



HEALTH AND WELLBEING BOARD: 15th JUNE 2026

REPORT OF DIRECTOR OF ADULTS AND CULTURAL SERVICES

BETTER CARE FUND YEAR END 2025-26 PERFORMANCE

Purpose of report

1. The purpose of this report is to provide the Health and Wellbeing Board (HWBB) with the year-end performance reporting of the Better Care Fund (BCF) programme for 2025-26.

Recommendation

2. It is recommended that:
 - a) The performance against the Better Care Fund (BCF) outcome metrics, and the positive progress made in transforming health and care pathways in 2025-26 be noted;
 - b) The Board notes that the year-end BCF 2025-26 template, attached as the appendix to the report, has been approved and was submitted to NHS England for the 5th June, 2026 submission deadline; This was completed under the delegated powers of the Chief Executive as the submission date was prior to the HWBB meeting 15th June 2026.

Policy Framework and Previous Decisions

3. The BCF policy framework was introduced by the Government in 2015, with the first year of BCF plan delivery being 2015/16. The Cabinet in February 2014 authorised the Health and Wellbeing Board to approve the BCF Plan and plans arising from its use.
4. The Better Care Fund Year End 2025-26 was approved by the Chief Executive of Leicestershire County Council on 28th May using delegated powers.
5. The Better Care Fund Year End 2025-26 was submitted to NHS England before the submission date of 5th June 2026.

Background.

6. On 12th March 2026 the national BCF team published the year end template for reporting the position for the 2025-26 financial year which requires approval by the HWBB.
7. The aim of the report and template is to inform the HWBB of progress against integration priorities and BCF delivery. BCF quarterly reporting can be used by local areas, alongside any other information to help inform HWBs on progress with integration and the BCF. It is also intended to inform BCF national partners as well as those responsible for delivering the BCF plans at a local level (including integrated care boards, local authorities and service providers).
8. The year end template is attached as Appendix A to this report. The NHS England submission deadline was the 5th June 2026.
9. The template consists of tabs that update progress against the following:
 - Whether the four national conditions detailed in the Better Care Fund planning requirements for 2025-26 continue to be met through the delivery of the plan.
 - A confidence assessment on achieving the metric targets for each of the BCF metrics which includes a brief commentary outlining the challenges faced in achieving the target along with any support needs and successes that have been achieved.
 - Confirms the level of income received within the HWBB area against actual expenditure and spend and activity against each of the schemes where known activity can be reported.
 - Year-end feedback.

BCF Income

10. The approved BCF Plan for Leicestershire for 2025-26 totalled £84.4million. This included the initial allocation of Disabled Facilities Grant funding of £5.5 million. Later in the year the Government announced a further £0.4m of DFG for Leicestershire.
11. The table below has the planned income for 2025-26 taking the additional DFG into account:

ICB minimum NHS contribution	£57,070,979
LA Better Care Grant	£21,824,275
Disabled Facilities Grant	£5,906,353
Total	£84,801,607

12. Discharge grant funding elements seen in previous years have been rolled into main funding elements for 2025-26. The Local Authority discharge grant has been incorporated into the previous Improved Better Care Grant (iBCF) and is renamed the LA Better Care Grant.
13. The overall uplift to the NHS minimum contribution was 1.7%. However, the ICB discharge grant element has been incorporated into the NHS minimum contribution and forms part of the 3.9% uplift to ASC BCF schemes that are paid for from the NHS minimum contribution. As in previous years, the uplift will contribute to the costs of the pay award, provider fee uplifts and other cost pressures.
14. It should be noted that NHS England/Improvement expectation is that all allocations are spent fully in year. Identification of underspends and overspends are for internal decision-making purposes and not external reporting.

BCF Metrics

15. The below table shows the BCF metrics for this financial year, the targets and actuals where available:

Metric	Target	Actual	Commentary
Emergency admissions to hospital for people aged 65+ per 100,000 population	1661	1469	On Track
DISCHARGE DELAY 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)"	89%	86.2%	NOT ON TARGET YTD data shows that we are currently off target against planned performance. Throughout 25-26, Leicestershire performance has been off target for the 'Proportion of adult patients discharged from acute hospitals on their discharge ready date' indicator requirements. The target was to achieve 89% by the end of the financial year. This has not been achieved, with the best individual monthly performance in June of 86.2%. In 25-26, Leicestershire consistently

			performed better than the East Midlands average.
RESIDENTIAL Admissions Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	867	858	NOT ON TARGET Residential admissions have increased during 2025/26, and the current figure for total admissions during the twelve-month period is 972 (note this is based on the old SALT logic, and not the newer CLD method). More detailed analysis is in progress to try to better understand the reasons for this recent increase.

Update against national conditions for the 2025-26 Plan

16. For 2025-26 year end reporting all national conditions have been reported as being met. For reference, these are listed below.
17. **National Condition 1** - Plans jointly agreed. Local authorities and Integrated Care Boards (ICBs) must agree a joint plan, signed off by the Health and Wellbeing Board (HWB), to support the policy objectives of the BCF for 2025 to 2026. The development of these plans must involve joint working with local NHS trusts, social care providers, voluntary and community service partners and local housing authorities. These plans must be submitted to BCF national and regional teams and must include locally agreed goals against these 3 headline metrics (see below) and an intermediate care capacity and demand plan.
18. **National Condition 2** – Implementing the objectives of the Better Care Fund
Local authorities and ICBs must, in their joint HWB plans, show how health and social care services will support improved outcomes against the fund's 2 principal policy objectives:
 - To support the shift from sickness to prevention – including timely, proactive and joined-up support for people with more complex health and care needs; use of home adaptations and technology; and support for unpaid carers.
 - To support people living independently and the shift from hospital to home – including help prevent avoidable hospital admissions; achieve more timely and effective discharge from acute, community and mental health hospital settings; support people to recover in their own homes (or other usual place of

residence); and reduce the proportion of people who need long-term residential or nursing home care.

19. **National Condition 3** – Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care. The NHS minimum contribution to adult social care must be met and maintained by the ICB and will be required to increase by at least 3.9% in each HWB area. Local authorities must comply with the grant conditions of the Local Authority Better Care Grant and of the Disabled Facilities Grant. HWB plans will also be subject to a minimum expectation of spending on adult social care, which are published alongside the BCF planning requirements. HWBs should review spending on social care, funded by the NHS minimum contribution to the BCF, to ensure the minimum expectations are met, in line with the national conditions.

20. **National Condition 4** – Complying with oversight and support processes

Local areas and HWBs are required to engage with BCF oversight and support processes, which include:

- a regionally led oversight process;
- enhanced oversight where there are performance concerns.

Circulation under the Local Issues Alert Procedure

21. None

Background papers

Better Care Fund Planning Requirements 2025-26:

<https://www.england.nhs.uk/long-read/better-care-fund-planning-requirements-2025-26/#planning-expectations-meeting-national-conditions>

Better Care Fund Policy Framework 2025-26:

<https://www.gov.uk/government/publications/better-care-fund-policy-framework-2025-to-2026/better-care-fund-policy-framework-2025-to-2026#bcf-objectives>

Officer to Contact

Jon Wilson Director of Adults and Communities

Telephone: 0116 3057454

Email: jon.wilson@leics.gov.uk

Lisa Carter Health and Social Care Integration Service Manager

Telephone: 0116 3050786

Email: lisa.carter@leics.gov.uk

List of Appendices

Appendix A – Year End Template 2025-26

Relevant Impact Assessments

Equality and Human Rights Implications

22. The BCF aims to improve outcomes and wellbeing for the people of Leicestershire, with effective protection of social care and integrated activity to reduce emergency and urgent health demand.
23. An equalities and human rights impact assessment has been undertaken which is provided at <http://www.leicestershire.gov.uk/sites/default/files/field/pdf/2017/1/11/better-care-fund-overview-ehria.pdf>.

This concluded that the BCF will have a neutral impact on equalities and human rights.
24. A review of the assessment was undertaken as part of the BCF submission for 2021.

Partnership Working and associated issues

25. The delivery of the BCF plan and the governance of the associated pooled budget is managed in partnership through the collaboration of commissioners and providers in Leicestershire.
26. Day to day oversight of delivery is via the Integration Executive through the scheme of delegation agreed via the Integration Executive's terms of reference which have been approved by the Health and Wellbeing Board.
27. The delivery of the Leicestershire BCF ensures that several key integrated services are in place and contributing to the system wide changes being implemented through the five-year plan to transform health and care in Leicestershire, known as the Sustainability and Transformation Partnerships <http://www.bettercareleicester.nhs.uk/>