Community Integrated Care®

UNFAIR TO CARE 2026

SIGNS OF CHANGE

The road to fair pay is clearer than ever – so can we go the distance?

1. WELCOME

TERESA EXELBY, CHIEF CORPORATE SERVICES & PEOPLE OFFICER AT COMMUNITY INTEGRATED CARE

Community Integrated Care

HELLO AND WELCOME TO THE FIFTH EDITION OF UNFAIR TO CARE.

This year's report is published at a time when there is **a growing sense that meaningful change in social care could be within reach.** There is clear acknowledgement that social care is fundamental to our health and housing systems, and that fairness for the care workforce must sit at the heart of any credible long-term approach.

Five years ago, when we published our first Unfair To Care report, the take-home pay gap between social care support workers and equivalent NHS roles stood at 39%. Since then, it has narrowed steadily. **That progress matters.** It reflects sustained effort across the sector to bring evidence, experience, and realism into the national debate. **However, narrowing the gap is not the same as closing it.**

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As you will see in the pages that follow, **the difference in take-home pay between people doing the same sized roles in social care and the NHS remains substantial - 28.6%, equivalent to £7,048 a year.** For colleagues delivering complex and responsible work every day, fairness is defined not by headline commitments, but by what reaches their bank account at the end of each month. While the direction of travel over five years is positive, the lived experience of the workforce has not yet changed to the degree many had hoped.

SIGNS OF CHANGE

However, there are **signs of change in the national conversation, including a renewed focus on making reform deliverable and lasting.** The policy context is shifting. The Government has committed to introducing a statutory Fair Pay Agreement and the Casey Commission is considering the long-term changes required across adult social care. Together, these developments create a **genuine opportunity to address the structural inequality that has persisted for decades,** and to move closer to a **fair and sustainable settlement for the workforce.**

Yet opportunity alone will not deliver change. Our modelling shows that even under the proposed financial envelope from government for a Fair Pay Agreement, a notable difference in take-home pay would remain between social care support workers and equivalent NHS roles. This distinction is critical. Closing the baseline pay gap is not the same as ensuring parity in take-home pay, and it is take-home pay that shapes financial security, career choices, and workforce stability.

As with previous editions, this report sets out the core data behind the pay gap, and what it means for workforce stability and sustainable services. While this edition does not include individual stories, the lives and experiences behind the numbers are central. **Pay is not an abstract measure, it shapes whether colleagues can stay in the roles they value, and whether people who draw on care can live the best lives possible.**

Here at Community Integrated Care, our new **'Best Lives, Bolder'** strategy (www.bestlivesbolder.co.uk) reflects why this all matters and what we are committed to doing over the next five years to help bring about change. Through our influencing activity we aim to contribute **positively, actively and constructively to national and local debates, bringing forward practical solutions** that strengthen the workforce and improve the quality and sustainability of services. Our focus is on what will make the biggest difference, in reality, for colleagues, for people who draw on support, and for the wider system.

A MOMENT TO DELIVER

This report therefore sits at a point of cautious optimism. There are signs of change and progress to acknowledge. At the same time, there is no certainty that the scale, pace, or sufficiency of action will fully resolve the imbalance between social care and health pay without sustained, long-term investment.

Social care is delivered by skilled professionals exercising judgement, accountability, and compassion every day. If the changes now underway are funded properly and implemented with discipline, there is a genuine opportunity to strengthen workforce stability, support the wider health system, and build a more sustainable future for our sector.

The direction is clearer than it has been for some time. The responsibility now is to ensure that this moment leads to tangible change, and that fairness is delivered fully, not partially.

Community Integrated Care firmly believes in the importance of impartiality and non-partisanship in its work. By adhering to these principles, Community Integrated Care advocates for positive change within the social care sector without allegiance to a specific political ideology or affiliation to a particular party. Throughout the production of this report, Community Integrated Care has remained faithful to these values.

SECTION 1: WELCOME

VIC RAYNER OBE
CEO, NATIONAL CARE FORUM

When the last Unfair To Care report was published a year ago, the adult social care sector and the whole country were uncertain about how the new Labour government's manifesto intentions around employment rights would be implemented. The move towards the first Fair Pay Agreement for care workers signal that a shift in how care work is perceived and remunerated may finally be on the horizon. Combined with the work of the Casey Commission, this is to be welcomed and supported. Indeed, the National Care Forum, together with our members, has been deeply involved in shaping the Government's thinking about how to reach such an agreement and make it work. We support the policy ambitions that underpin the idea of a Fair Pay Agreement, and this year's Unfair To Care report offers practical and essential steps needed to make fair pay a reality.

While the direction of travel set out by the Fair Pay Agreement is positive, the funding currently on the table suggests that a long road lies ahead before care and support workers are truly respected and rewarded at the same levels as their peers employed by the NHS. This lack of parity between roles that essentially require the same skill set means that care workers are not only disadvantaged in their earnings, but also in their ability to envision pathways that could advance their careers. As this year's report shows, social care support workers remain nearly 30% behind equivalent NHS Band 3 roles in take-home pay. The £500m backing for the first Fair Pay Agreement offers a starting point, but significantly more investment will be needed to narrow the gap, stabilise the workforce, and deliver the level of reward that our skilled colleagues deserve.

The absence of any national workforce planning is another missing piece of the puzzle. We do not currently have enough people working in adult social care, and we will need more in the years ahead, with the appropriate skills, remuneration and opportunities for progression. We urge the Government to adopt the Adult Social Care Workforce Strategy, developed by a range of social care organisations, including Skills for Care and the National Care Forum.

This year's report once again demonstrates that the need for action is now. This is a workforce that changes lives, supports communities, and must no longer be a place within which it is unfair to care.

2.

INTRODUCTION

THIS IS THE FIFTH EDITION OF COMMUNITY INTEGRATED CARE'S UNFAIR TO CARE REPORT SERIES[1].

Unfair To Care provides a unique comparison between the pay of adult social care support workers and their equivalents in NHS Band 3 roles, exposing the persistent and unfair disparity between the social care and health systems.

Despite a 6.7% increase in the National Living Wage to £12.21 in 2025/26, this year's research shows no material improvement in the pay gap since last year. Annually, social care support workers still take home 28.6%, or £7,048 a year, less than NHS staff in Band 3 roles.

The pay gap between equivalent social care and NHS workers remains a critical issue, because **low pay is a key driver of the sector's high vacancy levels, poor retention, and high turnover.** These workforce pressures directly **undermine the consistency and quality of care that people rely on to live a full life;** they also create 'hidden' financial and lost output costs for care providers[2]. As shown in previous Unfair To Care reports and reflected in the Government's Impact Assessment of the Fair Pay Agreement[3], **closing that gap would generate a triple win: better lives, cost-effective care, and economic growth[4].**

2025/26 has also brought a new set of financial pressures and structural changes for both social care providers and commissioners, that shape the context for reform.

KEY CHALLENGES:

- A 9% INCREASE IN COSTS TO SOCIAL CARE PROVIDERS DRIVEN BY UNFUNDED INCREASES TO EMPLOYERS' NATIONAL INSURANCE AND THE NATIONAL LIVING WAGE [5].
- LOCAL GOVERNMENT FINANCE REFORMS THAT GIVE COUNCILS GREATER DISCRETION OVER SOME FUNDING, INCREASING COMPETITION FOR SOCIAL CARE WITHIN OVERALL BUDGETS [6].
- FROZEN INCOME TAX AND NATIONAL INSURANCE THRESHOLDS.
- CHANGES TO IMMIGRATION POLICY.

AT THE SAME TIME, THERE ARE IMPORTANT OPPORTUNITIES:

- **A major consultation on how a Fair Pay Agreement for social care will be developed and a financial Impact Assessment of potential options[7].**
- **The launch of the Casey Commission Review of Adult Social Care in England[8].**
- **A new three-year financial settlement for social care spending by local councils[9].**
- **Structural reform in some areas, creating opportunities to simplify commissioning and strengthen local integration.**

1. www.unfairtocare.co.uk
2. Joseph Rowntree Foundation: 'The hidden cost of low pay in the social care sector', March 2026
3. Department of Health and Social Care, Fair Pay Agreement process in adult social care: Impact Assessment, October 2025
4. Unfair To Care - 'The Caring Economy', March 2025
5. HMRC Employer National Insurance contributions and Employment Allowance changes: Impact Assessment, April 2025; and Low Pay Commission, National Living Wage rate for April 2025
6. House of Commons Library, Adult social care funding in England, Research Briefing CBP-7903
7. Department of Health and Social Care, Fair Pay Agreement consultation documents, September 2025
8. Department of Health and Social Care, Independent Commission into Adult Social Care: Terms of Reference, July 2025
9. Ministry of Housing, Communities and Local Government, Local government finance policy statement 2026/27 to 2028/29

Together these challenges and opportunities create an uncertain picture for social care providers, particularly those reliant on public funding.

Unfunded, government-driven cost pressures are making it harder for providers to remain financially sustainable and pay care workers more than the National Living Wage. At the same time, the Casey Commission provides an opportunity to set a clearer long-term direction for adult social care, while questions remain about how individual local authorities will prioritise and fund social care within changing financial frameworks.

There are also significant risks that funding for a Fair Pay Agreement in 2028/29 will not flow fully through to care providers, limiting their ability to meet the costs of a higher mandatory minimum pay rate. Our findings also highlight that improving care consistency and quality through a pay floor above the National Living Wage will require additional investment by providers, particularly in the systems and support needed to recruit and retain staff.

As we look ahead, there is every reason to believe that meaningful change is within our reach. However, the evidence in this report is both a warning and an invitation; a reminder of the urgent work still required, but also a testament to the true value of those who choose a career in care.

2025/26 PAY FACTS AT A GLANCE

In 2025/26, the adult social care sector employed an estimated

1.21M SOCIAL CARE SUPPORT WORKERS > REPRESENTING 75.6% OF A 1.59 MILLION STRONG WORKFORCE.[10]

A SIGNIFICANT 28.6% PAY GAP remained between social care support workers and **their Band 3 NHS counterparts in their take-home pay.**

Low pay continued to fuel workforce instability, contributing to

HIGH TURNOVER (28.5%)

which in turn impacts continuity and quality of care.[11]

THE NATIONAL LIVING WAGE FOR 2025/26 STOOD AT £12.21

Across the whole adult social care workforce, the overall vacancy rate was

7% THREE TIMES HIGHER THAN THE UK-WIDE JOB VACANCY RATE OF 2.3%.[12]

CARE PROVIDERS SAW AN AVERAGE 9% RISE IN OPERATING COSTS IN 2025/26 DUE TO UNFUNDED INCREASES IN EMPLOYER NATIONAL INSURANCE (13.8% TO 15%) AND THE 6.7% UPLIFT IN THE NATIONAL LIVING WAGE TO £12.21.[13]

10. Skills for Care - 'The state of the adult social care sector and workforce in England', October 2025 (latest national report hub)
11. Skills for Care, 'The state of the adult social care sector and workforce in England', October 2025. Vacancy and turnover data based on ASC-WDS returns
12. Skills for Care, The size and structure of the adult social care sector and workforce in England, 2025; and Office for National Statistics, Vacancies and Jobs in the UK, October–December 2025
13. HM Revenue & Customs, Employer National Insurance contributions changes; and Low Pay Commission, National Living Wage rate

WE RECOGNISE THAT PROGRESS WILL NOT HAPPEN OVERNIGHT, NOR WILL IT BE SIMPLE. BUT BY LISTENING TO THOSE WHO WORK IN AND ARE SUPPORTED BY THE SECTOR, CHALLENGING THE STRUCTURES THAT HOLD PEOPLE BACK, AND COMMITTING TO SUSTAINED, PRACTICAL REFORM, WE CAN SHAPE A SOCIAL CARE FUTURE IN WHICH NO ONE FEELS UNSUPPORTED, UNSEEN OR UNDERVALUED.

3.

THE RESEARCH

AT THE CORE OF THE UNFAIR TO CARE CAMPAIGN IS A UNIQUE AND COMPREHENSIVE ANALYSIS COMPARING THE ROLES OF FRONTLINE ADULT SOCIAL CARE SUPPORT WORKERS WITH NHS BAND 3 STAFF.

KORN FERRY

Drawing on the world-renowned **Korn Ferry Hay Method**, this independent evaluation provides a detailed examination of the physical, environmental, and emotional demands placed on frontline social care workers. By assessing each role through a structured, evidence-based framework, it captures the **true scope, skill, responsibility, and complexity of the role and allocates a points score accordingly.**

THIS METHOD OFFERS CLARITY, OBJECTIVITY, AND CONSISTENCY, CREATING A ROBUST FOUNDATION FOR FAIR PAY COMPARISON.

The findings reinforce what the sector has long recognised: the frontline adult social care support worker role is *at least* equivalent in job size to that of an NHS Band 3 worker – and deserves to be valued accordingly.

The report also continues to draw on the National Care Forum's pay benchmarking for the not-for-profit sector. The latest benchmarking referenced in this draft indicates that the average hourly rate for social care workers in England (excluding London) is **£12.60** – the same as the care worker median hourly rate in 2025.[14]

THE THEMES OF KORN FERRY'S ANALYSIS

- Practical/Technical Knowledge
- Planning, Organising, and Integrating Knowledge
- Communication and Influencing Skills

+

- Thinking Environment
- Thinking Challenge

+

- Freedom to Act
- Impact
- Magnitude

= TOTAL JOB SIZE

14. Skills for Care: 'Pay in the adult social care sector in England as at December 2025', published March 2026

4. THE RESULTS – 2025/26

The 2025 National Care Forum pay survey, combined with Korn Ferry's analysis, again highlights the persistent pay gap between social care support workers and their NHS counterparts.

Across the five editions of Unfair To Care, we have seen signs of progress, with the gap narrowing over time. But these changes have been slow, modest and, this year, virtually static compared with 2025's figures. The reality remains the same: people delivering roles of equivalent scope and responsibility in social care continue to be paid significantly and unfairly less than those in the NHS.

THE 2025/2026 GAP

(All figures relate to a 37.5-hour working week)

	SOCIAL CARE	NHS	
BASELINE PAY RATE	Average Support Worker pay† **£24,637**	Average Band 3 NHS base salary mid-point ‡ **£25,768**	**4.6% £1,130 GAP**
TAKE-HOME PAY RATE	Average Support Worker pay† **£24,637**	Mean **'Total Pay'** of NHS Band 3 roles** **£31,685**	**28.6% £7,048 GAP**
TOTAL REWARD PAY	Average Support Worker pay with pension† **£25,376** Inclusive of industry standard 3% pension contribution	Mean **'Total Package'** of NHS Band 3 roles *** **£36,367** Inclusive of pension and other benefits	**43.3% £10,990 GAP**

28.6% **or £7,048 is the total pay rise needed by social care support workers in England to achieve take-home pay parity with their NHS counterparts.****

† **Figures used are average rates of pay for Support Worker roles in England (outside of London) and are based upon the National Care Forum's national pay benchmarking exercise of the not-for-profit sector, October 2025.**

‡ **NHS Agenda for Change Pay Scale for 2025/26 – Band 3 roles.**

** **Mean 'Total Pay': Assumed 3.6% increase in line with pay award from 2025/26 figures**

*** **Mean 'Total Package': Maintained the differential between 'basic pay' and 'Total Package' from 2024/25**

**** **This figure is based on a comparison between the Average Support Worker Pay and the NHS Mean 'Total Pay' and therefore underestimates the extent of the pay gap in real terms by not factoring in entitlements such as pension and sick pay etc. i.e. 'Total Package'.**

THE ANALYSIS MAKES THREE COMPARISONS BETWEEN PAY IN SOCIAL CARE AND THE NHS:

1. BASELINE PAY:

Average support worker pay compared to the **average Band 3 NHS pay mid-point.**

2. TAKE-HOME PAY:

Average support worker pay compared to the mean **'Total Pay'** of NHS Band 3 roles which includes **allowances and additional hours premiums.**

3. TOTAL REWARD:

Average support worker pay (with industry standard 3% pension) compared to the mean **'Total Package'** of NHS Band 3 roles which includes **enhanced pension and other entitlements.**

This three-level comparison is essential because simply comparing baseline pay rates overlooks the reality that NHS staff benefit from access to enhanced pay that extends well beyond the standard hourly rate.

TAKE-HOME PAY IS WHAT MATTERS MOST TO PEOPLE – WHETHER IN SOCIAL CARE OR THE NHS.

When we examine NHS 'Total Pay', it includes additional pay premiums for working unsocial hours, night shifts, weekends, and bank holidays. These working patterns are just as common in social care, yet they rarely come with enhanced rates of pay.

OUR ANALYSIS SHOWS THAT TO ACHIEVE TRUE TAKE-HOME PAY PARITY WITH THEIR NHS BAND 3 COUNTERPARTS IN 2025/26, SOCIAL CARE SUPPORT WORKERS IN ENGLAND WOULD NEED A

↗ £7,048 PAY RISE.

THIS IS ALMOST IDENTICAL TO THE £7,120 IDENTIFIED IN 2024/25, SHOWING THERE HAS BEEN NO MATERIAL CHANGE IN THE UNFAIR TAKE-HOME PAY GAP IN THE PAST 12 MONTHS.

Whilst our Unfair To Care reports have always focused on the take-home pay gap, it must not go unnoted that the total reward package – 'Total Package' – received by NHS staff is even higher when taking into account pension rates and other entitlements, again not available to most social care colleagues, such as sick pay or enhanced maternity/paternity pay.

SCOTLAND

The position is different in Scotland, where social care and the NHS are devolved responsibilities. However, whilst both the NHS and social care workforce have higher base level rates of pay than their English counterparts, **there remains a 15% pay gap between NHS Scotland Band 3 employees and social care workers in Scotland,** when looking at baseline pay rates - much higher than the 4.6% gap in England when comparing the same figures.[15]

AVERAGE SUPPORT WORKER PAY IN SCOTLAND

- Hourly pay †

£12.96

- Annual salary †

£25,341

NHS BASIC PAY BAND 3 MIDPOINT

- Hourly pay

£14.91

- Annual salary

£29,163

15% GAP

£3,822 DIFFERENCE

† **Figures used are average rates of pay for Support Worker roles (Scotland) and are based upon the National Care Forum's national pay benchmarking exercise of the sector, October 2025.**

The May 2026 Scottish Government election provides a crucial opportunity for all political parties in Scotland to make an explicit commitment to improving the services and lives of people with learning disabilities and autistic people. This includes providing fair pay and a clear career structure for Scotland's social care workforce, who deliver the vital support on which people accessing care depend.

Taking action in Scotland this year to invest in social care and close the unfair pay gap would make a massive difference to improving people's lives, delivering cost-effective care, and promoting economic growth across Scotland.

THE FAIR PAY AGREEMENT APPLIED TO THE 2025/2026 PAY FINDINGS

The development of a government-funded Fair Pay Agreement, reviewed and negotiated annually, represents a significant and welcome step for the long-term sustainability of the social care system.

However, its success will depend on sustained and sufficient investment to close the longstanding structural gap between the pay of social care colleagues and their counterparts in the NHS.

For example, the UK Government has indicated that £500 million will be available in 2028/29 to support higher pay in adult social care. In the simplest scenario, where this funding is applied solely to establishing a higher minimum hourly rate for colleagues delivering direct care, government modelling suggests this would equate to an uplift of around 68p per hour above the National Minimum Wage.[16] **Yet, even if this funding had been available in 2025/26 – and we applied that to today's rates of pay – social care colleagues would still be paid 29p per hour less than the NHS baseline rate, a 2.3% difference equating to an annual shortfall of £567.**

It is also vital to highlight that this figure reflects only the base pay gap. The disparity increases considerably when this increase is modelled against take-home pay and total reward.

IN FACT, WHEN LOOKING AT TAKE-HOME PAY, THOSE WORKING IN DIRECT CARE ROLES WOULD STILL BE TAKING HOME £2.92 PER HOUR LESS THAN THEIR NHS EQUIVALENTS.

– THAT'S A 22% DIFFERENCE, EQUATING TO £5,710 LESS IN PAY EACH YEAR. THE UNFAIR PAY GAP REMAINS.

In other words, the gap would narrow, but the unfair pay differential would not be eliminated completely.

One final but significant point, is that the Impact Assessment does not clarify whether the proposed 68p uplift includes or excludes employer on-costs. If employers are expected to absorb these on-costs within the 68p allocation, the amount that ultimately reaches colleagues could reduce to approximately 50p per hour, further diminishing the intended impact of the uplift.

15. We do not have access to the data required to be able to demonstrate the take-home pay gap for Scotland.
16. Department of Health and Social Care, Fair pay agreement process in adult social care: impact assessment (October 2025)

5.

DELIVERING A FAIR PAY AGREEMENT IN SOCIAL CARE

THE GOVERNMENT'S GOALS FOR A FAIR PAY AGREEMENT IN SOCIAL CARE ARE CLEAR: TO IMPROVE WORKFORCE PAY, STABILITY, AND PROFESSIONAL RECOGNITION, AND TO HELP CREATE A SUSTAINABLE, HIGH-QUALITY CARE SYSTEM.

WE ABSOLUTELY SHARE THESE HOPES FOR THE SECTOR.

However, we believe that achieving these goals through the Fair Pay Agreement will require much more than just an intention or an ambition. Practical and fundamental steps are needed to make fair pay a reality, including:

- **Full flow-through of funding** from local councils to care providers, so providers can pay a higher care sector minimum wage in practice, especially as protections on social care budgets change.
- **Funding for employer on-costs,** not only employee take-home pay but also additional National Insurance and pension contributions.
- **No backdating of additional pay** unless the required funding is clearly identified for the period concerned, and passed through, in full and in a timely way.
- **A clear method for determining fee levels that reflect the true cost of care,** alongside the Fair Pay Agreement, to support fairness and efficiency in the care market.
- **Investment in recruitment, training, and retention,** because better pay will only translate into more consistent, higher quality support if providers can strengthen how they attract, develop, and retain colleagues.
- **Clear implementation rules and lead-in time,** so people and providers are not misled about what to expect, when it will arrive, and how it will be funded.

COMMUNITY INTEGRATED CARE HAS SHARED ALL OF THESE RECOMMENDATIONS WITH GOVERNMENT THROUGH OUR SUBMISSIONS TO THE FAIR PAY AGREEMENT CONSULTATION PROCESS AND REPRESENTATIONS TO THE CASEY COMMISSION.

SECTION 5: DELIVERING A FAIR PAY AGREEMENT IN SOCIAL CARE

6.

CONCLUSION

SOCIAL CARE HAS A REAL OPPORTUNITY.

The Casey Commission and the Government's commitment to a statutory Fair Pay Agreement signal an ambition to secure a stronger and fairer deal for the social care workforce. But the 2025/26 evidence is clear: the pay gap has not shifted. Social care support workers remain nearly 30% behind equivalent NHS Band 3 roles in take-home pay, with additional workforce pressures remaining firmly in place.

Over the last four editions of this report, we have laid out the case for fair pay fully, clearly, and with supporting evidence on how it can be a win-win reality. It is essential if social care is to be recognised as the skilled, respected, and future-focused profession the country relies on, economically, socially, and in delivering the outcomes people deserve.

A FAIR, TRANSPARENT PAY FRAMEWORK WILL DELIVER TANGIBLE BENEFITS: A STABLE AND SKILLED WORKFORCE; HIGH-QUALITY, MORE CONSISTENT SUPPORT FOR PEOPLE WHO NEED IT; AND BETTER LONG-TERM VALUE FOR PUBLIC MONEY.

Wider policy decisions risk undermining that ambition. Care England has highlighted that frozen Income Tax and National Insurance thresholds amount to a 'silent pay cut' for the workforce – removing an estimated £1.4 billion from care workers' take-home pay before the Fair Pay Agreement begins in 2028 and increasing employer NI costs in the process.[17] These freezes directly undermine wage reform and weaken the sector's ability to improve living standards.

Immigration policy changes also introduce major risks. The Government's May 2025 announcement to halt international recruitment of care workers, alongside a change to visa thresholds and stricter recruitment requirements[18], are expected to reduce international workers by up to 50,000 a year. With vacancy rates already high and the domestic workforce figures insufficient to meet demand, these restrictions intensify existing recruitment and retention pressures.

17. Care England, Understanding the "silent pay cut", 2025
18. Home Office, Changes to the Health and Care Worker visa route, May 2025; and Skills for Care, The state of the adult social care sector and workforce in England 2025

In addition, upcoming measures in the Employment Rights Act 2025 – a much-welcomed move in raising employment standards for workers – will also create additional operational and cost implications for providers, in a sector already impacted by fragile margins.

The National Living Wage is also rising faster than ever, placing substantial financial strain on providers who are already contending with unfunded cost pressures and long-standing under-reimbursement of care packages. Many providers cannot keep up with escalating wage, tax, and insurance costs, especially where local authority commissioning rates fail to reflect the true cost of care.

With this backdrop, the sector can't wait for the Fair Pay Agreement to take effect. The pressures are real *now.*

To realise the Government's ambition of a stable and sustainable sector, action must start before the Fair Pay Agreement is in place. **The Government should fund interim uplifts in 2026/27 and 2027/28 to narrow the gap, stabilise the workforce, and build momentum towards full implementation.**

Long-term success will then depend on delivery. Funding must flow through in full to providers, including employer on-costs and commissioning practices, and rates must reflect the true cost of care so that fair pay is achievable in practice.

Ongoing, sustained investment will be required to maintain progress and deliver future fair pay agreements year on year.

The destination is within reach, but it will not be reached by default. With timely, committed action, social care can move from fragility to a system that values its workforce, supports people to live their best lives, and delivers the quality, stability, and efficiency that our communities, the NHS, and housing, depend on.

NOW IS THE MOMENT TO ACT.

A FINAL THOUGHT...

"I'm really happy to see that things are starting to change for Support Workers. It feels like people are finally understanding how important they are, and how much of a difference they make in enabling people with support needs to live our lives and do the things we enjoy. That gives me a lot of hope."

"But there's still more to do. Support Workers should be paid fairly and given the support and training they need. I'd also like to see more people with lived experience, like me, have our voices heard. Everyone with a disability deserves great support that helps us live our best lives possible - and I hope that through our Unfair To Care campaign, we can help make that a reality."

TAUSEEF, A PERSON SUPPORTED BY COMMUNITY INTEGRATED CARE IN STOCKPORT

www.UnfairToCare.co.uk

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