TORBAY COUNCIL

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Date:	Friday, 19 June 2026	Torquay
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Dear Member

HEALTH AND WELLBEING BOARD - THURSDAY, 25 JUNE 2026

I am now able to enclose, for consideration at the Thursday, 25 June 2026 meeting of the Health and Wellbeing Board, the following reports that were unavailable when the agenda was printed.

Agenda No	Item	Page
8.	**Torbay Better Care Fund - End of Year review and Annual Plan for 2026/27**	(Pages 3 - 30)

Yours sincerely

Governance Support
Clerk

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TORBAY COUNCIL

Title: **Torbay Better Care Fund End of Year Impact Report 2025-26**

Wards Affected: All

To: Torbay Health and Wellbeing Board **On: 25 June 2026**

Contact: Justin Wiggin, Senior Locality Manager, NHS Devon

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1. Purpose

The Better Care Fund (BCF) is the only mandatory policy to facilitate integration between Health and Social Care, providing a framework for joint planning and commissioning. The BCF brings together ring-fenced budgets from NHS allocations, ring-fenced BCF grants from Government, the Disabled Facilities Grant, and voluntary contributions from local government budgets. Each Health and Wellbeing Board has responsibility for the oversight of the BCF and is accountable for its delivery.

Torbay Health and Wellbeing Board is responsible for the oversight, assurance and signing off the development of BCF Plans throughout the year. Monitoring of BCF is managed via quarterly reports to Torbay Health and Wellbeing Board and the submission of assurance returns to NHS England. This report reflects upon the performance of Torbay BCF for the financial year 2025-26. The content of this report has been used to inform the completion of the Torbay BCF End of Year return 2025-26, which is embedded in the appendix of this document.

Torbay Health and Wellbeing Board is asked to endorse the Torbay BCF 2025-26 End of Year return.

2. National Policy and Planning

National planning requirements for the BCF are set out within The Better Care Fund (BCF) Policy Framework and was published on January 2025 by DHSC & DLUHC. The Policy Framework set out the Government's objectives for 2025-26 including:

Objective 1: reform to support the shift from sickness to prevention

- Local areas must agree plans that help people remain independent for longer and prevent escalation of health and care needs, including:
- timely, proactive and joined-up support for people with more complex health and care needs
- use of home adaptations and technology
- support for unpaid carers

Objective 2: reform to support people living independently and the shift from hospital to home

- Local areas must agree plans that:
- help prevent avoidable hospital admissions
- achieve more timely and effective discharge from acute, community and mental health hospital settings, supporting people to recover in their own homes (or other usual place of residence)
- reduce the proportion of people who need long-term residential or nursing home care

3. Key Focus of BCF Activity

BCF plans across Devon, Plymouth and Torbay have been developed to ensure consistency of focus across the Devon ICS footprint. Where possible programmes of activity which apply to all areas have been described consistently to ensure a joined-up planning approach. However, plans also reflect local variation and based upon work with specific local authorities and to reflect nuances in how services are delivered.

The below table provides an overview of the three main themes which BCF plans described in terms of activity. BCF plans form part of wider system delivery and investments. The below outlines areas where BCF investments are being directly made along with activity funded and delivered via alternative sources aligns where possible to delivery described within the NHS Operating Plan 2025-26.

Shift from sickness to prevention	Support people living independently and the shift from hospital to home	Achieve more timely and effective discharge from acute
Timely, proactive and joined-up support for people with more complex health and care needs – **Neighbourhood Health Teams** • Population health management • Modern general practice • Standardising community health services • Neighbourhood multidisciplinary teams (MDT) • Integrated intermediate care • Urgent neighbourhood services	**Prevent hospital admission** Approaches to prevent hospital admissions includes: • Increase GP capacity to deliver a Same Day Primary Care Hub pilot • Delivery of enhanced health in care homes to provide a more proactive approach to managing the health needs of care home residents • Ensure sufficient capacity within Urgent Community Response • Delivery of Care Co-ordination Hub model sees the ambulance service stream suitable 999 calls to expert clinicians who can advise, prescribe and refer to appropriate primary and community pathways. • Delivery of High Intensity Users Programme to understand the reason for repeat attendance in ED and support the client with the route cause and wider social determinants which may be driving behaviours. • Same Day Emergency Care and Frailty Same Day Emergency Care diverting patient appropriately away from Emergency Departments to have their needs met by clinicians via an alternate model of care.	1) Establish robust **demand and capacity plans** to ensure market sufficiency for P1-3 discharges across Devon ICB footprint. 2) Ensure **robust and consistent data collection** against BCF metrics, focus on discharge to normal place of residence, NCTR and delays from discharge ready dates. 3) Review current VCSE capacity and delivery to inform a future **VCSE discharge support model** across Devon ICB 4) Learning from early adopter areas in Devon, **develop a revised pathway 1 reablement specification and contract** to achieve consistent outcomes across Devon ICB. 5) Consolidation of pathway 2 provision across Devon ICB including a review of capacity and **P2 therapeutic models** across localities, understand impact of **P2 reablement** block contracts procured in 2024/25 and define further commissioning intentions for 2025/26 working towards John Bolton / IPAC models within localities. 6) Focus on **shifting pathway demand** from pathway 2 to pathway 1 and **reduce lengths of stay across all pathways, including, improving assurance of quality of discharge** and **delivery of Home First approach** 7) 25/26 will see the creation of a bespoke pan-Devon **End of Life discharge pathway**.

4. Performance

BCF Policy Framework 2025/26 introduced a set of national headline and supplementary metrics:

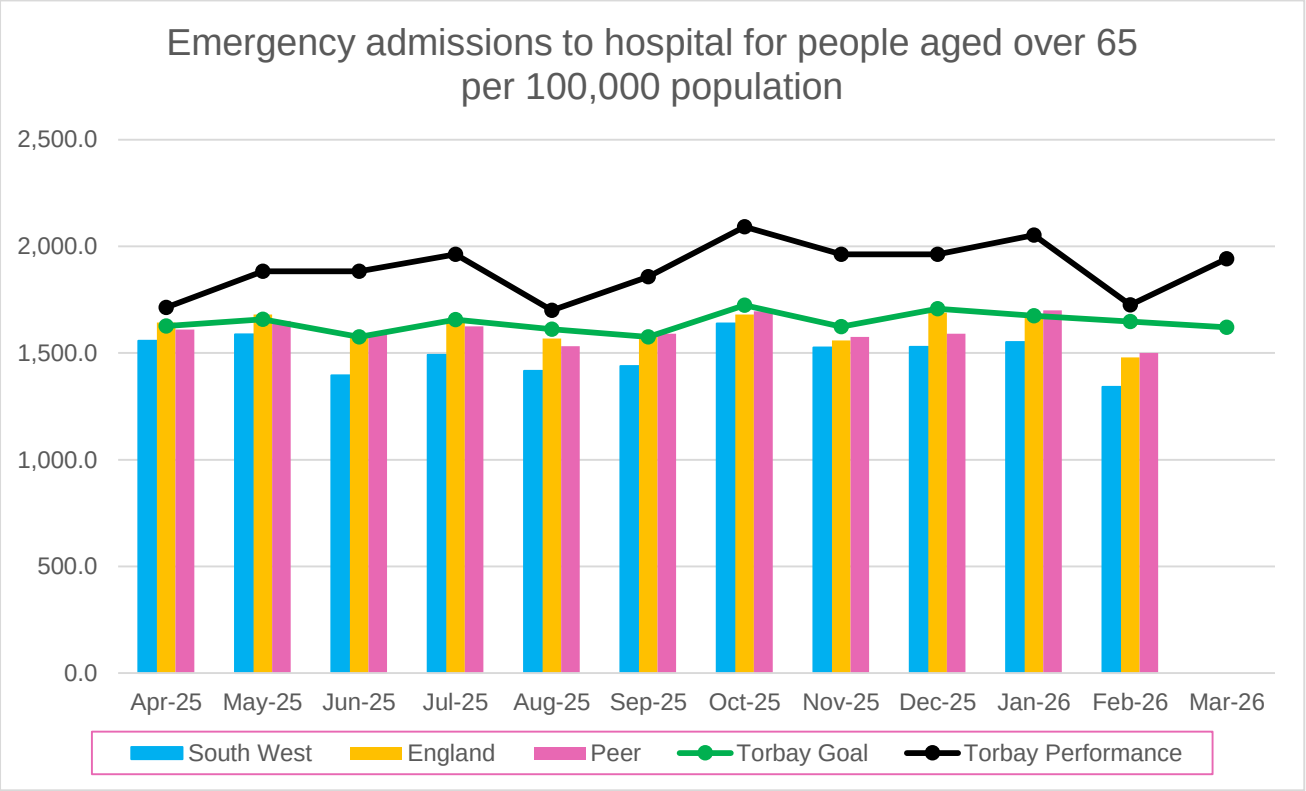
1. Emergency admissions to hospital for people aged over 65 per 100,000 population

2. Average length of discharge delay for all acute adult patients, derived from a combination of:

3. Long-term admissions to residential care homes and nursing homes for people aged 65 and over per 100,000 population

Better Care Fund investment cannot be viewed in isolation. National planning guidelines considers BCF monies within wider funding and resource allocation in localities. Any investment should be seen as contributing to achieving BCF performance targets and not solely responsible.

4a. Emergency admissions to hospital for people aged over 65 per 100,000 population



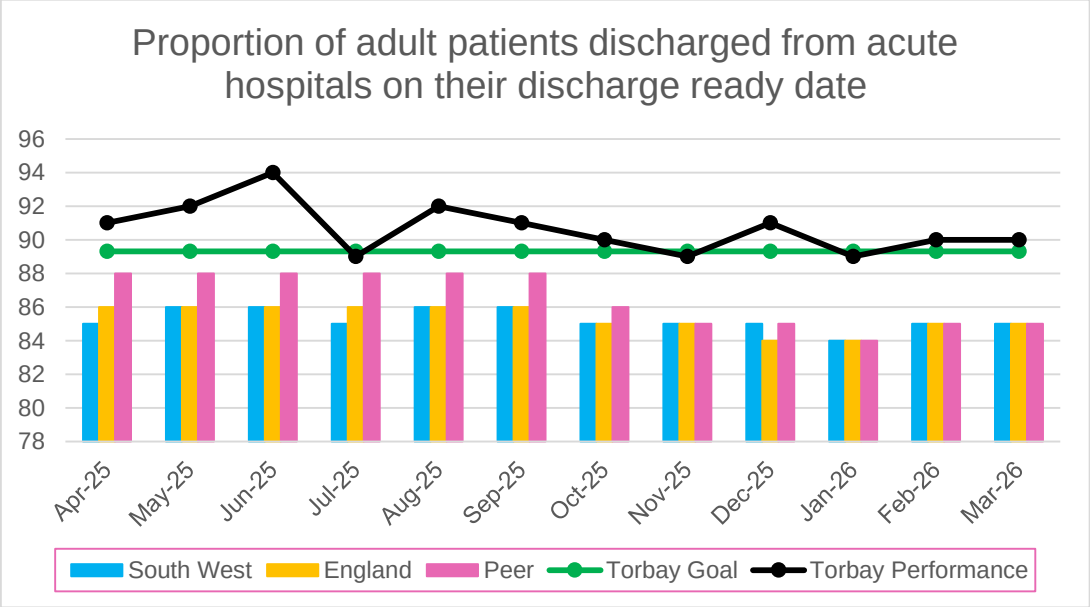
Emergency admissions to hospital for people aged over 65 per 100,000 population has been a challenging performance metric during the 2025/26 financial year. Monthly goals were set and mirrored those in the NHS Operating Plan 2025/26. Targets reflected previous year's performance with additional growth in expected demand.

Two supplementary metrics contribute to ED admissions. This includes unplanned hospital admissions for chronic ambulatory care conditions and admissions due to falls in people aged 65+. Torbay is seeing higher rates of admissions to ED, admissions for chronic ACSC and falls. Torbay's average performance is 14.4% higher than the Peer Group (chronic ACSC) and 23.4% higher (falls).

	Unplanned hospital admissions for chronic ACSC per 100k pop					Emergency hospital admissions due to falls in people aged 65+ per 100k pop			
Month	**Torbay**	**South West**	**England**	**Peer**		**Torbay**	**South West**	**England**	**Peer**
Apr 25	222	195	212	224		144	147	145	152
May 25	262	200	211	222		157	146	149	147
Jun 25	235	175	197	215		196	126	134	137
Jul 25	235	171	185	198		170	132	139	140
Aug 25	183	161	177	183		170	139	142	146
Sept 25	209	176	187	196		183	139	141	146
Oct 25	275	205	202	212		183	152	145	138
Nov 25	262	186	194	192		209	142	138	143
Dec 25	262	185	206	196		196	144	146	143
Jan 26	262	197	214	213		235	131	136	94
Feb 26	196	169	189	180		131	88	94	85
Avg	**236**	**183**	**197**	**202**		**179**	**135**	**137**	**137**

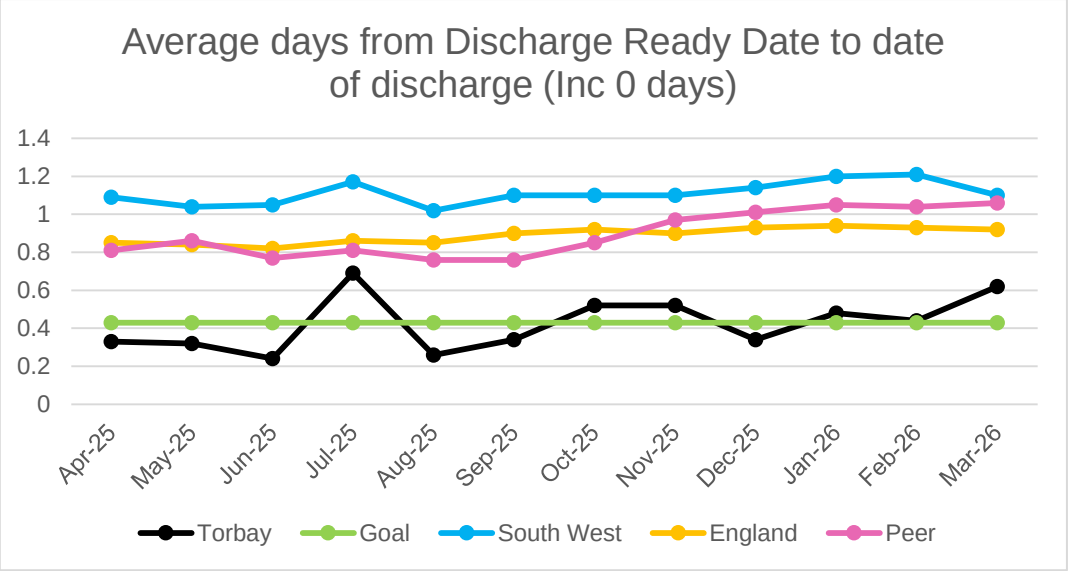
4b Average length of discharge delay for all acute adult patients

The proportion of adult patients discharged from acute hospital on their discharge ready date provides the key focus for hospital discharge activity aligned to Better Care Fund. Throughout 2025/26 a consistent monthly target of 89.3% has been set. Nationally reported data is available between April 2025 and March 2026. Torbay has consistently overachieved delivery against this metric with an average performance of 90.7% across the financial year.



Discharge performance is supported by two supplementary metrics:

1. Average days from Discharge Ready Date to date of discharge (inc 0 days)
2. Average days from Discharge Ready Date to date of discharge (exc 0 days)



The below table represents Torbay's performance against the first supplementary metric above. A target of 0.43 days to discharge patients on the same day was set. Torbay's performance has varied throughout the year. The target has not been achieved in July, October, November, January and March. However, the average performance between April 2025 and March 2026 is 0.42 days, which meets the goal set.

For clients not discharged on their discharge ready date – average days from DRD to date of discharge (exc 0 days), Torbay's target was 4 days with the average across the financial year achieving 4.4 days. Torbay's performance varies month on month with the lowest number of days being 3.3 days (August 2025) and the highest reaching 6.2 days (July 2025). Torbay outperforms regional, national and peer groups every month. The below table provides the average performance against both supplementary metrics.

	April 2025 – March 2026	
Area	**Avg days from DRD (inc 0 days)**	**Avg days from DRD (exc 0 days)**
Torbay	0.42	4.40
South West	1.02	7.49
England	0.88	6.05
Peer Group	0.79	6.64

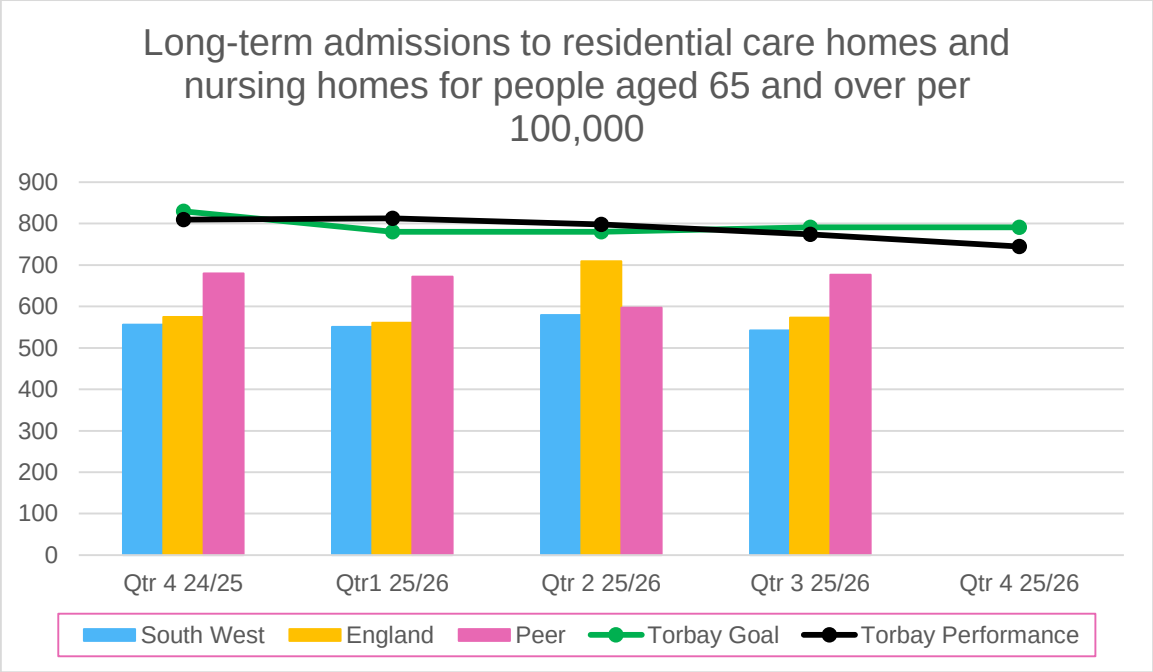
4c Long-term admissions to residential care homes and nursing homes for people aged 65 and over per 100,000 population

The long-term admissions to residential care homes target is measured on a quarterly, 12 month rolling average. The below diagram illustrates Torbay's target goal per quarter along with the actual performance. For comparison purposes, included are the average rates of admissions at South West, England and Local Authority Peer Group level.

Comparing Torbay performance against regional, national and peer groups should be treated with caution. The national methodology in recording this data has been problematic for all local authorities. Business intelligence colleagues nationally express concern

regarding the lack of visibility behind national data computations which appear to result in poorer levels of performance when compared to local data.

Torbay BCF set a target rate of admission per 100,000 population. The target rate was 791 (per 100k pop.) to be achieved by March 2026. The latest nationally reported data is available up to December 2025. For completeness, local data has been used for Q4 2025/26. Torbay does not compare favourably against national, regional or peer group averages. The target rate was not achieved in quarters 1 and 2 of 2025/26. However, the position has been improving throughout the year with Torbay overachieving against the Q3 target and achieving a rate of 774 which is lower than the annual target of 791.



Data source: dhexchange Better Care Fund Dashboard

Supporting the improved performance is the supplementary metric which measures "The percentage of patients aged 65+ discharged back to their usual place of residence". Torbay has consistently performed above national and peer group levels throughout 2025/26. Better Care Fund plans do not require targets to be set for this metric. However, data shows the England and Peer Group average performing at 80.24% and 81.10% respectively (December 2025). Torbay's percentage of patients discharged back to their usual place of residence is 82% (December 2025).

The below table provides a local authority peer group "league table" showing the movement each quarter in the rate of admissions to long-term residential care. Torbay has remained reasonably consistent improving from 15th highest admissions to 13th in quarter 3. Caution should be taken in comparing LA's due to the national recording and reporting issues mentioned above. This may be evident in the change in performance level for St. Helens between quarter 4 2024/25 (first) and quarter 3 2025/26 (eighth).

Lowest admissions	Quarter 4 24/25	Quarter 1 25/26	Quarter 2 25/26	Quarter 3 25/26
1	*St Helens*	*St Helens*	*Bournemouth, Christchurch and Dorset*	*Bournemouth, Christchurch and Dorset*
2	*East Sussex*	*Bournemouth, Christchurch and Dorset*	*East Sussex*	*East Sussex*
3	*Cheshire East*	*Cheshire East*	*Wirral*	*Isle of Wight*
4	*Bournemouth, Christchurch and Dorset*	*Wirral*	*Cheshire East*	*South Gloucestershire*
5	*Wirral*	*East Sussex*	*St Helens*	*Wirral*
6	*East Riding of Yorkshire*	*Isle of Wight*	*Isle of Wight*	*Southend-on-Sea*
7	*South Gloucestershire*	*South Gloucestershire*	*South Gloucestershire*	*Darlington*
8	*North Somerset*	*East Riding of Yorkshire*	*Southend-on-Sea*	*St Helens*
9	*Southend-on-Sea*	*North Somerset*	*North Somerset*	*Cheshire East*
10	*Redcar and Cleveland*	*Southend-on-Sea*	*Darlington*	*Sefton*
11	*Isle of Wight*	*Redcar and Cleveland*	*Redcar and Cleveland*	*North Somerset*
12	*Darlington*	*Sefton*	*North East Lincolnshire*	*North East Lincolnshire*
13	*Sefton*	*North East Lincolnshire*	*Sefton*	**Torbay**
14	**Torbay**	*Darlington*	**Torbay**	*Redcar and Cleveland*
15	*North East Lincolnshire*	**Torbay**	*East Riding of Yorkshire*	*Blackpool*
16	*Blackpool*	*Blackpool*	*Blackpool*	*East Riding of Yorkshire*
Highest admissions				

Data source: dhexchange Better Care Fund Dashboard

5. Finance

The Better Care Fund has established pooled budgets between NHS Devon, Torbay Council and TSDFT at place level to drive integration. Every Health and Wellbeing Board is required to submit a BCF plan with the aim of working towards improved performance against the two programme objectives.

The below table outlines the total financial values as reflected in the Better Care Fund for Torbay Local Authority area 2025-26 and 2026/27. Better Care Fund has three main budget headings. These are; Disabled Facilities Grant (DfG), NHS minimum contribution and the Local Authority Better Care Grant.

The DfG is retained by Torbay Council and used to fund:

- aids / adaptations to individuals own homes and
- capital projects within Torbay e.g extra care facilities

The NHS minimum contribution has three elements:

1. NHS minimum contribution to Adult Social Care
2. NHS discharge allocation
3. NHS contribution

Local Authority Better Care Grant consists of two elements:

1. The previously known iBCF grant
2. LA discharge grant

Torbay will see an overall rise in 1.86% BCF monies between 2025/26 and 2026/27. In 2026/27 Local Authorities will receive increased funding for DfG, the LC BCF grant remains at the same level as the previous year. NHS Devon will receive an overall 2.8% rise in funding. Within the NHS minimum contribution a 4.45% increase is seen against the NHS minimum contribution to Adult Social Care.

Funding stream	Sub-funding		Torbay 25/26	Sub-funding	Torbay 26/27
Disabled Facilities Grant			**£2,641,358**		**2,736,176**
NHS Minimum Contribution	NHS minimum contribution to ASC	5,061,000	**£16,724,252**	5,286,000	**17,192,845**
	NHS Discharge allocation	1,848,000		1,887,000	
	NHS contribution	9,816,252		10,019,845	
LA BCF Grant	LA discharge fund	2,056,763	**£10,902,595**	2,056,763	**10,902,595**
	iBCF	8,845,832		8,845,832	
Total			**£30,268,205**		**£30,831,616**

A list of schemes invested in during 2025/26 can be found in appendix A. Focusing on the NHS Minimum Contribution and LA BCF Grant, £27,626,847 is invested in BCF schemes in Torbay 2025/26. Excluding DfG monies, due to Torbay and South Devon NHS Foundation Trust largely holding Adult Social Care contracts on behalf of Torbay Council, 99.09% of funding sits with TSDFT, 0.84% is held by Torbay Council and 0.07% is with NHS Devon.

Funding areas	Percentage	£
Care market provision and packages of care	64.74%	17,892,942
VCSE	2.28%	630,727
TEC	3.08%	850,035
Markets & contracting	3.45%	950,000
TSDFT in-house provision	26.45%	7,312,000
Total	**100%**	**27,635,704**

A full list of proposed investments for 2026/27 can be found in Appendix B. Largely areas of investment are proposed to carry forwards from 2025/26. Changes can be found highlighted in green. The below table provides a list of changes. In summary this includes:

- DfG separated into revenue and capital schemes
- Discharge support infrastructure scheme 14f funded in 2025/26 by BCF 2024/25 clawback. Proposal to fund from NHS Devon retained monies.
- VCSE schemes to be novated from TSDFT to Torbay Council, as agreed by s75 execs, BCF funding levels to move from TSDFT to Torbay Council. Uplifts to costs to be met by NHS minimum contribution to ASC uplift.
- Schemes 14a-e represent VCSE commitment previously approved by Torbay s75 exec with uplift to contracts being funded from NHS minimum contribution to Adult Social Care.
- Scheme 21b and 21c reablement and replacement care will continue in 2026/27. These are part funded by NHS Devon retained monies and NHS Minimum contribution to Adult Social Care
- Scheme 21d, NHS Devon retained monies not committed to be used to develop integrated neighbourhood teams in Torbay.

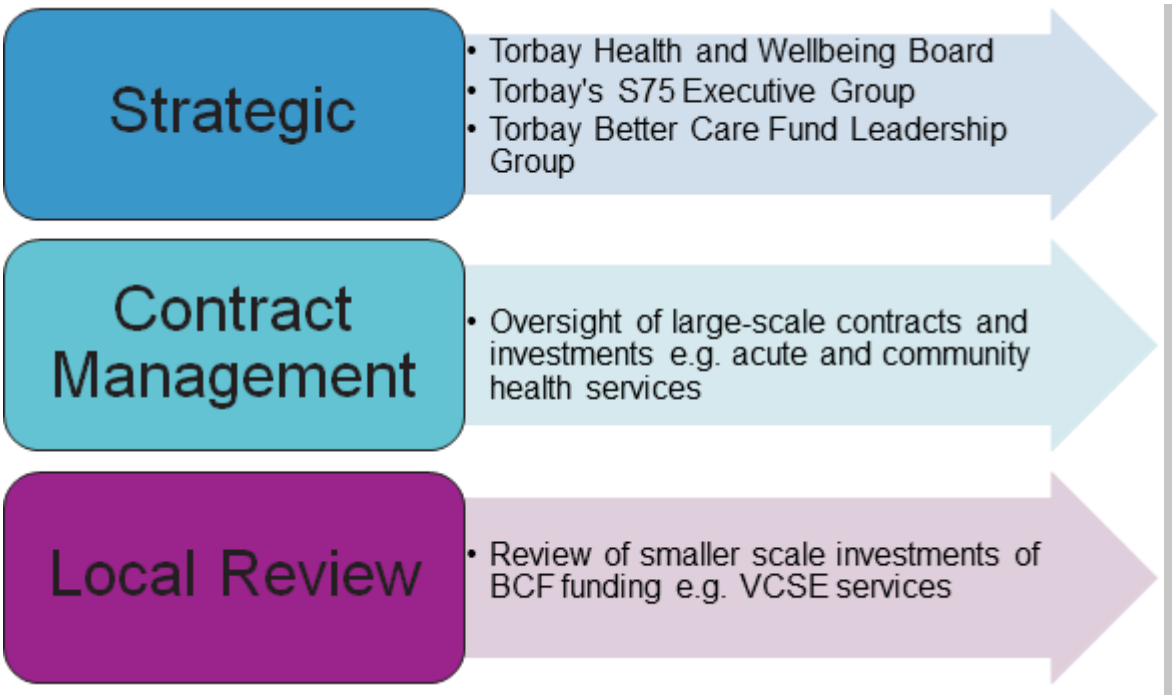
Focus area	Scheme ID	Activity	Description		Primary Objective	Source of Funding	2026/27 (£)	Monies held by
Disabled Facilities Grant	1a	Disabled facilities grant related schemes	DFG Related Schemes	DfG – Revenue	Home adaptations of tech	DFG	2,736,176	Torbay Council
	1b	Disabled facilities grant related schemes	DFG Related Schemes	DfG - Capital	Capital	DFG		
Discharge	14f	Discharge support and infrastructure	Hospital Discharge support (ward based and home from Hospital (Teignbridge and Torbay Communities)	*Torbay Communities*	Timely discharge from hospital		123,593	Torbay Council
Intermediate Care	21b	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	Reablement Care Torbay	Timely discharge from hospital	NHS minimum contribution	297,375	Torbay Council
	21c	Support to carers, including unpaid carers	Pathway 1 and VCSE reablement initiative	Replacement Care Torbay	Timely discharge from hospital	NHS minimum contribution	139,403	Torbay Council
	21d			Neighbourhood Development Fund		NHS minimum contribution	447,410	NHS Devon
Prevention and independence	12	Wider local support to promote prevention and independence	(Brixham) Day service to improve quality of life, education, health and social welfare	The Friends Centre / Dementia Daycare (Brixham Does Care)	Preventing unnecessary hospital admissions	NHS minimum contribution	257,225	Torbay Council
	13	Wider local support to promote prevention and independence	(Paignton) Day service to improve quality of life, education, health and social welfare	Information and Advice, 50+ (Age UK Torbay)	Preventing unnecessary hospital admissions	NHS minimum contribution	102,410	Torbay Council
	14a	Wider local support to promote prevention and independence	VCSE support for people in their own homes and supporting hospital discharge. Ward based VCSE support	PA co-ordination / matching service – Windmill Torbay	Preventing unnecessary hospital admissions	NHS minimum contribution	98,696	Torbay Council
	14b			Community Transport (Karing)			33,572	Torbay Council
	14c			Wellbeing Co-ordination (Age UK Torbay)			252,707	Torbay Council
	14d			Brixham ASC Front Door / Active Living Network (Brixham Does Care)			73,702	Torbay Council

	14e			Bipolar Torbay (Bipolar UK)			10,129	Torbay Council

6. Governance for managing the expenditure of BCF

2026/27 BCF planning guidance required local systems to outline the governance arrangements for managing the expenditure of BCF funding, including assessing impact of funding, value for money and continuous improvement.

Torbay's BCF Governance model operates at three levels:



Local review of investments allows for a deep dive into the performance of individual budget lines included in the appendix B. Reviews will be undertaken in 2026/27 to ensure delivery against key performance indicators, alignment to BCF national objectives and value for money. The process for undertaking reviews will be developed shortly with the aim to finding a consistent approach across the NHS Devon footprint whilst recognising the need to maintain a focus on the needs within the Torbay Local Authority area.

The locality review and contract management functions will provide intelligence throughout 2026/27 to inform changes in BCF investments to further align to Neighbourhood Health, prevention and intermediate care in future years.

Commissioning work is underpinned by the monthly Commissioning Oversight Group (COG), chaired by the local authority lead commissioner and attended by commissioners from the Council (Adults, Children's Services and Public Health) and the ICB.

7. Recommendations

1. Torbay Health and Wellbeing Board is asked to endorse the Torbay BCF 2025-26 End of Year return.

Appendices

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

Appendix

List of background papers

Document	
Torbay BCF End of Year return 2025-26	Torbay BCF 2025-26 EOY Reporting Temp

Appendix A – 2024/25 BCF scheme of investments

Focus area	Scheme ID	Activity	Description		Primary Objective	Source of Funding	2025/26 (£)	Monies held by
Disabled Facilities Grant	1	Disabled facilities grant related schemes	DFG Related Schemes		Home adaptations of tech	DFG	2,641,358	Torbay Council
Discharge	2	Discharge support and infrastructure	Hospital Discharge Hub Team	*TSDFT Discharge Hub*	Timely discharge from hospital	NHS minimum contribution	750,000	TSDFT
	6	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	Care Home Block Beds:	*Jack Sears – 29 beds* *Hill House – 4 beds*	Reducing the need for long term residential care	NHS minimum contribution	2,775,000	TSDFT
	7	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Block contracts for Hospital discharge	Agin Care Baycare	Timely discharge from hospital	NHS minimum contribution	1,050,000	TSDFT
	8	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	Care Home Spot IC & Hospital discharge	*Pathway 2 spot contracts*	Timely discharge from hospital	NHS minimum contribution	2,229,410	TSDFT
	21	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	TSDFT Occupation Therapy In-reach	Timely discharge from hospital	NHS minimum contribution	39,000	TSDFT
Intermediate Care	3	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Rapid Response Torbay	P1 in-house and admission avoidance	Timely discharge from hospital	NHS minimum contribution	900,000	TSDFT
	4	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Reablement Torbay	P1 / UCR	Timely discharge from hospital	NHS minimum contribution	600,000	TSDFT
	5	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Intermediate Care Torbay Team	Therapy support OT physio	Timely discharge from hospital	NHS minimum contribution	1,900,000	TSDFT
	21	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	Reablement Care Torbay	Timely discharge from hospital	NHS minimum contribution	161,461	Torbay Council
	21	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	Replacement Care Torbay	Timely discharge from hospital	NHS minimum contribution	71,536	Torbay Council
	22	Home-based intermediate care (short-term home-based	Pathway 1 and VCSE reablement initiative		Preventing unnecessary hospital admissions	NHS minimum contribution	191,000	TSDFT

		rehabilitation, reablement and recovery)						
Technology Enabled Care	15	Assistive technologies and equipment	Using technology in care processes to support self-management	TEC	Proactive care to those with complex needs	Local Authority Better Care Grant	305,000	TSDFT
	19	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Transforming short-term home-based social care through innovation as part of transforming Integrated ASC	TEC	Home adaptations and tech	NHS minimum contribution	545,035	TSDFT
Community Long-term Care	10	Wider local support to promote prevention and independence	Health & Social Care Co-ordinators working with multi-disciplinary teams, GP and voluntary sector	HSCC's (prevention and community and refer to rehab / reablement)	Proactive care to those with complex needs	Local Authority Better Care Grant	825,000	TSDFT
	18	Long-term home-based social care services	Transforming long-term home-based social care through innovation as part of transforming Integrated ASC	Dom care block contract	Proactive care to those with complex needs	NHS minimum contribution	4,379,217	TSDFT
	20	Long-term residential / nursing home care	Transforming long-term bed-based Social Care through Innovation as part of transforming Integrated ASC	Community res / nursing care spot contracts / P3 discharges	Reducing the need for long term residential care	Local Authority Better Care Grant	6,524,595	TSDFT
	21	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	TSDFT additional contribution to block dom care / P1 contract	Timely discharge from hospital	NHS minimum contribution	510,723	TSDFT
Prevention and independence	9	Wider local support to promote prevention and independence	Front end services – First point of contact for social care, social care navigation		Proactive care to those with complex needs	Local Authority Better Care Grant	1,800,000	TSDFT
	11	Wider local support to promote prevention and independence	Community based provision for people with learning disabilities through community hub		Proactive care to those with complex needs	Local Authority Better Care Grant	50,000	TSDFT
	12	Wider local support to promote prevention and independence	(Brixham) Day service to improve quality of life, education, health and social welfare	The Friends Centre / Dementia Daycare (Brixham Does Care)	Preventing unnecessary hospital admissions	NHS minimum contribution	200,000	TSDFT
	13	Wider local support to promote prevention and independence	(Paignton) Day service to improve quality of life, education, health and social welfare	Information and Advice, 50+ (Age UK Torbay)	Preventing unnecessary hospital admissions	NHS minimum contribution	100,010	TSDFT
	14	Wider local support to promote prevention and independence	VCSE support for people in their own homes and supporting hospital discharge.	Community Transport (Karing)	Preventing unnecessary hospital admissions	NHS minimum contribution	18,785	TSDFT
				Wellbeing Co-ordination (Age UK Torbay)			208,785	TSDFT

			Ward based VCSE support	Brixham ASC Front Door / Active Living Network (Brixham Does Care)			71,975	TSDFT
				Bipolar Torbay (Bipolar UK)			9,892	TSDFT
	17	Wider local support to promote prevention and independence	Sensory Team supporting adults to live independent lives		Proactive care to those with complex needs	Local Authority Better Care Grant	448,000	TSDFT
	21	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	Torbay Safe Bus	Timely discharge from hospital	NHS minimum contribution	21,280	NHS Devon
Markets and Contracting	16	Evaluation and enabling integration	Joint infrastructure for Integrated Commissioning Function between NHS and Local Authority	Markets and Contracts Team	Proactive Care to those with complex needs	Local Authority Better Care Grant	950,000	TSDFT
TOTAL							**£27,629,21**	

Appendix B - 2025/26 Proposed Torbay BCF scheme of investments

Focus area	Scheme ID	Activity	Description		Primary Objective	Source of Funding	2025/26 (£)	Monies held by
Disabled Facilities Grant	1a	Disabled facilities grant related schemes	DFG Related Schemes	DfG – Revenue	Home adaptations of tech	DFG	2,736,176	Torbay Council
	1b	Disabled facilities grant related schemes	DFG Related Schemes	DfG - Capital	Capital	DFG		
Discharge	2	Discharge support and infrastructure	Hospital Discharge Hub Team	*TSDFT Discharge Hub*	Timely discharge from hospital	NHS minimum contribution	750,000	TSDFT
	6	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	Care Home Block Beds:	*Jack Sears – 29 beds* *Hill House – 4 beds*	Reducing the need for long term residential care	NHS minimum contribution	2,775,000	TSDFT
	7	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Block contracts for Hospital discharge	Agin Care Baycare	Timely discharge from hospital	NHS minimum contribution	1,050,000	TSDFT
	8	Bed-based intermediate care (short-term bed-based rehabilitation, reablement and recovery services)	Care Home Spot IC & Hospital discharge	*Pathway 2 spot contracts*	Timely discharge from hospital	NHS minimum contribution	2,229,410	TSDFT
	14f	Discharge support and infrastructure	Hospital Discharge support (ward based and home from Hospital (Teignbridge and Torbay Communities)	*Torbay Communities*	Timely discharge from hospital		123,593	Torbay Council
	21a	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	TSDFT Occupation Therapy In-reach	Timely discharge from hospital	NHS minimum contribution	39,000	TSDFT
Intermediate Care	3	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Rapid Response Torbay	P1 in-house and admission avoidance	Timely discharge from hospital	NHS minimum contribution	900,000	TSDFT
	4	Home-based intermediate care (short-term home-based rehabilitation and reablement)	Reablement Torbay	P1 / UCR	Timely discharge from hospital	NHS minimum contribution	600,000	TSDFT
	5	Home-based intermediate care (short-term home-based	Intermediate Care Torbay Team	Therapy support OT physio	Timely discharge from hospital	NHS minimum contribution	1,900,000	TSDFT

		rehabilitation and reablement)						
	21b	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Pathway 1 and VCSE reablement initiative	Reablement Care Torbay	Timely discharge from hospital	NHS minimum contribution	297,375	Torbay Council
	21c	Support to carers, including unpaid carers	Pathway 1 and VCSE reablement initiative	Replacement Care Torbay	Timely discharge from hospital	NHS minimum contribution	139,403	Torbay Council
	22	Home-based intermediate care (short-term home-based rehabilitation, reablement and recovery)	Pathway 1 and VCSE reablement initiative		Preventing unnecessary hospital admissions	NHS minimum contribution	188,961	TSDFT
Technology Enabled Care	15	Assistive technologies and equipment	Using technology in care processes to support self-management	TEC	Proactive care to those with complex needs	Local Authority Better Care Grant	305,000	TSDFT
	19	Short-term home-based social care (excluding rehabilitation, reablement or recovery services)	Transforming short-term home-based social care through innovation as part of transforming Integrated ASC	TEC	Home adaptations and tech	NHS minimum contribution	545,035	TSDFT
Community Long-term Care	10	Wider local support to promote prevention and independence	Health & Social Care Co-ordinators working with multi-disciplinary teams, GP and voluntary sector	HSCC's (prevention and community and refer to rehab / reablement)	Proactive care to those with complex needs	Local Authority Better Care Grant	825,000	TSDFT
	18	Long-term home-based social care services	Transforming long-term home-based social care through innovation as part of transforming Integrated ASC	Dom care block contract	Proactive care to those with complex needs	NHS minimum contribution	4,379,217	TSDFT
	20	Long-term residential / nursing home care	Transforming long-term bed-based Social Care through Innovation as part of transforming Integrated ASC	Community res / nursing care spot contracts / P3 discharges	Reducing the need for long term residential care	Local Authority Better Care Grant	6,524,595	TSDFT
	21d			Neighbourhood Development Fund		NHS minimum contribution	447,410	NHS Devon
Prevention and independence	9	Wider local support to promote prevention and independence	Front end services – First point of contact for social care, social care navigation		Proactive care to those with complex needs	Local Authority Better Care Grant	1,800,000	TSDFT
	11	Wider local support to promote prevention and independence	Community based provision for people with learning disabilities through community hub		Proactive care to those with complex needs	Local Authority Better Care Grant	50,000	TSDFT

	12	Wider local support to promote prevention and independence	(Brixham) Day service to improve quality of life, education, health and social welfare	The Friends Centre / Dementia Daycare (Brixham Does Care)	Preventing unnecessary hospital admissions	NHS minimum contribution	257,225	Torbay Council
	13	Wider local support to promote prevention and independence	(Paignton) Day service to improve quality of life, education, health and social welfare	Information and Advice, 50+ (Age UK Torbay)	Preventing unnecessary hospital admissions	NHS minimum contribution	102,410	Torbay Council
	14a	Wider local support to promote prevention and independence	VCSE support for people in their own homes and supporting hospital discharge. Ward based VCSE support	PA co-ordination / matching service – Windmill Torbay	Preventing unnecessary hospital admissions	NHS minimum contribution	98,696	Torbay Council
	14b			Community Transport (Karing)			33,572	Torbay Council
	14c			Wellbeing Co-ordination (Age UK Torbay)			252,707	Torbay Council
	14d			Brixham ASC Front Door / Active Living Network (Brixham Does Care)			73,702	Torbay Council
	14e			Bipolar Torbay (Bipolar UK)			10,129	Torbay Council
	17	Wider local support to promote prevention and independence	Sensory Team supporting adults to live independent lives		Proactive care to those with complex needs	Local Authority Better Care Grant	448,000	TSDFT
Markets and Contracting	16	Evaluation and enabling integration	Joint infrastructure for Integrated Commissioning Function between NHS and Local Authority	Markets and Contracts Team	Proactive Care to those with complex needs	Local Authority Better Care Grant	950,000	TSDFT
TOTAL							**£30,831,616**	

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TORBAY COUNCIL

Title: **Torbay Better Care Fund Plan 2026-27**

Wards Affected: All

To: Torbay Health and Wellbeing Board **On: 25 June 2026**

Contact: Justin Wiggin, Senior Locality Manager, NHS Devon

E-mail: justin.wiggin@nhs.net

1. Purpose

The Department of Health and Social Care (DHSC) and the Ministry of Housing, Communities & Local Government published guidance, February 2026 for the development of Better Care Fund (BCF) Plans for the 2026-27 financial year.

BCF Plans, were submitted to NHS England, 19th May 2026 and required joint development between Integrated Care Boards, Local Authorities, NHS providers and voluntary, community and social enterprise sector to develop a joint plan to further support integration in local areas, address national objectives and work to achieve delivery against key performance indicators BCF seeks to positively impact.

Torbay's plan has been developed jointly with system partners, co-written and co-produced via local BCF governance arrangements and planning meetings along with wider engagement via Local Care Partnership meetings where possible.

The 2026-27 planning guidelines outlines the need for Integrated Care Board and Local Authority Chief Executives to sign off plans. Local Health and Wellbeing Boards retain oversight and formal endorsement for BCF Plans to be "signed off" by local systems.

This paper aims to outline the BCF planning requirements, arrangements, finance and performance for Torbay HWBB area.

2. Background

The Better Care Fund (BCF) is the only mandatory policy to facilitate integration between Health and Social Care, providing a framework for joint planning and commissioning. The BCF brings together ring-fenced budgets from NHS allocations, ring-fenced BCF grants from Government, the Disabled Facilities Grant, and voluntary contributions from local government budgets. Each Health and Wellbeing Board has responsibility for the oversight of the BCF and is accountable for its delivery.

Better Care Fund Policy Framework has outlined 2026/27 as being the first year of BCF reform. Further details of reforms are described within this document. All Better Care Fund Plans must be considered within the context of wider system planning, aligning to NHS operating plan submissions and ICB 5-year commissioning plans. The Torbay BCF submission contributes towards the following ICB 5-year commissioning intentions:

	Commissioning intention
NHS Devon Five Year Commissioning Plan 2026/31	• Keeping people safe and well in their neighbourhood • Shifting traditional acute care into communities • Prevention and inequalities

The BCF assurance return was submitted 19th May 2026. BCF plans had to include the following:

- Assurance statements showing how they have met the national BCF conditions, including:
    - how their BCF spending plans link to wider strategic objectives for neighbourhood health and social care
    - the rationale for the goals they are setting and how they will drive progress in preventing avoidable long-term care home admissions and improving outcomes from reablement services
- The expected impact of BCF-funded activities and value for money
- A breakdown of their planned BCF expenditure by category of spend and funding source, including delivering the NHS minimum contribution to social care

To comply with these requirements, two documents have been produced. This includes a strategic narrative document and a numerical return. The completed BCF plan can be found in the appendix of this document.

3. National Policy and Planning

As set out in the 10 Year Health Plan for England, a commitment has been made to reform the Better Care Fund (BCF), to provide a more consistent and effective approach to funding services which are essential to deliver in a fully integrated way. As a first step in this reform journey, an initial set of changes to the BCF in 2026 to 2027 have been made to help local areas go further in joining up delivery of health and social care services, in line with the government's objectives for neighbourhood health and devolving more responsibilities.

These new arrangements include asking health and wellbeing boards, ICBs and local authorities to more closely align plans for integrated health and social care services to the development of relevant areas of neighbourhood health services, such as intermediate care. Care should be taken not to disrupt the delivery of critical services that rely on BCF funding and increase investment in adult social care.

ICBs and local authorities are to agree local goals with their health and wellbeing boards for:

1. Non-elective admissions (for people aged 65 and over)
2. Delayed discharges
3. Focus on improving reablement outcomes (reablement is short-term care to help people regain independence after, for example, a hospital stay, illness or fall)
4. Reduce demand for long-term residential and nursing home care.

Better Care Fund plans should not be seen or treated in isolation. Therefore, BCF plans link to wider commissioning plans - including the ICB 5-year strategic commissioning plan - rather than being limited to the impact of pooled budgets.

It is recognised that for 2026/27, (the first year of BCF reform), it will not be possible to comprehensively integrate BCF planning and neighbourhood health planning. However, health and wellbeing boards, ICBs and local authorities are asked to take a pragmatic approach to linking BCF plans with local priorities for more integrated health and social care. Opportunities this year may include:

- improve joint commissioning of integrated neighbourhood teams and bring together urgent community response, intermediate care and other community services at a multi-neighbourhood level

- ensure that services funded from the BCF are part of wider plans to support people living with frailty and others with more complex health and social care needs

- improve shared understanding and transparency about the outcomes and impact of the current BCF locally

- lay a strong shared foundation for future reform of the BCF and begin alignment with neighbourhood health services

In line with national BCF conditions, ICBs and local authorities were asked to submit agreed BCF assurance returns by email to the national BCF team and regional better care manager by 19th May 2026.

4. BCF and the neighbourhood health service

The neighbourhood health service is a central policy in the 10 Year Health Plan. It will:

- bring more care into local communities
- unite professionals from different organisations into teams aligned around people's needs
- join up services
- focus health and care services increasingly on the prevention of ill health

Over time, it will shift the NHS from hospital to community, from sickness to prevention, and from analogue to digital. The overarching goal is to help people live

more healthy and independent lives and transform their experience of health and care services.

For 2026 to 2027, one of the early steps in developing the neighbourhood health service will be to introduce more systematic and effective support for people with complex health and social care needs.

The initial focus will be on priority cohorts including those with frailty and those nearing the end of life. This will include further development of integrated neighbourhood teams for these groups, bringing together primary care, community health services, social care providers and others to provide more joined-up, person-centred care. It will also involve developing appropriate capacity and optimal use of community-based urgent response and intermediate care services (encompassing both health and social care, as appropriate) to prevent avoidable hospital and care home admissions and support timely hospital discharge.

5. Purpose of the BCF

The aim of the BCF is to support ICBs and local authorities in designing and delivering more integrated and preventative care, particularly for people with more complex health and social care needs, helping people stay independent for longer.

This includes - but is not limited to:

- developing integrated intermediate care services that help people retain or recover their independence.

It also covers other health and social care services that:

- support independence,
- prevents avoidable admission to hospital or long-term residential care, and
- enables timely and effective acute, community and mental health hospital discharge.

Better Care Fund monies can only be used for the above intended purpose and must be distributed within the applicable local authority boundary.

6. Specific factors to consider during planning

During the planning process BCF plans were required to take into consideration specific factors when agreeing BCF expenditure.

The Better Care Fund plan has considered how to work with community health and social care providers to develop integrated, **intermediate care services**. This has been informed by refreshing hospital discharge demand and capacity plans, with a particular focus on Home First and reducing reliance on bed-based care. Examples include funding allocated to community intermediate care teams, hospital discharge hubs and reablement focused pathway 1 and 2 provision.

Unpaid carers provide vital care and support for people. Plans have consider how the NHS and local authorities meet their duties in relation to unpaid carers. Examples of funding allocated include the commissioning of specialist replacement care services delivered through domiciliary and residential care providers.

Disabled facilities grants will also help with the cost of making changes to people's homes to enable them to stay well and remain independent for longer. Within plans in specific local authority areas, DfG monies is being used to support capital programmes to increase accommodation with care provision such as Extra Care Housing schemes.

Partnerships with the **voluntary, community and social enterprise (VCSE) sector** have also been included to support the shift from sickness to prevention and hospital to community. Investment areas include, providing information advice and guidance, wellbeing co-ordination functions to keep people well in their communities, support with wider hospital discharge functions and connecting to wider community support to manage health and social care needs.

7. Phases of BCF reform

2026 to 2027 financial year is considered to be the initial year of BCF reform. Local areas are asked to start to align plans for pooled funding within their wider approach to the development of neighbourhood health plans.

For 2027 to 2028 onwards, government will:

1. consider whether local areas should be given more flexibility in deciding the level of pooled funding needed to support better integrated services.
2. There will be a consultation on any proposed changed to minimum NHS and local authority contributions.
3. Government, working joint with the NHS and local authorities will develop clearer expectations of the types of services that should be subject to pooled funding.
4. There will be no changes introduced to the NHS and local authority minimum contributions to the BCF before financial year 2027 – 2028.

8. Performance

The BCF Policy Framework 2026/27 introduces a set of national headline metrics. Four key performance indicator are proposed for this financial year. Two are mandatory and two are for local development and monitoring. The below table presents the four proposed metrics:

	Key Performance Indicator		**Mandatory / Local**	**Requirement of the numerical Template**
1.	Reduce avoidable non-elective admissions for people aged 65 and over		**Mandatory**	**YES**
2.	The average length of discharge delay for all acute adult patients, derived from:	Proportion of adult patients discharged from acute hospitals on their discharge ready date (DRD)	**Mandatory**	**YES**
		for those adult patients not discharged on their DRD, the average (mean) number of days from the DRD to discharge		
3.	Long-term admissions to residential care homes and nursing homes for people aged 65 and over		**Local**	**YES**
4.	Drive improvements on the proportion of people aged 65 and over discharged from hospital, with reablement provided partly or solely by local authorities, who remained in the community within 12 weeks of discharge		**Local**	**NO**

The development of targets for each key performance indicator have been developed in partnership in Torbay. The BCF plan has developed targets in-line with NHS Operating Plan requirements and has ensured consistency with recent submissions.

The key performance indicator to drive improvements in the proportion of people aged 65 and over discharged from hospital, who remained in the community within 12 weeks of discharge has not been included in the numerical template. This is to be determined locally 2026/27. It represents a previous Adult Social Care Outcomes Framework (ASCOF) indicator which ceased to be reported and monitored nationally. Local authority areas will be required to re-establish data collection local and is being perceived within the context of BCF as an indicator to monitor intermediate care and wider neighbourhood team effectiveness.

The below information provides an overview of the three key performance indicators included within the numerical template submission:

Non-elective Admissions

TORBAY		Apr-26 Plan	May-26 Plan	Jun-26 Plan	Jul-26 Plan	Aug-26 Plan	Sep-26 Plan	Oct-26 Plan	Nov-26 Plan	Dec-26 Plan	Jan-27 Plan	Feb-27 Plan	Mar-27 Plan
Non elective admissions to hospital for people aged 65 and over per 100,000 population	Rate	1,677	1,844	1,849	1,915	1,679	1,831	2,064	1,935	1,928	2,019	1,724	1,925
	Number of admissions 65+	641	705	707	732	642	700	789	740	737	772	659	736
	Population of 65+	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234

Discharge Delays

TORBAY	Apr-26 Plan	May-26 Plan	Jun-26 Plan	Jul-26 Plan	Aug-26 Plan	Sep-26 Plan	Oct-26 Plan	Nov-26 Plan	Dec-26 Plan	Jan-27 Plan	Feb-27 Plan	Mar-27 Plan
Average length of discharge delay for all acute adult patients	0.39	0.4	0.56	0.51	0.39	0.54	0.45	0.6	0.57	0.6	0.65	0.47
Proportion of adult patients discharged from acute hospitals on their discharge ready date	93.00%	93.20%	90.50%	91.70%	92.60%	91.60%	92.40%	89.80%	90.70%	90.40%	89.70%	92.20%
For those adult patients not discharged on DRD, average number of days from DRD to discharge	5.58	5.94	5.87	6.18	5.34	6.37	5.86	5.92	6.19	6.21	6.32	5.95

Residential Admissions

TORBAY		Actual Ending 31-12-2024	Actual Ending 31-03-2025	Actual Ending 30-06-2025	Actual Ending 30-09-2025	2026-27 Plan Ending 30-06-2026	2026-27 Plan Ending 30-09-2026	2026-27 Plan Ending 31-12-2026	2026-27 Plan Ending 31/03/2027
Long-term admissions to residential and nursing care homes for people aged 65 and over per 100,000 population	Rate	844.8	831.7	813.4	766.3	724.5	706.2	685.3	666.9
	Number of admissions	323	318	311	293	277	270	262	255
	Population of 65+*	38,234	38,234	38,234	38,234	38,234	38,234	38,234	38,234

9. Monitoring Better Care Fund

Monitoring of Better Care Fund plans will be undertaken on a quarterly basis, and will commence in quarter 1 2026-27. These reports will need to be signed off by

HWB chairs ahead of submission. Reporting will be streamlined from previous years and include:

- a short narrative on progress against metrics
- spend to date
- where planned expenditure has changed, a summary of important changes and confirmation that these have been agreed by local partners and continue to meet national conditions
- A full end-of-year report will also be required to account for spend and this report will also be required to include a comparison with the intermediate care demand and capacity plan.

Enhanced support and oversight

Where Better Care Fund plans are adrift from agreed trajectories including both finance and performance, local areas will be required to engage in enhanced support and oversight from NHSE.

The reason for enhanced support and oversight may include, but not be limited to:

- current performance against headline metrics (2026-27) – and therefore risks to performance in year
- the identification of significant risks through the assurance process
- failure of HWB areas to agree a plan
- not meeting BCF national conditions across the 2026-27 delivery cycle

10. Finance

BCF national funding conditions must be adhered to with compliance demonstrated within BCF submission. The Better Care Fund outlines three national conditions:

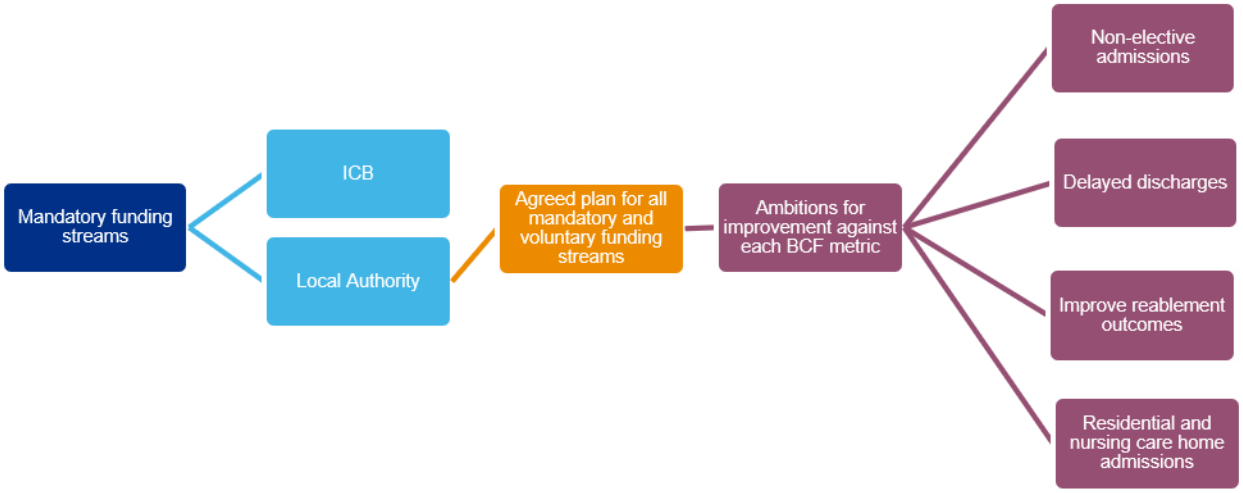
1. effectively support the delivery of integrated and preventative care
2. comply with expenditure and grant conditions
3. demonstrate effective governance, reporting and engagement

To satisfy the above national funding conditions, ICBs and local authorities must develop joint plans, agreed by health and wellbeing boards, outlining how ICBs and local authorities intend to use BCF funding to deliver more integrated and preventative care, linked to the relevant areas of neighbourhood health and social care services.

ICBs and local authorities must comply with all national grant and funding conditions and deliver in accordance with their approved return. ICBs must maintain the NHS minimum contribution to adult social care and pool NHS BCF contributions into a section 75 (of the NHS Act 2006) pooled fund.

ICBs and local authorities must comply and engage with BCF planning, governance and reporting requirements, including adherence to any assurance and oversight processes.

The below diagram illustrates the funding flow from central government departments and its application to the two Better Care Fund objectives.



The below table outlines the total financial values as reflected in the Torbay Better Care Fund (2026-27). For 2026-27, the NHS minimum contribution to adult social care has been uplifted by 4.4%. Integrated Care Boards are required to pass this uplift to Adult Social Care. The remaining ICB contribution has been uplifted by 2.1%.

Local Authorities have been allocated uplifts to the Disabled Facilities Grant only. The percentage uplift varies across each local authority area. For the second consecutive year the LA BCF Grant has not received an uplift.

Funding	**£**
Total ICB allocation	**17,192,845**
of which: ICB minimum contribution to ASC	5,286,000
of which: ICB discharge allocation	1,887,000
of which: remaining ICB minimum contribution	10,019,845
Disabled facilities grant	**2,736,176**
LA BCF Grant	**10,902,595**
of which: LA discharge fund	2,056,763
of which: remaining LA BCF Grant (Previously known as iBCF)	8,845,832
Total BCF allocation	**30,831,616**

Additional ICB contribution	0
Additional LA contribution	0
Total	**30,831,616**

Details of investments can be found in the Numerical Template for the Torbay Health and Wellbeing Board area.

Within the BCF Narrative Plan, governance arrangements have been described to provide assurance of grip, control and delivery of BCF investments. This includes elements of strategic agreement and co-ordination, contract management and review processes. Where performance is off-track or utilisation of finances is not in-line with expectations local BCF governance arrangements must demonstrate strong leadership and either improve delivery or re-invest monies in appropriate schemes aligned to BCF aims and objectives.

Financial reviews of BCF investments will be key to support further alignment with the development and delivery of integrated neighbourhood team arrangements. NHS Devon, Cornwall and Isles of Scilly have commenced meetings to plan a peninsula wide approach to reviewing investments whilst recognising local differences in current BCF commitments. A proposal with timescales will be developed shortly. It should be noted that the Better Care Fund is used in part to contribute to statutory acute and community health service provider contracts and funds current core services. Consideration will need to be given to how these investments are reviewed, to ensure provider are cognisant of the BCF contribution and greater visibility of delivery against BCF targets is monitored and achieved.

11. Next steps

Better Care Fund Plans were submitted 19th May 2026 to NHS England.

National and Regional Assurance panels are now reviewing all Better Care Fund plans.

Upon receipt of national endorsement, health and wellbeing board areas are required to develop section 75 agreements between ICBs and local authorities.

Section 75 agreements are to be developed, signed by local partners and confirmation provided to NHS England by 30th September 2026.

Recommendations

1. Torbay Health and Wellbeing Board to note the report and strategic direction for greater alignment with Neighbourhood Health developments.

2. Torbay Health and Wellbeing Board is asked to sign off the Torbay BCF Plan 2026-27.

Appendices

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

Appendix

List of background papers

Document	
Torbay BCF Narrative Plan	 TORBAY BCF 2026-27 Narrative Re
Torbay BCF Numerical Template	 TORBAY BCF 202627 Numerical Template 2