BROOK ST.
Social Care.

REBUILDING UK SOCIAL CARE.

Stronger identity, stronger careers, stronger futures – a roadmap for sustainability and growth.

SOCIAL CARE NEEDS A NEW STORY.

UK social care has reached a crossroads. The sector employs around 1.6 million people, contributes almost £90 billion to the UK economy and underpins the lives of some of the most vulnerable people in our society. Yet it's a sector that continues to struggle – not just with finances and staffing – but with something more fundamental: its own identity.

This whitepaper presents Brook Street's analysis of the challenges facing social care and a clear programme of reforms to address them. It examines the structural forces driving **workforce instability**, such as persistent recruitment shortfalls, weak retention and the impact of new employment legislation. It also addresses the **withdrawal** of international recruitment routes and the growing risk of **digital exclusion**.

But it also goes further, arguing that policy reform alone is not enough.

Social care needs a **new story**. One that positions the sector as a place to build a skilled, valued and professionally rewarding career – as an industry that attracts domestic talent, retains experienced workers and commands the investment it deserves.

Social Care's annual contribution to the UK economy (as of 2025):

England:	£77.8 billion
Wales:	£4.6 billion
Scotland:	£5.2 billion
NI:	£1.5 billion

In 2023/24, **859,000 adults** received publicly funded long-term social care in England, primarily in care/nursing centres or in their own homes. Additionally, **400,000 children and young people** are supported by local authority children's social care services at any given time.

Sources: Skills for Care – Oct 2025. Home for Good – Nov 2024

"The Prime Minister's July 2026 commitment to create a National Care Service and strengthen the social care workforce represents the most significant political focus on social care in a generation. For a sector that has long called for meaningful reform, this is a welcome opportunity. The challenge now is to translate ambition into action by investing in leadership, creating visible career pathways, improving professional recognition and building a workforce that is equipped and supported to meet future demand."

Teresa Wilson, Operations Director, Brook Street Social Care

This report calls for a bold, **coordinated programme of change** – partnering Government, providers and workers in a series of reforms that cover pay, professional identity, career pathways, leadership development, visa reform and digital inclusion – all the necessary building blocks to create an industry that's fit for the years ahead.

The publication of the Prime Minister's plans for a National Care Service in July 2026 represents an important opportunity to reset the national conversation around care. The ambitions set out by government around workforce development, career progression, training and integration with the NHS are hugely welcome. This paper seeks to contribute to that conversation by focusing on the practical workforce reforms needed to turn that vision into delivery.

Read on to learn how these goals can be achieved.

Industry perspective:

"People stay in professions where they can see a future. Pay matters, but so do identity, progression and purpose. If social care wants to attract the next generation of talent, we need to show that it is not simply a job, but a profession where people can build diverse, ambitious and impactful careers."

Eve Mitchell, Chief Operating Officer, Somerset Care

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THE STATE OF SOCIAL CARE – A SECTOR UNDER PRESSURE.

Even though recruitment is now slowly rising, vacancy rates in UK social care are still high. As of October 2025, there were **111,000 unfilled roles in adult care in England alone** – a vacancy rate of 7% compared to 2% in the broader economy.

Industry perspective:

"Care providers are increasingly competing for talent beyond the sector. Retail, hospitality and other customer-focused industries are often vying for the same people, particularly younger workers. Retention is no longer simply about pay – flexibility, wellbeing and the overall employee experience are becoming equally important."

Housing 21

Recruitment challenges are further compounded by **poor retention**. Even though some providers are bucking the trend and keeping churn to the minimum – providing valuable pointers that others in the industry could learn from – staff turnover still hovers at almost 28%.

Unfortunately, these are not new problems, they're deep-rooted issues that impact almost every area of care. They also reflect something that the data cannot fully capture: A workforce that frequently feels **undervalued, under-supported and invisible** to the wider public.

Demand for services continues to rise

Meanwhile, despite the shortfall in workers and the increasing financial squeeze on providers, issues such as the rising cost of living, housing poverty and better diagnosis in both adult and children's mental health place increased burden on care services.

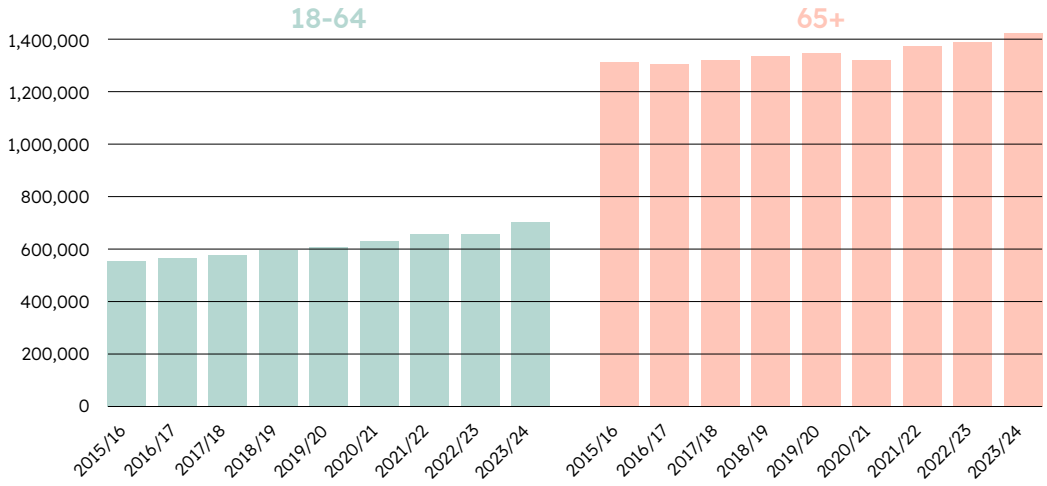
Virtually everyone in the UK is likely to require social care support at some point in their lives, either as they age or through disability. Currently, over **10 million adults** in England are affected by social care needs at any one time.

Source: UK Parliament – May 2025

In 2023/24, 2.1 million people requested support from their council – an increase of 15% since 2015/16.

The total number of new requests for social care support in England rose in 2023/24, particularly from working-age adults

Total number of requests from new clients, by age group



Source: NHS England 2023/24

The policy burden

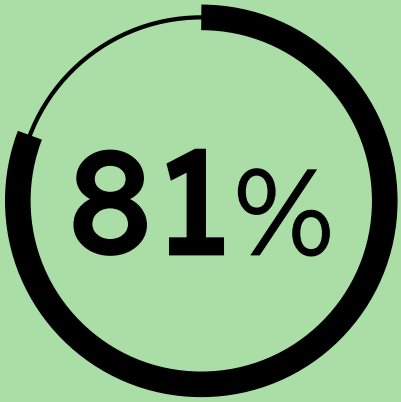
Recent government policy changes add to the problems facing UK social care. The phased withdrawal of international recruitment routes, new English language standards for overseas workers and changes introduced in the Employment Rights Act 2025 are reshaping the operating environment for care providers.

Some of these changes are welcome. But others create real risk, particularly if they're not accompanied by the government funding and guidance that care providers need.

The old way of working is no longer enough

It would be wrong to suggest that care providers have been standing still. **Across the nation, dedicated employers are working hard to improve conditions, invest in people and maintain quality care under genuine and sustained financial pressure.** That effort deserves recognition and any honest assessment of the sector must start from a place of respect for those who are trying.

But good intentions, however sincere, are not sufficient on their own. The challenges outlined in this report cannot be resolved by providers alone. Solutions require system-wide change.



Fall in overseas care worker visa approvals in 2025 compared to 2024.

Source: Community Care – Dec 2025

Continuing with the current approach and hoping that incremental progress will close the gap is not a strategy, it's just a delay.

The question, then, is not whether social care needs reform. It's what kind of reform and whether the ambition behind it can genuinely match the scale of the challenge.

Brook Street believes it can. But it will require commitment, coordination and investment from government, providers and workforce bodies working together – not in isolation.

IDENTITY SHIFT – SOCIAL CARE'S BRAND NEEDS A RESET.

When people think about careers in social care, the images that come to mind are often ones of low pay, tough working conditions and limited progression.

In many instances, these associations are wrong. But unfortunately, public perceptions shape behaviour, and in a competitive labour market, they also impact recruitment. New recruits, especially young recruits, are often reluctant to enter an industry where negative connotations are high.

Weak career prospects discourage younger workers from a role in social care

Only 8% of care workers are under 25 years old.

Source: Kings Fund 2024

Skills for Care's workforce strategy is explicit on this point: Making social care a "valued and worthwhile career" requires improvements not just in culture and training, but in **how the sector is perceived externally**.

This means:

- **Addressing public misconceptions**
- **Building a coherent employer brand**
- **Constructing a national narrative around social care's economic and social value.**

Industry perspective:

"Health and social care is still too often viewed as low-skilled work, when in reality it requires high levels of judgement, accountability and professional responsibility. Care colleagues are managing risk, safeguarding vulnerable people, administering medication and making complex decisions every day. If we want to attract and retain talented people, we need to recognise care and support as the highly skilled, rewarding profession that it is."

Amy Laurie, Executive Director of Strategy, Hightown Housing Association

Are the public's negative perceptions of care work accurate or fake news?

While experiences vary across providers, regions and diverse types of care, the data often supports the general public's negative perceptions:

Perception:

"Younger workers are put off and quick to leave the sector"

TRUE

The turnover rate for care workers under 25 is 44.6%, compared to 25% for those with +20 years' experience

Source: UK Gov

Perception:

"The emotional toll is heavy"

TRUE

Care workers are often exposed to emotional exhaustion and a sense of vicarious traumatisation, where the worker experiences their client's trauma as their own

Source: Frontiers

Perception:

"It's low status work"

TRUE

Public views on social care are persistently more negative than those on the broader NHS

Source: Wileys

Perception:

“The pay is poor”

TRUE

Pay progression in social care is almost non-existent. A worker with five years’ experience will typically earn just 7p more per hour than when they started

Source: King’s Fund

Perception:

“There’s no satisfaction in care work”

FALSE

Care workers’ rates of personal accomplishment are higher than those of other health and social care professionals

Source: SCIE

Perception:

“Care work offers no career prospects”

FALSE

In January 2025, the government announced new investments and an expansion of the national career structure for care staff

Source: UK local gov

THE CASE FOR A NATIONAL REBRAND

Other public-facing professions – such as teaching, nursing and policing – benefit from **national campaigns** that communicate **purpose, career opportunity** and **social worth.** Social care has no equivalent. Employer branding is fragmented, driven by individual providers with limited budgets rather than a coordinated, sector-wide effort. The result is a vacuum, filled by the default perception of care as low-status, physically demanding and poorly rewarded employment.

This narrative must be challenged. Defending social care as valuable work, with strong career prospects, fair pay and positive working conditions, is essential.

Brook Street's position is clear: A coordinated, **government-backed** rebrand of social care is not a luxury, it's a prerequisite for meaningful domestic recruitment growth.

We believe the rebrand of social care should be built on five pillars:

1

PURPOSE AND SOCIAL VALUE.

Social care enables independence, preserves dignity and supports community wellbeing. This contribution – economic and human – needs to be visible and consistently communicated.

2

PROFESSIONAL IDENTITY.

Care work is skilled work. The sector encompasses specialist roles that support individuals from birth to end-of-life care, whether that's through complex needs, special educational needs & disability, or supported living & community care. Messaging must reflect this breadth and depth.

3

CAREER VISIBILITY.

The public should understand that social care offers genuine progression; from frontline care worker to team leader, to registered manager, to advanced specialist or executive leadership.

4

MODERN EMPLOYMENT STANDARDS.

Social care must be associated with fair pay, flexible working, digital tools and protected conditions – the hallmarks of a modern, professional workplace.

5

INCLUSIVE AND SPECIALIST CARE.

Social care's reach extends far beyond older adult care. Children's and SEND services, mental health support, housing and hostel provision, and community-based care each represent distinct and vital disciplines. A credible rebrand must reflect this full spectrum, celebrating the diversity of the workforce and the range of people that it serves.

This is not about marketing spin. It's about building a truthful, sustained national narrative that reflects what social care actually is, and what it could become with the correct investment and political will.

While recently announced reform plans have rightly focused on structures, funding and workforce development, **changing how social care is perceived remains equally important if the sector is to attract the next generation of talent**.

Industry perspective:

"A new narrative will only be credible if it is accompanied by genuine opportunities for growth, innovation and influence. If we want to professionalise social care, we need to position it as a sector where talented people can solve complex societal challenges, lead innovation and shape the future of care."

Eve Mitchell, Chief Operating Officer, Somerset Care

PAY CONDITIONS AND THE FAIR PAY AGREEMENT.

The introduction of the Adult Social Care Negotiating Body and the Fair Pay Agreement (FPA) represent the most significant structural reforms to the care sector in a generation. The ambition is correct and necessary to establish sector-wide minimum standards that address low pay, improve job security and reduce employee churn that can undermine care quality.

Impact assessments from The Health Foundation and others indicate that Fair Pay Agreements could meaningfully improve recruitment and retention, creating a more stable baseline across the sector. For workers on the lowest pay bands, (and in social care, that covers almost half the UK workforce), the FPA could be genuinely transformative.

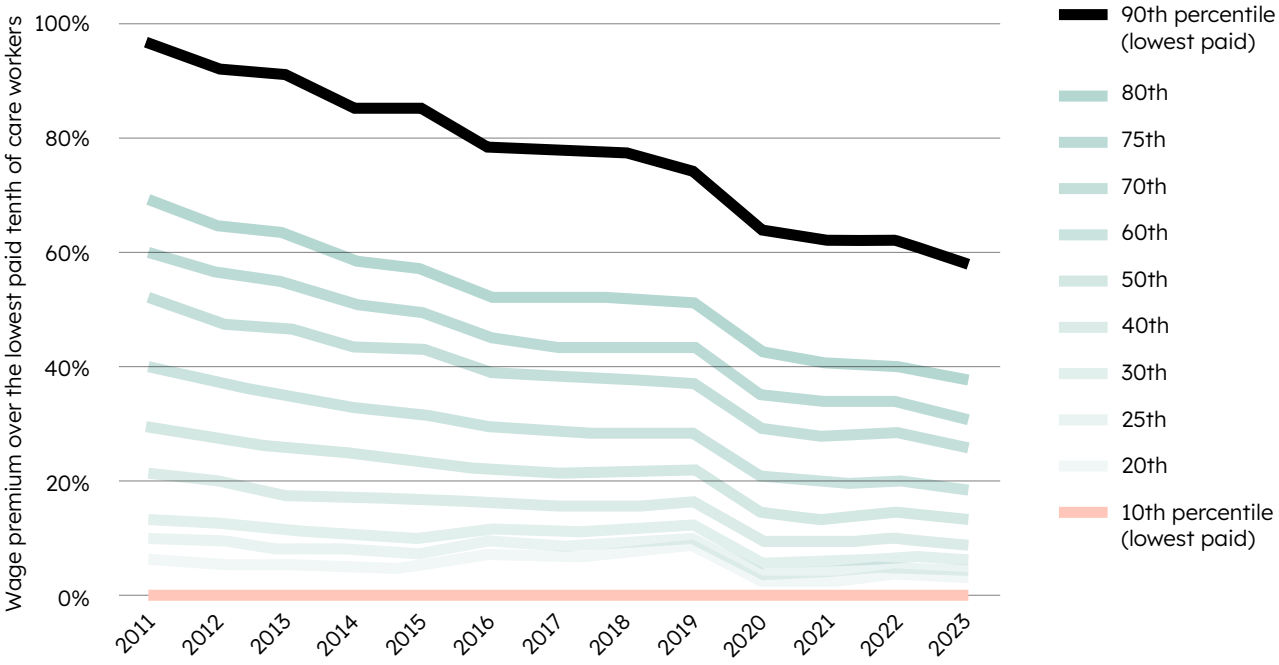
It is important to note that the FPA will not affect all care workers equally. Its reach and impact will vary across the workforce and implementation must be carefully sequenced to avoid placing unsustainable pressure on providers.

Rising pay, but shrinking differentials

Social care's pay structure is already very flat. According to data from December 2024, the **experience pay gap** between new and seasoned adult care workers in England, (5+ years), sits at just 4p per hour, down from 26-37p in 2017. This hurts any incentive for new workers to step up, take on more responsibility or stay for the long run.

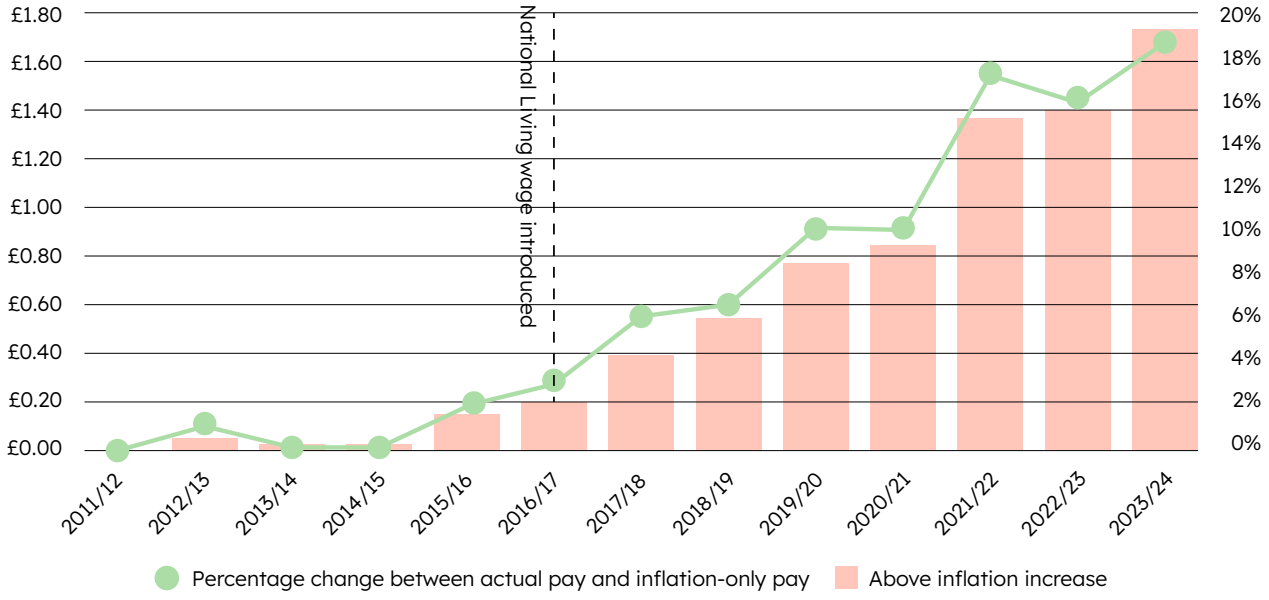
The Fair Pay Agreement promises to tackle churn and stabilise teams. **However, if it only pushes up the entry-level rate without building meaningful differentials across roles and experience, it'll make wage compression worse, not better**. To fix both the recruitment and retention problems, change must go beyond a minimum rate and mandate a **banded pay structure** – as per the NHS – that actually rewards career progression.

Only the top percentile of social care employees have maintained their pay differential since 2011.



Care worker pay has increased by more than inflation nearly every year since the introduction of National Living Wage

Difference between actual median pay and 2011/12 median pay adjusted for inflation each year



Source: Skills for Care 2023/24

The need for government support

Brook Street supports the principle of the FPA, while recognising that its success depends entirely on how it is funded and implemented. A pay uplift that is not matched by government funding simply transfers cost to providers, many of whom are already operating on razor-thin margins. The outcome would not be a more stable workforce; it would be service reductions and provider exits.

Our call is straightforward: **The FPA must be fully government-funded,** and it must be designed with career progression in mind. Pay increases should reflect the skills, specialisms and leadership responsibilities that workers take on over time. The FPA is an **opportunity** to make role distinction real and visible.

Industry perspective:

"As the Prime Minister has recently spoken about, a Fair Pay Agreement for social care has the potential to transform recruitment and retention. But funding cannot be treated as a separate conversation. If providers are expected to deliver higher pay without sustainable funding arrangements, implementation risks becoming unworkable. Successful reform requires funding and workforce policy to move together."

Laura Rees, Executive Director of People, Mencap

THE EMPLOYMENT RIGHTS ACT:

Opportunity and risk.

The Employment Rights Act 2025 (ERA) introduces a package of significant reforms, many of which will directly impact the care sector.

However, the **implementation risks are real**. The sector relies heavily on flexibility and agility within the workforce to respond to fluctuating demand, and the proposed changes understandably will be a cause for concern for employers. Research by the Chartered Institute of Personnel and Development (CIPD) suggests that almost 80% of employers anticipate increased costs as a result of ERA reforms, and **almost a third** expect to reduce their permanent hiring intentions.

Brook Street calls for government-funded transition support, without restricting access flexibility that is essential to attracting and maintaining a successful workforce.

This means:

- Practical guidance on compliance
- Phased implementation where appropriate
- Alignment between ERA obligations and the workforce planning frameworks that providers already operate within.

If it is implemented well, the ERA could raise standards across social care. If it is enacted poorly, or without adequate support, the Act risks accelerating the very instability it is designed to address.

...say that because of new ERA employment rules, they will increase use of other atypical workers and self-employed contractors.

Source: CIPD – April 2025

Industry perspective:

"The Employment Rights Act presents real opportunities for worker protection, but it also creates significant operational challenges for care providers. Many organisations rely on flexible arrangements that work well for employees with caring responsibilities or other commitments. The success of these reforms will depend on implementation that protects workers while preserving flexibility where it benefits both staff and services."

Housing 21

INTERNATIONAL RECRUITMENT:

Managed withdrawal, unmanaged risk.

For several years, international recruitment has helped care providers manage the gap between domestic supply and rising demand for services.

This route is now effectively closed, as **new overseas hiring is prohibited** under revised immigration rules. Providers who relied on international workers must now navigate a workforce gap with no equivalent domestic pipeline to fill it.

The picture is made even more complex by the situation of **displaced workers** – those already in the UK on social care visas, whose employer-sponsored status lapses when their role ends.

A government initiative to fix this issue (the 'Displaced Worker Scheme') created regional hubs to match carers with new employers. But the scheme has been a near-total failure. Out of 28,621 carers who applied, only 941 (3.4%) were successfully placed in new jobs. Many were left in limbo, unable to work, unable to pay rent and at risk of removal.

Drop in new overseas workers in UK social care, 2023 to 2025.

Source: Skills for Care – Oct 2025

The language barrier

From January 2026, English language requirements for overseas workers will rise from CEFR B1 to CEFR B2 standard (equivalent to A-level), adding a further layer of difficulty for overseas workers and care providers seeking to manage the transition to a domestic workforce.

Industry perspective:

"The continued tightening of sponsorship rules and eligibility criteria is creating uncertainty for employers and overseas workers alike. In some cases, talented people already working in the sector have been unable to remain because roles no longer meet sponsorship requirements. Workforce planning becomes increasingly difficult when eligibility criteria continue to shift."

Emma Seamons, Head of People Operations, Via

ACTING ON A NEED.

It is Brook Street's position that a blanket prohibition on international recruitment, without a credible domestic alternative, is not sustainable.

We call for a review of current visa restrictions, with a view to establishing a controlled, ethically governed international care visa – aligned with the FPA to ensure that overseas workers receive equivalent protections.

This is not an argument for unlimited international recruitment. It is an argument for a pragmatic, principled approach to workforce supply that acknowledges the reality of the sector's needs.

The care sector faces a compounding workforce risk: Domestic recruitment is falling. International routes are closed. Overseas care workers already in the country must overcome tough obstacles to gain re-employment. It's a damaging combination that requires an urgent, structured response.

DIGITAL POVERTY:

The hidden risk of modernisation.

The Digital Care Hub and the House of Lords have both highlighted the disproportionate impact of digital exclusion on care workers. They indicate that the pace of digital change is outstripping capability, particularly at the frontline and middle management level, and especially around people management, performance conversations, data confidence and financial literacy.

But not everyone is starting from the same place. There is wide variation in digital maturity, alongside a strong appetite for shared frameworks and learning across the sector. Unfortunately, the workers most likely to be left behind are often those who are already the most marginalised: older employees, those on the lowest pay and those working in rural or poorly connected areas.

How demographics and inequality drive digital poverty in UK social care

Care workers are predominantly women, who face a 14–22% greater risk of digital poverty than men in the UK. At the same time, frontline care roles in England are more ethnically diverse – only 64% of direct care workers are White, compared to 82% of the population. Black and Asian individuals are overrepresented in these roles. Meanwhile, ethnic minority groups often face economic, trust, linguistic and access barriers that further heighten digital exclusion.

These layered factors mean the people providing our most essential care services are more likely to be digitally excluded.

Brook Street calls for three specific interventions:

1. **A government-subsidised device access programme** for frontline care workers who do not have reliable access to appropriate technology.
2. **Employer-funded connectivity allowances** to ensure that workers using personal devices for care purposes are not bearing that cost themselves.
3. **Digital skills training** embedded within national workforce pathways – not as an optional extra, but as a core component of induction and continuing professional development.

Digital inclusion is not a peripheral concern. As the Social Care Institute for Excellence (SCIE) has noted, it is central to workforce equity and care quality.

Industry perspective:

"Digital capability is becoming increasingly important across all levels of social care. The challenge is often just as significant for managers and leaders as it is for frontline colleagues. The focus should not simply be on introducing new technology, but on building confidence, capability and ensuring that digital transformation genuinely improves outcomes."

Simon Breeds, Assistant Director – Children & Families, Sheffield City Council

BUILDING A PROFESSION:

Career pathways and leadership development.

One of the most persistent barriers to domestic recruitment in social care is the absence of a clear and visible career structure. This is not because the roles do not exist, but because the pathways between them are often poorly defined, inconsistently funded and largely invisible to prospective entrants.

Skills for Care's workforce strategy identifies attracting and retaining talent, creating career pathways and developing capability as its core priorities.

Brook Street supports these ambitions and calls for them to be given **legislative and financial backing** that matches their stated importance.

Recent government commitments to strengthen career progression, training and integration between health and social care further reinforce the need for a workforce model that provides **visible pathways into specialist, management and leadership roles**. The challenge now is ensuring these ambitions are implemented consistently across the sector and supported by sustainable investment.

What does this mean in practice?

Build a nationally recognised career framework

The establishment of the Care Workforce Pathway in 2024 represents significant progress in creating defined role categories and associated skills and behavioural expectations. This framework provides a foundation, but crucially it needs to be significantly expanded, strengthened and better resourced. A nationally recognised career framework that encompasses the **whole sector** should include clear entry routes – including apprenticeships, fast-track graduate pathways and returner programmes – alongside defined specialisms that workers can move to as they develop experience and qualifications.

Those specialisms should span the full range of modern care – both adult and children's: dementia support, learning disability care, end-of-life practice, complex clinical support, home care management, housing & hostels, etc. Each should have defined qualification milestones, pay bands aligned to the FPA and visible progression into leadership roles.

The Care Workforce Pathway

The Pathway is a landmark step, but limitations remain:

- Applies only to the adult care sector, and England only
- Implementation remains uneven across providers and regions
- Does not address pay, funding or staffing models.

Industry perspective:

"Progression should not automatically mean moving into traditional management roles. In the drug & alcohol sector for example, many people enter the work because they have a strong commitment to client-facing practice. Progression into management can unintentionally take some of our most skilled practitioners away from direct work with end-users. As an alternative, strong senior practitioner routes can allow experienced professionals to develop specialist expertise, mentor others and improve service quality while remaining close to practice. These pathways provide recognition and progression without losing valuable frontline talent."

Rick Bradley, Head of Learning Delivery & Curriculum Development, Change Grow Live

Re-engineering leadership roles and accountability across adult and children's care

How leadership roles are structured – and where accountability and risk sit – is just as critical to retention and sustainability.

In many services, disproportionate responsibility continues to rest with the registered manager. Regulatory accountability, workforce management, operational delivery and quality assurance often converge in a single role, with limited structural support. This concentration of accountability places registered managers at heightened risk of stress, burnout and long-term sickness absence, contributing to high turnover and instability at service level.

Leadership capability matters as much as headcount. Financial literacy, digital confidence and data-led decision-making are becoming essential leadership skills in care.

To support leadership retention, roles need to be re-engineered so accountability and risk are more evenly distributed across management and senior leadership tiers. This includes clearer delegation of responsibilities, stronger middle management capacity, and senior leaders actively absorbing strategic and regulatory risk rather than defaulting it downwards. Such models are standard in other regulated sectors and are increasingly necessary in social care as complexity grows.

Advances in technology and digital systems can enable this shift. When used effectively, digital tools can provide shared visibility of compliance, performance and workforce data, reducing reliance on individual knowledge and enabling genuine delegation. This supports more sustainable leadership models, lowers administrative burden, and allows managers to focus on staff development, culture and quality of care.

Industry perspective:

"Leadership is fundamental to the quality, stability and sustainability of adult social care. Strong leaders create positive cultures, support workforce retention and improve outcomes for people who draw on care and support. As demand and complexity continue to grow, developing leadership capability at every level of the sector will be critical to building the next generation of social care leaders."

Sarah Gilbert, Head of Adult Social Care Workforce Strategy, Skills for Care

Training and qualification modernisation

Government has recently committed significant but time-limited training funding within the sector. However, access, continuity and sustainability of this investment remain real concerns.

The proportion of care workers holding a Level 2 qualification has fallen from **41% in 2024 to 38% in 2025**. This decline reflects both the cost of training and the structural disincentives that exist when qualification investment does not translate into improved pay or career prospects. It needs to be reversed.

Investment in training is expanding – unevenly

- CPD is not a universal right and remains discretionary for many staff
- Leadership training often comes after promotion, not before
- A new Level 5 Digital Leadership course has been launched, but cost caps restrict use.

Brook Street calls for a modernised national training framework aligned to the realities of contemporary care – digital skills, complex care needs, therapeutic approaches and recognised specialisms – alongside a parallel re-engineering of leadership roles and responsibilities. Induction standards should be universal and fully funded, and continuing professional development treated as a core employment right, not a discretionary benefit.

Leadership preparation must begin well before individuals take on management responsibilities, supported by clearer progression, stronger middle management capacity, and leadership models that distribute accountability and risk beyond the registered manager.

Industry perspective:

"Many outstanding care managers have developed their expertise through years of experience, but not always through extensive formal leadership development. As experienced leaders approach retirement, the sector faces a growing succession challenge. Building stronger leadership pipelines, identifying potential earlier and investing in the capabilities needed for leading the future workforce as people step into management roles will be critical to sustaining high-quality care over the next decade."

Julia Mixter, Founder, Humain Consulting Ltd

A ROADMAP FOR CHANGE:

Six calls to action.

The challenges facing social care are interconnected, and they require an interconnected response. Addressing pay must also address perception. Improving training must include improving leadership. Opening domestic recruitment also means investing in digital inclusion.

What is needed is a coordinated, fully funded programme of reform – backed by genuine political will and sustained for the long term.

The Government's commitment to a National Care Service and a stronger social care workforce provides an important foundation for reform. The recommendations below are intended to support delivery of those ambitions, **ensuring that workforce policy translates into sustainable change for employers, workers and the people who rely on care services**.

Industry perspective:

"The government has started the conversation on reforming social care policy, and it is crucial that recruiters who help supply the social care workforce are part of that policy debate. Employment businesses are central to increasing the number of carers in the system, which means better outcomes for service users. A partnership approach to tackling the workforce shortage in the sector is essential."

Shazia Ejaz, Director of Campaigns, Recruitment & Employment Confederation

Brook Street's calls to action:

1

A SECTOR-WIDE REBRANDING PROGRAMME

A government-led, industry-backed rebrand of social care – modelled on the recruitment campaigns that have helped stabilise the teaching and nursing workforces – is essential to reverse domestic recruitment decline. This should be sustained, properly funded and developed in partnership with employers and workers.

2

A FULLY FUNDED FAIR PAY AGREEMENT

The FPA should be backed by full government funding to deliver meaningful pay uplifts without placing unsustainable pressure on providers. Pay progression should be built into the framework from the outset, rewarding skills, specialisms and leadership rather than simply years of service.

3

A NATIONAL CAREER AND LEADERSHIP FRAMEWORK

The Care Workforce Pathway should be expanded into a fully articulated national career framework, covering both adult and children's care and spanning entry-level to advanced practice and executive leadership. It should include funded pathways, defined specialisms and a dedicated leadership development programme for current and aspiring registered managers.

4

A DIGITAL INCLUSION STRATEGY FOR THE WORKFORCE

Government-subsidised device access, employer-funded connectivity allowances and digital skills training embedded in national pathways should be introduced as a package. Digital inclusion must be treated as a workforce equity issue, not a technology procurement question. Investing in people – confidence, capability and behaviour – is just as important as investing in systems.

5

REGULATORY MODERNISATION

Management roles should be redesigned to better balance regulatory burden and allow managers to focus on leadership and care quality. Wider regulatory reform should simplify compliance requirements without compromising on standards, creating a system that is proportionate, clear and supportive of improvement. Above all, as we navigate sector changes and as workforce models, technology and recruitment practices evolve, the sector must continue to prioritise its duty of care and safeguarding responsibilities.

6

VISA AND IMMIGRATION STABILISATION

A controlled, ethically governed international care visa should be introduced, aligned with the FPA to ensure equivalent pay and conditions for all workers. The situation of displaced overseas workers already in the UK should be addressed as a matter of urgency, allowing skilled workers to transfer to new employers without losing their right to remain.

Industry perspective:

"Workforce pressures can never come at the expense of safeguarding. Policies and processes matter, but at the end of the day, governance starts and ends with people. We can give people the right tools, technology and procedures, but ultimately, we rely on their judgement, the decisions they make and the actions they take. As leaders, this means moving our attention beyond what is on paper to the culture that is lived in our organisations. It means creating and sustaining an environment where people feel empowered to exercise professional judgement, ask difficult questions and make the right decisions, even under pressure."

Marianna Krol, Recruitment Manager, Family Action

A SECTOR WORTH FIGHTING FOR.

Social care is not a problem to be managed. **It's a profession to be built.** The care workers who support someone through the final years of their life, the team leaders who keep services running under extraordinary pressure, the registered managers who hold everything together – they all deserve better than the status quo. And so do the people who depend on those services.

The reforms set out in this report may be ambitious, but they are achievable.

- Pay must improve.
- Identity must be rebuilt.
- Careers must become real, visible and worth choosing.
- Leadership must be developed, supported and properly rewarded.

Brook Street has worked with employers across the care sector for decades. We understand the pressures they face, the talent they're trying to find, and the potential that exists within a workforce that is too often overlooked. Our commitment is to be an active voice for reform, not just in this document, but also in the many conversations we have with clients, policymakers and sector partners.

A stronger social care is worth fighting for. This whitepaper is Brook Street's first contribution to the fight.

BROOK ST.
Social Care.

WHERE GREAT WORK COMES TOGETHER.

With decades of experience, Brook Street Social Care has become a trusted name in social care recruitment – not just because we know the system, but because we care deeply about the people in it. We match people with the right values, with the roles that need them – so vulnerable people get the support they deserve. It's about trust, understanding and getting it right every time.

Through our national network of specialist social care recruiters, we support both adult social care and children & young people's services, covering:

- Residential, Supported Living & Day Services
- Learning Disability & Autism
- Housing, Homelessness & Hostel Services
- Special Educational Needs & Disability (SEND)
- Mental Health (including CAMHS).

Our services:

- Temporary resourcing
- Permanent placements
- Temp-to-perm
- Managed services
- Master vendor.

BROOK ST.
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brookstreet.co.uk