



Minutes of the North Wales Regional Partnership Board Meeting

9 October 2020

9:00 am to 11:30 am

Via MS Teams

Present:	Teresa Owen, Bethan Jones Edwards, Alwyn Jones, Morwena Edwards, Bethan E Jones, Cllr Bobby Feeley, Cllr Christine Jones, Cllr Joan Lowe, Cllr Louise Emery, Fon Roberts, Jenny Williams, John Gladston, Judith Greenhalgh, Paul Scott in attendance for Kevin Roberts, Cllr Llinos Medi Huws, Lynda Colwell, Mary Wimbury (MWim), Neil Ayling, Nicola Stubbins, Peter Williams, Rob Smith, Shan Lloyd Williams, John Gallanders, Dr Lowri Brown
Apologies:	Chris Stockport, Clare Budden, Cllr Dafydd Meurig, Estelle Hitchon, Ffion Johnstone, Helen Corcoran, Mark Wilkinson (MWil), Kevin Roberts, Lucy Reid, Catherine Elaine Jones, Roma Hooper
In attendance:	Llinos Edwards, Service Improvement Programme Manager, Mental Health and Learning Disabilities Division Alan Hughes, North Wales WCCIS Programme Manager

1 Welcome, introductions and apologies

The chair welcomed everyone to the meeting and apologies were noted as above.

A warm welcome was extended to Dr Lowri Brown, recently nominated by the NW Local Authority CEO's as the North Wales Regional Education representative.

2 Minutes and actions of last meeting –September 2020

The minutes of meeting 11.9.2020 were agreed as a correct record.

Outstanding Actions

- Testing within Care Homes –TO and MWim to arrange a telephone discussion this week

- Winter Plan – work ongoing to collate reports received from AISB into one high level report from the region to WG. The final plan will be presented to the November NWRPB. Agenda November
- Focus and Priorities – document has now been updated in relation to Covid as requested in a previous meeting. Awaiting Chair agreement. The final document will be presented for endorsement at the November NWRPB. Agenda November
- Dementia Strategy and cover report – the final strategy and accompanying documents to be brought to the November NWRPB. Agenda November
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3 A Healthier Wales

BJE provided an introduction to the discussion on the AHW Transformation Programmes.

WG have recently announced a 12 month extension to the Transformation Programmes to March 2022. Each Transformation Programme has completed a progress report to end of September 2020 and a business case report to demonstrate the work programme that would be taken forward with the additional funding for 2021-22.

These reports are presented today for NWRPB endorsement and will be forwarded to WG following today's meeting. The total allocation for the 4 programmes over 19/20 and 20/21 was £13m, with each transformation programme predicting to spend their full allocation.

WG have also recently announced the indicative North Wales allocation for 21-22 as £4.6m. Once updates have been presented from each programme today, the board will need to consider the options for the 21/22 programmes, if further additional funding is not available i.e. reduce the length of the programmes, prioritise what is funded and what not, explore funding to continue the programmes from current core funding of partners.

NA and AJ proposed the NWRPB challenge WG on the indicative allocation which does not seem to be in line with North Wales being the largest region in Wales, with North Wales predicted to spend the original allocation in full.

LIM proposed RPB SS portfolio holders meet to discuss this issue and forward a letter to WG. All SS portfolio holders present in the meeting were in agreement to this action.

Children & Young People Transformation Programme (Ch&YP) – Nicola Stubbins

NS provided an overview of the Children and Young People Transformation Programme, which includes 3 work streams:

- Improve the emotional health, wellbeing and resilience of children and young people through integrated early intervention and prevention and early help
- Edge of Care interventions incorporating Multi-Disciplinary Teams
- Effective Child Protection Project

Despite the challenges of Covid the Ch&YP work-stream continued to make progress on the development of a regional framework with notable achievements, although, to date, the progress has only scratched the surface of the programme and new ways of working.

Updates from the area teams:

West area re-directed work to develop a training programme to upskill the children's workforce and working with partners in the community and voluntary sector to deliver a community resilience scheme in response to local need. At the same time, work is restarting to refine the model of care and establish the MDT.

Central area worked on 4 objectives, the main being a bespoke model of care that is based on clinical assessment and formulation and intensive delivery of interventions including motivational interviewing, collaborative conversations and Dialectical Behavior Therapy (DBT)

East area progressed work on Multi-Systemic Therapy. Partners in the East area have embraced the opportunity to trial a model that would support true integrated service provision and bring new learning not only to the locality and region but to the whole of Wales. The team decided early on that a therapeutic intervention delivered by a multi-disciplinary team would be the best fit for children on the edge of care and their families in their locality.

NS acknowledge the commitment and enthusiasm from all teams, statutory partners, and third sector through engagement and evaluation. Young people and families have also contributed with their experiences to enable the project to develop.

Although, similar to most projects, the majority of the spend will show towards the end of the financial year. This has not stood the programme in good stead regarding the spend to date and WG request to continue the programs. NS added, if there is an opportunity to continue investment for another 12 months, the programme has the potential to be scaled up and transform the service through:

- Revenue funding including the delivery and embedding of both intensive intervention, support teams and the early help provision and teams. Also including running and staffing costs for the residential provisions.
- Capital funding to develop two assessment centres for emergency care provision and residential setting for assessment.

BEJ noted being in support of the Children & Young People programme, noting this project in particular requires a continuation of funding for the next 12 months to reach a sustainable model, as the programme has the potential for a small investment to achieve significant cultural and practice change to meet children and young people's emotional and mental well-being needs.

JGa enquired if colleagues were confident the services would be delivered with equity for the whole population.

NS informed this issue has been debated and discussed throughout the existence of the programme. The principles are identical across North Wales, however, sub-regional delivery will reflect the population requirements within that area and Multi-disciplinary Teams established in each LA area, each one structured differently to meet local needs.

Cllr BF also noted being in full support of the programme, pointing out the importance of mental health within young people, particularly nowadays with the increasing rate of the virus infection. Practitioners are becoming aware of an increasing worrying trend of MH issues seen in primary school age children.

NA also noted being in agreement to the Children & Young People TP, with the East MDT team undertaking significant transformative work with young people and families.

Cllr LM believed the Welsh language needed to be emphasised further within the report, noting children and young people throughout North Wales should be able to receive a service in their chosen language.

NS apologised if the Welsh language is not highlighted sufficiently within the report and noted the Welsh language underpinned all which the programme is undertaking; recognising the needs of local children and services available, linking into their local area. All resources developed for the programme is available in both Welsh and English.

The NWRPB noted the significant progress and work taking place across the region and were in agreement to endorse the Children & Young People Transformation business case.

Learning Disabilities Transformation Programme – Neil Ayling

NS provided an update on the progress and achievements of the Learning Disabilities Transformation Programme.

NA noted the LD Strategy created 4/5 years ago, being the first and only region to have to have a transformation programme in Wales covering Learning Disabilities.

The 5 co-produced packages, have flowed right through and included in the proposed business case.

- Integrated structures
- Workforce development
- Commissioning and procurement
- Community and culture change
- Assistive technology

Work and momentum continued throughout Covid with a reduced team in place. Progress made on digital technology paid dividends to offer support over the pandemic.

The business case has been endorsed at the recent LD Board, and a 'critical friend' challenge meeting with key partners held to discuss the business plan, resulting in the most up to date version.

Cllr CJ thanked NA for the comprehensive report and highlighted 'Project Search', where 8 out of the 9 individuals from the 2019-2020 cohort having successfully attained paid employment at the end of course.

The NWRPB noted the significant work taking place and were in agreement to endorse the Learning Disabilities Transformation Programme business case.

Together 4 Mental Health Transformation Programme – Llinos Edwards

The board received an update from LIE on the T4MH business case.

ICAN Campaign Aims are underpinned by the principles of AHW:

- Giving a Voice to people with lived experience
- Shift focus of care to prevention and early intervention
- Empower people to maintain their mental health and well being
- Encourage open and informed conversations about mental health

To Achieve our Aims T4MH have developed:

- New I CAN mental health support pathway – aiming to provide seamless link to community provision.
- Tested ICAN Unscheduled Care
- Developed and established ICAN Community Hubs – providing holistic services
- I CAN Work employment programme
- ICAN Mental Health Training
- I CAN volunteer opportunities

Progress During Covid-19 Pandemic included:

- Establishment of ‘Stay Well’ telephone service delivered by ICAN Volunteers.
- Testing of ICAN Connector Role (Community Navigation)
- Greater integration with CMHT’s and Primary Care
- Establishment of ‘Virtual ICAN Community Hubs’
- Enhanced and accelerated the Digital and Virtual Offer
- Strengthened and enhanced Partnership working
- Continued with the recruitment of ICAN Volunteers
- Continued in the delivery of ICAN Training – although ‘virtual’

Year 1 activity focused on building foundation and developing the concept and brand allowing for wider system transformation. Funding is required for the next phase which involves:

- Building on the activity to date, develop wider partnership agenda focusing on wider topics, housing, employment, which all have a greater impact in well-being.
- Dovetail and transition the programme of work closer to the Community Transformation work programme, in particular the GP Cluster/locality work streams so that ICAN is seen as a ‘community resource’.
- Enhance and expand digitally enabled support, connection and assessment.

- Continue to develop work on the ICAN pathway; ICAN Community Hubs and ICAN Academy

JW noted agreement to support the MH transformation, with huge benefits already seen in CCBC.

ME also supported the MH programme and noted collaborating with CST being the natural next steps; supporting people into employment and supporting well-being within all localities.

PW noted digital poverty as a major concern within Carers. During the pandemic social isolation and social interaction have been experienced with hardware and digital connection highlighted.

BEJ agreed with PW and confirmed digital inclusion has been highlighted as a major issue for a large part of the population, and the issue is being discussed and explored by the digital transformation board.

The NWRPB noted the significant work already taken place and were in agreement to endorse the Together 4 Mental Health Transformation business case.

Community Services Transformation Programme

AJ provide the NWRPB with information on progress with Community Services Transformation, including impact of Covid.

The CST Exit Strategy / Business Case split the programme into 5 key workstreams:

Workstream 1: Locality Development.

This workstream stands at the heart of what the Community Services Transformation Programme has set out to achieve, the development of integrated health and social care Localities, based largely (although not exclusively) upon the geography of GP Clusters. Key risk identified is compounded by the pandemic.

Emphasis and priority will be placed on:

- building on the positive feedback about geographical/ local decision-making,
- Aligning the development of CRTs to the Leadership/ Partnership bodies.
- Widening scope of Localities, to ensure Mental Health Services fully embedded

Workstream 2: Workforce & Operational Delivery

- Time needed to embed new ways of working so as not to alienate staff
- Need time to take secondary care and Health Board Leaders on the community transformation journey with us
- Achieving step change required can only be achieved with additional time and resources
- Additional time and money required to reflect on workforce models post pandemic – enablers & challenges

Workstream 3: Digital Transformation:

Key priority for partners moving forward:

- Continued Digital Inclusion for citizens
- Digital Strategy for personalised health & social care
- Future scoping technologies of the future
- Digital Inclusion for staff working in independent sector domiciliary, supported living and care homes

Investment in a robust future-facing digital strategy aims to:

- Reconcile growing demand with reducing resources
- Focus on prevention, self-management and well-being
- Increase personalisation of care and support services
- Accelerate and extent integration of health and social care services

Workstream 4: Community Development

- The need to work closely with our communities to enable them to create for themselves the necessary conditions to foster positive health and well-being
- Scalability of lessons learnt across the region, and Wales more broadly
- Additional short-term investment will enable partners to continue to embed practice and learning as well as ensure sustainability of approach

Workstream 5: Sustainability Planning – another year of investment is required to ensure the programme continues with a clear rationale.

The extension of time and resources help build required evidence-base and level of confidence in new ways of working, to enable decisions to be held at Executive level about re-aligning budgets and workforce.

Additional 1-year investment will allow for:

- RBA and IPoPs Training - Senior Managers, Directors, Lead Members, and internal Change Agents.
- Regional conference - reflect on programme and co-produce future priorities with key stakeholders, and operational staff.
- Respond to findings of 'Right-Sizing' work
- Development of regional Integration and Sustainability Strategy, and local re-investment plans to support the shift in resources.

AJ concluded noting the CST have widened the scope of the programme to ensure MH and LD transformation programmes are fully integrated and embedded in the work. An additional 12 months investment will support the long-term outcomes.

RS thanked AJ for the presenting and noted supporting this project which provides a platform and foundation for other projects, particularly MH, as the programme becomes embedded in communities, there will be scope to expand the remit i.e. work on homelessness and potential route to link into partnership working

LC also agreed and highlighted the importance for the Third Sector to be involved, given the nature and scale of the work, who can assist to enhance the project i.e. pacesetters across NW.

AJ agreed as the programme progresses in each locality there is a strong role for the Third Sector and pointed out a lot of the work has already progressed through the Third Sector within Wrexham.

Cllr BF thanked all presentations, and noted although the last 6 months have been challenging, the pandemic has created a culture change, with work in the pipeline having to be done quicker, a lot of positives have come out from Covid i.e. people's digital skills have been tested and improved with virtual meetings. However we need to remember, that according to the OP commissioner over 45% of the older population of Wales are not digitally connected, underlining the important all North Wales transformation programmes are as important as each other.

SLW stated personally would like to see a specific reference to homeless prevention in the business case, this would tie in nicely to the item at the last RPB, 'Prevention for Homelessness', also being one of WG's key priorities.

AJ agreed and that could be done working with community and third sector to highlighting issues at an early stage to prevent homelessness.

RS also supports the opportunity to strengthen the CST business case and include homelessness.

NWRPB endorsed the business case for Community Services Transformation.

Following discussion on the disappointing WG indicative allocation, and recognising the huge work completed to date and the work to be done across the region, TO proposed forwarding a letter to WG with the final business cases from NWRPB noting the disappointment of RPB members to the indicative allocation, given there are 4 major transformation programmes progressing in North Wales, which are predicted to spend all original funding allocations and are demonstrating good outcomes for citizens.

Research, Innovation and Information Hub (RIIH) Transformation Programme –
Morwena Edwards

ME presented the RIIC Hub evaluation report which is also a part of AHW requirement and funded by WG.

The evaluation is the first baseline report, with the intention for WG to measure how well the hub has done, subsequent reports will therefore show development.

The RIIH are also supporting the 4 Transformation Programmes, through linking into national work and making connection with other regional hubs

The team have been involved with collating a list of innovative activity taking place across health and social care, linking in with BCU to learn from findings from Covid. The ongoing work of the hub will re-focus to continue to support Covid response to identify innovations and lessons learned, and will be important to plan for winter pressures. ME reminded all colleagues of the RIIH existence to ensure everyone are sharing and including the RIIC Hub into their discussions.

The NWRPB were in agreement to endorse the RIIC Hub evaluation baseline report.

Actions

- Elected/ Lead members write to WG.
- Forward final business cases to WG - BJE

4 NWRPB Annual Report

BJE presented the final draft of the NWRPB Annual Report and informed that the information on RPB members who have completed the Welsh training has not been included as only a few members have responded.

The final draft Annual Report 2019-2020 is being presented today for endorsement by the NWRPB and will be submitted to WG. Endorsement from RPB members will also enable statutory partners to take the annual report through their governance or political process and the report will be available on the public domain on the northwalescollaborative.wales website.

All in agreement to insert the date of the photograph inserted within the report to clarify that this was taken early in 2019, before COVID.

BJE also presented the 'Reporting the impacts of Covid' overview for RPB endorsement. This is also a WG requirement, letter from Vaughan Gething and Julie Morgan dated 13.8.2020, as noted in the Regional Partnership Board Guidance Annexe 2. This overview will be presented to WG alongside the Annual Report and includes a brief corporate and strategic overview of Covid, engagement, evaluation and lessons learned so far.

TO thanked BJE for writing the report and suggested the diagram included within the report is enlarged before forwarding to WG.

The NWRPB were in agreement to endorse both of the above reports once updated with minor amendments and will be forwarded to WG as required

Actions

- Include date at the bottom of the photo in the Annual Report - RW
- Enlarge the diagram within the reporting the impacts of Covid report - RW
- Forward NWRPB Annual Report to WG by 30.10.2020 - BJE

5 Digital Transformation Group work-stream – Bethan E Jones/Alan Hughes

The board received an update on the digital Transformation from BEJ and AH.

BEJ explained when the RPB agreed to establishing the DTG, little did one realise at that stage what an excellent idea that would be. As a result of Covid a significant amount of work has been undertaken to accelerate the digital work-stream, with considerable progress made at pace to some elements and discussions on wider digital systems across the region.

AH explained that the DTP oversees a number of complementary work-streams, each of which have their own Project Manager, responsible for maintaining the appropriate project documentation and driving the project forward, with smaller

sub-groups established to further support the development of the project where necessary.

- Future Technologies
- CRT Scheduling Solutions - Software solution Malinko is being piloting in the Central – 3 x Area Community Nursing Services, allowing visits to be scheduled based on the needs of the client and the availability of appropriately trained staff within the CRT. All staff have been issued with smartphones and receive all visits using the Malinko app.
- West Area WCCIS - Holyhead CRT and Lleyn CRT is scheduled to be delivered in January 2021.
- South Wrexham EMIS Community – software used by GP's.
- Information Governance - to develop a regional Information Sharing Agreement across CRT based on a model of integration, and a range of standardised documents.
- Technical Solutions - a technical programme of work to support CRT's across the Region.
- Digital Communities - to develop a digital strategy for personalised care to improve rates of digital inclusion across the region, in order to enable citizens to engage with health and social care on an increasingly digital basis. Work to be done linking in with RSL's who already have digital inclusion projects.

JGa enquired if WAST were also fully integrated and included in the DTG development work.

BEJ informed current work involved community integration with H & SC and the voluntary sector. WAST are not involved at present, but the DTG would welcome their involvement if people feel they needed to be included. BEJ agreed to take this action and discuss further with EH.

AH informed WCCIS at a national level are already looking at interfaces with WAST.

Cllr BF suggested it would be helpful if all organisation used a single virtual platform trialled by the DTG, as issues seem to arise within most platforms.

BEJ informed this suggestion has already been discussed by the DTG and North Wales Heads of IT. BCU and certain LA's are moving to one platform as a future choice. BCU are unable to use some platforms due to security issues.

ME thanked BEJ and the DTG team for the timely report. However, pleaded with the group to ensure the Welsh Language is clearly included within the strategy from the outset of the work, and picking this up at points through the work is not acceptable. ME does not consider that the report presented today includes sufficient reference to the Welsh Language

BEJ agreed with ME that the strategy does not give the required consideration that bilingualism required and noted that Meilys Smith, WCCIS, will attend the next meeting of the DTG to present work done on the Welsh language.

BJE apologised to RPB that simultaneous translation has not been resolved and colleagues continue to work toward translation facilities on MS Teams. However, the licence with the regional team does not provide the ability to provide a telephone line for the translation at the moment, and until the Regional Collaboration Team can access a full MST licence this will remain a challenge. .

ME again reiterated the bilingual platform requires to be embedded in all services provided and should be provided from the outset.

RPB members noted their frustration on using different virtual platforms and also the positives that have emerged from having to use virtual platforms for events in recent months in different parts of the region.

TO thanked BEJ and AH for the update. Following discussion the members of the NWRPB were in agreement to note the update report and continue to support the implementation of the stated work-streams, which will become more evident within the transformation work.

6 Health & Social Care Recovery Group – Judith Greenhalgh/Bethan Jones Edwards (verbal update)

Following a workshop with RPB members, a number of service areas were identified as requiring a regional approach to recovery. Commissioned baseline report were provided from each work-stream regularly to the H&CRG, providing high level information of the respective work showing current position, key issues for recovery, risks and mitigation and interfaces with other groups etc.

With a significant increase seen in Covid recently the Strategic Coordination Group (SCG) has been reconvened with 2 weekly meetings. The Regional Coordination Group (RCG) has been stood down. The work of the Recovery Group will continue to be vitally important throughout winter and future agenda will focus on winter planning across H&SC and output from the Data and Intelligence Cells, and will provide regular updated to the SCG.

The Winter Plan is an important piece of work and while the AISB sub-regional plans have been delayed, once received, the information will being collated into

a comprehensive high level plan to be scrutinised and used as a reference point. BCU have worked with PHW colleagues on acute data and H&SC are gathering all information on the community and all services who provide care and support outside the hospital setting. The final plan will be shared with the RPB once completed.

Cllr BF remarked the discussion on the winter plan seems to take place too late in the year. In a fortnight we are well into October with the winter plans are still not in place.

JG agreed with Cllr BF's comment, with Covid emerging so suddenly, and information required from statutory partners who are already pressed with their own work.

MWim agreed with the re-focus work of the H&CRG, re-establishing the original work during the first phase will assist to re-stabilise Social Care. MWim enquired how the changed focus integrated with the governance structure, and how swift decision are taken to inform the front line.

JG advised the H&CRG is not a formal decision making body, more of a professional group taking an overview of the work currently being progressed in the region. However, the focus has not changed, but sharpened, to focus on the winter planning and the intelligence/data cell thematic and planning information. The H&CRG reports regularly to the RPB and the NWRLB, reinforcing the governance.

JW thanked JG for her steer on the H&CRG, during a really difficult time, keeping focussed, reviewing short/medium and long term action has been a huge co-ordinated effort, to support the region to endure the winter with all the challenges that winter in general brings without the added pressure of Covid.

7 Dementia Strategy

The board received a verbal update from BJE on the Dementia Strategy.

The outstanding action; to arrange a meeting with JGa, Sandie Anderson and Michelle Richardson (Alzheimer's Society), has been held 13.8.2020. The discussion did not discover 'numerous inaccuracies' within the strategy, as had been reported to the RPB when the strategy came to the meeting for endorsement. Following the discussions held only minor amendments have been made and MR has this week forwarded her agreement to the strategy and supporting reports.

BJE informed, the final Dementia Strategy, showing the amendments will be presented to the November NWRPB for endorsement. The strategy, once endorsed by the NWRPB can then be taken through the governance and/or

political processes of the statutory partners for agreement. Each RPB SS lead portfolio member are to ensure the strategy is on their respective forward work programmes from December onwards.

ICF Dementia

BJE also informed RPB members that a recent bid to WG for ICF funding to support a Dementia Project Manager post has been awarded for the next 12 months. This post will involve working with partners on reviewing the work of the Dementia Strategy in light of Covid and operationalising the strategy. Recruitment is in progress.

8 Any other business

Nothing to report

9 For information:

The following documents were included for information:

- Coronavirus Act 2020 - Rapid Review

Action: BJE/RW send out request and documents separately - RPB members to provide feedback or respond separately by 27.10.2020

- Joint HIW and CIW letter to HB's and Trusts