Planning requirement	Full information required, or Key Line of Enquiry to be answered	Assurance checklist	Addressed/Answered	Where??
Narrative plan submitted for assurance at a regional level	First submission of narrative plan to the DCO team on date requested	Confirmation from DCO team		
	Submission signed by the local CCG(s) and local authority	Signed submission from LA & CCG		
	Final submission of narrative plan to the DCO team on date requested	Confirmation from DCO team		
	Submission signed off by local CCG(s), local authority, and the Health and Wellbeing Board	Signed final submission from LA, CCG and HWB chair		
Local agreement on funding arrangements	Has the narrative plan submission been signed off by all parties?	See KLOEs 1i and 1ii		
	Does the narrative plan provide a full overview of funding contributions for 2016-17?	Confirmation that an overview of funding contributions set out		
	Does this set out any changes from funding levels in 2015-16, and how these have been agreed?	Confirmation that plan includes consideration of changes and process		
	Does this include an assessment of the impact of these changes on services?	Confirmation that some assessment of the impact of changes has been conducted		
The local vision for health and social care services	A clear articulation of the local vision for health and social care services?	Local vision for health and social care services set out		
	A description of how the BCF plan contributes to the local implementation of the vision of the Five Year Forward View and the move towards fully integrated health and social care services by 2020?	BCF set within context of longer term strategic health and care planning		
	A clear comparison between current state and planned state post- plan delivery, described in terms of changes to patient and service user experience and outcomes?	Changes to be delivered through BCF plan set out, with consideration of impact		
	The precise aspects of the change the local area is intending to deliver using the BCF?	BCF changes / schemes set out		
An evidence base supporting the case for change;	A clear and quantified understanding of the precise issues that the BCF will be used to address in the local area?	Data driven explanation of issues BCF plan is addressing		
	Identification of the opportunity to improve quality and reduce costs, based on segmented risk stratification?	Local opportunity identified		
	A narrative that is bespoke to the local area?	Local narrative set out		
	of unmet need, issues of service quality, and inefficiencies in service delivery?	Case supported by use of data		
A coordinated and integrated plan of action for delivering that change;	A description of the specifics of the overarching governance and accountability structures in place locally to support integrated care?	BCF governance and accountabilities set out		
	A description of the specifics of the management and oversight in place to support the delivery of the BCF plan?	BCF management and oversight set out		

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	An articulation of the arrangements in place to support joint working?	Joint working arrangements set out	
	Key milestones associated with the delivery of the plan of action in 2016-17?	BCF plan milestones set out	
	A fully populated and comprehensive risk log, with evidence that it has been developed in partnership with all stakeholders and a description of how risks will be managed operationally?	Risk log in place	
A clear articulation of how they plan to meet each national condition;	See next section.	N/A	
An agreed approach to financial risk sharing and contingency.	A quantified pooled funding amount, if any, that is 'at risk'?	Risk share / contingency identified	
	Demonstration that this has been calculated using clear analytics and modelling?	Evidence of how risk share / contingency has been calculated	
	An articulation of non-financial risks associated with not meeting BCF targets in 2016-17?	Non-financial risk sharing set out	
	An articulation of the risk sharing arrangements in place across the health and care system, and how these are reflected in contracting and payment arrangements?	Overall risk sharing approach and mechanisms set out	
Plans to be jointly agreed	The BCF Plan, covering a minimum of the pooled Fund specified in the Spending Review, and potentially extending to the totality of the health and care spend in the HWB area, is signed off by the HWB itself, and by the constituent Councils and CCGs?	See KLOE 1.iv	
	In agreeing the plan, CCGs and local authorities have engaged with health and social care providers likely to be affected by the use of the Fund in order to achieve the best outcomes for local people?	Engagement of health and social care providers set out	
	There is joint agreement across commissioners and providers as to how the BCF will contribute to a longer term strategic plan?	E vidnece provider signe dup wqith plans set out in B.1.ii	
	This includes an assessment of future capacity and workforce requirements across the system?	Assessment of future capacity and workforce requirements set out	
	The implications for local providers have been set out clearly for HWBs so that their agreement for the deployment of the Fund includes recognition of the service change consequences?	Implications for local providers set out	
	As the Disabled Facilities Grant (DFG) will again be allocated through the BCF, local housing authority representatives have been involved in developing and agreeing the plan, in order to ensure a joined-up approach to improving outcomes across health, social	Engagement of local housing authority representatives evidenced	
Maintain provision of social care services	Local adult social care services will continue to be supported within their plans in a manner consistent with 2015-16?	Approach to supporting social care set out	
	The definition of support has been agreed locally and, as a minimum, maintains in real terms the level of protection as provided through the mandated minimum element of local BCF agreements of 2015-16?	Definition of support set out and agreed	

	In setting the level of protection for social care the local area has ensured that any change does not destabilise the local social and health care system as a whole?	Consideration of impact of set definition	
	The local area has included a comparison to the approach and figures set out in 2015-16 plans?	Comparison to 2015-16 set out	
	The approach is consistent with the 2012 Department of Health guidance to NHS England on the funding transfer from the NHS to social care in 2013-14?	Consistency with DH guidance confirmed	
Agreement for the delivery of 7-day services across health and social care to prevent unnecessary non-elective (physical and mental health) admissions to acute settings and to facilitate transfer to alternative care settings when clinically appropriate.	They will provide, or have a plan in place to provide, 7-day services (throughout the week, including weekends) across community, primary, mental health, and social care?	Plan for providing 7-day services set out	
	This approach will prevent unnecessary non-elective admissions (physical and mental health) through provision of an agreed level of infrastructure across out of hospital services 7 days a week?	Approach to providing out of hospital service 7 days a week set out	
	Their approach will support the timely discharge of patients, from acute physical and mental health settings, on every day of the week, where it is clinically appropriate to do so, avoiding unnecessary delayed discharges of care?	Impact of approach on discharge detailed	
	The approach is underpinned by a delivery plan for the move to seven-day services, which includes key milestones and priority actions for 2016-17.	Delivery plan set out	
Better data sharing between health and social care, based on the NHS number	locally, fostering a culture of secure, lawful and appropriate sharing of data to support better care?	Approach to ensuring right cultures, behaviours and leadership are place in palce	
	They are using the NHS Number as the consistent identifier for health and care services, and if they are not, that they have a plan to do so?	Use of NHS number as consistent identifier set out or plan in place	
	They are pursuing interoperable Application Programming Interfaces (APIs) (i.e. systems that speak to each other) with the necessary security and controls?	Approach to pursuing systems that speak to each other set out	
	They have the appropriate Information Governance controls in place for information sharing in line with the revised Caldicott principles and guidance made available by the Information Governance Alliance (IGA), and if not, when they plan for it to be in place?	IG controls for sharing information in line with guidance set out	
	They have ensured that local people have clarity about how data about them is used, who may have access and how they can exercise their legal rights (In line with the recommendations from the National Data Guardian review)?	Approach to communication with local people on use of their data set out	
	How these changes will impact upon the integration of services?	Link to overall impact on integration described	

Ensure a joint approach to	Identify which proportion of the local population will be receiving	Proportion of the local population that will be	
Ensure a joint approach to assessments and care planning and ensure that, where funding is used for integrated packages of care, there will be an accountable professional	case management and named care coordinator?	receiving case management and named care coordinator confirmed	
	Identify dementia services as a particularly important priority for better integrated health and social care services, supported by care coordinators (for example dementia advisors)?	Dementia identified as important priority, supported by care coordinators	
	A description of plans for health and social care teams to use a joint process to assess and plan care?	Plans for joint assessment and care planning set out	
	A plan with milestones demonstrating how and when this condition will be fully complied with?	Plan with milestones included	
Agreement on the consequential impact of the changes on the providers that are predicted to be substantially affected by the plans	The impact of local plans has been agreed with relevant health and social care providers?	Evidence of agreement provided	
	There has been public and patient and service user engagement in this planning, as well as plans for political buy-in?	Evidence of engagement and buy-in provided	
	These align to provider plans and the longer term vision for sustainable services?	Alignment to provider and longer term planning set out	
	Mental and physical health are considered equal, and plans aim to ensure these are better integrated with one another, as well as with other services such as social care?	Approach to better integrating mental and physical health set out	
	Demonstration of clear alignment between the overarching BCF plan, CCG Operating Plans, and the provider plans?	Explanation of alignment of CCG, BCF and provider plans set out	
Agreement to invest in NHS commissioned out of hospital services, which may include a wide range of services including social care	The local area has agreed how they will use their full share of the £1 billion that had previously been used to create the payment for performance element of the fund, in line with the national condition guidance?	Approach to meeting national condition confirmed	
	This is clearly set out within the summary and expenditure plan tabs of their BCF planning return template?	Figures in planning return match the explanation in the narrative plan	
	In reaching agreement they have considered whether a local risk sharing arrangement is required, supported by analysis of the likely risk of unplanned activity in the area based on their track record of performance?	Approach to setting risk share arrangements, including analysis of previous NEA performance, set out	
	This analysis is data driven and includes consideration of the long term trend in admissions and the success of schemes implemented to date?	Impact of trends and of schemes to avoid admissions both considered	
	Where a risk sharing arrangement has been agreed this is, where appropriate, consistent with guidance?	Risk sharing arrangement set out with reference to guidance	

	NHS commissioned out-of-hospital services and services that were previously paid for from funding made available as a result of achieving their non-elective ambition, continue in a manner consistent with 15-16?	Impact on any schemes funded by the previous P4P fund set out	
Agreement on local action plan to reduce delayed transfers of care (DTOC)	The local area has developed a local action plan for managing DTOC?	Local DTOC action plan set out	
	The local area has established their own stretching local DTOC target - agreed between the CCG, Local Authority and relevant acute and community trusts?	Local DTOC target set out with link to actions	
	The plan is within the context of the overall System Resilience Group plan for improving patient flow and as a result performance, acknowledging action is required by all partners both in hospital and in the community (e.g. reducing avoidable admissions, effective in- hospital management and timely and safe discharge)?	Link between this action plan and SRG planning set out	
	This target is reflected in CCG operational plans?	Confirmation provided that this aligns to	
<u> </u>	The local area has considered the use of local risk sharing	CCG plans Consideration of risk share options included	
	agreements with respect to DTOC, with clear reference to existing		
	In agreeing the plan, CCGs and local authorities have engaged with the relevant acute and community trusts and are able to demonstrate that the plan has been agreed with the providers?	Engagement with providers on DTOC plan confirmed	
	Clear lines of responsibility, accountabilities, and measures of assurance and monitoring?	Lines of responsibility, accountabilities, and measures of assurance and monitoring set	
	They have taken account of national guidance and best practice (as set out in technical guidance)	Consideration of national guidance and best practice set out	
	There has been engagement with the independent and voluntary sector providers?	Engagement with independent and voluntary sector providers on DTOC plan confirmed	
Non-elective admissions (General and Acute)	i. Has a target been set for this metric as part of the BCF Planning Return template?		
	has been reached?	Approach to setting NEA plan set out	
	iii. Does this include an analysis of previous performance and a realistic assessment of the impact of BCF initiatives on performance in 2016-17?	Previous performance and impact of schemes set out	
Admissions to residential and care homes;	i. Has a target been set for this metric as part of the BCF Planning Return template?	Confirmation from national team that KLOE has been met	
	ii. Does the narrative plan include an explanation for how this target has been reached?	Approach to setting residential admissions metric plan set out	
	iii. Does this include an analysis of previous performance and a realistic assessment of the impact of BCF initiatives on performance in 2016-17?	Previous performance and impact of schemes set out	
Effectiveness of reablement;	i. Has a target been set for this metric as part of the BCF Planning Return template?	Confirmation from national team that KLOE has been met	
	ii. Does the narrative plan include an explanation for how this target has been reached?	Approach to setting reablement metric plan set out	

	iii. Does this include an analysis of previous performance and a realistic assessment of the impact of BCF initiatives on performance in 2016-17?	Previous performance and impact of schemes set out	
Delayed transfers of care;	5 1 5	Confirmation from national team that KLOE has been met	
	ii. Does the narrative plan include an explanation for how this target has been reached?	SEE SECTION C8	
	iii. Does this include an analysis of previous performance and a realistic assessment of the impact of BCF initiatives on performance in 2016-17?	SEE SECTION C8	