

Supporting People Provider Consultation Meeting
3 July 2012
Ballroom – Bootle Town Hall

Excluded – Visiting Support

Minutes

Present:	Lesley McCann	Supporting People
	Lesley Smith	People Directorate
	Tony	Deafblind UK
	Louise Carter	Deafblind UK
	Steve James	DISC
	Andy Bourne	DISC
	E Jowell	Home Group Ltd
	L Hartley	Imagine Independence
	Greta Morphet	Light for Life
	Sharron Mitton	Light for Life
	Marie Hall	Merseyside Youth Association
	Gill Bainbridge	Merseyside Youth Association
	Mike Richmond	Nugent Care Society – Deposit Guarantee
	Tony Connor	Nugent Care Society – Deposit Guarantee
	David Colbourne	Sefton Council Energy Team
	Ian Weller	Sefton Council Energy Team
	L Webb	Venus Resource Centre
	C Machell	Venue Resource Centre
	Neil Woodhouse	Sefton Housing Options
Apologies:	Sefton Council VVAT	

The following notes summarise a presentation by Lesley McCann and a subsequent question and answer session.

No.	Item	Minute
1.	<u>Introduction</u>	Lesley McCann introduced the meeting and attendees, and explained the purpose of the meeting
2.	<u>Background & Context</u>	<p>In 2010, the government announced a public sector spending review, with local authority funding being cut by 28% over 4 years. This was significantly front-loaded in 2011/12 with savings of £44m.</p> <p>By 2014/15 there will have been savings of over £100m. We cannot cut this amount of money without radically changing how we operate. Through Sefton's Transformation Programme, we set out a clear prioritisation of services; we reviewed our own costs and reviewed the charges for services.</p> <p>Supporting People, whilst important, is discretionary and we need to remember that within discussions and decisions.</p> <p>In respect of the Supporting People Programme on 16th February 2012, Cabinet approved a further review to consult on commissioning priorities and how the reduced budget could best be delivered.</p>

No.	Item	Minute
		<p>Progress of this was reported to Cabinet on 21 June 2012 and a link to the report is on Sefton's Website.</p> <p>Having considered the report, Cabinet approved the commissioning principles by which we will commission services and authorised us to talk to providers using these principles and to provide further update on progress on 19 July 2012.</p> <p>We cannot afford any slippage, hence the updates.</p> <p>Our aim is to deliver some service to all client groups.</p> <p>£3m is a 44% reduction in the supporting people budget but we will not be seeking the same level of reduction from all services. We applied the principles and proposals and then looked at the impact. The proportionate allocation doesn't change markedly across the service groups between the current and proposed future spend.</p> <p>The two figures that might prompt questions are the amounts for Excluded and for Care and Support, this is not an increase in funding; traditionally, people chose what groups they went into, we then looked at service delivery and moved some clients from one group to another. Hopefully in the future all groups will come under the one heading of Prevention.</p>
3.	<u>Savings Proposals</u>	<p>The savings proposals for Excluded – Visiting Support were outlined in the slides as follows:-</p> <ul style="list-style-type: none"> • To reduce overall cost by varying hours and hourly rate and where necessary reshaping service delivery • To retain the number of clients accessing a service at any one time • Increase the throughput of clients by varying the length of stay in a support service
	<u>Next Steps</u>	<p>You need to consider the information provided to you at this meeting. Consult with service users as necessary, i.e. the impact of any changes. Comment on how services should be remodelled and comment on impact and any mitigation.</p> <p>We will provide an easy read document to share with service users, which brings service users up to this point. It will have feedback on previous consultation and where we are at now.</p> <p>We will hold individual meetings with you around our / your proposals and how we proceed. All responses will be fully considered and Elected Members, who are the decision makers, will be fully informed. A report will be presented on 19th July Cabinet, and will be published a week before (12th July). Work will continue right up to the deadline, and consultation will continue post this date.</p>
5.	<u>Questions & Comments from Attendees</u>	
	<u>Question</u>	Is this a % cut or hours cut? We need to have an indicative amount to work with?
	<u>Answer</u>	We will be able to answer this in detail at individual meetings. Every organisation is different, with different staff structures, wages, and overheads etc. We will be looking at all contracts this may involve varying hours or hourly rate and in some cases both
	<u>Question</u>	You talked about parameters, what is the hourly rate you are looking for?

No.	Item	Minute
	<u>Answer</u>	Because of the different client groups supported by the providers present it is difficult to give an hourly rate, however from we have established fro different benchmarking data across the North West the average hourly rate is approx £18.99, for services who support people with multiple needs, this does not mean we will increase a providers hourly rate if it is below this.
	<u>Question</u>	We are a specialist service with only 5 hours a week, how can we reduce costs on 5 hours a week?
	<u>Answer</u>	With that type of service, you may not wish to continue to deliver the service if it is not financially viable; it may need to be included in another contract. If that is a discussion you wish to have, this can be done in individual meetings
	<u>Question</u>	Can you interpret the chart on the presentation with regard to the percentages?
	<u>Answer</u>	That is a snapshot at this particular time. £3m is a 44% reduction in the supporting people budget this has not been applied across all services. We applied the principles across all services to develop individual proposals. The chart shows the current situation with regards to percentage of current and future spend in each of the overarching groups if all the proposals are achieved. As you can see the percentage of allocated funds doesn't differ greatly from current to future spend.
	<u>Question</u>	How long are contracts likely to be, going forward?
	<u>Answer</u>	At present we can not give a definitive answer a rough estimate is 18 months, depending on the outcome of provider meeting. We couldn't offer more than 18 months as this takes us up to the next Local Government spending review.
	<u>Question</u>	At the Care & Support meeting yesterday, it was said that the integrated commissioning will be happening in 2013.
	<u>Answer</u>	Care & Support will be going through a procurement exercise, which is slightly different but is part of the commissioning plan
	<u>Question</u>	We may have to look for money elsewhere, in order to reorganise the service, we may have to do things differently
	<u>Answer</u>	Contracts need to be more flexible. As long as the outcomes make a person less vulnerable and more independent with regards to their housing arrangements, it will be OK.
	<u>Comment</u>	Commissioning small services often address a specific need and to lose these could have a greater impact. There needs to be consideration for the actual impact of services
	<u>Question</u>	What is the timeframe for individual meetings, because looking at the bigger picture, the individual savings need to add up; what is the timeframe to know what we are actually getting, because you won't know until you have everyone's input?
	<u>Response</u>	We have to save £3m, and the sooner we speak to you all, the quicker we can reach an agreement. Hopefully by September we will have agreed all new arrangements, the new contractual arrangements will be from 1 October 2012

No.	Item	Minute
	<u>Comment</u>	People will have left by then
	<u>Response</u>	We appreciate that staff will look for other jobs if they feel they are not secure, this is why it is important to meet sooner, rather than later and to involve staff in your proposals. You are aware that the Supporting People Team also have to realise efficiency savings and will be part of the restructure involving all commissioning functions, so we do understand the pressures on providers.
	<u>Comment</u>	This is an anxious time for clients, and it's about how we manage that
	<u>Response</u>	Even if hours are reduced, we are trying to keep the same number of clients. They will still receive a service, just a reduced one
	<u>Question</u>	If organisations negotiate reduction and accept as Peter Moore hopes for, an 18 month contract, will there be further negotiations or will it be stable?
	<u>Response</u>	We have not been told of further cuts, I can't guarantee no further changes, but the contract will be similar to now in that, there will be a termination and value for money clause.
	<u>Question</u>	Is there going to be a move with prevention to happen on a city wide regional basis?
	<u>Response</u>	We have always worked on a cross authority basis; we currently have a HIV service which is funded by the five Merseyside authorities. We will always consider opportunities for cross authority working.
	<u>Question</u>	Will negotiating with service users be down to us?
	<u>Response</u>	Yes, this is part of our contract with providers and is measured via the quality assessment framework. We will assist and support if you require this, but it is the providers' responsibility to consult on the changes to the service they are delivering.