Better Care Fund 2025-26 Q2 Reporting Template

2. Cover

Version 1.0

Please Note:

- *The BCF quarterly reports are categorised as 'Management Information' and data from them will be published in an aggregated form on the NHSE website. This will include any narrative section. Also a reminder that as is usually the case with public body information, all BCF information collected here is subject to Freedom of Information requests.*

- *At a local level it is for the HWB to decide what information it needs to publish as part of wider local government reporting and transparency requirements. Until BCF information is published, recipients of BCF reporting information (including recipients who access any information placed on the BCE) are prohibited from making this information available on any public domain or providing this information for the purposes of journalism or research without prior consent from the HWB (where it concerns a single HWB) or the BCF national partners for the aggregated information.*
- *All information will be supplied to BCF partners to inform policy development.*
- *This template is password protected to ensure data integrity and accurate aggregation of collected information. A resubmission may be required if this is breached.*

			Checklist Complete:
Health and Wellbeing Board:	Dorset		Yes
Completed by:	Sarah Sewell		Yes
E-mail:	sarah.sewell@dorsetcouncil.gov.uk		Yes
Contact number:	1305221256		Yes
Has this report been signed off by (or on behalf of) the HWB Chair at the time of submission?	No		Yes
If no, please indicate when the report is expected to be signed off:	Wed 19/11/2025	<< Please enter using the format, DD/MM/YYYY	Yes

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3. National Conditions

Selected Health and Wellbeing Board: Dorset

Confirmation of Nation Conditions			Checklist Complete:
National Condition	**Confirmation**	**If the answer is "No" please provide an explanation as to why the condition was not met in the quarter and mitigating actions underway to support compliance with the condition:**	
1) Plans to be jointly agreed	Yes		Yes
2) Implementing the objectives of the BCF	Yes		Yes
3) Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care (ASC) and Section 75 in place	Yes	We are complying with the grant and funding consitions, but we are delayed in updating our Section 75, we have live work in train to complete this.	Yes
4) Complying with oversight and support processes	Yes		Yes

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4. Metrics for 2025-26

Selected Health and Wellbeing Board: Dorset

For metrics time series and more details: BCF dashboard link

For metrics handbook and reporting schedule: BCF 25/26 Metrics Handbook

4.1 Emergency admissions

Plan

		Apr 25 Plan	May 25 Plan	Jun 25 Plan	Jul 25 Plan	Aug 25 Plan	Sep 25 Plan	Oct 25 Plan	Nov 25 Plan	Dec 25 Plan	Jan 26 Plan	Feb 26 Plan	Mar 26 Plan
Emergency admissions to hospital for people aged 65+ per 100,000 population	Rate	1,476.7	1,510.9	1,422.8	1,451.9	1,518.6	1,368.1	1,557.0	1,401.4	1,480.9	1,502.3	1,361.2	1,426.2
	Number of Admissions 65+	1,727	1,767	1,664	1,698	1,776	1,600	1,821	1,639	1,732	1,757	1,592	1,668
	Population of 65+	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0	116,952.0

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.	Emergency Admissions Actuals: April: 1,587 May: 1,590 June: 1,603 July: 1,603 August: 1,515 Sept (estimated) 1,558
You can also use this box to provide a very brief explanation of overall progress if you wish.	The future care programme has a workstream focused on alternatives to admission. The key metrics are 1) the number of SDEC starts per week, Number of patients referred to community services from ED front door and the number of H@H admissions per week. To achieve this the A2A is: 1) Improving the number of patients pulled from ED front door into SDEC's 2) Improving the flow from SDECs and ED to H@H 3) Established a front door to community MDT with community services to review and refer patients from ED to community services.

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

If yes, which local data sources are being used?	DiiS System visability dashboard.

4.2 Discharge Delays

Original Plan

	Apr 25 Plan	May 25 Plan	Jun 25 Plan	Jul 25 Plan	Aug 25 Plan	Sep 25 Plan	Oct 25 Plan	Nov 25 Plan	Dec 25 Plan	Jan 26 Plan	Feb 26 Plan	Mar 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)	0.90	1.31	1.40	1.22	1.09	1.08	0.80	0.61	0.84	1.04	0.85	0.83
Proportion of adult patients discharged from acute hospitals on their discharge ready date	87.1%	85.5%	82.5%	86.4%	87.9%	88.0%	90.0%	91.3%	89.5%	88.5%	89.4%	89.6%
For those adult patients not discharged on DRD, average number of days from DRD to discharge	7.00	9.00	8.00	9.00	9.00	9.00	8.00	7.00	8.00	9.00	8.00	8.00

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.	Discharge Delays Actuals: April: 86.8% May: 87.6% June: 87.9% July: 88.0% August: 86.4% Sept (estimated): 87.4%
You can also use this box to provide a very brief explanation of overall progress if you wish.	The future care programme has a workstream focused on Transfer of Care (TOC). The TOC workstream has 2 key metrics: Reducing LOS for those with no criteria to reside and increasing the number of people returning home. To achieve this TOC has 3 key area of focus: 1) Improving early discharge planning. 2) Bringing decision making into one place where multi agency teams work together to increase efficiency around discharge planning. 3) Improving how we record and track what is happening for people requiring care and support to leave hospital so we have greater clarity on next actions for people.

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

If yes, which local data sources are being used?	DiiS System Vsability Dashboard

4.3 Residential Admissions

Actuals + Original Plan

		2023-24 Full Year Actual	2024-25 Full Year CLD Actual	2025-26 Plan Q1 (April 25-June 25)	2025-26 Plan Q2 (July 25-Sept 25)	2025-26 Plan Q3 (Oct 25-Dec 25)	2025-26 Plan Q4 (Jan 26-Mar 26)
Long-term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population	Rate	493.4	411.3	114.6	113.7	110.3	89.8
	Number of admissions	577.0	481.0	134.0	133.0	129.0	105.0
	Population of 65+*	116952.0	116952.0	116952.0	116952.0	116952.0	116952.0

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.	We are continuing to monitor this metric as Q2 performance, like Q1, it remains ahead of target. Now that ONS mid year estimates have been released for 2024, we will review inline with other data sets to review our target.

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

If yes, which local data sources are being used?	Statutory and internal data sets

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5. Income & Expenditure

Selected Health and Wellbeing Board: Dorset

Source of Funding	2025-26 Planned Income	Updated Total Plan Income for 25-26	DFG Q2 Year-to-Date Actual Expenditure
DFG	£5,152,517	£5,152,517	£2,729,218
Minimum NHS Contribution	£39,145,707	£39,145,707	
Local Authority Better Care Grant	£15,359,816	£15,359,816	
Additional LA Contribution	£59,440,839	£59,440,839	
Additional NHS Contribution	£36,997,733	£36,997,733	
Total	**£156,096,612**	**£156,096,612**	

	Original	Updated	% variance
Planned Expenditure	**£156,096,612**	£156,096,612	**0%**

		% of Planned Income
Q2 Year-to-Date Actual Expenditure	£72,413,187	**46%**

If Q2 year to date actual expenditure is exactly 50% of planned expenditure, please confirm this is accurate or if there are limitations with tracking expenditure.	

If planned expenditure by activity has changed since the original plan, please confirm that this has been agreed by local partners. If that change in activity expenditure is greater than 5% of total BCF expenditure, please use this box to provide a brief summary of the change.	N/A