

Minutes of the Adult Social Care and Health Overview and Scrutiny Sub-Board

19 March 2026

-: Present :-

Councillor Johns (Chairwoman)

Councillors Foster, Long and Spacagna (Vice-Chair)

(Also in attendance: Councillors Chris Lewis and David Thomas)

47. Apologies

Apologies for absence were received from Pat Harris and Amanda Moss (Non-voting Co-opted Members) and the following Cabinet Member: Councillor Tranter (who was represented by Councillor David Thomas).

It was also reported that, in accordance with the wishes of the Liberal Democrat Group, the membership of the Sub-Board had been amended to include Councillor Long in place of Councillor Douglas-Dunbar for this meeting only.

48. Minutes

The minutes of the meeting of the Sub-Board held on 4 February 2026 were confirmed as a correct record and signed by the Chair.

49. Declarations of Interest

No declarations of interest were made.

50. Local Drug Information System (LDIS) update

The Public Health Consultant - Bruce Bell and the Public Health Specialist (Drugs and Alcohol) - Natasha Read provided an update on the Local Drug Information System as set out in the submitted report and responded to questions.

Members asked questions in respect of the following:

- Were services overstretched after weekends?
- Do nearby areas (e.g. Exeter, Plymouth) have out-of-hours systems?
- Could contaminated drugs move between nearby towns?
- Were tetrahydrocannabinols (THC) vapes illegal, and was there evidence of use in Torbay?

- Where were contaminated vapes being sold?
- How high a priority was tackling contaminated vapes?
- Where was intelligence gathered from?
- How do current drug levels compare to 10 years ago?
- Who developed the risk matrix?
- Would a new out-of-hours service be located in Torbay?

The following responses were provided:

- The Service was not frequently overstretched after the weekend, but there were risks with partner awareness being essential.
- Plymouth has limited out of hours provision and Exeter relies on the Local Resilience Forum.
- Cross-area contamination was unlikely due to different supply routes.
- THC is illegal and contamination can sometimes be unintentional. Legislation tightened in summer 2025 to support this.
- Illegal vapes were mostly sold online and not in local shops.
- The priority for tackling contaminated vapes was currently low due to a small proportion of illegal vapes in Torbay, this was monitored with deterrence through testing and partnership with the Police.
- Intelligence was gathered through an online reporting portal, the Police, and Drug & Alcohol Service.
- There was an increased presence of synthetic opioids recently compared to traditional heroin.
- The risk matrix was developed by Public Health England.
- It was proposed for out-of-hours services to be local, with later co-ordination across Devon/Plymouth.

Resolved (unanimously):

1. that the Adult Social Care and Health Overview and Scrutiny Sub-Board (the Sub-Board) is assured that Torbay is acting in line with Office of Health Improvement and Disparities (OHID's) Local preparedness for synthetic opioids in England and implementing the recommendations;
2. that the Sub-Board acknowledge and endorse the interim out of hours Local Drug and Information System (LDIS) Emergency Response Plan; and
3. that the Sub-Board support delivery of a local workshop that raises awareness of the Plan and the roles and responsibilities of partners involved.

51. Sexual and Reproductive Health contract mobilisation

The Leader of the Council – Councillor David Thomas provided an update on the Sexual and Reproductive Health contract mobilisation as set out in the submitted report and responded to questions together with the Public Health Consultant - Bruce Bell and Head of Public Health Improvement - Ian Tyson.

Members asked questions in respect of the following:

- What does a proportionate universalism approach mean?
- How does someone get a digital sexual health passport?
- Will posted test kits reduce clinic workload?
- Could there be a separate waiting area for privacy?
- Can users share their records with GPs?
- How do systems link with the electronic patient record?

The following responses were provided:

- A proportionate universalism approach meant services are available for all, with targeted interventions for higher-risk groups.
- A digital passport was created after the first interaction with the Service.
- Home testing frees clinical time and increases user accessibility at different times and through routes that do not require users needing to physically present to services.
- There were currently no plans for a separate waiting area for the Service; the site is a multi-service centre; previous alternatives considered were not financially viable.
- Record sharing is possible and will occur but relies on patient choice and disclosure.
- Genitourinary Medicine (GUM) services traditionally use separate systems unless legislation changes, making it more difficult to link patient's electronic records.

Resolved (unanimously):

1. that the Adult Social Care and Health Overview and Scrutiny Sub-Board (the Sub-Board) is assured that Torbay Council is acting in line with the appropriate levels of required contract management including stringent oversight of both performance and financial scrutiny to enable the provider and the Sexual and Reproductive Health contract to succeed;
2. that the Sub-Board acknowledge the new contract has some rigorous financial efficiencies to be achieved within the first two years; and
3. that the Director of Public Health be recommended to request the provider to consider if there is an alternative location or revised layout for the Service to enable more discrete access to Sexual and Reproductive Health services.

52. Annual Public Health Report 2026 – Men's Health

The Leader of the Council – Councillor David Thomas provided an update on the Annual Public Health Report 2026 focussing on men's health as set out in the submitted report and responded to questions together with the Public Health Consultant - Bruce Bell and Public Health Registrar - Peter Mennear.

Members asked questions in respect of the following:

- What was being done to promote telephone GP appointments to men?
- What support exists for checks before age 50 for genetic risks?
- Will information alone change male health behaviour?
- Could workplace testing (e.g. prostate-specific antigen (PSA) tests) be expanded?
- Was work focused only on deprived areas?
- Can more communication be done via text/SMS?

The following responses were provided:

- Telephone appointments were part of a broader strategy to encourage early engagement, and were not specifically promoted alone.
- Potential genetic risks may prompt early screening for certain conditions but this is done on an individual basis.
- NHS Health Checks are available men and women aged 40-74 to check for risk of cardiovascular disease for those that do not have pre-existing disease.
- Workplace health checks have been used previously as part of wider outreach work e.g. Torquay United, and the role of the workplace in promoting wellbeing and accessing services will be explored in the report.
- Behaviour change requires a complex combination of factors taking into account for example societal norms, in addition to providing informational approaches; family support networks can also help.
- The work is across all areas, not just deprived ones.
- Multiple technologies exist for communicating with patients; however, uptake varies and it is essential to provide multiple pathways to enable access in as many ways as possible.

Resolved (unanimously):

1. that the Adult Social Care and Health Overview and Scrutiny Sub-Board note the update on the national Men's Health Strategy; and
2. that the Adult Social Care and Health Overview and Scrutiny Sub-Board note the plan and timetable for the production of the 2026 Torbay Annual Public Health Report focussing on men's health.

53. Adult Social Care and Health Overview and Scrutiny Sub-Board Action Tracker

The Sub-Board noted the submitted action tracker.

Members requested the Statutory Scrutiny Officer to chase up the referral to the Secretary of State regarding the Torbay and South Devon NHS Foundation Trust's intention to serve notice to end the Section 75 Agreement with the Council for delivery of integrated adult social care and health services after the Trust Board's meeting on 26 March 2026 where a decision was due to be taken.