Better Care Fund 2024-25 Q3 Reporting Template

3. National Conditions

Calested Haalth and Mallhaine Deards	Leicestershire		
Selected Health and Wellbeing Board:	Leicestersnire		Checklist
			Complete:
Has the section 75 agreement for your BCF plan been			Yes
finalised and signed off?	Yes		
If it has not been signed off, please provide the date			
section 75 agreement expected to be signed off			Yes
If a section 75 agreement has not been agreed please			
outline outstanding actions in agreeing this.			Yes
Confirmation of Nation Conditions			
		if the success is that the base was taken and an attention of the star day the successful to the	
		If the answer is "No" please provide an explanation as to why the condition was not met in the	
National Condition	Confirmation	quarter and mitigating actions underway to support compliance with the condition:	
1) Jointly agreed plan	Yes		
			Yes
2) Implementing BCF Policy Objective 1: Enabling people	Yes		
to stay well, safe and independent at home for longer			Yes
3) Implementing BCF Policy Objective 2: Providing the	Yes		
right care in the right place at the right time			Yes
a) Maintaining NUICh southikution to edult social source and	Vaa		
4) Maintaining NHS's contribution to adult social care and	res		
investment in NHS commissioned out of hospital services			Yes

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