Insights from the First Advisory Board Meeting of the Year

Findings from the Care Advisory Board, Feburary 2026

Executive Summary

Adult social care in the UK has reached a point of acute structural fragility. Providers across home care, residential care, and specialist services are facing converging pressures: sustained underfunding, unlawful commissioning practices, workforce exhaustion, regulatory inconsistency, accelerating demand, and significant new employment and training obligations. This paper draws on insights from a Care Advisory Board convened in February 2026, bringing together senior leaders from across the sector. While organisational contexts vary, the challenges described were strikingly consistent. The findings point to a system that is no longer merely under strain but actively undermining its own sustainability. At the same time, the discussion highlighted practical opportunities for reform, particularly through education, empowerment, collaboration, responsible innovation, and fair funding mechanisms that reflect new statutory expectations.

A System Sustained by Non-Compliance

A recurring insight was that the social care system is being kept operational through widespread non-compliance, rather than sustainable funding or lawful practice. Local authority commissioning rates in many areas no longer cover:

- the true cost of delivering care
- compliance with minimum wage and employment law
- safe staffing, training, and supervision
- travel time and continuity of care in domiciliary services

As a result, providers are routinely placed in an impossible position: accept unsafe or unlawful contracts, or withdraw services from vulnerable individuals.

This has created a distorted market in which underfunding becomes normalised, quality is implicitly traded for affordability, and law-complying providers are financially penalised. The system functions not because it is viable, but because providers absorb risk, subsidise services through private income, or quietly reduce standards to survive.

These pressures are now intensifying as employment law reforms increase statutory obligations on employers without corresponding clarity on funding mechanisms.

Commissioning Power and the Erosion of Individual Rights

Another critical insight was the growing imbalance of power between commissioners and providers, with individual rights often becoming collateral damage. As self-funded individuals fall below capital thresholds, there is increasing pressure to:

- Relocate people without lawful assessments
- bypass proper best-interest decision-making
- impose unlawful financial top-ups
- prioritise budgetary constraints over statutory duties

What is particularly concerning is not just the existence of these practices, but how rarely they are challenged. Many providers lack confidence in public law, access to legal understanding, and assurance that challenging decisions will not result in loss of future work.

This environment suppresses challenge and reinforces a culture where unlawful decisions are treated as unavoidable realities rather than breaches of duty.

Fragmentation and the Absence of a Unified Voice

A further insight was the sector's lack of a single, authoritative and unified voice. Unlike other regulated professions, adult social care is represented by multiple associations, overlapping networks, and fragmented lobbying efforts.

This fragmentation weakens the sector's influence and leaves policymakers uncertain about who speaks for care. Smaller providers in particular lack the scale or security to challenge decisions or advocate publicly for reform.

While collaboration among larger providers could be influential, commercial structures, reputational risk, and market fragmentation currently limit collective action.

The Assessment System: A Structural Weakness

The assessment process itself emerged as a major fault line in the system. There is widespread concern that:

- assessments are frequently conducted without proper multidisciplinary input
- decisions are made based on snapshots rather than longitudinal understanding
- providers' knowledge of individuals is undervalued or ignored
- best-interest decisions are treated as administrative steps rather than legal processes

In practice, assessments often fail to reflect established relationships between individuals and carers, emotional and psychological wellbeing, the cumulative impact of disruption and relocation, and the lived experience of care over time.

This not only undermines lawful decision-making, but places social workers and managers in professionally vulnerable positions, carrying responsibility without adequate structural support.

Regulation: Inconsistency as a Risk Factor

Regulatory inconsistency, particularly around registration, inspection frequency, and enforcement, was identified as an additional destabilising factor. Delays in registration, unpredictable decision-making, and long gaps between inspections create:

- barriers to market entry and expansion
- reduced public confidence
- missed opportunities to increase capacity during periods of high demand

A regulatory system intended to provide assurance increasingly contributes to uncertainty for both providers and the public.

Workforce Pressures Are a Funding Problem in Disguise

While workforce challenges are often discussed in isolation, the insights from this board meeting strongly suggest that workforce instability is fundamentally a funding issue. Key realities include:

- Care workers are asked to deliver complex, emotionally demanding work for wages that do not reflect responsibility or skill
- providers struggle to pay for travel time, training, and development
- goodwill and "vocation" are still relied upon to prop up failing models
- employment law changes risk exposing already-fragile business models

Board members highlighted that increased union recognition and access anticipated under the Employment Rights Bill/Act will place additional pressure on providers, many of whom are unprepared for collective negotiation in a context of zero or minimal local authority fee uplifts. Unions are expected to seek improved terms and conditions for members at a time when commissioning rates already fail to meet existing cost pressures.

Further cost and time pressures were identified in relation to mandatory training requirements, including the Oliver McGowan Mandatory Training Part 2 programme. While essential for quality and safety, this represents an additional unfunded burden for employers operating with limited financial headroom.

The consequence of these combined pressures is not only high turnover, but increased risk of closed cultures and environments where staff feel unable to speak up, challenge poor practice, or raise concerns safely. Strong leadership and values-led cultures can mitigate this, but they cannot compensate indefinitely for a system that undervalues care work at a structural level.

Technology and AI: Opportunity With Conditions

New technology, and particularly AI, was viewed with measured optimism rather than hype. There is clear appetite for tools that reduce administrative burden, improve documentation quality, support decision-making rather than replace it, and free up time for care delivery.

However, board members emphasised that digitisation brings its own cost pressures. Technology adoption requires upfront investment, staff training, and time to embed new systems into practice. Many technology providers are still developing their platforms in partnership with care organisations, meaning benefits are often realised only over the medium to long term.

Adoption is further constrained by poor integration between systems, unclear funding routes, concerns around governance, safety, and data ownership, and a lack of independent evidence and sector-wide standards.

The most significant insight is that technology alone will not fix the system, but responsible, well-governed innovation can help providers survive within it if adequately funded.

Employment Rights Reform and Fair Pay Agreements

The anticipated implementation of the Employment Rights Act changes and the Fair Pay Agreement was identified as having potentially profound implications for the sector. Providers broadly support the principles of fair pay, improved conditions, and workforce stability.

However, there is deep concern that without explicit, ring-fenced government funding and robust accountability mechanisms for local authorities, these reforms risk becoming another unfunded mandate. Board members stressed the need for clear assurance that increased employment costs will be fully funded by the central government, local authorities will be held accountable for passing funding through to providers, and funding will not be diverted to address wider budgetary pressures elsewhere.

Without these safeguards, there is a significant risk that well-intentioned reforms could accelerate provider failure and market exit.

What Still Works: Relationships, Dignity, and Purpose

Despite systemic pressures, the discussion surfaced powerful examples of what continues to work well:

- relationship-based care
- values-driven leadership
- personalised wellbeing approaches
- cultures that recognise staff as individuals, not resources

These human-centred practices remain the foundation of quality care. However, they are increasingly at risk in a system that rewards volume, speed, and cost containment over outcomes and dignity

Conclusion

The insights from this Care Advisory Board meeting point to a sector that is resilient, committed, and innovative, however operating within a framework that is no longer fit for purpose. The current model unsustainably depends on provider goodwill, legal grey areas, workforce sacrifice, and quiet non-compliance.

Real progress will require honest recognition of the true cost of care, funding that reflects new statutory employment and training obligations, education and empowerment for providers, lawful and transparent commissioning, stronger collaboration across the sector, safe and effective use of technology, and a renewed commitment to dignity for both the people receiving care and those delivering it.

Without structural change, the risk is not just provider failure, but the erosion of care itself as a credible, respected profession.

With thanks to the Advisory Board:

Ali George
Founder, Arcadia Care Homes

Ameet Kotecha
Managing Director, Boutique Care Homes

Amrit Dhaliwal
CEO, Walfinch

Aneurin Brown
CEO, Hallmark Care Homes

Charles Cross
Chief Operating Officer, Anglian Care

Claire Leake
Chief People Officer, National Care Group

Dan Archer
CEO, Visiting Angels

David Glover
Joint CEO, Caremark

Jacqui Ritchie
Chief Operating Officer, We Care Group & Summit Care Group

Jan Burns MBE
Chair, National Dignity Council

Lauren Lovatt
Deputy Director of Regulation and Quality Improvement, Barchester Healthcare

Lucy Campbell
Chief Executive Officer, Right at Home UK

Lynn Laughland
CEO, HRM Homecare Services

Melanie Weatherley MBE
Chief Executive, Walnut Care at Home

Nadra Ahmed
Co-Chair, National Care Association

Nitesh Somani
CEO & Founder, Kara Healthcare

Prof Graham Stokes
Director of Dementia Care Services, HC-One

Raina Summerson
Group Chief Executive Officer, Agincare

Rob Martin
CEO, Signature Senior Lifestyle

Sam Monaghan
Chief Executive, Methodist Homes (MHA)

Sarah Sabater
Chief Executive Officer, CareYourWay

Sophie Chester-Glyn
Director, CoProduceCare / Manor Community

Stuart Callister
Director, Severn Vale Home Care

Upcoming Events

Care Roadshow South

Epsom Downs Racecourse, 13th October 2026

Care Roadshow Yorkshire

Elland Road Stadium, 3rd November 2026

Care Roadshow Wales

Cardiff City Stadium, 10th November 2026