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**CWM TAF SOCIAL SERVICES AND WELLBEING PARTNERSHIP BOARD**

**ANNUAL REPORT 2018/19**

This report is produced to meet the requirements set out by the Welsh Government in the Social Services and Wellbeing (Wales) Act 2014

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2. **Introduction by the Chair of the Regional Partnership Board 2018/19**

As the Chair of the Cwm Taf Social Services and Well-being Partnership Board, I am pleased to introduce our 2018/19 annual report.

From 1st April 2019, the responsibility for providing healthcare services for people who live in the Bridgend County Borough Council (BCBC) moved from Abertawe Bro Morgannwg University Health Board (ABMU) to Cwm Taf University Health Board (Cwm Taf). As a direct result of this change, Partnership arrangements and boundaries needed to be realigned and 2018/19 was a transition year which saw Bridgend disaggregating services from the former Western Bay Partnership arrangements and a new region was developed being Cwm Taf Morgannwg.

The boundary change whilst challenging does provide us the opportunity to review all governance arrangements and learn from one another and develop simpler more cohesive partnership arrangements to deliver better outcomes for people and communities across Cwm Taf Morgannwg. Any period of change can be very unsettling for all those involved, including service users, carers, staff and other stakeholders. We want to continue to make the whole process as simple and transparent as possible and ensure that there is regular, transparent and ongoing communication.

I would like to thank all those engaged in the Transformation Programme and for their continued commitment to Partnership working. I look forward to the year ahead and delivering on the major Transformation Programmes and expanded Integrated Care Fund programme for the region.

**Rachel Rowlands**

**Chair of the Regional Partnership Board**

1. **Background Regional Partnership Board (RPB)**

The Social Services and Wellbeing Act Wales (2014) identified the statutory need for regions to create Regional Partnership Boards to oversee integrated strategic approaches to deliver integrated Health and Social Care services. Since this time, Welsh Government have more recently published “A Healthier Wales: our Plan for Health and Social Care” which emphasises the need to prevent illness by supporting people to manage their own health and wellbeing and on enabling people to live independently for as long as they can.

“Healthier Wales” also confirmed the importance of Regional Partnership working to develop new models of integrated Health and Social Care that are innovative and addresses regional priorities. RPBs are expected to provide a strong oversight and coordinating role as highlighted by the expectations of the national Transformation programme and the need for RPBs to have lead responsibility on the development, implementation and achievement of individual bids.

Such national expectations clearly stresses the critical role of Regional Partnership Boards in delivering the expected transformation of Health and Social Care delivery so that services become better coordinated and seamless.

In June 2018, the Welsh Government announced that responsibility for healthcare services in the Bridgend County Borough Council area would transfer to the Cwm Taf University Health Board from Abertawe Bro Morgannwg University Health Board. The boundary of the Cwm Taf Health Board would be moved accordingly with the changes coming into effect on 1 April 2019.

Regional Partnership Boards were based on the original health board footprint. The boundary change impacts on the Cwm Taf Regional Partnership Board and the Western Bay Partnership Board, of which Bridgend was a member.

During 2018/19 The Partnership Arrangements (Wales) Regulations 2015 and the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015 were amended to take account of the change. Whilst the changes did not come into effect until the 1st of April 2019 Bridgend Members were co-opted in a shadow capacity onto the existing Cwm Taf Regional Partnership Board during 2018/19.

In addition to amending regulations for the boundary change, the Welsh Government took the opportunity to review the 2015 Regulations. It has consulted on, among other things, clarifying requirements for Regional Partnership Boards to establish pooled funds and requiring housing and education representation on Boards.

As set out in statutory regulations and in Welsh Government guidance, the RPB is required to produce an Annual Report by 30th June each year which must be submitted to Welsh Ministers. It is a publically available document summarising the work of the Partnership and its associated programmes in the previous year. The report focusses on the regional responsibilities of the RPB, highlighting key areas of progress, achievements and a brief forward look in relation to our plans for the future.

The RPB Annual Report is intended to be complementary to (and not replicate) the annual reports on Social Services required from both RCT and Merthyr Tydfil CBCs, the annual report by Cwm Taf Morgannwg Health board and the annual wellbeing report by the Cwm Taf Public Services Board.

**3. Role, purpose and membership of the Regional Partnership Board and its associated structures**

The boundary change provides the chance to pause and reflect on the experience of operating Cwm Taf’s Regional Partnership Board and Bridgend’s experience as part of the Western Bay Board and a review of the Governance arrangements for the Cwm Taf Morgannwg Regional Partnership Board is a priority for 2019/20.

In response to these significant changes, Members of the Cwm Taf Regional Partnership Board and Bridgend representatives from the Western Bay Regional Partnership Board held a workshop to share views and to draw on experience to date to shape the development of the revised Regional Partnership Board. This workshop was held on the 7th February and the objectives of the event were to:

1. Help participants to understand the key characteristics (common needs; high level priorities; any differences) of the areas coming together;
2. Capture participants’ aspirations and ambitions for the Board to form its vision for the future;
3. Identify and agree the broad principles for the operation of the new partnership;
4. Identify how the Board should operate to ensure good governance, accountability and supporting structure(s), drawing on participants’ experience to date of what works well and what could be refined etc.
5. To determine how the Board can address issues relating to co-production, including approach to “Citizen’s Voice” and “Social Value”
6. To identify next steps and key action(s)

A Memorandum of Understanding, formally endorsed by each partner organisation through their formal governance processes, sets out the arrangements for the Cwm Taf Morgannwg Social Services and Wellbeing Partnership Board. Key elements are included below:

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| --- |
| **The principles that inform the work of the Cwm Taf Morgannwg Social Services and Wellbeing Partnership**   * We will promote and support effective communication across the partnership * We will make sure the public and particularly users of our services and their carers are able to influence the work of the partnership * We will focus on what matters to the people and communities of Cwm Taf * We will promote and develop solutions towards preventing problems occurring or getting worse for people in Cwm Taf * We will promote and support collaboration and integration * We will make sure that we strike a balance between short term needs and longer term goals |

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| **The key roles for the Cwm Taf Morgannwg Social Services and Wellbeing Partnership are to:**   * Ensure that there is an agreed shared vision and a clear direction of travel for service development and integration of health, care and wellbeing * Ensure that there are shared plans and strategies in place (supported by appropriate business cases) for delivering on the vision * Ensure that the strategic plans are evaluated and reviewed against agreed and understood outcomes and performance indicators * Lead a strategic approach to communicating and publicising the direction of travel and the progress made * Ensure that the principles of the Board are upheld * Maintain an effective overview of the resources allocated by the Partnership Board * Report to the Public Services Board on progress, key issues and exceptions. escalating any barriers to progress within the Partnership Board for resolution * Ensure that an annual report on progress is prepared and delivered as required to the Welsh Government. |

The required membership of RPBs is set out in statutory guidance. Boards can also co-opt additional members. The RPB membership in 2018/19 was as follows:

|  |  |
| --- | --- |
| Rachel Rowlands (Chair) | Chief Executive Officer, Age Connects Morgannwg |
| Maria Thomas  (Vice Chair) | Vice Chair, Cwm Taf University Health Board |
| Cllr Geraint Hopkins | Cabinet Member for Adult Community Services & Welsh Language, RCT CBC |
| Cllr Christina Leyshon | Cabinet Member for Children and Young People, RCT CBC |
| Cllr Rhys Lewis | Cabinet Member for Stronger Communities, Wellbeing & Cultural Services, RCT CBC |
| Cllr David Hughes | Cabinet Member for Social Services,  Merthyr Tydfil CBC |
| Lisa Curtis-Jones | Director of Social Services Merthyr Tydfil CBC |
| Gio Isingrini | Director of Social Services RCT CBC |
| Pauline Richards | Acting Chair, Interlink RCT |
| Mike Slator | Care Forum Wales Representative |
| Anne Roberts | Chair of VAMT (County Voluntary Council for Merthyr Tydfil) |
|  |  |
| Ruth Treharne | Director of Planning and Performance/Deputy Chief Executive Cwm Taf UHB |
| Clare Williams | Assistant Director of Planning and Partnerships Cwm Taf UHB |
| Nicola Davies | Head of Health and Wellbeing Cwm Taf UHB/Regional ICF lead |
| Angela Hopkins | Director of Nursing, Midwifery and Patient Services Cwm Taf UHB |
| Alan Lawrie | Director of Primary Community and Mental Health Cwm Taf UHB |
| Karen Kitch | Service User representative |
| Kay Tyler | Carer representative |
| Jon Day | Social Care Wales |
| Cllr Andrew Morgan | Leader, RCT CBC |
| Cllr Kevin O’Neill | Leader, Merthyr Tydfil CBC |
|  |  |
| **Shadow Members during 2019:** | |
|  |  |
| Cllr Huw David | Leader, Bridgend CBC |
| Cllr Phil White | Cabinet Member for Social Services and Early Help |
| Susan Cooper | Corporate Director of Wellbeing, Bridgend CBC |
| Heidi Bennett | Chief Executive, BAVO |

**\*Bridgend members became full members of the RPB on the 1st April 2019 however were in attendance during 2018/19.**

The position of Chair and Vice chair are reviewed on an annual basis, and rotated across all statutory partner organisations. Partnership Board meetings are held on a bi-monthly basis. Each member is responsible for ensuring any strategic decisions and plans made by the RPB have partner body support and are communicated and considered through their respective governance systems.

The work of the RPB to deliver its objectives is supported through a range of regional mechanisms including the following:

**Transformation Leadership Group (TLG)**

During 2018/19 the Cwm Taf Transformational Leadership Group (TLG) was jointly chaired by the UHB’s Director of Planning & Performance/Deputy Chief Executive and RCT’s Director of Social Services. The group comprised of Executive and Senior Officers from the partner organisations.

The terms of reference for this group were agreed in 2016. Meetings are currently held on a monthly cycle. From 1st April 2019 formal membership was amended to include Bridgend Senior Officers.

The key responsibilities for this group include:

* Facilitating the Transformation and change management process for services across the region.
* Prioritising and resourcing the content of the Regional Implementation Plan (including the Training and Development plan and associated commissioning strategies).
* Facilitating the progress of the Regional Implementation Plan and considering exception reports, immanent decisions, areas of concern and barriers to progress from the programme lead officers.
* Advising and making recommendations to the Cwm Taf Social Services and Wellbeing Partnership Board.
* Liaising with Welsh Government officials regarding the Regional Implementation Plan and its progress.
* Evaluating new service models, transformation and related activity (e.g. initiatives funded through the primary care, intermediate care and transformation grants).
* Supporting the co-ordination of information across all lead officer work streams particularly where actions are interdependent.

**Area Plan Delivery and Implementation Group (APDIG)**

The Area Plan Delivery and Implementation Group (APDIG) advise the Transformation Leadership Group (TLG) and Social Services and Wellbeing Partnership Board (SSWPB) on:

* Development of, and delivery against, the Cwm Taf Area Plan Work Programme, ensuring any risks are managed or escalated to the TLG or SSWPB as appropriate.
* Development and monitoring of implementation, of Joint Commissioning Strategies.
* Regular review and evaluation of the outcomes of the Intermediate Care Fund.
* Provide a link to wider transformation work being under taken across the region, including those areas of work being developed by the Cwm Taf Public Services Board, the Mental Health Partnership Board and other partnership initiatives.
* Any other emerging partnership priorities from implementation of the Social Services & Well-being (Wales) Act 2014.

**Delivery Groups**

Feeding into APDIG and TLG are a number of Delivery Groups;

* Dementia
* Carers Group
* Older Peoples Group
* Children and Young People’s Group
* Learning Difficulties
* Physical Disabilities Group
* Wales Community Care Information System (WCCIS)

The above groups are currently being reviewed as part of the governance arrangements for the RPB.

Other Regional groups that support the work of the RPB include the Cwm Taf Social Value Network, the Citizens Panel and the Cwm Taf Social Care Workforce Development Partnership.

1. **Our Strategic Direction - Regional Plan 2018-23**

The previous Cwm Taf region’s Area Plan (called locally the Regional Plan) was published as required on 1st April 2018 and can be accessed via the link below;

<http://cwmtaf.wales/how-we-work/plans-and-reports/cwm-taf-social-services-and-well-being-area-plan/>

The regional priorities derive from the previous Regional Population Assessment that converted into strategic activities into the Regions Area Plan that covered Rhondda Cynon Taff and Merthyr Tydfil Local Authority Areas. Prior to the boundary change Bridgend priorities were reflected through the Western Bay Area Plan.

A key priority for 2019/20 is to align the Bridgend and Cwm Taf Area Plan priorities and ensure that they are amalgamated into a revised document that will identify regional priorities and inform the Governance arrangements, by producing a combined new Cwm Taf Morgannwg Regional Plan. This will inform the sub groups required to support delivery.

1. **Meeting our objectives and improving outcomes: Priority**

**areas for integration**

As required, the Plan focusses on integrated services for a number of priority groups, as discussed further in the sections below, and includes examples of key regional actions. Our actions are based on the premise of delivering integrated services to people of all ages, recognising the contribution from a range of partners, not just health and social services. We want to build on our existing partnerships but also create new ones. Our approach to integration means that for those people needing care and support, they must be able to say:

*“My care is planned by me with people working together to understand me, my family and carer(s), giving me control and bringing together services to achieve the outcomes important to me.”*

We have developed a number of Statements of Intent which describe service models offering a continuum from prevention and universal services through early intervention for those with emerging difficulties to specialist support.

**5.1. Older people with complex needs and long term conditions, including dementia**

The Region has developed a Joint Commissioning Statement of Intent for Older People’s Services with a common vision for integrated health and social care services for older people:

**'Supporting people to live independent, healthy and fulfilled lives'**

In implementing the Statement of Intent, the following priorities have been included in the Regional Plan:

OP1 We will nurture supportive communities and family networks through easily accessible universal services, general and targeted health and wellbeing initiatives

OP2 We will offer integrate, time limited and goal oriented services to help people whose needs cannot be purely met by community and preventative support.

OP3 We will ensure people have access to holistic assessment that takes into account peoples needs and wishes, promoting choice and control to improve quality of life

OP4 We will ensure that older people whose needs require a specialist or substitute service are able to access those services at the right time in the right place and that they offer an improved quality of life.

**5.1.1. Stay Well@Home**

Commencing in 2016, the Cwm Taf Stay Well@Home (SW@H) is a collaborative project between Rhondda Cynon Taf CBC, Merthyr CBC and Cwm Taf University Health Board. This regional service aims to prevent unnecessary hospital admissions and ensure timely discharge for those people that have been admitted to hospital.

Stay well @Home is an integrated assessment & response service consisting of a multidisciplinary hospital based team (Social Workers, Occupational Therapists, Physiotherapists and Therapy Technicians), sited with the acute hospitals of Prince Charles (PCH) and Royal Glamorgan (RGH), and a range of community based responses across health and social care. The @Home Service based out of Dewi Sant Health Park is a team lead by health professions. The nursing element of this team was enhanced to provide Stay well @Home Team with a 4 hour nursing response, 7 days a week from 8:00am to 8:00pm, providing support for the following:

* Comprehensive nursing assessment for frail elderly patients approaching crisis
* Assessment for those patients who are frequently falling/ balance & gait problems, deteriorating mobility
* COPD
* IV antibiotics in the community
* Subcutaneous fluid administration in the community
* Advance care planning

This approach to working in partnership has transformed the experience of people in hospital, particularly at A&E, and through a revised approach to early intervention, joint working and flexible deployment of resources people are able to return to their home earlier with support rather than face prolonged unnecessary admission to hospital.

**Activity and Performance**

A total of **3005** referrals made into the SW@HT during 2018/19, of which **1870** full assessments were undertaken (62%), with a further 15% being signposted onto more appropriate services following screening.

**82%** of actioned referrals were responded to in under 1 hour, with 100% of A&E based referrals being responded to in under 1 hour. 3% increase on previous year.

**77%** of those assessed were discharged home, with **84%** being discharged home in under 24 hours from time of assessment to time of discharge.

**67%** were discharged from the ‘Front Door’ (A&E/CDU/AMU) and **33%** from the wards.

**691** A&E referrals were accepted, with 70% returning home in under 24 hours from time of assessment. 487 admissions were avoided directly from A&E following SW@HT involvement.

Facilitated discharged/overall reduced length of stay – 352 people were supported in returning home in a timely fashion via SW@HT ‘Trusted Assessor’ function.

**99%** of those assessed by the SW@HT were living in their own homes and/or with family.

Of those discharged home following SW@HT input, **51%** were discharged with the support of Support@Home/Initial Response (664 people/46% Support@Home RCT, 74people /5% Initial Response MTCBC).

A total of **2610** referrals were made to services to facilitate discharges home (these are services spanning community based health, social care and third sector), which included **25%** of people returning home with assistive equipment.

**132** people were referred to the @Home service (9% of those discharged home) along with 51 people being referred to the Your Medicines Support@Home Team (4% of those discharged home).

A Transformation Funding Bid was developed to expand the SW@H to develop a Stay Well in the Community Approach to prevent conveyance to hospital and a response to community professionals such as nurses, GP’s in and out of hours and WAST with a greater emphasis on the use of Technology to support the service user. This proposal has now been successful in securing Transformation funding and will be implemented in year.

**5.1.2. Virtual Ward**

This multi agency and multi disciplinary project piloted in a Cynon Valley GP Practice supports patients with frailty and complex health and social care needs. It involves primary care, Third sector, social care and the Welsh Ambulance Services Trust in an anticipatory approach to provide support to the top 3% of service users in the Practice. The aims are

* Improving patient care and access
* Proactive healthcare delivery by using information on hand to target vulnerable groups
* Improve communication between a range of stakeholders from health and social care, as well as the third sector,
* Improving patient Records to be able to use them proactively
* Utilise a multidisciplinary team to construct holistic care plans built around patient need

The current model is managing approximately 240 patients per year and has had a dramatic impact reducing GP Out Of Hours contacts by 91%, reducing unscheduled care admissions by 76.3% and reduction in in-hours GP contacts by 57%.

This model has seen significant success and is a key part of the Transformational model (noted in 5.1.2) for the future which will also embrace more actively our local authority and third sector partners, transforming the way we work to improve patient outcomes.

**5.1.3. Dementia**

Dementia Friendly Communities Co-ordinatorcommenced in post in January 2019 hosted by Gofal. Currently mapping the schemes within our communities to identify gaps and ways to improve connectivity, working closely with the Alzheimer’s Society DFC Co-ordinator.

Dementia Community Capacity Grantsscheme was publicised widely and all applications assessed by a panel. 10 third sector organisations have been granted funding, providing a range of activities and support networks for people living with dementia, their carers and families.

* Still Me – intergenerational project
* Valleys Kids – support group and DFC community centre
* Gellideg Foundation Group –support group and activities
* Arts Factory – opening up activities to people living with dementia, including transport provision
* British Red Cross – 12 week befriending service
* The Parent Network – carers support group
* St Matthew’s Church – support group
* Pontyclun Community Council – support group
* Dementia Friendly Maerdy – promotion of support group
* Age Connects Morgannwg – engagement to inform how the Cynon Linc Hub and ACM can support people living with dementia
* GP Practice Development visits - Dementia Awareness has now been included in the GP Practice Development Visits (PDV). The primary care team ask specific questions around staff awareness & training, appointments systems, referrals to advice and support etc. In addition to this the team have been distributing leaflets and posters to actively promote the Dementia Reading Well Scheme and availability of the books in the local libraries.
* Dementia Friends Training - the Taff Ely Primary Care Cluster is aiming to become a Dementia Friendly cluster and have arranged Dementia Friends training for their GP practices. They are also working with the Alzheimer’s Society to develop more tailored training for GP practices to ensure staff have the required knowledge and skills. Dewi Sant Health Park is being used as a community hub to train 47 staff as Dementia Friends with the aim of making this a Dementia Friendly site.
* RCT and MT CBC – Social Care Workforce Development Programme:
* A comprehensive training programme is in place for the social care workforce on dementia care and its management.

Merthyr Tydfil CBC:

* Within Merthyr Tydfil we have committed to embedding the Dementia Care Matters approach across the Local Authority. This has included providing training to all Local Authority Older People’s (OP) Care Home managers, the Older Person’s Day Service Manager, Social workers (including the Senior Social Worker) in the Psychiatry of Old Age Team and contract monitoring staff.
* The OP care home managers and day service manager have also completed the City & Guilds Level 3 award in awareness of dementia. Other dementia training is also available through the social care workforce development team.
* **Memory Assessment Services** – we are developing a new service model that ensures a consistent approach to assessment and diagnosis, and provides follow up information, advice and support for the individual and their carer/family. The service will be enhanced by the addition of the new Occupational Therapy MAS team which is being funded through ICF. This team will provide an early stage assessment of the individual’s functional and occupational needs and offer evidence based interventions to help empower the person to retain their independence, meaningful activity and social inclusion.
* **Specialist Dementia Intervention Team** – this team provides specialist advice and support to families and care home staff to enable them to understand, manage and prevent ‘behaviours that challenge’. The model of care is evidence based offering biopsychosocial individualised formulation led interventions. The aim is to reduce distress amongst people with dementia, their families and carers, to help prevent crises which often lead to hospital/ care home admission and carer breakdown, and to improve quality of life for all concerned.

Development of a Health and Wellbeing Centre for people with Dementia in Treorchy

ICF Capital in 2017/18 contributed to the costs of refurbishing Ysbyty George Thomas in Treorchy as a Health and Wellbeing Centre for people with cognitive and memory problems. **The £1.5m Centre aims to transform care and support for people living with dementia** and promotes a move away from hospital-based care. A range of services including day care, assessments, clinics, community nursing, therapies and care home teams as well as local authority and third sector services will be delivered from the Centre, which has been designed to reflect the strong history of the local area and promote a 'community' feel.

It is one of the key milestones in Cwm Taf's Valley LIFE project, which has seen a range of sectors come together to develop plans to redesign care for people with dementia by helping them to live well in or closer to their own homes.

**5.2. Children with complex needs due to disability or illness**

During 2017/18, a draft Cwm Taf Regional Statement of Intent for Supporting Children, Young People and Families has been produced jointly by partners in Cwm Taf in response to the population analysis, and building on consultation with the public and professionals in 2016. It is intended to remain relevant until 2022 and is proposed as the shared vision, principles and objectives to direct the work of all partners.

The Statement of Intent is focused on the following shared vision, that:

* Children, young people and families in Cwm Taf will live safe, healthy and fulfilled lives and achieve their full potential.
* Families and communities will be more resilient and independent.
* Our focus on communities will give children, young people and families the best possible environment to thrive.
* The balance of resource will shift from safeguarding, substitute and complex care to early and targeted help.

An Engagement plan was developed and implemented at the beginning of 2018 to ensure that the draft Statement matched the shared needs and expectations of stakeholders. The responses received overall were positive but also reflected the need for more detailed information to show how the Statement will be implemented and what difference it will make. The RPB recognises that continuous engagement and a co productive approach will be essential in the ongoing work to deliver the Statement.

The final Statement was formally approved by partners in July 2018. The Regional Plan includes the priorities below but a set of detailed milestones and deliverables for partners under each objective in the Statement is currently being developed.

CYP1 We will have the right universal services at the right time to promote wellbeing, achievement and independence

CYP2 We will focus on early help for those with emerging difficulties

CYP3 We will target intensive support for those who are really struggling

* 1. **Carers**

The Partnership’s Carers Strategy 2016-19 has the following vision:

*Carers of all ages in Cwm Taf will be recognised and valued as being fundamental to supportive and resilient families and communities. They will not have to care alone and will be able to access information, advice and support to help meet their needs, empowering them to lead healthy and fulfilled lives, balancing their caring role and their life outside caring.*

The Regional Plan contains the following actions:

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| --- | --- |
| C1 Identifying carers of all ages and recognising their contributions  C2 Providing up to date, relevant and timely information, advice and assistance to Carers of all ages.  C3 Providing support, services and training to meet the needs of Carers of all ages  C4 Giving Carers of all ages a voice with more choice and control over their lives  C5 Working together to make the most of our resources for the benefit of carers of all ages | |
|  |

In September 2017, the RPB commissioned the Welsh Institute of Health and Social Care to work with partners to review our current service model for carers and consider how we could provide more effective integrated services across the region. The Summary report of this work produced in January 2018 includes a blueprint of what a comprehensive “offer” for Cwm Taf carers could look like across five themes

* Access, information, advice and assistance
* Support services
* Employment support services, education and training
* Respite and breaks
* Making it happen

We have continued to explore how best to take forward recommendations from the review during 2018/19.

Welsh Government have 3 national priorities that we have also addressed alongside the Cwm Taf Carers Strategy:

1. Supporting life alongside caring – all Carers must have reasonable breaks from their caring role to enable them to maintain their capacity to care, and to have a life beyond caring
2. Identifying and recognising Carers – fundamental to the success of delivering improved outcomes for Carers is the need to improve Carer’s recognition of their role and to ensure they can access the necessary support
3. Providing information, advice and assistance – it is important that Carers receive the appropriate information and advice where and when they need it

A separate detailed Carers Annual Report is required by WG. The Cwm Taf Carers Annual Report for 2018/19 has been approved by the Regional Partnership Board at its July Meeting.

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* 1. **People with Learning Disabilities**

Following engagement and a range of activities to raise awareness and involve service user, carers, public and other stakeholders in the development of a Joint Statement of Strategic Intent for Children, Young People, and Adults with Learning Disabilities (that includes autism and complex needs) and their families, the Partnership approved the final version in November 2017.

The Statement of Intent describes a shared commitment to deliver a new model for health and social services, focused on the following key messages:

* Maximise the use of universal services
  + Increase early intervention, prevention, information, advice and assistance
* Build community support and develop people’s independence
* Sustain people in their own homes
* Enable people to live full lives and achieve their potential
* Keep people safe
* Make the best use of our resources

To oversee implementation of the Statement of Intent, a Joint Steering Group was established and an action plan developed. A number of work groups met during 2018/19 to address the following themes:

* Preventing loneliness and isolation by increasing community inclusion
* Reducing Stigma
* Housing
* Further Education
* Employment, training and lifelong learning
* Communications

The original themes have been further refined with three priorities being carried forward into 2019/20;

* Health
* Home
* Employment

Workshops have been held early July to progress the themes.

* 1. **Integrated Family Support Teams (IFST)**

Integrated Family Support Teams (IFST) were initially established by the Children and Families (Wales) Measure 2010. Social Services and Wellbeing (Wales) Act 2014 Part 9 Code of Practice and related regulation now sets out statutory requirements in relation to partnership arrangements including IFST.

The aim of the Integrated Family Support team is to develop family focussed, evidence based interventions to enable parents to achieve necessary behaviour changes to improve outcomes for their children.

The objectives of the Cwm Taf Integrated Family Support Team are to:

* Reduce harm to children, resulting from parental drug and alcohol misuse, domestic violence, parental mental health difficulties and parental learning disabilities.
  + Improve Well-being outcomes for children affected by parental drug and alcohol misuse, domestic violence, parental mental health difficulties and parental learning disabilities.
  + Reduce the number of children becoming looked after by the local authority.
  + Reduce the number of children requiring statutory social work involvement.
  + Support the training and development of the health and social care workforce.

The IFST was developed on a regional basis in most areas in Wales in line with Health Board footprints. In April 2019, the regional footprint changed from Rhondda Cynon Taf and Merthyr Tydfil to include Bridgend locality. This will require changes to the current configuration of services, Board arrangements and legal agreements.

**6. Meeting our objectives and improving outcomes: Enablers and how we use our regional resources**

**6.1. Integrated Care Fund**

Welsh Government has published Guidance on the Integrated Care Fund (ICF) effective from 1st April 2018 The Guidance sets out the objectives; conditions; governance requirements; and reporting arrangements to Welsh Government for ICF in 2018/19.

*The Integrated Care Fund aims to drive and enable integrated and collaborative working between social services, health, housing and third and independent sectors….. to test new approaches and service delivery models….. to support underpinning principles of integration and prevention*. *Evaluation and learning lie at the core of the ICF…… and essential that ICF programmes or projects are designed with this in mind”.*

During 2018/19 a range of schemes were progressed across Cwm Taf Morgannwg with the objectives of:

* Improving care co-ordination between health, social care, third sector and housing;
* Promoting/maximising independent living opportunities;
* Avoiding unnecessary admission or delayed discharge;
* Supporting recovery by increasing reablement provision;
* Establishing more proactive approaches;
* Facilitating integration; and
* Improving outcomes.

These included the Stay Well@Home service that continues to deliver an important component of the regional approach to preventing the escalation of need for care and support.

All ICF schemes report quarterly to TLG and RPB using a Results Based Accountability template that identifies how much has been done, how well has it been done and how people are better off/what difference the service has made. There is also an annual review of all schemes to inform investment decisions for the following year.

The Region also reports quarterly to WG which has confirmed that we have provided a good level assurance that the RPB has effectively managed the delivery of the ICF across the Cwm Taf region. Evidencing the impact of schemes remains challenging and we intend to undertake more work in 2019/20 to review our ICF schemes as part of a pathway approach which should assist in providing better outcome information.

The level of ICF funding coming into the region will increase from **£5.608m** to **£12.7m** this is due to inclusion of the Bridgend ICF allocation and increased funding available. With the volume of projects funded will increase significantly.

In addition to revenue the available ICF capital will increase from £2.99m to £5.7m during 2019/20.

The local infrastructure to support and manage the volume of funding is being reviewed to ensure robust governance arrangements are in place to enable the Partnership to deliver the priorities of the Board.

**6.2. Regional Commissioning Arrangements**

During 2017/18, working with the Institute of Public Care, Oxford Brookes University (IPC) we reviewed the arrangements for commissioning across the region with a view to the development of a small Regional Commissioning Unit (RCU), developed in partnership.

This would complement and support the resource already within partner organisations so that the Region could develop and implement regional commissioning plans for integrated service provision for a variety of client groups and develop joint community arrangements for the accelerated provision of integrated health and social care.

**6.2.1. Regional Commissioning Unit**

One of the key tasks highlighted within the Cwm Taf Regional Plan was to create a Regional Commissioning Unit, whose role is to work across the region, both with Local Authorities and Cwm Taf Health Board in order to progress local commissioning arrangements to meet the wellbeing objectives identified within the Regional Plan.

The Commissioning Unit was formally set up in the middle of March 2019 and four staff are currently in post.

The current staff structure is as follows:

Head of Joint Regional Commissioning Unit (RCU)

2 x RCU Commissioning Officers

(1 x in post, 1 x appointed - not in post yet)

RCU Business Analyst

(Vacant)

1 x RCU Admin Officer

**6.3. Social Value Network**

The Social Value Network and associated Social Value Forum was created as part of the Regional Leadership arrangements to support social value based providers develop a shared understanding of the common agenda and to work together to enhance community capacity.

Three successful Social Value Network events took place with excellent involvement and attendance of large and small third sector organisations across Cwm Taf Morgannwg and representation from service users and carers.

The three big themes were; Children and Young People (December 18); Investing in Community Support to tackle Loneliness and Isolation (July 18) and ‘Citizens, Coproduction and Commissioning.’

**What are the Cwm Taf Social Value Network priorities for action?**

* **Develop a Vision of Transformation in Community Support:** Agree a statement of intent and action plan that delivers a model of community support ‘ Stay Well in Your Community’ that brings support and solutions together that supports rather than divides different groups and does not lead to working in silos.
* **Transform Community Support:** Collaborate and coproduce local placed based solutions including the development of strategic community hubs and community networks, led by SSWB Partnership Board to support ‘Stay Well in Your Community’. This is about transforming what we do through community ownership and community action. It is not co-location of public services (it is not about creating One Stop Shops and public service improvement).
* **Transform Commissioning Arrangements:** Ensure information, advice and guidance becomes mainstreamed into all commissioned services including GP contracts – community coordination is ‘everyone’s business’ – start with the ‘What matters to you’ conversation - not ‘What service do we provide’.
* **Transform Funding**: Long-term revenue and capital funding needs to be secured for third sector to work collaboratively with public services to develop a volunteering base, develop compassionate communities, and lever in external funding. Decisions on the use of mainstream funding that impacts on wellbeing needs to be considered collaboratively alongside ‘partnership’ funding.
* **Transform Collaboration:** WG see clusters not as GP clusters but as locality based collaborative groups – a local version of the SSWB Partnership Boards. These structures and resources need to be joined together with decision makers, commissioners, GP’s and public service partners working together. For example, all partners attending a collaborative Social Value Network to share ideas.
* **Transform Culture:** Too many barriers exist to individuals, communities and the third sector being active. A shared vision shared across all partners of supporting and resourcing communities, including using asset transfer to mobilise community action not stifle it. The 5 ways of working should ensure all public service providers involve the citizens, communities and partners when planning service changes – before decisions have been made.
  1. **Health, Housing and Social Care Conference**

In October 2018 Cwm Taf RPB held a Health, Housing and Social Care Conference to explore opportunities for more effective collaboration across the sectors and accommodation led solutions to the health and social care challenges faced by priority groups for integration under part 9 of the SSWB Act (which includes people with dementia and carers).

The conference brought together over 50 professionals, practitioners and stakeholders from across the Cwm Taf and Bridgend health, housing and social care communities. The conference explored opportunities for more effective collaboration across sectors, including the development of integrated solutions to improve service delivery and maximise the contribution housing interventions can make in people’s health, wellbeing and independence.

Learning objectives for the day included building a better understanding of local need and demand, building an understanding of each other’s sectors and challenges being faced, sharing what works well/best practice models, projects and outcomes achieved in the region and elsewhere. It also provided opportunities for networking and more effective working relationships and explored proposals for a pipeline of ideas and bids for future health, housing and social care projects.

Following the conference, feedback was very positive with a strong desire and commitment to work together more effectively across the sectors to harness the assets, skills, capabilities and capacity it was agreed were available locally. This will help to maximise the contribution housing can make to health and wellbeing, maintaining independence and reducing health inequalities.

A second conference is being planned for 2019 and a new CTM RPB Housing Community of Practice has also been established to provide the focal point for sharing of good practice and collaborative working around housing for all vulnerable people.

The Board recognise the importance of housing and terms of reference have been amended to include additional representation with members to be identified as part of governance review.

* 1. **Pooled Funds**

In the former Cwm Taf region, pooled budgets are in place for youth offending services, integrated equipment services and learning disability packages of care. These funds provide an enabler for increasing value and improving outcomes through integrated and seamless services for a range of patient and client groups.

An overarching Pooled Fund for residential and nursing care has been established and is operating as set out in a Legal Agreement between partners, hosted by RCT CBC. It essentially encompasses all older persons’ independent residential and nursing placements in establishments located within the regional footprint.

Bridgend’s Care Home Pooled Funds were still within the Western Bay for 19/20 as a transition year.  And 4 key actions were identified as forward work plan activities, with a view to bringing Bridgend into this arena by 31st Mar 2020, focussing on:

Action 1 – Market Positions Statements:

* RCT/MT; Market Position Statements are in place with a number of actions and recommendations presented from them.
* Bridgend – need to review their Market Position Statements in light of the new boundary changes

Action 2 -  A need was identified to review pooled fund contracts in line with legislation which highlights regional contract arrangements be considered.

Action 3 – Reviewing and understanding the pooled fund arrangements – a separate sub-meeting was to be held focussing only on the funding arrangements, in order for Bridgend to be informed and gain understanding of how local arrangements function, with a  view to considering future changes.

Action 4 -  Consideration be given to future commissioning arrangements across all regions, in light of the Bridgend boundary changes, and to progress a Commissioning Strategy for the region.

**7. A progress report on Transformation Fund supported projects in the region.**

Since March 2019 significant progress has been made by the Regional Partnership Board in furthering plans to implement the ambitious programmes of work detailed within the ‘Stay Well in Your Community’ (SWIYC) and ‘Accelerating the Pace of Change for Our Integrated Services’(APCIS) proposals, both of which aim to build upon successful schemes to develop services around people within their communities; providing timely responses to health and social care needs and building well co-ordinated, resilient communities.

Clarity and assurance has been provided around:

* An implementation plan which combines all of the work streams within both proposals.
* The full cost detail, including posts, underpinning each work stream.
* The breakdown of recurrent and non-recurrent costs.
* A sustainability plan that cuts across all work streams within both the SWIYC and APCIS.
* An agreed financial risk management method and timeline to deliver it.

A programme management approach has been developed to ensure that both SWIYC and APCIS works streams are now able to move into the implementation phase at pace, optimising the benefit to our population within the time frame of the transformation programme.

Key tasks to be completed:

* A joint approach to the recruitment of posts essential to underpin each work stream.
* Clear identification of outcome measures and agreement of an evaluation framework across all work streams.
* Additional workshops with work stream leads and members of MDT to further develop patient pathways from referral, through the service to discharge highlighting interdependencies and additional actions required

Anticipated challenges:

* Implementing two programmes of work within the given timeframe.
* Producing robust data over reduced timeframe to accurately evaluate effectiveness of changes made.
* Delivering a whole system change that will achieve the required aims and objectives of the proposal whilst delivering the sustainable financial plan.

1. **Integrated Autism Service**

This is a regional service that became operational in the last quarter of 2017/18.

The service

* Is integrated across the LAs and UHB as it had been found that the majority of issues stem from people falling between gaps in services
* Is age wide to avoid transition issues
* Focusses on people with mild to moderate needs as existing services primarily focus on the specialist and complex end of need.
* provides information, advice, support and training eg in relation to emotional, anxiety and behavioural issues and aims to reduce social isolation, ASD specific issues and help support the development of life skills, support to access to social, leisure and employment opportunities
* Develops understanding within generic and community services.

The detailed impact of the service is captured through WG quarterly monitoring returns which require information on national service standards, activity data and outcome data in relation to quality of life, anxiety and depression.

**8.1. Third sector schemes: Community Coordinators and a Community Capacity Grant scheme (CCGS)**

There are 5 Community coordinators working across Cwm Taf with older people, groups and communities to reduce loneliness and isolation and promote independence. They provide information, advice, support and signposting to activities and services in local communities. New groups and initiatives are identified through community research, developed and promoted. In 2018/19 1222 referrals were received and 5870 signposts and/or referrals to third sector and statutory services were made.

The Cwm Taf Community Capacity Grant scheme was set up to enable third sector projects to bid for funding to provide a wide range of preventative services that improve health and wellbeing. It is often a test bed for new approaches and responding to gaps identified by the work of the Community Coordinators.

All the schemes funded through the CCGS use a well-being tool developed by Merthyr Tydfil CBC to measure the impact of their service and outcomes achieved. Participants are questioned at the beginning and end of interventions/projects to help determine if their well-being has improved in terms of the aspects highlighted below:

*Good Relationship* Measured by the statement

* I’ve been feeling close to other people

*Meaning and Purpose* Measured by the statements (the average of all three is the score)

* I’ve been feeling useful
* I’ve been dealing with problems well
* I’ve been able to make my mind up about things

*Good Feeling* Measured by the statements (the average of all three is the score)

* I’ve been feeling optimistic about things
* I’ve been feeling relaxed
* I’ve been thinking clearly
  1. **Pooled budget for packages of care for people with learning disabilities**

A pooled budget arrangement has been set up for joint packages of care for people with learning disabilities. 14 joint packages (ie where an individual’s needs have been assessed as being the joint responsibility of the UHB and one of the LAs) are currently included in the Fund in order to test out the approach and benefits. These include more proactive case management and joint review processes to ensure that people receive the care they need in the right place, with the desired effect of implementing move on arrangements where appropriate that improve outcomes.

1. joint reviews were undertaken in 2018/19.
   1. **Welsh Community Care Information System**

The Welsh Community Care Information System (WCCIS) Programme has been set up to assist the transformation of community services in Wales. WCCIS is a single ICT system for Social Care and Community Health including Social Workers, Community Nursing, Mental Health and Therapies.

WCCIS is designed to support:

* the delivery of integrated, co-ordinated care arrangements to citizens in the community through the provision of technology and information for community staff
* community based services in order to deliver more effective and efficient services to citizens in their own homes
* emerging service models and service redesign

At a Regional Workshop at the end of February 19, it was agreed that given Cwm Taf Morgannwg (April 2019) would have 3 “live” local authorities and a UHB that was actively using WCCIS there were real opportunities to align to a more effective regional approach (acknowledging that this had been problematic to fully achieve previously due to the significance of local implementation). Opportunities included:

* Working towards the same vision and goals
* Rationalisation of forms with a view to using a standard template across the region
* Standardised processes / reporting
* wider joint strategies (or strategies that compliment each other) e.g. Agile / Mobile Working, Communication and Engagement, Training etc.
* Work towards a single integrated record
  + Greater collaboration sharing knowledge and expertise.
  + Simplify access arrangements, making things easier to use, whilst ensuring robust regional governance arrangements

# 8.4. Workforce - Cwm Taf Social Care Workforce Development Partnership (SCWDP)

The purpose of the Cwm Taf SCWDP which was created in April 2016 is to improve the quality and management of social services provision by applying a planned approach to learning and development, and by seeking to increase the take-up of training across the social care sector. It aims to

* under the Social Services and Well-Being (Wales) Act have the knowledge, skills and competencies to operate under the new legal framework and that the necessary cultural changes are driven forward
* Ensure that all core learning and development for social care staff, including induction and qualification training, is reframed to reflect the new legal framework
* Support Social Work training
* Support skill development for frontline social care workers
* Support the infrastructure for learning and development

Securing a sustainable and good quality workforce across health and social care is a priority action in the Regional Plan. The “Cwm Taf Careers, Recruitment and Retention Strategy and Action Plan 2018-21” is based on the principle of “One sector; one workforce; one approach” and identifies the following priorities, some for local action and some which need national attention.

* Social value of work
* Commissioning and contracting arrangement
* Unpredictability of demand
* Attracting the right people with the right values
* Leadership, Culture and valuing the workforce
* Working conditions and flexibility
* Training and qualifications
* Pay and benefits
* Career progression and continual professional development
* Operating systems

We will know if we have been successful by reducing staff turnover and the number of vacancies by 5% or more over the years 2018/19 to 2012/22 as well as increased staff satisfaction.

* 1. **Engagement and co-production**

The RPB is committed to further development of a co-productive and asset based approach to engagement and involvement. An initial set of priority areas for co-production have been identified as being emotional wellbeing of children and young people and loneliness and isolation.

* 1. **Working with other Partnerships**

The Partnership Board reports to Cwm Taf Public Services Board (PSB) on its areas of specific responsibility in health, care and wellbeing. The Chair of the Partnership Board is a member of the PSB for that purpose and to promote effective alignment between the SSWB Act and the Well-being of Future Generations Act.

This representation is further supported at the PSB Strategic Partnership Board by the membership of the joint Chairs of the Transformation Leadership Group and these arrangements are proving effective in co-ordinating priorities and effort in the region.

The RPB also works closely with other Cwm Taf strategic partnerships including those listed below, some which have responsibilities identified in the Regional Plan to deliver on key actions:

Together for Mental Health

Safeguarding Board

Community Safety Partnership Board

Regional Supporting People Committee

Areas for better alignment with the PSB for 2019/20 are identified as;

* Early Years
* Tackling Loneliness and Isolation / Social Prescribing
* Place Based Approach

* 1. **“A Healthier Wales : Our Plan for Health and Social care”**

Welsh Government has issued its plan in response to the Parliamentary Review of the Long Term future of Health and Social Care. The Plan calls for a seamless whole system approach to health and social care, seeking to both speed up and embed change.

The Plan states that “RPBs will occupy a strong oversight and coordinating role. Regional partnership working will be at the heart of how we develop high value models of integrated health and social care.” The Cwm Taf RPB welcomes the opportunity to drive the innovation and transformation agenda locally and sees this as the time to move from a system of reactive interventions to one of true anticipatory care which proactively manages escalation of need through seamless working.

1. **Forward look**

In 2019/20, the Partnership will be focussing on the following:

* Developing and embedding new governance arrangements for the new region.
* Development of communications strategy and communication capacity to support the Regional Partnership Board
* Develop of a partnership logo for the new region
* Delivering on the Transformation proposals.
* Explore opportunities for increased social value sector engagements
* Improve the RPB communication.
* Utilise the opportunities for further developing monitoring and evaluation through additional grant for 2020 and 2021.

For more information about this Annual report or to obtain a copy of other documents referred to in it, please contact:

Sarah Mills

Head of Regional Commissioning Unit

Cwm Taf Morgannwg Regional Partnership Board

Tel: 01443 570046

[Sarah.mills@wales.nhs.uk](mailto:Sarah.mills@wales.nhs.uk)