Better Care Fund 2021-22 Template

7. Confirmation of Planning Requirements

Selected Health and Wellbeing Board:

Stockport

Theme	Code	Planning Requirement	Key considerations for meeting the planning requirement These are the Key Lines of Enquiry (KLOEs) underpinning the Planning Requirements (PR)	Confirmed through	Please confirm whether your BCF plan meets the Planning Requirement?	Please note any supporting documents referred to and relevant page numbers to assist the assurers	requirement is not met, please note the actions in	Where the Planning requirement is not met, please note the anticipated timeframe for meeting it
	PR1	A jointly developed and agreed plan	Has a plan; jointly developed and agreed between CCG(s) and LA; been submitted?	Cover sheet				
	PRI	that all parties sign up to	Has the HWB approved the plan/delegated approval pending its next meeting? Have local partners, including providers, VCS representatives and local authority service leads (including housing and DFG leads) been involved in the development of the plan? Where the narrative section of the plan has been agreed across more than one HWB, have individual income, expenditure and metric	Cover sheet Narrative plan Validation of submitted plans	Yes			
			sections of the plan been submitted for each HWB concerned?	i i				
	PR2	A clear narrative for the integration of health and social care	Is there a narrative plan for the HWB that describes the approach to delivering integrated health and social care that describes: How the area will continue to implement a joined-up approach to integrated, person-centred services across health, care, housing and wider public services locally. The approach to collaborative commissioning The approach to support people to remain independent at home, and how BCF funding will be used to support this. How the plan will contribute to reducing health inequalities and inequalities for people with protected characteristics? This should include. How equality impacts of the local BCF plan have been considered, Changes to local priorities related to health inequality and equality, including as a result of the COVID 19 pandemic, and how activities in the BCF plan will address these	Narrative plan assurance	Yes			
	PR3	A strategic, joined up plan for DFG spending	Is there confirmation that use of DFG has been agreed with housing authorities? • Does the narrative set out a strategic approach to using housing support, including use of DFG funding that supports independence at home? • In two tier areas, has: - Agreement been reached on the amount of DFG funding to be passed to district councils to cover statutory Disabled Facilities Grants? or - The funding been passed in its entirety to district councils?	Narrative plan Confirmation sheet	Yes			
NC2: Social Care Maintenance	PR4	A demonstration of how the area will maintain the level of spending on social care services from the CCG minimum contribution to the fund in line with the uplift in the overall contribution	Does the total spend from the CCG minimum contribution on social care match or exceed the minimum required contribution (auto- validated on the planning template)?	Auto-validated on the planning template	Yes			
NC3: NHS commissioned Out of Hospital Services	PR5	Has the area committed to spend at equal to or above the minimum allocation for NHS commissioned out of hospital services from the CCG minimum BCF contribution?	Does the total spend from the CCG minimum contribution on non-acute, NHS commissioned care exceed the minimum ringfence (auto- validated on the planning template)?	Auto-validated on the planning template	Yes			
NC4: Plan for improving outcomes for people being discharged from hospital	PR6	is there an agreed approach to support safe and timely discharge from hospital and continuing to embed a home first approach?	Does the BCF plan demonstrate an agreed approach to commissioning services to support discharge and home first including: - support for safe and timely discharge, and - implementation of home first? Does the expenditure plan detail how expenditure from BCF funding sources supports this approach through the financial year? Is there confirmation that plans for discharge have been developed and agreed with Hospital Trusts?	Narrative plan assurance Expenditure tab Narrative plan	Yes			

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	PR7	Is there a confirmation that the	Do expenditure plans for each element of the BCF pool match the funding inputs? (auto-validated)	Expenditure tab			
		components of the Better Care Fund					
		pool that are earmarked for a purpose	• Is there confirmation that the use of grant funding is in line with the relevant grant conditions? (see paragraphs 32 – 43 of Planning	Expenditure plans and confirmation sheet			
		are being planned to be used for that	Requirements) (tick-hox)				
Agreed expenditure plan		purpose?	, , , , , , , , , , , , , , , , , , , ,				
for all elements of the		parpose.		Narrative plans and confirmation sheet	Yes		
BCE			Has funding for the following from the CCG contribution been identified for the area:				
Bei			- Implementation of Care Act duties?				
			- Funding dedicated to carer-specific support?				
			- Reablement?				
			icosener.				
	PR8	Does the plan set stretching metrics	Have stretching metrics been agreed locally for all BCF metrics?	Metrics tab			
	_	and are there clear and ambitious					
		plans for delivering these?	• Is there a clear narrative for each metric describing the approach locally to meeting the ambition set for that metric, including how BCF				
		ļ	expenditure will support performance against each metric?				
Metrics			Are ambitions across hospital trusts and HWBs for reducing the proportion of inpatients that have been in hospital for 21 days aligned,		Yes		
			and is this set out in the rationale?				
			and 3 and 3 at out in the radionale.				
			Have hospital trusts and HWBs developed and agreed plans jointly for reducing the proportion of inpatients that have been in hospital for				
			14 days or more and 21 days or more?				
			14 days of more and 21 days of more?				