HM Government

NHS England

Better Care Fund 2025-26 Planning Template

2. Cover

Version 1.5

Please Note:
- The BCF planning template is categorised as 'Management Information' and data from them will be published in an aggregated form on the NHS England website and gov.uk. This will include any narrative section. Some data may also be published in non-aggregated form on gov.uk. 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 Better Care Exchange) 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 (MHCLG, DHSC, NHS England) 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.

Governance and Sign off

Health and Wellbeing Board:	Wandsworth
Confirmation that the plan has been signed off by Health and Wellbeing Board ahead of submission - Plans should be signed off ahead of submission.	No
If no indicate the reasons for the delay.	There is no Health and Wellbeing Board between final national submission and HWB.
If no please indicate when the HWB is expected to sign off the plan:	Thu 26/06/2025 << Please enter using the format, DD/MM/YYYY

Submitted by:	Brian Roberts
Role and organisation:	Head of Health and Care Integration, Richmond and Wandsworth
E-mail:	brian.roberts@richmondandwandsworth.gov.uk
Contact number:	(020) 8871 7653
Documents Submitted (please select from drop down) **In addition to this template the HWB are submitting the following:**	Narrative C&D National Template

	Role:	Professional Title (e.g. Dr, Cllr, Prof)	First-name:	Surname:	E-mail:	Organisation
Health and wellbeing board chair(s) sign off	Health and Wellbeing Board Chair	Cllr	Graeme	Henderson	cllr.G.Henderson@wandsworth.gov.uk	
	Health and Wellbeing Board Chair					
Named Accountable person	Local Authority Chief Executive	Mr	Brian	Reilly	Brian.Reilly@richmondandwandsworth.gov.uk	
	ICB Chief Executive 1	Ms	Katie	Fisher	katie.fisher@swlondon.nhs.uk	South West London Integrated Care Board
	ICB Chief Executive 2 (where required)					
	ICB Chief Executive 3 (where required)					
Finance sign off	LA Section 151 Officer	Ms	Fenella	Merry	Fenella.Merry@richmondandwandsworth.gov.uk	
	ICB Finance Director 1	Mrs	Helen	Jameson	helen.jameson@swlondon.nhs.uk	South West London Integrated Care Board
	ICB Finance Director 2 (where required)					
	ICB Finance Director 3 (where required)					
Area assurance contacts	Local Authority Director of Adult Social Services	Mr	Jeremy	DeSouza	Jeremy.DeSouza@richmondandwandsworth.gov.uk	
	DFG Lead	Mr	Dave	Worth	dave.worth@richmondandwandsworth.gov.uk	
	ICB Place Director 1	Mr	Mark	Creelman	mark.creelman@swlondon.nhs.uk	South West London Integrated Care Board
Please add any additional key contacts who have been responsible for completing the plan	ICB Place Director 2 (where required)					
	ICB Place Director 3 (where required)					

Assurance Statements

National Condition	Assurance Statement	Yes/No	If no please use this section to explain your response
National Condition One: Plans to be jointly agreed	The HWB is fully assured, ahead of signing off that the BCF plan, that local goals for headline metrics and supporting documentation have been robustly created, with input from all system partners, that the ambitions indicated are based upon realistic assumptions and that plans have been signed off by local authority and ICB chief executives as the named accountable people.	Yes	
National Condition Two: Implementing the objectives of the BCF	The HWB is fully assured that the BCF plan sets out a joint system approach to support improved outcomes against the two BCF policy objectives, with locally agreed goals against the three headline metrics, which align with NHS operational plans and local authority adult social care plans, including intermediate care capacity and demand plans and, following the consolidation of the Discharge Fund, that any changes to shift planned expenditure away from discharge and step down care to admissions avoidance or other services are expected to enhance UEC flow and improve outcomes.	Yes	
National Condition Three: Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care (ASC)	The HWB is fully assured that the planned use of BCF funding is in line with grant and funding conditions and that funding will be placed into one or more pooled funds under section 75 of the NHS Act 2006 once the plan is approved	Yes	
	The ICB has committed to maintaining the NHS minimum contribution to adult social care in line with the BCF planning requirements.	Yes	
National Condition Four: Complying with oversight and support processes	The HWB is fully assured that there are appropriate mechanisms in place to monitor performance against the local goals for the 3 headline metrics and delivery of the BCF plan and that there is a robust governance to address any variances in a timely and appropriate manner	Yes	

Data Quality Issues - Please outline any data quality issues that have impacted on planning and on the completion of the plan

Kingston Hospital data appears to be missing from the SUS data in the metrics tab due to the ODS code change between Kingston Hospital NHS Foundation Trust and Kingston & Richmond NHS Foundation Trust back to 1st April 2025, so have had to use other data sources to complete metrics. This has meant that th rate of emergency admissions appears to be rapidly increasing when compared to published data. In addition, Kingston Hospital's DRD data ha sonly been accepted in November 2024, so this may have a material affect on the future measurement of the DRD metric throughout 2025-26 as reporting of this data improves.

Question Completion - When all questions have been answered and the validation boxes below have turned green, please send the template to the Better Care Fund Team england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. Please also copy in your Better Care Manager.

Template Completed

	Complete:
2. Cover	Yes
4. Income	Yes
5. Expenditure	Yes
6. Metrics	Yes
7. National Conditions	Yes

Better Care Fund 2025-26 Planning Template

3. Summary

Selected Health and Wellbeing Board: Wandsworth

Income & Expenditure

Funding Sources	Income	Expenditure	Difference
DFG	£2,183,892	£2,183,892	£0
NHS Minimum Contribution	£31,966,606	£31,966,606	£0
Local Authority Better Care Grant	£20,954,056	£20,954,056	£0
Additional LA Contribution	£507,002	£507,002	£0
Additional ICB Contribution	£0	£0	£0
Total	**£55,611,556**	**£55,611,556**	**£0**

Adult Social Care services spend from the NHS minimum contribution

	2025-26
Minimum required spend	£10,923,792
Planned spend	£11,496,860

Emergency admissions

	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	1,547	1,517	1,508	1,532	1,544	1,492	1,553	1,559	1,614	1,614	1,526	1,672

Delayed Discharge

	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	0.79	0.79	0.79	0.75	0.75	0.75	0.70	0.70	0.70	0.65	0.65	0.65

Residential Admissions

		2024-25 Estimated	2025-26 Plan Q1	2025-26 Plan Q2	2025-26 Plan Q3	2025-26 Plan Q4
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	548.2	127.9	127.9	127.9	127.9

Better Care Fund 2025-26 Planning Template

4. Income

Selected Health and Wellbeing Board: Wandsworth

Local Authority Contribution	
Disabled Facilities Grant (DFG)	Gross Contribution
Wandsworth	£2,183,892
DFG breakdown for two-tier areas only (where applicable)	
Total Minimum LA Contribution (exc Local Authority BCF Grant)	**£2,183,892**

Local Authority Better Care Grant	Contribution
Wandsworth	£20,954,056
Total Local Authority Better Care Grant	**£20,954,056**

Are any additional LA Contributions being made in 2025-26? If yes, please detail below	Yes

Local Authority Additional Contribution	Contribution	Comments - Please use this box to clarify any specific uses or sources of funding
Wandsworth	£147,352	Enhanced care navigaiton
Wandsworth	£52,500	Befriending plus service
Wandsworth	£307,150	Integrated falls service
Total Additional Local Authority Contribution	**£507,002**	

NHS Minimum Contribution	Contribution
NHS South West London ICB	£31,966,606
Total NHS Minimum Contribution	**£31,966,606**

Are any additional NHS Contributions being made in 2025-26? If yes, please detail below	No

Additional NHS Contribution	Contribution	Comments - Please use this box clarify any specific uses or sources of funding
Total Additional NHS Contribution	**£0**	
Total NHS Contribution	**£31,966,606**	

	2025-26
Total BCF Pooled Budget	**£55,611,556**

Funding Contributions Comments
Optional for any useful detail

There was NHS minimum contribution funding in the Wandsworth BCF return that relates to a South West London ICB scheme funded by the ICB discharge fund and hosted by Wandsworth HWB for 2024-25. This was then part of the 2025-26 allocation for Wandsworth, which ahs now been resolved. This also means that any work comparing the 2024-25 and 2025-26 needs to take this into account.

Better Care Fund 2025-26 Planning Template

5. Expenditure

Selected Health and Wellbeing Board: Wandsworth

<< Link to summary sheet

Running Balances	2025-26 Income	Expenditure	Balance
DFG	£2,183,892	£2,183,892	£0
NHS Minimum Contribution	£31,966,606	£31,966,606	£0
Local Authority Better Care Grant	£20,954,056	£20,954,056	£0
Additional LA contribution	£507,002	£507,002	£0
Additional NHS contribution	£0	£0	£0
Total	**£55,611,556**	**£55,611,556**	**£0**

Required Spend

This is in relation to National Conditions 3 only. It does NOT make up the total NHS Minimum Contribution (on row 10 above).

	2025-26 Minimum Required Spend	Planned Spend	Unallocated
Adult Social Care services spend from the NHS minimum allocations	£10,923,792	£11,496,860	£0

Checklist

Column complete:

Yes	Yes	Yes	Yes	Yes	Yes	Yes

Scheme ID	Activity	Description of Scheme	Primary Objective	Area of Spend	Provider	Source of Funding	Expenditure for 2025-26 (£)	Comments (optional)
702	Wider local support to promote prevention and independence	Mental health community support/ supported living	1. Proactive care to those with complex needs	Social Care	Local Authority	NHS Minimum Contribution	£ 662,899	LA
703	Wider local support to promote prevention and independence	Housing with preventative support (Mental Health)	1. Proactive care to those with complex needs	Social Care	Local Authority	Local Authority Better Care Grant	£ 154,530	LA
104	Evaluation and enabling integration	Integrated Falls (Primary and secondary prevention of falls)	4. Preventing unnecessary hospital admissions	Community Health	NHS Community Provider	NHS Minimum Contribution	£ 681,215	NHS
104	Evaluation and enabling integration	Integrated Falls (Primary and secondary prevention of falls)	4. Preventing unnecessary hospital admissions	Community Health	NHS Community Provider	Additional LA Contribution	£ 307,150	NHS
304	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	South West London Step Down capacity (mental health step down beds for Kingston, Richmond, Merton, Sutton and Wandsworth, hosted into the Wands BCF)	5. Timely discharge from hospital	Mental Health	NHS Mental Health Provider	NHS Minimum Contribution	£ 299,520	NHS
501	Support to carers, including unpaid carers	Integrated Carers Support Service (includes respite)	3. Supporting unpaid carers	Social Care	Local Authority	NHS Minimum Contribution	£ 809,861	LA
203	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Maximising independence Reablement service (home visiting physiotherapy, OT services and community nursing services)	6. Reducing the need for long term residential care	Community Health	Private Sector	NHS Minimum Contribution	£ 4,176,280	NHS

Scheme ID	Activity	Description of Scheme	Primary Objective	Area of Spend	Provider	Source of Funding	Expenditure for 2025-26 (£)	Comments (optional)
302	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Hospital discharge and enablement team capacity	5. Timely discharge from hospital	Social Care	Local Authority	Local Authority Better Care Grant	£ 526,480	LA
202	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	KITE enablement service	6. Reducing the need for long term residential care	Social Care	Local Authority	Local Authority Better Care Grant	£ 226,820	LA
202	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	KITE enablement service	6. Reducing the need for long term residential care	Social Care	Local Authority	NHS Minimum Contribution	£ 662,899	LA
207	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Support for older people in supporting living	6. Reducing the need for long term residential care	Social Care	Local Authority	NHS Minimum Contribution	£ 979,195	LA
405	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Care Home Support team	1. Proactive care to those with complex needs	Primary Care	Private Sector	NHS Minimum Contribution	£ 554,067	NHS
303	Discharge support and infrastructure	Hospital social work team	5. Timely discharge from hospital	Social Care	Local Authority	Local Authority Better Care Grant	£ 309,090	LA
102	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Befriending Plus volunteering team (meaningful social contact and low level household chores)	4. Preventing unnecessary hospital admissions	Social Care	Local Authority	Additional LA Contribution	£ 52,500	LA
101	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Enhanced Care Navigation/ social prescribing service	1. Proactive care to those with complex needs	Social Care	Local Authority	Additional LA Contribution	£ 147,352	LA
206	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Quick Start rapid response service (personal care)	6. Reducing the need for long term residential care	Community Health	Private Sector	NHS Minimum Contribution	£ 713,615	NHS
401	Evaluation and enabling integration	Strengthening statutory social care functions (Assessments, reviews and carer support functions)	1. Proactive care to those with complex needs	Social Care	Local Authority	Local Authority Better Care Grant	£ 458,430	LA
603	DFG related schemes	Better at home improvement scheme	2. Home adaptations and tech	Social Care	Charity / Voluntary Sector	DFG	£ 120,498	LA

Scheme ID	Activity	Description of Scheme	Primary Objective	Area of Spend	Provider	Source of Funding	Expenditure for 2025-26 (£)	Comments (optional)
303	Discharge support and infrastructure	Extended working to support discharge	5. Timely discharge from hospital	Social Care	Local Authority	Local Authority Better Care Grant	£ 1,144,218	LA
306	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	QuickStart Bridging at the front door	5. Timely discharge from hospital	Community Health	NHS Community Provider	NHS Minimum Contribution	£ 199,000	NHS
403	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Home care provision to support increased demand and to enable greater capacity to manage people to remain independent	5. Timely discharge from hospital	Social Care	Local Authority	NHS Minimum Contribution	£ 3,021,279	LA
404	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Stability and capacity in home care provider market	6. Reducing the need for long term residential care	Social Care	Local Authority	Local Authority Better Care Grant	£ 4,574,952	LA
602	Housing related schemes	Equipment and minor DFG adaptations	2. Home adaptations and tech	Social Care	Local Authority	DFG	£ 714,384	LA
203	Assistive technologies and equipment	Community Equipment	2. Home adaptations and tech	Community Health	Private Sector	NHS Minimum Contribution	£ 2,349,713	NHS
402	Support to carers, including unpaid carers	Carer support services, including respite (Meeting the entitlements of carers under the Care Act)	3. Supporting unpaid carers	Social Care	Local Authority	NHS Minimum Contribution	£ 293,600	LA
502	Support to carers, including unpaid carers	Identification and support to carers	3. Supporting unpaid carers	Social Care	Charity / Voluntary Sector	Local Authority Better Care Grant	£ 200,965	LA
203	Evaluation and enabling integration	Enhanced care Pathways - Integrated health and wellbeing programme, incorporating the following services working together to support residents: a. Nursing in-reach service to facilitate discharge b. MDT meetings and complex case management c. Care home in-reach teams and therapy teams d. Age UK Better at Home Service	1. Proactive care to those with complex needs	Community Health	Private Sector	NHS Minimum Contribution	£ 11,439,569	NHS
406	Long-term residential or nursing home care	Social care purchased care home placements	5. Timely discharge from hospital	Social Care	Local Authority	NHS Minimum Contribution	£ 3,484,873	LA

Scheme ID	Activity	Description of Scheme	Primary Objective	Area of Spend	Provider	Source of Funding	Expenditure for 2025-26 (£)	Comments (optional)
303	Discharge support and infrastructure	Extended working to support discharge	5. Timely discharge from hospital	Social Care	Local Authority	Local Authority Better Care Grant	£ 1,144,218	LA
306	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	QuickStart Bridging at the front door	5. Timely discharge from hospital	Community Health	NHS Community Provider	NHS Minimum Contribution	£ 199,000	NHS
403	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Home care provision to support increased demand and to enable greater capacity to manage people to remain independent	5. Timely discharge from hospital	Social Care	Local Authority	NHS Minimum Contribution	£ 3,021,279	LA
404	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery services)	Stability and capacity in home care provider market	6. Reducing the need for long term residential care	Social Care	Local Authority	Local Authority Better Care Grant	£ 4,574,952	LA
602	Housing related schemes	Equipment and minor DFG adaptations	2. Home adaptations and tech	Social Care	Local Authority	DFG	£ 714,384	LA
203	Assistive technologies and equipment	Community Equipment	2. Home adaptations and tech	Community Health	Private Sector	NHS Minimum Contribution	£ 2,349,713	NHS
402	Support to carers, including unpaid carers	Carer support services, including respite (Meeting the entitlements of carers under the Care Act)	3. Supporting unpaid carers	Social Care	Local Authority	NHS Minimum Contribution	£ 293,600	LA
502	Support to carers, including unpaid carers	Identification and support to carers	3. Supporting unpaid carers	Social Care	Charity / Voluntary Sector	Local Authority Better Care Grant	£ 200,965	LA
203	Evaluation and enabling integration	Enhanced care Pathways - Integrated health and wellbeing programme, incorporating the following services working together to support residents: a. Nursing in-reach service to facilitate discharge b. MDT meetings and complex case management c. Care home in-reach teams and therapy teams d. Age UK Better at Home Service	1. Proactive care to those with complex needs	Community Health	Private Sector	NHS Minimum Contribution	£ 11,439,569	NHS
406	Long-term residential or nursing home care	Social care purchased care home placements	5. Timely discharge from hospital	Social Care	Local Authority	NHS Minimum Contribution	£ 3,484,873	LA
704	Long-term residential or nursing home care	Protection of adult social care (Mental Health & Learning Disability placements)	1. Proactive care to those with complex needs	Social Care	Local Authority	Local Authority Better Care Grant	£ 11,123,650	LA
201	Assistive technologies and equipment	Telehealth for HF patient and in care homes	2. Home adaptations and tech	Community Health	Private Sector	NHS Minimum Contribution	£ 56,769	NHS
309	Assistive technologies and equipment	Technology Enabled Care (TEC)	2. Home adaptations and tech	Social Care	Local Authority	Local Authority Better Care Grant	£ 133,105	LA
204	Evaluation and enabling integration	Learning Disability transition support	1. Proactive care to those with complex needs	Social Care	Local Authority	Local Authority Better Care Grant	£ 515,150	LA

Scheme ID	Activity	Description of Scheme	Primary Objective	Area of Spend	Provider	Source of Funding	Expenditure for 2025-26 (£)	Comments (optional)
303	Evaluation and enabling integration	Social Care staffing, including hospital social work teams; review teams; and integrated locality teams	1. Proactive care to those with complex needs	Social Care	Local Authority	NHS Minimum Contribution	£ 1,489,450	LA
301	Housing related schemes	Occupational therapy community equipment	2. Home adaptations and tech	Social Care	Local Authority	NHS Minimum Contribution	£ 92,805	LA
601	Housing related schemes	Major Adaptations under the DFG	2. Home adaptations and tech	Social Care	Local Authority	DFG	£ 1,349,011	LA
701	Wider local support to promote prevention and independence	Range of voluntary sector support services to prevent admissions to hospital	4. Preventing unnecessary hospital admissions	Social Care	Local Authority	Local Authority Better Care Grant	£ 976,720	LA
303	Evaluation and enabling integration	Mental Health discharge and reablement team	5. Timely discharge from hospital	Mental Health	Local Authority	Local Authority Better Care Grant	£ 609,946	LA

Better Care Fund 2025-26 Planning Template

6. Metrics for 2025-26

Selected Health and Wellbeing Board: Wandsworth

8.1 Emergency admissions

		Apr 24 Actual	May 24 Actual	Jun 24 Actual	Jul 24 Actual	Aug 24 Actual	Sep 24 Actual	Oct 24 Actual	Nov 24 Actual	Dec 24 Actual	Jan 25 Actual	Feb 25 Actual	Mar 25 Actual	Rationale for how local goal for 2025-26 was set. Include how learning and performance to date in 2024-25 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.
Emergency admissions to hospital for people aged 65+ per 100,000 population	Rate	1,462	1,645	1,447	1,584	1,462	1,462	1,645	1,629	n/a	n/a	n/a	n/a	The actuals for 2024-25 have been updated from the planning figures due to SUS and ODS issues with a local Trust which is felt to make a material impact on the published data. These 2024-25 baseline figures have then been updated by 65+ population growth (based on ONS population growth forecast of 2.58%) to give a reasonable number of admissions expected without additonal impact. This baseline figure was then profiled across the financial year as per the average admissions seasonal profile seen across the last 4 financial years. The Right place: optimising admissions and alternatives to admission within the SWL UEC ambitions in 2025-26 has been set out, and applied to the baseline where they were assumed to make an impact on the numbers of emergency admissions, working with Trust colleagues to reflect the ambtitions within the BCF ambitions. This has made a 5.6% reduction to the amended 2024-25 baseline This has made a 4% reduction to the amended 2024-25 baseline even after ONS population growth has been added, which is an ambitious target given the work needed to deliver a reduction equivient to 1 person in 20 being diverted from A&E.
	Number of Admissions 65+	480	540	475	520	480	480	540	535	n/a	n/a	n/a	n/a	
	Population of 65+*	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	n/a	n/a	n/a	n/a	
		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	
	Rate	1,547	1,517	1,508	1,532	1,544	1,492	1,553	1,559	1,614	1,614	1,526	1,672	
	Number of Admissions 65+	508	498	495	503	507	490	510	512	530	530	501	549	
	Population of 65+	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	32,833	

Supporting Indicators		Have you used this supporting indicator to inform your goal?
Unplanned hospital admissions for chronic ambulatory care sensitive conditions. Per 100,000 population.	Rate	No
Emergency hospital admissions due to falls in people aged 65 and over directly age standardised rate per 100,000.	Rate	No

8.2 Discharge Delays

	Apr 24 Actual	May 24 Actual	Jun 24 Actual	Jul 24 Actual	Aug 24 Actual	Sep 24 Actual	Oct 24 Actual	Nov 24 Actual	Dec 24 Actual	Jan 25 Actual	Feb 25 Actual	Mar 25 Actual	Rationale for how local goal for 2025-26 was set. Include how learning and performance to date in 2024-25 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.
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)	n/a	n/a	n/a	n/a	n/a	0.85	0.84	0.69	n/a	n/a	n/a	n/a	Proportion of people not discharged on same day based on Sep-Nov 2024 actuals used as baseline for Q1 - Q2-4 then plans for quarter on quarter trajectory, moving towards the London average. It is noted that a local Trust that would have a material impact on this measure has only 1 month's accepted data in the published statistics (November 2024). The average number of days where someone is not discharged on DRD remains the same throughout 2025-26 as the borough is under the London average. This generates an average LoDD for all acute patients, moving from 0.79 days in Q1 to 0.65 days in Q4, and reflects the St George's UEC ambition for discharge response times locally. These ambitions were agreed locally with the Acute Trust and with ICB colleagues and are considered ambitious given the new nature of the dataset and the work through SDEC to deliver the increase to those discharged on their DRD.
Proportion of adult patients discharged from acute hospitals on their discharge ready date	n/a	n/a	n/a	n/a	n/a	82.6%	84.8%	84.9%	n/a	n/a	n/a	n/a	
For those adult patients not discharged on DRD, average number of days from DRD to discharge	n/a	n/a	n/a	n/a	n/a	4.9	5.5	4.6	n/a	n/a	n/a	n/a	
	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	0.79	0.79	0.79	0.75	0.75	0.75	0.70	0.70	0.70	0.65	0.65	0.65	
Proportion of adult patients discharged from acute hospitals on their discharge ready date	84.1%	84.1%	84.1%	85.0%	85.0%	85.0%	86.0%	86.0%	86.0%	87.0%	87.0%	87.0%	
For those adult patients not discharged on DRD, average number of days from DRD to discharge	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00	

Supporting Indicators		Have you used this supporting indicator to inform your goal?
Patients not discharged on their DRD, and discharged within 1 day, 2-3 days, 4-6 days, 7-13 days, 14-20 days and 21 days or more.	Number of patients	No
Local data on average length of delay by discharge pathway.	Number of days	Yes

8.3 Residential Admissions

		2023-24 Actual	2024-25 Plan	2024-25 Estimated	2025-26 Plan Q1	2025-26 Plan Q2	2025-26 Plan Q3	2025-26 Plan Q4	Rationale for how the local goal for 2025-26 was set. Include how learning and performance to date in 2024-25 has been taken into account, impact of demographic and other demand drivers. Please also describe how the ambition represents a stretching target for the area.
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	472.1	456.9	548.2	127.9	127.9	127.9	127.9	The estimated position at the end of 2024-25 was 180 admissions, which has demonstrated an increase due to demographic factors. There is a growth of 2.61% which would increase this figure by 5 people to make the amended strating point for 2025-26 185 admissions. An ambitious reduction of 168 admissions has been planned for, which would be the equivilent of an 9.2% reducition on the 185 detailed above, given demographic factors and increased need in the borough. Work has been completed with DHSC colleagues to ensure that the CLD data and the SALT show minimal variation, and so the SALT data was used as a baseline.
	Number of admissions	155	150	180	42	42	42	42	
	Population of 65+*	32,833	32,833	32,833	32,833	32,833	32,833	32,833	

Long-term admissions to residential care homes and nursing homes for people aged 65+ per 100,000 population are based on a calendar year using the latest available mid-year estimates.

Supporting Indicators		Have you used this supporting indicator to inform your goal?
Percentage of people, resident in the HWB, who are discharged from acute hospital to their normal place of residence	Percentage	No
The proportion of people who received reablement during the year, where no further request was made for ongoing support	Rate	No

HM Government

NHS England

Better Care Fund 2025-26 Update Template

7: National Condition Planning Requirements

Health and wellbeing board: Wandsworth

National Condition	Planning expectation that BCF plan should:	Where should this be completed	HWB submission meets expectation	Where the Planning requirement is not met, please note the actions in place towards meeting the requirement	Timeframe for resolution
1. Plans to be jointly agreed	Reflect local priorities and service developments that have been developed in partnership across health and care, including local NHS trusts, social care providers, voluntary and community service partners and local housing authorities	Planning Template - Cover sheet Narrative Plan - Overview of Plan	Yes		
	Be signed off in accordance with organisational governance processes across the relevant ICB and local authorities	Planning Template - Cover sheet	Yes		
	Must be signed by the HWB chair, alongside the local authority and ICB chief executives – this accountability must not be delegated	Planning Template - Cover sheet	Yes		
2. Implementing the objectives of the BCF	Set out a joint system approach for meeting the objectives of the BCF which reflects local learning and national best practice and delivers value for money	Narrative Plan - Section 2	Yes		
	Set goals for performance against the 3-headline metrics which align with NHS operational plans and local authority adult social care plans, including intermediate care capacity and demand plans	Planning Template - Metrics	Yes		
	Demonstrate a 'home first' approach and a shift away from avoidable use of long-term residential and nursing home care	Narrative Plan - Section 2	Yes		
	Following the consolidation of the previously ring-fenced Discharge Fund, specifically explain why any changes to the use of the funds compared to 2024-25 are expected to enhance urgent and emergency care flow (combined impact of admission avoidance and reducing length of stay and improving discharge)	Narrative Plan - Section 2	Yes		
3. Complying with grant and funding conditions, including maintaining the NHS minimum contribution to adult social care (ASC)	Set out expenditure against key categories of service provision and the sources of this expenditure from different components of the BCF	Planning Template - Expenditure	Yes		
	Set out how expenditure is in line with funding requirements, including the NHS minimum contribution to adult social care				
4. Complying with oversight and support processes	Confirm that HWBs will engage with the BCF oversight and support process if necessary, including senior officers attending meetings convened by BCF national partners.	Planning Template - Cover	Yes		
	Demonstrate effective joint system governance is in place to: submit required quarterly reporting, review performance against plan objectives and performance, and change focus and resourcing if necessary to bring delivery back on track	Narrative Plan - Executive Summary	Yes		