Buckinghamshire County Council

Market Position Statement

Specialised Housing for Vulnerable Adults

Update and recommendations report
March 2015

Introduction

The original Market Position Statement (MPS), published in February 2014, was written to present a general understanding of specialised housings supply, need and demand in Buckinghamshire. Buckinghamshire County Council (BCC) has a significant market share in specialist accommodation and plays an essential role in com-missioning and directing provision.

The MPS, however, is not limited to an introspective local authority view but is a consideration for all those in need in the county.

The population of Buckinghamshire is growing and aging at an above-average rate. The original MPS provides strategic direction and a measured prediction of what was needed, so all interested stakeholders can collaborate to take action early on.

Making predictions of housing need cannot be an exact science, especially as it is influenced by both local and national factors that will change each year. This update comes just over a year since the original provision measurements were made, and shows in some detail the extent to which the targets set are being met. Based on this detailed examination of supply, pipeline and demand, it also makes recommendations of what more needs to be considered in the future.

Executive Summary

Older People

BCC Adults and Family Wellbeing (A&FW) purchase just over 1260 older people's nursing and residential beds, with a roughly 50:50 split between both types. We also purchase 41 places in extra care. The average market share for the whole county is 31 per cent down from 38 per cent in 2013, due to new developments not yet taking on A&FW clients.

2013/14 was a strong year for development with two new residential care homes, four new nursing homes and one residential/nursing home opening. Several care homes have also had extensions, increasing capacity even further. This means the market is responding positively to increasing demand.

This report addresses the risk of residential care being favoured over nursing care by developers, when we have an increasing need for more nursing capacity. It supports the development of additional nursing care and suggests expanding our market share in areas where we have recently made progress, such as South Bucks.

Other recommendations made in the report are for A&FW to encourage objectives around Older Peoples Mental Health (EMI) provision. Out of the six new care accommodations in the pipeline at the time of this report, only three have explicitly stated that they will provide for EMI clients. Evidence suggests the prevalence of dementia will increase in Buckinghamshire, particularly as more people live beyond the age of 85.

Learning Disabilities (LD)

A&FW purchase 283 residential placements, of which just under half (129) are recorded as being out of county (OOC). A similar number of supported living placements (290) are made with 15 of these being recorded as purchased out of county.

2014 is the first year in which supported living placements have outnumbered residential care placements, a positive sign for the service area's aim to move clients to more independent accommodation where appropriate.

A&FW has almost total market share in most areas. Since LD has very few self-funders, it can be assumed that the majority of 'gaps' are health clients, voids or clients from other local authorities. Three buildings with 23 supported living units between them have opened since 2013. This shows that the objectives set out in the market position statement (MPS) are currently being met.

This report recommends that LD provision continues to be distributed widely across the county, instead of focusing heavily on large urban areas. While these offer advantages to some clients, for others a quieter and more spacious area may suit their needs better; particularly clients with autism or challenging behaviour. Specialised housing for these client groups in particular is lacking in Buckinghamshire.

A 'generation gap' is developing in LD services as older and younger clients and their families show very different needs and expectations. The market is already responding to this, but A&FW is in a position to give direction to solving this issue in the long term.

Mental Health (MH)

AFW purchase 89 supported living places of which eight are recorded as out of county placements; 30 residential care beds of which 16 are recorded as out of county placements; and seven nursing care beds of which only two are within the county. This shows that the objectives set in the MPS are currently being met.

The MH team report that there is currently no demand for more MH specialised accommodation. What would most benefit clients in and out of the county is liaison on their behalf with general housing providers for when they transition to mainstream housing, so that the new environment is safe and welcoming to them.

The extra care units at the Elms in Aylesbury have proven very beneficial for the mental health clients who live there. The level of care provided gives them the right combination of independence and support particularly as they enter old age. Extra care is therefore a recommended option for future MH accommodation. There is potential for expansion of extra care accommodation in the south of county.

Physical and Sensory Disabilities (PSD)

Currently BCC purchases 26 nursing placements of which eight are recorded as out of county, 59 residential places of which 23 are recorded as out of county and 19 supported living placements of which six are recorded as out of county placements. Some PSD clients have been integrated into supported living with LD and MH clients.

Supply has changed little since 2013. There are currently no pending or permitted applications for development in this area. Since it is an area with comparatively low demand this does not yet give cause for major concern, but it is important that this does not slip from the agenda and that developers are influenced to take interest. Inappropriate accommodation placement could have a damaging effect on clients' wellbeing.

This report supports the idea of an 'Adapted Housing Register' that would effectively 'recycle' home adaptations once previous occupiers move on. This has the potential to save money and time, and supports clients to maintain their independence. This would benefit not only PSD clients but also OP and LD clients who might need home adaptations.

Older People

Demand – BCC consumption (August 2014)

Buckinghamshire AFW currently block purchase 472 residential and nursing beds for older people[1].

This comprises:

- 161 nursing beds made up of 101 nursing and 60 mentally frail nursing beds.
- 331 residential beds made up of:
    - 145 residential beds
    - 174 mentally frail residential beds
    - 12 temporary and respite beds made up from seven respite and five mentally frail respite beds.

Currently A&FW is purchasing just over 1260 older people's residential and nursing care beds split roughly 50:50 between residential and nursing[2]. Of these around 170 are purchased out of the county.

[1]Infoview/Adult Social Care/Contracts/my life my home board report (1)
[2]Infoview/Adult Social Care/Contracts/Clients with Placements ALLv2

The following tables show the split of current purchasing for older people and EMI (Elderly Mentally Infirm) and extra care purchasing for OPMH.

This information was sourced from BCC A&FW client management system where there is potential for some category overlap between EMI and OPMH around residential and nursing care. This is because both may be labelled as mentally frail. However, since the majority of these care homes are registered for dementia clients, and historically there has been very little mental health nursing provision in the county, it is likely these placements are EMI.

Overall OP/EMI/OPMH provision

OP		
Provision Type	In County	Client Count
Nursing	No	**47**
	Yes	**415**
	Aylesbury Vale District	**191**
	Buckingham	30
	Greater Aylesbury	102
	Haddenham and Long Crendon	1
	Wendover	58
	Chiltern District	**22**
	Chesham	15
	The Chalfonts	7
	South Bucks District	**51**
	Beeches	40
	Gerrard's Cross	9
	Wexham and Ivers	2
	Wycombe District	**151**
	Chepping Wye Valley	63
	High Wycombe	60
	North West Chilterns	28
	Total	**461**

Overall OP/EMI/OPMH provision (cont...d)

Residential	No	**38**
	Yes	**275**
	Aylesbury Vale District	**94**
	Buckingham	5
	Great Brickhill, Wing, Ivinghoe	28
	Greater Aylesbury	37
	Haddenham and Long Crendon	7
	Wendover	5
	Winslow	12
	Chiltern District	**91**
	Amersham	45
	The Chalfonts	5
	Chesham	13
	The Missendens	28
	South Bucks District	**25**
	Beaconsfield	5
	Beeches	16
	Gerrard's Cross	4
	Wycombe District	**65**
	Chepping Wye Valley	18
	High Wycombe	13
	North West Chilterns	21
	South West Chilterns	13
	Total	**319**
Extra Care	No	**0**
	Yes	**33**
	Aylesbury Vale District	**16**
	Greater Aylesbury	8
	Winslow	8
	Wycombe District	**17**
	Chepping Wye Valley	10
	High Wycombe	7
	Total	**33**

EMI		
Provision Type	In County	Client Count
Nursing	No	**54**
	Yes	**154**
	Aylesbury Vale District	**88**
	Buckingham	14
	Greater Aylesbury	29
	Haddenham and Long Crendon	4
	Wendover	41
	Chiltern District	**8**
	Chesham	5
	The Chalfonts	3
	South Bucks District	**25**
	Beeches	14
	Wexham and Ivers	11
	Wycombe District	**33**
	Chepping Wye Valley	2
	High Wycombe	31
	Total	**208**
Residential	No	**29**
	Yes	**265**
	Aylesbury Vale District	**82**
	Buckingham	11
	Great Brickhill, Wing, Ivinghoe	13
	Greater Aylesbury	37
	Haddenham and Long Crendon	3
	Wendover	6
	Winslow	12
	Chiltern District	**56**
	Amersham	22
	The Chalfonts	5
	Chesham	18
	The Missendens	11
	South Bucks District	**27**
	Beaconsfield	3
	Beeches	19
	Gerrards Cross	2
	Wexham and Ivers	3
	Wycombe District	**100**
	Chepping Wye Valley	2
	High Wycombe	54
	North West Chilterns	30
	South West Chilterns	14
	Total	**294**

OPMH		
Provision Type	In County	Client Count
Extra Care	No	**0**
	Yes	**17**
	Aylesbury Vale District	**14**
	Greater Aylesbury	13
	Winslow	1
	Wycombe District	**3**
	Chepping Wye Valley	1
	High Wycombe	2
	Total	**17**

Supply – Current market: older people[3]

In Buckinghamshire there are, according to CQC registration, 33 nursing care homes for older people offering 1,885 places. Of these, 18 are registered for dementia, offering a total of 1,237 places. There is one additional nursing home with a main focus on dementia, offering 30 places. There are 45 care homes without nursing offering 1,571 places and of these 25 are registered with CQC for dementia, offering a total of 1,062 places. There are also two joint residential and nursing homes offering a further 131 places. One of these is registered for dementia, with 78 places.

There are four BCC used extra care accommodation blocks in county currently providing accommodation for older people with a total of 48 spaces between them, 41 of which are occupied by BCC clients who it can be assumed are all older people, though one is registered for physical disability and two are registered for mental health. We also have one extra care block exclusively for mental health, in which 17 clients are older people.

[3]Quarterly Supply Report, based on care group, care type, CCG, district and local area, derived from CQC: [Quarterly Supply Report v1.xls]

Between summer 2013, when the original Market Position Statement was written, and September 2014, when this update was made, two residential care homes have closed, resulting in a loss of 66 places[4]. One nursing care home has also closed, resulting in a loss of 41 places. Two residential homes, with a combination of 122 places, and four nursing homes with a combination of 287 places, have opened recently[5]. Five residential care homes have had extensions and increased capacity, resulting in increased provision of 63 places, and one nursing home has had an extension of six places. Finally, a nursing/residential home has recently opened with 78 places. This results in a total increase in provision of 443 spaces.

Supply – Current market: EMI

All three of the nursing care homes that opened last year are registered for dementia, and one of the two residential care homes that opened last year is registered for dementia, increasing potential capacity by 225 nursing places and 94 nursing places.

Planning4Care estimates that out of approximately 4,900 older people in Buckinghamshire with high social care needs, 2,670 have severe functional disability due to a cognitive impairment such as dementia. Our current dementia provision is a maximum of 2,521 spaces, though as mentioned above, all but 30 of these are also registered for older people.

In the table on the next page, the residential/nursing homes have both been categorised as nursing. This table does not include the 48 Extra Care spaces.

[4]AFW Contracts Team

[5]District Council planning websites, developers, CQC

Overall OP/EMI Supply:

Care Type	Location	Overall number of beds (2013)	Overall number of beds (2014)
Nursing	**Aylesbury Vale District**	**857**	**917**
	Buckingham	85	145
	Greater Aylesbury	396	396
	Haddenham and Long Crendon	110	110
	Wendover	266	266
	Chiltern District	**148**	**216**
	The Chalfonts	148	154
	Chesham	0	62
	South Bucks District	**309**	**279**
	Beeches	186	186
	Gerrards Cross	83	53
	Wexham and Ivers	40	40
	Wycombe District	**432**	**634**
	Chepping Wye Valley	145	145
	High Wycombe	204	279
	North West Chilterns	83	132
	South West Chilterns	0	78
	Total	**1746**	**2046**
Residential	**Aylesbury Vale District**	**322**	**363**
	Buckingham	23	23
	Great Brickhill, Wing & Ivinghoe	103	130
	Greater Aylesbury	109	109
	Haddenham and Long Crendon	35	49
	Wendover	20	20
	Winslow	32	32
	Chiltern District	**467**	**465**
	Amersham	161	161
	The Chalfonts	50	78
	Chesham	80	86
	The Missendens	176	140
	South Bucks District	**323**	**323**
	Beaconsfield	153	153
	Beeches	83	83
	Gerrards Cross	87	87
	Wycombe District	**310**	**420**
	Chepping Wye Valley	22	22
	High Wycombe	114	224
	North West Chilterns	102	102
	South West Chilterns	72	72
	Total	**1421**	**1571**
	Total	**3167**	**3617**

Overall Older People Supply is identified as a total of 3,665 spaces.

The largest increase of supply has been in Wycombe District and the local area of High Wycombe, which is of course one of the most populous areas of the county, it also has the largest planned developments in the pipeline.

The local area of Buckingham has also seen considerable proportional increase in supply. The only area which has seen a decrease in provision as a whole has been South Bucks, with the closure of a 30-bed residential care home in Gerrards Cross.

Planning4Care estimates the level of moderate and high social care needs in each area. The only local area which does not currently have enough proportional supply according to this estimate is Waddesdon, which has no provision for older people.

BCC A&FW market share consumption:

Contrasting AFW purchased care with county provision indicates that AFW use of older people residential and nursing care, including accounts for (not including out of county placements) 589 out of 1,885 nursing placements (this includes 98 residential placements in nursing homes) and 463 out of 1,571 non-nursing placements. We also occupy 25 out of 131 of the joint nursing-residential beds, seven out of 30 spaces in the specialist dementia nursing home, and 41 out of 48 extra care places.

In total AFW purchases around 1,125 of the 3,665 places available, including extra care places.

The Buckinghamshire older people market is provided by over 80 establishments including extra care. According to CQC figures there are 14 homes with under 20 beds, 27 with 20-40 beds, 18 with 40-60 beds, 15 with 60-80 beds and eight with 80-120 beds.

BCC A&FW overall market share:

A&FW's average market share has gone from approximately 38 per cent in 2013 to 31 per cent in 2014. This is partly due to large new developments such as Chiltern Grange in High Wycombe, not currently being accessed by A&FW clients.

We have experienced the largest loss of percentage of market share in Buckingham, Chesham and High Wycombe: the areas of new developments. We have gained market share in Beeches, Gerrards Cross, the Missendens, Haddenham and Long Crendon, North West Chilterns, Wexham and Ivers.

Local areas where we have had a low market share since at least 2013 are Beaconsfield, the Chalfonts, the Missendens and Haddenham and Long Crendon. As demonstrated below in the pipeline section, the Chalfonts are a major growth area in the residential and nursing care sector and so it is concerning that we do not yet occupy more of the market there.

The previous Market Position statement proposed that to meet overall demand AFW would require a market share of 40 per cent, which is likely to increase with the Care Act.

Client and provision purchase growth patterns:

The apparent large increase in provision for EMI can be accounted for by the fact that this update measures EMI placements in all care homes, not only those in homes specialised in dementia as in the previous Market Position Statement. This has caused the corresponding data for Older People (not EMI) to appear to go down significantly. The total provision table shows that provision as a whole has grown in the past year.

All Older People purchasing:

Type	In County	12/13	13/14
Nursing	No	91	100
	Yes	516	569
	Total	**607**	**669**
Residential	No	87	73
	Yes	513	540
	Total	**600**	**613**
Total		**1207**	**1275**

Older People (not EMI)

Type	In County	09/10	10/11	11/12	12/13	13/14
Nursing	No	156	149	70	69	48
	Yes	262	304	387	448	415
	Total	**418**	**453**	**457**	**517**	**463**
Residential	No	141	103	72	73	44
	Yes	390	385	419	431	275
	Total	**531**	**488**	**491**	**504**	**319**
Total		**949**	**941**	**948**	**1021**	**782**

Older People (EMI)

Type	In County	12/13	13/14
Nursing	No	22	54
	Yes	68	154
	Total	**90**	**208**
Residential	No	14	29
	Yes	82	265
	Total	**96**	**294**
Total		**186**	**505**

Pipeline developments

Planning applications currently in planning pipeline across the county for residential and nursing developments provide a potential additional 300 nursing/residential care beds over the next two to five years, with 28 more residential units than nursing.

One nursing home and two residential homes (one already existing, pending an extension of five spaces) have stated that they will cater for dementia clients.

There are also pending applications for 169 extra care units, including 30 specialist dementia units. This table details only those applications which have full planning permission from the district councils, though there may be other developments known to A&FW or in the sectors which have not yet reached this stage.

Pipeline developments

Type	District and Local Area	No. of beds
Nursing	**Chiltern District**	**64**
	The Chalfonts	64
	Wycombe District	**72**
	South West Chilterns	72
	Total	**136**
Residential	**Aylesbury Vale District**	**64**
	Greater Aylesbury	64
	Chiltern District	**90**
	Amersham	25
	The Chalfonts	65
	South Bucks	**5**
	Gerrards Cross	5
	Wycombe District	**5**
	North West Chilterns	5
	Total	**164**
	Wycombe District	**169**
	High Wycombe	169
	Total	**169**
Total		**469**

Need - future accommodation objectives and recommendations

Current objectives and progress:

Including the known pipeline, it is predicted that 2,000 additional residential, nursing, extra care placements by 2035 are required, 800 of which will be commissioned by AFW and 1,200 for the self-funder market[6].

Based on current average size of existing provider availability (approx. 40 units/ provider) this relates to about just over two developments per year across the county.

[6]Older People: Planning4care-Buckinghamshire-OlderPeople-FINAL-20May2013.doc

The evidence in its totality suggests that we are currently making good progress towards meeting objectives, though we do not currently have the 40 per cent market share this objective requires. This is largely due to imbalance caused by new developments in recent months, and the picture may look different again in 2015. Nonetheless, in order to keep up progress on the objectives, A&FW will need to work with providers to make sure our clients are accepted into these new developments.

Residential care homes have also featured in recent planning applications for large urban developments, which is a sign that it is recognised as essential in the future of Buckinghamshire. These applications however tend to spend years in planning /development processes and so it is difficult to rely on these developments to meet short-term future demand.

District-based objectives:

Breaking down the supply data by local area offers the advantage of seeing how supply is distributed across the county.

Planning4Care's scenario for predicting the level of residential care needed in each area assumes that roughly 13 per cent of all older people with social care needs will require residential care in future; if there will be 39,600 older people with social care needs by 2033, we will require 5100 units of residential care, which rounds down to 2000 new units in the next 20 years, or 100 per year, and is the assumption A&FW are currently using.

Based on this, we can make the following assumptions for each district, and observe how the target is being met.

District	65+ population with any social care need (2013)	65+ population with any social care need (2033)	Number of units 2013	Number of units required 2033 (= 13% of no. with social care need with 2:1 ratio)	Units per year (=no. of units required – total units 2013 ÷ 20)	Units gained 2014
Aylesbury Vale	7,830	14,500	1,179 (857 nurs, 322 res)	1885 (1256 nurs, 628 res)	35 (20 nurs, 15 res)	60 nurs, 41 res
Chiltern	4,420	6,560	615 (148 nurs, 467 res)	852 (568 nurs, 284 res)	21 nurs	68 nurs, 2 res
South Bucks	3,310	5,420	632 (309 nurs, 323 res)	705 (470 nurs, 235 res)	8 nurs	-30 res
Wycombe	8,260	12,900	752 (432 nurs, 310 res)	1677 (1118 nurs, 559 res)	46 (34 nurs, 12 res)	202 nurs, 110 res

This suggests that development targets are being met in almost all areas, though in Wycombe especially we can observe that residential development is higher than is proportionally required.

Objective setting evaluation

The targets set by the original MPS are based on the projections by Planning4Care, which project a number of scenarios for increased population growth. Since Buckinghamshire is a growth area, it is necessary to consider how projections change in the event of particularly high or low population growth and/or increase in life expectancy.

This document contains adjustment to the projections based on this; for example, in the 'Higher' scenario which assumes a high birth rate, high life expectancy and population growth, we would require not 100 but 121 new units a year.

This report raises questions regarding initial population projections. There is not space here to do a full statistical evaluation of population projects currently available. However, to give an example for comparison, Buckinghamshire County Council's research team estimate an increase in the 65+ population in the county of 39 per cent by 2026, while Planning4Care original estimates were more conservative at a 23 per cent increase by 2023.

In numerical terms, the difference is over 7,000 more people. This is higher than even the 'Higher' scenario established by Planning4Care and so the implications are large from a commissioning perspective. Both sources readily acknowledge that population estimates are very variable and so they make alterations to their predictions on a regular basis. There are a number of local and regional factors which will influence what we actually see, and in either case, development is currently progressing at a mostly satisfactory rate. Further work will be required with the next MPS to revisit and clarify population growth projections and impacts.

Nursing capacity and commissioning recommendations

Even apart from current population projections, it is undeniable that there is a continuing problem with capacity of nursing care spaces in the county. Nursing spaces currently outweigh residential spaces but, at the time of writing, there is already a growing problem with finding available spaces for AFW clients. Nursing places only outweigh residential places in Aylesbury Vale and Wycombe districts, and some local areas, such as Amersham, have no nursing provision at all.

The current pipeline of permitted developments shows a gap between development of residential and nursing care, particularly as some nursing developments, such as Cliveden Manor, openly accept residential clients, and so cannot be guaranteed to support nursing capacity. Nursing spaces will continue to outweigh residential and extra care spaces even with the planned developments in place, but if residential care developments continue to be more popular with developers, we run a risk of unbalanced provision.

The original Market Position Statement stated that due to factors such as increasing life expectancy and prevalence of conditions such as dementia, nursing care spaces would need to outweigh residential and extra care spaces at a proportion of 2:1.

There is currently work underway looking at nursing capacity exploring several options, including piloting a domiciliary care substitute, strengthening our purchasing arrangements and commissioning a further nursing block.

South Bucks is the only district which has seen no growth of provision of any kind in the past year, and there are no pending or accepted planning applications for development in the area apart from a small extension of a pre-existing care home, which does not cater for dementia. This suggests that developer interest in the area is low. It is mainly a rural area and to a certain extent this is justifiable, but in the interest of person-centred planning, this lack of growth is concerning for the population of the area. The 65+ population of South Bucks is expected to increase by 52 per cent, higher than Wycombe or Chiltern districts.

Furthermore, Chiltern District is seeing a lot of growth, especially in the area of the Chalfonts where the Epilepsy Society sites are subject to demolition and conversion. Nonetheless our market share in the district has gone to 29 per cent in 2014, largely due to low share in new developments.

The evidence suggests that an ideal area for new development would be Amersham. It is situated in a growth area for the sector and has one of the largest populations of all the local areas of Buckinghamshire. It also currently has no nursing provision.

The Care Act

We have yet to fully understand the effect that the Care Act will have on the care market and providers.

The Planning4Care predictions are based on Buckinghamshire's previous market share and role, which will dramatically change under the Care Act. As we better understand the implications of this, it will be necessary to re-evaluate the Market Position Statement for this reason.

Process tracking

Full closure is relatively rare in the care home sector; even closures seen in 2014 were conversions which allowed residents to transfer easily to a new replacement setting. Nonetheless, a process needs to be in place for all stakeholders to be informed in some way of care home closures, even those which are entirely private. This will give a wider understanding of the health of the market and how overall demand in the county is met.

The Care Act may also put providers under increased financial strain, which makes this insight even more necessary to the ongoing commissioning process.

EMI

Out of the six new care accommodations in the pipeline, only three have explicitly stated that they will provide for EMI clients. EMI provision will be even more important in the future than it is currently. A number of sources predict an increase in prevalence of dementia; for example, the Alzheimer's Society[7] predicts that dementia prevalence will more than double in the next forty years if research and treatment does not make a breakthrough. In Buckinghamshire, prevalence is predicted to increase by 87 per cent in the next twenty years. An additional risk factor is the increasing 85+ population in Buckinghamshire, expected to increase by 140 per cent by 2033. Though dementia can set in before the age of 65, prevalence increases proportionally to age.

This report highlights the importance of our EMI provision in the county, new targets are needed to set to meet this future need, and new developments of all care types, including Extra Care, are encouraged to make specialised provision for dementia.

[7] The Alzheimer's Society 2014 Infographic (showing future prevalence of dementia)

Learning Disabilities

Demand- BCC Consumption (August 2014)

We currently block contract 186 residential and supported living placements for learning disability clients. This is made up of 135 supported living placements (across establishments), 49 residential placements and two temporary and respite beds.

BCC is currently purchasing 283 residential placements, of which just under half (129) are recorded as being out of county (OOC), a similar number of supported living placements (290) are made with 15 of these being recorded as purchased out of county.

The table below shows current BCC purchasing for clients with learning disabilities.

LD		
Provision Type	In County	Client Count
Nursing	No	**5**
	Yes	**5**
	Aylesbury Vale District	**3**
	Greater Aylesbury	3
	Chiltern District	**2**
	The Chalfonts	2
	Total	**11**

continued on next page ...

Provision Type	In County	Client count
Residential	No	**129**
	Yes	**154**
	Aylesbury Vale District	**78**
	Buckingham	8
	Great Brickhill, Wing and Ivinghoe	4
	Greater Aylesbury	28
	Haddenham and Long Crendon	4
	Wendover	11
	Winslow	23
	Chiltern District	**22**
	Amersham	11
	The Chalfonts	2
	Chesham	7
	The Missendens	2
	South Bucks District	**13**
	Beeches	6
	Gerrards Cross	7
	Wycombe District	**41**
	Chepping Wye Valley	19
	High Wycombe	14
	South West Chilterns	8
	Total	**283**
Supported Living	No	**15**
	Yes	**275**
	Aylesbury Vale District	**113**
	Buckingham	9
	Great Brickhill, Wing and Ivinghoe	10
	Greater Aylesbury	78
	Waddesdon	7
	Winslow	9
	Chiltern District	**39**
	Amersham	6
	Chalfonts	6
	Chesham	27
	South Bucks District	**20**
	Beaconsfield	14
	Beeches	5
	Gerrards Cross	1
	Wycombe District	**103**
	Chepping Wye Valley	1
	High Wycombe	90
	North West Chilterns	12
	Total	**290**
Shared Lives	Total	**24**

Supply – current market: Learning disabilities

Currently in Buckinghamshire there are seven nursing care homes registered for learning disabilities offering 365 places, but all of these are multiple registered for dementia, physical disabilities, and over 65s. In addition there are a further 43 non-nursing care homes offering 332 places.

There are around 68 supported living homes[8] offering 344 places, though 15 are also available to PSD and MH clients. Two non-nursing homes offer three supported living placements to LD clients. This gives a total **LD provision of 703 places.**

This provision includes one non-nursing LD respite establishment of 12 places and six specialist epilepsy services, five non-nursing care homes and one nursing care home, offering up to 97 places. (Approximately a third of all people with a learning disability have epilepsy; this is twenty times higher than the general population).

Between summer 2013, when the original Market Position Statement was written, and 2014, the year this update was made, two buildings comprising 14 and seven supported living units have opened in Chesham, and one, containing two units, have been opened in Amersham. They are all now fully occupied by BCC clients. One residential home of six places has also closed, resulting in a total increase of **15** units.

BCC A&FW market share consumption

Contrasting A&FW purchased care with county provision we see that A&FW use of LD residential and nursing care accounts for 154 out of 334 non-nursing placements (not including OOC placements). It also accounts for five nursing placements in nursing homes throughout the county.

If OOC placements are considered against places available within the Buckinghamshire County Council area we would be purchasing 52 less than current residential supply; the current purchase of residential care is 282 whilst current supply is 334 places. Since there are very few, if any, LD self-funders, it is likely that the extra capacity represents voids, clients from other client groups such as PSD, NHS placements and clients from other local authorities.

[8]Supported living client placements (derived from Swift): Infoview/Adult Social Care/Commissioning/Placements/Current SL Clients

Areas where BCC does not have total market share are quite often in residential care homes, which supports the service's aim to move clients away from this care type towards supported living.

The LD market is provided by 44 services all under 30 places in size, ranging from three to five in eleven settings, six to eight in 23 settings and 10 settings between 10 to 30 in size.

Client and provision purchase growth patterns

Over the last four years Learning Disability services have been fairly static regarding the level of Nursing Care provision purchased and has significantly decreased its purchasing of residential care provision. In 2014, we can see that supported living placements have outnumbered residential placements for the first time. This is projected to continue.

LD						
Type	In County	09/10	10/11	11/12	12/13	13/14
Nursing	No	5	5	4	3	5
	Yes	4	5	5	5	6
	Total	**9**	**10**	**9**	**8**	**11**
Residential	No	203	189	167	147	129
	Yes	161	169	168	165	154
	Total	**364**	**358**	**335**	**312**	**283**
Shared Lives		1	10	19	23	24
Supported Living	No	76	67	77	55	15
	Yes	132	143	184	239	275
	Total	**207**	**210**	**252**	**287**	**290**

Growth in supported living has been rapid with an extra 85 places being purchased over the four years, an approximate 40 per cent increase from the 2009/10 figure.

Pipeline developments

One residential care home in Greater Aylesbury will be extended in 2015 with an additional four rooms. Another in South West Chilterns may be extended with an additional nine rooms, though development has been postponed and will not recommence until at least late 2014. A development for a home with 14 residential care and eight supported living flats was given planning permission in July, though the organisation behind it support people with physical disabilities as well as people with learning disabilities, so it may not be exclusively LD provision.

There is also a recently completed development of six residential care and eight supported living flats in High Wycombe, though this is not yet registered on CQC.

Need - future accommodation objectives and recommendations

Current objectives and progress

It is predicted that in addition to known pipeline an additional eight to 12 supported living units will need to be developed each year until 2035, increasing capacity by around 200 units.

Between summer 2013, when the original Market Position Statement was written, and 2014, the year this update was made, two buildings comprising 14 and seven supported living units have opened in Chesham, and one, containing two units, has been opened in Amersham. They are all now fully occupied by BCC clients. This demonstrates that development is progressing at the correct rate to meet demand.

All local areas have some LD provision. The only local area where A&FW clients have not been placed is Wexham and Ivers, though there is a six-bed residential care home there.

Planning4Care makes estimates based on current patterns of service and population of how much residential and nursing care provision each local area should have, but it is difficult to make a comparison between this estimate and actual provision as the estimates do not make a distinction between LD clients living at home and living in supported living. A comparatively lower actual provision of residential and nursing care, therefore, could be a sign that there is not enough in a community or that its purpose is being served instead by supported living.

Specialised housing and commissioning recommendations:

Local areas which have low provision of any kind, that is fewer than 10 places, are Gerrards Cross, the Missendens, Haddenham and Long Crendon, South West Chilterns, Waddesdon and Wexham and Ivers. Waddesdon and Gerrards Cross have supported living provision, but the others, and also Wendover, do not.

All of the districts except South Bucks have a central area with a very high proportion of provision (in Chiltern District this is the Chalfonts, due to the National Society for Epilepsy's base there). It has the lowest level of provision of all the districts.

Housing in rural areas can represent advantages and disadvantages to LD clients. Urban areas such as Aylesbury and High Wycombe, both of which have large levels of provision of all kinds, offer more opportunity for clients to access community services, facilities and employment.

However, accommodation in these urban areas is not always suitable for certain clients. Clients with autism, for example, can be exceptionally sensitive to noise levels, and clients with challenging behaviour benefit most from having plenty of space. There is currently not enough provision in the county that meets the particular needs of clients with autism and challenging behaviour, and this has been a driving cause of clients being placed out of the county.

Specialised provision for autism or challenging behaviour anywhere would offer opportunity for these clients to return to Buckinghamshire, or for others to avoid an OOC placement.

While areas with a large amount of provision may make up for areas with very little, it is often very difficult to uproot clients from their home communities.

49 per cent of residential and supported living placements in Buckinghamshire are made in Greater Aylesbury and High Wycombe alone. A&FW will need to ensure that provision continues to be available in every area of the county, and that BCC has a share in available provision to avoid clients being placed out of county.

BCC needs more of a market share in Chiltern District, specifically the Chalfonts, where there are over 100 residential, nursing and supported living places for clients with learning and physical disabilities in total, but only 19 are occupied by BCC clients.

An ideal area for new services would be South Bucks.

Care types and communities:

Over recent years LD services have significantly decreased their purchase of residential provision and increased supported living instead, and this trend looks set to continue.

Planning4Care reports that the population of adults in Buckinghamshire with profound and multiple learning disabilities is set to increase by 150 per cent over the next 20 years due to increased survival rates, and so it is likely that accommodation for high levels of social care need will always be required. Nonetheless, BCC is among many local authorities looking to guide LD clients into more independent housing options.

As the mental health recommendations below also state, one important way to ensure client independence is to make sure that general housing is able to support the needs of vulnerable adults. The need for effective support to manage rent / tenancies and other housing-related matters, needs to be available so as to benefit more independent clients in the future.

Another potential housing option for more independent LD clients is extra care or sheltered housing. This would be for those who can live independently with confidence but who may need a low level of social care to meet their LD needs. Extra care would allow them the flexibility to call upon social care as and when they needed it, and could represent a stop-gap for transition from supported living to mainstream housing. It is felt that Telecare, Shared Lives and Extra Care could do more to support LD clients.

The LD 'generation gap'

The Planning4Care report confirms that the LD population is growing fastest at either end of the age spectrum. More people with LD are living into their old age; the total LD 65+ population in Buckinghamshire is expected to increase by 51.4 per cent in the next 20 years, partly due to improved healthcare. For the same reason, more children and young people with LD, particularly PMLD, are surviving into adulthood. The transition age (14-17) population with severe learning difficulties is expected to increase by 20 per cent in the next 20 years, and the same age group with PMLD by 100 per cent.

This 'generation gap' is already having an effect on learning disability services in Buckinghamshire. Many clients are older and live in supported living following transition from long-term hospital care, and voids are created as younger adults do not want to live with them, and vice versa. For younger adults, personal and family expectations are changing as they look for more independent housing, possibly with more activity and socialising.

This evidence suggests that attention has been paid in commissioning and in research to the varied needs of adults with learning disabilities from different generations.

The market is already responding to the particular needs of young people; a planning application for supported living exclusively for young people with LD has recently been submitted to Wycombe District Council.

The previous Market Position Statement established that there will need to be provision for the aging LD population, and this will need to be not only for new builds but also existing nursing homes in Buckinghamshire.

The needs that older people have may set in earlier for LD clients; for example, people with Down 's syndrome are vulnerable to early-onset dementia. Some nursing homes outside of the county admit younger clients with learning disabilities for this reason. Some nursing homes will not admit a client with EMI without a diagnosis, but this is an especially difficult process for people with learning disabilities due to co-morbidities and their particular requirements for accessing health services.

A&FW is in a position to understand better how our nursing homes will provide for clients with learning disabilities as the population ages, and how all of their needs can be met.

Care Act

A possible influencing factor for LD provision is the Care Act, which states that LD clients will not be required to pay for their care. Older LD clients often require more expensive care packages than other older people.

Mental Health (MH)

Demand - BCC Consumption (August 2014)

BCC AFW currently block contracts 90 mental health beds. This includes 30 extra care non MH exclusive placements, 52 supported living placements and eight residential care beds.

BCC A&FW mental health services currently purchases 89 supported living places of which eight are recorded as out of county placements; 30 residential care beds of which 16 are recorded as out of county placements; and seven nursing care beds of which only two are within the county.

In addition to this BCC currently have nomination agreements with housing providers for 40 places across the county where clients are supported to live independently.

The table below shows current BCC purchasing for mental health clients.

Provision Type	In County	Client Count
Nursing	No	**5**
	Yes	**2**
	Aylesbury Vale District	**2**
	Greater Aylesbury	2
	Total	**7**
Residential	**No**	**16**
	Yes	**14**
	Wycombe District	**14**
	High Wycombe	14
	Total	**30**
Supported Living	**No**	**8**
	Yes	**81**
	Aylesbury Vale District	**40**
	Greater Aylesbury	40
	Wycombe District	**41**
	High Wycombe	16
	NW Chilterns	22
	SW Chilterns	3
Extra Care	**No**	0
	Yes	**32**
	Aylesbury Vale District	31
	Greater Aylesbury	31
	Wycombe District	1
	High Wycombe	1

Supply - current market: Mental Health

Non-nursing residential care with a prime focus on mental health clients is very limited within Buckinghamshire. One is registered on CQC, being non-nursing, providing nine places.

No nursing care beds with a prime focus on mental health are available in Buckinghamshire.

There are an additional six non-nursing homes registered for mental health, but all of these are multiple registered for dementia, learning disabilities, physical disabilities, dementia and over 65s.

Similarly there are four nursing care homes which are registered for mental health, and all of these are multiple registered for dementia, learning disabilities, physical disabilities, dementia and over 65s.

There is one extra care service currently providing for mental health clients (55+year old) in Buckinghamshire, which has 30 spaces filled by BCC clients, 12 of whom are older people as demonstrated above. There are also older MH clients in the four older people's Extra Care homes. We also have two mental health clients, not registered as OPMH, in two older people's Extra Care Homes.

BCC A&FW market share consumption:

Currently BCC block contracts all residential mental health beds in the county, of which there are eight; additional supply being spot purchased out of county or in non-specialist environments in county. One of our former block contract homes is being closed in September 2014, and so these placements are currently in transition.

There appears difficulty in placing mental health care clients in need of Nursing Care.

Client and provision purchase growth patterns

Over the last five years mental health services have shown a largely static purchase of nursing provision, a reduction in residential purchase and an increase in supported living and extra care.

Type	In County	09/10	10/11	11/12	12/13	13/14
Nursing	No	10	10	6	6	5
	Yes	0	0	3	3	2
	Total	**10**	**10**	**9**	**9**	**7**
Residential	No	41	46	19	15	16
	Yes	5	6	14	15	14
	Total	**46**	**52**	**33**	**30**	**30**
Supported Living	No	23	17	18	7	8
	Yes	14	16	37	57	81
	Total	**37**	**33**	**55**	**64**	**89**
Extra Care	Yes	0	0	16	30	30
	Total	**0**	**0**	**16**	**30**	**30**
Total		**93**	**95**	**113**	**128**	**145**

Population predictions for those with high/very high mental health concerns project a small increase over the next 20 years, increasing from 9,990 in 2013 to 10,110 by 2033.

Those with high/very high mental health concerns who are provided with specialist accommodation support are few. Currently specialised accommodation supports 145 people out of the potential 9,990. This number is not expected to grow significantly by 2033.

Pipeline developments

16 supported living units opened in September 2014 in Chiltern District. A six-bed residential unit in High Wycombe, with which BCC formerly had a block contract, is closed in September 2014.

Need - future accommodation objectives and recommendations

Current objectives and progress

The original Market Position Statement stated that an additional eight accommodation units would be needed in the two years following[10]. By September 2014 we have gained an additional ten supported living units, and so we have met that target.

[10]Mental Health:Planning4care-Buckinghamshire-MentalHealth-FINAL.pdf

There are currently no additional planning applications for specialised mental health accommodation, though since the current predicted need is for an additional eight units every five to six years, we cannot yet consider ourselves behind target but should not be complacent as developments can take a number of years to come to fruition. Move on accommodation are required in order to fully meet the housing needs of MH clients.

The service delivery agenda is to ensure that people have access to a whole range of mainstream community services which include the development of high quality accommodation and support in people's homes. Accommodation placements are often made with a view to the client eventually transitioning to general housing and mainstream community services. This is further supported by the gradual decline in residential mental health placements and corresponding increase in supported living and extra care. Mental health clients have also, in some cases, integrated well into shared accommodation with learning disability clients, which allows a certain amount of flexibility around these provisions.

General housing and mainstream community housing:

The most important objective with regards to mental health accommodation in future will be reducing the number of out of county placements, currently 29. Given that these placements are often made to be temporary, the best direction to take will be to make sure that general housing and mainstream services are prepared and available for these clients to potentially return to Buckinghamshire.

This will involve liaison with the District Councils / Social Housing Providers to make sure housing provision is available which suits the needs of clients with mental health problems. The former 12 Year Housing Plan expresses a point of view on this : while needs will vary very considerably according to the particular client, a general point would be that clients should have choice over where they live, and have access to a safe and welcoming community.

Extra care

One risk factor for MH provision will be the need to provide for clients over 65. Planning4Care identifies that there will be a 10 per cent increase in older people with psychosis in the next twenty years. Extra care has also proven to be very successful in meeting the needs of this care group.

The Extra Care strategy[11] was written with older people in mind, and the original intention with The Elms, an extra care block in Aylesbury, was not that it would be exclusively for older mental health clients as it is now. But the size of the block, the quality and the opportunity it provides for a smooth transition from adults to older people's services, has made it a great success.

Extra care meets the needs of the client base while still paving the way for their transitions, whether into independent living or older people's services. Extra Care therefore is an excellent direction for future MH provision.

Risk factors

A low-risk factor for MH is the potential increase in clients from sources other than general population growth. Local authorities will also be receiving social care responsibility for prisoners, though the A&FW MH team does not anticipate increased pressure on accommodation services as a result of this.

Another low risk consideration relates to local authorities in London and other areas in the South of England placing social housing clients outside the area due to their own local soaring rent costs. Families have already been placed in High Wycombe and Buckingham. There have been and will be vulnerable people in this situation, and they may need access to local services and accommodation.

[11]Extra Care Strategy: extra_care_exec_summary.pdf

[12]The Guardian: '10-fold increase' in numbers of families uprooted by London councils 21/03/2014

Physical and Sensory Disabilities (PSD)

This data is concerned with people with physical and sensory disabilities under the age of 65. A lot of people develop physical and sensory disabilities in their old age, but our older clients with these problems are more likely to still be registered as older people, and therefore actual data on allocations specifically for older people with physical and sensory disabilities is not as readily available.

Demand – BCC Consumption (August 2014)

Currently no block contracts exist for PSD services.

Currently BCC purchases 26 nursing placements of which eight are recorded as out of county, 59 residential places of which 23 are recorded as out of county and 19 supported living placements of which six are recorded as out of county placements.

The table below shows current purchasing for PSD clients:

Provision Type	In County	Client Count
Nursing	**No**	**8**
	Yes	**18**
	Aylesbury Vale District	**8**
	Buckingham	1
	Greater Aylesbury	6
	Wendover	1
	Chiltern District	**4**
	Chalfonts	4
	Wycombe District	**6**
	Chepping Wye Valley	1
	High Wycombe	4
	North West Chilterns	1
	Total	**26**

Residential	**No**	**23**
	Yes	**36**
	Aylesbury Vale District	**17**
	Greater Aylesbury	17
	Chiltern District	**11**
	Chesham	4
	The Chalfonts	7
	South Bucks District	**8**
	Gerrards Cross	8
	Total	**59**
Supported Living	**No**	**5**
	Yes	**13**
	Aylesbury Vale District	**4**
	Greater Aylesbury	4
	Chiltern District	**1**
	Chalfonts	1
	Wycombe District	**8**
	High Wycombe	7
	NW Chilterns	1
Total		**18**

Supply - current market

There are eight non-nursing care homes supporting up to 73 PSD clients, though five of these are also registered for learning disability. There is also a specialist care home without nursing for 22 acquired brain injury (ABI) clients. Finally, there are six specialist epilepsy services, five non-nursing care homes and one nursing care home, offering up to 97 places, though this again is also registered for learning disability. There are 10 additional nursing homes and one residential home supporting 18 PSD nursing clients, though all of these are also registered for older people.

Finally, there are nine supported living homes offering 26 places, though all of these are shared with mental health and learning disability clients.

We also have one PSD client, not registered as an older person, in one older people's Extra Care home.

This gives a total PSD provision of 219 spaces.

BCC A&FW market share consumption

BCC AFW currently spot purchases for clients from around 40 different service providers.

Client and provision purchase growth patterns

PSD services total numbers have changed little in the last five years with regard to clients supported in nursing and residential care settings.

There has been a decreased reliance on OOC placements and this is likely to continue. Supported living services have seen developments with a strategic move away from residential care settings towards supported living; again this is likely to continue.

Provision Type	In County	09/10	10/11	11/12	12/13	13/14
Nursing	No	18	19	11	12	8
	Yes	14	11	19	17	18
	Total	**32**	**30**	**30**	**29**	**26**
Residential	No	31	30	26	25	23
	Yes	32	32	33	34	36
	Total	**63**	**62**	**59**	**59**	**59**
Supported Living	No	1	1	5	2	5
	Yes	0	0	1	5	12
	Total	**1**	**1**	**6**	**7**	**17**
Total		**96**	**95**	**95**	**95**	**103**

Pipeline developments

There are currently no pending or permitted planning applications for further development in this area.

A planned ABI development mentioned in the previous MPS did not materialise, potentially leaving a gap in specialised PSD provision in the county.

Need - future accommodation objectives and Recommendations

Current objectives and progress:

In addition to the known pipeline, it is predicted that six units every five to six years will need to be developed for PSD clients, providing an additional 20 units by 2035.

As yet it would be invalid to say that we are not meeting targets, but from this point there appears to be little developer interest in the area. In some cases PSD clients have integrated into supported living with mental health and LD clients – many clients will of course have co-morbid conditions – and so in the short-term these provisions may be considered available to PSD clients.

Nonetheless, it is essential that PSD specialised accommodation is developed. A person can become physically disabled suddenly and after a traumatic experience, unsuitable accommodation could hinder their recovery, particularly if they are separated from their home community or peer group.

Adapted Housing Register

Home adaptations have an important role in supporting PSD clients to remain independent and living in their own homes. In the past, if the occupier has died or moved on from the home, these adaptations have been dismantled and the house put back on the market as a general needs home. An Adapted Housing Register detailing the provision and whereabouts of accommodation could maximise resources and target/protect already adapted housing stock.

Conclusion

2014 has been a positive year for development, particularly in the older people's market. The high levels of future demand in this area are well-known to the private and public sector and if this continues we will be on track to meet our targets regarding numbers of provisions.

However, the nature of the market is of concern. If a disproportionate number of high end developments takes place there remains little choice /increased pressure for A&FW purchasing options. The balance of developments therefore needs to be carefully managed to ensure equality of access for all Buckinghamshire residents.

The Care Act is likely to make a significant change to the market. The data on which the original MPS was based is a 'pre-Care Act' interpretation of the role of the local authority in the market. It is unclear, as yet, how the roles of all stakeholders will change and how far our ambitions and interests as a local authority can and should reach.

In any case, we are in a position to expand our market share in the older people's sector and to do so will be beneficial to clients and to expanding our purchasing influence. Further work will need to take place to assimilate changing legislation into practical development targets.

Many of the issues raised have been supported by staff teams within BCC A&FW. Some of the projections, such as an increasingly ageing LD population, are considered to be already happening and affecting services and the everyday lives of our clients.

The engagement of a variety of stakeholders is required as BCC A&FW will not be able to have total influence over all factors.

Sources

Supply:

CQC supply table, updated monthly
Quarterly Supply Report, based on care group, care type, CCG, district and local area, derived from CQC
Postcodes report, from Research team

BCC Consumption:

All clients placements (derived from Swift): Infoview/Adult Social Care/Contracts/Clients with Placements ALLv2
Block contracts and voids (derived from Contracts Team): Infoview/Adult Social Care/Contracts/my life my home board report (1)
Placements by care group (derived from Swift): Infoview/Adult Social Care/Performance (business intelligence)/BI Reports/client numbers refreshable report
Supported living client placements (derived from Swift): Infoview/Adult Social Care/Commissioning/Placements/Current SL Clients

Pipeline:

Aylesbury Vale District Council
Chiltern District Council
South Bucks District Council
Wycombe District Council
DC planning applications are currently recorded and tracked by Business Support

Need:

Analysis of AFW OP market share according to local area and interpretation of different scenarios:
Estimates of need based on Planning4Care estimates of population growth and corresponding demand on social care:
Learning Disabilities: Planning4care
Mental Health: Planning4care
Older People: Planning4care

Other:

12-year housing plan
The Alzheimer's Society 2014 Infographic (showing future prevalence of dementia)
BBC Science – the dementia timebomb (describes correlation of dementia and age)
BCC Research team's population projections
BCC Extra Care Strategy
The Guardian: '10-fold increase' in numbers of families uprooted by London councils 21/03/2014
Original Market Position Statement
Placement spreadsheet from the AFW Care Resource Team