

Western Bay Regional Partnership Board

30th October 2018

10.00 – 12.00

Committee Room 1, Civic Centre, Swansea



**Caring Together
Western Bay**
Health and Social Care Programme
**Gofalu Gyda'n Gilydd
Bae'r Gorllewin**
Rhaglen Gofal Iechyd a Chymdeithasol

Minutes

Attendees

Name	Organisation	Initials
Councillor Rob Jones (Chair)	Neath Port Talbot CBC	RJ
Professor Andrew Davies (Vice Chair)	ABMU HB	AD
Caritas Adere	Swansea Council (legal advisor)	CA
Maggi Berry	ABMU HB	MB
Councillor Mark Child	Swansea Council	MC
Susan Cooper	Bridgend CBC	SC
Kelly Gillings	Western Bay	KG
Dave Howes	Swansea Council	DH
Linda Jagers	Carers Representative	LJ
Andrew Jarrett	Neath Port Talbot CBC	AJ
Kelvin Jones	Alternate Service User / Citizen Representative	KJ
Councillor Clive Lloyd	Swansea Council	CL
Melanie Minty	Care Forum Wales	MM
Anne Newman	Alternate Carers Rep	AN
Steven Phillips	Neath Port Talbot CBC	SP
Gaynor Richards	NPT CVS	GR
Councillor Peter Richards	Neath Port Talbot CBC	PR
Phil Roberts	Swansea Council	PRo
Carwyn Tywyn	Mencap Cymru	CT
In attendance		
Joanne Abbott-Davies	ABMU HB	JAD
Hilary Dover	ABMU HB	HDo
Liz Griffiths-Hughes	Bavo	LGH
Sara Harvey	WLGA	SH
Lucy Jones	Western Bay (Note-taker)	LJo
Anne Beegan	Welsh Audit Office	AB
Julie Thomas	Swansea Council	JT
Nicola Trotman	Western Bay	NT
Catherine Vaughan	Western Bay	CV
Apologies		
Councillor Huw David	Bridgend County Borough Council	HD
Steve Davies	Western Bay	SD
Louise Fraser-Cole	Western Bay	LFC
Siân Harrop-Griffiths	ABMU HB	SHG
John Hughes	Unison	JH
Fflur Jones	WAO	FJ
Councillor Alan Lockyer	Neath Port Talbot CBC	AL
Darren Mephram	Bridgend CBC	DM
Adele Rose Morgan	Service User / Citizen Representative	ARM
Tracy Myhill	ABMU HB	AH

Rhonwen Parry	ABMU HB	RP
Councillor Dhanisha Patel	Bridgend CBC	DP
Debbie Smith	Swansea Council	DS
Councillor Rob Stewart	Swansea Council	RS
Elaine Tanner	Western Bay	ETa
Emma Tweed	Care and Repair	ET
Councillor Phil White	Bridgend CBC	PW

AGREED

Ref	Item	Action
1	Welcome, Introductions and Apologies	
1.1	RJ welcomed everyone to the meeting and introductions were made.	
2	Declarations of Interest	
2.1	No declarations of interest were raised.	
3	Draft Minutes of Previous Meeting – 19th July 2018	
3.1	KJ pointed out that there was a remark from AD regarding the principles of co-production that had not been recorded in the minutes.	
3.2	MC brought attention to the Western Bay Health and Housing Symposium, which was discussed under AOB at the last meeting. He extended his congratulations to all involved, and particularly MB, for bringing the event to fruition and hopes to see an update on the outcome of the event at a later stage. Others seconded this sentiment, and commented on the good attendance and momentum experienced.	
4	Action Plan Progress Report	
4.1	KG explained that the action plan highlights the progress made against the Western Bay Area Plan since April 2018. The majority of actions are either green, indicating that they are progressing well, or amber, where minor issues are being worked on.	
4.2	RJ advised that he would like to modernise the agenda and present items in a more cohesive order, and had therefore moved this item up as it sits better with other items in Part 1 as a business update.	KG to ensure Action Plan to feature more prominently on future agendas
5	Matters Arising and action Log	
5.1	There were no matters arising from the last action log.	
6	ASD & Integrated Autism Service Update	
6.1	SH, National Strategic Lead for Autism, WLGA gave a presentation alongside JT (Head of Children's Services, Swansea Council) and CV (Western Bay Integrated Autism Service Manager). The presentation detailed an accompanying report providing the RPB with an update on the work of the National Autism Development Team.	
6.1.2	SH explained that she is heading up small group raising awareness and producing shared resources across Wales.	
6.1.3	Communications are being developed, and are linking in with existing Western Bay Communications tools (website, quarterly newsletter). It was noted that co-production is key in this, but difficult to manage due to the prescriptive requirements attached.	
6.1.4	The Board were asked to note a conference being run at the Liberty Stadium, 'Living Well with Autism'.	RPB members to consider attendance at conference on 02.04.19

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6.2	Recruitment and retention has proved difficult in other regions, and Western Bay is the last to go live, so this must be recorded as a risk.	
6.3	The funding commitment (to March 2021) was a cause for concern for the group. The evaluation of the pilot should inform future funding. This is further complicated, however, by Bridgend disaggregation; a Service Led Agreement will need to ensure an equitable service continues to be provided in Bridgend.	
6.4	A first recommendation was to update the RPB on the on the work of the National Autism Development Team and the progress of implementation of the Western Bay Integrated Autism Service, which was noted.	
6.5	The second recommendation is for the RPB to consider and agree to the nomination of a “champion” for autism spectrum disorders to act as advocate for the IAS and to support awareness raising in the region.	
6.5.1	AD queried whether the champion role should be considered as part of the wider review being undertaken and built into future reporting.	
6.6	KJ noted the challenges of co-production and queried the lack of evidence of engagement with citizens and community interested companies.	
6.6.1	SH advised that the professional lead for the service also has a background in co-production. There has been input from autistic individuals and parent carers, but admittedly not enough.	
6.6.2	The ‘Living Well with Autism’ conference is not aimed solely at professionals, and citizen representatives should be encouraged to attend.	
6.6.3	A guide is being produced featuring the voice of real parent-carers, which should provide a strong message, and local steering groups will link with communities.	
6.7	It was noted that the 1% figure equated to potentially 5,000 individuals within the Western Bay area being on the autism spectrum.	
6.7.1	SP queried how outcomes would be measured. In terms of waiting lists for assessments, where are we currently. We need to be clear about benchmarking and evaluation.	
6.7.2	CV clarified that more work is required to understand the figures locally, and JT confirmed that work-streams are being developed, under which targets and reporting will be addressed.	
6.7.3	JT explained that the recent focus has been on strategy development, but further detail would be brought forward in the new year.	
6.7.4	MC stressed the need to address how would deal with potential waiting list of 5,000, if this figure is correct, and any gaps that currently exist in the system.	

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6.7.5	SH explained that the process is prescriptive for a reason, and diagnosis is only one element of this. The waiting list needs to be balanced with support for those on the waiting list.	
6.7.6	SH encouraged Western Bay to partake in the evaluation.	
6.7.7	JAD explained that large waiting lists had been inherited from Cwm Taf. There has been investment from ICF and ABMU. Targets from Welsh Government stipulate that waiting lists should not exceed 26 weeks, which is being met, and in a lot of instances far quicker than this. It is therefore anticipated that we should present a strong position as a baseline.	
6.8	JT stressed the importance of maximising links with education and Additional Learning Needs (ALN) to understand the impact on pathways of support.	
6.9	GR stated we need to be careful that we don't lost focus on local planning structures. JT advised that an NPT representative sits on the strategic group. GR will invite CV to the disability group.	GR to invite CV to disability group
6.10	SH described Swansea City Football Club's support of autism. They are sponsoring the event in April 2019 alongside Swansea University. The design of the conference is being co-produced, and the event ties in with Autism Awareness Week.	
6.11	SP aired caution about getting swamped by the ALN Bill. Schools would not have capacity to deal with the increased demand, which could potentially be huge. JT agreed that managing expectations is key.	
6.12	RJ reiterated point 4.10 in the report, which guarantees funding until 2021, and the concern that government could pull or cut funding. If the service is genuinely needed, it should be funded.	
6.13	In relation to item 5.2 of the report, the recommendation for RPB to nominate a champion, the Board agreed in principle.	
6.13.1	Written expressions of interest for the champion role should be submitted via RJ or KG.	Expressions of Interest for ASD champion to be sent to RJ/KG
6.13.2	If no volunteers are identified, the Board will nominate somebody.	
7	Welsh Audit Office National Evaluation of ICF	
7.1	AB presented the Welsh Audit Office's Review of the integrated Care Fund for the Western Bay Region.	
7.1.1	Welsh Government findings have not been included in the report as these are in the process of being identified. A draft national report is expected towards the end of the year.	
7.1.2	One of the key recommendations of the report is in relation to housing membership on the RPB.	
7.1.3	Recommendations are currently being made thorough national governance rather than at RPB level, although this may occur at a later date. Areas for improvement are being shared with RPB.	

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7.2	MM noted that although there is a heavy focus on 3 rd sector, there is no mention of private sector, which presents an unhelpful distinction between social and economic value.	AB to feedback comments from MM
7.3	AD commented on the room for improvement around governance in particular and noted that this provides useful learning for the review of Western Bay.	
7.4	AB indicated that feedback to Welsh Government is timely as recommendations can be similarly applied to the Transformation Fund.	
7.5	JAD pointed out the need for consistency within the bids process (e.g. common template). GR agreed, stating that there is further scope to simplify.	
7.6	RJ recommended that the RPB give cognisance to the findings of the report, to which all agreed.	
8	Mental Health Strategic Framework	
8.1	RJ advised that there were no recommendations for the Board, the framework has been adopted and developed alongside Local Authorities, and taken via a number of approval processes throughout October.	
8.2	SP welcomed the content of the framework but queried if there were any definitive timescales in relation to the implementation programme, as he is aware that Councillors will be interested in this level of detail. JAD stated that there is an issue with regards to funding for a project manager to structure the implementation plan, but confirmed that this additional detail will be brought back to RPB in the new year.	Directors to take the final report to their local Cabinets
8.3	KJ made reference to the different styles of reports that are being presented at RPB. The detail of co-production is well embedded in this particular report, but this isn't a consistent approach across all reports. This was supported by AD, who stressed that the principles of co-production should be embedded within all documents.	RPB to consider a template for reports that captures the principles of co-production
9	Social Value Forum Launch Report	
9.1	GR advised that this is a draft version of the report, which requires further work, and recommendations may be unclear at this point. There needs to be further discussion around future-proofing in relation to Bridgend. Suggestion was made that recommendations are carried forward to the next meeting.	GR to bring update & recommendations at next meeting of the RPB
10	Carers Services Mapping Report	
10.1	LGH presented the Carers Services Mapping Report to the Board.	
10.1.1	AN raise 3 points in relation to the report: <ol style="list-style-type: none"> 1. The level of carer involvement 2. Unclear how the recommendations align with the 3 national priorities 3. The proportion of carers assessed that lead on to a care and support plan/statutory support seems low – is there a flaw in the process 	

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10.1.2	In response to point 1, LGH advised that there had been engagement with carers, but the process had been time limited, and therefore the consultation used views that had been gathered recently. Had more time been available, wider engagement would have been sought. AN pointed out that a lot of services are not on the radar. SC noted that the need for carer representation and more engagement was debated at the Carers Partnership Board and accepted the point made.	AN to forward recommendations in relation to national priorities to Carers Partnership Board
10.1.3	In response to point 2, LGH noted that this had not been picked up specifically or strongly, and would feed this back to the Carers Partnership Board. RJ suggested that AN email this through as a recommendation. SC reiterated this would be picked up and the Partnership Board.	
10.1.4	In response to point 3, LGH explained that this could be viewed as a positive, as possible that better Information, Advice and Assistance (IAA) processes and links with the 3 rd Sector are providing support and avoiding the need for statutory intervention. The care and support plan is only required when needs cannot be met elsewhere. However, clarification can be sought regarding the context of the figures, but it was also noted that these present a snapshot. AN reiterated a concern that this might evidence low demand. PR advised that this query had been raised in Scrutiny Committee and the feedback was that services are fulfilling the need.	
10.1.5	LGH noted that lottery funded initiatives, for example, are also providing low level services, such as sitting service, which reduces the demand for statutory services. GR expressed a concern with relying on project funding, and stressed the importance of planning beyond this and having contingencies in place to ensure sustainability. This has been flagged, and it was noted that funding cycles present an issue for these types of services.	
10.1.6	LJ pointed out that recent changes to statutory services (e.g. respite provision) have caused issues and impact on carer flexibility, and there has been a mismatch made between assessed needs and provision.	
10.1.7	JAD and KG noted that ICF guidelines have not been consistent across voluntary sector organisations.	KG to ensure annual action plan is shared with the RPB
10.2	RJ suggested that the RPB take recommendations 1-13 on block.	
10.3	It was noted that demands on services are high, and all are in a state of flux, but commended that the recommendations in the report acknowledge this.	
10.4	JAD suggested that an action plan would be helpful to indicate delivery options, and to turn principles into actions, which KG noted would need to link to the Area Plan.	
10.4.1	RJ advised that the report should be updated to reflect actions.	
10.4.2	LGH advised that actions are included as part of the annual action plan, which KG advised could be shared with the RPB.	

Ref	Item	Action
11	Transformation Fund	
11.1	JAD explained that the Western Bay bid had been formally submitted and formal feedback was awaited. However, the informal response is positive. More detail is required, particularly in relation to how the bid is complementary to the GP cluster bid. Both components need to be in place for the system to work effectively. AJ expanded on the need to add detail, which will be reconsidered by Welsh Government in mid-November.	
11.2	MC expressed that the successful bid for Cwmtawe is positive, but it needs to dovetail into the wider bid. Caution must be aired to avoid Welsh Government from considering the bids in conflict with one another, rather than as complimentary.	
11.3	HD explained that a sum of £1.7m has been confirmed for the Cwmtawe cluster. There is a secondary proposal for all clusters to follow suit. The recommendation is to keep the bids separate, but ensure they dovetail. The RPB are asked to endorse the Neath cluster moving forward at the same time, but there is a requirement to move another 4 clusters forward at the 6 month mark, and the remainder at 12 months.	
11.3.1	HD stressed the need to develop primary care alongside social care. If RPB are to support the recommendation in principle, an updated proposal will be brought back, building on feedback.	
11.4	MC stated it was unsure what the total funding request would be, and better understanding and confidence is needed to confirm that the overriding community elements are being addressed.	
11.5	HD explained that different clusters are at different levels of maturity, which has been factored into this bids, leading to Cwmtawe and Neath emerging as the pilot sites.	
11.6	AD congratulated everyone involved in the development of the bids and stressed the importance that strong relationships in Western Bay have played in supporting the process.	
11.7	AJ aired some concerns in relation to the 2 bids getting confused, but is happy to provide a bid for the Neath cluster for primary care, with the community bid to follow.	
11.8	KJ stressed that some clarity was needed around the Cwmtawe bid being clinically led, as the separation of the bids seems to be a backwards step.	
11.8.1	HD explained that the bids were requested through different routes. Although the one bid is clinically led, we can evidence how both bids will mesh and provide a whole system approach. Welsh Government have stressed that they want to see this total approach rather than singular clusters, hence the phased approach being added in.	
11.9	RJ asked the Board to agree in principle, but with underlying caveats in place, subject to the further detail required.	RPB endorsed the submission of the bid for the Neath cluster

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11.9.1	DH advised that a tactical approach is needed, and we need to carefully time what we present. The wider wrap-around bid needs to be signed off, to ensure Welsh Government provide the funding needed to deliver. It would therefore be unwise to present the ABMU bid without the wider community offer being signed off.	
11.9.2	AD advised that Board should support the tactic, with assurances in place.	
11.9.3	RJ confirmed that the RPB would adopt the recommendations made, and agree in principle with the proposals set out.	
12	Bridgend Boundary Change	
12.1	SC advised that a fuller report will be available by the next meeting of the RPB. There are partnership and transition work-streams, which are linking.	
12.1.1	Principles and work plan have been agreed, as well as a proposal and plans for disaggregation, some of which will be in place by 01 st April 2019. All work is in progress, and further detail will follow.	
12.1.2	Programme Team has had full view of progress.	
12.2	SC advised that there are continuity concerns in relation to the 3 rd Sector. This will have an impact across all involved Local Authorities. Leadership Board have written a letter of assurance in relation to this.	
12.2.1	The issue lies in 3 rd Sector being wrapped up in the allocation of ICF, therefore it is proposed that ICF is taken out of the process, and the formula being suggested should be different to that used previously across Wales.	
12.2.2	JAD advised that concerns have been put down in writing about ICF being 'lumped in' with the Health Board allocation. The letter that has been written suggests that ICF (plus some other funding streams) are kept separate to the full allocation.	
12.2.3	SC stated that Welsh Government have been invited to the next partnership work-stream meeting on 04 th December to thrash out the concerns. There are different contacts for Social Care and Health Boards in Welsh Government.	
12.2.4	AD believes it is an error of omission that ICF wasn't regarded seriously enough. Andrew Goodall is also being invited to the meeting on 04 th December.	
12.3	SP stressed that he is uncomfortable with an open-ended transition period. There needs to be more specificity from Welsh Government on the implications for Neath Port Talbot and Swansea.	
12.3.1	SC advised that a meeting has been arranged with Welsh Government and the 3 Directors of Social Services to seek this clarity.	
12.3.2	AJ expressed gratitude to the Health Boards for acting quickly to provide reassurance and stressed that Welsh Government have been told that they need to play a lead role in this.	

Ref	Item	Action
12.4	It was noted that the letter sent from the Health Board should be supported by a letter of support from the RPB; RJ queried what the content of this letter should be.	JAD & KG to develop RPB response
12.5	AD updated the Board that RS has asked him to take over as Chair of the PSB. He will be looking at aligning with other PSBs.	
13	Regional Citizen Panel Discussion	
13.1	KJ updated that there were 3 key points to note:	
13.1.1.	1. It was well received that the Western Bay Partnership change would not result in a change to service delivery.	
13.1.2	2. Bridgend representatives are keen to maintain partnership working moving forward.	
13.1.2	3. A Communications Strategy has been co-developed to feed-back on the Strategic Review.	
13.2	RJ advised that he would attend the Regional Citizens Panel again at the end of January 2019.	
14	ICF Funding Update	
14.1	The item was provided for information.	
15	All Wales Strategic Commissioning across Health and Social Care	
	The item was provided for information.	
16	Consultation on Part 9 of the Social Services and Wellbeing Act	
	The item was provided for information.	
17	Social Prescribing and Regional Partnership Boards	
	The item was provided for information.	
18	AOB	
18.1	RJ wished the RPB a Merry Christmas and closed the meeting.	

Date of Next Meeting

17th January 2019

15.00 – 17.00

Rooms A & B, Civic Centre, Neath

The meeting closed at 12.15