

# **Adult Social Care Outcomes Toolkit Workforce (ASCOT- Workforce) guidance**

Ann-Marie Towers, Stacey Rand, Stephen Allan  
and Elizabeth Welch

Version 2.0

September 2025

## Table of Contents

About ASCOT-Workforce .....	3
ASCOT-Workforce CWRQoL explained .....	3
ASCOT-Workforce domains .....	3
Understanding the ASCOT-Workforce outcome states.....	5
Scoring the ASCOT-Workforce .....	6
How do I obtain permission to use ASCOT-Carer SCT4? .....	6
References .....	7

## **Disclaimer and Acknowledgement**

This guidance is based on independent research commissioned and funded by the Department of Health and Social Care (C114300). The views expressed are those of the author(s) and not necessarily those of the Department of Health and Social Care.

## About ASCOT-Workforce

The ASCOT-Workforce is a self-completion questionnaire designed to measure the care work-related quality of life (CWRQoL) of people working in adult social care (e.g. care workers, managers, social workers, nurses, occupational therapists, personal assistants). It is designed to be self-completed by the person whose CWRQoL you would like to measure.

## ASCOT-Workforce CWRQoL explained

CWRQoL refers to the aspects of work-related quality of life that are most relevant and meaningful to people working in adult social care. The tool measures an individual's CWRQoL at the time of completing the questionnaire. An overall CWRQoL score can be calculated for each person, as long as they have answered all of the questions.

Further information about the scoring can be found in the [Scoring ASCOT-Workforce](#) section below.

## ASCOT-Workforce domains

The measure is comprised of 13 questions, one for each domain of CWRQoL. These domains were based on previous consultations with the adult social care workforce and sector representatives (Hussein et al, 2022; Towers et al, 2022) and an international scoping review (Silarova et al, 2022). The theoretical framework that underpins all ASCOT measures (Netten et al, 2012) informed the drafting of the questions for each of these domains. Focus groups and cognitive interviews with people working in social care refined the domains, which were then reviewed by the ASCOT development team and an Expert Reference Group appointed by the Department of Health and Social Care (Blake et al, 2025). The measure was then piloted with over 7,000 people working in different roles in adult social care in England and the data used to explore the measure's psychometric properties (Blake et al, 2025). The definitions for each of the domains are shown in Table 1 below.

Table 1: Definitions of the ASCOT-Workforce domains

ASCOT-Workforce domain		Definition
1	Making a difference	Person feels they are making a difference to the lives of the people they support.
2	Relationships with people drawing on care and support	Person feels they have a positive working relationship with people drawing on care and support.
3	Autonomy	Person feels they have autonomy within their job role.
4	Time to care	Person feels they have the time they need to do their job.
5	Worrying about work	The extent to which person worries about work during non-work hours.
6	Self-care	Person feels able to look after themselves at work.
7	Feeling safe at work	Person feels safe from physical and psychological harm at work.
8	Professional working relationships	Person feels they have good working relationships with colleagues, unpaid carers and other health and social care professionals.
9	Supported by managers	Person feels supported by their manager(s).
10	Skills and knowledge	The extent to which the person feels they have the skills and knowledge to do their job well.
11	Career pathway	Person feels they have opportunities to advance their career in social care.
12	Financial security	Person feels they have an adequate and reliable income.
13	Valued by Society	Person feels that they work in a role that is valued by society.

## Understanding the ASCOT-Workforce outcome states

Each question has four response options, relating to four outcome states. The outcome states are shown in Table 2 below.

**Table 2: Definitions of ASCOT-Workforce outcomes states**

Outcome state	Definition
Ideal	The individual feels that their wishes and preferences are being fully met in this domain. Their care work-related QoL in this domain is as they want it to be.
No unmet needs	The individual feels that their care work-related QoL is acceptable in this domain.
Some unmet needs	The individual has less-than-adequate care work-related QoL in this domain.
High-level unmet needs	The individual feels their care work-related QoL is unacceptable in this domain. There may be mental or physical health implications for the person, if the issue(s) are not addressed.

The respondent does not need to understand the four outcome states to answer the questions. We have conceptualised these states into response options for each domain. The respondent is asked to choose the statement that best fits their experience by ticking the box next to that option. Some questions have an additional sentence to aid understanding. An example from the *Time to Care* domain is shown in Box 1 below.

### Box 1. An example question (Time to Care domain)

**Thinking about the time you need to do your job well, which of the following statements best describes how you feel?**

*Please think about the all of the tasks you are required to do within your role and your ability to do them well within paid hours. Depending on your role, this might include direct care and support, paperwork, supervision and management.*

**Please tick (✓) one box**

I have the time I need	<input type="checkbox"/>
I have adequate time	<input type="checkbox"/>
I do not have enough time	<input type="checkbox"/>
I do not have enough time to do my job well and it is having a negative effect on me.	<input type="checkbox"/>

## Scoring the ASCOT-Workforce

Where possible, all questions should be completed. All domains were identified as meaningful and important to the adult social care workforce and the scale has acceptable psychometric properties (Blake et al, 2025). Ongoing work is developing a 'short' version of the tool and future work will develop preference weights for the measure to enable its use in economic evaluation.

In each domain, until preference weights are available, please apply the following scores: 0 (high unmet needs), 1 (some unmet needs), 2 (no unmet needs), 3 (ideal state). These item scores can then be summed to create an overall score ranging from 0-39, with higher scores indicating better CWRQoL.

## How do I obtain permission to use ASCOT-Workforce?

You need to complete a licensing form on the web page below. Please complete the correct form, whether **for-profit** or **not-for-profit**.

<https://research.kent.ac.uk/ascot/licensing/>

ASCOT-Carer INT4 is free of charge for **not-for-profit** use but a licence is required. You will receive the ASCOT tool automatically, once you have submitted your form. If you are applying for a licence to use ASCOT-Carer INT4 in a **for-profit** capacity, the application will be reviewed and someone from the University of Kent will contact you.

## References

- Hussein, S., Towers, A. M., Palmer, S., Brookes, N., Silarova, B., & Mäkelä, P. (2022). Developing a Scale of Care Work-Related Quality of Life (CWRQoL) for Long-Term Care Workers in England. *International Journal of Environmental Research and Public Health*, 19(2). <https://doi.org/10.3390/ijerph19020945>
- Blake, Lambert, Gregory et al (2025). The adult social care workforce and their work-related quality of life. Findings on work related quality of life and wellbeing – wave 1. IPSOS, London, UK. <https://assets.publishing.service.gov.uk/media/67b89470b3a80ad63e782c38/Adult-social-care-workforce-survey-main-findings-report-february-2025.pdf>
- Netten A, Burge P, Malley J, Potoglou D, Towers A, Brazier J, Flynn T, Forder J, Wall B (2012) Outcomes of Social Care for Adults: Developing a Preference-Weighted Measure, *Health Technology Assessment*, 16, 16, 1-165. DOI: <http://dx.doi.org/10.3310/hta16160>
- Silarova, B., Brookes, N., Palmer, S., Towers, A. M., & Hussein, S. (2022). Understanding and measuring the work-related quality of life among those working in adult social care: A scoping review. In *Health and Social Care in the Community* (Vol. 30, Issue 5, pp. 1637–1664). <https://doi.org/10.1111/hsc.13718>
- Towers, A., Palmer, S., Brookes, N., Markham, S., Salisbury, H., Silarova, B., Mäkelä, P., Hussein, S. (2022). Quality of life at work: what it means for the adult social care workforce in England and recommendations for actions. Sector Guide, University of Kent, UK. [www.pssru.ac.uk/ascotforstaff/files/2022/03/Quality-of-Life-at-Work\\_Sector-Guide.pdf](http://www.pssru.ac.uk/ascotforstaff/files/2022/03/Quality-of-Life-at-Work_Sector-Guide.pdf)