Number: WG35639



Welsh Government Consultation Document

Social Services and Well-being (Wales) Act 2014

Amendments to Partnership Regulations under Part 9 of the Act

Date of issue: 31 August 2018

Action required: Responses by 26 October 2018

Mae'r ddogfen yma hefyd ar gael yn Gymraeg. This document is also available in Welsh.

Overview

This consultation seeks your views on amendments to the Partnership Arrangements (Wales) Regulations 2015 and the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015. The purpose is to:

- Change regional partnership board areas to take account of the change to the boundaries of Abertawe Bro Morgannwg and Cwm Taf health boards
- Clarify requirements for regional partnership boards to establish pooled funds in relation to care homes
- Require housing representation on regional partnership boards
- Require regional partnership boards to produce regional commissioning strategies in relation to care homes
- Clarify the date when regional partnership boards must produce annual reports

How to respond

You can respond to this consultation by completing and returning, by midnight on the closing date, the consultation response form at the back of this document. The response should be sent to:

Partnership & Integration Branch
Social Services & Integration Directorate
Welsh Government
Crown Buildings
Cathays Park
Cardiff
CF10 3NQ

Alternatively the consultation response form is available on our website (http://wales.gov.uk/consultations/?lang=en) and can be returned to us, by midnight on the closing date, via e-mail to: sswblmplementation gov.wales

Further information and related documents

Large print, Braille and alternative language versions of this document are available on request.

Insert any references to the internet, documents or information which might to useful to consultees e.g. consultation web address, detailed appendix to consultation

Contact details For further information:

Address:

Partnership & Integration Branch Social Services & Integration Directorate

Crown Buildings Cathays Park CARDIFF CF10 3NQ

email: <u>SSWBIMPLEMENTATION@gov.wales</u>

General Data Protection Regulation (GDPR)

The Welsh Government will be data controller for any personal data you provide as part of your response to the consultation. Welsh Ministers have statutory powers they will rely on to process this personal data which will enable them to make informed decisions about how they exercise their public functions. Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about or planning future consultations. Where the Welsh Government undertakes further analysis of consultation responses then this work may be commissioned to be carried out by an accredited third party (e.g. a research organisation or a consultancy company). Any such work will only be undertaken under contract. Welsh Government's standard terms and conditions for such contracts set out strict requirements for the processing and safekeeping of personal data.

In order to show that the consultation was carried out properly, the Welsh Government intends to publish a summary of the responses to this document. We may also publish responses in full. Normally, the name and address (or part of the address) of the person or organisation who sent the response are published with the response. If you do not want your name or address published, please tell us this in writing when you send your response.

You should also be aware of our responsibilities under Freedom of Information legislation

If your details are published as part of the consultation response then these published reports will be retained indefinitely. Any of your data held otherwise by Welsh Government will be kept for no more than three years.

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- to (in certain circumstances) object to or restrict processing
- for (in certain circumstances) your data to be 'erased'
- to (in certain circumstances) data portability
- to lodge a complaint with the Information Commissioner's Office (ICO) who is our independent regulator for data protection.

For further details about the information the Welsh Government holds and its use, or if you want to exercise your rights under the GDPR, please see contact details below: Data Protection Officer: Welsh Government Cathays Park CARDIFF CF10 3NQ

e-mail:

Data.ProtectionOfficer@gov.wales

The contact details for the Information Commissioner's Office are:
Wycliffe House

Wycliffe Hous Water Lane Wilmslow Cheshire SK9 5AF

Tel: 01625 545 745 or 0303 123 1113

Website: https://ico.org.uk/

Introduction

- 1.1. Part 9 of the Social Services and Well-being (Wales) Act 2014 ('the Act') provides Welsh Ministers with powers to ensure appropriate structures and resources are in place to enable the provision of integrated care and support services. The Partnership Arrangements (Wales) Regulations 2015 ("The 2015 Regulations") provide for the establishment of seven regional partnership boards on the health board footprint. Their objectives include ensuring partners:
 - respond to the population assessment required by the Act;
 - implement area plans produced in response to that assessment: and
 - promote the establishment of pooled funds where appropriate.
- 1.2. The Partnership Regulations set out that the membership of each regional partnership board must include:
 - At least one elected member of a local authority;
 - At least one member of the local health board;
 - Directors of social services from each local authority;
 - A representative of the local health board;
 - At least one person to represent people with needs for care and support;
 - At least one person to represent carers;
 - At least one person who represents the interests of care providers; and
 - Two people who represent the interests of the third sector (one representing local and one national third sector organisations).
- 1.3. Regional partnership boards may co-opt other persons to be members as appropriate.
- 1.4. The 2015 Regulations include requirements for partners to establish and maintain pooled funds. Specifically, regulation 19(1)(a) says that "Partnership bodies for each of the partnership arrangements are required to establish and maintain pooled funds in relation to their adult care home accommodation functions." This requirement commenced in April 2018.
- 1.5. The Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015 set out partnership arrangements for population assessments of care and support needs, required under section Part 2 of the Act.
- 1.6. The Welsh Government announced on the 14th June 2018, following a three month public consultation, that healthcare services in the Bridgend County Borough Council area will transfer to Cwm Taf University Health Board from Abertawe Bro Morgannwg University Health Board, moving the health board boundary accordingly. This will come into effect on 1 April 2019.
- 1.7. There is a need to amend the 2015 Regulations and the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015 to take account of the health board boundary change. This presents an opportunity to simultaneously undertake a general review of these regulations, including specifically in relation to the requirement to establish pooled funds and to require a housing representative to be included in the membership of each regional partnership board.

There will also be a need to amend the Part 9 Statutory Guidance, and this is covered in more detail in section 4.

1.8.

This consultation

- 2.1. This consultation runs from 31 August 2018 and closes at midnight on 26 October 2018.
- 2.2. This consultation seeks your views on amendments to the Partnership Regulations and the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015. The purpose is to:
 - Change the partners included in both the Cwm Taf and Western Bay Regional Partnership Board areas to take account of the change to the boundaries of Abertawe Bro Morgannwg and Cwm Taf health boards;
 - Clarify requirements for regional partnership boards to establish pooled funds in relation to care home accommodation functions;
 - Require housing representation on regional partnership boards;
 - Require regional partnership boards to produce regional commissioning strategies in relation to care homes for older people; and
 - Clarify when regional partnership boards must produce annual reports.
- 2.3. We are also seeking your views on the proposed approach to amending the Part 9 Statutory Guidance to take account of the changes to regulations set out above. We intend to publish revised guidance by April 2019, taking account of consultation responses and further discussion with stakeholders.
- 2.4. Included in this consultation are the draft Partnership Arrangements (Wales) (Amendment) Regulations 2019 ("The Amendment Regulations"). Your consultation responses will help inform our consideration of the final regulations. Our intention is to analyse the responses over the autumn and consider changes before laying the regulations before the National Assembly for Wales. The regulations will come into effect on 1 April 2019.
- 2.5. This consultation will take place over 8 weeks between 31 August and 26 October 2018. The changes in relation to health board boundaries were consulted upon between December 2017 and March 2018. The proposed changes in relation to pooled funds and housing representation have been discussed with a wide range of stakeholders.

Proposed amendments

Forthcoming change to Cwm Taf and Abertawe Bro Morgannwg health board boundary

- 3.1. Following consultation, the Welsh Government announced on 14th June 2018 that healthcare services in the Bridgend County Borough Council area will transfer to Cwm Taf University Health Board from Abertawe Bro Morgannwg University Health Board, moving the health board boundary accordingly. This change will align economic, education, health and social services partnership arrangements for Bridgend County Borough firmly within the Cardiff Capital Region. This will take effect on 1 April 2019.
- 3.2. The Partnership Regulations set out the bodies included within each regional partnership board. These regulations will need to be amended in relation to the bodies included in both the Western Bay and Cwm Taf Regional Partnership Boards. This will need to take effect on 1 April 2019. The table below summarises the necessary changes:

| Regional Partnership Board | Current partnership arrangements | Partnership arrangements after amendment |
|-------------------------------|--|---|
| Cwm Taf | Cwm Taf University Health Board Rhondda Cynon Taf County Borough Council Merthyr Tydfil County Borough Council | Cwm Taf University Health Board Rhondda Cynon Taf County Borough Council Merthyr Tydfil County Borough Council Bridgend County Borough Council |
| Western Bay | Abertawe Bro Morgannwg University Health Board Swansea City and County Council Bridgend County Borough Council Neath Port Talbot County Borough Council | Abertawe Bro Morgannwg University Health Board Swansea City and County Council Neath Port Talbot County Borough Council |

3.3. Separate amendment regulations will also change the partnership arrangements in the same way for Cwm Taf and Western Bay in the Care and Support (Partnership Arrangements for Population Assessments) (Wales) Regulations 2015.

- 3.4. Separate statutory instruments will address the actual change of health board boundaries, transfer of assets and liabilities and consequential amendments to other legislation. This will include changes to safeguarding boards, regional adoption arrangements, Community Health Councils and mental health partnerships. Regional adoption arrangements will be amended separately in Directions.
- 3.5. Because this issue has been addressed in the wider consultation on the Bridgend health board boundary change that took place between 13 December 2017 to 7 March 2018, the Welsh Government is not seeking any views on this element of the Amendment Regulations.

Regional pooled funds

- 3.6. Pooled funds are a key element of the integration agenda and the drive towards the joint commissioning of services. Further to requirements in the Partnership Regulations, supporting statutory guidance sets out the expectation that partners also put in place an integrated commissioning process focused on improved quality as well as securing better value for money. This guides partners to:
 - agree an appropriate integrated market position statement and commissioning strategy;
 - Agree a common contract and specification;
 - Develop an integrated approach to agreeing fees with providers;
 - Develop an integrated approach to quality assurance; and
 - Adopt a transparent use of resources.
- 3.7. Welsh Ministers have set out their expectation that these pooled funds be established at the regional level between the health board and all the local authorities within the partnership area.
- 3.8. The proposed Amendment Regulations provide additional clarity that all local authorities and the health board within a partnership must contribute to the establishment of a single a pooled fund in relation to care home accommodation functions for older people.
- 3.9. The Institute for Public Care carried out a literary review on the benefits of pooled funds, which Welsh Government has shared with regional colleagues. The study highlighted benefits including improving sustainability of the market; equitable decision making; regional commissioning; and strengthened partnership working. A copy of this is available here:
 - https://ipc.brookes.ac.uk/publications/Welsh%20Government%20Pooled%20Funds%20IPC%20Evidence%20Review%201%20December%202017.pdf

Scope of pooled funds

- 3.10. Regulation 19(1)(a) of the 2015 Regulations currently requires that a pooled fund is established in relation to all adult care home accommodation functions.
- 3.11. Following discussions with regional colleagues, the Welsh Government acknowledges that the initial priority and the more realistic expectation is that pooled funds should only be required in relation to care homes for older people. The proposed Amendment Regulations therefore confirm that partners are required to establish and maintain a pooled fund in relation care home accommodation for older people. This still ensures that a pooled fund is established to meet the costs of the significant majority of care costs.
- 3.12. The regulations define an older person as a person aged 60 or over. We welcome views on the appropriateness of this definition for the purposes of defining the scope of the requirement to establish a pooled fund.
- 3.13. The regulations will not preclude regional partnership boards from developing pooled funds more widely dependent on their priorities. Partners will still be required to consider establishing a pooled fund whenever they do something jointly in response to the population assessment required by section 14 of the Act. Some regions have however suggested that establishing pooled funds in relation to adults with learning difficulties (for example) would be very complex and require a significant amount of further work.

Regional commissioning strategies

- 3.14. The Parliamentary Review of Health and Social Care includes a recommendation to introduce a national requirement for 'joint regional commissioning strategies across health, care and well-being by population, with clear requirements on pooled resources'.
- 3.15. There is already an expectation for regional boards to produce commissioning strategies set out within the Part 9 Statutory Guidance, as part of a package of measures to provide for integrated commissioning arrangements. We propose to strengthen this requirement by establishing it in regulations.
- 3.16. The proposed Amendment Regulations set out that the pooled fund established in relation to care home costs for older people must be commensurate with the anticipated need for care home accommodation identified in the regional commissioning strategy. This intends to clearly place the pooled fund within the context of integrated commissioning arrangements.
- 3.17. This approach will further underline the expectation that pooled funds must be within a context of integrated commissioning arrangements. We believe this requirement should be limited to care home places for older people at this stage, to link with the requirement for pooled funds, although this would not preclude regional boards from developing commissioning strategies for other areas.
- 3.18. These strategies should be informed by and be consistent with the region's most recent population assessment and area plan. The Welsh Government proposes

- that the first commissioning strategy is produced by April 2020 and reviewed annually.
- 3.19. We welcome views on the appropriateness of this requirement for regional commissioning strategies.

Housing representation on regional partnership boards and wider membership

- 3.20. Further to the requirements for membership of regional partnership boards in the 2015 Regulations, paragraph 31 of the Part 9 Statutory Guidance (Partnership Arrangements says: "The Regional Partnership Boards may co-opt other persons to be members of the board as appropriate. The regulations refer to the minimum membership of the boards but the number of representatives and range of people involved is a matter for local determination, other members that could be considered for example include housing leads, fire service, police etc."
- 3.21. The Parliamentary Review of Health and Social Care urges the Welsh Government to "maximise the benefits of closer planning and collaboration by taking further steps through guidance, legislation and financial incentives to ensure that housing considerations are fully aligned with health and care planning at local level". The Welsh Government's long term plan, *A Healthier Wales*, in response to this, states housing will have a more prominent role in the partnership agenda.
- 3.22. Regional partnership boards are responsible for the Integrated Care Fund (ICF), including capital allocations. This capital investment has recently been significantly increased with new guidance providing an emphasis for regional partnership boards to support strategically important accommodation led solutions to health and social care.
- 3.23. There is varying housing representation on regional partnership boards as well on board sub-structures. However, there is currently no formal requirement for a housing representative.
- 3.24. The proposed Amendment Regulations would require the membership of each regional partnership board to include at least one housing representative from a local authority and least two representatives from registered social landlords. This would ensure that each regional board includes a representative from a local authority with a local government perspective of strategic capital investment in housing. It will also ensure a balanced perspective from two representatives from delivery agents with accommodation lead landlord and/or supply responsibility.
- 3.25. Welsh Government would welcome your views on this proposal. As with carer, citizen and third sector representatives, it would be a matter for the regional partnership board to put in place a process to identify the three new members from within regions. Additionally, boards could establish a group (some are already established) which consider housing, health and social care priorities collaboratively, including local authority housing and registered social landlord representation. This group could then nominate one local authority representative and two registered social landlord representatives as members of the board.

3.26. More generally, the proposed Amendment Regulations will slightly modify the wording in relation to membership requirements to ensure that terms such as "at least one representative…" are used consistently.

Regional partnership board annual reports

3.27. We have worked with the Institute for Public Care and regional colleagues to agree non-statutory guidance to support the requirement for regional partnership boards to produce annual reports. The Welsh Government has also agreed with regional colleagues that annual reports should be produced by 30 June each year to allow for end-of-year information to feature in the reports. The proposed Amendment Regulations clarify this requirement.

Changes to Statutory Guidance

- 4.1. As a result of the proposed Amendment Regulations, there will be a need to make a number of amendments to the Part 2 Code of Practice (General Functions) and the Part 9 Statutory Guidance (Partnership Arrangements). Most of these changes will be minor and self explanatory. The more fundamental changes will be to Chapter 4 of the Part 9 Guidance dealing with the Membership of Regional Partnership Boards and Chapter 9 of the Part 9 Guidance dealing with pooled funds.
- 4.2. The chapter dealing with pooled funds will also be updated to take account of a previous change to the requirement to establish a pooled fund whenever functions are exercised jointly as a result of an assessment carried out under section 14 or any plan prepared under section 14A of the Act. The Partnership Arrangements were amended in 2017 to require that if any of the partnership bodies decide to do things jointly in response to the assessment they must consider whether it is appropriate to establish and maintain a pooled fund.
- 4.3. Below are new draft versions of paragraph 30 of chapter 4 of the existing guidance and a new chapter 9 on pooled funds. We welcome your views:

Amendments to membership chapter

- "30. Membership of a Regional Partnership Boards must include the following:
- a) at least one elected member of a local authority which established the regional partnership board;
- b) at least one member of a Local Health Board which established the regional partnership board;
- c) the person appointed as director of social services under section 144 of the Act in respect of each local authority which established the regional partnership board, or his or her nominated representative;
- d) at least one representative of the Local Health Board which established the regional partnership board;
- e) at least two persons who represent the interests of third sector organisations in the area covered by the regional partnership board;
- f) at least one person who represents the interests of care providers in the area covered by the regional partnership board;
- g) at least one person to represent people with needs for care and support in the area covered by the regional partnership board;
- at least one person to represent carers in the area covered by the regional partnership board;
- at least one senior local authority officer who has responsibility for capital investment in housing for the area covered by the regional partnership board;
- *j)* at least two persons who represent registered social landlords for the area covered by the regional partnership board.

New version of pooled funds chapter

- 9. Pooled funds and the use of formal partnerships
- 58. The Partnership Arrangements Regulations require that:
 - Partnership bodies in each region must maintain and establish a single pooled fund in relation to care home accommodation for older people, into which all the partnership bodies make contributions;
 - Partnership bodies must establish and maintain pooled funds in relation to the exercise of family support functions;
 - Partnership bodies must produce a regional commissioning strategy in relation to care homes for older people;
 - The pooled fund for care homes for older people must be sufficient to meet the needs set out in the regional commissioning strategy;
 - If partnership bodies decide to do things jointly in response to the population assessment, they must consider if it is appropriate to establish and maintain a pooled fund.
- 59. The Welsh Government will expect to see an integrated approach to the development of early intervention and preventative Services as well as the priority areas for integration. There is a specific requirement for pooled funds in relation to the Integrated Family Support Services. Local authorities have been allocated funding as part of a local settlement to enable integrated family support services to be established and to cover the health and social care costs of the service. This will form the basis of a formal partnership with a pooled fund.
- 60. Local Health Boards and local authorities should also consider any funding from Welsh Government such as the Integrated Care Fund, to be considered as a form of pooled budget. Although this will not require a formal partnership agreement, the commitment of any expenditure under the Integrated Care Fund, or similar funding streams, should be the subject of a written agreement.
- 61. Local Health Boards and local authorities should also, in relation to care homes:
 - Undertake a population needs assessment and market analysis to include the needs of self funders:
 - Agree an appropriate integrated market position statement. This, along
 with the regional commissioning strategy, will specify the outcomes
 required of care homes, including the range of services required. There
 should also be an agreement on the methods of commissioning (for
 example, some services may require a block contract, step up, step down
 intermediate care services, respite care, etc);
 - Agree a common contract and specification;
 - Develop an integrated approach to agreeing fees with providers;
 - Develop an integrated approach to quality assurance;
 - Adopt a transparent use of resources. Budgets must be aligned with overall expenditure identified, together with the financial commitments of

all agencies to the commissioning of care homes. These arrangements will need to be subject to a written agreement.

- 62. The purpose is to ensure that Local Health Boards and local authorities work together to maximise their influence to shape the future development of services. This includes ensuring there is sufficient capacity and an appropriate range of good quality services to respond to the needs of people in their region. This should encompass both local authority placements and NHS funded placements (funded nursing care and continuing NHS healthcare). It should also encompass short term interim placements to facilitate transfers of care from hospital and choice of accommodation; intermediate care beds (step up / step down), long term placements, respite care and other services that partners wish to commission from care homes. In developing their integrated approach to commissioning, the partners will need to take account of the needs of people funding their own care.
- 63. It is expected that the same approach be adopted with long term domiciliary care, reablement services and other priority areas, which regional partnership boards determine to be appropriate.
- 64. Partners will retain statutory responsibility for their functions carried out under all pooled fund arrangements. This means that the partnership agreement should include the governance arrangements, including accountability, decision making and how the pooled budget arrangements will be managed. The general principles that should be considered include:
 - Shared responsibility and accountability
 - Fairness
 - Transparency
 - Consistency
 - Value for money
- 65. Comprehensive monitoring arrangements must be put in place to provide relevant assurance to partners that their shared aims and objectives are being delivered.
- 66. The pooled budget can be hosted and managed by a statutory partner, or it can be hosted by a statutory partner and managed on their behalf by another organisation contracted to do so. The host will provide the financial administrative systems on behalf of the partners, but will not incur any additional liabilities, except those that relate to the management of the budget. Also any external auditor will expect the same level of internal control to apply to the pooled funds as apply to other parts of the partner organisation. The auditor will also retain full right of access to the financial records and systems and expect a clear audit trail to be maintained for all financial transactions.
- 67. One of the advantages of the pooled fund will be that health and local authority staff identified in the agreement will be able to access and take decisions on the use of the resources in the pool, according to the process agreed locally between those staff and pooled fund manager. There will need to be an agreed process to authorise identified staff to do this. There are no

legal obstacles to health staff using pooled funds in the exercise of local authority functions, and vice versa. Also there is no limit to the number of partners.

- 68. Depending on the nature of the flexibilities to be used, the audit and accounting requirements will vary. It will be important to consider how to involve local external audit representatives in adding a value to the proposed agreement, including commenting on the audit and accounting implications of a local draft agreement.
- 69. It will be important for local authorities and Local Health Boards to identify which functions or services would improve the effectiveness of integration either by the direct payment by one partner to another, by contributing to a pooled fund or by the provision by one partner or the other, of staff, goods, services, accommodation or other resources for the purpose of, or in connection with partnership arrangements.

Potential impacts

5.1. The costs and benefits of the original 2015 Partnership Regulations were assessed in the Regulatory Impact Assessment within the Explanatory Memorandum to the Regulations, which is available here:

http://www.assembly.wales/laid%20documents/sub-ld10399-em/sub-ld10399-em-e.pdf

<u>Forthcoming changes to the Cwm Taf and Abertawe Bro Morgannwg health board boundary</u>

5.2. The costs associated with the overall implications of the change to the Cwm Taf Health Board boundary to incorporate Bridgend County Borough Council were considered as part of the outcome of the previous consultation on this issue. Funding to support the associated costs of this transition are in place and are not dealt with as part of this consultation.

Pooled Funds

5.3. Regional partners established pooled funds in relation to their care home accommodation functions from April 2018 as required by the 2015 Regulations. The proposed Amendment Regulations seek to provide additional clarity in relation to the need for those funds to be regional and their scope. This clarity will not result in any additional costs for partners.

Regional Commissioning Strategies

5.4. Statutory guidance already includes an expectation for local authorities and Local Health Boards to agree an appropriate integrated market position statement and commissioning strategy. The new regulatory requirement to produce a regional commissioning strategy and to ensure that a pooled fund is in place to meet the care home accommodation costs for older people to meet the needs of that strategy should not result in additional costs for partners. The intention of an integrated approach to commissioning is to improve well-being outcomes and deliver better value for money.

Housing representation on regional boards

5.5. The proposed Amendment Regulations seek to add three new housing representatives to each regional partnership board. The costs of these representatives' membership of a regional board, including the initial process of their appointment, is expected to be minimal and met from within the general administrative costs of regional partnership boards.

Regional partnership board annual reports

5.6. There is an existing requirement in the 2015 regulations for regional partnership boards to produce an annual report. The proposed Amendment Regulations seek to provide clarity on the timescales for publishing these reports and should result in no new costs for regional partners.

Social Services and Well-being (Wales) Act 2014 Amendments to Partnership Regulations under Part 9 of the Act

Consultation Response form

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| Question 7: [partnership be | | - | - | - | _ | _ | nal |
| Agree | | Tend to agree | | Tend to disagree | | Disagree | |

| Question 8 : Do you have any comments on the proposed amendments to the Part 9 guidance? |
|--|
| Comments |
| |
| Question 9 : We would like to know your views on the effects that the proposed amendments to Partnership Regulations would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favourably than English. |
| What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated? |
| Comments |
| |
| Question 10: Please also explain how you believe the proposed amendments to Partnership Regulations could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language, and no adverse effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favourably than the English language. Comments |
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| Question 11 : We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them: |
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| Responses to consultations are likely to be made public, on the internet or in a report. If you would prefer your response to remain anonymous, please tick here: |
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