

## Research paper

# Attracting young adults (18–25 years) to work in social care in England: how secondary data analysis may assist policy makers and providers

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### What is known on this subject

- Recruiting a diverse workforce within the fast growing care sector is a priority.
- Recently the UK government has been more active in recruiting younger adults to the English social care sector.
- Little is known about the current contribution of young adults as a formal part of the care sector.

### What this paper adds

- Data from the National Minimum Data Set for Social Care can be used to investigate the contribution and profile of young adults with regard to the care sector.
- Young workers (18–25 years) form a large minority (12%) of care workers in England, but are less diverse in terms of gender and ethnicity than other workers.
- Around 50% of young workers appear to be recruited from outside the care sector.

## ABSTRACT

The social care sector is one of the fastest growing employment sectors in England, but it faces considerable challenges in recruiting and retaining its workforce. There are proportionally few young workers in this sector, making it less diverse in age than it might be. In England the government has sought to realise the potential of young people in the labour market, and a number of initiatives have been designed to attract this group to social care work. This article argues that existing data can be used to understand the composition of this group in the care workforce, and to devise tailored recruitment strategies. The authors provide an original in-depth comparative statistical analysis of the National Minimum Data Set for Social Care, examining how the profile of young workers in the care sector differs

from that of older workers. Findings from regression model and time series analyses show that young workers are significantly less diverse in terms of both gender and ethnicity compared with other age groups, and that they are more likely to work in the private and voluntary sectors. They tend to travel shorter distances to work. Indications that the proportion of young people in this workforce is growing raise questions for social care providers and policy makers. This article discusses conceptual reasons for such findings and their implications for the sector.

**Keywords:** employment, long-term care, quantitative analysis, social care, young workers

## Introduction

In England, as in most developed countries, the social care sector is one of the fastest growing employment sectors (Cameron and Moss, 2007). People are living longer, although increased life expectancy may mean longer periods of disability and ill health, with greater needs for health and social care services. At the same time, changes in family structures and social norms, and increased participation in the workforce continue the shift of care from the informal to the formal sphere. The Wanless Social Care Review of social care (Wanless *et al*, 2006) noted that one million older people, aged 65 years or over, currently use publicly funded social care services in England. In the next 20 years, the number of people in England aged 85 years or over, the highest users of social care services, is set to increase by two-thirds, from 1.18 million in 2006 (Office for National Statistics, 2009) to nearly 2 million in 2026. With the low salary and status of most social care jobs (Hussein, 2010a,b), the sector remains a secondary labour market. Across England, both recruiting and retaining a sufficient workforce are problematic, and were recently addressed by the first adult social care workforce strategy (Department of Health, 2009).

In the light of rising demands for social care, there have been calls and initiatives to increase staffing in the sector, tapping into both 'traditional' and 'new' pools of potential workers, such as migrants, refugees and young people (Hussein and Manthorpe, 2005; Stone, 2005; Hussein *et al*, 2010). Job roles across the sector are diverse, and include care assistants and home care workers, occupational therapists, day care workers, social workers and others, with new work roles emerging in recent years (Kessler *et al*, 2006; Skills for Care, 2009a). Set against the current recession in much of the developed world, social care is likely to be a recession-proof sector, since demand is unlikely to decline (Fraher *et al*, 2009; Hussein *et al*, 2010).

Within these dynamics it is important to highlight factors related to young adults' employment and transition to work. Some research suggests that young adults are particularly prone to fragmented careers (Furlong and Cartmel, 1997), although other English research does not support this view (Fenton and Dermott, 2006). For young as well as older adults, employment is connected to identity, choice and risk (Sennett, 1998; Beck, 2000). In many situations, choices are related to job availability and flexibility.

In the context of care work, the social structure of such work is stratified by various divisions, typically gender and ethnicity (Yeates, 2009). Gender is an especially important influence because care work in general is regarded as a feminine role, extending domestic duties into the public sphere (Lazaridis, 2000; Hochschild, 2002; Cheng, 2003). Age has not featured

so prominently in analyses of the care workforce, although there is some concern that the sector contains many people who are approaching retirement, and that this will lead to further shortages and loss of expertise (Manthorpe and Moriarty, 2009). As with the nursing workforce, with which there is some overlap, employers may struggle to find replacement staff for retirees (Andrews *et al*, 2005). Over the past few decades, recruitment initiatives in developed countries such as the USA and Canada have targeted school leavers and young people as candidates for the care sector (Stone, 2000; Department of Labor and Department of Human Health Services, 2003; Li, 2004). More recently, in England, government policy initiatives have also begun to target young people as recruits to social care work, recognising their potential in terms of meeting labour demand in this fast growing sector. For example, in April 2009, the Department for Work and Pensions (DWP) announced funding for at least 50 000 young people to enter social care apprenticeships in a scheme called Care First, as part of the Adult Social Care Workforce Strategy (Department of Health, 2009). Other initiatives have also promoted social care as a career for young people. In England these include lowering the age of qualification for social work (see Evaluation of Social Work Degree Qualification Team, 2008), and Care Ambassador Schemes, launched in 2003, in which young people encourage their peers to join the sector (Kelly, 2008). Other publicity includes Social Care Films, which are intended to prompt people to consider a career in the sector by illustrating a range of social care roles.

One missing element of this recruitment process and efforts to increase the diversity of the social care workforce is an understanding of the contribution that is already being made by young workers to the sector. The aim of this article is to fill this knowledge gap by providing a synthesis of detailed, in-depth secondary data analysis of the profile and distribution of workers aged 18–25 years who are employed in the English care sector, mainly working with adults, with some representation in the children's sector, as identified through the National Minimum Data Set for Social Care (NMDS-SC), May 2009 release. The article then conceptualises possible reasons underlying such findings, and discusses their implications in terms of policy goals to develop the diversity of the social care workforce.

## Methods

The NMDS-SC is the first attempt to gather standardised workforce information for the English social care sector at a national level. It is developed, run and supported by Skills for Care, the sector skills organisation,

with government funding, and aims to gather a minimum set of information about services and staff across all service user groups and sectors within the social care sector in England.

By the end of May 2009, the NMDS-SC had been completed by 24 662 employers in England, who provided additional detailed information on 362 885 individual workers in the sector. The NMDS-SC equips the sector with a unique data set, providing information about workforce characteristics. However, it has limits, particularly in relation to the data set's representativeness at this stage (for a detailed analysis, see Hussein, 2009).

The analyses described in this article present a detailed picture of the profile of young care workers in terms of gender, ethnicity, job roles, sector and other characteristics using a range of statistical techniques, including regression models and time series analysis. All analyses were performed using R statistical software (R Development Core Team, 2007). A comparison between the characteristics of this group and older workers (aged 26–75 years), using a logistic regression model, investigated whether there are significant variations between the two groups. The findings are then discussed in the context of the growing demands on the care sector and how current information may assist further policy initiatives and recruitment campaigns.

### Limitations of the data

There are a number of caveats to this analysis when interpreting the findings. The main one is the source of information, which comes from employers rather

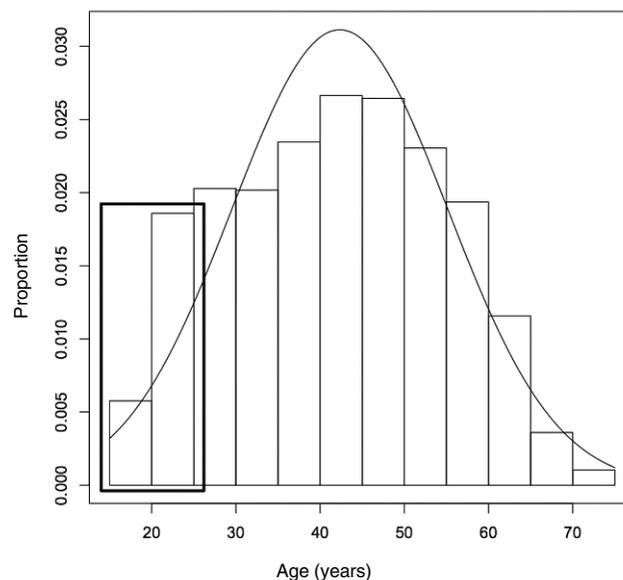
than employees themselves. Therefore accuracy may be compromised to some extent. In particular, missing values are notably high for some variables, such as disability and qualification levels.

## Findings

### Profile of young workers

Based on the NMDS-SC sample, release May 2009, Figure 1 shows the distribution by age for all social care workers in the 18–75 years age group, with a total number of 326 183 individuals. Approximately 12.2% were in the 18–25 years age group, representing a total of 39 729 workers. The mean age of workers was 42.3 years, with a median of 43. Of the 39 729 young workers (aged 18–25 years), only 4.3% were aged 18 years, while most (62%) were in the 22–25 years age group. Of these, the highest proportion (16%) was aged 24 years.

Table 1 provides some descriptive statistics for young workers in the English care sector. Of the total of 39 729 young workers for whom we have data set records, employers reported that only 1% had any form of disability ( $n = 363$ ). Employers indicated that 69% (27 332) had no disability, but for a sizeable group (30%,  $n = 12 034$ ), details are not recorded. Reported disability is usually associated with high numbers of missing values, because people may not wish to disclose hidden disabilities to employers. Among young workers whose gender was reported (85%,  $n = 34 037$ ), 85% were female and 15% were



**Figure 1** Distribution of age for all workers. The black rectangle indicates the 18–25 years age group, NMDS-SC May 2009.

male. These proportions are comparable to those of all workers in social care (Hussein, 2009), where 84% of workers are female and 16% are male.

With regard to the highest social care qualifications recorded for young workers, information was provided by employers for less than a quarter of workers (23%,  $n = 9142$ ). Table 1 shows that among this group, nearly half (46%,  $n = 4150$ ) held National Vocational Qualifications (NVQ) (see Box 1) at level 2 or 2+, and 30% had other relevant social care qualifications, while only 1% ( $n = 122$ ) held basic entry-level qualifications. It also shows that 6510 young workers were working towards qualifications. Table 1 shows that just over half (52%,  $n = 3371$ ) were working towards NVQ level 2 or 2+, while 30% ( $n = 1660$ ) were working towards level 3 or 3+. On the other hand, only 1% ( $n = 69$ ) were working towards entry level or level 1, although 22% ( $n = 1410$ ) were working towards other levels of qualifications that are relevant to social care.

**Table 1** Descriptive distribution of young workers (aged 18–25 years) according to different characteristics, NMDS-SC May 2009

Characteristics	Number	%
	of young	
	workers <sup>a</sup>	
<b>Recorded qualification level</b>		
Entry level/ level 1	122	1.3
Level 2/2+	4150	46.3
Level 3/3+	1581	17.3
Level 4/4+	485	5.3
Other relevant social care qualification	2721	29.8
<b>Qualification level worked towards</b>		
Entry level/level 1	81	1.2
Level 2/2+	3390	52.1
Level 3/3+	1969	30.2
Level 4/4+	300	4.6
Other relevant social care qualification	770	11.8
<b>Ethnicity</b>		
White	24 816	86.7
Mixed	462	1.6
Asian or Asian British	1234	4.3
Black or black British	1519	5.3
Other groups	591	2.1

<sup>a</sup> Total numbers are different due to missing values. Valid percentage values are shown.

### Box 1 UK National Vocational Qualifications

- The National Vocational Qualification (NVQ) is a 'competence-based' qualification which is based on UK national standards for various occupations.
- Social care NVQs are work-based qualifications that relate to the everyday tasks of social care jobs.
- No 'exams' are required in order to achieve NVQs, but competence is usually assessed during practice.

In terms of ethnicity, 87% ( $n = 24\ 816$ ) of young workers were white, 5% were black or black British, 4% were Asian or Asian British, and 2% each were mixed or belonged to other ethnic groups. When compared with the ethnic distribution of older workers, aged 26–75 years, young workers were significantly more likely to be of white ethnicity than from other ethnic groups ( $\chi^2 = 454$ ,  $df = 4$ ,  $P < 0.001$ ).

### Where young workers work and what they do

Employers provided information on the type of service that they offer, establishment type and other employment characteristics, as well as the job roles performed by individual workers. This clarified the position of young workers in terms of types of jobs, sector and main service provision. The data show that most workers, regardless of age, work in residential services, such as care homes. In the UK, social care is provided by different sectors, namely the private, voluntary and statutory sectors. Moreover, these sectors are subdivided according to main client or user groups, particularly in terms of adult or children's social care services.

Using job role grouping, as provided by Skills for Care (Hussein, 2009), it was found that 87% of young workers worked in direct care, 2% worked as managers/supervisors, less than 1% were in professional jobs and 11% were in other job roles. One further valuable element of the NMDS is that it collects information on distance travelled to work by individual workers. Distance travelled is used here as a proxy for working locally, and is examined in relation to age. The data show that over half of all workers tend to work within a maximum of 5 miles of their homes. However, young workers are significantly more likely to travel under 2 miles when compared with older workers (50% vs. 45%). This is usually linked to other factors, such as whether young people work locally

while living with their parents, and inability to drive or lack of car ownership.

### Differences between young and older workers

The current analyses investigate any associations between young workers aged 18–25 years and different characteristics, using a logistic regression model to control for different factors. The model aims to examine how well a number of variables can contribute to explaining the binary variable *young*, which indicates whether a worker is in the age group under study. The model used a total of 57 868 valid records. These included 4778 cases of young workers, aged 18–25 years (8.3% of the total of 57 868), but excluded records with missing information on any of the predicting variables. A stepwise forward approach was used, and the final model fitting, using *area under the ROC curve (AUC)* criteria, resulted in a value of 0.72, indicating that the model had ‘very good discriminatory power’ (Hosmer and Lemeshow, 2000).

The results presented in Table 2 show that, after controlling for all variables together, each of the following are significantly associated with being in the younger age group at the highest level of significance ( $P < 0.001$ ): *ethnicity*, *highest social care qualifications*, *job role*, *being in part-time work*, and *type and size of establishment*. The findings indicate that young workers in the care sector are significantly more likely to be of white ethnicity, to work in direct care jobs, to work part-time, and to be employed in the private and voluntary sectors than their older counterparts. Young workers are also significantly more likely to work in children’s day care and significantly less likely to work in adult domiciliary care or to work for small or micro-employers. At the next level of significance ( $P < 0.005$ ), young workers are significantly more likely to be female, and more likely to work with large employers (OR = 1.69,  $P = 0.001$ ) or work in children’s domiciliary care (OR = 2.83,  $P = 0.002$ ).

### Recruitment sources of young workers

Employers responding to the NMDS-SC provided information on the source of recruitment of each person working for them. Of the 39 729 young workers who were identified, 17 312 had their source of recruitment reported, providing valuable information of particular relevance when considering how to attract more young adults to the care sector. Nearly a third of young workers (33.6%,  $n = 5819$ ) were recruited from the private or voluntary adult social care sector, whether adult or children’s or other voluntary work. A small but not negligible proportion (8%) came from

the retail sector, 10% came from other sectors, and an additional 9% had not been previously employed, or came directly from full-time education. These last data highlight the possible attractions of the care sector to young adults with no previous employment experience. Some variations were observed when stratifying young workers by their current job roles in the sector. Among the small number of young workers working as managers/supervisors whose source of recruitment was recorded ( $n = 386$ ), the main source remains the adult care sector (mainly private or voluntary). However, a relatively large proportion (17%) was recruited from the children’s sector (private or voluntary).

### Trends in employing young people in the care sector

The NMDS contains information on the year when an individual started working in the sector and on the age of individual workers. Using workers’ date of birth and year of joining the sector, the age of workers at the time of starting the job can be calculated, and is here considered in relation to younger workers (aged 18–25 years), older workers (aged 26–75 years), and the date when they joined the sector. Using such information and the year when they joined the sector, we can investigate trends in the employment of young and other workers since 1980, allowing enough time to include both groups of workers when retrospectively collecting earlier dates. However, there are some apparent digit preferences, particularly in relation to older workers, when reporting the start year of employment. These peaks are observed for years marking complete decades, such as 1980, 1990 and 2000, indicating the possibility that some employers make an informed estimate of a start date.

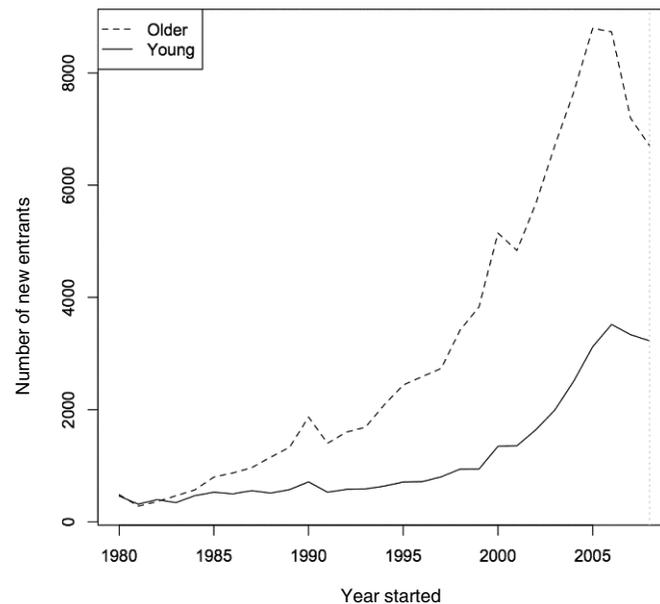
Figure 2 shows that from 1983 until the end of 2008, a general trend of increased employment in the sector can be clearly observed for both young and older new workers. During the period 1983–2005, the number of entrants from the older age group far exceeded the number of young entrants, by a margin ranging from 122 to a maximum of 5675 in 2005. However, since 2005 the numbers of new entrants from both age groups have started to decline, particularly with regard to the older age group. For example, the number of new older workers dropped from 8795 in 2005 to 6705 in 2008. The numbers of young new workers (aged 18–25 years) have also declined since 2005, but not as sharply. Since 2005 the gap in new employment between the two age groups appears to have been slowly declining, from 5675 in 2005 to 3479 in 2008. According to the partial data recorded for 2009, up to the end of May for that year, the margin between the older and younger age groups stands at 713.

**Table 2** Results of logistic regression model as expressed in equation 1, NMDS-SC May 2009

Significant independent variables <sup>a</sup>	Odds ratio	95% Confidence interval		P-value	Level of association
		Lower	Upper		
<b>Personal characteristics</b>					
Gender (ref: male)					
Female	1.18	1.07	1.30	0.002	**
Ethnic group (ref: white)					
Any BME	0.55	0.50	0.61	< 0.001	***
Highest qualifications (ref: level 2/2+)					
Entry level	1.97	1.43	2.66	< 0.001	***
Level 3/3+	0.57	0.52	0.62	< 0.001	***
Level 4/4+	0.68	0.59	0.77	< 0.001	***
Other qualifications	1.63	1.50	1.77	< 0.001	***
<b>Job characteristics</b>					
Job role (ref: direct care)					
Manager/supervisor	0.19	0.16	0.22	< 0.001	***
Professional	0.15	0.11	0.19	< 0.001	***
Other	0.45	0.40	0.51	< 0.001	***
Work pattern (ref: full-time)					
Part-time	0.69	0.65	0.74	< 0.001	***
Flexible	1.04	0.91	1.18	0.56	
<b>Organisational characteristics</b>					
Region (ref: North)					
Midlands	0.92	0.85	0.99	0.04	*
South	0.95	0.88	1.02	0.18	
Sector (ref: local authority)					
LA owned	0.98	0.35	2.20	0.97	
Private	3.87	3.29	4.58	< 0.001	***
Voluntary	2.56	2.15	3.07	< 0.001	***
Other	2.99	2.37	3.79	< 0.001	***
Establishment size (ref: micro)					
Small	1.32	1.16	1.52	< 0.001	***
Medium	1.44	1.26	1.66	< 0.001	***
Large	1.69	1.22	2.31	0.001	**
Main service (ref: adult residential)					
Adult day care	0.94	0.74	1.16	0.56	
Adult domiciliary	0.74	0.68	0.80	< 0.001	***
Adult community care	0.77	0.62	0.94	0.012	*
Children's residential	0.99	0.78	1.23	0.911	
Children's day care	3.78	2.43	5.79	< 0.001	***
Children's domiciliary	2.83	1.39	5.35	0.002	**
Children's community	0.89	0.45	1.59	0.718	
Healthcare: NHS	0.76	0.34	1.49	0.464	
Healthcare: independent	1.64	0.48	4.33	0.365	
Other	0.68	0.49	0.91	0.014	*

<sup>a</sup> Variables included in the final stepwise forward approach regression model. This model is in the optimal level and cannot be further simplified, with the lowest Akaike's information criterion (AIC). All variables included in the model show significant association with the young variable.

\*  $P < 0.05$ , \*\*  $P < 0.005$ , \*\*\*  $P < 0.001$ .



**Figure 2** Time-series plot of the number of new entrants to the social care sector according to whether they are young (18–25 years) or older (26–75 years) workers, from 1980 to the end of 2008, NMDs-SC May 2009.

## Discussion

The NMDs-SC data provide valuable and unique insights into the characteristics of young care workers. Two main findings emerge from the analysis. First, there are significant differences between the characteristics of young and other workers in the sector. It is noted that younger workers are significantly less diverse, particularly with regard to gender and ethnicity. Secondly, the observed trends show an increased contribution of young workers and a noticeable decline in new recruits since 2005.

The high demand for social care and the increasing diversity of people who are receiving services call for continued efforts in recruitment and suggest the benefits of welcoming a diverse workforce. The fact that, in comparison with other workers, younger workers are less diverse in terms of gender and ethnicity highlights the possibility that young men, and young adults from black and minority ethnic groups, are often not attracted to or encouraged by this sector. Although the gendered nature of the care sector is observed in many societies (Ungerson, 1990), the differences by age indicate a more rooted perception of the gendered nature of care work, possibly among younger people, employers and even people using social care services. A recent evaluation of the Care First Careers Pilot, based on a small number of interviews with employers ( $n = 30$ ), showed that retention of young workers is a particular concern among employers (Dobson and Byrne, 2010). Another study

shows that care work appears to be almost absent as an option for men, and many only stumble upon work in this sector (Skills for Care, 2010). The latter research indicates that negative views of the sector in relation to its wages and flat management structure are potential rejection factors among men.

Observed differences in ethnicity are likely to be linked to educational attainments among young adults, particularly among females, who constitute the large majority of care workers in England. In the education system, Key Stage 4 results for 16-year-olds are regarded as a significant determinant of their employment prospects (Wilson *et al*, 2005). For example, a recent study shows that after accounting for socio-economic variables, white British pupils from low socio-economic status backgrounds made the least progress over the course of secondary school, while Asian pupils, particularly girls, obtained the best results (Strand, 2008). The latter, or their parents, may not be attracted to social care work, given its low status and perceived low skill demands. Such hypotheses have been explored in relation to the small numbers of UK-born females from an Indian subcontinent background who enter the nursing profession in the UK (Darr *et al*, 2008).

Understanding the interactions between ethnicity, gender and educational attainment in relation to the care sector position in the labour market is crucial in policy initiatives that are seeking to attract young adults to the sector. The sector may offer stable long-term work for some, while others might see it as a valuable temporary or transitional phase. Any recruitment strategy needs to consider how both options can

be made attractive to young adults. Like many other social groups, young workers are a heterogeneous group, including students working part-time or temporarily, and those working full-time, who are attempting to establish a career (Barling and Kelloway, 1999). Research into motivation and choice of type and nature of employment among young adults has identified several important influences, including family experience and young adults' perceptions of their parents' employment, even from a very young age (Dowling and O'Brien, 1981), as well as the quality of their own work experience, including work placements and voluntary work (Frone, 1999). Loughlin and Barling (2001) argue that identification with particular professions starts much earlier than the age at which one embarks on a first job, and in this case the image of social care plays an important part in forming the choices and opinions of young people.

However, while there may be potential to ensure that male role models are visible in promotional material, other stereotypes and wage levels may be more difficult to challenge, other than pointing to possible career progression and to possible wage supplements or subventions. The perception of social care as a recession-proof sector may be a further attraction at a time when other employment is more uncertain. Of course a recruitment campaign alone may fail to attract an age-diverse workforce if it is not accompanied by a radical change in the image of social care and its career opportunities.

The analysis revealed that nearly half (47%) of young workers were recruited from outside the sector. There was no information to link young workers to the job preferences of their parents/family, so this figure may highlight the importance of wide recruitment campaigns in attracting young people to the sector, possibly using the media and new technology. Information about the cost-effectiveness of previous initiatives such as Care First, Care Ambassadors and the recruitment films mentioned earlier is needed.

Other messages for policy initiatives emerge from analysis of these data. For example, the finding that young workers travel short distances to work suggests that it might be worth considering support with travel costs as an incentive. Young workers are significantly less likely to work part-time than other workers, possibly reflecting fewer responsibilities outside work, single status, or lack of a partner's income. It may also mean that social care work is not widely available or is not perceived as a flexible option, possibly due to the regulatory requirements for checking criminal records. The data show that young workers tend to work in larger establishments and in the private sector. Any growth in micro-employers, as can be predicted from greater self-directed support, such as Personal Budgets and Direct Payments (Manthorpe *et al*, 2010), could mean that the attitudes of individual service users

concerning the value of age and experience become more influential.

In terms of qualifications, the data reveal that young people with few qualifications are attracted to the social care sector, but of course they have not had the same time as others to acquire further training. Opportunities to obtain qualifications and the impact of these on career paths are proven factors in the retention of staff in the care sector (Nakhnikian and Kahn, 2004). There is a need to consider qualifications in a wider sense, particularly with regard to assessing literacy and numeracy among social care workers to determine whether the range of training on offer is both fit for purpose and provides skills that are transferable to other sectors.

The second main finding relates to an observed trend in the profile of new recruits in both the younger and older age groups. The reasons behind the slow-down in employment in the sector since 2005, regardless of the age of new entrants, are not clear. However, if this indication is correct it may have important consequences, given the predicted steady increase in the number of people who will need social care (HM Government, 2008). Whether these relate to greater regulation in employing social care staff, greater self-directed support, slower rates of turnover or other factors requires further investigation. More complete data from future NMDS returns will be useful when examining whether this trend continues.

Trends data reveal that the average age of the social care workforce may be declining. Since the late 1980s, there appears to have been an increased level of employment in the sector, for new entrants, among all age groups. This facilitated the expansion of the care sector in England during this period, until a peak in 2005, when it started to decline. An interesting trend emerged from our analysis for the years from 2005 to 2008, where the slope of decline in the level of new employment for the older group (aged 26–75 years) was much steeper than that for the younger group (aged 18–25 years). If such trends are accurate, and continue in the same direction, the average age of the social care workforce in England may be declining, and the sector may be becoming more age diverse.

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## Conclusion

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Demand for long-term care in the UK is increasing, and requires sustained attention in terms of ensuring that there is an adequate and well-trained workforce. In the UK, the people who are receiving care are becoming increasingly diverse, particularly in terms of age and ethnicity. Life expectancy generally is increasing for all ethnicities in the UK, so more old people will require social care support. In addition,

more young adults who might previously have died in childhood are now living with long-term conditions. These factors call for a workforce that is capable of meeting such a wide variety of need. This means a more diverse workforce that attracts people from different age groups, that is ethnically diverse and that incorporates members of both genders. This study also demonstrates the attractiveness of the private sector to young workers, perhaps as a stepping stone in their careers. However, the reported lower pay and higher turnover in this part of the social care sector may make retention of such workers problematic. Trends analysis points to a decline in the number of new entrants to the social care sector since 2005, while the demand for social care continues to increase. Such a decline may relate to the introduction of personalisation, or fears about unemployment. However, it is important to follow up this analysis, when there are more returns to the NMDS-SC, in order to establish whether this is a pattern, and then to consider the implications for care work, policy makers, care providers, care workers and users of social care services.

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#### CONFLICTS OF INTEREST

None.

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