



Whole Life Market Position Statement

2023

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1. FOREWORD

We are pleased to introduce an update of Wiltshire's Market Position Statement (MPS) for whole life – focusing on mental health, learning disabilities and autism spectrum conditions (MH/LD/A).

Wiltshire's last MPS was published in 2021. Since then, 2021 Census data has been released and the Council has published its Business Plan and a suite of new strategies setting out Wiltshire's direction of travel.

We have a resilient community spirit in Wiltshire where people come together and support each other. The Council's Business Plan 2022-2032 has a mission to ensure:

- The people of Wiltshire are empowered to live full, healthy, and enriched lives.
- Our communities continue to be beautiful and exciting places to live.
- Our local economy thrives and is supported by a skilled workforce.
- We lead the way in how councils and counties mitigate the climate challenges ahead.

An MPS is the start, not the end point, of the process of market facilitation. This MPS will be reviewed and updated regularly as our knowledge and understanding grows and our shared thinking around commissioning intentions develops. Its purpose is to:

- Present a picture of supply and demand in Wiltshire.
- Set out how the Council will support the market to deliver our vision.
- Put co-production at the heart of everything we do.
- Show what our key pressures are for young people and adults with MH/LD/A and how we will address issues.
- Present the Council's commissioning intentions, and particularly how these will support people to live as independently as possible at home.
- Cover current and potential future users of services, whether they receive funding through the local authority or fund their own care.
- Help providers shape their business plans in response to Wiltshire Council's commissioning intentions.

Focusing on "whole life" enables us to personalise support, without creating artificial barriers between childhood, adolescence, adulthood, and older age. It helps us to see people's whole lives – their experiences, strengths, talents, and aspirations – rather than their needs or disabilities.

People should receive the support they need, at the earliest opportunity, to live independently and safely for as long as possible within their community. Where residents require support from the Council, it should be time-limited to achieve set goals. We want to work with providers that share our values, have high ambitions for people in Wiltshire and can manage demand creatively.

We want to hear from and work with providers that share our values, have high ambitions for people in Wiltshire, and who can manage demand creatively. The MPS is a catalyst for dialogue between the Council and providers. Creating high-quality support and outcomes for people requires a dynamic partnership between commissioners, providers and other stakeholders – and co-production lies at the heart of this.

2. EXECUTIVE SUMMARY

We have high aspirations for people in Wiltshire. Everybody has the right to live an independent life, to make choices about how, where and with whom they live, and to achieve the things they want out of life. Our starting point is to celebrate people's strengths and give people the support they need to build on those strengths. Accommodation and support should promote healthy, independent, meaningful lives. Living in the right type of housing, in the right place, and with the people we choose provides a sense of security, place and community.

Our vision is to maximise independence, choice, and control for people with a learning disability, mental health condition and/or autism spectrum condition in Wiltshire by providing the right accommodation and support in the right place at the right time. By enabling people to take risks, we will enable individuals to live the kinds of lives they want for themselves.

To deliver these ambitions, we need a local market of providers with the right expertise and culture. We need suitable housing in the areas where people want or need to live. The Wiltshire Independent Living Strategy 2022-2027 commits the Council to taking a more proactive role in developing housing and care solutions. We will use data about the people we support to forecast and plan, and we will involve people in the design of future services.

We will commission support which encourages people to be as independent as possible, supports them to live well at home and maximises their strengths. Helping people to live independently and make better use of Technology Enabled Care (TEC), across their whole life, will help people stay safe in their homes for longer which in turn will reduce demand on more traditional services.

We need a strong and varied market of services which can respond quickly as needs arise. Given the changes in demand for social care and the staffing challenges seen across the country, the Council and providers share an interest in targeting the right care where it is needed most: supporting people to leave hospital, helping people to get through a period of illness or crisis, and avoiding or delaying the need for residential or long-term care as far as possible.

It is the role of services to get to know the people, identify their strengths, learn what networks are already there to support the person, and consider what else other than the provision of care and support might assist the person in meeting the outcomes they want to achieve. Where residents require support from us, it should be focused on making a positive impact on people's lives. In cases where needs are enduring,

we will revisit assessments and plans to ensure they remain fit for purpose. We will provide high quality and value for money services.

a. Principles

Care and support provided or commissioned by the Council for Wiltshire residents should:

- **Be co-produced** and informed by people who know best – the individual and their families/carer(s).
- **Be strengths-based** – services should take the time to learn about and build on the unique history, relationships, strengths, and resilience of each person.
- **Promote independence** and resilience, by focusing on early intervention and prevention and supporting people to access their communities.
- **Be evidence-based and outcome-focused**, informed by latest research and evaluation.
- **Be relationship-focused** – as far as possible, people should experience consistency in the staff they see, to enable a positive relationship to develop.
- Integrate innovative new ways of working through **Technology Enabled Care (TEC)** to prevent crises and identify early warning signs of escalation in risk.
- **Be personalised**, treating people with dignity and respect, and enabling people to have choice and control over their lives.
- **Enable** the person to manage their own condition, disability and/or situation, and carry out tasks themselves as far as possible.
- **Be flexible**, so that care responds to people's wishes and needs as they inevitably change (either increasing or reducing) over time.
- **Help the person and their families/carer(s) to feel confident**, well-supported and safe. on early **intervention and prevention** – to give people the best opportunity of remaining independent.

b. Commissioning priorities

- **We will change the way we commission** accommodation and support, so that people maintain their independence, live in a place they call home, with the people they choose in their local community.
- **We will implement a recovery pathway** which enables people with mental health needs to get the right support in the right place at the right time.
- **We will create more housing choices** (including affordable housing) for people, including building in the places where they are most needed.
- **We will increase the number of people living in their own home** and reduce the number of people admitted to care homes.
- **We will review our ways of working**, and where they are not clear or fit-for-purpose, we need to change them.
- **We will provide clear advice and information** which helps people to find the options which best meet their needs.
- **We will take a more proactive role** in managing housing and care markets, including supporting care homes to deregister.

- **We will use Technology Enabled Care** to support, where appropriate, reduction in care packages, following proactive monitoring and evaluation.
- **We will work together creatively.** We will break down barriers between departments and teams and work closely with our partners, ensuring our commissioning intentions align with those of the NHS Long-Term Plan.
- **We will commission services that offer good value for money.** We spend more in Wiltshire on care than many of our neighbouring counties, but these higher fees do not consistently deliver better outcomes or improved quality.
- **We will make full use of our communities' strengths and assets.** We will promote independence and champion prevention by helping to build resilient communities utilising people's individual strengths and personal assets, and by working with voluntary and community organisations.
- **We will take an outcomes and evidence-based approach.** Ensuring all commissioned services deliver clear and measurable outcomes and meet people's personal outcomes
- **We will promote Direct Payments and other personal budget options** to give people more choice and control: We will create greater choice for people by exploring Individual Service Funds and the use of Pre-Payment cards
- **We will work together creatively:** No single organisation can deliver transformational outcomes on its own. We will break down barriers between different departments and teams; we will continue to work closely with the NHS, voluntary and private sectors; ensuring our commissioning intentions align with the ambitions of the NHS Long-Term Plan.
- **We will be guided by the views of residents and customers:** Wiltshire is committed to co-production and as part of this MPS we want to take the next steps towards working together. People understand what they need to live well. We will co-produce plans and strategies with residents, customers, and family carers. We will create opportunities for customers and carers to be at the heart of reviewing services. We will work with providers as the professional experts. We will develop, decide, design and do together with residents, customers, parents, and carers working jointly in an equal and reciprocal relationship.
- **We will listen to our providers who are experts in care** and ensure we maintain open and honest relationships

These priorities influence and are influenced by other projects within the Adult Social Care Transformation programme, including:

- Technology Enabled Care Strategy – creating a technology first culture for adult care delivery.
- Practice development - ensuring all staff in Adult Social Care develop practice, knowledge, and experience.
- Mental Health Act reforms – the successful implementation of the new Mental Health Act Amendments.
- Market Oversight – reducing the average cost of supporting working age adults and continuing to improve practice across service.

c. **How we support the market**

Wiltshire Council has supported providers, particularly during the pandemic, with measures to maintain and support the care market. These include the establishment of the Provider Oversight and Support Team (POST) and our collaborative work with Wiltshire Care Partnership, including allocating funding to provide a recruitment campaign to support the entire care market as well as the development of the I-care recruitment support offer.

Providers are encouraged to apply to join framework opportunities. Please email wocommissioning@wiltshire.gov.uk for details of how to apply.

The Care Act 2014 places a duty on councils to temporarily intervene to ensure there is continuity of care in the event of service interruption because of business or provider failure. Wiltshire seeks to fulfil these duties in a supportive and commercial way and to encourage early discussions where we can work with providers to prevent and/or reduce impact on individual services and the wider Wiltshire care market. For example, where services close our focus is to support staff to develop their careers within the local care sector by identifying opportunities in other services.

During the COVID-19 pandemic, the Council disbursed almost £25m to providers to support them with infection control measures and other costs they faced as a sector. This is broken down as follows:

- Infection prevention control grant: £17.4m
- Rapid testing grant: £5.2m
- Working capacity funding: £0.9m
- Workforce recruitment and retention funding: £1.2m
- Vaccines funding: £0.2m

The Council has also committed to paying providers gross of client contributions. This will mean that providers no longer have to reclaim client contributions directly from clients. This new process began in October 2022, starting with new customers, followed by care home residents, and then followed by home care customers. To date, we have received positive feedback from providers who welcome quicker, more efficient payments.

At a time of increasing demand and reducing resources, we must commission high quality services at a rate which is sustainable to meet the assessed needs of residents. We will work with the market to strike a fair balance and ensure that both the Council and the market are financially sustainable. Whilst recommissioning residential, nursing and short-term transitional services, we have used bed rates to ensure consistency and transparency to help stabilise the market.

d. Co-production

We are committed to co-production and value its ethos of collaboration, peer-led decision-making, and challenging traditional ways of working. To have meaningful impact, services must be led by the skills, experience, and knowledge of the people they set out to help. We will continue to develop services and strategies with people

with lived experience, so that any initiative “does with” people and doesn’t “do for”. Only by sharing skills and experience do we build strong, long-lasting partnerships.

Wiltshire Council has worked with Wiltshire Centre for Independent Living (WCIL), Wiltshire Parent Carer Council (WPCC), Wiltshire Service Users Network (WSUN), Healthwatch Wiltshire and others to create a dialogue with people with lived experience.

WCIL have produced several reports in recent years to support recommissioning activity, including:

- The Good Life Project - 2018
- [Accommodation and Support - 2019](#)
- [Meaningful Lives – Day Services Report - 2019](#)
- [A Place I call Home 2021](#)
- [The Future of Mental Health Support - 2021](#)
- [It’s My Life - 2022](#)
- [Supporting Young People on their Journey to Adulthood Report - 2022](#)
- [Smarter Homes for Independent Living - 2022](#)

Wiltshire CIL’s report “A place I call home¹” (2021) summarises the voices of people with MH/LD/A in Wiltshire. The report’s key messages are:

- Accommodation options need to reflect that everybody is different, they need to be varied, adaptable and responsive to the needs of people in Wiltshire.
- People want to live in a place they call home, with the people they choose in their local community.
- A priority for any accommodation is that it supports positive relationships both with close networks and with people in the wider community.
- The most important factors for people when considering where they live is that they feel safe, they can be independent, and they can choose where they live.

Wiltshire CIL published a follow-up report in 2022 entitled *Smarter homes for independent living*², which made a series of recommendations to commissioners and providers around use of the Disabled Facilities Grant, meeting accessibility standards, working with occupational therapy, tackling data poverty, and making space for personalisation.

A survey completed by people who use Good Lives Alliance services in May 2021 found that most people are happy where they live, like the people they live with and the people who support them and feel safe and part of their local community.

3. NEED & DEMAND

a. Overview of Wiltshire

¹ <https://www.wiltshirecil.org.uk/wp-content/uploads/2021/07/A-Place-I-Call-Home-Report-June-2021.pdf>

² <https://www.wiltshirecil.org.uk/wp-content/uploads/2022/09/Smarter-Homes-for-Independent-Living-Report-August-2022.pdf>

Wiltshire is a predominantly rural county situated in the South West of England. It borders the Council areas of Gloucestershire, Swindon, West Berkshire, Hampshire, Dorset, Somerset, Bath & North East Somerset, and South Gloucestershire. Wiltshire is relatively affluent but there are substantial pockets of deprivation.

Wiltshire's population is mainly served by three acute hospitals: Salisbury District Hospital, Royal United Hospitals in Bath, and Great Western Hospital in Swindon.

On 1 July 2022 an Integrated Care System (ICS) was created to cover Bath & North East Somerset (B&NES), Swindon and Wiltshire (BSW). The ICS brings together the commissioners, three hospital trusts, private providers, community service providers, a mental health trust, an ambulance trust and voluntary sector organisations. To ensure that services meet the needs of different communities, there are three place based Integrated Care Alliances (ICAs) of which Wiltshire is one.

b. Demography

New Census data released in 2022 shows that 510,400 people lived in Wiltshire in 2021³. This makes Wiltshire the ninth largest local authority in England by population size, but the eleventh lowest by population density. Wiltshire's population has increased by 8.4% since the last Census in 2011 - a higher rate of increase than the overall rate of increase in England (6.6%).

Age profile

The 2021 Census showed that Wiltshire's population is ageing. 21.8% of people are aged 65 and over (compared to 18.4% in England), with 3% aged 85 and over. Wiltshire was one of only three local authorities in the South West whose 65+ population grew by more than 30% between 2011 and 2021. Since 2001, the median age has increased from 39 to 44, and the percentage of the population who are aged 65+ has increased from 16.45% to 21.72%. Over 40,000 more people aged 65+ live in Wiltshire today than did in 2001.

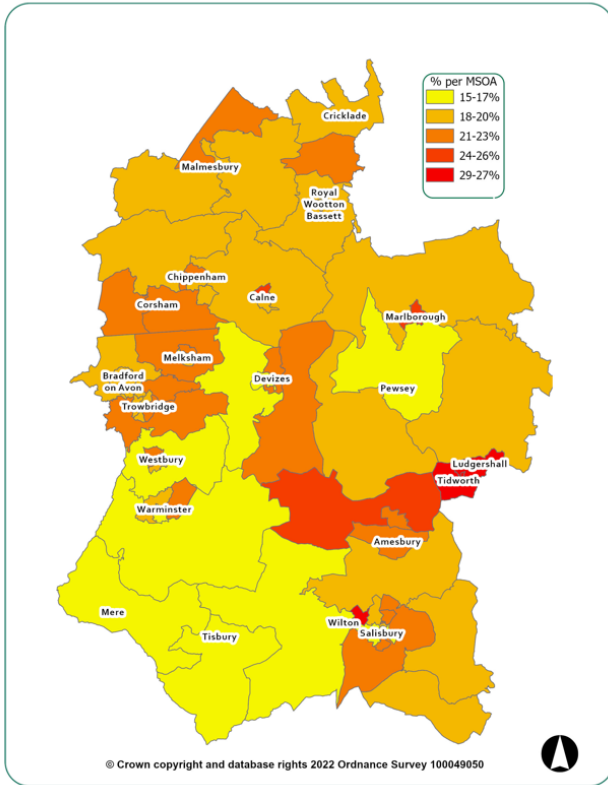
Wiltshire's Joint Strategic Needs Assessment forecasts that the 85+ population will almost double between now and 2040.



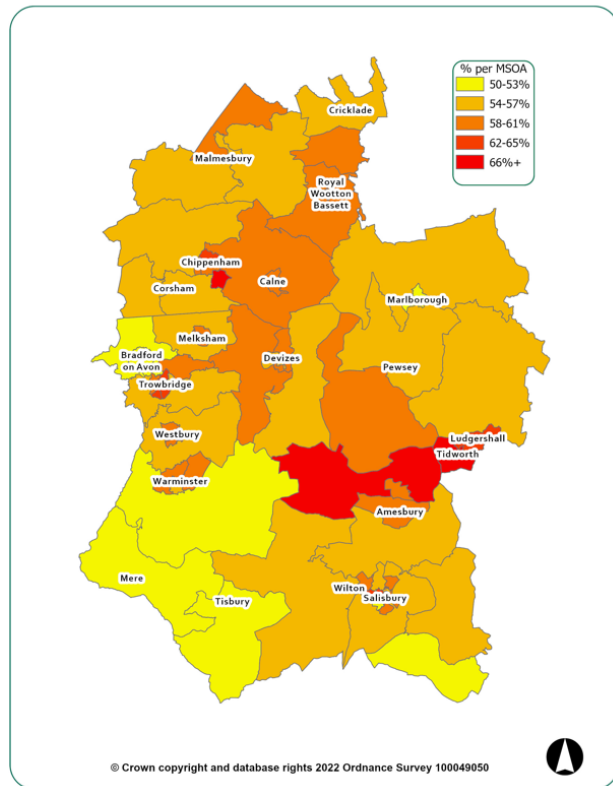
³ <https://census.gov.uk/census-2021-results>

The maps below show the concentration of children and young people and adults of working age across Wiltshire:

Population of Wiltshire Residents aged 0-17 per Middle Super Output Area (MSOA)



Population of Wiltshire Residents aged 18-64 per Middle Super Output Area (MSOA)



Unpaid care in Wiltshire

The Census shows that nearly 10% of Wiltshire residents (aged five years and over) provide weekly unpaid care. The proportion of Wiltshire residents who provided at least 50 hours of weekly unpaid care increased from 2.2% to 2.4% between 2011 and 2021 Censuses. The Wiltshire Carers Strategy, to be published in 2023, has been co-produced with carers across the County and will prioritise support for carers to continue supporting their loved ones and to have a life outside caring⁴.

Economic activity

In Wiltshire, 60.2% of people aged 16 and over were economically active and in employment in 2021⁵. This figure has reduced over the last decade, due to the ageing population.

Of those residents aged 16+ who were not in employment:

- 12% (19,945 people) had worked in the previous 12 months.

⁴ These are age-standardised proportions. Data accessed from:
<https://www.ons.gov.uk/visualisations/censusareachanges/E06000054/>
 5

<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/bulletins/economicactivitystatusenglandandwales/census2021>

- 71% (118,337) had previously worked, but not in the previous 12 months.
- 17.1% (28,487) had never worked.

Ethnicity and religion

In 2021, 94.3% of people in Wiltshire identified their ethnic group within the "White" category (compared with 96.6% in 2011), while 1.7% identified their ethnic group within the "Mixed or Multiple" category (compared with 1.2% the previous decade). The percentage of people who identified their ethnic group within the "Black, Black British, Black Welsh, Caribbean or African" category increased from 0.7% in 2011 to 1.1% in 2021.

In 2021, 50.2% of people in Wiltshire described themselves as Christian (down from 64.0%), while 6.0% did not state their religion (down from 7.7% the decade before). 41.3% of Wiltshire residents reported having "No religion".

Deprivation

Eight of the 285 small geographical areas⁶ in Wiltshire are within the 20% nationally most deprived. They are classified as "urban city and town", and found in the following towns⁷:

- Trowbridge
- Chippenham
- Salisbury
- Melksham

3% of Wiltshire's population live in these areas, with a higher proportion of younger people aged 0 – 19, and a lower proportion of those aged 65+.

Wiltshire's employment rate (80.8%) is higher than the national average and the number of people claiming benefits principally due to unemployment is lower; but median gross annual earnings (£30,399) are below the England average.

General needs housing

There are 26,174 social housing dwellings owned by registered social landlords in Wiltshire – this represents 11.7% of all dwellings in the County. On 31 March 2021 (most recent available data), there were nearly 4,000 households on the housing waiting list, equating to 18.4 per 1,000 households in Wiltshire.

Specified Accommodation

The Council will develop the local plan for adaptable and accessible housing, working with the market, including Stone Circle and our own assets. To meet the housing needs of people with a learning disability, autism, mental health conditions, physical or sensory impairment, Whole Life Commissioning are working internally

⁶ These are known as lower super output areas (LSOAs).

⁷ Wiltshire JSNA 2022

with our Estates and Development team to identify appropriate accommodation options. This will enable care providers to support individuals who choose to live away from the family home or share support and accommodation with others and externally with housing providers and registered social landlords to purchase and develop suitable accommodation.. This could be in a shared housing environment, or as individual self-contained properties that can meet the individual's needs. We also work closely with Revenues and Benefits to ensure services are affordable longer term.

Health and disability

In 2021, 50.5% of Wiltshire residents described their health as "very good", increasing from 48.9% in 2011. Those describing their health as "good" fell from 34.5% to 34.0%⁸. The proportion of Wiltshire residents describing their health as "very bad" was 0.8% (similar to 2011), while those describing their health as "bad" remained 3.2%⁹.

In 2021, 6.0% of Wiltshire residents were identified as being disabled and limited a lot. This figure decreased from 6.8% in 2011. In 2021, just over 1 in 10 people (10.4%) were identified as being disabled and limited a little, compared with 9.6% in 2011. The proportion of Wiltshire residents who were not disabled remained at 83.6%.

c. Children and young people

We are ambitious for children, young people, and families in Wiltshire and together we are determined to ensure all Wiltshire families thrive.

Children, young people, and their families tell us they want to remain living with their families, avoiding where possible the need for residential care both now and as they move into adulthood. CYP (especially those with SEND) want to live independently, take risks, and try new things, but sometimes feel held back by the worries and anxieties of their parents, or because they cannot access the right support.

Wiltshire is establishing itself as a System of Excellence for SEND. The vision for the System of Excellence is for Wiltshire to be a place where we are working together to empower children, young people, and families to thrive in inclusive communities. The programme brings together seven key strands of work:

- Better outcomes for children and young people, supporting moves towards independence.
- A vision for the whole-age pathway from 0-25 with good transitions, including health and social care input.

⁸ These are age-standardised proportions. Age-standardised proportions are used throughout this section. They enable comparisons between populations over time and across geographies, as they account for differences in the population size and age structure. Data accessed from: <https://www.ons.gov.uk/visualisations/censusareachanges/E06000054/>

⁹ Census 2021 was conducted during the coronavirus (COVID-19) pandemic. This may have influenced how people perceived and rated their health, and therefore may have affected how people chose to respond.

- Early help which is not driven by an EHCP or diagnosis
- Easier pathways for families, with simpler processes and better information
- Upskilled, confident mainstream settings and schools equipped with resources to support CYP effectively, leading to parent/carer confidence.
- An equitable and consistent offer across Wiltshire
- Partnership working across Wiltshire, including with parents and carers.

Further information about the profile of children and young people, particularly those with special educational needs and disabilities (SEND), can be found in the Wiltshire SEND Strategy¹⁰.

d. Mental health

In Wiltshire, mental health is everybody's business. We are strengthening public health messaging around inclusion, prevention, and early intervention; offering more self-care tools to help people develop and learn skills to become more resilient; and commissioning high-quality community-based support, and the right accommodation in the right parts of the county.

Wiltshire is a diverse county with a comparatively high percentage of military personnel and veterans, as well as those living transient lifestyles (e.g., on our canal ways) and others whose first language is not English.

Prevalence

The Office for Health Improvement and Disparities' Fingertips tool provides local data on a range of health indicators. Some of this data is several years old. The section below summarises Fingertips data from 2020 onwards:

- The emotional wellbeing of almost half of children looked after is a cause for concern (2020/21 data). This is a higher percentage than regional and national averages¹¹.
- Wiltshire has a higher than average rate of hospital admissions due to self-harm for children and young people aged 10-24¹².
- Despite this, Wiltshire has a lower percentage of school-age pupils with social, emotional, and mental health needs than the national average.
- 10.9% of patients aged 18+ in Wiltshire have a diagnosis of depression – slightly lower than the England average. Levels have been steadily rising since before 2016/17.
- In 2020/21, almost a quarter (24.6%) of people aged 16 and over in the county were estimated to have higher levels of anxiety. Whilst this is similar

¹⁰ https://localoffer.wiltshire.gov.uk/media/2845/SEND-Strategy-2020-2024/pdf/SEND_Strategy_2020-2024_ONLINE_4.pdf?m=63816204578847000#:~:text=The%20strategy%20should%20focus%20on,in%20and%20outside%20of%20school.&text=Achieving%20and%20social%20time%20were,and%20on%20achievement%20and%20progress.

¹¹ <https://fingertips.phe.org.uk/profile-group/mental-health/profile/cypmh/data#page/1/gid/1938133090/ati/102/cid/4/tbm/1>

¹² *ibid*

to the South West (23.4%) and England (24.2%), it represents a 6% rise compared with the previous year (18.3%)¹³.

- Adults with long term mental health conditions are estimated to be more than twice as likely to smoke (25.2%) than the general population (12.0%) of Wiltshire. This puts people with a mental health condition at a greatly increased risk of smoking-attributable ill health and mortality, compared to the general population.

e. Learning disabilities

A learning disability (LD) may affect the way a person understands information, how they communicate and/or how they carry out everyday tasks. This means they can have difficulty understanding new or complex information, learning new skills, and/or living independently. Around 1.5 million people in the UK have an LD, and it is thought up to 350,000 people have a severe LD. This figure is increasing.

A learning disability is different for everyone¹⁴. Lots of people with an LD can live independently, work, learn and get qualifications and have relationships. Most people can live independently with the right support. Someone with a mild LD may only need support with things like getting a job. However, someone with a severe or profound LD may need full-time care and support with every aspect of their life – they may also have physical disabilities.

There are some health conditions which are closely linked to LD. For example, everyone with Down's syndrome has some level of LD, and so do many people with cerebral palsy. Some people with epilepsy also have a LD and so do many autistic people¹⁵.

Planning for adulthood should start in childhood, and Wiltshire has recently launched its Growing up and moving on guide¹⁶, which provides young people and their families with information around education, employment and training, independent living, being part of their local community, and health.

In Wiltshire, 66.5% of adults (defined as 18-65 year olds) with learning disabilities who were receiving support from social services lived in their own home or with families, compared to 62.8% in the previous period and the All English single tier local authorities average of 81.3%. However, the percentage of adults with LD in paid employment has steadily increased over recent years and now exceeds the England average¹⁷.

Demand

¹³ Wiltshire JSNA 2022

¹⁴ See Mencap's Youtube page to hear the voice of people with learning disabilities:

<https://www.youtube.com/watch?v=9TIs8PyUVKc>

¹⁵ <https://www.nhs.uk/conditions/learning-disabilities/>

¹⁶ <https://localoffer.wiltshire.gov.uk/growing-up-moving-on>

¹⁷ https://lginform.local.gov.uk/reports/view/lga-research/lga-research-report-adult-social-care-outcomes-framework-ascof?mod-area=E06000054&mod-group=AllSingleTierInCountry_England&mod-type=namedComparisonGroup

The table below shows the numbers of people living in residential care and/or receiving supported living between December 2022 and June 2023. The data shows an increase in provision for people accessing these services within the last 6-month period.

		Residential & Nursing		Supported Living	
		2022	2023	2022	2023
MH	Total	109	135	143	149
	Out of County	28	31	25	28
	% Length of Stay > 2 years	85 (78%)	102 (76%)	74 (52%)	92 (62%)
	Mean Weekly Cost	£1,323.71	£1,349.42	£422.74	£436.55
LD	Total	278	284	457	495
	Out of County	94	98	29	28
	% Length of Stay > 2 years	244 (88%)	243 (85%)	348 (76%)	355 (72%)
	Mean Weekly Cost	£1,894.28	£1,984.63	£1,112.67	£1,138.26

There are slightly more people with MH/LD/A accessing support than in 2022, but there has been an increase in provision for both adults with a learning disability and mental health for supported living. This is in line with our expectation that most adults of working age wish to live independently rather than in care home settings. However, there has been a slight increase of 14.71% for residential care settings due to individuals transitioning from children’s services in the last six months. The Wiltshire Independent Living Strategy 2022 aims to develop the right accommodation and support in the right areas of Wiltshire.

f. Autism spectrum conditions

In 2022, Wiltshire published its first joint all-age autism strategy.

This joint, all-age autism strategy is guided by a vision of an inclusive, vibrant, well-connected Wiltshire, in which children and young people with autism and autistic adults fulfil their potential, be actively involved, and included in their communities, make informed decisions, have control over their lives, and be valued and included within society.

Through consultation and co-production, we have identified six priorities and three enablers:

Priorities:

- i. Improve health of autistic people and reduce health inequalities.
- ii. Support children and young people with autism to learn and move into adult life.
- iii. Support autistic young people and adults to access work.
- iv. Support autistic people to live independently in the community wherever possible.
- v. Raise awareness of autism and make Wiltshire an inclusive place to live, learn and work.
- vi. Improve support for autistic people in the criminal justice system.

How we'll make this happen:

- a. Create a positive and ongoing dialogue between autistic people and services.
- b. Improve data collection and reporting to monitor implementation of the strategy and drive system improvement.
- c. Strengthen governance, leadership, and accountability.

This echoes the vision and objectives of the 2021 National Autism Strategy.

Autism is a spectrum condition¹⁸ which affects different people in different ways. People with autism¹⁹ may experience difficulties with social communication and interaction, repetitive and restrictive behaviour, sensitivity to light, sound, taste or touch, highly focused interests or hobbies, and anxiety and depression.

The definition of autism continues to change as more is learned. Neurodiversity is a movement that challenges perceptions of autism. It rejects the idea that autism is a disorder and sees it instead as a neurological difference: one with a unique way of thinking and experiencing the world. The movement celebrates neurological diversity and champions the different worldviews and skills that people have.

Research shows that public understanding of autism has improved in recent years and that as a society we are becoming more open to neuro-divergence and different ways of being. However, the All-Party Parliamentary Group on Autism's 2019 report found that just 24% of autistic adults and 26% of family members think public understanding has improved since the introduction of the Autism Act in 2009²⁰.

Prevalence

In the UK, around 1.1% of adults is estimated to be autistic. The male-to-female ratio is between 5:1 and 3:1, although it is widely believed that this under-represents the number and proportion of autistic girls and women. Based on national prevalence rates, we estimate there are around 5,600 - 5,700 autistic people living in Wiltshire. The table below breaks this down by gender and age:

	ONS resident population figures				Estimated population of autistic people calculated at 1.1% of resident population			
	2020	2025	2030	2035	2020	2025	2030	2035
Total population	510,050	522,237	531,492	539,257	5,610	5,740	5,850	5,930
CYP	108,896	109,346	106,110	103,757	1,200	1,200	1,170	1,140
Adults	401,154	412,892	425,382	435,500	4,410	4,540	4,680	4,790
Male	252,982	258,496	262,620	265,946	2,780	2,840	2,890	2,930
Female	257,068	263,741	268,872	273,311	2,830	2,900	2,960	3,010

¹⁸ We generally use the term autism spectrum *conditions* (ASC) in preference to autism spectrum *disorders*, as research shows this is generally how autistic people prefer the condition to be described. However, the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) describes it as autism spectrum disorder, so this term is used when referring to the diagnosis.

¹⁹ We use the term "autistic people" over "people with autism," as research by the National Autistic Society nationally and by Wiltshire Parent Carer Council locally found this was generally the preferred description.

²⁰ <https://pearsfoundation.org.uk/wp-content/uploads/2019/09/APPGA-Autism-Act-Inquiry-Report.pdf>

It is estimated that 40% of autistic people (i.e., around 2,500 people in Wiltshire) will also have an anxiety disorder, and one third (around 2,100 in Wiltshire) will also have a learning disability.

Detailed data and analysis about Wiltshire’s population and needs can be found in the Wiltshire Autism Strategy²¹.

g. Physical disabilities and sensory impairments

People with physical and sensory disabilities may experience a range of inequalities, including poor health outcomes, reduced access to education and work, and the higher likelihood of living in deprivation than those without disability. They may encounter barriers when accessing healthcare, e.g., physical barriers (such as transportation or building access), financial barriers, or communication barriers (e.g., the need for written or Braille material or sign language interpreters).

Wiltshire’s Joint Strategic Needs Assessment (JSNA), published in 2022, shows the prevalence of physical disabilities and sensory impairments, how these are likely to increase with age, and the impacts they can have on a person’s life.

The table below shows how the percentage of the population experiencing various physical disabilities increases with age. Visual and hearing impairment are both more prevalent among the older population, as well as illnesses that limit day to day activities a lot. With the population aged 65+ expected to increase by 43% by 2040 in Wiltshire, the number of people with physical disabilities will continue to rise.

Physical disability	% of population
Some hearing impairment	
18-64 year olds	11.7%
65+ years old	61.0%
85+ years old	93.7%
Severe hearing impairment	
18-64 year olds	0.7%
65+ years old	7.9%
85+ years old	22.4%
Visual impairment	
18-64 year olds	0.1%
65+ years old	8.8%
Personal care	

²¹

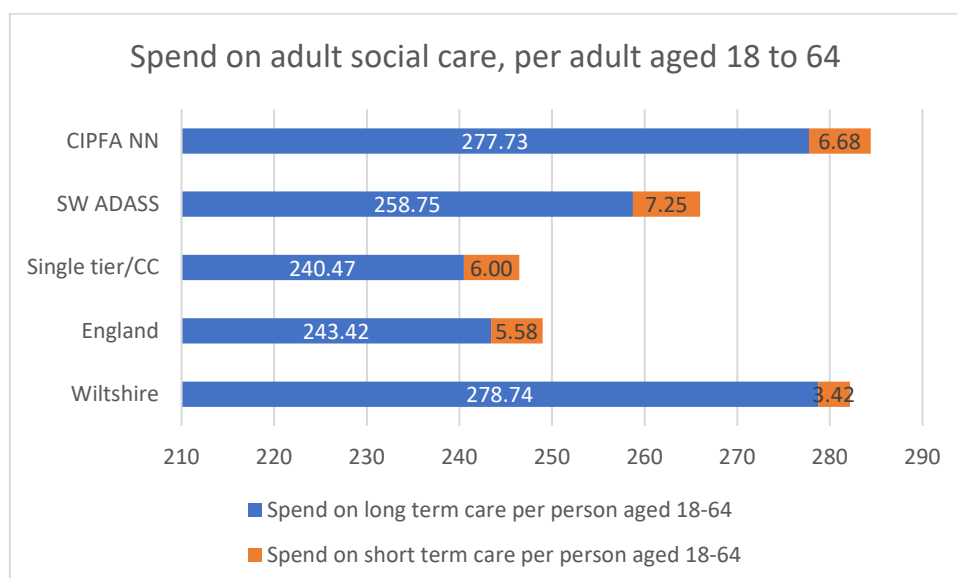
<https://cms.wiltshire.gov.uk/%28S%28hniswsj4w151yf55bd0kmu55%29%29/documents/s205945/Wiltshire%20Autism%20Strategy.pdf>

Moderate personal care disability 18-64 year olds	4.3%
Serious personal care disability 18-64 year olds	0.9%

Wiltshire Council commissions Action Deafness to provide highly-trained professionals to enable Wiltshire Council professionals to effectively communicate with deaf, hard of hearing, deafened and dual sensory loss adults, young people and children. This support includes British Sign Language (BSL) interpreters, lipspeakers, deaf translators, Speech-to-Text reporters (STTRs), note-takers, interpreters for deafblind people, remote interpreting through digital/virtual means, and accessible format translation (e.g. via Braille, Moon, EasyRead, pictorial).

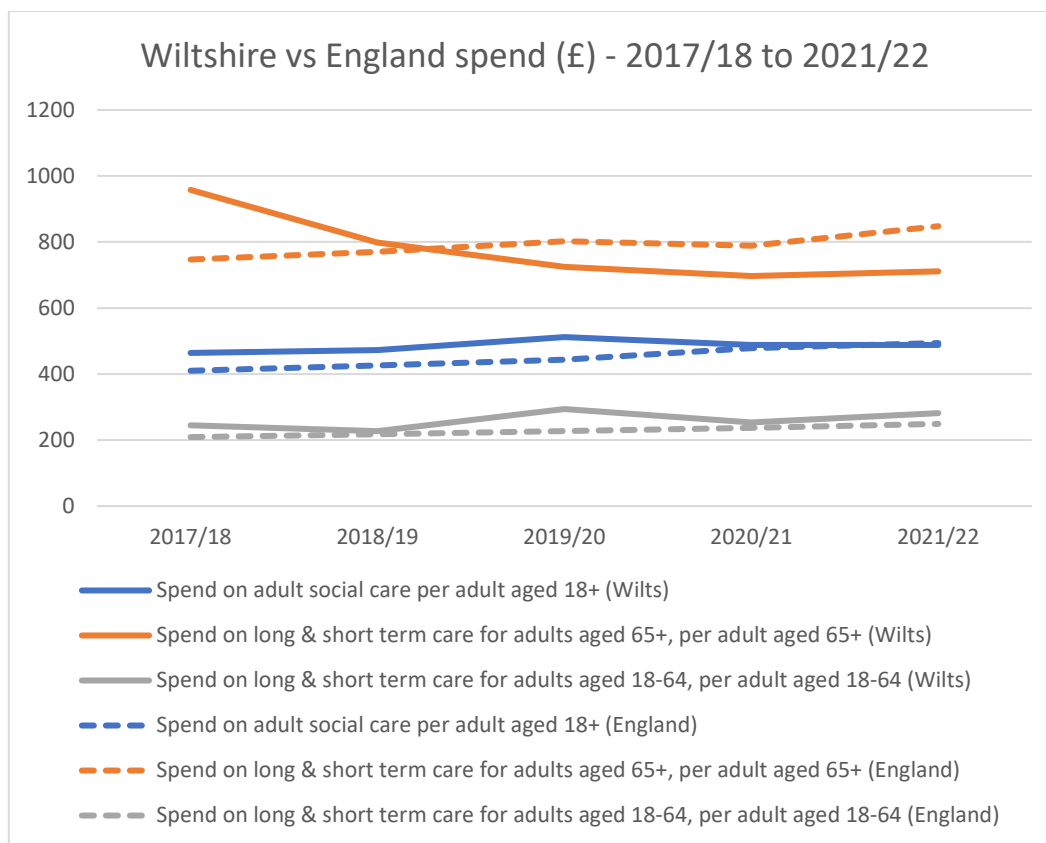
h. Comparison with other local authorities

The ASC Use of Resources South West Report for Wiltshire 2021/22, published by the Local Government Association in 2022, shows that for working age adults (i.e., aged 18-64) Wiltshire's spend on care is high compared to similar local authorities, although the gap between Wiltshire's spend and the national/regional average has narrowed over recent years. However, Wiltshire spends significantly less than average on short-term care for this group.



The graph below shows Wiltshire's spend²² on social care (solid lines) with the national trend (dotted lines) over the past five years.

²² Measured as spend per head of population aged 18-64.



Wiltshire's spend per population overall and for working-age adults have broadly remained static over the last 5 years. Overall, Wiltshire began the five-year period spending more than the national average and now spends about the same. However, proportional spend on adult social care for older people has decreased significantly – by around 25% - with the sharpest decrease (by 17%) between 2017/18 and 2018/19. Per head of population aged 65+, Wiltshire spent 28% more than the national average in 2017/18. In 2021/22, we spent 16% less.

Data shows that Wiltshire provides care to fewer people than many local authorities (this is likely to be for several reasons, including lower levels of deprivation and a comparatively high proportion of people who fund their own social care). However, when Wiltshire does provide care, it spends more per person for both long and short-term care, and for both older and working age adults, than comparators. Wiltshire's spend per person for people aged 18-64 and 65+ is 9th and 12th respectively out of 151 local authorities. This seems to be because our baseline spend is high, not because recent uplifts have been high.

On average, our 2021/22 unit costs for home care and care homes for working age adults are higher than average, but lower than average for older adults' care homes.

i. Impact of COVID-19

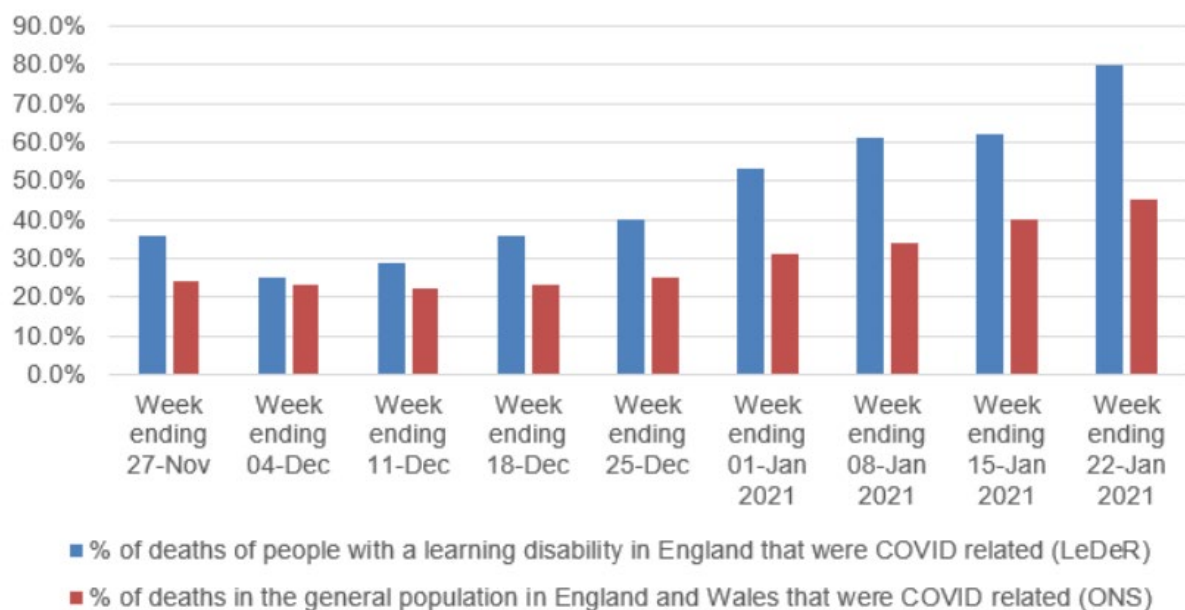
The long-term impact of COVID-19 on health and wellbeing is not yet known, but the pandemic has had an impact on all our lives, whether directly or indirectly.

Due to restrictions and prioritisation of COVID-19 treatment, access to mental health services reduced and waiting times increased. Fewer people accessed psychological therapies in 2020 than in previous years and children and young people had to wait longer for eating disorder treatment.

In 2021, the charity Mind launched a national survey to hear from 12,000 people with lived experience about how they are feeling and coping. Around a third of people surveyed said their mental health had got much worse since March 2020. More than half of benefit claimants are experiencing increasingly severe and complex problems, compared with 36% of people who are not receiving benefits. 88% of young people said that loneliness worsened their mental health during the pandemic.

For people with learning disabilities, the pandemic disrupted routines, activities and contact with friends and family. Tragically, people with LD faced an increased risk from COVID-19. Data published by Mencap in 2021 shows that that in every week from the end of November 2020 to the end of January 2021, people with an LD died from COVID-19 disproportionately compared to the general population²³:

Proportion of COVID deaths of people with a learning disability compared to the general population



In 2020, the National Autism Society surveyed autistic people and their families across the UK. From the 4,000+ responses received:

- 9 in 10 autistic people worried about their mental health during lockdown; 85% said their anxiety levels got worse.
- People with autism were 7 times more likely to be chronically lonely than the general population*; and 6 times more likely to have low life satisfaction** (comparisons using ONS data)

²³ <https://www.mencap.org.uk/press-release/eight-10-deaths-people-learning-disability-are-covid-related-inequality-soars>

- 1 in 5 family members responding to the survey had to reduce work due to caring responsibilities.
- 7 in 10 parents say their child has had difficulty understanding or completing schoolwork and around half said their child's academic progress was suffering.

The response to COVID-19 did, however, encourage individuals to embrace various technology care solutions to provide support when face-to-face meetings posed a risk. This increased digital awareness can now be enhanced to develop how technology can support people to live well and better manage their condition.

4. Supply

Skills for Care estimate that in 2020/21 there were 13,000 jobs in adult social care in Wiltshire – a 4% reduction on the previous year – which are split between:

- Independent Sector Providers 90%
- Local Authority 5%
- Jobs working for Direct Payment Recipients 5%

Whilst demand for support by adults of working age is not expected to increase significantly in the coming years (as it will for older people), there are still challenges in recruiting and retaining a skilled workforce:

- Wiltshire's turnover rate for adult social care staff employed by local authority or independent sector organisations (34%) is higher than the regional (32%) or national (29.5%) average. Skills for Care cites rurality and the long travelling distances as being factors affecting turnover of staff.
- Nationally, pay, terms and conditions for adult social care workers has failed to keep pace with other industries. This means people can often earn more in retail and other sectors.
- Around one quarter (23%) of the workforce in Wiltshire were on zero-hours contracts. This can mean that staff choose their working hours to fit around family life. However, it may also mean that labour supply is impacted by seasonal variations e.g., parents/carers taking breaks in the summer holidays, temporarily moving to retail in the Christmas period for higher wages etc.
- Global factors have impacted recruitment and retention. However, in February 2022 the Home Office announced the temporary relaxation of immigration rules for care workers.
- Rurality: Skills for Care cites rurality and long travel times between visits as being factors affecting turnover of staff. Providers have told us that they have trouble in recruiting and retaining staff in the more rural areas of Wiltshire.
- Attracting younger people to a career in care: Workers aged 24 and under account for 11% of the adult social care workforce at present, and we are aware that those under 25 years of age are more likely to leave their posts.
- A Qualified Workforce: Skills for Care estimates that 47% (2020/21) of the direct care providing workforce in Wiltshire hold a relevant adult social care qualification, this is a 6% reduction from the 2019/20 data. As the population

of older adults grows in the coming years, a skilled trained workforce will be required to provide care to those with more complex needs.

Information and resources about recruitment and retention can be found at <https://www.skillsforcare.org.uk/Recruitment-retention/Recruitmentand-retention.aspx> and www.skillsforcare.org.uk.

Wiltshire Council is part of the Proud to Care initiative, a partnership between 16 local authorities in the South West working with Health Education England aiming to make social care careers more attractive, rewarding and sustainable

We also work closely with the Bath & North East Somerset, Swindon & Wiltshire Care Skills Partnership (BSWCSP), an employer-led partnership which supports care providers, improves access to training and resources and provides career advice for those interested in joining the care sector.

a. Support in the home

Wiltshire Council, in partnership with BSW ICB, have retained a Pseudo Dynamic Purchasing System (DPS) framework to commission services to support adults of working age who may present with mental health needs, learning disability (with or without dementia), autistic spectrum condition, physical or sensory needs, social, emotional and behavioural needs, speech, language and communication needs, through the provision of residential and nursing care homes, short term transitional and community services.

Services have been purchased through the Good Lives Alliance (GLA) since September 2019. In September 2023, the existing GLA Framework was replaced by the Good Lives Alliance 2023 (GLA 2023) using an outcome-focused approach to focus on people's strengths, assets and potential, have a positive and meaningful impact on people's lives, increase choice and control and develop people's life skills.

The Council will continue to prioritise providers which can demonstrate that they:

- provide the right support and environments to meet complex needs,
- maximise independence by appropriate and timely withdrawal of support,
- are expert in the service they offer, aware of all relevant national policy and legislation,
- can evidence this clearly not only in their procedures and information, but in their daily delivery,
- have quality performance data clearly recorded that evidence that outcomes have been achieved, including the ability to work in partnership with the Council and NHS

b. Shared Lives

Wiltshire Council is committed to growing its Shared Lives and Shared Days scheme. Shared Lives Wiltshire offers long-term and short-term placements, respite,

and home from hospital provision for people who need support. This includes older adults and adults with a range of disabilities and conditions. The scheme matches someone who needs care with an approved carer. The carer shares their family and community life and gives care and support to the person with care needs.

c. **Equipment and adaptations in the home**

Technology Enabled Care (TEC) is the use of technology to provide health and care services to people in their own homes, or near to home, encouraging and increasing levels of self-care, wellbeing, and independence. We want to use TEC more to support people alongside, or in some cases delay or prevent the need for, more traditional homecare. It will enable people to monitor their health and wellbeing, manage their own self-care and live independently at home for longer. It will also give family carers peace of mind that their loved one is safe. In Wiltshire, TEC is delivered via the Integrated Urgent Care (IUC) contract.

Technology Enabled Care (TEC) is an area of transformation for the Council, and we want to expand the choice of technologies and adaptations that enable adults and children to live independently and realise the full potential of technology to improve care. In 2023, we published a new TEC strategy with four key objectives:

- i. **We will develop a TEC offer** that empowers people, supports them to manage their self-care and stay safe, and enables them to live healthy, independent lives.
- ii. **We will embed a “TEC First” culture** across our workforce. Staff will be enabled to use their creativity to find new solutions. We will use evidence and data to assess and evaluate what works for people.
- iii. **We will change the way we provide care** – we expect that by the end of this strategy (2028), 60% of packages funded by the Council will be enabled by technology. We will set milestones on the way to that target and will monitor how we are doing.
- iv. **We will work with our partners**, particularly across the NHS, social care and housing. We will take a One Council approach to promoting TEC, underpinned by our core principles of prevention and early intervention.

We are committed to improving and expanding the use of TEC, so it becomes an integral part of our social care offer by:

- Supporting people to stay safe, healthy, and independent in their own homes and communities.
- Reducing, delaying, or preventing the need for ongoing care by using TEC at an earlier stage in people's lives.
- Enabling the person to take positive risks in a safe way.
- Providing information and advice to promote knowledge and uptake.
- Promoting a culture of self-care within the population.
- Working with partners in health, housing, public sector agencies, the third sector and independent sector across Wiltshire and our ICS footprint to develop a joined-up approach to TEC awareness and delivery.

We are piloting innovative approaches, including the use of TEC in an extra care setting to encourage social contact, reduce isolation, enable remote contact between the user and their friends and families, and prevent potential crises such as falls and dehydration.

d. Daytime and evening opportunities

Day opportunities should meet people's needs and aspirations as assessed under the Care Act. These needs will lie on a spectrum, from support that promotes independence and community engagement, through to more intensive personal care. Day opportunities must have a clear purpose and meet people's goals and aspirations.

The Living my Life Framework which launched in 2022, encourages people to develop skills, increase their choice and control and encourage a positive impact on their lives.

e. Community Connecting

Community Connecting assist people to find out more about their local community and how they can access voluntary work, social clubs, further education (including college courses and other training opportunities), local community facilities to do things that they enjoy, meeting friends or travel training.

The service is time limited; with the aim of working with people so they are able to access and take part in their chosen community activity and to do this independently. People who are eligible for this would include those over the age of 18, those with an assessed eligible need for this service, those with physical or neurological long term health conditions, sensory impairment, learning, development or intellectual disability or Autism, Asperger's Syndrome and high function Autism.

We will continue to collaborate with this service to link people to the employment and voluntary opportunities which are available to them.

f. Self-directed support

Individual Service Funds (ISFs) can be viewed as a "halfway house" between a direct service and a direct payment. ISFs can give a person, the flexibility, choice, and control of a traditional direct payment without the pressure and responsibility of becoming an employer or contracting with an agency. We are piloting an ISF programme and anticipate positive outcomes for the people we support.

In 2024 we plan to pilot a Small Supports programme which places the individual and their circle of support at the centre of their care. The Small Supports Partnership is a National Development Team for Inclusion led consortium of established Small Supports leaders and organisations with the Local Government Association.

The Small Supports programme’s vision is for people with learning disabilities and/or people who have been burdened by the reputations they have been given due to behaviours, reactions, support requirements, with large packages of care, to get support that is right for them and provide them with a choice about where they live and what they do.

g. Support in care homes

The Local Government Association’s analysis of the registered adult social care provider market in Wiltshire for October 2022²⁴ shows that in total there are 165 care homes for adults in the county. The LGA’s dataset does not break down these homes into those for adults of working age and those for older adults.

There are 70 homes which are registered for adults with a learning disability, autism spectrum disorder and/or mental health condition (not including dementia). These homes provide 533 beds, although not all of these are purchased by Wiltshire Council. Two of the 70 homes provide nursing care, with the remaining 68 homes providing residential care.

The table below shows CQC ratings for residential and nursing homes in Wiltshire:

	Homes
Outstanding	2
Good	56
Requires improvement	12
Inadequate	0
Inspected but not rated	0
Total	70

The 70 homes are provided by 25 organisations. Of these, none provide more than 10 care homes in Wiltshire, five provide between 5-10 care homes in Wiltshire and the remaining 20 organisations provide fewer than 5 care homes in Wiltshire. 15 homes are in Salisbury, 15 in Trowbridge, 9 in Chippenham, 6 in Pewsey and 5 in Marlborough. No other location has 5 or more care homes.

h. Procurement

Wiltshire Council spends around £350 million per annum on a range of goods and services to meet the needs of the residents of Wiltshire. The Strategic Procurement Hub provides specialist support:

<https://www.wiltshire.gov.uk/corporate-procurement-strategic-hub>

Prospective suppliers should register (for free) on the Supplying the Southwest portal and website (<https://www.supplyingthesouthwest.org.uk/>). The Council uses Supplying the Southwest for all competitive tender processes. The portal helps us to

²⁴ https://lginform.local.gov.uk/reports/view/lga-research/lga-research-report-local-registered-care-market-in-parent-area-label?mod-area=E06000054&mod-group=AllUnitaryLaInCountry_England&mod-type=namedComparisonGroup

communicate effectively and consistently with suppliers by providing a single point of contact for buyers and suppliers. It enables a wide range of suppliers to gain easy access to new business opportunities and contracts. Where appropriate, we also advertise opportunities in the Official Journal of the European Union (OJEU) and the national tender portal established to support small and medium-sized enterprises (SMEs).

The council's Strategic Procurement team publishes an annual contract register, which can be found at:

<https://www.wiltshire.gov.uk/corporate-procurement-strategic-hub>

Social value

The Council is fully committed to wider social benefits and the environmental wellbeing of Wiltshire and fully embraces the duties set out in the Public Services (Social Value) Act 2012. Our commitment is reflected within our Socially Responsible Procurement Policy.

Wiltshire Council's vision is to create strong communities in Wiltshire. Social value is how we, the Council, in collaboration with our supply chain partners, can actively add benefits to our community and measure the positive impacts on the well-being of our economic, social and environmental activities, for the county of Wiltshire to thrive and prosper.

Over the last decade the Council, with its public and voluntary sector partners, has improved people's lives and helped businesses to develop and relocate in Wiltshire. Looking ahead to the next decade, we plan to continue that success.

Wiltshire Council's Business Plan sets out our priorities for the County and how we will deliver them by working closely with local communities and partners, as well as investing in technology to make it easier for residents and businesses to engage with us and resolve matters more quickly.

Our Socially Responsible Procurement policy sets out the Council's commitment to consider the wider social value that can be delivered by drawing together different legislative requirements, policy initiatives and aspirations into a single coherent framework, underpinned by five key priority themes:



The policy sets out the goals that underpin each priority and how we will deliver them.

With the introduction of Socially Responsible Procurement Policy, the Council will continue to promote and embrace the requirements of the Public Services (Social Value) Act 2012 by pursuing improvements to Wiltshire's social, economic, environmental and cultural well-being, including through the way in which it manages its procurement activity. New providers who are considering developing a new service or seeking to build new social care provision in Wiltshire should contact our Whole Life Commissioning team (email: wlcommissioning@wiltshire.gov.uk) who will be pleased to provide further information, advice and guidance.

