

**Health & Social Care Regional Integration Fund (RIF)**

**Project**

**Investment**

**Proposal**

**NORTH WALES REGIONAL PARTNERSHIP BOARD**

**Project Name**

**Project plan**

Outline the project that will contribute towards the successful delivery of the model of care

|  |
| --- |
| **Title of project** |
|  |
| **Project Ref Number** |
|  |
| **Primary model of care** |
| |  |  | | --- | --- | |  | **Select** | | Place based care – Prevention and community coordination |  | | Place based care – complex care closer to home |  | | Promoting good emotional health and wellbeing |  | | Preventing children entering care and supporting children to remain with their families |  | | Home from hospital |  | | Accommodation based solutions |  | |  |  | |
| **Priority Population Group** |
| |  |  | | --- | --- | |  | **Select** | | Older people including people with dementia |  | | Children and young people with complex needs |  | | People with learning disabilities and neurodevelopmental conditions including autism |  | | Unpaid carers |  | | People with emotional and mental health wellbeing needs |  | |  |  | |
| **DEMENTIA PROJECTS ONLY** |
| **Project delivered using DAP funding? Y / N** |
| **Project relates to DAP or MAS? DAP / MAS** |
| **All Wales Dementia Standard(s) Project delivers?** |
| **Enabler** |
| |  |  | | --- | --- | |  | **Select** | | Integrated planning and commissioning |  | | Technology enabled care |  | | Promoting the social value sector |  | | Integrated community hubs |  | | Workforce development and integration |  | |

|  |  |
| --- | --- |
| **Any additional Models of Care the project will contribute towards** | |
| |  |  | | --- | --- | |  | **Select** | | Place based care – Prevention and community coordination |  | | Place based care – complex care closer to home |  | | Promoting good emotional health and wellbeing |  | | Preventing children entering care and supporting children to remain with their families |  | | Home from hospital |  | | Accommodation based solutions |  | |  |  | | |
| **Project Summary** | |
|  | |
| **New or existing investment** | |
| **New / Existing** | |
| **Estimated total cost** | |
|  | |
| **Start date** | **Estimated completion date** |
|  |  |

**Regional investment model**

Select the funding element which the project will be set against

|  |  |
| --- | --- |
| **Funding elements** | **Select** |
| Element 1 - Acceleration funding year 1 (90% WG funding + 10% Match) |  |
| Element 1 - Acceleration funding year 2 (90% WG funding + 10% Match) |  |
| Element 2 - Embedding fund year 1 (70% WG funding + 30% Match) |  |
| Element 2 - Embedding fund year 2 (70% WG funding + 30% Match) |  |
| Element 2 - Embedding fund year 3 (70% WG funding + 30% Match) |  |
| Element 3 - Legacy integrated fund (Core) (50% WG & Match funding) |  |
| Element 4 – National priorities (Dementia and Memory Assessment Services/ Diagnostic Support) (100% WG funding) |  |

Provide the rationale for the element selected.

**Delivery partners**

Include details of local LHBs, local authorities, third sector and other providers that will support in the delivery of the project. In this section you will also need to select from the drop down what they bring to the project by means of match contribution. This can be evidenced by either monetary or resource match. Complete the table below for the project being put forward.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Delivery Partners** | **Partner Cost of project** | **Funding stage** | **WG Contribution** | **Partner Contribution** | **Partner match type monetary** | **Partner match type resource** |
| Select drop down | Enter figure | Select drop down | Enter figure | Enter figure | Select drop down | Select drop down |
| Choose an item. |  | Choose an item. |  |  | Choose an item. | Choose an item. |
| Choose an item. |  | Choose an item. |  |  | Choose an item. | Choose an item. |
| Choose an item. |  | Choose an item. |  |  | Choose an item. | Choose an item. |
| Choose an item. |  | Choose an item. |  |  | Choose an item. | Choose an item. |
| **Total Cost of Project** |  |  |  |  |  |  |

**Impacts / Implications**

Consider any impacts or implications of this project. In this section you will need to indicate any impacts and any groups who need to be aware of this project.

|  |  |
| --- | --- |
| **Partner and Regional Groups** | **Select** |
| **HR Impact**  Does the project impact on employees or other workers? |  |
| **ICT Impact**  Is there an ICT element within the project? |  |
| **Property/ Estate Impact**  Does the project involve changes to an asset? |  |
| **Procurement Impact**  Will the project involve spending on the external supply of goods or services? |  |
| **Regional Carers Group** |  |
| **Regional Commissioning Board** |  |
| **Regional Workforce Board** |  |
| **Digital Transformation Board** |  |
| **Mwyn a Geiriau Forum** |  |
| **Communication & Engagement Group** |  |
| **Pooled Budgets Group** |  |
| **Social Value Steering Group** |  |
| **Research, Innovation & Improvement Hub** |  |
| **Integrated Autism Service Strategic Group** |  |
| **Safeguarding Adults and Children’s Boards** |  |
| **Regional Housing Support Collaborative Group** |  |
| **Children and Young People Sub Group** |  |