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Framework for change

Guiding directions, principles and aims of the Health and Social Care Regional Integration Fund

Supporting Evidence Report 1 for the National Evaluation
of the Regional Integration Fund

Mae'r ddogfen yma hefyd ar gael yn Gymraeg.

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This is the Framework for Change Report which is one of four documents providing supporting evidence for the Conceptualisation Report of the National Evaluation of the Regional Integration Fund. Three others provide supporting evidence – the Rapid Realist Review of the literature (Tetlow et al., 2024); the Group Concept Mapping report on conceptualising the Regional Integration Fund (Wallace and Wallace, 2024): and the in-depth Scoping Interviews report (Bryer and Bebb, 2024).

National Evaluation of the Regional Integration Fund

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1. Introduction

- 1.1 The Welsh Government has commissioned a partnership between academics across universities and research organisations in Wales and beyond, to deliver the evaluation of the **Health and Social Care Regional Integration Fund (RIF)** (2022-2027), hereafter named as RIF. RIF is a £144.7 million Welsh Government initiative to support the ongoing implementation of Welsh public policy that aims to strengthen an integrated health and social care system, to better meet population needs, and develop six new models of integrated care.
- 1.2 These government public policy intentions are set out in key legislation and policy strategies, namely, the Social Services and Wellbeing (Wales) Act 2014 (SSWBA), Well-being of Future Generations (Wales) Act 2015 (WBFGA), and the policy document, A Healthier Wales (Welsh Government, 2018). Moving ‘faster’ in implementing these intentions is a core thread throughout the RIF. In the Foreword to the RIF Guidance, the three responsible Ministers express the aspiration to ‘...accelerate our progress to move further and faster the secure the best care, support and outcomes for the people of Wales (Welsh Government, 2022a, p.2).
- 1.3 This Framework for Change document is an overview of the values, ideas and aspirations for change set out in the RIF, against a background of the various contextual factors that may have a bearing on its implementation and effectiveness across Wales. This document is an output of the national evaluation of RIF that aims to understand the impact of different models of care, investigating the economic costs and benefits of those models and exploring how far they are delivering the right outcomes for people.
- 1.4 Based on a desk based analysis of publicly available policy and RIF guidance documents, the Framework for Change describes an appraisal of:
- What the RIF endeavours to achieve.
 - Its underlying assumptions and policy drivers in a historical context.
 - Processes and guiding principles by which the RIF seeks to bring about desired changes.
 - A depiction of the guiding directions, principles and aims of RIF, inputs and the intended outputs and outcomes.

- 1.5 We have called this description a 'Framework for Change'. It is setting the stage for our overarching evaluation methodology, which is Principles-Focused Evaluation (P-FE) (Patton, 2018). P-FE is an evaluation approach which places centrally the multi-shifting contexts which shape how an intervention is conceptualised, implemented, and realised in practice.

Overview

- 1.6 The document commences with a broad overview of the RIF, with attention to the aims and objectives for the Fund and the key mechanisms by which the initiatives under the Fund are to be delivered. This is followed by a short overview of some features of the current contextual landscape, which have both a bearing on the implementation of RIF and its evaluation. The final section is a description of the RIF's foundations, activities, and proposed outcomes.

2. Complexity in ideas, demands, pressures.

2.1 The environment in which local authorities, Health Boards, Regional Partnership Boards (RPBs), and third sector and private providers are working to support integrated health and social care is complex, pressured and fluid. Llewellyn et al (2023) have identified a set of contextual complexities that were implicated in the implementation of the SSWBA across Wales, which have relevance here. These are conceptual complexity, complexity of needs, policy complexity, and resource complexity (Llewellyn et al, 2023).

Conceptual complexity

2.2 The ideas and values informing the RIF are contested, for instance there are different ways to conceptualise and put into practice ideas about prevention, early intervention, integration, and sustainability. This is well noted in an extensive literature, and such definitional slipperiness does have implications for practice and evaluation (Llewellyn et al, 2022).

2.3 For instance, in respect to integration, the final evaluation report of the SSWBA notes that:

‘...With multi-agency working, the problem is exemplified by reports in the literature of there still being over 70 terms and phrases and 175 definitions and concepts of integrated care’ (Llewellyn et al, 2023, p.39).

Similarly, there are multiple ways that prevention can be described and enacted (Skills for Care, 2014).

Complexity of needs

2.4 The RIF is a response to an urgency to do things differently to meet growing and ‘complex needs’ for health and social care. This imperative is to the centre of the various policy documents referred to above and reinforced in speeches given by the Cabinet Secretary for Health, Social Care and Welsh Language (then Minister for Health and Social Services). For example, in speech to the Bevan Commission Conference on July 6, 2023, the Minister stated:

‘The system is under strain like never before and demand for services is greater than ever. We are in going to have to ask difficult questions about how we bring about this change and adapt to continuing pressures’ (Welsh Government, 2023).

Policy complexity

- 2.5 The RIF is a Welsh Government policy instrument to advance health and social care integration and preventative endeavours required in key Welsh public policy. These imperatives are a response to the nature of health and social care population current and projected demands, health and social care system pressures and the financial situation in Wales (see for example, Welsh Government 2011). There are currently a range of policies that are working to advance similar agendas.
- 2.6 Moreover, there are path dependencies in play. The actions of local authorities, Health Boards and third sector organisations and private providers, in working towards and within integrated models of health and social care, have a history prior to RIF. They will have their own organisational integrative and prevention orientated cultures and processes and are situated in geographic places with their distinctive communities, characteristics, cultures, and conditions.
- 2.7 As expanded upon below, there have been various iterations of integration and collaborative working and concerted efforts in this direction since and prior to the introduction of the SSWBA and *A Healthier Wales*.

Public Policy Architecture

- 2.8 The overarching policy directions which guide the RIF are set out in the legal duties of the SSWBA, and the WBFGA and the policy prescriptions within the document *A Healthier Wales*.

The Social Services and Well-being Wales Act 2014

- 2.9 The Social Services and Well-being Wales Act 2014 came into force in 2016. It is the key architecture for the delivery of social services in Wales. The opening of this legislation begins as follows:

‘The legislation is an; Act of the National Assembly for Wales to reform social services law; to make provision about improving the well-being outcomes for people who need care and support and carers who need support; to make provision about co-operation and partnership by public authorities with a view to improving the well-being of people; to make provision about complaints relating to social care and palliative care; and for connected purposes.’ (SSWBA, p.1)

- 2.10 The Act is informed and underpinned by five key principles: voice and control, prevention and early intervention, co-production, multi-agency working, and the

attainment of wellbeing. It has the aim to support the transformation and sustainability of social services in Wales and was the culmination of a lengthy policy development process scoping the issues, barriers and challenges and the policy vision. Especially relevant to RIF are the Act's specified duties for partnership working and integration (Part 4 and Part 9 SSWBA).

The Well-being of Future Generations (Wales) Act 2015

- 2.11 The Well-being of Future Generations (Wales) Act 2015 sets out the requirement for sustainability to be central in the planning and delivery of local authorities and Health Boards, and to do this in collaborative partnerships 'to prevent and tackle problems'. There is an explicit agenda for well-being outcomes (there are seven integrated well-being goals) and a collaborative approach.

A Healthier Wales

- 2.12 A Healthier Wales is a detailed vision of a 'whole system approach to health and social care', with prevention and health and wellbeing at its centre (2021, p.8). A Healthier Wales has four themes:
- "Improved population health and wellbeing;
 - better quality and more accessible health and social care services;
 - higher value health and social care; and
 - a motivated and sustainable health and social care workforce" (2021, p.16).
- 2.13 Service and programme design principles within A Healthier Wales have been incorporated into the RIF Guidance, namely principles of 'prevention/early intervention', 'safety', 'independence', 'voice', 'personalised', 'seamless', 'higher value', 'evidence' and 'scalable' (2022, p.6-7).
- 2.14 There are several initiatives implemented under A Healthier Wales that also prioritise support for integrated planning and service delivery across health and care systems. For example, Strategic Programme for Primary Care and Clusters across Wales, which are seeking to 'enhance integration' of primary care closer to home, and establish tighter links between needs based planning and collaborative delivery, amongst other aims and objectives (NHS Wales, 2022).

Change

- 2.15 This Welsh policy landscape is changing, as new initiatives are announced. For example, Welsh Government has recently introduced a 'Further Faster' initiative to

accelerate implementation of integrated health and social care (2023). Called 'Building Capacity through Community Care – Further Faster', this programme has a focus on supporting older people to be at home rather than 'acute hospital and care home settings' (2023, p.2). In an oral statement in the Senedd the Cabinet Secretary for Health, Social Care and Welsh Language (then Minister for Health and Social Services) states the initiative is:

'...to avert a situation that we saw last winter with too many frail people being stranded in our hospitals. This is also part of a continuing journey towards rebalancing health support out of hospitals and closer to people's homes.'
(2023)

- 2.16 The written statement of strategic intention for the above initiative outlines the needs and the aim for capacity building of place-based care, based on four values: 'people focused', 'partnerships', 'synergy' and 'system learning and openness to change' (2023, p.2). Again, the initiative is marked by the language of quickened pace and acceleration in the development of integrated community solutions.

Resource complexity

- 2.17 The health and care systems in Wales, as is the case across the UK, are facing acute resource pressures. Workforce retention is a major issue in Wales. Vacancies for social care staff are high (Social Care Wales, 2022) and there are major and publicly reported financial pressures impacting on the delivery and timely access and availability of health and social care.

3. Overview of Health and Social Care Regional Integration Fund

Background-integration in policy and practice

- 3.1 Strategies, structures, and funds to support integrated health and integrated health and social care across Wales are not new (Welsh Government, 2004; Lewis, 2015; Best and Myer, 2017). More broadly, a Welsh public sector agenda for collaboration and co-ordination can be traced to the implementation of the 2004 strategic framework of Making the Connections: Delivering Better Services in Wales. Formal partnerships between health and social care organisations have a long history as noted by the Office of the Auditor General for Wales (2019, p.16).
- 3.2 Innovations to develop community-based integration initiatives have been part of this agenda. For example, through research, Best and Myer (2015) explore the implementation of a fund to support the (then) Welsh Assembly Government's 'Rural Health Plan in Wales – Improving Integrated Service Delivery across Wales', with its emphasis on 'speed' in the implementation of innovation, community developments and health and social care integration.
- 3.3 The enactment of the SSWBA and the WBFGA ushered in a policy continuation on integration in health and social care policy. Wallace et al (2022) summarise the integration and multi-agency policy focus in the SSWBA as follows:
- 'The Act itself uses words such as 'cooperation', 'integration of care', 'partnership', 'joint arrangements' to describe its expectation as to how we should work together. Regulations such as 'The Care and Support Partnership Arrangements for Population Assessments (Wales) Regulations 2015' and 'The Partnership Arrangements (Wales) Regulations 2015' specify terms such as 'partnership' which include specified functions and arrangements such as partnership boards, sharing information, pooled budgets and referral procedures.'
- (2022, p.16)
- 3.4 These policy requirements have been accompanied by dedicated funds to support the uptake of the preventative and integrated health and social care agenda. Government schemes preceding RIF included the Welsh Government's Integrated Care Fund (ICF), which itself was preceded by the Intermediate Care Fund and Transformation Fund (TF). Each fund had a focus on supporting collaborative processes to accelerate models for integrated and preventative orientated health

and social care. The imperative for quickened pace in acting on integration and prevention was conveyed in the use of adjectives such as ‘faster’ and ‘accelerate’.

3.5 The Transformation Fund , a three-year funding initiative (2018-2021) to progress A Healthier Wales had the aim to ‘...improve health and social care services by scaling up models that are successful and replacing less successful or outdated ones’ (Welsh Government, 2020, p.1). Funds of £100m were allocated through the mechanisms of the RPBs. The RPBs were established under the Statutory Guidance on Partnership Arrangements in relation to part 9 of the SSWBA. As noted in this Statutory Guidance document:

‘Local authorities and Local Health Boards are required to establish Regional Partnership Boards to manage and develop services to secure strategic planning and partnership working between local authorities and Local Health Boards and to ensure effective services, care and support are in place to best meet the needs of their respective populations’. (2020, p.5)

3.6 In the TF Final Evaluation Report, Bebb, Bryer and Burrowes (2021) highlight the use of the funds in positive ways to progress the conceptual and practical development and reorientation to community-based schemes, but also the detrimental impact of the COVID-19 pandemic on this integration work. Lessons on governance, collaboration and models for integrated care were gained. Challenges in replicating local or regional integrated models to the national context were also noted, as was the length of time transformation needs.

3.7 The ICF, active from 2014-2022, also allocated funds to the seven RPBs across Wales, with an explicit remit to support prevention and integration in attaining health and well-being outcomes (Auditor General for Wales, 2019; Bryer et al, 2022). As Bryer et al note, this fund was purposefully to ‘...make better use of resources through collaborative working and using alternative delivery models’ (2022, p.15). Independent evaluation findings point to the value of the Fund in supporting preventative initiatives and enabling intersectoral integration and working collaboratively (ibid., p.91). A ‘positive impact for people and communities’ through better access to services and for health and well-being was reported (ibid., p.91-92).

3.8 Moreover, the evaluation collected stakeholder data which indicated signs of system refocus to community care, although the attribution of this to the fund is tempered given the wider contextual factors that shape health and care services, and other

partners. Again, lessons are learnt about success factors and barriers, the latter which includes the impact of the COVID-19 pandemic, short term funding barriers and the limitations in transferring good practice (2022, p.94). The issue of gauging the right balance between prescriptive guidance and room for regional discretion is a theme which emerged in the evaluation analysis (2022, p.98).

- 3.9 Both the Auditor General for Wales report on the ICF (2019, p.14) and the independent evaluation report (Bryer et al, 2022, p.99) include recommendations about a need for agreed outcome measures for government funds of this nature, with the Auditor General Office suggesting they are nested within national outcome frameworks.
- 3.10 Against this backdrop, in 2022, the Welsh Government announced RIF. RIF is a five-year Welsh Government funding programme with a set of values, aims and objectives relating to an ongoing, accelerated delivery of integrated, preventative health and social care across Wales. Intrinsic to the stated ambition of RIF is the development, consolidation and mainstreaming of six national integrated ‘models of care’ and the adoption of principles of the SSWBA.
- 3.11 The RIF is underpinned by principles about what can facilitate and enable the development, mainstreaming and sustainability of integrated health and social care. As stated in the RIF Welsh Government Guidance Document, there are six distinctive ‘features and values of the Fund’, which are listed below.
- ‘A strong focus on prevention and early intervention
 - Developing and embedding national models of integrated care
 - Actively sharing learning across Wales through Communities of Practice
 - Sustainable long-term resourcing to embed and mainstream new models of care
 - Creation of long-term pooled fund arrangements
 - Consistent investment in regional planning and partnership infrastructure’.
- (Welsh Government, 2022a, p.4)
- 3.12 Key guidance principles in the above list are prevention and early intervention, multi-agency working, integrated care and sustainability.
- 3.13 There are five ‘enabling tools’ in the RIF– ‘integrated planning and commissioning’, ‘technology and digital solutions’, ‘promoting the social value sector’, ‘integrated

community hubs' and 'workforce development and integration' (Welsh Government, 2022a, p.20).

- 3.14 In addition, there are five priority populations for the RIF, consideration of which should inform the development of the six national models of care: i.e., 'older people including people with dementia', 'children and young people with complex needs', 'people with learning disabilities, neurodiverse and neurodevelopmental conditions', 'unpaid carers', and 'people with emotional and mental health wellbeing needs' (Welsh Government, 2022a, p.23-26). The RIF guidance sets out an overview description for each of these population groups and does so in reference to key sections of the SSWBA and population specific policy or strategy documents. There is a specification funding requirement in respect of allocations to support for unpaid carers (2022a, p.26), and 'children at the edge of care/care experienced children' (2022a, p.25).
- 3.15 There are requirements for the work funded under RIF to interface with other Government strategies and programmes relevant to the population groups named above, i.e., Learning Disability Improving Lives programme (2018-21), Strategy for Unpaid Carers, NYTH/NEST framework.
- 3.16 The models of care are set out below (Welsh Government, 2022a: p.9):
- Community based care – prevention and community coordination
 - Community based care – complex care closer to home
 - Promoting good emotional health and well-being
 - Supporting families to stay together safely, and therapeutic support for care experienced children
 - Home from hospital services
 - Accommodation based solutions
- 3.17 Welsh Government's RIF guidance provides a succinct description of its focus for each model of care, locating this in a relevant public policy context. Examples are given of the sorts of activities or services the RIF might support in respect of the model. For example, in regard to 'Community based care – prevention and community coordination', the Fund's focus is on building '...resilience of people and communities, moderating demand for acute health and social care needs' (2022a, p.17) and supporting capacity to meet 'complex needs'. Investment in prevention and independence in community settings is a key consideration of this model of

care. These four dimensions of the Fund's schema are shown in the diagram below (Figure 3.1), namely enabling tools, six models of care, guidance principles and five priority population groups.

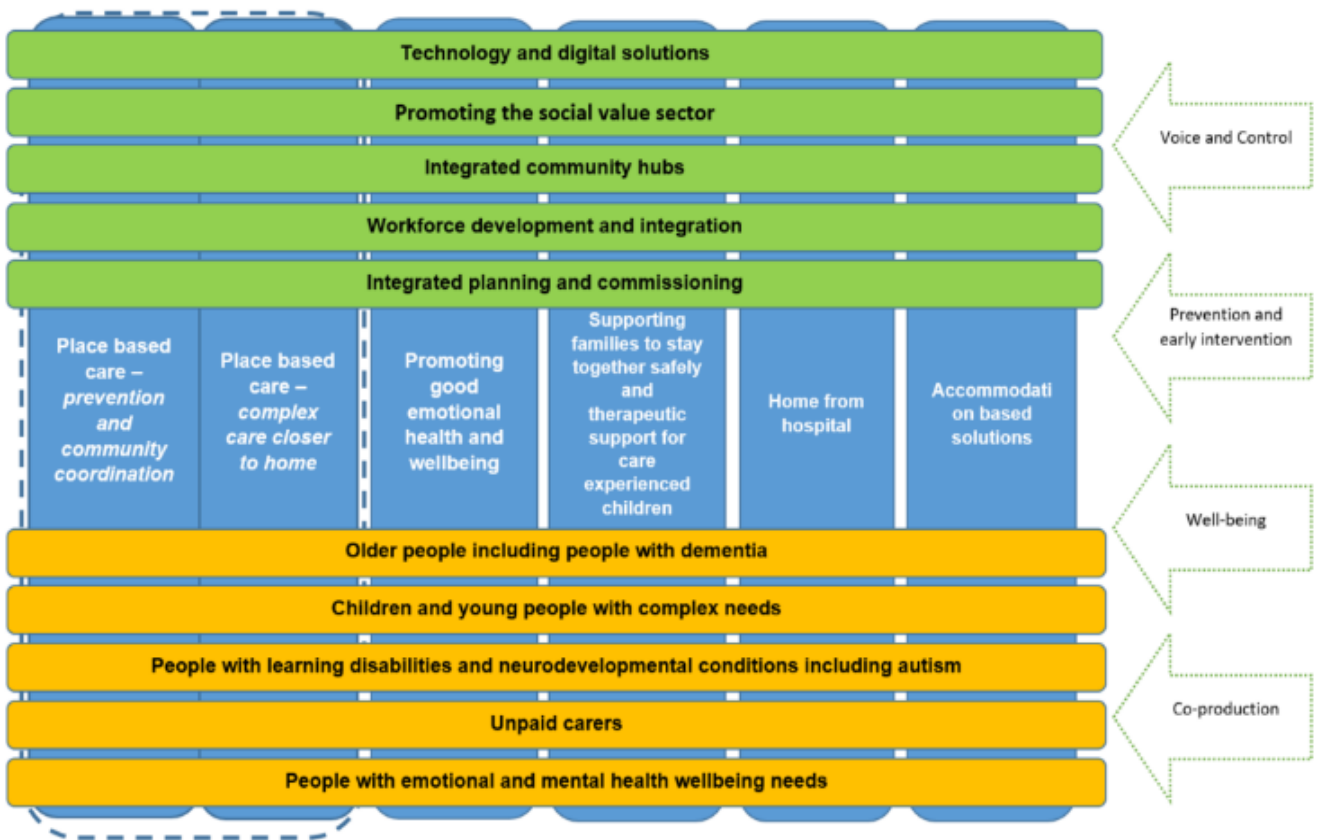


Figure 3.1: Structure of the RIF

(Source: Welsh Government, 2022a, p.15)

Delivery of RIF

3.18 As written in the Guidance, key conduits for the delivery of the ambitions of the RIF are established regional health and social care collaborative infrastructure, namely the RPBs, and other regional bodies and networks for collaboration and innovation. An example of the latter is Regional Innovation Coordination Hubs that were established to support the implementation of A Healthier Wales. Other regional mechanisms include Public Service Boards (PSBs) required under the WBFGA and comprised of the local authority, NHS, Fire and Rescue Authority and Natural Resources for Wales and other local participants (Verity et al, 2018). Clusters, Pan Cluster Planning Groups (PCPGs), and Cluster Delivery Vehicles are stated mechanisms for collaborative planning, action and delivery through the Strategic

Programme for Primary Care Accelerated Cluster Development Programme (Welsh NHS, 2022).

- 3.19 The work funded under RIF is also seeking to support knowledge exchange across Wales about the insights and developments related to national models of care. A process for this knowledge development, exchange and diffusion are Communities of Practice who are tasked with deepening and sharing insights and learning about the 'blueprints' for this work and the development of national specifications.
- 3.20 Wenger, McDermott, and Snyder (2002, p.4) define a community of practice as "...groups of people who share a concern, a set of problems, or a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis". Under the auspice of RIF, six Communities of Practice have been developed in areas of 'Community-Based Care', 'Technology-Enabled Care', 'Emotional and Mental Health', 'Hospital to Home', 'Accommodation-Based Care and Support', 'Supporting Families and Care Experienced Children' (Welsh Government, 2022b: p.1).
- 3.21 Open to a wide membership they are presented as a meeting space to confer about 'learning' and 'good practice' and develop '...resources to support the delivery and implementation of national models of care and to share learning more widely with colleagues across Wales (Welsh Government, 2022b, p.1-2). Each Community of Practice has its distinct membership and meets frequently.
- 3.22 The interconnectedness between a national model of care, regional models and local developments is depicted in Figure 3.2 below from the RIF Guidance document (Welsh Government, 2022a).

Sustainability

The sustainability of the delivery of national models of care is integral to the aims of the RIF. An explicit intention is that mainstream resources replace the use of RIF over time, and that the financing of the models make use of 'long term pooled funding arrangements' (Welsh Government, 2022a, p.4). As stated in the RIF Guidance, this will require a tapering of funds from Welsh Government to be replaced by investments from Local Health Boards and local authorities.

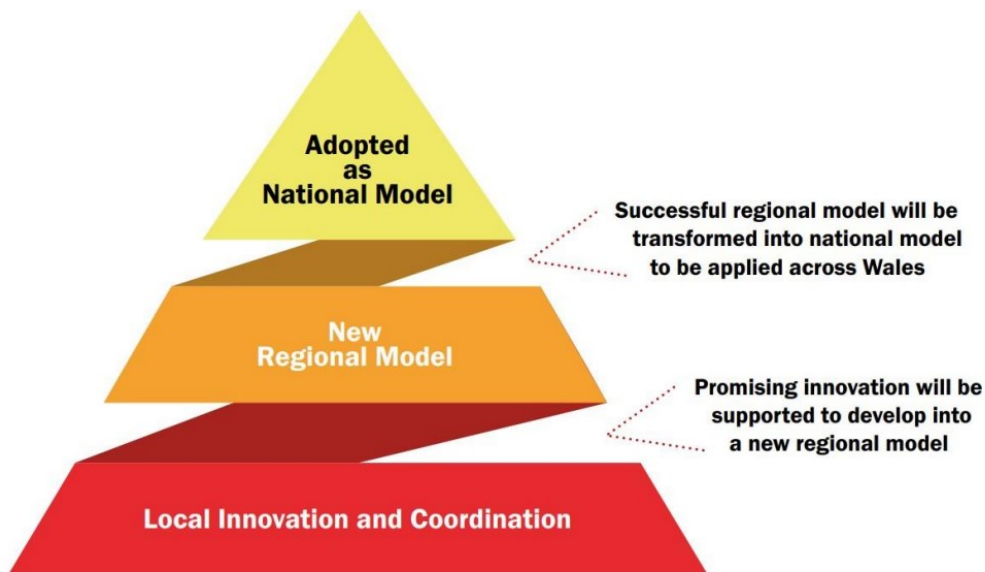


Figure 3.2: Interconnectedness of the RIF model

(Source: Welsh Government, 2022a, p.14)

- 3.23 The Fund has a four-part funding structure, with conditions and expectations associated with accessing funds from each component. These are- a) Recurrent Regional Infrastructure Fund, National Ringfenced Fund, Acceleration Change Fund, and the National Delivery Model Embedding Fund (2022a, p.27). Local Health Boards are the fund holders, with the RPBs the bodies responsible for the planning, decision making and accountability for the use of the funds (2022a, p.27).
- 3.24 Moreover, RIF Guidance is clear on the extent of partner match funding to be allocated each year of the life of the funding scheme and sets out specific requirements for this (Welsh Government, 2022a, p.27, p.31). The RIF has a stated commitment to the engagement of the Social Value sector and specifies this to be at a 'minimum of 20%' of RIF allocations in the regions (Welsh Government, 2022a, p.22). Each RPB is required to produce a Strategic Plan, Revenue Investment Proposals and Communication Plans (Welsh Government, 2022a, p.35, p.39). Results-Based Accountability methods are to be used in the review of the work done using the RIF funds.

RIF programme outcomes

- 3.25 The RIF guidance document sets out an Outcomes Framework for the fund. This framework delineates between three outcome levels, as noted in the Guidance document: 'overarching outcomes for the six models of care', 'wider systems

outcomes and principles’, and ‘person centred outcomes’ (Welsh Government, 2022a, p.41). These outcomes are in relation to health and wellbeing, access, quality and use of services and care and support, workforce health and wellbeing, and the adoption of certain principles in the development and delivery for the models of care.

Summary

3.26 In summary, RIF is simultaneously a guiding blueprint, integrative planning and resourcing mechanism, and learning vehicle to enable the development of sustainable national models for effective integrated health and social care. These integrated models, in turn, are seeking to support individual health and wellbeing outcomes, systems outcomes, and workforce outcomes. The RIF sits within a dynamic, pressured and fluid context.

As stated in the RIF Revenue Guidance document:

‘...RIF is a key lever to drive change and transformation across the health and social care system. Our aim is that by the end of the five year programme we will have established and mainstreamed at least six new national models of integrated care so that citizens of Wales, wherever they live, can be assured of an effective and seamless service experience’ (Welsh Government, 2022a, p.8).

4. Framework for Change

Based on the preceding policy review and synthesis, the Framework for Change describes the guiding directions, principles and aims of the Health and Social Care Regional Integration Fund. It sets out; 1) the foundations of the RIF fund (i.e., historical factors, public policy principles/ mechanisms and integration infrastructure); 2) RIF activities (i.e., what will be done); and 3) RIF intended change outcomes. This is set against a background of the various contextual factors that may have a bearing on its implementation and effectiveness across Wales. The Framework for Change will inform the subsequent RIF evaluation work.

Foundations for the Health and Social Care Regional Integration Fund (RIF)

- A history of public policy emphasis on collaboration and co-ordination in Wales.
- Principles of the **SSWBA** (2014)
 - Voice and control
 - Multi-agency working
 - Prevention
 - Co-production
 - Wellbeing
- Strategic direction, mission and design principles in *A Healthier Wales* (i.e., ‘prevention/early intervention’, ‘safety’, ‘independence’, ‘voice’, ‘personalised’, ‘seamless’, ‘higher value’, ‘evidence’, ‘scalable’) (Welsh Government, 2018, p.6-7).
- Welsh language framework and Race Equality Plan (Welsh Government, 2021a, p.13).
- Integration infrastructure and capacities enabled by Regional Partnership Boards (RPBs), Public Service Boards (PSBs) required under the WCFG Act, and other collaboration mechanisms (Welsh Government, 2022a, p.6).
- Population needs planning as required by the SSWBA and the WCFG Act.
- Work and insights in developing models of care enabled through the former Welsh Government Integrated Care Fund (ICF) and Transformation Fund (TF).
- Programme for Government (2021-2026) and the 10 wellbeing objectives (Welsh Government, 2021b, p.7-8).
- Work undertaken through three National Health Programmes (Planned Care, Urgent and Emergency Care and Primary Care), and the Strategic Programme for Primary Care Accelerated Cluster Development Programme (Welsh NHS, 2022).
- Perspective that transformation is a long-term endeavour (Welsh Government, 2022a, p. 11).
- Work of the Research and Innovation Hubs, which are there to co-ordinate functions at a regional level.
- The Digital Priorities Investment Fund

Activities

Integrated local and regional planning, development and delivery of projects aligned with six models of care:

- Community based care – prevention and community coordination
- Community based care – complex care closer to home
- Promoting good emotional health and well-being
- Supporting families to stay together safely, and therapeutic support for care experienced children
- Home from hospital services
- Accommodation based solutions. (Welsh Government, 2022a, p.9)

Knowledge exchange and national model development through six Communities of Practice.

‘Community-Based Care’,

‘Technology-Enabled Care’,

‘Emotional and Mental Health’,

‘Hospital to Home’,

‘Accommodation-Based Care and Support’,

‘Supporting Families and Care Experienced Children’ (Welsh Government, 2022a, p.1).²

‘Promoting the social value sector’ and ‘integrated community hubs’

Sustainable long-term resourcing to embed and mainstream new models of care.

Creation of long-term pooled fund arrangements.

‘Investment in regional planning and partnership infrastructure’. (Welsh Government, 2022a, p.4)

‘Workforce development and integration’

² Health and Social Care Regional Integration Fund Communities of Practice Newsletter August 2022

Outcomes

Overview

RIF has a detailed outcomes framework which specifies interconnected outcomes and principles at the levels of 'individual and population health and wellbeing', 'wider systems outcomes and principles', and outcomes for the attainment and sustainability of each of the named six national models of care (Welsh Government, 2022a, p.41).

The general RIF outcomes framework is reproduced below. Details on the specified outcomes for each of the six national models of care (two outcomes per model) are located on pages 41-43 of the RIF Guidance Document.

RIF OUTCOMES FRAMEWORK

Context

The RIF outcomes and principles sit in the context of the National Outcomes Framework and the outcome that '**All people in Wales enjoy good health and well-being**'.

Overarching outcome for the Models of Care

- 'Models of Care meet the needs of the population groups and relate to the key enablers'



Wider system outcomes

- 'People are healthier and happier
- Health and care service are better and easier to access
- Health and care services are innovative and uses the latest technology
- Staff in health and care are looked after and motivated



Person centred outcomes

- 'People feel more able to make their own decisions about what is important to and for them
- People have more voice in and control over their care and support needs
- People have greater awareness of what care and support services are available and local to them
- People have improved access to care and support at home or close to home.

(Reproduced from RIF Guidance, Welsh Government, 2022a, p.41)

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