

Supporting People

Minutes of the Supporting People Strategic Core Group meeting held on Tuesday, 14th September 2010 2 - 4pm, Lockwood Room, Design Exchange

Present:

Pip Tibbetts (Vice chair)	West Yorkshire Probation
Jayne Hellowell	Supporting People Lead Officer
Sheila Bamford	Executive Director-Horton HA (Provider Rep)
AK	SP Service User
Katie Nutman	SP Service User Involvement Officer
Sarah Possingham	Access to Housing, CBMDC
Pam James	Service User Advocate
Val Balding	Safer Communities, CBMDC
John Hill	Foundation Housing (Provider Rep)
Nina Smith	Safer Communities, CBMDC
James Purdie	Children's Services
Maggie Colwill	SP Quality Champion
Dave Coe	Bradford Youth Offending Team
Graham Mynott	Keyhouse (Provider Rep)
Mark Hird	Bradford Foyer (Provider Rep)
Claire Blacka	Stonham (Provider Rep)
Neal Heard	BACC (support to service users)
Tim Sanders	Strategic Commissioning, CBMDC
EW	SP service user
AK	SP service user

1. Apologies / Introductions

Guy Van Dichele SP Accountable Officer and Assistant Director Commissioning, Performance and Business Support

David Shepherd Assistant Director Housing Service, CBMDC

Welcome & introductions were made around the table

Due to the significant changes that are currently happening within the council, Guy and colleagues on that senior level are asked to attend meetings up and above what they normally do. Because of this Guy's attendance for this meeting has dropped a bit. Jayne informed members that Guy has stressed his commitment to the programme but is having to prioritise his workload as part of changing the council.

2. Declaration of Conflicts of Interest

Item 4 – Graham Mynott

3. Minutes and matters arising from the meeting held on 20 July 2010

Pg 2 – Requests for increase and how costs have been accumulated.

It was noted this isn't just in respect of an increase in costs but in all reports where increase in funding is mentioned i.e. where there are changes and SP have to substantiate those changes in context to which they have been made.

Pg 2 – Handout from Tracey from LHT

Action - SP to chase this up with Rominder and send out with the minutes.

The minutes were agreed as a true and accurate record

4. Lead Officer Update – Jayne Hellowell

4.1 Feedback from Commissioning Body meeting 23 August 2010

Jayne gave the following update to SCG members and informed members that all recommendations submitted were endorsed by CB members.

- Moira Wilson re-elected as chair
- Support to impact assessment and decommissioning process re LHT
- Approved re-commission of the Gypsy & Traveller service but with no uplift for extension of capacity
- Members requested a briefing on the new QAF
- Accepted recommendation for the implementation of the LD Framework.

4.2 Refugee sector review update

Jayne reported that 3 services were looked at, 2 have met the requirements of the review and 1 has not met them. An impact assessment is currently underway for the unmet service as requested by SCG members. The outcome of this sector review will be presented to the SCG on 09.11.10. It was pointed out that all 3 services are considered as one sector and therefore recommendations will reflect the outcome of all 3 reviews and not be delivered in isolation.

4.3 Langley Trust - Update

Jayne informed members that SP are currently in the process of carrying out an impact assessment and partners are also engaged in this. The report will be brought back to SCG on 09.11.10 and members will be asked to make a decision on the outcome of that.

A discussion took place about the last meeting where Tracey Wild – Corporate Director was present to represent Langley Trust. There was general agreement by all that the meeting was very uncomfortable for members as well as the provider and as a group this part of the meeting was not managed very well.

Jayne requested for suggestions from members on how this can be better facilitated should members be in the same situation again.

After discussion Jayne summarised the following:

- The TOR's to stipulate the following wording – “to have appropriate and reasonable level of representation”
- The numbers of representatives attending the SCG to be left for that provider to decide.
- SCG provider reps will be nominated to discuss the process with that provider. A member of the commissioning team will also support the SCG provider rep on doing this.
- The provider reps will be asked to wait until business has been concluded. This is so that they can be asked any questions should further clarity be required.

Jayne also informed members that LHT's contract is due to expire on 31 December 2010. Jayne suggested for this contract to be extended for a further 12 months regardless of the decision in November. She pointed out that should the decision in November be for decommission, then extension on the contract would be required anyway so that SP can procure in another service.

The following concerns were expressed:

- (1) Would the extension of 12 months have an impact on the consistency of the contract management process?
- (2) Is the extension of the contract for the provider to meet the QAF standards?

Jayne clarified that should the decision in November be for decommissioning of the service, then the 12 months is not for the provider to change that decision but the 12 months is for the authority to procure in a new service so that the existing service can have dialogue with the new provider around things e.g. TUPE regulations etc.

In terms of consistency the process is the same but the provider and time has just been shifted. It was noted that for future reviews providers will see a more lengthy time for when the review start and end.

4.4 Contract Management Timetable

Jayne went through some of the factors affecting service delivery by the Commissioning Team

- Staff shortages (freeze on recruitment),
- Staff knowledge. Jayne informed members that there are now 4 managers' within the Commissioning Team. They will be known as Contract & Quality Assurance Managers. They are all working towards a generic job description. The commissioning team will be working towards 1 framework for quality assurances on every type of service that the commissioning team may be asked to contract manage. This is not only SP services but could be transport, day care, domiciliary care, residential care etc.
- Reduce in scale the QAF. The QAF repeats itself in lots of areas so Maggie is working on reducing some of those standards down and make it much more sensible and pragmatic.
- Reducing the number of reviews by contract.

Decision – All members agreed and noted the following:-

- Put back the contract reviews of the generic, homeless and rough sleepers. Note these services have undergone annual review and so knowledge of performance is already known and service improvements are already underway where necessary.
- Revise procedures to streamline reviews and incorporate impact assessments prior to decision making.
- Implement the training programme for providers to December on implementing the QAF.
- Consider the recommendations to be made to the SCG in November on the implementation of the QAF.
- Consider the above in light of the outcome of the Comprehensive Spending Review and potential tendering options by sector.

4.5 Attendance monitoring

A warm welcome was expressed to all new members of the SCG and thanks were conveyed to Mike Harney, Jenny Moran-Whitehead and Harry Whittle for their commitment to the SCG, particularly to Mike as he has been a long standing member of this group.

5. Service user Strategy & Action Plan

Emmerson and Andrew gave a presentation on the Service User Action Strategy and Action Plan. The purpose of the action plan is for providers of housing related support to use this as a tool to demonstrate how they are working towards improving the issues that have been raised by service users. The action plan also enables providers to demonstrate how they have involved service users in these improvements (Client involvement and Empowerment QAF objective).

Members thanked the SU group for the excellent presentation

The following questions/queries were asked about the results from the questionnaires

- Are the results broken by sector

- Has there been different responses by different sectors
- The poor quality housing - is this just bricks and mortar or does it include the environment i.e. neighbour hood issues
- Were views on neighbourhood asked?

It was noted that questions relating to neighbourhood was not asked in this survey but these queries and suggestions was very much appreciated and it was noted that these suggestions will be used to design next years survey.

Katie reported that each provider who returned the completed questionnaire got an individual report of their results. This questionnaire was also incorporated into the reviews so a high response rate is received from nearly all client groups.

Concern was expressed about the questionnaires for the LD client group. It was pointed out that this client group tried to fill out questionnaires but the clients didn't understand what they were doing so the response rate from the LD client group may not be as good as others.

Katie responded that the survey is just one example of where information is sought from. Information has also been gathered from consultations and at SU involvement group meetings.

It was suggested that for the design of the next survey it could be more LD specific and to think of other mechanisms that can be used for that client group.

A difference of opinion emerged over providers filling out the action plan. Providers raised the following concerns:

- A very detailed document to complete whereas providers have to adhere to Quality Assessment Framework which is intense enough.
- A detailed piece of work here for providers to do which is felt as additional bureaucracy at a time when providers are looking at how it can be reduced.
- Some of the questions asked e.g. about benefits, Providers have no control this type of issue as this is out of their hands.
- Some of the questions/concerns may not apply to certain providers.
- As this is a generic questionnaire it will not give any information that is not already known.
- The good providers will be the good providers and complete this where as the bad providers will not fill it out or will not answer it truthfully.
- Feels like another level of review on top of the reviews that are currently carried out.
- How does this tie into the contract management timetable? If this process does go ahead and a provider does not respond or fill out the action plan – what happens?
More clarity is required for providers on where this sits in relation to management of their contracts.

In response to the above queries the following points were highlighted:

- One of the QAF requirements is SU involvement and this is part of it
- Completing the action plan is for better info and communication. It is the real way of finding out how individual projects are involving SU, allowing to demonstrate SU involvement in the sp programme, allowing to pick out the really good stuff that already happens in lots of other projects and enables sp to pick out examples of good practice that might be happening with providers / other areas.
- The SU group is independent from sp management. SU have their own committee and want to see their own results. SU want to compare and contrast things here and want independence on that. What is done will be managed from the committee and managed by SU for SU. This will then be checked against what the sp team do but it also can be used to support that provider during the in-between bit – when sp are not looking at that service review.
- This is a piece of action in response to a survey that's already been carried out which has been generated by the SU group. They are taking action in response to some information and starting a piece of work and will see what comes back. It relies on the providers to say we are doing this or we are not doing that.

- The response to this backed up with evidence will be supportive for future reviews around QAF standards, su involvement and is a strategic level support for providers working towards B's and A's. So the real advantage is for the providers. It will be a win win all round.
- Providers to only fill out the bits that are relevant to them.

Katie reported that this is currently being piloted with some providers before it is put in place. The SU group would like to bring this to the next provider forum and to have dialogue with the wider provider group to get their understanding on this.

Claire informed members that she is one of the providers that this is being piloted on. She reported that the way it was presented to her was she was asked to fill out as much as she could. It was not expected that the service will have done all these things. It is expected that there will be areas of improvement, some things may work for the service and some things might not work at all.

She also pointed out that there were some repetitive questions and some questions could be asked differently. It is a bit onerous but other than that it's a really good idea and a good opportunity to share good practice. There is some work required on it but otherwise she fully supports it.

Decision – To accept the recommendation as it stands subject to consultation and agreement with the provider sector. This will not go to the CB meeting until the consultation with providers has taken place.

This will not come back to the SCG but the Provider forum chair, Jayne Hellowell and SU involvement group will agree this as a way forward once the consultation with the provider forum has taken place.

6. **Service User Reward & Recognition Policy**

Emmerson went through the report which provided the reviewed Service User Reward and Recognition Policy for the Bradford Supporting People Programme. The following key points were highlighted

- The SUIG have agreed a new payment system that is clear and consistent
- Reward of a voucher payment for being involved in an activity has been dropped by 50%
- Other types of rewards have now been incorporated to encourage SU to be supported to take up training where this will benefit the service user wider than a voucher payment

Sarah pointed out that this policy has not been sent around for consultation where as the protocol is for it to be sent around and agreed. Homelessness Core Group will take place on the 29th September and Sarah will be happy to present this to them

Decision – Approve policy subject to any recommendations from the homelessness core group

7. **Revision of decommissioning policy revision (Version 3 July 2010)**

Maggie reported that this piece of work has followed on from the last meeting when the issues arose from the offenders report particularly around LHT. As requested from SCG members the review process now includes an additional discretionary option which could be invoked if the group felt there were exceptional circumstances which would indicate reasons against recommending to decommission a service in receipt of funding for housing related support.

Decision – members accepted the recommended changes as outlined in the report.

Action – SP Team to put on SP website

8. **Mystery Shopping report**

Jayne reported that this is the 5th mystery shopping exercise that the Commissioning Team has carried out. The services that were mystery shopped into his round were Housing Options, mental health community teams, LD, Patient Advice Liaison Service, GP Practices.

This round of mystery shopping has reiterated that those mystery shopped have very little knowledge of the supporting people programme and housing related support or how best to assist people with housing related issues.

Members raised extreme concerns about this

Pippa was extremely disappointed that admin and reception staff in probation had very little knowledge of housing related support issues. She informed members that this report has been forwarded to head of service responsible for reception staff.

Sarah also noted her concerns for Incommunities & particularly probation as they both have a contracts with housing.

Discussion took place about access points and the different access routes and it was noted that as there are so many different access routes, customers will get spun around.

Jayne informed members that Adult Services have a new Access Point which is the Council's new contact point for customers accessing Adult Services. A new database of services will be set up to support staff working in the Access Point. This database will also be accessible to the public. This will include Housing Related Support, but there will still be other access points.

Discussion took place on

- The need for IT systems on access points as reception staff do not have knowledge on every service out there
- People being referred to people rather than organisations
- Better response from direct referral routes
- Changing attitudes
- Services not understanding each other services

Jayne commented that whilst this report is quite damning Yvonne has done some excellent work on raising the profile of SP.

A new DVD has been developed in order for promoting Housing Related Support and getting the message across. This DVD can be used within teams as a training exercise.

Decision – members noted the recommendations as outlined in the report.

9. Any other business

None