

**Cumbria Third Sector Network
Executive Meeting 7 January 2014
DRAFT Minutes**

Present: Will Williams (Chair), Becky Underwood (Sport and Physical Activity), Sonia Mangan (Health and Wellbeing Board, Action for Health – Older People), David Blacklock (Healthwatch Cumbria), Martin Telford (Advice and Information), Judith Holmshaw (Volunteering), Steve Lax (Action for Health), Helen Boothroyd (Faith), Peter Smith (Transport), Jane Gibson (Arts and Culture), Rob Randell (Social Enterprise), Lorraine Smyth (Rurality), Aftab Khan (Equality and Diversity), Andy Beeforth (Deputy Chair – from 10.00)

In attendance: Carolyn Otley (Network Coordinator); CCG and CCC representatives as detailed under items 16 & 17 for those items only.

1. Apologies

Apologies were received from Karen Bowen (Generic Third Sector Support), Jozi Brown (Compact), Richard Kavanagh (Equality and Diversity – LGBT), Stephanie Crosthwaite (Children and Young People), Cath Clark (Children and Young People).

In addition, it was noted that Julian Smith has now left Groundwork and so a new representative is needed for the Environment network; Will has sent an email to thank Julian for representing the environment sector in conjunction with the Local Nature Partnership. Will is approaching the LNP for a new environmental rep. Carolyn has met with Lesley Graham about a representative from the Housing Sector; Lesley was unable to make today's meeting, but will meet with colleagues to arrange a representative at future meetings.

2. Minutes of meeting held on 15 October 2013

The minutes were accepted as a true record of the meeting.

3. Matters arising from October Minutes

The written update was received.

There was further discussion around Action 2.2 – Asset Based Community Development work. It was noted that the existing ABCD working group was being revived, and had a meeting planned for 29 January to look at Terms of Reference and Membership. A number of Executive members will be attending.

ACTION 1: Lorraine to forward the current distribution list to Carolyn

It was also agreed that an update on C3C should wait until the next TSE meeting, as the situation would be clearer once C3C has held its AGM. The proposal under Action 4 (Chair and Deputy roles) that the election process for Deputy Chair should start soon, with nominations in before the April Executive meeting, and election immediately following that meeting, was agreed.

ACTION 2: Carolyn to start the election process for Deputy Chair

4. Horizon Scanning

No Horizon Scanning items had been received.

5. CCC Budget Proposals

The written update on discussions at the 4 workshops organised for third sector organisations was received. Will thanked Carolyn for this and the briefing on CCC's Budget proposals. Further discussion took place under these four headings.

Children and Young People

Post-16 Transport to School

- Martin has heard of young people being told that once they're over 16, they won't be allowed on the school bus even if they pay. This seems unlikely to be CCC's intention, but needs clarification, and changes in contracts with bus operators if necessary.
- This saving isn't a good fit with CCC's stated aim of encouraging young people to stay in Cumbria
- CCC believe colleges will provide more transport – how much dialogue have they had with them?
- There may be unintended consequences, eg on road safety, because of more inexperienced drivers.
- One possibility is that Local Committees could extend NoW card funding to allow cards to be used for transport to school/education.
- Presumably detailed Equality Impact Assessment will take place – will we be able to see this?

Commissioning

Proposal to centralise procurement

- David expressed concerns that centralisation might mean there were less opportunities for creativity and co-creation than there had been in some recent contracts
- It was generally agreed that there were some benefits to centralisation, as it was likely it would lead to better planning and more reasonable timescales for procurement.
- However, the key is to ensure that there is better involvement of users and organisations in the earlier, planning stages of the commissioning cycle. This appears to have happened to some degree in the Carers' contract, with input from early engagement events influencing the contract.
- Hopefully this early involvement will be reflected in new CCC Procurement Strategy when this is published for consultation (expected in March). It was suggested that Alan Ratcliffe could be invited to the April Executive meeting to discuss the draft strategy.

ACTION 3: Carolyn to contact Alan Ratcliffe

(Andy Beeforth joined the meeting)

Bus Subsidies and Community Transport

Proposal to stop subsidising bus routes, and develop community transport solutions to replace them.

- It was noted that this was primarily about stopping bus subsidies, and as yet there was no clear plan for developing community transport (or transport in communities) solutions to replace them. This would clearly lead to gaps.
- There is a need to identify which of the services that will be affected are essential; the written questionnaires currently being used may not be adequate
- A “crisis” may well mean new solutions and new volunteers come forward; will there be the capacity within CCC to support this given the number of services that will be affected?
- No current community transport organisation is self-financing – income is not high enough to put money aside for bus replacement. Some “transport in the community” schemes such as community wheels (semi-scheduled minibus service), where CCC provide the vehicle and infrastructure may be more financially viable.

Health and Social Care

- The proposal is to make significant (£5m) savings, but very little information on how this will be done or what it might mean for frontline services, apart from “integration” and “internal efficiencies”. We can’t respond sensibly without more information.
- This saving, and other initiatives such as the Better Care Fund, see a big push to integration, in order to both prevent duplication and save money. Some services are likely to be lost in this.
- There is a lot of talk about “mobilising the third sector”, but as yet little knowledge of what the sector provides or could provide, and little involvement of the sector in planning this
- “Prevention” in this context often means reducing A&E attendance by better community services, rather than lifestyle changes that promote better health. However, Active Cumbria is being moved into Public Health to support the prevention agenda.
- There is a shift in (DEFRA) policy from finding solutions for rural communities to finding solutions for individuals in rural communities.
- The Executive needs to engage with the new Director of Public Health, Colin Cox, when he comes into post in March.

Martin noted that the government has announced that it will not extend funding for the Ways to Welfare Scheme when it ends next year. Whilst this is not relevant to this year’s budget, it would be interesting to ask CCC if they intend to retain crisis loans for the most needy in the future.

6. Cumbria Leadership Board

Questions about the future of CLB have been asked by some of its members – is it effective, do we want it to continue? As a result, the agenda of future meetings will be much more open, with the onus on members to bring topics forward. Will felt that it was important for the 7 LAs, LDNP, NHS, PCC, CALC & Third Sector to come together and provide leadership, and had argued strongly that the group should continue; this view was also held by many Executive

members. Asset Based Community Development might be a topic that the sector could put forward for a future meeting, perhaps in partnership with CCC.

Rob noted that the current LEP structure depends on the CLB to inform the public sector input to the LEP.

Partnership Summit on Ageing – CLB received a report, and submitted some questions to the summit steering group. Sonia reported that this has now been passed to the Ageing Well Steering Group, who have been around for about 5 years, and it is a positive step that they are now involved. Will asked about third sector representation on the Ageing Well Steering Group – a number of individuals from the third sector attend, but there is no formal representative. The onus is therefore on the Ageing Well Steering Group to respond to the questions from the CLB so that the strategic messages from the Ageing Summit are taken on board by the relevant organisations in Cumbria

ACTION 4: Sonia and Mary Bradley to discuss third sector representation on the Ageing Well Steering Group

7. Cumbria Health and Wellbeing Board

The HWB is still developing as a group, but the Better Care Fund might provide a focus – the next meeting at the end of January will sign off the BCF application. In future, the HWB may have a significant role in overseeing integration. Both Sonia and David are on the working group for the BCF, and will circulate a draft of the proposal when developed.

The Police and Crime Commissioner is now attending meetings, and the new Director of Public Health will be in post from March.

8. Cumbria Children's Trust Board

Neither Cath nor Stephanie were at the meeting - written update to follow.

ACTION 5: Cath/Steph to provide written update

9. Safer Cumbria

The PCC has launched a Community Fund which will make grants of between £1000 and £10,000 – details, including the priorities are on the website:

<http://www.cumbria-pcc.gov.uk/working-for-you/community-fund.aspx>

There is also an innovation fund for longer term projects:

<http://www.cumbria-pcc.gov.uk/working-for-you/innovation-fund.aspx>

10. Cumbria Local Enterprise Partnership

The consultation on the draft EU Investment plan for Cumbria finishes at the end of the week. Rob thanked everyone who have put time into workshops to develop it – engagement that

was seen as best practice nationally, and had led to a number of really creative projects being proposed, including some that would be able to start immediately.

The “final” document goes to government at the end of January, although there is likely to be some further refinement after that.

Rob has had some meetings with BIS about including a Local Impact Fund – this could use Big Society Capital as match for European Social Fund money, and would provide loan and equity finance, and possibly some grant funding. There is also the possibility that 5% of the total allocation could be put into a Community-led Local Development Fund. The LEP Board will make the final decision on both of these possibilities.

Will thanked Rob for achieving the high level of Third Sector engagement with the EU Investment Plan and also for eliciting technical and policy support from CCC colleagues.

11. Cumbria Compact

A written report was received from Jozi, along with the report from the Annual Compact Event in November.

The Compact Steering Group is meeting next week, and will identify key actions to take forward from the Conference. This is likely to include engagement in the consultation on CCC’s new Procurement Strategy when this starts (probably in March).

The Police and Crime Commissioner has now signed the Cumbria Compact.

ACTION 6: Jozi to summarise the top 3 messages from the conference and the way these are being addressed and taken on board

12. Healthwatch

David reported that Healthwatch is working on a number of areas:

- Inspections of residential care homes have started
- Complaints – Healthwatch is looking at how complaints are dealt with in the local trusts, particularly how organisations embed the learning from complaints, and then how they share this learning with other trusts.
- Hawkshead surgery – HW is hosting a meeting of interested parties in relation to the proposal to close the surgery
- Better Care Fund Working Group/Programme Board – David has been involved and is now looking at widening engagement.
- Cumbria Health and Care Alliance – this is an alliance of the NHS organisations in Cumbria, looking at all the organisations working together to make efficiency savings. The organisations need to produce 2 year operational and 5 year strategic plans. There is currently no third sector involvement, although a lot of discussion about third sector services. David has a meeting with Hugh Reeve and Rachel Preston to discuss involvement.

- Healthwatch have a proposal to work with the Partnership Trust around “Expert Patients” (in this context, patients who undertake visits to wards, etc, and review areas for improvement)

ACTION 7: Will to write letter to Richard Parry, Hugh Reeve and Nigel Macguire about increasing third sector involvement in integration work and in particular the Cumbria Health and Care Alliance after David's meeting with Hugh Reeve.

13. Key Issues from Specialist Networks

None raised

14. Reports from Specialist Networks

Written update received

15. Any other Business

Andy circulated a briefing paper on the Welfare Commission, and asked Executive members to distribute it to their network. Will emphasised that this is an important opportunity to capture the impact of the Welfare Reform and the measures being taken to reduce impact on individuals and communities and thanked Andy for leading on this.

ACTION 8: Executive members to forward any comments directly to Andy.

16. Cumbria Clinical Commissioning Group

In order to foster greater engagement with the Health sector, Jon Rush, Lay Member of the Cumbria Clinical Commissioning Group, attended the meeting to explain his role in the CCG and their plans for engagement.

Key points were:

- Jon has recently left the Police, having worked for them for 30 years in Cumbria and Greater Manchester
- The CCG has had responsibility for commissioning since April. It is Cumbria-wide, and a membership organisation of the 83 GP practices in Cumbria with an elected governing body
- The Clinical Commissioning Group’s governing body has 3 lay members with distinct roles: Patient and Public Engagement (Jon), Finance/Audit and Quality/Outcomes. There are also 2 retired secondary care clinicians, a nurse and a surgeon
- Jon’s role is to ensure that the CCG undertakes appropriate Patient and Public Engagement – not to represent patient views himself
- The CCG has responsibility for commissioning most NHS services in Cumbria; the majority of this goes to the NHS provider trusts, which is a challenge for third sector organisations interested in contracts to provide services – although a number of third sector organisations, eg Hospices, Carers, have long standing contracts

Jon identified 3 major challenges for third sector organisations interested in providing services:

- How to understand what commissioners want
- How to sell yourself
- Being big enough to deliver, potentially across Cumbria

- The priorities for the CCG come from the joint strategic needs assessment:
 - Improving care for an ageing population
 - Children
 - Mental wellbeing
 - Cancer
 - Cardiovascular disease
 - Reconfiguring services
- At the moment, many contracts are just being rolled over. The main providers are stretched to the limit, and there is pressure to achieve savings by integration. There is now some acceptance that money could be used better, and the Cumbria Health and Care Alliance has been formed to try and progress this. Healthwatch sits on the Alliance, but there is still some work to do on how the third sector fits in, and how it engages with the public.
- Within the CCG there are 6 locality teams, each of which has a commissioning manager and a lead GP – these may be a good way in for small third sector organisations

There were a number of questions from the Executive:

Q: Sonia – This time last year Action for Health ran 3 major engagement events with the CCG, and produced a report – has this lead to any changes in how the CCG engages?

A: The various roles of the sector – as providers, as advocates and in service planning – can all get mixed up, and we can't always give everyone everything they want. It's easy to talk about engagement, but harder to do it and to keep the flow going, and we'll never achieve perfection.

Q: David – We need a mechanism that involves both third sector providers, and individual services users, in service design. The third sector is complicated by the number of organisations, but the Third Sector Network helps with this. I went to a Health and Care Alliance meeting, and whilst the role of the third sector was talked about a lot, they weren't involved in the meeting. We need to have conversations early; the sector and the public can help you make decisions, if they're asked good questions they can make a good input.

A: There have been some examples of good engagement, such as the "Better Care Together" work in South Cumbria (which is likely to be replicated in the North over the next few years). I would agree that at the moment, too much reliance is being put on Healthwatch, and we need a discussion on how this should be broadened out. Part of my role is to check that engagement is happening, and to be clear if the purpose is informing or consulting.

Will thanked Jon for his presentation and his frank and open approach for future engagement.

(Judith and Aftab left the meeting)

17. Cumbria County Council Budget Proposals

This part of the meeting was attended by Jo Stephenson (Deputy Leader), Patricia Bell (Portfolio Holder for Public Health and Community Services), Dominic Donnini (Corporate Director of Resources), Georgina Ternent (Strategic Policy Advisor – Policy Planning and Communities) and Mark Graham (Communications Team). Dawn Roberts (Assistant Director – Corporate Governance) sent apologies.

Will thanked CCC for their contractual support for the Third Sector Network, which enabled the sector to engage with them in this way.

Jo Stephenson introduced the Budget process and explained that we were approaching the end of the budget consultation period, and they already had a good response. The results of the consultation will be presented to Council on 13th February when decisions on the 2014/15 budget will be made.

Discussion took place around the 4 areas in which workshops for the sector had been held. Will introduced each topic and then invited questions and discussion towards minimising adverse impacts and working towards jointly addressing ways forward

Children and Young People

Q: Lorraine - How does the proposal to cut the subsidy for post-16 transport to school fit with the priority of supporting young people to stay in Cumbria?

A: Jo – The Council is facing an enormous financial challenge – if finances were stable, none of this would be happening, and these are not things we want to do. Post-16 transport makes a £1m saving, so a significant contribution to the overall saving. It's not a statutory requirement, and the vast majority of young people don't rely on it. There is a hardship fund that those on low incomes can apply to.

Q: Martin – We have reports of a 17 year old being told they'll no longer be able to use the bus in the future, even if they pay.

A: Mark – If you can get me more details, I'll look into it. None of this is definite yet, and certainly hasn't started to be implemented.

Q: Sonia – It would be interesting to see a detailed EIA and rural proofing – have any unintended consequences been identified, such as impacts on road safety?

A: Georgina – EIAs are being looked at at the moment – they will be available to Councillors when making decisions (and so the public in the meeting papers).

Q: Will – How do we work together to mitigate the loss of subsidy and find solutions?

A: Mark – The EIA will help to address this; CCC has also been working with Further Education providers and with young people themselves (eg through a CYA event). Some FE colleges already provide transport for their students and have said they'll look at how they can expand this.

Jo Stephenson noted that the government is increasing the compulsory education age up to 18, and CCC intends to lobby national government to make funding available for transport to education up to 18.

Rob noted that the EU investment plan makes reference to “support for apprenticeships”, which could be interpreted to include transport to placements.

Commissioning and Procurement

Q: Will – The proposal is to centralise within CCC – the sector currently has a good relationship with commissioners in some directorates, and there is a worry that it may be reduced to procurement. How can we keep the relationship for discussing what contracts might achieve?

A: Dominic – CCC commission lots of services, so the saving proposed from merging contracts is a tiny proportion of this. There are currently 190 people within CCC in some kind of Commissioning/Procurement role, and some of these don’t have the necessary experience or qualifications. Bringing this function together into a single team would mean people have the right skills.

Q: Sonia – I’m not against the principle of centralised procurement. At the moment, we’re well engaged with procurement, but wider commissioning (service planning) is more scattered, and we’d like to see better engagement with the third sector at this stage, too. David – the concern is getting in early enough, both for users and for organisations.

A: Dominic – Commissioning and procurement is often rushed at the moment, and we hope this will be improved. Alan Ratcliffe will be leading on this, so you should continue to engage with him.

Cuts to bus subsidies and development of Community Transport solutions

Q: Peter – It appears that the plan is to end subsidies, and only then transfer staff to start looking at solutions – surely this will lead to a gap in services? In addition, there are some concerns over the consultation of services users – that the most vulnerable are unlikely to respond to a written questionnaire (although I believe CCC may have already taken these comments on board).

A: Jo – the Transport team have already started discussions about solutions. A number of operators have confirmed they’ll continue to run the services even if the subsidy is removed.

Q: Peter – Rob Terwey has written to community transport groups asking for input, but didn’t give any idea of current CCC thinking on possible solutions – it would be useful to know the scope of what’s being considered. Solutions organised by CCC tend to have significant costs, and community solutions may be cheaper. Andy – CCC sometimes has a limited number of options, and those solutions don’t always fit with what communities need. Stopping a service can often be a catalyst to action, but do we have the capacity to make the most of this? In addition, there’s an expectation that the budget for vehicle replacement will disappear – but virtually no community transport operators manage to cover their replacement costs at the moment.

A: Jo – We would want to avoid a big gap in April. Part of the proposals is for capital investment - £5m was put aside in the last budget round.

Q: Sonia – the proposal is for members of staff to transfer and develop community transport solutions – an alternative might be to invest in the third sector to develop community solutions.

A: Dominic – There will be further savings to be in future years. CCC has already gone down from 5 directorates to 4. But as part of this, community teams will be strengthened, with a senior manager in each of the 6 districts – so there should be more capacity to plan locally.

Comment: Will – We would be interested in discussing with local teams and the opportunities for local solutions in more detail in the future.

Health and Social Care

Q: Sonia – this section appears to mainly talk about internal efficiencies, and it's hard to visualise what the external implications might be, and this doesn't seem to be clearer after the workshop – can you help us with this?

A: Jo – to an extent, this is uncharted territory, and we can't give a clear picture of what it will look like. Dominic – Richard Parry has been heavily engaged in planning – it's also worth noting that it's not a huge percentage of the social care budget, despite being a big part of the overall savings. Patricia – no, it is not clear yet – but there are areas where NHS and Social Care services can clearly be brought closer together – eg both commission mental health services.

Q: Sonia – Proposition 25 appears to suggest that £5m of savings will be made, but there's no information on how this will be done. The Better Care Fund won't produce immediate savings – where will these come from?

A: Mark - £5m will be saved from the CCC budget, but will be made up from money that the CCG has been required to set aside as part of a 2% top slicing of its budget. They can only spend this money with the agreement of NHS England, and it can only be used for integrated services across the local health economy. So there will be no sudden drop in overall spend in 2014/15. In 2015/16 and 2016/17, savings will be made from using integration money to get into a virtuous circle, and a radical redesign of how we deliver hospital services.

Q: Martin – The government have just announced that the Ways to Welfare funding will not continue nationally after the initial 2 years. Is it likely that Cumbria will continue to fund this in the future?

A: Patricia – I've spoken to Richard Parry about this – what Cumbria have developed is different to the DWP scheme, and is more sustainable. All the welfare work will come together in the portfolio of the new Director of Public Health, and we believe something will continue. There'll certainly be no change in the 2014/15 financial year.

Will thanked CCC for this positive discussion and the opportunity to follow up on the points raised. Jo Stephenson thanked the Executive for their engagement in the consultation process, and thanked the third sector for all their work.

ACTION 9: Carolyn to submit final CTSN comment to CCC