

# Market Position Statement

For Adult Social Care in Nottingham City



**Nottingham**  
**City Council**

# Introduction

This Market Position Statement is an important part of our relationship with the market, and aims to:

- build on local strategies and vision for the future of Nottingham City.
- outline the new approaches and services that are needed.
- encourage partners to shape a sustainable model of care.
- achieve better health and wellbeing outcomes.

The objective of this Market Position Statement is to outline our understanding of the current market for **adult social care services** and to identify future demand for services, and to initiate meaningful discussions between the Council and providers of services to ensure that we can meet local social care needs. We will continue to work within the ICS to complement their commissioning of primary and secondary mental health services and NHSE (specialist inpatient mental health services and services in secure settings such as prisons).

This Market Position Statement provides an overview of the demographic make-up of Nottingham and the changing needs we are responding to now and in the future. It also sets out opportunities for providers, partners and stakeholders to help to develop services to meet needs and demand.

Nottingham City Council is working towards significant change in the way adult social care services are delivered. Local people's expectations have changed, new models of service delivery are under review or being developed and there are opportunities to harness new technologies, with an increased focus on prevention and ensuring outcomes for citizens are the best they can be.

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# Better Lives Better Outcomes

Better Lives Better Outcomes is Nottingham City Council's Adult Social Care strategy and sets out how care and support are provided for older and disabled people in the city.

## Strategic Vision:

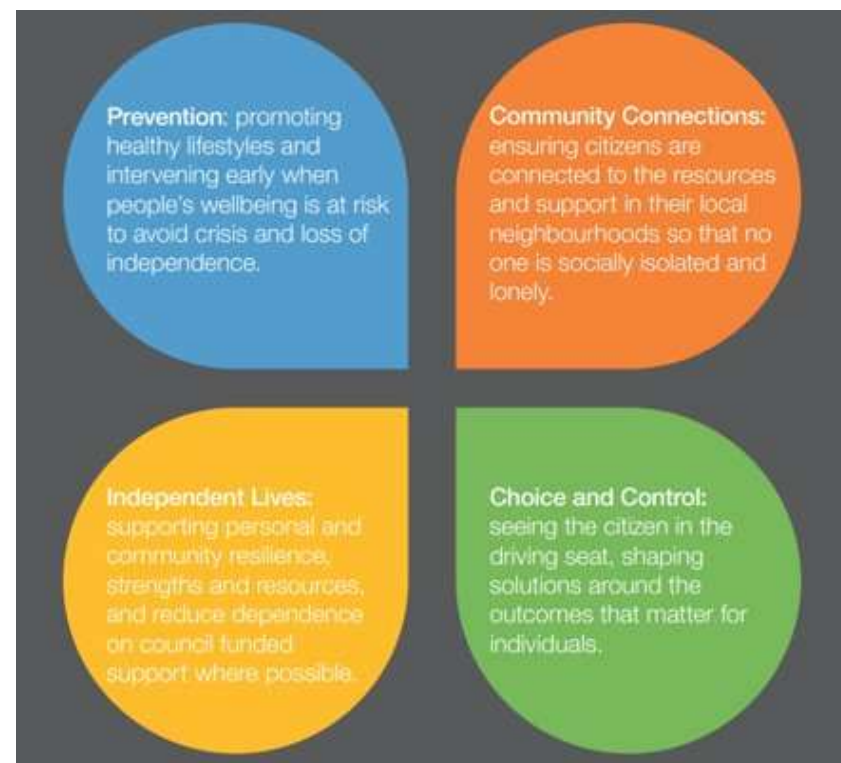
"We will enable all older and disabled citizens, including those with mental health needs, in Nottingham to live as independently as they can, with a connection to their communities. When formal care and support is needed, its aim will be to retain and restore independence. No one will live in residential care unless all other options are exhausted."

To achieve this vision we need to:

Support people to do what they can for themselves

- Help friends and families to provide the best possible support for each other
- Provide connections to others who can help from within Nottingham's caring communities

The four themes in the strategy that will underpin our approach are **prevention, community connections, independent lives and choice and control**. These themes reflect principles set out in the Care Act 2014.

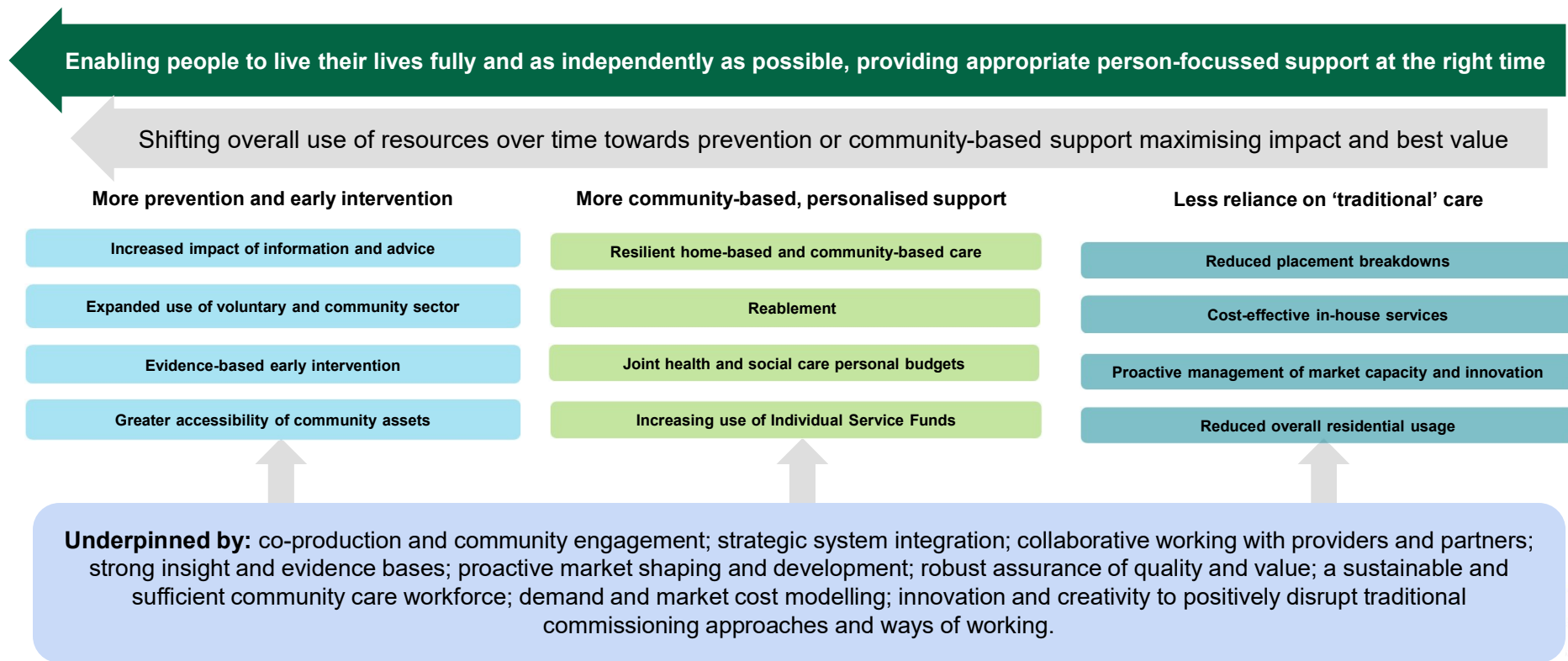


*For links to associated Council strategies, please see Appendix 1*

# Prevention and early intervention

Nottingham needs a sustainable social care system to help people live better lives. Prevention remains at the heart of the Council's approach to adult social care provision. This is underpinned by acting to 'prevent, reduce or delay' the need for care and support.






In order for us to achieve a sustainable system, we will maintain the focus on prevention and early intervention across all services. The diagram below illustrates this shift where all of our interventions will be enabling in nature.



# Key components of commissioning activity

All councils have a statutory duty to deliver Best Value. We will be embedding Best Value across the council to ensure outcomes for citizens are delivered efficiently and effectively.

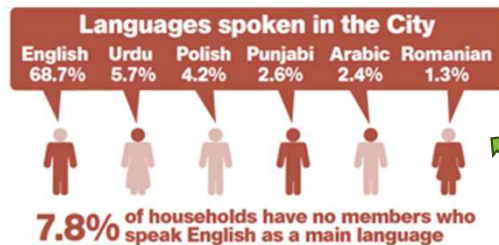
The key components of Best Value which we will be embedding into commissioning activities are shown below.

Best Value Component		Definition
Efficiency and Economy		These are core components of Best Value: Efficiency — Getting the greatest outputs from financial inputs Economy — Getting the right inputs and quality standards at an appropriate cost.
Social Value		Social value involves maximizing the additional environmental, social and economic benefit that can be created by procuring or commissioning goods and services, above and beyond the benefit of merely the goods and services themselves.
Early Intervention/Prevention		Early intervention services will be promoted, this will include activity aimed at halting the development of a problem which is already evident, preventing problem development, and bringing the right health and social care skills at the right time to support residents proactively.
Effectiveness in delivering Benefits/Outcomes		An outcomes focus means delivering meaningful and valued impact or change through a commissioned activity or set of activities. Commissioned services should focus, for example, on improving resident wellbeing and independence, delivering resident satisfaction or safety.
Co-production		Citizens are experts in their own lives, and will be involved in designing and shaping service development.





# Nottingham – Key facts



# Nottingham Context – Current position

## Key Facts:

Population: Nottingham has a relatively young population

- Nottingham City had a population of 323,700 people in 2021, with 219,700 aged between 18-64 (67.8%) and **38,000** aged 65 and over (11.6%).

Disability: **1/3 of Nottingham households contain a person who is disabled**

- 26,527 people in Nottingham are disabled under the Equality Act and their day-to-day activities are limited a lot, a decrease of 1,172 (-4.2%) since 2011.
- 35.9% of households contain one or more people disabled under the Equality Act
- A further 18,600 people are not disabled under the Equality Act but have a long term physical or mental health condition - but day-to-day activities are not limited

Deprivation: Nottingham has high levels of deprivation

- Nottingham is ranked 11th most deprived district in England in the 2019 Index of Multiple Deprivation (IMD).
- Life expectancy is currently ranked 138<sup>th</sup> and 134<sup>th</sup> out of all the local authorities in England, for men and for women suggesting that individuals in the city may transition into poor health at an earlier point in their lives and may require support from the Council sooner in comparison to other local authority areas in the UK.
- In addition, median annual wages rank lower than regional and national levels, and the lowest out of all of the core cities and the proportion of working aged adults in unemployment is higher than national comparators.

## Ethnicity - Key Facts:

- The 2021 census shows that in the last 10 years the proportion of people from Black, Asian and minority ethnicities in Nottingham has increased from 35% to **42.7%** of the total population.
- The largest non-White British groups are Other White (7.4%), Asian Pakistani (6.7%) and Black African (5.8%). These groups have all increased in their proportion of the total population of the city since 2011.

**This means that there will need to be a significant focus on ensuring that The Council, its partners and the provider market are delivering equitable social care support services to all minority ethnic groups and populations within Nottingham.**

## Health and Wellbeing:

- Asian citizens are 43% less likely than white citizens to be diagnosed with severe mental illness
- Mixed race citizens are 1.4x more likely than white citizens to be diagnosed with severe mental illness
- Asian and Black citizens are 35-40% less likely than white patients to receive Primary Care

## Languages spoken:

- Nottingham has significant numbers speaking Polish, Urdu, Arabic and Romanian.
- 11,111 (8.9%) of Nottingham's households contain no person who speaks English as a main language in the home.



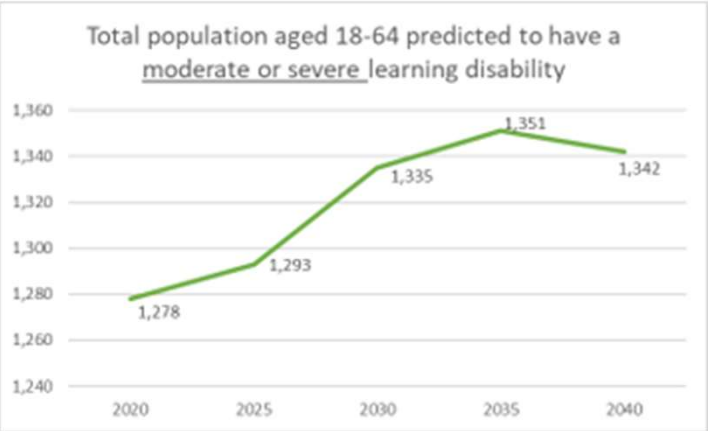
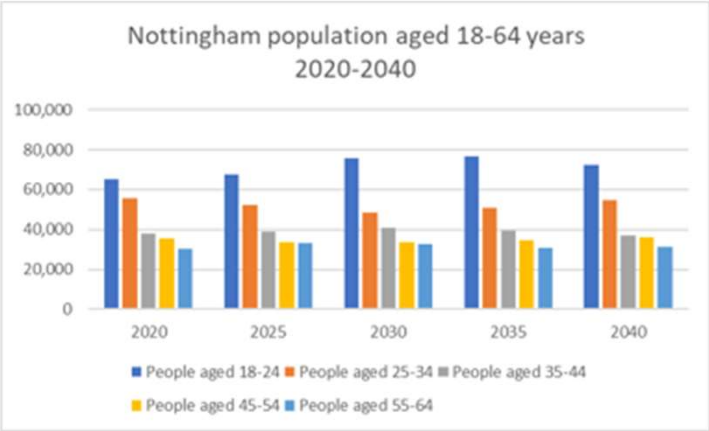
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# Demand Projections

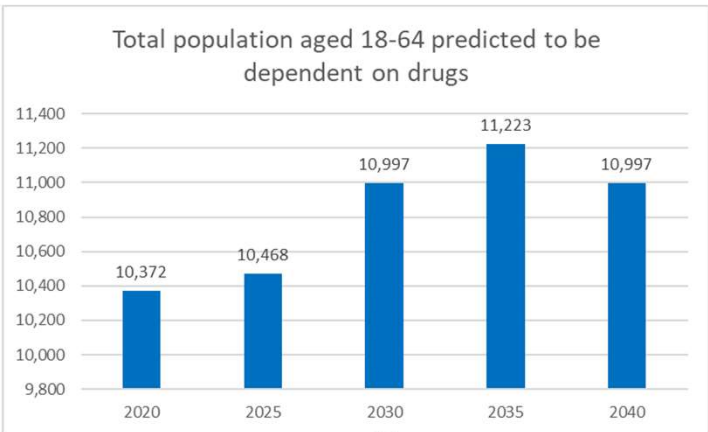
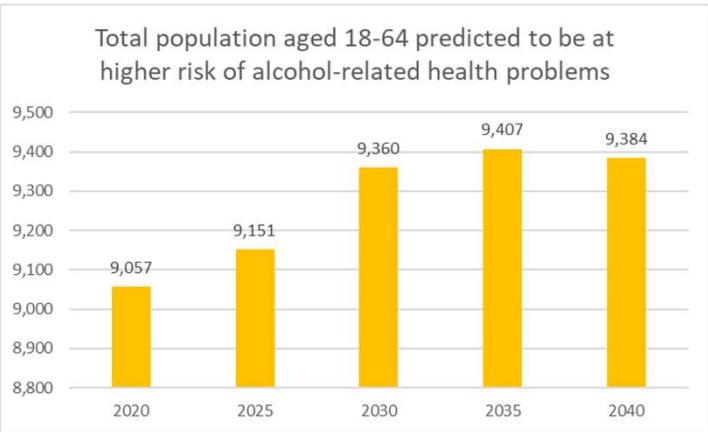
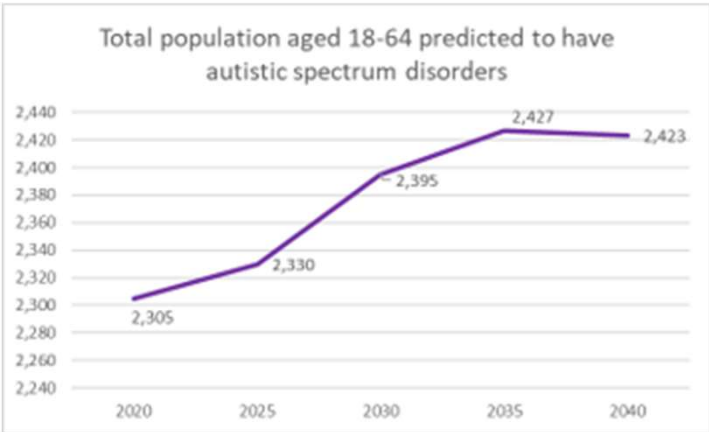
**Future Age, Demographics  
and Needs 18-64 Years**



# Future Age Demographics and Need: 18 - 64 years



The working age population contracts after 2035. This a national trend and is reflected in the figures for projected needs for this age cohort.



## Summary of Growth Impact on Demand People aged 18-64

Primary Support Reason	Current No of individuals supported by NCC (2023)	PANSI Estimates for No of individuals with support needs (2020)	% of predicted no of individuals with support needs, supported by NCC	PANSI predicted growth rate from 2020 - 2040	Projected no of individuals supported by NCC (2040)
Learning Disability Support	849	5601 / 358 (learning disability / severe LD)	15.2%	3.5%	879
Mental Health Support	712	42162 (common MH disorder)	1.7%	2.4%	729
Physical Support - Personal Care Support	603	8309 (moderate & serious personal care disability)	7.3%	1.6%	613
Social Support - Support for Social Isolation / Other	137	No comparable data	-	-	-
Support with Memory and Cognition	63	67 (early onset dementia)	94%	1.5%	64
Physical Support - Access and Mobility Only	62	9,142 (impaired mobility)	0.7%	1.6%	63

- This table shows the number of people **aged between 18-64** currently in receipt of support funded by NCC by their primary support need.
- It also shows the PANSI population predictions where there is comparable data from 2020 – 2040 and the potential demand for NCC funded support by 2040.

# Future age demographics and needs 18 – 64 years

All figures sourced from Projecting Adult Needs and Service Information (PANSI) [www.pansi.org.uk](http://www.pansi.org.uk)

## Age

- The total number of people aged between 18-64 is predicted to increase by **6,800 people** (3%) from 224,500 to 231,300 people between 2020 and 2040.
- The greatest growth is expected in the **18-24** category.

## Alcohol-related health problems

- The number of people aged 18-64 predicted to be at higher risk of alcohol related health problems is projected to increase by **350 people up to 2035**. A total of 9,407 people in 2035.
- The largest increase occurs between 2025 - 2035 (**209 people**).

## Dependency on drugs

- The number of people aged 18-64 predicted to be dependent on drugs is projected to increase by **851 people up to 2035**. A total of 11,223 in 2035.
- The largest increase occurs between 2025-2035 (**529 people**).

## Learning Disability, Autism, Mobility and Mental Health needs

- Those predicted to have a **learning disability** is forecast to increase by 194 people and those predicted to be severe are forecast to increase by 21 people by 2040.
- Those predicted to have an **Autism Spectrum Disorder** are forecast to increase by 118 people (5.1%)
- Those predicted to have **mental health needs** are forecasted to increase by 1001 people (2.4%)
- Those predicted to have **impaired mobility** are forecast to increase by 142 people (1.6%)
- Those predicted to have a **moderate personal care disability** are forecast to increase by 92 people (1.4%)
- Those predicted to have a **serious personal care disability** are forecast to increase by 38 people (2.3%)

*Note: These projections do not take into account any policy changes, or economic, or recent global health factors that could impact the population in the future.*



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# Demand Projections

Future Age, Demographics and  
Needs 65 Years & Over



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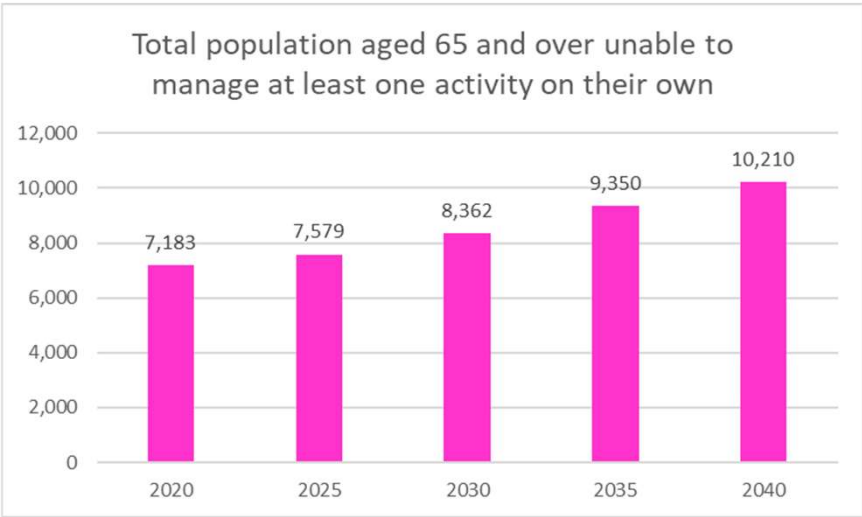
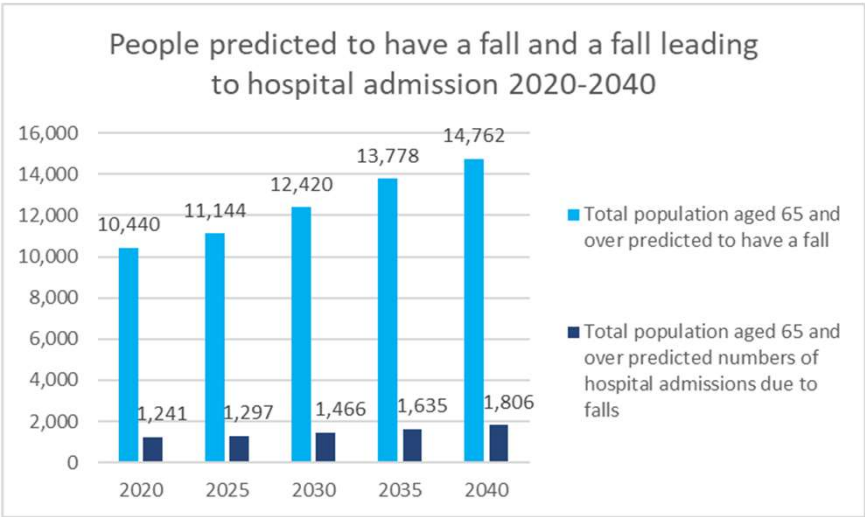
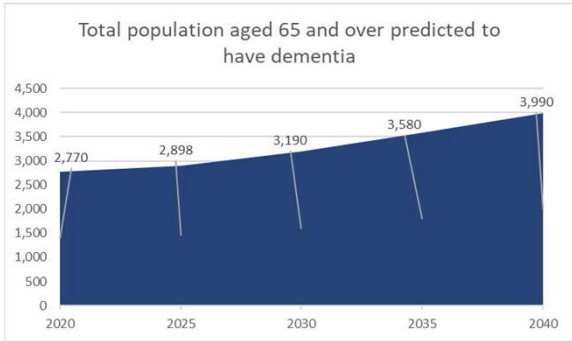
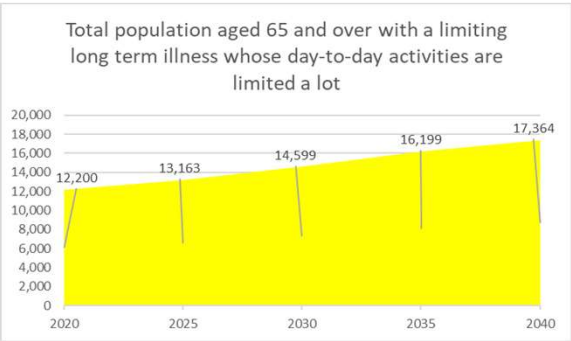
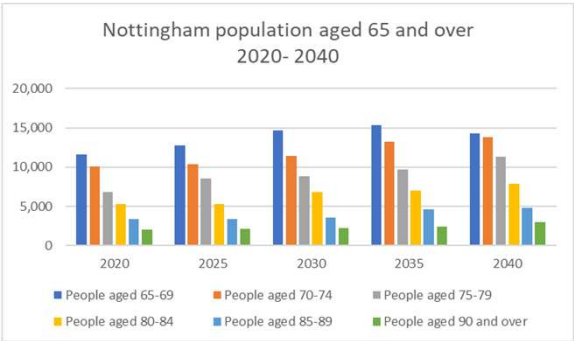


## Summary of Growth Impact on Demand for People aged 65 & over

Primary Support Reason	Current No of individuals supported by NCC (2023)	POPPI Estimates for No of individuals with support needs (2020)	% of predicted no of individuals with support needs, supported by NCC	POPPI predicted growth rate from 2020 - 2040	Projected no of individuals supported by NCC (2040)
Learning Disability Support	113	819/111 (learning disability / moderate or severe LD)	13.7%	42%	161
Mental Health Support	244	No comparable data	-	-	-
Physical Support - Personal Care Support	1694	11110 (help with at least one self care activity)	15.2%	42%	2406
Social Support - Support for Social Isolation / Other	99	No comparable data	-	-	-
Support with Memory and Cognition	177	2770 (dementia)	6.4%	44%	255
Physical Support - Access and Mobility Only	87	7138 (unable to manage one everyday activity on their own)	1.2%	42.1%	124

- This table shows the number of people **aged 65 and over** currently in receipt of support funded by NCC by their primary support need.
- It also shows the POPPI population predictions where there is comparable data from 2020 – 2040 and the potential demand for NCC funded support by 2040.

# Graphs showing the trend and growth of future age demographics and need: 65 years and over



# Detail of future age demographics and needs 65 years and over

## Age

- The total number of people aged 65 and over is predicted to increase by **15,900 people (41%)** from 39,200 to 55,100 people between 2020 and 2040.
- The greatest growth is expected in the **75-84 years category**.

## Limiting long-term illness

- The number of people aged 65 and over with a limiting long-term illness, whose daily activities are limited a lot is projected to increase by **5,164 people** between 2020 and 2040.
- This is an average increase of **258 people** per year, up to 2040.

## Falls

- The number of people aged 65 and over predicted to have a fall is projected to increase by **4,322 people** between 2020 and 2040. A total of **14,762** in 2040.
- In 2040, a total of **1,806 people** are predicted to be admitted to hospital as a result of a fall. An increase of 565 people from 2020.

All figures sourced from Projecting Older People Population Information (POPPI) [www.poppi.org.uk](http://www.poppi.org.uk)

## Learning Disability, Autism, Mobility and Mental Health needs

- Those predicted to have a **learning disability** is forecasted to increase by 344 people and those predicted to be **moderate or severe** are predicted to increase by 42 people
- Those predicted to have **Autism** is forecasted to increase by 155 people
- Those predicted to have **dementia** is forecast to increase by 1220 people
- Those predicted to **need help with at least one domestic task** is forecast to increase by 4,726 people
- Those predicted to need help with at least **one self-care activity** is forecast to increase by 4,667 people
- Those predicted to be **unable to manage at least one everyday activity** is forecast to increase by 3027 people

*Note: These projections do not take into account any policy changes, or economic, or recent global health factors that could impact the population in the future.*



Current Demand

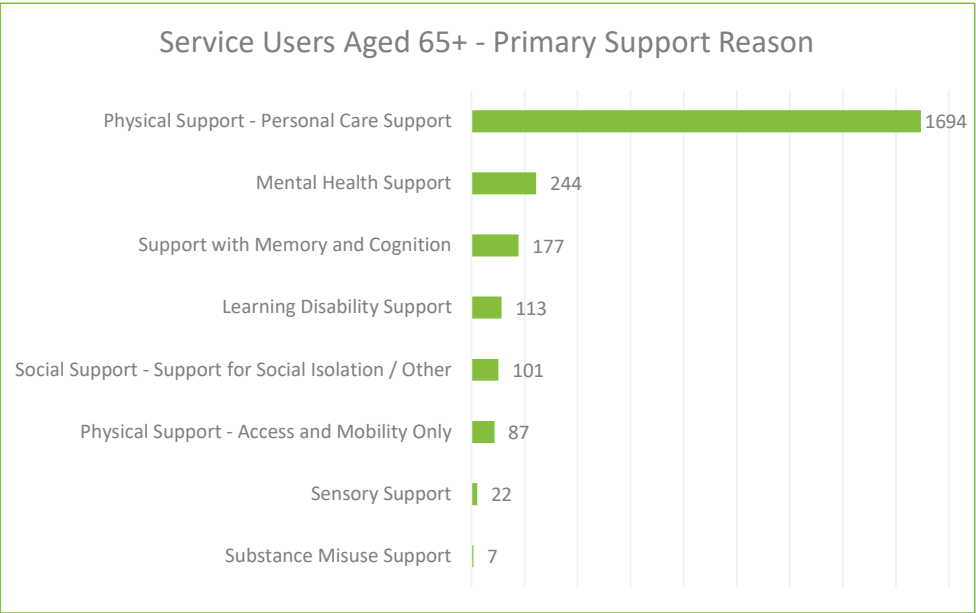
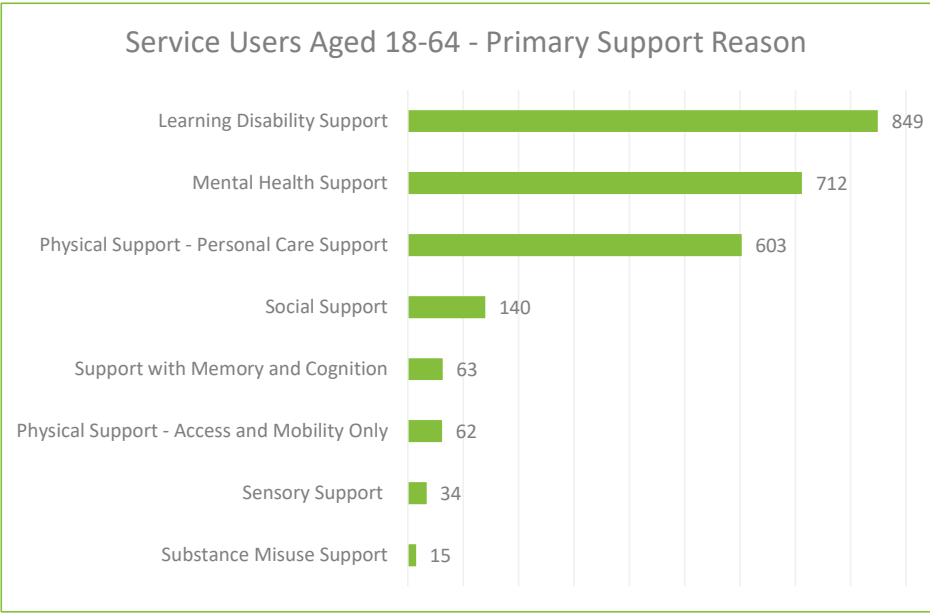


# Current breakdown of primary support needs

The following graphs shows the number of individuals with a Care Act assessment in receipt of social care services in Nottingham City by primary support need.

For adults aged between 18-64, **learning disability support**, **mental health support** and **personal care support** are the most prevalent needs.

In comparison, for adults aged 65 and over, the most prevalent need is support for **personal care**.





The External Workforce

# Workforce Key Facts (source [Skills for Care](#), data correct as at 22/23\*)

## Workforce Demographics

- 80% of the workforce in Nottingham City are female and the average age of workers is 45 years old.
- In terms of ethnicity, 68% are white, 21% black / African, Caribbean / Black British, 8% Asian, 3% Mixed ethnic group and 1% other.

## Employment status

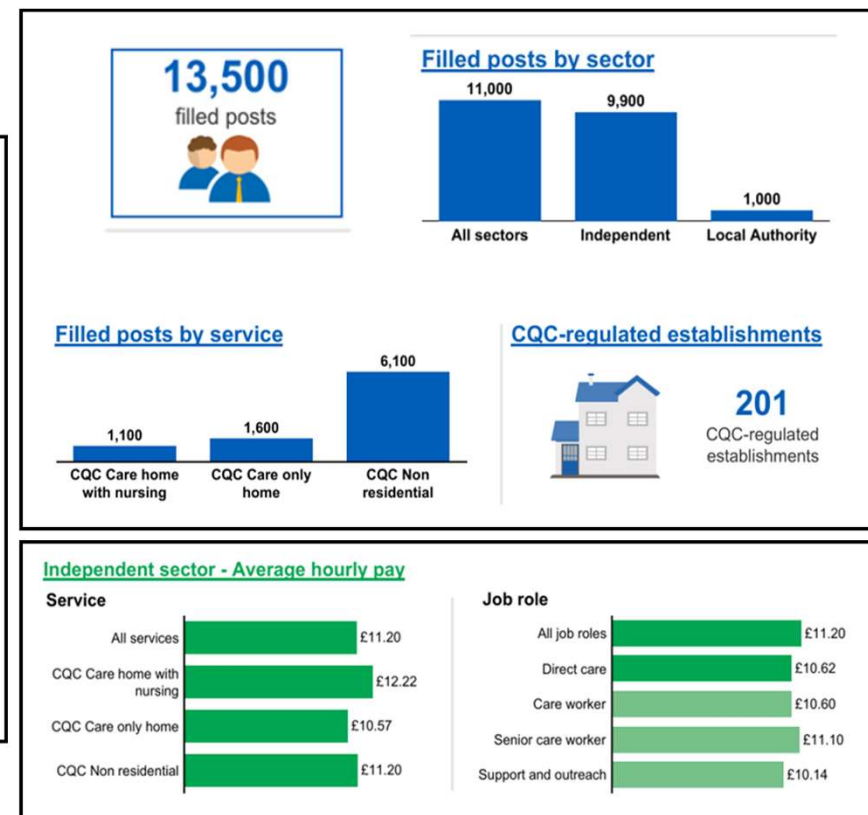
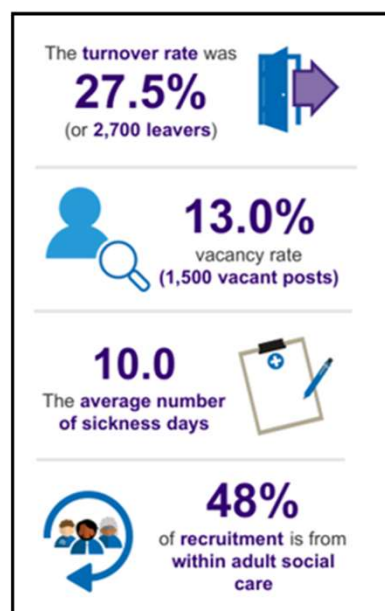
- 42% of the workforce are working part time with 58% being full time.
- 25% of workers are employed on zero-hours contracts.

## Recruitment and Retention

- Vacancy rate has significantly increased between 2021/22 and 2022/23 with the vacancy rate being 8.4% in 2021/22 and 13% in 2022/23.
- Turnover rate has increased between 2021/22 and 2022/23 with turnover being 22.9% in 2021/22 and 27.5% in 2022/23.

## Qualifications and Training

- 43% of individuals had achieved the care certificate.
- 56% of the workforce had no relevant social care qualification.



\*Workforce intelligence data on the Skills for Care website is updated annually every October

## Nottingham and Nottinghamshire External Workforce Strategy and Delivery Plan

### External Workforce Commissioned Project 2023

- To enhance the understanding of the external social care workforce in Nottingham and Nottinghamshire, Skills for Care were commissioned by Nottingham City Council, Nottinghamshire County Council and the Integrated Care Board (ICB) to provide intelligence and insight with the following outcomes:
  - Confirm priorities for the Integrated Care System (ICS) Social Care Workforce Group
  - Support market development and help create a foundation for a sustainable workforce for the social care market
  - Support the requirements and aspirations of the integrated health and social care system in Nottingham and Nottinghamshire
  - Establish a basis for long-term strategic planning, market shaping and commissioning.

### Prioritisation Event

- Six priorities were identified through the work, and these were the focus at an event held in November 2023.
- The event included commissioners from across the ICS, wider health partners, the social care workforce including paid and unpaid carers; providers of social care services and people with lived experience.
- The top priorities from the six identified were:
  1. Promoting recognition, respect and understanding
  2. Recruitment and Retention
  3. Development and Learning

### External Workforce Strategy and Delivery Plan

- Work is now being undertaken by both local authorities and the ICB to collate the findings and create a solutions focused workforce strategy and delivery plan for Nottingham and Nottinghamshire.
- The strategy will continue to be developed with feedback from providers.
- The local strategy will link into the National Social Care Workforce Strategy developed by Skills for Care.



# Critical Messages for the Market: Contents

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# Overarching Key Messages



Reduced volume of residential care **and** development of more independent **living** options for all ages



Increased use of direct payments **and** individual service funds



A good variety of care providers including personal assistants **and** micro-providers to **enable** resilience and sufficiency in the market.



**Better day opportunities** for all ages, moving away from **building based** services, and focused on care and support that enables people to live as they want to.



Focus on developing innovative services which enable early intervention and prevention to avoid future crisis and maximise independence.



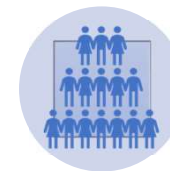
Provide citizens with **choice and control**. Shape solutions around the **outcomes** that citizens value.



Collaborate and work in partnership to improve services and help to reduce inequality in experience and outcomes for citizens.



Protect citizens right to live in safety and ensure good quality, sustainable treatment and support.



Addressing workforce recruitment **and retention** challenges by developing a sustainable **workforce plan** across the ICS-footprint, in partnership **with** Skills for Care.



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# Residential Care Market (18 – 64 years)

## Current Position

- 448 citizens aged between 18-64 current access residential care and a further 42 individuals access nursing care. The most frequent primary support reason recorded as learning disability support (47%), closely followed by mental health support (31%) and personal care support (11%).
- Of the individuals aged between 18-64 being supported by the Council, 18% are in receipt of residential care and a further 2% with nursing costing approximately £729K per week.
- Support is currently commissioned through 140 residential care homes, and a further 24 with nursing, including both independent sector homes and the Council's internal provision.
- There are a total of 54 care homes registered through CQC under the City Council, 15 of which offer nursing care, meaning that the remainder of commissioned placements are out of area.
- The Council currently has an open accreditation, using the NHS standard contract, joint with the ICB, where providers can apply to become accredited at any time. Standard rates are in place for care homes, with banded rates in place for specialist provision.
- At a rate of 32.4 per 100,00 population Nottingham is 72% higher than the CIPFA group average for younger adults whose needs were met by admission to residential and nursing care homes

## Future Needs and Demand

- The number of people aged between 18-64 living in the City is predicted to increase by 3% (6,800 people) by 2040. Therefore, we would anticipate a further 13 citizens to require residential care and 1 more citizen to require nursing care if all other factors stayed equal.
- However, predictions around population needs suggest that individuals that are predicted to have learning disabilities, autistic spectrum disorders, early onset dementia and impaired mobility, and therefore, likely be in receipt of services are growing at a faster rate than population growth for this same period. This means the number of people with eligible support needs is likely to increase beyond population growth projections.

## Messages to the Market

In line with Better Lives, Better Outcomes, the needs of younger adults with long term conditions (including learning disabilities/autism and mental health needs) will continue to be met through supported living, extra care and shared lives as appropriate, unless all these alternatives to residential provision have been exhausted.



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# Supported Living Market

## Current Position

- The Council commissions 21,180 hours of supported living support per week for approximately 422 adults, equating to an approximate weekly spend of £461K.
- Most individuals being supported are aged between 18-64 (90%) with the most frequently recorded primary support need listed as learning disability support (52%), closely followed by mental health support (38%).
- Supported living services are commissioned through 30 providers, in a range of settings from group homes to individual tenancies. Accreditation is open to all providers and set hourly rates are in place for daytime, nighttime and assistive technology.

## Future Needs and Demand

- Overall, the population of people aged between 18-64 in Nottingham is expected to increase by 3% from 2020 (6800 more people) by 2040.
- Those predicted to have a learning disability is forecast to increase by 194 people (3.5%) and those predicted to be severe are forecast to increase by 21 people (5.9%)
- Those predicted to have Autism are forecast to increase by 118 people (5.1%)
- By 2030 ASC intend to grow Supported Living to accommodate more people. The current target is to increase the provision by 60 units per year. This increase is driven by demographic demand as well as a strategic drive to support more people to live independently. *As of May 2025 this development activity is on hold pending a review of the strategy surrounding supported living in Nottingham City.*

## Messages to the Market

Due to a large number of successful developments over recent years, Nottingham City Council is currently reviewing the strategic direction for supported living to ensure that we continue to meet the needs of our citizens in the most effective way. Due to this there is a pause on any new development activity until this review is complete. We will update our MPS as soon as this work is complete.



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# Day Opportunities Market

## Current Position

- The Council commissions day opportunities for approximately 495 adults with a weekly spend of approximately £90.4K.
- On average, individuals are being supported to attend day opportunity services run by 20 providers, including the Council's internally operated services, between 2-3 days a week.
- 65% of the individuals being supported are aged between 18-64 and the most frequently recorded primary support reason is learning disability support (50%), followed by personal care support (23%). The other support reasons include support for social isolation (11%) and mental health support (8%).
- Day opportunity services form the main package of care for just 8% of individuals being supported by the council aged 18-64 and 3% for those aged 65 and over. More people are supported by day opportunities services but as a supplement to their main service.
- Accreditation is open and rates are agreed with providers at the point of accreditation and so vary between the services.

## Future Needs and Demand

- Overall, the population of people aged between 18-64 in Nottingham is expected to increase by 3% from 2020 (6800 more people) by 2040.
- Those predicted to have a learning disability is forecast to increase by 194 people (3.5%) and those predicted to be severe are forecast to increase by 21 people (5.9%)
- Those predicted to have Autism are forecast to increase by 118 people (5.1%)

## Messages to the Market

Our vision for day provision will align with the all-age approach to quality of life, providing opportunities for people that connect to their age and stage of life, personal hobbies and interests, and offer positive outcomes, enabling them to progress their independence, and job opportunities where possible.

We will commission day opportunities that are integrated within communities, that enable people to connect with others and learn new skills and will move away from traditional premises-based day services.

Our plans to drive personalisation will mean that the way these opportunities are commissioned will change; providers will see a shift towards outcome-based commissioning for people accessing day opportunities, and increased numbers of people funding their own services using personal budgets and direct payments.



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# Shared Lives Market

## Current Position

- Shared Lives carers share their home and family life with a young person, adult or older person who needs support to live everyday life.
- All Shared Lives carers are trained, assessed and approved by Shared Lives schemes, which are regulated by the Care Quality Commission.
- Most Shared Lives placements commissioned by the City Council are long term placements where the person lives in the Shared Lives carer's home on a permanent basis.
- Long term Shared Lives placements offer people the option to live in a family environment rather than in a supported living or residential care setting.
- Shared lives placements can also be offered on a temporary or short-term basis and Shared Lives carers can choose to offer support for a few days a week, or offer overnight respite stays to support family carers.
- Most people accessing Shared Lives in Nottingham are people with learning disabilities, but Shared Lives can also be a good option for Older People, people with a physical or sensory impairment or a mental health condition.
- Nottingham currently support 49 adults in Shared Lives services. Shared lives services account for the main package of care for just 2% of individuals being supported by the council aged 18-64.

## Future Needs and Demand

- Over the next five years, the Council will increase our use of Shared Lives to enable adults of all ages to remain living within the community within family environments. Specifically, we will seek to increase the number of Shared Lives placements available to people with learning disabilities to at least 100 over the next three to five years.

## Messages to the Market

We will work with Shared Lives providers to develop alternative models of care and support using Shared Lives principles to create a range of service offers that improve outcomes and quality of life for adults with care and support needs.



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# Residential Care Market (65 years and over)

## Current Position

- 653 citizens aged 65+ access residential care and a further 191 citizens access nursing care. The most frequent primary support reason recorded as personal care support (53%), followed by mental health support (19%) and support with memory and cognition (13%).
- Of the individuals aged 65 and over being supported by the Council, 27% are in receipt of residential care and a further 8% with nursing costing approximately £590K per week.
- Support is commissioned through 134 residential care homes, and a further 44 with nursing, including both independent sector home and the Council's internal provision.
- There are a total of 59 care homes registered through CQC under the City Council, 18 of which offer nursing care, meaning that the remainder of commissioned services are out of area.
- The Council currently has an open accreditation, using the NHS standard contract, joint with the ICB, where providers can apply to become accredited at any time, however contracts do not promise placements. Standard rates are in place for care homes, with banded rates in place for specialist provision.
- At a rate of 1024 per 100,00 population Nottingham is 42% higher than the CIPFA group average for older adults whose needs were met by admission to residential and nursing care homes.

## Future Needs and Demand

- The number of people aged 65 and over living in the City, is predicted to increase by 40.6% from 2020 to 2040 equating to 15900 more people with the greatest proportional increase for those aged between 75-79 (66%), and 90 and over (50%) during this period.
- Those predicted to need help with at least one domestic task or self-care activity is expected to increase at a higher rate than just population growth alone, suggesting comparatively more people will have eligible support needs.

## Messages to the Market

While the Council expects to commission 120 fewer residential / Nursing care places for older people by 2030, we recognise that a transition to residential care is appropriate for some citizens.

The Council will work with providers to explore ways the accommodation can be retained for Social Care use. There will be a need for a sufficient supply of some types of provision in Nottingham, particularly for the care of older people with additional mental health needs.

Some types of accommodation may be required for people with a diagnosis of Dementia and for provision of respite or short breaks for carers. Some care homes may consider adapting to changing needs.

As we focus on promoting the independence and wellbeing of residents, we will increase the number of beds we commission from providers that offer support to people to be able to live in a community setting again – whether their own homes, sheltered or Extra Care facilities. Some existing care home settings may evolve to specialise in this kind of care.



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# Extra Care Market

## Current Position

- 91 citizens aged over 60 years of age current access Extra Care at a total weekly cost of £27.5k.
- The most frequent primary support reason recorded as personal care support (74%), followed by mental health support (9%) and support with a learning disability (7%).
- Of the individuals aged 65 and over being supported by the Council, 3% are in an Extra Care setting.
- Support is commissioned through 5 individual Extra Care provisions registered through the CQC across Nottingham.
- There are a total of 244 nominated apartments available to the City Council across the 5 provisions. However, the balance of the community needs to be maintained so the average number of apartments used by the City Council is unlikely to rise above 100 in total.
- The Council will operate a competitive tender process when these services are re-commissioned during 2024/2025. Standard rates are in place for Extra Care, with banded rates currently in place for two of the current provision.

## Future Needs and Demand

- The number of people aged 65 and over living in the City, is predicted to increase by 40.6% from 2020 to 2040 equating to 15,900 more people with the greatest proportional increase for those aged between 75-79 (66%), and 90 and over (50%) during this period.
- Those predicted to need help with at least one domestic task or self-care activity is expected to increase at a higher rate than just population growth alone, suggesting comparatively more people will have eligible support needs.

## Messages to the Market

Between May – August 2023, the Council will be reviewing the model of Extra Care provision in Nottingham. We will work closely with Providers to identify a model that is appropriate to meet the needs of citizens and is supported by financial modelling.

All Extra Care provision in Nottingham will be re-commissioned during 2024 and 2025.



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# Direct Payments Market

## Current Position

- 1050 individuals aged 18 and over are currently in receipt of all or part of their budget through direct payments funded by Nottingham City Council.
- 73% are aged 18-64 and the remaining 27% aged 65 and over.
- Out of all individuals aged 18-64 being supported by the council, 26.49% have a direct payment as their main package of care.
- Out of all individuals aged 65 and over being supported by the council, 11% have a direct payment as their main package of care.
- Physical Support - Personal Care Support is the most frequent support reason for direct payments (491 citizens).

## Future Needs and Demand

- The demographic data we have available for Nottingham City tells us that there are predicted increases in people with learning disabilities, mental health conditions, autism spectrum disorders, poor mobility and personal care needs across both working age and adults aged over 65 years. Therefore, we anticipate demand for direct payments where appropriate will increase.
- We also anticipate demand will increase due to the Council's focus on the personalisation and prevention agendas and focus away from more intensive forms of care and support.

## Messages to the Market

The Council is committed to enhancing the system's focus on personalisation; to enable citizen choice and control over how budgets are used and to achieve positive outcomes for all.

The Council aims to enhance micro-commissioning opportunities across the system so that personal budgets can be used more effectively. The aim is to establish a robust local marketplace of cost effective, consistent and high-quality services.

The Council intends to establish a new personalisation / brokerage function to increase the number of people in receipt of personal budgets.



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# Homecare Market

## Current Position

- 1,570 citizens aged over 18 years of age currently receive an external homecare service. 298 require a commissioned double-up package. The most frequent primary support reason recorded as personal care support (93%), followed by mental health support (4.6%) and support with a learning disability (2.7%).
- Of the individuals aged 18 and over being supported by the Council, 32% currently receive homecare, costing approximately £512K per week.
- Support is commissioned through 4 Lead Homecare providers and 76 Accredited Homecare providers.
- Homecare in Nottingham operates on a zonal model with the 4 lead providers taking a lead market share in their designated zone and accredited providers working city-wide.
- The Council currently has an open accreditation, using the NHS standard contract, joint with the ICB, where providers can apply to become accredited at any time, however contracts do not promise placements. Standard rates are in place for Lead provider and Accredited providers.

## Future Needs and Demand

- The need for home care increases every year due to increases in demand for adults with complex needs, as well as older people in our population who are living with frailty and dementia. As our approach to residential care changes, we expect demand for home care to exceed pre-pandemic levels.

## Messages to the Market

We intend to change the way home care is purchased to offer citizens greater control over who delivers their care through the use of direct payments and personal budgets; moving away from a 'time and task' approach to care.

Home based care is essential for delivering an outcome focused health and social care system. The Council intends to work with the ICB and the provider market to ensure that there is sufficiency of home-based care across Nottingham.



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# Market Position Statement High Level Engagement

**The Market Position Statement is a live and dynamic document that will be continuously updated.**

Past:

To date we have engaged with our market on the current Market Position Statement (MPS). We are responding to comments and we will update the MPS to reflect providers' feedback.



Current:


We are working on an engagement strategy, supported by a detailed action plan. Engagement with providers will be ongoing.



Future:

Annually, we will review the Market Position Statement with our Brokerage Team, People's Division and Providers to identify gaps in provision, unmet need and opportunities.

We will also review legislation, demographics and changes in demand and supply.

A wide-angle photograph of a city square in Nottingham. On the left, the Nottingham Cathedral with its prominent dome and classical columns is visible. In the center, a large, shallow water feature with multiple jets of water spraying upwards is the focal point. Several people are standing in the water. To the right, a modern multi-story building with a grid of windows stands next to older stone buildings. A construction crane is visible in the background behind the cathedral. The sky is blue with scattered white clouds. The word "Appendices" is written in white text across the lower part of the water feature.

## Appendices



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## Appendix 2: Adult Social Care Context: Policy & Papers

There are national drivers that are shaping the current and future provision of adult social care, including the responsibilities of Local Authorities in line with the Care Act, governmental white papers, the creation of integrated care systems and continued funding reductions, placing financial pressure on local authorities across the country. Links to key documents are listed below:

- **The Care Act, 2014** and the **Health and Care Act 2022** legislative frameworks outlining health and social care responsibilities ([factsheets available here](#)), ([guidance available here](#))
- **The Better Care Fund (BCF)** is a national programme across both the NHS and local government encouraging local health and social care services towards closer integration, through establishing a pooled budget between the local partners. Significant steps towards integration of health and social care through the coordination of shared discussion and decision-making for people with high level or complex needs.
- **“People at the Heart of Care: Adult Social Care Reform White Paper”** published in December 2021. The paper focusses on building a system that can develop and adopt new ways of providing care and support at scale. As well as building local authority and provider capacity, skills and knowledge sharing into the process. An overview of the Social Care Charging Reform and Fair Cost of Care exercise is presented in the following pages.
- **Adult Social Care Charging Reform and Market Sustainability and Fair Cost of Care Fund** was plan to make adult social care fair and accessible to everyone, by ensuring that Local Authorities were supporting the sustainability of care delivery, allowing providers to cover the cost of care and make a reasonable profit, without subsidising through increased fees rates for private client. These plans also included the introduction of a cap to care cost set at £86,000 in October 2023, however plans have been delayed for 2 years. (<https://www.gov.uk/government/publications/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance/market-sustainability-and-fair-cost-of-care-fund-2022-to-2023-guidance> )
- **“Future of an Ageing Population”** published in 2016. The paper states how demand and supply of care will diverge, as the UK has more people needing physical and financial support, at a time when there are fewer people able to fund public services and provide care.

## Document Amendment Record

Version	Author	Summary of changes made	Date
V1	People Too	Initial draft of MPS	2023
V2	NCC	Additions: Messages to the market, overarching key messages, information and data on future demographics	2023
V3	NCC	Corrections to information and data on future demographics	2023
V4	NCC	Slide updates: Skills for Care infographics, high-level engagement, introduction to highlight partnership working re: mental health services, sources added to data slides. Messages to the market – residential 65+ Additions following engagement: External workforce strategy and delivery plan, proposed public health commissioning intentions	January 2024
V5	NCC	Supported Living message to the market updated	May 2025