

Western Bay Regional Partnership Board  
c/o Western Bay Programme Office  
Civic Centre  
Swansea  
SA1 3SN



[www.westernbay.org](http://www.westernbay.org)  
[western.bay@swansea.gov.uk](mailto:western.bay@swansea.gov.uk)

Date: 04 February 2019

Cllr Peter Black  
Convener Adult Services Scrutiny Panel  
Swansea Council  
Swansea  
Sa1 3SN

Dear Peter,

Thank you for your letter dated 10<sup>th</sup> October 2018, outlining the questions that were unable to be covered at the meeting. Please find the information below in response to the additional.

### **3.1. (and Appendix 1) Governance**

#### **A. Does the Partnership Board itself actually manage/deliver any services, or is it solely a "co-ordinating" mechanism?**

The role of the Regional Partnership Board (RPB) is described in part 9 of the Social Services and Wellbeing Act, as follows:

*'Regional Partnership Boards have a key role to play in relation to bringing together partners to determine where the integrated provision of services, care and support will be most beneficial to people within their region. Regional Partnership Boards will need to ensure that all partners work effectively together to improve outcomes for people.'*

*'They will need to ensure that services and resources are used in the most effective and efficient way to achieve this. Regional Partnership Boards will also play a vital role in the oversight and governance of partnership arrangements'*

The TOR for the RPB states that *'The Board is not a formal decision-making body and has no executive powers. Courses of action will be agreed by consensus among the full members. Partners will need to take issues agreed by the Board through their own local policy and decision-making for ratification as required'*.

#### **B. How are members of the Regional Citizens panel selected/elected? How many are there and what is the locality of each?**

Panel membership is 'fluid' to allow as many people to participate as possible. This was agreed during an initial workshop session held with citizens in early 2016. Around 35 individuals attended and felt that, in the interest of inclusivity, meetings should be open to all.

This arrangement has been challenging as attendance is inconsistent and discussions tend to go over the same ground as new faces continue to appear. The Institute of Public Care will consider this issue as part of the wider review of Western Bay (currently in progress).

Meetings are publicised via the databases of the three Councils for Voluntary Service within the Western Bay region, who receive funding to promote and co-ordinate meetings. Meeting locations rotate between Bridgend, Neath Port Talbot and Swansea.

**C. On Appendix 1, for each group along the bottom row of the page, and those in the line above (key change projects) how would the task of each be described? For example information sharing, joint planning of future services, merged management of service delivery, research and development/ideas creation, problem solving/trouble shooting, other.**

### **Key Change Projects**

Each Project/Programme depicted in the diagram has a defined Terms of Reference to which the Project Board operates. For example the Terms of Reference for the Commissioning for Complex Needs Board define the primary purpose as:

- To direct and drive the delivery of the project within the remit set by the Business Case.
- To provide overall guidance and direction to the project, ensuring it remains' viable within the specified constraints.
- To monitor progress of the project.
- To report on project progress to the Programme Team and Leadership Group.

The Outline Function of the Board is to:

- Provide overall guidance and direction to the project, ensuring it remains viable and within any specified constraints.
- Plan project team's work plan against the Business Case.
- Monitor progress against the Business Case and Work Plan.
- Approve project work.
- Ensure risks and issues are being tracked and managed as effectively as possible.
- Approve any Requests for Change to the Business Case.
- Review any Lessons Learned.
- Respond to requests for advice from the Implementation Manager.
- Communicate with stakeholders.
- Make decisions on escalating issues

### **Business as Usual/Local Organisational Transformation**

These Services and Boards are Business as Usual and form part of normal operations for the partner organisations. Each Service or Board have a lead authority for example the Safeguarding Board's lead authority is Neath Port Talbot. These services are no longer part of a Project/Programme

#### **4.1.5.**

**D. What is the source of the data in the graph, why is it rising after 15/16, and what is the graph for 17/18?**

The graph is demonstrating the projected number of unscheduled admissions for over 65 year old based on predicted population increases. The blue line rises in line with the predicted increased population, taken from population studies. The Orange line on the graph shows the initial Business case prediction of impact; the Grey line shows the actual impact. The graph was supplied by Cordis Bright as part of an independent evaluation.

#### **4.2.1.**

**E. Is this work and service delivery funded by an agreed pooled budget or allocation and if not, how do the financial arrangements work to fund them?**

The funding for each package of care is decided on a case by case basis. Some are 100% LA, some 100% Health and some are joint funded. The focus of the work is on high cost residential, nursing or supported living placements and some funding decisions are historical and it is not known how they were initially agreed.

**F. What happened to the savings of £4.527m? How was this sum divided between the partners?**

The savings have since increased and is broken down as follows:

	<b>Total Savings by Partner since project start 2014</b>				
	<b>ABMU</b>	<b>CCOS</b>	<b>NPT</b>	<b>BCBC</b>	<b>TOTAL</b>
<b>2014-16</b>	£579,839.53	£75,994.15	£428,112.27	£226,649.54	£1,310,595.49
<b>2016-17</b>	£339,759.87	£316,325.55	£432,824.12	£221,336.90	£1,310,246.44
<b>2017-18</b>	£711,075.41	£245,818.77	£156,612.40	£419,536.89	£1,479,583.29
<b>2018-19</b>	£170,514.75	£252,905.07	£51,137.61	£376,403.87	£852,865.98
<b>Total</b>	<b>£1,747,729.37</b>	<b>£891,043.55</b>	<b>£1,068,686.40</b>	<b>£1,243,927.20</b>	<b>£4,953,291.20</b>

**4.2.4.**

**G. May we see the tool as currently devised and the evaluation report?**

Draft report and draft funding tool below:



Paper 02 - Joint  
Funding Matrix Repor



Draft - Joint Funding  
Matrix - Merged v5.xl

**4.2.6.**

**H. How many providers serve Swansea re this service?**

There are 83 providers on the framework across Wales and England with 267 homes that individuals from Swansea can access. Within the Swansea local authority there are 7 providers with 21 homes in the framework.

**4.3.2.**

**I. Who is providing the training to support the deployment of 2,500 ipads - especially those deployed in Swansea?**

In order to deploy 2,500 iPads for Community based staff in the Health Board, ABMU have constructed Governance arrangements that include a Programme Board and Project Team to plan and oversee the implementation plan. The project is phased and targeting specific areas of service and is therefore managed to ensure that Health Board only resources are managed to advance the work. The Health Board have dedicated but limited resources to progress the implementation plan, but nevertheless progress is being made and benefits from the work are being appreciated.

**4.3.4.**

**J. Does this tool enable the better co-ordination of care delivery - for example by scheduling nursing input (such as changing dressings) after social care input (such as bathing) rather than the other way round?**

The learning that has been gathered from extending the use of WCCIS in Trem Y Mor Community Resource Team has clearly supported the view that WCCIS can provide a range of benefits to integrated working. As a consequence, the result in Trem Y Mor is that additional services are being added to the system in order that the achievement of benefits continue to increase. This is based on the findings that have proven the creation of electronic records improves accessibility to information and appropriate information sharing between services enables and supports the better delivery of integrated care. In addition the work in Trem Y Mor has also proven that the ability to access WCCIS in different Council offices reduces the need to return to base, which cuts down on travelling time etc. This benefit will be enhanced further when the WCCIS Mobile App is made available to staff so that they can then access and update information in the community using 4G compatible devices that will enable online/offline working. With relation to the question and the scenario posed, such an example has not been created in the work in Trem Y Mor to date and it is important to add that WCCIS is not the solution in its own right but nevertheless it is conceivable that WCCIS could assist with such a scenario.

#### **4.4.**

##### **K. Is there a definition of which children and young people's services are included in (or excluded from) this joint programme that needs "a common approach"?**

There is not currently a definition of what children and young people's services are included or excluded from the programme. The programme has been designed around the following principles:

- To agree a common model for service delivery for children and young people across the region (in health and social care terms)
- To oversee the strategic planning and commissioning of service models for children and young people's services, researching best practice and evidence of effectiveness from elsewhere
- To oversee implementation of named ICF funded projects, to be agreed, in relation to children and young people
- To oversee implementation of regional, integrated health and social care CYP projects and services, to be agreed

##### **L. What services if any will the Health Board or local authorities continue to provide or commission themselves?**

All services will continue to be provided and commissioned by each Local Authority and Health Board as per the current arrangements

#### **4.4.2.**

##### **M. Where does MAPPS sit organisationally? Who funds and oversees it? Does it provide any services?**

The MAPSS team is hosted by NPT and located in the Guildhall in Swansea. The team are overseen by a Principal Officer within NPT and are accountable directly to the Western Bay Children and Young People Programme Board.

MAPPS is currently funded via the Intermediate Care Fund (ICF)

Referrals are taken from Social Worker's through their Principal Officers to the team. The team then work directly with Children and Young People who are on the verge of a placement breakdown through therapeutic interventions.

The team does not provide services to the general public.

#### **4.6.1**

#### **O. How do the services here relate to those in 4.2.6?**

The Services in 4.2.6 refer directly to individuals with Mental Health or Learning Difficulties who require a placement in a Residential Home or Nursing Home. The Framework noted in 4.2.6 is a Procurement Framework which the Health Board and Local Authorities across Wales can use to make individual placements.

The Mental Health and Learning Disability Commissioning Board reviews and oversees joint development of regional strategy's.

#### **4.7.5.**

#### **P. Is this a regional service? How is demand and need assessed and on what data? How does this service relate to those in 4.2.6?**

The Integrated Autism Service is a regional service for the Western Bay region. The Integrated Autism Service (IAS) is currently being rolled out across Wales on a regional basis, utilising a national service model which was developed following extensive consultation with individuals with autism, parents and carers. The consultation exercise informed the development of this national model. Further information on the consultation exercise can be found here:

<http://www.autismrpphub.org/sites/default/files/articles/asd-consultation-summary-report-2015.pdf>

In reference to how this service relates to those in 4.2.6: The individuals placed in MH and LD care homes will have complex needs and potentially there will be some service users who have autism, however the regional service has been established to provide a service for those people with autism who are currently falling through the gaps (i.e. people with autism without a moderate to severe learning disability or mental health difficulty). A service user with autism who is currently receiving a service via LD or MH services will continue to receive those services and will therefore not be eligible to access the IAS. The IAS service also had a key role to provide advice/training and support for agencies linking with people with ASD; this could include staff in care homes, if needed.

#### **4.9.6**

#### **Q. Who selects the advertisers in the directory?**

Care Choices staff manage the advertising aspect of the directory. The editorial copy and listings are compiled by colleagues in Swansea, Neath Port Talbot and Bridgend Social Services departments in conjunction with the Western Bay Communications and Engagement Officer, but these individuals have no involvement in the advertising side of the directory.

If you have any queries with regard to the information supplied please do not hesitate to contact me at [Kelly.Gillings@swansea.gov.uk](mailto:Kelly.Gillings@swansea.gov.uk)

Yours sincerely,

**Kelly Gillings**  
**Interim Programme Lead for Western Bay**