

**VALE OF GLAMORGAN AND CARDIFF
REGIONAL COLLABORATIVE COMMITTEE
Minutes 4 November 2014**

Present:

Cllr Bronwen Brooks – VGC (Chair)
Frances Beecher – Cymorth
Cllr Susan Elsmore – Cardiff
Mike Ingram – VGC
Jane Thomas – CCC
Jeff Gooch – Cymorth
Helen Jones – CHC
Mark Sheridan – CHC

Phil Richardson – CHC
Dr Sian Griffiths – Public Health Wales
Meredith Gardiner – V&CUHB
Donna Lemin – Welsh Government
Karen Price – Welsh Government
Neil Sutcliffe – CCC
Pam Toms – VGC
Sarah Capstick – RDC (minutes)

Apologies:

David Bebb – Probation
Ceri Meloy – Cymorth
Chris Maggs (CrM) – SPNAB

Agenda item	Action
<p>1. Welcome, introduction, apologies and declaration of interest</p> <p>The Chair welcomed everyone to the meeting and especially Meredith Gardiner from Cardiff and Vale University Health Board who is replacing Sian Harrop-Griffiths who has moved to another Health Board.</p> <p>Apologies were received in advance of the meeting.</p> <p>The Chair asked if there were any new declarations of interest. SE – asked if all of the providers needed to declare an interest in regards to the models for cuts in Cardiff. FB & MS explained that the reps are given a mandate through the provider forum and they have to represent those views. If the provider and landlord reps have to declare an interest then so would the LA as they also are a service provider. If discussions are about a specific scheme then in previous meetings a declaration of interest has been made and individual has left the meeting for that agenda item.</p>	
<p>2. Minutes and Matters Arising</p> <p>No amendments to the Minutes of the meeting on the 2 September 2014 were raised.</p>	

<p>The minutes were approved unanimously.</p> <p>SE – The Cardiff Cabinet Office have made a number of approaches to arrange a meeting of SE with BB.</p> <p>BB – Confirmed that a request has been received and that the Vale Cabinet Office are currently waiting for a response with possible dates from Cardiff.</p> <p>PT – Funding for the RDC post has been confirmed to June 2015.</p> <p>Action Meeting between the Cabinet Members from both Local Authorities to take place.</p>	SE / BB
<p>3. RDC report to the RCC, including the work plan and Welsh Government notices.</p> <p>The RDC report and the workplans were issued prior to the meeting along with the Welsh Government update.</p> <p>SC – There has been a lot of correspondence since the last meeting which is included in the report. The RCC newsletter was delayed due to late submissions of articles and then other work commitments, should be out in mid to late November.</p> <p>DL – Steve Lynch has joined the Welsh Government SP team as a Governance Manager, who will be responsible for covering 3 RCCs and have responsibility for the ‘repository’. DL has been appointed to a permanent position, and they are still appointing a data analyst. Outcomes analysis and the spend plan analysis have been approved for release as working documents and are due to be issued tomorrow.</p> <p>Actions RCC newsletter to be published electronically by the mid/end of November 2014</p> <p>Outcomes analysis and spend plan analysis to be issued as working documents.</p>	SC DL
<p>4. Future meeting frequency from January 2014</p> <p>Paper circulated with the agenda with the advantages and disadvantages for continuing bi-monthly or changing to quarterly.</p> <p>BB – With impending cuts and discussions around them, would prefer the meeting to remain bi-monthly.</p> <p>FB – There are key strategic decisions to be made, so the meetings need to remain bi-monthly.</p> <p>SE – Less is more. Paper shows it is finally balanced between</p>	

<p>advantages and disadvantage of the options. Agreed for meetings to continue bi-monthly for six months.</p> <p>Agreed for it to be revisited by the RCC at the March meeting to make a decision on frequency after the May meeting.</p> <p>Action Meeting dates for March and May to be set and circulated.</p> <p>Future meeting frequency to be added to the agenda for the March RCC meeting.</p>	<p>SC</p> <p>BB/FB/SC</p>
<p>5. Cardiff Learning Disability supported living service update</p> <p>Paper was circulated in advance of the meeting.</p> <p>NS – Currently the process is at the PQQ stage. If anyone has any questions they can be taken back and responded to in writing.</p> <p>MS – Is the 50/50 quality/price ratio going to be the standard for all commissioning going forward? JT – No, it is decided as part of each procurement process. FB – Is there any criteria for how the ratio is set? JT – 30/70 is normal ratio, so this is an increased focus on quality.</p>	
<p>6. LA updates: including where cuts may be made</p> <p>Papers were circulated with the agenda and in a separate email prior to the meeting.</p> <p>PT Provided a verbal update on the June – October 2014 update from the Vale of Glamorgan. PT then mentioned the process that had been undertaken to look to manage any cuts in SP funding and where those suggested cuts could be made and also decisions on commissioning priorities made.</p> <p>DL – Where does the Local Planning Group cover and who sits on it? PT – It is Local only to the Vale of Glamorgan. Members on the group come from the Vale Housing and Social Service departments, Probation service, Cardiff and Vale University Health Board and the Third Sector (nominated from the Vale Housing and Homelessness Forum). MI chairs the group.</p> <p>NS provided a verbal update on the June-October 2014 update from Cardiff, including that the complex needs project has successfully been tendered for and the 6 bed unit will be operational by the end of the year. 22 contracts signed and returned, 12 currently still outstanding.</p> <p>BB – Any reasons for outstanding signed contracts? NS – The contracts require the Company seal to be applied and for</p>	

some providers this takes time as it may have to go to the Chair or Board. Legal will be writing out to all those still outstanding shortly.

JT introduced the Cardiff paper on the main themes arising from consultation and apologised for the short turn around time. The paper includes some example comments and what the LA will do as a result of those comments. Most of the comments received were proactive, with a focus on 24hour services, move-on units and service pathways. This is the end of phase one, stage two will look at how the proposals will affect each project/scheme individually and providers will be written to with details of their individual projects. We were going to wait for the Welsh Government indicative budget figures to give more accurate details, but don't think we can delay. Providers will be met with individually or invited to sessions for feedback on the possible impacts.

FB – Cardiff were very helpful in allowing the providers to all meet before they carried out the consultation meeting. The meeting with Cardiff was quiet, the meeting of providers before was more animated. The providers asked the RCC reps to bring a number of issues to this meeting.

- Providers did not feel that there was a strategic plan, as the impacts on services has not been thought about.
- Concern that the services that could survive are those with the deepest pockets.
- Suggestion that the relevance work be revisited so that cuts are on a more strategically relevant basis, so highly strategically relevant services are not lost as an unanticipated consequence.
- Service reviews should be used.
- A more sophisticated model needs to be developed, rather than clump services together, which ignores the complex needs.
- Rates suggested have been estimated to impact some providers disproportionately. With some having no cut and others up to 30%.
- Providers have asked for an Equality Impact Assessment on the proposals.
- Providers agree that the huge price variances have to be dealt with, but that the current three tiers are too restrictive.
- There will be an impact on frontline services on the current suggestions.

MS – Awareness that the cuts have to be undertaken and managed. Our concern is around the methodology. The structure of 'Caps' was seen as being too flat and repeats the mistakes of the first attempt at tariffs from the WG before they were re worked to reflect scheme complexity. As an example, Taff HA projects which were on the basic tariff transfer to the cap with limited impact. Those which received the higher rates to reflect additional work, such as, work with children, do

not. If these projects for people with higher needs are strategically relevant to Cardiff then the model would need to be reviewed or these types of services will be lost.

JT – The impacts will be looked at as part of stage two.

MS – There is a need for more bands to enable differences to be identified.

JT – Some schemes are much more expensive, so we need to look at the value for money part initially as set out in the WG Guidance. The next stage is the more in-depth detail and the impact that may have on service delivery.

MS – This needs to be discussed at a strategic level on a general basis. Some schemes have higher costs because they provide additional (bolt on) services. This is a well-trodden path from the old tariff system, where those providing a basic service were able to adapt easily to the capped amount but the more complex services were penalised and left vulnerable to being unviable.

JT – It may be a well-trodden path during a time of prosperity but not at a time of cuts.

FB – The strategic relevance work needs to be revisited. If Cardiff chose to make a scheme unviable through these caps that will then have a knock on impact. How will that fit into Cardiff's strategic plan going forward? Next year we are anticipating more cuts. Will retendering cut the cap further (limiting the scope of services) or reduce the number of units? Those decisions need to be made at a strategic level before. Providers want to know what the similarities are and differences within each banding.

JT – Providers didn't state any of these concerns in the meeting or in the written feedback.

HJ – The provider meeting made it very clear that none of the RCC reps have a mandate to agree the methodology with the detail given so far.

JT – Consultation has been done.

MS – As RCC reps we have to agree the methods, caps currently being suggested cannot be agreed.

SE – Does the RCC need to agree the method?

RCC – Yes (from multiple sources around the room).

FB – The provider meeting was attended by Nic from Cymorth as an independent, who provided a written response following that meeting. All providers in attendance confirmed that they had received the papers from Cardiff. They were asked and confirmed that they understood the method being proposed. They then asked the RCC reps to bring certain things to the RCC for discussion, which is what we are doing today.

JT – What would happen if the methodology was turned down by the RCC?

DL – It would be referred to Welsh Government to Ceri Breeze. Are we at that stage?

FB – We are not yet at that stage, as we are still having discussions. Concerns were raised around allowable activities. Cardiff have listed the items not eligible but it doesn't link with the SPPG funding that

they are being measured against. Contracts with providers are based on delivering outcomes, so this is seen as a step backwards and needs to be looked at again.

JT – Just because something is allowable doesn't mean we need to fund it. In the feedback paper we have stated that we will review the descriptions based on comments received as part of stage two and will be part of that consultation.

DL – There appear to be two issues, one is the concerns around eligibility and the other is around bolt-ons.

FB – Providers are concerned about the lack of clear methodology. It is great to say everything is strategically relevant. As it stands some smaller providers may close, so a project could be lost that is strategically relevant.

JT – We will provide more information on how the figures were developed.

MS – Could the proposed discussions take place, how the figures were developed shared and revised papers be brought forward?

JT – Cardiff have already delayed going to Cabinet until January so it could come back to the RCC. We will provide the extra detail in the methodology. We will also meet with all providers due to be affected and provide a report to the RCC.

FB – A lot of the issues now are the same as when SPRG was introduced.

JT – We have not had a response to say that anyone disagrees with the methodology.

FB – Everyone agreed that there has to be change, but concerns were raised that old issues were going to be reintroduced. So need to look at what the bolt ons are which have raised the costs of schemes. And Eligible/Ineligible activities need to be revisited.

JT – We need to move onto the next stage. We will never get consensus.

MS – The RCC doesn't agree the cuts, just the methodology.

FB – The LAs then make the decisions on where the cuts are made. Concern raised is that there may be unintended consequences.

BB – Will there be a formal response to the providers from the RCC?

FB – The reps will provide a written update through Cymorth and CHC.

JT – We will get the updated methodology with the added detail out as soon as possible.

DL – Can it include more detailed timings?

JT – A decision may be that we can't afford a service going forward, but that would be a considered decision based on stage two findings and further discussions.

HJ – There could also be a knock-on effect to other statutory services, if higher level services are lost as a result.

JT – The timetable and methodology will be added to and circulated. Papers to individual organisations will be sent out as soon as possible as well, these will not have exact figures on them as we don't have indicative SP figures from WG.

NS – Any idea when we will have the indicative figures?

<p>KP – They are currently with the Minister for a decision. BB – Please can you take it back to the Minister from the RCC that we would appreciate a decision and the figures circulating as soon as possible. KP – Confirmed. DL – All RCCs have similar concerns. JT – Having the figures sooner will allow transition funding planning as well. DL – Spend plans, outcomes, reviews etc all build up the evidence base which is crucial for spending decisions. The Finance Minister, First Minister as well as our own are keen on the evidence.</p> <p>Actions</p> <p>Cardiff to contact all providers with outstanding unsigned contracts.</p> <p>More detailed methodology including timings and how the caps were developed to be shared with the RCC by Cardiff.</p> <p>Cardiff to start stage 2 of the process, by writing out to each of the providers affected and meeting to find out how the reduced funding would affect service delivery.</p> <p>Eligible activities to be reviewed as part of stage 2 activities.</p> <p>WG officials to feedback on the need for indicative figures to the LAs as a matter of urgency.</p>	<p>Cardiff legal</p> <p>JT /NS</p> <p>JT / NS</p> <p>Cardiff</p> <p>KP / DL</p>
<p>7. Outturns April to September 2014</p> <p>The Outturns excel document was circulated in advance of the meeting with the agenda.</p> <p>Outturns approved.</p> <p>DL – Overview on all spend plans when it is issued includes average unit costs etc. FB – It is currently difficult to scrutinise the outturns. DL – Management charges comparison is something that will be being looked at by Welsh Government. What is included in management charges, as well as how much. HJ – Smaller organisations will have a larger percentage of management charges that larger ones. It can also be down to what individual accountants list under them. FB – There needs to be consistency across Wales on what is and can be included in management costs. DL – Sheilah is in the process of writing the specification for the management charges research. MS – Can the tender include people to be interviewed as part of the review. It is important that finance departments are included. JT – Interesting that the focus is on management charges and not on</p>	

<p>how much is spent on funding services. When you buy something from a shop you buy the product and it isn't relevant how much of the cost is for backroom services, your focus is the product itself.</p> <p>FB – Focus should be on what the services achieve, not just now but where ex-service users are years down the line.</p> <p>PT – How are WG going to review small and very local service providers?</p> <p>DL – There needs to be clear guidelines on what is acceptable and what is not for inclusion in management costs, so they are more consistent.</p> <p>Actions Approved regional outturns to be submitted to Welsh Government</p>	<p>SC</p>
<p>8. Older persons task and finish group update</p> <p>Paper circulated with the agenda.</p> <p>HJ as the Chair of the group gave a brief overview, including the older persons provider meeting which looked at the impacts of changing services from tender to need based.</p> <p>Two points for discussion:</p> <ol style="list-style-type: none"> 1. Task and finish group to be extended so that they can carry out the monitoring of progress against the timeline. 2. Permission to consult on the draft timeline across the region. <p>Agreement for both agreed.</p> <p>Action Task and finish terms of reference to be extended to include the monitoring of the timeline until all services are needs based.</p> <p>Draft timeline to be consulted on across the region.</p>	<p>T&F group</p> <p>T&F group</p>
<p>9. RCP task and finish group</p> <p>Paper circulated with the agenda.</p> <p>Permission to consult on the draft plan between now and the end of December was agreed.</p> <p>The recommended questions for the consultation were agreed.</p> <p>Comments on the 'our region' section can be made as part of the consultation response.</p> <p>SC raised the need from the RDC network, a need to add something about Outcomes has to be added. No other additions were raised prior to the document being consulted on.</p> <p>MS thanked SC for all the work that she has put into the paperwork</p>	

<p>on behalf of the task and finish group.</p> <p>Actions Consultation question document to be created using the agreed questions.</p> <p>Plan to be issued with consultation questions</p> <p>Feedback from RCC members to 'our region' section to be given as part of the consultation.</p> <p>Following consultation finalised draft document to be agreed and brought forward to the January RCC meeting.</p>	<p>SC</p> <p>SC</p> <p>RCC Members</p> <p>T&F group</p>
<p>10. Outcomes task and finish group</p> <p>Paper circulated with the agenda ahead of the meeting.</p> <p>How to collect the outcomes for alarm services was agreed to be deferred for a piece of work that is being carried out by SPIN and Cymorth which may change how they are collected by Welsh Government.</p> <p>Agreement was given that once the regional service plan and review document has been created in draft it can be consulted on, the final draft version after consultation will then come to a future RCC meeting. The document is not expected to be ready for consultation until December.</p> <p>SC thanked SG for her involvement in moving the task and finish group forward.</p> <p>DL – All LA's are currently preparing the outcomes for April to September. Hopefully there will be improvements in the reporting with less gaps in the data, and it should be less painful than last time with only one period to be reported on. The outcomes analysis will be issued as a working document tomorrow and will then be issued on an annual basis. There needs to be a focus on joined up thinking around the outcomes and how they can be used. MG – Outcomes should show the impact of services.</p> <p>Action Draft Regional service plan and review document to be consulted on once ready.</p> <p>Draft Regional service plan and review document to be finalised and brought forward to a future RCC meeting.</p>	<p>T&F group</p> <p>T&F group</p>
<p>11. Collaboration, Good Practice and Innovations</p> <p>Paper circulated with the agenda. The paper showed two</p>	

<p>engagement methods used within the Vale of Glamorgan.</p> <p>BB – S’Not Man was a great engagement tool at the service user summer event. Loads of information was collected and is being used to improve services.</p> <p>FB – We need to get better at service user engagement and try to come up with how service users can be involved with strategic debates. The challenge is how we do it. There needs to be a workplan to improve it so that the voice of service users is much stronger at a strategic level with the RCC and also for getting feedback on services.</p> <p>MG – The UHB has just put together a paper on consultation for the Health and Social Care programme, which can be provided to SC for circulation.</p> <p>Actions C&VUHB paper on consultation for Health and Social Care programme to be circulated to the RDC members.</p>	<p>MG/SC</p>
<p>12. Any other Business</p> <p>No other business was raised.</p>	
<p>13. Agenda items for the January 2015</p> <p>Agenda items for January 2015 as listed were agreed. No additional items were added.</p> <p>Action Agenda for the November meeting to be set and circulated.</p>	<p>BB/FB/SC</p>

Date of Next Meetings

2pm, Tuesday, 13 January 2015
Armstrong Room, Wilcox House, Cardiff