes.

Ethnicity

- In 2025/26, the adult social care workforce was ethnically diverse, with 61% being people of White ethnicities. This was lower than the [economically active population in England](#) (79%). This highlights the key contribution people from a range of ethnicities make to the workforce, and the importance of effective recruitment, retention and workforce planning.
- There was substantial regional variation, with 80% of London's workers being of Black, Asian or minority ethnicities, compared with 20% to 43% across other regions.
- Skills for Care's [SC-WRES 2025 report](#) highlighted differences in experience between workers of a Black, Asian and minority ethnicity and workers of a White ethnicity.

Nationality trends

- In the independent and local authority sectors only, the proportion of workers with a non-EU nationality increased from 10% to 29% between 2021/22 and 2025/26. Over the same period the proportion of workers with a British nationality decreased from 83% to 65%, and the proportion of workers with an EU nationality decreased from 7% to 6%.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

5. Pay

Pay information was collected from local authorities as at September 2025, from independent sector employers from April 2025 to March 2026, and information relating to personal assistants was collected in February 2026. The [National Living Wage](#) (NLW) at the time of all data collections was £12.21. All annual pay information is presented as full-time equivalent (FTE), based on 37 contracted hours per week being classed as one FTE filled post.

£12.60

Care worker and support worker median hourly pay (independent)

27%

Care worker and support workers paid on the wage floor (NLW+10p)

Care worker and support workers with 5+ years' experience earned

12p

more than those with 1 year

Care workers and support workers in the independent sector

- The median hourly rate for care workers and support workers in March 2026 was £12.60, which was 39p higher than the NLW (£12.21).
- The median care worker and support worker hourly rate nominally increased by 60p (5.0%) since March 2025; taking inflation into account, it has increased in real terms by 20p (1.6%).
- Care workers and support workers had lower hourly rates (median - £12.60) compared to Band 3 NHS Healthcare Assistants (HCAs) who were new in role (£12.75), however they were paid more than those in Band 2 who were new in role (£12.51).
- Care workers and support workers with five or more years' experience were, on average, earning around 12p more per hour than those with less than one year's experience. This is considerably lower than in March 2016, when the gap was 33p per hour.

Care workers and support workers moving between roles and employers

- Analysis of care workers and support workers from 2024/25 to 2025/26 shows that pay progression usually requires moving into a different role.

The Real Living Wage

- 56% of care workers and support workers outside of London were earning the same or more than the [Real Living Wage](#) (RLW) of £12.60. However, only 31% of care workers and support workers in London were earning the same or more than the RLW for London (£13.85).

The impact of the NLW from April 2026 (£12.71)

- As at March 2026, almost half (49%) of all independent sector workers were paid less than the upcoming mandatory NLW rate (£12.71). This equates to around 655,000 filled posts directly affected by the subsequent increase in the NLW.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

6. Qualifications and training

We believe that it's important that staff are equipped with the right skills and knowledge to provide high quality care and support. Investing in learning and development also supports staff retention.

45%

held a relevant social care qualification (excluding regulated professions)

62%

of direct care staff had engaged with the Care Certificate standards

68%

had an instance of training recorded (local authority and independent sectors)

Care Certificate standards and qualifications

- Over half (56%) of posts in the adult social care workforce were filled by people who had engaged with (achieved or working towards achievement) the Care Certificate standards.
- 45% of the adult social care workforce (excluding regulated professions) held a relevant social care qualification. 55% had no relevant social care qualifications recorded.
- The latest data from 2024/25 shows that there were around 24,650 adult social care apprenticeship starts, 5% more than in 2023/24.
- Direct care providing staff were usually qualified at level 2 or above (40%), while those in manager roles were usually qualified at level 5 or above (34%).

Training and skills

- The top three non-statutory training categories recorded in the ASC-WDS were 'assisting and moving people' (54%), 'basic life support and first aid' (52%), and 'food hygiene' (51%).
- Approximately half of the direct care workforce (55%) did not hold a relevant social care qualification in 2025/26. However of those, 81% had non-statutory training recorded in the ASC-WDS, 78% had engaged with the Care Certificate standards, and 47% had five years or more experience working in the adult social care sector.

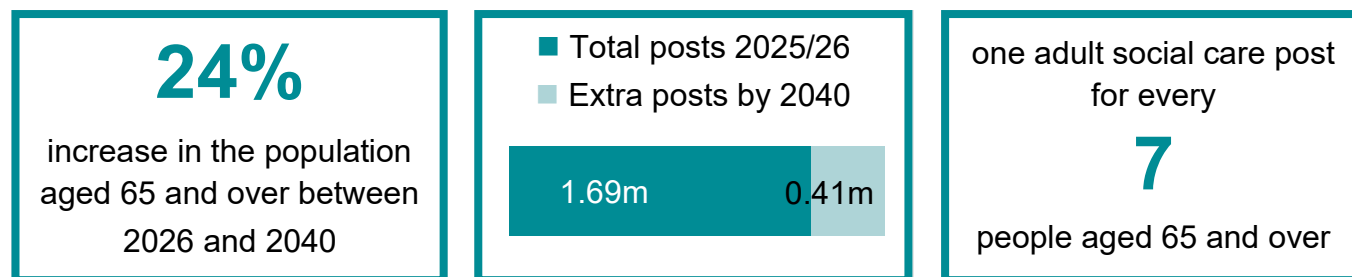
Career progression

- For people in care worker roles, the most common career pathway was to progress to senior care worker roles. Senior care workers or supervisors were most likely to move into team leader or other management roles.
- Workers in regulated professions can progress up the pay scale within their individual roles and were also observed to move into manager posts. Registered nurses generally progressed to registered manager roles, whilst social workers and occupational therapists moved into management roles within their local authority.
- There are currently 18 [Care Workforce Pathway](#) role categories - providing a clear career structure for social care staff. Employers can use the Pathway to set out how staff can gain skills, learn and develop, and progress in their careers, as shown in this [infographic](#).

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

7. Workforce projections

We've produced demand-based projections for the size of the adult social care workforce between 2025/26 and 2040. These workforce projections combine adult social care workforce estimates and [population projection information](#).



Population growth

- The population aged 65 and above in England is projected to grow 24%, from 11.4 million in 2026, to 14.1 million in 2040.
- The 90 and over age group is expected to see the greatest amount of growth, with a 79% increase between 2026 and 2040 (from 550,000 to 990,000 people).
- The 85 to 89 age group is expected to see the second greatest amount of growth, increasing by 41% from 960,000 people in 2026 to 1.36 million in 2040.

Adult social care workforce

- If the workforce grows proportionally to the growth of the population aged 65 and above, between 2025/26 and 2040 the adult social care workforce would need to increase by 410,000 posts, or 24%.
- This would increase the number of adult social care posts from 1.69 million in 2025/26 to 2.09 million by 2040.
- The 65+ model estimates that there is currently one adult social care post for every seven people aged 65 and over.

This year, we have also included estimates based on projections of the number of people expected to receive adult social care produced by the Care Policy and Evaluation Centre (CPEC) at the London School of Economics. These estimates provide an additional perspective on future workforce demand. You can read their paper from February 2025 [here](#).

Workforce estimates based on projected care demand

- CPEC projects that the number of people receiving adult social care could increase by around 35% between 2025 and 2040.
- Applying current ASC-WDS staffing ratios suggests that around 33% more adult social care posts may be required by 2040.
- This is broadly consistent with the 65+ model, which estimates that 24% more adult social care posts may be required by 2040.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

8. International recruitment

International recruitment has played an important role in the adult social care sector in recent years. However, **as of July 2025 new overseas applicants are no longer eligible to apply for the Health and Care Worker visa.**

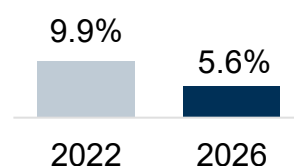
30,000

internationally recruited
direct care workers joined
the independent sector in
2025/26

150,000

posts filled by a person
employed on a Health and
Care Worker visa, as at
March 2026

**Vacancy rate of
international recruiters**



International recruitment estimates

- The estimated number of internationally recruited workers in 2025/26 was 30,000 – a decrease from 50,000 the previous year.
- An estimated 150,000 posts were filled by a worker employed on a Health and Care Worker visa as at March 2026, working in direct care roles at CQC-regulated establishments in the independent sector.

Turnover rates, vacancy rates and demographics

- The vacancy rate for employers that have internationally recruited direct care workers decreased by 4.3 percentage points between March 2022 and March 2026, from 9.9% to 5.6%.
- Around a third of internationally recruited care workers and support workers between March 2022 and March 2026 were male: 33% among those on the Health and Care Worker visa and 36% among those recruited internationally via other routes. Only 16% of domestically recruited care workers and support workers were male over the same period.
- Care workers and support workers recruited internationally between March 2022 and March 2026 had a lower average age (35.0 years) both via the Health and Care Worker visa and via other routes, compared to those recruited domestically (40.0 years).
- Domestic recruitment remains challenging for the sector. The overall number of posts filled by British workers across all job roles decreased from 85% of the workforce in 2020/21, to 67% in 2025/26. This is a decrease of 130,000 posts over the period, including 40,000 over the last year.

International recruitment tracking

We [track international recruitment](#) trends in the ASC-WDS on a quarterly basis in the ASC-WDS. In the quarter April to June 2026, an estimated 2,000 international recruits joined the workforce in direct care roles in the independent sector in England. This is a decrease on the previous year, when there was an average of 7,500 per quarter.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

9. Factors affecting staff turnover and CQC ratings

Workforce characteristics have an effect on a worker's likelihood to leave their role. The variables analysed here are not necessarily the cause or reason for workers leaving. All analysis included here looks at two points in time: March 2025 and March 2026.

Care workers with **less experience in their roles or the sector** were **more** likely to leave

Care workers with **five positive employment factors in place** were **less** likely to leave

Care workers with **zero-hours contracts or low guaranteed hours** were **more** likely to leave

Factors affecting turnover for independent sector care workers

- Older workers are less likely to leave their roles: the turnover rate among care workers aged under 25 years was 35.5% and decreased to 18.4% for care workers aged 50 to 59.
- Turnover was higher among those who had recently started their role. Those with less than one year of experience in their role had a turnover rate of 33.7%, compared to 12.6% for those with 20 years or more experience.
- Care workers were more likely to leave if they were employed on a zero-hours contract (29.8% turnover rate), compared to those with 35 or more contracted hours (19.1%).
- Care workers recruited internationally were less likely to leave (21.6% turnover rate), compared to domestically recruited care workers (38.2%).
- Five positive employment factors have been identified (being paid the local authority area average hourly rate or more, guaranteed hours, working full-time, receiving training, and having a relevant social care qualification). Care workers that have all these in place were less likely to leave (15.3%), compared to workers with none in place (34.3%).
- Establishments with a registered manager in post for less than a year had higher care worker turnover rates (28.3%) than those with registered managers that had 20 or more years of experience in their role (20.6%).

Factors affecting turnover for CQC scores in the independent sector

- Care homes with more staff in post per bed received better CQC scores on average than those with lower staffing ratios.
- Higher care worker pay was associated with better CQC scores. Care workers at the lowest scoring establishments were paid a median hourly rate of £12.60 compared to £12.82 at establishments with the highest scores.
- Establishments experienced registered managers were more likely to receive higher CQC scores.

For a detailed analysis of all the key findings listed here, please [read the chapter](#) in full.

Further resources

We provide valuable 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 Executive Summary is a compendium of key findings from each chapter of '[The state of the adult social care sector and workforce in England, 2026](#)' report. To learn more about these findings and for further, detailed analysis in these topic areas please read the full report.

We also produce and analyse workforce estimates looking at [regional](#) and [local area](#) information. This allows for greater scrutiny of the sector and its workforce and helps support local decision making in these geographical areas. There are three pages of regional area information and three of local authority area information on our website.

- Individual areas: we have one report looking at the workforce in each region or local authority area, one at a time.
- Comparison reports: these visualisations compare key variables across all regions or all local authority areas.
- Written summaries: each region and local authority area has a written summary report, summarising the workforce statistics.

Monthly statistics – workforce trackers

We publish [tracking information](#) about the adult social care workforce including;

- [Filled posts in the adult social care workforce in England: monthly statistics](#) - including an estimate of the number of filled posts in independent sector CQC-regulated locations and their percentage change.
- [Recruitment and retention monthly tracker](#) - including changes in the starter, turnover and vacancy rate in the independent sector
- [International recruitment quarterly tracker](#) - including information about the estimated number of people arriving in the UK and starting direct care providing roles in the adult social care independent sector.

To access all these trackers, reports and accompanying data visualisations, please refer to the relevant pages on our [Workforce Intelligence website](#).

A workforce strategy for adult social care in England

In 2024, Skills for Care published 'A workforce strategy for adult social care in England'. This was developed in collaboration with a wide range of organisations and people with a stake in the future of the adult social care sector. It combines data from our workforce intelligence reports along with in-depth insights and experience of the sector to address the issues facing the workforce. For more information and to read the strategy in full, visit:

<https://www.skillsforcare.org.uk/Workforce-Strategy/Home>

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