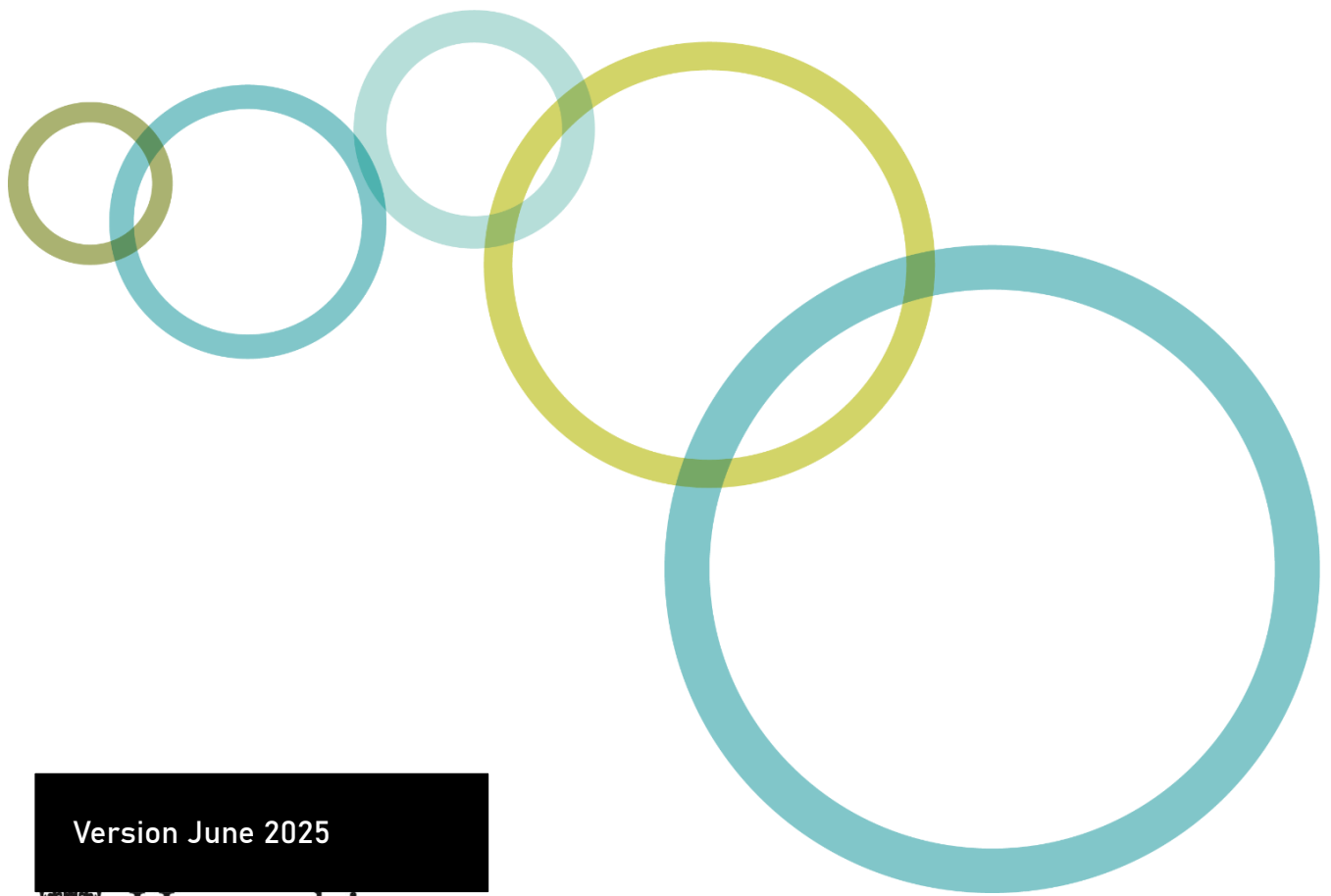


Younger Adults Market Position Statement



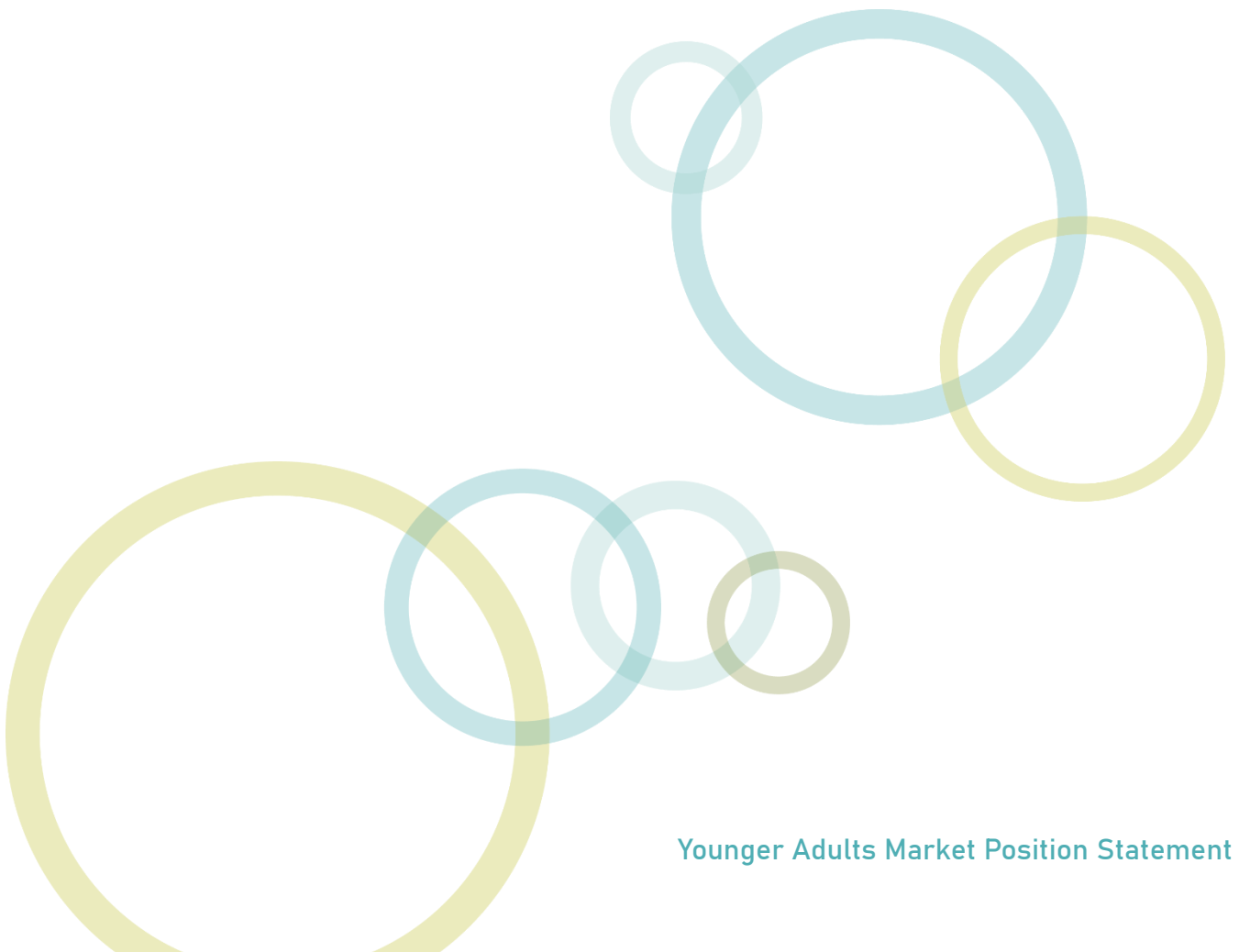
Version June 2025



Hampshire
County Council

Contents

Message to our providers.....	3
Hampshire County Council –Core principles of business	4
Diversity and Complexity	5
What Does Hampshire County Council want to achieve?.....	6
Resources.....	166
Workforce	166
Focus on Learning disability	188
Focus on Physical Disability	222
Focus on Mental Health	255
Our Pledge To You.....	288
The way forward: outline timetable	29



Message to our providers

We believe that people with disabilities and autistic people should have access to the same opportunities as everyone else. People consistently tell us that the things that are most important to them are: good quality accommodation; access to employment (paid or voluntary); effective support; and opportunities to

- The application of the Least Restrictive Care Concordat and least restrictive approaches will mean that we commission innovative approaches to support which reduce distress and the number of restrictions that people experience in their daily lives.
- The application of Strengths Based Approaches means we will encourage people to use their natural support networks as a sustainable alternative to funded care packages.
- The application of the Trauma Informed Care Concordat will mean that we commission services which recognise the experiences of people in receipt of care and carers and respond accordingly.
- We will continue to invest in increasing the number of supported accommodation places through partnerships and collaborative working

develop relationships, skills, and interests.

During the next commissioning cycle, Hampshire County Council will continue to commission services that are strengths-based and trauma informed, and which offer the least restrictive form of support.

with housing and support providers to reduce our reliance on residential care.

- Residential care will be targeted at those with specific needs. We will need providers to help people reach their full potential and move on to supported accommodation.
- We will continue to work closely with our partners in the National Health Service and other statutory agencies to help achieve our aims. We continue to operate in a challenging financial environment, which will influence and shape our approaches to the provision of adult social care. We will need our partners to ensure that Universal Services are accessible to people with disabilities.
- We will continue to reduce spot purchasing and increase the use of frameworks and other procurement mechanisms which give the Council and providers the assurance of formal contractual arrangements.

Hampshire County Council

–Core principles of business

As residents of Hampshire adapt to face everyday challenges, the following principles remain central as the County Council provides care and support to most vulnerable in our society. We will embed these principles into future tenders and contracts:

Inclusion – our [Inclusion Strategy](#) outlines the County Council's ambitions for greater inclusivity across all areas of work. These are echoed within the Adults' Health and Care Directorate's Equality Objectives. We encourage our partners to embrace these aims to ensure services are continually tailored to Hampshire's diverse communities. [Equality objectives and Zero Tolerance statement | About the Council | Hampshire County Council](#)

Modern slavery – our [Modern Slavery Statement](#) sets out actions underway to understand, prevent and address modern slavery risks within our services, provided directly, and commissioned, and our supply chains. Any organisation covered by Section 54 of the [Modern Slavery Act 2015](#) working with the County Council is expected to understand and comply with the Act's requirements of actively preventing instances of modern slavery.

Social value – the [Public Services \(Social Value\) Act 2012](#) guides the County Council in the way services are planned and commissioned to ensure communities become more resilient and to reduce demand on public services. We will use social value outcomes and measures that are proportionate and relevant to the specification for the service and will evaluate tenders in accordance with those social value outcomes and measures.

Climate Change – the County Council declared a climate change emergency in June 2019 and subsequently set two targets of becoming carbon neutral by 2050 and to build resilience to a two-degree rise in temperature. We have published a [climate change strategy and accompanying action plan](#) that will shape how we work together with our partners to meet our targets.

Diversity and Complexity

Hampshire has a growing, diverse population with increasing numbers of people from different backgrounds. 12.1% of the County's population are from non-white British ethnic groups, with some parts, for example Rushmoor at 28.9% being particularly diverse, including over 10,000 identifying as Nepalese.

Further information about Hampshire's population can be found in [Hampshire's Joint Strategic Needs Assessment](#). Profiles of each individual Hampshire district can also be found on our website.

The 2021 Census took place on 21 March 2021. The County Council has [published the data](#) released for Hampshire alongside reports and factsheets.

As part of our efforts to ensure our services are accessible to all people and to reduce inequalities in care and support, The County Council has undertaken further research into seldom heard groups. Research has indicated that some people are not making use of social care services in the same way as the rest of the population.

This includes people from an Asian Background, Gypsy, Roma and Traveller communities, armed forces veterans and others.

We need providers that are able to engage with these communities in Hampshire, with accessible communication, an awareness of cultural issues and staff that are trained to provide culturally appropriate support.



What Does Hampshire County Council want to achieve?

Technology Enabled Care (TEC)

Technology plays an increasingly important part in all of our lives. We believe that most people with care and support needs can benefit from innovative approaches to TEC. We will continue our Strategic relationship with our TEC provider, Argenti, and ensure that TEC is considered for all people with care and support needs.

We will make sure that where appropriate, TEC is fully embedded in support plans to enhance and compliment any remaining direct support requirements. The use of TEC will help us to ensure that we provide care and support in the least restrictive way possible, helping people to become more independent.

TEC – What we need from providers

We will need providers who recognize the benefits of TEC solutions and embrace opportunities for TEC implementation. We will need staff who are well trained and confident to

support people with TEC solutions and who can engage positively with individuals, carers, case workers and TEC professionals.



Hampshire Care Association

As part of the development of this document, the Hampshire Care Association highlighted a number of areas of priority, or requests for

information and conversation between the County Council and providers. These included:

- The changing complexity of needs, and how we can work together to define, monitor, and meet them.
- The need for a continued conversation about the workforce, especially in the context of national changes
- The importance of continued conversations around Modern Day Slavery, the impact commissioning strategies can have, and the need for ethical employment practices.
- The need for a continued conversation around fees, fee-setting and uplift arrangements, understanding the position of the market.
- A request for more information around predicted demand
- A continued drive towards increased co-production

We recognise there are areas of concern for providers, some of which we are already addressing, some of which are being considered as part of nation-wide conversations. We

commit to continuing to work with the whole market on the issues being raised, both directly to us and through organisations such as the Hampshire Care Association.

Supported Accommodation

There are approximately 920 working age adults living in residential care homes funded by the County Council, and an additional 145 people in Nursing Care. Over the past 8 years we have supported over 100 adults into supported accommodation from residential care home placements, and we will continue this approach over the coming years. We will work with housing providers to provide new

supported accommodation capacity and reshape current supported accommodation provision to ensure it is sustainable for the future.

We will continue to directly commission new supported accommodation services where they are required through the Hampshire Accommodation Development and Support Options Model (HADSOM) – our

procurement platform for care and support and accommodation. It is important that providers who are interested in this area of service delivery are registered to this procurement platform. You can register at the [Hampshire County Council Electronic Tendering Site – Home \(intendhost.co.uk\)](https://www.hampshire.gov.uk/electronic-tendering).

We will continue to address historic spot purchasing arrangements in favour of formally procured and contracted arrangements which provide better assurance to all stakeholders.

We will continue the application of the strengths-based approaches and Least Restrictive Practice to determine the correct level of support for people. There will be an increasing focus on shared support and care technology for non-regulated support activities. In shared supported accommodation services, we will apply a ‘whole house’ review which considers the collective needs of the people receiving the service whilst meeting individual outcomes.

We will continue with a ‘Hampshire first’ approach to placements. We will work with individuals who currently live in out-of-county placements and wish to move back into Hampshire.

Extra Care is a form of supported accommodation. The County Council will continue to invest in this model, expanding specialist provision for people with disabilities and autistic people. We will increase access into generic older people’s Extra Care where appropriate when frailty becomes the person’s primary care issue.

Shared Lives is another form of supported accommodation. This is where an individual lives with a family in their home.

The County Council will continue to develop Shared Lives services as an accommodation option, which will include the development of a new complex care category for Shared Lives.

We will continue to develop and commission other models of community support seeking partners to help us expand community support networks.

We will work with other statutory, voluntary and community sector and private agencies to maintain and increase the range of accommodation models available to people who have disabilities and autistic people, including public and private sector rentals and shared ownership.

Supported Accommodation – What we need from providers

We will need providers to apply a strengths-based approach, ensuring those accessing services receive sufficient support to meet their assessed eligible social care needs,

whilst making maximum use of peer support, family, universal options, and other community networks.

We will need providers to engage positively with care technology solutions, as an approach to reduce restrictive direct support for people and will continue to focus on night support arrangements.

We will need to increase our supported accommodation capacity across Hampshire to support our strategy to move people out of commissioned residential care placements. We will use our HADSOM procurement vehicle to source and develop accommodation and support to provide a range of supported accommodation options to meet people's needs.

We will need to work with established supported accommodation providers, tenants, families, and other stakeholders to review current provision and ensure services are sustainable for the future.

We will need a robust provider market that is able to respond to the requirement for long-term supported accommodation services and short-term enablement and respite services.

We will need providers that can deliver specialist supported accommodation services, for example step down from in-patient hospital placements and people with a forensic need. Providers will need to ensure they have the requisite infrastructure and training programmes to support people with complex needs, including Positive Behaviour Support and Trauma Informed Care.

We need to increase Shared Lives places for people with learning disability and autism over the next few years.



Independent living at home

We will continue to support people to live at home with their family by providing support to enable carers to continue their caring role. This will include innovative solutions such as TEC to supplement and enhance the provision of direct care.

We will apply a strengths-based approach. This will enable people to build on their natural support networks and minimize their

requirement for funded care. Appropriate review processes will ensure that the correct amount of support is provided for the person's circumstances, and we will seek to reduce dependency on long term paid for support wherever possible.

Where appropriate, we will commission short-term support with clear outcomes and a progression focus.

We will work with partners to improve access to universal and community services for people who are currently unable to use their services and recognising the need to make reasonable adjustments to support this.

We will work to break down artificial barriers between different groups of people in receipt of care and we will need providers who can work with people with learning disabilities, autism, physical disabilities, and mental health needs.

We envisage an increase in the complexity of people remaining within their family units and need providers who can meet higher levels of need in these settings.

We will work in a co-productive way with providers to address pressures, such as non-contact time and mileage costs.

We envisage reductions in the volume of lower-level task-based support.



Independent living at home – what we need from providers

We will need fewer providers delivering low level or task-based support and will need providers who are able to work with people with more complex needs.

We need providers to maintain capacity for new referrals and to meet the requirements of those currently accessing services, without being reliant on high-cost agency workers.

We will make more use of capacity in the wider domiciliary care market for regulated care activities through the use of the forthcoming [Help 2 Live at Home Framework](#).

We will need providers who are able to work across client groupings and age bandings with the correct skills and registrations to enable this.

There will be an increasing emphasis on access to universal community services, shared services, peer

support and care technology, in place of one-to-one support.



Residential care

Through 2025 we will explore options to improve the contractual relationship with Residential Care providers. This may include the launching of a framework or similar model. We will seek provider engagement on this.

We will continue to monitor the cost of care through the application of cost modelling tools to ensure the County Council pays a fair price for residential care, through transparent

commissioning and contracting arrangements.

Residential care provision will be targeted at people with specific needs. This may include people with more complex needs or older people who have additional age-related needs. Where possible, we will commission outcomes-focused, time-limited placements, co-produced with all stakeholders to enable the person to move into supported accommodation.

Where people live in residential placements outside of Hampshire, we will offer the opportunity for that person to move back to Hampshire if they request to do so.

We will work with residential care providers to ensure that people are as independent as possible. This will mean actively addressing the communication, environmental and interpersonal issues that may trigger behaviours that challenge, through the application of Positive Behaviour Support and similar approaches to reduce the levels of restrictive care and support. We will work with providers to apply the principles of Least Restrictive Practice to all packages, sharing risks where this is required.

We are committed to applying the principles of Trauma Informed Care to ensure that services are compassionate and effective in understanding the needs of the people they serve. We will work with providers to ensure their services are

trauma informed and will use commissioning approaches and contracts to support this.

We will take a positive approach to risk management, supporting providers to offer enabling models of support whilst meeting their registration requirements.

We will increasingly seek to use technology to reduce the amount of one-to-one and two-to-one support we commission.

We will work with residential care providers to deregister their services where this is appropriate. The Hampshire Deregistration Partnership Register (HDPR) will continue to facilitate this work.

You can register here at the [Contract Award Notice for: AS15031 Hampshire Deregistration Partnership HDPR 2023 | Business and economy | Hampshire County Council](#)

Residential care – what we need from providers

We need providers who are transparent and fair in their approach to pricing for residential care and whose profit or surplus expectations are realistic.

We need providers who are able to support people to develop the right skills to move onto Supported Accommodation and actively support the County Council's strategic approaches in this area.

We will need providers to engage proactively in discussions regarding our contractual arrangements as the Council attempts to improve our assurance in this area.

We need providers who are fully supportive of Least Restrictive approaches and signed up to the [Least Restrictive Practice Concordat](#).

We will need providers who work in a Trauma Informed way and who are

signed up to the [Hampshire Trauma Informed Care Concordat](#).

We will need providers to support an open book approach to price and cost, and to demonstrate best value in all circumstances.

We will need providers to apply a strengths-based approach, ensuring those accessing services receive sufficient support to meet their assessed eligible social care needs, whilst making maximum use of peer support, family, universal options, and other community networks.

Respite care

Working with individuals and family carers, we will develop strengths-based solutions to respite needs, which build on a person's natural networks.

Day opportunities

We will continue to monitor the cost of Day Opportunities and ensure the County Council pays a fair price through transparent commissioning and contracting arrangements.

We will continue to procure through the Hampshire Disabilities Day Opportunities Model (HDDOM) and focus commissioning on HDDOM members who are able to provide high quality support and meaningful activities. You can register at the;

We need providers to think about how they can support people with needs related to ageing. We will also need providers to recognize when they can no longer meet an older person's needs and support transition to a more appropriate environment.

We will need providers who consider the training needs of their staff and work to improve and maintain staff retention.

We will need providers to engage positively with care technology solutions, as an approach to reduce restrictive direct support for people.

Where building-based overnight respite provision is required, the County Council will continue to use its in-house provision in most cases.

[Hampshire County Council Electronic Tendering Site - Home \(in-tendhost.co.uk\)](#)

We will seek provider engagement on our future contractual relationship as HDDOM enters its final extension period.

We will aim to reduce the amount spent on transport for people accessing services. We will seek to support people to use public transport or to make their own transport arrangements wherever possible.



Long-term day care placements will become increasingly focused on those people with the most complex needs and particularly those who live with family carers.

We will work with independent and in-house day opportunity providers to ensure people receive outcomes focused services, with a move toward time limited placements where appropriate.

Day opportunities – what we need from providers

There will be an ongoing requirement for day opportunity services for people with more complex needs who live at home with families. We will seek to provide people with services that are close to their homes, to reduce expenditure on travel.

We will need providers to have a clear service offer which supports people to move toward employment, volunteering, and other socially valued activities.

We will need providers which co-produce their service offer with

people who use services in a meaningful way and who can demonstrate this to the Council when requested.

Providers will need to build tangible links with their local communities, improving their own resilience, demonstrating their wider social value, and providing meaningful opportunities for individuals.

Providers will need to be flexible and provide continuity of care if their buildings-based provision is disrupted for any reason.

Direct payments

More people will be encouraged to take control of their social care and health care through a direct payment. We intend to encourage the growth of these options which will reduce the need for Adults' Health and Care to directly commission services.

We will continue to support people who may lack capacity to manage a direct payment to have access to these opportunities where appropriate. We will continue to embed our new support offer, Virtual Wallet. This is

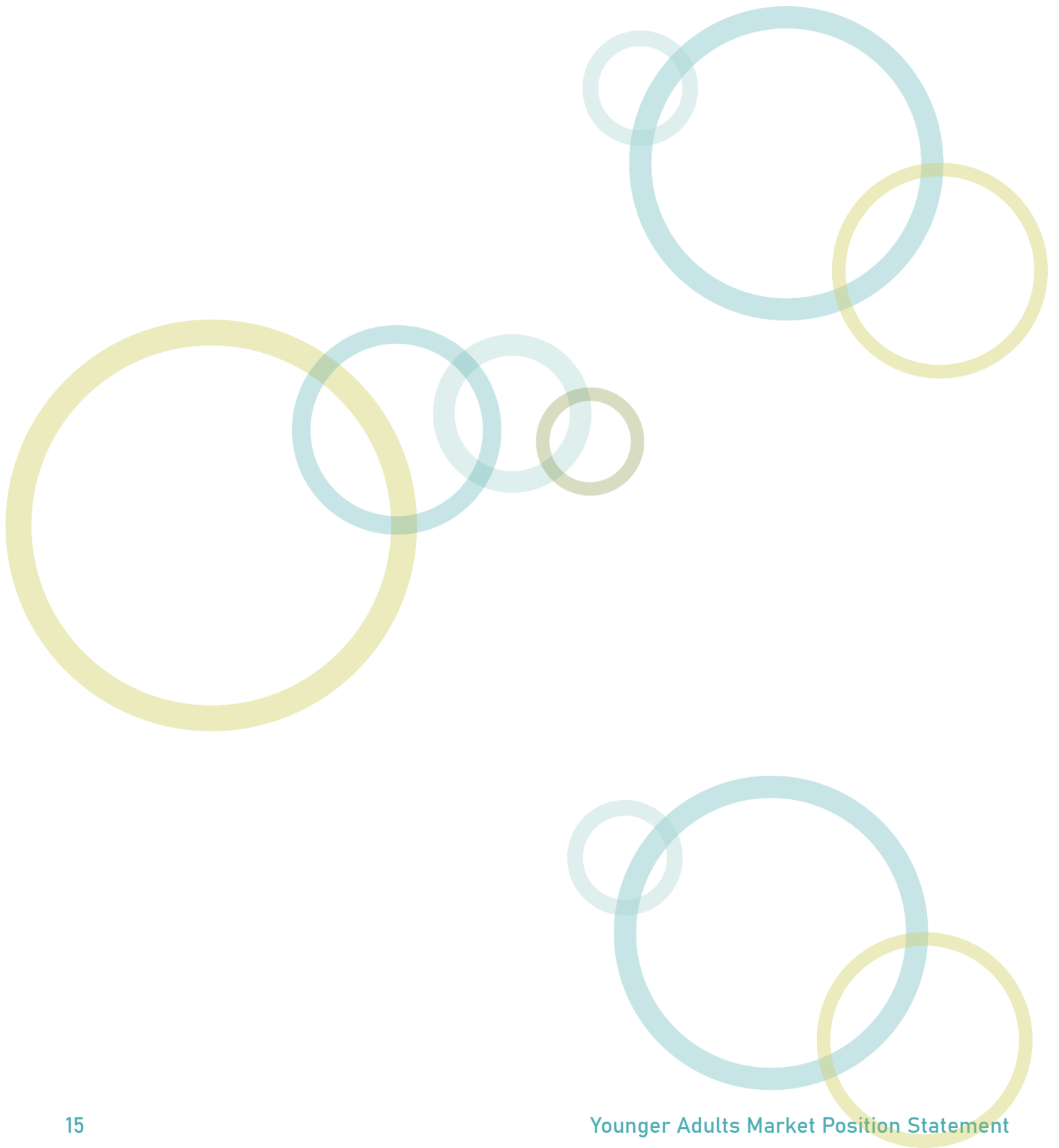
now the default option for new Direct Payment recipients.

We will encourage the growth in the personal assistant care market to respond to increasing numbers of people receiving direct payments.

We will support this further through working with partners to increase the availability of, and access to, training for personal assistants, providing greater assurance of the quality of care.

Pre-paid cards will continue to be deployed as an alternative way to provide personal budgets, as well as

provide managed accounts through our direct payment provider where appropriate.



Resources

While recognising the challenges being faced in the markets, Hampshire County Council continues to face growing and unprecedented financial and workforce challenges. Specific additional funding has been, and continues to be, made available for adult social care but this does not

offset either the real term reductions in overall County Council funding that impacts the Adults' Health and Care Directorate, or the continued pressure placed on budgets by increases in demand and changes in the nature and complexity of the needs faced by individuals in receipt of care.

Financial

The financial pressures on the County Council are significant. The County Council's budget gap sits at £136m, and while this has been managed through a series of successful savings programmes, is predicted to grow year-on-year. In real terms, without intervention, the County Council's available budget to meet growing adult social care needs will reduce further, with the downward pressure on public sector

finances set to continue for some time. That said, the Directorate net budget for 2025/26 still amounts to £596 million and throughout a typical year will be sufficient to support ongoing care services for some 20,000 individuals across a range of different care groups. For more information on the County Councils finances, please visit [Council tax, budget, spending and performance | About the Council | Hampshire County Council](#)

Workforce

Recruitment and retention to roles in direct HCC employment has improved significantly in recent years. Vacancies are now at a lower level and HCC is generally able to fill its agreed staffing establishment. Recruitment in the north of the county and to some qualified roles can still be challenging, for example experienced social workers, occupational therapists, and nurses.

Externally the adult social care workforce currently comprises over 1.67 million people nationally and some 39,000 jobs in Hampshire. Locally, there is a vacancy rate of 10% and turnover rates are high at around 30% creating a significant workforce shortfall. Recruitment and retention of staff has been highlighted by providers as a significant challenge. Adult social care continues to be a

growing sector, and it is predicted that a rise in the workforce will be required over the coming years due to the increased demand from the growing number of older people, higher demand for mental health services and the expanding number of adults with learning and physical disabilities. Growing the workforce to meet anticipated demand will not be fully achievable or affordable.

Therefore, as well as addressing workforce challenges through improving recruitment, retention and training, the County Council will innovate to manage demand. This will include continuing to maximise opportunities for Technology Enabled Care; investing in preventative tools such as the Connect to Support Hampshire website and work closely with providers to ensure demand management approaches are embedded across all aspects of our work areas.

UKVI

In April 2024 the Home Office announced changes for UKVI sponsored Care Workers, including changes to the process for recruiting new sponsored workers requiring providers to attempt to recruit from a displaced workers pool before seeking to sponsor new recruits from overseas. These, and other changes implemented at this time provided greater protection and opportunities for displaced workers, providing better safeguards against modern day slavery. As a result, nationally the UK continued to see the reduction in the number of applications for Skilled Worker and Health and Care Worker visas that started in March 2024 when

new care worker applications became ineligible to bring dependents.

On 12th May 2025, the Government announced a White Paper which proposes an ending of overseas recruitment for social care visas. In the short term the County Council does not expect there to be a significant impact, as any changes should not impact individuals already working in the UK. Longer term, subject to the full process required through Government, this could lead to a reduction in available overseas staff. The County Council will continue to work with the market as these proposals are further developed.

Focus on Learning disability

According to data provided by [PANSI](#) (Projecting Adult Needs and Service Information), the number of people with a Learning Disability in Hampshire is due to reduce slightly in the next three years. This would suggest that the number of people receiving a service from Hampshire County Council is likely to remain the same or reduce slightly as the Council continues to employ strengths-based approaches to reduce dependence on funded care solutions. The Council currently provides a funded service or Direct Payment to approximately 3400 people with a Learning Disability.

People aged 18-64 in Hampshire predicted to have a learning disability, by age	2023	2024	2025	2026	2027
People aged 18-24 predicted to have a learning disability	2,454	2,457	2,482	2,529	2,578
People aged 25-34 predicted to have a learning disability	3,830	3,810	3,770	3,725	3,678
People aged 35-44 predicted to have a learning disability	4,223	4,253	4,268	4,282	4,295
People aged 45-54 predicted to have a learning disability	4,331	4,271	4,254	4,209	4,177
People aged 55-64 predicted to have a learning disability	4,469	4,504	4,512	4,524	4,515
Total population aged 18-64 predicted to have a learning disability	19,306	19,295	19,286	19,269	19,243

Current service provision

Residential And Nursing Care

HCC currently fund 613 LD placements, with 455 of these within Hampshire borders, including the unitary authorities of Portsmouth and Southampton.

The National Capacity Tracker indicates 1230 LD Residential and Nursing beds in Hampshire (including the unitary authorities) suggesting that Hampshire County Council

Given the supply and demand data outlined above, the Council is not planning to develop significant numbers of new Residential Care services and will focus on ensuring that current provision remains able to meet needs. However, there are some areas where service gaps still exist. Emergency and crisis accommodation for people with complex needs remains difficult to source at times and the Council will continue to focus on this area. Additionally, as the health outcomes for people with learning

commission around 37% of the total bed capacity, indicating significant and ongoing over supply. There has been a significant slow-down in the number of new LD Residential Care homes coming online in the past five years, which is reflective of the Council's communicated strategic preference for Supported Accommodation as the best option for long term accommodation and support.

disabilities improve, we are finding increasing numbers of people with learning disabilities living into older age. We need providers who can meet the age-related needs of this cohort whilst also having the right skills to work with people with learning disabilities. The Council is particularly keen to engage with providers in the Older Adult sector who may be interested in developing or re-purposing parts of existing services for this purpose.

Supported Accommodation

The Council commissions supported living services for approximately 1100 people with a learning disability at 305 locations, with most services delivered within Hampshire borders. The majority of provision is delivered under long term contracts procured through our HADSOM procurement vehicle, with a smaller number of spot-purchased arrangements, including out of county placements.

Over the last ten years the Council has been investing in 'Extra Care' type accommodation which are typically small blocks of flats or core and cluster accommodation which provide people with their own front door, often with the benefits of some communal space. This is now the preferred model.

However, the majority of Supported Accommodation is still delivered in shared houses, typically between 4 and 6 beds. The Council will continue to engage with care providers, landlords and service users to review the Supported Accommodation estate and make best use of the accommodation available. We too

remain keen to engage with partners who may have Extra Care type accommodation available. Providers that are interested in providing these services should ensure that they are signed up to the HADSOM procurement vehicle as this will remain the primary channel for tender opportunities of this type until 2030

Home Care

The Council commissions Domiciliary Care for 475 people with a Learning Disability. The Council has long term contracts in place with three providers for the provision of enablement services to people with learning disabilities which includes home care provision. These providers will remain the Council's primary providers for the duration of those contracts. Additionally, the Council is seeking to

utilise the forthcoming Help 2 Live at Home Framework to provide a secondary pool of skilled providers who are also able to take referrals for people with Learning Disabilities. Any provider interested in the provision of homecare should consider joining the Framework as the Council will be seeking to reduce spot purchasing arrangements to zero over time.

Day Services

There are circa 890 people with a Learning Disability attending an independent sector building based day service, more than at any previous time. The amount of provision available is broadly sufficient to meet needs, and the Council is not seeking any significant increase of provision in this area.

The Council's quality assurance and procurement vehicle for Day Services, HDDOM, is now in its final extension period. The Council will be engaging with providers to design a new model through 2025 and into 2026. The Council will need providers who are able to move people through services into volunteering, work, and other meaningful activity. We will be exploring commercial models which support this approach.

What Self Advocates from the Hampshire Learning Disability Partnership told us

- We want providers that really understand what Person-Centred Care and Support us.
- We want them to understand that everyone's support plan is different.
- We need staff to have read and understood our support plans and know how we need to be supported.
- We need staff that take time to understand how to communicate with us and really listen to what we have to say.
- We need providers who train their staff properly to meet our specific needs.
- We need to know what is happening with our support staff.
- If the staff rota must change, we need providers to keep us informed about that and tell us who the replacement will be.
- We hope to have regular support from people we can build a relationship with, so we get to know each other.
- We just want good quality support!



Focus on Physical Disability

According to data provided by [PANSI](#) (Projecting Adult Needs and Service Information), the number of people with a moderate to serious personal care disability in Hampshire is due to reduce slightly in the future. This would suggest that the number of people receiving a service from Hampshire County Council is likely to remain the same or reduce slightly as the Council continues to employ strengths-based approaches to reduce dependence on funded care solutions. The Council currently provides a funded service or Direct Payment to approximately 1700 people with a Physical Disability.

We are seeing an increase in the complexity of people's needs, with many people experiencing some degree of co-morbidity and complex social circumstances.

People aged 18-64 predicted to have a moderate or serious personal care disability, by age, projected to 2040	2023	2025	2030	2035	2040
People aged 18-24 predicted to have a moderate personal care disability	547	554	614	617	577
People aged 25-34 predicted to have a moderate personal care disability	2,153	2,120	2,026	2,090	2253
People aged 35-44 predicted to have a moderate personal care disability	4,962	5,008	5,049	4,924	4704
People aged 45-54 predicted to have a moderate personal care disability	9,001	8,825	8,604	8,879	8928
People aged 55-64 predicted to have a moderate personal care disability	17,301	17,477	16,799	15,655	15391
Total population aged 18-64 predicted to have a moderate personal care disability	33,964	33,983	33,092	32,165	31853
People aged 18-24 predicted to have a serious personal care disability	364	369	409	411	385
People aged 25-34 predicted to have a serious personal care disability	615	606	579	597	644
People aged 35-44 predicted to have a serious personal care disability	1,027	1,036	1,045	1,019	973
People aged 45-54 predicted to have a serious personal care disability	2,021	1,981	1,932	1,993	2004
People aged 55-64 predicted to have a serious personal care disability	3,342	3,376	3,245	3,024	2973
Total population aged 18-64 predicted to have a serious personal care disability	7,369	7,368	7,210	7,045	6979

Current service provision

Residential And Nursing Care

HCC currently fund 126 Residential Care placements for people with Physical Disabilities and 92 Nursing Placements. There are a limited number of specialist homes for people with Physical Disabilities in Hampshire, with the majority of beds provided in what would be regarded as Older Adult care homes.

Of the 126 Residential Care placements, 61 are people under the age of 55. This is an area of particular focus for the Council.

Whilst Residential Care may be an appropriate option in some circumstances, we need Residential Care providers that have the right skills to help people to move onto more independence including sourcing appropriate accommodation.

The Council is currently assessing the requirement for more specialised and potentially short-term Residential Care services for people with Physical Disabilities and other needs.

Supported Accommodation

The Council commissions specialised supported accommodation services for 31 people with a Physical Disability. These packages are generally either in or attached to larger Extra Care type schemes rather than shared accommodation. The Council is currently assessing the requirement for more Supported Accommodation units for people with Physical

Disability, and this remains an area for potential further development. Providers that are interested in delivering these services should ensure that they are signed up to the HADSOM procurement vehicle as this will remain the primary channel for tender opportunities of this type until 2030

Home Care

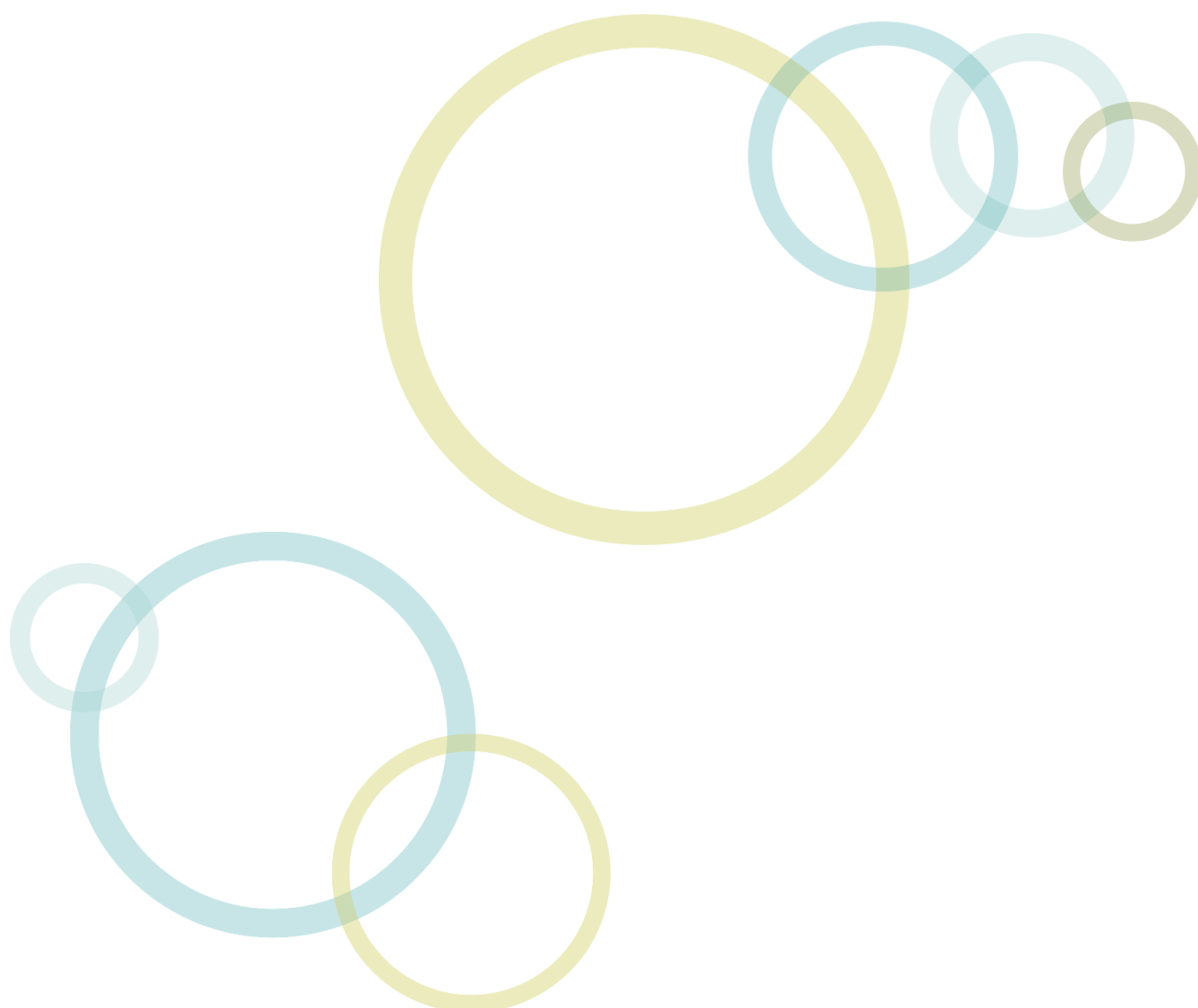
The Council commissions Domiciliary Care for 831 people with a Physical Disability. These services are predominantly provided via the County Councils' Homecare Frameworks, and we will use the forthcoming Help 2 Live at Home Framework with a view

to reducing spot purchasing to close to zero. Any provider interested in the provision of homecare should consider joining the Framework as the Council will be seeking to reduce spot purchasing arrangements to zero over time.

Day Services

There are 169 people with a Physical Disability attending an independent sector building based day service. The majority of this provision is via Day Service providers that may be considered to specialise in Learning Disability Services or services attached to Extra Care schemes. There are a small number of specialist Physical Disability services. The amount of provision available is broadly sufficient to meet needs, and the Council is not seeking any significant increase of provision in this area.

The Council's quality assurance and procurement vehicle for Day Services, HDDOM, is now in its final extension period. The Council will be engaging with providers to design a new model through 2025 and into 2026. The Council will need providers who are able to move people through services into volunteering, work, and other meaningful activity. We will be exploring commercial models which support this approach.



Focus on Mental Health

According to data provided by [PANSI](#) (Projecting Adult Needs and Service Information), the number of people with a Mental Health issue in Hampshire is due to reduce slightly in the future. This would suggest that the number of people receiving a service from Hampshire County Council is likely to remain the same or reduce slightly as the Council continues to employ strengths-based approaches to reduce dependence on funded care solutions. It should be noted that we are seeing an increase in the complexity of people's needs, with many people experiencing some degree of co-morbidity and/or extremely complex social circumstances.

The Council currently provides a funded service or Direct Payment to approximately 662 people with a Mental Health issue. Due to the nature of the social work offer in Hampshire, significant numbers of people with a Mental Health issue benefit from therapeutic intervention from Community Teams, without a funded service. Additionally, care packages may also include an element of NHS funding through s117. This can be an area of complexity, and the Council continues to work with NHS Commissioners to provide pragmatic solutions for service providers.

People aged 18-64 predicted to have a mental health problem, by gender, projected to 2040					
Mental health - all people	2023	2025	2030	2035	2040
People aged 18-64 predicted to have a common mental disorder	151,072	150,833	149,457	148,130	147,179
People aged 18-64 predicted to have a borderline personality disorder	19,180	19,149	18,974	18,806	18,686
People aged 18-64 predicted to have an antisocial personality disorder	26,486	26,430	26,184	25,971	25,837
People aged 18-64 predicted to have psychotic disorder	5,576	5,566	5,515	5,467	5,434
People aged 18-64 predicted to have two or more psychiatric disorders	57,386	57,287	56,762	56,269	55,926

Current service provision

Residential And Nursing Care

HCC currently fund 208 MH Residential placements, and 36 MH Nursing placements, with the majority of these within Hampshire borders, including the unitary authorities of Portsmouth and Southampton.

The average age of people in MH Residential Care placements is 55,

with 123 of the 208 placements aged 55 or above. This indicates a need for potential alternative services as age related needs become more prominent for this cohort. We will need providers that can effectively manage mental health needs alongside frailty.

Supported Accommodation

The Council commissions a short term (up to 2 years) Supported Accommodation pathway for people with Mental Health needs. This provides 153 beds at 30 supported accommodation locations, across Hampshire, with contracts in place (if all extensions are taken up) until 2031.

The County Council also commissions long term Supported Accommodation for people with Mental Health needs,

with 215 packages in place. Given the relatively high number of people in Residential Care, this will be an area for continued focus. Providers that are interested in delivering these services should ensure that they are signed up to the HADSOM procurement vehicle as this will remain the primary channel for tender opportunities of this type until 2030.

Home Care

The Council commissions Domiciliary Care for 182 people with a Mental Health issue. This has been an area of challenge for the County Council, with approximately 45% of MH Domiciliary Care currently spot purchased.

The County Council is seeking to address this through the forthcoming

Help 2 Live at Home Framework. Any provider interested in the provision of MH homecare should consider joining the Framework as the Council will be seeking to reduce spot purchasing arrangements to zero over time.

Day Services

Day Services are not a significant area of service provision for people with Mental Health issues, with just 36 packages currently, almost exclusively delivered via Extra Care services, with an average participant age of 60.

The Council's quality assurance and procurement vehicle for Day Services, HDDOM, is now in its final extension

period. The Council will be engaging with providers to design a new model through 2025 and into 2026. The Council will need providers who are able to move people through services into volunteering, work, and other meaningful activity. We will be exploring commercial models which support this approach.



A note on Autism

The County Council does not use Autism specific markers in its case management system, so is unable to report on how many Autistic people are using services. Our Community Social Work offer is based on the principle that 'Autism is everybody's business' with Autism champions across all our Learning Disability, Physical Disability and Mental Health teams.

Similarly, we need providers in all sectors to recognise that they will be working with Autistic people on a daily basis. We need staff that have the requisite skills and training to provide

effective support to Autistic people across all services.

The County Council continues to support the Hampshire Autism Partnership Board. Providers that are interested in becoming associate members of the Board can find more information here [Hampshire Autism Partnership Board | Health and social care | Hampshire County Council](#)

Additionally, the County Council has been happy to contribute to the [Hampshire Mental Health and Charter for those on the Autistic Spectrum](#). We would encourage all providers to consider signing up to this charter.

Our Pledge to You

1

Transparent
Sharing out future plans to help you shape your business

2

Fair
Paying sustainable rates within the money we have available

3

Efficient
Automating payments and streamlining processes

4

Enabling
Bringing you together to encourage innovation, drive up quality and foster resilience.

The way forward: outline timetable

Date	Actions
2025/26	Provider engagement on future contractual relationship in Residential and Nursing Care
2025	Provider engagement on future options for HDDOM replacement
Ongoing	Programme of de-registration of residential care homes through the Hampshire De-registration Partnership Register (HDPR).
Ongoing until 2030	Call offs from HADSOM for accommodation, care, and support contracts for specific supported accommodation developments.
Ongoing	Use of Southeast region cost model for residential care costs.
Ongoing	Working with older person providers to increase the number of Extra care, residential and nursing beds available to people with disabilities and autistic people who are ageing.

If you are a provider considering new service development for working age adults in Hampshire, please contact ahc.ldmhcommissioning@hants.gov.uk to learn more about our Frameworks, provider forums and planned procurement activity.

