

Care Workforce Pathway

Briefing: **early learning
for system leaders**



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The Pathway is helping us to build the parity, the recognition, and the shared understanding we need. It helps us articulate what a career in care really looks like.

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About this series

This briefing is part of a series designed to support confident, consistent system leadership and practical action on the Care Workforce Pathway.

- **Care Workforce Pathway Briefing: system leadership**
Sets out **why** the Care Workforce Pathway matters as a shared workforce infrastructure and clarifies the role of system partners in enabling proportionate, provider-led use.
- **Care Workforce Pathway Briefing: system alignment**
Explores **how** system partners can align language, expectations, and activity, reducing fragmentation and creating the conditions for confident adoption by care providers.
- **Care Workforce Pathway Briefing: early learning for system leaders**
Shares early insight from local areas and care providers, highlighting what is working, common challenges, and practical lessons for system leaders.



Together, the series provides a clear, progressive offer from shared system purpose, to alignment, to learning.

Purpose of this briefing

The [Care Workforce Pathway](#) provides a national career framework for adult social care roles, describing values, expectations, and progression in a clear and consistent way. It is designed to act as a long-term workforce infrastructure, offering a shared language that supports coherence across the adult social care system.

This briefing brings together early learning from work with systems and care providers as they begin to use the Pathway across the adult social care sector. It captures emerging themes from practice, highlighting what is helping, where challenges commonly arise, and what seems to support progress.

It is intended to support:

- shared understanding of early experience with the Pathway across systems
- proportionate, realistic local approaches
- reduced duplication and re-learning across places.

This briefing is designed to be adapted locally and revisited as adoption progresses and experience using the Pathway grows.

Who this briefing is for

This briefing is for people who help turn workforce strategy into practice, including:

- System workforce leads and programme managers
 - Local authority and Integrated Care Board (ICB) colleagues
 - Commissioners and quality leads
 - People who bring providers together through forums, workshops, or learning sessions
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How the Care Workforce Pathway is landing in practice

Early experience shows that system leadership and messaging strongly influence whether care providers feel able to engage with the Pathway.

In places where progress has been the strongest, success comes from setting clear signals and creating the conditions that make early action feel achievable and appropriate.

One of the clearest ways systems are creating those conditions is by being intentional about **what happens first**. When early messages, clear requests, and practical help are well timed, care providers are more likely to see the Pathway as something they can start to use straight away, rather than a major new programme to absorb in full.

As systems and care providers begin engaging with the Pathway, early experience points to a small number of recurring themes, outlined below, that influence provider confidence and readiness to engage. They are intended to support reflection and shared understanding, rather than define a single approach.

Sequencing matters

In practice, sequencing has emerged as one of the most important system-level factors shaping confidence and engagement. Early system Pathway activity has indicated stronger engagement where:

- system partners align their understanding of the Pathway first
- a shared local Pathway narrative is established early
- reassurance is given about what the Pathway **does not** require.

In these contexts, providers describe the Pathway as:

- clearer
- less overwhelming
- more credible
- aligned to existing expectations.

Where alignment is absent, providers are more likely to experience confusion or hesitation.

Starting points vary significantly

Care providers are engaging with the Pathway from very different places. In practice this can include variation in:

- financial resilience and margins
- leadership capacity and confidence
- access to Human Resources and learning support
- experience of workforce change.

This variation is particularly stark between small and larger providers. Approaches that assume a single starting point risk favouring the most resourced organisations. Building in flexibility from the start helps ensure engagement feels realistic and achievable.



Workforce complexity is shaping how the Pathway is understood

Across systems, partners describe:

- increasing complexity of need
- more delegated healthcare activities
- higher expectations of frontline judgement.

This has made the Pathway especially useful as:

- a shared language for capability
- a way to articulate progression without forcing structural change
- a platform for conversations about enhanced and specialist roles.

In some early system areas, the Pathway is being used first as a thinking tool, not a restructuring tool.



We are increasingly working as equal partners across health and social care, but that can be difficult if we can't articulate what roles actually mean. With the Pathway, we have shared definitions. It creates a foundation for trust.



Danielle Fullwood, Head of Strategic Education and Skills, Coventry and Warwickshire Integrated Care Board

What care providers are telling us

“We don’t have capacity for something new”

This concern is widespread and usually reflects:

- pressure of day-to-day delivery
- previous experience of short-term initiatives
- uncertainty about commissioner intent.

What can help:

- positioning the Pathway as **alignment**, not additional work
- reinforcing light and proportionate ways to engage
- using concrete examples rather than abstract explanations.

“We’re worried about training people to leave”

This is an emotionally significant issue for many care providers.

Early learning shows that confidence can increase when:

- retention benefits are discussed openly
- care providers hear from peers already using the Pathway
- development is framed as strengthening the sector, not weakening individual organisations.

Creating safe spaces for honest discussion is often more effective than reassurance alone.

“Role mapping feels daunting”

Mapping existing roles to the Pathway’s role categories is consistently seen by care providers as:

- the most intimidating and time consuming part of engaging with the Pathway
- an area where providers worry about ‘getting it wrong’.

What helps in practice includes:

- being clear that role mapping is approximate and can be refined over time
- sharing anonymised examples to show how others have approached it
- normalising that different interpretations are expected, especially at the start
- offering conversations and support, rather than relying only on written guidance.

Care providers consistently say it helps to hear explicitly that role mapping is about increasing clarity, not achieving precision or an ‘exact match’.

What supports manageable delivery

Across systems, early learning has identified key factors that support progress.

Theme	What partners are noticing	What early learning suggests
Simple, practical tools	Care providers often respond more positively to clear, accessible materials than to lengthy guidance. One page role summaries, visual overviews of role categories, and plain language are frequently described as easier to engage with, particularly for smaller organisations with limited capacity.	Early experience suggests that clear starting points help providers feel more confident taking early steps. Practical tools that are easy to use and adapt locally support understanding and reduce the sense of being overwhelmed. Highly detailed guidance is often seen as more useful later, once familiarity has grown.
Consistent language across partners	Where care providers hear different descriptions or expectations about roles and progression, confidence can be undermined and activity duplicated. Even small differences in terminology can create uncertainty about what is being asked.	Systems are noticing that confidence tends to be stronger where commissioners, workforce teams, education partners, and provider associations use shared language when referring to roles, progression, and the Pathway. Aligned references help create clarity, reinforce credibility, and reduce confusion for providers.
Peer learning and local stories	Care providers often value hearing directly from peers who are already engaging with the Pathway. First hand accounts help normalise challenge and make change feel more realistic.	Short, practical contributions from providers can build trust and confidence more effectively than more formal presentations. Local stories appear to make the Pathway feel achievable and relevant in real world settings.

System pressures that shape delivery reality

Early learning has consistently identified a number of wider pressures that influence what is realistic.

Theme	What partners are noticing	What early learning suggests
Policy and funding uncertainty	Short-term funding cycles and frequent policy change can affect confidence in long-term planning and contribute to initiative fatigue across the system.	The Pathway is most helpful when it is positioned as a stable infrastructure, rather than as a time-limited initiative. It can provide a consistent reference point that can support continuity despite wider policy shifts.
Competing priorities across the system	Workforce partners are often balancing regulatory requirements, multiple strategies, and urgent operational pressures, which can make it difficult to focus on new activity.	Progress is stronger where the Pathway is integrated into existing forums and conversations, and used as a unifying reference point rather than treated as a parallel workstream. This appears to help reduce duplication and makes engagement feel manageable.
Uneven awareness remains a barrier	Awareness of the Pathway continues to vary across employability services, Jobcentre Plus, colleges, and training providers, leading to inconsistent understanding and messaging.	Systems report that short, targeted 'Pathway introductory briefings' can make a noticeable difference, helping improve confidence, consistency, and shared understanding across partners.



Making good use of early learning

Our early learning is generated through shared national early themes, as highlighted in this briefing, and through local, day-to-day practice as the Pathway is used in different contexts.

This local learning is most useful when it is brought consciously into system conversations and decision making. It has the greatest impact when it:

- informs governance and leadership discussion
- is shared deliberately across system partners, not informally
- influences how support is designed and adjusted.

People who work closely with systems and care providers during early Pathway use often play a key connecting role. In practice, this includes:

- bringing provider experience into system leadership spaces
- translating day-to-day practice into shared insight
- helping systems reflect early and adjust their approach.

Looking ahead

Early experience shows that where alignment, realism, and trust come first, confidence in using the Pathway grows.

This briefing has been intentionally focused on early learning. It does not set out a blueprint or a single right way to proceed. Instead, it draws together what systems and care providers are noticing as they begin using the Pathway: what feels achievable, where challenges arise, and what appears to help progress feel manageable in practice.

Central to this learning are care providers who are taking time to explore the Pathway, test how it fits their context, and have honest conversations about roles, development, and progression. This effort is an important contribution to strengthening the sector as a whole.

As experience grows, continued progress will depend on systems recognising, valuing, and learning from this early practice. When provider experience is listened to, shared, and reflected on thoughtfully, systems are better able to support a workforce that is sustainable, skilled, and values-led, one that can develop over time and provide high-quality care now and in the future.

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