

Key Finding Ref
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Key Findings

Welsh Government has issued guidance to support the introduction of the RIF, which requires RPBs to establish memorandum of understanding (MOU) to include the agreed governance, accountability and decision-making processes, and appropriate arrangements to enable scrutiny of investment decisions.

A MOU was previously agreed by partner organisations in relation to the ICF. Development of a revised document by WGRPBM PMO, detailing arrangements around RIF, remains outstanding.

Over the period of June – August 2023, the Health Board’s Strategy directorate delivered three partnership workshops, with corporate and service group representative attendance at each. These workshops identified four themes to be taken forward in support of the health board’s approach to partnership working:

- Development of a strategic partnership framework
- Mapping of roles and responsibilities across the organisation
- Development of a skills competency
- Setup of an internal health board partnership group

The above demonstrates there is intent to progress the themes identified, but noting this remains at an early stage we would suggest there could be a mechanism for capturing progress within this area.

Work has commenced on a Collaborative Working Framework based upon the partnership principles identified through workshops delivered between June and August 2023, but this has yet to progress to a draft document which the Head of Strategic Partnerships has indicated a timescale of Quarter 1 2024/25 for completion. The development of a skills competency will be included within the Collaborative Working Framework.

The terms of reference for the Strategic Partnership Group (SPG) state that it will provide ‘briefings’ to the Population Health and Partnership Committee (PHPC) in line with the frequency of Committee meetings.

There has been development of a highlight report to collate key discussions, priorities, challenges based upon the SPG meetings and this could form the basis of periodic reporting to the PHPC. The January 2024 SPG meeting included agreement to identify health board schemes in receipt of RIF.

PHPC reports in October 2023 and December 2023 referenced health board receipt of RIF funds, however they did not provide a full listing of schemes where the health board has received funding, and there could be consideration of including this detail, through incorporation of information provided by the WGRPBM, within future reporting.

WGRPBM reporting has highlighted some limitations within the current evaluation process.

Feedback from health board representatives received during fieldwork highlighted some enhancements which would be helpful to apply to future evaluations:

- Enhancing the breakdown of data by locality to support triangulation;
- Obtaining supplementary service user feedback (currently only supplied through the scheme submitted story of change, which are noted to be lengthy); and
- Use of feedback from statutory services involved in referral to schemes.

The WGRPBM agreed that previously un-allocated RIF funding would be directed to the Emotional Wellbeing and Mental Health Board, and Wellbeing and Learning Disability Board.

The Learning Disability panel received 16 scheme applications, nine of which were health board applications.

Four health board applications were successful. Whilst there would not be expectation that all schemes would be successful when applying through partnership forums, and those not taken forward would receive feedback from the WGRPBM PMO, we noted there no current mechanisms to consider any themes and consolidation of learning from applications.

Health Board risk register (HBRR) risks are assigned to Board sub-committees for oversight and to inform work programmes. The first Population and Partnership risk report was received at the December 2023 PHPC.

No risks were directly assigned to the Committee, with the paper providing detail on two associated risks (Engagement & Impact Assessment Requirements, and Failure to Develop an Approvable IMTP).

The Committee highlighted concern that there were currently no risks detailing partnerships, their relationships, and impact on delivery of health board priorities. Review of draft minutes for the meeting did not include an action with associate timescale to address this.

Impact

Non-compliance with Welsh Government guidance.

Lack of clarity relating to the Health Board's approach to partnership working

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Lack of scrutiny on delivery and progress

Scheme evaluation lacks sufficient user and statutory partner feedback

Lesson learnt may not be gained from unsuccessful applications

Lesson learnt may not be gained from unsuccessful applications

Recommendation	Priority
<p>Following finalisation, the memorandum of understanding, alongside any changes in key content, should be communicated within the health board.</p>	<p>M</p>
<p>The SPG should develop a work plan / action plan to set out timescales and leads to deliver the partnership working themes and actions identified.</p>	<p>M</p>
<p>The Collaborative Working Framework should be finalised; with ratification by the Population Health & Partnerships Committee.</p>	<p>M</p>
<p>The proposed reporting from SPG to PHPC should contain periodic inclusion of the performance status of health board schemes funded through RIF. This could be through collation of the quarter two/quarter four reporting provided by the WGRP evaluation process.</p>	<p>M</p>

<p>As part of its ongoing engagement with partners the health board should collaborate to strengthen the robustness of reviews through collating feedback from representatives involved within the evaluation process, and ensure there is guidance provided to health board representatives outlining expectations and responsibilities of panel membership.</p>	M
<p>The SPG meetings should include review of feedback received evaluation of health board applications, and collation of these to identify lessons learnt which could inform future applications.</p>	L
<p>The health board should ensure its risk register includes an entry which addresses the risk to delivery of priorities due to the quality and fragility of partnership relations.</p>	M

Management Response	Status at Report Date
<p>Once updated both documents will be shared internally within the Health Board via the Management Board. The covering paper will outline the process followed and will highlight any changes to the documents.</p>	<p>Completed</p>
<p>A draft work plan will be presented to the Strategic Partnerships Group in March. The work plan will reflect the priorities identified as part of the development workshops and the first two meetings of the SPG where discussions have been progressed in relation to RIF and Capital Investment.</p>	<p>Completed</p>
<p>The Collaborative Framework will feature in the SPG work plan, and will be ratified by the Population Health & Partnerships Committee.</p>	<p>In Progress</p>
<p>The SPG will receive quarterly reports in relation to the RIF and the progress of Health Board schemes through the 5-year RIF process. An annual RIF assurance report on Health Board schemes will be provided to the PHPC.</p>	<p>Completed</p>

<p>The monitoring of RIF will be included within the SPG work plan, with advice and support provided on Health Board schemes pre and post the WGRP evaluation process, to identify lessons learnt, and to inform the Health Board's planning process.</p>	<p>Completed</p>
<p>The same process will be followed as described in 4.1: The monitoring of RIF will be included within the SPG work plan, with advice and support provided on Health Board schemes pre and post the WGRP evaluation process, to identify lessons learnt, and to inform the Health Board's planning process.</p>	<p>Completed</p>
<p>Risks related to partnerships to be ratified at the next meeting of the PHPC.</p>	<p>Completed</p>

Status as at 19/11/24

Completed

Completed

In Progress

Completed

Completed

Completed

Completed