The adult social care workforce supporting people with learning disabilities and/or autism

Source. Skills for Care analysis of the National Minimum Dataset for Social Care (NMDS-SC)

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Key findings

There were an estimated 665,000 jobs in the adult social care learning disabilities and/or autism workforce. 57,600 were in the local authority sector and 575,000 were in the independent sector. There were also 31,000 personal assistants for direct payment recipients who have learning disabilities and/or autism, however they weren't included in the estimates in this report. Please note that from this point, the key findings refer to *unweighted* NMDS-SC data.

Employment overview
- Around 53% of workers were employed on a full-time basis and 35% part-time.
- 46% of workers within domiciliary care were on a zero-hours contract compared to around 8% in residential care.

Recruitment and retention
- The turnover rate for the adult social care learning disabilities and/or autism workforce was 29.3%. Most of these leavers didn't leave the sector, with 70% of recruitment being from within adult social care.
- The average vacancy rate was 8.0% for all jobs.
- On average, 6.7 days of sickness were taken by workers in the past 12 months.

Demographics
- The majority of the adult social care learning disabilities and/or autism workforce were female (80%), with 20% being male.
- 19% of the workforce was from a Black, Asian and Minority Ethnic (BAME) background.
- Around 85% were British, 6% had an EU nationality and 9% had a non-EU nationality.
- The average age of a worker was 43 years old. Almost a quarter (23%) were aged 55 and above - this was highest for senior managers (32%) and registered nurses (33%).

Pay
In 2017/18, the National Living Wage was £7.50 per hour.
- The average care worker hourly pay for the adult social care learning disabilities and/or autism workforce was £9.81 in local authorities and £8.08 in the independent sector.
- Registered nurses had an average full-time equivalent (FTE) annual salary of £29,700 in the independent sector.

Qualifications and training
- 68% of direct care workers, who were new to the sector since 2015, had engaged with the Care Certificate.
- Of workers with training recorded in the NMDS-SC, the most popular areas were moving and handling (74%), safeguarding adults (72%) and medication safe handling and awareness (66%).

1. Introduction

This report provides an overview of the adult social care workforce supporting people with learning disabilities and/or autism. This report is based on data from the National Minimum Dataset for Social Care (NMDS-SC).

1.1. About Skills for Care

Skills for Care is the leading source of adult social care workforce intelligence.

We've been providing workforce intelligence for over 10 years. Our team of experienced analysts produce and publish reports about the adult social care workforce in England using a variety of data sources. Our data and subsequent reports are used by the Government, local authorities, care providing organisations, strategic bodies, universities, think tanks and many others. In addition to our Department of Health and Social Care funded work, you can commission us to deliver bespoke analysis.

Skills for Care helps create a well-led, skilled and valued adult social care workforce. We support adult social care employers to deliver what the people they support need *and* what commissioners and regulators expect. We do this by helping them get the best from their most valuable resource - their people. Our practical support helps employers **recruit**, **develop** and **lead** their staff - and retain them.

We're a trusted independent charity with over 18 years' experience, working as a delivery partner for the Department of Health and Social Care. We also work closely with related services such as health and housing.

1.2. About the NMDS-SC

The NMDS-SC is an online data collection service about the adult social care workforce in England. It's the leading source of workforce information for the whole adult social care sector. Skills for Care manages the service on behalf of the Department of Health and Social Care and has been collecting information online since 2007.

For more information about the NMDS-SC please visit www.nmds-sc-online.org.uk.

1.3. Terminology used in this report

Unless stated otherwise, the data in this report is based on '**all learning disabilities and/or autism services',** which refers to establishments or the workforce that provides care and support for people with learning disabilities and/or autism.

Some establishments provide care and support **only** for people with learning disabilities and/or autism – we call these **'specialist services'.**

Some establishments provide care and support for people with learning disabilities and/or autism, alongside other client groups – we call these **'generalist services.**

The figures in this report refer to *all* the workers at establishments that support people with learning disabilities and/or autism. This means that not all workers covered in this report are involved in directly supporting people with learning disabilities and/or autism. However, we expect that the vast majority will have direct contact with people with learning disabilities and/or autism, with the potential exception of those in very generalised services such as information and advice, advocacy and social work, where the service supports a broad range of people.

1.4.   About the data in this report

The data in this report is based on data from the NMDS-SC and other sources.

This report refers to the adult social care learning disabilities and/or autism workforce as those recorded in the NMDS-SC, who work in services providing care and support for people with learning disabilities and/or autism in local authority and independent sector providers only.

In 2017/18, there were around 367,500 workers recorded in the NMDS-SC who were employed in learning disability and/or autism services. There were around 65,700 jobs in specialist services and 301,800 jobs in generalist services.

In section 1, we use estimates that are based on data from the NMDS-SC, and that have been '*weighted*' to produce a whole sector estimate. The estimates within this report were based on:

- local authority estimates as at September 2017
- independent sector estimates as at March 2018.

Independent sector analysis was produced as at March 2018 using data from the NMDS-SC, as well as other source including the Care Quality Commission (CQC), Office for National Statistics (ONS) and NHS Digital.

As the NMDS-SC is a non-mandatory return for the independent sector, it doesn't have 100% coverage of the adult social care sector. However, it does have a large enough sample to provide a solid basis for creating reliable and precise adult social care sector and workforce estimates at both a national and local level.

Our workforce intelligence team use data collected by the NMDS-SC to create workforce models that produce estimates of the whole adult social care workforce. A simplified explanation of how the information is produced is that Skills for Care use NMDS-SC data to make estimates of workforce characteristics (e.g. demographics, pay rates, employment statuses) for each geographical area, service type, employer type and job role combination that we report by. These estimates were then 'weighted' according to NMDS-SC's coverage/completeness of the sector in each of the above areas. For example, an area with 50% coverage would use more weighted data in the final analysis than an area with 90% coverage. Using this methodology allows for the analysis to be representative of all adult social care workers even if the NMDS-SC has uneven levels of data coverage.

Skills for Care is confident in the quality of these estimates and the methodologies used have been peer reviewed by universities and an independent statistician. For a detailed methodology of how these estimates were produced please visit www.skillsforcare.org.uk/workforceestimates.

1.5.   Health services

Adult social care services for people with learning disabilities and/or autistic people work closely with relevant health services.

In the healthcare system, there are lots of different roles employed within NHS learning disability services.

As at March 2018, the Health and Social Care Information Centre reported that there were 3,305 full-time equivalent (FTE) learning disability nurses, of which 1,933 (FTE) were working within a community setting, and 406 psychiatrists of learning disabilities, of which 260 are consultants working across England.

Within NHS services, other workforce groups/roles are involved in providing care and support for people with learning disabilities and/or autism as well as other 'client groups', including healthcare assistants, support workers, occupational therapists, speech and language therapists and physiotherapists.

You can read more about this data at:

NHS digital (March 2018) 'NHS Workforce Statistics, March 2018, Provisional Statistics.' Available at: www.digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/nhs-workforce-statistics---march-2018-provisional-statistics

2. Size and structure

Overview of the estimated size and structure adult social care learning disabilities and/or autism workforce, 2017/18
- There were an estimated 665,000 adult social care jobs providing care and support for people with learning disabilities and/or autism.
- Approximately a fifth (136,000 jobs) were held by people working in establishments providing services only for people with learning disabilities and/or autism (specialist services).
- The remaining 530,000 jobs were in establishments providing services for people with learning disabilities and/or autism as well as other client groups (generalist services).

665,000	**136,000**
adult social care jobs providing care and support for people with learning disabilities and/or autism	jobs in establishments providing services only for people with learning disabilities and/or autism

Please note, the data in this section refers to workforce estimates that are based on data from the NMDS-SC, and that have been '*weighted*' to produce a whole sector estimate. They're based on:

- local authority estimates as at September 2017
- independent sector estimates as at March 2018.

2.1. Number of adult social care jobs providing care and support for people with learning disabilities and/or autism

Table 1 shows that there were an estimated 1.5 million jobs in the whole adult social care workforce in England, of which around 41% (665,000 jobs) were involved in providing care and support for people with learning disabilities and/or autism.

Of these jobs, approximately a fifth (136,000 jobs) were held by people working in establishments providing services only for people with learning disabilities and/or autism (specialist services) and around 530,000 jobs were held by people working in establishments providing services for people with learning disabilities and/or autism as well as other client groups (generalist services).

Around 405,000 learning disabilities and/or autism jobs were provided by domiciliary care services (60%), and a quarter (25%, 168,000 jobs) were provided by residential care services. This service breakdown was different to the adult social care sector as a whole, at 45% and 44% respectively.

Please note that for generalist services, the proportion of time spent with people with other care and support needs is not known, i.e. workers may spend a large or a small proportion of their time supporting people with learning disabilities and/or autism.

Table 1. Estimated adult social care learning disabilities and/or autism workforce by sector and service group
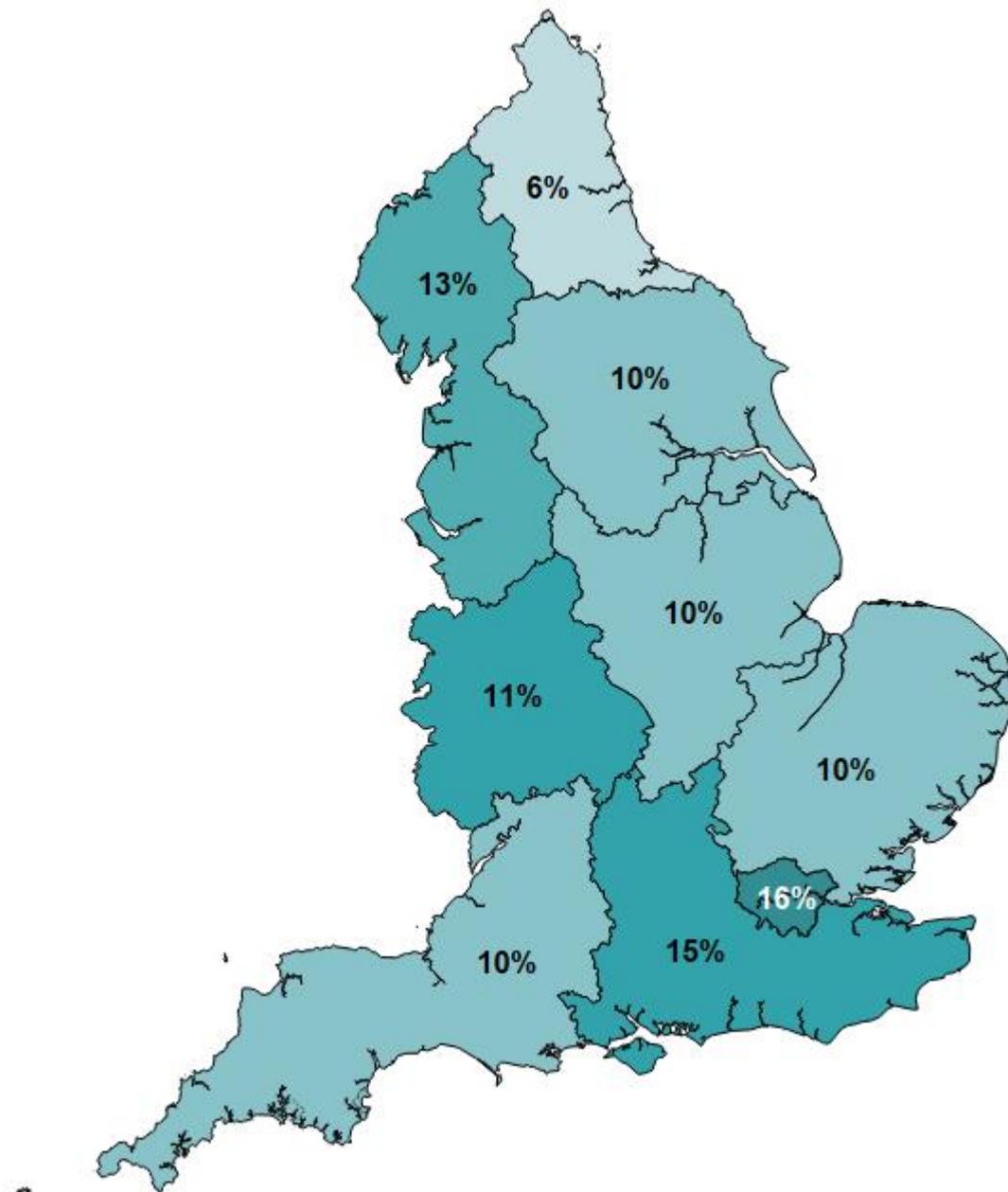*Source: Skills for Care workforce estimates 2017/18*

	Total adult social care workforce	Learning disability and/or autism		Learning disability and/or autism			
				Specialist services		Generalist services	
		Jobs	%	Jobs	%	Jobs	%
Total jobs	**1,500,000**	**665,000**	**41%**	**136,000**	**20%**	**530,000**	**80%**
Sector							
Local authority	109,300	57,600	53%	6,600	11%	51,000	89%
Independent	1,250,000	575,000	46%	99,000	17%	475,000	83%
Jobs for direct payment recipients	145,000	31,000	21%	31,000	100%	-	-
Service group							
Adult residential	670,000	168,000	25%	57,000	34%	111,000	66%
Adult day	36,000	29,000	82%	8,300	28%	21,000	72%
Adult domiciliary	680,000	405,000	60%	60,000	15%	345,000	85%
Adult community	116,000	61,000	52%	10,500	17%	50,000	83%

Estimated jobs by region

Map 1, overleaf, shows the estimated learning disabilities and/or autism jobs by region. This breakdown was similar to the adult social care sector as a whole and the population of England, with the South East and London region having the largest population and the North East having the smallest.

Map 1: Estimated adult social care learning disabilities and/or autism workforce by region
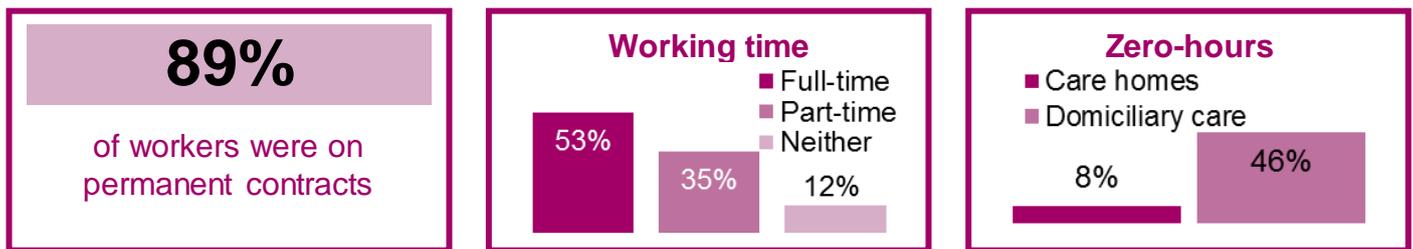*Source: Skills for Care workforce estimates 2017/18*

3. Employment overview

Overview of employment information of the adult social care learning disabilities and/or autism workforce, 2017/18
- 89% of workers were employed on a permanent basis and 53% were employed full-time.
- Around 28% of the workforce were employed on a zero-hours contract.
- 46% of workers in domiciliary care in this workforce were on zero-hours contracts. 8% of workers in care homes were on zero-hours contracts.

89%

of workers were on permanent contracts

Working time
- Full-time
- Part-time
- Neither

53% 35% 12%

Zero-hours
- Care homes
- Domiciliary care

8% 46%

Please note, the data in this section is based on the number of adult social care establishments recorded in the NMDS-SC as at March 2018 for the independent sector, and September 2017 for local authorities.

3.1. The establishments providing care and support for people with learning disabilities and/or autism

Table 2 shows that there were 10,700 services recorded in the NMDS-SC that provided care and support for people with learning disabilities and/or autism. Just under a third (3,350 services) were specialist services and 7,350 services were generalist services.

Table 2: Adult social care services providing care for and support people with learning disabilities and/or autism
Source: Unweighted NMDS-SC data 2017/18

	Services	%
All learning disability and/or autism services	**10,700**	
Specialist learning disability and/or autism services	3,350	31%
Generalist learning disability and/or autism services	7,350	69%

Table 3 shows the proportion of all learning disabilities and/or autism services that were providing care and support for adults or older people. The percentages sum to more than 100% as services often support more than one client group.
- 90% of all learning disabilities and/or autism services provided care and support for adults with learning disabilities, and 43% for older people with learning disabilities.
- 40% of all learning disabilities and/or autism services provided care and support for adults with autism, and 26% for older people with autism.

Table 3: Adult social care services providing care and support for people with learning disabilities and/or autism by adults or older people
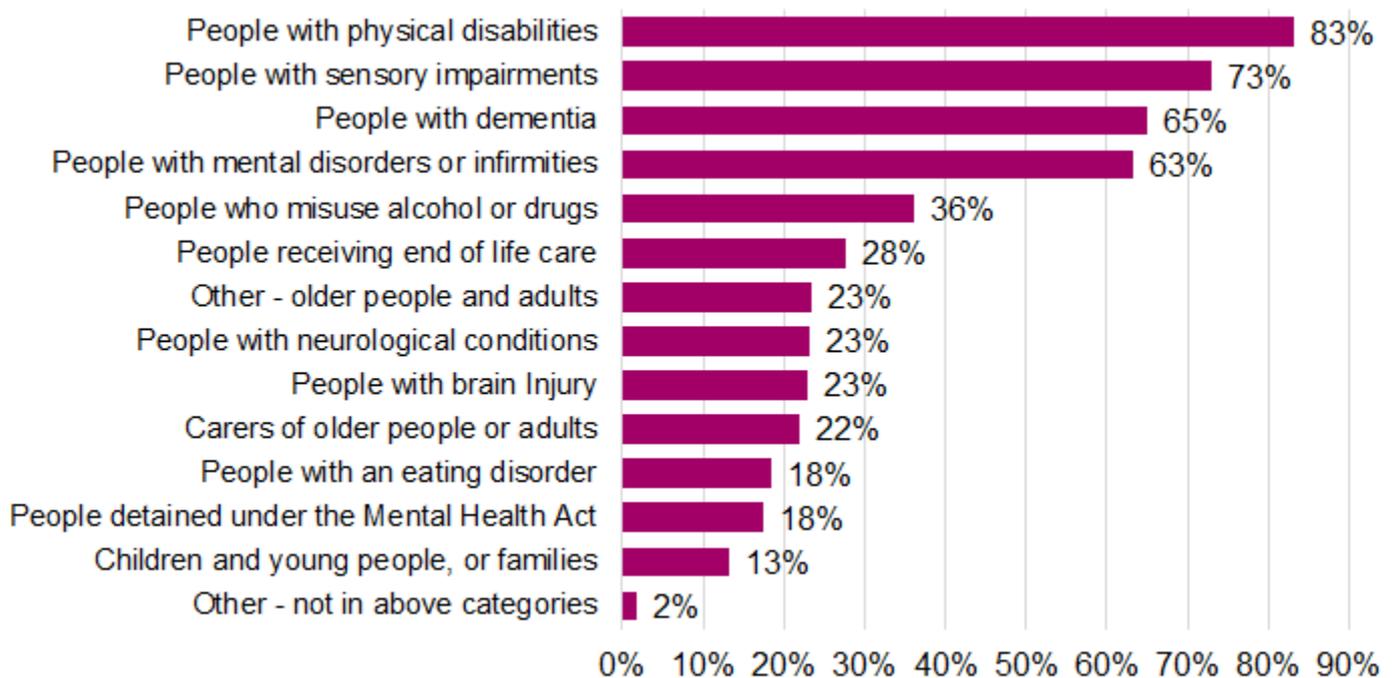*Source: Unweighted NMDS-SC data 2017/18*

	Services	%
All learning disability and/or autism services	**10,700**	
Learning disability services	**10,450**	**97%**
Adults with learning disabilities	9,650	90%
Older people with learning disabilities	4,650	43%
Autism services	**4,650**	**43%**
Adults with autistic spectrum disorder	4,250	40%
Older people with autistic spectrum disorder	2,750	26%

Other client groups that were supported in addition to learning disabilities and/or autism (generalist services)

Chart 1 shows the other client groups that were supported at generalist services. There were around 7,350 locations in the NMDS-SC that provided care and support to people with learning disabilities and/or autism alongside other services (generalist services). Around 83% of these services also supported people with physical disabilities and 73% also supported people with sensory impairments.

Chart 1: Other client groups that were supported in addition to learning disabilities and/or autism
Source: Unweighted NMDS-SC data 2017/18

People with physical disabilities — 83%
People with sensory impairments — 73%
People with dementia — 65%
People with mental disorders or infirmities — 63%
People who misuse alcohol or drugs — 36%
People receiving end of life care — 28%
Other - older people and adults — 23%
People with neurological conditions — 23%
People with brain Injury — 23%
Carers of older people or adults — 22%
People with an eating disorder — 18%
People detained under the Mental Health Act — 18%
Children and young people, or families — 13%
Other - not in above categories — 2%

3.2. Employment status

Table 4 shows that the majority (89%) of the adult social care learning disability and/or autism workforce were employed on a permanent contract, although this varied by job role. This was similar to the overall adult social care workforce, at 90%. Managerial staff and senior care workers were more likely to be on permanent contracts than other roles. Employers had a higher reliance on bank/pool registered nurses (8%) and agency social workers (7%) compared to other roles.

It should be noted that the NMDS-SC is completed as a snapshot in time and usage of non-permanent employees may fluctuate throughout the year. Also, within the independent sector and particularly domiciliary care, zero-hours contracts were more commonly used to deal with fluctuating demand (see section 3.4).

Table 4. Employment status of the adult social care learning disabilities and/or autism workforce by selected job roles, 2017/18
Source: Unweighted NMDS-SC data 2017/18

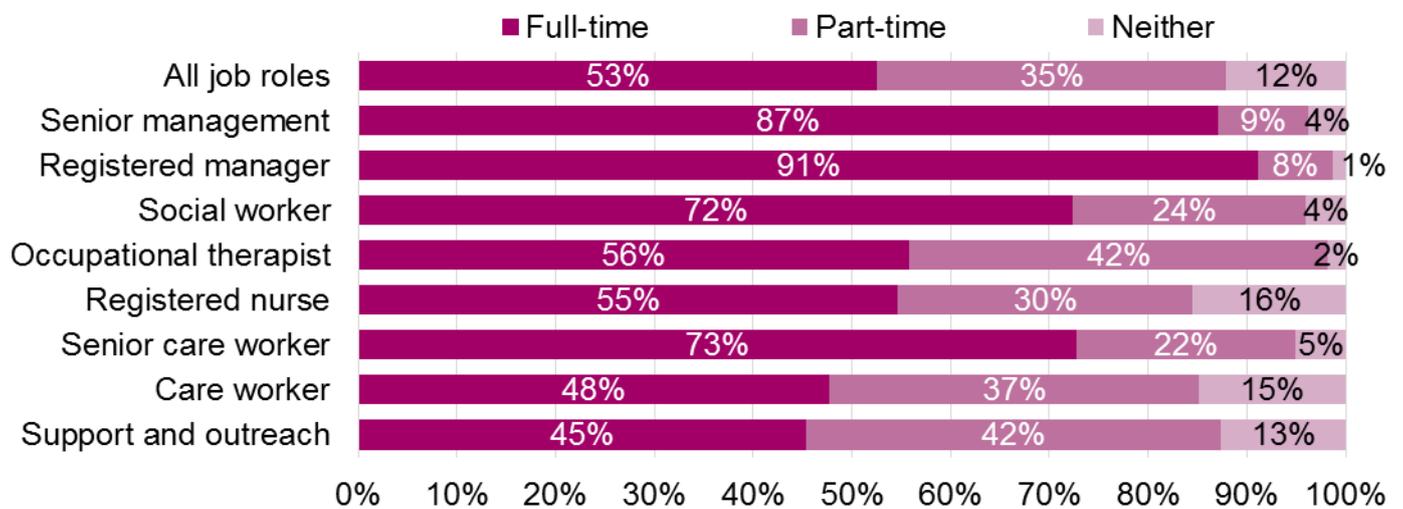|	Permanent	Temporary	Bank or pool	Agency	Other
All job roles	**89%**	**4%**	**5%**	**2%**	**1%**
Senior management	95%	2%	0%	0%	2%
Registered manager	99%	1%	0%	0%	0%
Social worker	87%	4%	1%	7%	0%
Occupational therapist	89%	5%	1%	5%	0%
Registered nurse	80%	8%	8%	4%	0%
Senior care worker	95%	2%	2%	1%	0%
Care worker	88%	4%	5%	2%	1%
Support and outreach	83%	6%	7%	1%	2%

3.3. Full/part-time status

Just over half (53%) of the adult social care learning disability and/or autism workforce worked on a full-time basis. Around a third (35%) were employed on a part-time basis and 12% were employed with no set hours. This was similar to the whole adult social care workforce, with 51% employed on a full-time basis, 37% part-time and the remaining 12% with no set hours.

Chart 2 shows that, as with employment status, the full/part-time status varied by job role. The majority of managers worked full-time, as did senior care workers (73%) and social workers (72%). Care workers (who make up around two thirds of the workforce) and support and outreach workers had the lowest proportion of full-time staff, at 48% and 45% respectively.

It should be noted that a large proportion of jobs that were neither full-time nor part-time were employed on zero-hours contracts but may still work the equivalent of full- or part-time hours.

Chart 2. Full/part-time status of the adult social care learning disabilities and/or autism workforce, 2017/18
Source: Unweighted NMDS-SC data 2017/18

3.4. Zero-hours contracts

A zero-hours contract is a contract type where the employer is not obliged to provide any minimum working hours. This contract type could be particularly attractive to adult social care employers (especially in domiciliary care) to help manage fluctuating demand for services, or as a temporary solution to staffing shortages due to turnover or sickness (see Chapter 4: Recruitment and retention). It's also often more cost-effective than using agency staff.

This contract type could be a positive for some workers because it offers a good work-life balance, and flexibility to suit family or other commitments. However, it can also be seen as 'insecure work' and negative in terms of financial planning and uncertainty for others.

Around 28% of the adult social care learning disabilities and/or autism workforce were on a zero-hours contract, which was slightly higher than the whole adult social care workforce, at 25%.

Chart 3 shows that managers and social workers had the lowest proportion of zero-hour contract workers. The use of zero-hour contracts was particularly high in direct care roles, with 37% of care workers, 13% of support and outreach workers and 12% of senior care workers on a zero-hours contract.

Chart 3. Proportion of the adult social care learning disabilities and/or autism workforce on a zero-hours contract, 2017/18
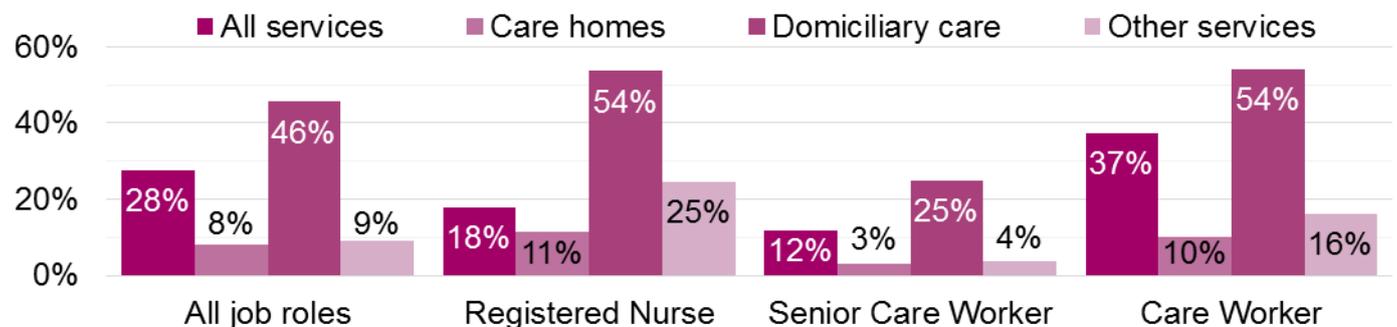
Source: Unweighted NMDS-SC data 2017/18

Job role	Percentage
All job roles	28%
Senior management	4%
Registered manager	2%
Social worker	4%
Occupational therapist	1%
Registered nurse	18%
Senior care worker	12%
Care worker	37%
Support and outreach	13%

The proportion of zero-hours contracts also varied greatly by service. Around 46% of domiciliary care workers were on a zero-hours contract, compared to 8% in care home services. This was similar to the whole adult social care workforce, at 49% and 9% respectively.

Chart 4. Proportion of the adult social care learning disabilities and/or autism workforce on zero-hours contracts in selected job roles by service, 2017/18
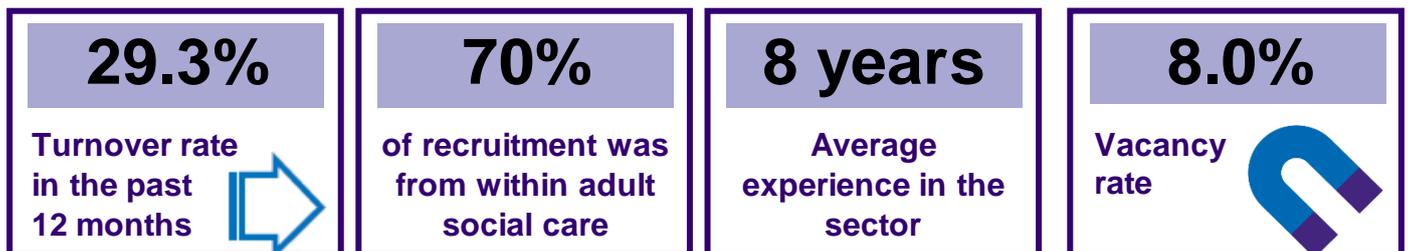
Source: Unweighted NMDS-SC data 2017/18

Job role	All services	Care homes	Domiciliary care	Other services
All job roles	28%	8%	46%	9%
Registered Nurse	18%	11%	54%	25%
Senior Care Worker	12%	3%	25%	4%
Care Worker	37%	10%	54%	16%

4. Recruitment and retention

Overview of recruitment and retention in the adult social care learning disabilities and/or autism workforce, 2017/18
- The turnover rate was 29.3%, which was slightly lower than for the whole adult social care sector (30.7%).
- The sickness rate (6.7 days) in this workforce was higher on average, than for the whole adult social care workforce (5.1 days).
- The average vacancy rate was 8.0% in this workforce.

29.3%	**70%**	**8 years**	**8.0%**
Turnover rate in the past 12 months	**of recruitment was from within adult social care**	**Average experience in the sector**	**Vacancy rate**

Please note, the data in this section is based on the number of adult social care establishments recorded in the NMDS-SC as at March 2018 for the independent sector, and September 2017 for local authorities.

4.1. Leavers and staff turnover rates

Turnover rates in this section refer to directly employed workers only (permanent and temporary workers). For example, leavers from agency roles, were not included. This section also refers to leavers from establishments that were still operational. Leavers from establishments that have closed were not captured.

The turnover rate of directly employed workers in the adult social care learning disabilities and/or autism workforce was 29.3%, which was slightly lower than the turnover rate of the whole adult social care workforce (30.7%). However, many leavers remained within the sector, as 70% of recruitment was from within the adult social care sector.

Chart 5 shows that the turnover rate varied by sector and service. Local authorities had a much lower turnover rate (13.4%) than the independent sector (33.5%), and the turnover rate was higher for domiciliary care providers (36.1%) than for care homes (27.2%) and other services (16.7%). This was a similar pattern to the whole adult social care workforce.

Chart 5. Turnover rate of the adult social care learning disabilities and/or autism workforce by sector and care service, 2017/18
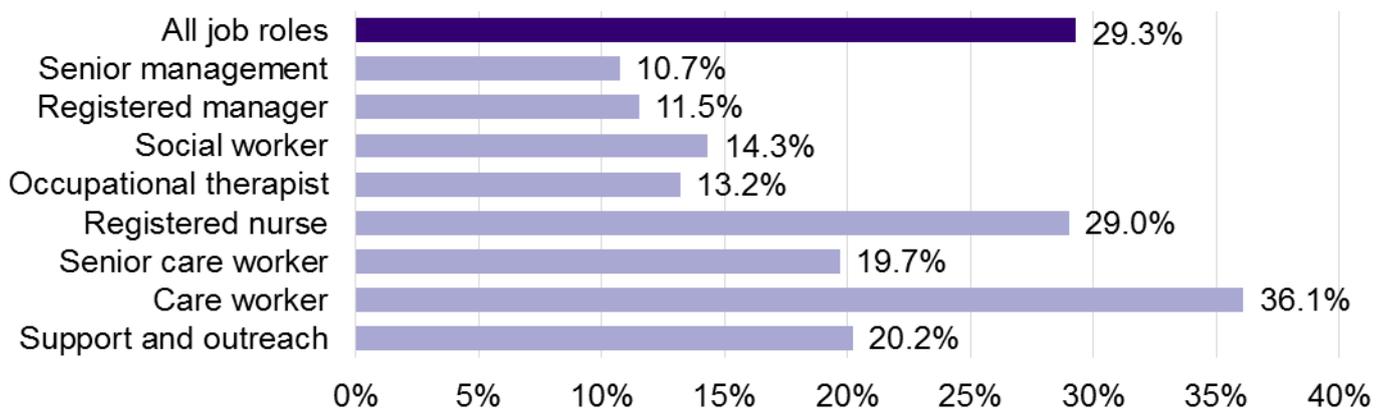*Source: Unweighted NMDS-SC data 2017/18*

Category	Rate
All sectors	29.3%
Local authority	13.4%
Independent	33.5%
Care homes	27.2%
Domiciliary care	36.1%
Other services	16.7%

The turnover rate differed by job role. Chart 6 shows that care workers had the highest turnover rate, with around a third (36.1%) leaving their role in the previous 12 months. Registered nurses also had a high turnover rate, at 29.0% - however, it should be noted that the majority of registered nurse roles were within independent social care providers where turnover rates were generally higher (see Chart 5).

Chart 6. Turnover rate of the adult social care learning disabilities and/or autism workforce by selected job roles, 2017/18
Source: Unweighted NMDS-SC data 2017/18

Category	Rate
All job roles	29.3%
Senior management	10.7%
Registered manager	11.5%
Social worker	14.3%
Occupational therapist	13.2%
Registered nurse	29.0%
Senior care worker	19.7%
Care worker	36.1%
Support and outreach	20.2%

4.2. Experience in role and sector

The number of years of experience in role differed greatly by both sector and job role.
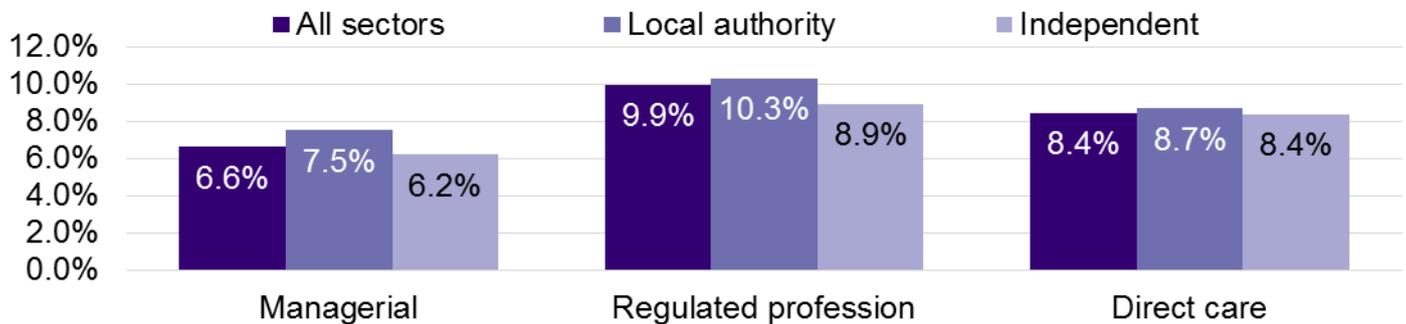
The average experience in role in the local authority sector was 7.6 years, compared to 3.7 years in the independent sector. This is an average of 5.7 years across both sectors, which is higher than the average for the whole adult social care workforce (4.2 years).

By job role, registered managers had the most experience in the role (8.8 years in role), compared to care workers with 3.4 years. Anecdotally, a registered manager was more likely to have been in their position for longer given the responsibilities and experience required to perform the job.

Chart 7 shows the differences between selected job roles and sector. Experience in role was higher in each job role group in the local authority sector, compared to the independent sector.

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Chart 7. Average years of experience in role of the adult social care learning disabilities and/or autism workforce by selected job roles and sector, 2017/18
Source: Unweighted NMDS-SC data 2017/18

Individuals in managerial roles in the learning disabilities and autism workforce had an average of 13.6 years of experience in the sector, whilst direct care roles had an average of 7.1 years. When comparing experience in sector against experience in role, workers in local authorities had more experience in both measures than the independent sector, this follows the same pattern as the whole of the adult social care workforce.

4.3. Source of recruitment

The NMDS-SC collects information about the source of recruitment of workers. These sources can then be grouped into 'within the adult social care sector', including the independent or local authority sectors, agencies or internal promotion, and 'outside the adult social care sector', including the health sector, retail or other sources.

Although the turnover rate (29.3%) was relatively high, 70% of starters were recruited from within adult social care. This means that the sector has largely retained the skills and experience of its workforce. However, it also means that there's a large amount of movement of workers between employers in the sector, and that employers are regularly recruiting, which can be costly.

Chart 8. Source of recruitment from within and outside of the adult social care sector in the adult social care learning disabilities and/or autism workforce by selected job roles, 2017/18
Source: Unweighted NMDS-SC data 2017/18
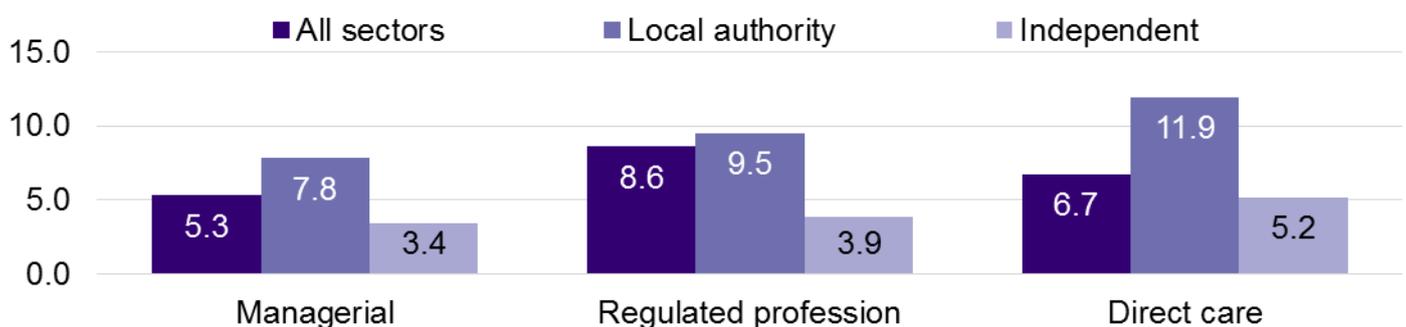
4.4. Sickness

Sickness rates in this section refer to directly employed workers only (permanent and temporary workers).

For the adult social care learning disability and/or autism workforce, the average number of sickness days was 6.7. This was much higher in the local authority sector (10.4 days) compared to the independent sector (4.9 days). However, 42% of the workforce had zero sickness days in the previous 12 months in the local authority sector, so sickness was not universally high. This was higher in the independent sector, at 62%.

Sickness rates differed by job role. The average number of sickness days was highest for regulated professional roles and lowest for managerial roles. Senior managers had an average of 1.7 sickness days, and 79% of them had zero sickness days in the previous 12 months. Social workers had the highest average at 10.0 days, and 47% of them had zero sickness days. It should be noted that, the majority of social workers were employed in the local authority sector which, as highlighted above, had a higher average compared to the independent sector.

Chart 9. Average number of sickness days in the adult social care learning disabilities and/or autism workforce by job role group, 2017/18
Source: Unweighted NMDS-SC data 2017/18

4.5. Vacancy rates

Vacancy rates in this section refer to directly employed workers only (permanent and temporary workers).

Vacancy rates of the adult social care learning disabilities and/or autism workforce were 8.0% which was the same for the whole adult social care workforce.

Overall, vacancy rates were slightly higher in the local authority sector (8.6%) compared to the independent sector (7.9%). Chart 10 shows that this was more evident in managerial and regulated professional roles.

Chart 10. Vacancy rate of the adult social care learning disabilities and/or autism workforce by job role group and sectors, 2017/18
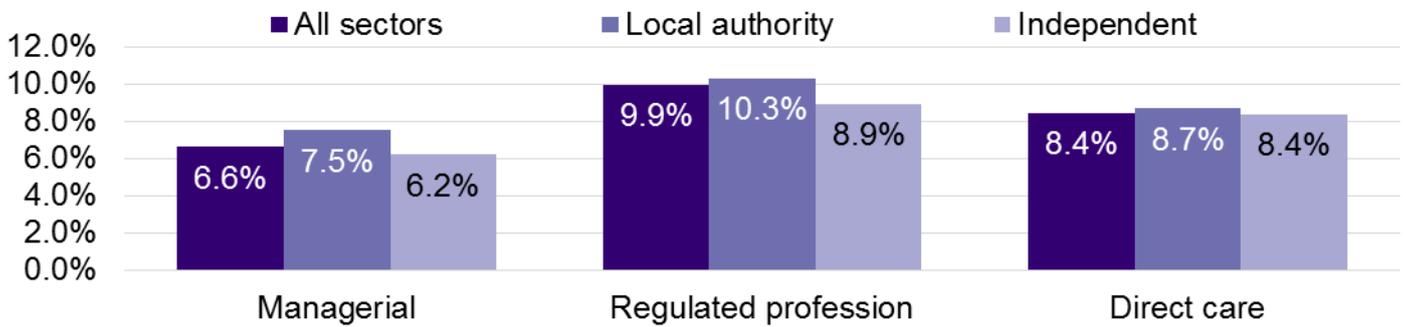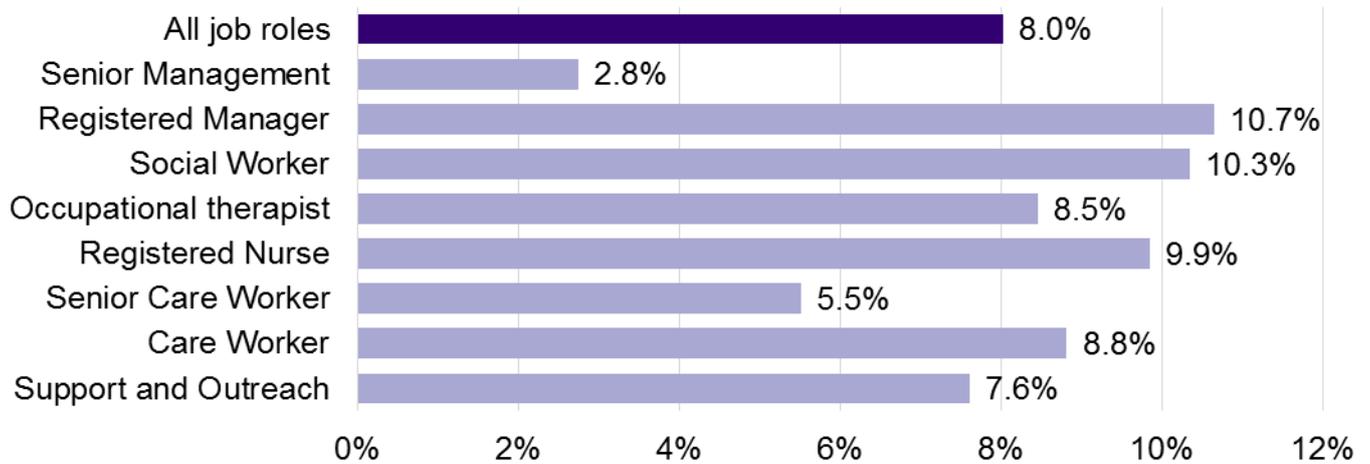*Source: Unweighted NMDS-SC data 2017/18*

Chart 11 shows that vacancy rates varied by job role. Registered managers and social workers had the highest vacancy rates (10.7% and 10.3% respectively). The lowest vacancy rates were found in senior management roles (2.8%). It should be noted that most social workers were employed within the local authority sector which had lower vacancy rates overall compared to the independent sector, as outlined above.

Chart 11. Vacancy rates of the adult social care learning disabilities and/or autism workforce by selected job roles, 2017/18
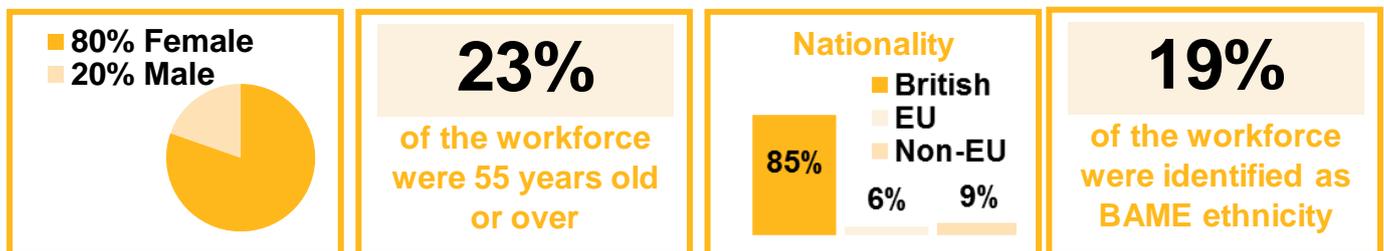*Source: Unweighted NMDS-SC data 2017/18*

5. Demographics

Overview of the demographics of the adult social care learning disabilities and/or autism workforce, 2017/18

- The workforce was 80% female and 20% male.
- The average age of a worker in this workforce was 43 years old, and 23% (75,700 jobs) were aged 55 or over.
- Around a third (33%) of registered nurses in this workforce were aged 55 or over.
- Workers from a Black, Asian and Minority Ethnic (BAME) background made up 19% of this workforce.
- The majority (85%) of this workforce were British, 6% had an EU nationality and 9% had a non-EU nationality.

80% Female
20% Male

23%
of the workforce were 55 years old or over

Nationality
■ British
■ EU
■ Non-EU
85%   6%   9%

19%
of the workforce were identified as BAME ethnicity

Please note, the data in this section is based on the number of adult social care establishments recorded in the NMDS-SC as at March 2018 for the independent sector, and September 2017 for local authorities.
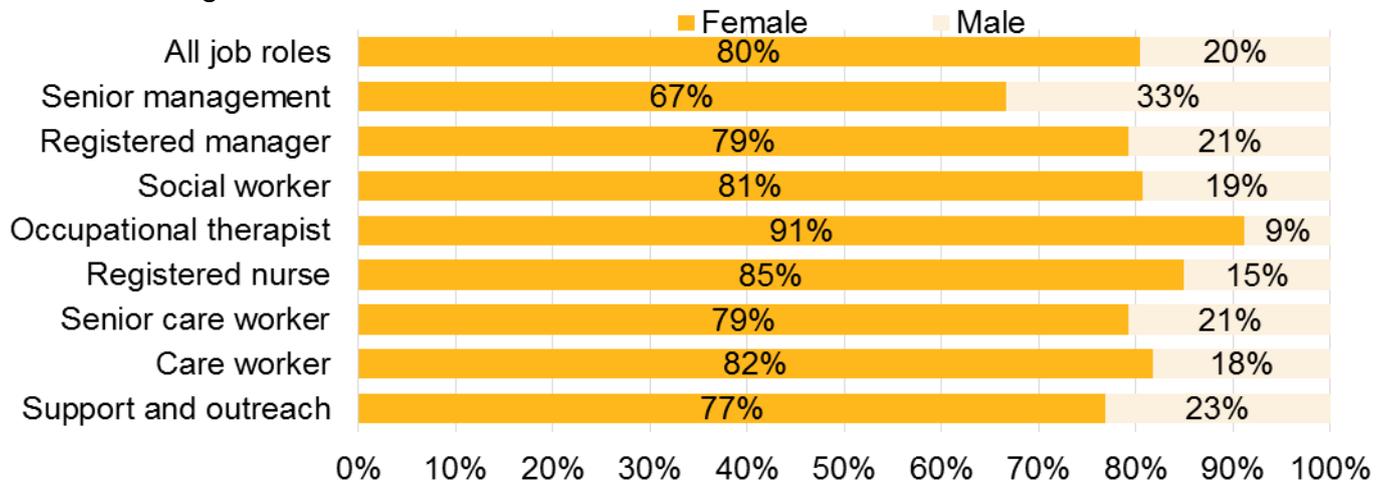
5.1. Gender

Chart 12 shows that 80% of the adult social care learning disabilities and/or autism workforce were female and a fifth (20%) were male. This was similar to the whole adult social care workforce which was 82% female and 18% male.

Chart 12 shows gender by job role. The majority of the workforce were female, but some variation can be seen by role. A third of senior management roles were male, whilst occupational therapists had the lowest rate of male workers, at 9%.

Chart 12. Gender of the adult social care learning disabilities and/or autism workforce by selected job role, 2017/18
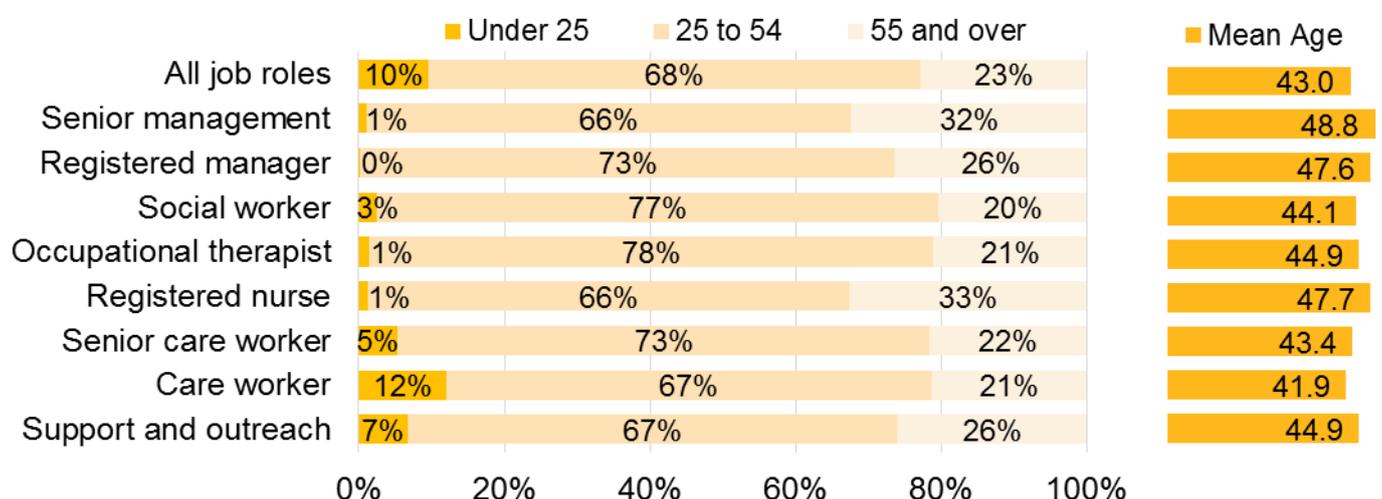*Source: Unweighted NMDS-SC data 2017/18*

Job role	Female	Male
All job roles	80%	20%
Senior management	67%	33%
Registered manager	79%	21%
Social worker	81%	19%
Occupational therapist	91%	9%
Registered nurse	85%	15%
Senior care worker	79%	21%
Care worker	82%	18%
Support and outreach	77%	23%

5.2. Age

The average age of the workforce was 43 years old, which was similar to the whole adult social care workforce (43.3 years old).

Almost a quarter (23%) of the learning disability and/or autism workforce were aged 55 years old. This could have workforce planning implications, as these workers could retire within the next ten years.

Chart 13 shows that care workers had the highest proportion of under 25 year olds (12%) and the lowest average age (41.9 years old). Managerial and regulated professional roles had an older age profile, which is expected as these roles require more qualifications and experience. Senior management and registered nurses were the job roles with the highest proportion of workers aged 55 or over (32% and 33% respectively).

Chart 13. Age bands and average age of the adult social care learning disabilities and/or autism workforce by selected job role, 2017/18
Source: Unweighted NMDS-SC data 2017/18

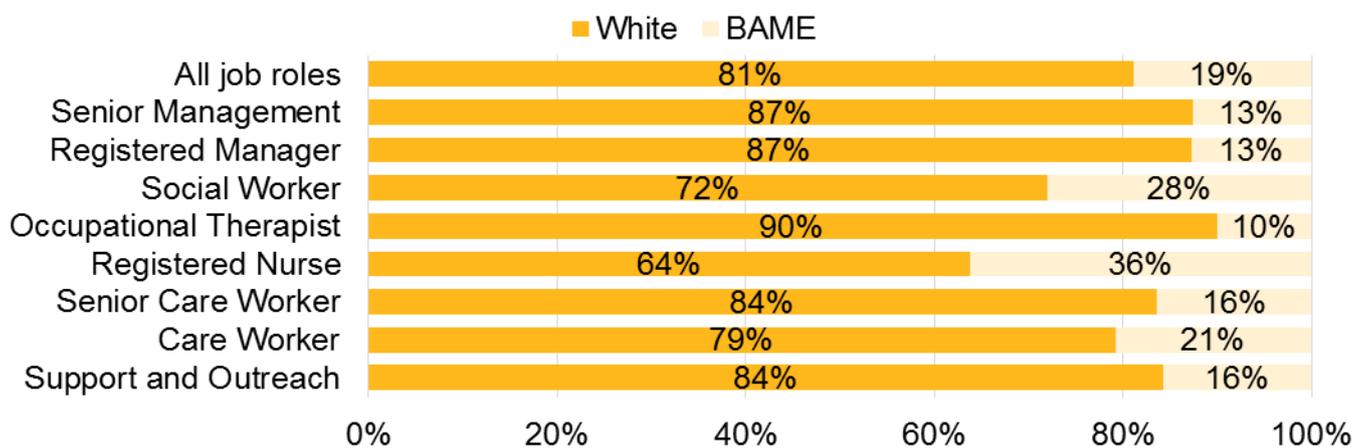| Job role	Under 25	25 to 54	55 and over	Mean Age
All job roles	10%	68%	23%	43.0
Senior management	1%	66%	32%	48.8
Registered manager	0%	73%	26%	47.6
Social worker	3%	77%	20%	44.1
Occupational therapist	1%	78%	21%	44.9
Registered nurse	1%	66%	33%	47.7
Senior care worker	5%	73%	22%	43.4
Care worker	12%	67%	21%	41.9
Support and outreach	7%	67%	26%	44.9

5.3. Ethnicity

Around a fifth (19%) of the adult social care learning disabilities and/or autism workforce were of Black, Asian and Minority Ethnic (BAME) ethnicity. This was similar to the whole adult social care workforce (21% BAME and 79% white ethnicity).

Ethnicity varies by region, with London and the South having the most diverse workforce and the North East having the least. In general, these proportions reflect the population in each area.

Ethnicity also differs by job role, as shown in Chart 14. Regulated professionals had the highest proportion of workers from a BAME background – in particular, registered nurses (36%). Occupational therapists (10%), senior management (13%) and registered managers (13%) had the lowest proportion of workers from a BAME background.

Chart 14. Ethnicity of the adult social care learning disabilities and/or autism workforce by selected job role, 2017/18
Source: Unweighted NMDS-SC data 2017/18
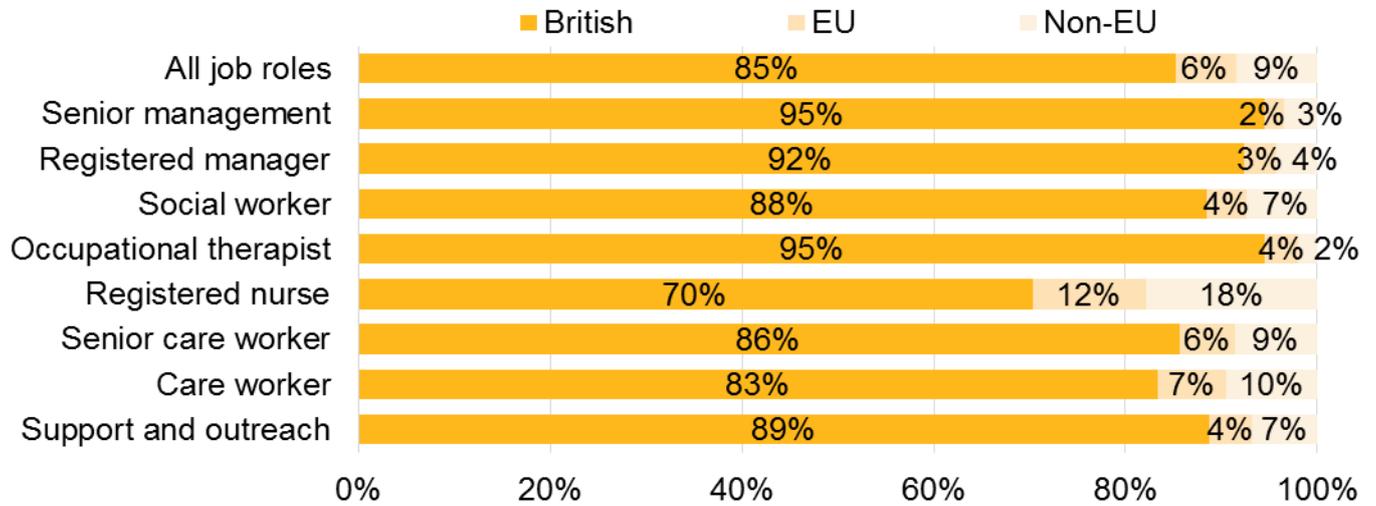

5.4. Nationality

Around 85% of the adult social care learning disabilities and/or autism workforce were British, 6% had an EU nationality and 9% had a non-EU nationality. Therefore, on average, the learning disability and/or autism workforce had a higher reliance on non-EU than EU workers. This is similar to the adult social care workforce as a whole.

Chart 15 shows nationality by job role. There was a lower proportion of non-British workers in managerial roles and a higher proportion in regulated professions. Registered nurses had the highest proportion of EU (12%) and non-EU workers (18%), followed by care workers (7% EU and 10% non-EU).

The learning disabilities and/or autism workforce had a lower reliance on EU and non-EU workers for all job roles (15%) than the adult social care workforce as a whole (18%).

Chart 15. Nationality of the adult social care learning disabilities and/or autism workforce by selected job role, 2017/18

Source. Unweighted NMDS-SC data 2017/18

Legend: British | EU | Non-EU

Job role	British	EU	Non-EU
All job roles	85%	6%	9%
Senior management	95%	2%	3%
Registered manager	92%	3%	4%
Social worker	88%	4%	7%
Occupational therapist	95%	4%	2%
Registered nurse	70%	12%	18%
Senior care worker	86%	6%	9%
Care worker	83%	7%	10%
Support and outreach	89%	4%	7%

6. Pay

£29,700	**£35,300**	**£9.81**	**£8.08**
Registered nurse independent sector FTE pay	**Social worker local authority sector FTE pay**	**Care worker local authority sector mean hourly pay**	**Care worker independent mean hourly pay**

Please note, the data in this section is based on the number of adult social care establishments recorded in the NMDS-SC as at March 2018 for the independent sector, and September 2017 for local authorities.

6.1. Full-time equivalent mean annual pay

The information in this section shows FTE average salaries. Pay data was converted into FTE annual salaries using an average working week of 37 hours (the FTE). Hourly pay was also converted into annual salaries based on the full-time equivalent. Converting pay in this way allows for pay of full-time and part-time workers to be compared.
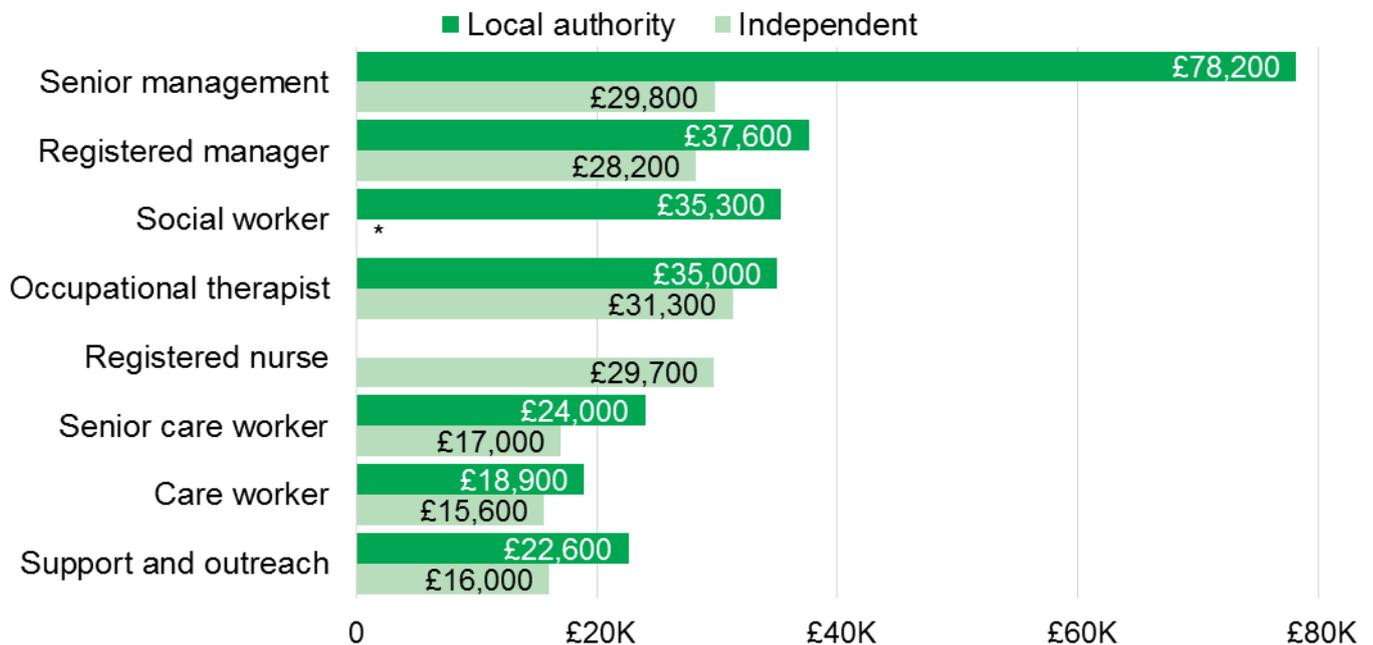
The data used in the pay chapter was gathered from independent sector employers between April 2017 and March 2018, and from local authorities as at September 2017. The National Living Wage (NLW) during this time was £7.50 per hour.

Chart 16 shows average FTE annual pay rates in the adult social care learning disabilities and/or autism workforce, by selected job roles. Overall, pay rates were higher in local authorities compared to independent sector employers in the adult social care learning disabilities and/or autism workforce. This is the same as in the adult social care sector as a whole.

In the independent sector, the mean FTE annual pay rates of senior management roles in the adult social care learning disabilities and/or autism workforce (£29,800) was slightly lower than the whole adult social care workforce (£30,700).

Chart 16. FTE annual pay of the adult social care learning disabilities and/or autism workforce by selected job role, 2017/18
Source. Unweighted NMDS-SC data 2017/18

6.2. Hourly pay

On 1 April 2016 the Government introduced a new mandatory National Living Wage (NLW) of £7.20 per hour for all workers aged 25 or over. This increased to £7.50 in April 2017, and current projections from HM Treasury put the NLW at £8.62 in 2020. Prior to the introduction of the NLW, the statutory National Minimum Wage (NMW) for workers aged 21 or over was £6.70, set in October 2015.

Please note that this report is based on data from independent sector employers between April 2017 and March 2018 and local authority sector employers as at September 2017. For the purposes of this report, the NLW of £7.50 will be quoted to match the timescale in which the data was collected. In April 2018, after the data in this report was analysed, the NLW increased to £7.83.

There's also the UK Living Wage, an independently calculated hourly rate which reflects the basic cost of living in the UK, and is completely separate to the Government-set NLW. In 2017 the UK Living Wage in London was £10.20 and £8.75 for the rest of the UK.

This section will focus on direct care roles, (compared to section 6.1 which focused on managerial and regulated professions).

As with the FTE annual salaries shown in section 6.1, the average hourly pay for direct care roles in local authorities (£10.64) was higher than the independent sector (£8.16).

Chart 17 shows that the average hourly rate of a care worker in the independent sector in the adult social care learning disabilities and/or autism workforce was £8.08. This was similar to that of the whole adult social care workforce (£8.12).

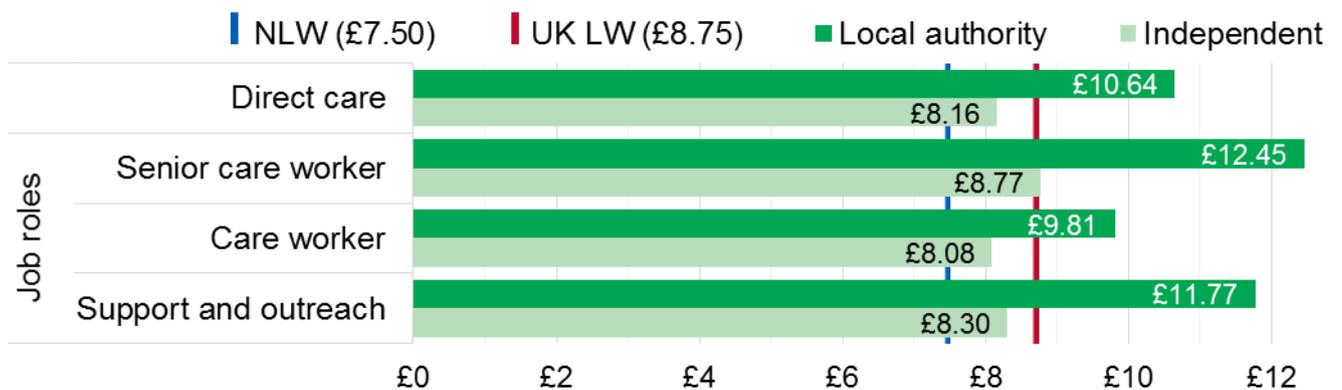All selected job roles were paid more than the NLW on average, however this was by varying amounts.

In the local authority sector, the hourly rate for a care worker in the learning disabilities and/or autism workforce was £9.81, similar to the whole of the adult social care workforce (£9.80). This was £2.31 higher than the NLW and £1.06 higher than the UK living wage.

The local authority sector paid more than both the NLW and UK Living Wage for all direct care job roles in the learning disabilities and/or autism workforce, reflecting the higher pay in the local authority sector.

In the independent sector, only senior care workers earned more than the UK Living Wage, with the largest difference being within care worker roles, with an average hourly rate 67p below the UK Living Wage.

Chart 17. Mean hourly pay for direct care roles in the adult social care learning disabilities and/or autism workforce, 2017/18
Source. Unweighted NMDS-SC data 2017/18

7. Qualifications and training

Overview of the qualifications and training of the adult social care learning disabilities and/or autism workforce, 2017/18

Skills for Care believes that everyone working in adult social care should be able to take part in learning and development so that they can carry out their role effectively. This will help them to develop the rights skills and knowledge so that they can provide high quality care and support.

- 68% of direct care workers in this workforce were engaged in the Care Certificate.
- Around 55% of direct care workers in this workforce held a relevant social care qualification.

68%	**73%**	**55%**	**Moving and handling**
of direct care jobs had engaged with the Care Certificate	of domicilary care workers had engaged with the Care Certificate	of direct care roles held a relevant social care qualification	was the most common type of training course

Please note, the data in this section is based on the number of adult social care establishments recorded in the NMDS-SC as at March 2018 for the independent sector, and September 2017 for local authorities.

7.1. Care Certificate

The Care Certificate was launched in April 2015 and replaced the Common Induction Standards (CIS). The Care Certificate outlines the minimum set of standards that health and social care workers need to meet. For more information about the Care Certificate please visit www.skillsforcare.org.uk/CareCertificate.

The NMDS-SC has been collecting information about the number of workers who have achieved or were working towards the Care Certificate since April 2015.
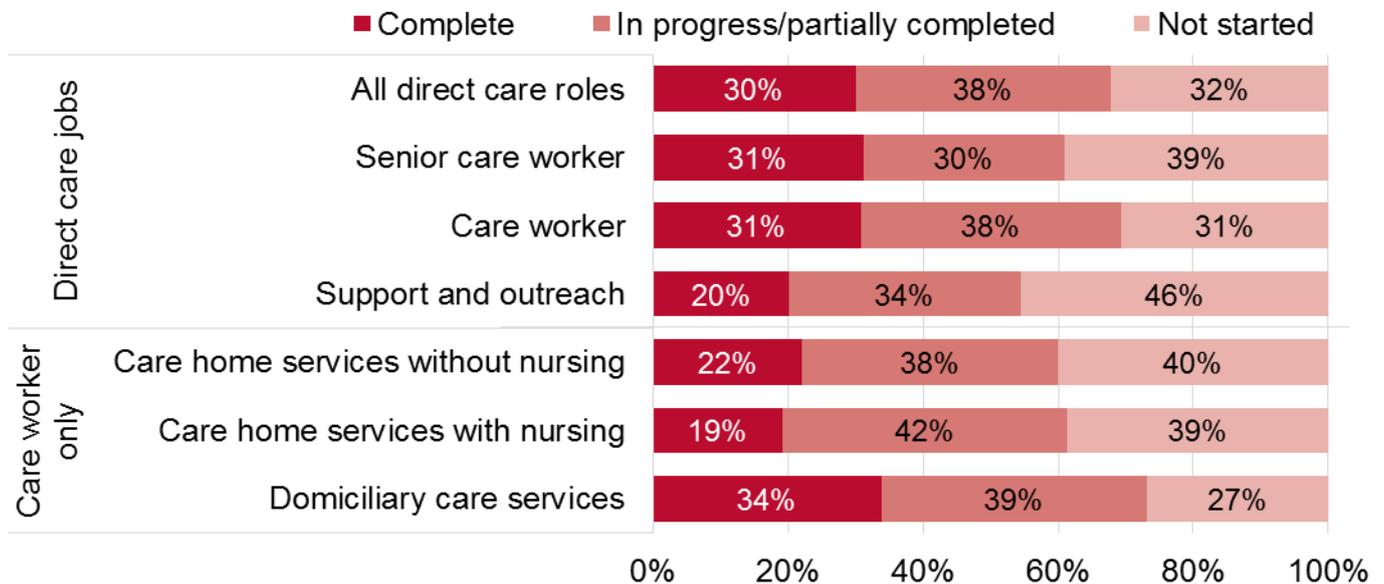
The Care Certificate is available to everyone, but the main target is workers who are new to the adult social care sector, and it's most common amongst direct care workers. The data in this section refers is 'unweighted' NMDS-SC data, and focuses on workers in direct care roles who were new to the sector since 2015.

Around 68% of the adult social care learning disabilities and/or autism workforce had engaged with the Care Certificate (either completed the Care Certificate, were in the process of doing so or partially completed it). This was the same as the whole adult social care workforce (also 68%).

Chart 18 shows that care workers had the highest proportion of workers engaged with the Care Certificate out of the direct care job roles (69%).

Chart 18. Care Certificate status of direct care workers new to the sector since January 2015 by job role and service in the adult social care learning disabilities and/or autism workforce, 2017/18
Source. Unweighted NMDS-SC data 2017/18

Care Certificate engagement was highest for workers in domiciliary care services, where 73% of workers were engaged with the Care Certificate, compared to care home services without nursing (60%) and care home services with nursing (61%).
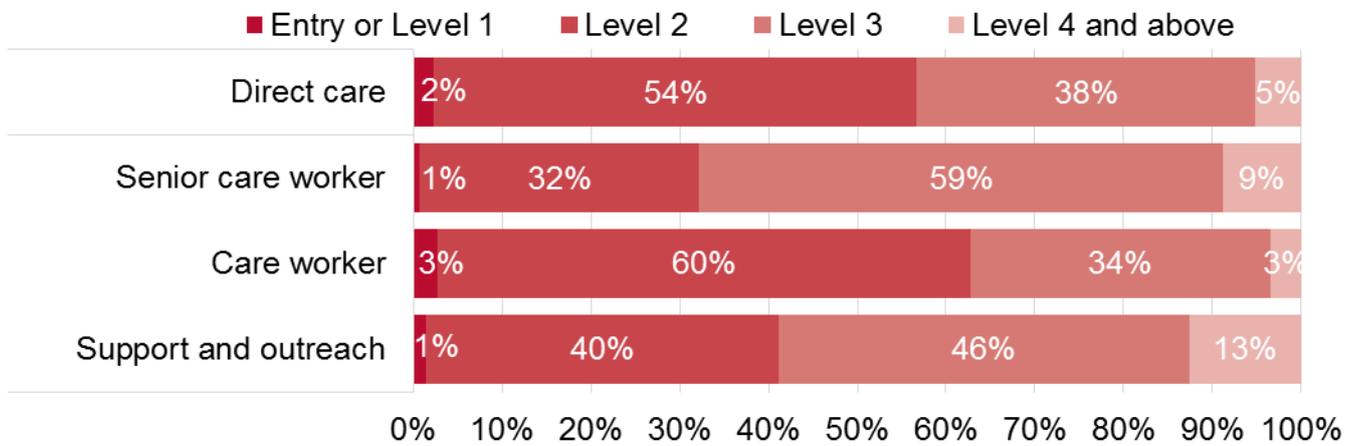
7.2. Qualifications held

This section looks at the highest level of social care qualification held by adult social care workers. Please note that professional roles are not included in the analysis below because they must be qualified to perform their roles, e.g. social worker, registered nurse or occupational therapist.

Around 55% of direct care workers in the adult social care learning disabilities and/or autism workforce held a relevant social care qualification. This was higher than for direct care workers in the whole adult social care workforce (53%).

Chart 19 shows that of those who held a relevant social care qualification, 54% held a level 2 qualification, and this was highest amongst care workers (60%). As might be expected, those in senior care worker roles were more likely to be qualified at level 3 and above (68%).

Chart 19. Highest relevant social care qualification level of the adult social care learning disabilities and/or autism workforce, 2017/18
Source. Unweighted NMDS-SC data 2017/18
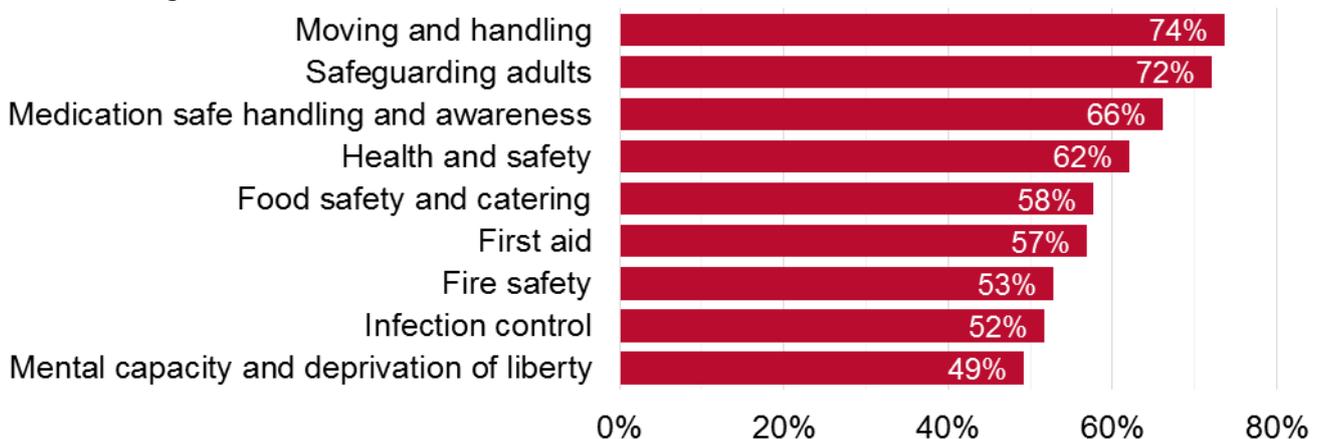

7.3. Training

The NMDS-SC gives employers the option of recording training data, in addition to accredited qualifications. The NMDS-SC has 22 training categories under which any training can be recorded.

Chart 20 is based on all workers at establishments that provide care and support for people with learning disabilities and/or autism, that have recorded training in their NMDS-SC account.

Moving and handling (74%), safeguarding adults (72%) and medication safe handling and awareness (66%) were the top training categories for the adult social care learning disabilities and/or autism workforce. Moving and handling and safeguarding adults were also the top two training categories for the whole adult social care workforce, but the rest of the top ten training categories vary.

Chart 20. Top 10 categories of training recorded in the NMDS-SC of the adult social care learning disabilities and/or autism workforce, 2017/18
Source. Unweighted NMDS-SC data 2017/18

8. Further resources

Skills for Care's NMDS-SC is recognised as the leading source of workforce intelligence for adult social care in England. Our workforce intelligence is relied upon by the Government, strategic bodies, employers and individuals to make decisions that will improve outcomes for people who need care and support. We use the data that we collect to write reports and resources about the workforce.

8.1. Workforce intelligence publications

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

This report provides an overview of the size and structure of the workforce, including estimates of the number of care providing organisations, establishments/care providing locations, people and job estimates, trend data and future projections. To access this report please visit www.skillsforcare.org.uk/sizeandstructure.
Latest version, July 2018

Regional reports

These nine annual regional reports provide an overview of the adult social care workforce in each region across England. To access these reports please visit https://www.skillsforcare.org.uk/regionalreports
Latest version, October 2018

Local authority area reports

These two page summary reports provide an overview of the adult social care workforce in each of the 152 local authority areas in England. These reports are published twice a year, and the latest reports focus on job role estimates by local authority area. To access any of these reports please visit www.skillsforcare.org.uk/lasummaries
Reports published twice a year, in March and October

NMDS-SC briefings and trend briefings

Skills for Care published short reports each year which highlight specific aspects of the adult social care sector. Examples of briefing topics that have been covered in recently including:

- care worker pay (post National Living Wage)
- nationality of the adult social care workforce
- social workers in the adult social care sector
- diversity of the adult social care sector
- registered nurses in the adult social care sector.

To access these briefings please visit www.skillsforcare.org.uk/topics

8.2. Workforce planning

A good workforce plan will ensure that your organisation has enough of the right people to deliver high quality, person-centred care and support, and to meet the changing needs and future opportunities of your business be more successful and make sure that you have the right people in place to meet the changing needs and future opportunities for your business.

Our resources are especially developed for small and medium sized organisations and explain:
- what workforce planning is and why it's important
- what are the principles for it and who should be involved in it
- how it fits with how services are commissioned
- how workforce information should be used including data from the NMDS-SC
- how to do workforce planning using a step by step method.

For more information about workforce planning, please visit
www.skillsforcare.org.uk/workforceplanning

8.3. Adult social care workforce estimates Excel file

To support workforce intelligence publications, Skills for Care has published an 'Adult social care workforce estimates' Excel file. This file includes the size and structure of the workforce, recruitment and retention information, employment information, demographics, pay rates and qualifications and training information in England, by region, sector, service and job roles.

Please visit www.skillsforcare.org.uk/workforceestimates.
New estimates are published in September each year, and updates made throughout the year when new workforce intelligence publications are released.

8.4. Analytical service

The Skills for Care analysis team provide an external analysis service and can produce a range of in-depth reports depending on your specific requirements. Our experienced analysts can work with you to identify your requirements and deliver bespoke workforce intelligence reports to suite your needs. We use NMDS-SC data to provide essential data in the form of reports or within a broader consultancy package to inform business decision making.

Our data services, available at the geographical level most relevant to you, can be used when you need:
- evidence to help you make an important decision or develop a strategy
- information/analysis and a report that's more in-depth and tailored to your needs
- trend information or help looking ahead with forecasts
- information for a bid
- benchmarking social care organisations/the workforce
- contributions to health and social care workforce integration projects.

Here's a testimony from Ben Hartley, Director at Carterwood, who used our analysis service in 2017.

"Skills for Care has recently supplied Carterwood with data, and overall the service has proved to be very helpful, flexible, and prompt. The data provided has so far been exceedingly useful and exactly as agreed, and the Skills for Care team was keen to ensure it was exactly in the format that was most suitable for our needs.

The data has helped form our understanding of the staffing market in the care sector, and provided some useful benchmarks with which to compare against in our new care home staffing report. I would most certainly recommend."

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

8.5. Keeping informed

To sign up to our workforce intelligence quarterly newsletter, please register on the Skills for Care website and tick 'workforce intelligence' in the 'areas of interest' section. You can also follow us on twitter @SfC_NMDS_SC or visit www.skillsforcare.org.uk/contactWI.