

Key information on Regional Partnership Boards (RPBs) for primary care clusters

How did RPBs come into existence?

- The Social Services and Well-being (Wales) Act 2014 (SSWB Act) created **Regional Partnership Boards** (RPBs).
- RPBs supersede non-statutory regional leadership groups and partnership fora.
- Seven statutory RPBs, reflecting local **health board footprints**, came into being April 2016.

Who sits on a RPB?

- Prescribed **core membership** must include at least one elected local authority member; a local health board member; two third sector members; a member representing people with care and support needs; and a member representing carers.
- RPBs may co-opt additional members as deemed appropriate.
- RPBs take account of the citizen voice by working with regional citizen's panels and other relevant groups.

What were RPBs created to achieve?

- RPBs provide leadership, planning and delivery of **integrated health and social services**; they drive regional strategy for delivering social services in close collaboration with health.
- The SSWB Act requires health boards and local authorities to partner (with citizen and third/private sector engagement) on producing evidence-informed **population assessments** (PAs) of care and support needs (including the support needs of carers). PAs must describe the range and level of services (including preventive services) required to meet identified needs; PAs are refreshed within each local government electoral cycle.
- **Pooled budgets** are required for family support functions and care homes; pooling budgets to drive integration of other services is within the gift of RPBs. Pooled budgets support **joint commissioning** agreements.
- Four **Project Boards** within each RPB are responsible for workstream delivery (Commissioning; Adult Services; Workforce; Children's Services).
- RPBs produce **Area Plans** that set out new models of seamless care, pooled budgets and joint commissioning arrangements.

How will RPBs engage with clusters?

- The expectation of **engagement** between RPBs and clusters is set out in national policy, *A Healthier Wales* (WG 2018), which states:
 - RPBs "occupy a strong oversight and coordinating role" for driving cluster-level innovations to develop "new models of seamless local health and social care".
 - "Local cluster needs assessment and service plans should feed into regional assessments and Area Plans developed by RPBs"
 - "Clusters will continue to develop models of seamless local partnership working, working closely with Regional Partnership Boards to promote transformational ways of working, so that they are adopted across Wales."
 - Clusters and RPBs will work together to interpret 10 national **design principles** (derived from **prudent healthcare** and the **quadruple aim**) and align these to their own priorities.
 - Clusters and RPBs will collaborate to enable more people to communicate in their **language of choice**.
- The mechanisms for such RPB—cluster engagement, and for join-up with other planning processes, are not described within policy, and are thus for local determination.

How do RPBs relate to well-being of future generations work?

- The Well-being of Future Generations (Wales) Act 2015 established **Public Service Boards** (PSBs); these sit at local authority level (average population 141,507¹), so there may be more than one PSB within the RPB footprint (average population 444,736²).
- While the focus of PRBs is on integration of health and social services in response to population assessments, PSB have a wider remit (economic, social, environmental and cultural well-being) and involve a wider range of partners in responding to **well-being assessments**.
- Local authority membership of RPBs and PSBs may or may not be the same individuals.
- RPB population assessments/ area plans should inform PSB well-being assessments/ well-being plans (see Table 1).

How do Welsh Government relate to RPBs?

- RPBs report to Welsh Government annually on the degree to which they have attained their objectives.
- Welsh Government will commission (by end of 2018) Healthcare Inspectorate Wales and Care Inspectorate Wales to examine the effectiveness of RPB joint working; it is not known at this time when they will report.
- RPBs will be supported with continuous learning, evaluation, and sharing of good practice provided through a national **Transformation Programme**.
- A national **Transformation Fund** (from June 2018) will accelerate the process of attaining the Welsh Government long-term vision of a “whole system approach to health and social care”, which is focussed on health and well-being, and on preventing illness.
- Proposals submitted to the Transformation Fund require RPB sign-off.
- A new nationally-coordinated network of hubs will bring together research, innovation and improvement activity within each RPB footprint.
- RPBs will work with Welsh Government and others to jointly deliver a “Future Health and Social care” engagement programme.

Table 1: Summary of key healthcare assessment and planning footprints in Wales			
<i>Footprint</i>	<i>Directive</i>	<i>Assessment output</i>	<i>Planning output</i>
Health board	NHS Planning Framework, annually revised	IMTPs will need to demonstrate how they have been informed and underpinned by population needs assessments and 3-year plans at cluster level	Integrated Medium-term Plan (IMTP), incorporating plan for primary care services
	Regional Partnership Board (SSWB Act 2014)	Population Assessment	Area Plan
	Health board (Public Health Act 2017) ³	Pharmaceutical Needs Assessment	Market entry decision
Local authority	Public Service Board (WBFG Act 2015)	Well-being Assessment	Well-being Plan
Cluster	GMS contract (QOF cluster domain, annually revised)	Local needs assessment	Cluster Action Plan
GP practice	GMS contract (QOF cluster domain, annually revised)	Practice population needs assessment	Practice Development Plan

¹ MYE2: Population estimates: Persons by single year of age and sex for local authorities in the UK, mid-2016 [\[link\]](#)

² Population estimates by local health boards and age, mid-year 2016 [\[link\]](#)

³ Part 7 of the Public Health (Wales) Act 2017 requires each Local Health Board in Wales to prepare and publish an assessment of the need for pharmaceutical services in its area, and to have regard to it in considering applications for inclusion in its pharmaceutical list [\[link\]](#)