ADULT CARE HOUSING PUBLIC HEALTH



ROTHERHAM'S MARKET POSITION STATEMENT 2025-26

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Contents

	Foreword		3	Public Health Commissioning	38
1	Introduction	4			
1.1	What is a Market Position Statement?	5	4	Procurement, Commissioning and	40
1.2	Rotherham Context	5		Contract Compliance	
1.3	Our Resources and Finance	7	4.1	Social Value	40
2	Adult Care Market and Demand	9	4.2	How to Keep Up to Date with the Council's Procurement Opportunities	41
2.1	Older People	9	4.3	Contract Compliance and Service Quality	42
2.2	Physical Disabilities	14	4.4	Building Relationships	42
2.3	Learning Disabilities, Autism and Preparation for Adulthood	16	4.5	Meet the Commissioners	44
2.4	Mental III Health	23			
2.5	Housing Related Support	29			
2.6	Unpaid Carers	33			
2.7	Voluntary and Community Sector Services	36			

Foreword

The Market Position Statement for 2025-26 details information about commissioned services across Adult Care, Housing and Public Health, with a predominant focus on Adult Social Care in Rotherham. It presents the opportunities available for current and new providers and services.

As a Council, we are committed to ensuring that we are creating a Rotherham where everyone can live independently, safely, and healthily in their community for as long as possible.

The Market Position Statement supports this ambition by providing an overview of the opportunities available in Rotherham. It presents the Council's future strategic priorities and upcoming procurement opportunities that may be of interest.

The Market Position Statement also aims to provide the background information and context to support any future business proposals. It outlines the details of the number of people we support through our many commissioned services, the predicted future demand and our overall commissioning intentions.

Please utilise the information shared and navigate the specific sections that are relevant to you in this document or alternatively use the live webpage. Please note the webpage is more dynamic and is regularly refreshed and therefore the content may differ between the webpage and this document.

Together, we as the Council, along with our partners in the health and care system can, with you, create an offer in Rotherham that promotes high-quality, person-centred care and support for all of our customers.

The Council welcomes suggestions of innovative ways of working and new partnerships.

Thank you for taking the time to visit the Market Position Statement and we look forward to working with you to continue to improve the quality of life for the residents of Rotherham.



Ian Spicer Strategic Director of Adult Care, Housing and Public Health February 2025



Councillor Joanna Baker-Rogers Cabinet Member for Adult Social Care and Health February 2025

1 Introduction

Rotherham Council is pleased to present the Rotherham Market Position Statement (MPS) which has been produced to:

- Provide an overview of the demographic profile,
- Define our current market and, the current and projected demand,
- Describe our strategic priorities and,
- Indicate to the market our commissioning intentions to generate active market engagement.

The Council is committed to developing a care and support market with services which are safe, of high quality, achieve positive outcomes for our customers and offer value for money. The overall objective of the MPS is to support the achievement of our ambitions set out in The Council Plan, The Year Ahead Delivery Plan and The Health and Wellbeing Strategy.

The Council's Themes

The Council Plan describes the role of Adult Social Care, Housing and Public Health state is:

"....creating a Rotherham where everyone can live independently, safely and healthily in their community for as long as possible."

Rotherham's Health and Social Care Community has been working in a collaborative way for many years to transform the way it cares for and achieves a positive change for its population. Our shared vision is:

'Supporting people and families to live independently in the community, with prevention and self-management at the heart of our delivery'.

ONE COUNCIL THAT LISTENS AND LEARNS

ONE COUNCIL SAFE AND INDEPENDENT LIVES

ONE COUNCIL

PLACES ARE THRIVING, SAFE, AND CLEAN

AN ECONOMY THAT WORKS FOR EVERYONE

The MPS acknowledges the emerging formation of the South Yorkshire Integrated Care System (ICS) that went live in July 2022. The current version of the MPS incorporates joint commissioning with health colleagues across the Rotherham Place System, primarily South Yorkshire Integrated Board (Rotherham Place) and future revisions will include further details around the ICS.

1.1 What is a Market Position Statement?

A key document which summaries supply and demand in a local authority area or sub-region, identifies future strategic priorities and signals business opportunities within the care market in that area. The document will be updated regularly.

IPC (2016). Market Shaping Review, Market Position. Statement Guidance.

1.2 Rotherham Context

Geography

- Rotherham Borough covers 286 square kilometres (110 square miles).
- Rotherham is one of four metropolitan boroughs in South Yorkshire.
- 70% of Rotherham is open countryside.



Housing 1,2

- There are over 113,000 households in Rotherham. 64% own their own home, 21% rent from the Council or a housing association and 15% rent from a private landlord (2021 Census). 3% are usually empty properties.
- The average house price in Rotherham is around £182,000, 5.5 times the average annual salary of someone working in Rotherham.
- The average cost to rent a private three bed property is £184 per week, a 46 % increase over the last five years.
- Over the last 3 years, developers have built just under 2,500 new homes in Rotherham.
- The number of households in social housing has decreased slightly between 2011 and 2021. The demand for social housing is increasing.
- The number of people on the housing register was 7,162 at February 2024.
- In 2022, 16.6% of households in Rotherham were living in fuel poverty, higher than the national 3.1%.
- Rotherham has around 20,000 Council homes including shared ownership homes, almost half of these are houses.

¹ Housing — Rotherham Data Hub 时 ² Rotherham's New Housing Strategy — Rotherham Metropolitan Borough Council 📑 ³ Population — Rotherham Data Hub

⁴ Rotherham's Integrated and Social Care Place Plan 2023 – 2025 ⁵ Public Health Outcomes Framework - at a glance summary (phe.org.uk)

Population information ³

- The population of Rotherham Borough is 265,807 (2021 census), an increase of 3.3% from the 2011 census. Population density also increased; Rotherham is the seventh most densely populated of Yorkshire and The Humber's 21 local authority areas.
- In Rotherham, the largest proportion of people in 2021 were within the 50 to 54 years age group (7.3%) followed by those aged 55 to 59 years (7%). The largest increase between 2011 and 2021 was in those aged 30 to 34 years (1.2%) with 5.57% of people in this age group in 2011 and 6.77% in 2021.
- Rotherham displayed a similar age structure to England in 2021, with the biggest difference in age groups being in the 2-24 years category (Rotherham had 0.74% fewer people in this age group). Rotherham displayed a similar proportion of male and female people within each age group in 2021, except for those within the 75-79 years age group where there was a 0.77% higher percentage of female people compared to male.
- In 2021, 88.26% of people identified their ethnic group as White: English, Welsh, Scottish, Northern Irish or British. 5.33% identified as Asian, Asian British or Asian Welsh, within this 3.76% identified their ethnic group as Pakistani making this the next largest ethnicity group.
- In 2021, 95.86% of Rotherham people aged 3 years and over had English as a main language. The most common main languages, other than English, were those belonging to the group 'other European language'. The most common languages within this group were Polish and Slovak.

Disability and health

- The health of people in Rotherham is generally poorer than the England average. People living in our most deprived areas have both shorter lives and are living those years in poorer health. 35% of Rotherham's neighbourhoods live in the 20% most deprived in England, and 22% live in the 10% most deprived. Both life expectancy and healthy life expectancy are lower than the national average for both men and women.
- Healthy life expectancy for men is 58.7 years and for women is 56.5 years, which is lower than the England average of 63.1 for men and 63.9 for women (2018-20 data).
- The percentage of people who identified as being disabled: day to day activities limited a lot, in Rotherham decreased by 2.10% (12%, 29,080 in 2011 and 9.9%, 26,115 in 2021). The percentage of people in Rotherham who were not disabled increased from 76.8% (200,680 in 2011) to 78.7% (209,625 in 2021).
- In Rotherham, between the years 2023-2030 the numbers of people predicted to have a moderate to severe visual impairment will increase by 11 % from 6,808 to 7,563.
- The numbers of people in Rotherham predicted to have a severe hearing impairment will rise by 16% from 5,275 to 6,155 and the numbers of people in Rotherham predicted to have some hearing loss will rise by just over 8% from 50,001 to 54,120.
- NHS digital indicates that Rotherham have a 91% dementia diagnosis rate based on NHS digital prevalence modelling data (3,270).

1.3 Our Resources and Finance

Adult Social Care is experiencing significant pressures that are out of the Council's control due to a rise in the complexity of adults' needs and an ageing population. The adult care market remains challenged due to rising demand pressures and staff shortages. This pressure has been exacerbated by inflation and the rise in the Real Living Wage meaning the available funding needs to increase to ensure market sustainability. These cost pressures increase the average cost per hour to meet adults' eligible needs. This is reflected across all service areas. Extensive work is underway to minimise the impact of these rising costs by ensuring services are running as efficiently as possible.

The delivery of effective social care services remains a key priority for the Council. The demand for services is growing, and the Council must deliver these within a sustainable cost envelope, whilst at the same time recognising the market pressures impacting on the viability of provider services.

The social care resources provided within the Finance Settlement for 2025/26 are welcomed, but this level of additional funding still falls short of the national social care funding gaps as calculated by the Local Government Association.

Key Financial Facts:

The Adult Social Care net revenue budget for 2024/25 was £115,944,665. This included an additional £7m in the budget for Adult Social Care services in 2024/25 in recognition of the escalating demand and market costs to adult care.

The total gross spend in 2024/25 for Adult Care and Public Health is approximately £195m. This was partly funded through contributions from adults using services, the Better Care Fund and Government grants.

Budget All Commissioned Services:

2024/25 Gross Budget for Commissioned Services

	202	(£)			
Cohort	Direct Payments	Home Care	Residential	Day Care	Supported Living
Older People	€3,850,197	£15,511,619	€25,285,809		
Physical Disability (18-64)	€7,172,220	£3,434,694	€3,469,240		£429,666
Learning Disability	£ 7,298,933	£432,217	£14,673,513	£2,781,254	£18,338,862
Mental Health	£1,271,360	£316,001	€5,767,808		£752,529
Total	£110,785,922				

Residential and Nursing Care Homes Older Adults

Fees and Gross Budget Residential and Nursing Care Homes Older Adults 2024/25 (*Excluding Funded Nursing Care element)

	Residential	Residential EMI	Nursing	Nursing EMI
Fees 2024/2025	£653	£681	£715*	£793*
Gross Budget Commissioned Services 2024/2025	£9,626,255	£9,638,253	£3,253,947	£2,767,354

Home Care and Support Services:

For 2024/25 the average hourly rate paid off the Framework is £24.32.

Specialist Provision:

Currently specialist provision including learning disabilities and mental ill-health provision, are either agreed at a fixed rates or reflecting the bespoke provision to meet individual needs.

Direct Payments:

Direct Payments are currently predominately used to purchase home care and support services, day opportunities and community support from agencies. A smaller number of adults use their personal budget as a Direct Payment to employ a personal assistant. The Council encourages the use of direct payments in this way.

The Council operates a recognised provider list to provide support services with Direct Payments (payroll/recruitment) which is currently over-subscribed.

Resource Commissioning Intentions 2025/26:

- The Council will successfully manage the demand, market and provider pressures in Adult Social Care within the budget allocated, ensuring appropriate care and support is in place in accordance with the service development programme and Care Act 2014.
- The Council has adopted the IESE Care cubed tool to support negotiation of individual placement costs to achieve consistency of pricing across the market for more complex packages.
- Standard fees for Commissioned services and Direct Payments will receive a 5.5% increase in 2025/26 (approved by Full Council in March 2025).
- In recognition of escalating cost pressures within Adult Social Care, relating to increased complexity of care and rising demand for the service, market inflation and transitions, the agreed revenue budget for the Adult Care, Housing and Public Health directorate in 2025/26 is £135m net.
- Adult Social Care savings of £4m are part of the Council's Medium-Term Financial Strategy.

2 Adult Care Market and Demand

2.1 Older People

Demographic

The population aged 65 and over in Rotherham is estimated at 57,100 in 2025, this is predicted to increase by 8% to 61,800 by 2030 and by 16% to 61,800 by 2035. The age groups over 80 are showing the greatest percentage rates of increase (POPPI).

The number of adults aged 65+ living alone is predicted to reach 20,051 by 2030 and 21,540 by 2035 (i.e. approx. 30% of all adults over 65).



By 2030, it is estimated that there will be 9,527 older unpaid carers (aged 65+) in Rotherham.

Support needs

There are approximately 2,082 older adults receiving service in Rotherham (Oct 2024 data).

In 2025 it is estimated that the number of adults aged 65 and over who need help with at least one self-care activity, is 16,354. This number is expected to increase by 9% to 17,867 by 2030, and by 17% to 19,159 by the year 2035 (POPPI).

As of 2025, 4,020 adults aged 65 and over are predicted to have some level of dementia. By 2030, the prevalence is expected to increase to a predicted 4,493, and by 2035 this rises again to 4,928. The prevalence increases with age, and diagnosis rates are higher in women (POPPI).

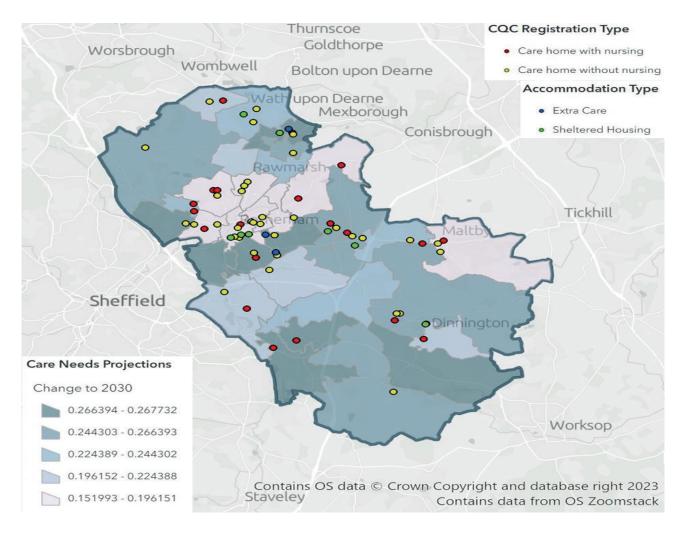
According to ONS data the number of older adults who have a primary need of memory / cognition and who may be diagnosed with dementia is expected to increase by 23 % over the next 10 years. Rotherham has a higher diagnosis rate of dementia than the national rate of 63 % (Source: NHS Digital).

Key Messages for the Market

- In addition to promoting the delivery of quality support, the Council requires providers to be creative and innovative in the way existing and newly commissioned services deliver that support.
- The Council will continue to promote strength-based approaches and expand the utilisation of
 assistive technologies to support individual independence and offer the least restrictive option.
 The presence of assistive technologies will feature across provision from housing related support
 through to residential care homes.
- Providers will be required to support progress towards an assets-based approach and, understand the local communities in which they operate, building relationships with key stakeholders, such as the community nursing teams, neighbourhood officers and social work teams.

- Partnership working between universal services and commissioned providers will be encouraged to improve individual outcomes, as part of a strengths-based approach.
- Best practice within Adult Care, Housing and Public Health emphasises the maximisation of independence at all levels of acuity and achieving improved outcomes and value for money.
- Data shows that Rotherham has an established existing provider market for older adults with 1,631 independent sector residential and nursing beds in borough and around 13% vacant bed capacity (2024/25) indicating a slight over-supply. However, demand projections indicate that Rotherham will need an increased supply of nursing care homes going forward, because of the ageing population and improved community support meaning individuals enter care at a higher level of acuity. The Council invested increased resources in 2024/25 to support the nursing care home market.
- The jointly funded (SYICB/RMBC) Integrated Community Equipment and Wheelchair Service will be recommissioned prior to the current contract end date of 1st February 2026. SYICB and the Council are currently in discussion regarding the details of the new service.
- The Council needs to develop a range of accommodation and support options to provide for the range of adult needs and offer choice in how that provision is delivered. This may include the increase of Extra Care Housing, Supported Living and Shared Lives as well as potential new models of support such as care suites.
- The Council is an outlier in terms of its use of home care with significantly more usage than its
 comparator authorities. In 2025, Commissioners will undertake a review of the first five years
 operation of the Home Care and Support Flexible Purchasing System. This may result in a
 competitive exercise being undertaken to secure domiciliary care under a revised model to be
 implemented in 2026.
- The Borough that Cares Strategic Framework which prioritises Unpaid Carers in Rotherham is in its final year in 2025. A review of the framework is currently being undertaken to assess the progress achieved and to inform the next steps. The requirements of support for Unpaid Carers will lead to additional commissioning activity to secure any additional resources developed.

	Older People Accommodation Based Services					
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions			
Residential Care Home	The majority of care home provision is independently owned focusing on long term provision. The age of entry to care homes is increasing with an average of 84 years and length of stay at an average of 30 months. A few older	1,631 beds across 33 care homes (residential, nursing and EMI) plus 2 Council run care homes (120 beds).	To continue to support older adults with the most complex needs in care homes. To support all care homes to meet PAMMs and CQC standards to ensure Good or above ratings.			
Residential/ EMI Care Home	people focused homes also accept adults under the age of 65. Short-term placements are also available across the independent sector.	Care home vacancies in 2024/25 are approximately 13%. Over-supply of	A reprovision of residential beds to nursing and nursing EMI beds should be considered for some providers in dialogue with the Council. Support the emerging priorities from			
Nursing Care Home	There has been a significant shift in the types of ownership in Rotherham over the last five years with large national providers exiting from the market i.e., from a position of 50% market share to 20% market share. 68% of the market has a regional care home base.	residential and EMI residential beds. Under-supply of nursing and nursing EMI beds.	the Framework for Enhanced Health in Care Homes including: - Personalised care - Joining up primary and community health with social care High quality end of life care and support.			
Nursing/EMI Care Home	6% of provision (2 homes) is Council owned. This provides a total of 120 beds of which 30 are intermediate care (rehabilitation/ reablement) and 15 are service flow beds to support hospital discharge and admission avoidance.		- Implementation of technology enabled care (TEC). To provide a joint service health and social care home specification for Rotherham.			
Intermediate Care	The Intermediate Care Service is an integrated service which includes provision in a person's own home and within short stay intermediate care beds. The service is working with nurses, social care, GPs, occupational therapy, physiotherapists and enablement teams to promote recovery from illness, prevent acute hospital admissions and premature admission to long term residential care, support timely discharge from hospital and maximise independent living.	30 beds (in house residential care) plus service in own home (which is the Integrated Rapid Response and Enablement service). (24 intermediate care beds with nursing are commissioned by the ICB and subcontracted by The Rotherham NHS Foundation Trust to an independent sector provider).	The Council work in partnership with The Rotherham NHS Foundation Trust who provide therapy services for intermediate care. The capacity and demand exercise is currently being refreshed with the findings feeding into a community services review which is currently being scoped.			
Extra Care Housing (ECH	Extra Care Housing combines independent community living in a safe secure environment with access to housing related support and personal care if/when required. In Rotherham ECH is based across three sites: Potteries Court, Swinton (35 units), Oaktrees (Stag) (20 units), and Bakersfield Court, Herringthorpe (53 units). Age eligibility is 55+. There is a dedicated team of housing support staff who work across the Extra Care Housing sites and care is delivered by contracted home care providers.	108 units. Under-supply.	The Council is keen to expand supported housing options for older adults including Extra Care. The Council would therefore welcome a dialogue with registered housing providers (RPs) regarding any potential opportunities for new housing and care provision. A review of existing provision will be undertaken to identify best practice and the most effective models of care and support.			



Estimated percentage change in care demand by MSOA 2030 and the current accommodation provision across Rotherham (Source: ONS mid-year population forecasts 2019)

	Older People Community Care Services					
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions			
Home Care and Support	The Council and South Yorkshire ICB (Rotherham Place) operate a joint Flexible Purchasing System (FPS) arrangement. The FPS operates using a tiered approach. Tier 1 providers (9) are required to undertake at least 75% of the work in their geographic priority area. Tier 2 providers are utilised in the event of capacity shortfall in Tier 1. At Quarter 3 2024/24: - Nine Tier 1 providers deliver approximately 55% of the hours commissioned in Rotherham's 3 geographic areas (3 north, 3 south, 3 central). - Tier 2 providers deliver approximately 42% of the hours commissioned across the Rotherham Borough. - Specialist providers, support unpaid carers, people living with mental-ill-health, or a learning disability who require personal care and deliver approximately 3% of the hours commissioned across the Rotherham Borough.	Approx. 19,600 hours per week (1,400 adults of which 79% are people 65+). Increasing demand.	To continue to support people to live independently in the community using a strength based model of provision. An increased enablement offer will reduce the need for continuous home care and maximise independence and support demand management. To support people to remain at home wherever possible for those who are e.g. living with dementia, or who are at 'end of life'. To undertake a review of the current model of delivery. To support viability within the home care market through the commissioning approach, e.g. exploring co-operatives and implementing the market sustainability plan			
Home Enablement Service	Enablement is a Council inhouse service focused on short term care (for a period of up to 6 weeks) following a hospital admission. The focus is on reablement and supporting people to continue to live independently at home.	Approximately 65. Increase capacity/ efficiency.	To continue to increase capacity within the service to meet the needs of people returning home from hospital. To reduce use of short-term residential care and the need/size of ongoing packages of care.			
Shared Lives	Shared Lives is a CQC registered inhouse service where adults with a learning disability and/or autism (predominantly) spend time with approved shared lives carers and their families. There are a variety of placements and a mixture of support including: - Short breaks - Respite - Long term placements - Day opportunities.	Older Adults including those living with dementia are underrepresented in this service type. Increase.	The Council welcomes discussions for individuals to register as shared lives carers and for shared lives carers to have closer links to peer support networks. The Shared Lives, Accelerating Reform Fund will support a programme of work which will seek to deliver a step change in the support and scope of Shared Lives across South Yorkshire. The aims are to: - Share common challenges to growing Shared Lives. - Develop a new digital platform to increase efficiency in recruitment, pay, and matching. - Develop opportunities to expand the offer to include adults who are living with dementia.			

	Additional Community Support Services including for Older people					
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions			
Integrated Community Equipment and Wheelchair Service	The jointly funded (NHS/Council) Integrated Community Equipment and Wheelchair Service provides a wide range of equipment, aids and wheelchairs to children, young people and adults with physical and sensory disabilities, and to older people, so that they can continue to remain in their own homes. The Service operates 7 days a week.		To support people living safely at home. To support discharge processes to ensure timely discharge from hospital. The contract ends on 1st February 2026. The South Yorkshire Integrated Care Board (SYICB) are currently the lead commissioner for this jointly commissioned service. SYICB and the Council are in discussions regarding the future service.			
Assistive Technology	The Council's assistive technology offer is intrinsic to a strength-based approach in supporting people towards independent living. People therefore do not require a Care Act Assessment to determine eligibility. A new technology enabled care delivery model under a collaborative approach between Rothercare (the Council's community alarm service) and an independent sector technology partner will begin in April 2025. Rothercare will continue to deliver the referral, triage, monitoring and mobile response service whilst the assistive technology elements (identification of assistive technology solutions, installation, recycling, disposal and maintenance and procurement of assistive technology equipment) are delivered by a technology partner from the independent sector.	At present circa 5,600 households have the need for support, with 8,777 active sensors. Increase.	An expansion of the current assistive technology offer (amount and type) to ensure assistive technology is widely utilised to promote strength-based approaches and independence. Reduce dependence on formal care by reducing home care packages and avoid premature admission to care homes.			

2.2 Physical Disabilities

Demographics

UK disability statistics: Prevalence and life experiences (2024) indicate nationally, an estimated 16.1 million people in the UK had a disability in 2022/23. This represents 24% of the total population. The prevalence of disability rises with age: around 11% of children were disabled, compared with 23% of working age adults and 45% of adults over State Pension age. Mobility is the most frequently reported impairment type (48%), followed by stamina, breathing or fatigue (36%), and mental health (34%).

Rotherham has a high rate per 100,000 population of 18-64 physical disability customers at 274.5. For the Yorkshire and Humber Region as a whole this figure is 217.7. Neighbouring authorities of Barnsley (145.0), Doncaster (226.3) and Sheffield (204.5) have significantly lower rates (ref: SALT Return 15/16).

Compared with 2022/23, the actual number of younger adults with long term support in Rotherham increased by 5.0% to 1,690 from its previous level of 1,610. For context, the ONS population estimates for younger adults in Rotherham increased by 0.8% over the same period.

Support needs

There are currently 431 people (age 18-64) accessing services in Rotherham with a primary need of physical disability.

Some adults with life-long limiting conditions are also funded through NHS Continuing Healthcare.

There is a small cohort of adults living in residential care. In some instances, this may not always be the most appropriate option.

Key Messages for the Market

- The Council welcomes discussions with potential providers about what community services they can offer for younger people with physical disabilities so they can remain in the community as independently as possible, maximising life chances.
- The Council also encourages developments of new properties to be designed flexibility to more easily accommodate adaptations to support independent living for people with physical disabilities. Wide doors, turning circles for powered wheelchairs and heavy load bearing ceilings/floors would allow for specialist equipment to be used in the future.
- The Council is particularly interested in specialist equipment and digital/assistive technology solutions to keep people as independent as possible.

Service Provision

There is a limited bespoke commissioned offer for working aged adults with a physical disability. Historically the offer has centred on direct payments, adapted housing using the Disabled Facilities Grant (DFG) and home care and support to keep people within their own home. Some adults with life-long limiting conditions are also funded through NHS Continuing Healthcare. There is a small cohort of adults living in residential care. In some instances, this may not always be the most appropriate option.

All provision available for those with a primary category of physical disability is identified elsewhere in the document.

- Home Care commissioned through the Home Care and Support Flexible Purchasing System.
- Extra Care, Supported Housing, Shared Lives and Supported Living options are also available, and potentially need expanding to meet a younger population needs.
- Residential and nursing care are available for complex needs.
- Direct payments using a personal budget for buying services or personal assistant are an attractive option for this client group.

2.3 Learning Disabilities, Autism and Preparation for Adulthood

Demographics

In 2025, the number of adults with a learning disability is 5,014 (as per table below). The number of all age adults with a learning disability is predicted to reach 5,147 by 2030, an increase of 133 people and represented 2.34% of Rotherham's predicted adult population of 219,800 (18 to 64 population was 158,000. 65+ population 61,800). Based on PANSI and POPPI data.

Total population aged 18+ predicted to have a learning disability (all age)	2025	2030	2035
Baseline	5014	5147	5276
Moderate or severe learning disability	1031	1029	1078
Severe learning disability (65 plus data not available)	230	235	237
Living with a parent (65 plus data not available)	314	324	331
Have Down's syndrome	100	101	101
Display challenging behaviour	71	71	71

In 2025, the number of Rotherham adults, aged 18 to 64, with **Autism Spectrum Disorders (ASD)** was 1,551 representing 0.74% of Rotherham's 18 to 64 population (156,800). The number of Rotherham adults aged 18 to 64 with Autism is predicted to rise in line with the predicted total population.

Year	2025	2030	2035
Total population aged 18-64 predicted to have autistic spectrum disorders	1551	1554	1561
Total population aged 65 and over predicted to have autistic spectrum disorders	540	589	630
Total	2091	2143	2191

The population of people predicted to have **Autism Spectrum Disorders (ASD)** in Rotherham in 2025, is 540 people aged 65 and over. The overall number of people aged 65 and over with autism will increase. This is expected to be driven by an increase in the number of older autistic people receiving a diagnosis as the number of younger autistic people remains static.

Support needs

There are approximately 753 people with a primary need of a learning disability receiving a service (June 2023). Based on ONS predictions, this number will remain relatively static over the next 10 years, however the demographic of people receiving support will change. There will be a greater increase in young people with a learning disability (aged 15-24) (see graph below), middle aged people (aged 35-49), people aged 60-69 and older adults 80+. Particular focus is required on adults who are living at home with elderly parents, to ensure succession planning.

As of February 2025, there were 3,662 people being supported by an Education Health Care Plan (EHCP) aged 14-25, 294 of these young people received support provided by the Adult Social Care Transitions Team. This number has risen significantly over the last 5 years as more young people are in receipt of an EHCP.

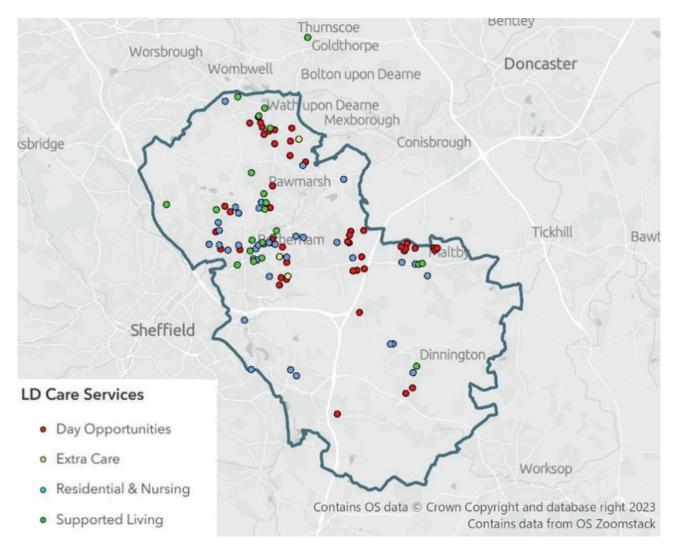
Key Messages for the Market

- Both the learning disability and autism offer has begun to transform following the creation and the release of the All Age Autism Strategy and the Learning Disability Strategy. Both were coproduced with Rotherham people. The aim is for all autistic people and people with a learning disability to live a full and rich life, and access services that promote independence.
- Locally the Learning Disability Strategy builds on the principles of Building the Right Support and focuses on quality provision that supports people on their individual progression pathway towards greater independence. It covers 6 main priorities:
 - Provide accessible information and advice to support making informed choices.
 - Strengthen the voice of the person.
 - Support young people with care and support needs to prepare for adulthood (in line with the Adult Social Care strategy.
 - Provide needs led support.
 - Provide more opportunities for care and support closer to home.
 - · Provide more meaningful opportunities.
- The Council's All Age Autism Strategy (2024-27), based on national guidance, builds on the previous 2020-24 strategy and focuses on 4 main areas in a coproduction approach:
 - Support young people with care and support needs to prepare for adulthood.
 - Tackling health and care inequalities for autistic people and provide more opportunities for care and support closer to home.
 - Provide accessible information and advice to support making informed choices
 - Provide needs led support.

- The Council is adopting the Asset Based Community Development (ABCD) approach to
 commissioning. Both strategies give a clear steer that people with a learning disability and autistic
 people want services which are connected to their communities and are strength-based. The
 Council is keen to work with providers with a similar outlook. The Council's Flexible Purchasing
 Systems for Supported Living and Community Support Options embeds this in practice.
- All providers who wish to develop supported living in Rotherham must:
 - a) Apply and join the Council's Flexible Purchasing System for supported living.
 - b) Ensure that they have an RSL who is compliant with the social housing regulator.
- Key drivers in the development of services for people with learning disabilities and autism
 nationally are identified in the national plan Building the Right Support (2015) and Building the
 Right Home (2016). Following on from the Winterbourne View scandal, BRS advocated that people
 should be supported in 'homes not hospital' and secondly that in the community people should
 be supported in the least restrictive setting and by the least restrictive model of support. The
 ethos of BRS (2015) around reducing numbers in hospital settings has embedded a very person
 centred, outcome focused, progression approach within both the Learning Disability and Autism
 commissioning that is evident in the two strategies. The Council wishes to build on this further and
 develop services that meet the changing expectations of individual adults and their families.
- The Council wishes to work with developers and support providers to develop appropriate community accommodation to support people in the least restrictive settings. Assistive technology has many possible applications within this field and we are keen to develop these.
- Local demand has identified that, on average, the Borough will require 12 new supported living
 units each year over the next 10 years (source: South Yorkshire Housing Market Positioning
 Statement 2022). In addition, the Council commissions a range of accommodation and support
 options such as Shared Lives and outreach into people's homes, and the Council is looking to
 develop these and other options such as Extra Care Housing to reduce the numbers in residential
 settings both in and out of area.
- The Council encourages new shared lives carers to register and to utilise shared lives as an alternative to residential care and bed-based respite.
- The Council aims to have a clear offer of the services that are available for young people transitioning to adult services with complex needs.
- The Council is keen to expand and increase timely planning for the provision of services and accommodation for the preparing for adulthood cohort. This aim will ensure that future support is ready for when a person reaches 18 years of age and that the move to adult provisions are smooth, effective transitions for all.
- All day opportunities should promote social inclusion and social value with a focus on utilising
 micro and social enterprises to support people to access opportunities in their community. Where
 appropriate opportunities for work like or work based opportunities are welcomed. A Flexible Purchase
 System for Community Opportunities and alternative respite will be commissioned in 2025.

	Learning Disability/Autism	Accommodation B	Based Services
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions
Specialist Learning Disability Residential and Nursing Care	There are 27 specialist care homes in Rotherham for people with a Learning disability and / or Autism, generally with between 5-10 beds.	27 care homes (maximum 221 beds) 6% vacancies. Maintain or remodel supply.	The Council will explore whether a reposition of residential and nursing services may be needed to expand the suitability for certain cohorts e.g., young people with complex needs accessing temporary care and specialist dementia care for adults with learning disabilities who suffer from early onset dementia.
			Providers of residential care may wish to consider a change in registration to provide supported living services and proactive engagement with the Council is encouraged.
			The Council encourages providers to adopt a standardised breakdown of the cost of care: agreed core costs for placements and hourly rates for individual 1:1, 2:1 etc. requirements.
			Providers should continue to build in day opportunities and maximise the use of assistive technology where appropriate to support greater independence.
Out of Borough LD Specialist Residential and Nursing Care	These placements are only used when no specialist provision is available in Borough.	27 placements (15 as a result of no local/specialist provision).	The Council are looking to actively reduce out of borough placements and increase the offer in borough to support adults to live closer to home/families.
Respite (residential)	This is provided by an inhouse residential service (8 beds) and also utilised the independent residential sector (17 beds). In 2023/24 respite was utilised by approximately 100 adults, including those in emergency situations.	25 available beds. Maintain supply.	The Council will continue to explore a range of alternatives to traditional residential respite care. The development of a flexible purchasing system to attract providers offering innovative respite options is being developed and will be advertised to the market during 2024/25.
			Data also suggests that the future needs for younger cohorts moving through into adult services is likely to require alternatives to the traditional provisions, and will include things like supported holidays. An increased shared lives offer will also be explored.

	Learning Disability/Autism	Accommodation	Based Services
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions
Supported Living	There are 263 supported living tenancies in Rotherham. The delivery of care and support is via Rotherham's flexible purchasing system (FPS) for supported living services. There are currently 19 providers appointed to the FPS which has more than doubled the choice of provider available to support adults in the Borough.	263 units. Under supply.	The Council intends to increase the amount of supported living accommodation available throughout the Borough. Evidence shows that around 12 additional units of accommodation will be required annually over the next 10 years. This will include core and cluster models, a community living model and bespoke accommodation where the need is identified for an individual. Assistive technology options should be available to promote independence and least restriction. See South Yorkshire MPS Housing Needs assessment The Council's ambition is that all supported living properties fulfil the real tenancy test with a distinct separation between housing and support. All commissioned care providers receive work through the Flexible Purchasing System. The Council welcomes providers to join the FPS framework.
Shared Lives	Shared Lives is a CQC registered inhouse service where adults with a learning disability and/or autism can spend time with approved shared lives carers and their families. There are a variety of placements and a mixture of support including: - Short breaks - Respite - Long term placements - Day opportunities.	Capacity – 89 units, supporting 94 adults. Increase capacity.	The Council welcomes discussions for individuals to register as shared lives carers and for shared lives carers to have closer links to peer support networks. The Shared Lives, Accelerating Reform Fund will support a programme of work which will seek to deliver a step change in the support and scope of Shared Lives across South Yorkshire. The aims are to: - Share common challenges to growing Shared Lives. - Develop a new digital platform to increase efficiency in recruitment, pay, and matching. - Develop opportunities to expand the offer to include adults with more diverse needs and for Unpaid Carers who require a short breaks service. - Develop training to develop knowledge and skills.



Map of current provision supporting people with a learning disability and/or autism.



	Learning Disability/Autism Community Care Services					
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions			
Home Care and Support	The Council and South Yorkshire ICB (Rotherham Place) operate a joint Flexible Purchasing System (FPS) arrangement. Two specialist LD providers have been appointed to the Framework.	Approximately 30 adults. Increasing demand.	The Council invites CQC registered specialist providers to apply for a place on its home care FPS (see also older people section).			
Day Opportunities - building based	The Council has continued to support the most complex adults with a learning disability who still require building based provision through its: - in house service (26 adults) Independent sector providers for specialised complex needs day opportunities (71 adults).	Approximately 100 adults.	The Council began moving away from traditional day opportunities of building-based day centres in 2019 but will continue to commission services and opportunities that support social inclusion and promote social value. The Council's in-house day services are currently undergoing significant transformation to a more creative community offer. The Council will continue to further strengthen the connections between adults with a learning disability and their local community.			
Peer Support network – micro enterprises	Peer support networks are the next step towards independent living and a step down from traditional supported living settings. A local charity has been commissioned to provide peer support networks in Rotherham, currently based in Kimberworth, Thurcroft and Thrybergh. The networks: - Support a minimum of 10 adults in each area to continue to live independently (with each person living in their own house/ flat but within walking distance to one another). - Provides mutual support and companionship with paid support workers promoting the development of skills to facilitate independence. - Support access to a weekly drop-in session providing support and opportunities for adults to socialise.	40 adults. Increase.	The Council is keen to expand peer support networks across the whole of the Borough.			
Personal Budget (service)	Adults buy their own services using the personal budget determined by the Care Act Assessment.	Approximately 270 adults.	The Council supports the use of direct payments and personal assistants where appropriate to promote more flexible and personalised solutions and strength-base approaches.			
Personal Budget (Personal Assistant)	Adults employ a personal assistant to meet needs, following a care act assessment.	Approximately 48 adults.				

2.4 Mental III-Health

Demographics

Nationally, 1 in 4 people will experience a mental health problem of some kind each year in England. 50% of mental health problems are established by the age of 14, and 75% by the age of 25 (Kessler et al 2005).

Depression is the most common form of a mental health condition, affecting over 33,251 Rotherham adults aged 18 and over in 2020/21.

This value is higher than the England value and has been increasing in Rotherham since 2013/14. Major depressive disorder is increasingly seen as chronic and relapsing, resulting in high levels of personal disability, lost quality of life for patients, their family and carers, multiple morbidity, suicide, higher levels of service use and many associated economic costs.

In primary care (2020/21), 15.9% recorded prevalence of depression (aged 18+), a total of 33,251 persons, this is higher than the England value of 12.3% and has been increasing since 2013/14.

Deaths from drug misuse in Rotherham, 2018-20, were 6.4 per 100,000 compared to the England value of 5.0 per 100,000.

In 2019/20, Quarter 2 there were: 60 per 100,000 population (aged 18+) subject to Mental Health Act and 815 people supported by secondary mental health services.

Additional factors to consider

Anyone can be affected by a mental health problem. But we know that some groups are more likely to be affected than others (Mind data). These include, but not limited to:

- People who identify as LGBTQIA+ people are between 2–3 times more likely than heterosexual people to report having a mental health problem in England.
- 23% of Black or Black British people will experience a common mental health problem in any given week. This compares to 17% of White British people.
- Over a quarter (26%) of young women aged between 16–24 years old report having a common mental health problem in any given week. This compares to 17% of adults. And this number has been increasing.
- Around 40% of people in England who have overlapping problems including homelessness, substance misuse and contact with the criminal justice system in any given year also have a mental health problem. (This is sometimes called facing 'multiple disadvantage').

People Receiving Support

The Council provides a range of services that directly support wellbeing and therefore the populations' mental health. We continue to work with partner agencies and communities to address the social overlapping issues that contribute to mental ill health, e.g., housing and homelessness, substance misuse, social isolation and poverty.

In October 2024, the Council supported 395 adults who have a primary need of mental health. 271 of which are aged 64 and under. This indicates an approximate 26.6% increase since June 2023. A review of the care and support provision for adults experiencing mental ill health in Rotherham was undertaken in 2020 and this indicated that the local market was underdeveloped and there was a reliance on residential care. There is therefore a requirement to create a quality care and support market which is responsive to individual needs to achieve the best possible outcomes.

The types of services adults experiencing mental ill health require may include:

- Community outreach to enable adults with mental ill health to live independently in their own home.
- Supported living, designed specifically to enable adults to live as independently as possible.
- Crisis intervention support.
- Residential and nursing care home provision.

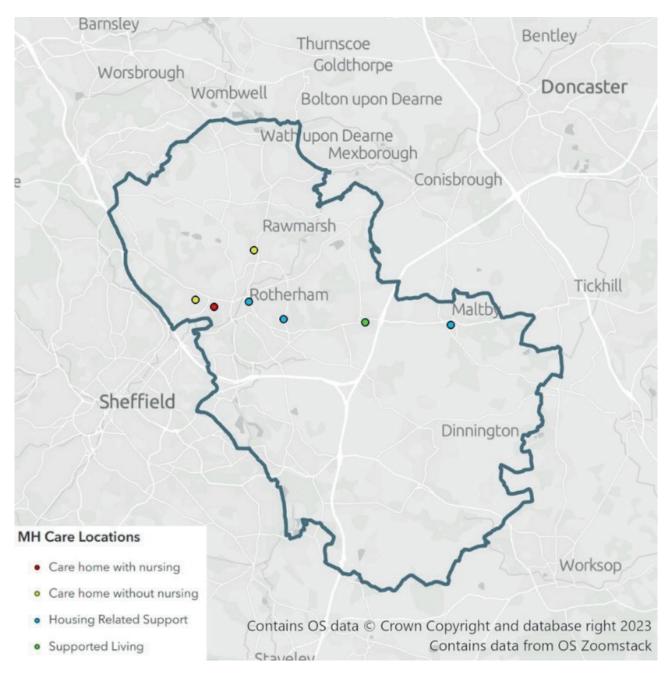
Key Messages for the Market

- Mental health conditions (both primary and secondary) are treated via a range of community and hospital based services by Rotherham Doncaster and South Humber NHS Foundation Trust (RDaSH). These range from talking therapies for common mental health conditions to community mental health teams and hospital wards for secondary conditions. The local Government Association states: "Councils support and influence mental health and wellbeing in a myriad of ways. We need to move away from just focusing on mental illness to helping everyone stay mentally well. This means overhauling our attitudes and approach to mental health and mental health services, increasing investment in prevention, early intervention and life-time support."
- In 2023 a Mental Health Recovery Flexible Purchasing System (FPS) was established. The FPS will comprise of a number of separate lots. Each lot will specify a community service with the principle of mental health recovery at its core. The community services in scope include supported living, day opportunities and preventative services. Lot 1 of the FPS which specifies supported living accommodation based services has been established and there are currently 3 providers appointed. The Mental Health Recovery Flexible Purchasing System Lot 1 remains open to applications from suitably qualified providers.

- The Council seeks more suitable provision in the Borough. A programme of commissioning and
 procurement activity is underway to create a high standard care and support market which
 has the relevant capacity and capability to meet the needs of adults with mental ill health.
 The services being developed have a strong focus on mental health recovery, enabling and
 independent living.
- The Council invites domiciliary care providers with a mental health specialism to join Lot 4 of the Home Care and Support Service FPS.
- The Council intends to continue to promote the use of personal budgets for specialist mental health provision and increase the support from personal assistants.
- There is a requirement for cost-effective alternatives to traditional forms of support for adults
 who require mental health recovery support i.e., long and short term supported living (24-hour
 services), floating support services.
- The Council is keen to expand specific mental ill-health provision for long term dispersed accommodation to ensure move on from temporary short-term accommodation is facilitated.

	Mental Health Accommodation Based Services						
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions				
Specialist Mental Health Residential and Nursing Care	There are 3 care homes that provide specialist support for adults with mental ill health. A further 7 homes (135 beds) provide some MH specialism. Adults with mental ill health in care homes includes approximately a third under the age of 65.	3 care homes (65 beds). Maintain or remodel supply.	The Council will continue to support people living with mental ill health to remain at home in the community for as long as appropriate, and will increase diverse support provision by introducing alternative models to residential care, for example supported living.				
Out of Borough Specialist Residential and Nursing Care	These placements are only used when no specialist provision is available in borough.	27 (15 as a result of no local /specialist provision).	The Council are looking to actively reduce out of borough placements and increase the offer in borough to support adults to live closer to home/families.				
Extra Care Housing (ECH)	The older people's ECH offer is also available for adults with mental ill health (see Older People section) where they meet the age criteria, and/or this is the most appropriate environment for them.	108 Older People units. Under supply.	The Council is keen to identify opportunities for adults with Mental Health within generic supported housing models.				
Supported Living	The Council currently has two schemes (11 units). A further 19 units are in development. There are 3 providers appointed to the MH Recovery Flexible Purchasing System.	11 units, with a further 19 in development Capacity to be reviewed.	The Council has increased the amount of supported living accommodation available for adults with mental ill health throughout the Borough. These services will be monitored to assess utilisation and outcomes. The Council's ambition is that all supported living properties fulfil the real tenancy test with a distinct separation between housing and support. All commissioned care providers receive work through the Mental Health Recovery Flexible Purchasing system (FPS) – set up in 2023. The Council welcomes providers to join the FPS framework.				

Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions
Shared Lives	Shared Lives is a CQC registered inhouse service where there are a variety of placements and a mixture of support including: - Short breaks - Respite - Long term placements - Day opportunities.	Adults who are living with mental ill health are underrepresented in this service.	The Council welcomes discussions for individuals to register as shared lives carers and for shared lives carers to have closer links to peer support networks. The Shared Lives, Accelerating Reform Fund will support a programme of work which will seek to deliver a step change in the support and scope of Shared Lives across South Yorkshire. The aims are to: - Share common challenges to growing Shared Lives. - Develop a new digital platform to increase efficiency in recruitment, pay, and matching. - Develop opportunities to expand the offer to include adults with who are living with mental ill health. - Develop training to develop knowledge
Supported Housing	Adults with mental ill health will also utilise homeless and housing related support services (see later section). There are 3 specific MH accommodation schemes as self-contained apartments. The services support adults on to greater independence and move into settled accommodation (within 2 years).	20 units for MH.	and skills. Continue to review the use of supported housing, alongside general needs housing with outreach / floating support service to step adults down into the community.



Map of the current service provision supporting people with mental ill health.

	Mental Health Community Care Services					
Service Type	Brief Summary of Current Service(s)	Capacity and Direction of Travel	Commissioning Intentions			
Home Care and Support	The Council and South Yorkshire ICB (Rotherham Place) operate a joint Flexible Purchasing System (FPS) arrangement. One specialist provider for mental ill health has been appointed.	Approximately 30 adults. Increasing demand.	The Council invites CQC registered specialist providers to apply for a place on its home care and support FPS (see also older people section).			
Mental Health Enablement	Provides preventative social care interventions, in a partnership approach with RDaSH.	New service.	The Council's Mental Health Enablement Service aims to enable people living with mental ill health to improve their outcomes and prevent their dependency. Three enablement subteams support delivery of a hybrid model and alignsresource to recovery and prevention.			
Personal Budget (service)	Adults buy their own services using the personal budget determined by the Care Act Assessment.	Approximately 190	The Council supports the use of direct payments and personal assistants where appropriate to promote more flexible and personalised solutions and strength-based approaches.			
Personal Budget (Personal Assistant)	Adults employ a personal assistant to meet needs, following a care act assessment.	Approximately 5.				

2.5 Housing Related Support

What is Housing Related Support?

Housing related support is a preventative programme assisting young people and adults with multiple needs, through a personalised package of support to gain the skills needed to maximise their independence, maintain settled accommodation, and integrate into the community.

The primary aim of housing related support is to address and prevent homelessness - this includes provision for young people, adults, and families. The most prevalent reason for people presenting as homeless is that their family are no longer willing/able to accommodate. Please read the Council's *Homelessness Strategy*.

People Receiving Support

The complexity of homeless cases is increasing. In 2020/21, 13.8% of cases were classed as complex, compared to 10.6% in 2019/20 and 6.7% in 2018/19.

The following support needs are prevalent for homeless applicants, and often applicants have multiple support needs:

- Mental Health problems this is the most common support need identified, which has increased year on year.
- Drug dependency.

- Alcohol dependency.
- Offending and repeated offending.
- Domestic abuse.
- Sexual abuse.

- Repeat homelessness.
- History of rough sleeping.
- Physical disability.
- Learning disability.
- Debt.

Current Services And Pathways

Four pathways of housing related support and associating service with capacity.

Complex Needs

Housing First 35 Units Recovery Orientated

Vulnerable Adults

Accomodation for Single People

35 Units

Homeless Families Interim Accomodation

35 Units Range of family size properties across the borough

Domestic Abuse

Refuge and Dispersed Accomodation

Minimum 10 Units

Outreach Floating Support Services

Young People 16-25

Young

Parents

16-25

Accomodation

Based

27 units

Floating

Support

20 units

Young **People** 16-25

Emergency Units

4 units with 24 hr support

Single

Accomodation 12 units with 24 hr support

Supported

Dispersed **Properties**

19 semi supported housing

Floating Support

30 units

Floating Support

Total 255 units across the Borough (including short term dispersed tenancy units)

Complex Needs

This covers people with a high level of need and those scoring highly on the chaos index for example, history of rough sleeping, significant offending history and lack of engagement with support services and compounding issues (including alcohol/substance misuse).

Housing First provides a recovery orientated approach moving people into independent and permanent housing with additional support and services.

Vulnerable Adults

This covers people who need support in order to live independently. The service provision does not focus on individual vulnerabilities, rather works with people to understand their root cause of homelessness (or risk of homelessness) to create a bespoke package of support. Provision includes:

- Accommodation and support for single people: block of 30 single self-contained units with onsite support.
- Homeless Families Accommodation with support delivers a range of family sized furnished supported housing across the borough, with floating support.
- Floating Support: two contracted services provide floating support which offers 255 people resettlement and tenancy support. This includes short term dispersed tenancy units, which are temporary or people's own longer-term homes.

Domestic Abuse

It includes:

This pathway supports people who have experienced domestic abuse and supports the Council's Domestic Abuse Strategy - www.rotherham.gov.uk/domestic-violence/domestic-abuse-strategy

- The Refuge (and dispersed) which has a minimum of 10 units of supported furnished accommodation.
- Domestic Abuse Outreach which provides support to victims and survivors of domestic abuse at all risk levels.
- The Council commissions services to support Victims/Survivors of Child Sexual Exploitation (CSE). The Post CSE Services are currently provided by three Rotherham based Voluntary and Community Sector organisations, the services support Victims/Survivors of CSE through evidenced based therapeutic interventions, counselling, and trauma stabilisation. The current contracts are in place until the 31 December 2025. This service is currently being re-procured.

Young People and Young Parents 16-25:

Young People:

This covers accommodation and support for young people aged 16-25 experiencing homelessness, but requiring on-going support including teen parents, former child in need and looked after children. The units include:

- 4 emergency units with 24-hour support.
- 12 core, single accommodation units with 24-hour support.
- 19 semi-supported housing via a range of dispersed properties, both single and shared housing.
- 30 units of Floating Support.

Young Parents:

This covers accommodation and support for young parents aged 16-25:

- 27 units of supported furnished accommodation.
- 20 units of floating support.

Key Messages for the Market:

- Housing related support provision has been reviewed in 2022/23 to incorporate changes in demand and evidence of agile solutions and good practice following the pandemic.
- The Council has established a Flexible Purchasing System (FPS) to support the HRS pathway, and future procurement opportunities will be advertised via the FPS.
- The FPS is always open for new applications, these are assessed twice yearly. Details can be found at 21-282 Housing Related Support: Flexible Purchasing System (YORtender reference 73638).

Service Type	Current Units (No)	Predicted Demand for future Cohort	Commissioning Intentions Summary
Homeless Accommodation and Support for Single People and families	60	Maintain	These contracts are in place until May 2027. These services were commissioned via the Council's Flexible Purchasing System for Housing Related Support.
Floating Support Services	255	Maintain	The Council has commissioned floating support through its flexible purchasing system (FPS). This includes support for people to resettle into independent accommodation and prevention support to maintain independent living.
Rough Sleeper Initiative Accommodation based support Hub	Up to 8 beds	Maintain	This contract term runs until the 31st March 2026.
Housing First	35	Maintain	The Council is reviewing its current Housing First provision.
Domestic Abuse Refuge (including Dispersed)	18	Maintain	The Domestic Abuse Refuge is currently out to tender as the Domestic Abuse Refuge contract term ends on the 30 September 2025.

2.6 Unpaid Carers

"An unpaid carer is somebody who provides care in any form but does not receive an hourly rate of pay. (An unpaid carer could be in receipt of carers allowance or working whilst still caring)"

Rotherham Parent Carer Forum.

The Council's Borough that Cares Strategic Framework 2022-25 provides a strategic framework with a purpose to ensure unpaid carers can live well, be active and have fulfilled lives.

Demographic:

In Rotherham, there is a predicted 26,313 unpaid carers, meaning at least 10.48% of people living in Rotherham fulfil an unpaid caring role. As Rotherham's ageing population increases, it is predicted that more people will identify as an unpaid carer.

Thrybergh and Hooton Roberts Ward area contains the highest density of people providing unpaid care in Rotherham at 12% of the population and Rotherham Central providing the least level of unpaid care at 8%.

The age bracket of 50–64 years of age contains the highest number of unpaid carers at 4,817 providing up to 19 hours of care and under per week.

The age bracket of 65 years and over provide the highest number of hours of unpaid care per week at 3,513 unpaid carers.

 $3.8\,\%$ of Rotherham's unpaid carers are in receipt of Carers Allowance which is higher than the national figure of $2.17\,\%$.

3.2% of Rotherham's population are in receipt of Attendance Allowance, 4.4% of the enhanced daily living rate and 3.8% of the standard daily living rate of Personal Independence Payment – an indicator that 11.4% of Rotherham's adult population could potentially require unpaid care.

Key Messages for the Market

- The Council will continue to support unpaid carers and recognise unpaid carers for the invaluable commitment carers make in providing support and care.
- The Borough That Cares Strategic Framework outlines three areas of focus to be delivered between 2022-2025: Focus 1: Carer Cornerstones, Focus 2: Creating Communities of Support and Focus 3: Carer Friendly Borough.

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Dementia Café and Dementia Support Worker Service	A grant agreement is in place with a voluntary and community sector (VCS) provider to provide a Dementia Café and Carers Dementia Support Worker Service. This arrangement is in place until March 2027.	Dementia Café: 1,117 Dementia Support Worker Service: 160 (new and existing).	This service is commissioned until March 2027.w
	(a) A) Dementia Cafés: Several Dementia Cafés take place monthly at a range of locations across the borough. The cafes provide an opportunity for unpaid carers (who support a person who lives with dementia) to meet, receive support, access information, and advice whilst the person with dementia can join in a range of activities.		
	(b) B) Dementia Support Worker Service: The Carers Dementia Support worker service provides individually tailored support, advice, and information to unpaid carers in a setting of their choice.		
Carers Emergency Service	Commissioned through the Better Care Fund, the Carers Emergency Service provides vital replacement care in the person's home in situations where the unpaid carer (one who provides a substantial amount of care) is unexpectedly and due to an emergency, unable to undertake their caring role. A Foundation Trust is currently contracted to provide replacement care, within 2 hours of the request, as directed by the outcome of a Carer's Assessment and/or Registration to the Scheme and pre-determined contingency plan, for a period of up to 48 hours. Formal care services are put in place should they still be required post the 48-hour period.	21	This service is commissioned until March 2027.

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Unpaid Carers Home Care and Support Service	This service is provided by a VCS provider via the Home Care and Support FPS. The service provides domiciliary care for people with eligible needs under the Care Act, where it is also identified that they have an unpaid carer that would benefit from the advice, information and additional support available from this provider.	100	This service will continue to provide support to unpaid carers who also have eligible needs under the Care Act.
Shared Lives	Shared Lives is a CQC registered inhouse service where there are a variety of placements and a mixture of support including: - Short breaks - Respite - Long term placements - Day opportunities.	People who provide unpaid care and require respite provision are currently underrepresented in this service.	The Council welcomes discussions for individuals to register as shared lives carers and for shared lives carers to have closer links to peer support networks. The Shared Lives, Accelerating Reform Fund will support a programme of work which will seek to deliver a step change in the support and scope of Shared Lives across South Yorkshire. The aims are to: - Share common challenges to growing Shared Lives. - Develop a new digital platform to increase efficiency in recruitment, pay, and matching. - Develop opportunities to expand the offer to include people who provide unpaid care. - Develop training to develop knowledge and skills.

2.7 Voluntary and Community Sector Services

The Voluntary and Community Sector provide both statutory and non-statutory services to Rotherham residents. The table below identifies key contracts and grants:

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Statutory and Community Advocacy	The Council has commissioned a VCS organisation to be the lead provider for commissioned advocacy services in Rotherham. The Rotherham Advocacy Hub, provides advice and information and if required, a qualified advocate. They provide statutory advocacy to meet the requirements of the Care Act 2014, the Mental Capacity Act 2005, the Mental Health Act 2007 and the Health and Social Care Act 2012. Statutory advocacy services provide support to adults who: - Require assistance through the care and support assessment and review process. - Lack mental capacity to make decision about themselvaes. - Are detained under the Mental Health Act. - Require support to complain about services provided by the NHS. - Non statutory or community advocacy is also provided to support adults living in Rotherham who require assistance in relation to other health and social care issues.	1,200	The current contract ends in March 2025. A competitive tender exercise has secured ongoing service until March 2030.
Sensory needs offer- Sight and Sound	The Council currently commissions a sensory impairment charity to provide support services for adults who may be blind/deaf or deaf and blind. The Service provides advice, information and assistance to people with a sensory disability to enable them to remain independent for as long as possible and prevent or delay dependency on statutorily provided services. The service also provides regular BSL Advice and Support Service sessions. The Rotherham Sight and Sound service operates under a grant agreement until March 2027.	Approximately 2,200 adults.	Current grant arrangement in place until March 2027. The Council would welcome any additional provision to support the sensory needs community. However, with limited funding for new services, support from the Council is likely to be non-monetary.

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Healthwatch	Healthwatch Rotherham is the independent champion for people who use health and social care services, ensuring people are at the heart of care for all services. This is a statutory service under The Health and Social Care Act 2012. A local citizens' advice service is currently contracted to provide the Healthwatch service until March 2027. Trustees, members and volunteers and the Council welcome organisations to provide support to Healthwatch Rotherham through their future Social Value commitments.	2,076	The current contract is in place until March 2027.

Key Messages for the Market:

- The Council will continue to engage with and promote opportunities to the voluntary and community sector.
- The Council recognises the crucial work the voluntary and community sector provide through not only commissioned services but other non-Council services.
- The Council intends to provide a strong and co-ordinated preventative offer, to be delivered in partnership with the voluntary and community sector.
- The Council proposes that the voluntary sector will continue to provide people with information, advice and signposting to low-cost/ no-cost options that can be accessed to support people in Rotherham.

3 Public Health Commissioning

Introduction

The Public Health Grant is used to commission services that improve the health and wellbeing of the population. Some of these services are mandated and the Local Authority must provide them. Others have been identified as being essential to tackle health inequalities and as part of the wider health and social care system. The services have been commissioned as 4 pathways:

- 0-19s Children's Public Health Nursing.
- Sexual Health Service (all age).
- Health and Lifestyle Behaviour Change Service.
- Alcohol and Drug Treatment and Recovery Service (all age).
- NHS Health Checks.

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Alcohol and Drug treatment Service – all age	The current service was awarded after competitive tender to a new provider – the new contract and service model commenced on 1st April 2023. We Are With You offer opiate, non-opiate and alcohol treatment and recovery services. This is an All Age Service. Over 2022/23, 2,092 adults received structured treatment support over the 12 month period under their drug and alcohol recovery treatment service. Click here for more details: ROADS - Rotherham Alcohol and Drug Service (Provided by With You) - With You (wearewithyou.org.uk)	2,300	The Council re-procured the service in 2022 and the new contract commenced April 2023. The service is now an 'all-age' alcohol and drug treatment and recovery service, serving the population of Rotherham. This current contractual arrangement expires in April 2028, see Procurement Opportunities for details.
0-19 Children's Public Health Nursing	The Rotherham NHS Foundation Trust (TRFT) are our current providers of the 0-19 service. They deliver the healthy child programme predominantly by Health Visitors and School Nurses. The service aims to provide parents with the advice and support they need to ensure their children make progress in their development, keep healthy and stay safe. Promote health and healthy lifestyles through our work in schools and provide advice and support for young people. Click here for more details <i>The Rotherham NHS Foundation Trust</i>	The Service delivers the Healthy Child Programme in Rotherham; this is a universal provision for all of Rotherham's families.	The Council awarded the new contract to the incumbent provider: The Rotherham NHS Foundation Trust (TRFT) The new contract and service model commenced on 1st April 2023. The current contractual arrangements expire, in April 2028, see Procurement Opportunities for more details.

Service Type	Brief Summary of the service	Number of people supported in 23/24	Commissioning Intentions
Sexual Health Service	The Rotherham NHS Foundation Trust (TRFT) were awarded the new integrated sexual health service contract through a competitive tender process. The Rotherham Sexual Health Service commenced on the 1st April 2022. 16,033 people accessed the integrated sexual health service during the 2022/23 12 month period. Rotherham Sexual Health Service provides a variety of services, including: STI testing, contraception, vaccinations and injections, free home testing and emergency contraception. Visit their website for more details. The Rotherham NHS Foundation Trust.	16,033	The Council re-procured the service in 2021 when the incumbent provider were successful in retaining the contract. The service will continue to provide a range of sexual health services across the Borough. The current contractual agreements are in place until at least 2027.
Public Health and Lifestyle Behaviour Change Service	The current service was awarded after competitive tender to a new provider. The new service commenced on the 1st October 2022, provided by Connect Healthcare Rotherham CiC who provide an integrated lifestyle and behaviour change service for adults. This includes support to stop smoking and weight management. The service aims to focus on prevention and early intervention by promoting health and wellbeing across Rotherham.	5,580	The Council re-procured the service and awarded the service to a new provider Connect Healthcare Rotherham CiC. The new contract and service model commenced on 1st October 2023. The contractual agreements will be in place until at least 2028.
NHS Health Check	The NHS Health Check is a health check-up for adults in England aged 40 to 74. It's designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes, or dementia.	8,000	The Council re-procured the service in 2022.

Key Messages for the Market:

- Please see **Procurement Opportunities Section** for all Public Health Commissioning procurement activity.
- The Council continues to manage all public health commissioned services through continual performance and contract management.

4 Procurement, Commissioning and Contract Compliance

Please see the website version for the up to date **Adult Social Care and Public Health Commissioning Procurement Activity Table.**

www.rotherham.gov.uk/business-council/mps-procurement-opportunities

4.1 Social Value

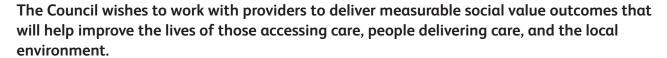
The Council is committed to supporting the principles of the Social Value policy.

Social value is defined by the Social Value hub as: the benefit to the community from a commissioning or procurement process over and above the direct purchasing of goods, services and outcomes.

The Council has committed to a 20 % social value pledge for all procurement processes over £100,000 per annum, and these providers are mandated to complete regular returns via the **Social Value Portal**.

The Social Value Policy sets out 6 key outcomes:

- 1. Raising living standards for all residents of Rotherham.
- 2. A strong local economy with employment and skills opportunities and a growing business base.
- 3. Young people have the opportunity to develop skills and find worthwhile employment.
- 4. Equality of opportunity for disadvantaged people and communities including disabled people.
- 5. Strengthened and sustainable community and voluntary sector.
- 6. Greater environmental sustainability including accessible green public spaces.



For more information read our **Social Value Policy**

(www.rotherham.gov.uk/business-council/social-value/2) and our *Social Value Commissioning Toolkit* (www.rotherham.gov.uk/downloads/download/433/social-value-commissioning-toolkit).



4.2 How to Keep Up to Date with the Council's Procurement Opportunities

The Council utilises the YORtender regional web portal that allows local authorities to effectively manage and advertise quotations and tenders. The portal provides access to Local Authorities managing opportunities within the Yorkshire and Humber region. This means:

- A single procurement approach across the Region.
- A means to share, co-ordinate and collaborate on procurement exercises.
- E-Enabled for all to work smarter and to reduce procurement lead times.
- Suppliers can register their capabilities and interests in opportunities.
- Suppliers receive email alerts of opportunities.
- Immediate access to current opportunities.
- Contract Management functionality to support effective management of contracts for buyers and suppliers.
- A simple, secure and efficient means for managing tendering and quotation activities, reducing the time and effort required for both buyers and suppliers.
- Supplier Registration is easy and free once on the home page just click 'New Supplier Registration' to the left.
- Suppliers can create multiple users under one master company account.
- We suggest you include a generic company email address (e.g. sales@) and ensure this is maintained at all times.
- You can add CPV codes to receive free CTM Alerts for tender opportunities.

To find out about and participate in tender opportunities across the Yorkshire and Humber region please register at: YORtender.

The Council's Contracts Register including details of current contracts can be downloaded from YORtender and at www.rotherham.gov.uk/budgets-spending-performance/council-tenders-contracts/1



4.3 Contract Compliance and Service Quality

Contracts and Quality Standards will be clearly defined in service specifications and all of the Council's contracted providers will be subject to an annual audit to assess their contractual compliance. A number of early warning systems are in place to inform the view of quality, performance and risk, and these indicators will influence any interventions to be undertaken with services commissioned by Adult Social Care. The majority of commissioned adult care services including public health services are also subject to CQC ratings and inspections.

Through the Council's established partnerships, the Council will work alongside providers to address quality issues by offering support, advice, guidance and training. The Council will continue to collaborate with providers with the aim of improving service delivery where required. As a Council, we strive towards all providers being rated by CQC as excellent or good.

4.4 Building Relationships

Co-Production

The Council is committed to embed genuine co-production into all commissioning activity to enhance our relationship-based approach.

The energy, skills, interests, knowledge, and experiences of providers must be harnessed to influence accommodation, care and support services in the Borough.

Co-production benefits include:

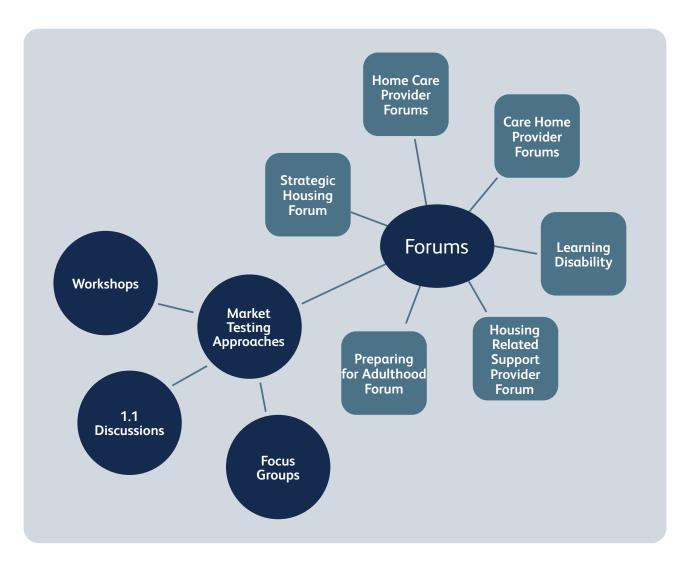
- Collective sense of ownership.
- More effective service delivery.
- Greater outcomes for people in receipt of care and support.
- Improved relationships between the Council and providers.

Market Testing

The Council commits to using formal and informal soft market testing approaches to inform service design and procurement model in the form of:

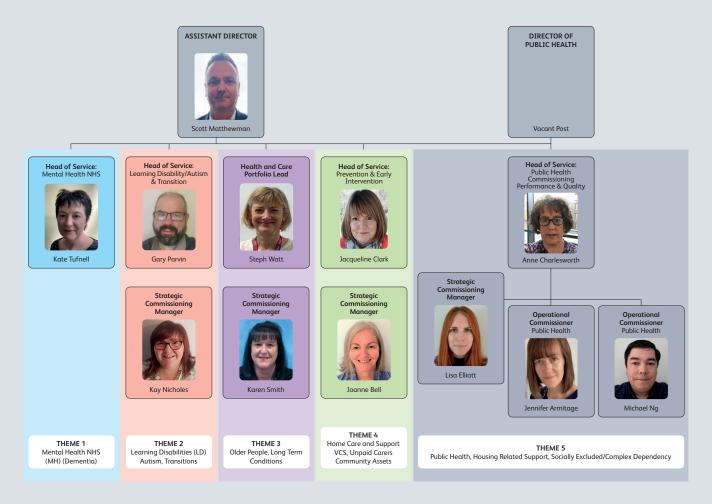
- One to one discussion.
- Workshops.
- Focus Groups.
- Provider Forums.

All market testing will be well advertised in advance and attendance where applicable will be noted.



Examples of Market Testing Approaches

4.5 Adult Care and Public Health Strategic Commissioning Staff Structure



For any further information about the Market Position Statement please email: commissioningenquiries@rotherham.gov.uk.