

Better Care Fund 2021-22 Template

2. Cover

Version 1.0



Please Note:

- You are reminded that much of the data in this template, to which you have privileged access, is management information only and is not in the public domain. It is not to be shared more widely than is necessary to complete the return.
- Please prevent inappropriate use by treating this information as restricted, refrain from passing information on to others and use it only for the purposes for which it is provided. Any accidental or wrongful release should be reported immediately and may lead to an inquiry. Wrongful release includes indications of the content, including such descriptions as "favourable" or "unfavourable".
- Please note that national data for plans is intended for release in aggregate form once plans have been assured, agreed and baselined as per the due process outlined in the BCF Planning Requirements for 2021-22.
- This template is password protected to ensure data integrity and accurate aggregation of collected information. A resubmission may be required if this is breached.

Health and Wellbeing Board: Stockport

Completed by: Alison Johnson

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Please indicate who is signing off the plan for submission on behalf of the HWB (delegated authority is also accepted):

Job Title: Chair of HWB

Name: Jude Wells

Has this plan been signed off by the HWB at the time of submission? <Please Select>

If no, or if sign-off is under delegated authority, please indicate when the HWB is expected to sign off the plan:

	Role:	Professional Title (where applicable)	First-name:	Surname:	E-mail:
*Area Assurance Contact Details:	Health and Wellbeing Board Chair		Jude	Wells	clr.jude.wells@stockport.gov.uk
	Clinical Commissioning Group Accountable Officer (Lead)		Andrea	Green	a.green15@nhs.net
	Additional Clinical Commissioning Group(s) Accountable Officers		None	None	none@none
	Local Authority Chief Executive		Pam	Smith	pam.smith@stockport.gov.uk
	Local Authority Director of Adult Social Services (or equivalent)		Mark	Fitton	mark.fitton@stockport.gov.uk
	Better Care Fund Lead Official				
	LA Section 151 Officer		Michael	Cullen	michael.cullen@stockport.gov.uk

Please add further area contacts that you would wish to be included in official correspondence -->

*Only those identified will be addressed in official correspondence (such as approval letters). Please ensure all individuals are satisfied with the information entered above as this is exactly how they will appear in correspondence.

Question Completion - When all questions have been answered and the validation boxes below have turned green, please send the template to the Better Care Fund Team england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. Please also copy in your Better Care Manager.

Please see the Checklist below for further details on incomplete fields

	Complete:
2. Cover	No
4. Income	Yes
5a. Expenditure	Yes
6. Metrics	Yes
7. Planning Requirements	Yes

[<< Link to the Guidance sheet](#)

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