

SCHEDULE 1 – SCHEME SPECIFICATION

Part 1 – Better Care Fund (BCF) Services Schedule 2026/27

TEMPLATE SERVICE SCHEDULE

Unless the context otherwise requires, the defined terms used in this Scheme Specification shall have the meanings set out in the Agreement.

1 OVERVIEW OF INDIVIDUAL SERVICE

1.1 Name of the Individual Scheme:

Better Care Fund – please refer to the tables for the individual schemes at section 5 – Services

1.2 Relevant context and background information

The Local Authority (LA) has responsibility for commissioning and/or providing social care services on behalf of the population of the borough of Brent.

The ICB has the responsibility for commissioning health services pursuant to the 2006 Act in the borough of Brent.

The Better Care Fund has been established by the Government to provide funds to local areas to support the integration of health and social care and to seek to achieve the National Conditions and Local Objectives. It is a requirement of the Better Care Fund that the ICB and the LA establish a partnership for this purpose.

Section 75 of the 2006 Act gives powers to local authorities and clinical commissioning groups to establish and maintain pooled funds out of which payment may be made towards expenditure incurred in the exercise of prescribed local authority functions and prescribed NHS functions.

Since 2015, the Government's aims around integrating health, social care and housing, through the Better Care Fund (BCF), have played a key role in the journey towards person-centred integrated care. This is because these aims have provided a context in which the NHS and local authorities work together, as equal partners, with shared objectives. The plans produced are presented and agreed by the Health and Wellbeing Board and represent a single, local plan for the integration of health and social care.

In every year of its operation, most local areas have agreed that the BCF has improved joint working and had a positive impact on integration.

There are no pooled funds.

2 AIMS AND OUTCOMES

The aims and benefits of the Partners in entering into this Agreement are to:

- (1) Improve the quality and efficiency of the health and social care to improve outcomes for residents.
- (2) Meet the National Conditions and Local Objectives for BCF;
- (3) Make more effective use of resources to support the integration of Health and Social Care.

3 THE ARRANGEMENTS

The ICB and LA are the lead commissioners for their respective projects. Each project is funded as a non-pooled fund.

4 FUNCTIONS

Under the Care Act 2014, local authorities are under a duty to carry out their care and support responsibilities with the aim of joining-up the services provided or other actions taken with those provided by the NHS and other health-related services (for example, housing or leisure services). This general requirement applies to all the local authority's care and support functions for adults with needs for care and support and for carers. The duty applies where the local authority considers that the integration of services will:

- promote the wellbeing of adults with care and support needs or carers in its area
- contribute to the prevention or delay of the development of additional support and care needs of citizens
- improve the quality of care and support in the local authority's area, including the outcomes that are achieved for local citizens

The BCF contributes to the LA fulfilling its Duty in accordance with the Care Act 2014.

5 SERVICES

A 1-year plan 2026/27 was signed off on TBC by NHS England. The plan for the year as it relates to Brent ICB and Brent LA schemes is outlined in the tables below. These are defined by funding streams.

(the final sign off from NHSE not yet received as at 25th June, but due imminently and date will be updated into this schedule once received.)

Total Funds £57,025,106

Disabled Facilities Grant (DFG)				£6,597,406				
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
43	DFG funding for home adaptations and independent living	Provision of an integrated universal access service to support home adaptations. Budget is pooled with other grants to provide this service.	£6,597,406.00	Housing related schemes	Disabled Facilities Grant (DFG)	Social Care	Local Authority	Local Authority

Local Authority Better Care Grant					£16,462,867			
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
1	Residential and Nursing Care placements	Spot provision of residential and nursing care placements	£5,567,931.00	Long-term residential/nursing home care	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
3	Supported Living placements for adults with MH or LD to maintain independence	Supporting a working age population, with mental health conditions or learning disabilities, to retain maximum independence whilst living in a supported living unit.	£3,417,698.00	Wider local support to promote prevention and independence	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
8	Social Worker supporting step-down beds	1 x SW to support patient throughput across all step down bed provision	£77,598.00	Discharge support and infrastructure	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
11	Home-care packages (line 1 of 2)	Provision of home care packages	£5,135,067.05	Long-term home-based social care services	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
20	Mental Health Hospital Discharge Team	Supporting discharge from acute hospitals, MH units and complex patients with LD and autism.	£700,398.95	Discharge support and infrastructure	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
25	Community Equipment	Services supporting safe discharges and enabling residents to live at home independently	£290,000.00	Assistive technologies and equipment	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
26	Technology Assistive Care Pilot	Pilot scheme to introduce tele assistive care equipment to support care and independence for residents in their own home, including older adults, LD and MH cohorts.	£200,000.00	Assistive technologies and equipment	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
28	Practice Development Lead for OT - standards and innovation	To drive improvements in professional practice across all OTs including training, and service delivery and flow across the system, monitoring standards and driving innovation.	£89,636.00	Wider local support to promote prevention and independence	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
31	Night Time Floating Support Service	Providing overnight packages in addition to day time calls, to support recovery at home, admission avoidance and reduce care home admissions. Focus on discharge from acute, but expanded service also able to accommodate a cohort of longer term patients.	£786,240.00	Discharge support and infrastructure	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
34	Clinical Specialist Support Nurse - to facilitate discharge from acute settings to care homes	Supporting discharge from acute hospitals to care homes by completing assessment process on behalf of homes to speed up discharge and encourage home to accept patients	£68,000.00	Discharge support and infrastructure	Local Authority Better Care Grant	Social Care	Local Authority	Local Authority
37	Admiral Nurses to support Carers of residents with dementia in the community	2 x Admiral Nurses based in community to support Carers of residents with dementia. Aligned to Neighbourhood / PCNs with highest needs.	£130,298.00	Support to carers, including unpaid carers	Local Authority Better Care Grant	Community Health	Local Authority	NHS Community Provider

NWL ICB Discharge Funding					£3,190,160			
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
2	P3 Beds to support discharge from acute hospitals	6 weeks funding to support discharge into residential care	£1,076,690.00	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	NWL ICB Discharge Funding	Social Care	Local Authority	Local Authority
23	Ashford Place - Dementia / Mental Health Early Discharge Support Team	Reducing hospital stays by facilitating community discharges, enhancing the independence, well-being, and health of local residents, inc. low-severity mental health concerns, learning disabilities, and dementia.	£140,000.00	Discharge support and infrastructure	NWL ICB Discharge Funding	Other (Ashford Place Dementia / Mental Health Hub)	NHS	Charity / Voluntary Sector
32	Complex patient short-term discharge support for assessment, Health funding	Health funding for complex care patients in P3 beds and other settings. For conditions including delirium, dementia and challenging behaviour. Funding covers additional staff required to facilitate, plus placements and 1 to 1 hours until baseline assessments inc. DSTs where appropriate can be completed.	£1,378,832.00	Discharge support and infrastructure	NWL ICB Discharge Funding	Community Health	Local Authority	Local Authority
33	Gap patient short-term discharge support, Health funding	Health funding for 'gap' patients where there are identified health needs e.g. NWB requiring POC at home to facilitate discharge, but no health pathway exists and being managed through the LA.	£139,834.00	Discharge support and infrastructure	NWL ICB Discharge Funding	Social Care	Local Authority	Local Authority
35	Dementia Behaviour Specialist - to provide transitional support for patients and carers after discharge - Line 1 of 2	Supporting both community and care home settings. Encouraging care homes to accept challenging placements, and supporting carers to reduce carer stress and support patients to remain at home for longer.	£194,744.00	Discharge support and infrastructure	NWL ICB Discharge Funding	Social Care	Local Authority	NHS Community Provider
113	Gap commissioning: Mildmay HIV and Homeless 1:1 (by ICB)	New scheme, title and funding confirmed NWL ICB	£59,000.00	Long-term home-based community health services	NWL ICB Discharge Funding	Continuing Care	NHS	NHS
114	Personal Health Budget Cards	New scheme, title and funding confirmed NWL ICB	£10,000.00	Personalised budgeting and commissioning	NWL ICB Discharge Funding	Other (NWL ICB)	NHS	NHS
115	Homeless Health NWL enhanced model.	Supporting vulnerable population with targeted services ensures consistent support across Borough boundaries.	£191,060.00	Long-term home-based community health services	NWL ICB Discharge Funding	Community Health	NHS	NHS

NHS Minimum Contribution to LA					£10,978,509			
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
4	Reablement Service - Line 1 of 2	Costs for packages of care to residents and staff delivering reablement services at home.	£3,076,462.09	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
6	Step-down beds co-located in extra care - Line 1 of 2	Block contract beds for step down patients co-located in extra care	£320,796.49	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
9	Physiotherapy assessment and support to ASC reablement program	Providing review and support to patients for Physiotherapy goals supporting ASC Reablement Care Planning and on-going needs.	£80,000.00	Discharge support and infrastructure	NHS Minimum Contribution to LA	Community Health	Local Authority	NHS Community Provider
10	Training for Reablement providers	Support for training, staff development, governance inc. dementia	£20,000.00	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
12	Home-care packages (line 2 of 2)	Provision of home care packages	£1,101,566.89	Long-term home-based social care services	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
13	Short-term 1 to 1 complex care in the community	Providing short-term 1 to 1 in the community, whilst placement sought, to facilitate hospital discharge or due to unpaid carer absence (e.g. their hospitalisation).	£400,000.00	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
14	Integrated Neighbourhood Team	Supporting neighbourhood development including teams aligned within PCN and community services	£621,773.12	Evaluation and enabling integration	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
15	BCF Lead	To own operational delivery for BCF planning, assurance and reporting for Brent.	£84,454.13	Evaluation and enabling integration	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
16	BCF Data / Systems Analyst	To provide BI capacity for all required discharge and other BCF related reporting, providing expertise and capacity to develop system led reporting functionality across all schemes, improving KPI tracking and analysis and supporting deep dives.	£72,305.29	Evaluation and enabling integration	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
17	Integrated Care Partnership (ICP) Team	Providing integrated care support with care coordinators	£326,085.29	Evaluation and enabling integration	NHS Minimum Contribution to LA	Community Health	NHS	NHS Community Provider
18	Bridging Service supporting patients on discharge home from acute hospitals	Deliver up to 5 days of care, to enable any patient ready to be discharged home on the same day. Patients are then assessed at home, for either reablement, or longer term needs.	£1,034,414.00	Discharge support and infrastructure	NHS Minimum Contribution to LA	Community Health	NHS	Local Authority
19	Acute Hospital Discharge Team	Funding entire HDT team including safeguarding function.	£2,411,996.87	Discharge support and infrastructure	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
21	Autism Community Co-ordinator to prevent admissions and aid independence	Co-ordinating and supporting residents with an autism diagnosis in the community to thrive, avoiding hospital admission, supporting carers and maintain maximum possible independence.	£59,378.55	Wider local support to promote prevention and independence	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
22	Housing Officers supporting discharge from acute and MH hospitals.	Supporting assessment, facilitating discharge and ongoing care planning for all patients with any housing need inc. Care Act, Human Rights or Housing criteria.	£212,168.36	Housing related schemes	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
24	Community Equipment OT supporting hospital discharges (equipment needs)	Ensuring swift provision of community equipment, aids and adaptations, prevention in health decline and mobility admission avoidance and carer support	£84,454.00	Assistive technologies and equipment	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
27	Social Care Community-based Trusted Assessment Team	Maximising independence and prevention through strength based practice in community via Trusted Assessments inc. OT, part of wider multi disciplinary team reducing risk of loss of independence by early intervention, inc. swift provision of community equipment, aids and adaptations, SW assessments and carer support.	£216,915.00	Wider local support to promote prevention and independence	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
29	Complex Care Training for Care Homes / Community Carers	Support for training, staff development, governance inc. dementia	£45,000.00	Support to carers, including unpaid carers	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
30	Community based Handyman service	Providing urgent care to individuals at home, helping prevent hospital admissions and supporting recovery after falls	£75,522.58	Wider local support to promote prevention and independence	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
36	Dementia Behaviour Specialist - to provide transitional support for patients and carers after discharge - Line 2 of 2	Supporting both community and care home settings. Encouraging care homes to accept challenging placements, and supporting carers to reduce carer stress and support patients to remain at home for longer.	£5,256.00	Discharge support and infrastructure	NHS Minimum Contribution to LA	Social Care	Local Authority	NHS Community Provider
38	Access team supporting safeguarding and admission avoidance	Delivering additional capacity into support timely community review and intervention related to safeguarding referrals.	£203,919.00	Wider local support to promote prevention and independence	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
39	Brent Carers service - Supporting unpaid carers, advice and wellbeing services	Supporting assessment, facilitating discharge and ongoing care planning for all patients with any housing need inc. Care Act, Human Rights or Housing criteria.	£229,415.34	Support to carers, including unpaid carers	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
40	Carer Engagement Officer providing information and support	Providing information, advice and support for carers	£62,380.00	Support to carers, including unpaid carers	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
41	NEW SCHEME - Hospital admission avoidance staff pilot placing OT and SW in A&E	Pilot to deploy 1 Occupational Therapist (OT) and 1 Social Worker (SW) from the Access Team into hospital A&E department to support admission avoidance and maintain patient safety while patients await a full needs assessment.	£144,610.00	Evaluation and enabling integration	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority
42	NEW SCHEME - Additional Market Oversight Manager in Commissioning to increase capacity and oversight for MH and complex providers	To add capacity to review existing provision across MH and Complex providers, identify gaps and source additional to add capacity to the system, enabling discharge and right sizing community placements.	£89,636.00	Discharge support and infrastructure	NHS Minimum Contribution to LA	Social Care	Local Authority	Local Authority

NHS Minimum Contribution to Health Spend					£19,175,092			
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
44	Contribution to Child Safeguarding Board	The Child Safeguarding Board, coordinates multi-agency efforts to protect children from harm, ensuring compliance with the Children Act 2004, and promoting best practices in safeguarding and child welfare.	£49,555.86	Other	NHS Minimum Contribution to Health Spend	Community Health	NHS	Local Authority
45	Contribution to Adult Safeguarding Board	The Adult Safeguarding Board, coordinates multi-agency efforts to protect vulnerable adults from abuse and neglect, ensuring compliance with the Care Act 2014, and promoting best practices in safeguarding.	£26,991.09	Other	NHS Minimum Contribution to Health Spend	Community Health	NHS	Local Authority
101	Community Rapid Response and Falls Service	Providing urgent care to individuals at home, helping prevent hospital admissions and supporting recovery after falls	£3,296,824.75	Urgent community response	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
102	Enhanced Care Home Support Team	Supporting care home patients with preventative measures to avoid hospital admissions	£1,037,860.26	Wider local support to promote prevention and independence	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
103	Community Based Schemes - Rehab beds in Furness Ward, Willesden.	Shared scheme to improve access to and outcomes for pathway 2 rehab for all ages, all NW London patients	£1,093,974.09	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
104	ICCS - Integrated Care Co-ordinators Service	Providing integrated care support with care coordinators	£235,405.60	Evaluation and enabling integration	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
105	Frailty and Integrated complex patient management service	Supporting patients with frailty and complex care needs	£1,368,420.40	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
106	Community and Neuro Rehab	Supporting recovery after neurological conditions or injuries, improving independence and quality of life.	£1,516,560.83	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
107	Tissue Viability	Supporting patients with tissue viability conditions in the community.	£516,212.80	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
108	Community Equipment	Services supporting safe discharges and enabling residents live at home independently	£2,056,425.74	Assistive technologies and equipment	NHS Minimum Contribution to Health Spend	Community Health	NHS	Local Authority
109	NHS Community Service - Ageing Well Anticipatory Care	NHS Community Service - Ageing Well Anticipatory Care	£199,349.79	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
110	NHS Community Service - Ageing Well Diabetes	NHS Community Service - Ageing Well Diabetes	£491,926.53	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
111	NHS Community Service - Ageing Well Fair shares of remainder / tackling inequalities	NHS Community Service - Ageing Well Fair shares of remainder/tackling inequalities	£289,785.91	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider
112	NHS Community Services - Community Nursing	Providing specialized healthcare at home, supporting patients with chronic illnesses, disabilities, or post-hospital recovery needs.	£6,995,798.55	Long-term home-based community health services	NHS Minimum Contribution to Health Spend	Community Health	NHS	NHS Community Provider

Additional North West London (NWL) ICB Contribution				£621,072				
Scheme ID	Scheme Name	Brief Description of Scheme	Expenditure 26/27	BCF Scheme Type	Source of Funding	Area of Spend	Commissioner	Provider
5	Reablement Service (Staffing) Line 2 of 2	Staff delivering reablement services at home	£411,990.49	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Additional North West London (NWL) ICB Contribution	Social Care	Local Authority	Local Authority
7	Step-down beds co-located in extra care - Line 2 of 2	Block contract beds for step down patients co-located in extra care	£209,081.51	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Additional North West London (NWL) ICB Contribution	Social Care	Local Authority	Local Authority

6 COMMISSIONING, CONTRACTING, ACCESS

Commissioning Arrangements:

Brent Local Authority is the Lead Commissioner for the LA Schemes, and these schemes are directly provided.

Disabled Facilities Grants (DFG) – these scheme costs are facilitated by the Council's Housing Directorate, following Occupational Therapy assessment.

Brent ICB is the Lead Commissioner for the ICB Schemes

Contracting Arrangements

- (a) All Brent LA Schemes are commissioned using established commissioning protocols.
- (b) All ICB services are commissioned using NHS Standard Contracts.
- (c) The Lead Partners for the contracted service is responsible for the contract and commissioning of the individual service.
- (d) The Lead Partner for the contracted service has authority to terminate a contract in line with stipulated terms. They also maintain responsibility for delivering the service as agreed in the BCF plan and in line with statutory duties if applicable. This will include identifying a nominated replacement partner which could include but is not limited to the alternative partner. Financial arrangements would form part of the new contract agreed.
- (e) Eligibility for access to each service is in line with the published criteria by service.

7 FINANCIAL CONTRIBUTIONS – 2026/27

The financial contribution of the ICB and the LA to any Non-Pooled Funds are set out below and fund the agreed schemes noted in paragraph 5 above. Any variations to these contributions must be agreed by the Partners in writing.

	All Funds are Non-Pooled	NHS Contribution		LA contribution		Uplift	Notes
		2025/2026	2026/2027	2025/2026	2026/2027		
1	Disabled Facilities Grant (DFG)			£6,597,406	£6,597,406	£0	
2	Local Authority Better Care Grant			£16,462,867	£16,462,867	£0	
3	NHS Minimum Contribution to LA	£10,511,117	£10,978,509			£467,392	
4	NHS Minimum Contribution to Health Spend	£18,782,861	£19,175,090			£392,229	
5	NWL ICB Discharge Funding	£3,124,905	£3,190,160			£65,255	Since 25/26 Discharge funding formally falls under the NHS Minimum for NHSE reporting, but is operationally tracked separately.
6	Additional North West London (NWL) ICB Contribution	£621,072	£621,072			£0	
	Total Funds	£33,039,955	£33,964,831	£23,060,273	£23,060,273	£924,876	

8 FINANCIAL GOVERNANCE ARRANGEMENTS

(2) Management of the Non-Pooled Fund

Contributions to Non-Pooled Funds are prescribed by the BCF Policy Framework and Annual Planning Requirements.

(3) Audit Arrangements

All partners shall promote a culture of probity and sound financial discipline and control. Annual scheme expenditure will be audited in accordance with the annual audit process of the relevant organisation.

All internal and external auditors and any other persons authorised by the partners will be given the right of access to any document, information, or explanation they require from any employee, or member of the Partnership, in order to carry out their duties. This right is not limited to financial information or accounting records and applies equally to premises or equipment used in connection with this Agreement. Access may be at any time without notice, provided there is good cause for access without notice.

(4) Financial Management

Each Partner will be responsible for establishing the financial and administrative support necessary to enable the effective and efficient management of the Non-Pooled Funds, meeting all required accounting and auditing obligations.

Where appropriate, contributions will be paid to Partners, invoices shall be paid for the agreed level of funding and shall be paid within 30 days of the invoice date.

Monitoring and reporting arrangements are in line with standard business protocols, managed jointly between the BCF Programme Team and Finance function.

9 VAT

Each partner will be responsible for the treatment of VAT in accordance with relevant guidance from HM Customs and Excise.

10 GOVERNANCE ARRANGEMENTS FOR THE PARTNERS

In accordance with the Department of Health and Social Care, Ministry for Levelling Up, Housing and Communities, Local Government, and NHS England - the Better Care Fund Planning Requirements for 2026-27 plans will be approved by NHS England following a joint NHS and local government assurance process at regional level.

The BCF plans for spending will be jointly agreed by the Local Authority and West and North London ICB.

A report will be presented to the Health and Wellbeing Board (HWBB) outlining the plans before the commencement of the services, or as soon as reasonably possible thereafter should there be delays from a government department or agency, or joint process impacting this requirement.

BCF Performance and Finance Reports will be presented to the Health and Wellbeing Board on an annual basis.

The North West London ICB and Brent Council will plan and develop the Better Care Plan and monitor and review performance.

Each Lead partner is responsible for;

- monitoring and managing contract performance in accordance with the service contracts including any contractual requirement in relation to creating efficiencies and savings where possible.

The nominated program manager is responsible for preparing and submitting to the ICB the;

- Quarterly reports for the Borough based partnership
- Completing the annual return on income and expenditure together
- Providing any other information as may be required by partners or the ICP to monitor the effectiveness of the non-pooled funds
- Providing any other information as required to enable the partners to complete their own report and returns within statutory timescales

11 NON FINANCIAL RESOURCES

The LA will provide the officer resources to plan, monitor and implement the BCF schemes and governance and funding conditions of reporting.

The ICB will provide the officer resources to plan, monitor and implement the BCF schemes and governance and funding conditions of reporting.

12 STAFF

Staff are employed directly by the Local Authority, ICB or Providers.

13 ASSURANCE AND MONITORING

Annual reports will be presented to the Health and Wellbeing Board.

14 LEAD OFFICERS

Partner	Name of Lead Officer	Title	Address	Email Address
Brent Council	Rachel Crossley	Corporate Director Service Reform and Strategy	Brent Civic Centre, Engineers Way, Wembley Park, Wembley, HA9 0FJ	rachel.crossley@brent.gov.uk
West & North London ICB	Sarah McDonnell-Davies	Chief Transformation Officer	W&NL ICB HQ, 15 Marylebone Road, London, NW1 5JD	sarah.mcdonnell1@nhs.net

15 INTERNAL APPROVALS

Internal approvals via governance process of the individual Partner. For the Council this is through the BCF Board.

16 RISK AND BENEFIT SHARE ARRANGEMENTS

For operational requirements in relation to the non-pooled funds the lead partner shall inform the BCF Lead and ICB Borough based team on a minimum of a quarterly basis and report any risks to effective delivery. This will trigger a co-ordinated assessment to be completed and formal action plan to be drawn up. The assessment is to cover any and all linked risks to partners, services or patients including financial.

For quarterly budget and financial monitoring / reporting of the non-pooled funds if a lead partner has recognised that there is there is a risk of an underspend or an overspend the lead partner shall inform the programme manager and report any risks to effective delivery. This will trigger a co-ordinated assessment to be completed and formal action plan to be drawn up. The assessment is to cover any and all linked risks to partners, services or patients including operational.

All assessments of risk and benefit are to be reviewed jointly by the BCF Programme team comprising representatives of both Local Authority and the Brent ICB team to ensure solutions, risk and benefits are effectively addressed.

17 REGULATORY REQUIREMENTS

The Partners shall cooperate with any investigation undertaken by the Care Quality Commission, the Parliamentary and Health Services Ombudsman and/or the Local Government Commissioner for England or any regulatory authority/body.

The Partners shall cooperate with any audit undertaken by the Audit Commission (or any successor body), the Department of Health and Social Care, NHS England and/or any local government audits.

The Partners will co-operate with any investigation undertaken by the Health Service Commissioner for England or the Local Government Commissioner for England (or both of them) in connection with this Agreement.

18 INFORMATION SHARING AND COMMUNICATION

The Partners must comply with the provisions of the Data Protection Laws and any other relevant data protection law in force so far as applicable to this Agreement and the Services and must indemnify each other against all actions, costs, expenses, claims, proceedings and demands which may be brought against the other Party for breach of statutory duty under these statutes which arises from the use, disclosure or transfer of Personal Data by the other Party or its servants or agents.

For the purposes of this Clause 18, the terms “Data Controller”, “Data Processor”, “Data Subject”, “Data” and “Processing” will have the meaning prescribed under the Data Protection Laws.

Each Partner and provider of the scheme must also comply with the published standards of their organisation, noting best practice and patient care at the core of operational policy.

19 DURATION AND EXIT STRATEGY

The ICB and Council BCF schemes are agreed on the updated plan for Financial Year 2026-27.

Each Partner is responsible for the detailed contract, budget, duration and delivery, planning service and design and continuance for the scheme they lead. Any termination of individual schemes would be in line with contracts agreed. A partner can only terminate contracts for which they are responsible and must raise all possible risk scenarios in a timely manner to the BCF Programme Team, who will escalate as required in line with their respective governance process. The process must assess risks to patient care and the wider program, including any actions required to mitigate.

Partners are responsible for ensuring that statutory duties for all services which form part of the Local Authority or ICBs are maintained.

The ownership of equipment or other assets belong to the schemes are considered the property of the Lead Partner. When a scheme closes, any assets must be assessed for appropriate re-distribution within related schemes delivered by the partner to support residents and patient care.

The Lead Partner holds responsibility and liability for all on going contracts including payments and debts related to the schemes they contract. This includes schemes solely funded through the BCF Programme or schemes for which BCF provides a portion of the funding.