Bwrdd Iechyd Prifysgol
Cwm Taf Morgannwg
University Health Board

Strategic Development Committee

Regional Partnerships Board Update

Eitem yr Agenda / Agenda Item	7.1.1
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Diben yr Adroddiad / Report Purpose:	For Noting
Camau Gweithredu / Penderfyniad Angenrheidiol / Action / Decision Required:	No action required, report is for noting only
Cyd-destun Strategol: *Mae'r adroddiad hwn yn cyd-fynd â'r Pileri Strategol canlynol* ***Strategic Context:*** *This report aligns to the following Strategic Pillars*	All Strategic Pillars Apply If more than one applies please list below:
Nodwch sut mae hyn yn cyd-fynd â'r Cynllun Tymor Canolig Integredig / Cynllun Cyflawni Blynyddol *(Cyfeiriad blaenoriaeth berthnasol)* **Please indicate how this aligns to the Integrated Medium Term Plan / Annual Delivery Plan** *(Reference relevant priority)*	

Argymhelliad *(Wedi'i gysylltu â'r adran "Beth Nesaf" uchod).* **Recommendation** (Linked to the "What Next" section above).	The Committee is asked to: • note progress across the Regional Partnership programme and the strengthened focus on measurable delivery and assurance;

	• note the Regional Partnership Strategic Workplan at Annex 1 and the summary delivery overview at Annex 2; • note the principal strategic risks currently being managed through RPB, particularly community capacity and delayed pathways of care, prevention, ICCS delivery, workforce and future funding; • note progress in moving the RIF Risk and Impact Assessment into active portfolio management and sustainability planning; and • note progress across the Adults, Babies, Children and Young People, ICCS and Strategic Capital programmes since the Committee's previous update.

1. Situation /Background

The Cwm Taf Morgannwg Regional Partnership Board (RPB) has a statutory and practical role in bringing together CTMUHB, local authorities, the Third Sector and other partners to plan and deliver integrated health and social care across the region. The Partnership's current focus is to move from agreed regional models into practical delivery, with clearer accountability, performance oversight and investment discipline.

2. Specific Matters for Consideration

2.1 Overall position and strengthened delivery oversight

Since the previous update to the Committee, the Regional Partnership Board has strengthened its approach to delivery, performance and assurance. A new Regional Partnership Strategic Workplan has been developed to provide a single view across the principal areas of regional activity, identifying the key deliverables, milestones, dependencies and matters requiring senior oversight.

The detailed delivery of individual programmes continues to sit with the relevant Programme Boards and officers, but the workplan provides a clearer line of sight between regional priorities and delivery.

The Strategic Workplan is attached at **Annex 1**, together with a short summary at **Annex 2**. The summary concentrates on the tangible outputs that partners should expect to see delivered across needs and evidence, Adults and ICCS, care

homes and Continuing Healthcare, children and young people, learning disability, dementia, investment and assurance, capital and governance.

This represents an important development from the position previously reported to SDC. The RPB has also agreed a new Partnership-level Strategic Risk Register. This is deliberately focused on risks which could materially affect delivery of agreed Partnership objectives or arise from dependencies across organisations and programmes, rather than duplicating the corporate or operational risk registers of individual partners.

The most significant current strategic risks relate to delayed pathways of care and insufficient community capacity, and the possibility that immediate operational pressures continue to constrain the shift towards prevention and early intervention. Both have been assessed as very high residual risks. Further high risks concern translating strategy into measurable delivery, delivering ICCS at sufficient scale and consistency, workforce capacity and capability, and funding uncertainty.

These risks are closely connected. Effective delivery of integrated community care, for example, depends upon sufficient community capacity, a sustainable workforce, better evidence and data, partner ownership, sustainable funding and alignment between service and capital planning. The workplan and risk arrangements are therefore increasingly being brought together so that senior boards can concentrate on delivery, dependencies and action rather than receiving programme updates in isolation.

Work is also progressing on the next Population Needs Assessment, with the Regional Partnership working alongside the Public Services Board to align this as far as possible with development of the next Well-being Assessment. The intention is to create a more joined-up regional evidence base, bringing together population data, research, service evidence, professional knowledge and lived experience so that the assessments support future planning, commissioning and investment rather than being treated simply as separate statutory exercises.

2.2 Programme delivery update

Adult Health, Wellbeing and Independence

The Adults Programme has moved beyond the earlier reset into development of the Whole System: Independent Lives Strategic Delivery Plan. The Programme Board has supported its overall direction, with access and navigation remaining central and further emphasis being developed around prevention and early intervention, independence, digital and technology-enabled care, mental health, learning disability, complex care and Continuing Healthcare, housing, community capacity and the contribution of the Third Sector.

The next phase includes further development of the Plan and engagement through existing citizen, carer, professional and partnership forums before a revised Plan returns through regional governance.

A Regional Continuing Healthcare Improvement Group has now been established. Its work is being developed around assessment and placement delays, compliance with the National Framework, demand and capacity, commissioning, digital and performance arrangements and, importantly, improving the experience of people and families.

The Learning Disability transformation programme continues across accommodation, transition, health and community priorities. Planned outputs include development of an accommodation needs dashboard, progression of My Dream Home, strengthened transition planning and development of a regional proposal for complex behavioural support.

Dementia priorities include implementation of the workforce development plan, further implementation of the Dementia Standards and pathway review recommendations, and alignment with the emerging Dementia Strategy.

The Regional Care Homes Group is progressing work to strengthen the sustainability, consistency and resilience of the care home sector across CTM. Current priorities include development of the Regional Care Home Contracting Framework and a supporting regional dashboard, alongside closer alignment with work on Continuing Healthcare, community capacity, seasonal pressures and the wider proactive care pathway. The intention is to move towards a more consistent regional approach to commissioning and contracting, supported by better intelligence on capacity and need, while recognising the importance of the care home sector to hospital flow, admission avoidance and care closer to home.

Integrated Community Care System and proactive care

ICCS remains a principal delivery priority, with greater emphasis now being placed on moving from the target operating model into practical locality delivery. Key milestones include integrated health and social care working on local footprints, implementation planning for the Proactive Care Pathway for Frailty, development of the navigation model and a shared digital, data and analytics agenda.

Following the recent regional proactive care workshop, work is being developed to turn the emerging pathway into a practical operating model linking identification of people at risk of deterioration with multidisciplinary assessment, coordinated care and community support. This will contribute to delivery of the Community by Design Visions and be an important component of the Health Board's clinical model at 'level 0'. Demand and capacity modelling is also being progressed to provide a stronger evidence base for projecting future community service requirements.

Babies, Children and Young People

The focus continues to be implementation of Whole System: Whole Heart, with clearer links between the overall strategy, delivery groups and regional governance. The Programme Board is moving into the next phase of identifying

future priorities and investment requirements, while links with the Regional Safeguarding Board are being strengthened.

The three Directors of Education will join the executive-led Integrated Leadership Board, strengthening the connection between education and the wider regional partnership arrangements.

Further work is progressing on embedding NYTH/NEST and strengthening co-production, including transitions. The regional workplan also identifies Trusted Adults, safe spaces, trauma-informed practice and strengthening the influence of children and young people on service design as tangible areas of delivery.

The Neurodevelopmental Improvement Programme continues through four workstreams covering assessment, multidisciplinary working and community support for children, young people and adults. Current officer arrangements are being managed pending greater certainty over future funding, with discrete pieces of work continuing alongside the programme.

Regional Integration Fund

There has been significant progress since the previous SDC report. The RIF Risk and Impact Assessment has now moved through moderation and validation and provides a much stronger evidence base on service impact, reliance upon RIF, workforce and contractual implications, potential displacement of demand and costs elsewhere in the system, and interdependencies between RIF-funded and core services.

Ministers have confirmed that RIF will continue beyond March 2027, although the overall level of funding and the shape of future national guidance have not yet been formally confirmed. The regional response is therefore moving from a one-off assessment exercise to active management of a live RIF risk and sustainability portfolio so that the Partnership is able to respond quickly once future arrangements are known.

The proposed governance approach retains strategic oversight of the overall portfolio at RPB level while increasing the role of the Adults and Children and Young People Programme Boards in managing risks, mitigation, sustainability and scenario planning within their respective portfolios. Significant cross-portfolio, financial or whole-system matters will continue to be escalated through ILB and RPB as appropriate.

Strategic Capital

The refreshed Regional 10-Year Strategic Capital Plan and Integrated Community Hubs Strategy have now progressed through regional governance. The work reflects progress from identifying accommodation and infrastructure gaps towards establishing a more developed regional pipeline linked to evidence of need and future service models.

Delivery and expenditure remain an important area of risk. At Quarter 2, £4.58m of the £9.2m HCF allocation remained unallocated, while schemes extending beyond March 2027 are affected by uncertainty about future capital programme arrangements. Additional Capital Board meetings and active development of potential acquisitions and other schemes are being used to accelerate viable investment.

The additional Capital Board held in October demonstrated that more active approach, considering further accommodation opportunities and supporting clearer arrangements to enable decisions between scheduled meetings where Welsh Government funding deadlines require a quicker response.

2.3 Delivery and risk: matters for SDC oversight

The strengthened workplan and strategic risk arrangements provide a clearer basis for scrutiny of the Regional Partnership. Rather than relying principally upon narrative descriptions of activity, SDC will increasingly be able to understand whether:

- the tangible outputs and milestones in the Strategic Workplan are being delivered;
- partnership activity is translating into measurable changes in pathways, outcomes and experience;
- the most significant strategic risks are reducing or increasing;
- capital and revenue investment are aligned with agreed service transformation priorities; and
- where there are cross-organisational barriers requiring intervention.

This is also the approach being developed for RPB itself: detailed programme monitoring remains with Programme Boards, while senior partnership governance concentrates on strategic exceptions, dependencies, risks and decisions requiring collective leadership.

3. Assessment

Cyswllt â Risg(iau) Strategol ar Fframwaith Sicrwydd y Bwrdd *(Nodwch pa risg(iau) strategol y mae'r mater hwn yn effeithio arnynt a beth yw'r effaith ar y risg)* **Link to Strategic Risk(s) on the Board Assurance Framework** (Identify which strategic risk(s) this matter impacts on and what the impact is to the risk)	Strategic Risk 11 Integrated Care Model Delivery If more than one applies please list below:

Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant /	A Healthier Wales

Link to Wellbeing of Future Generations Act – Wellbeing Goals	If more than one applies please list below:

Dolen i Hwyluswyr Ansawdd / Link to Enablers of Quality	Whole-Systems Perspective
	If more than one applies please list below:

Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental Sustainability Impact (5Rs)	No - Not Applicable
	If more than one applies please list below:

Asesiad Effaith Impact Assessment		
Canlyniad Asesiad Effaith ar Gydraddoldeb a'r Gymraeg *(Ysgrifennwch ddatganiad cryno, os na wneir hynny, rhowch reswm o'r rhestr ostwng a llofnodwch y Weithrediaeth.)* **Equality & Welsh Language Impact Assessment Outcome** *(Please write summary statement, if not undertaken provide reason from dropdown and Executive sign off.)*	Outcome for Equality (delete as appropriate): POSITIVE/NEUTRAL/NEGATIVE Summary of impact: As appropriate across the RPB's functions Outcome for Welsh Language (delete as appropriate): POSITIVE/NEUTRAL/NEGATIVE Summary of impact: As appropriate across the RPB's functions	If no, please select a reason below. Choose an item. Named Executive/Board member sign off for no EWLIA completion:
Canlyniad Asesiad Effaith Ansawdd *(Cadarnhewch y canlyniad, os na chynhaliwyd ef, esboniwch yn fyr pam nad oedd ei angen)* **Quality Impact Assessment Outcome** *(Please confirm outcome, if not undertaken briefly explain rationale for why it was not required)*	As appropriate across the RPB's functions	
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report	
Enw da / Reputational	There is no direct impact on the reputation of the Health Board as a result of the activity outlined in this report	

Effaith Adnoddau *(Pobl /Ariannol) /* **Resource Impact** *(People / Financial)*	There is no direct impact on resources as a result of the activity outlined in this report

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group)		
Committee / Group /Forum Individuals	**Date**	**Outcome**
Regional Partnership Board	16/10/2026	Noted
CTM Joint Overview Scrutiny Committee	16/07/2026	Noted
CTM Public Services Board	23/07/2026	Noted

Acronyms / Glossary of Terms	
HCF	Housing with Care Fund
ICCS	Integrated Community Care System
ILB	Integrated Leadership Board (Senior Executive Forum that reports to the RPB)
IRCF	Integration and Rebalancing Capital Fund
PNA	Population Needs Assessment
RPB	Regional Partnership Board
WBA	Well-being Assessment (Public Services Board)