Devon Health and Care Strategy

Toby Hewlett, Director of Strategic Programmes and Planning, NHS Devon

1. Purpose of Report

1.1. To brief Torbay Health and Wellbeing Board members on the newly launched Devon Health and Care Strategy.

1.2. The Devon Health and Care Strategy has been submitted as a separate paper for review.

2. Reason for Proposal and its benefits

2.1. The strategy reflects a shared vision to transform the way health and care services are delivered across the county, ensuring that every individual receives the right care, at the right time, in the right place.

2.2. It is shaped by the priorities set out in the NHS 10 Year Health Plan: Fit for the Future, which sets a bold and clear roadmap for the future of healthcare across England over the next decade.

2.3. The NHS Plan challenges us to build a sustainable, person-centred health and care system that improves outcomes, reduces inequalities, and supports people to live healthier lives.

2.4. The Devon-wide strategy aligns fully with these national ambitions and goes further by placing a strong emphasis on collaboration across health, social care, voluntary, and community sectors.

2.5. This strategy sets out clear priorities to improve prevention and early intervention, integrate services more effectively, and support people to manage their own health and wellbeing.

2.6. Importantly, this strategy embodies our commitment to ‘place-based’ care, recognising the unique needs of communities across Devon—from urban centres to rural areas.

3. Appendices

Appendix 1: The Devon Health and Care Strategy has been submitted separately

4. Background Documents

4.1. The Devon Health and Care Strategy has been designed with the insights gained from the Devon 10 Year Plan engagement programme at the core.

Supporting Information

5. Introduction

5.1. NHS Devon's Health and Care Strategy sets out a bold and necessary transformation to ensure the long-term financial sustainability of our health and care system. With a projected financial gap of £781 million by 2030/31 if we do nothing, the strategy recognises that maintaining current models of care is no longer viable.

5.2. Instead, we are committing to a fundamental shift in how services are commissioned, delivered, and measured—anchored in value, outcomes, and efficiency.

5.3. Central to this transformation is the adoption of a new three-tier model of delivery—Neighbourhoods, Place, and Specialist Settings—designed to integrate care around local populations and reduce reliance on acute services.

5.4. Neighbourhoods will become the default delivery point for non-specialist activity, supported by multidisciplinary teams and commissioned through lead provider frameworks. This approach enables proactive, personalised care and supports the strategic shift from treatment to prevention.

5.5. To deliver this model within a constrained financial envelope, NHS Devon is implementing a set of strategic commissioning intentions aligned with the Model ICB blueprint. These include a rigorous focus on productivity—both organisational and system-wide—using tools such as the Model Hospital and mutual aid arrangements.

5.6. To stimulate transformation, growth funding will be directed into a Neighbourhood Development Fund, supporting schemes that reduce acute activity and improve community-based care.

5.7. This strategy is not only a financial imperative—it is a commitment to delivering equitable, but high-quality care also that meets the needs of Devon's population now and into the future.

5.8. Through disciplined commissioning, innovative contracting, and systemwide collaboration, NHS Devon will build a health and care system that is both resilient and sustainable.

6. Options under consideration

6.1. N/A

7. Financial Opportunities and Implications

7.1. N/A

8. Legal Implications

8.1. N/A

9. Engagement and Consultation

9.1. The Devon Health and Care Strategy has been designed with the insights gained from the Devon 10 Year Plan engagement programme at the core.

9.2. Ten targeted design workshops, each aligned to a chapter of the strategy, involving stakeholders from across the system—health, care, voluntary sector, and community representatives.

9.3. Interactive and iterative engagement, where stakeholders tested ideas, refined options, and helped identify barriers and enablers to change through the Design Steering Group and engagement with localities.

9.4. Over 125 individuals participated in one or more of the strategic workshops held to inform the development of this health and care strategy.

10. Procurement Implications

10.1. N/A

11. Protecting our naturally inspiring Bay and tackling Climate Change

11.1. N/A

12. Associated Risks

12.1. N/A

13. Equality Impact Assessment

The Council has a public sector duty under the Equality Act 2010 to have 'due regard' to advancing equality of opportunity between those persons who share a relevant protected characteristic and persons who do not share it. The Act also seeks to eliminate discrimination, harassment and victimisation. It is important that you carefully and thoroughly consider the different potential impacts that the decision being taken may have on people who share protected characteristics.

It is not enough to state that a proposal will affect everyone equally. There should be thorough consideration as to whether particular groups or individuals are more likely to be affected than others by the proposals and decision. Please complete the table below. If you consider there to be no positive or negative impacts state 'there is no differential impact'.

Protected characteristics under the Equality Act and groups with increased vulnerability	**Data and insight**	**Equality considerations (including any adverse impacts)**	**Mitigation activities**	**Responsible department and timeframe for implementing mitigation activities**
Age	18 per cent of Torbay residents are under 18 years old. 55 per cent of Torbay residents are aged between 18 to 64 years old. 27 per cent of Torbay residents are aged 65 and older.			

Carers	At the time of the 2021 census there were 14,900 unpaid carers in Torbay. 5,185 of these provided 50 hours or more of care.			
Disability	In the 2021 Census, 23.8% of Torbay residents answered that their day-to-day activities were limited a little or a lot by a physical or mental health condition or illness.			
Gender reassignment	In the 2021 Census, 0.4% of Torbay's community answered that their gender identity was not the same as their sex registered at birth. This proportion is similar to the Southwest and is lower than England.			
Marriage and civil partnership	Of those Torbay residents aged 16 and over at the time of 2021 Census, 44.2% of people were married or in a registered civil partnership.			
Pregnancy and maternity	Over the period 2010 to 2021, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but			

	significantly higher in Torbay (average of 63.7 per 1,000) than England (60.2) and the South West (58.4). There has been a notable fall in the numbers of live births since the middle of the last decade across all geographical areas.			
Race	In the 2021 Census, 96.1% of Torbay residents described their ethnicity as white. This is a higher proportion than the South West and England. Black, Asian and minority ethnic individuals are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England.			
Religion and belief	64.8% of Torbay residents who stated that they have a religion in the 2021 census.			
Sex	51.3% of Torbay's population are female and 48.7% are male			
Sexual orientation	In the 2021 Census, 3.4% of those in Torbay aged over 16 identified their sexuality as			

	either Lesbian, Gay, Bisexual or, used another term to describe their sexual orientation.			
Armed Forces Community	In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. In Torbay, 5.9 per cent of the population have previously served in the UK armed forces.			
Additional considerations				
Socio-economic impacts (Including impacts on child poverty and deprivation)				
Public Health impacts (Including impacts on the general health of the population of Torbay)				
Human Rights impacts				
Child Friendly	Torbay Council is a Child Friendly Council, and all staff and Councillors are Corporate Parents and have a			

	responsibility towards cared for and care experienced children and young people.			

14. Cumulative Council Impact

(proposed changes elsewhere in the Council which might worsen the impacts identified above)

Are any cumulative impacts of the proposal/s identified across your service area affecting other departments or potential impact from other service areas? Please explain what these might be (you may need to revisit this section once proposals have been further defined)

Please write 'None' if not applicable

14.1.

15. Cumulative Community Impacts

(proposed changes within the wider community (including the public sector) which might worsen the impacts identified above). Are any cumulative impacts identified across your service area from proposals in other public services or partner organisations? Please explain what these might be (you may need to revisit this section once proposals have been further defined)

Please write 'None' if not applicable

15.1.