

**Title: Torbay Better Care Fund Quarter 2 Return 2025 – 26**

**Wards Affected: All**

**To: Torbay Health and Wellbeing Board**

**On: 4 December 2026**

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## **1. Purpose**

Torbay Better Care Fund (BCF) Plan 2025/26 was developed and submitted within nationally mandated timelines. Torbay's plan received approval from the regional BCF panel, progressed to the national panel where it was also endorsed. Torbay Health and Wellbeing Board signed off The Torbay Better Care Fund Plan, 19 June 2025 satisfying its role of BCF oversight in-line with national requirements.

The Health and Wellbeing Board has oversight of the BCF and is accountable for its delivery and monitoring of progress. This report:

- Provides an update on the BCF performance and spend for July – September, Quarter 2, 2025/26 (copy attached).

## **2. Analysis**

### **2.1 Torbay BCF Quarter 2 return 2025/26**

10 November 2025, Torbay's BCF Quarter 1 2025/26 template was submitted in accordance with national requirements.

National Better Care Fund planning guidance committed to less onerous monitoring of BCF plans for local Health and Wellbeing Boards. The quarter 2 return has therefore focused on:

- An overview of the 3 main metrics
- Assurance of local finances with high level summary of spend

In previous years, BCF capacity and demand plans have also required oversight. This continues not to be featured in the quarter reporting template.

## 2.2 Metric Targets

### 2.2.1 Emergency Admissions

The “Emergency Admissions” key performance indicator measures the number of admissions to hospital in people aged 65 and over within the Health and Wellbeing Board area. The aim being to reduce the total number of people and rate per 1000 population being admitted to ED.

This replaces the previous “avoidable admissions” metric which monitored unplanned hospitalisation for chronic ambulatory care sensitive conditions such as acute bronchitis, angina, ischaemic heart disease, heart failure, dementia, emphysema, epilepsy, hypertension, diabetes, COPD, and pulmonary oedema.

Performance for 2025/26:

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
	Number of admissions 65+	622	634	602	633	616	602	659	621	653	640	630	620
	Rate (target)	1,640.6	1,672.2	1,587.8	1,669.6	1,624.8	1,587.8	1,738.2	1,638.0	1,722.4	1,688.1	1,661.7	1,635.3
	Rate Achieved	1635.0	1794.0	1807.0	1857.0	1707.0	1780.0						
	Population of 65+	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0

Data at the time of submission indicates Torbay’s performance was “**not on track to meet goal**”. Further information is provided in the quarter 2 return.

### Assurance

Work relating to reducing Emergency Admissions is undertaken by NHS Devon with TSDFT as part of a wider system programme group. The Emergency Department Demand Oversight Group monitors ED attendances and admissions and works with trusts to ensure targets are met. In addition, NHS Devon holds Contract Review Meetings with TSDFT where assurance is sought on key performance indicators.

In response to growing demand on Emergency Departments (ED), NHS Devon has identified a set of strategic demand management priorities. These are focused on delivering sustainable reductions in avoidable ED attendances by aligning clinical interventions with improved access, care coordination, and patient behaviour change. Key projects within this programme include:

Same Day Primary Care Access - Diverting low-acuity patients from ED by offering timely, same-day primary care. The expected impact is to reduce ED demand from minor illness and non-urgent conditions. This will be achieved by:

1. Review current provision and expand local SDPC hubs.
2. Align operating hours with ED access times.

3. Work with PCNs to ensure equitable coverage.
4. Encourage use of Virtual wards to support with IC/UCR patients
5. Start the Frailty Hub (name to be decided) in the middle of November 2025 at Newton Abbot hospital to support GP's and SDEC

Acute Respiratory Model - Manage seasonal respiratory surges with community-based interventions. The expected impact is to reduce respiratory-related ED attendances and admissions. This will be achieved by:

1. Evaluating current respiratory hubs and identify high-impact cohorts.
2. Implement targeted interventions in advance of winter peaks. Children and Young People have a high rate of attendances without admission)  
Implementation of 'Healthier Together', a tool which has been co-designed with service users and provides a digital solution for comprehensive information for children. National evidence to support significant reductions in ED attendances.
3. Link with innovations like remote monitoring for chronic conditions.
4. Encourage use of Virtual wards to support with IC/UCR patients

NHS 111 Disposition Validation - Objective: Minimise unnecessary ED referrals from 111. The expected impact is to increase validation from 40% to 50% could prevent 6 ED visits daily. This will be achieved by:

1. Expanding clinical validation of ED dispositions.
2. Strengthening redirection to primary, urgent, or respiratory care.
3. Audit outcomes to support continuous improvement.

Locality-Based Navigation - Improve patient access through local navigation and coordination. The expected impact is to improve care coordination and reduce repeat ED use. This will be achieved by:

1. Establishing Locality Navigation Hubs. Following the success and learning from the delivery of Care Coordination, a locality solution is being developed. The aim is to have in place a locally driven model that allows for a more fluid use of clinical pathways and management of risk. This would also need to link with Frailty hub for completeness to engage with community pathways.
2. Use real-time service directories and outreach to support patients.
3. Focus on frequent ED users and care planning.

### **2.2.2 Discharge Delays**

The 2024/25 metric which measured the percentage of people who are discharged from acute hospital to their usual place of residence has been replaced in 2025/26. This key performance indicator now focuses on the length of time from a person's discharge ready date (DRD) to their actual point of discharge.

Within the BCF plan we continue to focus on people being discharged from acute hospital settings via a Home First approach and to their usual place of residence.

## Performance for 2025/26:

Discharge Delays		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
Proportion of adult patients discharged from acute hospitals on their Discharge Ready Date (DRD)	Target	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%	89.3%
	Achieved	91.0%	92.0%	94.0%	89.0%	92.0%							
For those adult patients not discharged on DRD, average number of days from DRD to discharge	Target	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0	4.0
	Achieved	3.88	3.74	3.84	6.19	3.35							

Data at the time of submission indicates performance within Torbay was “**on track to meet the goal**”. Further information is provided in the quarter 2 return.

### 2.2.3 Residential Admissions

There has been no change to the residential admissions key performance indicator. The definition remains: Long-term support needs of older people (65 & over) met by admission to residential & nursing care homes per 100,000 population.

Avoiding permanent placements in residential and nursing care homes is a good measure of our ability to support people to live independently at home for as long as possible.

## Performance for 2025/26

Residential Admissions		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	Rate	762.3	809.7	195.2	195.2	197.8	197.8

residential and nursing care homes, per 100,000 population	Number of admissions	289.0	307.0	74.0	74.0	74.0	74.0
	Achieved			75.0	66.0		
	Population of 65+	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0	37,913.0

The residential admission target is an annual target and measured at year end. The 2025/26 target is 296 admissions per 100,000 population of people aged 65+. Quarter monitoring is being undertaken to review Torbay's current position. The metric has been classified as **"on track to meet goal"**.

### 3 Torbay BCF Expenditure Q2 2025/26

#### 3.1 Finance overview

Reporting requirements for monitoring BCF expenditure has been simplified. 2024/25 reporting required expenditure to be reported on for each budget line or area of investment. The national reporting for 2025/26 requires HWBB areas to:

1. Re-confirm the level of investment made into local BCF schemes
2. Provide a single year to date spend position
3. Provide assurance on the accuracy of spend if reporting exactly 50% of overall spend
4. Provide context if spending levels have a variance of +/-5%

Local monitoring of each investment line continues within TSDFT with additional oversight by NHS Devon and Torbay Council.

Torbay BCF has reported a Q2 position of £13,918,248 representing an expenditure of 46% of overall Torbay BCF investment.

#### Better Care Fund 2025-26 Q2 Reporting Template

##### 5. Income & Expenditure

Selected Health and Wellbeing Board:

Torbay

Source of Funding	2025-26		DFG Q2 Year-to-Date Actual Expenditure
	Planned Income	Updated Total Plan Income for 25-26	
DFG	£2,641,358	£2,641,358	£500,238
Minimum NHS Contribution	£16,724,252	£16,724,252	
Local Authority Better Care Grant	£10,902,595	£10,902,595	
Additional LA Contribution	£0	£0	
Additional NHS Contribution	£0	£0	
<b>Total</b>	<b>£30,268,205</b>	<b>£30,268,205</b>	

	Original	Updated	% variance
<b>Planned Expenditure</b>	<b>£30,268,205</b>	<b>£30,268,205</b>	<b>0%</b>

		% of Planned Income
<b>Q2 Year-to-Date Actual Expenditure</b>	<b>£13,918,248</b>	<b>46%</b>

#### **4. Recommendations**

- Torbay Health and Wellbeing Board approves the Q2 2025/26 Torbay BCF Report.

#### **Appendices**

##### **Background Papers:**

The following documents/files were used to compile this report:

#### **Appendix**

Torbay HWBB Q2 Return FINAL 2025-26