

Oldham Capacity and Demand Profile

May 2025

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1 Introduction

Oldham Council's Capacity and Demand Profile contains information and analysis that is useful to providers of adult health and social care and support services in Oldham. The council works closely with our partners in the Greater Manchester Integrated Care Board's Oldham team (GM ICB) and this document has been produced in consultation with them, to provide a comprehensive view of the needs of the local adult social care market.

The document identifies what the future demand for care and support might look like and is a starting point for discussions between the local authority and those who provide services.
It covers:

- What Oldham looks like - Current and future demographics
- Information about the volume and types of services we currently commission
- The Council's intentions as a facilitator of care and support for adults

The statement should be read alongside the Commissioning Approach, the Commissioning Delivery Plan and the service specific Commissioning Position Statement, all of which will provide a full indication of how we work with providers, our current gaps and commissioning intentions and combined make up our Market Position Statement.

2 About Oldham

Population

246,130

The total population of Oldham
2023 ONS Mid-Year Estimates.

Deprivation

35.0%

The percentage of areas in
Oldham among the 10% most
deprived areas in England (7 out
of 10 wards).

Life Expectancy

80.1

This is the average life
expectancy of a woman living in
Oldham today.

Growth

5.2%

The percentage that Oldham's
population is expected to
increase by 2033.



Total population

The population of Oldham is **246,130** (2023 Mid Year Estimates).

- **22.7%** aged under 18
- **61.4%** aged 18-64
- **15.9%** aged 65+

The age structure of Oldham is relatively youthful with a high proportion of residents aged under 18 (**22.7%**). Since 2001, the population across Oldham and England has aged, with more people aged over 65 and fewer under 18s. This change has been influenced by a decrease in the birth rate and an increase in the average life expectancy.

Source: ONS Mid Year Estimates 2023.



Population projections 2023-2040

There will be over the next ten years:

- A **5.1%** increase in those aged under 64.
- A **22.7%** increase in those aged 65-84.
- A **43.8%** increase in those aged over 85.

Given the growth in Oldham's over 85 population over the next ten years there will be significant changes in demand of adult social care and health provision.

Source: POPPI and PANSI



Life expectancy 2020-2022

Life Expectancy

Oldham's life expectancy is significantly lower than the average in England.

- For men it's 76.3 years compared to the national average of 78.9
- For women it's 80.1 years compared to the national average of 82.8

Healthy Life Expectancy

Oldham's healthy life expectancy is also significantly lower than the average in England.

- For men it's 56.6 years v national average of 63.1
- For women it's 58.2 years v national average of 63.9

Source: ONS, calculated by OHID



Deprivation & Inequality

On average, those living in the most deprived areas of Oldham can expect to live shorter lives than those in the least deprived.

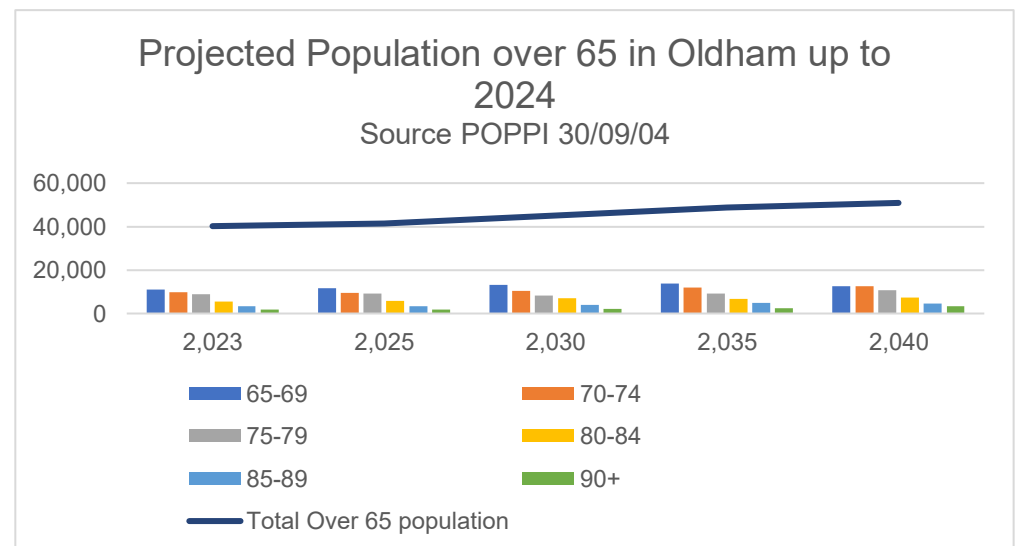
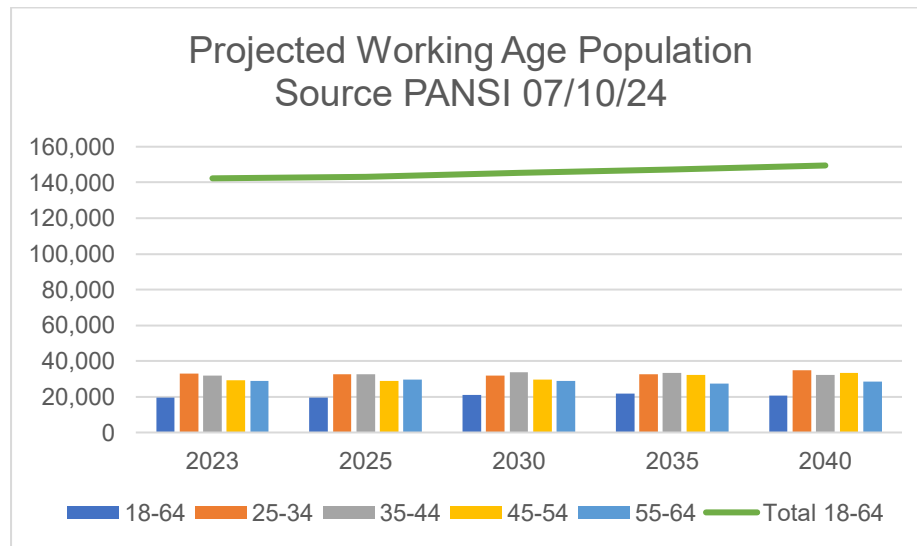
Between Alexandra (Most deprived) and Saddleworth South (Least deprived) the difference is:

- **12.7** years for males.
- **12.8** years for females.

Source: Local Health

3 Oldham Demographics

3.1 Population Growth by Age Profile

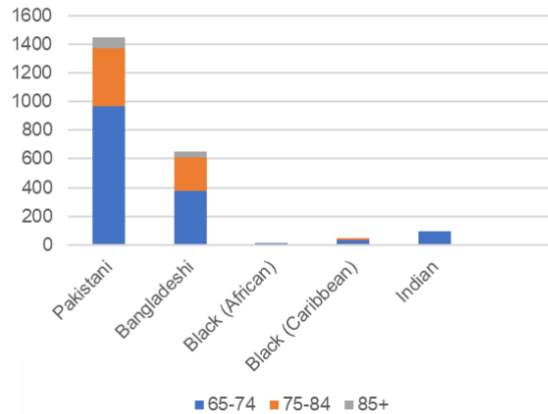


POPULATION GROWTH

- The working age population is predicted to increase by 5.06% by 2040 but does not see consistent increases in all age cohorts. The smallest age cohort is the 18-24 age group which is predicted to decline by 2040. Although it is useful to consider the wider population only a small proportion of people require services from Adult Social care during their working age.
- The over 65 population is predicted to grow by 26.62% by 2040. The percentage of the Oldham population who are over 65 is projected to increase from 16.58% in 2023 to 19.58% in 2040. This is a growth of over 10,000 people.
- The percentage of the Oldham population over 85 is projected to increase by 43.81% by 2040, representing 2.06% of the total population in 2023 to 3.00% by 2040.
- Information from the Partners in Care “Use of Resources” document confirms that as an area with high levels of deprivation, deprived areas not only see a lower life expectancy but also see a higher proportion of older people being supported with long term care.
- The Oldham Integrated Care Partnership (ICP) 2024/25 delivery plan articulates that this can be attributed to damp and poorly insulated homes, lack of physical activity, poor diet, high rates of smoking, drug and alcohol use and high levels of stress. At a local level this is evidenced through high rates of long-term conditions such as diabetes, asthma, Chronic Obstructive Pulmonary Disease (COPD) and also high rates of lung cancer.

3.2 Ethnicity

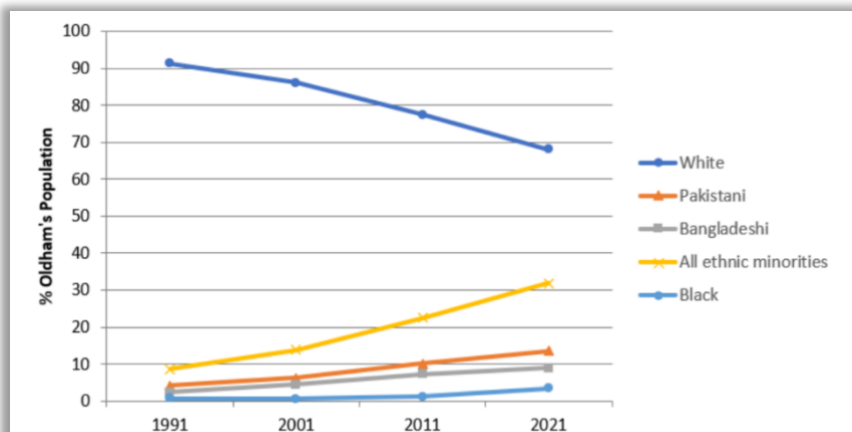
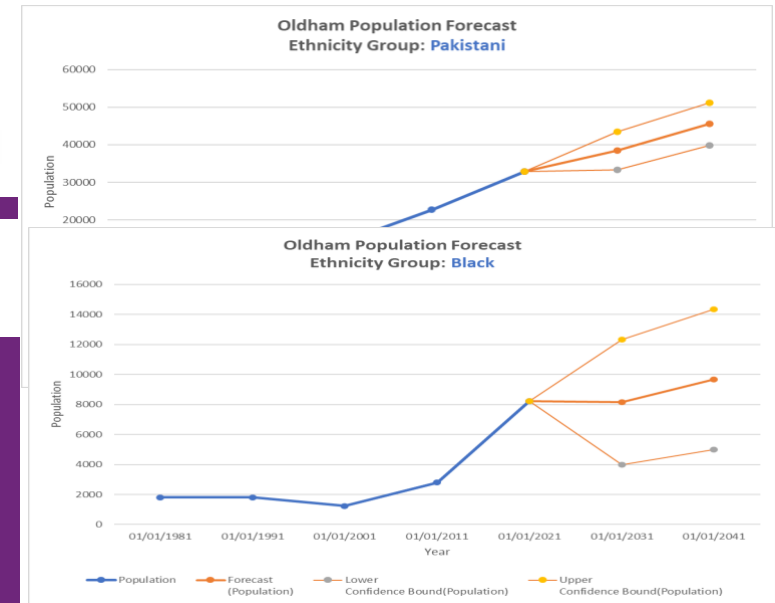
Over 65 representation in the main Black and Minority Ethnic Groups in Oldham



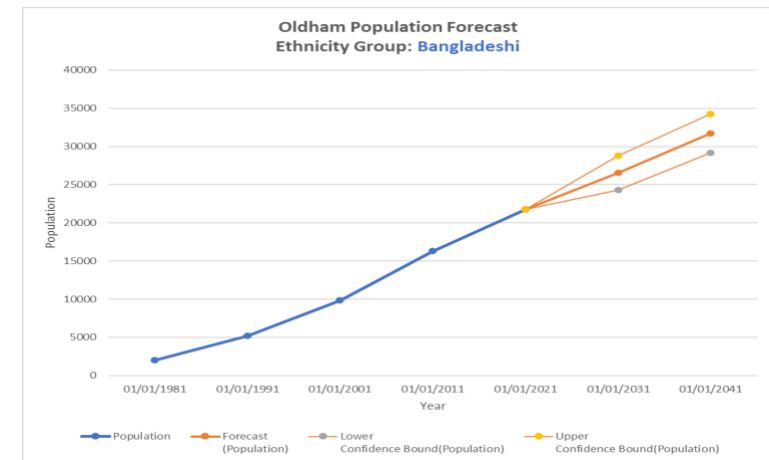
ETHNICITY

The non-White British population has been increasing gradually and is expected to continue to increase. This is particularly anticipated around the Bangladeshi and Pakistani communities.

We are already seeing a cohort of over 65s in these communities but at a smaller percentage than in the wider population.



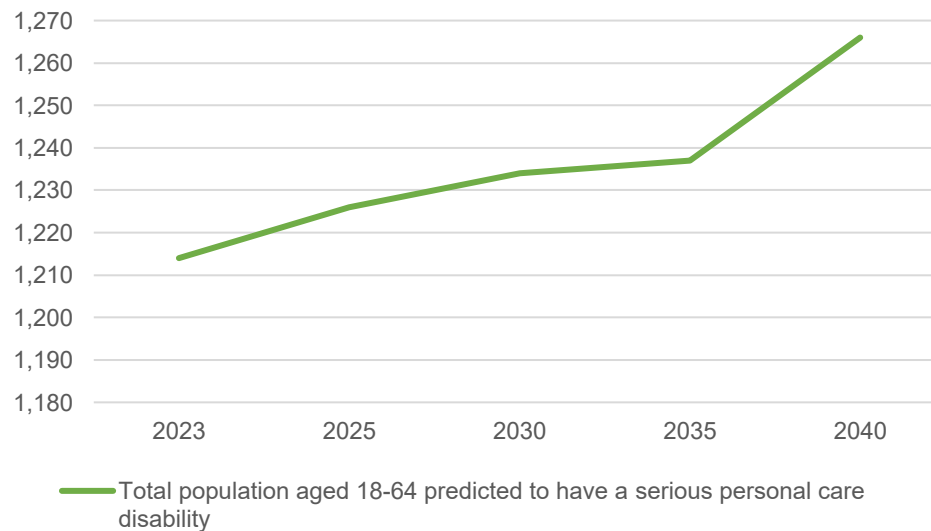
Source: ONS Census 1991-2021



3.3 Physical Disabilities

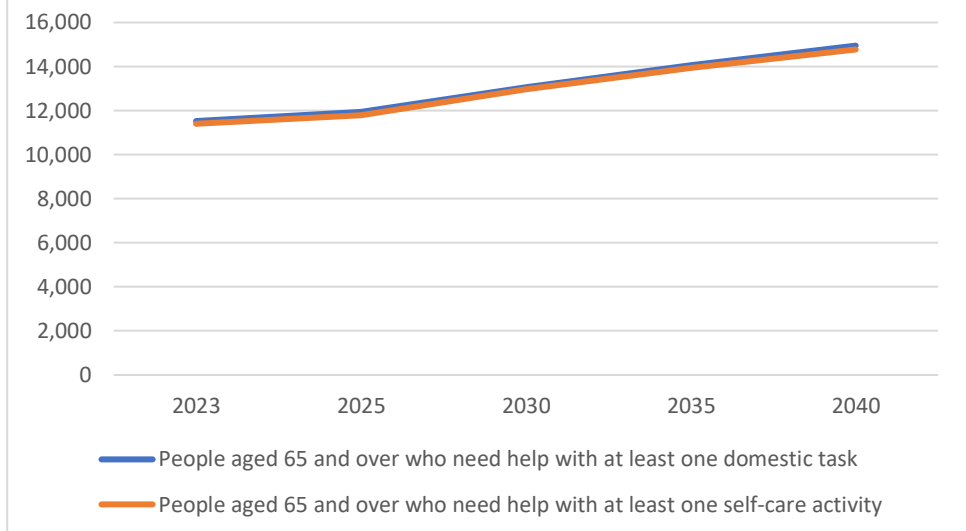
Population Projections for People Aged 18-24 with a serious personal care disability

Source PANSI 07/10/24



Projected support needs for Older Adults

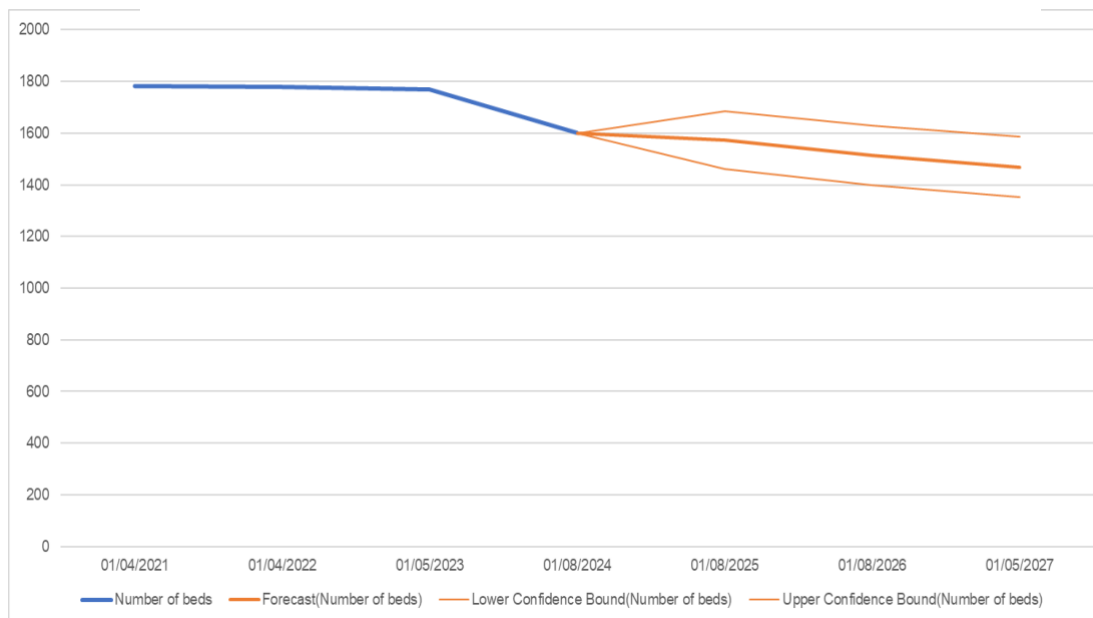
Source POPPI 07/10/24



- Whilst the data above tells us about the numbers of people predicted to be in Oldham with care and support needs, not everyone receiving personal care will require support from the council as some people will receive support via unpaid carers or fund their own care.
- The number of over 65s projected to require help with either one domestic task or one self-care activity is expected to increase significantly between now and 2040. This provides an indication of a growing demand for Care at Home Services but will also.
- The increasing demand will be factored into the development of the next Care at Home tender and data will also feed into the Carer Strategy.
- This may be linked to an increase in non-paid care arrangements such as unpaid / informal care arrangements from family (including people they live with) or privately funded home care.

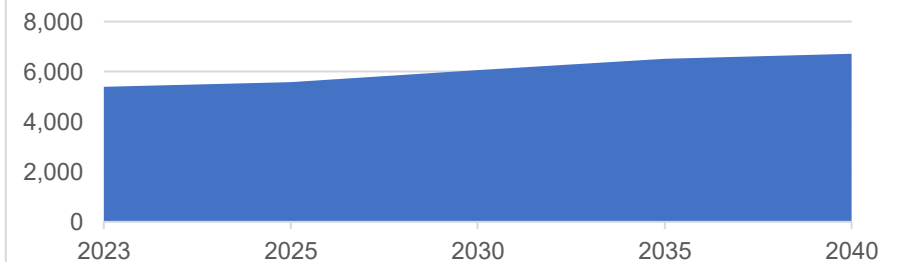
- It is noted that a significant number of unpaid carers are also over 65.
- Based on current occupancy and population projections the Oldham care home population is predicted to increase from **1,708** beds in 2023 to **2,404** beds by 2040 (a 40% increase). It should be noted this will include private funders as well as council funded placements.
- The current total number of beds in the borough is **1,600**, we therefore need to increase beds significantly by 2040, and indeed we already have a shortfall of 108 beds against the 2023 needs described above. However, this does not tell us the type of beds required.
- The number of CQC registered beds in Oldham has been declining steadily since 2021 and without intervention in the market forecasting suggests this will continue, putting increased pressure on out of borough placements.
- What this data does not show, is that there has also been a shift in the last decade, with a number of dual registered homes closing nursing beds or shifting whole to residential provision.

CQC registered care home beds in Oldham over time



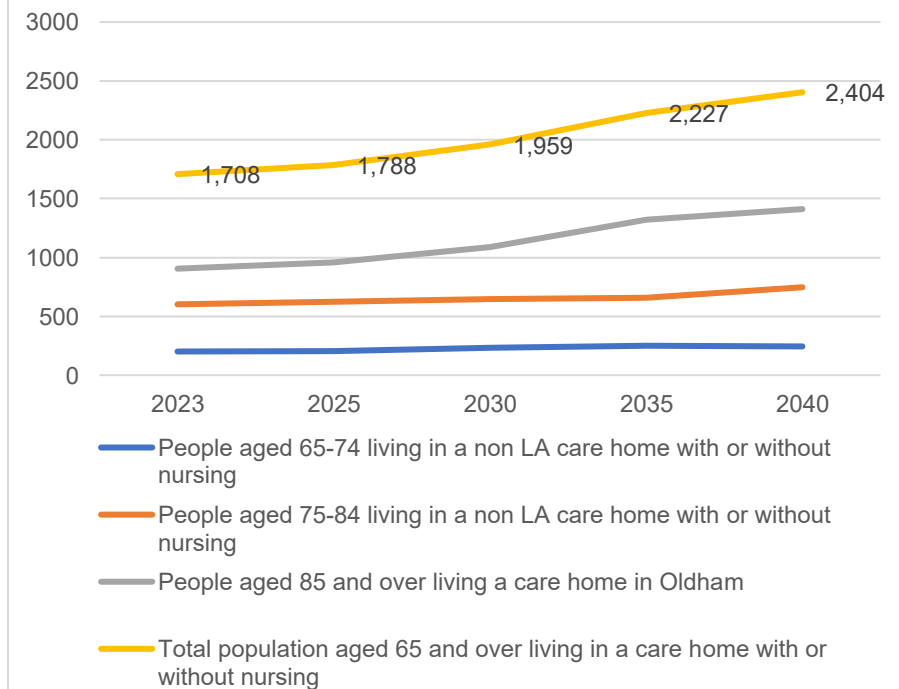
Total population aged 65 and over providing unpaid care

Source POPPI 07/10/24

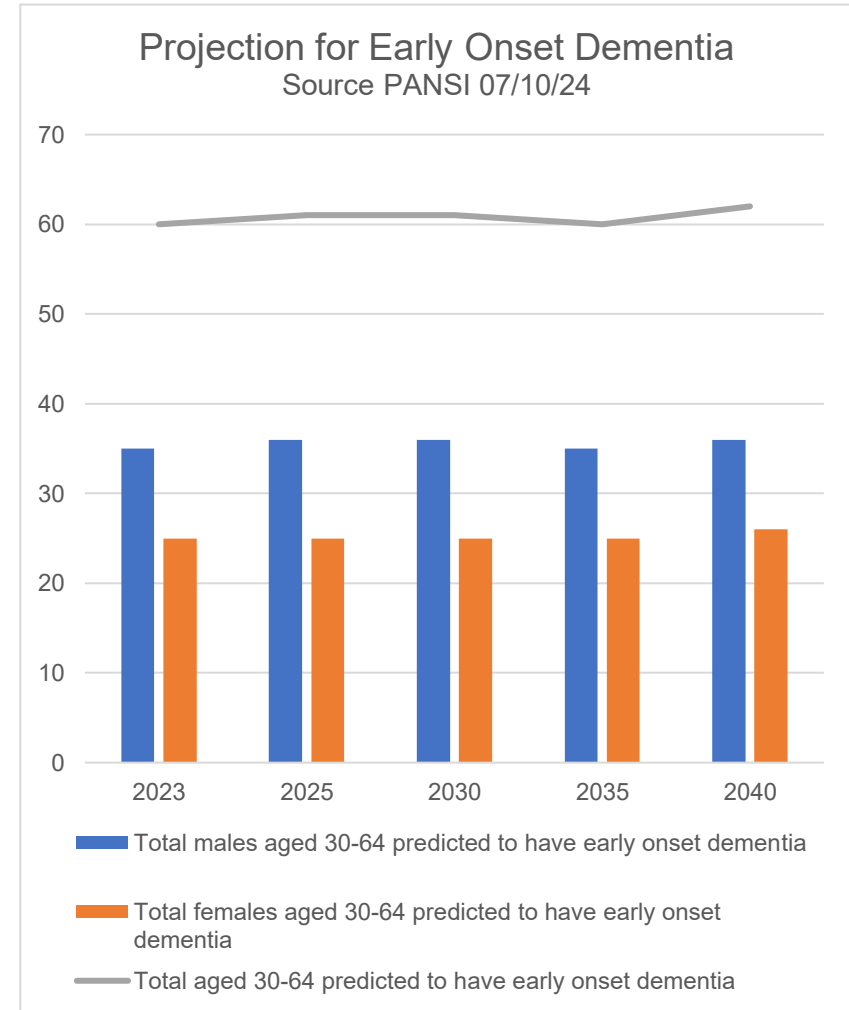
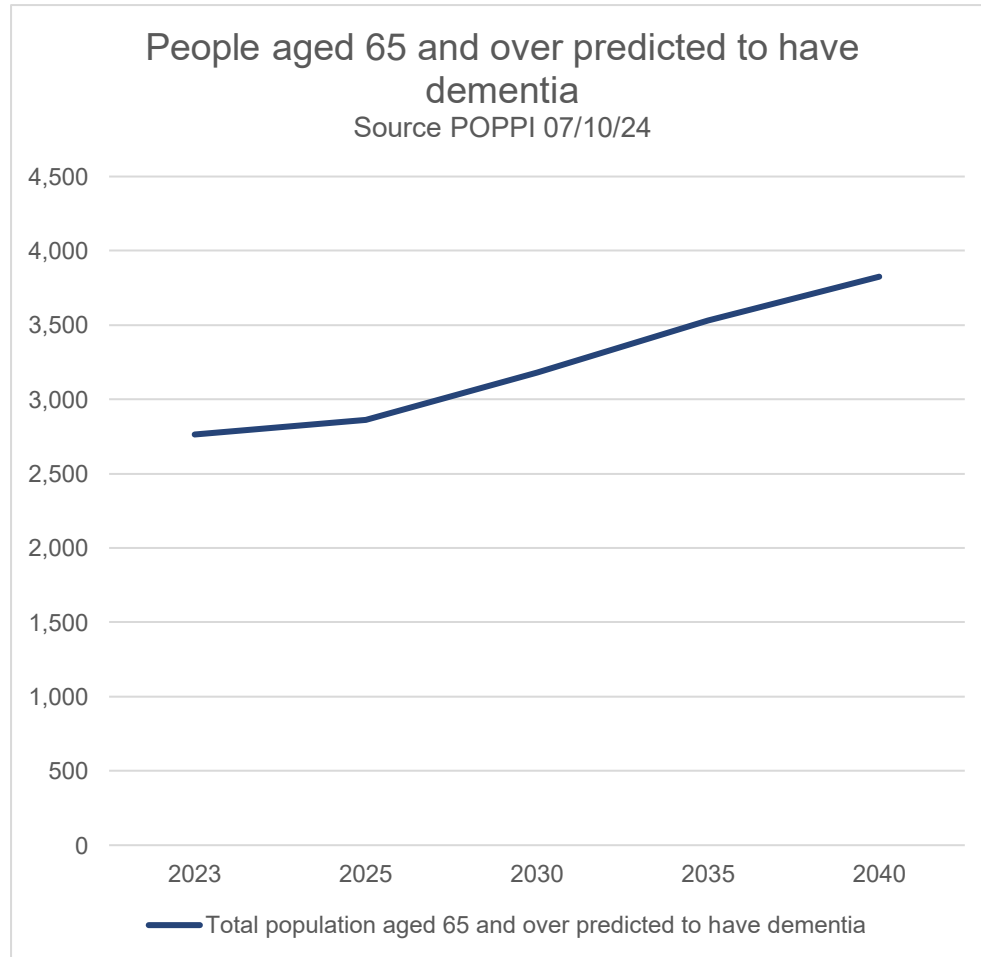


Projected Oldham Care Home Population

Source POPPI 07/10/24



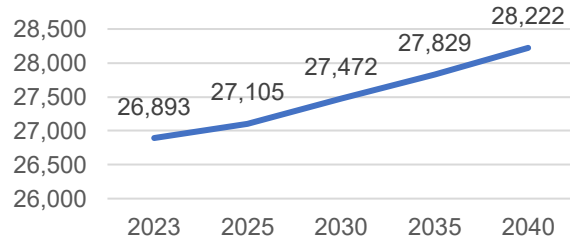
3.4 Dementia



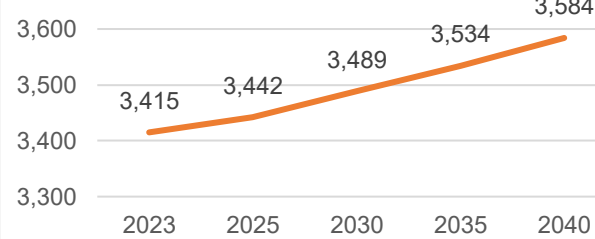
- The projections show a 38.4% increase in people over 65 with dementia by 2040, with the increase predicted to rise more sharply from 2025 onwards.
- The number of people early onset dementia are small, with a predicted increase of 3% 2040, there is a gender split in relation to the prevalence towards men.

3.5 Mental Health

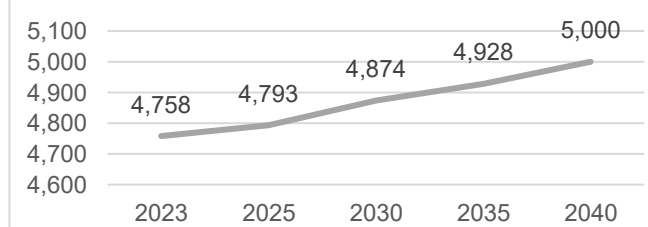
People aged 18-64 predicted to have a common mental disorder
Data Source PANSI



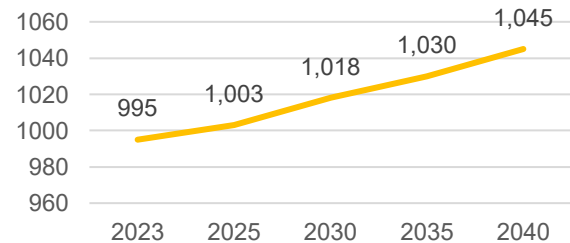
People aged 18-64 predicted to have a borderline personality disorder
Data Source PANSI



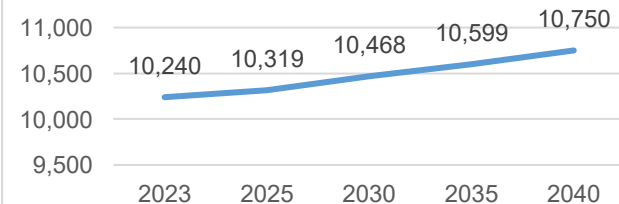
People aged 18-64 predicted to have an antisocial personality disorder
Data Source PANSI



People aged 18-64 predicted to have psychotic disorder
Data Source PANSI



People aged 18-64 predicted to have two or more psychiatric disorders
Data Source PANSI



**In 2022/23
13.72% of
people in
Oldham
were
recorded as
having
depression**

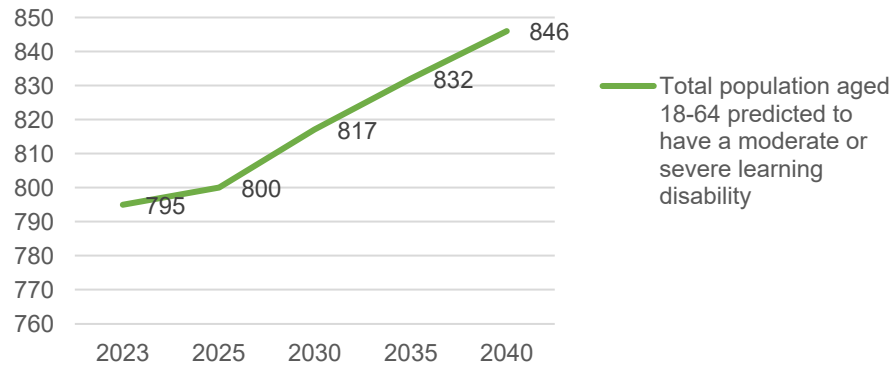
Source Oldham
JSNA

- Not all mental health problems will require support from Adult Social Care, predictions do suggest that the number of people affected by mental health conditions will increase by roughly 5% by 2040.
- Specific mental health conditions considered in this projection are:
 - Common mental disorder predicted to increase, an increase of 4.9% by 2040.
 - Borderline personality disorder predicted to increase 4.9% by 2040.
 - Anti-social personality disorder is predicted to 5.1% by 2040.
 - Psychotic disorders are predicted to increase 5% by 2040.
 - People with two or more psychiatric disorders are predicted to increase 5% by 2040.
 - Although, as noted, not everyone with mental health conditions will require services from Adult Social Care, it can be assumed from this data that we will need to increase provision for mental health by approximately 5% by 2040.

3.6 Learning Disabilities ¹

Population projections for Moderate or Severe Learning Disability

Source PANSI 07/10/24

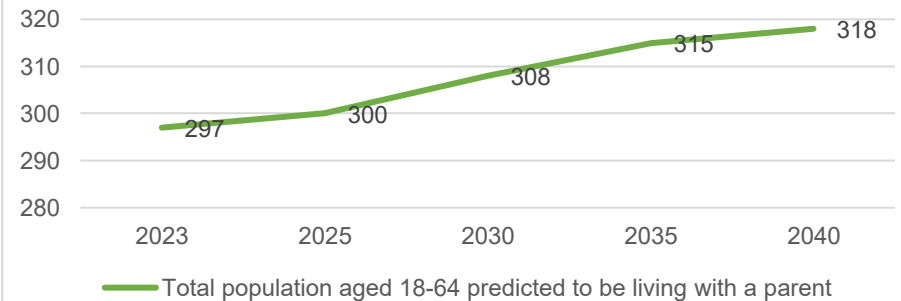


MODERATE OR SEVERE LEARNING DISABILITY

- Is anticipated as likely to be assessed as requiring social care services.
- The graph shows that the total number of people likely to require services will increase by 6% up to 2040, though there are fluctuations in age range, with the number of 18–24-year-olds being predicted to be slightly declining by 2040 (mirroring the wider population changes).

People aged 18-24 predicted to have a moderate or severe learning disability and be living with a parent

Source PANSI



LIVING WITH A PARENT

- The graph shows that the total number of people likely to require services will increase 7% 2040, though there are fluctuations in age range, with the number of 18-24 year olds being predicted to be slightly declining by 2040 (mirroring the wider population changes).
- Of particular significance will be the number of people who are over 45 and living with parents in each year as factoring in the age of parents there is an increasing risk of carer breakdown as their parent age.

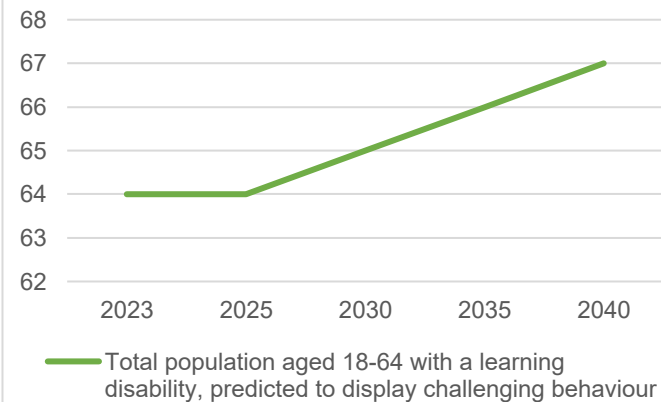
¹ Predictions based on prevalence rates by the Institute for Health Research, Lancaster University June 2024 which takes account of prevalence base rates and ethnicity.

CHALLENGING BEHAVIOUR

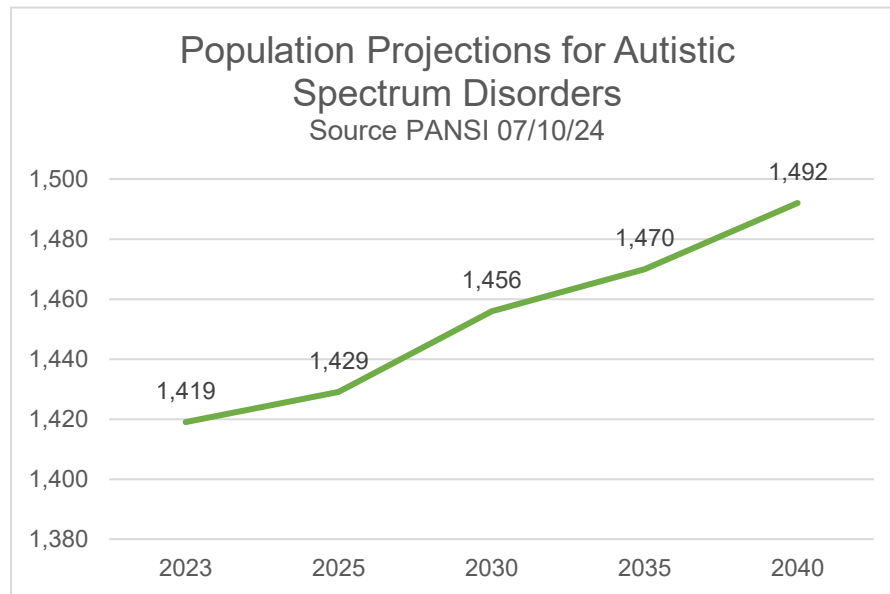
- It should be noted that the projections for challenging behaviour relates specifically to Learning Disability diagnosis and that **there are also people without diagnosis who may exhibit these behaviours.**
- The numbers are small, with an anticipated increase of 5% by 2040, there is variance in age range, but this again mirrors the changes to the wider population rates.

Projections for people with a Learning Disability diagnosis and challenging behaviour

Source PANSI 07/10/24



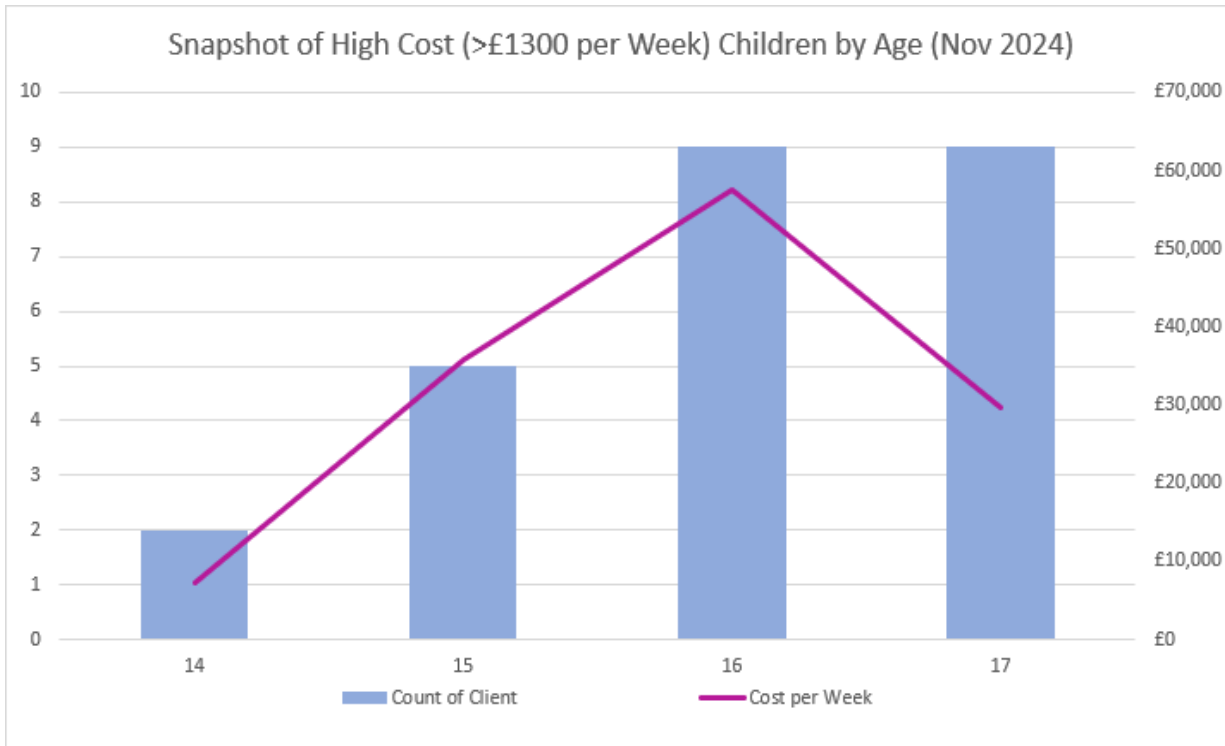
3.7 Autistic Spectrum Disorders



AUTISM SPECTRUM DISORDERS

- The profile is higher in men 1.8% of total population compared against 0.2% in women.
- The National Autistic Society states that the proportion of people with Autism Spectrum Disorders (ASD) who also have a Learning Disability is not possible to quantify accurately.
- Some very able people with ASD may never require Adult Social Care services because they have learnt strategies to cope with their neurodiversity/condition, other people may not have a Learning Disability but may require support in areas of their life, for example, in relation to social interaction.
- There is an and overall increase in ASD of 5% 2040, within age cohorts there are variations which mirror the general population projection fluctuations.

3.8 Transition to adulthood



TRANSITIONS

The transitions cases detailed (to the side) remain the responsibility of our Children's Services colleagues and include short break respite services for children with a disability.

Transitions work between Children's and Adults services commences from the age of 16, to understand the Care Act eligible needs of people in readiness. Of the cases detailed in the graph, a number of these will not transfer to Adult Social Care because their support will end. The majority of others are in specialist semi independent services or out of borough, and a full assessment of their needs commences early so that Adult Social Services can provide the right care and accommodation support as per their Care Act assessment.

3.9 Local Housing Needs Analysis

The council has recently undertaken a review, which is soon to be published. We have taken data from this to present a summary as this informs the accommodation needs from an Adult Social Care perspective.

It notes there is a need to build increased adapted or easily adaptable accommodation in the borough in order to allow people to remain in their own home for as long as possible as this is what the majority of people in the 2018 household survey (51.7% of over 65s) wanted to do.

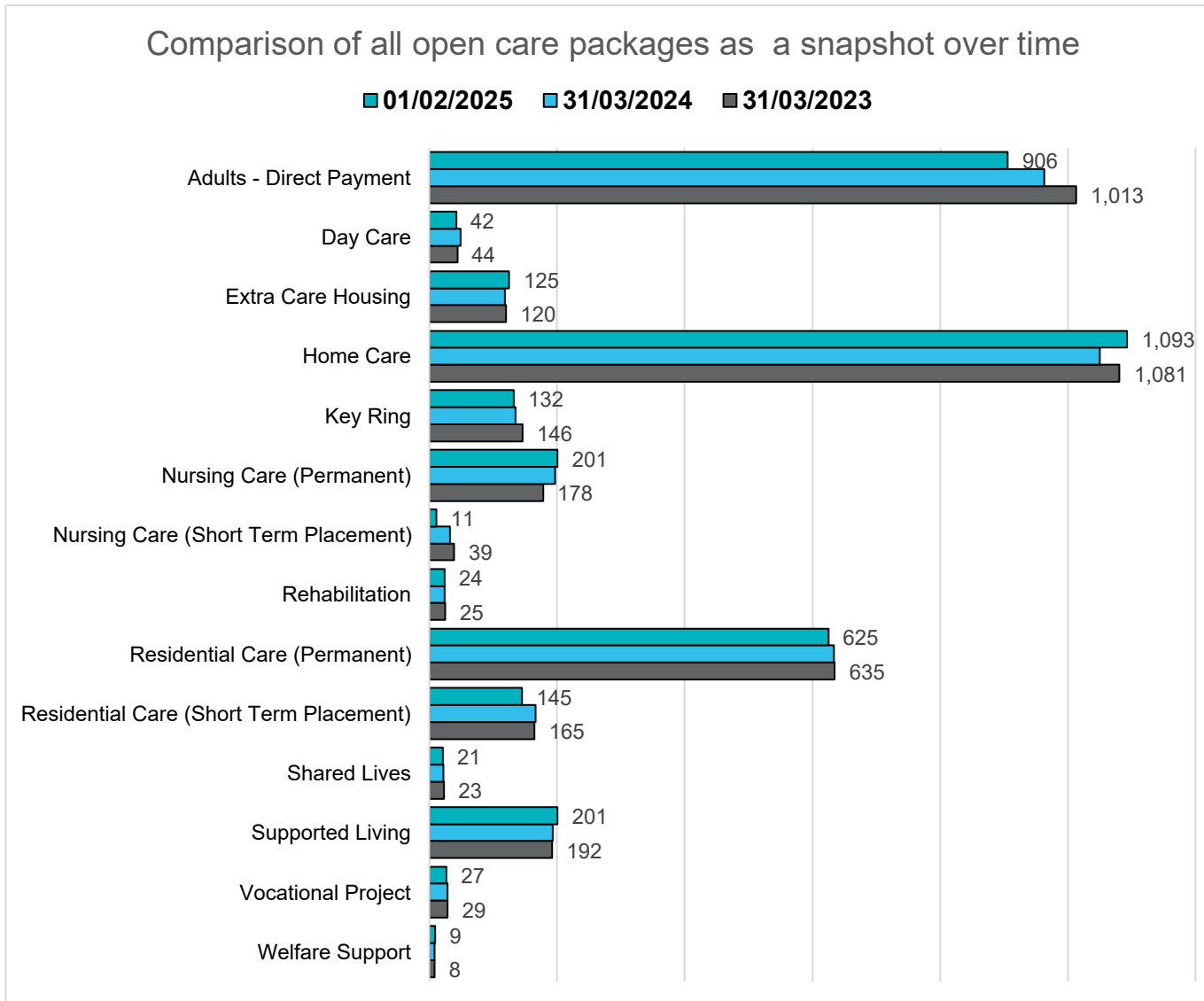
It indicates there is a need for 995 Extra Care Units by 2041, or 50 extra per year, whilst the report primarily acknowledges it can be used for younger people with care needs as well. It also notes that there is a need for extra care housing for sale as well as to rent, with that being where the majority of growth is required. To note the council currently rents 254 properties as Extra Care.

Modelled Extra Care Housing Requirements for Oldham

Source - Local Housing Needs Assessment 2024



4 Current packages of care (including out of borough)



PROVISION TYPE

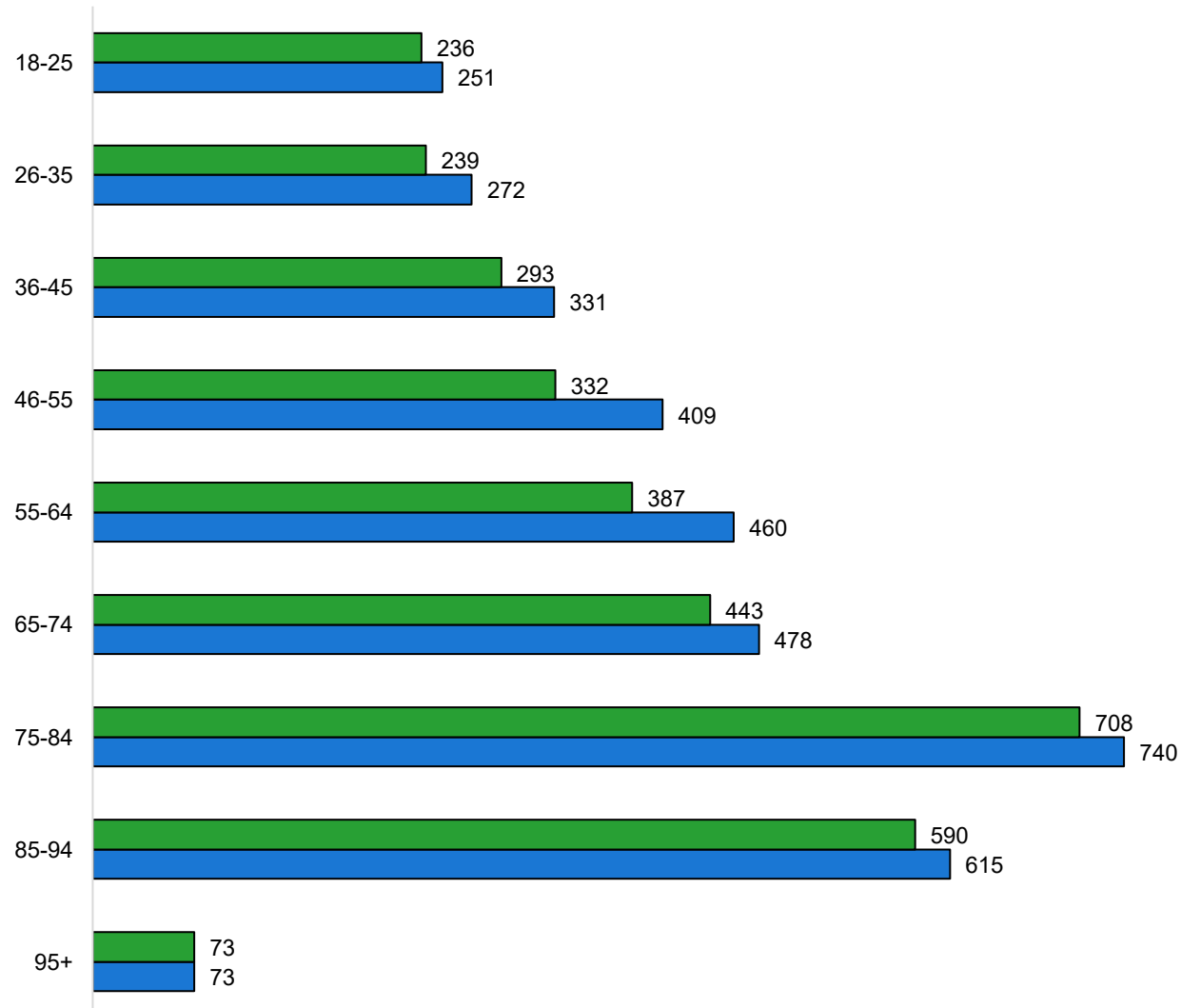
The chart to the left provides an overview of the volume of packages the council has purchased considered over a three-year period. The main types of provision purchased has not changed significantly during this time.

The largest proportions of packages are:

- Home Care 33% - within this we have seen an increase in use for 18-30 year olds with a learning disability.
- Care homes (when adding short term and permanent and covering residential and nursing) 30%.
- Short stay placements have seen a particular increase around mental health for people of working age.
- Direct Payments 27%
- Although Supported Living only accounts for a relatively small proportion of placements and is utilised for both Learning Disability and Mental Health.

Residents supported as at 01/02/25 by age

■ Residents Supported ■ Number of Care Packages

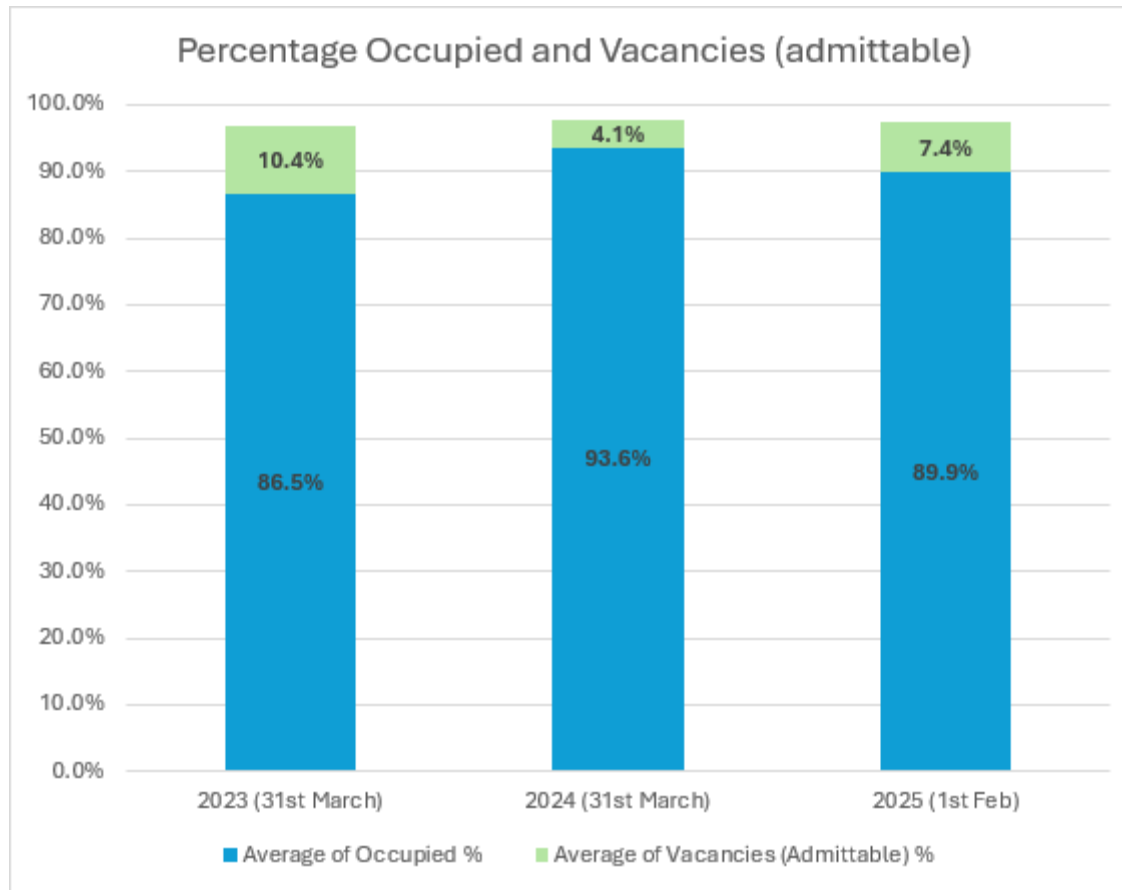


PACKAGES BY AGE

- In February 2025 3,008 adults were being supported by adult social care, of these 60% were 65 or over.
- In some cases, people have more than one package of support commissioned for them.
- 52.5% of packages were commissioned for people who were 65 and over.

5 Utilisation of current framework provision

a. Care Homes



OLDHAM CARE HOME CAPACITY

This chart shows vacancies (admittable) this is the actual beds that care homes can let at any one time, not the number of empty beds. For example they may have some vacancies which are currently in-admittable due to redecoration works, or may have a staffing issues which limit how many rooms they can currently let. Additionally, if the council 'suspends*' placements to a home these are excluded from admittable vacancies. This is why the totals for each period do not reach 100% of beds.

Capacity in the local system fluctuates, the data in the chart shows Capacity Tracker (NECS) information on availability in Oldham care homes as a snapshot over three years.

A functioning care system does require some capacity within in, so we would not want to operate above 95% capacity as this would impact flow from hospital and community.

*Suspension is when the local authority places an embargo on any new packages with a provider this may relate to quality, safety or financial sustainability concerns.

COMPLEXITY IN CARE HOMES

National information from the Local Government Association and the Association of Directors of Adult Social Services Use of Resources suggests that nationally increasing numbers of older people requiring long term care, but also that the care required is becoming increasingly complex.

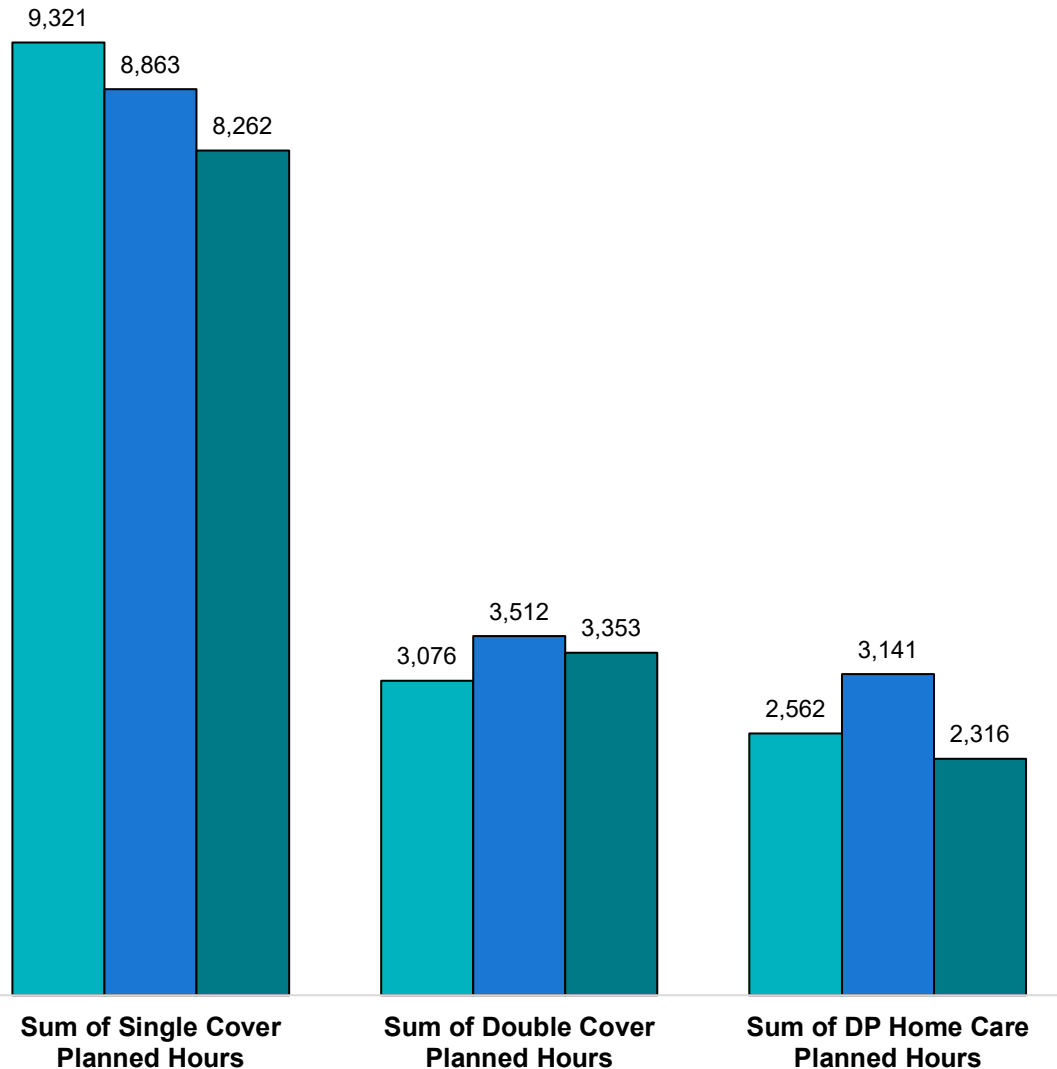
The projections of the change in demographics across Oldham strongly suggest that in the future (and particularly over the next ten years), people will be living longer and the approach to service delivery and workforce planning will need to reflect the increasingly complex needs of people requiring support due to age related conditions.

It is expected that due to the focus on supporting people to live independently at home for as long as possible (through programmes such as Live Well at Home) and an increase in intermediate care services in the community, that individuals are likely to go into residential services later in their life. However, when they do require residential services, they will have more complex needs with specialist and additional support and attention than previous generations. Oldham has already seen an increase in this in recent years, following Covid, with further increases anticipated based on population projections. Therefore, although the number of residential placements is indicated to rise due to the ageing population there is an expectation that these placements will be for a shorter period and primarily in nursing/dementia specialist care homes rather than 'traditional' residential care.

5.1 Home Care

Home Care Hours - Snapshot Over Time

■ Mar-23 ■ Mar-24 ■ Jan-25



HOME CARE PURCHASING

The data on single and double cover packages in the chart shows those packages directly commissioned by the council. The data on DPs is where a Direct Payment (DP) is in place. This means that the person employs their carer directly, often through the use of an external broker.

The vast majority of packages are single cover packages, representing 59% of all packages (for DPs we do not have data on whether these are single or double cover packages). The number of single cover packages has been steadily declining for the last three years and during this time the council has moved to a strength-based approach which will account for some of this decline.

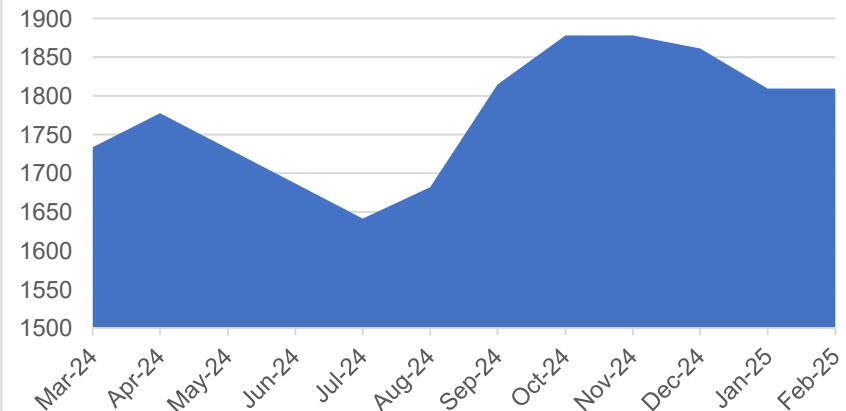
There has been an increase, though not consistent over the three years of double cover packages. This will link to the increasing complexity we are seeing and the Greater Manchester and National Priorities around Living Well at home, where we are seeking to keep more people in their own home for longer.

We are currently increasing our offer around care technology to support people and exploring opportunities to support people at home in a way which maximises their independence, this may impact on the volume of packages placed and we will monitor this closely as we roll these plans out.

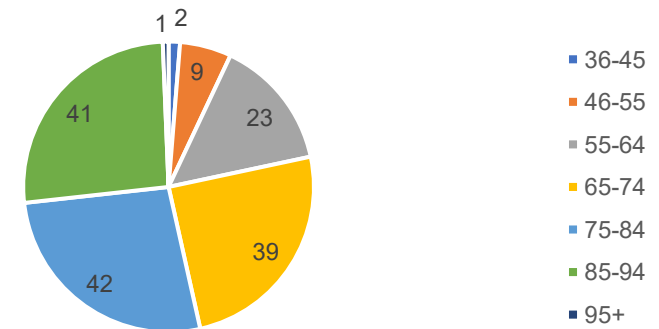
5.2 Extra Care Housing

- There are six Extra Care Housing Schemes, with the number of hours of care purchased on a weekly basis fluctuating over time.
- The current schemes are focused on older adults, with data showing only 12 of the current service users are under 55 and the service is primarily aimed at older adults. There is a gap in the market in relation to provision for younger adults.
- Only one of the six schemes was purpose built with Extra Care in mind, the other schemes were refurbished sheltered housing schemes. This means that there are some disability access challenges around some of the flats and communal areas this can impact the ability to allocate flats as they become vacant.

Total Number of Extra Care Hours Purchased per week



Age profile of current Extra Care Housing service users
Data from 01/10/24



5.3 Supported Living

SUPPORTING CURRENT DEMANDS

There are challenges around matching people with suitable accommodation for in borough supported living. Work is underway to map those people who are not suitable for the current supported living voids available. The following cohorts have already been identified:

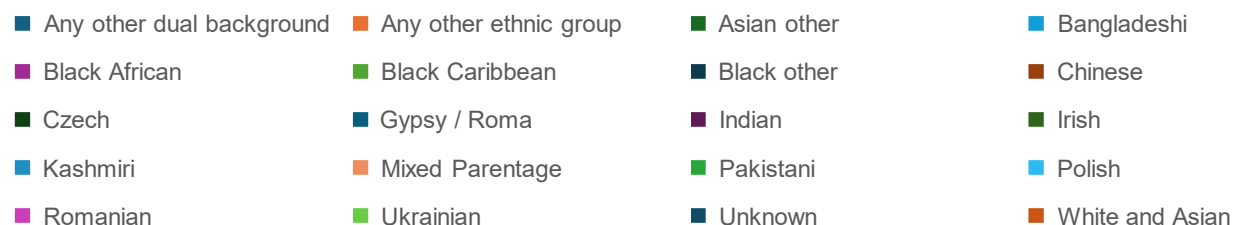
- Cohort 1: Single Occupancy (Separate Property)
- Cohort 2: Additional Levels of Support
- Cohort 3: Apartment Supported Living with Sensory /Communication Requirements
- Cohort 4: Complex Plus with possibility of DOLs
- Cohort 5: Supported Living with Complex Medical
- Cohort 6: Supported Living with Young People
- Cohort 7: Supported Living with Trauma-Informed Care
- Cohort 8: Supported Living for Muslim Women

Throughout these cohorts it is noted that there are a number of people who require single sex accommodation and who require accommodation with people of a similar age.

Challenges with accommodation currently available in borough make it hard to meet these demands which means that some people currently have to be placed out of borough.

5.4 Information about our ethnicity in our population

Representation of ethnicity of all current packages of care



80% of current packages are with people of a White British background, with the remaining 20% split across a large number of groups, with the largest groups being Pakistani, Bangladeshi and Black African and White Other. Analysis of current home care packages purchased (see table on the page below) suggest there is currently an under-representation of populations which are not White British receiving care, with all other groups having a much lower than 0.9% of the population figures.

Ethnicity	2021 Census Figures	Unique Individual Accessing Home Care in 2025	Expressed as Percentage	Assumption: 0.9% of this population group require home care (unmet need now)	2031 Middle confidence interval	Assumption: 0.9% of this population group require home care in 2031
White	164,897	1,479	0.90%			
Pakistani	32,802	83	0.25%	295	38,441	346
Bangladeshi	21,754	40	0.18%	195	26,560	240
Black	8,209	34	0.41%	73	8,144	74
Indian	1,676	6	0.36%	15	1,749	16
Chinese	819	2	0.24%	7	963	9
Total Figures		165		585		685

Data from the same report, on care home use also shows that there is low usage by non-White British communities. However we are aware there are currently gaps in data around ethnicity captured on our client record system and we are working to address this moving forwards to get a more accurate picture.

Number of distinct individuals in receipt of Long term nursing care & Long term residential care by ethnicity and LA

	Pakistani			Bangladeshi			Black			Indian			Chinese			White			Any other			Unknown		
	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023	FY 2021	FY 2022	FY 2023
Oldham	11	11	14	5	5	5	7	7	7	5	5	5	5	5	5	764	961	953	6	9	10	15	29	60
Grand Total	11	11	14	5	5	5	7	7	7	5	5	5	5	5	5	764	961	953	6	9	10	15	29	60

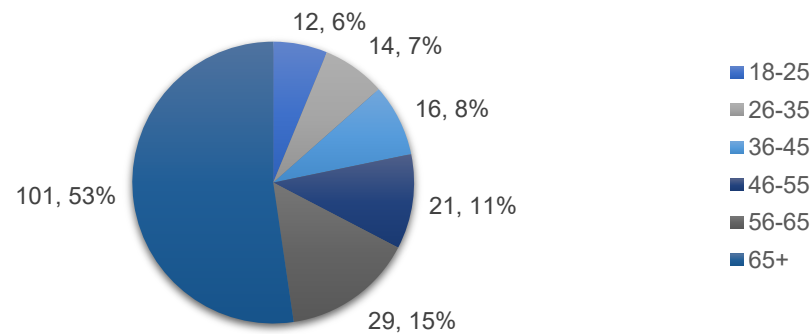
BETTER UNDERSTANDING THE NEEDS OF OUR COMMUNITIES

This data suggests that there may be a gap in current provision to meet the cultural and religious needs of distinct community groups. As such there is a need to work with those communities to understand their needs and requirements around care and look to work with the communities to address any current gaps or barriers to them accessing current provision in order to address these.

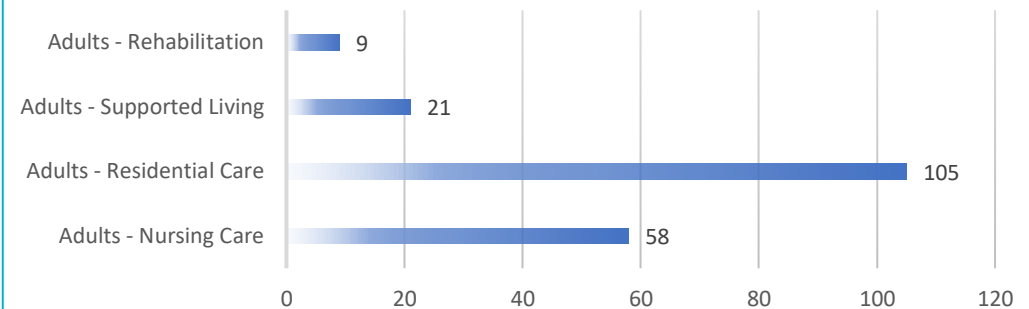
6 Out of Borough (OOB) Placements

A detailed review of all OOB placements was conducted on the data in the council's Mosaic client management system on 28/10/24. This deep dive provides a point in time picture as to why the council is using provision outside of the borough.

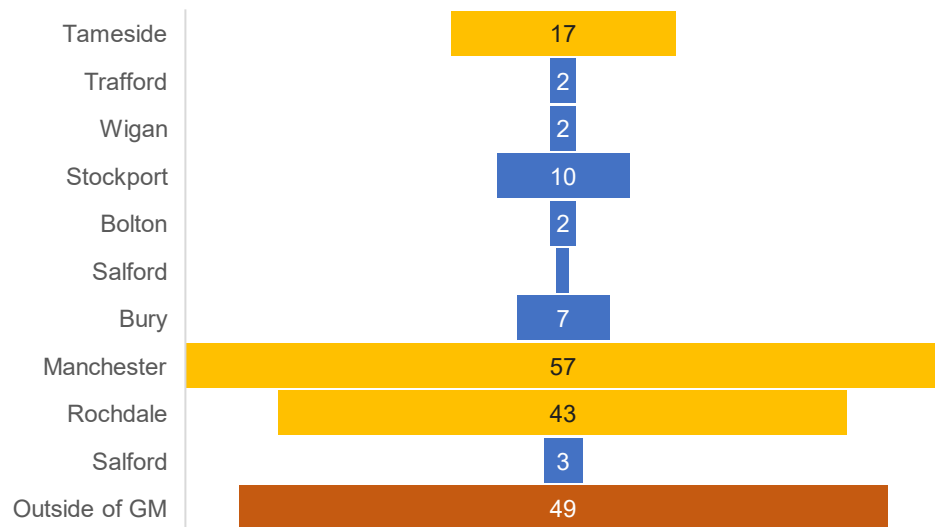
OOB PLACEMENTS BREAKDOWN BY AGE CATEGORY



OOB PLACEMENTS BREAKDOWN BY MOSAIC ELEMENT GROUP



Location of OOB Provision



The fact that the majority of placements OOB are for older adults is consistent with the fact that the majority of provision is for residential and nursing care. The majority (75%) of OOB provision is within Greater Manchester, with 61% of this being with the three authorities who share a boundary with Oldham (Manchester, Tameside and Rochdale).

The main reason the authority places out of borough is due to a lack of suitable provision available in borough, which accounts for 72% of the placements, with 23% being due to family or resident choice and 5% being due to court directive that the person needs to be placed out of the area. This means the information provided in terms of the types of services required provides us with a clear indication as to the gaps in current commissioned in borough provision.

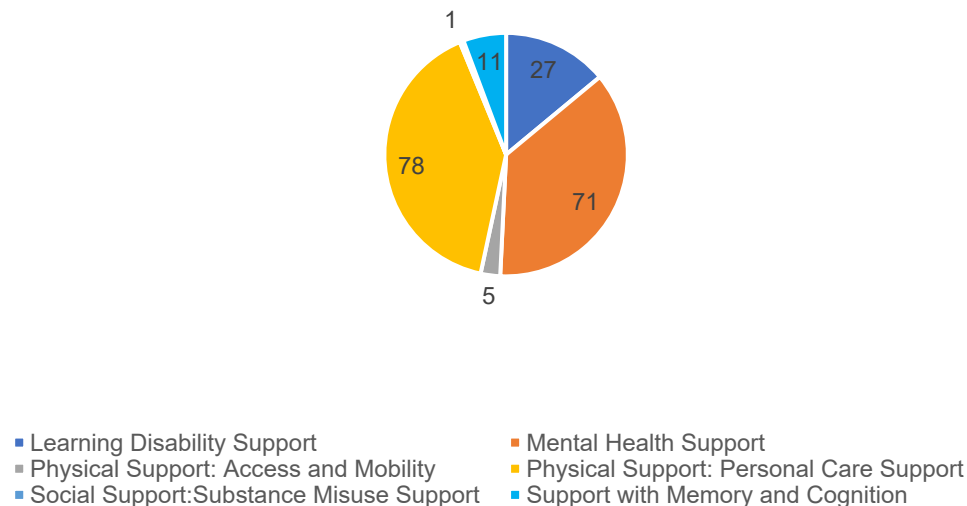
WHY WE ARE PLACING OUT OF BOROUGH

Analysis of the Primary Support Reasons for OOBs shows the main factors are Physical Support: Personal Care Support (40%) and Mental Health Support (37%). Further detailed analysis of the key themes with five people or over in OOB placements shows the main themes behind OOBs are related to a variety of mental health conditions and the ability of providers to support these, particularly in relation to Behaviours that Challenge.

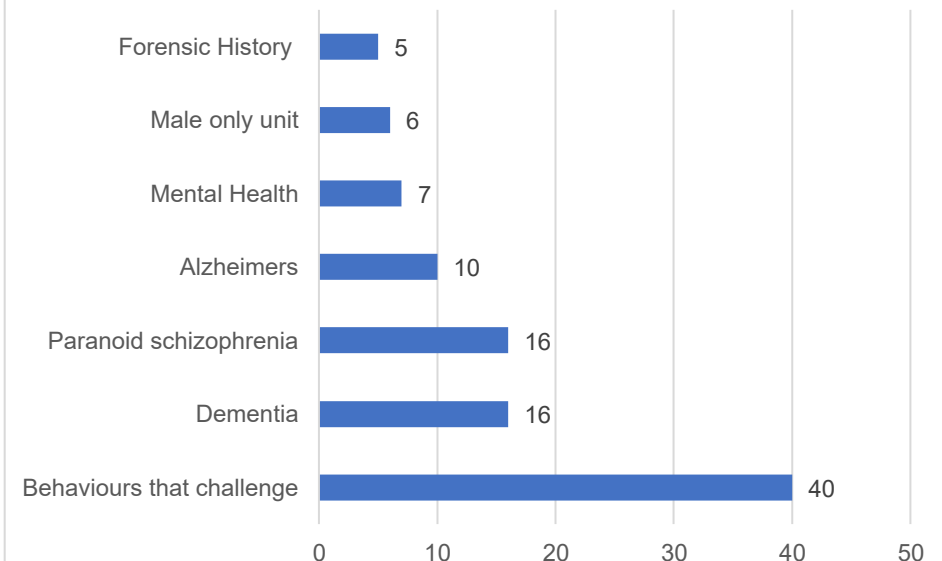
As the acuity threshold has reduced for hospital discharge in recent years this has increased the acuity and complexity at hospital discharge, the impacts of this are particularly seen in relation to care homes and it is anticipated this links to the increased placement out of borough which is often via 'Discharge to Assess' (D2A) processes. Oldham does not have designated beds for D2A and where there is a nursing need the only suitable availability may be out of area, however, these placements are often then stepped down to a residential need, but will already have been placed out of borough which can present challenges in bringing back in borough or moving provision when people are very settled.

Anecdotally we understand Bariatric provision to be an ongoing challenge, and whilst the detailed analysis does not confirm this it may be a factor in the categories of Physical Support. Further analysis is required to understand this.

Primary Support Reason

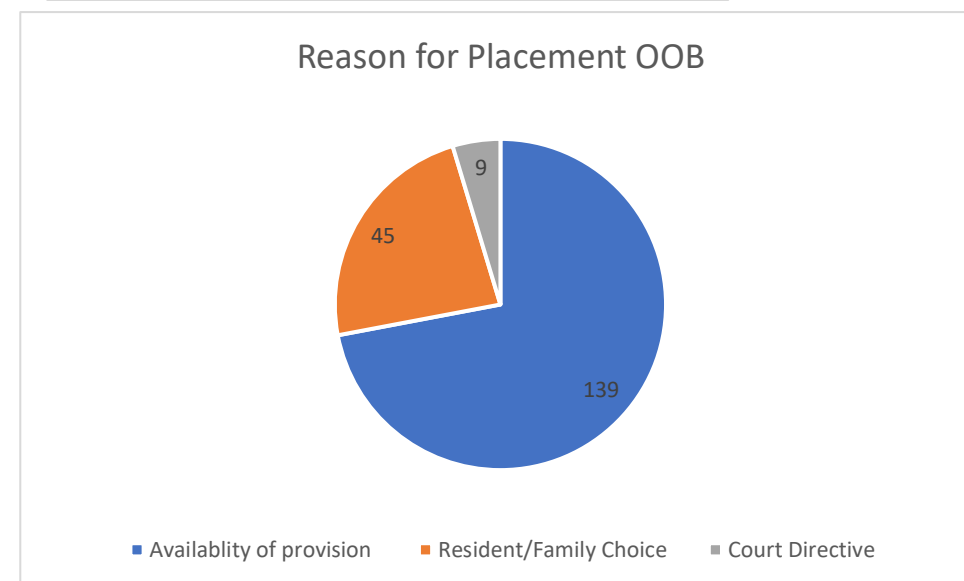
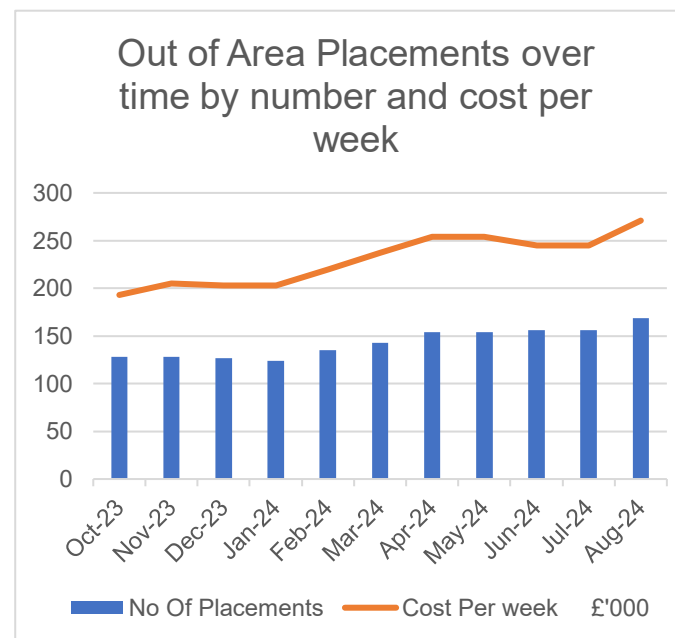


Key themes from detailed analysis of OOBs

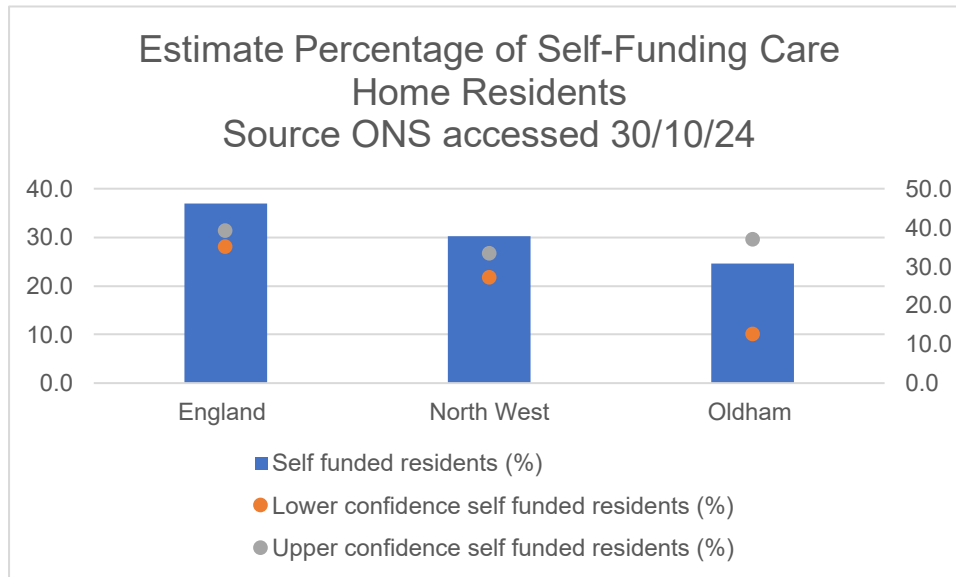


Data Shows that the number of out of borough placements has been steadily increasing, as has the weekly costs. As stated in section 3 above, we have seen a reduction in the number of care home beds over that same period, including closure of two care homes with specialist provision.

We know that the current care home beds do exhibit capacity and that there is now an over-supply of standard residential beds, leading to placements out of borough for more complex provision, both for residential and nursing.



7 Self-Funding Care Home Residents



SELF-FUNDERS

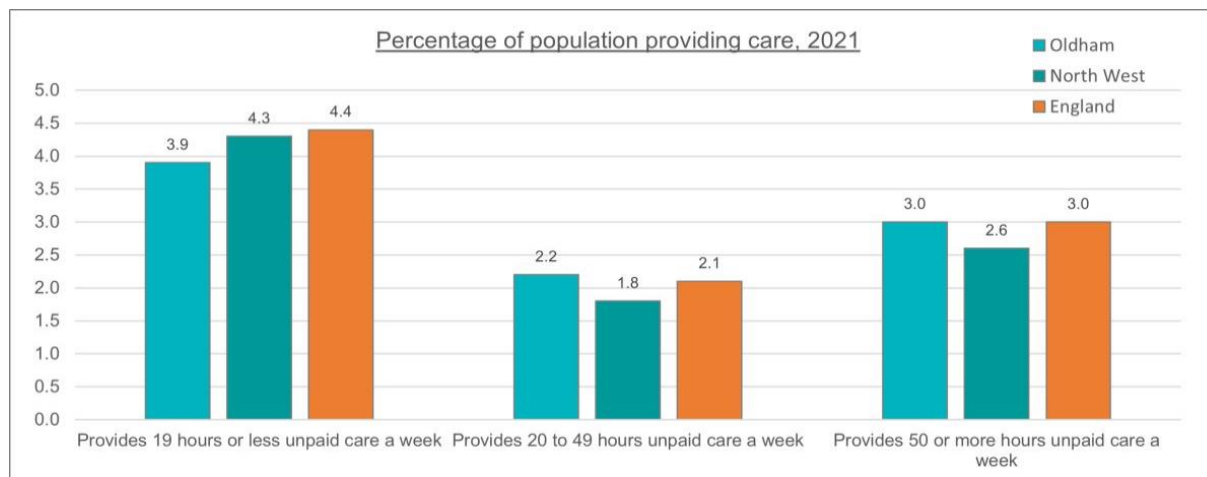
Data from the Office of National Statistics (ONS) estimates that Oldham has a lower than national and regional percentage of self-funding residents. It is estimated that this is a quarter of all Oldham care home residents, this suggests that about a quarter of Oldham Care Home beds (400 beds) will be filled with privately funded residents.

8 Unpaid carers

Following the 2021 Census it was estimated that there are approximately 20,000 carers living in Oldham, this consistent with projections earlier in this report. Whilst carers will be able to access a range of services and support without adult social care being aware and not all carers will be caring for a vulnerable adult. During 2024 the Carers Team completed 506 new consultations to provide guidance and support and completed 996 carers assessments.

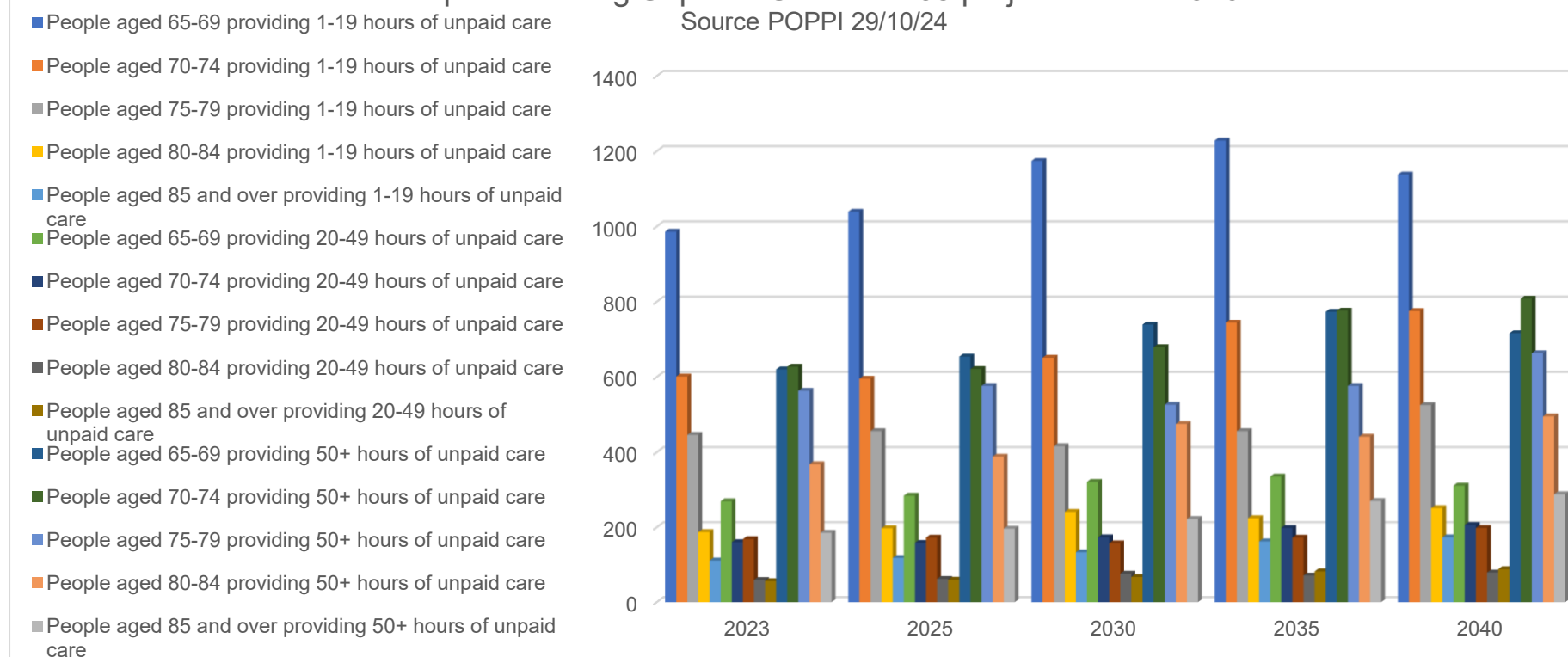
The council is currently in the process of launch 'Caring for our Carers – Adult Carers Strategy 2025-28. This has been co-produced with people with lived experience. It aims to support both carers and the people they care for, by enhancing information, promoting well-being and fostering partnerships. Our goal is to ensure all carers in Oldham feel supported and empowered. The strategy focuses on five commitments:

- I am recognised early as a carer. Professionals in health and social care ensure I get timely support, especially during key moments. My experiences shape better outcomes for carers.
- I am supported by a community that collaborates effectively. Through joint efforts of health, social care, the voluntary sector, and other key partners, I receive integrated support that recognises and meets my needs in a coordinated and person-centred manner.
- I always have access to information and advice when I need it just for unpaid carers in Oldham. There are training and workshops available to help me learn, grow and be supported in my role as a carer.
- I am empowered to maintain my own wellbeing while caring for others. I have access to tailored support, resources, and services that recognise my unique needs and value my contributions. I am assured of flexibility in my work and the availability of quality care when needed.
- I am heard, valued, and celebrated in my community. Through open communication, I actively shape the support I receive, ensuring both my independence and that of those I care for are prioritised and enhanced.



People Providing Unpaid Care over 65 projected until 2040

Source POPPI 29/10/24



Source Oldham JSNA Accessed 31/10/24

A significant proportion of unpaid carers are themselves over 65, there is therefore a risk of carer breakdown in the future, which needs to be considered in relation to the numbers of people who may currently have unpaid care but may require services from the council in the future. There also needs to be a respite and day service offer which compliments the work of unpaid carers and reduces the chances of carer breakdown in the longer-term.

9 Workforce

The adult social care workforce is the key enabler to deliver the right services, at the right time, to the right standard to meet the needs of Oldham's service users.

Skills for Care estimates for 2023/24 there were over **8,900 jobs** in adult social care in Oldham split between the council at **3%**, the independent sector at **73%**, jobs working with direct payment recipients (personal assistants) at **19%** and other sectors **5%**.

Nationally, turnover in the adult social care sector is high and the workforce is ageing. In 2023/24 for Oldham Skills for Care estimated the staff turnover to be **22.5%** which is lower than the regional average of **25.4%** and lower than the national average of 24.8%. It is noted that not all turnover results in workers leaving the sector. Many starters are recruited from within the adult social care sector, therefore although employers need to recruit to these posts, the sector retains their skills and experience.

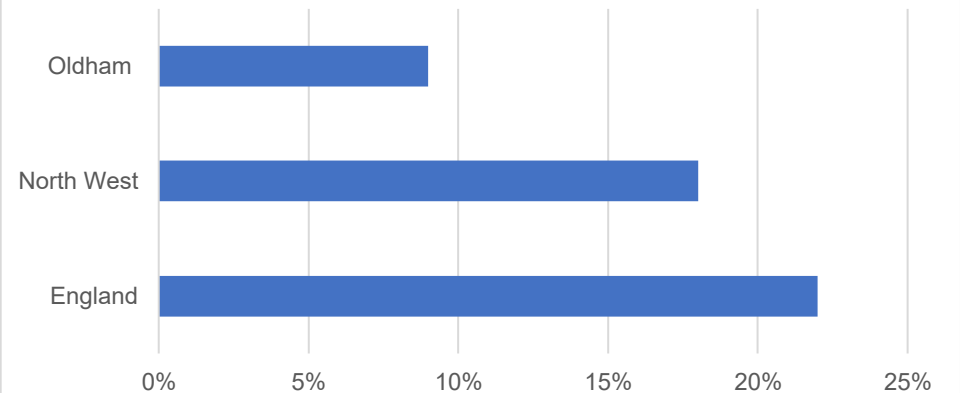
The Skills for Care data suggests that staff working in care in Oldham have on average **11.3** years of experience in the sector, with **76%** of the workforce having been in the sector for at least three years.

Oldham Council has a contract requirement around zero hours contracts for framework providers so it is not surprising that levels of zero hours contracts are below the national and regional averages. It should be noted that the Skills for Care workforce data will include providers who are registered with the CQC in Oldham but do not deliver services for the council or indeed possibly use Oldham for an office base but deliver care in neighboring authorities.

Oldham Council is also committed to the Living Wage Foundation rate rather than the national minimum wage, which likely explains the fact that average pay rates are higher than the national and regional averages.

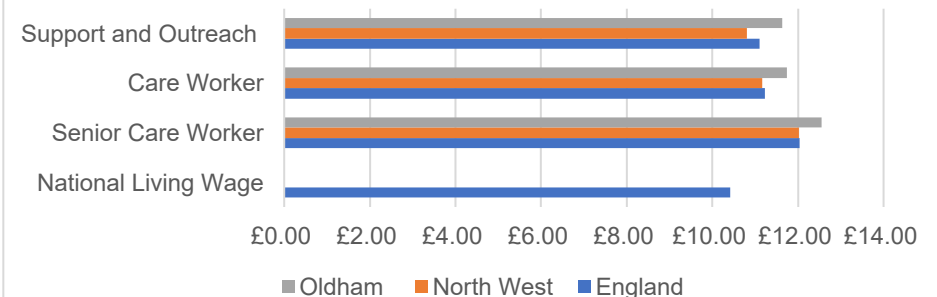
Proportion of workers on zero hours contracts by area

Source Skills for Care Workforce Data Set 2024



Average Pay for Selected Jobs

Source Skills for Care Workforce Dataset 2024





















The training levels for Oldham staff are also above regional and national averages, this in conjunction with the data above on experience and turnover suggest a skilled and experienced workforce within the locality.











10 Supply and Demand Summary







The information in the table below provides a summary and conclusion for the data presented throughout this document. For more detail on how we will be implementing these next steps please see the Commissioning Delivery Plan at <https://www.oldham.gov.uk/mps-commissioning-delivery-plan> and the service specific Commissioning Position Statements at <https://www.oldham.gov.uk/mps-cps>.

Service Type	Supply	Demand	Summary	Next Steps
Standard Residential care			We will reduce the number of standard residential care beds we have across the borough to increase occupancy and quality in other homes and provide alternative care options for older people.	Continued engagement with in borough provision around options for remodeling to fill identified gaps.
Nursing care			We have faced a significant decline. We will continue to work with providers to develop nursing capacity across the borough, including complex dementia and other mental health requirements and bariatric provision to support the pressures in the market.	Continued engagement with in borough providers and providers seeking to develop new provision to seek to fill current gaps in provision.
Dementia care			We will continue to work with providers to improve our dementia offer to service users and their families. We are aware that are developments taking place which may increase supply.	Continued engagement with in borough providers and providers seeking to develop new provision to seek to fill current gaps in provision.

Service Type	Supply	Demand	Summary	Next Steps
Intermediate care/ bed based reablement			We want to support more people requiring intermediate/reablement care in their own home The TOMs model promotes reablement services before packages of care are required. A full review is taking place of the intermediate care in older adults in 2024/25.	Reviewing the in borough Reablement offer in line with a wider Greater Manchester Intermediate Care Review. Increasing this offer will also support us to give more people the opportunity to be discharged and then reabilitated to go home. There is a risk where people go into a care home on discharge this then becomes a long term need as care homes do not have the therapy staff or specific skills for reabling people back to their own homes.
Community Reablement			In line with the refreshed Adult Social Care Target Operating Model, we are working to increase the capacity of the reablement service in order to support more people to live independently in the community	This is being reviewed as part of the wider Intermediate Care Review.

Service Type	Supply	Demand	Summary	Next Steps
Home Care			<p>We continue to work with providers and their support of people in the community. During 2024/25 we have opened up the Flexible Purchasing System to new providers and entered into a mini competition to select two new Cluster Leads due to exits of providers from the local market.</p> <p>The current contract is in place until March 2026.</p>	We are working to coproduce a specification for a full re-tender in 2026.
Extra Care Housing			<p>As we start to reduce residential care, we anticipate the demand for extra care housing to increase. We will review our extra care accommodation to ensure that it meets the needs of Oldham residents. This includes considering nighttime support.</p>	<p>As part of the Commissioning Development Plan, we are looking to increase the available accommodation for Extra Care services in borough.</p> <p>The current contract for the Extra Care Service, which is a part of the Care at Home contract, will be retender in 2026 (as above for Home Care).</p>
Accommodation with support (this includes Supported Living.			<p>Various accommodation with support options is currently available to support people with Autism, Learning Disabilities and Mental Health Conditions. This includes Supported Living and Respite.</p>	<p>We are exploring opportunities to use Greater Manchester Frameworks for Supported Living to deliver this service moving forwards.</p> <p>We are also exploring opportunities to develop new accommodation within borough to support this model expanding.</p>

Service Type	Supply	Demand	Summary	Next Steps
Individualised Service Funds			We are developing our systems to enable more Individualised Service Funds in the borough.	We will consider this vehicle in all future contracting.
Third Party Brokers			Third Party Brokers support people in receipt of Direct Payments.	Looking at opportunities to utilise the Greater Manchester Framework.
Day opportunities			Oldham has a range of day opportunities to access for people with a learning disability and also offers day care to older adults. We want to work with day service providers with a view to creating a 'Recognised Provider List'	We are exploring opportunities to commission via Greater Manchester.
Early Intervention and prevention			We will be looking at opportunities to increase our offer around early intervention and prevention, developing support in our communities and ensuring people utilise community assets wherever possible	We will work with partners across the council, including Public Health to ensure services are available to support people in the community.
Community equipment and adaptations			We are reviewing our current offer around equipment to ensure opportunities are maximised to people to remain as independent as possible for as long as possible	We are completing a full review of these services.

Service Type	Supply	Demand	Summary	Next Steps
Care Technology Enabled Care			Ageing population projections, increasing home care packages and hours, a focus on strengths-based practice and enabling residents to live independently for as long as possible to meet their care outcomes	A need to ensure that we remain on top of latest developments via the benefit of a strategic partner relationship. Competitive dialogue provides best route for this given the dynamic market and system developments.
Support for unpaid carers			We recognise that the number of unpaid carers continues to increase. We need to ensure we provide support to those carers to allow them to maintain to play this crucial role and avoid carer breakdown.	We will be refreshing our carers strategy and developing plans to reach more people and improve the range of support offered to unpaid carers in the next couple of years. This will closely link with the prevention agenda referenced above.
Third Party Brokers			Third Party Brokers support people in receipt of Direct Payments.	Looking at opportunities to utilise the Greater Manchester Framework.

11 Useful links and contact details

11.1 Oldham

Oldham's Joint Strategic Needs Assessment (JSNA): [Oldham Joint Strategic Needs Assessment](#)

Oldham Corporate Plan: [Oldham Corporate Plan](#)

Contact us: asccommissioning@oldham.gov.uk

11.2 Greater Manchester

Greater Manchester Combined Authority: Home - Greater Manchester Combined Authority (greatermanchester-ca.gov.uk)

Greater Manchester Integrated Care Board: GMIntegratedCare.org.uk

11.3 National

Association of Directors of Adult Social Services: Adass.org.uk

Skills for Care: Skills for Care

12 Data Sources

Throughout this document we have used a range of sources. Some of the data is from our own internal Mosaic Client Management system however other data sets are available and are listed below:

Oldham JSNA [Joint Strategic Needs Assessment | Oldham](#)

Oldham Integrated Care Partnership (ICP) 2024/25 delivery plan <https://committees.oldham.gov.uk/documents/s146650/2024-25%20delivery%20plan%20-%20Oldham%20ICP.pdf>

POPPI [Projecting Older People Population Information System](#)

PANSI [Projecting Adult Needs and Service Information System](#)

Skills for Care Workforce Data [Adult Social Care Workforce Data](#)