

Market Position Statement

For health, adult social care and children's service providers working with Ealing

2019 – 2020

Children's & Adults Services

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Part 1 - Purpose of the Market Position Statement

What is a market position statement?

Ealing's Market Position Statement (MPS) sets out the key changes that are likely to impact our local service providers in the coming year, giving information on changes in demand and future opportunities relevant to the provision of health, social care and children's services in the borough. Ealing's MPS is updated annually and is available to download online at www.ealing.gov.uk.

Although primarily a Council document, we have included reference to health and wellbeing services where these are jointly commissioned with Ealing Clinical Commissioning Group.

Who is the market position statement for?

Ealing's MPS is targeted to providers of health, adult social care and children's services across the private, not-for-profit, voluntary and statutory sectors. It is anticipated that these markets will change significantly over the next few years because of ongoing policy and population changes, and in light of the continued financial pressures faced by statutory agencies.

In this context, commissioners recognise that service providers are an important source of intelligence as to the capacity and resilience of our markets. Consequently, we will work closely with both commissioned and grant funded service providers to utilise their knowledge and experience in thinking more creatively and innovatively about the delivery of future service models and solutions that can best respond to the anticipated changes within our marketplaces.

Commissioning standards and quality assurance

Ealing's commissioning and procurement approach aims to incorporate the following standards¹:

1. Person-centred, strength-based and focused on outcomes
2. Promotes health and wellbeing for all
3. Delivers social value
4. Co-produces with local people, networks and communities
5. Promotes positive engagement with providers
6. Promotes equality
7. Well-led by local authorities
8. Demonstrates a 'whole systems' approach
9. Actively uses evidence about what works
10. Ensures the diversity, sustainability and quality of the market
11. Provides value for money
12. Develops the workforce

The provision of high-quality services is ever more important, particularly at a time when the financial pressures on public services are increasing. We believe that our providers share our commitment to high quality services and we want to work with them achieve to translate this into practice that makes a real positive difference to people's lives.

Consequently, the focus on quality will be a central feature of our engagement with providers throughout the coming year. To underpin our commitment to the quality agenda - Ealing Council, Ealing Clinical Commissioning Group (ECCG) and the Care Quality Commission (CQC) operate a

¹ Commissioning for Better Outcomes: A Route Map – University of Birmingham

Joint Quality Information & Assurance Panel to share market intelligence and better co-ordinate joint agency responses to quality related matters and / or concerns. Ealing Healthwatch has joined the group, which has helped inform their programme of Enter and View Visits and service surveys.

- Local adult social care provider information can be found at: <https://www.careplace.org.uk/Information/Ealingproviders>
- Quality improvement service provider guides can be found at: <http://www.careimprovementworks.org.uk/>
- A Quality Matters Guide is also available at the Gov.UK website: <https://www.gov.uk/government/publications/adult-social-care-quality-matters>

The council also wishes to ensure that adult self-funders buying their own care and support have the same assurances on quality. Our Adults' Placements and Brokerage Teams will, as requested, assist self-funders in navigating the care and support market.

Sub-regional market management (via the West London Alliance)

The West London Alliance (WLA) continues to be an effective sub-regional hub for implementing cross-borough arrangements for both children's and adults' services across North West London.

- Children's Services – has a wide-ranging children's programme coordinated by the WLA, which involves 9 local authorities, providing joint provider forums and a series of Dynamic Purchasing Vehicles (DPVs) for independent fostering, residential care and SEN services.
- Adult's Services – the WLA adults programme operates a sub-regional Dynamic Purchasing System (DPS) for Care Homes and Supported Living Placements; and a North-West London Market Management Working Group that oversees improved integrated working between the boroughs and the NHS
- The WLA boroughs jointly commission the online platform CarePlace, which provides accessible online information, advice and a directory of care and support resources. Health, social care and children's services providers can place details of their services (at no cost to the provider) on the CarePlace system via the following link: www.careplace.org.uk

Ealing is also committed to working with other local authorities and CCGs via the London Consortium for Community Equipment and will be collaborating in preparations for re-procurement of this service in 2020/21.

Key successes 2018-19

Our key successes last year included:

Children's Services:

- Grant funded a new Community Connections service
- Grant funded Children's Short Breaks Services
- Re-procured 0-19 health visiting and school nursing services

Adults' Services:

- Grant funded a new Community Connections and Self Care Service
- Grant funded a new Carers short-breaks service for Carers of Adults 50+
- Developed a new Carers Strategy

Part 2 - Developments and Market Opportunities 2019-20

Service developments and opportunities

Children's Services' will:

- Further implement its LAC Sufficiency Strategy 2018-21
- The WLA will open further rounds of the Dynamic Purchasing Vehicles (DPVs) for:
 - Independent Foster Care
 - Children's Residential Homes
- The WLA will develop a DPV for semi-independent accommodation that Ealing can call-off from April 2020. In addition to this DPV, the WLA also propose to design a new Accreditation Scheme for unregulated semi-independent accommodation to ensure minimum quality standards are in place within this sector moving forward
- Implement a new WLA contract for spot commissioned services.
- Pilot use of the BERRI tool to better support the step-down options for looked after children with complex care and support needs.
- Commission children's transport via the Council's Transport Hub
- Commission a short breaks service for children with complex needs
- Commission travel training and buddy services for children with complex needs
- Renew funding for the young carers support service delivered by Brentford Football Club
- Move provider payments to new scheduled payment arrangements
- Promote Brexit preparedness within the market

The above DPVs can be accessed via the London Tenders Portal <https://www.londontenders.org/>

Adults' Services' will:

- Actively engage with the market to embed strength-based working practices
- Open further rounds of the Dynamic Purchasing Systems (DPS) for:
 - Care Home and Supported Living Placements
 - Homecare
 - Residential Rehabilitation, Detoxification and Structured Day-care Providers
 - Advocacy Services
- Support implementation of the new London ADASS Quality Standards for Bedded Care
- Introduce an online self-assessment tool for care agencies to report on performance and quality
- Commission adults transport via the Council's Transport Hub
- Undertake a mini-competition for double-handed homecare across six zones in the borough.
- Begin scoping work on a new 'Accommodation Strategy' to be published during 2020-21
- Develop a '*strategic brief*' for older adults' accommodation including exploring opportunities to develop new extra-care supported housing.
- Develop a system-wide approach to falls prevention and management
- Develop a co-ordinated approach to End of Life Advance Care Planning
- Award a new substance misuse treatment contract in November 2019 (for both adults and young people)
- Provide substance misuse placements for service users requiring more intensive support in addition to input from RISE
- Promote Brexit preparedness within the market

The above DPS's can be accessed via the London Tenders Portal <https://www.londontenders.org/>

Training and Workforce Development

Children's Services:

In the main, children's services providers are expected to take the initiative in this area either working individually or collectively across the Central and West London sectors. Providers are responsible for ensuring that their workforce is appropriately trained to meet regulatory standards and provided with continuing professional development.

Adults Services:

We provide a range of professional development opportunities for staff from across the private, voluntary and independent care sectors. This includes care homes, homecare agencies, voluntary and carers organisations. The criteria for registration is that providers must be either based in Ealing or have a contract to provide care and support services on Ealing Council's behalf.

The 'general' adult social care courses offered for 2019-20 are as follows:

- Safeguarding Adults Level 1 – Raising a Concern
- Introduction to the Mental Capacity Act
- Introduction to Dementia
- Dignity and Dementia Care
- Mental Health Awareness for Non-Mental Health Staff
- Challenging Behaviour – Learning Disabilities
- Boundaries and Good Practice in Adult Care
- Level 2 Award – Promoting Dignity in Care
- Level 2 Award – End of Life Care Awareness
- Level 2 Award – Pressure Care Management
- Motivational Skills for Home Care Providers (part of our Better Lives Programme)

The general courses are at an introductory level and intermediate level and aimed primarily at unqualified staff.

Care Certificate related courses offered for 2019-20 are as follows:

- Level 2 Award – Duty of Care
- Level 2 Award – Person Centred Care and Support
- Level 2 Award – Effective Communication
- Level 2 Award – Food Safety, Nutrition and Hydration
- Level 2 Award – Infection Control and Prevention

The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. Designed with the non-regulated workforce in mind, the Care Certificate gives everyone the confidence that workers have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high-quality care and support.

All the adult social care courses remain **free of charge** for 2019-20. As well as 'classroom' style training Ealing also offers access online e-Learning courses via the Council's e-Learning website. Ealing's Training & Development Team can be contact at trainingsocialcare@ealing.gov.uk or on 020 8825 8780.

During the year we will be identifying an appropriate training offer on Autism for all those providers who may be working with people whose needs are on the autistic spectrum.

Service providers are also encouraged to make use of online workforce tools to assist them in developing their workforce e.g. Skills for Care currently offer the following online workforce planning tools:

- Skills for Care – Workforce Capacity Planning Tool
<http://www.skillsforcare.org.uk/Standards/Care-Act/Workforce-capacity-planning/Workforce-capacity-planning-model/Workforce-capacity-planning-model.aspx>
- Skills for Care – Workforce Readiness Tool
<https://www.snapsurveys.com/wh/surveylogin.asp?k=141137934094>

Provider Engagement 2019-20

Children's & Adults' Services will engage with its commissioned and in-house services providers throughout 2019-20 via the following facilitated forums and events:

- WLA led Children's Provider Forums
- All Age Transport Provider Forum
- Care Home Provider Forum
- Learning Disabilities Provider Forum
- Mental Health Provider Forum
- Ealing Registered Managers Network (facilitated by Skills for Care and Adults Services).
You can register and join Skills for Care at <https://id.skillsforcare.org.uk/Account/Register>

Adults Services also plan to run a small number of 'challenge and innovate' sessions throughout the year with providers - details of which will be circulated to providers throughout the course of the year. As an example, we will be inviting providers of advocacy services to join us to discuss the current arrangements and consider how we can improve the offer through a fresh DPS in the coming year.

Early in the year we circulated a survey asking providers how they would wish to engage with the Council and our partners. While the response was limited we will be responding to this with a more frequent (but short) email Bulletin with key messages and links. We will be looking to hear from providers as well as communicating to them.

Part 3 - Service area profiles

Children and young people

Population profile

Key facts about children and young people in Ealing:

- 25.9% of the population is aged 19 and under – higher than both England and London
- The total population of 0-19 years old is set to rise by 0.4% by 2025 and projected to drop further in 2026 by 0.2%)
- The birth rate peaked in 2010 at just under 5,900, fell in 2013 to rise slightly in 2014 and has been falling since then with the latest (2017) figure of just over 5,100 births
- There are 54,578 pupils in Ealing maintained school
- 84% of pupils in maintained schools are from minority ethnic groups, compared to 33% nationally
- The number of children with special educational needs was 7,847 or 14.4% of the school population
- The number of looked after children (as of 31st March 2019) was 354 (provisional)
- Detailed information about population needs can be found online at:
https://www.ealing.gov.uk/info/201048/ealing_facts_and_figures

Children with Additional Needs and Disabilities Population Profile

Public Health has produced a new Joint Strategic Needs Assessment chapter on Children with Additional Needs and Disabilities earlier in 2019. This can be reviewed at:
https://www.ealing.gov.uk/downloads/201252/ealing_joint_strategic_needs_assessment

Ealing's Children with Disabilities (CWD) social work team at the end of 2017-18 had 390 children registered. In 2017-18 over £2.7 million was spent on community short break packages and direct payments for 340 children and young people with disabilities.

Community short break includes: domiciliary care provision in the home and community, overnight care, day time and holiday short break activities such as afterschool school clubs and holiday clubs. There are currently 20 Domiciliary Care providers on the Councils Dynamic Purchasing list with 38 Providers used in total. In 2017-18 over 77,000 hours of domiciliary care were purchased by the Council for over 160 children and young people. Packages of care are tailored to meet a wide range of needs.

70% of care packages are for children & young people with physical and or learning disabilities and 30% are for very complex health needs and behaviour that challenges. Of the 30%, approximately one third require specialist health care and behaviour support. In addition to domiciliary care short breaks provision, community based short breaks and resources are commissioned such as specialist play and holiday clubs.

Residential short breaks were provided to 21 children and young people at a cost of £430k. Residential short break services cater primarily for children with most complex needs. These may include children who require assistance with moving and personal care, children who require invasive clinical procedures and those with behaviour that challenges. There are 11 children & young people with complex needs who are in full time residential placements. The total spend last

year was £1.7million with the social care contribution being £994,000 and health & education making up the remainder.

The number of children with special educational needs and disabilities has remained stable. However, the number of children in Ealing schools with communication / interaction needs (SLCN or ASD) has doubled in the past 5 years, from 1646 in 2013-14 to 3357 in 2018-19.

SEN Type	Primary	High	Special	Children's Centres	PRU	All
SPLD Specific Learning Disabilities	0.6%	1.9%	#	#	#	1.1%
MLD Moderate Learning Difficulty	1.9%	3.1%	24.5%	#	5.6%	2.6%
SLD Severe Learning Difficulty	0.1%	0.0%	38.9%	#		0.6%
PMLD Profound and Multiple Learning Difficulty	#		10.3%	#		0.2%
CLN - Cognitive and Learning Needs Total	2.6%	5.0%	73.9%	1.6%	6.5%	4.5%
SEMH - Social, Emotional and Mental Health	1.8%	2.5%	#	1.6%	89.8%	2.2%
SLCN Speech, Language & Communication Needs	6.3%	2.4%	1.2%	12.5%	#	4.9%
ASD Autistic Spectrum Disorder	1.0%	0.8%	21.7%	1.0%		1.3%
Communication and Interaction Needs	7.3%	3.2%	22.9%	13.6%	#	6.1%
VI Visual impairment	0.1%	0.1%	#			0.1%
HI Hearing Impairment	0.2%	0.2%	#		#	0.2%
MSI Multi-Sensory Impairment	0.1%	#	#			0.1%
PD Physical Disability	0.4%	0.3%	2.2%	#		0.4%
Sensory and/or Physical Needs total	0.7%	0.6%	2.8%	#	#	0.7%
OTH Other	0.5%	0.1%	#	#	#	0.3%
NSA Sen Support but no assessment of specific needs	0.7%	0.3%			#	0.5%
All	13.6%	11.7%	100.0%	17.4%	100.0%	14.4%

Looked After Children (LAC) Population Profile

The numbers of looked after children has been stable reducing by one since March 2017. Of the total looked after children population there were 51 unaccompanied asylum-seeking children, up by 8 from March 2017.

34% of Ealing's LAC cohort are between the ages of 16-17yrs, followed by 27% of 13-15yrs. The gender split of looked after children is 55% male and 45% female.

Looked After Children 0-18	Number of Placements Made April 2017- March 2018
In House Foster Carers	
• Fostering placement	87
• Respite placement	66
Independent Foster Agencies (IFA)	
• Fostering placement	96
• Respite placement	56
Private and Voluntary Residential Placement	38
Semi Independent Accommodation (19-25)	131
Secure Accommodation	1
B&B Accommodation	10

- Independent Foster Agency (IFA) placements are managed through a West London Alliance Dynamic Purchasing Vehicle (DPV). There are currently 59 IFA's providers on the DPV.
- Private and voluntary sector residential provision is currently commissioned residential placements from a West London Alliance DPV, providing access to over 330 homes throughout the UK.
- Semi-independent accommodation is currently commissioned from a combination of 35 x 24hr staffed units and 31 x non-24 hr staffed units.

There is continued demand for:

- local foster carer placements for older young people in their teens.
- high quality local residential care for children and teenagers with complex support needs
- high quality local semi-independent accommodation
- domiciliary care for children with challenging behaviour
- accessible transport with passenger assistance

What do we plan to change or extend?

- Commission special needs transport services
- Commission travel training for children with special needs
- Commission a short breaks service for children with complex needs
- Participate in the development of a new DPV for semi-independent accommodation for young people and an accompanying accreditation scheme
- Pilot use of the BERRI tool to better support the step-down options for children and young people with complex care and support needs.
- Implement a new spot contract for independent foster care, residential homes and semi-independent provision
- Move to provider payments to new scheduled payment arrangements
- Renew funding for the young carers support service delivered by Brentford Football Club

Older adults

Population profile

Ealing's population aged over 65 will continue to grow in future years. The greatest percentage rise is expected in the 90+ group with a predicted increase of 57% from 1,700 to 2,700 between 2016 and 2026.

Population Projections by Age Group

Age	2016 Population	2026 Population	% change 2016 - 2026
85 – 89	3,400	4,500	+32%
90 +	1,700	2,700	+57%
All 0 to 90+ Ages	343,700	355,400	+3%

Source: GLA 2016 round population projections (SHLAA, DCLG)

Ealing has:

- a diverse population, with 38% of the older population made up of BME communities
- people who cannot manage at least one self-care activity is predicted to rise to 14,750 by 2020
- an estimated 2,747 older adults with dementia that is projected to rise to 3,729 by 2025
- 90% of people living with dementia have another health condition, with the most common being hypertension, painful conditions and depression
- sensory impairment affects older adults and is predicted to rise significantly by 2025

People over 65 with disabilities in Ealing 2017 and 2025 projections

	2017	2025
65 and over with moderate or severe visual impairment	3,663	4,489
65 and over with moderate or severe hearing impairment	17,599	21,907
65 and over with severe hearing impairment	466	592
65 and over with moderate or severe learning disability	119	142

Source: PANSI² & POPPI³

Detailed information about the population needs of Ealing can be found online at:

https://www.ealing.gov.uk/info/201048/ealing_facts_and_figures

Current demand and supply profile

There are 28 registered domiciliary agencies operating in borough with 80 plus providers currently on the Councils Homecare DPS, who supported over 2,400 older adults during 2017-18 with over 70,000 care visits delivered. Ealing, Perivale, Acton and Park Royal are the main geographical areas where the Council wishes to see the market develop additional and / or new capacity. The Council proposes to procure

There are 53 registered care homes in the borough offering 1,653 beds (of which 955 are nursing beds). Most local in-borough referrals to care homes were for people with dementia. There is a

² <http://www.pansi.org.uk/>

³ <http://www.poppi.org.uk/>

noted need for dementia placements to support residents with challenging needs. The need for residential and nursing dementia beds remains high, particularly for respite and short-stay. People who are placed in residential care are now more likely to have complex care needs. In terms of placement activity Adults Services commissioned (both in and outside Ealing) 332 permanent nursing placements and 300 permanent residential placements in 2017-18. In addition to this, 372 older adults were also provided with either short-term or respite care placements during the year.

There are two extra-care schemes providing 75 self-contained flats in the borough. We expect demand for this service model to grow in future years. Consequently, we continue to be open to discussions with service providers as to how extra-care capacity can be developed in the borough to meet new demand.

Adults Services also provides up to 100 places per day at the Michael Flanders Centre, a dedicated day service for older adults with dementia.

What do we plan to change or extend?

During 2019-20 we would welcome provider involvement with the following:

- Explore options to increase the number of residential and nursing dementia beds for respite and short-stay purposes.
- Establish Dementia Friendly Communities and a Dementia Friends' Network
- Develop an Older Adults Accommodation '*strategic brief*' including exploring opportunities to develop new extra care supported housing.
- Develop a system-wide approach to falls prevention and management
- Develop a co-ordinated approach to End of Life Advance Care Planning
- Work with the local NHS to extend support to providers in the management of challenging behaviour to enable them to continue to care for people in the community and avoid unnecessary admission to a hospital setting

Physical disabilities and sensory impairment

Population profile

6.8% of all Ealing residents reported (in the 2011 Census) that they had a health problem or disability that clearly impacted on their day to day activities, with a further 7.4% reporting a condition that limited their activities

The table below sets out the number of adults per 100,000 in Ealing with a disability compared to those in England. Over the coming years, it is anticipated that the population of working age adults living in Ealing with a moderate to serious disability will increase by 2.7%, marginally more than the 2.3% rise anticipated in England (ONS Population Projections).

Projected Number of Working Age Adults per 100,000 with a disability in Ealing

Indicator	Ealing		England	
	2014	2020	2014	2020
People with a				
Moderate physical disability	7101	7263	7710	7873
Serious physical disability	1975	2054	2256	2337
Serious visual impairment	65	65	65	65
Moderate or serious hearing impairment	3195	3364	3819	3990
Profound hearing impairment	26	28	33	36

We are aware that disabled people are less likely to be in employment, be on lower incomes if they are in employment, and less likely to have formal qualifications. Disabled people also face additional costs related to their disability and tend to have lower economic living standards. Many disabled people and people with sensory impairment face social isolation and loneliness, which can lead to an increase in mental health conditions. Many disabled people also highlight that limited travel options and poor access to buildings and events remain major barriers to their daily lives

Detailed information about the population needs of Ealing can be found online at:

https://www.ealing.gov.uk/info/201048/ealing_facts_and_figures

Current demand and supply profile

During the last year, Ealing Council provided a range of care and support provision as follows:

- Delivered 11,000 homecare visits for 450 people
- Support 49 with a physical disability in permanent nursing placements and 28 people in permanent residential placements
- Provided 77 short stay respite placements
- Supported 13 people with day opportunities / services and 27 people with an outreach package
- Many physically disabled people manage their own care and support needs via a direct payment (see the section on direct payments for further details).

What do we plan to change or extend?

- We are keen to work with providers to develop strength-based approaches which enable people with physical disabilities or sensory impairments to live as independently as possible, in particular, extending pathways to enter and continue in employment.

- We will be looking to providers to improve communications and responsiveness to meet the needs of those who depend on community equipment or wheelchairs to maintain their independent way of life.
- We will be working with the housing department and looking to both RSLs and private housing providers to develop additional units of accessible housing in the borough to meet the increasing demand.

Learning disabilities

The definition of learning disability is provided in the document Valuing People (DOH 2001) as the presence of a significantly reduced ability to understand new or complex information to learn new skills i.e. impaired intelligence with a reduced ability to cope independently i.e. impaired social functioning which started before adulthood, with a lasting effect on development.

Population profile

PANSI estimates (based on 2017 figures) that 823,082 people aged 18-64 in England have a learning disability with adults aged 65 and over standing at 209,448 people. In Ealing 5,550 people aged 18 - 64 are estimated⁴ to have a learning disability which is estimated to rise to 5,706 people by 2025.

Indicators	Ealing		England	
	2017	2025	2017	2025
People aged 18-64 with a:				
Moderate or Severe Learning Disability	1,270	1,309	187,508	191,859
Severe Learning Disability	338	347	49,739	50,877
Living with a Parent	492	494	70,406	70,908
Challenging Behaviour	102	105	15,190	15,482

Indicators	Ealing		England	
	2017	2025	2017	2025
People aged 65+ with a:				
Learning Disability	875	1,074	209,448	244,115
Moderate or Severe Learning Disability	119	144	28,395	32,125

PANSI Estimates: Learning Disability Population

Approximately 75% of individuals receiving services from Ealing Council live in the borough. Just under half of those who live outside Ealing, reside in London. The age profile of people with learning disabilities in Ealing is young, with 40% of the adult population aged under 35. The prevalence of learning disabilities is higher in men compared to women, with 60% of the local population being male. Ealing is a diverse borough. 58% of the population of adults with LD are from black and minority ethnic backgrounds, and of those 28% are from Asian backgrounds.

Current demand and supply profile

During the financial year 2018/19, around £42m was spent on learning disability services by Ealing Adult Social Care services and Ealing CCG.

There has been significant increase in the number of children and young people with a Severe Learning Disability and the number of school pupils with profound or multiple disabilities. It is anticipated that our learning disabilities population is set to increase to 1339 by 2020. Within this service area, we know that there will be an increasing number of individuals:

- Who are younger with more complex needs who will require health, care and support services including specialised housing and community support.

⁴ PANSI 2017 estimates - www.pansi.org.uk

- Are growing older and are becoming frailer and are at risk of developing age-related conditions such as dementia (most prevalent in people with downs syndrome as there is a risk of early onset dementia from 30 years of age onwards).
- With mild to moderate learning disabilities with complex needs and dual diagnosis and behaviours associated to autism, mental health, substance misuse and risk of re/offending.
- With more severe autism and learning disabilities with complex needs who have behaviour that proves challenging at times.
- Who meet Continuing Health Care (CHC) criteria due to a primary need related to healthcare.
- Who are elderly and/or single parent carers who require support to continue their role as carer whilst leading their own life with a focus on remaining healthy and well.

Ealing Adult Social Care aims to support people where possible to remain in their homes but as part of our duty of care, will provide specialist accommodation to meet their specific needs, enhance their quality of life to meet their assessed needs within a limited financial envelope. Our strategic direction of travel for people with learning disabilities that we have a duty of care for is joint-working and integration with our key health partners.

We also recognise the views of families, carers and relatives and it forms part of how we achieve the identified outcomes in meeting their needs. Our commissioning model for learning disabilities services is to reduce reliance on residential care, move service users towards supported living appropriately and greater independence where possible with fewer out of borough placements. Ealing Council encourages the provision of meaningful daytime activities and life skill development opportunities. There is therefore a drive to develop and increase employment and supported employment opportunities so that the number of people with learning disabilities in paid or meaningful and purposeful voluntary employment; full or part-time will increase.

The council anticipates service provision for our younger population with more complex needs that are in transition and our ageing demography of people with learning disability.

What do we plan to change or extend?

- Our care and support services are currently commissioned via a Dynamic Purchasing System (DPS). Any Provider can apply to join the DPS which currently has circa 300 Learning Disability Service Providers on it.
- Ealing will work in an innovative and collaborative way to develop service models that will deliver the right services to meet the needs of learning disabilities service users. The Council is also keen about services within the borough and assistive technology.
- We will also work with Providers who have identified people that are currently in residential care placements to step-down into Supported living where appropriate. This process will be led by the relevant Commissioner and the Social Work team in accordance with The Care Act 2014 and associated legal framework.
- Providers are requested to respond to the diverse and complex needs of service users who meet the Transforming Care definition by ensuring that their workforce has the right skills and expertise to support the following LD cohorts:
 - autism and behaviour that may challenge
 - mental health support needs
 - people who display anti-social, risky or offending behaviour
 - people who misuse drugs and alcohol
 - people who display harmful sexual behaviour

Autism spectrum disorders (ASD)

Population profile

Data about the number of people with autism is available from several sources. The latest information is included in the Autism Joint Strategic Needs Assessment which was published during 2017 and is available at www.ealing.gov.uk/jsna

We know how many people with a) ASD and b) ASD plus a Learning Disability have received a service from London Borough of Ealing. For those who have serious and enduring mental health needs as well as ASD we know how many have had an assessment/treatment from an integrated mental health team. We also know how many people receive treatment for mental health needs and have both a Learning Disability and ASD. What we don't know is how many people are living with ASD but not accessing any services or treatments for their condition.

In 2018-19 we undertook the Autism Self Assessment (a national requirement) and identified a number of gaps which we needed to address. During 2019-20 we will be developing an Autism Strategy, in the meantime the key issues for providers are:

- increasing awareness and understanding of autism
- training for all those in the community who may come into contact with people with autism
- increasing delivery of reasonable adjustments to services to accommodate the needs of people with autism
- developing a wider offer of support for adults with autism to enable them to live as independently as possible.

What do we plan to change or extend?

There are areas we have identified where we need to explore solutions and focus on improvement. Work has already started on these areas, but we need to do more.

- There is a need to ensure that providers delivering support and education to children and young people with autism are adequately trained. This includes staff working in schools, SEND Coordinators and community-based services such as domiciliary care.
- Access to information and signposting for recently diagnosed children and young people is a gap highlighted by parents.
- Transition into adulthood is a stressful time for many people with autism. Support for young people with high functioning autism is limited as they approach adulthood.
- The lack of specialist post-16 education facilities for young people with autism who don't have a moderate or severe LD has been highlighted as a gap by families.
- Adults who have autism but do not have a learning disability or a mental health need are at risk of falling between services and not having their needs met, as many would not be eligible for social care support. This is a particular risk for people who are not diagnosed until adulthood and for whom there is no published care pathway. For individuals who do not meet the adult social care eligibility criteria, post diagnostic support both immediately and in the long term is limited to services provided by the voluntary sector.
- There is a shortage of affordable housing in Ealing that is suitable and safe for adults with autism and challenging needs, particularly the cohort who struggle to share space with others due to the frequency and intensity of the challenging behaviour they exhibit and the risks they present to themselves and others. This often results in vulnerable people being placed out of borough away from their families and social networks.

- We will be looking to increase specialist residential respite service for adults with learning disabilities and autism who have challenging behaviour and live at home
- There is a need to ensure that all providers delivering support to children, young people and adults with autism and challenging behaviour have the right skills and expertise to work collaboratively with local clinicians to implement services which are compliant with the recently published NICE guidelines.

Mental health (including forensic services)

Population profile

Mental health and wellbeing are part of everyone's life, impacting on physical health, opportunities, feelings, behaviour and life expectancy. Everyone struggles with their mental health and wellbeing from time to time, through life events such as bereavement, loss and unemployment. For some of us, mental ill health seriously disrupts our lives. Many of us seek help and support.

Estimates suggest that at some point in our lives, one in four of us will experience mental health difficulties severe enough to seek help. At any one time, at least one in ten of us will be living with common mental health needs – depression, anxiety, Obsessive Compulsive Disorder (OCD).

At least one in a hundred of us will experience one or more psychotic episodes, experiencing the world differently, often as terrifying and dangerous to us or our loved ones. Many people recover from these experiences, some will live with them for their whole lives and will be severely disabled by them and by the associated stigma.

For detailed data about prevalence of mental health needs in Ealing see the Mental Health Chapter of the Ealing Joint Strategic Needs Assessment (JSNA) on the Ealing Council website here: www.ealing.gov.uk/jsna

Headlines are that in Ealing:

- 51,534⁵ adults (16+) are estimated by NHSE to be living with a common mental health need;
- Only 18,866 (18+) of these were registered with their GP as having depression in 2017/18⁶ (lower than London and England);
- 4,886 people were registered with their GP as having psychoses in 2017/18⁷ (higher than England, similar to London);
- On average, there are 20 people discharged from secure forensic services and are supported in the community in Ealing each year.

Many people with mental health needs also have hazardous substance use (drugs and alcohol). Prevalence of hazardous substance use amongst psychiatric inpatients is estimated at between 22% and 44%, and during 2015-16, 30% of Ealing's new presentations for alcohol treatment and 29% of new presentations for drug treatment were receiving care from mental health services for reasons other than substance use.

Services and spending

Most mental health services in Ealing are commissioned by the Ealing NHS Clinical Commissioning Group (ECCG) and are provided by the West London NHS Trust. This includes inpatient and urgent care; Child and Adolescent Mental Health Services, integrated community teams (Recovery Teams) supporting those with the most complex needs; an Early Intervention in Psychosis service; a Primary Care Mental Health Team supporting people with a range of mental health needs under the care of their GP; and national forensic services commissioned by NHS England. The Trust also provides an Improving Access to Psychological Therapies (IAPT) service, a Vocational Support service and a Recovery College.

⁵ Source: APMS (Adult Psychiatric Morbidity Survey), 2017

⁶ Source: QOF, NHS Digital, 2019

⁷ Source: QOF, NHS Digital, 2019

This year Ealing CCG began commissioning all community health services in one single contract. The new service is called Ealing Community Partners and is provided through the West London NHS Trust along with a number of other partner organisations. This includes the Primary Care Mental Health Service. The Partners, working together, will help services to be better integrated so that people's physical and mental health needs can be addressed together.

Other services commissioned include Supported Housing (79 individual places in 19/20) which is currently commissioned through several block contracts; Supported Living and Residential Care Homes (approximately 340 places) mostly individually commissioned through our Dynamic Purchasing System (DPS); support and care at home (60 people in 2016/17). The Council with Ealing CCG supports a range of third sector organisations providing peer support, help finding and staying in work, counselling and other talking treatments, practical support with accessing housing and financial help, and challenging loneliness, stigma and social exclusion. The majority of these are grant-funded, but this year we commissioned two new services. One of these is a service for people with serious and enduring mental health needs to support them building on their strengths and abilities to both contribute to and benefit from their communities and neighbourhoods. The other is an anti-stigma and wellbeing project to help all Ealing residents better understand mental health needs and how they can address these.

Ealing CCG and Ealing Council invest over £60 million per year in adult mental health. £56 million of this is for NHS services outlined above. More than £10 million is on supported living, residential care, nursing care, community and voluntary sector services and counselling.

In Ealing, if a person has been detained under certain sections of the Mental Health Act and is assessed as having ongoing needs for care and support to remain out of hospital after discharge, they may be eligible for s117 aftercare. This is the responsibility of the NHS and the Local Authority, and in Ealing there is an agreement for funding s117 aftercare. This can include a variety of services which support a person to live safely out of hospital and to prevent them being readmitted, including support at home, supported living and residential care. These needs are regularly reviewed to make sure they are still current, and the support is appropriate.

How we want services to develop and opportunities for 2019 - 2020

The Ealing Mental Health and Wellbeing Strategy 2017 – 2022 can be found at:

https://www.ealing.gov.uk/downloads/download/4054/ealing_mental_health_and_wellbeing_strategy_for_adults

The Strategy outlines a vision for developing mental health services by shifting resources away from the most intensive services and towards more preventative and enabling services focusing on the outcomes people want to achieve and their own personal recovery. Resources are limited: we are interested in working with providers to make the best of what we have, providing good quality services for the people who need them and value for money. We want to support services which will provide what people want and need, and which will also save public money, such as:

- Services which will reduce, delay or prevent people's need for social care, and which will reduce inappropriate use of health services, including emergency departments;
- Innovative ideas to provide more opportunities for people to live well with severe and enduring mental health needs, supporting people to recover and find what they need within their communities. This should include improving people's access to financial, legal and housing support;
- Services which recognise and can work with people who have experienced trauma
- Projects focusing on helping people to improve and maintain their mental health;
- New ways to improve access to Talking Therapies, especially integrated services for people with long term physical health needs, older people and those from BAME backgrounds;

- Enabling support and care at home – more support to develop or regain skills in looking after ourselves, and less ‘doing for’;
- Services to help people with Autism and people with ADHD (Attention Deficit Hyperactivity Disorder) who do not have a diagnosed Learning Disability to live well in the community⁸;
- Supported living for people with complex and multiple needs, including involvement with the criminal justice system, hazardous substance use, physical health difficulties, focusing on recovery and achieving personal goals and ambitions;
- ‘Step down’ accommodation and floating support for people when they are able to be more independent, so that people in higher support services can be supported to move on, making higher support available to those most in need;

We are keen to work with providers who will:

- Focus on outcomes including:
 - Recognised strengths and abilities
 - Increased independence
 - Increased individual and community resilience
 - Improved chances of getting and staying in employment
 - Increased opportunities to contribute to society and communities (geographical and interest based).
- Set up partnerships and/or consortia, planning together to provide across a range of needs, working closely with the NHS, third sector, private business and the local authority.
- Develop service models which are co-produced with the people who will benefit from them.
- Develop generic mental health advocacy to ensure people’s voices are heard.

We encourage providers to take part in the Mental Health Providers’ Forum and the Registered Managers’ Network if relevant. We encourage providers to join the appropriate Dynamic Purchasing System for the services they plan to deliver.

⁸ See Autism chapter

Substance misuse

Population profile

In 2017, PHE released revised prevalence data for Ealing's estimated dependent drinking population: 3,499 residents. The latest prevalence data for opiate and crack users in 2016/17 (released in March 2019) estimates Ealing to have a population of 2,419 opiate and crack users. Ealing's prevalence figures are larger than the borough's current annual drug and alcohol treatment population (1,492 in 2017/18). With the continued budget reductions (35-40% less money since 2015/16), Ealing's treatment service will struggle to reduce the current estimated level of unmet need. The National Drug Treatment Monitoring System calculates Ealing's level and compares it to the National percentage.

Ealing's levels of unmet need compared to National levels.

Substance	Ealing Unmet Need (%)	National Unmet Need (%)
Opiates and/or crack cocaine	67.9	51.9
Opiates	62.7	46.3
Crack	70.2	61.1
Alcohol	84.3	82.9

Source: NDTMS Q3 2018/19 DOMES Report

What do we plan to change or extend?

Ealing currently commissions RISE to deliver an integrated drug and alcohol community-based treatment system. RISE is a consortium led by CGL, with clinical services provided by CNWL, peer recovery support delivered by Build on Belief, and some specialist courses offered by Intuitive Thinking Skills. CGL also hold the contract for the young people's drug and alcohol service, EASY.

From April 2020, Ealing Council's newly procured integrated adult and young people's drug and alcohol treatment service will go live. It will work in partnership with other key agencies to provide a flexible, holistic community-based service across the borough. The contract will be combined but the young people's service will be delivered separately, and both treatment services will need to be marketed separately and have different identities.

The integrated treatment service's primary aims, and objectives will be to:

- deliver evidence based, high quality treatment interventions (both pharmacological and psychosocial) placing the young person or adult at the heart of the treatment system and designing their treatment package in partnership with the service user.
- provide harm minimisation support and advice at all stages of residents' treatment journeys
- support adults and young people to improve their overall health and wellbeing and inspire them to maintain 'recovery' and abstinence from problematic drug and alcohol use.
- work within a strength-based approach
- work in partnership to prevent adults and young people from misusing substances & build capacity for prevention, identification and brief intervention across key partner agencies.
- offer specialist drug and alcohol support to reduce the damage to families affected by 'hidden harm' and adopt a think family approach within the treatment service.
- provide support within the context of the wider family and carers for young people and young adults with drug and alcohol problems, and work in partnership with the family and carers of adults in the treatment service, when service users provide their consent.

- deliver accessible services in Ealing, reducing barriers caused by geography, protected characteristics, employment status, and safeguarding issues such as domestic abuse.
- respond to new and emerging drugs in a frequently evolving and changing landscape.
- improve awareness across Ealing's communities about the positive impact of treatment and how to get help and support.

We plan to:

- Award the new treatment contract in November 2019 & support the implementation plan.
- Provide placements for service users requiring more intensive support in addition to input from RISE. Placements are likely to be shorter, with suppliers encouraged to provide positive treatment outcomes more creatively and in less time. This means tapered treatment plans, aftercare support back in the community, and more effective joined up working with the community drug and alcohol treatment service (RISE) to ensure seamless care packages.

Support for carers (including young carers)

Population profile

Ealing has an estimated 35,000 adult carers. The highest concentration of carers is in Southall, Greenford and Northolt. Based on national research it is estimated that there may be more than 4,000 young carers aged under 18 in Ealing.

The borough is ethnically diverse and there is a need to consider what support is needed to support carers from black and ethnic minority communities. Ealing want to focus on ‘hidden carers’ who are not accessing services e.g. male carers, young carers, Black and Asian ethnic minority carers; and want the market to develop new and innovative ways in which to engage these groups. The Census 2011 shows that 8.5% of Ealing residents provide unpaid care to a friend, relative or neighbour.

Provision of unpaid care by age group in Ealing, 2011 Census

	Unpaid Care: Total	1 to 19 hours unpaid care a week	20 to 49 hours unpaid care a week	50+ hours unpaid care a week
All ages	8.6%	5.3%	1.5%	1.8%
Age 0 to 24	3.0%	2.2%	0.5%	0.3%
Age 25 to 49	9.0%	5.5%	1.7%	1.8%
Age 50 to 64	16.6%	10.5%	2.7%	3.4%
Age 65 +	12.6%	6.3%	1.9%	4.3%

Source: ONS 2011 Census

Detailed information about the population needs of Ealing can be found online at:

https://www.ealing.gov.uk/info/201048/ealing_facts_and_figures

Number of people aged 65 and over providing unpaid care by hours of care provided in Ealing and England & Wales, projected to 2030 hours

		Years					
Ealing	Hours unpaid care provided	2015	2020	2025	2030	Change 2015-2030	
	1-19 hours	2,538	2,833	3,156	3,593	42%	
	20-49 hours	754	847	949	1,073	42%	
	50+ hours	1,740	1,948	2,184	2,493	43%	
	Total	5,031	5,627	6,289	7,161	42%	
England & Wales	Hours unpaid care provided	2015	2020	2025	2030	Change 2015-2030	
	1-19 hours	678,891	721,989	784,462	874,213	29%	
	20-49 hours	175,185	189,912	208,467	232,519	33%	
	50+ hours	530,420	585,651	649,617	725,746	37%	
	Total	1,384,497	1,497,552	1,642,547	1,832,479	32%	

Source: Ealing JSNA 2016

Current demand and supply profile

Analysis of the 46 direct payments made to carers in 2016/17 shows that services agreed to meet their assessed needs shows the majority used for sitting service. The carers one off payments issued in 16/17 the largest area of expenditure was on contributing to the costs of Short Breaks/day trips.

Carers have told us how much they value flexible respite opportunities, day time activities that can provide respite, the importance of reliable transport services to day opportunities and hospital services, the need for help and support in managing the household tasks, accessible information and advice, opportunities to increase IT literacy, leisure, training and employment opportunities, and greater employer awareness of the issues facing carers. Carers identified the following service gaps: flexible sitting services; access to breaks; replacement services for general domestic tasks e.g. laundry, cooking and gardening; complementary therapies and low-level counselling services; specialist support for carers of people with mental health, dementia, substance misuse and complex health needs e.g. cancer, circulatory diseases, strokes.

Ealing recognises that we need to find a different way to provide the greatest level of support i.e. through community-based services rather than relying on social care resources. The Council and the CCG want providers of adult care and support services to be alert to the possibility of young carers being part of a household and to support them by referring them onto Children's Services for an assessment where needed or if there are safeguarding concerns.

What do we plan to change or extend?

We plan to:

- Implement a new Carers' Strategy and action plan
- Implement the new grant funded Carers Short Breaks service
- Renew funding for the young carers support service delivered by Brentford Football Club

Housing related support

Current demand and supply profile

The Council currently spends in the region of £5m on housing related support across Adults, Children's and Community Safety services.

What do we plan to change or extend?

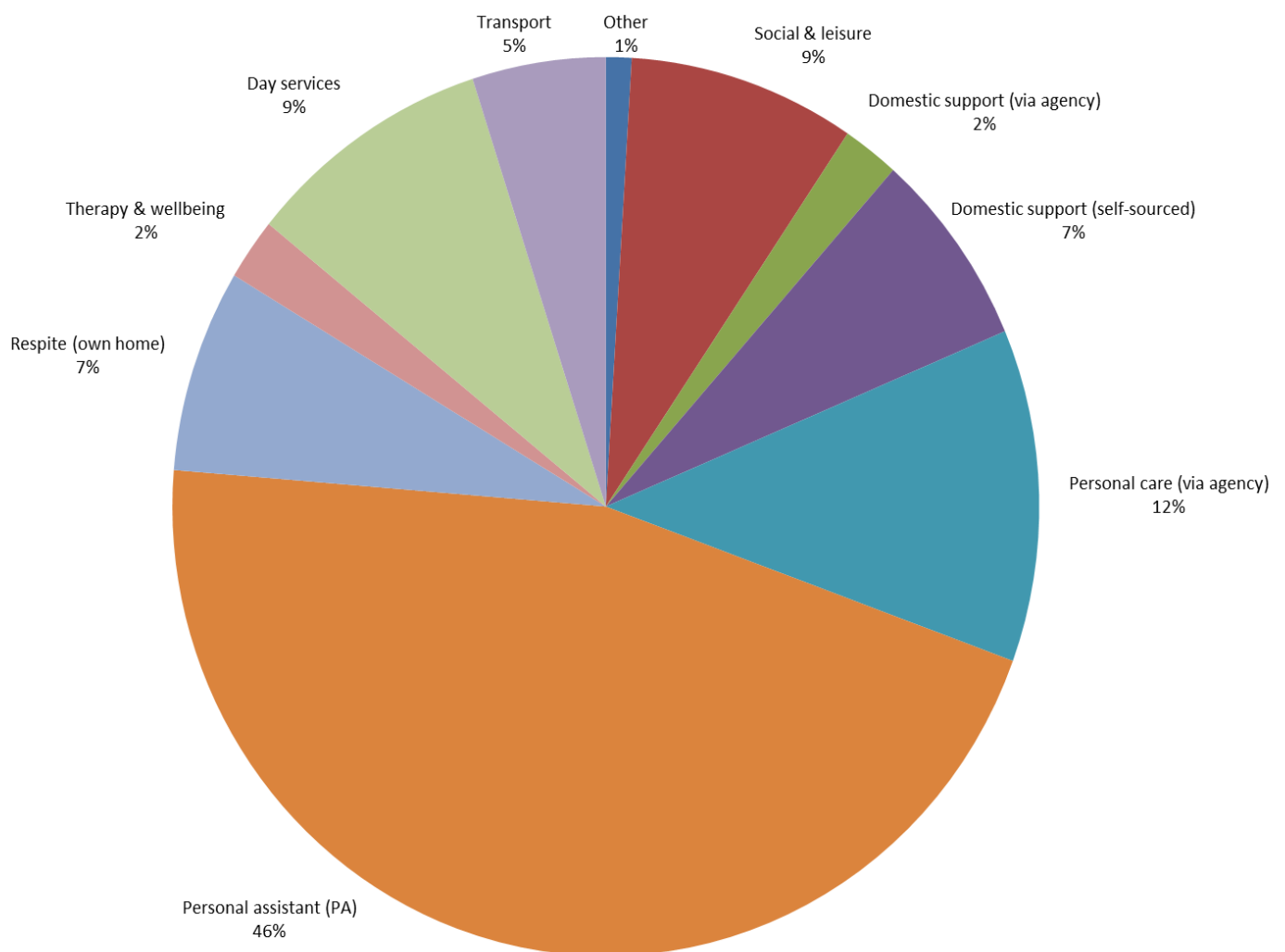
- During 2019-20 we will review all housing related support (alongside other services) with a view to increasing low level floating support to better facilitate discharge from hospital and improve the flow from higher to lower levels of supported accommodation
- We will engage with support providers to discuss how they can actively apply "strength-based practice" within their services.
- Where support providers offer multiple service offers, then the Council will aim to monitor these together rather than individually by different teams.

Direct payments

Direct payments are offered as an alternative to commissioned services to both children and adult social care service users who are eligible to receive them. Ealing Council supported over 600 service users via a direct payment in 2018-19, spending over £10m (net).

Profile of direct payment users	Number
Children	125
Adults	481
Total	606

The direct payments 'services purchased' profile for 2018-19 was as follows:



Carers one-off payments scheme

In addition to offering long-term direct payments, the Council also supported 170 carers in 2018-19 via its one-off direct payments scheme. The scheme provides a one-off £150 cash contribution towards supporting carers with their caring role and / or to take a break.

What do we plan to change or extend?

- Further support access to the Personal Assistant (PA) market for direct payment users to ensure they have access to a reliable and skilled workforce.
- To support the development of new flexible home-based services to support carers using direct payments to purchase their own home-based support.

Voluntary & community sector grants 2019-23

During 2018-19 the Council and the CCG consulted on and then received applications for a new 4 year-round of grant funding against a new set of specifications. The total amount was reduced by 28% and voluntary sector organisations were encouraged to work together in consortia to deliver a smaller number of services. The new arrangements moved away from age or care group specific allocations to services relating to neighbourhoods, intergenerational work, supporting health and wellbeing across the borough.

The grant funded services (and lead agencies) for 2019-23 are:

- Community Connections and Self Care (Central Ealing, Acton, Greenford, Northolt and Perivale – Neighbourly Care)
- Community Connections and Self Care (Southall) – Southall Community Alliance
- Information, Advice and Customer representation – Ealing Mencap
- Mental Health Talking Therapies – common needs – Ealing Abbey Counselling Consortium
- Mental Health Talking Therapies – serious and long-term needs – CAPE
- Mental Health in the community – all residents – EACH Counselling and support
- Adults short breaks service – Consortium led by Dementia Concern
- Children’s short breaks – Mencap
- Children’s short breaks – Log Cabin
- Young Carers support – Brentford FC Community support trust
- Children’s Domestic Violence therapy – Victim Support
- Domestic Violence support service – Advance
- Domestic Violence support service – Southall Black Sisters
- VCS Development and capacity building – Ealing Community and Voluntary service
- Support for volunteering and social action – Ealing Community and Voluntary service

What do we plan to change or extend?

The grants have been allocated for four years from April 2019, subject to continuing funding availability and delivery against specifications. We do not, therefore, anticipate changing the range of services funded in this way. We are keen to see service providers working in collaboration with these consortia, recognising the strong local knowledge and experience within them.

We have encouraged the same, strength-based, approach to our voluntary sector partners as we are promoting to contracted providers; the training offer is also available to these organisations.