



Adult social care related roles in the NHS: proposed changes

2025

Adult social care related roles in the NHS

Proposed changes

- Adult social care related roles employed by the NHS are removed from our estimates of the size of the adult social care workforce.
- A section is included in the 'state of the workforce report' to talk about these roles instead of including them in our headline numbers.
- A document is published alongside our 2025 publications to explain the rationale and impact.

If you have any feedback or questions in relation to this proposed change then please contact: analysis@skillsforcare.org.uk

Background

Our estimates of the size of the adult social care workforce include some adult social care related roles employed in the NHS.

The rationale was that some people in these roles were carrying out tasks that would usually be classed as 'adult social care', so they were included despite the employer being the NHS.

We defined the following job roles from NHS England's (NHSE) workforce data to be adult social care related.

- Qualified occupational therapy jobs
- Qualified social services jobs (social workers)
- Healthcare assistants (excluding maternity jobs)
- Support for occupational therapy jobs
- Support for social services jobs

These roles account for 117,000 filled posts (7% of our total estimate).

	Sector				Total
	Independent	Local authority	NHS	Direct payment recipients	
Filled posts	1,345,000	117,400	117,000	123,000	1,710,000

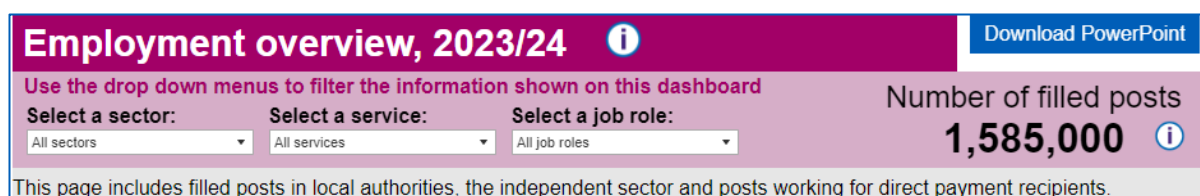
It is proposed that these roles are no longer included in our estimates of the size of the adult social care workforce in our 2025 reports. However, the original rationale remains valid that

some of these roles can be adult social care related, so Skills for Care plans to continue to publish information on these roles in a separate section. Further detail is provided below:

Pros of excluding NHS roles from our estimates of the size of the adult social care workforce

1) We can only include NHS roles in our filled posts estimates

The NHSE dataset only provides a top-level number of filled posts for these roles. It does not contain any information on their demographics, pay, recruitment and retention etc. Therefore, we have inconsistency in our numbers that requires caveating throughout our work to explain why some tables have 1.71m filled posts and then most of the rest have 1.59m. We know this causes confusion for some of our users. Examples of two visualisations below:



2) We don't have any context to provide narrative around these figures

As we only receive the top-level figures from the NHS England dataset, we don't have any more detailed data or narrative available to understand the reasons for any changes or trends.

For example, the number adult social care related roles in the NHS has increased in recent years (from 90k in 2016/17 to 117k in 2023/24). We don't have any context around these figures to analyse and report on the reasons behind the changes. Compared to ASC-WDS data, where for any trends we can examine the raw figures and look for reasons for the patterns we see and provide this much-needed context/insight in our reporting.

3) We're creating the potential for double counting with NHS statistics

Increasingly adult social care data is being analysed alongside NHS/health data. By including some NHS staff in our figures we're creating the opportunity for people to double count if they're not aware that we also include these roles.

4) Not all of the NHS roles we include will be adult social care related

Some legitimate concerns have been raised by users about whether all the of the roles we include are adult social care related. For example, some OTs and HCAs work primarily with children rather than adults, and we have no way of separating them out in the NHSE data.

Considerations required if we exclude NHS roles from our estimates of the size of the adult social care workforce

1) We will be publishing a lower headline number for the size of the sector in our 2025 publications

Removing NHS roles from our estimates would reduce our 2023/24 estimate from 1.71m to 1.58m. We would also make the change retrospectively to all estimates from previous years. This would require some explaining in our reports and communications to ensure users do not conclude that the sector has got smaller.

We plan to not to detach the number of filled posts figure from the trend in our reports and associated communications to mitigate against this possibility. For example, we would say “The number of filled posts in adult social care was 1.58m in 2023/24, a x% increase from 2022/23 when it was 1.54m”. We can also publish a formal note alongside our publications detailing the impact of this change.

2) At least some of the roles we currently include are legitimately adult social care related and may still be useful for some users

For example, it is useful for us to be able to talk about the total number of social workers, regardless of their employer.

We plan to manage this by still talking about the number of NHS social workers in our social worker reports and in the social worker section of the state of the workforce report. This way we would still be able to give the whole picture for roles like social workers, without the negative impacts of including the NHS staff in our headline figures.

We also plan to publish the same level of information on roles in the NHS as we have done previously (but not include them in the headline figures). This would allow users to use these figures alongside our estimates of the size of the adult social workforce if they needed to.



Skills for Care

West Gate
6 Grace Street
Leeds
LS1 2RP

T: **0113 245 1716**

E: info@skillsforcare.org.uk

skillsforcare.org.uk



twitter.com/skillsforcare

facebook.com/skillsforcare

linkedin.com/company/skills-for-care