
Report to HEALTH AND WELLBEING BOARD

Better Care Fund 2025-26 Quarter 1 Submission

Portfolio Holder:

Councillor Barbara Brownridge, Cabinet Member Health & Social Care

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Date: 11th September 2025

Purpose of the Report

In order to meet the national funding conditions of the Better Care Fund, this report seeks Health and Wellbeing Board's retrospective approval on the submission of Oldham's Quarter 1 Better Care Fund (BCF) submission.

The Board should note, that in order to meet the deadlines set for the above submission, which was the 15th August the template was submitted under the delegation which was agreed by Health and Wellbeing Board on the 3rd April 2025 (Health and Wellbeing Board Report on BCF Q2 and 3 submissions and 2025-26 planning templates).

Requirement from Oldham's Health and Wellbeing Board

1.
 - a) Note the content of the Quarter 1 Report
 - b) Provide retrospective approval for their submission to the Regional Better Care Fund panel

1. Background

The Better Care Fund

- 1.1 The Better Care Fund's vision has been to support people to live healthy, independent and dignified lives, through joining up health, social care and housing services seamlessly around the person. The BCF Policy Framework centres of these objectives and now sets separate National Condition for each:
- **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.
- 1.2 As well as supporting delivery of the [Next Steps to put People at the Heart of Care](#), the BCF programme underpins key priorities in the NHS Long Term Plan by joining up services in the community and the government's [plan for recovering urgent and emergency care \(UEC\) services](#).
- 1.3 Differing from the previous year, the current BCF plan is only for one financial year for the period 2025-26, with the delivery of the BCF supporting two key priorities for the health and care system that align with the two existing BCF objectives of:
- improving overall quality of life for people, and reducing pressure on UEC, acute and social care services through investing in preventative services
 - tackling delayed discharge and bringing about sustained improvements in discharge outcomes and wider system flow.
- 1.4 The reporting schedule for 2025-26 is outlined in table 1 below, including suggested sign off by the Health and Wellbeing Board. Due to the timing of reporting (and considering dates and when templates become available) can be subject to change in year, the Health and Wellbeing Board agreed at the meeting in April 2025 to delegate the sign off of reports which could not be agreed at full Board to the Director of Adult Social Care in consultation with the Deputy Place Lead (see appendix 1):

Report	Submission Deadline	Health and Wellbeing Board sign off
Quarter 1	15 th August 2025	11 th September 2025 (Retrospective)
Quarter 2	31 st October 2025	30 th October 2025

Report	Submission Deadline	Health and Wellbeing Board sign off
Quarter 3	31 st January 2025	5 th March 2026 (Retrospective)
End of Year Report	29 th May 2026	TBC

2. 2025-26 Quarter 1 Report

- 2.1 The Quarter 1 submission usually takes a lighter touch than the remaining three returns in the year. The Quarter 1 submission for this year only required the following:
- Confirmation of meeting national conditions (which we confirmed)
 - Review of whether metrics were on track
 - High level spent data
- The report was submitted on time and is attached at Appendix 2.
- 2.2 Metric 1: Emergency admissions to hospital for people aged 65+ per 100,000 population. This was reported as on track to meet the goal, with a rate at April 2025 of 1,735.45 (against a plan of 1,740.50)
- 2.3 Metric 2: Average length of discharge delay for all acute adult patients. This was reported as not on track to meet the goal, with an average of 0.49 and 0.61 for April and May 2025 respectively due to a downward trend in average days delayed.
- 2.4 Metric 3: Long term support needs of older people (age 65 and over) met by admission to residential and nursing care homes, per 100,000 population. There was a request made to update the metric plan for this target as annualised figures had been included in error in the plan, rather than quarterly ones. Following this request the metric is on track to deliver on the quarterly figures. Adult social care is continuing to focus on meeting the needs of older people by supporting them to remain at home, however, more individuals, in particular when being discharged from hospital, are presenting with higher levels of need which in some cases result in placement in care homes. Focused work is being undertaken to review short term residential and nursing home placements at an early stage to enable individuals to return home where possible.
- 2.5 Expenditure for Quarter 1 was reported as £652,722 for Disabled Facilities Grant, with a total spend in the quarter of £42,790,920. It was noted that actual expenditure was 25% of planned income due to the fact that the majority of contracts are block arrangements, for example with the Northern Care Alliance or the Pennine Care Foundation Trust. This creates a consistent monthly expenditure profile with no material seasonal variation, meaning quarter 1 spend aligns closely with one quarter of the annual plan.

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- 2.6 Work is already beginning with providers and commissioners to start to shape the plan for 2027-26 in relation to what the local system needs are and further information on this will be brought to the Board in due course.

3. Case Studies of services funded through BCF in 2025-26

3.1 Age UK Home First Service:

- Mr. and Mrs. F, a married couple aged 85 and 83 years respectively – referred from A&E Royal Oldham Hospital
- Mr. F had previous heart surgery and was still suffering with a few physical conditions including reduced mobility. He had experienced a recent fall, sustaining facial injuries.
- His wife, Mrs. F, had a hip replacement in February 2025, and was making good physical progress. However, she was experiencing low mood due to the strain of her caring role for her husband and the increased duties this entailed.
- Mr. F had carers 3 x weekly, but his wife felt this was too much for her to manage in between carers visits. The couple had a car and up until the hip replacement they attended social groups such as dancing and a choir every week. Mr. F no longer drives, and his wife felt isolated, which was causing some friction between the couple. The couple have support from their niece and Mr. F's sister who is 80 years old but will sit with her brother if Mrs. F has an appointment or goes shopping with her niece. Mrs. F explained that up until recently they had regular holidays, and nothing kept them back. Now, she felt that old age has hit them, and things aren't going to improve as she felt that they are slowly deteriorating and losing the independence they once enjoyed.
- A home visit took place with this couple alongside Mr. F's sister and niece. The current care package was discussed, including the couples concerns regarding the contributions they needed to make for this. Age UK Oldham liaised with Adult Social Care to discuss the financial implications of any additional care, allowing the couple to make an informed decision. The Home First worker helped the couple understand the brokerage and contribution fees which were concerning them around their package.
- The Home First worker also liaised with the Falls service to follow up on Mr F's referral and with the GP in relation to an appointment Mrs F was concerned may have been cancelled, it transpired this was an appointment with TOG Mind and the worker was able to get this rescheduled.
- The couple asked for support in applying for a disabled parking space outside their property and obtaining a wheelchair or mobility scooter, which Age UK Oldham were able to assist them to purchase
- Mrs. F was also advised of various social groups and activities local to her home which she may be able to attend to help address her feelings of isolation following her involvement with TOGMIND.
- The couple were extremely grateful and complimentary about the Home First Service and stated that they would have been lost without the support they had obtained from the service.

3.2 Carers Service:

- A carers assessment took place for M, who cares for her daughter S who has significant Learning Disabilities (LD)

- The assessment took place as during the screening process for S's in order to find some meaningful daytime activity for S as her mum is the sole carer and has no other support locally as they are both new to the country
- S is unable to claim for PIP benefit because she has not been in the country for two years so they only have M's pension for income

Outcomes

- A budget of £350 was awarded for M to purchase a television for S, to allow her some free time as S enjoys watching cartoons
- She was also able to purchase an air fryer to allow her to cook more healthy and economically
- Advice was provided on accessing a bus pass as M is over 65 and S has a concessionary bus due to her LD, this will allow them to travel together
- Referral made to Welfare Rights for further support around benefits
- Referred to the Bread and Butter project to support with food costs, with M now receiving enough shopping each week for a subsidised amount of £8.50
- M now regularly attending carers drop in and a taster session was arranged for S with OPAL Day Services

4. Key Issues for the Health and Wellbeing Board to Discuss

- 4.1 a) Note the content of the Quarter 1 submission
b) Provide retrospective approval for the submission to the Regional Better Care Fund panel

5. Recommendation

- 4.1 It is recommended that the Health and Wellbeing Board agree to sign off the Better Care Fund Quarter 1 submission

6. Appendices

1. Health and Wellbeing Board report which delegated submission
2. Quarter 1 Submission



HWB Report_BCF
Q2&3 Submissions at



Oldham Health and
Wellbeing Board BCF