Bath & North East Somerset Council

Improving People's Lives

Live Well – Physical Disabilities, Acquired Brain Injury and Sensory Support Services

Market Position Statement 2026–2029

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Foreword

I am pleased to introduce the physical disabilities and sensory impairment Market Position Statement for Bath and North East Somerset.

This document sets out our understanding of local needs, current market provision and our ambitions for the future adult social care market between 2026 and 2029. People with physical disabilities and sensory impairments should be able to live independently, remain connected to their communities and access high-quality support that is personalised, accessible and outcome focused.

This statement provides information for providers and partners on the opportunities, challenges, and priorities that will influence commissioning activity and shape the future development of the local care and support market.

Natalia Lachkou

Assistant Director for Commissioning

B&NES Council

Introduction

This Market Position Statement is intended to provide information and guidance to current and potential providers of adult social care services supporting working aged adults with physical disabilities and sensory Impairment in Bath and North East Somerset, as well as people who draw on support, and their families, carers, and advocates.

The purpose of this document is to:

- Share our vision and objectives for Adult Social Care in Bath and North East Somerset.
- Describe the local population and what helps people to live well.
- Explain how care and support services are currently used and where demand is increasing.
- Summarise our commissioning priorities and approach.
- Outline our expectations and standards for quality and outcomes.
- Describe the opportunities and challenges for the care market.

We hope that this document will help you to understand the current and future landscape of Adult Social Care in Bath and North East Somerset and how we plan to work with you to shape a diverse, sustainable, and high-quality market that meets the needs and aspirations of our local population.

We have also identified market opportunities, which are highlighted throughout this document, to help providers understand where there are gaps in our market and we would be happy to work with providers to help deliver in these areas. This document will be updated regularly as needs, evidence, and feedback change.

We welcome your views and comments on this document, and we invite you to engage with us in an ongoing dialogue to develop and improve adult social care services in Bath and North East Somerset.

For more information, you can contact us by email at:
commissioning@bathnes.gov.uk

Developing this Market Position Statement

This statement draws upon population data, service utilisation information, provider market analysis and commissioning recommendations contained within the physical disabilities and sensory impairment needs analysis.

This statement has been developed through analysis of local data, service use, population projections and engagement with providers and partners across the system. The focus has been on building a shared understanding of the current offer, identifying gaps and pressures, and shaping clear strategic ambitions for the future physical disabilities and sensory impairment market in Bath and North East Somerset.

Drawing on this combination of data, learning and engagement, we brought together the evidence and strategic direction to shape this document. The resulting Market Position Statement sets out the Council's key intentions and aspirations and is intended to support planning, innovation and service development across the local care and support market, helping to ensure services continue to meet the needs of people in Bath and North East Somerset both now and in the future.

Definitions and Scope

There is no single, universally accepted definition of disability. For the purposes of this document, the definition set out in the Disability Discrimination Act 1995 has been adopted:

"A physical or mental impairment that has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities."

Within this document, the term **disabled people** refers to individuals with one or more physical impairments, sensory impairments, or long-term conditions. These may be present from birth or acquired at any stage of life. In line with the Disability Discrimination Act, disabilities may be temporary or long term, stable or fluctuating in nature.

This includes, but is not limited to, people who are:

- **Physically disabled**, including those with impairments affecting the musculoskeletal system.

- **Visually impaired**, including sight impaired (partially sighted) and severely sight impaired (blind).
- **Hearing impaired**, including people who are hard of hearing, use hearing aids, are deaf, or identify as members of the Deaf community.
- **Deafblind (Dual sensory impairment)**, the loss of sight and hearing to the point communication, mobility, ability to access information and daily living are impacted.
- **Living with acquired brain injuries**, resulting from trauma, stroke, acute illness, or the progression of existing conditions.
- **Cognitive Impairment,** brain injury resulting from acquired brain injury (ABI) is an injury caused to the brain since birth or traumatic Brain Injury (TBI) caused by a trauma to the head (head injury).

About Bath and North East Somerset

Bath and North East Somerset (B&NES) is a unitary authority located within the South West of England with a population of around 201,000 people (as of 2024). The population of B&NES is expected to increase to 216,000 by 2034 with the largest increase in the over 65 population.

B&NES joined with Swindon and Wiltshire to form an Integrated Care System called BSW Together joining the local NHS services, local authorities, and stakeholder organisations in developing an Integrated Care Strategy for this region.

As well as the Integrated Care Strategy, B&NES Council has also produced a Corporate Strategy 2023-2027 that incorporates our responsibilities and plans around Adult Social Care.

B&NES Council is responding to financial pressures while continuing to prioritise support for residents. Our Medium-Term Financial Strategy explains how we are addressing this, which includes savings to be delivered within Adult Social Care.

In addition, the B&NES Health and Wellbeing Board, which includes representatives across different sectors working within B&NES, have produced a Joint Health and Wellbeing Strategy 2023-2030. This strategy was informed by our Strategic Evidence Base.

ASC Vision and Strategy

Our vision for Adult Socia Care in B&NES is for people who draw on care and support to live in the place they call home, with the people and things they love, in communities where they belong, with the right support at the right time.

We will achieve this through three Commitments:

- Internal/Practice Offer: We deliver a service that empowers people to get the support that is right for them. We use a quality assurance framework to maintain high standards and learn from feedback.

- External/Community Offer: We recognise the value of the communities, assets, and resources available locally to support residents to be active and fulfilled citizens, including the vital role played by the Community Wellbeing Hub. We use our organisational influence to support fair and equitable access to opportunities for residents.

- Provider/Market Offer: We are focused on the delivery of high-quality support that helps people to progress and to lead enjoyable and meaningful lives. We will be bold, ambitious, innovative, and adaptable to support people to live the lives they want to lead.

This aligns with the wider Adult Social Care strategy and is underpinned by five principles:

- Safe – We will be bold in our decision making and empower staff to ensure the safe delivery of services and understand the impact of their decisions on people. We will work with partners to build a shared ethos of delivering quality services and safeguards people from harm.

- Effective – We will collaborate with stakeholders to co-produce services in response to population needs, learning and adapting our approach together. Our priority will to be to ensure services are delivered in the most effective way working with strength-based practice and person-centered assessments.

- Caring – We will enable people to live fulfilling and meaningful lives and focus on people as people. We will promote kindness and compassion by listening to understand their needs, wants and ambitions.

- Responsive – We will support a positive approach to managing risk avoidance to support people to build on their capacity and strengths to manage risk. We will work with partners to develop a supportive network, working as one team, which will learn together.

- Well Led – We will be building on our organisational culture to embed our workforce culture built on mutual respect and shared values. We will ensure our staff continue to feel supported and empowered, which delivers our organisational values.

These principles guide our expectations of providers and our commissioning approach.

Our Commissioning Pledges

We have developed commissioning pledges that are aligned to our vision and strategy, as well as with national policies and legislation such as the Care Act 2014, the NHS Long Term Plan, the Social Care Reform White Paper and the Adult social Care Priorities for Local Authorities (2026-2027) policy paper.

- We will keep the residents of B&NES at the centre of our thinking.
- We will follow the commissioning cycle of Assess, Plan, Do, Review.
- We will listen to as many views as we can and build them into our plans.
- We will work with and across the Council and Integrated Care Alliance and, where appropriate, Integrated Care System joining Swindon and Wiltshire.
- We will be looking for best value outcomes for the whole system.
- We will tackle today's challenges looking towards solutions for the future.
- We believe in doing things together and will seek ways to make that real.

About Adults with Physical Disabilities, Cognitive (brain injury) and Sensory Impairment in B&NES

Population and Prevalence

- Self-reported disability among adults in B&NES, aged 16–49, increased from 7% to 13% between 2011 and 2021.
- In the UK, 42% of working-age adults (aged 65 and under) with disabilities have mobility impairment.
- Overall physical disability prevalence in the population has risen, particularly in younger working age groups where rates have almost doubled in the past decade.
- Data projections suggest an increase in people with complex needs, including physical disabilities as the population increase and ages.
- There were 29,867 UK hospital admissions for acquired brain injury (ABI) in the South West in 2023-24. 4734 of these were in the Bath and North East Somerset, Swindon and Wiltshire NHS Integrated Care Board area.
- Since the COVID-19 pandemic, the UK has seen an overall decline in acquired brain injury (ABI) hospital admissions, driven primarily by a substantial reduction in head injury admissions. However, while head injury admissions have fallen, hospital admissions for stroke and brain tumours have continued to rise, reflecting a changing profile of ABI-related demand on health services.
- Approximately 35,000 people in B&NES are living with hearing loss.
- It is estimated there will be a 16% increase in the number of adults in B&NES with some or severe hearing lost by 2035.
- Over 1,000 people are registered with visual impairment.
- The number of people who have sight loss that significantly impacts their daily life is set to increase by a third by 2030.
- The number of people with dual sensory impairment is projected to increase by approximately 35% by 2035.
- The prevalence of visual and hearing impairment is greater in adults with a learning disability than the general population.
- An estimated 40% of people with a learning disability have hearing impairment.

Current Market Capacity - Specialist Services supporting adults with a physical disability and cognitive impairment (brain injury)

All data is for 2025/2026, unless otherwise stated.

- 54 working age adults with primary support reason of physical support were supported by adult social care in B&NES, this included 12 working age adults with brain injury.
- Many adults with a physical disability have additional support needs including mental health, learning disabilities, and sensory impairment.
- There is a shortage of accessible accommodation across the housing pathway, including general needs housing, supported living provision, and specialist housing options.

Community Based Services

- **Shared Lives** connects individuals requiring support with approved carers within their local community. The person receiving support lives in the carer's home on a full-time basis, which may be for a few months or on a longer-term arrangement. Shared Lives supports 2 people of working age with physical support as a primary support need.
- **Community-based day services** are structured daytime activities that promote skills, social inclusion, and wellbeing outside the home. Day services support 9 people with physical disabilities across 5 services and 10 people with brain injuries in 1 specialist service.
- **Outreach (non-accommodation based supported living)** provides support to enable individuals to live in either their own flats or shared accommodation. Outreach supports 14 people with physical disabilities across 5 services and 10 people with brain injuries were supported by one specialist provider.
- **Direct Payments** offer people more choice, control, and flexibility in the way their support is provided and managed. 31 people receive direct payments, supporting choice and control.

Accommodation based Support

- **Supported Living (accommodation based)** is any scheme where housing and care and support services are provided as an integrated package. This support will comprise a level of core/daytime support and/or an element of sleep-in and/or wake-in and/or additional hours. 3 people with physical disabilities are supported in accommodation base supported living, of which 2 are in area placements.

- **Care homes** are a residential facility providing 24/7 personal care and support and respite. 6 working age adults are supported in care homes, 3 of which are in area placements.

Current Market Capacity - Specialist Services supporting adults with sensory impairment

- 39 working age adults with sensory impairment as a primary support need were supported by adult social care in B&NES in 55 placements. 23 have hearing impairment, 10 visual impairment and 6 dual sensory impairment.
- Of the adults with a sensory impairment who were supported in B&NES, 41% have a learning disability and/or autism, and approximately 5% a physical disability.
- Data from the adult social care database indicates demand for social care services for adult with sensory impairment is stable however, data projections suggest an increase in people with complex needs as the population increases and ages.
- The specialist sensory impairment provider market in B&NES is small and limited, with 4 specialist hearing and visual impairment providers.
- One specialist provider supports adults who solely have hearing or dual impairment.
- Three providers deliver support to individuals with complex needs including learning disability and autism and a sensory impairment.
- The other providers who support individuals are Live Well providers who also support adults with a learning disability and autism, mental health and general needs care home which are registered for sensory support.
- The small specialist sensory impairment market means B&NES will need to maintain and develop specialist provider capacity, particularly for people who use BSL as their first language, people with dual sensory impairment, and people with co-occurring learning disability, autism, physical disability, mental health or communication-related needs.

- There is limited availability of suitable accommodation across the housing pathway, including accessible general needs housing, accessible supported living and specialist housing options.

Community Based Services

- **Community-based day services** support 14 people in 4 services, one of which is provided by a specialist sensory impairment provider.
- **Outreach (non-accommodation based supported living)** provides support to 25 people with sensory impairment. The majority have hearing impairment and are supported by one specialist provider in B&NES.
- **Direct Payments** - Seven people received direct payments in 2025/2026.

Accommodation based Support

- **Supported Living (accommodation based)** provides accommodation for 2 people who are supported in specialist accommodation base supported living out of area.
- **Care homes** - Five care homes support 6 working age adults with sensory impairment. These services are delivered by 4 provider and 4 of the 5 specialist care home are located out of area.
- **Extra Care Housing** is self-contained properties let on assured tenancies with a range of communal facilities. Suitable for people aged 55 or over who do not need 24-hour supervision but can no longer live on their own. There is 24-hour support on site, if required. Currently 1 Individual aged 59 with hearing impairment and 1 individual with a visual impairment, aged 66, are supported in Extra Care Housing.

Commissioning Intentions

Strategic aims for services to support people physical disabilities, acquired brain Injury and sensory impairment in B&NES are to:

- Embed personalisation, choice and control, and co-production into service delivery, including through Individual Service Funds where appropriate, so people shape how their support is designed, delivered and reviewed.
- Expand community-based support that enables independence, strengthens community connections and supports people to live the lives they choose, building on people's strengths and local networks to help prevent needs from escalating.
- Develop innovative, technology-enabled and person-led approaches that promote independence, self-directed support and fulfilling lives, helping people build or regain skills and confidence through enablement and assistive technology where appropriate.
- Increase access to flexible housing, care and support options that help people remain independent and adapt to changing needs and aspirations, including mainstream housing, supported living and extra care, through stronger relationships with housing, planning and provider partners.
- Move away from spot purchasing arrangements towards long-term commissioning frameworks that promote innovation, flexibility and sustainable service models, building strategic provider relationships and enabling care delivery to adapt as people's needs change.

These areas represent clear market opportunities where we welcome provider engagement and collaboration to shape future plans.

Market Opportunities

Market Opportunity 1: Supported Living Expansion

We are seeking to collaborate with providers to develop new supported living capacity within B&NES to reduce reliance on out-of-area placements, particularly for:

- People with sensory impairment who may need more support, particularly for people who use BSL as their first language, people with dual sensory impairment, and people with co-occurring learning disability, autism, physical disability, mental health or communication-related needs
- Young people transitioning from children's services.
- People with physical disabilities who require accessible accommodation.

This may involve the development of new schemes and helping providers to deregister residential care homes into supported living units. Moves from residential placements to supported living will continue to be supported wherever possible.

We are particularly interested in small-scale, community-based models that enable people to live independently with flexible support which can flex as people's needs and goals change.

Market Opportunity 2: Specialist and Inclusive Services

There is a clear gap in local provision for:

- People with a learning disability who use British Sign Language (BSL) as their first language.
- Extra Care Housing for adults with sensory impairment.

There is a desire to develop the sensory impairment provider market and welcome proposals from providers who can develop specialist, inclusive and culturally appropriate services that address these needs within B&NES.

Market Opportunity 3: Long-Term Commissioning Frameworks

B&NES Council intends to move away from spot purchasing arrangements and develop long-term commissioning frameworks from 2026 onwards.

Providers will have opportunities to:

- Engage in the design of future service models and specifications.
- Help shape outcomes-focused, flexible frameworks.
- Support market sustainability and workforce stability.
- Early engagement with the market will inform the scope and structure of future procurement activity.

Market Opportunity 4: Community-Based and Preventative Support

We are seeking to expand community-based and preventative support that:

- Increases use of direct payments and Individual Service Funds.
- Promotes independence, social inclusion, and meaningful activity.
- Uses assistive and enabling technology to reduce reliance on accommodation-based care.
- Providers who can demonstrate innovative approaches aligned to personalisation and prevention are encouraged to engage with us.

Co-production

We are committed to increasing co-production with people with lived experience, families, carers, and providers. Future commissioning activity will actively seek to involve partners in shaping service models, specifications, and outcomes.

B&NES Council is focused on working with stakeholders to deliver improvements in the way services are commissioned and delivered in future. We work with our commissioned providers to ensure that they regularly seek feedback from people receiving support to ensure services are person-centred and can deliver continuous improvement.

We seek to model these behaviours within our own practices, consulting with stakeholders during the commissioning process, having regular discussions with partner organisations and taking the time to speak to people who access the services we are responsible for.

We operate a You Said We Did approach to our engagement activities so that we can feedback on what we have heard and how we have acted upon on the feedback we have received.

As we move forward to the next round of commissioning activity, we will identify opportunities to co-produce this with all the partners and stakeholders involved so we can develop innovative solutions to the growing challenges we face.

Our Commitment to Providers

B&NES Council commits to:

- Work in partnership with providers in B&NES in a collaborative, honest and open way, which will ensure we deliver high-quality support for people in B&NES.
- Receive payment on time for services delivered. B&NES Council has invested in IT systems that support automatic payments, ensuring providers are paid correctly and in a timely manner.
- Providing free quarterly provider forums. There are separate forums for Live Well providers (including LD&A providers), care home providers, and home care providers, so that agenda items can be tailored appropriately and will be an opportunity for providers to engage directly with commissioners and other guest speakers.
- Access to dedicated support when required. Each provider and/or service will have access to a dedicated commissioner that they can contact for support when needed. Opportunities to shape future commissioning.
- Support from the Care Skills Partnership in accessing Workforce Development Funding.
- Support with the management of safeguarding issues.
- Provide opportunities to be involved in strategic projects that can help make a real difference to people's lives.