RECENT RESEARCH ON THE SOCIAL CARE WORKFORCE



Selected findings and areas for discussion

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WORK-RELATED QUALITY OF LIFE	WORKFORCE CHANGE	MIGRATION & RECRUITMENT	REGISTRATION & PROFESSIONALISATION

OVERVIEW

This research programme, led by Professor Shereen Hussein as part of the LSHTM C-CARE Group, explores the social care workforce from multiple interconnected angles: the quality of life for care workers, the policy influences transforming the workforce, how migration policies impact workforce sustainability, and the role of workforce registration and professionalization. A central question across these projects is how care systems can develop and maintain a workforce that is valued, supported, and capable of providing high-quality care. The results indicate that workforce issues cannot be solved by recruitment alone. Factors such as pay, working conditions, regulation, commissioning, migration policies, professional recognition, and organizational practices all interact to influence both workers' experiences and the sustainability of care systems.

01 Measuring what matters: ASCK-WELL and quality of working life in care

ASCK-WELL is a new, sector-specific measure of care work-related quality of life, developed and validated with care workers and stakeholders in England.

The research moves beyond conventional approaches that conceptualise workforce wellbeing primarily in terms of individual burnout, job satisfaction or resilience. Instead, ASCK-WELL treats quality of working life as shaped by the structural and organisational conditions of care work.

The framework identifies twelve domains organised within four interconnected areas:

- **Moral and emotional demands:** responsibility, burden and exhaustion;
- **Control, time and boundaries:** control over scheduling, training and development, and work–life boundaries;
- **Recognition and relational work:** respect and value, workplace relationships, satisfaction and motivation; and
- **Material and organisational conditions:** fair pay and benefits, physical safety and career development.

The final instrument has demonstrated strong psychometric properties and provides an interval-level measure for comparing experience across workers and settings.

WHY IT MATTERS the tool creates a means of monitoring workforce experience, evaluating interventions and identifying where organisational or policy change may be needed. Its usefulness, however, depends on measurement leading to action and on workers trusting that the information will be used constructively rather than punitively.

02 What drives change in the social care workforce?

The ESRC Centre for Care study, *Understanding the Drivers and Implications of Care Workforce Change*, examined how national and local policy decisions reshape the social care workforce across the four nations of the UK.

Using evidence reviews, stakeholder consultations and foresight methods, the research explored both the intended and unintended consequences of policy change and asked stakeholders to consider what the UK care workforce might look like by 2035.

A particularly important finding was that workforce change cannot be understood solely through national policy. Stakeholders emphasised the importance of commissioning and local care-market structures, as decisions about the prices paid for care ultimately shape providers' capacity to offer good pay, training and employment conditions.

The work also positions care workers themselves as agents of change, rather than simply recipients of policy. Across the future scenarios developed with stakeholders, better pay, stronger training and development, improved employment conditions and more effective commissioning emerged as central requirements for a sustainable workforce.

WHY IT MATTERS workforce policy is not a collection of separate interventions. Funding, commissioning, professionalisation, migration and employment conditions interact, sometimes reinforcing and sometimes undermining one another. Effective reform therefore requires greater attention to these relationships and to the experiences and agency of care workers themselves.

03 Migration policy and the future of social care recruitment

The working paper *From Crisis to Chronic Shortage: The Future of Adult Social Care Workforce Recruitment in the UK* examines the consequences of rapidly changing immigration policy for care providers and migrant care workers.

International recruitment helped the sector respond to acute staffing shortages, but it has also imposed substantial new responsibilities on employers, including sponsorship, right-to-work checks, record-keeping and immigration compliance. These demands are particularly challenging for smaller and medium-sized providers, which often rely heavily on migrant labour yet have fewer HR, legal and administrative resources.

The research also highlights vulnerabilities associated with employer-sponsored migration. Workers whose immigration status is tied to a particular employer may have less freedom to challenge poor conditions, while recruitment fees, repayment clauses and weak oversight can increase the risk of exploitation.

The central finding is that immigration policy cannot substitute for workforce policy. Restricting migration routes does not address the underlying causes of recruitment and retention difficulties; equally, expanding international recruitment without addressing pay, job quality, funding and employment rights cannot produce a sustainable workforce.

WHY IT MATTERS migration needs to be understood as part of the wider care system rather than simply as a mechanism for filling vacancies. Sustainable workforce planning requires immigration policy to be considered alongside funding, commissioning, employment rights and provider capacity.

04 Registering and professionalising the care and support workforce

Recent comparative research for HumanAbility in Australia examined whether and how registration and accreditation might contribute to the professionalisation of care and support workers.

The research draws on Australian experience and established international models in Scotland, Ontario and Japan. These systems illustrate markedly different approaches, from statutory registration to voluntary registers and long-established systems of professional certification.

The comparison shows that registration can contribute to:

- stronger safeguarding and public accountability;
- clearer professional and practice standards;
- improved workforce data and workforce planning;
- greater recognition of care work as skilled work; and
- more explicit pathways for training and career development.

Registration alone does not resolve issues of poor job quality or workforce shortages. Scotland illustrates how statutory registration can enhance safeguarding, standards, and workforce data but also shows that qualification requirements can add pressure when funding and training are limited. Ontario's experience with voluntary registration highlights its limited impact on pay, progression, or professional recognition. Japan demonstrates that registration can foster a strong professional identity and uphold national standards, even though challenges like low wages, tough working conditions, and high turnover persist.

International evidence suggests that phased implementation, accessible qualification pathways, recognition of prior learning, adequate financial support, and active engagement with workers and providers are crucial. Registration is most effective when integrated into a broader strategy to improve skills, wages, career paths, and job quality.

WHY IT MATTERS registration prompts broader questions about professionalising care work, such as how to enhance recognition and safeguards without creating barriers to entry, excluding experienced workers, or increasing regulatory burdens on an already stretched workforce.

CONNECTING THE FINDINGS

These projects suggest that the sustainability of social care depends on looking beyond workforce numbers towards the conditions, policies and institutions that shape care work.

These questions provide opportunities for comparative discussion across different care systems and for future research collaboration.

QUESTIONS FOR DISCUSSION

How should we define and measure good work in care? What forms of regulation and professionalisation genuinely improve recognition and quality? How do migration, commissioning and funding policies affect workforce sustainability? And how can care workers themselves have a stronger voice in the design of workforce policy?

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