
**CARDIFF & VALE OF GLAMORGAN REGIONAL PARTNERSHIP BOARD:
PROGRESS REPORT**

Purpose of Report

1. To provide Members with background information to inform their scrutiny of the Cardiff and Vale of Glamorgan Regional Partnership Board, established in accordance with Part 9 Social Services and Well Being (Wales) Act 2014, (hereafter referred to as 'the Act').

2. This report sets out the following:
 - A summary of the requirements of the Act with regard to the Regional Partnership Board;
 - An overview of the arrangements put in place in Cardiff to meet the requirements.

3. The following documents are attached as appendices:
 - **Appendix A** – Governance Structure for Regional Partnership Board
 - **Appendix B** – Terms of Reference and Membership – Regional Partnership Board
 - **Appendix C**– Population Needs Assessment: Executive Summary
 - **Appendix D** – Integrated Health and Social Care Partnership newsletter
 - **Appendix E** – Intermediate Care Funding Summary
 - **Appendix F** – Delayed Transfer of Care work stream – performance overview.

Summary of the requirements of the Act re Regional Partnership Boards

4. Part 9 of the Act deals with partnerships, co-operation and integration. It requires the establishment of a Regional Partnership Board for each region in Wales; the region for Cardiff is 'Cardiff and the Vale of Glamorgan'. It requires local authorities to make arrangements to promote co-operation with their relevant partners and others in relation to adults with needs for care and support, carers and children. It places a duty on relevant partners to co-operate with, and provide information to, the local authorities for the purpose of their social services function.

5. Part 9 of the Act provides for partnership arrangements between local authorities and local health boards for the discharge of their functions. It also provides Welsh Ministers with regulation making powers in relation to formal partnership arrangements, resources for partnership arrangements (including pooled funds) and partnership boards.

6. The purpose of Part 9 is to improve outcomes and well-being of people as well as improving the efficiency and effectiveness of service delivery. The key aims of co-operation, partnership and integration are described in the Statutory Guidance as:
 - To improve care and support, ensuring people have more say and control
 - To improve outcomes and health and wellbeing
 - Provide coordinated, person centred care and support
 - Make more effective use of resources, skills and expertise.

7. The objectives of the Regional Partnership Boards are to ensure that partners work effectively together to:
 - Respond to the population needs assessment, carried out in accordance with section 14 of the Act
 - Implement the plans for each of the local authority areas covered by the board, which local authorities and local health boards are required to prepare and publish under section 14A of the Act
 - Ensure the partnership bodies provide sufficient resources for the partnership arrangements, in accordance with their powers under section 167 of the Act
 - Promote the establishment of pooled funds where appropriate.

8. The Regional Partnership Boards are required to prioritise the integration of care and support services with health services in relation to:
 - Older people with complex needs and long term conditions, including dementia
 - People with learning disabilities
 - Carers, including young carers
 - Integrated Family Support Services
 - Integrated services for children with complex needs due to disability or illness, and for children and young people with mental health problems. This includes transition arrangements from children to adult services.

9. The Regional Partnership Board must also ensure that pooled funds are established and managed for the exercise of care home accommodation and family support functions, as well as for functions that will be exercised jointly as a result of an assessment carried out under section 14 of the Act. Pooled funds in relation to care home accommodation are required from 6 April 2018.

10. The Statutory Guidance lists those who must be members of the Regional Partnership Board and sets out that regions can co-opt persons to be members of the Board as appropriate.
11. There is a requirement that the Regional Partnership Board prepares and submits to Welsh Minister an annual report on the extent to which the Board's objectives have been achieved. The first report must be prepared and submitted by April 2017 and must include how the Board has engaged with service users or groups representing service users.
12. The Act requires local authorities and local health boards to jointly assess the following, via a population needs assessment (PNA):
- The extent of the care and support needs of the local population
 - The extent of support needs for carers
 - The extent to which those needs are being met
 - The range and level of services needed to meet the care and support needs identified
 - The range and level of preventative services needed.

Overview of arrangements in place in Cardiff

13. The following work has been undertaken to ensure Cardiff Council meets the requirements of the Act to establish a Regional Partnership Board and work to integrate health and social care:
- Appointment of a Chair and agreed membership of the Board
 - Agreed terms of reference and governance arrangements
 - Workshops, focusing on member induction and locality working
 - Analysis of existing work streams and projects and agreement on future priorities
 - Completion of the population needs assessment.

14. The governance structure, terms of reference and membership of the Cardiff and Vale of Glamorgan Regional Partnership Board are shown in **Appendices A and B** of this report. These show that the Regional Partnership Board oversees the various work streams to integrate health and social care services. These also show that the Regional Partnership Board links to the Cardiff Public Services Board, Cardiff Council's Cabinet and the Cardiff and Vale University Health Board.

15. The Executive Summary of the population needs assessment is attached at **Appendix C**. The assessment is draft, pending approval by the local authorities and Cardiff and Vale University Health Board; it is due to be considered by Cardiff Council's Cabinet on 16 March 2017. Once the population needs assessment is agreed, the Regional Partnership Board has responsibility to ensure the local authorities and local health board work together to prepare an Area Plan that sets out *'the range and level of services the local authorities and local health board propose to provide, or arrange to be provided, in response to the population assessment'*¹.

16. The newsletter attached at **Appendix D** provides a useful summary of the work to integrate health and social care services, as at October 2016. It includes a list of Intermediate Care Fund (ICF) projects, on page 4 of **Appendix D**. The Welsh Government's ICF provides funding to enable more joined up health and social care services and is focused on the following:

- revenue funding to support older people to maintain their independence and remain in their own homes;
- revenue funding to establish new integrated services for children and adults with autism, learning disabilities and complex needs; and
- capital funding to complement the revenue funding.

*Further details of the ICF funded projects are provided in **Appendix E**.*

¹ Draft Statutory Guidance in relation to Area Plans under Section 14A – page 1.

17. In addition to the ICF projects, the following integrating health and social services projects are also being undertaken:

- Joint Commissioning Project
- Locality Working
- Patient Flow: Home First (to reduce Delayed Transfers of Care)
- Welsh Community Care Information System.

*A brief summary of these projects is shown at page 5 of **Appendix D**.*

18. At **Appendix F**, Members will find a briefing on Delayed Transfer of Care, which was presented to the Strategic Leadership Group² on 26 January 2017. The briefing provides performance information, both current and comparative over time, presented by the Delayed Transfer of Care category measures. These include:

- The total number of delays
- Number of delays within mental health, medicine, specialist and surgical services
- Number of delays for patients aged 75 years or older
- Number of delays from patients who are out of the Health Board area
- The main reasons for delays.

19. At section 3 of the report, **page 3 of Appendix F**, the report details partnership work underway to address Delayed Transfers of Care. This includes: a Home First Plan; and ICF funded projects, such as Integrated Discharge Team, Discharge to Assess, expanded Community Resource Teams, Preventative Interventions, Single Point of Access and Housing Solutions.

² The Strategic Leadership Group comprises senior leaders from Cardiff and Vale University Health Board, Cardiff Council, the Vale of Glamorgan Council and the third sector. Its role is to ensure that the strategy set out by the Regional Partnership Board is translated into action across the Partnership.

Way Forward

20. At the meeting, Councillor Susan Elsmore, Cabinet Member for Health, Housing and Wellbeing may wish to make a statement. Members will receive a presentation on the progress of the Regional Partnership Board. Members will have the opportunity to ask questions of the following officers:

- Tony Young – Director of Social Services
- Rachel Jones – Assistant Director, Integrating Health and Social Care
- Amanda Phillips – Assistant Director of Social Services – Adults.
- Judith Hill – Head of Integrated Care – Cardiff and Vale University Health Board.

21. As part of the scoping exercise for this scrutiny, Members identified that they particularly wished to focus on work to date by the Regional Partnership Board to integrate health and social care services, partnership work to tackle Delayed Transfer of Care, pooled funding and the use of Intermediate Care Funding.

Legal Implications

22. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters, there are no direct legal implications. However, legal implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any legal implications arising from those recommendations. All decisions taken by or on behalf of the Council must (a) be within the legal powers of the Council; (b) comply with any procedural requirement imposed by law; (c) be within the powers of the body or person exercising powers on behalf of the Council; (d) be undertaken in accordance with the procedural requirements imposed by the Council e.g. Scrutiny Procedure Rules; (e) be fully and properly informed; (f) be properly motivated; (g) be taken having regard to the Council's fiduciary duty to its taxpayers; and (h) be reasonable and proper in all the circumstances.

Financial Implications

23. The Scrutiny Committee is empowered to enquire, consider, review and recommend but not to make policy decisions. As the recommendations in this report are to consider and review matters, there are no direct financial implications at this stage in relation to any of the work programme. However, financial implications may arise if and when the matters under review are implemented with or without any modifications. Any report with recommendations for decision that goes to Cabinet/Council will set out any financial implications arising from those recommendations.

RECOMMENDATIONS

The Committee is recommended to:

- I. Consider the information provided in the report, appendices and at the meeting
- II. Agree any comments and observations committee wishes to make to the Cabinet.

DAVINA FIORE
Director of Governance and Legal Services
2 March 2017