Contents

What is a Market Position Statement?
   Who is it for?

Key Messages
   What this means for providers

What’s happening in Newcastle?
   What we do
   Finances and funding
   What do people say?
   What do providers say?

What services in Newcastle will look like
   What business development opportunities will this create?
   How Newcastle Council will help providers be fit for the future
What is a Market Position Statement?

Newcastle City Council aspires to be a cooperative council. This means we want to:

- Deliver services in cooperation with communities,
- Enable communities to inform choices about the Council’s priorities,
- Involve communities in deciding how services can be delivered in the future and how to achieve a balance between those services which are available to everyone and those that are for people with an assessed social care need.

Market Position Statements are the first step towards achieving a cooperative approach to the commissioning of services. These documents are designed to help Adult Social Care providers and the people who use Adult Social Care services in Newcastle understand what services are currently on offer in the City, and also what we think Adult Social Care service should look like in the future.

We are producing a range of these documents looking at different client groups and service models in the City.

In developing these documents we have spoken to people that use Social Care services, the people that work in services and the organisations that
run them to understand what they think of what’s currently on offer and how they would like to see it change.

We want to use these documents as the start of a conversation with providers, carers and people who use services, about the vision for the future of our Social Care market in Newcastle.

Who is it for?

This document is aimed at existing and potential providers of learning disabilities services in Newcastle; this can range from providers of floating support and short breaks to independent supported living and specialist residential services.

Providers of current services can learn about our intentions for what services in Newcastle will look like and use this to inform their own planning for the future.

Providers from other areas or people who are interested in starting up social enterprises or a business in this sector can use the document to identify future opportunities in the market.

Drivers for Change

White Paper – ‘Caring for our future’
“Keeping people safe depends upon strong multi-agency and multi-disciplinary partnerships. All providers and commissioners of care services have a responsibility for the quality and safety of those services. Cases like those at Winterbourne View and Ash Court are appalling examples of neglect, and of physical and emotional abuse. Such failings are unacceptable”.

Winterbourne View Programme
The government final report into the events at Winterbourne View Hospital set a programme of action that will bring about a dramatic reduction in hospital placements and ensure vulnerable people no longer live inappropriately in hospital. This includes local joint action to provide high quality care and support services for all people with learning disabilities or autism and mental health conditions or behaviour described as challenging, in line with best practice.
Newcastle City Council’s aim is to buy affordable services which support people with Learning Disabilities to live the life they want, as independently as they can and remain independent for as long as possible. This aim, of course, has to be achieved within restricted means.

In general the demand on Social Care services in Newcastle is increasing at a time when budgets are being cut by central government. This means that we need efficient ways of providing the support people want in order to live the life they want.

There are increasing numbers of adults with learning disabilities. This is partly due to increasing numbers of older people with learning disabilities and increasing numbers of young people with complex needs surviving into adulthood.

There are increasing numbers of learning disabled adults accessing commissioned services each year. They have increasingly complex needs and there is increasing pressure on meeting the needs of people with autism and learning disabled people with dementia.
The overall population in Newcastle is growing. Locally the number of people aged 18-64 is predicted to rise 3.24% from 188200 in 2012 to 194300 in 2020.

<table>
<thead>
<tr>
<th>People 18-64 with a learning disability</th>
<th>Newcastle</th>
<th>North East</th>
<th>England</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;18</td>
<td>7.01%</td>
<td>4.56%</td>
<td>8.44%</td>
</tr>
<tr>
<td>18-64</td>
<td>3.24%</td>
<td>0.07%</td>
<td>3.51%</td>
</tr>
<tr>
<td>65+</td>
<td>12.97%</td>
<td>16.41%</td>
<td>17.08%</td>
</tr>
<tr>
<td>Total</td>
<td>5.35%</td>
<td>3.91%</td>
<td>6.85%</td>
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</table>

Source: Office for National Statistics (ONS) Crown Copyright 2012

For people with a learning disability in this age range, there is a predicted rise of 3.3% from 4664 in 2012 to 4820 by 2020.

Within the 18-64 age range, the highest projected percentage increase is for people with severe learning disabilities, a rise of 4.84% between 2012 and 2020.

For people aged 65 and older is predicted to increase by 13%.

During the same period, the numbers of people aged 65 and older is predicted to increase by 13%.

For people in this age bracket with a learning disability, there is a projected increase of 14%.
What this means for Providers

The shift in expectation from caring for people to enabling and developing independence means that staff need to have a different attitude and behave in different ways to improve outcomes for people. This has workforce recruitment, training and development implications.

More people with low and moderate needs funding their own care will lead to increase in contracts with individuals rather than the Local Authority. Providers will need to market their services to individuals rather than to commissioners.

There is a focus on people living ordinary lives in ordinary settings and demonstrating the achievement of individual outcomes. This means developing facilitative support which, for example, helps get people involved in their local communities and accessing mainstream leisure, education and employment.

People with complex needs who are currently out of area or in hospital settings are being helped to come home if they want. There is a need for skilled services that provide stable staffing and can support individuals to active positive progression.

To address health inequalities in people with learning disabilities primary healthcare needs to be improved, along with the support for older people.

Examples of the outcomes services need to help people achieve:

- I am safe
- I am treated with compassion, dignity and respect
- I am involved in decisions about my care and support
- I am protected from avoidable harm, but also have the freedom to take risks
- I am helped to keep in touch with my family and friends
- I am supported to make choices in my daily life
- I am supported to live safely in the community
- I am supported to get good quality healthcare
- Those around me and looking after me are well supported
- My care and support is regularly reviewed to see if it still meets my needs.
What’s happening in Newcastle?

What we do

Newcastle City Council funds social care for people who have a Critical or Substantial need under the Fair Access to Care (FACS) criteria. People with a low or moderate need pay for their own care and support. We also signpost people to appropriate services no matter what their level of need.

We support a number of organisations through a variety of funding streams, including the Newcastle Fund and Public Health monies. These organisations have services which support people with lower level needs, either in the short or long term. This prevents people’s needs escalating to the critical or substantial level, which reduces demand on statutory services.

The preferred model of support in Newcastle puts the emphasis on local community provision wherever this is possible. Newcastle City Council commissions the majority of support for people with learning disabilities through framework agreements. These are focussed on independent supported living, floating support, day opportunities and to a lesser degree, specialist residential provision.

A number of other services are contracted such as support for direct payments, commissioned at an individual level or funded through grant payments, such as advocacy.

Current supply

There are currently:

- 240 adults with learning disabilities in independent supported living schemes
- 306 adults with learning disabilities are receiving care at home
- There are 75 people living in residential placements, 57 of these are living in out of area residential placements
- Only 11% of the personal budgets in Newcastle are held by people with learning disabilities.

Personal Budgets
Newcastle spends around 27% of its budget for adult social care supporting people with learning disabilities.

**How we spend our money**

- Physical Disability: 11%
- Learning Disability: 27%
- Mental Health: 8%
- Other Services: 3%
- Old People: 51%

**Finances and funding**

In 2011-12 £37.5 million was spent on Learning Disability services for people aged 18-64 in Newcastle. In 2012-13 this decreased slightly and £35.9 million was spent on Learning Disability services for people aged 18-64 in Newcastle.

Despite this decrease, we spend on average £330,000 more per 10,000 population when compared to the rest of England.

During 2012-13 and in comparison to other areas in the North East and the rest of England Newcastle spends more than average per 10,000 population.

<table>
<thead>
<tr>
<th>Area</th>
<th>Spend on LD per 10,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newcastle</td>
<td>£1,575,000</td>
</tr>
<tr>
<td>North East</td>
<td>£1,360,000</td>
</tr>
<tr>
<td>England</td>
<td>£1,245,000</td>
</tr>
</tbody>
</table>

The average spend per working aged person with a Learning Disability on residential care in Newcastle is £1,055.

The average spend per working aged person with a Learning Disability on direct payments in Newcastle is £242 per week.
What People with Learning Disabilities Say

From talking to local people we heard the things that are most important to them are: friendships and relationships, transport, jobs, tackling hate crime, transitions and money.

Adults with a learning disability have said:

- They want opportunities and support to develop friendships and relationships
- They want more social activities especially in the evenings and weekends, and to stay out late.
- They want to be enabled and feel safe to travel independently on all forms of local transport
- They want opportunities to work and jobs that suit them as an individual not as someone with a learning disability. People like having something to do that makes them feel valued – something that makes a contribution to their community
- Their main issue is fear of hate crime. They want safe places to go day and night, and for the wider public to know about hate crime and what to do about it.
- They want to be supported to understand what it means to be an adult, planning their future and supported to discuss this with their parents.
- They want to learn money skills to help them be more independent.  

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1 Let’s Talk Day, Newcastle, October 2012.
Carers and what they say

Family carers of people with learning disabilities are often unique amongst carers. They often experience a lifetime of caring, as their son, daughter or sibling with learning disabilities lives a longer and more fulfilling life.

During this time they will have developed expertise as they’ve experienced negotiating and sometimes battling their way through the health, education and social care systems.²

The 2012 Newcastle Carers Survey shows that 66% of carers of people with a learning disability are aged 55 years and older. Forty seven percent of the people they care for are aged between 18 and 34.

Eighty seven percent of the carers live with the people they care for.

Results from the 2013 Annual Family Member Carer Questionnaire show that 94.6% of respondents are happy with the care provided, with 93.9% feeling they are kept informed by the provider.

From 163 recorded comments, 147 were positive and 5 were related to service improvements. Eleven of the comments were neutral or negative, with the highest number of these being about waiting for the Provider to respond to an issue they had raised.

² http://www.carers.org/

Some key messages from carers:

- Parents have an extremely high level of anxiety and fear about the future;
- 85% were either ‘worried’ or ‘very worried’ regarding whether their son/daughter would get the support they need;
- Parents have very little trust in ‘the care system’ to help them plan the future;
- Professionals spend very little time talking with parents about future plans;
- Parents feel it is a ‘battle’ to secure appropriate care and they often lose it;
- There is a lack of clear and accurate information to help with planning.

What do providers say?
We talked with Providers about the Market Position Statement, how we can work together and the learning disability care market at a consultation event in early 2014. A summary of the workshops is below:

Developing the Commissioning Provider relationship:

- **What would help?** Adopt a range of commissioning methods, more regular engagement, communicating the market drivers.
- **Potential barriers:** Lack of trust and clear expectations, not sharing information, difficulty in responding to changing commissioning intentions and customer demand, lack of front-line social work presence in discussion forums.
- **Overcoming barriers by:** Developing partnerships to understand needs, share best practice and training, ensuring service reviews reflect risk and volume and include a range of stakeholder opinion.

Market Structuring:

- **What can commissioners do to help?** Develop a partnership approach with providers; provide more information about tender limits and opportunities, attract high quality staff to the care market.
- **What can providers do to help?** Get ready for Individual Service Funds, foster and share innovation and good practice, provide clear information about services on offer.

Learning disabilities service providers reflections:

- We need to know more about the current and future demand for the different types of services and accommodation, including from people who fund their own care.
- The risks of achieving personalisation, a healthy market and quality because of price pressures need to be acknowledged.
- We’d like to see clearer benchmarks for quality; a definition of quality in relation to outcomes.
- We’d like to know why Newcastle spends more on Learning Disabilities services.
- People who use the services having more input into monitoring them.
What we will do

We are developing 3 further Concierge+ schemes for people with learning disabilities (including people who have autism). The Concierge+ schemes aim to improve opportunities for people by giving them more choice and control over where they live and who they live with.

We are also developing four Community Cluster services. The Community Cluster is a brand new service model for Newcastle; these services would centre on a base which is staffed 24 hours a day and from which care and support could be provided to people living nearby in their own homes.

We are looking at how traditional day services are provided in the area to see if there’s a better way to meet the needs of local people.

We are reviewing the whole range of advocacy services we commission and fund to see if there’s a better way to provide these.

We are working with colleagues in the Health Service and Children’s Services to improve support and transitions.

What services in Newcastle will look like

- More people will gain and maintain employment (paid and voluntary) through work placements, education and training.
- More people with have their support needs met by accessing social and leisure groups in their local community.
- People will feel safe and part of their local community.
- Providers will work together to develop innovative, evidence based support.
- More people who have complex support needs will be enabled to come home to Newcastle if they want to.
- People will be supported to live where they want, either by themselves or with people they want to live with.
- People will be able to choose from a range of ways to have a break from their family carers.
- People will be able to employ their own Personal Assistants who have the specialist knowledge and skills needed to offer support.
- Providers will work together to create integrated support for people over their life span.
What business development opportunities will this create?

• **Employment, education, voluntary work and training** - you may want to provide support that enables people to gain and maintain employment, work placements, education and training, or that enables people to feel a useful and valuable part of their community.

• **Advocacy, support planning and brokerage** - you may wish to offer services to help people set up and maintain their support plan or provide different types of advocacy support.

• **Development and delivery of support** - you may want to develop partnerships with other providers to create flexible support options that support people over their lifespan or develop a more specifically skilled workforce to work with people with the most complex behaviours.

• **Community activities** – you may want to consider providing support that enables people to access leisure facilities, clubs or activities in their local area.

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Some elements of a good service model

• Built on person-centred approaches which show how individuals aspirations are achieved

• Support which is co-produced the appropriate range of stakeholders

• Flexible and responsive

• Invests in well trained, highly valued and supported staff

• Support that promotes independence, choice and control, and grows confidence so people can speak up about the things that are important to them

• Support that uses non-aversive techniques

• Supports that are evidence –based and increase quality of life.
How Newcastle Council will help providers be fit for the future

We will do our best to play our part in helping to develop the market by:

- Maintaining the good relationships that have been developed within the Learning Disabilities Provider Forum
- Developing the Forum to focus more on hot topics in the market
- Hosting events and facilitating dialogue to promote partnerships approaches to shared issues
- Explore if there’s flexibility within the procurement rules and what this means for commissioning
- Further developing the service review (monitoring) system

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