



Minutes of the North Wales Regional Partnership Board Meeting

08 April 2022

9:00 am to 12:00 pm

Via Zoom

Present:	Mary Wimbury (Chair), Alwyn Jones, Alison Kemp (in attendance for Bethan E Jones), Catrin Roberts, Cllr Bobby Feeley, Cllr John Pritchard, Delyth Lloyd-Williams, Dr Lowri Brown, Estelle Hitchon, Ffion Johnstone, Fôn Roberts, Helen Corcoran, Iwan Davies, Lucy Reid, Meinir Williams-Jones, Morwena Edwards, Neil Ayling, David Soley (in attendance for Nicola Stubbins), Ricki Owen, Shan Lloyd Williams, Teresa Owen.
Apologies:	Ann Woods, Bethan E Jones, Cllr Christine Jones, Cllr Cheryl Carlisle, Cllr Llinos Medi Huws, Cllr Dafydd Meurig, Chris Stockport, Dave Hughes, Jenny Williams, Jo Whitehead, Nicola Stubbins, Rob Smith, Sam Parry, Sian Tomos.
In attendance:	Philip Provenzano, Assistant Director IPC (for agenda item 2) Matt Jenkins, Deputy Director, Partnership & Cooperation, Social Services & Integration Directorate, WG (for agenda item 3) Shelley Davies, Head of Partnerships and Integration, WG (for agenda item 3)

1 Welcome, introductions and apologies

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

2 Evaluation of the Transformation Programme

The board received an update on the final version of the North Wales Transformation Fund Programme.

Following discussion at the March meeting, feedback and comments received have been incorporated in to the final report, the changes are highlighted below:

- That the pooled budget arrangements within the Isle of Anglesey Learning Disability work-stream has been agreed

- The Communities work-stream approach adopted in the West and Central areas utilised change agents across the region to support existing operational services to develop and deliver the required changes. The East area took a different approach and focussed upon directly enhancing operational services through the deployment of staff.
- A change in terminology regarding Marleyfield house
- An update on the Grant Thornton work within the Communities work-stream, which is now complete.

The NWRPB were in agreement (subject to confirmation from elected members) to endorse the final Transformation Evaluation Report, which will be submitted to Welsh Government by 30th April 2022 and an easy read version of the final report is produced and published.

Actions

- Evaluation of the Transformation Programme Report to be forwarded to WG

3 Update on Rebalancing Care and Support

MJ and SD attended the board to provide an update on the Rebalancing Care and Support, originating from the WG White Paper consultation completed 6.4.2021.

The Rebalancing Care and Support White Paper set out proposals to improve social care arrangements and individuals' well-being through strengthening partnership and integration of services set out in the SSWBA (2014), building on strong foundations of the Wellbeing of Future Generations Act (2015) and A Healthier Wales (AHW). The Rebalancing Programme is committed to creating a National Framework for commissioned care and support, establishing a National Office to oversee the implementation of this framework, and strengthening Regional Partnership Board arrangements so joint working delivers for local populations.

MJ highlighted some of the national issues within the last 12 months:

- A particularly difficult period for everyone, whilst dealing with the impact of Covid and labour market crisis, partners worked together to maximise resources and meet the needs of their population.
- WG policy role has seen the completion of the consultation on the White Paper; the creation of a Health & Social Care levy through national insurance mechanism from April 2022; the final budget for new financial year delivering an 10% uplift for the health and social care sector; establishing the Chief Social Care Officer role for Wales and a national expert group established to

take forward the development of a national care service, an ambitious policy agenda around children and LAC.

- WG are progressing to create a new national framework for care and support that will focus on quality and value and a platform of the ambitious measures around the future workforce.
- Working with new funding streams including the RIF

Following feedback from statutory organisations the Ministers agreed WG would not establish the RPBs as legal corporate entities at this time, and WG will continue to engage with RPB's to support stronger partnership working.

SD informed a Technical Group for the National Framework, alongside 5 Regional Task and Finish Groups which have been established to strengthen Regional partnership arrangements:

- Planning and Performance will involve reviewing the self-assessment tools introduced for RPBs, study RPB's and partnership working, co-produce an annual planning cycle with a greater alignment of planning at regional, local and cluster level to ensure each area informs one another.
- Engagement and Voice – to review the challenges in engagement, strengthen engagement and clarifying roles and responsibilities, strengthen the guidance around embedding wider co-production through SSWAB (2014) and AHW.
- Rebalancing the Social Care Market – focussing on eliminating profit from the care, concerning diversity and stability across the market, to give greater resilience and flexibility across the market. The NWRPB Market Stability Report will inform this area of work.
- Integrated Service Delivery (ISD) will explore creating a blue print to respond to the theories and component part of an integrated system including workforce, digital, resourcing, governance, and outcomes framework. The ISD will also review pooled funds, taking the learning from smaller scale pooled budget and promote to joined up resourcing, whilst recognising the complexity and challenge around pooled fund arrangements.
- Governance and Scrutiny will review and clarify the accountability and scrutiny arrangement of RPBs, being aware duty to co-operate and collaborate sits within both statutory partners, ensuring the RPB's have sufficient resources to enable delivery of all functions and this is part of the work through the RIF.

The combination of the work on the above 5 areas would ultimately update the SSWBA (2014) Part 9 Statutory Guidance.

SD acknowledged the support from the RPB leads and the commitment of time to design the RIF and Capital funds. Ministers are looking for a consistent national approach through the 6 national models of care, recognising delivery might look different from area to area. Over the 5-year period WG will be looking to work with RPB and partners to shape and embed the 6 national models into mainstream provision.

Alongside the RIF the Capital programmes has been launched:

- Integrated health and social care hubs and centres – WG are working on the wider guidance. In the meantime, WG have developed the pathfinder scheme to fast track applications to ensure schemes are fully delivered against 2022-23 financial year spend.
- Rebalancing of the residential care market – will consider capital investment opportunities to rebalance the residential care sector.

Finally, SD informed NWRPB have been allocated WG Relationship Managers and Shelley Davies and Richard Ellis will support with key aspects of the integrated services delivery including the RIF and Part 9 planning commissioning arrangements.

During discussion the following points were raised:

- How can we determine the system is optimised to achieving the desired outcome without disrupting existing governance structures, given the host of partnership boards already in existence – Public Service Boards (PSBs), RPBs and Integrated Service Boards (ISBs).

SD informed WG have undertaken a strategic review of the partnership landscape, some early findings verified certain local areas intended to consider this work rather than being prescriptive from WG.

RPB's are responsible for people's support needs, and the preventative work to address those needs. PSB's being responsible for considering broader well-being factors i.e. culture, environment, economy. Partners should consider the best value, avoiding duplication. WG welcome a discussion via the WG relationship managers to craft the landscape on this issue.

- How do we avoid the reliance on funding pots and shift core funding in to alternative models.

New opportunities within the RIF models of care will set aside a margin to enable a level of innovation. WG will be looking to taper the funding over a period of time and thus requiring statutory partner resources to become effective over the medium/long term.

- How do we ensure the Accelerated Cluster Development (ACD), being pivotal to the future planning and commissioning work has the right voice in the right place.

The Part 9 review will consider the roles, responsibilities and membership of the RPB, also ensuring Primary Care has a voice within the RPB to ensure the cluster and pan-cluster arrangements can effectively feed up. The engagement arrangement and RPB structure will ensure a golden thread mechanism between all groups.

- Social care and the national structure for care fees setting is in dire need of appropriate core funding, in advance, to assist with long term fee planning purposes

The funding context of social care has been challenging over many years, and whilst recognising a number of difficult years the current budget settlement uplift of 10%, the 3-year budget that would include a Social Care reform fund and capital opportunities, is a step forward in resources including £180M being put into the baseline of social care which covers Real Living Wage commitment. WG have listened to the RBB and moved from annual funding programme to a 5-year RIF programme, a big step forward given the volatility of WG budget within the comprehensive spending review.

- Questioned from a national level if the resources have been shared fairly between all sectors, and this issue has to be the main output of the national care work survey. A more beneficial use of funding would be to share the resources between the communities, housing sector, care homes and shift NHS further out to the communities. Although LA's have welcomed a better settlement this year, this does not provide LA's with the fundamental shift to the community.

WG would welcome exploring offline a re-set to the community provision to progress from old spending patterns and step up from transformation to the community.

Finally, WG affirmed recognition of difficult public sector settlements. Although not sufficient to encompass everything the sector would need, this is a step forward and a starting point for the sector.

The chair thanked MJ and SD for attending the MWRPB and the NWRPB look forward to working with SD and RE as relationship managers in the future.

4 Future Funding update and sustainability planning

Regional Governance Structure

CR provided a detailed report to agree the governance structure to support the Regional Infrastructure Fund (RIF), Housing with Care Fund (HCF) and Integration and Rebalancing Capital Fund (IRCF).

The new RIF model and the HCF Capital Fund is centred on the WG 6 Models of Care (MoC). Welsh Government are keen to be able to demonstrate the difference made against each of these models and to establish as a standard across Wales.

The current regional governance structure consists of the Communities Transformation Board, Learning Disability Transformation Board, Together 4 Mental Health Transformation Board and Children and Young People's Transformation Board. In addition, there is a steering group for Dementia, and strategic groups for the Integrated Autism Service (IAS) and ICF grants. This structure is well established and ensures all partners are included. The structure also lends itself to support the MoC and meets the need of WG outcomes and reporting structure.

The proposed changes include:

- Remove Communities Transformation Board and the work for the Community Based Care programme to be determined and managed at area ISB level.
- Integrated Autism Strategic Group and Dementia Steering Group to be developed into Programme Boards
- Review how the RIF element of the T4MH is managed under the existing board due to the remit of that board being wider than just the RIF.
- Create a new Programme Board specifically for Capital due to the level and complexity of capital coming into the region.

Each board will feed into the RPB with the exception of the Children's board which will feed in to the newly established Children's NWRPB sub-group.

The NWRPB are asked to:

1. Approve the proposed governance structure for adoption, whilst recognising further work will be required on strengthening the links of the wider work of the regional collaboration team i.e. workforce, commissioning, RIC Hub etc whose work will support the work of the RIF.
2. That the structure be implemented and a review undertaken of each board during the period 1st April 2022 to 30th June 2022.

Following the presentation, the following points were raised:

LR, as chair of the T4MH board wasn't aware of the work being considered and noted being uncomfortable in agreeing to the changes to the structure today based on the report. LR proposed the T4MH board members would require to discuss and understand the changes being proposed, having only recently approved their terms of reference (ToR).

CR confirmed the proposal under the RIF, to continue linking the Emotional Health and Wellbeing (EHWB) programme work into the T4MH board. The changes proposed will not affect the updated ToR, only the practicable working of the T4MH Board.

AK stressed the important to ensure a format for coordinating the work of services to Older People and the ACD to ensure the NWRPB have a regional oversight on the development of this work.

CR agreed, and once the structure presented today is agreed, regional support will be explored to assist the AISB's to manage this extensive work.

The regional team are currently in the process of completing the programme documentation for the new RIF:

- Strategic Investment Plan
- 7 Models of Care Plan (LD is in addition to the original 6 WG MoC):
 - Community based care – prevention and community coordination
 - Community based care – complex care closer to home
 - Promoting good emotional health and well-being
 - Supporting families to stay together safely, and therapeutic support for care experienced children
 - Home from hospital services
 - Accommodation based solutions
 - Learning Disability

Once the MoC have been developed, the drafts will be shared with WG to reassure WG the NWRPB is progressing the work and to provide feedback on the documentation. The work is currently in draft form and will be shared with the NWRPB early next week. In order to provide NWRPB members with the level of detail required, three briefing sessions will be scheduled following Easter to discuss the documents in detail and allow members the opportunity to examine and question. Members would need to attend one of the sessions. The final draft will be presented for agreement at the NWRPB in May (subject to the meeting being quorate).

The NWRPB were in agreement:

- That the proposed governance structure is approved by the Regional Partnership Board for adoption, with the recognition the T4MH Partnership Board sits outside the oversight of the NWRPB.
- That the structure be implemented with the recognition the T4MH Partnership Board sits outside the oversight of the NWRPB, and a review undertaken of each board during the period 1st April 2022 to 30th June 2022.
- That work is undertaken to strengthen the links between the various boards and work-streams during the period 1st April 2022 to 30th June 2022, recognising the T4MH Partnership Board governance sits outside the remit of the NWRPB.

Regional Capital Funding

2 Capital funds:

1. Housing with Care Fund (HCF) 4-year fund, £14.2M (50% increase from the previous ICF funding) confirmed annual allocated to North Wales based on the historical HB formula, 3 objectives:
 - Increase the existing stock of housing with care significantly
 - Increase the stock of intermediate and short-medium term care settings
 - Minor projects
2. Integration and Rebalancing Capital Fund (IRCF) 3-year fund allocated on a bidding process - £50M 22-23, £60M 23-24 and £70M 24-25, 2 priorities:
 - Development of integrated health and social care hubs and centres
 - To address the rebalancing of the residential care market

CR informed there is considerable amount of work to plan for the duration of the 2 capital funds, also an urgent need to ensure the region is ready to access and spend the year 1 allocation. The final guidance has not yet been published for either schemes, and WG have developed a pathfinder project for the IRCF scheme to fast track applications whilst working up the wider guidance.

Partners are working at the moment around developing the Programme Plan and Objective (PPO) documentation to identify their 10-year priorities. The regional team has met with LA Social Housing Lead Officers to understand potential schemes which could be included under the HCF in Year 1, to maximise the funding. Based on this information the regional team are also developing the

outlining regional capital investment fund which will be presented to the May NWRPB for approval.

WG panel to consider applications has already been arranged for May, June and July. The work is underway currently identifying viable schemes and collating for the pathfinder process, aiming to get at least one application by the deadline of 27.4.2022 to the first panel in May. Due to the urgency of NWRPB agreement prior to deadline of 27.4.2022, the applications will be forwarded via e-mail, although not the ideal way of agreement, elected members are still in post and quoracy issues can be avoided.

The NWRPB were in agreement to:

- Agree the wider capital programme – the full programme will be presented to the May NWRPB
- Potential schemes to be presented to the pathfinder project to be circulated via e-mail in readiness for the 27.4.2022 deadline.

Actions

- Future Funding update and sustainability planning briefing sessions to be arranged – RW
- CR/LR – discuss T4MH governance
- RIF ppt to be circulated- RW

5 BCUHB update - BCUHB Re-structure

TO presented on the BCUHB new operating 'Stronger Together' model.

The Operating Model describes how the business of the Health Board is organised, who is responsible for what, who leads and manages and the processes which enables this to happen.

The new Operating Model is guided by a host of principles; Clinical leadership and evidence approached with decisions made as close to the patient as possible, person centred, community focus with regional networks, consistent standards with equal access for our population effective partnership working and a compassionate, learning organisation

The new model brings together Primary Care, Community Services, Secondary care (Acute) and Children's services into a Director led Health Community within the East, Central & West. Each of the Health Communities will have an accountable Director as a point of contact with a structure underneath. Cancer, Women's Services, Diagnostic and Specialist Clinical Support, Mental Health and Learning Disabilities will remain pan North Wales services.

The changes within the new model:

- Health Communities will be accountable for ensuring a focus on population, prevention and public health
- Health Communities will manage inpatient beds and theatres that are physically within their geography
- Operational facilities management arrangements move to the Health Community
- Single BCUHB wide waiting access and lists for care delivery will become the norm.
- A unified, population based, commissioning function will be developed, bringing together all of the commissioning work
- A holistic education function will be developed - bringing together all education & learning work
- Corporate Functions will be re-named Service Support functions

Work is continuing to appoint to new posts, supporting leavers and handover of responsibilities; providing development support for new leaders and their emerging teams and continuous co-design of structures, processes and governance & assurance framework including performance reports, with the Board making the final decision to 'Go-Live' in July.

NWRPB member's discussion highlighted:

- The existing partnership which already exists in the West, East and Central would continue with new posts in place
- The voice of primary and community care will be strengthened
- Health Board representatives on the NWRPB will be retained

TO agreed to update the NWRPB again in June, when the structure between BCU and LA will be in place.

Actions

- BCUHB re-structure update – June agenda.

6 Regional Social Value Progress Update

NA informed the Social Value Forum Steering Group (SVFSG) continue to meet on a quarterly basis. The SVFSG membership has expanded to include statutory services and meetings are very well attended. Flintshire has taken over the chair following John Gallanders retirement at the end of December 2021.

AN informed of the openness within the group and SVFSG members would welcome to hear from individuals, in both statutory and private organisations, their interest and ideas on undertaking social value with opportunities to engage in the future.

The NWRPB noted the information within the report.

7 Minutes and actions of last meeting – March 2022

The minutes were agreed as an accurate record of the meeting.

Matters arising:

Actions

- Review of the NWRPB – defer to May agenda
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8 Any Other Business – nothing to report

Date of next meeting: Friday 13th May 2022, 9:00 – 12:00 noon