

South Tyneside Partnership

Health and Wellbeing Board

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Better Care Fund Narrative & Numerical Template 2026-2027

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Why Has this Report Come to the Health and Wellbeing Board?

1. The Better Care Fund End of Year Report is being shared for information. A current Section 75 agreement has been in place since 24 September 2025. Following submission of the 2026–27 Better Care Fund plan, a further review of the Section 75 arrangements will be undertaken to ensure they continue to reflect the updated plan and delivery model. This review is intended to refresh and align existing arrangements rather than change the scope or intent of the pooled budget.
2. The Board previously approved the Better Care Fund Plan 2025-2026. The plan will provide an update of progression from the previous plan and outline expectations for the upcoming year in line with National Requirements.
3. The Health and Wellbeing Board is asked to give its retrospective endorsement and ongoing commitment to the South Tyneside Better Care Fund Plan for 25/26.

Which Outcome is this Linked to Within the Health and Wellbeing Strategy and How?

4. The Better Care Fund supports delivery of multiple outcomes within the South Tyneside Joint Health and Wellbeing Strategy, particularly through its focus on prevention, independence and integrated working.
5. In practical terms, the 2026–27 BCF plan contributes to the following priority outcomes:
 - **Safe and Healthy Places to Live** – through neighbourhood-based MDTs, Home First pathways and the use of Disability Funding Grant (DFG) to support people to return home safely and remain independent.
 - **Good Mental Wellbeing and Social Connectivity** – by enabling early intervention, community-based support and stronger links with voluntary and community sector partners as part of neighbourhood delivery.

- **Fair Delivery of Services** – through consistent neighbourhood models, clearer pathways and reduced variation in access to reablement, discharge support and community services.
 - **Public Involvement** – through feedback from people using reablement and intermediate care services, which informs continuous service improvement.
6. Overall, the BCF plan supports the Strategy's ambition to reduce inequalities, improve outcomes and deliver more responsive, community-based care.

How Does This Report Contribute to the Cross Cutting Theme(s)?

7. The plan strengthens prevention, integrated working, population insight, productivity and effectiveness of services, equality of access and transparency through joint governance and pooled budget arrangements.

Key Changes to the Better Care Fund for 2026–27

8. The Better Care Fund (BCF) plan for 2026–27 reflects a deliberate shift from pilot-ing and programme development to embedding neighbourhood-based, preventative and integrated ways of working as standard business across South Tyneside's health and care system.

Compared to 2025–26, the key changes in the 2026–27 plan include:

- Completion of the transition from the former *Care Closer to Home* programme to a fully embedded neighbourhood model, with clear neighbourhood footprints and multidisciplinary team (MDT) arrangements in place.
- A stronger and more explicit focus on Home First, ensuring that hospital admission is avoided where possible and that discharge pathways prioritise recovery and independence at home.
- Movement away from time-limited pilots towards consistent, standardised neighbourhood MDT delivery, with shared caseloads, clearer decision-making and reduced variation across the system.
- Increased emphasis on flow through intermediate care and reablement, informed by learning from 2025–26 where performance and throughput did not consistently meet expectations.
- More systematic use of data, population health insight and Plan-Do-Study-Act (PDSA) cycles to understand variation, target improvement effort and embed learning at pace.
- Digital and technology-enabled approaches, including speech-to-text tools, AI-enabled assessment support and virtual wards, becoming core operational enablers rather than standalone initiatives

- Recognition of the Disabled Facilities Grant (DFG) as a critical system enabler of Home First and discharge, rather than solely a housing function.

Key Metrics and Goal-Setting Requirements

9. It is a national requirement for ICBs and local authorities to set local goals, against two metrics:
 - a. non-elective hospital admissions for people aged 65 and over - the proportion of adult patients discharged from acute hospitals on their discharge ready date (DRD)
 - b. the average length of discharge delay for all acute adult patients, derived from: for those adult patients not discharged on their DRD, the average (mean) number of days from the DRD to discharge.
10. Health and Wellbeing Board's are also encouraged to set goals for the metric for:
 - long term admissions to residential and nursing homes for people aged 65 and over per 100,000 population.
11. Health and Wellbeing Board's are required to monitor and drive improvements for the metric:
 - Proportion of people aged 65 and over, discharged from hospital with reablement provided partly or solely by LA who remained in the community within 12 weeks of discharge.
12. Goals should use latest Better Care Fund (BCF) dashboard baselines and be ambitious but realistic.
13. Performance against the Better Care Fund metrics will be subject to strengthened in-year monitoring, with a particular focus on discharge performance (including discharge on the day ready and average delay days), where improvement is required following 2025/26 performance. Monitoring will be undertaken through daily operational discharge huddles and surge and flow arrangements, supported by system dashboards (including the development of the Guiding You Home dashboard) to provide real-time oversight of delays by ward, pathway and cause. These arrangements will be complemented by regular review through the Better Care Fund Operational Group, with performance against key metrics reported as a standing item to ensure robust variance analysis, escalation and timely corrective action. This approach ensures clear system accountability and provides ongoing assurance to the Health and Wellbeing Board.
14. The delivery priorities and actions set out in this report are fully reflected in the supporting Better Care Fund (BCF) Numerical Template for 2026–27. Agreed expenditure and funding allocations have been developed to directly support delivery of the neighbourhood model, Home First principles, improved discharge performance, strengthened reablement and reduced reliance on long-term care.

15. The goals for the four Better Care Fund metrics have been set using the latest available baselines and are presented in the Numerical Template as clear and realistic trajectories across the year. These trajectories demonstrate a planned improvement in non-elective admissions for people aged 65 and over, improved performance against discharge ready date, a reduction in long-term admissions to residential and nursing care, and sustained improvements in reablement outcomes.
16. Together, the Narrative and Numerical Better Care Fund (BCF) returns provide a coherent and balanced plan for 2026–27, demonstrating how agreed investment, delivery priorities and performance goals align to meet both national Better Care Fund conditions and local system priorities.

Funding Updates for 2026–27

17. Finance is managed in pooled budgets, NHS minimum contributions uplift by 4.4% or adult social care and 2.1% for discharge and remaining elements. The Disability Funding Grant (DFG) methodology has been updated nationally with protections applied. South Tyneside's expenditure schedule will be added once national templates are released. No local amount is included at this stage. NHSE's delay to the Numerical Return (expenditure) template requires systems to continue planning based on provisional working assumptions.

Local Actions Required

18. The Better Care Fund (BCF) is a mandatory national programme requiring local authorities and Integrated Care Boards (ICBs) to jointly agree and deliver a pooled budget to support integrated health and social care. To access and deploy BCF funding in 2026–27, all Health and Wellbeing Board (HWB) areas must meet **four national conditions**, as set out in the national BCF Policy Framework.

19. Health and Wellbeing Board Role and Expectations for 2026–27 **Exact wording**

20. The Health and Wellbeing Board has a critical role in providing strategic oversight and assurance for the Better Care Fund. For 2026–27, this includes:
- Providing system leadership for the continued shift from hospital-based care to prevention, early intervention and neighbourhood-based support.
 - Maintaining oversight of progress against the national and locally agreed Better Care Fund metrics, supported by established system governance and reporting arrangements.
 - Ensuring that Better Care Fund investment continues to align with the Joint Health and Wellbeing Strategy and wider system priorities, including neighbourhood health development.
 - Supporting shared accountability across partners for delivery of the BCF plan and addressing risks where progress is not on track.

21. This approach ensures that the Health and Wellbeing Board remains sighted on delivery while avoiding duplication of operational governance arrangements.

22. The Health and Wellbeing Board gives delegated authority for the approval of the Better Care Fund Plan and associated submissions to the Director of Adult Social Care and the ICB Place Director, in line with locally agreed governance arrangements.

a) Jointly Agreed Plan

The BCF Plan must be developed jointly by the local authority and the ICB, formally agreed by the Health and Wellbeing Board, and signed off by both the local authority Chief Executive and the ICB Chief Executive. This condition reinforces shared system ownership and accountability for delivery.

b) Delivery of National BCF Objectives

BCF-funded activity must demonstrably contribute to the two national objectives for 2025–26:

- Reform to support the shift from sickness to prevention; and
- Reform to support people to live independently, enabling a shift from hospital to home.

Plans are expected to show how local schemes align to these objectives and support wider system priorities, including neighbourhood-based models of care and integration.

c) Compliance with Funding & Grant Conditions

Local systems must comply with all national funding and grant conditions, including:

- Maintaining the NHS minimum contribution to adult social care within the BCF; and
- Operating pooled budgets in line with Section 75 arrangements and national legal directions.

This condition is intended to protect investment in adult social care and ensure funding is used for integrated purposes.

d) Compliance with national oversight and assurance arrangements

Systems must comply with national planning, reporting, performance monitoring and assurance requirements, including engagement with enhanced support or escalation processes where required.

23. The 2026–27 Better Care Fund Plan has been developed in line with national policy and planning guidance and meets all four national conditions. The plan supports delivery of the BCF's national objectives and aligns with wider system priorities, including the development of neighbourhood health and integrated community-based care.

24. For 2026-2027, the objectives of the BCF reflect the Government's commitment to reform via a shift from sickness to prevention and from hospital to home. These shifts are also consistent with the commitment to reform by developing a 'Neighbourhood Health Service', applying Population Health Management

approaches. The South Tyneside Neighbourhood approach will be based on development of multi-disciplinary teams to provide more responsive, preventative and coordinated care in people's homes and local communities.

Recommendations

25. The Health and Wellbeing Board is asked to:

- a) Note the key changes to the Better Care Fund approach for 2026–27.
- b) Provide retrospective endorsement of the South Tyneside Better Care Fund Plan.
- c) Confirm its ongoing commitment to supporting delivery and strategic oversight of the Better Care Fund during 2026–27.