Social Care Policy: Where are we now?

4th November 2026

Vic Rayner, CEO, National Care Forum

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Social care as a key priority for the Burnham government

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Take a moment to enjoy social care being a key priority in government policy……



A National Care Service.....

- **In the speech:** a National Care Service, operating on NHS principles: free at the point of use and “where everyone contributes and everyone is covered”.
- **The clarification:** free personal care, with individuals paying for accommodation (“bed and board”) costs.
- **The funding**: from savings under the adjusted Triple Lock; Baroness Casey to recommend how and when it is built up
- Reflections:
  - Initial focus on older people – the government refers us to the Casey Commission as where the options for supporting working-age disabled adult will be explored…
  - What does free personal care actually mean?
  - Will the sums add up?
  - How might it actually work?



What do we want from a National Care Service?

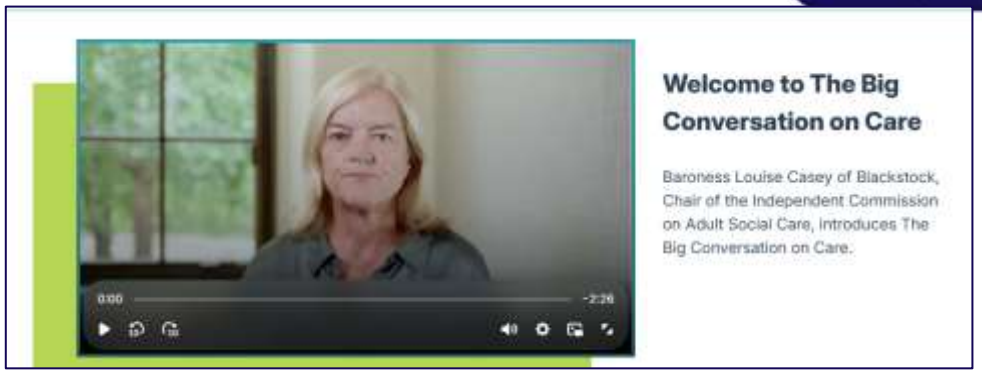
- Clear national standards
  - Better, more consistent, more sustainable commissioning across the board
  - A national contract? Some way to achieve consistency of commissioning
  - A clear framework for quality, transparency & outcomes
  - Workforce standards
  - Clear lines of accountability
- Integration that works for people and providers - stop arguing about the money!
- Fair funding - Meeting the full costs of care – remember the Fair Cost of Care exercise and learn from it!
- A fully funded Fair Pay Agreement
- Maximising the value of the public (and private) pound - £££££
- Upholding rights, fairness and choice for people
- Support for innovation and tech in the design of the service

Fundamentally – people at the heart of planning it



The Casey Commission Big Conversation

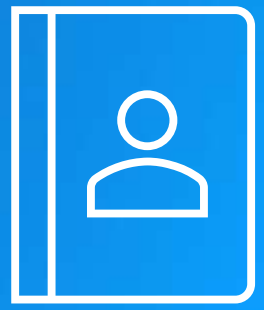
- A public conversation which asks: “when we are old or disabled, or have a serious illness, who should support us and how?”
- Aims:
  - renegotiate the social contract around social care, who can access it and who pays
  - Understand and articulate what a National Care Service could look like
- **‘Big Conversation’ online exercise now closed**
- **Over 6000 proposals, with over 350,000 votes cast**
- **Next phase will involve a Public Panel on Care:**
  - a representative group of people who will, over several months, consider the issues in more depth, hear evidence, discuss different perspectives & help explore common ground on the future of care
- **The final report has been brought forward to summer 2027.**



No 10 says Casey’s work should meet four core conditions:

- ✓ “The system must allow people to move seamlessly between hospitals, home care and community services.
- ✓ This service must be fully and sustainably funded.
- ✓ The service must start with prevention, supporting people to live independently for longer.
- ✓ Citizens’ needs must be at the heart of plans, removing budget battle lines between organisations and making sure local social, primary and community care works together effectively”.

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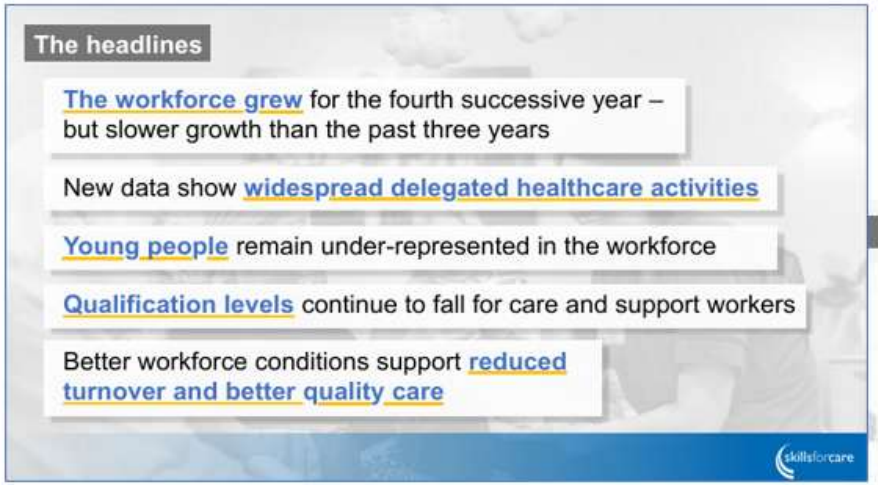


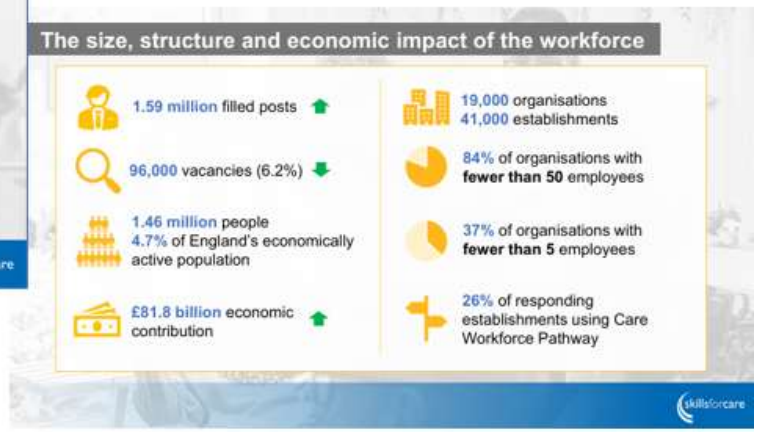
Workforce – a huge policy agenda for this government

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Skills for Care – Annual Report 2026

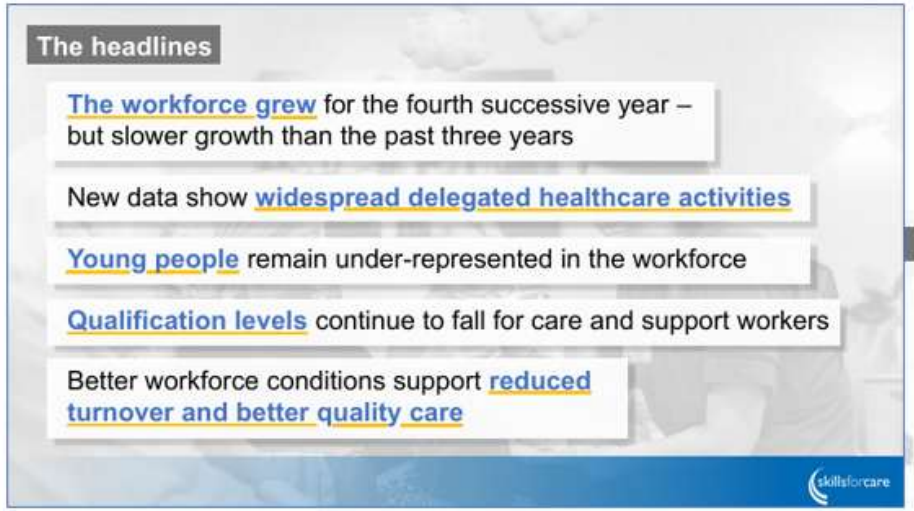
The State of the Adult Social Care Sector and Workforce in England 2026

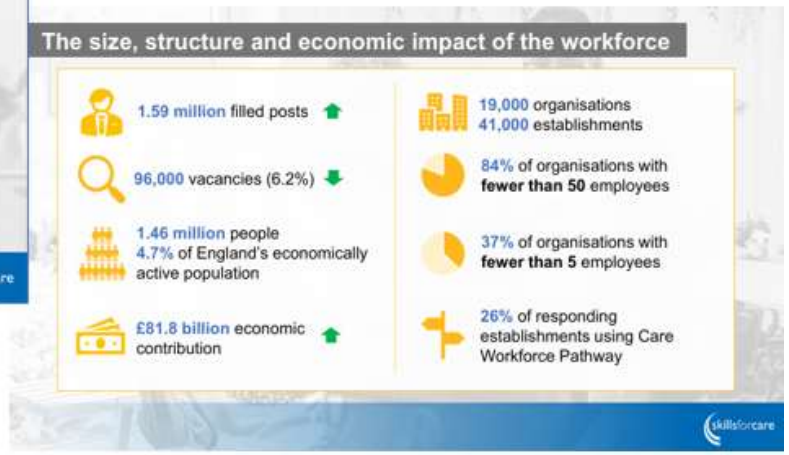




Skills for Care – Annual Report 2026

The State of the Adult Social Care Sector and Workforce in England 2026





Earned settlement key announcement –a welcome reversal of the previous unfairness

At a glance

- **Five-year pathway retained:** Care workers who entered or switched onto the route before publication of the Immigration White Paper in May 2025 can retain the existing five-year qualifying period, provided they meet the relevant requirements.
- **Settlement is not automatic:** Workers will need to meet the applicable £25,000 annual salary, sponsorship and employment requirements, alongside strengthened general settlement requirements.
- **English requirement rises:** The standard English-language requirement for settlement will increase from B1 to B2, subject to exemptions. The Life in the UK test will remain.
- **Further visa opportunity:** Eligible care workers unable to meet the requirements after five years will be able to apply for a further five-year Health and Care visa restricted to genuine work in the sector.
- **Sponsor-failure protection:** From 1 February 2027, workers affected by sponsor licence removal will have up to 120 days to secure a job offer and up to 180 days overall to resolve their position.



Home Office

A FAIRER PATHWAY TO SETTLEMENT

Government Response to the Consultation

November 2026



Published 2 November 2026 ■ NCF press releases

NCF welcomes Home Secretary Shabana Mahmood's announcement on earned settlement for care workers

The National Care Forum (NCF) – the leading association for not-for-profit social care has responded to today's statement in the House of Commons by Home Secretary, Shabana Mahmood on earned settlement for care workers.

The announcement, and subsequently published government response to the 'Fairer Pathway to Settlement' consultation, confirmed that care workers who entered on, or switched into, the health and care visa route before the publication of the Immigration White Paper in May 2025 will retain their existing five-year qualifying period as long as they meet the other visa settlement requirements. It was also announced that those who don't qualify after five years due to sponsor failure, exploitation and poor practice, may have an opportunity to apply for a further five-year visa to give them time to meet the settlement requirements.

FPA Recruitment Update

Employer side of the new Adult Social Care Negotiating Body (ASCNB)

NCF MEMBER UPDATE

19.10.2026

ASCNB

Applications are now open for adult social care employers who are looking to join the employer side of the new Adult Social Care Negotiating Body (ASCNB).

WHAT PROVIDERS NEED TO KNOW

The Care Provider Alliance are pleased to have received an invitation from the Secretary of State for Health and Social Care, the Rt Hon Yvette Cooper MP, to nominate employer representatives to the Body. This follows the CPA being asked to convene employer representation on the Negotiating Body. The Body will negotiate the first Fair Pay Agreement for adult social care, due to be introduced in 2028.

The Care Provider Alliance (CPA) is recruiting a 31-member Employer Reference Group, from which 11 individuals will be selected to serve as formal employer negotiating members on the ASCNB, alongside four reserve members. These representatives will form the employer voice in negotiations to develop the first Fair Pay Agreement for adult social care in England.

Applications are now open. We encourage chief executives, senior leaders and others with relevant experience to express an interest and appl. The closing date is 08 November 2026 23:59.

ASCNB

Who should apply?

The CPA is keen to ensure the employer voice reflects the diversity of the sector, including not-for-profit providers, charities, community organisations and specialist services.

We are looking for leaders with knowledge or experience of the operational delivery of adult social care and of industrial relations, particularly employment negotiations. Successful nominees will need sound judgement, the ability to analyse evidence, and a willingness to work constructively across interests. Experience of representing employer interests beyond a single organisation or setting will be especially valuable.

Health & Care Secretary's recent announcements

On 30 September Yvette Cooper announced:

- ✓ A new Champion for Unpaid Carers to 'make sure the voice of that hidden army is always heard in Government'
- ✓ Reminder of the commitment to deliver the first ever legally binding Fair Pay Agreement for care workers, with minimum standards of pay and conditions across every employer
- ✓ a proper workforce plan for social care, with proper career pathways, training and development
- ✓ Plans to offer thousands more academy places to help young jobseekers into good jobs in care.
- ✓ Plans to introduce the first ever national collective pension scheme for workers in the care sector.





Employment Rights Act: Timetable for change

01Oct26

- Time limit to bring a claim to the employment tribunal increases from 3 to 6 months

30Oct26

- **Trade Union Measures:**
  - Strengthening trade unions' **right of access (can be digital or physical & must be a qualifying TU)**
  - Implementing reforms to access and unfair practices during the recognition and derecognition process, including freezing the bargaining unit when an application is received
  - **New rights and protections for trade union representatives for recognised TUs**
  - Extending protections against detriments for taking industrial action
- **Harassment Measures:**
  - Requiring employers to take '**all reasonable steps' to prevent sexual harassment of their employees**
  - **Introducing an obligation on employers not to permit the harassment of their employees by third parties (this applies to any type of harassment)**

- **Reinstating the two-tier code** to match private sector employees the same T&Cs as employees transferred from the public sector – Due in October 2026 – However, no evidence of date or policy detail emerging
- **FPA regulations** – laid in parliament on 3rd November 2026

01 Jan 2027

- Reduction of unfair dismissal qualifying period to 6 months and uncapping compensatory awards
- Duty to inform workers of their right to join a trade union

Employment Rights Act: What's Coming

Mar2027	• Fire and rehire protections • Action plans on gender equality and supporting employees through the menopause (mandatory for public authorities)
Apr2027	• Action plans on gender equality and supporting employees through the menopause (mandatory for private and voluntary sector) • Bereavement leave including pregnancy loss • Collective redundancy – collective consultation threshold
Aug2027	• Electronic and workplace balloting for recognition and derecognition ballots
Sep2027	• Non-disclosure agreements (NDAs): regulations to prevent the misuse of NDAs in cases of workplace harassment or discrimination
Oct2027	• Enhanced dismissal protections for pregnant women and new mothers • Flexible working
Pending Date	• Introduction of the right to guaranteed hours and the right to reasonable notice and short notice payments

Note: Industrial relations framework no longer in timeline

Please encourage all colleagues to complete the Adult Social Care Workforce Survey 2026

Adult social care workforce survey: Have your say



People working across adult social care are being encouraged to take part in the Adult Social Care Workforce Survey and share their experiences of working in the sector.

The survey aims to build a clearer picture of the challenges and opportunities facing the adult social care workforce. It covers a range of topics that affect working life, including pay, workload, wellbeing, workplace culture, training and development, and the factors that influence people to stay in or leave adult social care.

0% completed

A A A

Make your voice heard. Help shape the future of adult social care.

Thank you for your interest in the third national **Adult Social Care Workforce Survey 2026**.

If you work in adult social care, your experiences can help shape understanding of what it's really like to work in the sector and inform future decisions about pay, training, career development and workforce support.

The survey takes around 20 minutes to complete and all responses are confidential.

Why take part?

Your views matter.

As the Government considers how to improve support for the adult social care workforce, your experiences can help inform future policy decisions.

More than 3,000 people took part in the survey last year. The findings are helping to inform policy, funding and support across adult social care. You can view the findings from Wave 1 and Wave 2.

Now we want to hear from even more people working across adult social care, in every role and setting.

The survey is being conducted by Ipsos in partnership with Skills for Care, University of Kent and King's College London, on behalf of the Department of Health and Social Care (DHSC).

What you'll be asked about.

- Your role and working life
- Wellbeing and support at work
- Training and development
- Career plans
- What makes people stay in or leave adult social care

If you hold more than one job, please answer only in relation to your work in adult social care. If you have more than one adult social care role, please think about the role in which you spend most of your time.

Your responses are confidential

Ipsos is an independent research organisation. Your responses will be treated confidentially and will not be shared with your employer or anyone at your workplace. DHSC will receive only anonymous results, and no analysis will be conducted at employer or organisation level. You can read the privacy notice here.

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Other hot topics in social care policy world

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Supported Housing Licensing - Consultation on Draft Regulations

In 2025, the government consulted on proposals to introduce a local authority-run supported housing licensing scheme.

The response to this consultation established that, to have a licence, supported housing providers should meet certain requirements

These include new National Supported Housing Standards which establish baseline requirements for the support, staffing and environment in supported housing.

Some types of supported housing will be exempt from the scheme.

The new consultation **launched recently** is about the draft regulations to bring the licensing scheme into force, and testing whether they will successfully deliver the proposed licensing scheme.

The regulations provide significantly more detail on how the scheme will be established and administered, and how licences will be awarded, varied (e.g. if a service manager changes) and revoked where necessary.

We are running a session for members to discuss the consultation and our response on **18th November, 11am-12pm.**

This consultation closes on 10th December.

Neighbourhood Health – are there opportunities if we can get in the conversation now? Some ideas....

- ✓ **Develop a clearer national framework with local flexibility – a national minimum, reduce variation, some local adaptation**
- ✓ **Move from signposting to active coordination – clearer pathways, less 'navigation' needed**
- ✓ **Invest in and build on existing community assets including social care providers & VCSE services; don't default to new NHS infrastructure**
- ✓ **Adopt a broader "Neighbourhoods of Care" approach -** see health as one outcome of strong communities rather than the sole objective.
- ✓ **Focus on prevention rather than crisis**
- ✓ **Give social care, housing and VCSE organisations equal status -** genuinely reflect a wider system rather than primarily NHS priorities.
- ✓ **Create funding models that support integration –stop arguing about the money**
- ✓ **Invest in social care infrastructure & create local hubs where health, care and community support can come together.**
- ✓ **Strengthen co-production and community voice -** Neighbourhood health should be informed by communities
- ✓ **Explore technology as an enabler -** practical mechanisms that could help support care closer to home.

Helpful summary of the October 2026 budget from The Kings Fund

The key announcements on health and social care

The NHS

- £190 million of new funding in 2026/27 to help with winter pressures for the NHS in England.
- An independent review by Mark Bailie on using AI to boost NHS productivity to report in early 2027.
- A Department for Culture, Media and Sport 'AI challenge prize' will award up to £2.5 million to incentivise UK-based innovators and businesses to develop AI solutions to a major challenge on the NHS frontline.
- Use of quantum technologies to cut NHS waiting lists through more effective health diagnostics.
- £100 million to accelerate the adoption of robotically assisted surgery across England.
- VAT removed on medicines donated free of charge, to help expand early access to innovative treatments.

Adult social care

- Introduce a taper in 2030/31 to replace the 'cliff edge' withdrawal of Carer's Allowance at the weekly earnings limit.
- Confirm adjustment of the triple lock from the next parliament to help fund personal care free at the point of use and a national care service in England.

Rough sleeping

- Combination of new funding and reprioritised existing Ministry of Housing, Communities and Local Government budgets to tackle rough sleeping and invest in a route off the streets across the rest of this parliament.

Wider economic decisions with impacts on health and care

- Support households with energy bills including through extending VAT cuts to electricity and a £100 council tax rebate.
- Increasing the National Living Wage and the National Minimum Wage rates by 3.9%.
- Increasing tax-free mileage rates, affecting people who use their own vehicles for work such as some care workers.
- £55 million of funding prioritised over two years to accelerate delivery of the Violence Against Women and Girls Strategy
- 'Good Growth' funds established with £285 million of transitional seed funding in 2027/28 and £1.5 billion of devolved loans, to give mayors and local leaders in England more flexibility to invest in local growth priorities.
- Introduce a new category of ringfenced spending at the spending review in 2027 –preventative department expenditure limit (PDEL) – to protect programmes that generate benefits over the longer term.

COVID Inquiry Module 6 Report – many learnings for systemic social care reform

UK Covid-19 Inquiry — Module 6: Care Sector

Recommendations

The recommendations in this Report must be acted upon now before the next pandemic strikes. In order to ensure that the UK's adult social care sector is better protected and equipped to respond to the next pandemic, the Inquiry recommends:

- **improving arrangements for pandemic planning to ensure clearer structures, roles and responsibilities**;
- **better planning for separating** (isolating) care home residents with potential infections, including those discharged from hospitals;
- **implementing financial support schemes** that are ready to be rolled out to support adult social care staff to self-isolate/limit staff movement;
- **publishing guidance on how limiting visiting will be decided upon in a future pandemic;**
- **maintaining inspection and oversight** by developing protocols to enable inspections to continue, including, where possible, on-site inspections;
- **improving collection of data about deaths of workers in the adult social care sector;**
- **establishing mandatory end-of-life training** for relevant health and social care workers; and
- **recognising and supporting the social care workforce** in England through the introduction of a voluntary register.

Module 6 has gathered more than 170 written statements and more than 100,000 pages of evidence.
NCF was one of 27 core participants in Module 6.

Published 20 October 2026 NCF press releases

NCF welcomes the publication of the Covid Inquiry Module 6 report identifying the adult social care sector as "undervalued and underrepresented"

The National Care Forum (NCF) – the leading association for not-for-profit social care welcomes the publication of the **Covid Inquiry Module 6 report** which focused on the impact of the pandemic on the care sector. This builds on the findings of **Module 2**, which starkly noted that the social care sector was thought about 'too little, too late'.

Vic Rayner OBE, CEO of NCF said: "We took part in the Inquiry primarily to honour the experiences of our members and the testimony of bereaved families. Our thoughts have remained with them throughout this process. We also wanted to make recommendations that would make a difference to the experience of both those who rely on care and support and those who provide it during any future pandemic.

"We are pleased to see that a number of the recommendations we made during our evidence sessions and in our **closing submission** as core participants in Module 6 of the Inquiry, have been included in the report. From reading the report it is evident that the Inquiry agrees with our assertion that during the pandemic the adult social care sector was overlooked, misunderstood and disadvantaged.

Independent Report into mental health conditions, ADHD and autism



Recommends 'a fundamental shift from a 'diagnosis-dependent' system to a 'needs-led plus diagnosis' system. The heated debate about whether there is too much diagnosis or too little risks reinforcing the centrality of diagnosis rather than need and timely access to support and treatment.
The government must address 2 failures at the same time:

1) People wait far too long for support, diagnosis and treatment.
2) Diagnosis has become the primary gateway to support that could and should be available earlier.

These failures sit alongside insufficient capacity for people with the most severe, enduring and complex needs.'

10 Recommendations:

1) Tackle the drivers of mental distress & ill health via an ambitious approach to prevention, early intervention & improving public mental health and wellbeing.
2) Move from a 'diagnosis-dependent' to a 'needs-led plus diagnosis' system
3) Commission & deliver integrated, digitally-enabled mental health & neurodevelopmental assessment and support
4) Close treatment gaps while protecting, strengthening & investing in specialist services to improve access & outcomes for those with the most severe, complex & enduring needs
5) Overhaul the commissioning, funding, oversight and regulation of mental health & neurodevelopmental services
6) Build capacity & capability across the multidisciplinary workforce to deliver more integrated mental health and neurodevelopmental support
7) Take an ambitious approach to scaling up safe digital & AI-enabled tools within a digitally enabled & integrated care pathway, while sharing &using data to improve quality of care, efficiency & productivity.
8) Improve data collection & evaluation for mental disorders, ADHD & autism to strengthen the evidence-base for policy development / implementation.
9) Commission a national public information & education campaign to help people better understand, support and accommodate neurodevelopmental conditions and manage their mental health
10) Publish a cross-government mental health strategy to implement these recommendations – action now (12 –24 months) & a 10 year plan.

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CQC and Regulation

For People Not Profit

Lots happening at the CQC .....

- ✓ **New CEO - Emily Miles – come from** the Department of Environment, Food and Rural Affairs **- joined 19 October**
- ✓ **Rabbi Baroness Neuberger DBE new Chair of the CQC** & started 1 October
- ✓ Next steps in the Dementia Strategy: Developing new statutory guidance on what good dementia care looks like – get involved
- ✓ **2026 State of Care Report published – Friday 23 October**









State of Care 2026

- **Quality remains uneven:** Well-led continues to be the weakest area and quality remains uneven depending on the type of care (care homes perform worse on average than homecare and supported living), and depending on location (only 59% of care homes in the North West region are good or outstanding.
- **The market is reshaping:** care homes are consolidating into fewer, larger services, while homecare is becoming increasingly fragmented.
- Care home property ownership is increasingly consolidating under institutional investors. The number of homes by the top 5 largest providers of care homes for older people ahs increased by 26% in 2 years; meaning Welltower now owns 9% of all CQC-registered 'beds'.
- **Financial sustainability is under strain:** local authorities overspent adult social care budgets by **£715m**, increasing pressure on commissioning and provider viability. Providers are increasingly seeking more self-funded people to secure their sustainability.
- **Workforce pressures persist:** vacancy and turnover rates are improving by very small margins, but international recruitment has fallen sharply and recruitment risks remain. Staffing is a key indicator of quality.
- **System capacity remains critical:** social care shortages and transfer delays each account for **12% of delayed hospital discharges**, reinforcing the need for stronger system working.

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Technology – Driving change

For People Not Profit

Some handy checklists – Cyber incident checklist from the Digital Care Hub and AI Risk Management Toolkit

Digital Care Hub News

New: Cyber incident communications checklist launched



When you're in the middle of a cyber incident, it can be hard to remember who to contact, what to say and which communication routes to use.

Our new communication checklists for home care and residential care services are designed to help providers prepare in advance. They should be completed, kept up to date and stored offline alongside your business continuity plan, so they are easy to access if systems are unavailable.

This checklist covers the practical steps that are easy to overlook until they are needed. They prompt providers to identify key roles, keep printed and offline copies of important contacts, agree back-up communication routes, prepare short holding statements and practise their response at least once a year. They also include prompts for the first few hours of an incident, stakeholder updates and post-incident review.

GOV·UK Menu

Home > Business and industry > Science and innovation > Artificial intelligence > AI Risk Management Toolkit

Department for Science, Innovation & Technology

Guidance

AI Risk Management Toolkit: guidance

Published 8 September 2026

Contents

Purpose of the toolkit
About AI risk assessment tools
Using these tools
AI risk identification
AI risk appetite
Quantifying AI risks
Quantifying risk likelihood
AI risks and treatment options
Additional resources
Appendix 1: Risk Identification Questions
Appendix 2: Risk Appetite Level Definition
Appendix 3: List of potential risk impacts
Appendix 4: Risk treatment suggestions

Print this page

Purpose of the toolkit

The Artificial Intelligence (AI) Risk Management Toolkit is intended to support anyone involved in the design, operation, procurement and delivery of products empowered by or enabled by AI. The toolkit will benefit multi-disciplinary project teams when navigating AI adoption, which may include data science, engineering, project delivery, IT, change management and communications professionals.

A clear understanding and justification of AI risks and treatment strategies is key to using AI responsibly and ethically. The scope of AI projects can be wide and may include:

- integrating commercial solutions
- driving adoption across wide user bases
- building models in-house
- supporting internal and external operations

The AI Risk Management Toolkit is intended as a starting point for teams looking to implement good risk management practices.

DHSC expectations around becoming a fully digitised care provider

- A collection of refreshed resources, guidance and information published by DHSC
- Lays out their expectation around all providers being 'fully digitised';
  - Using an assured solutions Digital Social Care Record
  - Meeting 'Standards Met' level on the Data Security and Protection Toolkit
- 'Using AI in Adult Social Care' - are you using AI safely and ethically in your organisation? A useful update and can be used to review your organisations use of AI and for staff training



GOV·UK

Home > Health and social care > Social care

Collection

Digitising adult social care

Guidance for organisations and individuals on how to understand and use digital technology effectively in adult social care settings.

From: Department of Health and Social Care

Published: 29 September 2026

Get emails about this page

Contents

— Contacts and further information

— Guidance

This collection brings together guidance, resources and information to support the digital transformation of adult social care. It's intended for:

- care providers
- local authorities
- integrated care systems
- other organisations involved in delivering and commissioning adult social care services

New DHSC telecare publications

A new suite of resources to support organisations involved in telecare commissioning, procurement and service delivery.

- The publications have been developed to support the adult social care sector's transition from analogue to digital telecare services and to help ensure services remain safe, resilient and reliable for people who depend on them.
- They set out technical and service requirements to help commissioners procure safe, resilient and reliable digital telecare services for:
  - alarm receiving centres
  - grouped living arrangements such as sheltered and supported housing schemes
  - personal alarms for people living in the community

The requirements cover:

- digital telecare standards and interoperability
- connectivity and resilience
- service management and supplier assurance
- cyber security and data protection
- access to operational and performance data



Supporting digitisation of Adult Social Care – check out NCF's Digital Learning Training programmes

Digital Leadership Programme

Lead digital change across your organisation

WHO IT IS FOR

Adult Social Care Managers, Senior Leaders and colleagues responsible for leading digital change and supporting their teams.

WHAT IT BUILDS

Confidence to make informed technology decisions, overcome adoption barriers and keep people at the centre of change.

CORE FOCUS

Digital basics, including safe and ethical use of AI in ASC • Being a digital leader Data & cyber security governance • Taking your workforce with you

NEXT COHORT

17th, 24th Nov, 1st and 8th Dec 20026

COST AND SUPPORT

£575 + VAT per person | £525 reimbursement available to eligible participants through LDSS

Care Technologist Programme

Could you be your organisation's first, or next Care Technologist?

WHO IT IS FOR

Care staff, managers, digital champions and anyone curious about how technology can improve people's lives.

WHAT IT BUILDS

Practical skills to explore care technology, involve people in decisions and choose solutions matched to the individual's preferences

CORE FOCUS

Person-led practice • The tech toolkit
Ethics, safety & accessibility • Leadership & impact

NEXT COHORT

20th, 27th Jan, 3rd, 10th and 17th Feb 2027

COST

£595 + VAT per person

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Adult Social Care Testbed



Funded by UK Government

LIVERPOOL CITY REGION
COMBINED AUTHORITY

METRO MAYOR
LIVERPOOL CITY REGION

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KEEP IN TOUCH!

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