Market Position Statement 2018 for social care commissioning
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1. Introduction

Nationally and locally, there continues to be challenges for the social care market. Demand for care and support is increasing at a time when significant savings to Council budgets need to be realised, due to reductions in central government funding. Southwark Council continues to be committed to ensuring that there is a fairer future for all its residents, where everyone has the opportunity to fulfill their potential and this is evidenced by raising the ASC precept, investing in the IBCF in homecare and nursing home placements and increasing the SCS budget by £3 million.

The Council cannot improve outcomes alone and this document is written for existing and potential providers of children and adult social care services so that they know the commissioning intentions of the Council. By sharing our intentions, we foresee this document as a starting point for dialogue between the Council, providers, consumers and other partners which will underpin our collaborative approach in 2018.

The Market Position Statement confirms:

1. Who needs our services and the types of service they need.

2. Our current spend on children’s and adults’ care and support, including current and likely demand.


4. How to engage with us to provide better services to children, young people, adults and families in Southwark.
2. National Context

The Care Act 2014

The Care Act 2014 introduced significant changes to provision of adult social care and support by placing new duties and responsibilities on local authorities. It defined a new framework for duties of local authorities related to funding and arrangement of social care including changes made to regulation of social care providers. It included fundamental reforms and stresses the duty of local authorities to:

➢ Promote wellbeing of local adult people and integration between health and social care services,
➢ Provide preventative services which reduce the need for social care,
➢ Promote information and advice on adult social care,
➢ Shape the market by promoting diversity and quality services to meet people’s needs,
➢ Assess needs for care including new eligibility criteria and new right for carers to assessments.

The Children and Families Act 2014

The Act includes reforms for adoption, special educational needs, children in care - and starts the process of change for children's homes

➢ The Act requires local authorities to consider placing children with family or friend carers in the first instance and, if that is not appropriate, to then try to place children in foster-to-adopt arrangements with their prospective adopters.

➢ The Act also seeks to give approved adopters a bigger role in the matching process by giving them access to the Adoption Register, subject to “appropriate” safeguards and gives; the act gives the DfE the power to require councils to outsource adopter recruitment to external agencies.

➢ The Act requires ‘staying put arrangements’ that allow young people to remain in foster care until their 21st birthday.

➢ The Act requires local authorities to appoint at least virtual school heads to promote the educational achievement of looked-after children and requires (EHC) plans to replace SEN statements.
3. Local Context

Council strategies and policies

The Council is committed to a fairer future for all; where everyone has the opportunity to fulfil their potential. To support our vision, Southwark has strategies which help to define what residents of Southwark can expect from their public services.

The council recognises that in times of reduced funding from central government, there's a need to focus our resources on the areas where we feel we can make the most impact.

Following engagement with local people through the council's budget process, the council plan identified a number of principles that would underpin our Fairer Future for all vision and guide the promises and commitments that we agreed through the council plan.

Southwark's Council Fairer Future Principles informs our commissioning intentions and our approach to commissioning. The Faire Future Principles are:

- treating residents as if they were a valued member of our own family
- being open, honest and accountable
- spending money as if it were from our own pocket
- working for everyone to realise their own potential
- making Southwark a place to be proud of

The Council has a range of strategies, pledges and procedures in terms of how we buy services from the independent sector. The Council’s Fairer Future Procurement Strategy¹ supports the Council’s vision for a fairer future for all in Southwark so that we honour our promise to deliver value for money and quality services. The strategy expects officers to consider how they can protect the workforce, evaluate equalities and community impact, increase membership of the diversity standard, and work with organisations that are not discriminatory to trade unions. As per the Fairer Future Procurement Strategy, all contracted services, staff working on Southwark contracts should be paid the London Living Wage, where appropriate. In particular, the council is proud of implementing the Southwark Ethical Care Charter², which pays homecare workers the London Living Wage including travel time. In light of the success of the SECC in homecare, the Council is considering adopting a Residential Care Charter³.

The Council has a strong track record of creating apprenticeships and investing in young people. The Commissioning Division has three apprenticeships, which represents over 5% of our workforce. The Council wants to work with providers who identify opportunities to create apprenticeships. Where appropriate, for high value contracts, the Council will expect providers to create

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³ [https://www.unison.org.uk/content/uploads/2017/03/24230.pdf](https://www.unison.org.uk/content/uploads/2017/03/24230.pdf)
apprenticeships and invest in the future of social care by growing our own. Therefore, when evaluating the quality of providers, we want to know about the social value that you create for your community and the sector, and in particular how you invest in the future of the workforce.

The Health and Wellbeing Board\(^4\) is a statutory committee of the Council, comprising key partners from the health and care system. This includes the Council, Southwark Clinical Commissioning Group (CCG), the Voluntary and Community Sector, the Metropolitan Police Service, Healthwatch and NHS Trusts. The Health and Wellbeing Board is committed to working in partnership to reduce health inequalities, and improve the health and wellbeing of the local population.

The **Southwark Health and Wellbeing Board**'s Vision Statement – Better Care, Better Quality of Life is based upon the priorities and principles contained within the Health and Wellbeing Strategy, and sets out the vision for the Council and Southwark Clinical Commissioning Group (CCG), to further integrate health and social care.

The Board has developed a **Joint Health and Wellbeing Strategy 2015-20**, which is a key overarching strategy for health and care sector and it, sets out the priorities of; giving every child and young person the best start in life and addressing the wider socio economic determinants of health which we know determine our life chances, by:

- Maximising opportunities for economic wellbeing, development, jobs & apprenticeships, and make homes warm, dry and safe.
- Preventing ill health by promoting and supporting positive lifestyle changes & responsibility for own health and improving people’s wellbeing, resilience & connectedness.
- Helping people with existing long term health conditions to remain healthier and live longer lives by improving detection & management of health conditions including self management & support.
- Tackling neglect & vulnerabilities by supporting vulnerable children and young people and ensuring positive transition, ensuring choice and control for people with disabilities and supporting independent living for older people in an age friendly borough.
- Supporting integration for better health & wellbeing outcomes by integrating health and social care that is personalised & coordinated in collaboration with individuals, carers & families and by shifting away from over reliance on acute care towards primary care & self care.

**Southwark’s Five Year Forward View**

In our joint Southwark Five Year Forward View; the Council and CCG have set out an ambition to improve the health and wellbeing of Southwark people.

We recognise that the experiences of people, who use services, and their families and carers, show that existing arrangements do not always deliver the best outcomes for them, and there can be significant improvements if we work together using new approaches. This is about improving quality and overall value; it is not about cuts. If funding was not an issue we would still want to radically improve outcomes.

\(^4\)www.southwark.gov.uk/info/100010/health_and_social_care/2663/health_and_wellbeing_board
We have stated that we want a system that works to improve health and social care outcomes for Southwark people, instead of simply focusing on maintaining current service arrangements. Our local ambition is to create a much stronger emphasis on prevention and early action as well as deeper integration across health and social care, and wider council services (including education). To support this change we will increasingly join commissioning budgets and contracting arrangements to incentivise system-wide improvement. We will focus on specific populations, including particularly vulnerable groups.

We will put ever greater emphasis on the outcomes achieved in addition to the quantity of activity delivered. This means moving away from a system with lots of separate contracts and instead moving towards inclusive contracts for defined segments of the population that cover all of the various physical health, mental health and social care needs of people within that group.

As part of implementing Southwark’s Five Year Forward View, the council has an established a Partnership Commissioning Team with Southwark CCG. The team is responsible for MH commissioning, Children and Young People commissioning and Older People Commissioning. All other commissioning is lead by the Children, Adults and Families’ commissioning team.

Population Segmentation

As part of the Council and CCG’s implementation of Southwark’s Five Year Forward View, our two agencies are developing a Bridges to Health and Wellbeing model. The model enables our two organisations to look at segments (groups within Southwark’s population who share health and/or care need). The outcomes, expenditure, and opportunities for integrated or aligned commissioning, for these segments will then be explored. The Council and CCG are hoping to identify up to 3 segments to pilot this new way of working together to use Southwark’s pound be spent in the most efficient way to achieve better outcomes.

Southwark’s Bridges to Health and Wellbeing model segments the population as follows:

Children and Families

In 2017, Ofsted rated Children Social Care services (CSC) as Good in Southwark. They said that:

| Children who need help and protection | Good |
| Children looked after and achieving permanence | Requires improvement |
| Adoption performance | Outstanding |
| Experiences and progress of care leavers | Requires improvement |
| Leadership, management and governance | Good |
In 2017, we refreshed the **Sufficiency Strategy** for Looked After Children, which is taking steps to secure sufficient accommodation that meets the needs of Looked After Children so that we make the right placement, in the right place, at the right time. In accordance with the Sufficiency Strategy we are committed to working with our partners to deliver the ten I statements for children and young people:

1. I want to feel safe in the place that I live and sleep
2. I want to feel good about myself and be healthy
3. I want to know what my options are
4. I want to be supported to stay in, or be connected, to my (extended) family
5. I want to understand the decisions that are being made about my life and be asked how I can contribute to those decisions
6. I want the things that are important to me to be taken into account when making decisions about my life
7. I want to feel settled and comfortable in the place that I live
8. I want my preferences to be taken into account when choosing who I should live with
9. I want those involved in making decisions about where I live to keep regular contact with me and be responsive to my views
10. I want to learn how to be ready to live the life that I choose when I become a care leaver

**Adult Social Care**

Adult Social Care has a vision for vulnerable adults in Southwark:

> Our Vision for Adult Social Care is to enable people with care and support needs and their carers to live healthy, independent and fulfilling lives in their community. We will achieve this by putting their wellbeing and safety at the centre of our work and doing what we can to prevent, reduce and delay the need for care and support through well-coordinated, personalised health and social care services.

This vision has informed the five strategic priorities for 2018/19:

1. **Preventative Services.** Develop a hub model to be delivered via Southwark’s voluntary and community sector, in order to enable people to remain independent, improve or maintain their wellbeing, and to prevent/reduce the need for the provision of statutory support by the council.
2. **Community and Accommodation Based Support.** Provide effective and efficient community and accommodation based services that improve and maximise people’s independence.

3. **Service Redesign.** Work with our partners to develop pathways across the whole health and social care system to improve and maximise independence, maintain and/or improve wellbeing, and reduce the need for hospital and long term care.

4. **Ensure value for money and quality is at the heart of service provision.** Deliver services within a reduced budget while ensuring high quality, effective and efficient services worthy of Southwark residents.

5. **Workforce.** Ensure that staff are equipped to deliver high quality services, and that they feel confident, inspired and positive about the work they do.

**Provider Engagement**

We have two provider forums, which meet quarterly; they have nominated representatives for the respective safeguarding boards. The Council also holds sector-specific forums such as Homecare providers as well as soft market testing events to test out commissioning concepts for upcoming procurements.

**Public Engagement**

When developing strategies and specifications, we hold extensive consultation events. We work with colleagues across the council to engage with existing networks of people with an interest in social care services. We work closely with Healthwatch and support them exercising their ‘Enter and View’ powers.

There is more that we can do in relation to public engagement in the context of procuring and monitoring services:

- Develop a broad range of communication and engagement methods that are multi-channel and tailored to different audiences and different types of engagement.
- Address the over-reliance on meetings by providing quicker and more flexible ways for participation.
- Make more effective use of Digital Tools based on enabling two-way engagement.
- Involving the public and, in particular users or carers, in the monitoring of contracts.
4. Population overview

The population in Southwark is relatively young and very diverse. Southwark has the highest proportion of African population in England that is composed of almost 13%, and a large number of people from Latin America. It also has children of reception age from black and minority ethnic groups amounting to 75% of its population. There are 120 languages and 11% of households where English is not the first language in Southwark.

I. Population- All Ages

At present the total population of Southwark is 317,738 where approximately 80% people are aged 18 and over, with 20% of the population aged 0-17.

II. Southwark’s Growth projections

The Population of Southwark and its projected growth in the next 20 years are shown in the table below and chart below:

Figure 2: Southwark Population (Source –GLA Feb 2017)
Table 1: Southwark population and Growth projections

<table>
<thead>
<tr>
<th>Age Groups</th>
<th>Year 2017</th>
<th>Year 2022</th>
<th>Year 2027</th>
<th>Year 2032</th>
<th>Year 2037</th>
</tr>
</thead>
<tbody>
<tr>
<td>People aged 0 to 15</td>
<td>59,150</td>
<td>60,416</td>
<td>59,971</td>
<td>59,899</td>
<td>60,411</td>
</tr>
<tr>
<td>People aged 16 - 17</td>
<td>5,668</td>
<td>6,061</td>
<td>6,754</td>
<td>6,330</td>
<td>6,410</td>
</tr>
<tr>
<td>People aged 18 to 64</td>
<td>227,340</td>
<td>239,092</td>
<td>247,216</td>
<td>254,263</td>
<td>260,489</td>
</tr>
<tr>
<td>People aged 65 to 74</td>
<td>14,334</td>
<td>16,761</td>
<td>20,793</td>
<td>24,531</td>
<td>25,734</td>
</tr>
<tr>
<td>People aged 75 to 84</td>
<td>7,876</td>
<td>8,663</td>
<td>9,917</td>
<td>11,646</td>
<td>14,472</td>
</tr>
<tr>
<td>People aged 85 plus</td>
<td>3,371</td>
<td>3,715</td>
<td>4,219</td>
<td>5,018</td>
<td>5,999</td>
</tr>
<tr>
<td>Total</td>
<td>317,738</td>
<td>334,707</td>
<td>348,871</td>
<td>361,687</td>
<td>373,515</td>
</tr>
</tbody>
</table>

By 2037, we expect to have an increase of 2.13% in children aged 0-15, young people aged 16 and 17 is projected to grow by 13%, people aged 18-64 is expected to increase by 14.5% and those aged 65 and over is expected to grow more sharply by 80%. Older people aged 65-74 years – by 79.5% and 75-84 is expected to grow by 83.7% and 85+ by 99.9%.
III. Southwark population compared to London and England

England’s population by 2037 is expected to have increased by over 17% while London’s population is expected to increase by 18% and Southwark by 17.5%.

By age groups, in contrast to England’s whose highest proportion of population is 45-54, the highest proportion of population in Southwark are those aged 25-34 and London’s 0 to 17. London and England also have a higher proportion of older people aged from 45 years and above in contrast to Southwark which has a higher proportion of people less than 45 years (see figure 4).

Figure 4: Population Projections (source-POPPI 2017)

IV. Population – Children and Young people

The number of children under 18 in Southwark in 2017 is 64,817 and it is projected to increase by 3.09% to 66,820 by 2037. Figure 5 depicts a breakdown into four groups as we examine the percentage growth in population in the next 5, 10, 15 and 20 years.

The highest growth rate is predicted for children and young people aged 11 to 15 and 16&17 (by almost 15% in 20 years). Children aged 6 to 10 is predicted to decline, dropping by 3% by 2037, while children aged 0 to 5 is predicted to decrease by 0.7% by 2037.
V. Population – Adults

The Adult population is predicted to have the highest growth in the next 20 years with 65+ growing by 80% (see figure 6).

![Population Growth of Children (Under 18)](image)

*Figure 5: Population Projections (source-GLA)*

![Population Growth of Adults' and Older People (18 plus)](image)

*Figure 6: Population Projections (Source-GLA)*
In Southwark, the mid-year population of adult people aged 18 and over in 2017 is 252,921, it is expected it will increase to 306,694 people by 2037. Among this age group the highest increase (83%) is projected for those aged 75-84 followed by 85+. The least growth is people aged 18 -64 expected to grow by 14.58% by 2037.
5. Current demand for services

1. Children’s Services

The Council received 3,850 referrals to children’s services in 2016/17 for children in need and completed 3,379 social care assessments. As at November 2017, the number of referrals received was 1,822 referrals while the social care assessments was 1,897 to date showing a possible decline by the end of the year when compared to last year.

The number of children looked after has declined in the last five years, the number of LAC fell from 550 in 2013/14 to 488 by Nov. 2017/18. This decline in demand is also seen in the number of children who started to be looked after until 2016/17 when it increased. On the number of children who ceased to be looked after, the reverse is the case.

Table 2: Children looked after in 5 years

<table>
<thead>
<tr>
<th></th>
<th></th>
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<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>CLA</td>
<td>550</td>
<td>505</td>
<td>475</td>
<td>498</td>
<td>488</td>
</tr>
<tr>
<td>Started to be looked after</td>
<td>255</td>
<td>230</td>
<td>235</td>
<td>271</td>
<td>144</td>
</tr>
<tr>
<td>Ceased to be looked after</td>
<td>245</td>
<td>272</td>
<td>265</td>
<td>247</td>
<td>156</td>
</tr>
</tbody>
</table>

Figure 9: Trend data for CLA (Source – Southwark Children’s performance team)
When we benchmark our performance against statistical neighbours and the country, we see that Southwark has a higher rate of children been looked after per 100,000 of children aged under 18.

Presently our rate is 79 per 100,000 compared to 61 of our statistical neighbours. We also have a higher rate compared to London (50) and England (68).

Our current placement location also shows that 77% of our children looked after is placed out of the borough. This is much higher than our statistical neighbours which have 69%.

The rate of looked after children at 31 March 2017

![Graph showing the rate of looked after children from 2012/13 to 2016/17 for Southwark, England, Statistical Neighbours, and London.]

Figure 10: Trend data (source: Southwark Children’s Performance team)

I. Children with Disabilities/ Children receiving SEN Support

The Council also support Children with disabilities by providing short breaks, respite to parents as well as specialist education and resource based units in mainstream schools. We have eleven specialist schools and units in Southwark and two academies.

We have contracts in place for the provision of short breaks during term times and holidays. We have over 100 children with disabilities that are currently accessing this service.

We fund Communication and Language services as well as other specialist services to children with special needs; we have over 350 children receiving communication services from our schools and are currently in the process of procuring the service.

This service is been reviewed currently by the SEN Inclusion team and communication and language service is being procured by the Council on behalf of the schools.
II. Children Aged 16 years Plus

The number of young people that are currently placed in a council accommodation is 485; of this number, 175 are children looked after / Care leavers 16yrs plus.

We currently have contracts in place for the provision of semi independent accommodation and supported housing for young people 16+ that are coming to an end soon. We are looking at a single point of access for our young people and are in the process of procuring the 16plus accommodation based services for our young people in care (section 20) or in section 17.

![16+ Placement Activity](Source: Children’s Brokerage/Contracting Team)

III. Service demand by Service type

The demand for children services has decreased slightly in the last five years as seen in Figure 9 above. Our demand for Foster care is the highest with about 385 children placed with foster carers. Southwark uses internal foster carers as well as independent foster agency (IFA) to meet its needs for foster care. There are currently about 122 children that are placed with IFA.

The second highest in demand is Residential care homes for children, Residential schools and Secure units. We currently have 44 children below the age of 18 in a care home/hostel and this number has been consistent between 40-60 in the last five years. Other placements includes placed with parents, friends and relatives, adoption and youth offenders unit.

Independent Living have also been grouped as other placements, it is a provision of 16-18 in semi independent settings to prepare them for independent living.
2. Adults Services

During the last five years, the demand for adult social care services has increased. The table below shows a snapshot of statutory returns (Short and long term support) at the end of the period in the last four years (31\textsuperscript{st} March).

The number of 18-64 service users increased by 48% from 1082 submitted in 2014/15 to 1610 as at Dec 2017 while 65plus increased by 23% from 1598 to 1967. We have seen an overall increase of 33% in all long term placements.

Table 4: Statutory Returns: 2015/2016 to 2017/18

<table>
<thead>
<tr>
<th>Age band</th>
<th>2014-15</th>
<th>2015-16</th>
<th>2016-17</th>
<th>Mar to Dec 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>18 - 64 years</td>
<td>1082</td>
<td>1228</td>
<td>1541</td>
<td>1610</td>
</tr>
<tr>
<td>65 plus</td>
<td>1598</td>
<td>1754</td>
<td>1933</td>
<td>1967</td>
</tr>
<tr>
<td>Total Long term only</td>
<td>2680</td>
<td>2982</td>
<td>3474</td>
<td>3577</td>
</tr>
</tbody>
</table>
I. People 18 – 64 by Primary Support Group

During the last four years, the number of long term service users for all primary support reasons has increased for ages 18-64. All service users with physical support reasons has increased from 400 in 2014-15 to 581 in 2017. Learning Disability support clients also increased from 474 in 2014/15 to 640 in 2017. Support with memory cognition increased from 24 to 32 in 2017, there are increases also in mental health support and other primary support reasons. (See figure 14).

Figure 13 Demand for Adult Services (source: Adult Performance as at Dec 17)

Figure 14 Service Demands (source: Adults Performance team)
II. People 65 plus by Primary Support Group

Older people have also increased in the last four years. The Short and long term returns shows older people with long term support has increased from 1598 to more than 1968.

Older people with physical support personal care reasons increased in the period from 1245 to 1524 in 2017.

![Figure 15 Service Demand for Older People Services (Source: Adults Performance team as at Dec 2017)](image)

III. Service demand by Service type

The demand for long term community service in the last five years has gradually increased rising by 41% from 2059 service users in 2014/15 to 2904 as at December 2017.

There has also been a slight increase in the demand for long term Residential and Nursing care from 621 to 673 in the last four years.

Table 5: Demand for Long term Residential, Nursing and Community based service

<table>
<thead>
<tr>
<th>Service Type</th>
<th>Yr. 2014-15</th>
<th>Yr. 2015-16</th>
<th>Yr. 2016-17</th>
<th>Yr. 2017-18*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential</td>
<td>416</td>
<td>442</td>
<td>445</td>
<td>420</td>
</tr>
<tr>
<td>Nursing</td>
<td>205</td>
<td>230</td>
<td>246</td>
<td>253</td>
</tr>
<tr>
<td>Community-based</td>
<td>2059</td>
<td>2310</td>
<td>2783</td>
<td>2904</td>
</tr>
<tr>
<td>Total</td>
<td>2680</td>
<td>2982</td>
<td>3474</td>
<td>3577</td>
</tr>
</tbody>
</table>
Trend in the Demand for Services is shown below for Community service, Residential and nursing care services.

*Figure 16 Demand for services (source: Adults Performance team as at Dec 2017)*
Southwark Council operates like all local authorities within the context of reductions to public sector funding. There are increasing demographic pressures, particularly among older people and people with learning disability.

As consequence of these financial and demand processes, Southwark Council is looking at increasingly innovative ways of delivering front line services in order to ensure minimum impact in delivering its fairer future promises. The Council Plan sets out a commitment to local people that it will maintain funding for front line services wherever possible. The Council is committed to making best use of resources, by facilitating the delivery of high quality preventative services which are outcomes based, promote independence and deliver value for money for local people.

Despite these reductions in funding and budget cuts, the Council has continued to experience increases in spend due to demand in the last five years from 2012 to 2017.

In 2016/17, the total expenditure for Adult’s and Children’s services was £493,844,628. The most part of this amount was spent for children’s education services (50%), followed by Adult social care which is a sum of older people, physical disabilities, learning disabilities and mental health (£117,378,434 – 24% of the total spend), then children’s social services (17%) – see figure 7.

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**Figure 7: Gross expenditure (source: Children’s and Adults’ Services)**
Among adult social care services, the highest proportion was spent on services for older people (10%) and learning disability services (9%), followed by other services as physical disabilities, mental health and substance misuse, public health and other adult social care services.

The trend of spend in the service in the last five years is shown below. We see a gradual increase in the last three years for adult services. Children services have however had a decline in spend.

Table 1: Financial spend across Children’s Social Care (CSC) and Adults Social Care 2012/13 – 2016/17

<table>
<thead>
<tr>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Adult social care Total Spend</td>
<td>£115,813,897</td>
<td>£108,598,570</td>
<td>£111,799,285</td>
<td>£122,792,321</td>
<td>£124,981,394</td>
</tr>
<tr>
<td>Children and Families Total</td>
<td>£81,716,095</td>
<td>£88,549,727</td>
<td>£89,400,917</td>
<td>£81,495,155</td>
<td>£85,516,306</td>
</tr>
</tbody>
</table>

Figure 8: Trend of expenditure (source: Children and Adult Services)
7. Future demand for services

The increases in population, as demonstrated earlier in chapter 5, is expected to impact on the demand of services for young people becoming 16 as well as older people aged 65-84 and 85+.

Children’s Services

To be able to predict the demand for our services, we have considered the trend in the number of children coming into care in the last five years by age-group. The table shows the trend of children starting to be looked after, From the table, Ages 10-15 is our highest number of intake followed by 16-17 and 5-9 in the last five years.

This intake is in line with the projected population growth in figure 5 which shows a higher growth rate of young people of ages 16-17 and 10-15.

We have also considered the trend in the total number of children and young people coming into care and the trend in the last five years shows a decrease in the number of children looked after as seen in figure 7.

Table 3: Children stating to be looked after – age when starting

<table>
<thead>
<tr>
<th>Age Grouping</th>
<th>Yr. 2012/13</th>
<th>Yr. 2013/14</th>
<th>Yr. 2014/15</th>
<th>Yr. 2015/16</th>
<th>Yr. 2016/17</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 1</td>
<td>21.4%</td>
<td>19.2%</td>
<td>14%</td>
<td>18%</td>
<td>14%</td>
</tr>
<tr>
<td>1-4</td>
<td>16.8%</td>
<td>17.4%</td>
<td>14%</td>
<td>8%</td>
<td>12%</td>
</tr>
<tr>
<td>5-9</td>
<td>16.5%</td>
<td>13.6%</td>
<td>22%</td>
<td>15%</td>
<td>16%</td>
</tr>
<tr>
<td>10-15</td>
<td>26.9%</td>
<td>26.0%</td>
<td>27%</td>
<td>32%</td>
<td>30%</td>
</tr>
<tr>
<td>16-17</td>
<td>18.4%</td>
<td>23.8%</td>
<td>23%</td>
<td>27%</td>
<td>28%</td>
</tr>
</tbody>
</table>

Source: Children’s Performance Team

The Council has thus predicted the demand for children looked after as one decreasing slightly in the next 5,10,15 years with intermittent burst of increases in line with past trends with a higher need for accommodation based services for young people coming into care as well as children with disabilities requiring residential services and short breaks.
There is also a demand for care homes within the borough as a result of the higher percentage of children looked after being placed out of the borough and our sufficiency duty to place them closer to the borough, where appropriate? This will increase the demand for foster carers and care homes within the borough.

The demand for Fostering, Semi independent and Care homes will also fluctuate in line with the children looked after. The chart below shows the projected growth.

![Projected growth for demand for Fostering, carehomes and Semi-Independent](image)

*Figure 17: Placement activity for Children*

**Adults’ Services**

The Projecting Older People Population Information Systems (POPPI) predicted that in the next 20 years, there will be an increase of almost 50% for older people living with dementia, living with limiting illness whose activities is limited a lot and those unable to manage at least one self care activity on their own.

Similarly, The Projecting Adult Needs Information Systems (PANSI) has predicted a growth in Health and Social care needs of 15 -33% increase in the next 20 years for adults having a serious physical disability, having a hearing impairment or having a visual impairment. The highest been adults projected with hearing loss which is more than 30% and the smallest been those with visual impairment of about 12%.

These projections of increase in demand are also resounded by other organisations such as Greater London authorities, National Health Service (NHS), office for national statistics and others and are as a result of the improvement in medical and health care leading to increase in life expectancy as well as more people living with complex health conditions.
Figure 18 Future Health and Social Care Demand for Older People (Source: POPPI)

The Council also expects that in the next 20 year period, the demand for Council’s long term services for service users will increase from the current 3577 to almost 5500 people. This increase will be seen more among older people in line with sharp population increase.

The below chart takes shows a chart of all services in demand (short and long term services), Telecare and other short term service is expected to increase sharply as more and more older people live at home.
Figure 20: Projected increase in service

We expect this increase to impact on the demand of services such as Homecare which is expected to increase from the current number of 2400 to about 4000 in 2037.

Residential and Nursing care is also expected to increase as a result of the increase in population. Residential care will increase from 788 to more than 1200 and nursing care from 480 to 792 (all short and long term).

Figure 21: projected increase in service type
8. Current Supply

We have commissioned a range of Personal care and health & wellbeing services for our service users in children and adult social care; these include:

**Children’s Services**

- Independent Fostering Agencies
- Semi-independent accommodation and support
- Residential
- Supported Housing
- Independent Housing for Care Leavers
- Respite
- Care in homes
- CAMHS services

**Adult Services**

- Residential care:
- Nursing care:
- Homecare:
- Prevention and Inclusion services which promote independence and help prevent and/or delay the need for take up of social care for people with a history of homelessness, substance misuse and mental ill health.
- Voluntary Sector Support services: Information and advice; Carers support services; Short breaks/Respite services for learning disabilities service users and Advocacy services.
- Assistive technologies, including telecare, which enables individuals, stay independent within their own homes for longer. Integrated Community Equipment Service (ICES).

**Public Health**

- Alcohol and drug misuse services; Tobacco control and smoking cessation services.
- Community lifestyle and weight management services – obesity, increasing levels of physical activity locally.
- Public mental health services.
- Behavioral and lifestyle campaigns to prevent cancer and long-term conditions.
9. Commissioning Intentions

This section sets out our Commissioning Intentions.

We will regularly discuss this plan at our Providers’ Forums. The plan sets out our commissioning intentions, upcoming market opportunities and how commissioners will engage and involve providers.

<table>
<thead>
<tr>
<th>A. Current models and/or approaches</th>
<th>B. Desired models</th>
<th>C. How the Council will support providers to deliver this.</th>
<th>D. New models to be in place by:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Children’s commissioning</strong></td>
<td></td>
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</tr>
<tr>
<td>1. Support and housing for care leavers and young people at risk of homelessness over the age of 16 years:</td>
<td>The Council is bringing forward a new approach to services for care leavers and young people at risk of homelessness over the age of 16 years. This was set out in the 8th May 2017 Cabinet Report:</td>
<td>The Council has co-produced the new 16+ model in ongoing dialogue with young people, providers and other key partners. The 16+ procurement will include a new service specification for 16+ Support and Resettlement Services, and this also includes updated KPIs.</td>
<td>Summer 2018</td>
</tr>
<tr>
<td>• Semi-independent accommodation services</td>
<td><a href="http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=6154">http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=6154</a></td>
<td></td>
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</tr>
<tr>
<td>• Young People’s Supported Housing</td>
<td>Further information was set out in the procurement strategy for 16+ services as set out in November 2017.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Young People’s Floating Support</td>
<td><a href="http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=6338">http://moderngov.southwark.gov.uk/ieDecisionDetails.aspx?ID=6338</a></td>
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<tr>
<td>2. Family Drug and Alcohol Services</td>
<td>The Council has a longstanding and successful service model in place which provides an integrated service across social care, health and the judiciary.</td>
<td>The Council has undertaken key work with providers to develop a strong FDAC offer. A new FDAC contract has been awarded.</td>
<td>Summer 2018</td>
</tr>
<tr>
<td>• Support for families to stabilise and overcome substance misuse challenges at the point of care proceedings.</td>
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<td>3.</td>
<td>Family Support Services</td>
<td>The Council has commissioned a range of family support services through its Troubled Families programme. There is ongoing work to further develop the best early intervention approach for families at risk.</td>
<td>The Council has undertaken key work with providers to develop a strong early intervention and family support service offer. A new family support services contract is being procured at this time.</td>
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<tr>
<td>4.</td>
<td>Children’s care home provision</td>
<td>• Residential care home provision available closer to Southwark • Provision geared to needs of adolescents as in section A • Need to provide stability of placement • Local placements able to more effectively engage with local social work, health and education To meet desired outcomes for the child/young person • Outcome based commissioning approaches</td>
<td>• Revised sufficiency strategy and ongoing engagement with current and potential providers • Consideration of options to develop block provision in partnership with neighbouring boroughs • Participation in the South London Regional Commissioning Collaborative</td>
</tr>
<tr>
<td>5.</td>
<td>Children’s fostering provision</td>
<td>• Need for placements closer to Southwark • Need for placement choice taking into account needs of groups identified in “1” • Outcome based commissioning approaches as for “1”</td>
<td>• As for “1”, revised sufficiency strategy and ongoing engagement with current and potential providers • Participation in South London Regional Commissioning Collaborative as for “1”</td>
</tr>
<tr>
<td>6.</td>
<td>Care at home for children and young people with disability</td>
<td>• Increase in personalisation and choice</td>
<td>• Commissioning of Framework for providers of care at home, able to</td>
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<tr>
<td></td>
<td>Majority of packages currently spot purchased</td>
<td>Increase uptake of direct payments</td>
<td>include access by users of direct payments as well as by the local authority directly</td>
</tr>
<tr>
<td></td>
<td>Direct payments not utilised by all who could benefit from them</td>
<td>Outcomes based commissioning whether services purchased via direct payments or not</td>
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<td></td>
<td>45% of Education, Health and Care plans feature autistic spectrum disorder</td>
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**Older People**

7. Reablement services for people who are returning from hospital and require further support at home, or those who are at home and can with time limited intervention be reabled to live independently with limited support

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<tr>
<td></td>
<td>A more flexible reablement model adapted to the needs of the services user which may have different time limits dependent on need. This will be outcomes based and developed around the different requirements of the population. Integrated models of reablement which link social care and health together and link with other aspects of services including, Supported Discharge Teams, Rapid Response and @home services and other linked services</td>
<td>The council is developing a future procurement strategy for this service and will be developing and consulting on an outcome based commissioning strategy over the next 12-18months.</td>
<td>Autumn 2019</td>
</tr>
</tbody>
</table>

8. Home care, the council supports around 1500 (mainly older and disabled) adults with eligible needs in their own homes to enable residents to live independently with support. Home care procurement has concluded to reduce the number of providers within the council’s framework and to deliver a service aligned to the North and South of the Borough to mirror the developing Local Care Networks.

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<tr>
<td></td>
<td>The future model is based on an adult model which is not specific to a particular age or type of disability or condition. The procurement did include specialist extra care and mobile over night contracts. The contracts will last up to 7 years and there are not likely to be any significant</td>
<td>The council will support successful providers through a programme of mobilisation and continue to provider support though a regular provider forum and relationships with commissioners and the contract management team</td>
<td>Spring 2018</td>
</tr>
</tbody>
</table>

32
opportunities for home care in the near future. The council continues to support providers developing their self-funded user base within the borough.

<table>
<thead>
<tr>
<th>9.</th>
<th>Intermediate care</th>
<th>Analysis of those residents who have been in hospital and are unable to return home, but require no further hospital intervention shows that there may be a cohort of patients who require some intermediate care prior to returning home to assist with mobilisation and therapeutic interventions that would not be available in an acute setting, but would be better provided in a specialist unit</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>There is some intermediate care provision in the Borough which provides services for those with complex needs coming out of hospital and helping them to return home, however, Southwark is reviewing its current requirements to ensure they are adequate to meet current need and whether there is a need to procure further intermediate care beds</td>
<td>If the evidence demonstrates that there is a need for specialist intermediate care – a outcomes based specification will be developed in consultation with providers in the 1st half of 2018</td>
</tr>
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</table>

10. | Residential, nursing and extra care | **Short term** we wish to develop a stronger contractual relationship with homes inside Southwark and neighbouring boroughs, in order to provide some stability within the market and achieve value for money. A report will be considered by the council’s cabinet in early 2018 setting out the business case for this ambition. **Medium term** we wish to increase the supply of in borough beds by at least 100 |
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<tr>
<td>The council has identified the need to increase the number of nursing care places in the Borough over the coming years. There are currently 2 nursing homes run by 2 separate companies in the Borough providing a total of 200 beds. One home is block purchased by a neighbouring Borough CCG partners are looking to further develop enhanced primary care cover inside the home. There are currently 280 residential beds in 6 homes in the Borough. There are currently 135 extra care flats with a further 120 units being developed</td>
<td>A procurement strategy is being developed by the end of March 2018. Options being considered are a more formalised contractual relationship with local homes possibly through a framework. We are also looking to providers who are interested in developing new or re-provisioning existing nursing care in the Borough. It is unlikely we would wish to promote additional residential units but would be interested in proposals in relation to reclassification of existing beds to nursing care or supported living options or rehab move on</td>
<td>TBC</td>
</tr>
</tbody>
</table>
| 11. | Care, support and housing services for adults with learning disabilities:  
- medium and high-level supported living services  
- high and complex needs scheme  
- residential care services  
- learning disabilities floating support services | The Council is bringing forward a new approach to care, support and housing services for adults with learning disabilities. This will be published in January 2018 in the report: Strategic Options Assessment for provision of learning disabilities support and accommodation services. | The Council has undertaken engagement work, including recent provider for a, to engage the market on the Council's planned approach. Further steps will be set out in the January report. | January 2019 |
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</thead>
<tbody>
<tr>
<td>12</td>
<td>Respite services for adults with learning disabilities</td>
<td>The Council plans to review its current approach to respite services for people with learning disabilities, in line with wider work to transform the care, support and housing offer in Southwark.</td>
<td>The Council will be undertaking engagement work with providers in this area as part of the review.</td>
<td>TBC</td>
</tr>
<tr>
<td>13</td>
<td>Transport training for adults with learning disabilities</td>
<td>The Council plans to review its current approach to transport training services for people with learning disabilities, in line with wider work to transform the care, support and housing offer in Southwark.</td>
<td>The Council will be undertaking engagement work with providers in this area as part of the review.</td>
<td>TBC</td>
</tr>
</tbody>
</table>
# Community & voluntary Sector

<table>
<thead>
<tr>
<th>No.</th>
<th>Service Description</th>
<th>Support Options</th>
<th>Revised specification</th>
<th>Timeframe</th>
</tr>
</thead>
<tbody>
<tr>
<td>14.</td>
<td>Information and Advice Services (Carers)</td>
<td>• Drop-in</td>
<td></td>
<td>Winter 2018</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Telephone / Web support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15.</td>
<td>Advocacy Support</td>
<td>• Face to face support</td>
<td></td>
<td>Autumn 2018</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Electronic (remote) support</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

# Mental Health

<table>
<thead>
<tr>
<th>No.</th>
<th>Specifics</th>
<th>Support Options</th>
<th>Revised specification</th>
<th>Timeframe</th>
</tr>
</thead>
</table>
| 16. | Separate contacts across health and social care acute, community and third sector provider markets                                                                                                      | New contracting model to maximise and optimise available resources | 1. Provider forums to build capacity and support provider relationship build  
2. Development of new service specifications  
3. Procurement of MH services during 2018-19 | Spring 2019     |
| 17. | Support and housing for adults with mental ill health and adults at risk of homelessness:                                                                                                          | The Council is working with the local CCG to bring forward a new approach to recovery support and housing services for adults with mental ill health. This has been set out in the draft Southwark Mental Health and Wellbeing Strategy which will be agreed in March 2018. | The Council has co-produced the Mental Health and Wellbeing Strategy in ongoing dialogue with people with mental ill health, providers, clinicians and other key partners. | Spring 2019     |
|     | • Supported housing services for adults with mental ill health under criminal sections of the Mental Health Act 1989                                                                                   | The Council plans to bring forward an options appraisal report on these services by summer 2018.  
|     | • Supported housing services for adults with mental ill health requiring aftercare as set out in the Mental Health Act 1989                                                                               |                                         |                                         |
|     | • Supported housing services for adults with mental ill health homelessness priority need                                                                                                           |                                         |                                         |
|     | • Resettlement and move on services for adults with mental ill health                                                                                                                                    |                                         |                                         |
|     | • Hostel services for adults with mental ill health and adults at risk of homelessness                                                                                                                |                                         |                                         |
### Housing related support services

| 18. | Refuge services for women and children at risk of domestic abuse. | The Council has a longstanding commitment to the provision of refuge services in Southwark as set out in its Domestic Abuse Strategy. The Council intends to bring forward an integrated approach across domestic abuse outreach and refuges, and work will be taking place in 2018/19 to work on this approach. | The Council will be working with service users, providers and other partners to develop an integrated approach across domestic abuse outreach and refuge services. The Council will bring forward proposals on this area prior to July 2019. | Summer 2019. |

### Other

| 19. | Community equipment services for children and adults with health and care needs: | The Council has an integrated health and social care community equipment service which was recently re-let on a four-year contract. | The Council will be working with the successful tenderer of this recent procurement. There is a four year contract in place for these services. | 2020/21 |

• Occupational therapy and clinically prescribed equipment to support children and adults to stay safe and well in their own homes

There is a review of CAMHS and wider wellbeing services for children and young people that is due to conclude in June 2018. The outcome of the review will inform this section of the MPS. In addition, the action plans that are being developed in response to the Joint Mental Health and Wellbeing Strategy may also inform this section of the MPS when it is republished in September 2018.