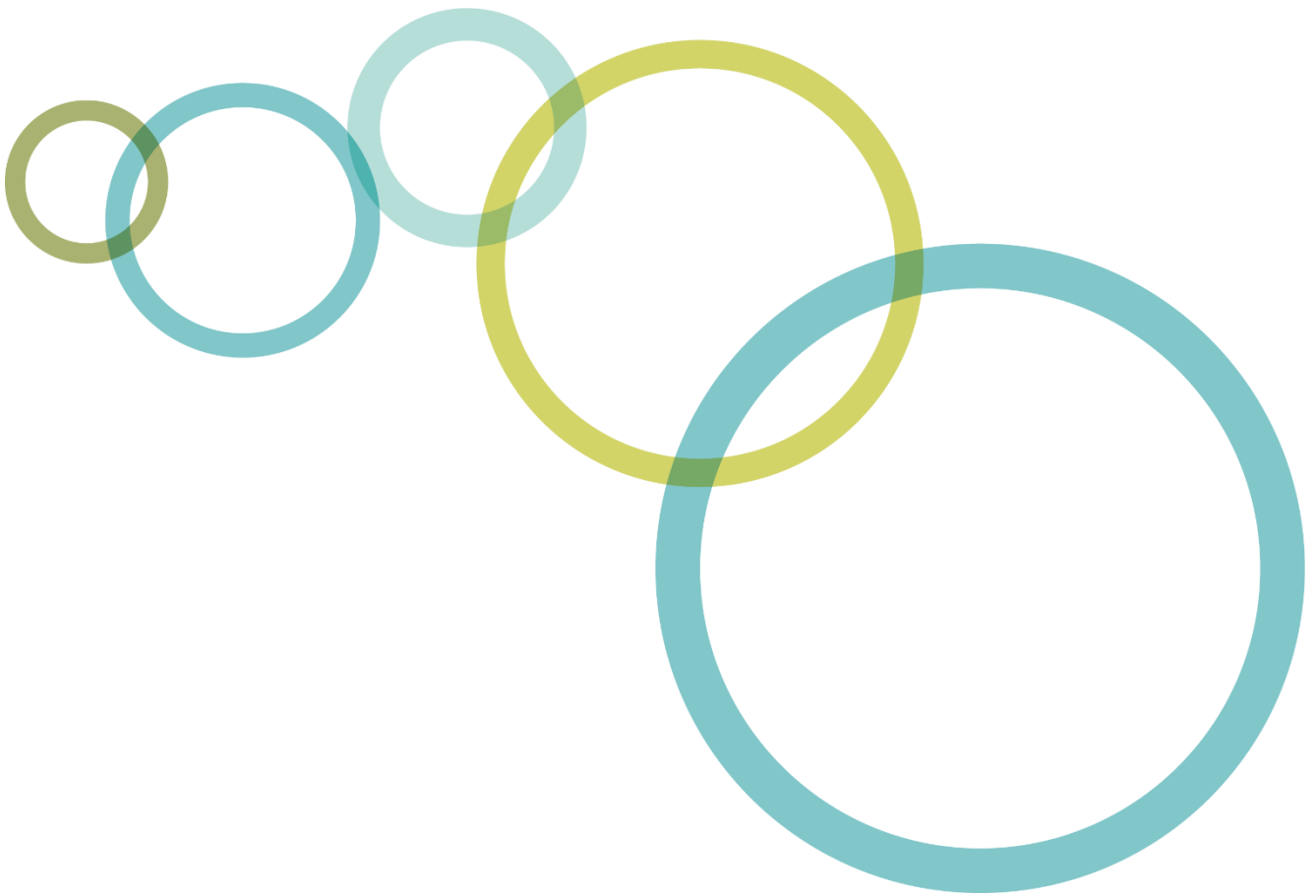


# Independent Sector Workforce Strategy



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# Introduction

This Workforce Strategy focuses on the workforce employed in the independent Adult Social Care sector in Hampshire. It begins with an analysis of the current state of the workforce, outlines the role of Hampshire County Council and finally provides clear pledges that the County endorses in order to positively influence the independent sector.

## Setting the scene

This document outlines how the County can influence the provider market through commissioning and procurement and by publishing market positioning statements and the market sustainability strategy.

The County works in close partnership with the independent provider market, which operates under the governance of national and statutory bodies such as the Care Quality Commission and employment legislation. This regulatory framework underpins efforts to attract, develop, retain, and transform the workforce, ensuring the delivery of high-quality care

## Local Government Reorganisation

At the time of drafting this strategy, the Hampshire region is undergoing a Local Government Reorganisation Priority Programme. Central Government is expected to determine the composition of the new unitary authorities in Spring 2026. While the overarching themes of this strategy are likely to remain relevant, it is anticipated that each newly formed unitary authority will undertake a review to ensure the strategy aligns with its specific geographic and organisational context.

Department of Health Social Care Consultation on the Adult Social Care Negotiating Body and Fair Pay Agreement consultation 2025 Consultation for the above opened on 30 September 2025 and closes on 16 January 2026

<https://www.local.gov.uk/our-support/workforce-and-hr-support/employment-relations/consultations-employment-law-reforms/dhsc>.

Fair Pay Agreements (FPA) will legally set minimum pay and conditions for adult social care workers through collective bargaining between employer and worker representatives. This marks a significant shift in how pay and terms are determined, requiring strategic alignment across workforce planning and HR policies.

## Timeline and Implementation Phases

The FPA will be phased in over several years, with full implementation expected by April 2028.

Workforce strategies must account for transitional planning, including engagement, negotiation readiness, and compliance mechanisms.

## Funding and Financial Planning

The government will provide funding, including £500 million earmarked for pay improvements, within a defined cost envelope.

Councils will need to ensure workforce strategies are financially sustainable and align with the funding parameters set by the ASC Negotiating Body.

### Sector-Wide Consultation and Engagement

The consultation process is open to a wide range of stakeholders, including care workers, providers, commissioners, and local authorities. Workforce strategies should incorporate feedback mechanisms and ensure representation in the consultation to influence outcomes.

### Compliance, Enforcement, and Organisational Readiness

FPA's will include compliance and enforcement provisions, requiring

councils and providers to adapt HR systems and monitoring processes. Strategies must prepare for organisational change, including training, communication, and support for managers and staff.

Hampshire Workforce Strategy Pledges  
The pledges for this strategy are defined under each of the three core themes, aligned with the national Workforce Strategy for Adult Social Care in England (June 2024), developed by Skills for Care in collaboration with the Adult Social Care Sector.

The three themes that this strategy will focus on are:

- **Attract and retain** - We must attract new people into social care and keep them. Ensuring that Adult Social Care is competitive in the local labour market and international recruitment. Need to ensure the top three retention factors, role quality, learning and development and organisational culture and leadership are valued and actioned.

- **Train** - Everyone in social care should have the chance to develop, learn and grow in their role. Learning and development supports good quality social care and retention.

- **Transform** - Better workforce planning to work towards matching the labour market with the changing and growing needs of the local population.

As part of the delivery of this strategy we use evidence from a variety of trusted sources, such as Skills for Care Adult Social Care Workforce Data Set, Digital Adult Social Care Activity Finance and Mid-Year Population Estimates ONS.

The success of implementing this strategy is heavily reliant on strategic leaders, commissioners, providers,

partnerships and workforce leads across the health and social care system working together. The strategy has agreed pledges that will contribute towards the external workforce for Adult Social Care. It is however, recognised that there is significant dependency and overlap across many of the themes meaning

activity will often support delivery of more than one objective.

The pledges (Appendix 1) for the strategy clearly highlight where we know resources are in place and importantly where there is a dependency for system support to achieve these. It is essential that we maximise and influence the scope and value of existing activity, rather than setting up a new and overly complex infrastructure to deliver this workforce programme and as the detailed implementation planning is progressed, we will need the commitment of system partners to identify and commit resources to make this happen. We acknowledge that this strategy is a dynamic and evolving document. As we continue to collaborate with our partners over the coming years, we will remain responsive to external factors, such as government consultations and shifting economic conditions, to ensure continuous improvement and to maintain a resilient, future-ready workforce.

The role of Hampshire County Council Adults Health and care in the workforce

This workforce strategy seeks to understand the current and future

workforce demand in the independent sector within the Adults Health and Care provider market and to link this requirement with other key strategic documents and plan of works taking place across Hampshire, e.g.

Hampshire 2050 Vision for the Future [Theme three - evidence | About the Council | Hampshire County Council](#) .

The County Council will ensure that procurement and commissioning of services are aligned to all national and county strategies. This includes Equality and Diversity Strategy, Modern Slavery and also Social Value priorities.

The County Council will continue to influence the external workforce, together with promoting social care as a career, developing current leaders in social care through robust contracts which ensure that providers invest in their staff across Hampshire; as well as providing networking opportunities for staff across the Health and Social Care system. All HCC run Impact training is available for all provider organisations whether commissioned by the County Council or not [Impact adult care training | Health and social care | Hampshire County Council](#).

# 1 Attract and Retain

We must attract new people into social care and keep them. Ensuring that Adult Social Care roles are competitive in the local labour market.

1a What the evidence states:

The County Council pay a higher-than-average cost of care, compared to close neighbouring authorities, for example, Residential costs 2023/24 £1,222.16 compared to Isle of Wight £957.88, Portsmouth £877.23 and Southampton £1,149.29. However, Hampshire Social Care providers have a lower-than-average rate of pay across different job roles and care settings, see Table 1 in Appendix 1. There could be several reasons for this, including variations in fixed costs and different employment markets, but lower than average rates of pay may contribute to lower levels of attraction and retention by carers.

The County Council has established Communities of Practice to listen to what providers require to deliver the right care in the right place. An example of this has been to offer training to providers on how to work with residents with more complex needs in Extra Care schemes.

Pledges to address this trend:

1a.1 The County Council will continue to work with the providers in the market to ensure the cost of care is sustainable for both the residents and for the care organisations. Communities of Practice have been established across the sectors to listen to concerns, offer training and

to share good practice across organisations.

1a.2 Stabilise average cost of care through the mechanisms of commissioned frameworks, for example the Care Home Framework.

1b What the evidence states:

The turnover rate in the health and social care sector is higher than most other sectors across the UK, with the exception of retail, agriculture and accommodation / food sectors (Table 2 - [Benchmarking employee turnover: What are the latest trends and insights? | CIPD](#)).

Turnover amongst Hampshire's closest neighbouring authorities is roughly in line with national averages, however Hampshire has a significantly higher turnover rate across the different care types. This is not something specific to a single care type however, as Hampshire shows high turnover across Care Homes, domiciliary care and other CQC-registered services.

Through this key priority, there is a need to ensure that the role of social care is one of quality, that staff have the opportunity to learn and develop and that organisational culture and leadership are valued and actioned.

Through the County Council's commissioning processes, we aim to ensure that providers report on their recruitment and retention performance during contract

monitoring meetings to ensure collaborative working with the aim of increasing retention rates. This will include reporting on areas such as training, any staff working in excess of the Working Time Directive and overseas recruitment. Commissioning staff will also discuss what providers are doing to recruit and retain staff. Where best practice is identified, providers are encouraged to share their knowledge through Communities of Practice events. In addition, as part of contractual arrangements, providers are required to have in place staff structures that include adequate supervision of staff and enable progression pathways with the aim of retaining staff within services.

At the County Council we work alongside and listen to the providers about what would be useful for them to retain staff, and we work actively with Hampshire Care Association,

seeking views and an understanding of the provider market.

An example of good practice is the work within Public Health around sleep and mental wellbeing. We know that many workers work shift patterns in the care environment, often affecting individuals sleep pattern and quality and in turn this can affect their mental wellbeing. Through the Provider newsletters the Council has been able to highlight some of the actions that can be taken to improve sleep and mental health.

As a County Council, we are committed to ensuring that residents have genuine choice and control over who provides their care. This can be achieved through the effective use of Direct Payments. Through sharing good practice and initiatives from Skills for Care, for example we aim to maintain a strong and sustainable supply of a well-trained workforce to deliver high-quality care and support.

Pledges to address this trend:

1b.1 Sharing of good practice in terms of staff recruitment and training, through Communities of Practice with providers and partners.

1b.2 Through effective, timely and collaborative contract monitoring meetings, recruitment, retention and Equality and Diversity policies of providers will be reviewed to ensure compliance with the statutory requirements and relevant regulatory frameworks, as well as staff supervision frequency and training.

1b.3 Provider Newsletters are produced and shared with all providers signed up to sharing information on training, best practice and events.

1b.4 Sharing of new initiatives from Skills for Care, and other stakeholders with providers.

1b.5 Advertise Department of Health Social Care recruitment campaigns, for example, 'Make care your career' supports recruitment of new and quality care staff. [Work in Adult Social Care: Explore roles and find a job in your local area](#)

1b.6 Supporting sustainable markets, fair pay, sustainable pricing and strong financial management through our procurement, contracting and monitoring arrangements.

1b.7 Advertising Public Health Campaigns to providers through the Newsletter.

**1b.8 The County Council will publish a Direct Payments strategy in 2026 setting out our commitment to enabling residents to exercise choice and control over who provides their care.**



# 2 Train

Everyone in social care deserves the chance to develop, learn and grow in their role. Learning and development supports good quality social care and retention.

2a What the evidence states:

Hampshire is slightly below the local average in terms of the percentage of overall staff who hold a relevant social care qualification, however, not all jobs require a qualification. 66.8% of care workers in Hampshire have either completed or are undertaking a Care Certificate qualification.

To support organisations' staff to develop, learn and grow in their role, employers need to be fully aware of the national training requirements, which support good quality social care and staff retention. The County Council also support an Apprenticeship transfer levy scheme for both internal and external provider staff.

The County Council encourages providers to utilise the training opportunities on [Impact adult care training | Health and social care | Hampshire County Council](#). IMPACT is the dedicated learning and development team within the County Council, and is committed to delivering quality, up-to-date training tailored for the adult social care market. The programs are designed to enhance the skills and knowledge of care

professionals, ensuring they are well-equipped to provide exceptional care. By staying current with industry standards and best practices, Impact empowers

individuals and organisations to achieve excellence in adult social care.

We will publicise national guidance/publications through our communication channels, including the Newsletter, for example:

- a) [Care workforce pathway for Adult Social Care - GOV.UK](#) published by Department of Health & Social Care (DHSC) in January 2024, an initiative co-developed with the sector and people who draw on care and support. This is the first phase of setting out a universal pathway of knowledge, skills, values and behaviours needed to work in Adult Social Care, with a clear career structure.

The first phase addresses direct care and support roles, suggesting learning opportunities aligned with the knowledge and skills for each role, to support portable portfolios of skills and developing the expertise needed for career progression.

Future phases of the pathway will cover the entire Adult Social Care workforce, the links between health and social care, case studies and resources, and will be available to access via a digital product in due course.

- b) [Statutory and mandatory training guide August 2024](#) - Skills for Care have recently published guidance on what constitutes statutory and mandatory training for adult social care employers. The guidance also

covers checking competency, examples of additional training based on the needs of the service and people who draw on care and support, and anything required in contracts by commissioners. In settings which are regulated by the Care Quality Commission, it continues to be the provider's legal responsibility to identify and provide the appropriate additional training.

- c) [Learning and Development Support Scheme for the Adult Social Care workforce: a guide for employers - GOV.UK](#) (DHSC) – there is funding available under this scheme to support learning and development of 'non-regulated care staff'. It is worth noting that this training is not restrict workers who have been in the UK for a minimum period.
- d) The Hampshire Apprenticeship transfer levy scheme, offers both health care support worker apprenticeships as well as Adult Care workers and lead practitioners in Adult Care.

When commissioning contracts for care, all organisations will ensure training requirements are included in all specifications and tenders.

Publicise potential training providers through the Newsletter, for example:

- a) Skills for Care also offer an [Quality Assured Care Learning Service](#) funded by DHSC with the ambition that over time it will quality assure all training and development identified or funded through the Learning and Development Support Scheme.
- b) Examples of learning & development providers:
- [NHS England eLearning for Healthcare \(elfh\) Hub](#) provides a wide range of free online learning.
  - [Social Care Institute for Excellence](#) provides eLearning, online courses and bespoke training offers, generally at cost, across topics such as safeguarding, mental capacity, dementia and the Care Certificate
  - [Hampshire Safeguarding Adults Board](#) has a substantial training offer, as do nearby boards in the [Isle of Wight](#), [Upcoming Training - Portsmouth Safeguarding Adults Board](#) and [Southampton](#)
  - [Careers advice - job profiles, information and resources | National Careers Service](#) provides information on where to find free online learning amongst other training.

Pledges to address this trend:

2a.1 Publicise national guidance for employers on relevant training through Provider Newsletters and through IMPACT [Impact adult care training | Health and social care | Hampshire County Council](#).

2a.2 Set clear expectations of training requirements through the Procurement processes and contract monitoring meetings, for example and where relevant, training of life skills, Least Restrictive Practice and understanding of Trauma Informed Care.

2a.3 Publicise potential training courses through Provider Newsletters.

2a.4 Sharing of best practice and other potential training opportunities/ providers through peer support at Communities of Practice events.

2a.5 Working closely with the Hampshire Care Association to identify any trends in training requirements and ability for these to be met.

2a.6 Promote the Hampshire Adult Social Care Apprenticeship Levy.



# 3 Transform

The County Council will ensure it keeps up to date with any central Governmental information and campaigns and ensure it is kept abreast of any trends through utilisation of available data. Workforce planning for care organisations is crucial to ensuring the workforce works towards matching the labour market, with the changing and growing needs of the local population.

3a What the evidence states:

98.1% of the population of Hampshire are White British, however, as Table 7 below states 30% of the adult care workforce are individuals from Black, Asian or Minority Ethnic (BAME) backgrounds.

There is also a largely female workforce across the area, with 78.8% of staff across all roles and care types reporting themselves as female. The average age of someone working in the sector is 43 years old, 41 for care workers, with only 9.4% of the workforce aged under 25, compared to 24% over 55.

National policy has shaped the current strength of the market, with overseas recruitment bringing additional capacity into the Hampshire care market. This has created some risks too and the County Council continues to be informed of providers being investigated by the Home Office for not complying with their overseas sponsorship licences. The County Council have been supporting providers with advice and guidance to manage the risks and potential

disruption caused by suspensions and revocation.

The County Council has a clear process for supporting providers impacted by UKVI suspensions and revocations that puts the safety of individuals drawing on care, and the safety of staff first. Through this process, we have assisted providers with transferring individuals' employment to alternative providers, helping to support the wider workforce and ensure continuity of care. We work closely with partners across the region, including neighbouring Local Authorities, associations, statutory partners, the Home Office and the Police modern slavery unit. Through the work being delivered by SESCA and HCA, there is now a formalised process for supporting any displaced workforce impacted by UKVI revocations, in line with recent changes in overseas recruitment regulations.

In July 2025 there was a halting of overseas recruitment. However, over time, as those who leave the sector/country can't be replaced there will be a reduction in capacity, making it even more important to find ways to grow the workforce and to innovate to find alternative ways to deliver care.

Through our Contract Relationship Managers (CRMs), we provide a point of contact for care providers. By building and maintaining relationships with providers, CRMs are able to discuss in a confidential way a provider's market and

staffing strategies, sharing information on the state of the market to support their strategic decision making. CRMs support the market by providing guidance on the level of need and demand being seen across the county, supporting providers to navigate themselves through, sometimes challenging, UKVI arrangements, and emphasise the importance of staffing, and staff training.

The County Council work alongside providers and organisations that represent providers to share insights and data on current and future demands on services and locations. This will help the market to understand future workforce needs and requirements. This partnership working is also extended to health partners, working with them to support providers to understand changing needs and the increased complexity of care. As the 10 year NHS plan continues to evolve, there will be further opportunities for closer working/integration with health to develop and shape the workforce needs

Pledges to address this trend:

3a.1 The County Council will continue to work effectively between quality, commissioning, operational teams and providers to understand market feedback and ensure continuity and safe delivery of services to individuals.

3a.2 The County Council will continue to support providers with displaced workforce impacted by UKVI revocations through effective partnerships with Hampshire Care Association and SESCA.

3a.3 The County Council will share insights and data to providers and organisations representing providers in order to better understand and plan for the current and future demands for the workforce.

to support with neighbourhood working and delegated healthcare tasks.

The County Council is considered a leading authority when it comes to promoting Technology Enabled Care, and its partnership with Argenti which has been established for 13 years is supporting over 15,000 Hampshire residents to live independently at home. The service continues to evolve and develop innovative solutions to support people in four key areas 1) Alert for help (24 x7) 2) Assurance for carers and families 3) Avert of delay a crisis and 4) Advance skills and promote independence. We recognise that increased accessibility to these services for Hampshire providers could offer alternative or supplementary support to the residents in their care and increase the capacity of their workforce. We have begun to promote access to the Argenti services with the Hampshire care market, and this is an area that will develop further.

3a.4 The County Council will work collaboratively with health partners and the provider market, to understand the implications of health reform, upon neighbourhood working and delegated healthcare tasks and to work together to identify what is needed to support the workforce.

3a.5 The County Council will promote awareness and accessibility to its digital solutions with the wider market, to support the take up of solutions which promote independence.



# Appendix 1 – Evidence

Table 1 – Shows the average hourly wage and average costs across the social care workforce in the South East Region

| Area                             | All Service Types         |               |               |                    | All Job Roles    |                        |                           |                     | Average Costs 2023-24 |                  |                |
|----------------------------------|---------------------------|---------------|---------------|--------------------|------------------|------------------------|---------------------------|---------------------|-----------------------|------------------|----------------|
|                                  | Average Hourly Wage (Ind) | Care Worker   | Manager       | Registered Manager | Registered Nurse | Care Home with Nursing | Care Home Without Nursing | CQC non-residential | Res Costs             | Nursing Costs    | Dom Care Costs |
| Bournemouth Christchurch & Poole | £12.22                    | £11.45        | £16.51        | £19.40             | £20.90           | £12.65                 | £11.81                    | £12.19              | £1,341.37             | £1,322.77        | £23.90         |
| Bracknell Forest                 | £12.39                    | £11.62        | £17.32        | £20.73             | £21.17           | £12.59                 | £12.27                    | £12.17              | £1,398.24             | £1,307.84        | £20.19         |
| Dorset                           | £12.05                    | £11.35        | £16.27        | £19.08             | £21.87           | £12.54                 | £11.92                    | £11.90              | £1,391.80             | £1,094.68        | £26.39         |
| <b>Hampshire</b>                 | <b>£12.27</b>             | <b>£11.44</b> | <b>£16.58</b> | <b>£19.49</b>      | <b>£21.09</b>    | <b>£12.85</b>          | <b>£11.81</b>             | <b>£12.14</b>       | <b>£1,222.16</b>      | <b>£1,317.04</b> | <b>£23.97</b>  |
| Isle of Wight                    | £12.05                    | £11.31        | £16.53        | £19.76             | £20.24           | £12.54                 | £11.71                    | £12.18              | £957.88               | £989.65          | £22.52         |
| Oxfordshire                      | £12.69                    | £11.50        | n/a           | £22.20             | £21.55           | £13.19                 | £12.40                    | £12.28              | £1,202.98             | £1,158.64        | £27.59         |
| Portsmouth                       | £11.88                    | £11.23        | £16.54        | £19.63             | £19.84           | £12.20                 | £11.40                    | £12.07              | £877.23               | £1,292.24        | £22.32         |
| Reading                          | £12.56                    | £11.79        | £17.48        | £20.37             | £20.83           | £12.86                 | £11.83                    | £12.61              | £1,337.20             | £1,048.12        | £21.72         |
| Southampton                      | £12.58                    | £11.95        | £16.97        | £20.33             | £20.78           | £13.35                 | £11.81                    | £12.63              | £1,149.29             | £1,330.47        | £21.41         |
| Surrey                           | £12.55                    | £11.53        | £17.04        | £20.90             | £21.53           | £13.27                 | £12.29                    | £12.16              | £1,359.24             | £1,014.70        | £17.86         |
| West Berkshire                   | £12.10                    | £11.28        | £16.72        | £20.06             | £20.37           | £12.47                 | £11.71                    | £11.98              | £1,467.14             | £1,204.96        | £23.72         |
| West Sussex                      | £12.47                    | £11.48        | £17.32        | £20.80             | £21.44           | £13.15                 | £11.88                    | £12.23              | £1,261.22             | £1,084.41        | £26.53         |
| Wiltshire                        | £12.30                    | £11.41        | £16.78        | £19.98             | £21.19           | £13.05                 | £12.05                    | £11.96              | £1,274.63             | £1,153.09        | £26.39         |
| Wokingham                        | £12.27                    | £11.39        | £16.88        | £20.24             | £22.16           | £13.30                 | £11.97                    | £11.94              | £1,310.80             | £1,135.91        | £21.19         |
|                                  | <b>£12.31</b>             | <b>£11.48</b> | <b>£16.84</b> | <b>£20.21</b>      | <b>£21.07</b>    | <b>£12.86</b>          | <b>£11.92</b>             | <b>£12.17</b>       | <b>£1,253.65</b>      | <b>£1,175.32</b> | <b>£23.26</b>  |

## Sources

Skills for Care Adult Social Care Workforce Data Set – Extracted November 2024

NHS Digital Adult Social Care Activity and Finance – Extracted November 2024

Mid Year Population Estimates ONS – Extracted November 2024

Table 2 – Shows the average turnover of staff in the care sector compared to South East local authority areas

| Area                             | Avg. years exp in sector | Avg. years exp in role | Vacancy rate | Turnover rate |
|----------------------------------|--------------------------|------------------------|--------------|---------------|
| Wokingham                        | 9.0                      | 4.6                    | 8.7%         | 18.4%         |
| Portsmouth                       | 8.4                      | 4.2                    | 4.0%         | 24.1%         |
| West Berkshire                   | 8.5                      | 4.6                    | 18.0%        | 24.3%         |
| Wiltshire                        | 9.2                      | 4.5                    | 8.4%         | 27.0%         |
| Surrey                           | 9.3                      | 4.6                    | 10.2%        | 27.5%         |
| Oxfordshire                      | 8.6                      | 4.2                    | 10.1%        | 28.8%         |
| Bournemouth Christchurch & Poole | 9.6                      | 4.7                    | 7.8%         | 29.1%         |
| Southampton                      | 8.8                      | 4.2                    | 5.7%         | 29.2%         |
| Reading                          | 9.8                      | 4.9                    | 7.2%         | 30.0%         |
| West Sussex                      | 9.3                      | 4.2                    | 7.6%         | 30.7%         |
| Isle of Wight                    | 9.3                      | 4.4                    | 7.0%         | 31.5%         |
| Bracknell Forest                 | 7.6                      | 4.4                    | 14.8%        | 33.9%         |
| Hampshire                        | 8.8                      | 4.2                    | 8.7%         | 36.7%         |
| Dorset                           | 8.6                      | 3.9                    | 7.5%         | 37.5%         |
| <b>Overall Average</b>           | <b>8.9</b>               | <b>4.4</b>             | <b>9.0%</b>  | <b>29.2%</b>  |

**Table 3 - Shows the turnover rate health and social care sector compared to other sectors across the UK**

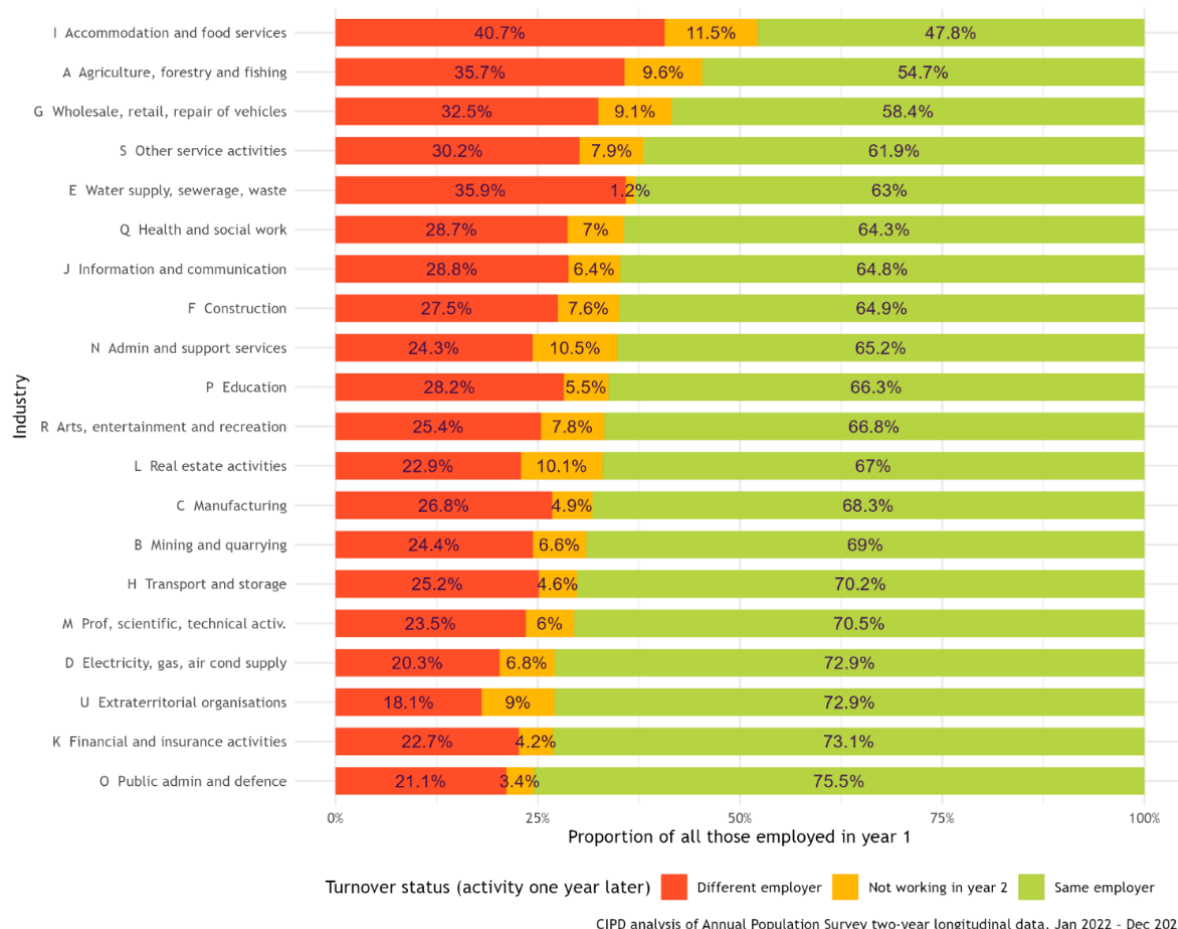


Table 4 - illustrates the percentage of social care qualifications in the Hampshire workforce compared to South East local authorities

| Area                             | Has relevant social care qualification | No relevant social care qualification | Entry | Level 1 | Level 2 | Level 3 |
|----------------------------------|--|---------------------------------------|-------|---------|---------|---------|
| Reading                          | 44.5%                                  | 55.5%                                 | 0.4%  | 0.8%    | 22.0%   | 13.3%   |
| West Berkshire                   | 54.3%                                  | 45.7%                                 | 0.5%  | 0.0%    | 21.1%   | 23.6%   |
| Bournemouth Christchurch & Poole | 47.6%                                  | 52.4%                                 | 1.8%  | 0.8%    | 17.6%   | 20.6%   |
| Wiltshire                        | 42.8%                                  | 57.2%                                 | 0.9%  | 0.2%    | 16.4%   | 18.4%   |
| Oxfordshire                      | 39.9%                                  | 60.1%                                 | 3.1%  | 0.8%    | 16.4%   | 13.7%   |
| Dorset                           | 44.5%                                  | 55.5%                                 | 0.7%  | 1.0%    | 15.7%   | 20.6%   |
| West Sussex                      | 41.1%                                  | 58.9%                                 | 0.4%  | 1.1%    | 15.5%   | 17.6%   |
| Wokingham                        | 29.2%                                  | 70.8%                                 | 0.5%  | 0.4%    | 14.4%   | 8.1%    |
| Portsmouth                       | 36.8%                                  | 63.2%                                 | 0.4%  | 0.8%    | 13.9%   | 15.3%   |
| Hampshire                        | 38.3%                                  | 61.7%                                 | 1.3%  | 0.7%    | 13.3%   | 17.1%   |
| Surrey                           | 38.6%                                  | 61.4%                                 | 0.3%  | 1.6%    | 13.2%   | 16.5%   |
| Isle of Wight                    | 50.6%                                  | 49.4%                                 | 0.4%  | 0.0%    | 13.1%   | 28.4%   |
| Bracknell Forest                 | 35.0%                                  | 65.0%                                 | 0.0%  | 0.0%    | 11.0%   | 16.5%   |
| Southampton                      | 30.5%                                  | 69.5%                                 | 1.2%  | 1.4%    | 10.1%   | 12.4%   |
|                                  | 41.0%                                  | 59.0%                                 | 0.8%  | 0.7%    | 15.3%   | 17.3%   |

Table 5 – the percentage of care certificates within the Hampshire adult care workforce complete

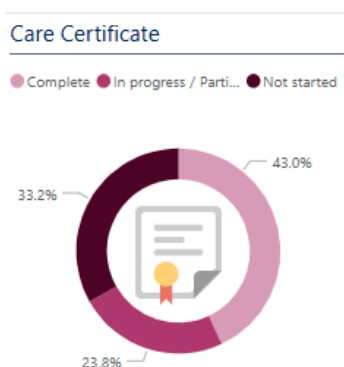


Table 6 – shows the make up of the adult care workforce in Hampshire

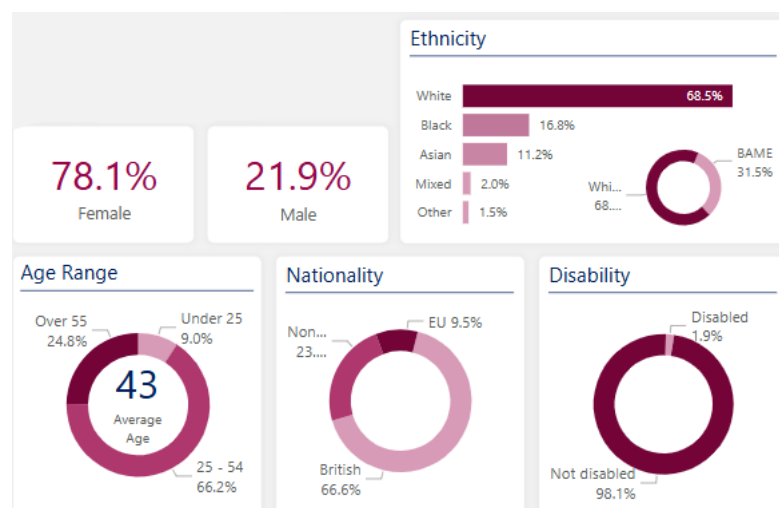


Table 7 – shows the make-up of the adult care workforce in Hampshire compared to South East local authorities.

| Area                                | Female | Male  | BAME  | EU (Non-British) | Non-EU | Disability |
|-------------------------------------|--------|-------|-------|------------------|--------|------------|
| Bournemouth<br>Christchurch & Poole | 76.1%  | 23.9% | 33.7% | 14.4%            | 28.5%  | 1.5%       |
| Bracknell Forest                    | 81.9%  | 18.1% | 31.5% | 11.7%            | 18.1%  | 2.2%       |
| Dorset                              | 77.1%  | 22.9% | 16.1% | 9.7%             | 16.2%  | 1.9%       |
| Hampshire                           | 78.8%  | 21.2% | 30.0% | 7.5%             | 23.9%  | 1.7%       |
| Isle of Wight                       | 73.3%  | 26.7% | 12.7% | 4.4%             | 13.0%  | 1.7%       |
| Oxfordshire                         | 78.2%  | 21.8% | 38.0% | 11.5%            | 30.3%  | 1.7%       |
| Portsmouth                          | 78.9%  | 21.1% | 32.6% | 6.6%             | 26.2%  | 1.3%       |
| Reading                             | 78.1%  | 21.9% | 51.7% | 12.7%            | 36.1%  | 1.6%       |
| Southampton                         | 79.4%  | 20.6% | 28.8% | 6.6%             | 28.2%  | 3.0%       |
| Surrey                              | 74.6%  | 25.4% | 46.3% | 12.7%            | 32.5%  | 1.5%       |
| West Berkshire                      | 78.5%  | 21.5% | 27.5% | 6.7%             | 10.6%  | 3.5%       |
| West Sussex                         | 78.1%  | 21.9% | 22.7% | 11.2%            | 17.0%  | 2.0%       |
| Wiltshire                           | 82.3%  | 17.7% | 19.8% | 5.9%             | 17.2%  | 1.4%       |
| Wokingham                           | 77.3%  | 22.7% | 49.4% | 11.5%            | 36.2%  | 1.3%       |
| Average                             | 78.1%  | 21.9% | 31.5% | 9.5%             | 23.9%  | 1.9%       |

## **Workforce Charter – Our pledges:**

- 1. We will continue to work with the providers in the market to ensure the cost of care is sustainable for both the residents and for the care organisations. Communities of Practice have been established across the sectors to listen to concerns, offer training and to share good practice across organisations.**
- 2. Stabilise average cost of care through the mechanisms of commissioned frameworks for example the Care Home Framework.**
- 3. Sharing of good practice in terms of staff recruitment and training, through Communities of Practice with providers and partners.**
- 4. Through collaborative contract monitoring meetings, recruitment, retention and Equality and Diversity policies of providers will be reviewed to ensure compliance with the statutory requirements and relevant regulatory frameworks, as well as staff supervision frequency and training.**
- 5. Provider Newsletters are produced and shared with all providers signed up to sharing information on training, best practice and events.**
- 6. Sharing of new initiatives from Skills for Care, and other stakeholders with providers.**
- 7. Advertise Department of Health Social Care recruitment campaigns, for example, ‘Make care your career’ supports recruitment of new and quality care staff.**
- 8. Supporting sustainable markets, fair pay, sustainable pricing and strong financial management through our procurement, contracting and monitoring arrangements.**
- 9. Advertising Public Health Campaigns to providers through the Newsletter.**
- 10. The County Council will publish a Direct Payments strategy in 2026 setting out our commitment to enabling residents to exercise choice and control over who provides their care.**
- 11. Publicise national guidance for employers on relevant training through Provider Newsletters and through IMPACT**
- 12. Set clear expectations of training requirements through the Procurement processes and contract monitoring meetings.**
- 13. Publicise potential training providers through Provider Newsletters.**
- 14. Sharing of best practice and other potential training opportunities/ providers through peer support at Communities of Practice events.**

- 14. Working closely with the Hampshire Care Association to identify any trends in training requirements and ability for these to be met.**
- 15. Promote the Hampshire Adult Social Care Apprenticeship Levy.**
- 16. The County Council will continue to work effectively between quality, commissioning, operational teams and providers to understand market feedback and ensure continuity and safe delivery of services to individuals.**
- 17. The County Council will continue to support providers with displaced workforce impacted by UKVI revocations through effective partnerships with Hampshire Care Association and SESCA.**
- 18. The County Council will share insights and data to providers and organisations representing providers in order to better understand and plan for the current and future demands for the workforce.**
- 19. The County Council will work collaboratively with health partners and the provider market, to understand the implications of health reform, upon neighbourhood working and delegated healthcare tasks and to work together to identify what is needed to support the workforce.**
- 20. The County Council will promote awareness and accessibility to its digital solutions with the wider market, to support the take up of solutions which promote independence.**

