Key considerations for meeting the planning requirement These are the Key Lines of Enquiry (KLOEs) underpinning the Planning Requirements (PR)	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
Has a plan; jointly developed and agreed between CCG(s) and LA; been submitted?  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?  Do the governance arrangements described support collaboration and integrated care?  Where the strategic narrative section of the plan has been agreed across more than one HWB, have individual income, expenditure, metric and HICM sections of the plan been submitted for each HWB concerned?	Yes	BCF Planning Template agreed at BCF Operational Group on 2.9.19, BCF Executive Group on 3.9.19 and Health and Wellbeing Board on 18.9.19 which includes LA, CCG, VCS representatives and providers. Governance arrangements described under Tab 4 - Strategic Narrative - Item C. Rotherham's plan covers one HWB area.		
Is there a narrative plan for the HWB that describes the approach to delivering integrated health and social care that covers:  - Person centred care, including approaches to delivering joint assessments, promoting choice, independence and personalised care?  - A clear approach at HWB level for integrating services that supports the overall approach to integrated care and confirmation that the approach supports delivery at the interface between health and social care?  - A description of how the local BCF plan and other integration plans e.g. STP/ICSs align?  - Is there a description of how the plan will contribute to reducing health inequalities (as per section 4 of the Health and Social Care Act) and to reduce inequalities for people with protected characteristics under the Equality Act 2010? This should include confirmation that equality impacts of the local BCF plan have been considered, a description of local priorities related to health inequality and equality that the BCF plan will contribute to addressing.  Has the plan summarised any changes from the previous planning period? And noted (where appropriate) any lessons learnt?	Yes	The Narrative plan for the Health and Wellbeing Board is descriibed under Tab 4 - Strategic Narrative, Items A, B(i) and C. This also describes how we contribute to reducing health inequalities and any key achievements and lessons learnt since Rotherham's BCF Plan 2017-19.		
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?	Yes	The narrative plan sets out our strategic approach to using housing support, including DFG under Tab 4 - Strategic Narrative, Item B(ii). The DFG funding is also listed under Tab 5 Income - Row 9 and Tab 6 Expenditure - Row 37 and 38.		
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)?	Yes	Confirmation illustrated within Tab 6 - Expenditure Row 18 which shows that the total spend from the CCG minimum contribution on social care exceeds the minimimum required 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)?	Yes	Confirmation illustrated within Tab 6 - Expenditure Row 17 which shows that the total spend from the CCG minimum contribution on non-acute, NHS commissioned care exceeds the minimimum ringfence requirements.	
Does the BCF plan demonstrate a continued plan in place for implementing the High Impact Change Model for Managing Transfers of Care?  Has the area confirmed the current level of implementation and the planned level at March 2020 for all eight changes? Is there an accompanying overall narrative setting out the priorities and approach for ongoing implementation of the HICM? Does the level of ambition set out for implementing the HICM changes correspond to performance challenges in the system? If the current level of implementation is below established for any of the HICM changes, has the plan included a clear explanation and set of actions towards establishing the change as soon as possible in 2019-20?	Yes	The BCF plan shows there is a continued plan in place for implementing the High Impact Change Model within Tab 7 HICM, Changes 1 to 7, Row 15 to 22. Change 8 includes the work completed over last 12 months with the Enhanced Health Care in Care Homes framework.	
Have the planned schemes been assigned to the metrics they are aiming to make an impact on? 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? (tick-box) Is there an agreed plan for use of the Winter Pressures grant that sets out how the money will be used to address expected demand pressures on the Health system over Winter? Has funding for the following from the CCG contribution been identified for the area? - Implementation of Care Act duties? - Funding dedicated to carer-specific support? - Reablement?	Yes	The planned schemes have been assigned to BCF metrics and there is confirmation that he use of grant funding is in line with grant conditions. This is described under Tab 6 - Expenditure.	
Has the area set out the outputs corresponding to the planned scheme types (Note that this is only for where any of the specified set of scheme types requiring outputs are planned)? (auto-validated)	Yes	The outputs are illustrated in Tab 6 - Expenditure, Columns H and I.	
Is there a clear narrative for each metric describing the approach locally to meeting the ambition set for that metric? Is there a proportionate range of scheme types and spend included in the expenditure section of the plan to support delivery of the metric ambitions for each of the metrics?  Do the narrative plans for each metric set out clear and ambitious approaches to delivering improvements?  Have stretching metrics been agreed locally for:  - Metric 2: Long term admission to residential and nursing care homes  - Metric 3: Proportion of older people (65 and over) who were still at home 91 days after discharge from hospital into reablement	Yes	Clear narrative on metrics including stretch targets are described in Tab 8 - Metrics.	