

Southern Provider Engagement Forum Meeting

16 February 2009

Co-Chairs – Dawn Collier and Richard Newcombe

Terms of Reference

These have been agreed with local providers and are on the website.

Third Co Chair

In order that the independent sector be properly represented across all service sectors a third co chair was co-opted. Robert Rotchell chollacott@stone-haven.co.uk

Meetings

General held view that Monday Mornings are not a good time for forum meetings request that consideration be given to identify and alternative date / time for future meetings. RN

Feedback – County Forum

The minutes of the last meeting will be posted on the website shortly but it was felt that this had been a positive meeting. When the minutes are published, feedback and positive criticism will be welcomed. The next County Forum meeting will be in July.

Note Minutes of county forum attached.

Fees

The budgeted provision for this year is for an inflationary increase of 2.5% for residential and domiciliary care services with an agreement to be reached about how this should be applied. This could either be applied to all providers as a flat rate or a higher or lower % than this on an individual basis according to the standard of the service, i.e. in accordance with their CSCI rating. The views from this meeting and those of the Northern and Eastern Forums will inform the decisions made regarding this.

Question – DCC has been awarded 3% for inflation, what is happening to the other 0.5% ? Action – Dawn Collier will come back to the Forum with an answer to this.

Forum members invited to consider various options for the allocation of the 2.5 % inflationary uplift – Feedback

- 1) Lack of confidence re CSCI rating so the increase should not be awarded on that basis, also concern that providers rated as poor need funding to improve. Assessment in relation to bandings is not felt to be adequate i.e. for emotional needs, therefore review of this needed. An increase of 2.5% is considered inadequate.
- 2) Agree using CSCI ratings is problematic but poor performance should not be rewarded, so in principle would be good to move to different system. Concern that decisions made on placements are on price, so poor homes used rather than better ones. Also other sectors not covered by CSCI so query on how they would this be assessed i.e. LD.
- 3) View that Domiciliary care providers under less inflationary 'cost' pressure than the Care and Nursing home sector therefore should receive a lower proportion of the uplift
- 4) If cut the funding of poorer rated homes, this would reduce the chance of improvement. Formula set up for fee increase should be as agreed with

Shaw Healthcare. Training and development could be used to help to improve poor homes and improve skills offered.

- 5) Need to discuss with LA the basic fee levels, currently these make it difficult to provide a quality service. Probably best due to economic climate to apply the increase evenly across the board. The provision of E-learning would help to address training needs.

The consensus of the groups was that it would be best to have an equitable application across the board this year with a movement towards rewarding quality in the future, and that careful consideration must be given to the process of quality award. Also that a review of fees is needed and that a 2.5% increase is inadequate.

CHC

Question – How has the level of CHC varied? Action - Dawn Collier to provide stats to show trend but advised that Devon County Council is currently in line with other LAs and follows National guidance. Other questions were answered in the Forum.

Geoffrey Cox advised that a representative group is to be formed regarding CHC, and that he is looking for participants across the forums in this.

Personalisation/Direct Payments

To be revisited in future meetings with regular updates to be provided.

Piers Tetley – WFD

Piers to supply notes for minutes.

Members invited to form Service based groups to consider current issue affecting the delivery of services across the locality

1) Residential

There should be better communication between providers and DCC with regards to the availability of beds and consideration should be given to Block booking – CSCI suggest move toward block booking with providers. It is felt that the driver is cost which prevents improved quality. There is a need for improved dialogue with DCC about this.

Inadequate fee's have a direct effect of both the quality and availability of provision

Widely held view that the carer and Nursing Home sector need to create a representative body that can negotiate on behalf of the sector with the Local and Health Authority. Geoffrey Cox is co-ordinating this development across the county. Contact Geoffrey on geoffrey.cox@southernhealthcare.co.uk

2) Domiciliary Care

There are problems due to isolation and rural locations with the time taken to get there and back for 30 minutes of work. Grouping care to one provider would help this. Also equipment needs to be ready for those discharged from hospital. Better co-ordination is required.

On occasion a service is requested and then not needed and there is no reimbursement for the time spent in preparing for this.

3) LD

Concerns were voiced regarding brokerage and advocacy tendering. It was thought important that providers should work in partnership in the future, particularly as personalisation will shape services in relation to individual choice and control.

Question - Can DCC supply demographic statistics?

Action – Dawn Collier to feed this back and it will be posted on the website.

Action – A list of providers in the Southern area will be posted on the website and those not currently involved in the Forum should be encouraged to join.

Action All Please feed back to the forum chairs any matters / issues of concern or information that you would like to share with forum members

Date of Next Meeting – to be confirmed