



SHROPSHIRE HEALTH AND WELLBEING BOARD

Report

Meeting Date	18 September 2025					
Title of report	Better Care Fund (BCF) presentation and 2025-26 quarter one template					
This report is for (You will have been advised which applies)	Discussion and agreement of recommendations		Approval of recommendations (With discussion by exception)	x	Information only (No recommendations)	
Reporting Officer & email	Jackie Robinson, Senior Integrated Commissioning Lead Jackie.robinson16@nhs.org					
Which Joint Health & Wellbeing Strategy priorities does this report address? Please tick all that apply	Children & Young People	x	Joined up working			x
	Mental Health	x	Improving Population Health			x
	Healthy Weight & Physical Activity	x	Working with and building strong and vibrant communities			x
	Workforce	x	Reduce inequalities (see below)			x
What inequalities does this report address?	Access to services, particularly for carers, people living in rural areas, older age adults and people who need support from health and social care.					

1. Executive Summary

At the previous Health and Wellbeing Board (HWBB) members asked for a presentation on the Better Care Fund (BCF) programme to give Board members wider insight into the programme and the services that contribute to performance that is reported in quarterly templates to NHS England.

In addition, this report provides a summary of the Better Care Fund (BCF) 2025-26 quarter one template for Shropshire. In line with national conditions, the approval of the Health and Wellbeing Board (HWBB) chairs was obtained prior to submission, and retrospective endorsement is sought from HWBB.

2. Recommendations

It is recommended that:

- HWBB notes the BCF programme presentation (see appendix A).
- HWBB endorses the BCF 2025-26 quarter one template (see appendix B).

3. Report

3.1. Policy Framework

The [Better Care Fund policy framework 2025 to 2026](#) sets out the Government's aims for 2025-26:

- To be a first step in a broader shift to align with the government's Health Mission and the shift to a neighbourhood health approach.
- To better support patients and service users by enabling people to live more healthy and independent lives for longer.
- To support hospital flow and positively contribute to the NHS' ability to move towards constitutional standards.
- To make the BCF work better for local authorities and the NHS by reducing administrative burdens and providing greater flexibility to meet BCF objectives.

In line with the government's vision for health and care, the BCF Policy Framework also sets out the vision, funding, oversight and support arrangements, focused on two overarching objectives for the BCF in 2025-26:

- reform to support the shift from sickness to prevention.
- reform to support people living independently and the shift from hospital to home.

A national condition is for quarterly templates to be completed, approved by the local HWBB and submitted to the national BCF Team. The deadline for submission of the quarter one template was 15 August 2025. In line with national conditions, the approval of the Chairs of Health and Wellbeing Board (HWBB) was obtained prior to submission.

3.2. 2025-26 BCF Plan

On 19 June 2025, HWB approved Shropshire's 2025-26 BCF Plan. This consists of:

- A narrative plan.
- A planning template which articulates the goals for the metrics which are used locally and nationally to monitor progress towards the Plan.
- An intermediate care (including short-term care) capacity and demand plan.

For 2025-26 there are three headline metrics:

- Emergency admissions (emergency admissions to hospital for people aged over 65 per 100,000 population).
- Discharge delay (average length of discharge delay for all acute adult patients, derived from a combination of proportion of adult patients discharged from acute hospitals on their discharge ready date (DRD) and, for those adult patients not discharged on their DRD, average number of days from the DRD to discharge).
- Residential admissions (long term admissions to residential care homes and nursing homes for people aged 65 and over per 100,000 population).

As reported throughout 2024-25, Shropshire and Telford Hospital NHS Trust's (SaTH's) data is inaccurate/incomplete due to the implementation of a new EPR system. The issue is expected to continue until 2025-26 quarter two. This meant that it was not possible to include an accurate metric plan for emergency admissions as part of the 2025-26 BCF Plan.

The discharge delay metric is new for 2025-26. The System does not yet record data in a way that enabled metric planning for the 2025-26 BCF Plan. This is being addressed and will be resolved in quarter two to enable metric planning and performance reporting for quarters three and four.

National assurance with a local condition has been received for the 2025-26 BCF Plan. The condition is:

Review the goals set for discharge and emergency admission metrics and, if necessary, adjust in light if improvements in the quality of data used to inform these goals, finalised ICB operational plans and the need to maximise delivery against BCF objectives.

This review will take place at the end of quarter two, when data quality has been tested.

3.3. Performance

In the absence of data to report performance for the metrics, narrative has been used to provide assurance of performance.

Emergency admissions

The Short Term Assessment and Reablement Team (START) continues to prevent unnecessary hospital admissions.

A refresh of the Urgent and Elective Care Programme at SaTH took place in June 2025 to ensure that the focus is on delivery of improvement to reduce risk to patient safety and to ensure patients receive their care in the right place. The Direct Access workstream specifically looks at admission

avoidance and sits within the Capacity and Flow Programme within SaTH. There is also a workstream looking at emergency department processes.

Delayed discharges

Locality data for the average number of days from No Criteria to Reside status to discharge shows that improvement has been made when comparing 2025-26 quarter one performance to 2024-25 quarter one performance.

Residential admissions

Locality data shows strong performance, with a quarter one outturn of 78 people admitted to residential and nursing care homes against a target of 100 people.

Risk assessment and opportunities appraisal (NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)	Demand and capacity continue to be a key area of focus and monitoring as demand increases. Due to SaTH's implementation of the ERP system, performance relating to the metrics doesn't accurately reflect performance, but continues to be monitored using local systems.	
Financial implications (Any financial implications of note)	Financial updates are included in the quarter 1 template (see appendix 2). There is no assurance of funding for 2026 onwards.	
Climate Change Appraisal as applicable	Climate change appraisal is carried out as part of commissioned activity.	
Where else has the paper been presented?	System Partnership Boards	
	Voluntary Sector	
	Other	
List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information) None		
Cabinet Member (Portfolio Holder) Councillor Ruth Houghton, Cabinet Member for Adult and Children Social Care		
Appendices Appendix A. Better Care Fund – presentation Appendix B. Better Care Fund 2025-26 – Q1 reporting template		