NIHR | Policy Research Unit Adult social care

Changes of occupations among care workers in England: An analysis of two national surveys

Bo Hu and Raphael Wittenberg

April 2026

LSE THE LONDON SCHOOL OF ECONOMICS AND POLITICAL SCIENCE

University of Kent

DISCLAIMER

This NIHR Policy Research Unit in Adult Social Care (ASCRU) is part of the National Institute for Health and Care Research (NIHR) and hosted by the London School of Economics and Political Science in collaboration with the University of Kent and supported by King's College London.

This study is independent research commissioned and funded by the NIHR ASCRU (reference NIHR206126). The views expressed are those of the authors and not necessarily those of the NIHR, the Department of Health and Social Care (DHSC) or its arm's length bodies, and other Government Departments.

1. Introduction

Adult social care is an important part of a country's welfare system. It helps people to carry out fundamental and much valued daily activities such as dressing, eating, and shopping, and has a major impact on the quality of life of people with care needs. Due to demographic changes, the past decades have seen a marked increase in the demand for social care, putting a strain on the capacity of the existing workforce to provide care. This is exacerbated by high turnover rates in the people assuming caregiving roles, which makes it challenging to recruit and retain a sufficient number of care workers to keep up with the increasing demand for care (Hussein & Manthorpe, 2011). A shortage of care workers may have adverse impacts on the quality of care and lead to unmet care needs.

Against this background, this study investigates the scale of entry to and exit from the caregiving occupation and the factors associated with staff entry to and exit from the occupation in England. The focus is on changing one's occupation as a care worker. Those who have changed employers but are still working in the adult social care sector are considered organisation-level staff turnover and are not the focus of our analyses.

2. Data

2.1 Labour Force Survey (LFS)

This study is based on secondary analyses of data from two national surveys. The first is the Labour Force Survey (LFS), which collects information on the employment circumstances of people living in private households in the UK. The LFS comprises a nationally representative sample with a rotational sampling design. Each household is retained in the sample for five consecutive quarters. In each quarter, one fifth of the sample leaves the survey and another one fifth enter the survey (Office for National Statistics, 2016). For example, a cohort first interviewed in January-March 2017 is followed until January-March 2018.

Both cross-sectional data for individual quarters and longitudinal datasets linking respondents across different quarters are publicly available. We used the two-quarter longitudinal datasets which link the interviewees who participated in the survey for two consecutive quarters because these datasets have a relatively larger sample size than datasets linking more than two quarters.

Four two-quarter longitudinal datasets are published per annum: spring dataset (January-March), summer dataset (April-June), autumn dataset (July-September) and winter dataset (October-December) (Office for National Statistics, 2016). We combined the summer datasets (which link the second and third quarters) from 2007 to 2016. This ensures that the sample size is sufficiently large and that none of the respondents appears more than once in the combined sample.

Respondents in the LFS were asked to report their occupation from a list. The occupation classification codes changed slightly in 2011. Those who identified as a care assistant or a home carer (occupation code: 6115) between 2007 and 2010 and those who identified themselves as a care worker and home carers (occupation code: 6145) or a senior care worker (occupation code: 6146) between 2011 and 2016 were regarded as a care worker. 1.4% (n=3,237) of the 237,800 respondents in the combined sample were identified as care workers.

Since our focus is England, we excluded people in the other three countries of the UK. We also excluded people who were unemployed, economically inactive, or retired in either of the two consecutive quarters. Our analyses show that among people who reported themselves as a care worker in the quarter of April/June, 3.1% became unemployed or economically inactive in the quarter of July/September (i.e., one quarter later). Meanwhile, among people who reported themselves as a care worker in the quarter of July/September, 3.9% were either unemployed or inactive in the previous quarter of April/June. In each quarter, only about one fifth of the sample were asked about their hour hourly pay, so we further excluded those without this information. This leaves us a sample of 1,011, which is the focus of our analyses.

2.2 Annual Population Survey (APS)

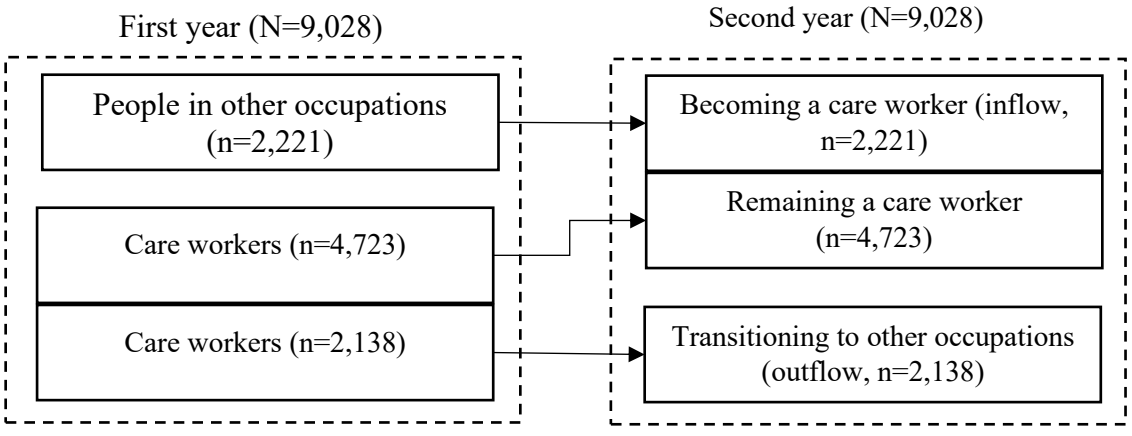
We conducted further analysis using data from the Annual Population Survey (APS). The APS combines data from the main LFS and data collected through a local sample boost. The APS two-year datasets link two January-December APS periods. For the two-year datasets January-December 2017-2018, this involves linking data from the same cohort collected in Jan-Mar 2017 and Jan-Mar 2018, in Apr-Jun 2017 and Apr-Jun 2018, and so on. Table A1 shows how the two-year datasets are linked (Office for National Statistics Social Survey Division, 2024).

In addition to LFS data, the APS also includes an annual boost sample, which is the rolling-year data from the English, Welsh and Scottish Local Labour Force Surveys (LLFS). Respondents to the annual boosts are interviewed four times at yearly intervals and approximately one quarter of

the sample is replaced each year. For the two-year datasets Jan-Dec 2017-2018, for example, this involves linking data for those first interviewed in 2017 with data for them when interviewed for a second time in 2018, linking data for those interviewed for the second time in 2017 with data for them when interviewed for the third time in 2018, and so on (Table A1).

The APS two-year datasets enable analyses of changes in occupation between years. Our study draws on the two-year APS datasets collected between 2012 and 2022 (i.e., Jan-Dec 2012-2013, Jan-Dec 2013-2014,…Jan-Dec 2021- Jan-Dec 2022) and focuses on 9,028 survey participants who worked as a care worker in the first year, in the second year, or both years in England (Office for National Statistics Social Survey Division, 2024). In line with the LFS analysis, we excluded survey participants who were unemployed, economically inactive, or retired in either of the two consecutive years. With such a sample structure, we distinguished between three trajectories followed by care workers. The first relates to people who remained care workers between the two consecutive years. There were 4,723 people in this category (Figure 1). The second trajectory concerns transitioning from other occupations in the first year to a care worker in the second year (i.e., inflow). There were 2,221 people who followed this trajectory. Finally, 2,128 people worked as care workers in the first year and moved on to other occupations in the second year (i.e., outflow).

Figure 1 Inflow and outflow of care workers from the beginning of the first year to the end of the second year, 2012-2022



3. Variables

3.1 Labour force survey

Exit from the adult social care sector is the key variable of interest in our LFS analyses. All the observations in our sample were care workers in the second of their five quarters in the LFS. We compared people's occupations between their second and third quarters and created a dichotomised variable where care workers who reported being in a different occupation in their third quarter were coded as 1, and those who continued to be a care worker were coded as 0.

Following previous studies (Butler et al., 2010; Morris, 2009; Vadean & Saloniki, 2020), we investigated personal, professional and organizational factors as predictors of occupational changes. For the personal factors, we examined age, gender, educational qualifications, marital status, and ethnicity. We created an educational qualification variable with three categories: no qualifications, the National Qualification Framework (NQF) level 3 and below, and NQF level 4 and above. The marital status variable has three categories: single and never married, married or cohabiting with a partner, and separated, widowed or divorced. The ethnicity variable in the LFS has 16 categories. To ensure the observations in each category were sufficiently large for analyses, we combined them into two categories: white and other ethnicities.

For the professional factors, we examined people's tenure, job seniority, full-time employment and hourly pay. Job tenure was measured by the number of years a care worker had worked for the employer by the time of interview. We created a dichotomised job seniority variable based on whether or not a care worker has supervision responsibilities (yes=1; no=0). The full-time employment variable is also dichotomised (part-time=0; full-time=1).

For the organisational factors, we examined the sector and the location of the employer. The employment sector variable has two categories: public sector and private sector. The LFS divided England into 16 regions and asked each respondent where the employer was located. We combined these regions into two categories: greater London (including inner London, central London and outer London) and Southeast England, and other regions of England.

3.2 Annual population survey

In the APS, we examined of occupations of care workers one year ago (i.e., the occupation they reported in the previous wave) and one year later (i.e., the occupation they reported in the following

wave). We also looked at the hourly pay while individuals were working as a care worker and compared them with the hourly pay that they received while they were working in the other occupations.

4. Statistical analyses

For the LFS data, we first conducted univariate analyses to compare the characteristics of care workers who changed to another occupation with those who remained to be a care worker. We then ran logistic regression models to identify the key factors associated with occupational changes. We investigated all the factors discussed above in the regression models. For each independent variable, we report the odds ratio and the confidence interval. For the entire model, we report the joint significance of the independent variables and the goodness-of-fit. The levels of statistical significance are: †p<0.1 *p<0.05, **p<0.01, ***p<0.001. We conducted similar analyses using the APS data, and also calculated the average wages in each occupation and investigated how individuals' pay changed when they switched occupations.

5. Analysis results

5.1 Labour Force Survey

Table 1 shows the number and percentage of care workers leaving for another occupation between two consecutive quarters. Of the 1,011 care workers in our sample, 9% (n=90) left to work in another occupation the next quarter. Among these 90 people, 37% (n=33) moved to the healthcare-related occupations and 36% (n=32) worked as welfare (associate) professionals (e.g. social workers, youth and community workers or housing associate professionals). The rest (27%) moved to administrative, sales or other jobs. More than half of those switching to the healthcare-related occupations (n=17) worked as a nurse auxiliary or a health assistant.

Table 1 Turnover of care workers between two consecutive quarters

	Number	Percentage
Switching to another occupation		
No	921	91%
Yes	90	9%
Total	1011	100%
New occupations		

Healthcare services	33	37%
Welfare (associate) professionals	32	36%
Administrative occupations	11	12%
Sales and customer services	6	7%
Other occupations	8	9%
Total	90	100%

Sources: Analyses of LFS datasets

Table 2 shows the characteristics of the sample broken down by turnover. 84.1% of the care workers in our samples are females. 18.9% of those who left and 15.6% of those who stayed are males, but the difference is not statistically significant. Three quarters of the care workers have a qualification of NQF level 3 or below. 32.2% of those who left have a qualification of NQF level 4 or above compared with only 16.9% of those who stayed in social care. The difference is statistically significant. The average wages of care workers who changed occupations were £10.30 per hour while they were working as a care worker, which is significantly higher than the average wages of those who stayed (£8.60 per hour). In comparison to care workers who stayed, higher proportions of those who changed occupations had a supervisory role, were employed on a full-time basis or worked in the public sector while they were working as a care worker. The differences are statistically significant.

Table 2 Sample characteristics and univariate analyses

	Stay in the same sector	Leave for another sector	Total	χ^2 or t-statistic
Personal factors				
Years of age	43.6	42.3	43.5	t(1009) = 0.97
Gender				
Male	15.6%	18.9%	15.9%	
Female	84.4%	81.1%	84.1%	$\chi^2(1) = 0.65$
Marital status				
Single and never married	28.2%	32.2%	28.6%	
Married with spouse	47.2%	46.7%	47.2%	
Separated, widowed or divorced	24.5%	21.1%	24.2%	$\chi^2(2) = 0.86$
Educational qualifications				
NQF level 4 or above (ref.)	16.9%	32.2%	18.3%	
NQF level 3 or below	75.7%	64.4%	74.7%	
No qualifications	7.4%	3.3%	7.0%	$\chi^2(2) = 13.8$***
Ethnicity				
White	85.3%	91.1%	85.8%	
Others	14.7%	8.9%	14.2%	$\chi^2(1) = 2.3$*
Hourly pay	8.6	10.3	8.7	t(1009) = 4.0***
Professional factors				

Employment tenure	6.3	7.0	6.4	t(1009) =0.93
Supervision role				
No	79.4%	70.0%	78.5%	
Yes	20.6%	30.0%	21.5%	$\chi^2(2) = 4.3$*
Part-time employment				
Full-time	57.1%	70.0%	58.3%	
Part-time	42.9%	30.0%	41.7%	$\chi^2(1) = 5.6$*
Organisation factors				
Sector				
Private sector	77.2%	65.6%	76.2%	
Public sector	22.8%	34.4%	23.8%	$\chi^2(1) = 6.2$*
Location				
Greater London and SE England	24.0%	32.2%	24.7%	
Other regions	76.0%	67.8%	75.3%	$\chi^2(1) = 3.0$
Sample size	921	90	1,011	

Sources: Analysis of LFS datasets
Note: *p<0.05, **p<0.01, ***p<0.001

Table 3 shows the factors associated with changing from being a care worker to another occupation. Logistic regression analyses show that educational qualifications, ethnicity, hourly pay, and part-time employment are statistically significant variables. For people with a qualification of NQF level 4 or above, their odds of changing to other occupations are twice larger than the odds for people with NQF level 3 and four times larger than those with no qualifications. Care workers in the white ethnicity group have odds of occupational changes 2.5 times larger than the odds for workers in the other ethnicity groups. The odds of occupational changes are 1.8 times larger for full-time workers than for part-time workers. Consistent with the results of the univariate analyses, average wages of workers who changed occupations are significantly higher than those of workers who stayed. Care workers in London and Southeast England have a higher likelihood of changing occupations than those working in other regions of England. But after controlling for other variables, the association between occupational changes and region is relatively weak (p-value<0.1). Both the Pearson and the Hosmer-Lemeshow goodness-of-fit tests show that the model fits reasonably well (p-value≫0.05).

Table 3 Factors associated with care workers leaving social care

	Dependent variable: whether left the social care sector	
Independent variables	Odds ratio	95% Confidence interval
Personal factors		
Age	0.99	0.97 - 1.01
Gender		
Male (ref.)	1.00	
Female	0.86	0.48 - 1.55
Marital status		
Single and never married (ref.)	1.00	
Married with spouse	0.92	0.51 - 1.67
Separated, widowed or divorced	0.96	0.45 - 2.02
Educational qualifications		
NQF level 4 or above (ref.)	1.00	
NQF level 3 or below	0.45**	0.27 - 0.75
No qualifications	0.25*	0.07 - 0.93
Ethnicity		
Others groups (ref.)	1.00	
White	2.53*	0.17 - 0.90
Hourly pay	1.07**	1.02 - 1.12
Professional factors		
Employment duration	1.00	0.96 - 1.04
Supervision role		
No (ref.)	1.00	
Yes	1.34	0.80 - 2.25
Part-time employment		
Part-time (ref.)	1.00	
Full-time	1.79*	1.34 - 1.92
Organisation factors		
Sector		
Private sector (ref.)	1.00	
Public sector	1.58†	0.92 - 2.71
Location		
Greater London and SE England(ref.)	1.00	
Other regions	1.58†	0.96 - 2.62
Pearson goodness-of-fit test	$\chi^2(989) = 991{,}62$, p-value=0.47	
Hosmer-Lemeshow goodness-of-fit test	$\chi^2(8) = 4.27$, p-value=0.83	

Sources: Analysis of LFS datasets

Note: †p<0.1 *p<0.05, **p<0.01, ***p<0.001

5.2 Annual population survey

Table 4 shows the number of people in other occupations who became a care worker and the number who switched to other occupations from a care worker between two successive years. In 2012 (i.e., first year), there were 909 care workers in our sample, among whom 262 people changed

to other occupations in 2013 (i.e., second year). Meanwhile, 321 people in other occupations in 2012 became a care worker in 2013. There were 968 care workers in our sample at the end of 2013, which means a net inflow of 59 care workers between 2012 and 2013. The inflow and outflow of care workers followed a similar pattern in the next decade. Up to 2016, the annual inflow exceeded the outflow of care workers, but after 2016 small net outflows started to dominate. For the ten-year period between 2012 and 2022, our sample recorded a net inflow of 83 care workers. It can be noted that the sample size is smaller in the two-year period 2020-2021and the two-year period 2021-2022 in comparison to other years. The COVID-19 pandemic may have played a role in this. Also, it should be noted that each new cohort entering the APS could contain different numbers of carers by chance since the APS samples from the general population rather than from carers.

Table 4 Inflow and outflow of care workers by calendar years, APS data

Two-year period	First year	Inflow	Outflow	Second year	Net inflow (+) or outflow (-)
2012-13	909	321	262	968	59
2013-14	945	324	281	988	43
2014-15	978	304	330	952	-26
2015-16	856	291	258	889	33
2016-17	826	268	280	814	-12
2017-18	784	237	249	772	-12
2019-20	664	229	240	653	-11
2020-21	439	166	123	482	43
2021-22	460	81	115	426	-34
Total (2012-22)	6,861	2,221	2,138	6,944	83

Note: First year refers to year 2012 in the two year period of 2012-2013, 2013 in the two year period of 2013-2014, etc. Second year refers to 2013 in the two year period of 2012-2013, 2014 in the two year period of 2013-2014 etc.

Table 5 shows the inflow and outflow of care workers by the first digit of the Standard Occupation Classification (SOC) code (2010 version). People who remained a care worker between the two years were excluded from the analyses. The first digit of the SOC code classifies occupations into nine major groups, with each group being similar in terms of educational qualifications, training, skills, and experience commonly associated with the competent performance of work tasks (Office for National Statistics, 2016). A care worker is classified into the SOC group 6, which refers to caring, leisure and other service occupations. These occupations require a good standard of general education and may also require further vocational training. The majority of the people (59.2%,

n=1,314) who changed their occupations to a care worker were in the same group of SOC group 6. Meanwhile, 14.5% (n=322) of those who became a care worker were in SOC groups 7-9 prior to changing occupations. The three occupation groups refer to sales and customer service occupations, process, plant and machine operatives, and elementary occupations. These occupations normally require a general or minimum level of education and short periods of work-related training. Finally, 26.3% (n=584) of those who became a care worker were in SOC groups 1-5. These occupations require a high level of education and a substantial or formal period of experience-related training.

Among those who moved out of the care worker occupation, the majority (61.0%, n=1,304) stayed in the SOC group 6, 10.2% (n=219) moved to the SOC groups 7-9, and 28.8% (n=615) moved to the SOC groups 1-5. The inflow of care workers from SOC 7-9 is proportionately larger than the outflow of care workers to SOC 7-9. The proportion of outflow of care workers to SOC 1-6 (89.8%, 95% CI: 88.4%-91.0%, n=1,919) is larger than the proportion of inflow of care workers from SOC 1-6 (85.5%, 95% CI: 84.0%, 86.9%, n=1,898). These differences in proportions are statistically significant.

Table 5 Inflow and outflow of care workers by Standard Occupation Classification (SOC), APS data

	Inflow (95% CI)	Outflow (95% CI)
SOC 1-5	26.3% (24.5%, 28.2%), n=584	28.8% (26.9%, 30.7%), n=615
SOC 6	59.2% (57.1%, 61.2%), n=1,314	61.0% (58.9%, 63.0%), n=1,304
SOC 7-9	14.5% (13.1%, 16.0%), n=322	10.2% (9.0%, 11.6%), n=219
Sample size	2,221	2,138

Table 6 shows the top 15 occupations from which people switched to be a care worker. People in these 15 occupations account for 62.0% (n=920) of the 2,221 people who changed to the care worker occupation. The most common occupation is nursing auxiliaries and assistants (25%, n=377, SOC: 6141), which is followed by cleaners and domestics (6%, n=89, SOC: 9233) and welfare and housing associate professionals (4%, n=60, SOC: 3239). Eight of the top 15 occupations fall into the SOC groups 1-5 such as nurses, social workers, youth and community workers, care managers, housing officers, and personal assistants and secretaries. The average wage of those eight occupations is considerably higher than the average wage of a care worker (£8.40 per hour). The average wage of the top 15 occupations (£9.00 per hour) was also higher than that of a care worker.

Table 6 Top 15 occupations of people who became a care worker in the second year and average wages in the first year, APS data

Occupations	Observations	%	Average wages
6141 Nursing auxiliaries and assistants	377	25.4	8.8
9233 Cleaners and domestics	89	6.0	7.0
3239 Welfare and housing associate professionals	60	4.1	10.0
7111 Sales and retail assistants	47	3.2	6.5
2231 Nurses	46	3.1	12.1
2442 Social workers	41	2.8	13.9
3231 Youth and community workers	40	2.7	10.4
6126 Educational support assistants	36	2.4	7.7
6144 Houseparents and residential warden	36	2.4	9.0
4159 Other administrative occupations	35	2.4	8.9
9272 Kitchen and catering assistants	29	2.0	6.3
1242 Residential, day and domiciliary care managers	28	1.9	9.8
6121 Nursery nurses	20	1.4	6.8
3234 Housing officer	18	1.2	10.1
4215 Personal assistants and other secretaries	18	1.2	11.1
All top 15 occupations of people who became care workers	920	62.0	9.0
First-year wages of those who remained a care worker			8.4

Table 7 shows the top 15 occupations to which care workers transitioned. People moving to these 15 occupations account for 62.3% (n=907) of the 2,138 care workers who changed their occupation. The most common occupation a care worker moved to is nursing auxiliaries (28%, n=407), which is followed by welfare and housing associate professionals (5%, n=72) and nurses (4%, n=58). It can be noted that the top 15 occupations from which people transitioned to become a care worker and the top 15 occupations to which care workers transitioned are almost identical. The only difference is that kitchen and catering assistants (SOC: 9272) are on the former list but not the latter, whereas veterinary nurses (SOC: 6131) are on the latter list but not the former. Eight of the top 15 occupations belong to the SOC groups 1-5, and the average wages of those eight occupations are considerably higher than the average wage of a care worker (£8.60 per hour). The average wage of the top 15 occupations (£9.50) is also higher than that of a care worker.

Table 7 Top 15 occupations that care workers switched to between two years and average wages in the second year, APS data

Occupations	Observations	%	Average wages
6141 Nursing auxiliaries and assistants	407	28.0	8.7
3239 Welfare and housing associate professionals	72	5.0	10.8
2231 Nurses	58	4.0	12.5
9233 Cleaners and domestics	58	4.0	7.5
2442 Social workers	37	2.5	14.6
6126 Educational support assistants	37	2.5	9.1
4159 Other administrative occupations	36	2.5	8.7
7111 Sales and retail assistants	33	2.3	8.9
3231 Youth and community workers	31	2.1	11.5
1242 Residential, day and domic care	29	2.0	10.1
6144 Houseparents and residential warden	29	2.0	9.0
6131 Veterinary nurses	26	1.8	10.3
4215 Personal assistants and other secretaries	20	1.4	10.5
3234 'Housing officers'	19	1.3	9.4
6125 'Teaching assistants'	15	1.0	6.5
People who move to top 15 occupations	907	62.3	9.5
Average wages of those who remained a care worker			8.6

Table 8 reports the average wages of people who followed different occupational trajectories between the two years. For people who were care workers in both years, the average wages increased from £8.40 per hour in the first year to £8.60 per hour in the second year, but this increase was not statistically significant. For people who transitioned from other occupations to a care worker, the average wages decreased from £9.30 per hour before the transition to £9.10 per hour after the transition, but this decrease was not statistically significant. For people who transitioned from a care worker to other occupations, the average wages increased from £9.10 per hour before the transition to £9.80 per hour after the transition. This increase was statistically significant. It can be noted that those who remained a care worker had the lowest average wages throughout the two years in comparison to the other groups.

Table 8 Average wages of people who became a care worker, switched to other occupations, and remained a care worker between two years, APS data

	Number of people	Average wages in the 1st year (95% CI)	Average wages in the 2nd year (95% CI)
Remaining a care worker	4,723	8.4 (8.2-8.5)	8.6 (8.5-8.7)
Becoming a care worker in the 2nd year (i.e., inflow)	2,221	9.3 (9.0-9.5)	9.1 (8.8-9.3)
Moving to other occupations in the 2nd year (i.e., outflow)	2,138	9.1 (8.8-9.4)	9.8 (9.6-10.1)

6. Discussion and conclusions

This study examined the patterns of, and factors associated, with entry to and exit from the care worker occupation in England. The literature reports that the adult social care sector is characterised by high turnover rates. This is confirmed by the evidence presented in this study. We found in the LFS data that one in 11 care workers left this occupation within 3 months of interview. We found in the APS data that an average of 31% of care workers moved to another occupation each year. It is important to note that the focus of our analyses was upon switching between the care worker occupation and other occupations, rather than changes jobs from the adult social care to other sectors. The two concepts are closely linked but not identical. Nonetheless, high volumes of care worker turnover are costly. Resources that could have been used to improve the pay, conditions and professional skills of the existing workforce are instead diverted to recruitment and induction of new caregiving staff. Our analyses suggest that those who stay in the occupation on average have lower educational qualifications and are more likely to be part-time workers than those who leave it. The social care sector seems to have difficulty retaining full-time care workers with higher educational qualifications.

It may seem surprising to observe in the LFS data that hourly pay is associated with a higher likelihood of changing the occupation. The relationship remains strong after controlling for a wide range of personal, professional and organisational factors. Our analysis of the APS data shows that such a seemingly puzzling finding in the LFS analysis is largely due to care workers leaving for better-paid opportunities in higher-skilled occupations. Indeed, our analysis of the APS data highlights both the attraction and retention challenges facing the care sector. The analysis of wage trends reveals that care workers generally earn lower wages compared to those in other occupations to which many care workers transition, particularly in higher-skilled occupations, which

contributes to the high outflow of workers transitioning to better-paying jobs. This finding is consistent with those reported in previous studies (Foster, 2024; Hussein, 2017). That care workers leave for better-paid opportunities in higher-skilled occupations probably means that, at least for some people, the care worker occupation plays the role of a springboard for their career development. On the one hand, it is important to bear in mind the role of this occupation in providing an environement for care workers where they can accumulate knowledge and experience before they move on to puruse their career ambitions (Department of Health and Social Care, 2024). On the other, high turnover rate hightens the risk of talent drain from this occupation and reinforces the economic challenges within the adult social care sector.

In terms of policy implications, our research findings underscore the need to address the wage disparity and improve working conditions in the care worker occupation and adult social care sector to recruit and retain care workers. While care work may act as a steppingstone for individuals pursuing healthcare-related careers, the sector must offer more competitive wages and career progression opportunities to ensure long-term workforce stability and meet the growing demand for care services.

7. Limitations

Limitations of this study should be duly acknowledged. First, our analytical sample did not include those people who were unemployed or economically inactive and became a care worker later or those care workers who became unemployed or economically inactive later. It would be useful for future studies to account for unemployment and economic inactivity when investigating the inflow and outflow of care workers. Second, concerns have been raised about the potential measurement errors of the derived hourly wage variable in the LFS dataset. The measurement errors may especially lead to an overestimate of hourly wage among those towards the lower end of the wage distribution of workers (Beissel-Durrant & Skinner, 2003; Skinner et al., 2003). Further analyses would be worth pursuing in the future to understand the impacts of this issue on our analysis results because the care workers are known in the literature to be hired on the basis of low pay conditions. Finally, bot the LFS and APS are national surveys, but the datasets underlying this piece of research, in particular the subgroup of sample collected in the LFS, have a small sample size,

which raises concerns about the representativeness of data. Caution should be exercised to interpret the generalisability of the research findings.

Appendix

Table A1 Two-year APS longitudinal datasets, Jan-Dec 2017 to Jan-Dec 2018

	Jan-Mar 17	Apr-Jun 17	Jul-Sep 17	Oct-Dec 17	Jan-Mar 18	Apr-Jun 18	Jul-Sep 18	Oct-Dec 18
LFS cases								
LFS cohort 1	**Wave 1**	Wave 2	Wave 3	Wave 4	**Wave 5**			
LFS cohort 2		**Wave 1**	Wave 2	Wave 3	Wave 4	**Wave 5**		
LFS cohort 3			**Wave 1**	Wave 2	Wave 3	Wave 4	**Wave 5**	
LFS cohort 4				**Wave 1**	Wave 2	Wave 3	Wave 4	**Wave 5**
APS Boost cases	Jan-Dec 2017					Jan-Dec 2018		
LLFS cohort 1								
First sampled Jan-Dec 15			**Wave 3**				**Wave 4**	
LLFS cohort 2								
First sampled Jan-Dec 16			**Wave 2**				**Wave 3**	
LLFS cohort 3								
First sampled Jan-Dec 17			**Wave 1**				**Wave 2**	

Notes: This table uses data collected in Jan-Dec 2017 and Jan-Dec 2018 as an example to illustrate how a two-year longitudinal dataset (APS 2017-2018) is created; other two-year longitudinal datasets, APS 2012-2013, APS 2013-2014…APS 2021-2022, were created using the same methodology. LFS: Labour force survey; local labour force survey; cohort data in bold font are combined to create the two-year longitudinal datasets

References

Beissel-Durrant, G., & Skinner, C. (2003). *Estimation of the distribution of hourly pay from household survey data: The use of missing data methods to handle measurement error*. Retrieved from

Butler, S. S., Simpson, N., Brennan, M., & Turner, W. (2010). Why do they leave? Factors associated with job termination among personal assistant workers in home care. *Journal of Gerontological Social Work, 53*(8), 665-681. doi:https://doi.org/10.1080/01634372.2010.517236

Department of Health and Social Care. (2024). *Care workforce pathway for adult social care: Overview*. London: Department of Health and Social Care.

Foster, D. (2024). *Adult social care workforce in England*. London: House of Commons Library.

Hussein, S. (2017). The English social care workforce: the vexed question of low wages and stress. In K. Christensen & D. Pilling (Eds.), *The Routledge handbook of social care work around the world* (pp. 74-87). New York: Routledge.

Hussein, S., & Manthorpe, J. (2011). *Longitudinal Changes in Care Worker Turnover and Vacancy Rates and Reasons for Job Leaving in England*. London: King's College London.

Morris, L. (2009). Quits and job changes among home care workers in Maine: The role of wages, hours, and benefits. *The Gerontologist, 49*(5), 635-650. doi:https://doi.org/10.1093/geront/gnp071

Office for National Statistics. (2016). *Labour Force Survey user guide: LFS background and methodology 2016*. London: Office for National Statistics.

Office for National Statistics Social Survey Division. (2024). Annual Population Survey, 2004-2022: Secure Access. [data collection]. 30th Edition. *UK Data Service, SN: 6721*. doi:http://doi.org/10.5255/UKDA-SN-6721-29

Skinner, C., Stuttard, N., Beissel-Durrant, G., & Jenkins, J. (2003). *The measurement of low pay in the UK labour force survey*. Retrieved from Southampton:

Vadean, F., & Saloniki, E.-C. (2020). *Determinants of staff turnover and vacancies in the social care sector in England. UK PSSRU Discussion Paper 2020-01*. Canterbury: PSSRU, University of Kent.

NIHR | Policy Research Unit in Adult Social Care

NIHR Policy Research Unit in Adult Social Care
London School of Economics and Political Science
University of Kent
King's College London

ascru@lse.ac.uk
www.ascru.nihr.ac.uk
#ASCRUProject