Social Services and Well-being (Wales) Act 2014
Part 9 Statutory Guidance (Partnership Arrangements)
Statutory Guidance on Partnership Arrangements.

This statutory guidance is issued under section 169 of the Act.

Chapter / Contents

1. Introduction 3
2. Legislative Background 4
3. Partnership arrangements and regional partnership boards 5
4. Membership of Regional Partnership Boards 8
5. Reports 9
6. Information sharing 10
7. Delegation of functions 11
8. Integrated Family Support Services 12
9. Pooled funds and use of formal partnerships 15
10. Governance – Written Agreements 18

Annex 1 – Partnership Arrangements (Wales) Regulations 2015 19
1. Introduction

1. Part 9 of the Social Services and Well-being (Wales) Act 2014 (“the Act”) requires local authorities to make arrangements to promote co-operation with their relevant partners and others, in relation to adults with needs for care and support, carers and children. It places a duty on relevant partners to co-operate with, and provide information to, the local authorities for the purpose of their social services functions. Part 9 of the Act also provides for partnership arrangements between local authorities and Local Health Boards for the discharge of their functions. It also provides Welsh Ministers with regulation making powers in relation to formal partnership arrangements, resources for partnership arrangements (including pooled funds) and partnership boards. Part 9 is intended to be read in the context of the Act as a whole.

2. The purpose of Part 9 is to improve outcomes and well-being of people, as well as improving the efficiency and effectiveness of service delivery. The key aims of co-operation, partnership and integration can therefore be described as follows:

- To improve care and support, ensuring people have more say and control.
- To improve outcomes and health and wellbeing.
- Provide co-ordinated, person centred care and support.
- Make more effective use of resources, skills and expertise.

3. Individuals, their families and carers may require care or support from more than one professional or organisation. Where this is the case, the care and support should be effectively co-ordinated and delivered to meet their specific needs. In relation to people needing care and support, this should mean:

4. “My care is planned by me with people working together to understand me, my family, and carer(s) giving me control, and bringing together services to achieve the outcomes important to me.”

5. This statutory guidance is issued under section 169 of the Act. Local authorities and Local Health Boards must have regard to this guidance in relation to partnership arrangements which are required under section 166 of the Act. The guidance also applies to partnership boards which are required to be established in respect of those partnership arrangements and to any teams which are required to be established to carry out the partnership arrangements. The statutory guidance also encompasses section 167 (resources for partnership arrangements) and section 168 (partnership boards).
2. Legislative Background

6. Section 33 of the National Health Service (Wales) Act 2006 (“the 2006 Act”) enables local authorities and Local Health Boards to develop formal partnerships and to delegate functions from one body to the other. This legislation was originally introduced with the Health Act 1999 and the measures were consolidated into the 2006 Act. This legislation enables a local authority to delegate certain specified functions to the Local Health Board, or for the Local Health Board to delegate certain specified functions to the local authority. The legislation also provides for the development of integrated services, integrated commissioning and arrangements for pooled funds.

7. The 2006 Act also consolidated measures from other legislation. Previous grant arrangements made under 28A and 28BB of the National Health Services Act 1977 were consolidated into the 2006 Act as sections 194 and 34 respectively.

8. The Children Act 2004 (“the 2004 Act”) enabled the development of pooled funds but these are quite different to the pooled fund arrangements in the 2006 Act, as although they enable a wider range of ‘relevant partners’ to contribute to the pooled fund, this legislation does not allow for the delegation of functions between partners. The 2004 Act does not make provision for one partner to assume the functions of another, nor to deliver the services of another as opposed to their own. Instead, it provides an opportunity to agree joint objectives and contribute towards the cost of meeting these through whichever partner generally has responsibility for ensuring service delivery. Section 162 of the Social Services and Well-being (Wales) Act 2014 extends this provision for the funding of services for adults and carers and like the 2004 Act, it can involve contributions from a wider range of partners, however it does not provide for the delegation of functions between partners.

9. Relevant regulations for formal partnerships involving the delegation of functions include The National Health Service Bodies and Local authorities Partnership Arrangements (Wales) Regulations 2000. These regulations are treated as having been made under the 2006 Act.

10. A number of advice notes were provided to support the development of formal partnerships and pooled funds under the 2006 Act and the 2004 Act. The content of these advice notes remain relevant but will be updated to reflect and support the implementation of the Act, as necessary.
3. Partnership arrangements and regional partnership boards

11. Partnership arrangements are required to be made by the partnership bodies (local authorities and LHBs) as set out in the Partnership Arrangements (Wales) Regulations 2015 (“the Partnership Arrangements Regulations”). The Partnership Arrangements Regulations are included at Annex 1.

12. The functions to be carried out in accordance with the partnership arrangements are the functions described in Schedule 1. The Partnership Arrangements Regulations are not being used to extend the functions of either a local authority, or a Local Health Board, which can be delegated, beyond those allowed by the regulations under the 2000 Act.

13. 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 population.

14. The Partnership Arrangements Regulations require partnership arrangements to be made by the partnership bodies in each Local Health Board area, under the direction of a Regional Partnership Board.

15. The following Regional Partnership Boards are required to be established in relation to the partnership arrangements made by the partnership bodies specified in the regulations:

- Gwent Regional Partnership Board - Aneurin Bevan University Health Board and Monmouthshire County Council, Newport City Council, Caerphilly County Borough Council, Torfaen County Borough Council and Blaenau Gwent County Borough Council.
- North Wales Regional Partnership Board - Betsi Cadwaladr University Health Board and Flintshire County Council, Wrexham County Borough Council, Isle of Anglesey County Council, Gwynedd County Council, Denbighshire County Council and Conwy County Borough Council.
- Cardiff and Vale Regional Partnership Board - Cardiff and Vale University Health Board and Cardiff City and County Council and the Vale of Glamorgan Council.
- Western Bay Regional Partnership Board - Abertawe Bro Morgannwg University Health Board and Swansea City and County Council, Neath Port Talbot County Borough Council and Bridgend County Borough Council.
- Cwm Taf Regional Partnership Board - Cwm Taf University Health Board and Rhondda Cynon Taf County Borough Council and Merthyr Tydfil County Borough Council.
- West Wales Regional Partnership Board - Hywel Dda University Health Board and Pembrokeshire County Council, Carmarthenshire County Council and Ceredigion County Council.
- Powys Regional Partnership Board - Powys Teaching Health Board and Powys County Council.
The objectives of the Regional Partnership Boards are to ensure the partnership bodies work effectively together to:

- Respond to the population assessment carried out in accordance with section 14 of the Act, and
- Implement the plans for each of the local authority areas covered by the board which local authorities and Local Health Boards are each required to prepare and publish under section 14A of the Act.
- Ensure the partnership bodies provide sufficient resources for the partnership arrangements, in accordance with their powers under section 167 of the Act.
- Promote the establishment of pooled funds where appropriate.

Regional Partnership Boards will need to ensure that all partners work effectively together to improve outcomes for people in their region. They will need to ensure that services and resources are used in the most effective and efficient way to enable this.

These partnership arrangements are consistent with those that will be used for the purposes of undertaking the population assessment under section 14 of the Act. Section 14 requires local authorities and the respective Local Health Board to jointly undertake an assessment of the needs of the local population for care and support, support for carers and preventative services. It also requires an assessment of the range and level of services which are required to meet these needs. Regional Partnership Boards should therefore consider this population assessment and determine where the integrated provision of services, care and support will be most beneficial to people within their region. This should be informed by the views of service users.

Regional Partnership Boards will also need to prioritise the integration of services in relation to:

- Older people with complex needs and long term conditions, including dementia.
- People with learning disabilities.
- Carers, including young carers.
- Children with complex needs due to disability or illness.

There should be an integrated approach to the development of services, care and support, which focus on opportunities for prevention and early intervention. In relation to services for children and young people, the aim is to provide support to families to prevent the need for children to become looked after, or enter custody. In the first instance, Regional Partnership Boards need to consolidate the development of Integrated Family Support Services and also to develop an integrated approach to delivering services for children with complex needs, due to disability or illness and for children and young people with mental health problems. This includes transition arrangements from children to adult services.

Local Health Boards and local authorities already have partnership arrangements in place in relation to mental health services and services for people with substance misuse issues. There are also national partnership boards in place for both of these services. The Regional Partnership Boards should therefore consider what additional or alternative arrangements may be required to integrate services to improve outcomes for individuals and/or make more effective use of resources. This should also include consideration of what arrangements would be more effective at a national, rather than regional or local level.
22. The Regional Partnership Boards will, over time, be expected to extend the provision of integrated services beyond the priority areas identified in this guidance, as well as ensuring they respond effectively to the joint population assessment.

23. The Regional Partnership Boards will determine the most appropriate structures for ensuring the provision of these integrated services. This could include the establishment of management or operational groups, as well as integrated teams for specific service areas. Written agreements will need to be developed for any partnership arrangements which involve a delegation of functions.

24. Regional Partnership Boards have a key role to play in relation to bringing together partners to determine where the integrated provision of services, care and support will be most beneficial to people within their region. Regional Partnership Boards will need to ensure that all partners work effectively together to improve outcomes for people. They will need to ensure that services and resources are used in the most effective and efficient way to achieve this. Regional Partnership Boards will also play a vital role in the oversight and governance of partnership arrangements. With the move towards pooled budgets and resources, it is essential that effective governance and accountability arrangements are in place. The terms of reference of the Regional Partnership Board should make clear whether members of the board have delegated decision-making from their respective bodies, or organisations, where appropriate.

25. The Regional Partnership Boards will need to develop and coordinate formal or informal partnership arrangements. Some areas will already have section 33 (the NHS (Wales) Act 2006) partnerships in place and may decide to develop further formal partnerships outside of direction from Welsh Government. In addition, there are numerous informal partnership arrangements (informal arrangements outside of a section 33 agreement involving delegated functions) already in place.

26. The Code of Practice in relation to Advocacy (Part 10 of the Act) sets out the requirements for access to advocacy services and support. In responding to the population assessment, Regional Partnership Boards will need to ensure they are able to respond to the advocacy requirements for all individuals. The Code of Practice on Advocacy provides further advice on the key factors that impact upon individuals and their needs for specific support.

27. The Code of Practice on Part 2 of the Act sets out the requirements in relation to the provision of information, advice and assistance. Regional Partnership Boards will need to ensure that information, advice and assistance is offered in a manner which is accessible and suits the needs of the people living in their region. Local authorities should lead on agreeing, with regional partners, what service components should be developed on a national, regional and local basis.

28. Where local authorities and Local Health Boards have a mutual interest in commissioning services, they should work together to consider whether alternative not for profit business models will best meet the well-being needs of their local population. The Code of Practice on Part 2 of the Act includes further advice on promoting social enterprises, co-operatives, user-led services and the third sector.
4. Membership of Regional Partnership Boards

29. The Partnership Arrangements Regulations require Regional Partnership Boards to prepare a report on the extent to which the board’s objectives have been achieved. This report must be submitted to Welsh Ministers. The first report must be prepared and submitted by 1 April 2017. Subsequent reports must be prepared and submitted annually.

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) a representative of the Local Health Board which established the regional partnership board;
(e) 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) one person to represent people with needs for care and support in the area covered by the regional partnership board;
(h) one person to represent carers in the area covered by the regional partnership board.

31. 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.

32. There should be appropriate arrangements at a strategic level to engage with other boards and organisations as needed. The Regional Partnership Boards may wish to invite organisations or individuals to attend Regional Partnership Board meetings or sub groups as appropriate. There will also be a need to foster engagement through existing networks or forums, or through the development of new networks or forums. People who use services must be actively involved and engaged in the work of the Regional Partnership Boards. There will be a member of the board to represent people with needs for care and support. It is recognised that this individual cannot be expected to represent all people in need of care and support. Therefore, they will need to work with both the Regional Partnership Board and the citizen’s panel (or other relevant groups) to inform the development and delivery of integrated services. Similarly, the representatives for the third sector cannot be expected to represent every organisation within their sector but they will need to ensure the sector is effectively engaged and able to influence and be involved in the delivery of integrated services, as appropriate. There should be one representative of local third sector organisations and another representative of national third sector organisations.
5. Reports

33. The Partnership Arrangements Regulations require Regional Partnership Boards to prepare a report on the extent to which the board’s objectives have been achieved. This report must be submitted to Welsh Ministers. The first report must be prepared and submitted by 1 April 2017. Subsequent reports must be prepared and submitted annually.

34. The report must be published and should include:

- Members of the Regional Partnership Board.
- Information on how the board has met its objectives, including relevant supporting management information (e.g. financial and other progress reports).
- Details of the partnership arrangements in place to respond to the joint population assessment and priority areas, including any supporting groups or structures.
- How the board has engaged directly with service users, or groups representing service users (e.g. citizen panels).
- Information on how the partnership arrangements have contributed to improved outcomes and delivery of services to respond to the joint population assessment and priority areas (including information on how resources have been effectively utilised).
- Information on the statutory provision used - e.g. Section 33 agreement (NHS (Wales) Act 2006), or informal arrangement underpinned by a written agreement.

35. The report should be produced in English and Welsh and there will be a need to translate into other languages if a reasonable request for translation is made. Similarly, there will be a need to translate into braille, easy read form etc. if a reasonable request for such translation is received.
6. Information sharing

36. A partnership body must share information with any of the other Regional Partnership Boards for the purposes of carrying out the functions being carried out by the partnership arrangement. However, this duty does not apply if this is incompatible with any of the body’s other duties, including its duties under the Data Protection Act 1998 and the Human Rights Act 1998.

37. Any personally identifiable information should be shared within the principles of the Wales Accord on the Sharing of Personal Information (WASPI). All Local Health Boards and local authorities in Wales are signatories to the WASPI Accord. A link to WASPI is included below:


39. Regional Partnership Boards will need to ensure that information is shared and used effectively to improve the delivery of services, care and support. Use of technology and common systems should underpin this and the Regional Partnership Board will be expected to provide strategic leadership in this area.
7. Delegation of functions

40. A local authority may carry out any of the specified functions on behalf of any of the other partnership bodies taking part in the same partnership arrangement. A Local Health Board may carry out any of the specified local authority functions described in Table 1 of Schedule 1 to the Partnership Arrangements Regulations on behalf of any of the local authorities taking part in the same partnership arrangement.
8. Integrated Family Support Services

41. This section of the guidance relates to the functions and responsibilities of local authorities and Local Health Boards with regard to the provision of Integrated Family Support Services (IFSS), as required by the Partnership Arrangements Regulations. The aim of IFSS has, from the outset, been to work with parents and the extended family at an early stage before children become at risk of being taken into care. This is achieved by providing family focussed services to enable parents to improve their parenting skills.

42. The Partnership Arrangements Regulations require partnership arrangements between local authorities and Local Health Boards to ensure the delivery of IFSS. The Regulations also require the establishment of Integrated Family Support Teams.

43. IFSS delivers family focussed services to enable parents to achieve the necessary behaviour changes that will improve their capacity and capability as parents. The principle behind IFSS is that the extended family is engaged with the process.

44. The IFSS focuses services on children in need, including those in need of protection and bridges children and adult services across local authorities and Local Health Boards with both bodies being accountable to make sufficient provision, either directly or through coordinated arrangements, to support children and adults referred to them.

45. Underpinning the service is a set of principles which require the IFSS to:
   - Strengthen the safeguarding and welfare of children through restorative action to better support parents
   - Improve the quality of service experience by parents and children when they engage with professionals
   - Be family focussed and family centred, ensuring their voices are heard and interventions are aligned with the outcomes they want to achieve
   - Facilitate service change
   - Be a resource to existing services
   - Build trusting relationships
   - Deliver holistic and intensive evidence-based interventions
   - Provide a training resource to child and adult services on evidence-based interventions to engage complex families

46. IFSS should embed the values of engagement and collaboration, which builds on the family and individual strengths. The voices of the children and parents must be heard and focused on the outcomes they want to achieve.

Integrated Family Support Teams (IFST)

47. The Partnership Arrangements Regulations require the partnership bodies for each partnership arrangement to establish a team for the purpose of the exercise of family support functions. A team established under this regulation is to be known as an integrated family support team (IFST). The functions of an integrated family support team are to be carried out under the direction of the Regional Partnership Board.
48. An integrated family support team must contain staff with suitable skills and experience, including at least one consultant social worker, social work qualified professional and registered health professional, having regard to the categories of cases/families which can be referred to it, and the need of professional staff for administrative support (see regulation 16(4)(a) and (b)).

49. The responsibility for establishing the IFST and assigning functions to the IFST is a joint responsibility of all the partnership bodies within the area covered by each Regional Partnership Board. However, each partnership body remains responsible for their relevant statutory functions.

50. IFSTs must be established for the areas covered by each of the Regional Partnership Boards. IFSTs must be multi-disciplinary and multi-agency.

Referrals to Integrated Family Support Teams Regulation 18 (1)

51. The Regional Partnership Board must establish clear and transparent procedures for referring a family to an integrated family support team if it reasonably believes or suspects that:

   a) a parent of a child in that family (or a prospective parent) (i) is dependent on alcohol or drugs, (ii) is a victim of domestic violence or abuse, (iii) has a history of violent or abusive behaviour, or (iv) has a mental disorder; and

   b) as a consequence of one or more of these circumstances, the child is, or will be in need of care and support and either:

      (i) the child will be unable to remain with the family if family support services are not provided,

      (ii) where the child is looked after, the child will be unable to return to live with the family if family support services are not provided, or

      (iii) the child is or will be at risk of abuse, neglect or other harm if family support services are not provided.

52. Local authorities and their Local Health Board partners are required to identify families where it can be demonstrated that the provision of the IFSS will have a direct benefit on a child’s health and welfare. In the first instance its focus should be on:

   • Where the child is in need of protection and is on the child protection register and there has been neglect of the child’s care or development.

   • Where the family is at a point of crisis and where the children are likely to become looked after by the local authority.

   • Where children are looked after by the local authority and without intervention will be unable to return home.

53. Local authorities must have a written policy outlining how they will conduct family reviews and systems for recording the review and its outcome. These must be aligned with the requirements in Part 3 and 4 of the Act relating to assessing and meeting need. Any plans arising from the reviews must be provided to the child’s case worker and the adult service care coordinator. Copies must also be provided to the family.

54. The Regional Partnership Board will need to determine the most appropriate structures for ensuring the provision of IFSS. This could include the establishment of sub-boards which would have specific responsibility for IFSS, in addition to the
55. When determining the operational/delivery structure for the IFSS, the Regional Partnership Board will also need to determine the referrals process. This will include the requirement for a panel to determine the appropriateness and priority of the referral to the IFSS team. This will also include the identification of the lead member of the Board for IFSS (likely to be the Director of Social Services).

56. Regional Partnership Boards will need to:

- Ensure the establishment of IFSS teams (IFSTs)
- Ensure the local authorities and Local Health Boards participating in the IFSS cooperate with the IFST in discharging their statutory functions
- Ensure the IFSTs have sufficient resources to carry out their functions (this will include the specific resources available to the IFSTs, as well as commissioning cross-sector services where appropriate and should cover the requirements for an independent person to coordinate the review of the Family Plan).
- Ensure there is appropriate training of IFST members, as well as ensuring training for other related teams or individuals to share learning and good practice.
- Ensure disputes and complaints are appropriately handled and resolved.
- Ensure there is a report on the IFSS (as part of the overall report for the Regional Partnership Board). This will need to be formally approved by the Regional Partnership Board before being submitted to Welsh Ministers. It must also be published.

57. There is no intention to specify the number of people within the IFST multi agency – multi disciplinary team. The expenditure will need to be appropriate to provide for sufficient posts for the IFST to meet the needs of families in that area, including administrative support. The fund must be used to ensure equity of service provision across the region, in response to the needs identified.
9. Pooled funds and use of formal partnerships

58. The Partnership Arrangements Regulations require the establishment of pooled funds in relation to:

- The exercise of care home accommodation functions;
- The exercise of family support functions;
- Functions that will be exercised jointly as a result of an assessment carried out under section 14 of the Act or any plan prepared under section 14A.

59. These duties will take effect from 6 April 2016, with the exception of the duty to establish pooled funds in relation to the care home accommodation functions, which comes into force on 6 April 2018.

60. The Welsh Government will expect to see an integrated approach to the development of early intervention and preventative services. 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.

61. Local Health Boards and local authorities should also consider any funding from Welsh Government such as the intermediate 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 intermediate care fund, or similar funding streams, should be the subject of a written agreement.

62. Whilst the requirement for pooled funds in relation to the care home accommodation functions is not until April 2018, Local Health Boards and local authorities will be expected to:

- Undertake a population needs assessment and market analysis to include the needs of self funders.
- Agree an appropriate integrated market position statement and commissioning strategy. These 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 both agencies to the commissioning of care homes. These arrangements will need to be subject to a written agreement.
63. 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.

64. It is expected that the same approach be adopted with long term domiciliary care and reablement services.

65. Whilst formally the regulations do not require pooled funds in relation to the care home accommodation functions until April 2018, Local Health Boards and local authorities may using existing powers to develop formal partnerships with pooled funding arrangements. There is nothing to prevent these arrangements being introduced prior to April 2018.

66. 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

67. Comprehensive monitoring arrangements must be put in place to provide relevant assurance to partners that their shared aims and objectives are being delivered.

68. 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.

69. 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.
70. 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.

71. 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.
10. Governance - Written Agreements

72. Regional Partnership Boards will be expected to develop written agreements concerning any formal partnership arrangements which involve a delegation of functions. Local Health Boards and local authorities should also complete a signed agreement which sets out the key terms which accord with statutory requirements. Supporting activity should take place alongside the drafting of an agreement to ensure that it is deliverable day-to-day through the host’s corporate framework for service and finance. Partners should also be clear on the scope of any governance arrangements.

73. The partnership arrangements can include pooled funds, the delegation of functions i.e. lead commissioning and integrated provision. In these circumstances, where partnerships are generally created as a means to streamline the delivery of services, it is essential that the terms of the partnership are clearly identified in a written agreement. It may also be helpful to draw the distinction between formal partnership arrangements and less formal arrangements.

74. Formal partnership arrangements have been used to describe formal arrangements involving a delegation of functions from one partner to another involving the NHS and local authorities. Formal arrangements can also be used to describe the use of pooled funds such as those under the Children Act 2004. Even where partnership arrangements are in early stages of development, or there are more informal arrangements in place, there is no reason why they cannot be underpinned by a written agreement.

75. The range of functions that can be included in a partnership arrangement are set out in the Partnership Arrangements Regulations. There are, however, some exclusions. The local authority areas not covered by the flexibilities afforded under the legislation include adoption panels, inspection of children’s homes and duties under the Care Standards Act 2000. In relation to health, the exclusions include surgery, radiotherapy, endoscopies, termination of pregnancies, other invasive procedures and emergency ambulance services.

76. Once there is agreement on what is required, partners should determine how best to accomplish the outcomes identified. This might mean changing the way services are delivered and designing new single models for delivery of services. It might also mean inclusion of:

- Service improvement objectives e.g. effective mechanisms that can be implemented and evidenced in order to confirm links with other services, and which ensure that the needs of the individual service user are met during the transition between services;
- Objectives to develop and improve quality and standards for service e.g. where relevant clinical and practice policies from the partner organisations could be harmonised. This might generate new process design for assessment and delivery of care;
- Human resources objectives e.g. to address the need for team development and which support recruitment, retention, staff training etc.
- Business objectives e.g. specific targets around activity, finance, identified risk or future change.
The Partnership Arrangements (Wales) Regulations 2015

EXPLANATORY NOTE
(This note is not part of the Regulations)

Sections 166 to 169 of the Social Services and Well-being (Wales) Act 2014 make provision for partnership arrangements between local authorities and Local Health Boards.

These Regulations set out the requirements for each Local Health Board and the local authorities within the area of each Local Health Board to take part in partnership arrangements for the carrying out of specified health and social services functions; the Regulations also make provision, amongst other things, for the operation and management of the partnership arrangements, the establishment of regional partnership boards and the establishment and maintenance of pooled funds.

Regulations 2 to 8 describe the Local Health Boards and the local authorities which are to take part in partnership arrangements. They also require the establishment of seven regional partnership boards and require the partnership arrangements to be carried out under the direction of a specified regional partnership board.

Regulation 9 and Schedule 1 describe the functions of Local Health Boards and local authorities which are to be carried out by the partnership arrangements.

Regulations 10, 11 and 12 provide for the objectives of the regional partnership boards, together with membership and reporting requirements.

Regulation 13 provides for the sharing of information between partnership bodies, integrated family support teams and regional partnership boards.
Regulation 14 enables each partnership body to delegate functions to another partnership body for the purposes of the partnership arrangements.

Regulations 15 to 18 contain specific provision in relation to partnership arrangements for carrying out family support functions (as specified in Schedule 4) and the establishment of integrated family support teams. These arrangements are intended to provide continuity with current arrangements under Part 3 of the Children and Families (Wales) Measure 2010.

Regulation 19 requires pooled funds to be established and maintained in relation to specific functions of partnership bodies.
The Partnership Arrangements (Wales) Regulations 2015

Made 2 December 2015

Coming into force in accordance with regulation 1(2)

CONTENTS

1. Title, commencement, application and interpretation

REGIONAL PARTNERSHIP BOARDS

2. Partnership arrangements under the direction of Gwent regional partnership board

3. Partnership arrangements under the direction of North Wales regional partnership board

4. Partnership arrangements under the direction of Cardiff and Vale regional partnership board

5. Partnership arrangements under the direction of Western Bay regional partnership board

6. Partnership arrangements under the direction of Cwm Taf regional partnership board

7. Partnership arrangements under the direction of the West Wales regional partnership board

8. Partnership arrangements under the direction of Powys regional partnership board

9. Specified functions
| 10. | Objectives of regional partnership boards |
| 11. | Membership of regional partnership boards |
| 12. | Reports |
| 13. | Information sharing |
| 14. | Delegation of functions |

**TIMAU INTEGREDIG CYMORTH I DEULUOEDD**

| 15. | Family support functions |
| 16. | Establishment of integrated family support teams |
| 17. | Assignment and exercise of family support functions |
| 18. | Arrangements for referral of cases to the integrated family support teams |

**CRONFEYDD CYFUN**

| 19. | Establishment and maintenance of pooled funds |

**Schedule 1**

Functions to be carried out by partnership arrangements

**Schedule 2**

Family support functions

The Welsh Ministers make the following Regulations in exercise of the powers conferred by sections 166(1)(b), (2) to (5), 167(3) and 168(1) and (2) of the Social Services and Well-being (Wales) Act 2014.

A draft of these Regulations was laid before the National Assembly for Wales under section 196(6) of that Act and has been approved by a resolution of the National Assembly for Wales.

**Title, commencement, application and interpretation**

1. —(1) The title of these Regulations is the Partnership Arrangements (Wales) Regulations 2015.

(2) (a) These Regulations come into force on 6 April 2016 except sub-paragraph (a) of regulation 19(1);

(b) sub-paragraph (a) of regulation 19(1) comes into force on 6 April 2018.

(3) These Regulations apply in relation to Wales.

(1) 2014 anaw 4.
In these Regulations—
“the Act” ("y Ddeddf") means the Social Services and Well-being (Wales) Act 2014;
“family support functions” ("swyddogaethau cymorth i deuluoedd") means the functions specified in regulation 15;
“partnership arrangements” ("trefniadau partneriaeth") means the partnership arrangements which are required to be made by partnership bodies in accordance with regulations 2 to 8;
“partnership bodies” ("cyrff partneriaeth") are those bodies which are required by regulations 2 to 8 to enter into partnership arrangements;
“regional partnership boards” ("byrddau partneriaeth rhanbarthol") means the boards required to be established by partnership bodies in accordance with regulations 2 to 8;
“specified functions” ("swyddogaethau penodedig") means the functions specified in regulation 9.

Regional Partnership Boards

Partnership arrangements under the direction of Gwent regional partnership board

2.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—
Aneurin Bevan University Health Board
Monmouthshire County Council
Newport City Council
Torfaen County Borough Council
Blaenau Gwent County Borough Council
Caerphilly County Borough Council.

(2) These bodies must together establish a partnership board in respect of the partnership arrangements required to be made by this regulation, to be known as Gwent regional partnership board.

(3) The partnership arrangements required to be made by this regulation must be carried out under the direction of Gwent regional partnership board.

Partnership arrangements under the direction of North Wales regional partnership board

3.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—
Betsi Cadwaladr University Health Board
6

(2) Rhaid i’r byrddau hyn, gyda’i gilydd, sefydliu bwrdd partneriaeth mewn cysylltiad â’r trefniadau partneriaeth y mae’n oflynnol iddynt gael eu gwneud gan y rheoliad hwn, a’i enw fydd bwrdd partneriaeth rhanbarthol Gogledd Cymru.

(3) Rhaid i’r trefniadau partneriaeth y mae’n oflynnol iddynt gael eu gwneud gan y rheoliad hwn gael eu cyflawni o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Gogledd Cymru.

Partnership arrangements under the direction of Cardiff and Vale regional partnership board

4.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—

Cardiff and Vale University Health Board
Cardiff City and County Council
Vale of Glamorgan Council.

(2) These bodies must together establish a partnership board in respect of the partnership arrangements required to be made by this regulation, to be known as Cardiff and Vale regional partnership board.

(3) The partnership arrangements required to be made by this regulation must be carried out under the direction of Cardiff and Vale regional partnership board.

Partnership arrangements under the direction of Western Bay regional partnership board

5.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—

Abertawe Bro Morgannwg University Health Board
Swansea City and County Council
Bridgend County Borough Council
Neath Port Talbot County Borough Council.

(2) These bodies must together establish a partnership board in respect of the partnership arrangements required to be made by this regulation, to be known as Western Bay regional partnership board.
(3) Rhaid i'r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn gael eu cyflawni o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Bae’r Gorllewin.

Trefniadau partneriaeth o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Cwm Taf

6.—(1) Rhaid i drefniadau partneriaeth ar gyfer cyflawni'r swyddogaethau penodedig gael eu gwneud gan y cyrff a ganlyn—

Bwrdd Iechyd Prifysgol Cwm Taf
Cyngor Bwrdeistref Sirol Rhondda Cynon Taf
Cyngor Bwrdeistref Sirol Merthyr Tudful.

(2) Rhaid i’r byrddau hyn, gyda'i gilydd, sefydlu bwrdd partneriaeth mewn cysylltiad â'r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn, a’i enw fydd bwrdd partneriaeth rhanbarthol Cwm Taf.

(3) Rhaid i’r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn gael eu cyflawni o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Cwm Taf.

Partnership arrangements under the direction of Cwm Taf regional partnership board

6.—(1) Partnership arrangements for carrying out specified functions must be made by the following bodies—

Cwm Taf University Health Board
Rhondda Cynon Taf County Borough Council
Merthyr Tydfil County Borough Council.

(2) These bodies must together establish a partnership board in respect of the partnership arrangements required to be made by this regulation, to be known as Cwm Taf regional partnership board.

(3) The partnership arrangements required to be made by this regulation must be carried out under the direction of Cwm Taf regional partnership board.

Trefniadau partneriaeth o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Gorllewin Cymru

7.—(1) Rhaid i drefniadau partneriaeth ar gyfer cyflawni’r swyddogaethau penodedig gael eu gwneud gan y cyrff a ganlyn—

Bwrdd Iechyd Prifysgol Hywel Dda
Cyngor Sir Penfro
Cyngor Sir Caerfyrddin
Cyngor Sir Ceredigion.

(2) Rhaid i’r cyrff hyn, gyda’i gilydd, sefydlu bwrdd partneriaeth mewn cysylltiad â’r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn, a’i enw fydd bwrdd partneriaeth rhanbarthol Gorllewin Cymru.

(3) Rhaid i’r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn gael eu cyflawni o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Gorllewin Cymru.

Partnership arrangements under the direction of the West Wales regional partnership board

7.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—

Hywel Dda University Health Board
Pembrokeshire County Council
Carmarthenshire County Council
Ceredigion County Council.

(2) These bodies must together establish a partnership board in respect of the partnership arrangements required to be made by this regulation, to be known as West Wales regional partnership board.

(3) The partnership arrangements required to be made by this regulation must be carried out under the direction of West Wales regional partnership board.

Trefniadau partneriaeth o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Powys

8.—(1) Rhaid i drefniadau partneriaeth ar gyfer cyflawni’r swyddogaethau penodedig gael eu gwneud gan y cyrff a ganlyn—

Partnership arrangements under the direction of Powys regional partnership board

8.—(1) Partnership arrangements for carrying out the specified functions must be made by the following bodies—
(2) Rhaid i’r cyrff hyn, gyda'i gilydd, sefydlu bwrdd partneriaeth mewn cysylltiad â’r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn, a’i enw fydd bwrdd partneriaeth rhanbarthol Powys.

(3) Rhaid i’r trefniadau partneriaeth y mae’n ofynnol iddynt gael eu gwneud gan y rheoliad hwn gael eu cyflawni o dan gyfarwyddyd bwrdd partneriaeth rhanbarthol Powys.

Specified functions
9. The functions to be carried out in accordance with the partnership arrangements are the functions described in Schedule 1.

Objectives of regional partnership boards
10. The objectives of a regional partnership board are—
(a) to ensure that the partnership bodies work effectively together to—
   (i) respond to the population assessment carried out in accordance with section 14 of the Act, and
   (ii) implement the plans for each of the local authority areas covered by the board which local authorities and local health boards are each required to prepare and publish under section 14A of the Act;
(b) to ensure that the partnership bodies provide sufficient resources for the partnership arrangements, in accordance with their powers under section 167 of the Act;
(c) to promote the establishment of pooled funds where appropriate.

Membership of regional partnership boards
11.—(1) Membership of a regional partnership board 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;

(1) Section 14A was inserted into the Act by section 46 of, and paragraph 34 of Schedule 4 to the Well-being of Future Generations (Wales) Act 2015 (anaw 2).
(c) y person a benodwyd yn gyfarwyddwr gwasanaethau cymdeithasol o dan adran 144 o’r Ddeddf mewn cysylltiad â phob awdurdod lleol a sefydloedd y bwrrd partneriaeth rhanbarthol, neu ei gynrychiolydd enwebedig;
(d) cynrychiolydd i’r Bwrrd Iechyd Lleol a sefydloedd y bwrrd partneriaeth rhanbarthol;
(e) dau berson sy’n cynrychioli buddiannau sefydliadau’r trydydd sector yn yr ardal a gwmpesir gan y bwrrd partneriaeth rhanbarthol;
(f) o leiaf un person sy’n cynrychioli buddiannau darparwyr gofal yn yr ardal a gwmpesir gan y bwrrd partneriaeth rhanbarthol;
(g) un person i gynrychioli pobl y mae arnynt anghenion am ofal a chymorth gan yr ardal a gwmpesir gan y bwrrd partneriaeth rhanbarthol;
(h) un person i gynrychioli gofalwyr(1) yn yr ardal a gwmpesir gan y bwrrd partneriaeth rhanbarthol.

(2) Caiff bwrdd partneriaeth rhanbarthol gyfethol unryw bersonau eraill y mae’n meddwl eu bod yn briodol i fod yn aelodau o’r bwrrd.

(3) Caiff y cyrff partneri dalu taliadau cydnabyddiaeth ariannol a lwfansau i aelodau byrddau partneriaeth rhanbarthol.

(4) At ddibenion y rheoliad hwn—
yst yr “darparwr gofal” (“care provider”) yw person sydd wedi ei gofrestru o dan Ran 2 o Ddeddf Safonau Gofal 2000(2) mewn cysylltiad à sefydliad neu asiantaeth (o fewn ystyr y Ddeddf honno);
mae i “sefydliad trydydd sector” (“third sector organisation”) yr un ystyr ag yn adran 16(2) o’r Ddeddf.

Adroddiadau

12.—(1) Rhaid i fyrrdau partneriaeth rhanbarthol lunio adroddiad ar y graddau y mae amcanion y bwrrd yn rheoliad 10 wedi eu cyflawni a rhaid iddynt gyflwyno’r adroddiad hwn i Weinidogion Cymru.
(2) Rhaid llunio a chyflwyno’r adroddiad cyntaf erbyn 1 Ebrill 2017.
(3) Rhaid llunio a chyflwyno’r adroddiadau yn flynyddol wedi hynny.

(1) “Carer” is defined in section 3(4) of the Act.
(2) 2000 c. 14.
Rhannu gwybodaeth
13.—(1) At ddibenion cyflawni’r swyddogaethau sy’n cael eu cyflawni gan y trefniadau partneriaeth, rhaid i gorff partneriaeth rannu gwybodaeth—

(a) ag unrhyw un neu ragor o’r cyrff partneriaeth eraill;
(b) â’r bwrrd partneriaeth rhanbarthol.

(2) At ddiben cyflawni’r swyddogaethau cymorth i deuluoedd penodedig, rhaid i dim integredig cymorth i deuluoedd rannu gwybodaeth—

(a) ag unrhyw un neu ragor o’r cyrff partneriaeth;
(b) â’r bwrrd partneriaeth rhanbarthol.

(3) At ddibenion cyflawni ei amcanion, rhaid i fwrdd partneriaeth rhanbarthol rannu gwybodaeth ag unrhyw un neu ragor o’r cyrff partneriaeth.

(4) Nid yw’r ddyletswydd ym mparagraffau (1), (2) neu (3) yn anghydnaws os yw’n anghydnaws ag unrhyw un neu ragor o ddyletswyddau eraill y corff, gan gynnwys ei ddyletswyddau o dan Ddeddf Diogelu Data 1998(1) a Deddf Hawliau Dynol 1998(2).

Dirprwyo swyddogaethau
14.—(1) Caiff awdurdod lleol gyflawni unrhyw un neu ragor o’r swyddogaethau penodedig ar ran unrhyw un neu ragor o’r cyrff partneriaeth rhan yn yr un trefniadau partneriaeth.

(2) Caiff Bwrdd Iechyd Lleol gyflawni unrhyw un neu ragor o’r swyddogaethau awdurdod lleol penodedig a ddisgrifir yn Nhabl 1 o Atodlen 1 ar ran unrhyw un neu ragor o’r awdurdodau lleol sy’n cymryd rhan yn yr un trefniadau partneriaeth.

Timau Integredig Cymorth i Deuluoedd
15. Y swyddogaethau cymorth i deuluoedd yw’r swyddogaethau sydd wedi eu pennu yn Atodlen 2.

Sefydlyu timau integredig cymorth i deuluoedd
16.—(1) Rhaid i’r cyrff partneriaeth ar gyfer pob un o’r trefniadau partneriaeth sefydlu tîm at ddiben arfer swyddogaethau cymorth i deuluoedd.

(2) Enw tîm a sefydliro o dan y rheoliad hwn fydd tîm integredig cymorth i deuluoedd.

Information sharing
13.—(1) For the purposes of carrying out the functions being carried out by the partnership arrangements, a partnership body must share information with—

(a) any of the other partnership bodies;
(b) the regional partnership board.

(2) For the purpose of carrying out the specified family support functions, an integrated family support team must share information with—

(a) any of the partnership bodies;
(b) the regional partnership board.

(3) For the purposes of achieving its objectives, a regional partnership board must share information with any of the partnership bodies.

(4) The duty in paragraphs (1), (2) or (3) does not apply if this is incompatible with any of the body’s other duties, including its duties under the Data Protection Act 1998(1) and the Human Rights Act 1998(2).

Delegation of functions
14.—(1) A local authority may carry out any of the specified functions on behalf of any of the other partnership bodies taking part in the same partnership arrangements.

(2) A Local Health Board may carry out any of the specified local authority functions described in Table 1 of Schedule 1 on behalf of any of the local authorities taking part in the same partnership arrangements.

Integrated Family Support Teams

Family support functions
15. Family support functions are the functions specified in Schedule 2.

Establishment of integrated family support teams
16.—(1) The partnership bodies for each of the partnership arrangements must establish a team for the purpose of the exercise of family support functions.

(2) A team established under this regulation is to be known as an integrated family support team.

(1) 1998 c. 29.
(2) 1998 c. 42.
(3) The partnership bodies may assign family support functions to the integrated family support team.

(4) An integrated family support team must contain staff with suitable skills and experience having regard to—

(a) the categories of cases which can be referred to it, and

(b) the need of professional staff for administrative support.

Assignment and exercise of family support functions

17.—(1) An integrated family support team must carry out the family support functions that are assigned to it.

(2) The functions of an integrated family support team are to be carried out under the direction of the regional partnership board.

(3) The family support functions of an integrated family support team are to be carried out in respect of a family referred to it by the local authority.

(4) A function exercised under these Regulations is exercisable concurrently by the integrated family support team and the body upon whom the function is conferred.

Arrangements for referral of cases to the integrated family support teams

18.—(1) A partnership body may refer a family to an integrated family support team if it reasonably believes or suspects that—

(a) a parent of a child in that family (or a prospective parent)—

(i) is dependent on alcohol or drugs,

(ii) is a victim of domestic violence or abuse,

(iii) has a history of violent or abusive behaviour, or

(iv) has a mental disorder; and

(b) as a consequence of one or more of these circumstances, the child is or will be in need of care and support and either—

(i) the child will be unable to remain with the family if family support services are not provided,

(ii) where the child is looked after, the child will be unable to return to live with the family if family support services are not provided, or
(iii) the child is or will be at risk of abuse, neglect or other harm if family support services are not provided.

(2) A referral to an integrated family support team must be made in accordance with a referral procedure agreed by the regional partnership board.

(3) For the purposes of this regulation, “family” ("teulu") includes each of the following—

(a) a child, the parents of the child and, if the authority thinks it is appropriate, any other individual connected with the child or the parents;

(b) individuals who are about to become parents of a child and, if the local authority thinks it appropriate, any other individual connected with the individuals who are about to become the parents of that child.

(4) A child with needs for care and support may include a looked after child.

(5) In this regulation—

“abuse” ("cam-drin") includes both sexual activity without consent and unreasonable behaviour liable to cause serious psychological harm; abuse is “domestic abuse” ("cam-drin domestig") if it is from an individual who is associated with the victim; and “abusive” ("camdriniol") is to be interpreted accordingly;

“child with needs for care and support” ("plentyn y mae arno anghenion am ofal a chymorth") means a child who the local authority has determined has needs for care and support, following an assessment under section 21 of the Act;

“looked after child” ("plentyn sy’n derbyn gofal") has the same meaning as in section 74 of the Act;

“mental disorder” ("anhwylder meddwl") means any disorder or disability of the mind;

“parent” ("rhiant"), in relation to a child, includes any individual—

(a) who is not a parent of the child but who has parental responsibility for the child, or

(b) who has care of the child;

“violence” ("trais") means violence or threats of violence which are likely to be carried out and “violent” ("treisgar") is to be interpreted accordingly; violence is “domestic violence” ("trais domestig") if it is from an individual who is associated with the victim.
(6) For the purposes of the definition of “parent” (“rhiant”) in paragraph (4)—

(a) “parental responsibility” (“cyfrifoldeb rhiant”) has the same meaning as in section 3 of the Children Act 1989(1);

(b) in determining whether an individual has care of a child, any absence of the child at a hospital, children’s home or foster placement and any other temporary absence is to be disregarded.

Pooled Funds

Establishment and maintenance of pooled funds

19.—(1) Partnership bodies for each of the partnership arrangements are required to establish and maintain pooled funds in relation to—

(a) the exercise of their care home accommodation functions;

(b) the exercise of their family support functions;

(c) such of their specified functions as they decide they will exercise jointly in consequence of an assessment carried out under section 14 of the Act or any plan prepared under section 14A of the Act(2).

(2) In this regulation—

“care home” (“cartref gofal”) has the same meaning as in the Care Standards Act 2000;

“care home accommodation functions” (“swyddogaethau llety cartref gofal”) means—

(a) the functions of a local authority under sections 35 and 36 of the Act, where it has been decided to meet the adult’s needs by providing or arranging to provide accommodation in a care home;

(b) the functions of a Local Health Board under section 3 of the National Health Service (Wales) Act 2006 in relation to an adult, in cases where—

(i) the adult has a primary need for health care and it has been decided to meet the needs of the adult by arranging the provision of accommodation in a care home, or

(ii) the adult does not have a primary need for health care but the adult’s needs can only be met by the local authority arranging for the provision of accommodation together with nursing care.

(1) 1989 c. 41.
(2) See footnote to regulation 10(a)(ii).

(1) 1989 p. 41.
(2) Gweler yr troednodyn i reoliad 10(a)(ii).
Mark Drakeford

Y Gweinidog Iechyd a Gwasanaethau Cymdeithasol, un o Weinidogion Cymru
Minister for Health and Social Services, one of the Welsh Ministers
2 Rhagfyr 2015
2 December 2015
 FUNCTIONS TO BE CARRIED OUT BY PARTNERSHIP ARRANGEMENTS

1. Social services functions contained in Schedule 2 to the Act, except—
   (a) the functions in Part 5 of the Act (charging),
   (b) section 144 of the Act (directors of social services),
   (c) sections 1 and 2 of the Adoption Act 1976(1),
   (d) sections 114 and 115 of the Mental Health Act 1983(2),
   (e) Parts VII to X and section 86 of the Children Act 1989

2. The functions under section 7 of the Disabled Persons (Services, Consultation and Representation) Act 1986(3)

3. The functions of providing, or securing the provision of recreational facilities under section 19 of the Local Government (Miscellaneous Provisions) Act 1976(4)

4. The functions of local housing authorities under Part I of the Housing Grants, Construction and Regeneration Act 1996(5); and under Part VI of the Housing Act 1996(6) and Part 2 of the Housing (Wales) Act 2014(7)

5. The functions of local authorities under section 126 of the Housing Grants, Construction and Regeneration Act 1996

6. The functions of waste collection or waste disposal under the Environmental Protection Act 1990(8)

---

Footnotes:
(1) 1976 c. 36.
(2) 1983 c. 20.
(3) 1986 c. 33.
(4) 1976 c. 57.
(5) 1996 c. 53.
(6) 1996 c. 52.
(7) 2014 anaw 7.
(8) 1990 c. 43.
7. Swyddogaethau darparu gwasanaethau iechyd yr amgylchedd o dan adranau 180 a 181 o Ddeddf Llywodraeth Leol 1972(1)

8. Swyddogaethau awdurddodau priefyrd lleol o dan Ddeddf Priffyrd 1980(2) ac adran 39 o Ddeddf Traffig Fyryd 1988(3)

9. Swyddogaethau o dan adran 63 (trafnidiaeth teithwyr) ac adran 93 (cynlluniau consesiynau teithio) o Ddeddf Trafnidiaeth 1985(4)

<table>
<thead>
<tr>
<th>Tabl 2</th>
<th>Swyddogaethau Byrddau Iechyd Lleol</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y swyddogaeth</td>
<td></td>
</tr>
<tr>
<td>Adran 117 o Ddeddf Iechyd Meddwl 1983 (öl-ofal)</td>
<td>Section 117 of the Mental Health Act 1983 (after care)</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol 2006(5) (cydweithredau rhwng cyrff GIG ac awdurddodau lleol)</td>
<td>Section 82 of the National Health Service Act 2006(5) (cooperation between NHS bodies and local authorities)</td>
</tr>
<tr>
<td>Adran 1 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswydd i hyrwyddo gwasanaeth iechyd)</td>
<td>Section 1 of the National Health Service (Wales) Act 2006 (duty to promote health service)</td>
</tr>
<tr>
<td>Adranau 2 a 3 o Ddeddf y Gwasanaeth Iechyd Gwlodol (Cymru) 2006 (perwaiau i ddarparu gwasanaethau iechyd), gan gynnwys gwasanaethau adsefydlu a gwasanaethau sydd â’r bwrdd o osgoi derbyn pobl i’r ysbyty ond gan eithrio llawdriniaethau, radiotherapi, terfynu beichiogrwydd, endosgopi, defnyddio triniaethau laser Dosbarth 4 a thriniaethau mewnathiol eraill a gwasanaethau ambwlians brys</td>
<td>Sections 2 and 3 of the National Health Service (Wales) Act 2006 (powers to provide health services), including rehabilitation services and services intended to avoid admission to hospital but excluding surgery, radiotherapy, termination of pregnancies, endoscopy, the use of Class 4 laser treatments and other invasive treatments and emergency ambulance services</td>
</tr>
<tr>
<td>Adran 10(1), (2), (3), (4) a (5) o Ddeddf y Gwasanaeth Iechyd Gwlodol (Cymru) 2006 (trefniadau gyda chyrff eraill)</td>
<td>Section 10(1), (2), (3), (4) and (5) of the National Health Service (Wales) Act 2006 (arrangements with other bodies)</td>
</tr>
<tr>
<td>Adran 38(6) o Ddeddf y Gwasanaeth Iechyd Gwlodol (Cymru) 2006 (dyletswydd i roi ar gael wasanaethau a ddarperir gan berson a gyflogir yn y gwasanaeth iechyd er mwyn galluogi awdurddodau lleol i gyflawni swyddogaethau)</td>
<td>Section 38(6) of the National Health Service (Wales) Act 2006 (duty to make available services provided by a person employed in the health service to enable local authorities to discharge functions)</td>
</tr>
</tbody>
</table>

(1) 1972 p. 70.
(2) 1980 p. 66.
(3) 1988 p. 52.
(4) 1985 p. 67.
(5) 2006 p. 43.
### Family support functions

#### Table 1
Local authority functions in relation to children

<table>
<thead>
<tr>
<th>Function</th>
<th>Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parts 3 and 4 of the Act (assessing and meeting needs for care and support)</td>
<td>In so far as they relate to meeting the needs of children who have been assessed under section 21 of the Act as having needs for care and support and for their families.</td>
</tr>
<tr>
<td>Section 117 of the Mental Health Act 1983 (after-care)</td>
<td></td>
</tr>
</tbody>
</table>

#### Table 2
Local authority functions in relation to adults

<table>
<thead>
<tr>
<th>Function</th>
<th>Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parts 3 and 4 of the Act (assessing and meeting needs for care and support)</td>
<td>In so far as they relate to meeting the needs of persons over the age of 18 who have been assessed under section 19 of the Act as having needs for care and support because they are dependent on alcohol or drugs, or because they are victims of domestic violence or abuse, have a history of violent or abusive behaviour or because they have a mental disorder.</td>
</tr>
<tr>
<td>Section 117 of the Mental Health Act 1983 (after-care)</td>
<td></td>
</tr>
</tbody>
</table>

---

### Swyddogaethau cymorth i deuluoedd

#### Tabl 1
Swyddogaethau awdurdodau lleol mewn perthynas â phlant

<table>
<thead>
<tr>
<th>Y swyddogaeth</th>
<th>Rhychwant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rhannau 3 a 4 o’r Ddeddf (asesu a diwallu anghenion am ofal a chymorth)</td>
<td>I’r graddau y maent yn ymwnueud â diwallu anghenion plant sydd wedi cael eu hasesu o dan adran 21 o’r Ddeddf fel rhai sydd ag anghenion am ofal a chymorth ac ar gyfer eu teuluodd.</td>
</tr>
<tr>
<td>Adran 117 o Ddeddf llehyd Meddwl 1983 (ôl-ofal)</td>
<td></td>
</tr>
</tbody>
</table>

#### Tabl 2
Swyddogaethau awdurdodau lleol mewn perthynas ag oedolion

<table>
<thead>
<tr>
<th>Y swyddogaeth</th>
<th>Rhychwant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rhannau 3 a 4 o’r Ddeddf (asesu a diwallu anghenion am ofal a chymorth)</td>
<td>I’r graddau y maent yn ymwnueud â diwallu anghenion personau sydd dros 18 oed ac sydd wedi cael eu hasesu o dan adran 19 o’r Ddeddf fel rhai sydd ag anghenion am ofal a chymorth oherwydd eu bod yn ddibynnol ar alcohol neu ar gyffuriau, neu oherwydd eu bod yn ddiodedfa’r trais domestig neu gam-drin domestig, oherwydd bod ganedwyd hanes o ymddwyn yn dreisgar neu’n gamdriniau neu oherwydd bod ganedwyd anhwylder meddwl.</td>
</tr>
<tr>
<td>Adran 117 o Ddeddf llehyd Meddwl 1983 (ôl-ofal)</td>
<td></td>
</tr>
</tbody>
</table>
Table 3
Local Health Board functions in relation to children

<table>
<thead>
<tr>
<th>Function</th>
<th>Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 117 of the Mental Health Act 1983 (after-care)</td>
<td>In so far as they relate to the provision of health services or facilities for, or treatment of children who have been assessed under section 21 of the Act as having needs for care and support, including the assessment of need for such services or facilities.</td>
</tr>
<tr>
<td>Section 82 of the National Health Service Act 2006 (co-operation between NHS bodies and local authorities)</td>
<td>Section 82 of the National Health Service Act 2006 (co-operation between NHS bodies and local authorities)</td>
</tr>
<tr>
<td>Section 1 of the National Health Service (Wales) Act 2006 (duty to promote health service)</td>
<td>Section 1 of the National Health Service (Wales) Act 2006 (duty to promote health service)</td>
</tr>
<tr>
<td>Section 2 of the National Health Service (Wales) Act 2006 (general powers)</td>
<td>Section 2 of the National Health Service (Wales) Act 2006 (general powers)</td>
</tr>
<tr>
<td>Section 3(1)(c),(d), (e) and (f) of the National Health Service (Wales) Act 2006 (provision of certain services)</td>
<td>Section 3(1)(c),(d), (e) and (f) of the National Health Service (Wales) Act 2006 (provision of certain services)</td>
</tr>
<tr>
<td>Section 10(1), (2), (3), (4) and (5) of the National Health Service (Wales) Act 2006 (arrangements with other bodies)</td>
<td>Section 10(1), (2), (3), (4) and (5) of the National Health Service (Wales) Act 2006 (arrangements with other bodies)</td>
</tr>
<tr>
<td>Section 38(6) of the National Health Service (Wales) Act 2006 (duty to make available services provided by a person employed in the health service to enable local authorities to discharge functions)</td>
<td>Section 38(6) of the National Health Service (Wales) Act 2006 (duty to make available services provided by a person employed in the health service to enable local authorities to discharge functions)</td>
</tr>
</tbody>
</table>

Table 3
Local Health Board functions in relation to children

<table>
<thead>
<tr>
<th>Y swyddogau eth</th>
<th>Rhychwant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adran 117 o Ddeddf Iechyd Meddwl 1983 (öl-ofal)</td>
<td>I’r graddau y maent yn ymwneud â’r ddarpariaeth o wasanaethau neu gyfleusterau iechyd i blant, neu driniaeth i blant, sydd wedi cael eu hasesu o dan adran 21 o’r Ddeddf fel rhai sydd ag anghenion am ofal a chymorth, gan gynnwys asesu’r angen am wasanaethau neu gyfleusterau o’r fath.</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol 2006 (cydweithredu rhwng cyrff GIG ac awdurdodau lleol)</td>
<td>Adran 2 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (pweru cyffredinol)</td>
</tr>
<tr>
<td>Adran 1 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i hyrwyddo wasanaethau iechyd)</td>
<td>Adran 10(1), (2), (3), (4) a (5) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (trefniodau gyd y chyrff eraill)</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i roi ar gael wasanaethau a ddarparir gan berson a gyflogir yn y gwasanaeth iechyd er mwyn galluogi awdurdodau lleol i gyflawni swyddogaeth</td>
<td></td>
</tr>
<tr>
<td>Adran 38(6) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i ho’i roi ar gael wasanaethau a ddarparir gan berson a gyflogir yn y gwasanaeth iechyd er mwyn galluogi awdurdodau lleol i gyflawni swyddogaeth)</td>
<td></td>
</tr>
</tbody>
</table>

Tabl 3
Swyddogaeth Byrddau Iechyd Lleol mewn perthynas â phlant

<table>
<thead>
<tr>
<th>Y swyddogau eth</th>
<th>Rhychwant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adran 117 o Ddeddf Iechyd Meddwl 1983 (öl-ofal)</td>
<td>I’r graddau y maent yn ymwneud â’r ddarpariaeth o wasanaethau neu gyfleusterau iechyd i blant, neu driniaeth i blant, sydd wedi cael eu hasesu o dan adran 21 o’r Ddeddf fel rhai sydd ag anghenion am ofal a chymorth, gan gynnwys asesu’r angen am wasanaethau neu gyfleusterau o’r fath.</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol 2006 (cydweithredu rhwng cyrff GIG ac awdurdodau lleol)</td>
<td>Adran 2 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (pweru cyffredinol)</td>
</tr>
<tr>
<td>Adran 1 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i hyrwyddo wasanaethau iechyd)</td>
<td>Adran 10(1), (2), (3), (4) a (5) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (trefniodau gyd y chyrff eraill)</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i roi ar gael wasanaethau a ddarparir gan berson a gyflogir yn y gwasanaeth iechyd er mwyn galluogi awdurdodau lleol i gyflawni swyddogaeth)</td>
<td>Adran 38(6) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i ho’i roi ar gael wasanaethau a ddarparir gan berson a gyflogir yn y gwasanaeth iechyd er mwyn galluogi awdurdodau lleol i gyflawni swyddogaeth)</td>
</tr>
<tr>
<td>Y swyddogaeth</td>
<td>Rhychwant</td>
</tr>
<tr>
<td>---------------</td>
<td>-----------</td>
</tr>
<tr>
<td>Adran 117 o Ddeddf Iechyd Meddwl 1983 (ôl-ofal)</td>
<td>I’r graddau y maent yn ymwneud â’r ddarpariaeth o wasanaethau neu gyfleuasterau iechyd i bobl, neu driniaeth i bobl, sy’n ddiodyddol ar alcohol neu ar gyfluriau, neu sy’n ddiodyd fwy trais domestig neu gam-drin domestig, sydd â hanes o ymddwyn yn dreisgar neu’n gamdrinio neu sydd ag anhwylder meddwl, i gynnwys asesu’r angen am wasanaethau neu driniaeth o’r fath.</td>
</tr>
<tr>
<td>Adran 82 o Ddeddf y Gwasanaeth Iechyd Gwladol 2006 (cydweithredu rhwng cyrff GIG ac awdurdodau lleol)</td>
<td></td>
</tr>
<tr>
<td>Adran 1 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i hyrwyddo gwasanaeth iechyd)</td>
<td></td>
</tr>
<tr>
<td>Adran 2 o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (pweru cyffredinol)</td>
<td></td>
</tr>
<tr>
<td>Adran 3(1)(c),(d),(e) ac (f) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (darparu gwasanaethau penodol)</td>
<td></td>
</tr>
<tr>
<td>Adran 10(1), (2), (3), (4) a (5) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (trefniadau gyda cyrff eraill)</td>
<td></td>
</tr>
<tr>
<td>Adran 38(6) o Ddeddf y Gwasanaeth Iechyd Gwladol (Cymru) 2006 (dyletswyd i roi ar gael wasanaethau a ddarperir gan berson a gylflogir yn y gwasanaeth iechyd er mwyn galluogi awdurdodau lleol i gyflawnwydwa effaithau)</td>
<td></td>
</tr>
</tbody>
</table>

### Table 4

<table>
<thead>
<tr>
<th>Function</th>
<th>Extent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Section 117 of the Mental Health Act 1983 (<em>after-care)</em></td>
<td>In so far as they relate to the provision of health services or facilities for, or treatment of persons who are dependent on alcohol or drugs, or who are victims of domestic violence or abuse, have a history of violent or abusive behaviour or who have a mental disorder, to include the assessment of need for such services or treatment.</td>
</tr>
<tr>
<td>Section 82 of the National Health Service Act 2006 (<em>co-operation between NHS bodies and local authorities</em>)</td>
<td></td>
</tr>
<tr>
<td>Section 1 of the National Health Service (Wales) Act 2006 (<em>duty to promote health service</em>)</td>
<td></td>
</tr>
<tr>
<td>Section 2 of the National Health Service (Wales) Act 2006 (<em>general powers</em>)</td>
<td></td>
</tr>
<tr>
<td>Section 3(1)(c),(d), (e) and (f) of the National Health Service (Wales) Act 2006 (<em>provision of certain services</em>)</td>
<td></td>
</tr>
<tr>
<td>Section 10(1), (2), (3), (4) and (5) of the National Health Service (Wales) Act 2006 (<em>arrangements with other bodies</em>)</td>
<td></td>
</tr>
<tr>
<td>Section 38(6) of the National Health Service (Wales) Act 2006 (<em>duty to...</em>)</td>
<td></td>
</tr>
</tbody>
</table>

© Crown copyright 2015

Printed and Published in the UK by The Stationery Office Limited under the authority and superintendence of Carol Tullo, Controller of Her Majesty's Stationery Office and Queen's Printer of Acts of Parliament.
<table>
<thead>
<tr>
<th>OFFERYNNAU STATUDOL CYMRU</th>
<th>WELSH STATUTORY INSTRUMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015 Rhif 1989 (Cy. 299)</td>
<td>2015 No. 1989 (W. 299)</td>
</tr>
<tr>
<td>GOFAL CYMDEITHASOL, CYMRU</td>
<td>SOCIAL CARE, WALES</td>
</tr>
<tr>
<td>Rheoliadau Trefniadau Partneriaeth (Cymru) 2015</td>
<td>The Partnership Arrangements (Wales) Regulations 2015</td>
</tr>
</tbody>
</table>