

Better Care Fund 2022-23 Template

7. Confirmation of Planning Requirements

Selected Health and Wellbeing Board:

York

| 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 | Where the Planning requirement is not met, please note the actions in place towards meeting the requirement | Where the Planning requirement is not met, please note the anticipated timeframe for meeting it |
|--|------|---|--|--|--|--|---|---|
| NC1: Jointly agreed plan | PR1 | A jointly developed and agreed plan that all parties sign up to | <p>Has a plan; jointly developed and agreed between ICB(s) and LA; been submitted?</p> <p>Has the HWB approved the plan/delegated approval?</p> <p>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?</p> <p>Where the narrative section of the plan has been agreed across more than one HWB, have individual income, expenditure and metric sections of the plan been submitted for each HWB concerned?</p> | <p>Cover sheet</p> <p>Cover sheet</p> <p>Narrative plan</p> <p>Validation of submitted plans</p> | Yes | This is covered in the narrative and HWBB approval. The narrative highlights the number of partners involved including housing DFG lead, Mental Health, primary care, community and voluntary sector. Patients by experience from previous CCG, now ICB staff, LA, community health, primary care and care providers. | | |
| | PR2 | A clear narrative for the integration of health and social care | <p>Is there a narrative plan for the HWB that describes the approach to delivering integrated health and social care that describes:</p> <ul style="list-style-type: none"> 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 How the plan will contribute to reducing health inequalities and disparities for the local population, taking account of people with protected characteristics? This should include <ul style="list-style-type: none"> 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 document will address these. <p>The area will need to also take into account Priorities and Operational Guidelines regarding health inequalities, as well as local authorities' priorities under the Equality Act and NHS actions in line with Core20PLUS5.</p> | Narrative plan | Yes | A number of senior manager and operation groups are in place with clear implementation plans to ensure person-centred approaches are delivered. The BCF performance and delivery group oversee the impact joint schemes are having reporting to the AEDB. We have clear joint commissioning plans in place, and a number of schemes supporting early discharge such as rapid care, therapies local area co-ordinators and step down beds are jointly commissioned. We have outlined in the narrative key areas of inequalities across York and schemes such as street triage, MH support, ways to wellbeing and enhancing opportunities to access vaccine are all part of the BCF. Covid whilst challenging has provided a real platform for partnership working and integrated care through intermediate care and reablement. The narrative outlines the shift in 24hr care and the rise in care at home. As part of the work through the BCF group we continue to look to enhance preventative services to reduce reliance on hospital care. | | |
| | PR3 | A strategic, joined up plan for Disabled Facilities Grant (DFG) spending | <p>Is there confirmation that use of DFG has been agreed with housing authorities?</p> <ul style="list-style-type: none"> 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: <ul style="list-style-type: none"> Agreement been reached on the amount of DFG funding to be passed to district councils to cover statutory DFG or The funding been passed in its entirety to district councils? | <p>Narrative plan</p> <p>Confirmation sheet</p> | Yes | The narrative sets out the use of the DFG in terms of the usage, timeliness and access, all of which are monitored through the BCF and Executive. We have introduced a streamlined process enabling smaller adaptations to be agreed at a pace to support independence and reduce carer breakdown. | | |
| NC2: Social Care Maintenance | PR4 | A demonstration of how the area will maintain the level of spending on social care services from the NHS minimum contribution to the fund in line with the uplift in the overall contribution | Does the total spend from the NHS 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 | See 5a. | | |
| 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 NHS minimum BCF contribution? | Does the total spend from the NHS 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 | See 5a. | | |

Checklist

Complete:

Yes

Yes

Yes

Yes

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| <p>NC4: Implementing the BCF policy objectives</p> | <p>PR6</p> | <p>Is there an agreed approach to implementing the BCF policy objectives, including a capacity and demand plan for intermediate care services?</p> | <p>Does the plan include an agreed approach for meeting the two BCF policy objectives: - Enable people to stay well, safe and independent at home for longer and - Provide the right care in the right place at the right time?</p> <ul style="list-style-type: none"> • Does the expenditure plan detail how expenditure from BCF funding sources supports this approach through the financial year? •Has the area submitted a Capacity and Demand Plan alongside their BCF plan, using the template provided? • Does the narrative plan confirm that the area has conducted a self-assessment of the area's implementation of the High Impact Change Model for managing transfers of care? • Does the plan include actions going forward to improve performance against the HICM? | <p>Narrative plan Expenditure tab C&D template and narrative Narrative plan Narrative template</p> | <p>Yes</p> | <p>The narrative plan captures the way in which all schemes are supporting the system ethos of home first. All schemes clearly are agreed as they support independence and people getting support at the right time. Most recently after a extensive review the BCF agreed additional funding for Local area co-ordinators as well as mental health support. The plan highlights the shift towards home first and the delivery of the VEnn review in light of a high level capacity and demand review.</p> | | | <p>Yes</p> |
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| Agreed expenditure plan for all elements of the BCF | PR7 | <p>Is there a confirmation that the components of the Better Care Fund pool that are earmarked for a purpose are being planned to be used for that purpose?</p> | <ul style="list-style-type: none"> Do expenditure plans for each element of the BCF pool match the funding inputs? (auto-validated) Is there confirmation that the use of grant funding is in line with the relevant grant conditions? (see paragraphs 31 – 43 of Planning Requirements) (tick-box) Has the area included a description of how BCF funding is being used to support unpaid carers? Has funding for the following from the NHS contribution been identified for the area: <ul style="list-style-type: none"> Implementation of Care Act duties? Funding dedicated to carer-specific support? Reablement? | <p>Expenditure tab</p> <p>Expenditure plans and confirmation sheet</p> <p>Narrative plan</p> <p>Narrative plans, expenditure tab and confirmation sheet</p> | Yes | <p>Expenditure plans include BCF pool match as well as demonstrating we are meeting the grant conditions. The narrative supports the system delivery of support for unpaid carers through the bcf and commissioning of a new carers contract. the NHS contributions demonstrates additional monies for care act duties, carers specific support and also reablement.</p> | | |
| Metrics | PR8 | <p>Does the plan set stretching metrics and are there clear and ambitious plans for delivering these?</p> | <ul style="list-style-type: none"> Have stretching ambitions been agreed locally for all BCF metrics? Is there a clear narrative for each metric setting out: <ul style="list-style-type: none"> the rationale for the ambition set, and the local plan to meet this ambition? | Metrics tab | Yes | <p>We have clearly outlined through the narrative document and within the metric tab our ambition to continue to enhance and deliver a clear home first model. To ensure we meet our ambitious targets we commissioned VENN to complete an analysis on our home first model including intermediate care services and reablement. This has led to a clear plan of deliver that will be over seen by the BCF delivery board. we have also introduced daily executive flow meetings and 3 times weekly operational tactical meetings that further support meeting the ambition set out in the plan.</p> | | |

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| Yes |
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