Better Care Fund 2025-26 Q2 Reporting Template

4. Metrics for 2025-26

Selected Health and	Wellbeing Board:	Leicestershire

For metrics time series and more details:

BCF dashboard link
BCF 25/26 Metrics Handbook

For metrics handbook and reporting schedule:

4.1 Emergency admissions

		Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26
Plan		Plan											
	Rate	1,516.4	1,610.6	1,669.0	1,685.3	1,714.5	1,558.6	1,626.8	1,587.8	1,633.3	1,630.1	1,539.1	1,691.8
	Number of												
Emergency admissions to hospital for people aged	Admissions 65+	2,335	2,480	2,570	2,595	2,640	2,400	2,505	2,445	2,515	2,510	2,370	2,605
65+ per 100,000 population													
	Population of 65+	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0	153,982.0

Assessment of whether goal has been met in Q2:	On track to meet goal	
If a goal has not been met please provide a short explanation, including noting any key mitigating actions.		
You can also use this box to provide a very brief explanation of overall progress if you wish.	ita for July and August shows that we have had 5105 admissions (rate of 3244) aga eet the targets set. The population data has been changed to reflect the new DHSC en 12,895 admissions (rate of 8195) against year to date targets of 12,620 (rate of	C estimations. For the year to date we are slightly off target as there have

Did you use local data to assess against this headline metric?

No



4.2 Discharge Delays

Original Plan	Apr 25 Plan	May 25 Plan	Jun 25 Plan	Jul 25 Plan				Nov 25 Plan	Dec 25 Plan	Jan 26 Plan	Feb 26 Plan	
Average length of discharge delay for all acute adult patients (this calculates the % of patients discharged after their DRD, multiplied by the average number of days)	0.45	0.44	0.43	0.42	0.41	0.40	0.38	0.38	0.36	0.35	0.34	0.33
Proportion of adult patients discharged from acute hospitals on their discharge ready date	85.0%	85.4%	85.7%	86.1%	86.5%	86.8%	87.2%	87.5%	87.9%	88.3%	88.6%	89.0%
For those adult patients not discharged on DRD, average number of days from DRD to discharge	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00	3.00

Assessment of whether goal has been met in Q2:	Not on track to meet goal	
If a goal has not been met please provide a short explanation, including noting any key mitigating actions.	Currently the system is stepping up the includes ensuring earlier referrals prior	strategic discharge oversight group with actions specifically linked to the data targets for this area of work. This to MOFD. This is a multi-partner forum to ensure the mitigating actions resolve areas where improvements are ched and delays are minimised during the winter months.
You can also use this box to provide a very brief explanation of overall progress if you wish.		nat we are approximately 0.9% off the target set. This we feel is recoverable over the remainder of the year with 12 discharges. The target in days for these pathways is 3.5 on average with current performance at 4 days.

Did you use local data to assess against this headline metric?	
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If yes, which local data sources are being used?

4.3 Residential Admissions

				2025-26	2025-26	2025-26	
			2024-25 Full	Plan Q1	Plan Q2	Plan Q3	2025-26
		2023-24 Full	Year CLD	(April 25-	(July 25-	(Oct 25-Dec	Plan Q4 (Jan
Actuals + Original Plan	Actuals + Original Plan			June 25)	Sept 25)	25)	26-Mar 26)
1 t t t	Rate	509.8	535.1	140.9	140.9	140.9	140.3
Long-term support needs of older people (age 65	Number of						
and over) met by admission to residential and nursing care homes, per 100,000 population	admissions	785.0	824.0	217.0	217.0	217.0	216.0
nursing care nomes, per 100,000 population							
	Population of 65+*	153982.0	153982.0	153982.0	153982.0	153982.0	153982.0

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