

West Berkshire Council  
Adult Social Care

# Market Position Statement 2020-2023



WestBerkshire  
C O U N C I L

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# Foreword from the Portfolio Holder for Adult Social Care

Welcome to West Berkshire's Market Position Statement (MPS) for Adult Social Care (ASC) and thank you for taking the time to engage with us. This document is the start of a process and I hope that you will use it to inform your understanding of the changing needs of our residents and begin (or in many cases continue) a dialogue around how you can help us improve the outcomes for those who require care and support.

The next few years promise to be even more testing for local authority care provision than the last decade, challenging though that has been.

As I write this introduction, all of us are managing and evaluating the impact of Covid-19 on our residents and staff, and in particular those cared for and their carers. It is too early to assess the long-term implications on the scale and type of demand Covid-19 has created, and the changes in the ways we may have to work in the future - in the short-term we are likely to see a pause in the increase in life expectancy, but the long-standing issues of increasing morbidity, dementia and frailty will undoubtedly impose themselves again in the near future. At the same time the economic impacts of the virus mean that funding is likely to remain constrained unless there are wholesale changes to the national funding model.

The tremendous advances in medicine and care over the last 20 years have transformed the length and quality of life for many who experience even the most profound levels of learning and physical disability. For example the average life expectancy from birth for those with Down's syndrome has risen from 10 to 55 in the last half century. At the same time, our understanding of what constitutes appropriate care has also evolved, driving societal expectations for richer and more varied types of support, whether in residential/supported living environments or supporting carers and the cared for at home. Although the direct impacts are less immediate, we know that the loss of social opportunities driven by lockdown has increased the stress on both the disabled individuals and their carers.

Covid-19 has also impacted the already-growing demand for mental health services and this will be exacerbated by any prolonged economic impacts. We remain committed to working with health colleagues and neighbouring authorities across the region to enhance team working and to deliver a service that focuses on the individual need.

Despite these challenges, I believe there are tremendous opportunities to enhance the provision of care and outcomes for users. We know that individuals want support to enable them to be as self-sufficient as possible, with the amount of care they get being appropriate to their personal needs. We are particularly looking for providers who are developing solutions that integrate health with social care and use technology and smart approaches to strengthen the self-care model, delivering an improved individual experience in an efficient and cost-effective way. We also recognise that it is critical to ensure sufficient provision of traditional residential and nursing care, but believe that this too is an area ripe for innovation. We are interested in hearing your ideas and want to work closely with you to ensure our residents' desired outcomes are delivered and our ambitions are met.



**Councillor Graham Bridgman**  
**Portfolio Holder for Adult Social Care**

# Our key additional commissioning needs for ASC in West Berkshire

## Introduction

Over the next four years, we are looking forward to working with many of our current providers to maintain and build on the services they already provide. These services are detailed in the main body of this document. We have identified a number of services where we would particularly welcome new approaches, enhanced provision or additional supply and these are summarised below, with more detail also in the main document.

### Care for the Elderly

- flexible and cost-effective provision of short-term respite and step-down beds;
- the provision of extra-care housing suitable through to 'end-of-life', designed to manage increasingly complex needs in-house;
- domiciliary care that is focussed on supporting independence through enabling service users to manage tasks themselves whenever possible;
- improving the range of services available in the dispersed rural populations in the north and west of our region, including from the voluntary and community sector.

### Care for Individuals with Learning Disabilities

- the provision of additional supported living settings, designed to support individuals with complex needs. We are looking to move up to 30 users from out of area settings over the next four years;
- flexible and cost-effective provision of short-term respite beds, through flexible models and potentially by expanding the number of 'Shared Lives' settings;
- improving the range of services available in the dispersed rural populations in the north and west of our region, including from the voluntary and community sector;
- services that can enhance skills and support individuals into employment.

“We have identified a number of services where we would particularly welcome new approaches, enhanced provision or additional supply”





## Care for Individuals with Physical Disabilities

- innovative technology that can enhance independence and quality of life.

## Care for Individuals with Mental Health needs

- additional supported living settings to enable us to relocate out of area placements;
- one to two very short notice settings, available in case of acute need;
- services that can enhance skills and support individuals into employment

## Enhancing the Carer Workforce experience

- increasing the availability of high-quality residential nursing provision through improved career management;
- improving career paths and work patterns for care home staff, adapting to emerging economic conditions and changes in employment regulations for overseas workers;
- developing employment models that enhance the experience and reward for domiciliary care through technology and 'smart working'.



# 1. What is the purpose of this MPS and who should read it?

The idea of the MPS emerged from the 2014 Care Act, where duties were placed on Local Authorities to ensure that there is a dynamic and effective market to provide social care services in their region. Guidance provided states:

‘A market position statement (MPS) is a document which summarises supply and demand in a local authority area or sub-region, and signals business opportunities within the care market in that area.’

## ‘The substantive characteristics of an MPS are that it:

- contains a picture of current demand and supply, what that **might look like in the future** and how strategic commissioners will **support and intervene** in a local or regional market;
- supports its analysis by bringing together material from a range of sources such as JSNAs, surveys, contract monitoring, market reviews and statistics in one place;
- presents the data that **the market needs to know** and use and helps providers develop effective business plans;
- covers **all actual and potential users** of services in the local area, not just those that receive local authority funding;
- **is the start**, not the end point, of a process of market shaping; and
- is provided in a straightforward and easy to use format, **in a brief document** that analyses as well as describes’.

*Market Shaping Review Market Position Statement Guidance July 2016*

## Who should read this document?

The primary audience for this document is the providers of adult care services who already have or would like to develop services to meet the needs of West Berkshire residents. Much of the document describes services that the Council purchases on behalf of residents, but by providing insight into the wider market, the document is also informative for those operating only in the self-funder market.

The prime focus is on the provision of services within West Berkshire, but we recognise that some services will be provided outside the region and equally that there will be service users within West Berkshire who are normally residents of other local authorities.

## How is the document structured?

The next seven pages of this document introduce West Berkshire Council's overall approach to ASC and briefly summarise the characteristics of our population, economy and geography. This is followed by a series of 'chapters' that focus on needs in specific provider markets. Each chapter follows broadly the same pattern:

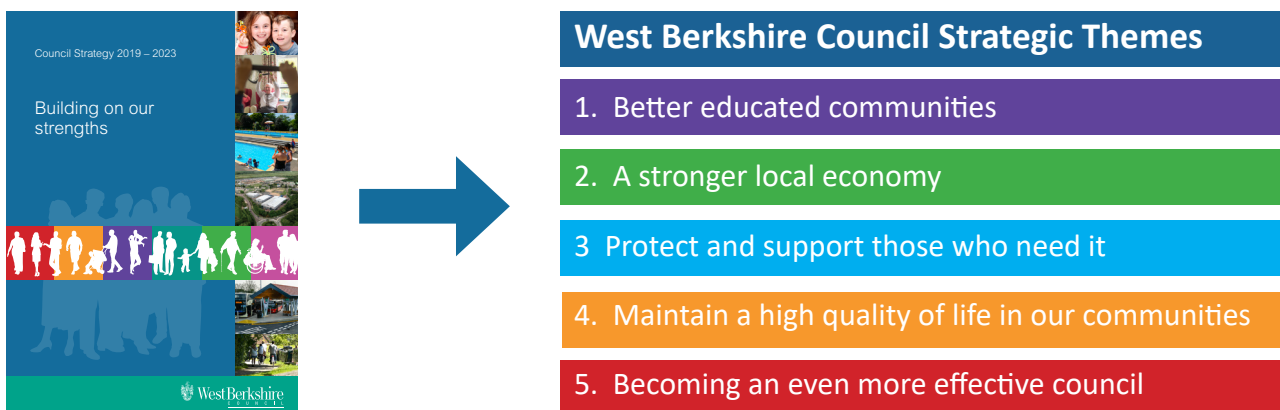
- I The demographic forecast for that group**
- II Expected changes in demand**
- III West Berkshire Council's strategic thinking (Direction of Travel)**
- IV Current overall market provision summary**
- V The role of the Council as service commissioner (and service provider, where relevant)**
- VI Identified high-level gaps in provision (Areas of Acute Need)**

For elderly and learning disability care, iv-vi are split for residential and domiciliary/day care. The categorisation is based on the individuals Primary Service Reason (PSR). Thus the needs of a service user with mental health, or learning disability who is now 65+ but has received care when younger will be captured in the relevant 'All-Age' section rather than Section 4 'Care for the Elderly'.

The document concludes with chapters on how to engage with the Council, including key contacts.

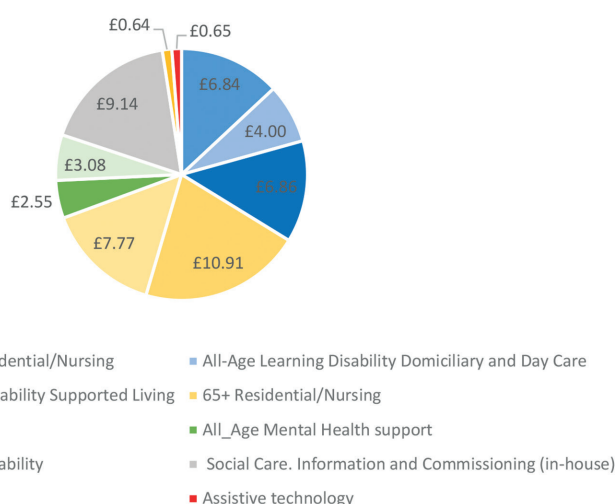
## 2. Strategy, Principles and Direction of Travel

Delivering high-quality and cost effective services is essential both to users and the wider community and is at the heart of the Council's strategy for the period 2019-2023.



Adult social care is the single biggest area of revenue expenditure for the local authority, representing 37% of the revenue budget (£52.4m net in 2019/20). It is imperative that we deliver maximum value for both our users and our residents, whether in direct funding or in supporting the wider market for those who fund their own care. 70% of the Council's gross spend on ASC is with providers from the private, charitable and voluntary sectors. The remaining 30% funds services provided directly by the council, principally our team of social workers, our care homes and day/resource centres.

### Distribution of Council net spend on Adult Social Care 2019/20 (£m)



The principles that we apply are:

- care is about the needs of the individual;
- we use a strengths-based approach, to provide people with the appropriate care for them to manage their own lives;
- everyone who wants to should be able to live at home where appropriate and the focus of care should be to enable to do that;
- residential care should be provided where appropriate but should always seek to maximise independence and quality of life;
- we have a duty to spend the money entrusted to us fairly and effectively, minimising waste and duplication and promoting efficiency through the use of technology and insight.

Our mission for ASC at West Berkshire Council is:

**‘to ensure that everything we do safeguards the vulnerable, promotes learning, independence, improves health and wellbeing and provides support where it is needed to the most vulnerable’.**

We will deliver this by focussing on five ‘outcomes’ that drive our approach and deliver our ambitions

**Outcome 1 – Enable people to manage their own lives safely**

**Outcome 2 – Encourage and support people to live at home**

**Outcome 3 – Enrich peoples’ lives in a safe setting**

**Outcome 4 – Ensure a capable and energised workforce**

**Outcome 5 – Ensure money is spent wisely and effectively**





## Direction of travel

Applying these principles and outcomes to the current situation in West Berkshire, we would expect to see the following changes in ASC over the next few years:

- we expect to still purchase the greater part of care from the private and third sector, but West Berkshire Council will continue to be a service provider in selected markets and services;
- we want to explore alternatives to traditional residential care, through greater use of supported accommodation, shared lives and the development of integrated communities;
- increasing partnerships with care providers and neighbouring authorities to address unmet needs, especially around complex disabilities and challenging behaviours;
- a strong emphasis on early intervention to maximise independence and the opportunity for people to stay in their own homes – reducing the growth in residential care placements below the historic trend, especially for those with learning disabilities;
- improved provision of respite care to support family carers, with additional capacity locally to meet the needs of those with more complex conditions;
- improving the range of support for individuals to obtain training, volunteering experience and enter employment;
- increasing care workforce stability and quality by raising the attraction of care as a profession, especially for potential returnees, through increased support for staff training and enhancing reward;
- a greater use of technology to increase efficiency of enhancing the experience of paid-for and family carers.



# Statement on Safeguarding

Safeguarding has the highest priority across all organisations. There is a shared value of placing safeguarding within the highest of corporate priorities. Organisations are judged on the effectiveness of safe communities and their values towards safeguarding adults who may be at risk of abuse or neglect. Values include:

- people are able to access support and protection to live independently and have control over their lives;
- appropriate safeguarding options should be discussed with the adult at risk according to their wishes and preferences. They should take proper account of any additional factors associated with the individual's disability, age, gender, sexual orientation, race, religion, culture or lifestyle;
- the adult at risk should be the primary focus of decision making, determining what safeguards they want in place and provided with options so that they maintain choice and control;
- all action should begin with the assumption that the adult at risk is best-placed to judge their own situation and knows best the outcomes, goals and wellbeing they want to achieve;
- the individual's views, wishes, feelings and beliefs should be paramount and are critical to a personalised way of working with them;
- there is a presumption that adults have mental capacity to make informed decisions about their lives. If someone has been assessed as not having mental capacity, to make decisions about their safety, decision making will be made in their best interests as set out in the Mental Capacity Act 2005 and Mental Capacity Act Code of Practice;
- people will have access to supported decision making;
- the adult at risk should be the primary focus of decision making, determining what safeguards they want in place and have support to explore options so that they can take, exercise and maintain choice and control over their own lives;
- all decisions should be made with the adult at risk and promote their wellbeing and be reasonable, justified, proportionate and ethical;
- timeliness should be determined by the personal circumstances of the adult at risk;
- every effort should be made to ensure that adults at risk are afforded appropriate protection under the law and have full access to the criminal justice system when a crime has been committed.



“Safeguarding has the highest priority across all organisations. There is a shared value of placing safeguarding within the highest of corporate priorities.”

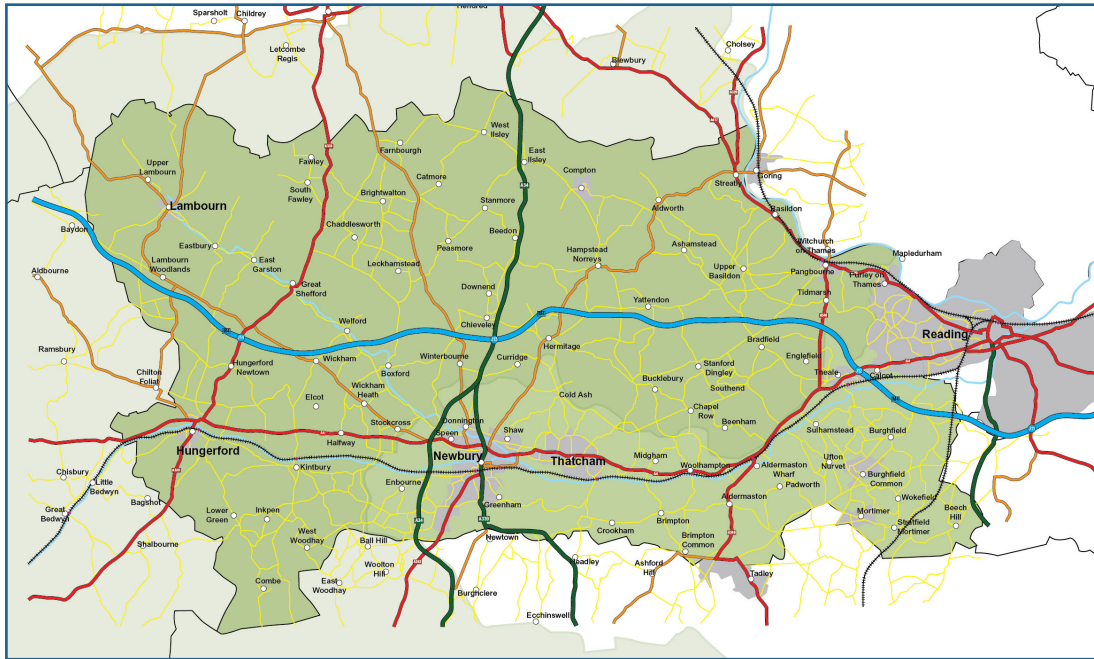


### 3. An introduction to West Berkshire

Delivering high-quality and cost effective services is essential both to users and the wider community and is at the heart of the council's strategy.

#### Location

West Berkshire is a unitary authority about 50 miles to the west of London, centred on the town of Newbury and served by the M4 and A34 trunk roads and the GWR mainline and local trains.



#### Population and growth

The mid-year population estimated for June 2019 showed West Berkshire population as 158,450 and is estimated to have grown by 4.8% since 2011. ONS forecasts future growth to slow to about 3.5% over the next decade. The largest urban areas in the district are Newbury (including Greenham and Speen) and Thatcham, where around 66,000 (42%) of West Berkshire residents live. 26,000 or 16% of residents live in the eastern urban area of the district (Birch Copse, Calcot, Purley, Westwood, etc). Approximately 1/3 of the population is scattered across the rural areas to the north and west of the district. The authority has the lowest population density of any county/unitary authority in SE England.

Population  
**158,450**

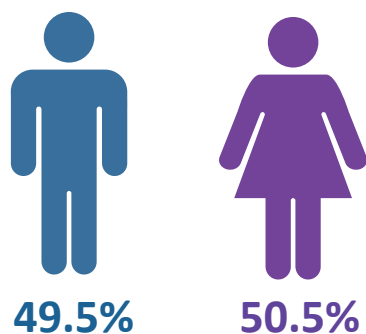
Growth  
since 2011  
**4.8%**

**1/3**  
of the  
population live  
in rural  
areas

## Diversity

Gender– The population is 50.5 % female and 49.5% male, reflecting the national picture.

Ethnic diversity – West Berkshire has a lower ethnic diversity when compared to SE England.



	West Berkshire		South East	
	Count	%	Count	%
Asian/Asian British	3,808	2.5	452,042	5.2
Black/African/Caribbean/Black British	1,376	0.9	136,013	1.6
Mixed/multiple ethnic groups	2,420	1.6	167,764	1.9
Other ethnic group	364	0.2	51,111	0.6
White	145,854	94.8	7,827,820	90.5

## Economy

West Berkshire is a prosperous region with high employment levels and average median salaries c20% higher than the national figure. The job density in 2018 was 1.17, ie there are more jobs than population aged 16-64. There is a higher than average proportion of employment in senior management and professional occupations.

Unemployment will undoubtedly rise as a result of the likely post-Covid recession, especially in retail and hospitality – the claimant count doubled between February and April 2020- but the presence of scientific and knowledge-based industries such as Vodafone, Atomic Weapons Establishment and the nearby Harwell Science Campus will mean the region is likely to suffer relatively less.

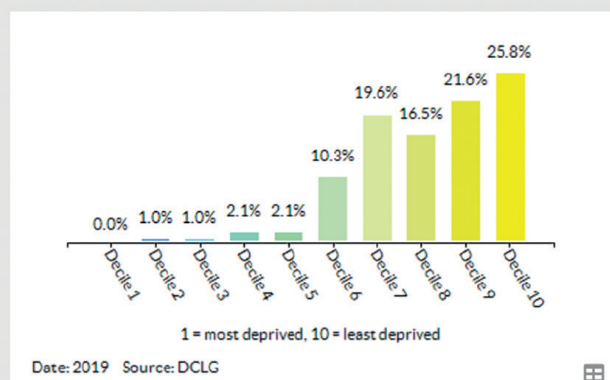
## Deprivation and well-being

West Berkshire scores better than national averages on most indicators of health and well-being, especially in female health. More detail is provided on the Berkshire Observatory web pages<sup>1</sup>.

Overall West Berkshire has low deprivation rates and is particularly favoured in the area of health deprivation, with 78.4% of Lower Layer Super Output Areas (LSOA) in the three healthiest deciles.

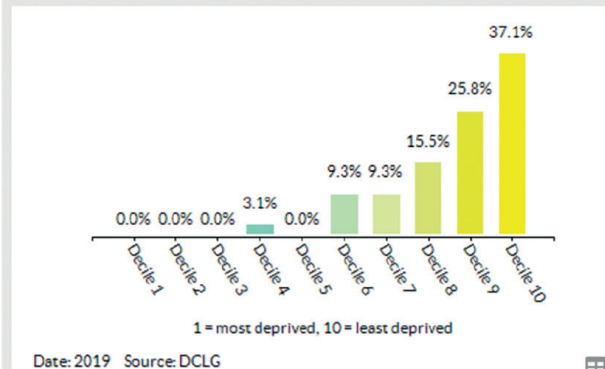
<sup>1</sup><https://westberkshire.berkshireobservatory.co.uk/health-and-social-care/>

## Index of Multiple Deprivation



The Index of Multiple Deprivation (IMD) combines information from seven domains to produce an overall relative measure of deprivation. The domains are: Income; Employment; Education; Skills and Training; Health and Disability; Crime; Barriers to Housing Services; Living Environment. Each domain is given a weighting and is based on a basket of indicators.

## Health domain



The Health Deprivation and Disability Domain measures the risk of premature death and the impairment of quality of life through poor physical and mental health. The domain measures morbidity, disability and premature mortality but not aspects of behaviour or environment that may be predictive of future health deprivation.





## 4. Care for the Elderly

### Changing population

The population over 65 in West Berkshire, at 27.5%, is higher than the national and regional averages. Pre-Covid forecasts predict a c2% p.a. growth in the 65+ age group, but this masks a relatively stable number in the 65-75 range and growth of nearly 3,000 (20%) for over 75s.

#### 65+ population forecast for West Berkshire 2019-23

	2019	2020	2021	2022	2023
People aged 65-69	8,600	8,600	8,700	8,700	9,000
People aged 70-74	8,600	8,600	8,800	8,500	8,200
People aged 75-79	5,800	6,200	6,500	7,300	7,700
People aged 80-84	4,000	4,100	4,200	4,300	4,500
People aged 85-89	2,400	2,400	2,500	2,600	2,700
People aged 90 and over	1,300	1,400	1,400	1,500	1,500
<b>Total population 65 and over</b>	<b>30,700</b>	<b>31,300</b>	<b>32,100</b>	<b>32,900</b>	<b>33,600</b>

*ONS 2018-based subnational population projections*

While it is too early to be certain of the impact of Covid-19, data as at 9 October 2020 recorded 135 Covid-19 deaths (1 in 1,200). Excess deaths from 1 March to 9 October 2020 were 24% higher than the five-year average. This was markedly lower than for England as a whole. Our internal analysis suggests that the 65+ population growth rate will remain static for this year and begin to accelerate from 2021, albeit at a slightly slower rate than the pre-Covid forecast. The population 85+ has been most affected by Covid-19 and we expect the rate of growth in this cohort to be particularly impacted.

### Current market demand for elderly care

Determining total demand is a complex problem as sources of care support are varied and we have limited insight into self-funded and family carer provision. We calculate that c3.5% (1,115) of the population 65+ receives some form of care from the Local Authority. Using data from the West Berkshire Council care system, market information from care home providers and estimates from research<sup>1</sup>, we estimate a further 5.5% (1,700) self-fund care. As would be expected, the proportion increase with age and we estimate c13% (1,000) of the 80+ age group are self-funding some care.

Provision of care by family members is also difficult to estimate. Data from Age UK<sup>2</sup> shows c25% of 65+ are providing care and this proportion rises with age. Alarming c8% of 75+ estimate they are providing 35+ hours of care, which is a significant risk to them, is unsustainable in the longer run and will almost certainly require additional self or local authority funded provision.

<sup>1</sup><https://www.birmingham.ac.uk/Documents/college-social-sciences/social-policy/HSMC/publications/2018/UoB-PRP-Self-funders-review-of-data-and-literature-FINAL.pdf>

<sup>2</sup><https://www.ageuk.org.uk/globalassets/age-uk/documents/reports-and-publications/reports-and-briefings/health-->

## West Berkshire Council direction of travel

The provision of high quality, affordable care for the elderly is and will continue to be a very high priority for the leadership of West Berkshire Council, reflecting the priorities of our residents.

Residential and nursing care will always be a core need for our residents. Our strategy is to focus on providing high quality care at the best value for money. We expect our residents to be able to live in safe, pleasant environments, able to enjoy their time with fellow residents and families, supported by staff who have their needs at heart. We will continue to deliver this experience through multi-criteria commissioning from the private sector in West Berkshire and neighbouring authorities, alongside continued provision from homes operated by the Council. West Berkshire Council is and will continue to be a significant provider in the market and we expect to invest to improve the quality of that provision over this period. Recognising the extreme strains of Covid-19 on the residential care market, our strategy will evolve in the short-term, to focus on placing residents within West Berkshire settings to ensure market stability and providing other support to ameliorate the impact of the virus on providers.

While residential provision is critical, the majority of our elderly residents prefer to live in their own home and our ambition is to commission services that better enable this, from supporting hospital discharge to long-term care in the home. We see scope for further quality and efficiency improvements in domiciliary care services through the use of technology and smart working practices.

We see the role of enablement and reablement as particularly critical in a Covid environment, enabling more efficient and potentially safer hospital discharge and maximising the potential for users to stay at home. Promoting enablement will be a major focus of our strategy and commissioning approach. We will favour services from providers who align with our strengths-based approach and focus on encouraging users to maintain their independence through active and individualised development of their skills and capabilities.

We believe that supported extra-care housing has a vital role to play for those who want to maintain a safe independent lifestyle. We have identified problems arising with care as residents' health deteriorates over time and we see this provision needing to become more sophisticated in its ability to support these more complex needs. We see the demand for extra-care and other retirement living increasing, potentially faster than pre-Covid.

## Residential, nursing and extra care supply (including dementia)

There are 747 nursing and residential beds provided in 16 care homes across West Berkshire, split c45% nursing and 55% residential:

- this increased by 64 beds in 2019-20;
- 152 beds (four homes) are provided by West Berkshire Council;
- there is a good distribution across the region except in the rural north-west;
- there are currently 138 extracare apartments in three locations in West Berkshire (one each in Newbury, Thatcham and Hungerford), which gives good coverage for our major population centres. However there is no provision in the eastern part of the region (eg Pangbourne, Theale and Burghfield)

Prior to the advent of Covid-19, we estimate that the region's long-term residential/nursing occupancy rates was c85%, which we believe is below the level to ensure sustainability for all homes. Supply increased by 9% in 2019/20 with the opening of a 64 bed home.

We do not see a need to increase supply of residential beds over the next four years. However, while overall there is a sufficiency of supply, nursing services face issues, with significant problems attracting and retaining suitably qualified staff. In the past five years nursing provision has not kept pace with the growth in need.

## Quality

### CQC overall ratings for nursing and residential homes for the elderly in West Berkshire October 2020

Rating	Outstanding	Good/Unrated	RI	Inadequate
Homes	1	11	4	0
Beds	24	508	215	0

Quality is satisfactory in the region, but safeguarding and quality issues have occurred and in 2017 West Berkshire Council had to step in to acquire a large privately-operated home due to financial and quality issues. We have issued 309 safeguarding notices since 2016. The local authority remains of the view that quality is critical within the provision of care and for this reason we will not commission placements with providers rated lower than “Good”, except where there are extenuating circumstances.

## The impact of Covid-19

The impact of Covid-19 on West Berkshire, while tragic, has been less severe than on other regions with an excess death rate of 24% for the period March-September 2020 compared to the five-year average. Even so, this has resulted in occupancy rates down to c75%, with a particular impact on those homes that had higher infection levels. In addition, there has been severe disruption in homes, with increased staff absence, significant additional PPE and infection control procedures all increasing costs. In the short term the impact has been addressed through the additional funding from central government, but with Covid-19 likely to be present for a long period and with the particular vulnerability of the elderly, practices in care homes will need to be adapted.

The relatively high incidence of deaths in care homes has also impacted the demand from self-funders in particular, with admission and enquiries from the private sector having virtually ceased since April 2020 as users and their families seek other forms of care. In August we have begun to see a slight increase in enquiries and as public confidence improves we expect to see demand increase and would expect occupancy rates to be back at 85% by early 2022.



“In the short term the impact has been addressed through the additional funding from central government, but with Covid-19 likely to be present for a long period and with the particular vulnerability of the elderly, practices in care homes will need to be adapted.”



## West Berkshire Council care provision for qualifying residents

Pre-Covid (29 February 2020) West Berkshire Council funded 367 long-term elderly care home places, (171 nursing, 196 residential)



Pre-Covid, our demand for long-term care home beds was increasing, with a 7% rise over the six months to February 2020. Overall supply pre-Covid was sufficient, with increasing local supply supported by a stable availability of beds in neighbouring authorities.

As at June 2020 long-term care bed demand had fallen to 291 beds, a decrease of 20% and this has remained static to date. Accelerating hospital discharge through the CCG/West Berkshire Council Joint Commissioning Programme has added a net 65 beds, although a high proportion of these new placements are short-term recovery placements. We expect demand for long-term placements to begin to increase post September.

Coupled with depressed demand in the self-funding market, we expect to see a surplus of beds in the short-term and a sufficiency of supply for the next four years. We recognise this reduced demand will have a negative impact on the market and will challenge the viability of some homes. To mitigate this risk, West Berkshire Council will prioritise placements within our area, providing this meets the client needs, is high quality and is cost-effective.

## West Berkshire Council as a provider of residential and nursing care

West Berkshire Council currently operates four care homes providing 152 beds in the region. We expect to maintain a role in the market as a direct provider over this period. As we consider the longer term position of the local authority as a provider and the shape of the wider market, we are open to discussions with potential partners in respect of models and opportunities that would cost effectively improve quality.

## Areas of acute need

Despite an overall sufficiency (and short-term oversupply) of residential beds, we recognise that the supply of qualified nursing staff remains a critical issue locally and nationally and this pressure is likely to increase post-Covid. We would welcome proposals from market suppliers to address this need, potentially in collaboration with Health Partners and other local authorities.

There is also a limited supply of respite beds in our region and we believe that addressing this is vital to improving the opportunity for users to stay home in the long-term. West Berkshire Council is exploring ways to address this through its own homes, but would welcome proposals from providers on flexible and cost-effective approaches for respite provision.

We expect the demand for extra care housing to increase and are interested in ideas for providing this in ways that support residents as their needs become more complex with age, reducing the need for them to transition to residential or nursing care at a later stage. We would particularly welcome opportunities to develop sites that are integrated into the community within new developments in our region.

## Day care and care at home services for 65+, including dementia

Estimating the total supply of home care and day care services is more problematic than for residential and nursing care. Based on the data in the Age UK research referenced above, we estimate there are c1,700-2,000 users of some form of elderly day care service in West Berkshire, with c715 users receiving funding from West Berkshire Council. Demand for council home care has been relatively unaffected by Covid-19, although anecdotally we believe there has been some reduction in self-funding demand as users choose to restrict visitors and/or additional support is being provided by families on furlough. As the excess mortality rate has been relatively low in this community, we would expect to see base demand and growth rates return to pre-Covid levels by early 2021, with c10% growth by 2023, based on demographics. If demand for self-funded residential care remains depressed post-Covid, we would expect to see additional demand for homecare services. Obviously Covid has closed many day centres and activities, but we expect to see the demand for these to return as lockdown for vulnerable groups is eased, with growth similar to homecare.

While overall provision is adequate at a regional level, the low population density and rural nature of the north, west and south east of our region present particular challenges, with long journey times and limited access to day care centres.

## West Berkshire Council as a funder and provider of domiciliary care

West Berkshire Council currently fund c715 users for approximately 1,200 services, sourced from c30 providers. 475 are users of Homecare services, of which 86 are provided to users in the three extra care sites. We also provide c£1.25m p.a. of direct payments for users to purchase care provision. The detailed breakdown (excluding transport and centre meals) is as follows:

### Domiciliary and day care services for the elderly funded by West Berkshire Council June 2020

Service	Number of users
Community Supported Living	189
Day Opportunities	72
Direct payments	71
Equipment, Adaptations & Assistive Technology	86
Homecare	475
Maximising Independence	64

## Areas of acute need

Supporting our focus on enablement/reablement, we are seeking solutions that, wherever possible, stress developing self-care rather than simply carrying out care tasks for service users, including those on long-term care packages. This may require a shift in approach from the provider community and we recognise this may come at a short-term cost, but will yield longer-term benefits for the service users and council tax payers. We are very interested in working with providers on models of care that can truly 'help people to help themselves'.

As c35% of our demand is in rural areas in the north, west and south east of our region, we are looking for providers who can meet these needs in a cost-effective manner through the use of smart tools and technology to minimise travel time and maximise client interaction. We see a significant opportunity to work further with voluntary and community groups in these areas and would particularly welcome proposals from this sector.

We also see opportunities to increase the proportion of our costs that reach care workers. Since 2018 we have worked with Care Match, where care workers can collaborate interactively to provide services. There are 44 service users for the service at present and evidence to date has shown that this model delivers a more user-centred approach, enables greater flexibility for users and care providers and increases care worker satisfaction and pay levels, all without raising costs to the Council. We would be interested in expanding this approach and would welcome engagement from providers of similar services.

West Berkshire Council operates three day centres, providing a safe and structured environment where a wide range of activities are delivered and we expect to maintain this position. We are interested in opportunities to work with commercial, charitable and voluntary partners to increase the utilisation of these centres and expand the range of opportunities they provide.

## Role of voluntary and community organisations

The voluntary and community sector plays a vital role in enhancing the range of support available to both the cared-for and their carers. The criticality of this support has been emphasised through Covid-19, especially for the many vulnerable individuals who have faced extended lockdown.

A major challenge in this area is raising awareness of what is on offer. West Berkshire Council plays an important role with both funding and signposting through its Tier 1 support contact centre, the West Berkshire Directory of support organisations and activities, its website and advice from its social workers. We also support the work of the Berkshire Carer Hub, which provides a help-line and advice.

We see this sector playing an even more essential role in the future and and always welcome contact from groups who can help, especially in the more urban parts of our region, where supply can be limited.



## 5. Care for All-age adults with Learning Disability (including Autism)

### Demand

We expect the number of West Berkshire residents with all types/severity of learning disabilities to increase by c1.5% between 2020 and 2025, based on Projecting Adult Needs and Service Information (PANSI), with a slight decrease in 18-64 (due to general population trends for this age group), offset by a rise in 65+, thanks to improved medical and social care continuing to extend life expectancies. We estimate c80% of this population live in their own home or with family members. We do not foresee Covid having any significant impact mortality in this demographic, although we recognise that lockdown will have impacted the health and wellbeing of some individuals and their carers.

We expect the population with moderate/severe learning disability to remain stable at c500 people, but with increasing average age. Therefore although the population is remaining stable, we foresee a small increase in numbers requiring additional care, driven by the increase in longer-lived individuals currently with elderly parental care. More significantly, we also expect an increase in complexity of needs, for the elderly (with rising average age driving a higher incidence of multi-morbidity) and in younger age groups (thanks to higher survivability rates for disabled infants and children over the last 15 years). In both cases we expect to see increased physical disability co-presenting with more complex learning disability.

### West Berkshire Council direction of travel

West Berkshire Council's vision is that care should focus on enabling adults with learning disabilities to maximise their own potential in a safe and constructive environment. Residential care plays a vital role in this, especially for individuals with challenging behaviour that creates risks for themselves and those who care for them. Similarly those who experience profound and multiple learning disabilities (PMLD) will often benefit most from a residential/nursing environment, to ensure the range of support to meet their needs in a fulfilling way. However we believe that advances in supported living and the expansion of care in our region is such that out of area placements can and should be reduced where possible.

We have an ambition to halve the number of out of area placements by 2024, placing people in appropriate residential/ nursing or supported living settings in West Berkshire. There is currently a shortage of local provision for individuals with complex needs and challenging behaviour that makes it hard to achieve this goal.

“West Berkshire Council's vision is that care should focus on enabling adults with learning disabilities to maximise their own potential in a safe and constructive environment.”



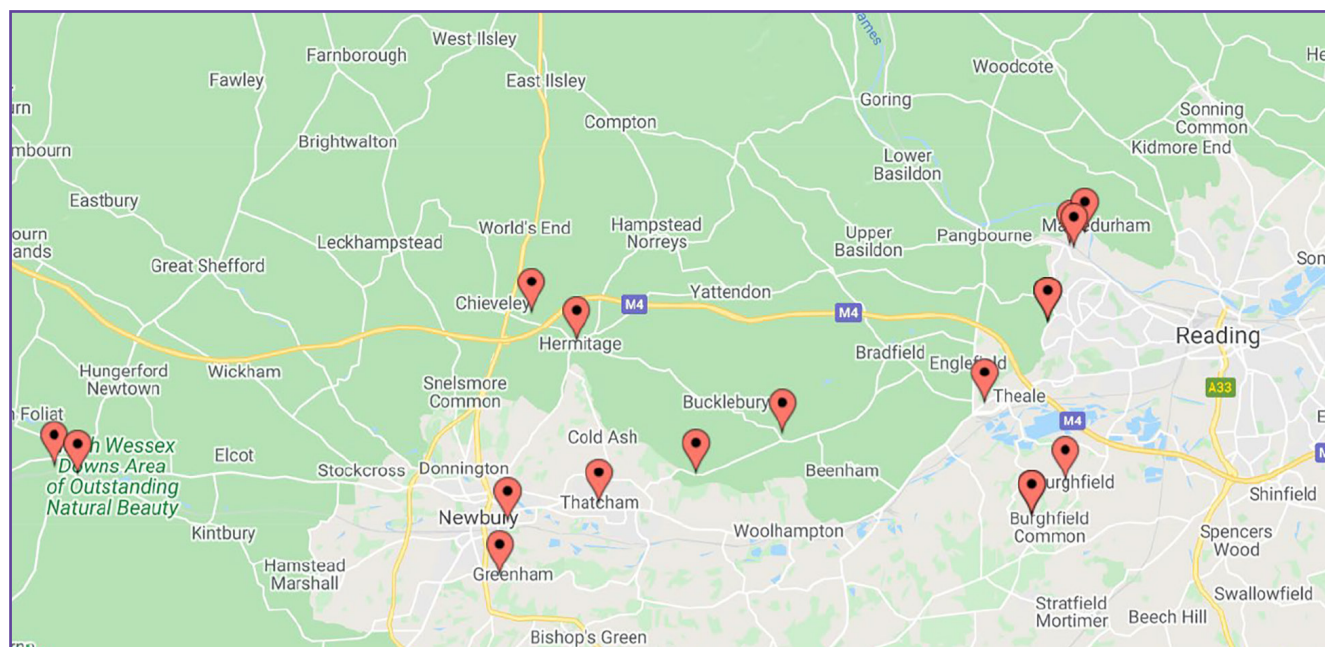
We have a major commitment to supported living and are looking to expand the supply for those with more complex needs who previously would require a residential facility. We would be interested in developing this jointly with Health partners and other local authorities, to help ensure critical mass.

We recognise that many families wish to keep family members at home and we are wholeheartedly committed to enabling this, through homecare, education, skills and development opportunities, underpinned by appropriate respite care and wider support to the carers.

We are passionate about making it possible for all our residents to achieve their personal goals. We are keen to expand the education, skills development and employment opportunities for those with learning disabilities in our region.

## Residential, nursing care and supported living

### Location of learning disability care homes in West Berkshire



- there are 194 residential places provided for adults with learning disabilities;
- these are spread across 19 sites, some of which comprise multiple smaller settings;
- the majority are smaller settings with less than ten residents;
- most address a range of learning disabilities including autism;
- there are 12 providers operating in West Berkshire, ranging from local family run organisations to national groups. West Berkshire Council does not have its own council-run facilities for adults;
- the quality of provision is strong, with all settings rated 'Good' by CQC at their latest inspections;
- there is a limited supply of settings that offer services for those with PMLD and for challenging behaviour, often resulting in placement outside the region.



## West Berkshire Council care provision for qualifying residents

As at June 2020 West Berkshire Council was supporting 104 adults with learning disabilities in long term residential/nursing care places, of which 85 were aged 18-64. Strategically we aim to reduce this figure by maximising opportunities for independent and supported living, but would look to support the local market where possible, meeting the preferences of both users and their families. Currently only 44 users are in West Berkshire settings. 60 are placed outside the region. More geographically distant settings are generally quite historic or are used when particularly specialist support is required.

### Location of 'out of area' learning disability settings



## Supported Living

Both West Berkshire Council and the families of service users believe that safe supported living environments offer an ideal setting for many with moderate and in some cases severe learning disabilities and should be the preferred option where possible. West Berkshire Council currently funds around 215 individuals in a range of supported living settings, with c175 in West Berkshire and 40 outside, mainly in the Reading area. As noted above, we are looking to promote supported living as a preferred provision and would expect some of the c40 out of area residential service users to move back to supported living settings. We welcome the wide range of supported living environments available locally, ranging from 24 hour in-house support through to settings with near total independence, appropriate to the individual. We foresee the following changes in the demand pattern:

- thanks to improved childhood survival rates, there is a critical need for supported living settings to be better equipped to support younger users with more complex learning and physical needs;
- we would like to see more options for 'own front door' independent supported living settings;
- there will be a growing requirement for settings to be adapted to meet the increasing physical needs related to ageing and also managing dementia to avoid the need for unsettling relocation.



Although we would prefer local settings, we recognise that West Berkshire is a relatively small authority and we would be interested in exploring options for more specialist supported accommodation along the M4/A34 corridor in conjunction with neighbouring authorities.

## Shared Lives

‘Shared lives schemes support adults with learning disabilities, mental health problems or other needs that make it harder for them to live on their own. The schemes match someone who needs care with an approved carer. The carer shares their family and community life, and gives care and support to the person with care needs. Some people move in with their shared lives carer, while others are regular daytime visitors. Some combine daytime and overnight visits.

Shared lives schemes are available across the country and are an alternative to traditional kinds of care, such as care homes. The schemes are also known as adult placements<sup>1</sup>.

West Berkshire Council has operated a Shared Lives programme as part of its Adult Social Care team since the 1990s. This scheme supports both elderly residents and those with any disability, but has its strongest focus on those with a learning disability. We currently have approximately 35 active carers supporting 47 service users. About half of service users reside full-time with their Shared Lives family, with the remainder meeting up on a regular basis or for periodic respite visits.

Shared Lives carers are self-employed and are paid by the Council, the amount depending on the time and complexity of the care provided. We are always looking for new ways to attract Shared Lives carers and would welcome contact both from individuals and any organisations who have a demonstrable expertise in expanding Shared Lives schemes in other local authorities.

## Areas of acute need

We would be keen to work with providers who wish to develop care facilities that address the needs of those with more complex needs and with challenging behaviours, maintaining an emphasis on skill development and quality of life enhancement. We would be open to partnerships that meet the needs of neighbouring authorities based on the M4/A34 corridors.

Short-term respite care is essential to enable family carers to continue to provide the support they want in the long-term. We particularly need settings that can accept individuals with more complex and challenging needs, often requiring nursing support. There is a local shortage and we are seeking providers who can address this need locally, in a flexible and cost-effective manner, where available provision can be fully utilised. Again we would be interested in exploring options that work with neighbouring local authorities

Some local settings are in buildings that are less well adapted to supporting individuals with sensory and physical disabilities, particularly in older age groups. In some cases individuals have to be placed in elderly care homes, which are less able to meet their wider needs. Similar problems arise for people who develop dementia. We would be interested in exploring options with providers of both learning disability and elderly care facilities as to how these needs could be better addressed.

<sup>1</sup><https://www.nhs.uk/conditions/social-care-and-support-guide/care-services-equipment-and-care-homes/shared-lives-schemes/>

# Day care and care at home services for all-age Learning Disability (including Autism)

We believe that access to a wide range of appropriate, high-quality, skills-enhancing day services are an essential component of the support required by users with learning disabilities. They benefit users through enriching their experience and in some cases enhancing employment opportunities. They are also vital for carers, enabling employment, social activities or free time away from their caring responsibilities.

## West Berkshire Council care provision for qualifying residents

West Berkshire has a good range of day activities. West Berkshire Council currently funds c170 individuals for a range of day activities and support from around 30 voluntary and private sector providers. C70 users attend West Berkshire Council's own day and activity centres as part of their care package. We also provide c£1.6m pa as direct payments for 68 individuals to purchase their own support. The breakdown of care support provided is as follows:

### Domiciliary and day care services for learning disability service users funded by West Berkshire Council June 2020

Care Type	Number of users
Extra-care housing with domiciliary care	2
Domiciliary care	14
Day opportunities	168
Direct payments	68
Equipment and monitoring support	3

## Areas of acute need

As with care for the elderly, we face a logistical challenge in providing care, with a significant element of our demand in rural areas in the north, west and south east of our region. To facilitate this, in 2016 West Berkshire Council established locality teams and we are looking for providers who can work with our teams to meet these needs in a cost-effective manner through the use of smart tools and technology, minimising travel time and maximising client interaction. We see a particular opportunity to work with voluntary and community groups in these areas and would particularly welcome proposals from this sector.

As noted above, our desire is to enable users with more complex and challenging needs to live outside residential settings, aiming to move up to 30 individuals in the next four years. This generates a need for carers with a higher level of training, skills and motivation to meet this level of care, both in sheltered accommodation and in parental or shared lives homes. Proposals from organisations with demonstrable success in supporting this transition are of particular interest.

There is a shortage of end of day and holiday period activities for young adults still in education, to support service users and their families with managing their time around the college day/term. We would welcome options from education providers and others in developing this capability.

We see great opportunities for more individuals with learning disabilities to enter employment, but this frequently needs a degree of start-up and on-going support, coaching and mentoring, which is currently insufficient in West Berkshire. Proposals would be particularly welcome from expert providers and potential employers in this area.

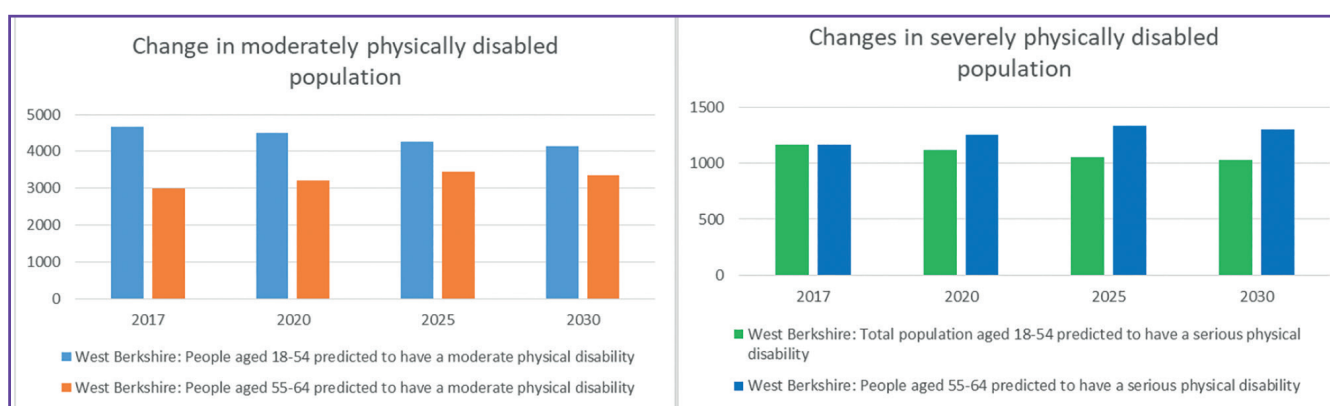
## Role of voluntary and community organisations

As with elderly care, voluntary and community groups play a vital supporting role for many families and individuals. We are keen to hear from more groups who work in this area and also from those who can help promote awareness and outreach more effectively, as this is a constant challenge.

## 6. Care for adults 18-64 with Physical Disability

### Demand

Based on PANSI data and in line with wider population trends, we expect to see the physically disabled population remain broadly stable at around 10,000, with the under-45 decrease offset by a slight increasing in the 55-64 age group.



We would expect therefore to see a small increase in demand for care as there will be a rise in co-morbidity presenting with age. We expect demand for on-going services from the moderately disabled to be relatively low.

This community receives a very small proportion of its care support from West Berkshire Council – 7.5% of severely physically disabled 18-64 receive a council-funded care package, compared to over 50% for those with a learning disability. Estimating the overall market demand for care for this community is very difficult. We believe a high proportion of needs are met through family care, with supportive equipment and technology. Self-funding will also be more common than in other groups, driven by rising employment rates with over 60% of the 25-50 disabled age group being in employment<sup>1</sup>.

### West Berkshire Council direction of travel

There is a very low demand for residential care for individuals in this age range and this is currently satisfied by existing residential home provision. We see this group as highly self-enabled relative to other communities and being particularly open to and enabled by technology-based support, especially in younger age groups.

Although this group has relatively high employability levels, there is still a c28% employability gap nationally compared to the non-disabled group. As West Berkshire is a very high employment area, with a job density ration of 1.17 for every adult under 65, we believe there are significant benefits for employers in reaching out to the disabled community. We are very keen to work with employers, education establishments, skills bodies and support organisations to explore opportunities for decreasing the employability gap.

<sup>1</sup><https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/datasets/disabilityandemployment>

## West Berkshire Council care provision for qualifying residents

West Berkshire Council provides support to 180 residents with physical disabilities, with many receiving more than one type (eg supported living clients attending day centres). The breakdown of care provision is as follows:

### Care services for the physically disabled funded by West Berkshire Council June 2020

Care Type	Number of users
Residential/nursing homes	11
Extra-care housing with domiciliary care	15
Supported living	68
Domiciliary care	77
Day opportunities	41
Direct payments	53
Equipment and monitoring support	24

## Areas of acute need

Many residents with physical disabilities are in employment or higher education and we believe there is potential to expand these opportunities to achieve genuine equality of opportunity for more individuals. This may need additional support (including technology-based solutions) coaching and mentoring, for both the service user and the employer. Proposals would be particularly welcome from expert providers and potential employers in this area.



## 7. Care for all-age adults with Mental Health needs

### Demand

PANSI projections indicate a relatively stable population with severe and enduring needs, but the evidence both nationally and from West Berkshire is that demand is rising, with a 50% rise in severe disorders over the last 30 years.

We therefore expect the population with severe and enduring mental health problems to increase over the next four years. Based on past recessions, we would expect the psychological and economic impacts of Covid-19 to accelerate this growth and increase the complexity and co-presentation of needs. However it is too early to assess more precisely the level of impact.

### West Berkshire Council direction of travel

West Berkshire Council's vision is adults with mental health issues should be supported in the community, using appropriate settings and services. Where residential care is required, the aim should be to enable service users to move on to other settings. We believe supported living has a critical role for this community and see a need for a broad range of settings to cover the variety of needs, each of which may be relatively small scale.

We recognise that an individual's condition can change rapidly and without warning signs and we think that settings that can address this 'emergency' need are a very valuable component of provision, playing a vital role in reducing the need for hospital admissions.

### Residential and nursing provision

Residential and nursing provision for mental health is in short supply in West Berkshire, with one male-only 'ward in the community', two supported living settings in Newbury and one in Thatcham with a total of c35 flats. There is no very short-notice accommodation available.

### West Berkshire Council care provision for qualifying residents

West Berkshire Council provides support to c150 service users, with one-third being 65+. The breakdown of care provision is as follows:





## Areas of Acute Need

The overall provision of supported living is an issue in our area, with two-thirds of mental health supported living placements outside West Berkshire. In line with our strategy to bring users back in region, we would be interested in proposals from providers who could address this issue.

We have a very strong need for specialist respite and emergency provision, to support temporary breakdown and reduce the probability of hospital admission. We are very interested in ideas to deliver this in a flexible and cost effective manner eg through the 'pod' concept trialled in Oxfordshire.

There are a range of volunteer and support groups that play an essential role in mental health support. However this is an area where more options would be welcome and we are eager to hear ideas that can expand the choice available, especially in more rural areas where isolation can be a particular issue.





# 8. Working with West Berkshire Council

## Introduction

Delivering great adult social care is a strategic goal for West Berkshire Council, stretching across all functions in the authority. While ASC sets out the needs, providers of some services may need to engage with other functions and this section describes the key contact points.

## Relevant West Berkshire Council Functions

### Commissioning

The commissioning of specific ASC services in West Berkshire is led by the Commissioning Team and follows the process described in the next section. The role of the commissioning team is to establish needs with colleagues in the social care teams, identify potential providers and ensure the procurement process is followed effectively. Technology Enabled Care is commissioned as part of a multi-agency contract through a single supplier.

### Adult Social Care

As set out in the foreword, we see this document as a starting point for deeper conversations with existing and potential providers. From an early stage we are keen to work with potential providers who believe they may have solutions to the strategic needs identified in this MPS. By engaging early, we can help ensure that concepts are aligned to our direction of travel and reduce the risk that proposals may be misaligned to our strategy. This is the role of Market Management, together with the senior leadership team in ASC and Commissioning colleagues.

### Planning

Other council functions will also be involved in some aspects of social care provision. The Planning Department are a key engagement point where proposals require construction or change of use for a service, and they work increasingly closely with ASC to ensure that assessment of planning requests for care provision aligns with the direction of travel of ASC, described in this document.

### Housing Benefit

The Housing Benefit team can be a key contact for those engaged in providing supported living settings.

## Key contacts

Service Director, ASC	Paul Coe	<a href="mailto:paul.coe@westberks.gov.uk">paul.coe@westberks.gov.uk</a>
Market Management Lead, ASC	John Carpenter	<a href="mailto:john.carpenter1@westberks.gov.uk">john.carpenter1@westberks.gov.uk</a>
Head of Commissioning	June Graves	<a href="mailto:june.graves@westberks.gov.uk">june.graves@westberks.gov.uk</a>
Service Manager, Commissioning	Robert Bradfield	<a href="mailto:robert.bradfield@westberks.gov.uk">robert.bradfield@westberks.gov.uk</a>
Technology Enabled Care	Trish Guest	<a href="mailto:trish.guest@westberks.gov.uk">trish.guest@westberks.gov.uk</a>
Planning	Planning Applications	<a href="mailto:planapps@westberks.gov.uk">planapps@westberks.gov.uk</a>
Housing Benefit	Iain Bell	<a href="mailto:iain.bell@westberks.gov.uk">iain.bell@westberks.gov.uk</a>

# 9. Working with West Berkshire Council - Our approach to Commissioning and Procurement

## Principles

With a significant percentage of Council funding is spent through outsourced contractors, the role of procurement is important to ensure the efficient delivery of public sector requirements across multiple layers of spend. Procurement is the interface between providers and Council Services, with the basic aim of achieving the outcomes of:

- right price;
- right quality;
- right place;
- right time;
- right quantity.

Procurement aims to continuously improve the processes used to obtain best value whilst minimising the burden of tendering for suppliers. Our [Procurement Strategy \[2Mb\]](#) sets out our accountabilities, openness and transparency. Our aim is to build on the skills, expertise and knowledge available to us both locally and nationally, from public, private and third sector organisations and by responding to feedback. We aim to procure goods and services in line with the [Council Strategy \[8Mb\]](#) and [Constitution](#). The key drivers for procurement is to drive quality, innovation and ensure best value at all times. We ensure that all procurements comply with the council's rules and national and European law.

## Technology Enabled Care

West Berkshire Council is one of the partners in the Berkshire Community Equipment Service which includes the provision of technology enabled care (TEC). The service provider is NRS Healthcare and is contracted until 2024 to supply this service. Any TEC suppliers who have products or services that they believe would be of interest to the Council are required to engage through NRS Healthcare as the contracted provider, and the evaluation processes the partnership undertakes. If you are interested in finding out more about how this contract operates or an introduction being made to NRS Healthcare please contact Trish Guest, Commissioner (BCES) [trish.guest@westberks.gov.uk](mailto:trish.guest@westberks.gov.uk)

## Supplier engagement process

Approaching buyers at West Berkshire Council must be done through our e-Tendering portal. [Login to the In-tend portal](#)

All procurements with an estimated value of £10,000 or more must be procured in accordance with the [Part 11 of the Council Constitution \[534kb\]](#), using the In-tend portal.

Registering your organisation is free and takes a few minutes. Once registered you will be able to express interest in any open opportunities when they are made available. We'll also be able to access your details whenever we have a requirement and you may be invited to tender or quote for work.

If you encounter any difficulties whilst using the portal, please contact the In-tend Support Team by phoning 0844 272 8810 or by emailing [support@in-tend.co.uk](mailto:support@in-tend.co.uk).

You may be requested to fill out a [New Supplier Form \[504kb\]](#). Please return this form to [commissioning@westberks.gov.uk](mailto:commissioning@westberks.gov.uk).

Our payment policy is 30 days on receipt of invoice.

## Contracts Register

This [dataset lists details of all live contracts \[171kb\]](#) that the council has entered following a tender process, requests for quotation or calling-off from a framework eg, CCS. This database does not include low value transactional purchase orders or new contracts that are currently being tendered. Information on any new or current tenders can be found on the [In-tend portal](#). We intend to publish our database of current supply contracts every three months.



[www.westberks.gov.uk](http://www.westberks.gov.uk)

WBC/ASC/JC/1020