

Thursday, 2 April 2026

CABINET

A meeting of **Cabinet** will be held on

Tuesday, 14 April 2026

commencing at **5.30 pm**

The meeting will be held in the Banking Hall, Castle Circus entrance on the left corner of the Town Hall, Castle Circus, Torquay, TQ1 3DR

Members of the Committee

Councillor David Thomas (Chair)

Councillor Billings
Councillor Bye
Councillor Chris Lewis

Councillor Jacqueline Thomas
Councillor Tranter
Councillor Tyerman

A Healthy, Happy and Prosperous Torbay

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Governance Support, Town Hall, Castle Circus, Torquay, TQ1 3DR

Email: governance.support@torbay.gov.uk - www.torbay.gov.uk

CABINET AGENDA

1. **Apologies**
To receive apologies for absence.
2. **Minutes** (Pages 5 - 10)
To confirm as a correct record the Minutes of the meeting of the Cabinet held on 30 March 2026.
3. **Disclosure of Interests**
 - (a) To receive declarations of non pecuniary interests in respect of items on this agenda.

For reference: Having declared their non pecuniary interest members may remain in the meeting and speak and, vote on the matter in question. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.
 - (b) To receive declarations of disclosable pecuniary interests in respect of items on this agenda.

For reference: Where a Member has a disclosable pecuniary interest he/she must leave the meeting during consideration of the item. However, the Member may remain in the meeting to make representations, answer questions or give evidence if the public have a right to do so, but having done so the Member must then immediately leave the meeting, may not vote and must not improperly seek to influence the outcome of the matter. A completed disclosure of interests form should be returned to the Clerk before the conclusion of the meeting.

(Please Note: If Members and Officers wish to seek advice on any potential interests they may have, they should contact Governance Support or Legal Services prior to the meeting.)
4. **Urgent Items**
To consider any other items the Chairman decides are urgent.
5. **Matters for Consideration**
6. **Housing Needs Assessment** (Pages 11 - 62)
To consider a report that sets out the purpose and content of the new Housing Needs Assessment for Torbay, 2025-2030.
7. **CQC Improvement Plan** (Pages 63 - 128)
To consider a report that seeks approval of the CQC Improvement Plan.
8. **Biodiversity Duty Report** (Pages 129 - 188)
To consider a report on the above.

Live Streaming and Hybrid Arrangements

To encourage more people to engage in our public meetings the Council is live streaming our Cabinet meetings on our YouTube channel in addition to recording the meetings and publishing the recording on our website. To watch the meeting live please visit <https://www.youtube.com/user/torbaycouncil>.

We are also using hybrid meeting arrangements to enable officers and Councillors who are not members of the Cabinet to either attend the meeting in person or to attend the meeting remotely via Zoom. Anyone attending the meeting remotely must use their raise hand function when they wish to speak and to declare any interests at the appropriate time. If anyone attending the meeting remotely loses connection the meeting will continue and they will have the option to follow the meeting via the YouTube live stream.

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Minutes of the Cabinet

30 March 2026

-: Present :-

Councillor David Thomas (Chair)

Councillors Chris Lewis, Jacqueline Thomas and Tyerman

(Also in attendance: Councillors Billings (virtual), Douglas-Dunbar (virtual), Long, Spacagna (virtual) and Twelves (virtual))

99. Apologies

Apologies for absence were received from Councillors Bye and Tranter.

An apology for absence from the physical meeting room was given by Councillor Billings, however Councillor Billings was present in the virtual meeting room from where he contributed to the meeting but was not part of the decision making process.

100. Minutes

The Minutes of the meeting of the Cabinet held on 17 March 2026 were confirmed as a correct record and signed by the Chair.

101. Disclosure of Interests

No declarations of interest were made.

102. Matters for Consideration

The Cabinet considered the following matters, full details of which (including the Cabinet's decisions) are set out in the Record of Decisions appended to these Minutes.

103. Disposal of Land at Edginswell Business Park, Orchard Way, Torquay

Chair

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Record of Decisions

Disposal of Land at Edginswell Business Park, Orchard Way, Torquay

Decision Taker

Cabinet on 30 March 2026.

Decision

1. In accordance with Standing Order D11, that in light of the Trust seeking completion of the freehold disposal by 31 March 2026, enabling them to manage the cash flow of available funds, the Cabinet's decision (set out below) is determined to be urgent. Therefore, Cabinet determines that Call-in shall be waived as any delay likely to be caused by the call-in process would prejudice the public's and the Council's interest. The Overview and Scrutiny Co-ordinator was consulted on 25 March 2026;
2. That the Director of Finance in consultation with the Cabinet Member for Housing and Finance be authorised to dispose of the Council's freehold interest in land at Edginswell Business Park, Orchard Way, Torquay, to Torbay and South Devon NHS Trust for Market Value on unconditional terms; and
3. The Director of Finance be authorised to agree and finalise the detailed transfer terms based on estates and legal advice.

Reason for the Decision

Disposal to the Torbay and South Devon NHS Trust will unlock the NHS' vision for development of the hospital site. To facilitate this vision, in the short term the land at Edginswell will provide car parking spaces displaced from the hospital site which would allow construction of a multi-storey car park at the hospital. Construction of a multi-storey car park would in turn unlock delivery of the wider hospital development programme, with the land at Edginswell being key to achieving this. Within a five year period the NHS would obtain planning consent for an employment led use and would deliver what was likely to be a support and logistics/diagnosis hub.

Implementation

The decision in respect of the disposal of land at Edginswell Business Park, Orchard Way, Torquay will come into force immediately as the decision maker has decided that any delay likely to be caused by the call-in process would prejudice the public's and the Council's interest. The Overview and Scrutiny Co-ordinator was consulted on 25 March 2026.

Information

Torbay Council's Asset Management Strategy provided an overview of the Council's land and property estate and identified the main priorities for managing and developing the estate, including the disposal of surplus assets.

The remaining, undeveloped land at Edginswell had been marketed several times over recent years with no suitable proposal coming forward detailing how high-quality jobs could be provided on the site. Considering the current market, the proposal was to progress freehold disposal rather than to develop and/or lease the site to an operator. This approach transferred

the substantial development risks to the purchaser, reducing financial and operational exposure for the Council.

Following a marketing campaign undertaken by Vickery Holman, several bids were received with the Torbay and South Devon NHS Trust bidding Market Value on an unconditional basis. The Trust sought completion by 31 March 2026, enabling them to manage the cash flow of available funds.

The Torbay and South Devon NHS Trust's primary vision for the Edginswell site was to accommodate a range of healthcare support services, including medical electronics and patient transport services, alongside broader logistics and estates functions. The acquisition would enable the Torbay and South Devon NHS Trust to free up space on its current Hospital site to enable much needed capital investment and development. In the short term, the Trust proposed to use the site for car parking/decanting with the stipulated requirement of developing for employment-led uses within a 5 year window. Failure to deliver the employment use in that timeframe would present the Council with an option to buy back the site for the same price that the Torbay and South Devon NHS Trust paid to acquire it – i.e. the current Market Value. A clause will also be put in place to prevent the Torbay and South Devon NHS Trust from selling on the site without first providing the option for Torbay Council to buy-back at the same price that the Torbay and South Devon NHS Trust paid to acquire it – i.e. the current Market Value. Furthermore, the Council would introduce a restrictive covenant to the title, preventing use of the land for car parking 5 years after the transfer date.

Although the Torbay and South Devon NHS Trust bid was not the highest in monetary terms, it was the only unconditional offer. This approach significantly reduced the risk associated with the transaction, ensured timely completion and provided certainty for both parties. Furthermore, disposal of the site to the NHS, as opposed to the highest bidder, aligned with the strategic partnership between the Council and the NHS, providing community wide benefits to Torbay.

At the meeting Councillor Chris Lewis proposed and Councillor Tyerman seconded a motion that was agreed unanimously by the Cabinet, as set out above.

Alternative Options considered and rejected at the time of the decision

Alternative options had been considered and rejected. Leasehold disposal for employment-led uses had been pursued to date but had failed to secure a tenant, resulting in freehold disposal being pursued. Accepting a higher value, but conditional, offer was an alternative option, however the conditionality of those higher value offers created uncertainty, timing and risk implications for the authority, with conditional bids often failing to deliver the value they promise.

Is this a Key Decision?

No

Does the call-in procedure apply?

No

Declarations of interest (including details of any relevant dispensations issued by the Standards Committee)

None

Published

31 March 2026

Signed: _____ Date: _____
Leader of Torbay Council on behalf of the Cabinet

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Meeting: Cabinet

Date: 14 April 2026

Wards affected: All

Report Title: Housing Needs Assessment

When does the decision need to be implemented?

Following agreement by Cabinet and publication of the decision so that we can begin to circulate the document to interested parties.

Cabinet Member Contact Details: Cllr Alan Tyerman, Cabinet Member for Housing and Finance, alan.tyerman@torbay.gov.uk

Director Contact Details: Anna Coles, Director of Adult and Community Services, anna.coles@torbay.gov.uk

1. Purpose of Report

1.1. The purpose of this report is to describe the purpose and content of the new Housing Needs Assessment for Torbay, 2025-2030. The Housing Needs Assessment aims to describe our specific needs for housing for some of our more vulnerable population, both in terms of the number and size of properties we need, but also the type of support which would make a difference to people's lives. With the level of need clearly specified through this assessment, this enables targeted focus and activity to seek to meet the need.

2. Reason for Proposal and its benefits

2.1. The proposals in this report help us to deliver our vision of a healthy, happy, and prosperous Torbay by quantifying our need for a range of different types of housing in Torbay to help our residents to be able to live well in Torbay as part of our community.

2.2. The reasons for the proposal, and need for the decision are, ...

- To provide a robust evidence base to inform commissioning decisions, support strategic investment from partners, and policy development, ensuring that future housing interventions are targeted, equitable, and responsive to the evolving needs of Torbay's residents.
- To signal our needs to external partners, particularly Registered Providers (RP's), who may be interested in working in partnership with us to deliver housing and support services for Torbay.

- The needs assessment considers the housing requirements for the following: Temporary Accommodation, Move-On Accommodation, Complex Needs and Substance Misuse, Domestic Abuse, Children and Young People and Adult Social Care.
- The needs assessment draws on a range of existing reports, datasets and market intelligence and brings these together to form a set of requirements for the next five years.

3. Recommendation(s) / Proposed Decision

- 3.1 That the Housing Needs Assessment, as set out at appendix 1, be approved;
- 3.2 That the Director of Adults and Communities and Director of Regeneration be requested to ensure that the Assessment is:
- used to inform to the Housing Delivery Plan, to ensure effective delivery against need, plans for developing provision are joined up;
 - shared with prospective partners;
 - used as the basis for future business cases for different types of accommodation; and
 - used as the underpinning needs assessment for future business cases related to the commissioning or procurement of services related to Temporary Accommodation, Move-On Accommodation, Complex Needs and Substance Misuse, Domestic Abuse, Children and Young People and Adult Social Care, as relevant; and
- 3.3 That the Director of Adults and Community Services be authorised, in consultation with the Cabinet Member for Housing and Finance, to make changes to the Housing Needs Assessment to ensure it is kept up to date and reflects current needs.

4. Appendices

Appendix 1: Housing Needs Assessment

5. Background Documents

- [Tables on homelessness - GOV.UK](#)
- [Joint Strategic Needs Assessment - Torbay Council](#)
- Specialist Housing Needs to 2030
- Care Experienced Young People Accommodation and Sufficiency
- Temporary Accommodation Sufficiency Strategy April 2024
- Homeless Accommodation Pathway June 2024
- Torbay Homelessness and Rough Sleeper Strategy July 2024
- The Adult Social Care Self-Assessment
- [Projecting Adult Needs and Service Information System](#)
- [Useful Information | Devon home choice](#)

- The review of the safe accommodation and support needs assessment for victims and survivors of Domestic Abuse in Torbay July 2024
- Housing prices in Torbay

Supporting Information

6. Introduction

- 6.1. The Housing Needs Assessment was developed to draw together the range of needs for accommodation in Torbay for particular groups of people, including those who face greater challenges in accessing suitable accommodation due to the complexity of their needs.
- 6.2. The document aims to describe in more detail the qualitative and quantitative requirements for particular types of housing and is intended to be able to be used to underpin future business cases, but also as part of discussions and forums with prospective partners who are interested in working with Torbay Council to design solutions with us.
- 6.3. Torbay Council is not unusual in facing challenges in providing sufficient accommodation for those with more complex needs but is keen to clearly describe the scale of the issue and work with partners to find solutions which can meet need in the mid to longer term.

7. Options under consideration

The following options have been considered as part of this proposal:

7.1. Option 1 – do nothing

Without a clear description of the gaps in housing faced by some of our most vulnerable people, we are less likely to be able to find more permanent solutions. We are keen to work with partners to attract investment into Torbay to develop long term, sustainable housing options to be able to meet a range of needs. We know that potential partners need to see the evidence in order to be able to consider working with us.

Doing nothing means that this need will remain undescribed and unpublished.

7.2. Option 2 - include the information in the Housing Needs Assessment in existing plans

The work of the Devon and Torbay Combined County Authority (DTCCA) includes the need to consider the changing demographic in Devon, including the impact of an ageing population. It also recognises the challenges of providing the broadest possible range of housing to meet needs, and the continuing demand for temporary accommodation. The DTCCA is developing a housing strategy to sit across the full Devon and Torbay footprint.

The Torbay Local Plan has been out for consultation in winter 2025/26. This includes a focus on urban regeneration, affordable housing, economic growth and climate resilience. While the document contains some information on the housing needs of specific communities with vulnerabilities, it has a broader reach than the Housing Needs Assessment document.

The Torbay Housing Strategy 2023-2030 outlines current and planned actions to improve the supply of suitable housing in Torbay, including for specific groups such as older people. The strategy notes the challenges facing those who become homeless and the continuing need for temporary accommodation as well as longer term housing. The strategy also considers wider factors such as the impact of suitable accommodation on the workforce, the quality of housing and the future use of available land.

The new Housing Needs Assessment is complementary to the work and documents described above and provides more detail on the Torbay-specific needs for specialist housing for people in need of some form of care or support.

7.3. Option 3 - develop and publish a specific Housing Needs Assessment

This option enables the specific needs of groups of vulnerable people to be quantified in a document that can be shared with prospective partners, used as a background paper for future business cases and form part of the suite of housing related documents and strategies.

Option 3 is recommended.

8. Financial Opportunities and Implications

- 8.1. The Housing Needs Assessment does not consider in detail the financial opportunities and implications including risks and benefits of developing new types of provision; these will be set out in any future business cases which draw on the Housing Needs Assessment as an evidence base.

9. Legal Implications

- 9.1. No legal implications were identified.

10. Engagement and Consultation

- 10.1. The document is based on learning from the qualitative experiences of those seeking suitable housing in Torbay and has also been shared with the Armed Forces Lead for the Council.

11. Procurement Implications

- 11.1. The Housing Needs Assessment does not replace the need for further detailed business cases to be provided and considered for any plans to develop specific types of accommodation and for procurement processes to be followed as required.
- 11.2. The Housing Needs Assessment does not commit the Council to the commissioning or procurement of any of the types of accommodation or support described in the document.

12. Protecting our naturally inspiring Bay and tackling Climate Change

- 12.1. Any future consideration of different types and locations of accommodation will take into account opportunities to ensure the design and maintenance of the building is compliant with current climate priorities.

13. Associated Risks

- 13.1. There is a risk of the Council not being able to share or describe our needs in a cohesive manner to partners who may otherwise have been interested in working with us to develop innovative housing solutions in Torbay. Developers and partner organisations describe needing some form of evidence of local need to be able to demonstrate to their internal governance the possibilities and options for investing in Torbay.

14. Equality Impact Assessment

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 Page 16	<p>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.</p> <ul style="list-style-type: none"> Data from the JSNA shows that by 2033 it is estimated that 1 in 3 Torbay residents will be aged 65 and over. This means that we need to ensure that we have a full range of housing options suitable both for people starting their adult lives and for those as they age, some of which will be age specific 	<p>We know that access to suitable and sustainable housing is a cross-cutting issue for all ages – for our care experienced young people who may find it harder to live independently as well as our older population. The Housing Needs Assessment has specific sections for children and young people, Adult Social Care and for those with specific needs such as challenges with substance misuse, to ensure that all age groups are considered.</p> <p>This also includes consideration of other groups of all ages who we know may struggle to find suitable accommodation, such as refugees and asylum seekers.</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>

	such as Extra Care Housing.			
Carers	<ul style="list-style-type: none"> 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. 	The Housing Needs Assessment aims to ensure that people who are vulnerable and/or have additional needs have sustainable housing. This aims to reduce the caring burden for unpaid carers by ensuring the needs of the cared for person are well met.	None required – there is no differential impact.	N/A
Care experienced	<ul style="list-style-type: none"> As of January 2026, there were 277 former care experienced young people aged 18-24 in Torbay. 	The Housing Needs Assessment includes a specific section on children and young people, which includes consideration of those who are care experienced. Adult Social Care and Housing related projects also give due consideration to the specific vulnerabilities that may be experienced by those who are care experienced.	None required – there is no differential impact.	N/A
Disability	<p>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.</p> <p>Almost 1 in 4 Torbay residents have conditions or illnesses that reduce their ability to carry out day-to-day activities.</p> <p>For those owed a housing duty in 2023/24 we know that</p>	The Housing Needs Assessment aims to ensure that these needs are described so that suitable housing is developed, including accessible properties.	None required – there is no differential impact.	N/A

	34% had physical ill health or disability (vs. 19% nationally).			
Gender reassignment	<ul style="list-style-type: none"> 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. 	We know that transgender people are disproportionately likely to experience difficulties with homelessness. By aiming to provide information to support an increase in available housing in Torbay, the Housing Needs Assessment will help to increase the choice of available housing for those who are transgender.	None required – there is no differential impact.	N/A
Marriage and civil partnership	<ul style="list-style-type: none"> 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. 	The need for suitable and sustainable housing also applies to those who are married or in civil partnerships. The Housing Needs Assessment aims to increase the choice of available housing in Torbay, regardless of marital status.	None required – there is no differential impact.	N/A
Pregnancy and maternity	<ul style="list-style-type: none"> Between 2013 and 2024, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but significantly higher in Torbay (average of 56.0 per 1,000) than the Southwest (53.4) and broadly in line with England (56.3). For the period 2022 to 2024, rates in Torbay (44.6) have been significantly below England (50.0). 	The need for suitable and sustainable housing also applies to those who are pregnant or have given birth. We know that those who are pregnant or have recently given birth are more likely to be negatively impacted by being homeless and any uncertainty related to finding a suitable home, particularly for young parents and including those who are care experienced. The Housing Needs Assessment aims to increase the choice of available temporary and move-on housing in Torbay.	None required – there is no differential impact.	N/A

Race	<p>In the 2021 Census, 96.1% of Torbay residents described their ethnicity as the following:</p> <ul style="list-style-type: none"> • 1.6% as Asian, Asian British or Asian Welsh • 0.3% as Black, Black British, Black Welsh, Caribbean or African • 1.5% as being of Mixed or Multiple ethnic groups • 96.1% as White • 0.4% described their ethnicity another way. <ul style="list-style-type: none"> • Black, Asian and minoritised ethnic communities are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England. 	<p>The need for suitable and sustainable housing is relevant for all ethnicities. We know that those Black, Asian and minoritised ethnic communities who also live in more deprived areas of Torbay may experience more challenges with sourcing suitable, good quality housing. The Housing Needs Assessment aims to increase the choice of available temporary and move-on housing in Torbay.</p>	None required – there is no differential impact.	N/A
Religion and belief	<p>The 2021 Census showed that the residents in Torbay identify their religion and/or belief as the following;</p> <ul style="list-style-type: none"> • 48.5% are Christian • 0.4% are Buddhist • 0.2% are Hindu • 0.6% are Muslim • Less than 0.1% are Sikh • 0.1% are Jewish • 0.7% have another religion • 43.2% have no religion • 6.3% did not answer 	<p>There is no anticipated impact on religion and belief.</p>	None required – there is no differential impact.	N/A

Sex	<p>51.3% of Torbay’s population are female and 48.7% are male.</p> <ul style="list-style-type: none"> • For Torbay data for the 5 year period 2019 to 2023, data shows there is a 10 year life expectancy gap between males who live in the least and most deprived areas and a 5 year gap for females. 	<p>We know that males are more likely than females to become street homeless. The Housing Needs Assessment aims to provide more choice of suitable accommodation for all sexes.</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>
Sexual orientation	<p>In the 2021 Census, residents described their sexuality as follows;</p> <ul style="list-style-type: none"> • 89% as Straight or Heterosexual • 1.7% as Gay or Lesbian • 1.1% as Bisexual • 0.1% as Pansexual • 0.1% described their sexuality another way • 7.4% of people didn’t answer the question 	<p>By aiming to provide information to support an increase in available housing in Torbay, the Housing Needs Assessment will help to increase the choice of available housing for those who identify as part of the LGBT+ community</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>
Armed Forces Community	<ul style="list-style-type: none"> • In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. • In Torbay, 5.9% of the population have previously served in the UK armed forces. 	<p>Data shows that veterans are more vulnerable to becoming homeless than the wider population. The Housing Needs Assessment will help to increase the choice of available housing and support for those who have served in the armed forces and are experiencing challenges in their lives.</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>
Additional considerations				

<p>Socio-economic impacts (Including impacts on child poverty and deprivation)</p>	<ul style="list-style-type: none"> • Torbay is ranked as the 39th most deprived upper tier local authority in England in the Index of Multiple Deprivation 2025. • Data shows that those who are experiencing deprivation are more likely to experience instability with their housing or find that their housing does not meet their needs as they change, for example if their health deteriorates. 	<p>The Housing Needs Assessment will help to increase the choice of available housing and support for those who are experiencing challenges with finding suitable and sustainable housing, where they are experiencing other complexities in their lives.</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>
<p>Public Health impacts (Including impacts on the general health of the population of Torbay)</p>	<ul style="list-style-type: none"> • For the five-year period 2020 to 2024, data shows there is a 6-year life expectancy gap between males who live in Torbay's least and most deprived areas and, a 3-year gap for females. • The availability of suitable and sustainable housing is particularly critical for those who are experiencing poor health, whether temporarily or due to permanent health conditions. This supports them to be able to remain well and living in their own home for as long as possible. 	<p>The Housing Needs Assessment aims to ensure that we have a broader range of housing options for people with care and support needs or who are facing other complexities in their lives.</p>	<p>None required – there is no differential impact.</p>	<p>N/A</p>

Human Rights impacts	<p>Article 8 of the Human Rights Act protects the right to a private or family life, with relevance to housing, It does not guarantee the provision of housing by public authorities.</p> <p>However we intend to meet our homelessness duty and are taking steps to increase the supply of suitable housing.</p>	No impact identified.	None required – there is no differential impact.	N/A
Child Friendly	<p>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.</p> <p>We know that in 2024/25 children's services supported 25 families (57 children) with Section 17 funding in relation to issues around homelessness.</p>	The Housing Needs Assessment includes temporary and move-on accommodation for families and a specific focus on accommodation suitable for care experienced young people.	None required – there is no differential impact.	N/A

15. Cumulative Council Impact

- 15.1. The proposal is cross-cutting, including Adult and Community services and Children's Services, as well as Pride in Place.

16. Cumulative Community Impacts

- 16.1. The proposal is designed to deliver positive impacts for Torbay residents requiring support with securing suitable accommodation.

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Torbay Housing Needs Assessment

2025 – 2030

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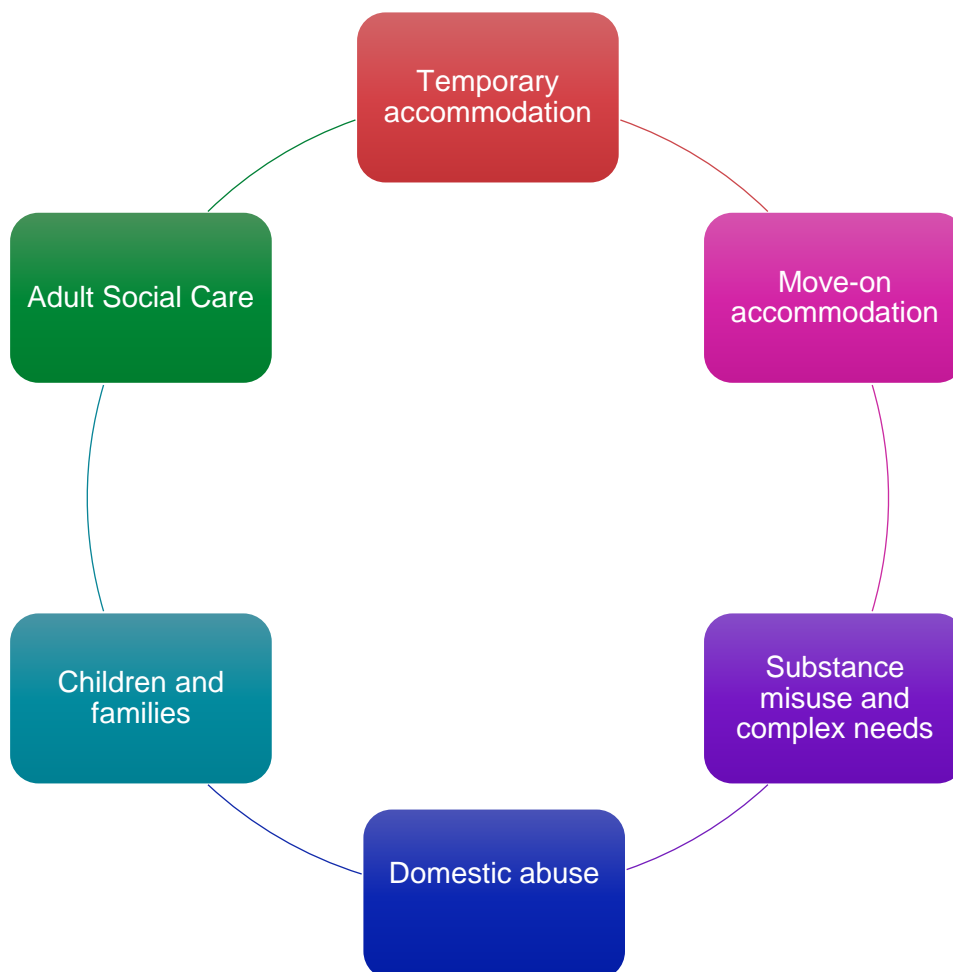
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Introduction

Torbay Council is committed to supporting a healthy, happy and prosperous Torbay:

“We want to deliver for our people and our place. We know we have challenges, but we have high aspirations. By continuing to work closely with our communities and partners and capitalising on our strengths, we want to make Torbay a great place to do business – a place where everyone is able to live their best life”.

The purpose of this document is to quantify our need for a range of different types of housing for vulnerable groups in Torbay, to provide a robust evidence base to inform commissioning decisions, support strategic investment from partners, and policy development, ensuring that future housing interventions are targeted, equitable, and responsive to the evolving needs of Torbay’s residents. We want to work extensively with external partners, particularly Registered Providers (RP’s) to be able to deliver the homes we need. To support this, we have focused this document specifically on the following:



We have drawn on a range of existing reports, including *Specialist Housing Needs to 2030*, *Care Experienced Young People Accommodation and Sufficiency*, *Temporary Accommodation Sufficiency Strategy April 2024*, *Homeless Accommodation Pathway June 2024*, *Torbay Homeless and Rough Sleeper Strategy July 2024*, *the Adult Social Care Self-Assessment and the review of the safe accommodation and support needs assessment for victims and survivors of domestic abuse in Torbay July 2024*. The report has also drawn on the Torbay JSNA and associated data sets and reports. We will continue to review and develop new reports and insight, for example refreshing the 2019 Plan for Housing in Later Life.

Our main challenges relate to rising demand and complexity, and a lack of a range of move-on accommodation, which means that our temporary accommodation and wider system options become blocked. We know that:

- Torbay has higher rates of homeless households than the England average
- 7 in 10 of these households have support needs, 2 in 5 have three or more needs
- Numbers of rough sleepers in Torbay are generally increasing

Torbay’s five most common support needs

– percentage of households owed a relief / prevention duty with each need, 2023/24

Support need	Torbay	England
History of mental health problems	45%	26%
Physical ill health and disability	34%	19%
At risk of/has experienced domestic abuse	20%	12%
Offending history	18%	8%
History of rough sleeping	17%	6%

Source: [Tables on homelessness - GOV.UK](#)

Our ambition is to offer good quality, sustainable housing in Torbay for all those who need it. For people with additional and more diverse needs across homelessness and social care, we want to make sure they have access to local homes that can flex and adapt to meet their changing needs so that they can remain living independently for as long as possible. Our key priorities include:

- expanding the stock of accessible homes;

- enhancing move-on pathways from hostels and temporary accommodation;
- integrating housing provision with health and social care services to provide holistic support;

People tell us they need clean, safe, warm and affordable homes. We know that for those whose lives and needs are more complicated this is not always the case, and they can have limited choices which may feel like a compromise.

We are keen to work with partners to design solutions for the people we work with and support now, but also to plan for the people we will likely need to support in the future. We know that our population is aging, and we will need to support more people with dementia. We also know that for some of our younger people we need to be able to provide more bespoke places to live. We recognise that people's lives can change rapidly for reasons that are beyond their control, and they may need temporary housing, for example related to domestic abuse. We want to reduce rough sleeping and repeated homelessness. We are keen to understand the barriers for people that can get in the way of being able to access and make use of the right housing.

We intend for our delivery model to shift over time, with improved access to long term housing and permanent homes and reducing the length of stay in temporary accommodation. We want to provide wrap around support to all those with more complex needs to support improved outcomes. We anticipate that in the medium term this will mean that we need more temporary accommodation while we bring on greater supply of long-term homes and will then adapt or convert the use of our temporary accommodation as needed.

We recognise that the provision of housing is a rapidly changing landscape with key legislation including SHROA and the Renters Rights Act aiming to fundamentally change how housing is operated and supported in England. We want to work collaboratively with partners as they adapt to these changes to deliver the best possible outcomes for the people of Torbay.



Councillor Alan Tyerman

For a conversation with us about developing new homes in Torbay, please email commissioning@torbay.gov.uk

1. Life in Torbay

For a broader range of data about life in Torbay please see the Joint Strategic Needs Assessment - [Joint Strategic Needs Assessment - Torbay Council](#) and Appendix 1 for local housing data.

Torbay continues to experience persistent and multifaceted housing pressures for some vulnerable groups, driven by a combination of high demand, limited supply, and complex individual needs. The challenges are particularly acute in relation to the affordable part of the rented sector, among single adults and families who are either homeless or at imminent risk of homelessness. We know that particularly for our homeless households, accessing a property via Devon Home choice is very difficult due to the lack of supply of housing so we need to provide alternatives in the Torbay system.

Data from recent assessments reveal an anticipated shortfall year on year of homes to meet homelessness need, to support those moving out of temporary accommodation into permanent homes. This does not include the need for more specialist housing, including for children's services and those with Care Act eligible needs.

In 2022/23, Torbay had 2.8 households per 1,000 assessed as homeless, compared to 1.8 nationally. Torbay also has a higher proportion of single homeless people, rough sleepers, and people in temporary accommodation. For the financial year 23/24:

- 47% of households owed a housing duty have a history of mental health problems (vs. 26% nationally);
- 34% have physical ill health or disability (vs. 19% nationally);
- 20% have experienced domestic abuse (vs. 12% nationally);
- 17% have a history of rough sleeping (vs. 6% nationally);

We know that some of our population face challenges that we need to be aware of when developing new homes and support, for example the needs of our veterans.

The council and its partners offer preventative support through actions such as negotiating with landlords to avoid eviction, helping with rent arrears or deposits, referrals to mediation or support services and assistance in finding new housing before eviction. We offered relief through placing people in temporary accommodation and helping them access private rented housing. We also

supported applications to social housing and referrals to specialist services such as for domestic abuse or mental health.

2. Our needs

Temporary accommodation

We want to work with partners to:

- Design and develop 2 resilient temporary housing options for high-risk groups of people which include fire precaution housing. In addition, we require 4 individual homes where the location of the properties has been carefully considered.
- Develop 6 accessible properties for those with access needs.
- Develop a 26-bed supported housing offer with onsite support to work with those single people who are homeless and have additional needs or complexities, focused on those that are not Care Act eligible. This would need to include consideration of suitable housing and support for care experienced young people.
- Develop 3 four bed HMOs for single people, with access to floating support.
- Reprocure our contracts with external providers for the provision of low-level general needs temporary housing for families and single people – an estimated 53 units for single people and 20 family homes.
- Remodel our hostel (which is run by the Council) and explore how we can include 4 additional step-down units of accommodation.

Move on accommodation

We want to work with partners to:

- Create 296 additional homes per year to support move-on between 2026 and 2030 to meet homeless need
- Of this, we need an average of 118 additional family homes per year, with the remainder of homes needed to support single homeless people and the hostel
- Of these we anticipate 5-6 additional one bed properties a year need to be accessible in design, with one a year being wheelchair accessible

- In those which are two or more beds we will require 3 properties a year to be accessible. Of these additional properties 0.5 a year will need to be wheelchair accessible
- Develop one property per year with enhanced fire precautions

Substance misuse and complex needs

We want to work with partners to:

- Develop 5 units of HMO accommodation, with daytime support and input from drug and alcohol services. This would provide accommodation away from the hostel and the street community where people could engage in the preliminary work required to then go onto access community rehab support.

Domestic abuse

We want to work with partners to:

- Create more choice of move-on accommodation (see move-on accommodation above).

Children and families

We want to work with partners to:

- Develop 10 units of 1 or 2 bedded flats to support care experienced young people, aged 18 – 24,
- Develop 20 units of step-down semi-independent provision for 16 – 24 cared for/care experienced and homeless/risk of homelessness cared for/care experienced 16 – 17-year-olds, with an additional 3 units for young people who require an enhanced level of support.
- Develop 12 units of supported accommodation for Young Parents.
- Develop new residential children's homes with particular reference to complex needs.

Adult Social Care

We want to work with partners to:

- Develop 91 extra care units via a new Extra Care scheme as part of the Crossways development
- Develop a floating support offer, delivered in social or private housing to enable those who can remain living independently to do so
- Develop 6-8 x1-bed apartments, at affordable rents and appropriately located away from areas of social stress, for people with significant mental health needs stepping down from institutional settings
- Develop 'core and cluster' developments with a core of 8-10 x 1-bed and 2-bed apartments with higher levels of support, supporting a cluster of nearby properties for people who have gained greater independence and require less support.

3. Temporary Accommodation (TA)

In 2023/24 398 households were placed into Temporary Accommodation; this is 38% of those that were assessed as being owed a prevention or relief duty.

Roughly 50% of our homeless families are accommodated in our owned temporary accommodation stock, the other 50% are in self-contained spot purchased accommodation, typically holiday apartments.

Spot purchased is mainly used for people who require accessible accommodation and one B&B provider will accommodate those who potentially pose a risk to others.

It is important to understand that bedspaces and space standard do not apply in temporary accommodation, as such if a two-bedroom property can fit for example a double bed in one bedroom and two sets of bunk beds in the other bedroom then the property can accommodate 6 people.

Number of households and time spent in temporary accommodation

Time in TA (weeks)	21/22	22/23	23/24
0-4	114(27%)	106 (25%)	128 (32%)
5-6	36 (8%)	36 (9%)	38 (10%)
7-10	42 (10%)	64 (15%)	64(16%)
11-20	85 (20%)	96 (23%)	93 (23%)
20-25	30 (7%)	38 (9%)	41 (10%)
26-52	84 (20%)	71 (17%)	34 (9%)
>52	38 (9%)	6 (1%)	0 (0%)
Total	429	417	398
Average stay	19 weeks 3 days	14 weeks 3 days	11 weeks, 3 days
Longest stay	105 weeks 6 days	70 weeks	49 weeks, 6 days

Source: TA Sufficiency Plan update April 24

In autumn 2024 Torbay had 29 people sleeping rough; 7 more than the mean for all English Unitary Authorities. The count for November 2025 showed that there has been a small decrease.

In the last 12 months 109 people have been accommodated directly off the street by the Rough Sleeping Outreach team.

The hostel in Torbay is run by the Council and offers 28 individual bedrooms. Although there had been a significant reduction in the average length of stay at the Hostel, there is now started to see increased lengths of stay, with an average of over 200 days. This is due to the lack of suitable move-on options, both as a permanent home, but also as part of a wider pathway.

4. Move-on accommodation

On average over the last 5 years there have been 289 properties accessed per year by Torbay residents (single people and families) through Devon Home Choice (DHC), 31% of this accommodation is outside of Torbay, meaning that some residents are leaving to go to Exeter and Teignbridge to meet their accommodation need. This impacts both our historically resident population and those moving into the area and seeking support, such as refugees.

On average there are 158 properties relet within Torbay each year and over the last 4 years there have been 99 new properties built in Torbay for social/affordable rent, 59% of which were delivered in 2024-25. For many of the people we support, access to housing via Devon Home Choice is not feasible and will not provide the long term homes they need.

The table below shows the estimated shortfall in move-on accommodation per year in Torbay to meet homeless need until 2030. This is based on the following assumptions:

- Average number of relet by property size through Devon Home Choice for homeless clients per year, remains consistent
- That the private rented sector continues to meet 7% of homeless accommodation need at Relief and Main and Duty stage
- That homeless clients have access to 50% of pipeline social housing in Torbay.

Projected requirement for accommodation, based on bed size and demand assumption per year

	25/26 (+10%)*	26/27 (+12%)	27/28 (+8%) plus hostel throughput	28/29 (+8%)	29/30
1 bed (inc. hostel)	106	128	204	233	233
2 bed	21	26	26	43	43
3 bed	54	59	65	83	83
4 bed	11	13	13	15	15
5 bed	1	2	2	2	2
Total	193	228	310	376	376

Source: Torbay Housing Needs Service *Estimated increase in demand for accommodation

The projected increase is an estimate informed by emerging economic and legislative developments, including the cost-of-living crisis, the Children’s Wellbeing and Schools Bill, the Renters’ Rights Act, and a reduction in households losing temporary accommodation due to inadequate support. As a result, the level of increase will depend on legislative timescales and the implementation of the new floating support model. During 2025–2026, homelessness services have experienced a rise of 50% in approaches, to 1471, which helps to validate these working assumptions.

We need a range of move-on accommodation to meet the needs of both single homeless people and families. This needs to include a smaller amount of accessible accommodation and some specialist housing provision.

Families affected by homelessness

In Torbay part of the S17 budget is used to support families supported by Children’s Services as part of safety planning, but also those who are intentionally homeless or have no recourse to public funds. Over the last 18 months, we have supported over 30 families under Section 17 with funding for accommodation as they have become homeless for various reasons. The spending we have seen over the last few years has shown some increase, this is particularly evident between the years 2023/24, where the expenditure was £192,000, in comparison to 2024/2025 where it rose to £312,000. The spend to date this year (2025/2026) is £217,800.

However, it is important to note that some of these families would not be open to Children’s Services other than for their housing issues.

Numbers of children and families supported under S17 accommodation

Year	Families	Children
2021-22	29	76
2022-23	34	65
2023-24	33	64
2024-25	25	57

Source: families and children supported with accommodation under S17

A cross-directorate intervention between Housing Options and Children’s Services works intensively with families to prevent homelessness and taking a holistic approach to prevent its recurrence. This has significantly improved outcomes for families, ensures accessibility to suitable accommodation and has driven down costs.

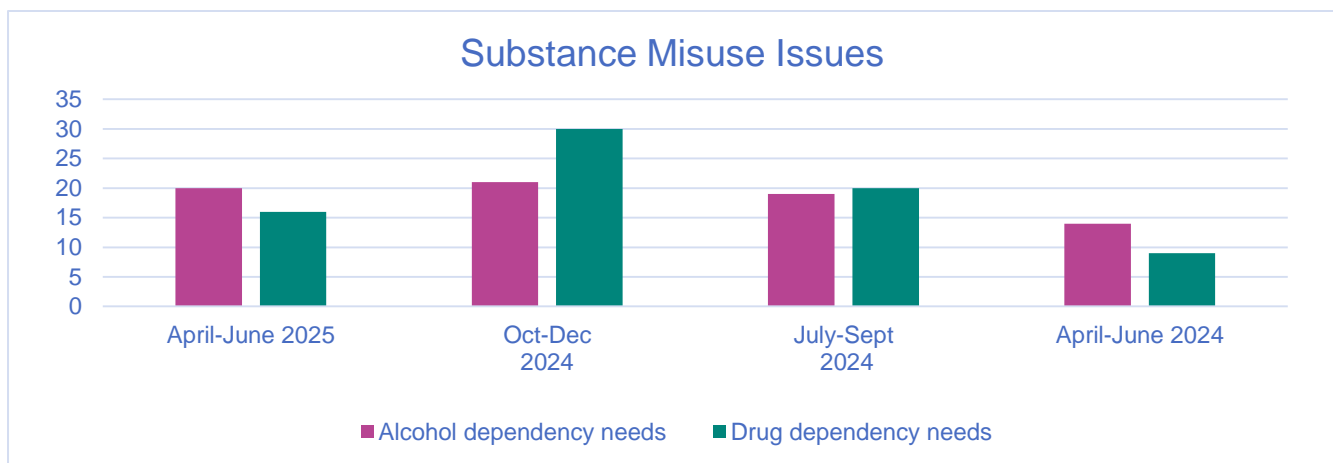
The overall number of children and families approaching homelessness services requiring support is not significantly increasing, but the costs associated with providing short term accommodation has been increasing over recent years. The average cost of accommodation is currently £650 per week; however this rises during the peak season each year.

5. Substance misuse and complex needs

Nationally the numbers reporting as residing in stable and suitable accommodation has remained stable, 88% in April 2019 compared to 87% in September 2025, whereas in Torbay, the percentage of individuals reporting residing in stable and suitable accommodation has been gradually declining since April 2019, reducing from 86% (2019) to 67% (751 of 1,121) in September 2025.

The decline in numbers accessing stable and suitable accommodation has been observed for all treatment groups, falling from 94% to 75% for the alcohol population, from 79% to 62% for the opiate population, from 90% to 68% for the non-opiate and alcohol population and from 92% to 64% for the non-opiate population. Nationally for all treatment cohorts, the percentage of individuals reporting residing in suitable and stable accommodation has remained stable with a 2% decline observed across all cohorts except for alcohol which has seen a 1% decline.

Our homelessness case management system shows our specific support needs around drugs and alcohol:



Source: Community Services Case Management System

We know that there is a risk of under reporting of needs in relation to substance misuse due to the following challenges:

- Data capture relies upon a person or household recognising that drugs or alcohol are an issue for them.
- A fear of being refused accommodation.
- Reporting systems don't capture where both drugs and alcohol are an issue for an individual.

This contrasts with residents at the Leonard Stocks Centre (our hostel), where consistently between 95 -100% of residents have challenges with drugs and alcohol.

We need a small number of units (5) for people with drug and alcohol issues, in addition to our hostel accommodation. This is to support those who require accommodation in a suitable dry unit to support them to engage with drug and alcohol services to give them the best chance of success.

An insights piece of work is currently being commissioned through DATRIG funding for completion by the end of the financial year. This will further inform commissioning requirements for the above and the hostel based on information from those with substance misuse needs. This will identify what would work better when considering short term accommodation requirements and what would help in accessing and maintaining move on accommodation.

6. Domestic abuse

Socio-economic factors can play a large part in the prevalence of domestic abuse - disadvantage does not cause domestic abuse, but research shows it can create the conditions that increase vulnerability and intensify risk of harm. Our Strategic Review in 2022 reported that research studies consistently find higher rates of physical abuse and controlling behaviour among people experiencing poverty, with women particularly affected due to gendered inequalities in income, power, and caring responsibilities. Factors such as low income, social housing, poor education, and living in deprived areas are strongly linked to higher rates of physical abuse against women. These pressures can limit victims' options, increase dependence on perpetrators, and make it harder to leave unsafe situations. This means areas with higher deprivation—such as parts of Torbay—are likely to see a greater need for domestic abuse support.

The fear of statutory child protection procedures and the lack of affordable housing options in Torbay were cited by people with lived experience who were part of the review, as factors affecting their ability to leave abusive relationships.

To support the housing needs of those who have experienced domestic abuse, there are currently 23 units of safe accommodation. This exceeds The Council of Europe recommendations of 1 placement per 10,000 population which would be 14 units for Torbay but recognises that Torbay experiences higher levels of DA due to the factors outlined above.

We currently have sufficient family sized safe accommodation however our statutory safe accommodation needs assessment identified the need for more single person units. The ability to move people on from safe accommodation (no matter how many safe units we have) is significantly constrained by the lack of affordable private sector housing, and a reliance on more limited social housing provision as a result. This particularly affects larger households and single people. As the majority of people in our safe accommodation are reliant on welfare benefits due to their circumstances, their ability to resolve their housing situation without support is limited.

Torbay commissions self-contained, dispersed units of various sizes across the Bay area. Torbay does not operate a stand-alone refuge.

Safe accommodation units by property type and bedroom size

No. of bedrooms	Flat	House	Total Safe Accommodation Units	No. that are Crisis Units
1	7*	0	7	3
2	5	7	12	2
3 Plus	0	4	4	3
Total	12	11	23	8

Source: Torbay Domestic Abuse Service * 1 x 1 bed flat is wheelchair adapted

We know that more people are staying longer in safe houses and crisis provision due to a lack of suitable and affordable move-on accommodation:

Length of stay in the safe houses for all clients leaving safe accommodation	2022/23	2023/24
Up to 8 weeks	3	7
Between 8 and 13 weeks	4	10
Over 13 weeks (should only be through agreement with Commissioner)	10	15
Total	17	32

Source: Torbay Domestic Abuse Service

Length of stay in the crisis units for all clients leaving safe accommodation	2022/23	2023/24
Up to 4 weeks	2	2
Between 4 and 6 weeks	1	3
Over 6 weeks (should only be through agreement with Commissioner)	9	12
Total	12	17

Source: Torbay Domestic Abuse Service

We are currently working with the commissioned domestic abuse provider to develop additional safe house provision.

7. Children and families

Protecting children and giving them the best start in life is a key area of focus and we will achieve this by listening and working alongside our children, young people and families. We are committed to continually improving outcomes by providing good quality Children's Services.

Cared for children and care experienced young people

We know that cared for children often face significant challenges compared to their peers, and this can include the need to prepare for living independently when they reach adulthood. To support this, the local authority uses a range of different placement types, including fostering, residential care and supported housing.

Since 2023 supported accommodation for cared for children has been required to be registered with Ofsted - while this has increased the regulatory requirements for placement providers it has given increased oversight of the quality of accommodation and support provided for this group of vulnerable young people. This includes single and shared accommodation and supported lodgings.

In December 2025 there were:

- 62 cared for children aged 16 and 17
- 16 young people aged 16+ in supported housing
- 15 (estimated) young people aged 16 who could be in supported housing if we had the provision.

Torbay is the corporate parent to our cohort of 303 cared for children aged 0-18; we are also the corporate parent to all care experienced young people from the ages of 16-25, under the extended duties.

As of December 2025, the care experienced team supports:

- 101 former relevant young people aged 19-21
- 138 (in total) care experienced young people aged 16-25 (including those who have chosen to have a duty response).
- 13 care experienced young people (aged 18-25) assessed as living in unsuitable accommodation, either unstable provision or are in custody.

Torbay still needs more accommodation which enables care experienced young people to move on to more permanent homes, recognising that some young people will still have support needs while others will be able to manage to live more independently.

YMCA has been commissioned via the Single Homelessness Accommodation Programme to support young people (18-25) at risk of experiencing homelessness and rough sleeping. This is a scheme from central government which aims to increase the supply of high-quality accommodation with accompanying support to address gaps in homelessness pathway provision.

The current projection of spend for care experienced young people for 2025-26 is £1,400,000. This is compounded by the rising costs associated with private rent, bed and breakfast and hotel accommodation and inflation costs for all placement types.

The table below shows the anticipated demand for placements for 16- and 17-year-olds in care as they approach adulthood, separated children (formerly Unaccompanied Asylum-Seeking children) and those in Staying Put or supported accommodation likely to need move-on homes as they become adults.

Demand forecasting

Year	16/17 cared for (possible/likely)	16/17 cared for (contingency)	UASC (annual / if limited to one referral a month)	End of staying put / supported accommodation (total combined)	Total (highest / lowest)
2025/26	59/35	40	25/12	11	76/62
2026/27	44/30	35	25/12	15	75/63
2027/28	36/22	27	25/12	17	69/56
2028/29	24/14	19	25/12	21	65/52

Source: 'Care Experienced Young People, Accommodation and Sufficiency 08.07.25

Housing need

During the March 2022 Ofsted inspection, Torbay faced challenges about housing and accommodation for care experienced young people, and there was a clear direction from the regulators that this must be a corporate and strategic priority for Torbay, in recognition of those challenges.

We are looking for potential providers who can meet the accommodation and Housing Related Support needs for our young people 16 – 24 and support their continued need for independence. Some are our Cared for and Care Experienced young people, others need accommodation due to being excluded and becoming estranged from their families.

- 10 units of 1 or 2 bedded flats to support care experienced young people, aged 18-24, who may need additional support as they enter adulthood.
- 20 units for step-down semi-independent accommodation for 16 – 24 cared for/care experienced and homeless/risk of homelessness cared for/care experienced 16 – 17-year-olds, with an additional 3 units for young people who require an enhanced level of support.

Young parents service

Torbay currently has limited accommodation and support options for young parents who are Cared For or Care Experienced (16 - 24) and young parents at risk of becoming homeless (16 - 17). Current accommodation comprises ten 1 bedroom and two 2-bedroom self-contained furnished flats.

Utilisation:

Year	Utilisation %	Referrals	Move on/ leavers
21/22	86%	16	11
22/23	86.7%	29	8
23/24	94%	29	12

Move on destinations for young parents:

	21/22	22/23	23/24
Live with family/friends	2	1	7
Social Housing	9	7	5

The move on destinations recorded as part of the Young Parents service are living with family and/or friends – this is often a return to a family member or securing social housing. We are seeing increasing lengths of stay for our young parents who are facing barriers with securing social housing - resulting in frustration for parents who feel they are ready for independence and creating a blockage in throughput for other young people who may require the service.

Housing need

- Develop 12 Units of Supported Accommodation for Young Parents. The accommodation-based service will work with young parents for up to 12 months.
- An outreach service will work with young parents waiting to come into the accommodation and will provide resettlement support for up to 4 weeks after leaving.

Children's residential homes (complex needs)

The recently produced Sufficiency Statement 2025-26 for Children's Services has highlighted the need for further provision of various types of accommodation from fostering to the identified need for more, and more specialised, residential homes for children and young people. The Council is currently looking to procure new residential care provision, and we wish to engage and commission a partner(s) to run new children's residential provision.

We are currently placing too many children and young people out of area and the local available existing provision consists of just 5 homes with 9 beds.

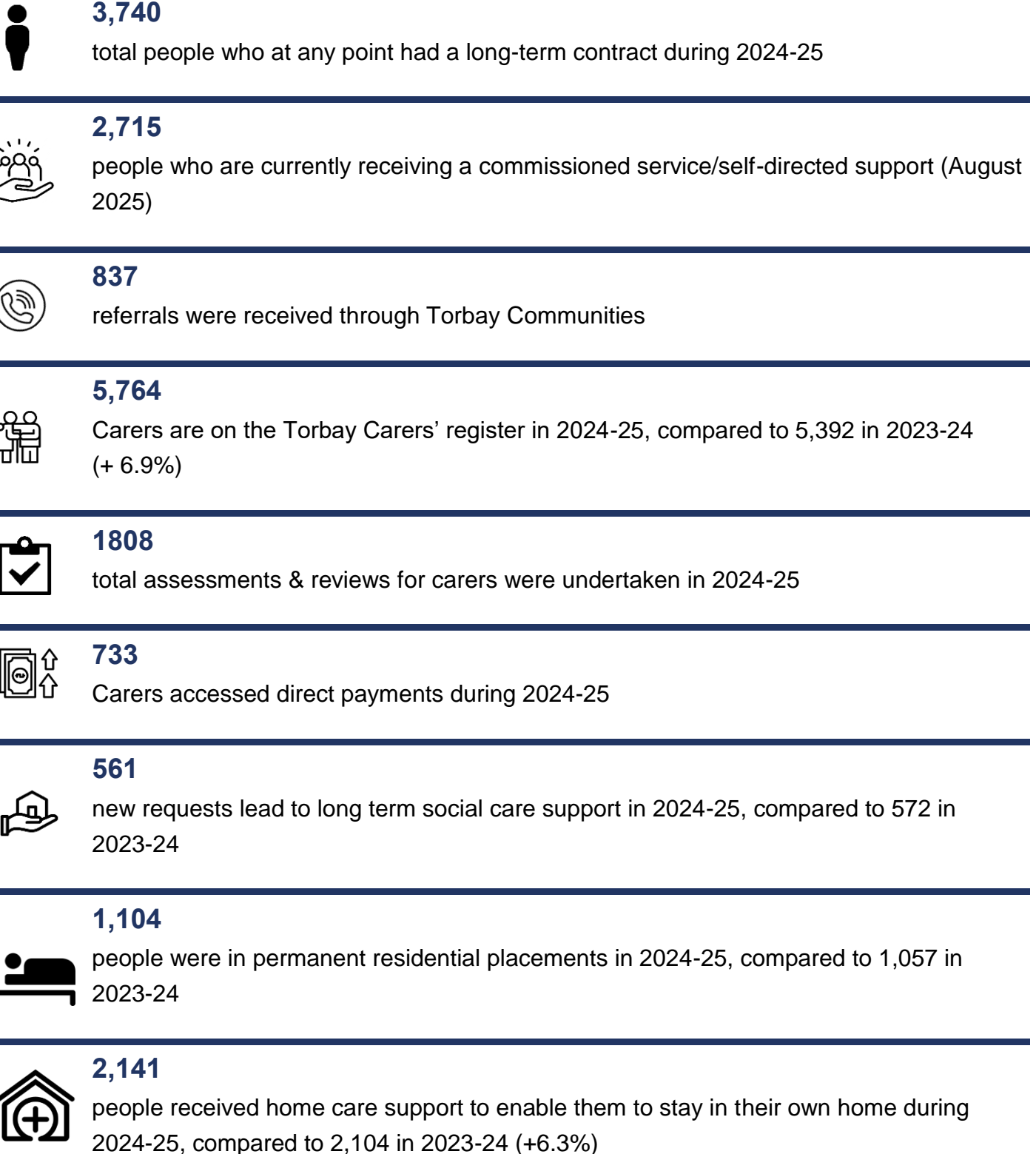
Housing need

The partner(s) will be expected to provide the services local to Torbay, along with a registered manager and a full staffing complement. The provider will also be responsible for the OFSTED registration of the home. Torbay are likely to need:

- Up to 5-6 homes offering a mix of solo and 3-4 beds to meet the complex needs of some of Torbay's children and young people.
- 3 short breaks residential homes with 3-4 beds offering the opportunity for emergency intake. The children accessing will likely have complex needs.

8. Adult Social Care

Adult Social Care in Torbay offers care and support to a broad range of the local population, ranging from advice and information to delivery of care, aimed to help people to continue to live independently for as long as possible. The diagram below shows the activity in relation to Adult Social Care in 2024/25:



95



people with learning difficulties are living in residential or nursing accommodation, compared to 97 in 2023-24 (-2.1%)

916



people with mental health issues were supported by services in 2024-25, compared to 851 in 2023-24 (+7.6%)

1,034



safeguarding concerns were raised in 2024-25. This compares to 1,180 in 2023-24 (-12.4%)

Source: CQC SLT presentation

As of November 2025, the Adult Social Care provider market in Torbay includes a broad range of providers, including:

- 20 day services
- 18 commissioned domiciliary care providers including those for complex care
- 21 Supported Living providers
- 39 residential homes for older adults
- 36 residential homes for working age adults
- 6 residential homes to support mental health
- 19 residential homes to support learning disability
- 12 nursing homes
- 14 non-regulated enabling providers
- 2 extra care housing schemes

We know that our population is ageing, with a significant increase anticipated by 2045 in those aged over 65 – this will place additional requirements for homes which enable people to live independently for as long as possible.

Population aged 65 and over, projected to 2045

Age range	2025	2030	2035	2040	2045
65-69	9,900	11,600	11,900	10,900	10,400
70-74	8,800	9,600	11,300	11,700	10,700
75-79	9,100	8,100	9,000	10,600	11,000
80-84	6,000	7,600	6,900	7,700	9,100
85-89	3,600	4,300	5,500	5,100	5,800
90+	2,200	2,600	3,200	4,200	4,400
Total population 65 and over	39,600	43,800	47,800	50,200	51,400

Source: projecting older people population information

The adult social care strategic commissioning team have based Torbay's supported housing needs for adults on **Identifying the Need for Specialist Housing in Torbay: Housing Need Projections to 2030**, commissioned in partnership with the Housing LIN. Given the impact of COVID, plus changes in social policy and public expectations, alongside the planned implementation of the Supported Housing (Regulatory Oversight) Act 2023, the Council has commissioned an updated supported housing needs dataset for the Housing LIN, due for publication in spring 2026. This will provide the detailed quantitative data to support the qualitative market planning set out below, which will be updated based on the findings of the new report.

Supported housing principles

Torbay Council has taken a framework approach to the commissioning of supported living, setting out a clear specification for service delivery, pricing of services and the expected principals to be adhered to by commissioned providers. The next iteration of the framework will incorporate a better offer at either end of the current need spectrum, thereby improving the range of services at the lower end to bridge the gap into general needs housing, and at the upper end to provide safe, capable and enabling alternatives to residential care for people with complex needs.

There is an expectation that all supported housing services will:

- Be delivered in decent quality accommodation meeting the Decent Homes Standard as a minimum.

- Have tenancies that (unless there is an agreement to the contrary) adhere to the NDTI Real Tenancy Test, so tenure is not affected if the support provider changes.
- Be supported by a skilled landlord¹ genuinely separated from the support provision.
- Meet the Paradigm REACH Standards.
- Fully adhere to the licencing requirements of SH(RO) Act 2023 where applicable.

The council wants supported housing services to be enabling, supporting people's journey towards greater independence or prolonging independence wherever possible through the delivery of gradually fading support and a strength-based approach.

To maximise use of resources, Torbay commissioners will focus on the delivery of supported housing via the Council's grant-funded affordable homes capital programme. This should be enabled by further delivery of more rented social housing across Torbay, and in improvements in the current letting models to make access better and recognise the role housing plays in the wider delivery of adult social care and health services.

For specific areas of need, e.g., complex learning disabilities as an alternative to residential care, the Council may support schemes with Specialist Supported Housing (SSH) designation, if they meet commissioners' criteria for rents and leasehold costs. All SSH schemes should be delivered in partnership with an appropriate regulated Registered Provider.

Older people with physical frailty and age-related mental health conditions

Torbay has a significantly higher population of people over 65 than both England and the rest of the southwest region. As a result, it also has higher number of older adults with dementia, further exacerbated by pre-existing high levels of social deprivation. Deprivation also means an increased incidence of long-term health conditions and older people living in inferior quality rented accommodation.

Housing need

To continue to provide an early diversion of older people away from high-cost health and social care services and support them to remain healthy and independent in their own homes for as long as possible, Torbay needs more dedicated accommodation for its aging population, including:

¹ The preference is for tenancies to be managed by a Home's England Registered Provider regulated by the Regulator for Social Housing.

- Largescale developments of well-designed age-restricted apartments near to local services, utilising existing commissioned domiciliary care services to deliver care and support.
- Crossways is a new purpose-designed development of a 91 apartment extra-care housing scheme in the centre of Paignton. With 80% 1-bed / 20% 2-bed apartments, a restaurant, communal spaces and 24-hour, on site care and support staff, the scheme will support people with disabilities from all age groups. Commissioned specifically to meet local needs, the housing will be available to Torbay residents who have been assessed as needing housing with care. Scheduled to start on site in summer 2026, it will be operational by the summer of 2028 with the care and support delivered by the Council's current extra care support provider, Agincare.

There is an ambition to maximise the use of technology and spatial design to support Torbay's aging population to live well at home.

People living with and recovering from mental illness

Torbay currently has limited accommodation and support options for people living with and recovering from mental illness. The mental health offer within the current iteration of the Torbay Supported Living Framework covers only a small section of need by focussing on ongoing support for people with moderate enduring mental illness.

Housing need

There is little supported housing or skilled housing-related support available for people with complex needs stepping down from hospital or residential care, and there is also a lack of low-level support for people with enduring needs moving-on to scarce, decent and affordable general needs housing. Torbay needs:

- Developments of 6-8 x1-bed apartments, at affordable rents and appropriately located away from areas of social stress, for people with significant mental health needs stepping down from institutional settings. These need to be operated by providers with demonstrable expertise in transitional housing models and acute mental health service delivery, commissioned in partnership with both health and social care services.
- Housing-related floating support services that enable people in long-term recovery to move to and thrive with gradually fading support in social or private tenancies.

Predicted mental health issues in working age adults

Issue	2025	2030	2035	2040	2045
People aged 18-64 predicted to have a common mental disorder	14,627	14,572	14,564	14,715	14,977
People aged 18-64 predicted to have a borderline personality disorder	1,857	1,850	1,849	1,868	1,902
People aged 18-64 predicted to have an antisocial personality disorder	2,563	2,562	2,565	2,592	2,650
People aged 18-64 predicted to have a psychotic disorder	540	538	538	544	554
People aged 18-64 predicted to have two or more psychiatric disorders	5,555	5,540	5,539	5,597	5,703

Source: Projecting Adult Needs and Service Information System

People with learning disabilities and autistic people

The current Torbay Supported Living Framework is now in its second iteration and the third iteration is in the planning stages. The prevalent model of supported housing for people with learning disabilities in Torbay has been shared accommodation in houses of multiple occupation. Changing expectations mean that there is reducing demand for this models and people with learning disabilities are increasingly wanting self-contained accommodation either in small clusters with on-site support day and night (where needs are higher) or dispersed in the wider community with specialist support commissioned according to need. Where needs are extremely high and include behaviours that challenge services, fully bespoke housing may be required, based on single business cases prepared by commissioners.

Housing need

Commissioners intend to gradually reduce the amounts of shared accommodation; increase the amount of self-contained accommodation; increase the variety of housing options; ensure the principals of supported housing are applied universally and widen the offer for people with higher and lower needs. Torbay needs:

- A better variety of affordable housing options for people with learning disabilities and autism, utilising social rented properties wherever possible. This should include planned 'core and cluster' developments with a core of 8-10 x 1-bed and 2-bed apartments with higher levels of support, supporting a cluster of nearby properties for people who have gained greater

independence and require less support. This is also known as a 'hub and spoke' model of supported housing.

- Housing-related floating support services that enable people with gradually fading funded support to move to and thrive in social or private tenancies, building up their own social support networks of friends, family, technology and voluntary services where possible.
- Greater opportunities for home ownership via the Home Ownership - Learning Disabilities (HOLD) or Shared Ownership for People with Longterm Disabilities (SOLD) shared ownership schemes.

Number of people predicted to have a moderate or severe learning disability (Torbay)

Age range	2025	2030	2035	2040	2045
18-24	52	54	54	50	46
25-34	78	74	75	78	77
35-44	97	102	102	100	102
45-54	88	89	96	102	103
55-64	108	104	95	97	106
65-74	66	74	81	79	74
75-84	32	32	33	38	42
85+	10	12	16	17	19
Total:	531	543	553	561	568

Source: [Projecting Adult Needs and Service Information System](#)

Number of people predicted to have Autistic spectrum disorders (Torbay)

Age range	2025	2030	2035	2040	2045
18-24	85	89	89	81	75
25-34	143	138	142	148	144
35-44	151	161	163	160	166
45-54	163	161	177	187	193
55-64	219	212	193	195	213

65-74	181	209	229	223	207
75+	190	207	225	252	278
Total:	1132	1177	1218	1246	1276

Source: Projecting Adult Needs and Service Information System

Appendix 1 – Housing data

Number of households registered with Devon Home Choice in Torbay, Bands A-D

Period	Band A No.	Band A %	Band B No.	Band B %	Band C No.	Band C %	Band D No.	Band D %	Total No.
01.04.2019 - 31.03.2020	3	0%	249	19%	324	25%	705	55%	1281
01.04.2020 - 31.03.2021	5	0%	262	19%	402	29%	694	51%	1363
01.04.2021 - 31.03.2022	1	0%	321	20%	441	28%	807	51%	1572
01.04.2022 - 31.03.2023	4	0%	332	20%	435	26%	917	54%	1688
01.04.2023 - 31.03.2024	1	0%	286	17%	457	28%	892	55%	1636
01.04.2024 - 31.03.2025	2	0%	362	20%	488	27%	966	53%	1818
5 year average	3	0%	313	19%	445	28%	855	53%	1615

Source: [Useful Information | Devon home choice](#)

Number of general needs homes let in Torbay through Devon Home Choice

Period	Band A No.	Band A %	Band B No.	Band B %	Band C No.	Band C %	Band D No.	Band D %	Band E No.	Band E %	Total No.
01.04.2019 - 31.03.2020	5	2%	154	59%	64	25%	35	13%	3	1%	261
01.04.2020 - 31.03.2021	8	5%	129	73%	26	15%	13	7%	#N/A	0%	176

Period	Band A No.	Band A %	Band B No.	Band B %	Band C No.	Band C %	Band D No.	Band D %	Band E No.	Band E %	Total No.
01.04.2021 - 31.03.2022	5	3%	149	83%	17	9%	7	4%	1	1%	179
01.04.2022 - 31.03.2023	2	1%	150	90%	7	4%	5	3%	2	1%	166
01.04.2023 - 31.03.2024	2	1%	140	92%	7	5%	3	2%	#N/A	0%	152
01.04.2024 - 31.03.2025	5	2%	166	83%	18	9%	10	5%	2	1%	201
5 year average	5	2%	148	80%	23	11%	12	6%	1	1%	189

Source: [Useful Information | Devon home choice](#)

The table below summarises the accessibility needs for those approaching Devon Home Choice.

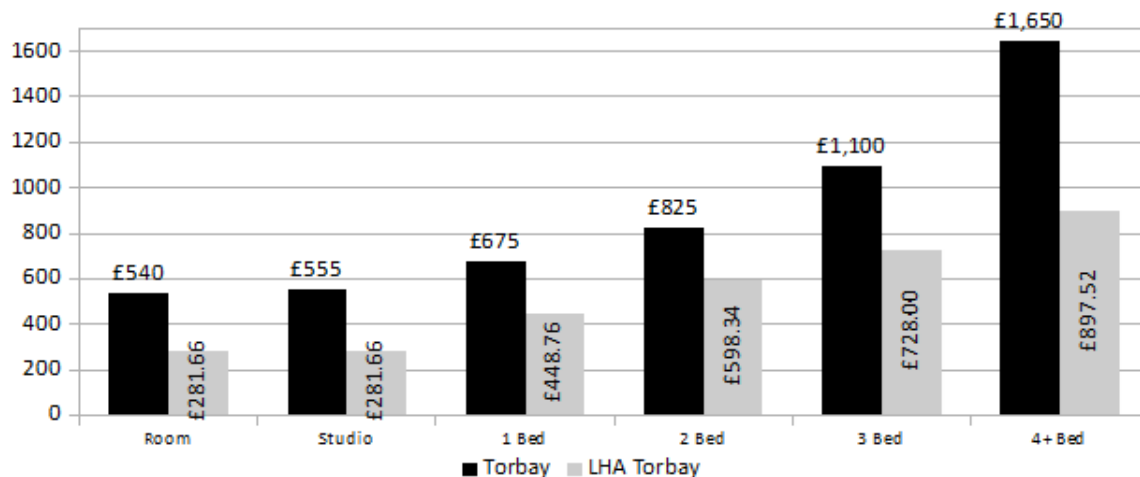
Devon Home Choice: Accessibility needs of applicant households

Disability/health issue	Number of households	% of households on the register
General Needs	1146	68%
Maximum of 3 Steps	312	19%
Step Free	196	12%
Wheelchair Accessible	25	1%

Source: Devon Home Choice

In terms of affordability, local rents exceed Local Housing Allowance by £350 per month on average.

Average local rents compared with Local Housing Allowance (LHA) rates, Torbay 2024

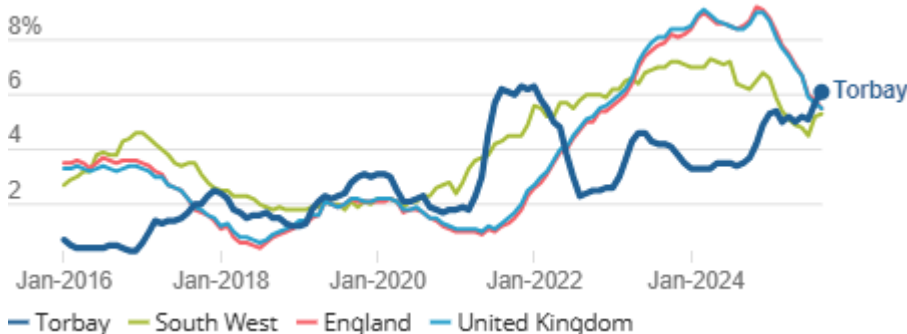


Source: H+RS Evidence Base 240628 v18

Across the South West, the average house price in August 2025 was £310,000, which was more than a year earlier (£303,000). In the year to August 2025, the average price for semi-detached properties in Torbay rose by 1.8%, while the average price for flats decreased by 2.9%.

Annual change in rents in Torbay

Private rental price annual inflation, Torbay, January 2016 to September 2025



Source: : [Housing prices in Torbay](#)

In Torbay, the average monthly rent for flats or maisonettes rose by 6.7% in the year to September 2025, while for detached properties, it increased by 5.4%. The average rent for one bed properties rose by 7.0%, while the average for four-or-more bed properties increased by 5.1%. In contrast we know that wages in Torbay are lower than elsewhere, which creates an affordability gap between wages and the cost of rental properties for a broad range of our population.

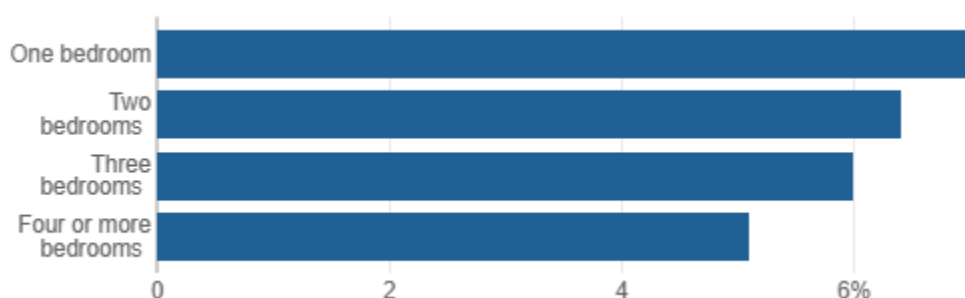
Median gross weekly pay for all full-time workers

Year	Torbay	South West	Great Britain
2020	£466.9	£558.9	£587.4
2021	£542.3	£576.1	£612.2
2022	£566.7	£622.0	£644.7
2023	£572.5	£667.5	£689.7
2024	£632.4	£701.4	£730.6
2025	£669.1	£734.0	£766.6

Source: [Labour Market Profile - Nomis - Official Census and Labour Market Statistics](#)

Change in average rents by bedroom number in Torbay

Monthly private rental price, annual inflation, September 2025



Source: [Housing prices in Torbay](#)

By how many bedrooms there are in a property, average rents as of September 2025 in Torbay were:

- One bedroom: £599
- Two bedrooms: £790
- Three bedrooms: £962
- Four or more bedrooms: £1,258

Glossary

Housing and homelessness duties

- **Prevention Duty** – A statutory duty under the Homelessness Reduction Act 2017. It applies when a household is threatened with homelessness within 56 days. The local authority must take reasonable steps to help the household remain in their current accommodation or secure alternative housing before homelessness occurs. Actions are agreed with the applicant and recorded in a Personalised Housing Plan.
- **Relief Duty** – Applies when a household is already homeless. The local authority must take reasonable steps to help secure suitable accommodation that will last at least six months. This duty also involves creating a Personalised Housing Plan and working actively with the applicant to find housing.
- **Personalised Housing Plan (PHP)** – A tailored plan agreed between the applicant and the local authority, setting out specific actions to prevent or relieve homelessness. It may include steps such as finding accommodation, managing rent arrears, and accessing support services.

Accommodation types

- **Temporary Accommodation (TA)** – Short-term housing provided by the council while a homeless household's situation is being resolved. This can include hostels, bed and breakfast hotels, or self-contained flats. TA is intended to be a temporary solution until permanent housing is secured.
- **Supported Housing** – Accommodation that includes on-site or linked support services for people with additional needs, such as mental health conditions, learning disabilities, or substance misuse issues. Support can range from help with daily living to specialist interventions.
- **Extra Care Housing** – Housing designed for older adults or people with disabilities, combining independent living with access to care and support services. Often includes communal facilities, emergency response systems, and staff on-site to provide assistance.
- **Move-on Accommodation** – Housing that enables people to transition from temporary or supported housing to permanent homes. It is often used for care leavers or those recovering from homelessness and may include light-touch support to promote independence.

- **Safe Accommodation** – Housing provided for victims of domestic abuse, offering security and support. This can include dispersed units or refuge-style accommodation. Safe accommodation is designed to protect individuals from further harm and provide access to specialist services.
- **Spot-purchased Placements** – Individual housing units bought at short notice to meet urgent accommodation needs, often when standard provision is unavailable. These placements are typically more expensive and used as a last resort.

Homelessness and risk

- **Rough Sleeping** – Sleeping outdoors or in places not intended for human habitation, such as parks, doorways, stairwells, or cars. Rough sleeping is the most visible form of homelessness and often associated with severe health and safety risks.
- **Single Homelessness Accommodation Programme (SHAP)** – A government initiative to increase the supply of high-quality accommodation with support for single homeless people, including young adults at risk of rough sleeping. The programme aims to reduce homelessness and improve long-term outcomes.
- **Intentionally Homeless** – When a person becomes homeless due to deliberate actions or decisions, such as refusing suitable accommodation or failing to pay rent without good reason. This can affect eligibility for housing assistance.

Legislation and policy

- **SHROA (Supported Housing Regulatory Oversight Act)** – Legislation that strengthens regulation and oversight of supported housing providers to ensure quality, accountability, and protection for vulnerable residents.
- **Renters Rights Bill** – Proposed legislation aimed at improving security and rights for tenants, including measures to prevent unfair evictions, enhance housing standards, and increase transparency in the private rental sector.

Specialist cohorts

- **Care Experienced Young People** – Young people aged 16 – 25 who have been in care. Local authorities have extended duties to support them with housing, education, and wellbeing as part of their corporate parenting responsibilities.
- **Relevant Young People** – Legal terms under the Children Act for care leavers who are aged 16 - 17 and entitled to specific support from local authorities, including a Personal Advisor, a

Needs Assessment, a Pathway Plan, accommodation and maintenance, and financial support to meet education, training and employment needs

- **Former Relevant Young People** – Legal terms under the Children Act for care leavers who are aged 18 – 24 and entitled to specific support from local authorities, including A Personal Advisor, a Pathway Plan (kept under regular review), Assistance with employment, education and training, Assistance with accommodation, Help with living costs
- **Unaccompanied Asylum-Seeking Children (UASC)** – Children who arrive in the UK without parents or guardians and seek asylum. They require specialist housing and support, including safeguarding and integration services.

Housing standards and design

- **Lifetime Homes Standard** – A set of design principles that make homes adaptable and accessible for people at all stages of life, including those with disabilities. Features include wider doorways, level access, and space for future adaptations.
- **Cluster Model** – A housing design where small units are grouped together to allow shared support services and efficient staffing. This model is often used for supported living arrangements to balance independence with access to care.

Local systems and data

- **Devon Home Choice (DHC)** – A choice-based lettings system used across Devon for allocating social housing. Applicants bid for available properties based on their priority band, which reflects housing need and local connection.
- **Joint Strategic Needs Assessment (JSNA)** – A comprehensive assessment of local population needs, used by councils to plan services and allocate resources. It provides evidence for commissioning decisions and strategic planning.

Meeting: Cabinet Meeting

Date: 14 April 2026

Wards affected: All

Report Title: CQC Improvement Plan

When does the decision need to be implemented?

Cabinet Member Contact Details: Cllr Hayley Tranter, Cabinet Member for Adult and Community Services, Public Health and Inequalities, Hayley.Tranter@Torbay.gov.uk

Director Contact Details: Anna Coles, Director of Adult and Community Services; anna.coles@torbay.gov.uk

1. Purpose of Report

- 1.1 In September 2025 Adult Social Care in Torbay completed an onsite inspection by CQC as part of the new legislative framework set out for Council's across the United Kingdom.
- 1.2 This paper presents the final report and feedback. Attached is an accompanying action plan that has been developed to monitor improvement work based on the findings within the report and previous assurance activity.
- 1.3 This paper seeks to ensure that our political members have oversight of the findings of the inspection process and the work being carried out to further improve Adult Social Care services for the people of Torbay.

2. Reason for Proposal and its benefits

- 2.1 The CQC report outlines key insights following their assessment of Torbay Council Adult Social Care.
- 2.2 This report includes the Adult Social Care CQC Improvement Plan including progress to date.
- 2.3 Actions within the plan have been allocated appropriately across Adult Social Care programme sub-boards to ensure visibility and single line of reporting.
- 2.4 The CQC report's findings will assist us in improving the experiences of Torbay residents and for us to deliver our vision of a healthy, happy and prosperous Torbay.

3. Recommendation(s) / Proposed Decision

- 3.1. That Cabinet notes the CQC's report on their assessment of Torbay Council's Adult Social Care and approves the resulting action plan as set out at Appendix 2; and
- 3.2. That the Adult Social Care and Health Overview and Scrutiny Sub-Board be requested to review the improvement plan on a quarterly basis and make any required recommendations to Cabinet.

4. Appendices

Appendix 1: CQC local authority assessment of Torbay Council Adult Social Care, Published 17th December 2025.

Appendix 2: Adult Social Care CQC Improvement Plan

Appendix 3: ASC Programme Structure

5. Background Documents

- <https://www.torbay.gov.uk/adult-social-care/lga-peer-challenge-2024/lga-peer-review-report/>
- <https://www.torbay.gov.uk/adult-social-care/adult-social-care-commissioning/adult-social-care-self-assessment/>

Supporting Information

6. Introduction

- 6.1. Inspectors from the Care Quality Commission carried out a full assessment of Torbay's Adult Social Care service in September 2025. This was completed as part of a two-year inspection programme of all 152 councils with responsibility for adult social care, which were reintroduced as part of the Health and Care Act 2022.

- 6.2. Torbay received its first notification from CQC in April 2025. As part of the requested Information Return, Torbay submitted over 150 pieces of evidence including an updated Self-Assessment
- 6.3. The on-site inspection took place 9th - 11th September 2025. While conducting the inspection, CQC inspectors spoke with over 200 people: including local care providers, VCSE partners, people with lived experience and a range of staff across Torbay Council and Torbay and South Devon NHS Foundation Trust (TSDFT).
- 6.4. In preparation for CQC Assessment, Adult Social Care took part in an LGA Peer Challenge in June 2024 to understand the process and highlight any improvement activity that could be undertaken.
- 6.5. The Improvement Action Plan amalgamates highlighted areas of improvement from the Peer Challenge recommendations, the revised Self-Assessment and the CQC local authority assessment report.

7. Options under consideration

- 7.1. None.

8. Financial Opportunities and Implications

- 8.1. None.

9. Legal Implications

- 9.1. Legal accountability for Adult Social Care in Torbay remains with Torbay Council. The Council has chosen to delegate responsibility for the operational delivery of key aspects of the adult social care function to Torbay and South Devon NHS Foundation Trust. That delegated responsibility is overseen by a Section 75 agreement (Section 8.1 to 8.7), the detail is articulated via a Memorandum of Understanding, set alongside the financial agreement established between the Council, the Trust, and NHS Devon Integrated Commissioning Board.

10. Engagement and Consultation

- 10.1. The CQC assessment team was on site from 9th - 11th September 2025. The programme for the on-site phase included activities designed to enable members of the team to meet and talk to a range of internal and external stakeholders.
- 10.2. Engagement activity included interviews, focus groups, and discussions, with Councillors, people with lived experience, managers, practitioners, frontline staff, and partner representatives; in total over 40 meetings were included on the timetable, and the team gathered views from more than 200 people within these.
- 10.3. Preparatory work including a bespoke case file audit covering 10 case files and reading documents provided by the Council; both in advance of and during the assessment. The

information return included a self-assessment of progress, strengths, and areas for improvement and included over 150 documents.

11. Procurement Implications

11.1. None.

12. Protecting our naturally inspiring Bay and tackling Climate Change

12.1. None.

13. Associated Risks

13.1. Whilst the assessment outcome has been positive, the CQC local authority assessment for Torbay Council identifies areas for improvement, which we will address as they could have an adverse impact on the experiences of people with Adult Social Care needs.

14. Equality Impact Assessment

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 Page 67	<ul style="list-style-type: none"> 18% of Torbay residents are aged under 18 years old. 55% of Torbay residents are aged between 18 to 64 years old. 27% of Torbay residents are aged 65 and older. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Carers	<ul style="list-style-type: none"> At the time of the 2021 census there were 14,900 unpaid carers in Torbay. 5,185 of these carers provided 50 hours or more of care. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Care experienced	<ul style="list-style-type: none"> As of January 2026, there were 277 former care experienced young people aged 18-24 in Torbay. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities

Disability	<ul style="list-style-type: none"> In the 2021 Census, 23.9% 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. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Gender reassignment	<ul style="list-style-type: none"> 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. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Marriage and civil partnership	<ul style="list-style-type: none"> 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. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Pregnancy and maternity	<ul style="list-style-type: none"> Between 2013 and 2024, the rate of live births (as a proportion of females aged 15 to 44) has been slightly but significantly higher in Torbay (average of 56.0 per 1,000) than the Southwest (53.4) and broadly in line with England (56.3). For the period 2022 to 2024, rates in Torbay (44.6) have been 	N/A to this report.	N/A to this report.	N/A to this report.

	significantly below England (50.0).			
Race	<p>In the 2021 Census, 96.1% of Torbay residents described their ethnicity as the following:</p> <ul style="list-style-type: none"> • 1.6% as Asian, Asian British or Asian Welsh • 0.3% as Black, Black British, Black Welsh, Caribbean or African • 1.5% as being of Mixed or Multiple ethnic groups • 96.1% as White • 0.4% described their ethnicity another way. <p>• Black, Asian and minoritised ethnic communities are more likely to live in areas of Torbay classified as being amongst the 20% most deprived areas in England.</p>	<p>There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan</p>	<p>The Adult Social Care improvement plan will address the equalities issues identified in the report.</p>	<p>Adults and Communities</p>
Religion and belief	<p>The 2021 Census showed that the residents in Torbay identify their religion and/or belief as the following;</p> <ul style="list-style-type: none"> • 48.5% are Christian • 0.4% are Buddhist • 0.2% are Hindu • 0.6% are Muslim • Less than 0.1% are Sikh • 0.1% are Jewish • 0.7% have another religion 	<p>There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan</p>	<p>The Adult Social Care improvement plan will address the equalities issues identified in the report.</p>	<p>Adults and Communities</p>

	<ul style="list-style-type: none"> • 43.2% have no religion • 6.3% did not answer 			
Sex	<ul style="list-style-type: none"> • 51.3% of Torbay's population are female. • 48.7% of Torbay's population are male. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Sexual orientation	<p>In the 2021 Census, residents described their sexuality as follows;</p> <ul style="list-style-type: none"> • 89% as Straight or Heterosexual • 1.7% as Gay or Lesbian • 1.1% as Bisexual • 0.1% as Pansexual • 0.1% described their sexuality another way • 7.4% of people didn't answer the question 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Armed Forces Community	<ul style="list-style-type: none"> • In 2021, 3.8% of residents in England reported that they had previously served in the UK armed forces. • In Torbay, 5.9% of the population have previously served in the UK armed forces. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Additional considerations				

Socio-economic impacts (Including impacts on child poverty and deprivation)	<ul style="list-style-type: none"> Torbay is ranked as the 39th most deprived upper tier local authority in England in the Index of Multiple Deprivation 2025. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Public Health impacts (Including impacts on the general health of the population of Torbay)	<ul style="list-style-type: none"> For the five-year period 2020 to 2024, data shows there is a 6-year life expectancy gap between males who live in Torbay's least and most deprived areas and, a 3-year gap for females. 	There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Human Rights impacts		There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities
Child Friendly		There is no decision required in this report; therefore, no equality considerations are identified. Equalities issues are raised in the CQC report which will be addressed in detail in the action plan	The Adult Social Care improvement plan will address the equalities issues identified in the report.	Adults and Communities

15. Cumulative Council Impact

15.1. None.

16. Cumulative Community Impacts

16.1. None.

Torbay Council assessment

[How we assess local authorities.](#)

Assessment published: Wednesday 17 December

About Torbay Council

Demographics

Torbay is a unitary authority in the South West of England. It has a population of 140,126, making it one of the smallest local authorities in England. It has an index of multiple deprivation (IMD) score of 8, with 1 being least deprived group and 10 in the most deprived group. Compared to other local authorities in the South West region it has the highest IMD score, meaning Torbay is more deprived overall than its regional neighbours.

The population is made up of 17.71% age 0-17 (national average 20.78%); 55.01% age 18-64 (national average 60.48%); 27.29% age 65 and over (national average 18.73%). There is a very high proportion of people over 65 in Torbay, than national average, a lower working age population and a lower population of young people and children. The majority ethnic group is White 96.12% (national average 81.05%) with the next ethnic group being Asian and Asian British 1.6% (national average 9.61%), followed by Mixed or Multiple at 1.5%. The overall health index score (2021) showed the local authority had a value of 95.7 which indicates worse overall health than the national average (which would see a value of 100).

Torbay is part of 'One Devon' integrated care system alongside Plymouth and Devon local authorities and partner NHS organisations. The ICB is very large compared to the size of the local authority. Since 2005 Torbay Council has contracted the Torbay and South Devon NHS Foundation Trust to deliver its social care services under a comprehensive Section 75 arrangement (A Section 75 agreement is a legal arrangement under the National Health Service Act 2006 that allows NHS bodies and local authorities in England to pool budgets, delegate functions, and integrate services, especially in areas like adult social care, public health, and children's services), with the local authority retaining some strategic commissioning functions.

There is a minority Conservative administration, with a leader and cabinet model of governance.

A new Director of Adult Social Services has been appointed in recent months.

Financial facts

The local authority estimated that in 2024/25, its total budget would be **£262,017,000.00**. Its actual spend for that year was **£252,700,890.00**, which was **£9,316,110.00 less** than estimated.

The local authority estimated that it would spend **£66,276,000.00** of its total budget on adult social care in 2024/25 Its actual spend was **£67,255,890.00**, which is **£979,890.00 more** than estimated.

In 2024/25, **26.61%** of the budget was spent on adult social care.

The local authority has raised the full adult social care precept for 2024/25, with a value of **2%**. Please note that the amount raised through ASC precept varies from local authority to local authority.

Approximately **3520** people were accessing long-term adult social care support, and approximately **2210** people were accessing short-term adult social care support in 2023/24. Local authorities spend money on a range of adult social care services, including supporting individuals. No two care packages are the same and vary significantly in their intensity, duration, and cost.

This data is reproduced at the request of the Department of Health and Social Care. It has not been factored into our assessment and is presented for information purposes only.

Overall Summary

Local Authority rating and quality statement scores

Good: Evidence shows a good standard 67%

Summary of people's experiences

People and carers gave us positive feedback during our assessment and records we reviewed showed positive experiences across all areas in the assessment. Unpaid carers were particularly positive about support and services available to them. We spoke with 'ambassadors' who had strong relationships with council officers and elected leaders and they gave us examples of impact on services and genuine co-production. There was a real sense of listening, involvement and power-sharing with ambassadors from different groups such as carers, people with learning disabilities and autistic people.

National data used in the report generally showed a positive picture. Most data showed performance around the national average, for example in the proportion of people satisfied with care and support. Unpaid carers data showed significantly higher numbers of unpaid carers accessed support or someone to talk to in confidence, than national average. There was also a high proportion of people who received short term support, who no longer needed support, and a high proportion of people accessing reablement. Although fewer people remained at home after 91 days following a hospital stay than the national average. Direct payments were well used and available for carers, but less so for people with care and support needs.

Waiting times were evident but not usually high and we heard some impact on people from waiting times for assessments and reviews, although we saw how the local authority provided waiting well information and used triage and risk prioritisation. Higher waits were experienced for annual reviews than other assessments. Staff and partners said the proportion of people going into residential care services had been high. However, work was underway to change this, with reablement facilities already effective, and extra care housing being built.

Summary of strengths, areas for development and next steps

The local authority was achieving many outcomes well and there were some areas for improvement. Adult social care staff had been fully contracted to the NHS trust to merge functions and teams in 2005. The experience of staff differed depending on which team they were in. Many staff reported consistent social care leadership and strength-based practice, but some reported a lack of consistency and a more health focus on their leadership and working culture. People's experiences were universally positive, however, and carers reported very high satisfaction to us. Alongside good performance in national data, this local authority has achieved an overall 'Good' rating in this assessment.

Access to the local authority's social care service was equitable and strength-based with the Voluntary Community and Social Enterprise sector embedded in the 'front door'. Arrangements could be complex, however, and sometimes processes were described as complicated in assessing people's needs. We found some waiting lists for services, but these were risk-managed, however there were higher levels of care plan reviews outstanding. Actions had been taken to reduce waits for people which were starting to make an impact and the local authority had made efforts to simplify the 'front door' with a current review ongoing.

Tackling deprivation and generating economic growth was a key driver for the local authority in its support for people and generating better health and wellbeing. They had a range of advice and support available and were consistent in describing their efforts to improve people's lives through housing and employment. Reablement was improved with a new facility for step-up and step-down support to avoid hospital admission, with wrap around support. The technology enabled care offer had been enhanced to support people at home. Hospital discharge rates were excellent and reablement was offered to a high proportion of people. There was a focus on reducing bed-based care and people moving to long-term care placements, which had started to make an impact.

The local authority were able to describe some efforts to reach seldom heard groups and their co-production work was good. There was a strategy to tackle issues such as domestic abuse and there was a new equality, diversity and inclusion strategy. They had recruited an equality and diversity lead and recent equality impact assessments had been undertaken. However, this work was quite new and had not been embedded at the time of our assessment. The local authority also relied on census (2021) data to understand diversity within its population, partly as a result of limitations with the electronic systems they used.

The care provided in the local authority was generally good quality and there were systems and processes to manage and monitor placements and relationships with providers. There was less availability locally for people with specialist needs, those with mental health needs and supported housing, however staff reported an ability to place people. There were two all-age extra-care facilities in development and a clear intention to shape the market.

Partnerships and the deep level of co-delivery, overall, was a strength, with some challenges noted. Partnerships with the VCSE were strong and delivering, with significant numbers of VCSE organisations working in the area, supported by a commissioned infrastructure organisation. Within statutory health and care services there was sometimes

a health model prevailing, but we saw impact and benefits of co-location and multi-disciplinary teams on people and carers. Partners worked well together, had strategic alignment and understood the challenges and demonstrated plans to improve.

The out-of-hours services worked well, including access to Approved Mental Health Professionals (AMHPs). Hospital discharge was swift and identified risks prior to discharge and embedded teams supported safe discharge. Transitions from children's to adults services provided a clear and safe pathway for young people and a strength-based approach. There was a multiple and complex needs alliance, which linked housing with health and social care to ensure people were safe. There was some feedback about gaps for people with complex mental health needs.

Safeguarding processes were effective, although we heard about some Deprivation of Liberty Safeguards (DoLS) waits for decisions, although these were risk managed. The local authority learned from Safeguarding Adults Reviews (SARS) and there had been a significant reduction in outstanding SARs action in recent years, alongside a more defined threshold for SARs. Leaders and partners listened to people in their safeguarding work and had worked with the Scrutiny committee. Hoarding and cuckooing and emerging safeguarding themes were being addressed by the system.

There had been a lack of visibility of social care leadership in some teams, partly due to health focus of management and delegated arrangements with mixed supervision practices. Although we heard about a recent change in approach and greater visibility with the new Director of Adults Services. We found elected leaders were well briefed and involved in oversight and governance arrangements. Partners were embedded and represented on governance boards and committees, and we saw risk and governance delivery arrangements between the local authority and the Torbay and South Devon NHS Foundation Trust. The electronic recording system had limited improvement work on governance, management and accountability and this was being addressed at the time of our assessment.

Recruitment and retention was reported as positive by staff and there was energy and optimism for the future in the staff teams. Integration had allowed rotational posts between hospital and community work, and they had a good team culture between the multidisciplinary teams. Leaders, alongside the Integrated Care Board, commissioned an external consultancy as a delivery partner to support improvement in reablement and intermediate care. There was a good level of provision of training available to staff and Ambassadors (people with lived experience) trained as facilitators. Co-production with people, particularly Ambassadors, was a genuine listening and power sharing arrangement, with people reporting they had shaped and impacted positively on services.

Theme 1: How the local authority works with people

This theme includes these quality statements:

- Assessing needs
- Supporting people to live healthier lives
- Equity in experience and outcomes

We may not always review all quality statements during every assessment.

Assessing needs

Score:

2 - Evidence shows some shortfalls

What people expect:

I have care and support that is coordinated, and everyone works well together and with me.

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

The local authority commitment:

We maximise the effectiveness of people's care and treatment by assessing and reviewing their health, care, wellbeing and communication needs with them.

Key findings for this quality statement

Assessment, care planning and review arrangements

Assessment and care planning arrangements were generally effective although sometimes complicated. There were multiple access points, multi-disciplinary teams with health partners and person-centred approaches across services. The integration of Voluntary Community and Social Enterprise (VCSE) support and triage systems helped meet a wide range of needs. There were some challenges around telephone-based assessments and some delays to approvals and increasing demand.

From the point of initial contact with the local authority, people said their views and those of their unpaid carers were listened to and helped shape the assessment process. In one example, strong personal and family preferences were noted and acted upon, with the local authority offering reassurance about future care arrangements. People described their assessment as person-centred, with outcomes identified through consultation with family members and care providers who knew the person well. Multiple visits were noted, incorporating family and unpaid carer voices.

Staff ensured the person's needs and preferences were represented and respected, even when the person could not communicate with them directly. People also said their assessments were strength-based, allowing them to explore their long-term goals and aspirations for independence. The local authority was described as transparent, honest, and respectful. Adult Social Care Survey data (2024-2025) showed 80.90% of people felt they had control over their daily life (national average 77.62%), 67.42% were satisfied with their care and support (national average 65.39%), and 47.94% reported having as much social contact as they wanted which was similar to the national average (45.56%).

Staff and partners described a range of arrangements in place to support effective assessment and care planning. Adult Social Care was said to have multiple access points, including a commissioned community helpline. A short-term triage team managed lower-risk cases, while complex care teams handled higher-risk cases. Additional referral pathways, such as those for carers services, safeguarding, and Deprivation of Liberty Safeguards (DoLS) were evident. Although some staff said access to services, or the 'front door', was complex at times.

Referrals for adult social care came from carers, people in the community, health and social care coordinators, and self-referrals. We heard digital platforms had been trialed to improve the front door but had not been widely adopted. Staff said this was because people preferred telephone contact. Staff said telephone-based assessments could be challenging, especially when trying to understand someone's living conditions, for example, staff said people sometimes underreported their needs. However, staff said they arranged in-person visits when necessary. Despite these challenges, people said assessments were person centred and comprehensive. Multidisciplinary teams supported social workers by also producing detailed assessments, although we heard risk assessments remained the responsibility of social workers.

Some staff highlighted delays caused by internal approval processes, particularly where referrals had to be signed off by a single senior worker. Mental health referrals were said to bypass this step. Staff working in housing and complex needs forums described holistic assessments involving housing, health, and social care professionals, which were seen as effective. Some staff described their work as increasingly crisis-driven and said some processes were complex, particularly around Mental Capacity Act assessments.

Occupational therapists adopted a strengths-based and preventative approach, combining clinical assessments with education and signposting to community resources. Sensory services accepted referrals from a wide range of sources and used a triage system to prioritise cases, with reassessments undertaken regularly to reflect changing needs. The Sensory Team provided specialist support for people with hearing and sight impairments, including functional assessments and equipment provision.

Partners also raised concerns about the limitations of telephone-based assessments but said the community helpline was successful in supporting people with a variety of needs. Local authority data showed the community helpline signposted 84% to VCSE support with 10% of contacts requiring formal Care Act assessments. Partners also said referrals were triaged and allocated appropriately.

Timeliness of assessments, care planning and reviews

The local authority had risk prioritisation and waiting well measures in place, with improving waiting times for assessments in short term and complex teams. However, there had been significant waiting times for care plan reviews. The local authority had taken steps to address these through additional resources and process redesign, with key involvement from external providers and VCSE partners.

Timeliness was evident in a care record we reviewed where the assessment was completed within three to four weeks of initial contact. The person was already receiving care, which was reviewed and confirmed as appropriate. Carers reported that reviews of their assessments were done, and said informal contact could trigger a review. However, data from the Adult Social Care Finance Report (ASCFR)/Short and Long-Term Support (SALT) (2023-2024) showed only 44.44% of long-term support clients were reviewed (planned or unplanned) which was somewhat lower than the national average (58.77%). Partners told us there had been delays in assessments and reviews. One partner said the local authority had responded by working with community partners to carry out low-level reviews to help reduce the backlog. Urgent support was delivered well and some staff said system transformation had helped to reduce delays. Skilled practice leads were highlighted as enabling this progress.

Data provided by the local authority in April 2025 showed that across Adult Social Care, 3,691 assessments had been started in the previous 12 months, with 3,565 completed and 3,454 authorised, indicating most people were receiving assessments in a timely manner. However, local authority waiting list data for April 2025 showed 923 people were waiting for a review, with a median wait of 241 days and a maximum wait of 1,594 days. This had improved by September 2025 slightly to 916 people waiting, and a median wait of 190 days with a maximum wait reduced to 1140 days. For the Complex Care team, in April 2025, 85 people were waiting for an assessment, with a median wait of 20 days and a maximum of 180 days, against a target of 28 days. By September 2025 this had fallen to 44 people waiting with minor changes to median and maximum waits. In April 2025 the short-term team had 135 people on the waiting list, with a median wait of 4 days and a maximum of 144 days, also against a 28-day target. By September 2025 these had fallen to 83 people on the list, with no change to median wait times and maximum waits had fallen to 116 days.

To support people during these waits, the local authority had implemented a 'Waiting Well' pack, which included practical guidance on preparing for assessments, links to services, and information for young carers. A sample letter sent to people indicated they should expect contact within 8 weeks and included accessibility options such as translation and easy read formats. A risk assessment matrix was also used to monitor and manage risks while people waited.

Assessment and care planning for unpaid carers, child's carers and child carers

Unpaid carers were well supported, heard, and understood. Carers described having an assigned worker or consistent contact with someone they trusted at the carers service. They said communication was easy and well maintained, with regular contact and follow-ups. All carers we spoke with confirmed they had received a carers assessment and had

been supported, for example with cleaning services, benefit advice, or emotional support. Carers gave examples of how they had found or been offered support through GP practices, libraries and hospitals. They described how each person they cared for received their own individual assessment and said staff often went above and beyond to support them. Data from the Survey of Adult Carers in England (2024-2025) found there was a similar proportion of carers (35.42%) satisfied with social services as the national average (36.83%).

Staff said carers' assessments were consistently delivered in a conversational, holistic, and person-centred way. They gave carers the time and space to share their experiences fully. Staff reported carers frequently said the most valuable part of the process was feeling listened to, rather than the paperwork itself. Staff said assessments covered the carer's own health and wellbeing separate to the needs of the person they cared for, which often led to referrals for services such as occupational therapy. Carers were routinely given information packs, and leaflets about emotional support. Staff said consistently that the aim was to identify how carers could be supported.

Staff also said they had strong links with the carers centre and carried out either combined or separate carers assessments. They identified carers early and included contingency planning in their support packages, with budgets available to ensure respite could be accessed directly when needed. Leaders reported staff were responsive to carers' needs, offering support including training, respite, and emotional wellbeing services.

Partners said carers assessments were completed by carer support workers based in GP practices, while more complex assessments were carried out by the local authority. Carers Ambassadors (people with lived experience of unpaid caring) said there was a group for family carers which supported them and hosted events. They said the carers organisation strongly advocated for carers and had helped influence practical changes, such as the introduction of a blue badge system. However, some feedback from partners suggested that not all carers felt listened to during assessments.

Data provided by the local authority showed they largely met targets for carers assessments. As of September 2025, the waiting list for carers assessments was low, with only 3 people waiting. The median wait time was 1 day, and the maximum wait was 36 days, with previous data showing similar figures.

For Parent Carers, referred via the Children's Multi-Agency Safeguarding Hub (MASH), there was no waiting list, and assessments were allocated immediately, with a maximum wait of 5 working days. Young Carers were also referred via MASH and allocated within a week, with assessments completed within 4 to 6 weeks depending on availability. Longer waits were attributed to difficulties in contacting families.

The Carers Strategy 2024–2027 outlined a strong framework for identifying and supporting carers, involving them in service delivery and evaluation. However, it noted improvements were needed in supporting the cared-for person and in referrals to the Young Carers Service from Adult Social Care, Mental Health, and Substance Misuse teams. The strategy highlighted 81% of mental health carers felt not at all or not very supported. The local authority's self-assessment reported that 83% of carers were happy with their assessments. Carers had direct access to support at GP surgeries, and direct payments were well used and appreciated. The local authority had high numbers of carers and was

identified as the sixth highest area nationally for carers providing over 50 hours of care per week. Despite this, the local authority had somewhat fewer carers not in employment because of their caring role (22.00%), than national average (26.70%) according to The Survey of Adult Carers (2024-2025).

The Survey of Adult Carers (2024-2025) data showed the local authority generally benchmarked well with carers outcomes. For example, the proportion of carers (54.89%) accessing a support group or someone to talk to in confidence, was much higher than the national average (32.98%). Also, somewhat more (91.67%) carers had enough time to care for other people they are responsible for than national average (87.23%).

Unpaid carers' needs were assessed well through person-centred and supportive approaches. Staff demonstrated a strong commitment to listening and providing support and carers consistently reported feeling supported and understood. The system included multiple access points and low waiting times.

Help for people to meet their non-eligible care and support needs

People with lower-level needs not eligible under the Care Act were generally well supported through a coordinated approach involving the VCSE and commissioned services. Staff and partners recognised the importance of bridging gaps in provision, and the community helpline played a key role in identifying and responding to these needs.

Staff said that while their primary focus was on assessing eligible needs under the Care Act, they recognised the importance of supporting people with lower-level needs. Partners confirmed support for non-eligible needs was being actively addressed. A local Voluntary, Community and Social Enterprise sector (VCSE) infrastructure organisation described their role as one of 'holding the space' between the local authority and the VCSE, providing information, guidance and support where non-eligible needs were identified. It was commissioned by the local authority to deliver the community helpline, which acted as part of the front door to adult social care assessment. When people contacted the helpline, a strengths-based conversation was conducted to determine eligibility. Where needs did not meet Care Act thresholds, people were signposted to appropriate services within the VCSE.

Processes showed this approach was embedded and effective. Metrics indicated around 84% of calls resulted in needs being met by the VCSE sector. This demonstrated an infrastructure for supporting people with lower-level needs, reducing pressure on statutory services while ensuring people still received timely and relevant support.

Eligibility decisions for care and support

The framework for eligibility decisions was fair, transparent, and consistently applied. People were generally well informed and involved in the process, and staff followed clear procedures aligned with national legislation. While some partners raised concerns about cost-based decisions in some cases, formal complaints and appeals were not evident.

People said they experienced person-centred and strength-based assessments, even in complex cases. One example showed a person with limited communication was supported through recognition of their strengths. Decisions were made transparently and with clear communication. People also reported feeling involved in discussions and planning, and

Adult Social Care Survey (2024-2025) data showed 68.16% of people did not pay privately or top up their care, which was somewhat better than the national average (64.39%) which together indicated equitable access to funded support.

Staff said they followed a clear and robust process for determining eligibility, aligned with the Care Act. They reported eligibility decisions were communicated clearly to people, including when people did not meet the criteria. Public information was provided through the 'Waiting Well' pack, which included references to relevant sections of the Care Act and regulations. It explained how eligibility was determined and offered guidance for carers.

Partners said while the framework was generally followed, advocacy staff had challenged decisions where cost appeared to override best interest considerations. Process data supported the view that eligibility decisions were managed consistently. In the 12 months to April 2025, the local authority received 15 formal complaints and 41 concerns. However, none of these related to eligibility determinations. The local authority confirmed that no appeals had been made regarding eligibility or funding decisions, and a robust complaints system was in place and accessible. Staff followed a structured triage and allocation process, and eligibility pathways were documented clearly in guidance shared across health and social care. The eligibility framework was also supported by a process document from Torbay and South Devon NHS Trust, who delivered social care services on behalf of the local authority, which outlined consistent processes and pathways for staff.

Financial assessment and charging policy for care and support

The charging framework was generally transparent and consistently applied, with staff committed to fairness and clear communication. Most people were assessed promptly, and accessible formats and advocacy support were available.

Staff said financial assessments were generally fair and aimed at ensuring people were not asked to pay more than they could afford. Although an online self-assessment tool had been trialled, it was discontinued due to reported complexity and as a result of feedback. Instead, staff preferred to visit people and explain the process in person, offering materials in accessible formats such as large print, Braille, easy read, and with translation support. Social workers could also refer people to advocacy services.

Staff said complaints were received, particularly about Personal Independence Payment (PIP) and Disability Living Allowance, although these were government-led benefits. Complaints also arose when people were discharged from hospital and expected care to be free for 4 weeks but were later charged, often due to confusion about when financial assessments had been completed and charges applied. Staff said they tried to resolve these issues by conducting retrospective assessments within 4 weeks and, where errors were due to social worker communication, they had written off some charges.

Staff also described their internal processes as responsive. Financial assessment requests were triaged and contact made within 48 hours, with assessments typically processed within 15 days. Referrals came from hospitals, intermediate care, enablement services, and directly from people. Staff used a contact grid within the case management system to track progress and prioritise new referrals.

Staff said people often found the distinction between health-funded crisis care and chargeable ongoing social care confusing. To address this, staff had made efforts to explain financial responsibilities clearly from the outset.

As of September 2025, the median waiting time for financial assessments was 18 days, with a maximum wait of 93 days, which showed a slight improvement from April 2025. The waiting list stood at 136 people, down from 184. However, for individuals lacking mental capacity, delays were significantly longer due to the need for Court of Protection or appointeeship processes, with a median wait of 222 days and a maximum of 819 days.

The local authority's charging policy provided clear guidance for staff, outlining how charges were calculated based on individual circumstances, including income, benefits, and living costs. The framework was aligned with the Care Act and included thresholds for financial eligibility and self-funding. While the Waiting Well pack offered public information on eligibility, it did not include details on financial assessments or support for people lacking capacity.

Provision of independent advocacy

Advocacy was available and well-integrated into the local authority's processes, with staff reporting timely access and clear referral pathways. However, partners highlighted inconsistencies in uptake and accessibility, particularly for those without professional support or awareness of their rights.

Staff said access to advocacy was good, with a clear referral process in place. Once allocated, people were said to receive advocacy quickly, including Care Act advocates and Independent Mental Capacity Advocates (IMCAs). Staff also reported they could discuss cases directly with the advocacy service, which supported timely and informed decision-making.

Partners offered a more mixed view. They said the local authority had an established and consistent relationship with the advocacy consortium, particularly in implementing the Care Act. Despite this, partners raised concerns about limited self-referrals, which created access barriers for people who were unaware of their rights or lacked professional support. Some also felt social care advocacy was underused, citing complaints and feedback suggesting people were not receiving advocacy as often as they should.

Supporting people to lead healthier lives

Score:

3 - Evidence shows a good standard

What people expect:

I can get information and advice about my health, care and support and how I can be as well as possible – physically, mentally and emotionally.

I am supported to plan ahead for important changes in my life that I can anticipate.

The local authority commitment:

We support people to manage their health and wellbeing so they can maximise their independence, choice and control, live healthier lives and where possible, reduce future needs for care and support.

Key findings for this quality statement

Arrangements to prevent, delay or reduce needs for care and support

The local authority demonstrated an effective approach to preventing, reducing, and delaying the need for formal care, through a combination of person-centred practice, integrated service delivery, and commissioning community-based support. People consistently described positive experiences of support that placed their wishes and wellbeing at the centre of decision-making. For example, one person, was supported to remain in sheltered housing, with a view to protect their mental health, with contingency planning and regular contact in place. Carers reported feeling well supported, with access to therapies, short breaks, and emergency respite. They appreciated being asked about future planning and felt encouraged to use available services when needed. The Adult Social Care Survey (ASCS) 2024-2025 data showed a somewhat higher proportion of unpaid carers (89.11%) found information and advice helpful, than the national average (85.22%).

Staff across services described a strong commitment to early intervention and holistic, strengths-based working. Mental health and learning disability teams shared examples of avoiding unnecessary care home admissions and enabling people with higher needs to live independently through reablement and technology. The transitions to adult services team supported young people to build independence, while sensory teams provided early advice, equipment, and peer support to reduce isolation and promote confidence. Staff also described the use of direct payments to enable personalised support and community access and highlighted the value of co-producing services with families and carers. Staff working in hospital discharge and reablement services described integrated, person-led approaches that prioritised returning people home with appropriate support, rather than referring to a care home. Services like a recently established reablement support facility

was helping to provide reablement and wrap around support and reduce the need for care home admissions. Although it was new it was making an impact on facilitating timely hospital discharges and avoiding care home admissions. Positively, the Adult Social Care Outcomes Framework (ASCOF) 2024-2025 found significantly more people (90.17%) who received short term support no longer need support than the national average (79.39%).

The commissioned carers service said early identification of unpaid carers and their needs was a priority for them and they co-produced strategies to prevent carer breakdown, including research with Healthwatch to identify early indicators of crisis. They also supported young adult carers with tailored services, including education and employment support. Initiatives like the 'MyBay' card provided practical benefits in the local community and helped carers feel recognised and valued. A welfare advice partner addressed financial hardship and debt which had been identified as key drivers of crisis, by helping people maximise income and access benefits. Local community organisations supported people with broader health and care needs, housing challenges, and experiences of social isolation. Leaders described a place-based approach linking housing, health, and employment, with specific initiatives for mental health, suicide prevention, and domestic abuse. Community-based services like the Community Helpline and Community Café and Help Hub improved access to information, social opportunities, and volunteering for people in a preventative way to support wellbeing.

The Better Care Fund Plan focused on reducing hospital admissions, improving patient flow, and promoting recovery at home. The Technology Enabled Care Service (TECS) supported independence through digital tools and remote monitoring and there were plans to expand and personalise the offer. The local authority acknowledged the need to better communicate the benefits of TECS to people. The Waiting Well initiative and Waiting Well pack provided guidance for people awaiting assessments, promoting choice and control. The Carers Strategy and Market Position Statements outlined a clear vision for early help, high-quality homecare, and community support. The Integrated Commissioning Team, working with the NHS and VCSE, intended services to be shaped collaboratively and aligned with public health goals.

The local authority also recognised the importance of addressing digital exclusion, addressing mental health issues, and the identification of unpaid carers. Plans included forming a digital inclusion group, improving carer identification systems, and enhancing community-based support for mental health, domestic abuse, and sexual violence. The local authority committed to co-producing strategies with victims and communities to ensure services were responsive and inclusive. The Joint Health and Wellbeing Strategy and Devon 5-Year Joint Forward Plan set out long-term ambitions to improve outcomes through digital transformation, workforce development and population-based care. These included shared digital records, reduced workforce vacancies, improved employment rates for people with long-term conditions, and enhanced access to same-day services and community-based support.

Provision and impact of intermediate care and reablement services

People experienced reablement and intermediate care that prioritised safety, wellbeing, and personal preferences. More people accessed reablement in the local authority than

national average, however more people returned to care or hospital settings after discharge.

We saw an example where a person was supported through a full pathway, from hospital to intermediate care and nursing home, with clear communication and a trial return home. Another person had avoided eviction through coordinated support from housing officers and enabling providers, showing how reablement extended beyond recovery from hospital to protect mental health and stability.

Data from the Adult Social Care Outcomes Framework (ASCOF/SALT) found a much greater proportion of people (7.40%) who were 65 years and over, received reablement/rehabilitation services after discharge from hospital, than the national average (3.00%). However, it also found the proportion of people 65 years and over who were still at home 91 days after discharge from hospital into reablement/rehab (73.26%) was lower than the national average (83.70%). Leaders said this was partly explained by more people being provided with reablement, due to the integrated nature of the service. However, it may also reflect a higher proportion of people entering long term care, rather than going home with support.

Staff and leaders said there was a strong commitment to short-term, strengths-based reablement focused on recovery and independence. Staff said reablement helped people regain confidence and reduce dependency, although they noted limited capacity and a perception reablement was mainly linked to hospital discharge rather than available more broadly in the community. The new local reablement facility was widely praised for its step-up and step-down model, use of technology and accessible location, helping people return home more quickly and avoid unnecessary long-term care placements.

Staff also described the benefits of integrated working with NHS staff which they said enabled rapid responses and improved outcomes, especially in crisis and end-of-life care. We heard examples where care packages and equipment had been arranged within hours. Commissioning staff reported improvements particularly over the last year in provider flexibility, with more agencies offering enabling care, enhancing support and crisis response.

Partners said people they supported had spoken positively about reablement and intermediate care. They had recognised the role of dedicated carers teams and Voluntary Community and Social Enterprise sector (VCSE) contracts in improving transitions and continuity of care.

The local authority reported 78.8% of people regained full independence after reablement, and 75% of those admitted to the rehabilitation centre had returned home without needing ongoing support. Strategic investments such as the new reablement facility, technology enabled care, and community-based hubs, demonstrated a commitment to prevention and recovery. The local authority acknowledged inconsistencies between hospital and community-based reablement and identified this as a priority in its commissioning plans. Other initiatives, including the drug and alcohol service had complemented reablement efforts by addressing wider determinants of health (other factors that can affect a person's health, such as social relationships and employment) and housing. Supported living and extra care housing had also contributed to enabling independence.

Access to equipment and home adaptations

People were generally able to access equipment and minor home adaptations through the local authority, with urgent needs prioritised and standard items delivered promptly. Staff worked in integrated teams to ensure responsive and person-centred care, and partners supported access through VCSE arrangements.

People described how replacement beds, rails, and specialist mattresses were provided, contributing to safety, comfort, and reduced risk of harm. For example, a routine maintenance check had identified unsuitable equipment, prompting an occupational therapy review. People felt their physical safety was prioritised, and equipment was selected appropriately.

Staff said access to equipment was prioritised based on urgency. The Principal Occupational Therapist explained rapid response equipment could be delivered within 2 hours, with next-day delivery available for standard catalogue items. Urgent cases were triaged daily, with assessments carried out within 72 hours, while non-urgent cases had a maximum wait time of 12 weeks. Staff noted that co-location with health professionals, including occupational therapists and nurses, had significantly improved responsiveness and enabled more person-centred care. They also described how people were given clear self-purchase guidance, including specifications, costs, and demonstration videos, which empowered them to make informed choices and promoted dignity. Where Disabled Facilities Grants (DFGs) were used, staff recorded outcome measures such as confidence ratings before and after adaptations.

Partners said carers had benefited from equipment and adaptations that supported their caring role, and Voluntary Community and Social Enterprise sector (VCSE) contracts had helped improve access and continuity of care. However, they also noted rural areas faced challenges in sourcing equipment and care packages due to limited local provision, which could exacerbate isolation and unmet needs.

Processes showed the local authority had a transparent approach to equipment and minor adaptations. According to data provided by the local authority dated April 2025, the waiting list for equipment stood at 103 items, with an average wait time of 7 days and a maximum of 434 days. For minor adaptations, the waiting list included 45 items. Service level agreements included rapid response within 2 hours, next-day delivery, and standard delivery within 3 to 5 days. A triage system was in place to manage high referral volumes, with urgent cases assessed within 4 to 6 weeks and routine needs within 6 to 12 weeks. The local authority also provided holistic, strengths-based assessments aimed at supporting independence in all aspects of daily life, including physical, psychological, social, and environmental factors.

Provision of accessible information and advice

People were generally able to access information about their rights and ways to support their wellbeing. They had been informed about waiting times and advised to contact services if their circumstances changed, which helped ensure timely and risk-based access to services. Carers felt reassured by Waiting Well materials, which explained assessment processes, eligibility, and financial responsibilities. These resources helped people understand their rights and what to expect, promoting transparency and trust. Data

from the Adult Social Care Survey (2024-2025) found 69.33% of people who used services found it easy to find information about support which was the same as the national average (67.12%). Data from the Survey of Adult Carers in England (SACE) (2024-2025) showed a somewhat higher proportion (66.02%) of carers found it easy to access information and advice than the national average (59.06%).

Staff said referrals came through the service front door, where people were signposted to appropriate services such as Voluntary Community and Social Enterprise (VCSE) organisations or local community hubs. Partners said the community helpline had developed during the COVID-19 pandemic intended to provide a 'one call fits all' model, making it easier for people to access the right services quickly. They said information was available on both the local authority and NHS websites but acknowledged that navigating these could be challenging for some. The community hubs, such as the one at a local library, allowed people to request assessments in person.

The local authority reported that people accessed information, guidance, and support through their community offer, which included an integrated contact centre and an emergency duty service. Over the past year, they had supported 1,912 people with advice and received 15,368 contacts, of which 13,456 progressed to assessments or reviews. Their improvement project aimed to reduce formal care assessments by strengthening partnerships with the VCSE. They provided a Disability Information Service offering free, confidential advice on self-care and independent living, including a hospital drop-in. Accessibility was enhanced through tools like text-to-speech, translation, picture dictionaries, and screen magnification.

People waiting for assessments received an online information pack explaining the process and answering frequently asked questions. The Carers Service webpage and newsletter offered clear, navigable resources, including information on mental health, dementia, benefits, and events. The Carers Strategy linked to various policies and strategies and was hosted on the Torbay and South Devon NHS Trust website. The "One Devon" website also provided comprehensive resources for carers and young carers, including support on finances, training, and wellbeing. The Waiting Well pack included information for people on how to wait well and prepare for assessments. It referred to young carers and contained links and good information on how to meet needs and access services.

Direct payments

Direct payments experiences were mixed. There were complicated systems and fewer people than national averages utilising direct payments, although work was underway to address these challenges which were well understood by the local authority.

People reported positive experiences with direct payments. They described how they had enabled participation in carers' activities, supported independence through equipment and provided support such as respite and outdoor activities. People and carers appreciated the flexibility, with examples including holidays supported by additional carers, gym memberships and social outings. We saw examples of people managing their own direct payments to maintain choice and control in their lives and examples where direct payments allowed greater personalisation and continuity of care workers. However, Adult

Social Care Outcomes Framework/Short and Long Term (2024-2025) data showed fewer people using services (19.33%) received direct payments than the national average (25.48%) and the proportion of carers receiving direct payments was 94.12%. Most carers we spoke with had received and used direct payments, either as one-off or regular payments.

Staff acknowledged the benefits of direct payments but also highlighted challenges. These included inconsistent pay rates, variable quality among personal assistants (PAs) and people reporting difficulties with holding employer responsibilities. To address these issues, the local authority had begun to build a vetted pool of PAs and revised contracts. A company was available to help manage direct payments and PA employment, and staff knew where to seek advice. Staff said that while they could set up direct payments, the process was not straightforward. Leaders recognised the need for development in this area and were working to improve the process, infrastructure and guidance. Partners agreed work was underway to review the direct payments process and to understand any barriers to their uptake.

In the meantime, the local authority had revised policies, and updated documentation. They published support materials and had engaged with stakeholders, direct payments recipients, and health partners. Draft guidance documents outlined responsibilities, financial review processes, and administrative terms. Employment resources, including checklists and contract templates, were provided to help direct payments recipients manage their responsibilities as employers. A handbook had been developed to support relationships between direct payments recipients and PAs, covering employment policies, training, health and safety, and equal opportunities.

Equity in experience and outcomes

Score:

2 - Evidence shows some shortfalls

What people expect:

I have care and support that enables me to live as I want to, seeing me as a unique person with skills, strengths and goals.

The local authority commitment:

We actively seek out and listen to information about people who are most likely to experience inequality in experience or outcomes. We tailor the care, support and treatment in response to this.

Key findings for this quality statement

Understanding and reducing barriers to care and support and reducing inequalities

The local authority made considerable efforts to remove barriers to inclusion and understand the needs of its population, and this was reflected in the experiences and perspectives shared by people, staff, and partners.

People described a noticeable shift in how the local authority engaged with them over recent years. Ambassadors (people with lived experience of a social care need) took on active roles in holding both the council and NHS to account, offering ideas and feedback that have led to tangible changes. One example was the installation of wheelchair access at a local beach, which followed a walkaround with staff to assess accessibility needs. This demonstrated a meaningful commitment to co-production and showed that the local authority leaders were willing to listen and act on lived experience.

There was also recognition from people that leadership attitudes had evolved. The involvement of the council leader had led to improved relationships and responsiveness. People said their input was being taken seriously, and staff had undergone training, led by ambassadors to better communicate and engage with them. Practical improvements, such as the introduction of free public toilet access cards for disabled people, were seen as direct outcomes of this improved collaboration.

Staff echoed many of these sentiments, showing a deep awareness of the barriers faced by different groups and a proactive approach to addressing them. They highlighted that many carers, particularly younger ones, did not identify as carers and therefore missed out on support. To counter this, staff promoted education and outreach, coded carers on GP registers, ran carers groups in community venues, and engaged with the public at events. These efforts were aimed at ensuring equitable access to support, even for those not yet known to the system.

Digital exclusion was another issue raised by staff, particularly affecting older residents who struggled with online forms and websites. A reliance on digital systems was seen as creating inequity in access and staff recognised the need for more accessible service pathways. They also described co-production as central to their work, with ambassadors and community representatives influencing training and service design.

Staff said there were some improvements to make, including improving referral rates to advocacy services, creating clarity around direct payments, and improvements to housing and dual diagnosis services. They said people with both mental health and substance misuse needs often fell between services, and housing systems were difficult to navigate, with strict rules and consent processes that disadvantaged adults with care and support needs.

Partners said the local authority had a strong understanding of its population, supported by the Joint Strategic Needs Assessment (JSNA). The JSNA identified key challenges such as an ageing population, deprivation, teenage pregnancy, self-harm, and a high prevalence of learning disabilities and neurodiversity. Inequalities in life expectancy and healthy life years were also identified, and partners said the local authority worked with Voluntary Community and Social Enterprise sector (VCSE) organisations to address these issues and ensure seldom-heard voices were represented.

Partners said the local authority prioritised housing, employment, dementia, and healthy ageing and engaged regularly with underrepresented communities. Engagement had been extended into deprived areas, with joint initiatives such as additional primary care services and VCSE support for frequent emergency department attenders. They said co-production was embedded alongside Healthwatch and the VCSE Assembly, and the local authority had a long-standing commitment to engagement, including through its 10-year plan.

However, partners also said transition planning for young people was not always proactive, and some had missed out on support. Employment was highlighted as a persistent issue for people with learning disabilities, with concerns the local authority was aware but not taking sufficient action to address it. Digital exclusion and communication barriers were seen as persistent issues, particularly for those without internet access or with specific communication needs.

Partners also noted positive efforts to reach underrepresented carers, including men and ethnic minorities, through activities and ambassador roles. Activities such as fishing and football were commissioned by the local authority and had good attendance. A Carer Ambassador was being recruited from the Chinese community, and further engagement with male carers was planned. Some partners said the local authority still had limited data to fully identify and address inequalities.

The local authority's policies and processes supported many of these efforts. The Inclusion Plan, Carers Strategy, and Health and Wellbeing Strategy outlined commitments to equity, co-production, and data-informed service design. The Trauma-Informed Practice Project and Equality Diversity and Inclusion (EDI) Ambassadors supported inclusive practice and representation. The Homelessness and Rough Sleeping Strategy identified hidden homelessness.

The local authority responded to national and global concerns about racial inequality by conducting a Racism Review. This led to the creation of a dedicated inclusion role and a

set of recommendations aimed at improving ethnic diversity data, workforce representation, and trust within communities. Internally, the local authority had implemented several initiatives to support inclusion. It created a Healthy Ageing Partnership and developed a Supported Housing Pathway for young adults. The Carers Strategy 2024-2027 and Young Carers' Under 25 Strategy targeted underrepresented groups, including ethnic minorities and refugees, and demonstrated good partnership working.

The local authority had made progress in removing barriers to inclusion and understanding its population's needs. People, staff, and partners all described positive changes, particularly in leadership engagement, co-production, and practical service improvements.

Inclusion and accessibility arrangements

The local authority demonstrated a proactive and increasingly embedded approach to inclusion and accessibility. People were empowered to shape services; staff had adapted communication and service design to meet diverse needs and partners recognised engagement efforts. Formal policies and demographic data also supported inclusive planning.

People said they had been meaningfully involved in improving accessibility and shaping services. Learning Disability (LD) Ambassadors had created a training board game based on real-life barriers, which led to changes, such as adjusting appointment times to accommodate bus pass usage. Carers said there was clearer communication because of initiatives such as Carers Rights Day and felt their voices were heard by leadership, particularly the Director of Adult Social Services (DASS). Carers had contributed to editorial boards, legal training, and service evaluation, helping to make rights more visible and accessible. Ambassadors from underrepresented groups had also participated in large-scale events and policy reviews, helping to identify unmet needs and influence service design.

Staff said they had implemented a range of initiatives to improve accessibility. LD and Autism Ambassadors had helped redesign the adult social care website, leading to the addition of an accessibility toolbar and improved navigation. Interpreter services, including British Sign Language (BSL), had been available out of hours, supporting emergency responses and ensuring communication was inclusive. The Sensory Team worked with people with learning disabilities, dementia, and dual sensory loss, adapting communication methods using BSL, Braille, lip reading, and assistive technology. Staff also supported carers and families to better understand sensory loss, fostering empathy and improving care. The community hub had been strategically located near public transport links to improve physical accessibility for residents with mobility challenges.

Partners said they had seen improvements in outreach and engagement, particularly with underrepresented communities. The local authority had responded to gaps in engagement by working with the Polish school and recruiting ambassadors from ethnic minority groups, including the Chinese community. Carers services had been promoted at Pride events and tailored to male carers through partnerships with men's clubs, using activities such as fishing and football to encourage participation.

However, partners also identified persistent barriers. Digital exclusion continued to be a significant barrier, especially for people who are deaf or not online, with no formal alternatives in place. Some partners said the local authority lacked sufficient data to fully identify where barriers and inequalities existed. Others said that while feedback was often collected, communication about resulting actions was inconsistent.

The local authority kept a collection of easy read documents covering key adult social care topics, and interpreter services were available in multiple formats, face-to-face, remote, and by telephone. Mapping tools had been used to track demographic changes, such as the rise in speakers of Bulgarian, Romanian, Hungarian, and Portuguese languages, informing accessibility improvements. Equality impact assessments were used to identify and mitigate adverse impacts on residents with protected characteristics. Data from the Census had been used to identify areas with high levels of non-English-speaking households. The Inclusion Partnership Board had brought together people with lived experience from LGBTQ+, autistic, and ethnic minority communities to act as critical friends, review policies, and deliver awareness training.

Theme 2: Providing support

This theme includes these quality statements:

- Care provision, integration and continuity
- Partnerships and communities

We may not always review all quality statements during every assessment.

Care provision, integration and continuity

Score:

3 - Evidence shows a good standard

What people expect:

I have care and support that is co-ordinated, and everyone works well together and with me.

The local authority commitment:

We understand the diverse health and care needs of people and our local communities, so care is joined-up, flexible and supports choice and continuity.

Key findings for this quality statement

Understanding local needs for care and support

The local authority worked collaboratively with local people, stakeholders, and partners, and used a wide range of data, policies, and strategic planning to understand and respond to the local needs for care and support. People described being listened to and having their preferences respected, such as one person who was supported to return home despite having high levels of need. Carers spoke positively about the range of support available, including access to exercise classes, day trips, and education sessions, which suggested the local authority was responsive to the needs of unpaid carers. The local authority was actively engaging with people, staff, and partners, and was using robust data, policies, and procedures to understand and respond to care and support needs. There was a clear commitment to person-centred care, creative problem-solving, and service improvement. However, there were still some gaps in provision for people with complex or higher-level needs, mental health issues, and housing.

Staff said they considered where people want to live, including proximity to family, cultural needs, and personal interests. They described efforts to source care out of area when necessary, including contacting other local authorities and conducting their own due diligence. However, they acknowledged challenges in finding appropriate care for people with higher levels of certain needs, such as those with mental health issues, learning

disabilities, or substance misuse problems. Data provided at the time of the assessment by the local authority, showed 10.7% of all long-term placements were out of area, and just 8.2% of those with mental health needs were placed into Nursing or Residential care out of area, with most remaining within Devon to maintain proximity to support networks.

Partners and leaders in the local authority said hospital discharge performance had been very strong, with timely discharge rates among the best nationally and the lowest length of stay in the region. However, it was acknowledged the pressure to discharge quickly had led to too many people entering long-term care, and strengthening reablement and independence-focused services was identified as a key priority. This aligned with staff feedback who were working to reduce reliance on spot purchasing and increase 'home first' approaches.

Partners described creative approaches to replacement care, such as working with a short break provider and with hotels to offer discounted stays for unpaid carers. Partners also highlighted the lack of a specialist learning disability service within adult social care, which had led to a need to bridge gaps in provision. This was being addressed through a service which integrated care planning for people with learning disabilities and their carers, particularly as the carer population ages. The service also supported carers who themselves had learning disabilities.

Housing was an area of concern. Staff and partners said finding suitable housing, particularly for people with learning disabilities could be a challenge. However, partners acknowledged that the local authority was aware of this and had plans to develop new housing. The local authority was commissioning 171 new units of extra care accommodation across 2 multi-generational housing developments, which will support up to 200 people. These will complement the existing 108 units of rented and shared ownership accommodation, with support provided across all 4 schemes.

The local authority's policies and procedures further demonstrated a strategic approach to understanding and meeting care needs. They reported having robust contracts with home care providers and strong relationships with supported living and care home providers through contract management and quality assurance processes. Providers had named contract managers or quality assurance officers, and they received few contract queries or requests for rate uplifts.

Commissioning strategies were informed by the Joint Strategic Needs Assessment (JSNA), which highlighted key priorities such as supporting people over 65 with complex needs and dementia, people of working age with severe and enduring mental illness, and people with learning disabilities and autism. The JSNA showed the area had higher levels of need than the national average, particularly among the 18–64 age group, and higher rates of long-term support through residential care.

The JSNA also identified significant health inequalities, including high rates of mental illness, self-harm, suicide, and preventable deaths, particularly in deprived areas. These findings were reflected in the local authority's market position statement, which outlined plans to reduce reliance on residential care, increase supported living options, and promote independence through early support, equipment, and digital technology. The local authority aimed to avoid placing working-age adults in residential care and to delay older

people's entry into care through better home care alternatives, reablement and extra care housing.

For people with learning disabilities and autism, the local authority planned to improve access to employment and training, commission outcome-based day opportunities, and ensure more skilled providers were available. Positive Behaviour Support and Crisis Planning training were being commissioned to support workforce development. Similar plans applied to people with mental health needs, with a focus on reducing residential care use and expanding housing choices.

Market shaping and commissioning to meet local need

Positively, the Adult Social Care Survey (ASCS) (2024-2025) found 77.04% of people who used services felt they had choice over services, which was somewhat better than the national average (70.28%). The Survey of Adult Carers in England (SACE) (2024-2025) found a similar (18.05%) proportion of unpaid carers accessed support or services allowing them to take a break from caring for greater than 24hrs, to the national average (16.14%); 17.29% of carers accessed support or services allowing them to take a break from caring for 1-24hrs which was similar to the national average (21.73%) and 13.53% of carers accessed support or services allowing them to take a break from caring at short notice or in an emergency, which again was similar to the national average (12.08%).

The local authority had explained its strategic intent through a range of planning documents and frameworks. The Commissioning Plan outlined priorities and a 2-year work programme aligned with the Adult Social Care Transformation Plan, with timeframes added as each programme begins. This approach allowed accountability and progress tracking. The Big Plan co-produced with people with learning disabilities, had influenced wider commissioning across health, housing, and social care, and the co-produced Autism Strategy was at the time of our assessment, in the community engagement phase, demonstrating inclusive planning.

The Adult Social Care Commissioning Blueprint set out ambitions to expand supported living and extra care housing, develop outcome-based day opportunities for people with learning disabilities, and support young people transitioning to independence. For people with mental health needs, the local authority aimed to reduce reliance on residential care and commission more supported living, aligned with rehabilitation and recovery models. For people with dementia, the plan included reducing residential care use by 200 beds, increasing nursing care beds for complex dementia by the same number, and commissioning specialist dementia personal assistants to support the use of personal budgets and direct payments. Training in advanced dementia and cognitive stimulation therapy for carers, was also planned.

The Strategic Needs Assessment underpinned these commissioning decisions, using a wide range of data sources to identify demographic pressures, service gaps, and health inequalities. The Draft Market Position Statement 2025 built on previous strategies and included plans for refreshed day activities frameworks, an updated direct payments policy, and capital projects to deliver extra care homes, including a new day centre.

The Qualitative Capacity Plan 2024–2025 acknowledged current limitations in supported living due to housing supply and capital constraints and outlined a 2-year redesign of the

commissioned market to improve affordability and reduce high-cost spot purchasing. The 10-year Adult Social Care Commissioning Blueprint provided a long-term vision for market transformation, supported by co-located commissioning teams from the local authority and NHS, enabling high levels of collaboration.

The Integrated Adult Social Care Commissioning Plan 2025–2027 detailed commissioning intentions across reablement, residential care, and domiciliary care, with new specifications for specialist, standard, and reablement home care. It also identified commissioning concerns with plans and timescales to address them. The Better Care Fund Narrative Plan highlighted support for hospital discharge and sustainable community-based care, and a shift from time-and-task models to independence-focused reablement, using technology.

The local authority provided further detail on current supported living provision following our assessment. There were 22 supported living providers delivering 333 units of accommodation and there were 108 units of extra care housing available across 2 schemes. The supported living sector was predominantly used for people with learning disabilities, with some provision for those with severe and enduring mental illness. Extra care housing was currently used 80% for older people and 20% working-age adults with disabilities or mental health needs. The local authority was actively expanding extra care provision. While there were some gaps in specialist provision, particularly in reablement, dementia care, supported living, and services for people with complex or higher-level needs, the local authority was actively addressing these through strategic commissioning and market shaping.

Ensuring sufficient capacity in local services to meet demand

The local authority had a responsive and generally sufficient care system, supported by strategic planning, strong provider relationships, and active market shaping. While most people receive timely and appropriate care, there are clear pressure points, particularly in supported living, mental health, and services for people with complex and higher-level needs. The local authority was aware of these challenges and had robust plans in place to address them which were taking effect at the time of our assessment.

Staff said care packages were generally arranged quickly and efficiently, with only a small number of people waiting for support at any given time. Staff described a clear process for matching referrals to providers, supported by systems and weekly market intelligence updates. However, they acknowledged supported living placements were more difficult to source, particularly for people under 65, due to limited options and some provider suspensions. Mental health and supported living were consistently highlighted as areas with insufficient capacity. Staff also noted that while intermediate care facilities were available, hospital discharge pathways sometimes defaulted to bed-based care. Despite these challenges, staff described strong collaboration across teams, including occupational therapy and quality assurance, and gave examples of responsive service development, such as the creation of a young person's service.

Partners echoed many of these observations. They said the care market had sufficient overall capacity, but pointed to gaps in specialist provision, particularly in reablement, dementia care, supported living, and services for people with complex learning disabilities, autism, and mental health needs. Mental health services were described as under-

resourced, and there were concerns about insufficient services for adults with learning disabilities and autism.

Policy and procedural evidence provided a more comprehensive view of capacity planning. Data showed short average waiting times for homecare (5.5 days), residential care (6.5 days), nursing care (7 days), and supported living (68 days), with the latter being the most pressured area. Out-of-area placements were relatively low, with most remaining within the South West, and driven by proximity to family, specific needs, or personal choice.

The local authority was actively reshaping the market through its Integrated Adult Social Care Commissioning Plan, Capacity Plans, and Market Position Statements. These included expanding extra care housing, reducing reliance on residential care, and investing in dementia-capable services. A planned reduction of 200 low-capacity residential beds was planned to be offset by modernisation and enhancement of existing services. Reablement services were being scaled up, with new contracts launching in October 2025, and a move toward a trusted assessor model. The local authority was also improving support for carers through short-term care at home and block-purchased short breaks, and exploring technology and artificial intelligence solutions to improve access to advice and information.

The Qualitative Capacity Plan outlined a shift toward housing-based models of care and a strength-based approach. The local authority expected demand for long-term home care to decrease beyond 2025 because of this redesign. It had successfully matched home care supply with demand, despite market pressures, and continued to use Fair Cost of Care funding to support sustainability and close fee gaps.

Ensuring quality of local services

The local authority was adequately ensuring services were high quality. People's feedback suggested the quality of care was high and consistent. One person we spoke with described proactive involvement in care decisions and consistent support from social workers, even during multiple transitions between services and accommodation. Another said their supported living arrangement fully met their needs, enabling them to live comfortably despite higher levels of need. These examples reflected positive outcomes and suggested the system delivered person-centred, high-quality care.

Staff and partners, however, acknowledged variability in service quality. Staff said providers were beginning to adapt by diversifying and expanding their offers. Staff described strong multidisciplinary working and triage processes that helped reduce reliance on long-term care. Examples were given of successful transitions with reductions in support levels through person-centred planning.

Monitoring of provider quality was described as ongoing and data-driven. Staff reported using case management systems, care documentation, falls reports, and a risk tool that tracked ambulance calls, 111 calls, and accident and emergency department attendances. Dashboards were used to identify safeguarding themes, and low levels of provider reporting triggered monitoring and follow-up. These mechanisms suggest the local authority took a proactive approach to identifying and responding to risks. Partners highlighted the importance of joint commissioning arrangements and described monthly meetings which involved the local authority, Integrated Care Board, and Torbay and South

Devon NHS Foundation Trust to discuss market conditions and quality. This collaborative structure supported a shared oversight.

Policy and procedural evidence reinforced the presence of robust quality assurance arrangements. The local authority reported 88% of care homes and 81.8% of community services were rated good or outstanding. They had a Provider Quality Support Policy and a co-located Integrated Commissioning Team that included clinicians who contributed to quality monitoring, training, and gave advice. Regular provider forums and newsletters were used to share best practice, market risks, and funding opportunities. Providers had regular contact with contract or quality assurance officers.

The local authority had taken action where concerns had arisen. Three embargoes were in place, 1 for nursing care due to safeguarding concerns and 2 for residential care due to safety and quality issues. One residential home had its suspension lifted after improvement, and another was working to a quality improvement plan. No home care providers handed back contracts, and only 1 supported living provider did so due to internal financial concerns. Three residential homes handed back contracts, 2 due to changes in care models and one for financial reasons. In 1 case, a provider with significant quality and financial issues was supported through the Provider Quality Support Protocol, and the provider reported a positive experience with the Quality Assurance Team.

Digital transformation was also supporting quality monitoring. The Integrated Care System Digital Strategy included plans for shared records and a unified infrastructure. Achievements included the launch of the One Devon Dataset and the Devon and Cornwall Care Record. These tools were expected to enhance operational oversight.

Ensuring local services are sustainable

Services were sustainable in the local authority. Adult Social Care Workforce Estimates 2025-2026 showed a positive picture of workforce stability with a somewhat better performance in adult social care job vacancies with 4.70% of adult social care job vacancies, compared to the national average 8.06%. Staff turnover rates (0.27) were similar to national average (0.25) as were staff sickness rates (5.23) compared to national average (5.33).

Staff said there were some staffing shortages, however, they described resilience and pride in their teams, with strong peer support and there was positive feedback from carers and people. Partners said there were sometimes delays in allocating community social workers post hospital discharge. These delays had led to extended stays in short-term placements.

From a policy and strategic perspective, the local authority had recognised sustainability as a pressure and were actively working to improve it. They were using Market Sustainability and Improvement Funding to uplift provider fees across all sectors, aiming to support recruitment, retention, and quality delivery. Fee rates were expected to increase in 2024–2025, with the intention to stabilise the provider market.

The local authority had outlined plans to expand capacity through apprenticeships and internships, publish practice quality standards, and enhance the role of technology in reducing impacts of workload. Additionally, they were participating in regional initiatives to

support international recruitment, including digital tools and platforms to connect international recruits with employment opportunities.

The Education and Development Strategy set out a 5-year plan for workforce development across the Integrated Care System, including adult social care. This strategy aimed to address recruitment challenges and build a skilled, resilient workforce. A separate workforce development plan was also being created to support the integration of commissioning functions. The local authority was investing in digital transformation to support sustainability. This included shared records, unified infrastructure, and a population health management process.

Partnerships and communities

Score:

3 - Evidence shows a good standard

What people expect:

I have care and support that is coordinated, and everyone works well together and with me.

The local authority commitment:

We understand our duty to collaborate and work in partnership, so our services work seamlessly for people. We share information and learning with partners and collaborate for improvement.

Key findings for this quality statement

Partnership working to deliver shared local and national objectives

Partnership arrangements had been effective in promoting integrated, person-centred care. The approach demonstrated a strong commitment to co-production, prevention, and integrated care.

People said the small size of the local authority area had helped foster strong relationships and a sense of belonging, which people felt had contributed to more responsive and collaborative care. Feedback from people suggested services had been welcoming and had felt joined-up and easy to navigate. Partners, staff and leaders said adult social care had been completely integrated with health since 2005 under a Section 75 agreement, and broadly agreed this had enabled more coordinated care, improved outcomes, and allowed a better use of shared resources. Partners said progress on Integrated Neighbourhood Teams had continued, with a strong focus on prevention, reablement, and shifting care from hospital to community settings and dementia and healthy ageing had been identified as priorities for future delivery.

Partners had played an active role in reshaping the Learning Disability Partnership Board and establishing the Autism Board, both of which had been designed to amplify the voices of people with lived experience. Autism Ambassadors had helped set agendas and hold board members to account, which partners described as an example of good practice. Partners also told us about forums such as the Torbay Inclusion Partnership and the Special Educational Needs and Disabilities Employment Forum, which had included people with lived experience and supported inclusive decision-making. While partners had praised strong internal relationships and co-location of teams, some expressed concern about the future of Voluntary Community and Social Enterprise sector (VCSE) infrastructure funding.

Staff said they worked well in multidisciplinary teams and integration had strengthened links between services and improved understanding across sectors. The movement of occupational therapists between health and social care was seen as particularly beneficial. Staff described the joint workplace culture as inclusive, reflective and welcoming. Newer staff felt it was a supportive environment.

Strategic partnerships between education, adult social care and health partners had supported joined-up delivery and inclusive practice. Staff said they valued opportunities for career-specific and postgraduate training and had appreciated the local authority's commitment to wellbeing. Staff also highlighted improvements in hospital discharge through the home-first approach, supported by a well-established discharge-to-assess model. They said efforts to reduce paperwork through technology and artificial intelligence were welcomed.

Arrangements to support effective partnership working

Arrangements were in place and working well to support effective partnership working. Partners said relationships with the local authority had been strong and improving, they said the Deprivation of Liberty Safeguards (DoLS) team had maintained collaborative relationships with advocates and responded promptly to concerns. Healthwatch described proactive engagement from the Director of Adult Social Services, who had ensured their involvement in agenda setting and strategic planning. They said the local authority approached them first when launching new initiatives, such as the adult social care strategy and worked with them to engage local communities. Other partners also highlighted the effectiveness of joint governance arrangements and co-located commissioning teams, which had supported high levels of collaboration across NHS strategies and improved management of the Better Care Fund.

Staff said the Autism Partnership Board was an example of effective partnership working, where agendas had been co-produced with Autism Ambassadors, council representatives, and health partners. Staff said the arrangements to support partnership working were well-established. They highlighted some operational challenges including issues around equipment, documenting people's care across multiple electronic systems and occasionally demand exceeding capacity. Availability of housing and the local rehousing process also posed difficulties. Despite these challenges, staff demonstrated resilience in the multi-disciplinary team environment, maintaining open communication, managing expectations, and welcoming more consistent contact routes.

Leaders described the Integrated Care Organisation model as deeply embedded, with co-located teams and shared risks. They said it had often been impossible to distinguish between health and social care staff, reflecting the depth of integration. Joint funding protocols introduced after a peer review in 2024 had helped to clarify financial responsibilities and reduce inappropriate assessments in complex or higher-level of need cases. Innovation in housing-with-care provision also demonstrated effective partnership working. Staff said the design of new extra care housing schemes followed accessibility standards and would offer support 24 hours a day.

Staff described excellent partnership working with external stakeholders, including the Police for Multi Agency Risk Assessment Conference and domestic abuse cases, health colleagues, GPs, and Voluntary Community and Social Enterprise (VCSE) providers. They

said there had been a good flow of information and risk plans were arranged quickly to keep people safe. Leaders described commissioning arrangements as 3 pillars: the NHS trust's market management team, the local authority's strategic commissioning team, alongside the NHS Devon Integrated Care Board (ICB). This structure had supported improved relationships with primary care partners and provided a better oversight of adult social care.

The local authority reported having an integrated health and social care offer in place for 20 years, with delivery delegated to the Torbay and South Devon NHS Foundation Trust, while retaining strategic commissioning responsibilities. They had been part of the One Devon Partnership, formed with other local authorities and health partners, with shared aims to promote health and wellbeing. This had been underpinned by the Devon Plan, the Joint Forward Plan, and the Integrated Care Strategy. The Provider Quality Support Protocol provided a multi-disciplinary approach to quality assurance and service improvement, involving strategic commissioners, safeguarding teams, regulators, and providers.

The Better Care Fund arrangements had been governed through local partnerships, with shared responsibility for planning, review, and capacity management. These arrangements had helped address urgent care and system flow challenges, particularly around delayed discharges.

Impact of partnership working

People experienced coordinated and consistent support across settings, with care personalised to meet their individual needs. Records showed multi-agency input from enabling providers, housing teams, and welfare support alongside social care, had helped people achieve positive outcomes and reflected a system working holistically to support people.

Staff said integrated working with the NHS had been a major strength, enabling faster interventions, shared learning, and innovation. Co-location with health colleagues had supported quick referrals, joint safeguarding meetings, and multi-agency responses mobilised quickly. Staff said they valued strong Voluntary Community and Social Enterprise (VCSE) links and described coordinated support for carers in hospital wards and GP practices. Staff said they worked closely with discharge teams and occupational therapists to create bespoke packages of care, helping people return home safely and reducing readmissions. Access to shared systems had improved visibility and coordination, allowing staff to address social care needs even in health-led cases.

Leaders said tackling deprivation was a local partnership priority, with joint leadership aligning vision and resources to keep people well. They described finances between the NHS and local authority as a single budget, enabling integrated delivery and reducing handoffs. Leaders also highlighted broader structures such as the Pride of Place board and regeneration partnerships, which had brought together health, education, police, and business sectors to deliver wider social and economic benefits.

Partners said integration had improved health outcomes, including reduced urgent care admissions and shorter hospital stays. They praised the Section 75 agreement for enabling delegated funding and described a positive recent shift in adult social care's

visibility and multidisciplinary collaboration. However, they were aware of high long-term care conversion rates following hospital discharge. Leaders across the system had commissioned an independent review to assess the wider health and cost benefits of the integrated model and rebalance the system toward independence-focused care.

Partnership working had led to improved outcomes, enhanced coordination, and a system-wide commitment to integrated, person-centred care. Staff felt supported, leaders had aligned vision and resources, and partners described clear benefits.

Working with voluntary and charity sector groups

The local authority demonstrated a strong approach to working with the Voluntary Community and Social Enterprise (VCSE) sector. People benefited from co-produced services and good levels of VCSE support. Staff described responsive, collaborative working. Leaders embedded VCSE voices into strategic planning and partners felt recognised and involved. People had experienced meaningful engagement through co-production, particularly in relation to carers. Carer Ambassadors noted the high number of carers in the local authority providing over 50 hours of care weekly, and the local authority had responded by co-producing a replacement care offer and monitoring its impact through surveys and ongoing involvement.

Staff said they worked closely with VCSE organisations to support a wide range of needs. They described joint work for example with armed forces charities, outreach at community events, and collaboration with schools to support young carers. Co-location with VCSE partners in the integrated arrangements had enabled faster decision-making and collaboration. Staff clearly valued the VCSE sector's role in housing advocacy and support for marginalised groups and highlighted the benefits of shared training and integrated working.

Leaders said the VCSE sector had been integral to strategic planning and community engagement. They described working in a power sharing way with local communities, supported by connectors and community builders. Public Health leaders emphasised the VCSE's role in addressing deprivation and supporting ageing populations. The sector comprised over 800 organisations, with 250 focused on health and wellbeing. With the local authority being one of the smallest nationally, this was a wide range of support. Leaders referenced platforms such as the Continuous Improvement Board and the Learning Disability and Autism Partnership Boards as key spaces where VCSE voices had shaped delivery.

VCSE partners felt valued and increasingly involved, particularly since the COVID-19 pandemic. They described early engagement in planning, co-production of strategies and regular forums for feedback. Healthwatch partners said they were proactively involvement in the local authority, including participating in the Health and Wellbeing Network and Board. However, partners spoke about short-term contracts and a lack of financial sustainability with limited tender notices. Engagement with smaller grassroots organisations had also been challenging, though the local authority had supported joint tendering and capacity building.

Processes reinforced VCSE collaboration through contracts and governance structures. The Community Wellbeing Contract had enabled VCSE-led delivery of helplines,

community hubs, and community coordination. The Local Area Partnership had supported joint working on health and employment priorities. Co-delivered projects such as the LGBT+ Survey and the Domestic Abuse and Sexual Violence Strategy had embedded lived experience and engagement. The Devon 5-Year Joint Forward Plan included the VCSE sector as part of a wider integrated system, and strategies like the Homelessness and Rough Sleeping Strategy promoted multi-agency planning and peer advocacy.

Theme 3: How the local authority ensures safety within the system

This theme includes these quality statements:

- *Safe pathways, systems and transitions*
- *Safeguarding*

We may not always review all quality statements during every assessment.

Safe pathways, systems and transitions

Score:

3 - Evidence shows a good standard

What people expect:

When I move between services, settings or areas, there is a plan for what happens next and who will do what, and all the practical arrangements are in place. I feel safe and am supported to understand and manage any risks.

I feel safe and am supported to understand and manage any risks.

The local authority commitment:

We work with people and our partners to establish and maintain safe systems of care, in which safety is managed, monitored and assured. We ensure continuity of care, including when people move between different services.

Key findings for this quality statement

Safety management

People experienced care that prioritised safety, with risks such as carer breakdown identified and addressed early in the assessment process. Ensuring safe, familiar environments and reliable support arrangements had been central to maintaining wellbeing. People said they were reassured by the continuity of care and the proactive coordination between services, which helped prevent crises and supported recovery. The use of risk-positive approaches enabled people to regain independence while maintaining safeguards.

Staff said safety was embedded throughout care journeys via a range of mechanisms. Daytime and out-of-hours Approved Mental Health Professionals ensured continuity and responsiveness, supported by effective handovers, shared training, and peer supervision. Environmental assessments, safeguarding assessments, and secondary triage helped identify risks such as hoarding, self-neglect, and housing concerns, which were addressed proactively, particularly during hospital discharge planning. Front door staff played a clear role in crisis response, maintaining direct contact with people and prioritising urgent cases

and worked closely with Voluntary Community and Social Enterprise (VCSE) partners. Multi-agency 'spotlight' meetings allowed effective shared ownership of complex or higher need cases such as dementia, homelessness, and domestic abuse.

Staff described practical safety management measures, for example engaging in mediation to preserve care packages, organising adaptations to support independence and carefully managing transitions into adult services safely. However, some staff raised concerns about gaps in provision for people with complex mental health needs, particularly those experiencing suicidal ideation, which they felt could feel unsafe and outside their professional remit. Integration with health colleagues had largely supported timely interventions and reduced duplication, though some staff had expressed concern about blurred professional boundaries and the need to preserve the distinct identity of social care.

Leaders said safety had been addressed at both population and service levels. Integrated occupational therapy rotations and collaboration with intermediate care teams had reduced reliance on double-handed care and enabled early intervention. Housing stability and availability was recognised as a key risk factor, with concerns about reliance on private rentals, limited specialist housing, and the condition of older homes. Leaders described efforts to support people through supported housing, hostels, and floating support services. Suicide prevention remained a clear priority, and broader risks in drug and alcohol services for young people were identified. The Multiple Complex Needs Alliance (Growth in Action) had helped link housing with health and social care, ensuring people were not housed in unsafe or unstable conditions.

Partners said there were positive transitions between children's and adult services and this was achieved by a dedicated team, who provided a clear and effective pathway for young people. However, some partners also identified a need for greater consistency to prevent people from slipping through service gaps. Transition planning had been supported by an action plan, including a central tracking log, quarterly reviews, joint meetings with education providers and training for children's social care practitioners. Webinars for carers and young people and post-transition surveys helped identify good practice and areas for improvement. Some partners said there was sometimes an underuse of community intelligence, particularly from VCSE groups. They said warnings about hoarding for example had not always been acted upon by statutory services, leading to missed opportunities for early intervention.

Processes demonstrated a robust framework for safety and risk management. Monthly scrutiny of service quality and safety data by the Adult Social Care Continuous Improvement Board had supported operational oversight and informed planning, particularly for out-of-area reviews. Two social workers had been assigned to prioritise these reviews, supported by a checklist aligned with Association of Directors of Adult Social Services guidance. Any indication of an 'Inadequate' Care Quality Commission rating triggered joint responses through contract monitoring and operational teams. The integrated multidisciplinary model had enabled seamless access to care and support, with systems in place for risk and incident management. Waiting Well documents had provided clear contact routes and safeguarding pathways, increasing confidence and ensuring people knew how to act quickly if they or others were unsafe.

The local authority had been effective in prioritising safety and managing risks across care journeys. There had been a clear commitment to proactive safeguarding, supported by integrated working.

Safety during transitions

People experienced transitions that were well managed and person-centred. In complex or higher-need cases, for example those involving multiple accommodation moves and hospital discharges, the local authority was described as helpful and supportive, with effective communication. Risks were clearly communicated, and people understood decisions such as the need for continued nursing care. Prompt assessments, follow-up communication, and provision of equipment had helped ensure safety. In a case we reviewed, there was effective joint working between Adult and Children's Services in support of a family. Transitions from children's to adult services had been supported through weekly panels and 6-monthly information-sharing meetings, though data systems had only been partly effective in tracking progress. Staff had used joint funding arrangements and checklists to challenge decisions and ensure appropriate support.

Staff said they worked within a culture of safe transitions, where leaders had promoted reflective practice to enable this. Weekly triage practices and allocation of referrals had ensured people were placed with the most appropriate team. Emergency responses had been swift and effective, with for example, the Emergency Duty Team stepping in to support unpaid carers during crises. Staff described clear handover processes between out-of-hours and day services, including written documentation and phone calls to maintain continuity. They said they were advocates for safe, personalised care and supported positive risk-taking, helping people make informed choices about risks. One example involved a young person transitioning from foster care to supported living, with an 8-week transition period that led to increased independence and reduced support needs.

During periods of high system pressure (eg. OPEL 4), we heard hospital managers had sometimes prioritised discharge speed over safety, resulting in readmission (OPEL 4 refers to the highest level of operational pressure within the NHS's Operational Pressures Escalation Levels (OPEL) framework). Staff described examples of advocating for people when health partners wanted to discharge quickly. Unpaid carers had been identified at crisis points and met the same day to provide reassurance and guidance.

People experienced coordinated, person-centred support; staff had advocated for safe practice and responded swiftly to emergencies; leaders had addressed systemic risks and supported integrated planning; and partners recognised improvements while identifying areas for further development.

Contingency planning

People experienced contingency planning with arrangements in place to ensure continuity of care during emergencies. One unpaid carer preparing for surgery had received support to establish both immediate and backup care plans, which helped reduce anxiety and maintain stability. Contingency was actively planned in people's care records.

Staff said they used flexible approaches to manage disruptions. Multi-agency forums supported collaborative planning for people with complex or higher-level needs and when

equipment delays occurred, people remained on caseloads or waiting lists with clear measures to monitor risk. In some cases, care input had been temporarily increased to safeguard wellbeing. The national collapse of an equipment company had disrupted equipment supply chains, requiring rapid adaptation. Emergency equipment remained available during this time, but routine items often required self-purchase.

Leaders said contingency planning was achieved by oversight and risk management. The Provider Failure Policy outlined procedures for managing service disruptions, including requirements for providers to maintain continuity plans, registers of supported individuals, and financial health checks. In the event of provider failure, a commissioning manager was appointed to oversee safety, with a checklist of responsible officer actions. High-risk services were monitored by the joint commissioning committee, and providers were expected to give 6 months' notice for planned closures to allow safe transitions. Partners said contingency planning had improved hospital discharge practices, helping avoid unnecessary admissions and promoting recovery through trauma-informed approaches and collaboration with Voluntary Community and Social Enterprise (VCSE) organisations.

Processes supported contingency planning through integrated systems and early risk identification. Intelligence on provider failure had been gathered through safeguarding data, incident reporting, contract management and quality assurance meetings, in collaboration with Torbay and South Devon NHS Foundation Trust and the Care Quality Commission. One example involved the closure of 2 care homes, which had been managed within 6 weeks using an integrated commissioning approach that ensured people remained safe throughout. These events demonstrated the local authority's ability to respond effectively to service disruptions.

Safeguarding

Score:

3 - Evidence shows a good standard

What people expect:

I feel safe and am supported to understand and manage any risks.

The local authority commitment:

We work with people to understand what being safe means to them and work with our partners to develop the best way to achieve this. We concentrate on improving people's lives while protecting their right to live in safety, free from bullying, harassment, abuse, discrimination, avoidable harm and neglect. We make sure we share concerns quickly and appropriately.

Key findings for this quality statement

Safeguarding systems, processes and practices

There were effective systems, processes, and practices in place to protect people from abuse and neglect. The local authority worked closely with the Safeguarding Adults Board and partners to deliver a coordinated approach, and there was a strong multi-agency safeguarding partnership with clear roles and responsibilities. Information sharing arrangements were robust, enabling timely and proportionate responses.

People who used services described adult social care as responsive, and we heard examples of safeguarding being embedded in practice. Staff consistently said safeguarding was not just about process but about communication, reassurance, and setting expectations with carers and families. The Adult Social Care Survey (2024-2025) found a similar proportion of people who used services in the local authority felt safe (71.16%) as the national average (71.06%) and a similar proportion of people (86.14%) who used services say those services made them feel safe and secure as the national average (87.82%).

Staff described a workplace culture of learning and development, with access to mandatory safeguarding training, Safeguarding Adults Reviews (SARs) training, and specialist sessions around emerging safeguarding trends and needs. Joint training with children's services and integration with NHS systems supported cross-sector learning. There was a clear ethos that safeguarding was everyone's responsibility. Occupational therapists were well-trained and actively involved in safeguarding investigations. The Sensory team worked jointly with social workers and occupational therapists to support people with sensory loss, reducing risks associated with isolation.

There were formal processes such as the Single Point of Contact (SPOC), Section 42 thresholds (the criteria for initiating a safeguarding enquiry for an adult under the Care Act 2014), and risk enablement frameworks, alongside professional judgement and

supervision. The SPOC team played a central role in triaging safeguarding referrals, which were received from a wide range of sources including the public, GPs, ambulance services and NHS 111. Referrals were rated using a Red–Amber–Green (RAG) system to indicate urgency, and allocated within an average of 7.09 days, with a maximum of 15 days. The SPOC team used multiple electronic systems to gather intelligence, including local authority, NHS, and GP records, although staff noted some duplication due to a lack of system integration.

Leaders provided oversight. The Director of Adult Social Services attended the Safeguarding Adults Partnership Board and received exception reports. Monthly meetings with the Principal Social Worker (PSW) (who was also the Head of Safeguarding) and the Delivery Committee ensured a clear line of sight over safeguarding practice and SARs. Leaders expressed confidence in the robustness of the system and its ability to respond to concerns.

Partners agreed safeguarding responsibilities were overseen by senior leaders, including the NHS Trust Chief Nurse and PSW. The multi-agency Torbay and Devon Safeguarding Adults Partnership Board (TDSAP), shared with Devon County Council, included the local authority, Integrated Care Board, and NHS Trust. Healthwatch sat on the board and contributed to reforming the agenda to ensure partner priorities were addressed. A standing group of people with lived experience provided feedback on safeguarding processes, and the Board chair actively engaged with people and staff. Learning from SARs was shared across services, and complex cases had led to system-wide improvements, particularly in discharge pathways and specialist provision for people with learning disabilities and autism.

Some partners said safeguarding referral forms could be cumbersome and possibly inaccessible to the public. The local authority’s safeguarding webpage, however, provided accessible information on abuse, exploitation, and how to access support, alongside links to events and resources. Annual reports from the TDSAP and the local authority were publicly available, and the partnership’s business plan for 2025–2027 outlined strategic priorities, including improving safeguarding practice in key risk areas and developing joint protocols with children’s services.

Responding to local safeguarding risks and issues

The local authority demonstrated a strong understanding of safeguarding risks and took action to prevent abuse and neglect. The local authority had a clear picture of local safeguarding issues and responded effectively to emerging risks and learned from serious incidents to improve practice.

People’s experiences reflected timely and coordinated safeguarding responses. In 1 case, an urgent referral led to a multi-agency response that ensured the person received support at a critical time. The assessment recognised the person’s strengths and independence while ensuring complex or higher-level needs were met, demonstrating a strengths-based and person-centred approach.

Staff and leaders showed a clear understanding of key safeguarding risks in the area. Housing-related concerns such as hoarding and unsafe environments were frequently raised, with examples provided of joint working between housing officers, environmental

health, and adult social care to mitigate risk. Leaders acknowledged a lack of specialist housing but described targeted work on hoarding and self-care, supported by a welfare advice organisation co-funded with a neighbouring authority. The local authority also recognised the safeguarding risks associated with coercive and controlling relationships and identified the need to update operational guidance to improve consistency in decision-making.

The local authority responded to high-risk areas such as the backlog of Deprivation of Liberty Safeguards (DoLS) assessments by recruiting 12 independent Best Interest Assessors (BIA) and implementing a blended model using in-house and independent BIAs. This resulted in a reported 150% increase in monthly allocations. The backlog was reduced by 8.8% between July and August 2025, and performance was monitored monthly through the Delivery Committee chaired by the Divisional Director and Service Improvement Board chaired by the DASS. Community DoLS applications were triaged using the Association of Directors of Adult Social Services (ADASS) prioritisation tool, with high-risk cases allocated immediately. Monthly reporting and governance oversight ensured transparency and accountability.

Lessons from Safeguarding Adult Reviews (SARs) were actively used to improve practice. Leaders described how themes such as self-neglect had prompted learning, including a self-neglect conference, practice briefings, and the introduction of welfare checks at the front door. Reflective commentary was used to help staff understand the implications of SARs. The local authority also contracted an advocacy organisation to quality check Section 42 processes and gather feedback from people who had experienced safeguarding interventions. Early feedback from this indicated people felt safe, involved, and engaged.

Partners confirmed the local authority was accountable and open to scrutiny. The Safeguarding Adults Board (SAB) Chair described a thematic SAR review on self-neglect and hoarding involving 6 cases, including 2 from the local authority. Practitioners participated in focus groups to identify barriers and inform improvements. Since 2022, the joint Devon and Torbay SAB had overseen 17 SARs with 160 recommendations, 85 of which were fully completed. Outstanding SARs for adult social care in Torbay were in single digits, and the local authority was described as a good partner in holding others to account. Processes provided robust evidence of the authority's commitment to safeguarding. The SAR Core Group, part of the joint Safeguarding Adults Board with Devon (TDSAP), maintained oversight of SARs and reported quarterly to the Board. Completed SARs were published with learning and recommendations, and policy and guidance were regularly updated to reflect new knowledge and trends. Risk indicator and assessment tools were promoted to ensure consistent awareness of safeguarding concerns.

Healthwatch reported close collaboration with the SAB Chair and participation in board meetings. They helped to reform the agenda to ensure partner priorities were addressed and contributed to a standing group of people with lived experience. The SAB Chair described collaborative work to embed trauma-informed and strengths-based practice more deeply across the system.

The local authority's integrated health and social care system enabled rapid responses to adult abuse concerns, with multi-agency triaging directing cases to appropriate

professionals. The Single Point Of Contact (SPOC) service acted as a central contact point, reducing duplication and delays. Best Practice meetings supported staff development, and safeguarding improvement groups addressed emerging themes such as hidden harm, financial abuse, and predatory marriage.

The TDSAP's strategic priorities included embedding SAR learning into practice, improving engagement with people supported, and promoting person-led, outcome-focused safeguarding. Partners were expected to take part in the SAR process and make sure any learning was clear, practical, and could be acted on, with specific goals, measurable outcomes, and realistic timescales.

Responding to concerns and undertaking Section 42 enquiries

The local authority demonstrated a strong approach to applying Section 42 safeguarding thresholds, with clear systems, guidance, and oversight mechanisms in place to ensure consistency and person-centred practice. Evidence from people's experiences, staff, leaders, partners, and processes showed safeguarding concerns were identified and responded to appropriately.

People's experiences reflected that safeguarding concerns were recognised and addressed effectively. One person described how reassurance and continuity of support helped reduce risk and maintain stability. Another received urgent multi-agency interventions, including 24-hour support, with safety planning that considered complex or higher-level medical needs. These examples demonstrated safeguarding was not only reactive but also embedded in care planning and risk management.

Staff described a culture of openness and support in navigating safeguarding decisions. Supervision, peer support, and regular audits were used to maintain quality and consistency, with feedback shared across teams. The Single Point Of Contact (SPOC) team played a central role in triaging referrals, which were rated based on risk. High-risk cases triggered immediate action, and average waiting times from SPOC to allocation were low (4.4 days), although 56% of open Section 42(2) enquiries remained open beyond 90 days, indicating delays in completing enquiries.

To address this, the local authority introduced Level 3 safeguarding training, reintroduced training on chairing Section 42 meetings and large-scale enquiry practice, and embedded learning from Safeguarding Adults Reviews (SARs) into operational practice. The SPOC team and Safeguarding Adult Professional Practice Teams held bi-monthly best practice sessions, enabling thematic reflective learning and review of emerging issues. These sessions also supported a full consultation and revision of SPOC operational guidance.

The SPOC operational guidance (v7) clearly outlined the application of Section 42(1) thresholds and required that any decision not to proceed to a Section 42(2) enquiry be recorded with a rationale and approved by a manager. A flowchart supported decision-making, and trauma-informed practice was embedded into guidance to ensure decisions considered the impact of trauma on individuals' engagement with services. The electronic system was amended to capture enquiries that ceased at Section 42(1), allowing for analysis of unmet needs and threshold decisions.

Business Intelligence data supported oversight of SPOC operations and case allocation. Weekly quality assurance huddles helped to identify emerging trends and risk across the

care market. While the average transfer time from SPOC to allocation was low, the absence of a formal target timescale for completing enquiries was noted, potentially impacting consistency in meeting Making Safeguarding Personal obligations.

The local authority's commitment to transparency and continuous improvement was evident in its safeguarding data reporting. In 2023–24, 1,000 safeguarding concerns were reported, with a 26% increase in enquiry activity. Neglect and acts of omission were the most common concerns. The local authority engaged adults with lived experience to provide qualitative feedback, and each Section 42(2) enquiry received scrutiny from a management panel.

Making safeguarding personal

The local authority demonstrated a strong and person-centred approach to safeguarding enquiries, with clear evidence that they were carried out sensitively, proportionately, and with the wishes and best interests of the person at their centre. The local authority also showed a commitment to improving public understanding of safeguarding and ensuring people knew how to raise concerns. Safeguarding Adults Collection data (2024-2025) showed a somewhat higher proportion of people lacking capacity were supported by an advocate, family or friend (96.67%) as the national average (83.38%) which was a positive sign in Making Safeguarding Personal (MSP).

Staff consistently described safeguarding as embedded in practice, with a strong focus on MSP. They said people were always at the centre of the referral process, with their voices heard and desired outcomes considered. Where people declined to proceed with safeguarding, staff followed clear processes including capacity assessments and consultation with professionals in the person's life. Staff described how they respected people's autonomy while ensuring safety was promoted.

The Principal Social Worker, who was also Head of Safeguarding, described early engagement with adults at risk and utilising external advisers to improve practice. Data analysis had been developed to reflect a person's journey, including how long they had been in the system, waiting times for decisions, and whether their outcomes had been recorded which demonstrated a commitment to transparency and continuous improvement.

Partners confirmed improvements in MSP. Healthwatch reported a positive change in how the local authority responded to safeguarding referrals, moving from generic automated responses to personalised communications that explained decisions and offered signposting. This was seen as a significant step forward in making safeguarding personal and closing the feedback loop with referrers and the public. The Safeguarding Adults Board prioritised MSP in the current year, holding workshops to explore the person's voice and experience. Plans were underway to establish a Community Reference Group to raise awareness of safeguarding among diverse communities, including those where English was not their first language.

Processes in place further supported the local authority's effectiveness in MSP. The Single Point Of Contact (SPOC) operational guidance instructed practitioners to consider consent, mental capacity, and executive function, and to apply trauma-informed practice. Legal support was available to staff, and guidance covered a wide range of safeguarding

scenarios including domestic abuse, self-neglect, and large-scale abuse. The local authority's website provided accessible information on safeguarding, including definitions of abuse, exploitation, and how to access support.

Performance data provided by the local authority at the time of the assessment, showed 93% of adults who gave feedback said their outcomes were met fully or partially, and 91.1% of safeguarding enquiries resulted in risk being removed or reduced. However, only 76.4% of people were asked about their preferred outcomes, below the 90% target. The local authority said this was due to recording issues, which had since been addressed. Additionally, only 17.3% of people consented to give feedback, below the 20% target.

Theme 4: Leadership

This theme includes these quality statements:

- *Governance, management and sustainability*
- *Learning, improvement and innovation*

We may not always review all quality statements during every assessment.

Governance, management and sustainability

Score:

2 - Evidence shows some shortfalls

The local authority commitment:

We have clear responsibilities, roles, systems of accountability and good governance to manage and deliver good quality, sustainable care, treatment and support. We act on the best information about risk, performance and outcomes, and we share this securely with others when appropriate.

Key findings for this quality statement

Governance, accountability and risk management

People had responsive and respectful engagement, staff felt supported and involved in improvement work, and partners recognised a shift toward collaborative governance. While some areas such as consistency of management and leadership practices, contingency planning, and specialist provision could be developed further.

People's experiences reflected positively on governance and service management. They described thorough assessments, timely communication, and respectful engagement. Unpaid carers had been offered assessments with clear explanations of their rights, and equipment provision had been handled smoothly. Co-production had been evident in many initiatives, which demonstrated transparency and a commitment to continuous improvement. However, some people felt contingency planning needed to be more consistently embedded, and carers' needs more fully explored in future reviews.

Staff and leaders said governance and accountability had been well-established and inclusive, supported by clear structures and delegated responsibilities, but with some mixed experiences. Leadership had been described as strategically aligned and values-driven, with the Director of Adult Social Services (DASS) credited for improving responsiveness and visibility of adult social care over recent months. Staff reported feeling supported and engaged through monthly Key Performance Indicator tracking, service meetings, and transformation groups. The Principal Social Worker maintained links with improvement boards and senior leaders, promoting strengths-based practice. However,

some staff noted inconsistent management practices and a disconnect from senior leadership, suggesting there was a need for more consistent leadership across all levels. For example, there were some limitations in tracking outcomes at the front door and a lack of case auditing, which could hinder learning and oversight and there was a mixed experience with the consistency of supervision in different staff teams.

There was structured governance around divisional directors and integrated roles, including a joint operational lead within the NHS Trust. Oversight was provided through the Continuous Improvement Board and strategic meetings, with alignment across adult social care, health, housing, and safeguarding. The Section 75 Joint Executive Group had overseen statutory responsibilities, risk registers, and performance metrics. Risk management frameworks had been independently audited, and a review was planned to strengthen assurance and validate mitigation actions. Key risks such as workforce capacity, market sustainability, and mental health commissioning, had been jointly reviewed and fed into service improvement plans.

Partners said the current DASS had fostered a collaborative governance culture, described as open and inclusive. Regular meetings strengthened relationships and improved oversight of Care Act duties. Healthwatch said their involvement was embedded across governance boards, with feedback actively received and acted upon. However, partners noted operational success sometimes relied too heavily on individual relationships, experiencing some service instability following key personnel changes. They also highlighted gaps in specialist provision in social work teams, particularly in learning disability services, although the local authority had responded by embedding expertise within the Complex Care team.

Strategic planning

Strategic planning was adequately set out in the local authority and with its partners. People said their experiences reflected a system that was increasingly responsive and inclusive. They had seen improvements in how carers' needs were considered, with assessments clearly explained and co-produced initiatives, such as the Waiting Well documents demonstrating a commitment to transparency and planning. People felt their feedback was being used to shape services, though some noted that more consistent follow-through was needed in areas like contingency planning and dementia support.

Staff and leaders said strategic planning had been guided by performance data, financial pressures, and transformation goals. Leadership had been visible and inclusive, with clear accountability across adult social care, health, housing, and safeguarding. Staff described structured risk management and regular Key Performance Indicator (KPI) tracking, with deep dives into priority areas such as Deprivation of Liberty Safeguards (DoLS) and carers. They had used electronic case management systems to capture data on unpaid carers, although they noted that figures sometimes didn't fully reflect the work being done. Staff acknowledged resource pressures, especially around replacement care and dementia, but remained committed to meeting needs effectively.

Leaders said strategic planning had been strengthened by benchmarking, assurance meetings, and alignment with transformation plans. The Director of Adult Social Services (DASS) led consultancy-supported reviews that addressed long-standing concerns, and the Director of Public Health had linked planning to broader themes like housing, digital

inclusion, and physical activity. Governance structures such as the Health and Wellbeing Board supported cross-sector strategies. Leaders also recognised data gaps in ethnicity and protected groups, showing awareness of inequalities and the need for improved data to inform future planning.

Partners said the local authority had maintained a long-term strategic vision, even during political change. The Section 75 agreement and 3-way working arrangement with the Integrated Care Board and the NHS Trust had improved alignment and oversight. Carers were now treated as a protected characteristic in equalities impact assessments, and policies were routinely reviewed to avoid adverse impacts. Healthwatch and Voluntary Community and Social Enterprise (VCSE) partners had seen increased engagement and co-production, though implementation varied. Strategic planning also addressed unemployment and health inequalities through a co-produced VCSE partnership, connecting people to wider support services. Employment had been prioritised in learning disability and autism strategies, with ambassadors leading and defining this work.

Processes had reinforced strategic planning through integrated frameworks and data-driven decision-making. Plans such as the Integrated Adult Social Care Commissioning Plan, Joint Health and Wellbeing Strategy, and One Devon Integrated Care Strategy had aligned priorities across systems. These strategies addressed mental health, homelessness, substance misuse, and domestic violence, supported by the Joint Strategic Needs Assessment and Market Position Statement. The local authority's long-term vision, set out in a 20-year strategic plan, aimed to guide consistent action and align the whole council behind shared goals.

Information security

The local authority recognised the need for improvement and were making changes to the case recording system at the time of the assessment. Strategic documents such as the Devon Plan and One Devon Integrated Care Strategy outlined ambitions for unified digital infrastructure, standardising frontline systems and improving data sharing across health and care. These improvements were still in development and not yet embedded in daily practice.

Staff said that current IT systems were outdated, fragmented, and difficult to work with. The legacy electronic case management system undermined staff confidence in data accuracy, particularly around waiting list reviews. Staff across services reported poor interoperability between health and social care systems, which created barriers to communication and slowed practice. Sometimes this had reduced efficiency and time available for direct care. Staff expressed frustration at the lack of access to modern tools like Artificial intelligence-supported documentation systems and said financial constraints had in the past limited digital innovation.

Leaders said they had heard these concerns during staff engagement sessions and acknowledged the need for sustained investment in digital infrastructure. While digital transformation was underway and a new case management system was being rolled out, feedback had indicated that current arrangements did not yet ensure consistent data quality, security, or accessibility. Staff called for clearer timelines and more robust support to reduce operational delays and improve service delivery.

Learning, improvement and innovation

Score:

3 - Evidence shows a good standard

The local authority commitment:

We focus on continuous learning, innovation and improvement across our organisation and the local system. We encourage creative ways of delivering equality of experience, outcome and quality of life for people. We actively contribute to safe, effective practice and research.

Key findings for this quality statement

Continuous learning, improvement and professional development

The local authority demonstrated a strong commitment to continuous improvement and learning. People felt involved as equal partners, staff generally described a reflective and well-supported culture, and partners recognised strategic alignment and co-production efforts.

People said they felt involved in shaping services and strategies. Carer ambassadors described positive experiences of co-production, for example around improving access to direct payment grants, embedding carers support workers in GP practices, and getting clearer information through initiatives like Carers Rights Day and the orange lanyard system in the hospital (registered unpaid carers wear an orange lanyard, to identify them to staff and improve communication). Carers said leaders were visible and accessible, particularly the new Director of Adult Social Services (DASS), and felt their feedback had been valued in service and strategy development. Carers had contributed to designing feedback tools and shaping the carers strategy, which included clear targets and commitments to publish progress regularly. They had asked to be recognised earlier, receive timely assessments, and be involved in care planning, which the local authority had committed to monitor through audits and feedback.

Staff and leaders said there was a strong culture of learning, professional development, and team support. Mental health staff, including Approved Mental Health Professionals (AMHPs), reported regular supervision, access to specialist training, and a shared responsibility for risk. Occupational therapy teams described positive learning environments with rotational posts, peer supervision, and training. Champions had supported internal expertise, and informal learning had been fostered through peer collaboration and involving people with lived experience. The Principal Social Worker led a workforce development programme, supporting apprenticeships, degrees, and leadership development. Staff also participated in structured programmes and health coaching and felt supported to grow professionally. Some staff said they had limited supervision, and shared some concerns about recognition and career progression.

Partners said they recognised the local authority's commitment to workforce development and integration, particularly following leadership changes. The appointment of a new

DASS and NHS Chief Executive recently had strengthened collaboration and stability. Divisional director roles had supported joint leadership and system-wide improvement. Partners said co-produced initiatives like the Big Plan and other strategies were impactful, although some felt co-production was still emerging and not yet consistently embedded. Some partners said consultation processes were too top-down and lacked meaningful input from underrepresented groups.

Processes had supported continuous improvement. The Learning and Development Policy outlined availability of financial support for qualifications, with training delivered via specialist platforms. The Integrated Workforce Plan and Education Strategy had supported protected learning time and specialist training. The local authority had tracked involvement in improvement projects using a co-production ladder and committed to rolling out mandatory anti-racism, unconscious bias, and de-escalation training. The Inclusion Strategy and Racism Review had demonstrated a commitment to equity, and the LGBT+ Survey had led to recommendations for further workforce training. Staff surveys identified areas for improvement, including around tackling low morale, stress, and career development, with action plans.

Learning from feedback

The local authority demonstrated a growing and increasingly embedded culture of learning from feedback. People felt heard and involved, staff used feedback to shape services and training, and partners recognised improvements in services and culture.

Carer ambassadors had gathered feedback from across the local authority, reporting high satisfaction with carers services. They said the 'you said, we did' approach was valued which was evident in publications like Signpost for Carers, and they described meaningful involvement in editorial boards, legal training, and service evaluation. Learning disability ambassadors contributed to large-scale events and co-produced the Big Plan, which now included an action plan focused on health, housing, employment, and day services, they felt their involvement was impactful and worthwhile.

Staff and leaders said feedback had become central to service improvement and strategic planning. Elected leaders highlighted the positive impact of a peer review in 2024 in strengthening the work of the local authority, and staff had used Care Quality Commission feedback to improve the adult social care education offer. Staff described a culture of continuous learning, with feedback influencing service design such as maintaining peer support groups and introducing creative tools. Carers services had used feedback to develop hospitality schemes, gifted holidays, and educational booklets. Staff also identified gaps in dementia support and advocacy, which they planned to address through future development. However, some staff noted that action plans lacked clear ownership and timelines, which could limit impact.

Partners said they had seen improvements in how feedback was used, particularly in carers services. Healthwatch reported that feedback led to better dementia training, with plans to replicate successful models. Carers organisations worked with the local authority to improve messaging and carer recognition. However, some partners felt co-production was still emerging and not consistently embedded. Concerns were raised about top-down consultation processes, lack of follow-through on issues like transport. While partners were

often approached for intelligence, they said feedback was not always acted upon or communicated back clearly.

Processes showed the local authority had formal mechanisms for gathering and responding to feedback. The carers strategy included regular surveys and quarterly progress updates. The Written Statement of Action for Special Educational Needs and Disabilities services had been co-produced with families, and the Preparing for Adulthood audit used Ofsted and CQC criteria. Feedback was tracked using a co-production ladder, and training offers were adapted based on input. However, some staff survey action plans lacked named leads and deadlines, which could affect accountability.

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Adult Social Care CQC Improvement Plan

DATE: 25th March 2026

Product	Progress Update	Status	Delivery Date
Commissioning			
Develop a joined up Housing Needs Assessment Review and develop a new supported living framework.	All-age Housing Needs Assessment has been developed for consideration by Cabinet in April. Monthly cross-directorate meeting in place to support delivery against the assessment and ensure join up between capital and commissioning projects. HNA document will underpin future housing related projects.	On Track	Cabinet 14th April 2026
Improve provision for people with complex MH, LD and dual diagnosis through modernised frameworks.			
Review and re-procure day opportunities.	Day opportunities to be considered as part of the ASC transformation plan and reviews of current packages of care	Not Due	Commissioning approach to be determined by end July 2026 following agency reviews of POC
Develop sustainable replacement care offers, community and bed based	Home care added to LWAH contract from January. Procurement of residential offer unsuccessful due to lack of suitable bidders and being revisited	On Track	New options for residential replacement care to COG by end June 2026
Develop new care home specification and fee framework	Care Cubed demonstration booked for April with commissioners and the market team. CMS project ongoing. Use of 1:1 in care homes data analysis complete and being reviewed at April Commissioning Oversight Group (COG).	On Track	Care Cubed demonstration 9th April. CMS go-live September 2026
Develop Equality checklist for use on all new commissioning plans, policies and procedures.	Template for commissioning projects to be developed and embedded to include prompts related to EIA's and co-production. To be routinely used to support discussions and papers presented at Commissioning Oversight Group (COG)	On Track	31 May 2026
Commission LGA to undertake review of the carers offer. Develop new specification for carers services. Undertake needs assessment for unpaid carers.	Procured via the LGA. Review complete and recommendations to be taken forward as part of carers strategy action plan. Commissioning spec for carers to be developed by August 2026.	On track	01 August 2026
Advice & Information			
Develop Inclusive Advice & Information Strategy and delivery plan for ASC, including advice and information on DFG's	Improved access to advice, information and self-help for ASC	Not Due	01 March 2027
Joined up access to Adult Social Care bringing together community and voluntary sector, housing and adult social care. Consistent offer across all channels.	Scoping session to be developed as part of Transformation Programme.	On Track	01 March 2027
Support Structures/Business Processes			
Deliver annual ASC EDI Actions and evaluate impact.	Action Plan for ASC being reviewed. Linked in to wider council ED&I Lead	On Track	31 May 2026
Develop reporting framework for Quality.	Templates being built for testing through April	On Track	30 April 2026
Develop reporting framework for Finance.	Templates being built for testing through April	On Track	30 April 2026

Develop reporting framework for Performance.	Templates being built for testing through April	On Track	30 April 2026
Develop supervision audit framework	Awaiting arrival of interim PSW. Initial scope underway	On Track	30 June 2026
Develop case audit framework		On Track	30 June 2026
Develop and finalise Assurance architecture to monitor performance, quality & sustainability.	Monthly Assurance Board in place. Escalation report forms part of Sc75 Partnership meeting. Headline variance reporting to Leader and Council CEO through ASC Quartet arrangements. Escalation framework in development including recovery plan requirements. Additional funding provided by Council to address COM DoLs backlog approved.	On Track	Mar-27
Improve cross partnership working between Community Safety Partnership, Torbay & Devon Safeguarding Adults Partnership & Torbay Childrens Safeguarding Partnership through development of shared priority plans.	This is identified as a strategic priority within TDSAP Business Plan 25-28. Reported into TDSAP and ODG. TDSAP chair has regular planned meetings with Chairs of Children's Partnerships. TC are full members of TDSAP.	On track	01 June 2026
Develop and deliver annual workforce development plan, based on findings from case audit, people's feedback and new policy directives.	The overarching workforce strategy has been drafted and circulated to teams for feedback. The recently appointed interim PSW, who joined last week, has been tasked with finalising both the strategy and the in-year plan as part of their objectives, and will be leading on this work going forward.	On Track	01 March 2027
Operations & Practice			
Develop new operating model with focus on (WAA) working age adults.	The initial case for change is now around 80% complete. Progress has been impacted by capacity constraints across several roles, resulting in some delays. However, the project group has been formed and is actively addressing these capacity challenges as part of ongoing work.	On track	01 March 2027
Implement new practice model.	Practice model review ongoing, this will focus on strength-based support for people using the three-conversation model. Additional activity to ensure that support plans are provided to people who draw on care and support as standard practice. New CMS will support greater efficiency in recording personal care support plan. This work is part of the CMS workstream. Training dates for staff have been booked.	On Track	01 March 2027
Co-Production & Engagement			
Establish a shared vision and clear ambition for co-production Develop a recognition and reward policy. Grow lived experience networks.	Published guidance and policy for Co-production for staff Work with key partners to consider ways to engage with our population to support co production around key projects. Learning from the co production work around Autism & LD. Workplan to be created to start embedding lived experience. New model for Torbay Voices with "you said, we did" feedback processes has been put in place, more work to do around co-design and lived experience feedback for ASC.	On Track	31 May 2026
Develop a structured repository of people's stories to enhance evidencing within the CQC framework.	In the process of writing proposal for engagement activity setting out who we are looking to engage, how will do this and a timetable for when. Templates to be created for feedback collation and linking with comms around consent required.	On Track	30 June 2026

Actions Addressed in Alternate Plans/Reports			
Implement the new Case Management System	This work is reported through Transformation Board	On Track	01 September 2026
Build closer links between TSAB and children's board for transitions. Address variability in transitions, ensuring consistent pathways. Promoting independence, wellbeing, employment skills, community life and relationships for young people entering adulthood.	This work is part of SLAIP	On Track	01 January 2027

Completed Actions			
Product	Progress Update		Completion Date
Develop Health and Wellbeing strategy which ensures the continued ephasis on neighbourhood health, wellbeing and family hubs, thus strengthening wider prevention pathways.	This action is already in progress with Public Health	Complete	25 March 2026

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ASC Programme Board Anne-Marie Bond (C)

SAFE TRANSITION / DUE DILIGENCE

ASC Project Board

WORKSTREAMS:

Staffing & Human Resources - Review & develop operational staffing structure. Consultations & support. Review HR

Operations - Review recipients of integrated care. Map estate/policies & procedures. Disaggregate functions. Review

Finance - Analyse funding & review spend. Map budgets to services & staffing. Set up new budgets & reporting

Contracts & Commissioning – Review Contracts, funding & payments. Extend/recommission. Novate/cease/reprocure or direct award. Comms, policies, processes.

Estates – Risk Share Agreement. Contract rationalisation and improved monitoring. Legal advice and guidance

Legal & Governance - Identify & review property/resources & occupancy. Condition surveys. Map requirements & estates. Contract review &

Communication & Engagement – Strategy & Plan. Elected Member and workforce engagement. Rollout structures,

Data and Analytics - Review & develop performance reporting frameworks.

IT and Infrastructure – Identify staff, locations, IT & infrastructure licenses/servers/equipment. Reporting, websites & data migration. required (Cloud/futureproofing). Procurement. Transfer email/devices/

TRANSFORMATION

Transformation Project Board

WORKSTREAMS:

Operating Model Redesign

Development of universal front door
Neighbourhood Hub Model & Operating Framework. Locality Needs & Prevention Pathways. Single-Front-Door Access & Information, Advice & Guidance. Digital Accessibility, Tools & Improvements. Workforce, Partnerships, Communications & Implementation Plan.

Working Age Adults New Model of Care
Updated market position statement. Mapped “access to support” pathway and a shared digital front door. Targeted provider development to grow capacity for high-complexity supported living. Booking system for replacement care services. Directory of local day opportunities. Integrated Practice and Clinical Frameworks. Digital Wellbeing Tools. Enhanced Supported Living Infrastructure. Market and Digital Tools for Accommodation Planning. Co-designed Replacement Care & Day Opportunities.

Implementation of New Care Management System – Ongoing work

Development of new integrated commissioning arrangements

IMPROVEMENT / ASSURANCE

Assurance Board

WORKSTREAMS:

High Quality Adult Social Care Practice
Revised supervision framework. Audit toolkit. Strengths-based practice model. Improved safeguarding. SAR learning framework. Sustainable DoLS model. - A unified transitions pathway. Enhanced Direct Payments and Carers pathways through. Adult Social Care Workforce Strategy. TECS embedded into practice.

Quality Performance Reporting and Management
A focused data quality plan supported by enhanced forecasting. Market insight, and provider-quality analysis. A strengthened performance framework with unified reporting and clearer contract KPIs. Targeted recovery and improvement plans for assessment & reviews.

Equality, Diversity & Inclusion Development
ED&I data framework. Digital inclusion package. Community engagement, co-production materials, accessible-service guidance, and staff training.

Engagement and Feedback
Co-production Vision & Ambition Statement Recognition & Reward Policy. Lived Experience Participation Framework. Staff training package on co-production, trauma-informed and DASV-safe facilitation. System-wide Feedback Model and Toolkit. Quarterly YSWD Publications. Lived Experience & Feedback Dashboard

CQC Inspection Readiness
Re-assessment Document Library. Document Update Governance Guidance. People’s Stories Library. Assessment Process Map and Roles & Responsibilities Matrix. Communications plan

COST CONTAINMENT

Cost Containment Project Board

WORKSTREAMS:

Policy & Protocols - Scheme of delegation. Reasonable choice policy (fair and affordable). Positive risk

Correction and Recovery

Enabling self-support (including under 500s)

Appropriate and proportionate ASC Funding

Independence First/ Managing Demand

Community Reablement Provision

Residential Provision Demand Management

Improving Commercial Grip for Contract Payments

Development of Care Market Frameworks
Cost, volume, and scenario models for care homes. Revised fee structure. Impact and benchmarking reports. Updated care home service specification. Defined provider reporting and monitoring requirements. Guidance materials for providers and internal teams explaining the new approach and expectations. Training materials and IT system user guides.

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Meeting: Cabinet

Date: 14 April 2026

Wards affected: All

Report Title: Biodiversity Duty Report

When does the decision need to be implemented?

Local authorities (excluding parish councils) and local planning authorities must publish a written biodiversity report by 26th March 2026 in order to comply with the Environment Act 2021

Cabinet Member Contact Details: [Councillor Chris Lewis, Cabinet Member for Place Development and Economic Growth](#), chris.lewis@torbay.gov.uk

Director Contact Details: Alan Denby, Director of Place, alan.denby@torbay.gov.uk

1. Purpose of Report

- 1.1. As part of the Biodiversity Duty as laid out in The Environment Act 2021, local authorities must consider actions that can be taken to further the general biodiversity objective i.e. the conservation and enhancement of biodiversity in England. The biodiversity duty is the general duty to conserve and enhance biodiversity as set out in Section 40A of the Natural Environment and Rural Communities Act 2006 (NERC). The Environment Act 2021 built on this, strengthening it to include a requirement for Local Authorities and Local Planning Authorities to publish a written “Biodiversity Duty Report” on how they are complying with this legal duty. This report must be published within 12 weeks of the reporting period end date of 1 January 2026 (i.e. 26th March 2026).
- 1.2. To comply with the strengthened NERC duty, local authorities must review their functions, identify opportunities to conserve and enhance biodiversity, agree policies and objectives and take such action as it considers appropriate, in the light of those policies and objectives.
- 1.3. The Biodiversity Duty Report is required to describe the actions the Local Authority has taken to comply with the strengthened NERC duty and provide a summary of actions taken by the Local Planning Authority on Biodiversity Net Gain policy.
- 1.4. This cabinet report presents the proposed approach to deliver the above and seeks approval to publish the Council’s January 2024 – January 2026 Biodiversity Duty Report (Appendix 3).

2. Reason for Proposal and its benefits

- 2.1. Since 1 January 2023, all public authorities have been under an enhanced statutory duty to conserve and enhance biodiversity. From January 2024 public authorities should have considered how to comply with the enhanced biodiversity duty and set out a plan confirming the actions they will take to do so. The first part of delivering the 'biodiversity duty' is to identify opportunities to contribute towards the conservation and enhancement of biodiversity and embed this into council processes.
- 2.2. The end date of the first reporting period should be no later than 1st January 2026 and subsequent reports are required to be published every 5 years thereafter i.e. the second biodiversity duty report must be published prior to March 2031¹.
- 2.3. The proposals in the Biodiversity Duty Report will help us to deliver our vision for enhancing biodiversity across the Torbay. The report will demonstrate how we incorporate biodiversity considerations into everything we do and integrate with the Community and Corporate Plan's mission to 'protect and enhance our (built and) natural environment' and 'address the climate emergency so as to create a sustainable future'. This will primarily be delivered through our policy framework documents² including the Torbay Local Plan. Alongside this delivery will also be through business, service and action plans including the Council's Climate Change Action Plan (CCAP) 2024-2026 and through the Greener Way For Our Bay Framework and Action Plan.
- 2.4. Local Authorities and Planning Authorities are required to produce and publish the Biodiversity Report per the Environment Act 2021 Section 40A. The Biodiversity Report provides information on actions completed to meet the NERC duty and demonstrates ongoing reconsiderations of plans and objectives to inform future biodiversity actions. The responsibility to deliver on the general biodiversity duty is shared across all Council operations including integration of biodiversity considerations into planning policy, procurement, and service delivery.

3. Recommendation(s) / Proposed Decision

- 3.1. That the Biodiversity Duty Report 2026 as set out in Appendix 3 to the submitted report be approved.

¹ To cover the period 02nd Jan 2026 – 01st Jan 2031.

² Adult Social Care Strategy; Community Engagement and Empowerment Strategy; Corporate Asset Management Plan; Corporate Capital Strategy; Corporate Parenting Strategy; Community and Corporate Plan; Domestic Abuse and Sexual Violence Strategy; Economic Growth Strategy; Housing Strategy; Gambling Act Policy/Statement of Principles; Joint Health and Wellbeing Strategy; Licensing Policy; Local Transport Plan; Development Plan; Strategic Agreement between Torbay Council, One Devon Integrated Care Board and Torbay and South Devon NHS Foundation Trust; Treasury Management Strategy; and Resource Management and Waste Strategy.

4. Appendices

Appendix 1 Table 1: Example/Summary Torbay Council Policies and Objectives and how their identified actions align with the Biodiversity Duty Requirements, and those actions that have been delivered between January 2024 and January 2026.

Appendix 2: Table 2 Example/Summary Torbay Council future actions identified within the Biodiversity Duty Report to be delivered between January 2026 and January 2031

Appendix 3: Biodiversity Duty Report 2026

5. Background Documents

- [Community and Corporate Plan - Torbay Council](#)
- [Torbay Council Climate Change Action Plan - Torbay Council](#)
- [Greener Way for Our Bay - Torbay Council](#)
- [Council Business Plan 2024/27 - Torbay Council - Priority P4: Protect and enhance our lived, built and natural environments, including our green spaces & Priority P3: Maximise heritage and cultural opportunities for the enjoyment and benefit of residents and visitors](#)
- [Devon, Plymouth and Torbay Local Nature Recovery Strategy](#)
- [SWISCo Business Plan 2024-2029 .pdf](#)
- [Torbay Port Masterplan- Addendum 2019-2024.pdf](#)
- [Green Infrastructure Delivery Plan](#)
- [Torbay Food Risk Management Strategy 2015.pdf](#)
- [Torbay Local Plan 2012-2030 - Torbay Council](#)

6. Introduction

- 6.1. The Natural Environment and Rural Communities (NERC) Act 2006 placed a duty on public authorities to 'have regard' to conserving biodiversity in the exercise of their functions. Section 102 of the Environment Act 2021 strengthened the NERC duty to cover the enhancement, as well as the conservation, of biodiversity. The strengthened duty requires Torbay Council to periodically consider what actions it can take to conserve and enhance biodiversity and then take that action. This came into force in January 2023. The Environment Act 2021 also included a requirement for Local Authorities and Local Planning Authorities to publish a written report detailing how they have complied with this legal duty (within the set reporting period January 2024-January 2026).
- 6.2. The Biodiversity Duty Report must be written in accordance with the Section 40A amendment of the Environment Act 2021, and the "Reporting your biodiversity duty actions" guidance provided by DEFRA.
- 6.3. In accordance with Section 40A (Appendix B) of the Natural Environment and Rural Communities Act 2006 (as amended by Environment Act 2021), the biodiversity report must include:
- a summary of the actions which the authority has taken over the period covered by the report
 - a summary of the authority's plans for complying with those duties over the period of five years following the period covered by the report.
 - any quantitative data required to be included in the report by regulations under subsection (8)(b) (The Secretary of State has not provided specific instructions nor requirements for the biodiversity duty report).
 - any other information that the authority considers it appropriate to include in the report
- 6.4. For local planning authorities, biodiversity duty reports must also contain:
- a summary of the action taken by the authority in carrying out its functions under Schedule 7A to the Town and Country Planning Act 1990 (biodiversity gain as condition of planning permission) over the period covered by the report
 - information about any biodiversity gains resulting or expected to result from biodiversity gain plans approved by the authority during that period, and
 - a summary of the authority's plans for carrying out those functions over the five-year period following the period covered by the report.
- 6.5. The current Report should build on the 'first consideration' of what action the Council has corporately made for biodiversity from 1st January 2024. This was largely embedded within the Council's Climate Change Action Plan 2024-2026, the Torbay Local Plan (2012-2030) and other Council framework documents.
- 6.6. The Biodiversity Duty Report therefore draws from internal strategies, policies and procedures with service level contributions - key elements of how their identified actions align with the Biodiversity Duty Requirements are set out in Table 1, Appendix 1.

- 6.7. The some key future actions within the Biodiversity Duty Report, that the Council will seek to deliver, are set out in Table 2 Appendix 2.
- 6.8. Regarding the Biodiversity Net Gain (BNG) specific reporting requirements for Local Planning Authorities, at the time of writing this report Torbay Council has determined a total of 17 BNG-applicable planning applications. Of these, 5 Biodiversity Gain Plans have been approved, with the necessary conditions or Section 106 obligations secured to ensure the required 30-year monitoring period.

7. Options under consideration

- 7.1. Option 1: There are no statutory alternatives to producing this Biodiversity Duty Report. It is also an opportunity to highlight the service level actions that have already taken place to contribute towards increasing biodiversity. Failure to produce a Report would breach legal obligations.

8. Financial Opportunities and Implications

- 8.1. Operational Delivery Risk: While the Biodiversity Duty Report itself does not carry direct financial implications, the implementation of its objectives may require resources, coordination across services, and external funding. There is a risk that insufficient capacity or funding could delay or limit delivery of biodiversity actions.
- 8.2. Staff time will be required to deliver the various objectives within the Biodiversity Duty Report and various corporate strategies.
- 8.3. The implementation of this Report could carry potential costs such as project funding for individual actions as part of the delivery of objectives set out in the 'future actions' section. Funding approvals for these activities would need to be sought by relevant directorates in due course and a business case put forward. There will also be the opportunity for partnership collaborations, external funding applications and central government funding as part of the Local Nature Recovery Strategy implementation and delivery.

9. Legal Implications

- 9.1. By law, local authorities and planning authorities are required to produce and publish a biodiversity report every five years as a minimum (beginning with the day after the last day of the period covered by its most recent biodiversity report) in order to comply with the biodiversity duty set out in the Environment Act 2021 (S. 40A)
- 9.2. Section 40(A1) of the Natural Environment and Rural Communities Act 2006 (as amended by the Environment Act 2021) sets out the general biodiversity objective (also known as the enhanced biodiversity duty) which is the conservation and enhancement of biodiversity in England through the exercise of functions in relation to England. Section 40(1) provides that a public authority which has any functions exercisable in relation to England, such as the council, must from time to time consider what action the authority can properly take,

consistently with the proper exercise of its functions, to further the general biodiversity objective.

- 9.3. The first consideration for the purposes of section 40(1) must be completed by the council no later than 1 January 2024. Each subsequent consideration under section 40(1) must be no more than five years after the completion of previous consideration by the council. After undertaking its consideration of what action it can properly take, in accordance with section 40(1A), the council must (unless it concludes there is no new action it can properly take) determine or review such policies and specific objectives as it considers appropriate for taking action to further the general biodiversity objective, and take such action as it considers appropriate, in the light of those policies and objectives, to further that objective.
- 9.4. The Council is required under section 40A of the Natural Environment and Rural Communities Act 2006 (as amended by the Environment Act 2021) to report on the actions it has taken to comply with its duties under sections 40(1) and 40(1A). This report must contain, among other things, a summary of the action the authority has taken over the period covered by the report for the purposes of complying with its duties under section 40(1) and 40(1A) and a summary of the council's plans for complying with these duties over the next five years.
- 9.5. By law, the report must include:
- a summary of the action Torbay Council has taken to comply with the biodiversity duty;
 - how Torbay plans to comply with the biodiversity duty in the next reporting period;
 - any other information you consider appropriate.
- 9.6. Reports from local planning authorities must also include the following biodiversity net gain (BNG) information:
- the actions that have been carried out to meet BNG obligations;
 - details of BNG resulting, or expected to result, from biodiversity gain plans you've approved;
 - how you plan to meet BNG obligations in the next reporting period.
- 9.7. DEFRA advises that councils upload their biodiversity duty report to their website or public document repository to ensure that it is accessible to the public. DEFRA will reference these reports in future reviews of the Environmental Improvement Plan but does not require direct submission.

10. Engagement and Consultation

- 10.1. Each existing Council strategy has been subject to its own consultation process.
- 10.2. In the context of the Local Nature Recovery Strategy numerous key partners were engaged with including (but not exclusive to): Natural England, Devon Wildlife Trust, community groups and societies such as CPRE (Campaign for the Protection of Rural England) and South West Water.

11. Procurement Implications

- 11.1. The implementation of the actions set out within the Biodiversity Report could involve procurement implications. Adherence to the Procurement Act would be required of the relevant directorates in due course.

12. Protecting our naturally inspiring Bay and tackling Climate Change

- 12.1. Conserving and enhancing biodiversity is one of the keys to tackling climate change. Publishing a Biodiversity Duty Report not only ensures we are compliant with legislation but will also help us see the impact of our actions and set a benchmark for further progress towards climate and nature targets.
- 12.2. There are many positive environmental and climate change implications of this report, many of which are detailed within the document. These objectives will contribute greatly towards giving Torbay Council positive steps towards the mitigation, and adaptation to climate change. This report will come under the overarching umbrella of Sustainability and Climate Change and form a pillar towards our natural environment aspirations and duties.

13. Associated Risks

- 13.1. There is a risk of failing to comply with the biodiversity duty if the biodiversity report is not published within 12 weeks of the reporting period end date of 1st January 2026.
- 13.2. Statutory Compliance Risk: The Council is legally required under the Environment Act 2021 to report on actions taken to conserve and enhance biodiversity. Failure to produce and publish this report would constitute a breach of statutory obligations, exposing the Council to reputational and legal risk.
- 13.3. Operational Delivery Risk: While the report itself does not carry direct financial implications, the implementation of its objectives may require resources, coordination across services, and external funding. There is a risk that insufficient capacity or funding could delay or limit delivery of biodiversity actions.
- 13.4. Reputational Risk: As DEFRA intends to reference local authority biodiversity reports in future reviews of the Environmental Improvement Plan, failure to produce a comprehensive and forward-looking report could impact the Council's reputation among peers, partners, and the public.
- 13.5. Environmental Risk: Not acting on the objectives outlined in the report could result in missed opportunities to mitigate biodiversity loss, climate change impacts, and ecological degradation in Torbay which may have long-term consequences for the local environment and community wellbeing.
- 13.6. Partnership Risk: The report outlines collaboration with external partners. Failure to maintain these partnerships or align with sub-regional strategies (e.g., Local Nature Recovery Strategy) could hinder delivery and funding opportunities.

14. Equality Impact Assessment

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 Page 136	<p>18 per cent of Torbay residents are under 18 years old.</p> <p>55 per cent of Torbay residents are aged between 18 to 64 years old.</p> <p>27 per cent of Torbay residents are aged 65 and older.</p>	<p>Positive:</p> <p>Older adults: Reviews and longitudinal studies indicate that green space and street trees can promote physical activity, social contact and better self-rated health for middle-aged and older adults, and can reduce heat-related morbidity and mortality in hotter periods</p> <p>Increasing canopy cover and nature-based cooling in neighbourhoods where older people live responds to evidence that they are particularly vulnerable to climate-related risks such as heatwaves</p> <p>Young people: see Child Friendly section below</p>	<p>Accessibility audits and engagement with disabled residents and representative groups are needed to ensure that paths, entrances, seating, signage and facilities are inclusive, and that sensory planting and quiet areas are designed with neurodivergent users in mind</p>	<p>- Monitoring: Equality impacts will be undertaken for specific projects within the action plans of the relevant strategies, by the relevant departments.</p>
Carers	<p>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.</p>	<p>Positive</p> <p>Meta-analyses and scoping reviews indicating that nature exposure produces short term improvements in mood, stress and quality of life for adults with mental illness, and broader mental health benefits across diagnostic groups</p>		

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.	Positive Meta-analyses and scoping reviews indicating that nature exposure produces short term improvements in mood, stress and quality of life for adults with mental illness, and broader mental health benefits across diagnostic groups		
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.	There is very limited peer reviewed evidence specifically on trans and non-binary people's use of green space. Existing research on public space suggests that trans and non-binary people may face harassment or exclusion in public settings, but this is not yet well studied for parks and nature spaces		
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.	No differential impact No impacts have been identified specific to this equality group.		
Pregnancy and maternity	Over the period 2010 to 2021, the rate of live births (as a proportion of	Positive: Multiple systematic reviews and meta-analyses show that there is some evidence that residential greenness is associated with healthier		

	<p>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.</p>	<p>pregnancy outcomes, including higher average birthweight and lower risk of preterm birth and small for gestational age births</p>		
<p>Page 138</p>	<p>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.</p>	<p>Positive : UK analyses showing that people in more deprived areas and many ethnic minority communities have less access to high quality green space and are more exposed to extreme heat and environmental risks, which increases health inequalities.</p>		
<p>Religion and belief</p>	<p>64.8% of Torbay residents who stated that</p>	<p>No differential impacts for this protected characteristic have been identified at strategy level</p>		

	they have a religion in the 2021 census.			
Sex	51.3% of Torbay's population are female and 48.7% are male	No differential impacts		
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.	No differential impacts		
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.	No differential impacts (see Public Health Section)		
Additional considerations				
Socio-economic impacts (Including		Positive: Evidence that neighbourhood green space can have particularly strong protective mental health effects for disadvantaged groups.		

impacts on child poverty and deprivation)				
Public Health impacts (Including impacts on the general health of the population of Torbay)		Positive: Systematic reviews and meta-analyses showing that exposure to nature and urban green space is consistently associated with improvements in mental health outcomes across age groups, including reduced depression and anxiety and improved quality of life		
Human Rights impacts		No differential 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.	Positive: Systematic reviews showing that access to green space supports children's mental wellbeing, behaviour and cognitive development, and that outdoor learning in green environments benefits attention and academic performance. Systematic reviews show that access to green space is associated with improved mental wellbeing, reduced stress, better behaviour and enhanced cognitive development and academic performance in children. School-based studies link greener school environments to gains in working memory and attention		

15. Cumulative Council Impact

15.1. The implementation of the approach set out in this report could carry potential costs such as project funding for individual actions as part of the delivery of objectives set out in the future actions table. Funding approvals for these activities would need to be sought by relevant directorates in due course and a business case put forward. There will also be the opportunity for partnership collaborations, external funding applications and central government funding as part of the Local Nature Recovery Strategy implementation and delivery (refer to section 8 of the report above).

16. Cumulative Community Impacts

16.1. (Studies of environmental and health inequalities show that disadvantage often overlaps, for example where low income, ethnic minority status, gender and disability coincide, and that these groups can experience the highest exposure to environmental risks (through climate change impacts) and the lowest access to green space/ natural spaces .

16.2. Where appropriate, the Biodiversity Duty Action Plans should prioritise improvements that also increase equitable access to nearby, good quality green space and canopy cover in areas of greatest need. By embedding equity into site prioritisation, design and engagement, the programmes should ensure that those facing multiple disadvantages can share in the benefits.

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Biodiversity Duty Report

Appendix 1

Table 1: Example Torbay Council Policies and Objectives and how their identified actions align with the Biodiversity Duty Requirements, and those actions that have been delivered between January 2024 and January 2026.

Policies & Objectives	Summary	Actions identified	Actions which have been delivered
<p>Torbay Council Community and Corporate Plan 2023-2043</p>	<p>Commits the Council “<i>to protect and enhance our natural environment</i>” and “<i>work in partnership to address the climate emergency and create a sustainable future</i>”</p> <p>This document recognises the importance of protecting and enhancing Torbay’s natural environment through the Council’s mission and approach.</p> <p>Wider corporate policy framework and other strategies (such as the Local Plan below) contributes to the delivery of the Corporate Plan and includes detailed actions.</p>	<p>Corporate Priority Protect and enhance our lived, built and natural environments, including our green spaces.</p>	<p>See below – actions to deliver improvements in the natural environment more specifically delivered through the strategies below.</p>
<p>Torbay Council Climate Change Action Plan 2024-2026</p>	<p>This Action Plan primarily focuses on what the Council will do reduce it’s own carbon dioxide emissions.</p> <p>It has been developed by many officers from across the Council, SWISCo and Torbay Harbour Authority, with support from members, and focusses</p>	<p>Install new streetlighting control system and full LED rollout to cut energy and carbon.</p> <p>Carry out whole-building decarbonisation assessments for 10 worst- performing- buildings.</p> <p>Introduce a new climate & environment impact assessment tool for all council construction project</p>	<p>Council have approved a new streetlighting control management system. Street lighting upgrades to LEDs to reduce energy use has been rolled out. The installation of a control management system and more energy efficient lighting will deliver significant carbon savings. Between 1st April 2019 – 31 March 2025 consumption reduced by 50% from</p>

	on the areas of the Council where most carbon emissions arise from. These include the operation of our estate, fleet and business travel. As a wholly owned company of the Council, who deliver a range of services for the Council, actions that relate to SWISCo are also included in this action plan.	Develop actions to reduce carbon from staff business travel, including replacing grey fleet use Refresh the Environment & Carbon Neutral Policy	4,912,041kwh to 2,437,007kwh. The reduction in energy consumption can be attributed partly to the replacement of over 60% of the council's streetlight inventory from Holophane lanterns to more energy efficient LED. This resulted in carbon emissions reducing from 903 tonnes to 505 tonnes, a 44% reduction. Purchase of three electric fleet vehicles.
Torbay Council Environment and Carbon Neutral Policy	Sets out how Torbay Council will change the way it works to minimise environmental impacts and achieve its climate commitments. It applies to all Council employees, SWISCo, and all commissioned services.	Reduce carbon emissions Protect and enhance the natural environment (embedding the NERC duty into corporate policy) Build climate resilience Measure and report progress	Policy adopted in 2023 and implemented from then onwards. All staff must support and deliver this policy wherever possible in their job roles. Line managers are expected to challenge their teams and individuals to ensure this policy is adhered to.
Greener Way For Our Bay (GWFOB) Framework 2024 - 2027	Forms Torbay's wider climate and nature recovery framework and GWFOB identifies <i>nature-based actions</i> among its ten priority areas for climate and nature recovery	Greener Way For Our Bay Framework sets out ten priority objectives. Of these, three directly relate to conserving and enhancing biodiversity, and two indirectly support biodiversity through climate adaptation and nature based- action.	New Draft Local Plan out for public consultation including net zero and climate resilient design and construction standards 10 climate related community engagement sessions to bolster awareness and more local action Range of climate action and support for schools including two new Miyawaki forests, three rainwater gardens and classroom activities. All of which also help reduce localized flooding
SWISCo Business Plan 2024-2029	Sets out the mission, objectives, and operational priorities for SWISCo as Torbay Council's wholly owned company	Commitment to maximising biodiversity and carbon sequestration opportunities (OB6) Biodiversity centred- Park Management Plans (PG1)	In 2024/25, SWISCo recycled over 700 tonnes of seaweed into compost for community use. Commercial recycling rose to 20.5%.

		Deliver an inclusive Green Infrastructure strategy. (Tree and woodland strategy and Open Spaces Strategy). (PG3)	SWISCo achieved EA permit compliance across all sites and advanced feasibility work on a new Waste Transfer Station, which will improve environmental compliance and expand reuse and recycling capacity. Reducing emissions through implementation of electric street sweepers and barrows. Secured council approval to implement dynamic LED street lighting.
Torbay Local Plan 2012 – 2030 (adopted)	Sets out the strategic planning framework for how Torbay will grow, change, and protect its natural and built environment up to 2030	<ul style="list-style-type: none"> - Protect and enhance Torbay’s countryside, landscape and natural environment through designated areas (Countryside Areas, Urban Landscape Protection Areas, Undeveloped Coast). - Safeguard heritage and nature conservation, including Conservation Areas and European Protected Sites. - Allocate land for Country Parks and green infrastructure, supporting biodiversity and access to nature. - Manage development to minimise environmental damage and ensure resilience to climate change. 	Continued protection of designated Countryside Areas, Urban Landscape Protection Areas, and the Undeveloped Coast through development management decisions. Delivery of biodiversity-related planning obligations through the Local Plan’s evidence base (e.g., HRA requirements, mitigation for European Sites) Delivery of development which incorporates biodiversity enhancements, mitigation and provision of open spaces for public use. Support for nature conservation measures in identified sites including Berry Head & South Hams SAC (as part of Local Plan HRA updates)
Green Infrastructure Delivery Plan 2010	The Vision for Torbay’s Green Infrastructure Delivery Plan is: “To build a sustainable Torbay for the future that protects and enhances the health and beauty of our natural environment, serves the needs	The strategic aims of the Plan are to: Enhance biodiversity and landscape character; Improve economic prosperity and support regeneration of the Bay; Benefit people and create healthy communities; Adapt to climate change; Support a low carbon	Target BL15. Ensure biodiversity standards e.g. provision for urban biodiversity are set out in developer guidance and validation documents: Updated Planning department’s Local Validation List to require all development proposals to submit the “Torbay Wildlife and Geology Checklist”

	of local people and supports economic development”	economy; Safeguard ecosystem services	
Devon, Plymouth and Torbay Local Nature Recovery Strategy	A statutory strategy for Devon, Plymouth and Torbay required under the Environment Act 2021. It sets out local biodiversity priorities, a mapped network of important habitats, and agreed actions to support nature’s recovery across the whole county. Final publication expected in March 2026 .	Make space for wildlife everywhere: provide shelter, nesting sites and food Delight in the unruly! Reduce emissions and adapt to climate change Look after Devon’s soils Control invasive species Minimise light pollution Minimise pollution and biocides Minimise recreational disturbance and litter	Cabinet (17 th February 2026) provided consent for DCC to publish the Devon Local Nature Recovery Strategy.
Devon Tree and Woodland Strategy	A county-wide strategy (covering Devon, Plymouth and Torbay) that sets out a long-term plan to protect, expand, improve and manage Devon’s trees, hedges and woodlands up to 2050.	Increase canopy cover by 4ha per year in Torbay to reach 2050 canopy cover target Expand, protect, improve and restore woodland habitats, including Devon’s temperate rainforest, orchards, hedgerows and ancient woodlands. Enhance woodland resilience to climate change (warmer, wetter winters; hotter, drier summers)	Strategy adopted region-wide—Torbay now working with partners to determine its specific contributions toward tree-cover expansion. Existing Torbay tree-planting programmes (e.g., via Plymouth and South Devon Community Forest, community planting schemes) already contributing towards the Strategy target of increasing tree cover.
Devon Biodiversity Net Gain Strategic approach	Biodiversity Net Gain (BNG) became mandatory in England on 12 February 2024. BNG is a requirement under the Environment Act 2021, which amended the Town and Country Planning Act 1990. It mandates that developers must leave biodiversity in a measurably better state than before development, with a	Cross boundary BNG working group to ensure consistency throughout Devon. Updates to internal processes and development management Identification of potential habitat creation opportunities	A dedicated BNG officer. Regular BNG group meetings. The Council contribute to a joint Devon-wide BNG guidance website for developers, landowners interested in providing BNG This guidance aligns with the Council’s updated validation checks. Officers received several training sessions since early 2024 covering legal frameworks, planning roles, and BNG metrics.

	minimum 10% net gain in biodiversity value		To assist with the delivery of BNG conditions and support BNG delivery through development. Torbay Council is investigating the possibility of habitat banking on its land and looking at sites for their potential to provide offsite BNG units.
Municipal Waste / Resource Management Strategy (2020-2023) -out of date but still applicable	The Torbay Resources and Waste Strategy seeks to support a path towards carbon neutrality by 2050 and to consider the amount of embedded carbon in the materials that are collected for recycling and the environmental benefit of recycling.	<p>Prioritising waste prevention, reuse, and recycling, reducing ecological pressures</p> <p>Protecting the natural environment through improved waste systems Eliminating landfill impacts through Zero Waste to Landfill achievement</p> <p>Strengthening environmental enforcement to safeguard habitats</p> <p>Supporting climate mitigation Reducing pollution, littering, and fly tipping that harm wildlife</p> <p>Educating residents and businesses on sustainable behaviours</p>	Yearly increases in annual recycling rate (0.5% increase in 2024/25 compared to the previous year) and garden waste subscriptions
Torbay Port and Harbour Masterplan (addendum) 2019-2024	The Masterplan (2013) provides a longterm framework for the sustainable development and management of Tor Bay Harbour and the harbours at Brixham, Paignton and Torquay, informing future land use-, marine activity, and environmental stewardship.	<p>Ongoing efforts to minimise the impact of human activity on Tor Bay’s natural environment – while also allowing, where possible, for those activities to take place. The Harbour Authority have been closely involved in several Bay-wide initiatives to improve sustainability. Highlights environmental measures to ensure the Harbour Authority makes a</p>	<p>Partnership working with marine stakeholders has supported local biodiversity initiatives, including eco-mooring and anchoring improvements (e.g., Advanced Mooring Systems deployed with partners in Torbay), reducing physical seabed damage. Sensitive Habitat Marker Buoys and Voluntary No-Anchor Zones implemented</p>

	Port area includes environmental designations, supporting the protection of marine and coastal biodiversity	positive contribution to the environment and amenity, including sustainable harbour management. Commits to sustainable management of maritime activities, including fishing, eco-tourism, and marine businesses, which supports healthy ecosystems	in seagrass areas, protecting key marine habitats such as seagrass meadows and seahorse habitat.
Torbay Council Local Flood Risk Management Strategy 2015	This LFRMS highlights the steps that are to be taken to improve knowledge of flood risk within Torbay, to work with other FRMA's and the public towards reducing the risks whilst aiming to balance the need of communities, the economy and the environment.	To take a more sustainable approach to flood risk management at a catchment level; considering natural land use management techniques, such as managing flood plains and restoring wetlands and upland woodlands. SuDs are also an opportunity to ensure that amenity and biodiversity are considered with the same importance as managing volumes of water	Implementation of the Torbay SUDS Design Guide suds-design-guide-version-20_sept22.pdf that support sustainable drainage methods that protect natural flow regimes and can provide a natural habitat for wildlife

Biodiversity Duty Report

Appendix 2: Summary/example actions from corporate plans and strategies and within the Biodiversity Duty Report, that the Council will seek to deliver, are set out in Table 2 below.

Table 2: Example Torbay Council future actions identified within the Biodiversity Duty Report to be delivered between January 2026 and January 2031

Action	Service Area Responsible	Estimated Delivery Timeframe
Allocate additional resource to lead on strategic environmental matters and compliance with the Environment Act 2021 (subject to leadership approval).	Place Strategy	12–18 months
Identify how the NERC Duty should feed into Torbay Council service plans and SWISCo. Business Plan	Corporate Strategy / All Service Leads	6–12 months
Embed the NERC Duty into each Torbay Council service plan (subject to leadership approval)	Corporate Strategy / Senior Leadership	12–24 months, then ongoing
Identify how the NERC Duty should feed into the SWISCo Business Plan	SWISCo	6–12 months
Embed the NERC Duty into the SWISCo Business Plan and Service Level Agreement with Torbay Council (subject to leadership approval)	SWISCo/Senior Leadership	12–24 months, then ongoing
Strategic overview of the actions that Torbay Council can take to help deliver the Devon LNRS	Pride in Place /SWISCo	6-12 months, then ongoing
Act on LNRS proposals by creating or improving habitat on land we manage	Place Strategy / SWISCo/ Estates	ongoing

Develop Parks Improvement Strategies including biodiversity actions (incorporating the Devon LNRS)	SWISCo	12–24 months
Continue developing a Green & Blue Infrastructure (GBI) Strategy	Spatial Planning / SWISCo / Torbay Heritage Places / Public Health	36-48 months
Investigate creation of a Habitat Bank and habitat banking potential/opportunities on Council land (SWISCo Business Plan)	Spatial Planning / SWISCo / Finance / Estates	24 months
Produce and begin delivery of Management Plans for all for all Council-owned and managed SSSIs	SWISCo / Spatial Planning / Geopark / Estates	12–36 months
Produce Management Plans for all Council-owned and managed County Wildlife Sites	SWISCo / Spatial Planning / Estates	12–48 months
Develop and deliver the Berry Head Management Plan (restoring SSSI features)	SWISCo / Spatial Planning / Estates	6 months for plan; multi-year delivery
Scale up tree planting, woodland creation, street tree planting and park greening (via the Plymouth and South Devon Community Forest)	SWISCo / Strategic Planning	Multi-year delivery commencing in 2026/2027
Include a new section on the NERC Duty and how the Council can take action to preserve and enhance biodiversity within the iLearn climate change training	Corporate Training / HR / Strategic Planning	6–12 months
Finalise a system for monitoring Biodiversity Gains approved through the planning system	Planning / Business Support	6-12 months

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Draft Biodiversity Duty Report

Jan 2026 to Jan 2031

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Background and legal context

The Environmental Improvement Plan (EIP23), published in January 2023, sets out government plans for significantly improving the natural environment. By 2030, the government has committed to; halt the decline in species abundance & protect 30% of UK land. By 2042, the government has committed to:

- increase species abundance by at least 10% from 2030, surpassing 2022 levels.
- restore or create at least 500,000 ha of a range of wildlife rich habitats.
- reduce the risk of species extinction.
- restore 75% of our one million hectares of terrestrial and freshwater protected sites to favourable condition, securing their wildlife value for the long term.

The Environment Act 2021 also introduces the strengthened 'biodiversity duty', such that public authorities who operate in England must consider what they can do to conserve and enhance biodiversity in England. This means that public authorities must:

- Consider what can be done to conserve and enhance biodiversity.
- Agree policies and specific objectives based on those considerations.
- Act to deliver those policies and achieve objectives

Local authorities (excluding parish councils) must also write and publish a biodiversity report. For local authorities and local planning authorities, the end date of the first reporting period should be no later than 1 January 2026. After this, the end date of each reporting period must be within 5 years of the end date of the previous reporting period. Councils must publish all reports within 12 weeks of the reporting period end date.

By law, the biodiversity report must include: a summary of the action taken to comply with the biodiversity duty:

- the policies and objectives set to meet our biodiversity duty.
- the actions completed, either alone or in partnership with others, which benefit biodiversity.
- Explain how the LA has taken account of local nature recovery strategies, protected site strategies and species conservation strategies.
- Set out how it plans to comply with the biodiversity duty in the next reporting period (five years)
- Set out the actions The Council has carried out to meet biodiversity net gain obligations.

- Provide details of biodiversity net gains resulting, or expected to result, from biodiversity gain plans Torbay Council have approved.
- Detail how it plans to meet biodiversity net gain obligations in the next reporting period.
- Any other information considered appropriate

Chapter 1: Policies, Objectives and Actions to meet our Biodiversity Duty

- 1.1 As set out above, the Environment Act 2021 requires all public authorities to consider what they can do to conserve and enhance biodiversity. This report communicates how Torbay Council has complied with the 'biodiversity duty' between the 1st January 2024 and the 31st December 2025 and the future actions identified to be delivered between January 2026 and January 2031. This first chapter sets out how the Council's existing policies and strategies contribute towards meeting the strengthened Biodiversity Duty.
- 1.2 Torbay Council is a unitary authority responsible for delivering a range of public services to residents and businesses in Torbay, with a Vision for '...a healthy, happy and prosperous Torbay.' Our strategic themes are: Community and People; Pride in Place and Economic Growth.
- 1.3 Our core functions include: education, social services, housing, waste management, planning, environmental health and public health; and Tor Bay Harbour Authority. To a greater or lesser degree, these various functions provide opportunities to benefit biodiversity.
- 1.4 This current report should build on the 'first consideration' of what action the Council has corporately made for biodiversity from 1st January 2024. This was largely embedded within the Council's Climate Change Action Plan 2024-2026, the Torbay Local Plan (2012-2030), the Community and Corporate Plan and other Council framework documents¹ listed below:
- [Community and Corporate Plan - Torbay Council](#)
 - [Torbay Council Climate Change Action Plan - Torbay Council](#)
 - [Greener Way for Our Bay - Torbay Council](#)
 - [Council Business Plan 2024/27 - Torbay Council - Priority P4: Protect and enhance our lived, built and natural environments, including our green spaces & Priority P3: Maximise heritage and cultural opportunities for the enjoyment and benefit of residents and visitors](#)
 - [Devon, Plymouth and Torbay Local Nature Recovery Strategy](#)

¹ Adult Social Care Strategy; Community Engagement and Empowerment Strategy; Corporate Asset Management Plan; Corporate Capital Strategy; Corporate Parenting Strategy; Community and Corporate Plan; Domestic Abuse and Sexual Violence Strategy; Economic Growth Strategy; Housing Strategy; Gambling Act Policy/Statement of Principles; Joint Health and Wellbeing Strategy; Licensing Policy; Local Transport Plan; Development Plan; Strategic Agreement between Torbay Council, One Devon Integrated Care Board and Torbay and South Devon NHS Foundation Trust; Treasury Management Strategy; and Resource Management and Waste Strategy.

- [SWISCo Business Plan 2024-2029 .pdf](#)
- [Torbay Port Masterplan- Addendum 2019-2024.pdf](#)
- [Green Infrastructure Delivery Plan](#)
- [Torbay Food Risk Management Strategy 2015.pdf](#)
- [Torbay Local Plan 2012-2030 - Torbay Council](#)

1.5 This section of the Biodiversity Duty Report therefore draws from various strategies, policies and procedures with service level contributions.

1.6 Table 1 below, includes some examples of Torbay Council policies and objectives in our Policy Framework Documents including the Climate Action Plan. It lists how their identified actions align with the Biodiversity Duty Requirements, and those actions that have been delivered between January 2024 and January 2026.

Table 1 Example Torbay Council Policies and Objectives and how their identified actions align with the Biodiversity Duty Requirements, and those actions that have been delivered between January 2024 and January 2026

Policies & Objectives	Summary	Actions identified	Actions which have been delivered
<p>Torbay Council Community and Corporate Plan 2023-2043</p>	<p>Commits the Council “to protect and enhance our natural environment” and “work in partnership to address the climate emergency and create a sustainable future”</p> <p>This document recognises the importance of protecting and enhancing Torbay’s natural environment through the Council’s mission and approach.</p> <p>Wider corporate policy framework and other strategies (such as the Local Plan below) contributes to the delivery of the Corporate Plan and includes detailed actions.</p>	<p>Corporate Priority Protect and enhance our lived, built and natural environments, including our green spaces.</p>	<p>See below – actions to deliver improvements in the natural environment more specifically delivered through the strategies below</p>
<p>Torbay Council Climate Change Action Plan 2024-2026</p>	<p>This Action Plan primarily focuses on what the Council will do reduce it’s own carbon dioxide emissions.</p> <p>It has been developed by many officers from across the Council, SWISCo and Torbay Harbour Authority, with support from members, and focusses on the areas of the Council where most carbon emissions arise from. These include the operation of our estate, fleet and business travel. As a wholly owned company of the Council, who deliver a range of services for the Council, actions that relate to SWISCo are also included in this action plan.</p>	<p>Install new streetlighting control system and full LED rollout to cut energy and carbon.</p> <p>Carry out whole building decarbonisation assessments for 10 worst performing buildings.</p> <p>Introduce a new climate & environment impact assessment tool for all council construction project</p> <p>Develop actions to reduce carbon from staff business travel, including replacing grey fleet use</p> <p>Refresh the Environment & Carbon Neutral Policy</p>	<p>Council have approved a new streetlighting control management system. Street lighting upgrades to LEDs to reduce energy use has been rolled out. The installation of a control management system and more energy efficient lighting will deliver significant carbon savings.</p> <p>Between 1st April 2019 – 31 March 2025 consumption reduced by 50% from 4,912,041kwh to 2,437,007kwh. The reduction in energy consumption can be attributed partly to the replacement of over 60% of the council’s streetlight inventory from Holophane lanterns to more energy efficient LED. This resulted in carbon emissions reducing from 903 tonnes to 505 tonnes, a 44% reduction.</p> <p>Purchase of three electric fleet vehicles</p>

<p>Torbay Council Environment and Carbon Neutral Policy</p>	<p>Sets out how Torbay Council will change the way it works to minimise environmental impacts and achieve its climate commitments. It applies to all Council employees, SWISCo, and all commissioned services</p>	<p>Reduce carbon emissions</p> <p>Protect and enhance the natural environment (embedding the NERC duty into corporate policy)</p> <p>Build climate resilience</p> <p>Measure and report progress</p>	<p>Policy adopted in 2023 and implemented from then onwards.</p> <p>All staff must support and deliver this policy wherever possible in their job roles.</p> <p>Line managers are expected to challenge their teams and individuals to ensure this policy is adhered to</p>
<p>Greener Way For Our Bay (GWFOB) Framework 2024 - 2027</p>	<p>Forms Torbay’s wider climate and nature recovery framework and GWFOB identifies nature-based actions among its ten priority areas for climate and nature recovery</p>	<p>Greener Way For Our Bay Framework sets out ten priority objectives. Of these, three directly relate to conserving and enhancing biodiversity, and two indirectly support biodiversity through climate adaptation and nature based action</p>	<p>New Draft Local Plan out for public consultation including net zero and climate resilient design and construction standards</p> <p>10 climate related community engagement sessions to bolster awareness and more local action</p> <p>Range of climate action and support for schools including the commencement of two new Miyawaki forests, three rainwater gardens and classroom activities. All of which also help reduce localised flooding</p>
<p>SWISCo Business Plan 2024-2029</p>	<p>Sets out the mission, objectives, and operational priorities for SWISCo as Torbay Council’s wholly owned company</p>	<p>Commitment to maximising biodiversity and carbon sequestration opportunities (OB6)</p> <p>Biodiversity centred- Park Management Plans (PG1)</p> <p>Deliver an inclusive Green Infrastructure strategy. (Tree and woodland strategy and Open Spaces Strategy). (PG3)</p>	<p>In 2024/25, SWISCo recycled over 700 tonnes of seaweed into compost for community use. Commercial recycling rose to 20.5%.</p> <p>SWISCo achieved EA permit compliance across all sites and advanced feasibility work on a new Waste Transfer Station, which will improve environmental compliance and expand reuse and recycling capacity.</p> <p>Reducing emissions through implementation of electric street sweepers and barrows. Secured council approval to implement dynamic LED street lighting</p>

<p>Torbay Local Plan 2012 – 2030 (adopted)</p>	<p>Sets out the strategic planning framework for how Torbay will grow, change, and protect its natural and built environment up to 2030</p>	<ul style="list-style-type: none"> - Protect and enhance Torbay’s countryside, landscape and natural environment through designated areas (Countryside Areas, Urban Landscape Protection Areas, Undeveloped Coast). - Safeguard heritage and nature conservation, including Conservation Areas and European Protected Sites. - Allocate land for Country Parks and green infrastructure, supporting biodiversity and access to nature. - Manage development to minimise environmental damage and ensure resilience to climate change. 	<p>Continued protection of designated Countryside Areas, Urban Landscape Protection Areas, and the Undeveloped Coast through development management decisions.</p> <p>Delivery of biodiversity-related planning obligations through the Local Plan’s evidence base (e.g., HRA requirements, mitigation for European Sites)</p> <p>Delivery of development which incorporates biodiversity enhancements, mitigation and provision of open spaces for public use.</p> <p>Support for nature conservation measures in identified sites including Berry Head & South Hams SAC (as part of Local Plan HRA updates)</p>
<p>Green Infrastructure Delivery Plan 2010</p>	<p>The Vision for Torbay’s Green Infrastructure Delivery Plan is: “To build a sustainable Torbay for the future that protects and enhances the health and beauty of our natural environment, serves the needs of local people and supports economic development”</p>	<p>The strategic aims of the Plan are to: Enhance biodiversity and landscape character; Improve economic prosperity and support regeneration of the Bay; Benefit people and create healthy communities; Adapt to climate change; Support a low carbon economy; Safeguard ecosystem services</p>	<p>Target BL15. Ensure biodiversity standards e.g. provision for urban biodiversity are set out in developer guidance and validation documents:</p> <p>Updated Planning department’s Local Validation List to require all development proposals to submit the “Torbay Wildlife and Geology Checklist”</p>

<p>Devon, Plymouth and Torbay Local Nature Recovery Strategy</p>	<p>A statutory strategy for Devon, Plymouth and Torbay required under the Environment Act 2021. It sets out local biodiversity priorities, a mapped network of important habitats, and agreed actions to support nature’s recovery across the whole county. Final publication expected in March 2026.</p>	<p>Make space for wildlife everywhere: provide shelter, nesting sites and food</p> <p>Delight in the unruly!</p> <p>Reduce emissions and adapt to climate change</p> <p>Look after Devon’s soils</p> <p>Control invasive species</p> <p>Minimise light pollution</p> <p>Minimise pollution and biocides</p> <p>Minimise recreational disturbance and litter</p>	<p>Cabinet (17th February 2026) provided consent for DCC to publish the Devon Local Nature Recovery Strategy.</p>
<p>Devon Tree and Woodland Strategy</p>	<p>A county-wide strategy (covering Devon, Plymouth and Torbay) that sets out a long-term plan to protect, expand, improve and manage Devon’s trees, hedges and woodlands up to 2050.</p>	<p>Increase canopy cover by 4ha per year in Torbay to reach 2050 canopy cover target</p> <p>Expand, protect, improve and restore woodland habitats, including Devon’s temperate rainforest, orchards, hedgerows and ancient woodlands.</p> <p>Enhance woodland resilience to climate change (warmer, wetter winters; hotter, drier summers)</p>	<p>Strategy adopted region-wide— Torbay now working with partners to determine its specific contributions toward tree-cover expansion.</p> <p>Existing Torbay tree-planting programmes (e.g., via Plymouth and South Devon Community Forest, community planting schemes) already contributing towards the Strategy target of increasing tree cover</p>

<p>Devon Biodiversity Net Gain Strategic approach</p>	<p>Biodiversity Net Gain (BNG) became mandatory in England on 12 February 2024. BNG is a requirement under the Environment Act 2021, which amended the Town and Country Planning Act 1990. It mandates that developers must leave biodiversity in a measurably better state than before development, with a minimum 10% net gain in biodiversity value</p>	<p>Cross boundary BNG working group to ensure consistency throughout Devon.</p> <p>Updates to internal processes and development management</p> <p>Identification of potential habitat creation opportunities</p>	<p>A dedicated BNG officer.</p> <p>Regular BNG group meetings.</p> <p>The Council contribute to a joint Devon-wide BNG guidance website for developers, landowners interested in providing BNG</p> <p>This guidance aligns with the Council's updated validation checks. Officers received several training sessions since early 2024 covering legal frameworks, planning roles, and BNG metrics.</p> <p>To assist with the delivery of BNG conditions and support BNG delivery through development.</p> <p>Torbay Council is investigating the possibility of habitat banking on its land and looking at sites for their potential to provide offsite BNG units.</p>
<p>Municipal Waste / Resource Management Strategy (2020-2023) - out of date but still applicable</p>	<p>The Torbay Resources and Waste Strategy seeks to support a path towards carbon neutrality by 2050 and to consider the amount of embedded carbon in the materials that are collected for recycling and the environmental benefit of recycling.</p>	<p>Prioritising waste prevention, reuse, and recycling, reducing ecological pressures</p> <p>Protecting the natural environment through improved waste systems</p> <p>Eliminating landfill impacts through Zero Waste to Landfill achievement</p> <p>Strengthening environmental enforcement to safeguard habitats</p> <p>Supporting climate mitigation</p> <p>Reducing pollution, littering, and fly tipping that harm wildlife</p> <p>Educating residents and businesses on sustainable behaviours</p>	<p>Yearly increases in annual recycling rate (0.5% increase in 2024/25 compared to the previous year) and garden waste subscriptions</p>

<p>Torbay Port and Harbour Masterplan (addendum) 2019-2024</p>	<p>The Masterplan (2013) provides a long term framework for the sustainable development and management of Tor Bay Harbour and the harbours at Brixham, Paignton and Torquay, informing future land use-, marine activity, and environmental stewardship.</p> <p>Port area includes environmental designations, supporting the protection of marine and coastal biodiversity</p>	<p>Ongoing efforts to minimise the impact of human activity on Tor Bay's natural environment – while also allowing, where possible, for those activities to take place. The Harbour Authority have been closely involved in several Bay-wide initiatives to improve sustainability.</p> <p>Highlights environmental measures to ensure the Harbour Authority makes a positive contribution to the environment and amenity, including sustainable harbour management. Commits to sustainable management of maritime activities, including fishing, eco-tourism, and marine businesses, which supports healthy ecosystems</p>	<p>Partnership working with marine stakeholders has supported local biodiversity initiatives, including eco-mooring and anchoring improvements (e.g., Advanced Mooring Systems deployed with partners in Torbay), reducing physical seabed damage.</p> <p>Sensitive Habitat Marker Buoys and Voluntary No-Anchor Zones implemented in seagrass areas, protecting key marine habitats such as seagrass meadows and seahorse habitat.</p>
<p>Torbay Council Local Flood Risk Management Strategy 2015</p>	<p>This LFRMS highlights the steps that are to be taken to improve knowledge of flood risk within Torbay, to work with other FRMA's and the public towards reducing the risks whilst aiming to balance the need of communities, the economy and the environment.</p>	<p>To take a more sustainable approach to flood risk management at a catchment level; considering natural land use management techniques, such as managing flood plains and restoring wetlands and upland woodlands.</p> <p>SuD's are also an opportunity to ensure that amenity and biodiversity are considered with the same importance as managing volumes of water</p>	<p>Implementation of the Torbay SUDS Design Guide suds-design-guide-version-20_sept22.pdf that support sustainable drainage methods that protect natural flow regimes and can provide a natural habitat for wildlife</p>

Chapter 2: Future actions to fulfil our biodiversity duty over the next 5 years.

- 2.1 This Chapter seeks to demonstrate how we incorporate biodiversity considerations into our functions and deliver the Community and Corporate Plan's mission to *'protect and enhance our (built and) natural environment'* and *'address the climate emergency so as to create a sustainable future'*. This will primarily be driven through our policy framework documents including the Torbay Local Plan and the Council's Climate Change Action Plan (CCAP) 2024-2026.
- 2.2 Our Council Business Plan is the delivery plan for our Community and Corporate Plan. Whilst the Community and Corporate Plan sets the council's vision, objectives and priorities for the next twenty years, the Council Business Plan is a more focussed delivery plan of what the Council will undertake through until 2027.
- 2.3 Under the Pride in Place theme, the Council seeks to celebrate and protect the places that make Torbay special, maximising the cultural, heritage and event opportunities for our residents and visitors alike. Working in partnership we will continue to address the climate emergency, so as to create a sustainable future. A priority under this theme includes: *Protect and enhance our lived, built and natural environments, including our green spaces (P5)*.
- 2.4 Another key strategy includes the 'A Greener Way For Our Bay' which is Torbay Climate Partnership's framework and action plan that aims to reduce the Bay's carbon emissions and prepare for a changing climate. It proposes a 10 key actions two of which are particularly related to the Biodiversity Duty copied below:
- *Enjoy and protect our marine and natural environment - projects include a new comprehensive plan to restore and protect natural habitats within Torbay and projects to help our local sea grass thrive*
 - *Work with nature and the local community to prepare for a changing climate - While reducing carbon emissions is essential, Torbay's plan also includes adaptation measures to prepare for climate impacts. This involves assessing risks to public health, infrastructure, and biodiversity, and helping us to prepare and be more resilient*
- 2.5 We seek to embed good ecological practices within our strategies, business plans and services plans; and will also continue to use our influence to motivate others to take action for biodiversity. We have identified key future projects and actions to further biodiversity interests in the next reporting period, as set out in Table 2 below.

Table 2: Example Torbay Council future actions identified to be delivered between January 2026 and January 2031

Action	Service Area Responsible	Estimated Delivery Timeframe
Allocate additional resource to lead on strategic environmental matters and compliance with the Environment Act 2021 (subject to leadership approval).	Place Strategy	12–18 months
Identify how the NERC Duty should feed into Torbay Council service plans and SWISCo. Business Plan	Corporate Strategy / All Service Leads	6–12 months
Embed the NERC Duty into each Torbay Council service plan (subject to leadership approval)	Corporate Strategy / Senior Leadership	12–24 months, then ongoing
Identify how the NERC Duty should feed into the SWISCo Business Plan	SWISCo	6–12 months
Embed the NERC Duty into the SWISCo Business Plan and Service Level Agreement with Torbay Council (subject to leadership approval)	SWISCo/Senior Leadership	12–24 months, then ongoing
Strategic overview of the actions that Torbay Council can take to help deliver the Devon LNRS	Pride in Place /SWISCo	6-12 months, then ongoing
Act on LNRS proposals by creating or improving habitat on land we manage	Place Strategy / SWISCo/ Estates	ongoing
Develop Parks Improvement Strategies including biodiversity actions (incorporating the Devon LNRS)	SWISCo	12–24 months
Continue developing a Green & Blue Infrastructure (GBI) Strategy	Spatial Planning / SWISCo / Torbay Heritage Places / Public Health	36-48 months
Investigate creation of a Habitat Bank and habitat banking potential/opportunities on Council land (SWISCo Business Plan)	Spatial Planning / SWISCo / Finance / Estates	24 months
Produce and begin delivery of Management Plans for all for all Council owned and managed SSSIs	SWISCo / Spatial Planning / Geopark / Estates	12–36 months
Produce Management Plans for all Council-owned and managed County Wildlife Sites	SWISCo / Spatial Planning / Estates	12–48 months

Develop and deliver the Berry Head Management Plan (restoring SSSI features)	SWISCo / Spatial Planning / Estates	6 months for plan; multi year delivery
Scale up tree planting, woodland creation, street tree planting and park greening (via the Plymouth and South Devon Community Forest)	SWISCo / Strategic Planning	Multi-year delivery commencing in 2026/2027
Include a new section on the NERC Duty and how the Council can take action to preserve and enhance biodiversity within the iLearn climate change training	Corporate Training / HR / Strategic Planning	6–12 months
Finalise a system for monitoring Biodiversity Gains approved through the planning system	Planning / Business Support	6-12 months

Chapter 3: Biodiversity Duty for Local Planning Authorities and Biodiversity Net Gain

This chapter includes LPA actions related to BNG as well as other planning actions to conserve and enhance biodiversity in more detail.

- 3.1 By law, LPAs must include the following Biodiversity Net Gain (BNG) information to fulfil their biodiversity reporting duty
- The actions they've carried out to meet BNG obligations
 - Details of BNG resulting, or expected to result, from biodiversity gain plans that have been approved
 - How they plan to meet BNG obligations in the next reporting period

Background for BNG requirements

- 3.2 The Environment Act 2021 and associated regulations amend the Town and Country Planning Act 1990 (TCPA) to make BNG a mandatory condition of planning permission. Major TCPA development has been subject to mandatory BNG since 12 February 2024, and all other TCPA development has been subject to BNG from 2 April 2024 (subject to exemptions).

- 3.3 Relevant developments need to demonstrate that proposals can deliver a minimum 10% uplift in biodiversity value, when compared to the pre-development biodiversity value of the application site. Uplift is calculated using the statutory biodiversity metric. Development cannot commence until BNG has been demonstrated.
- 3.4 Developers will need to submit a biodiversity gain plan (BGP) to the local planning authority for approval, after the grant of planning permission. The BGP document will evidence what measures are being provided to achieve the required uplift in biodiversity value. Under the Environment Act 2021, only three measures are permitted to deliver BNG:
- Onsite habitat enhancements;
 - Registered offsite biodiversity gain; and
 - Purchase of statutory biodiversity credits.
- 3.5 If development is subject to the biodiversity net gain requirement, the application must include information:
- as set out in Article 7 of The Town and Country Planning (Development Management Procedure) (England) Order 2015, and
 - in the Torbay Council local validation list
- 3.6 Where the improvement to biodiversity is on site, the Council will expect:
- it will be in place for a minimum of 30 years, and
 - it will be monitored over this time
- 3.7 It is likely we will use planning conditions or a legal agreement to make sure this is the case. We will also have to provide a report on the status of biodiversity net gain within Torbay at least every five years.

BNG related actions

- 3.8 From 12 February 2024, the Local Planning Authority (LPA) has been applying a mandatory Biodiversity Net Gain Pre-Commencement Condition to all relevant (except exempted) planning applications coming forward. This data has been captured and entered into the corporate planning software (Uniform). Planning applications must provide the relevant information set out in the Torbay Council local validation list.
- 3.9 A completed Devon Biodiversity Net Gain Statement for Validation should include:
- The steps taken to minimise adverse biodiversity impacts in line with the mitigation hierarchy

- The proposed approach to enhancing biodiversity on site (including how the applicant has followed the sequential approach and a justification as to why the proposed approach is the most appropriate);
- Any proposed off site biodiversity enhancement (including the use of biodiversity units and/or national credits) that have been planned or arranged for the development

- 3.10 The LPA has provided online advice and, through the BNG Steering Group worked with officers from other local authorities and Devon County Council (DCC) to provide The Devon Biodiversity Net Gain Guidance Note. This Guidance Note provides advice on calculating and delivering biodiversity net and delivering BNG across all Devon LPAs. It aims to ensure a consistent and efficient approach to Net Gain across Devon. It is relevant for all those involved. This includes the Devon Biodiversity Net Gain Map which can be used to find registered Habitat Banks, those who plan to register as a Habitat Bank and those interested in delivering BNG on their land.
- 3.11 The BNG Steering Group and DCC Ecologists (through our Service Level Agreement) have facilitated Biodiversity Net Gain Training Events and Webinars for Torbay Council Planning Officers.
- 3.12 The LPA has commissioned Devon County Council (Principal Ecologist) to assist in the inspection of BNG eligible planning applications to review the BNG metrics and provide recommendations. The ecologist has provided comment on behalf of the LPA and 5 Biodiversity Net Gain Plans (in the last two years). See table 3 below.
- 3.13 Torbay Council Planning Authority will enter any Section 106 Agreements on the [Torbay Exacom webpages](#) where these are used to secure onsite delivery of BNG. At time of writing, Torbay Council has determined a total of 17 BNG-applicable planning applications and 5 planning applications have had the mandatory BNG Condition applied for on-site BNG.

Table 3 In terms of Biodiversity Gain Plans (BGPs) our records show:

Planning Reference	On/Off Site	Net Gain in habitat units as a percentage
P/2024/0626 BNG (BGP) condition discharged	On-site	Area habitat biodiversity units 0.14 Area habitat biodiversity units + 35.56% change
P/2024/0879 BNG (BGP) condition discharged	On-site	Area habitat biodiversity units +0.0330 Area habitat biodiversity units +12.33% change Hedgerow biodiversity units +0.0025 Hedgerow biodiversity units +11.54% change
P/2025/0622 BNG (BGP) condition discharged	On-site	Area habitat biodiversity units +0.01 Area habitat biodiversity units +13.35% change
P/2025/0061 BNG (BGP) condition discharged	On- site	Area habitat biodiversity units 0.02. Area habitat biodiversity units +16.60 % change
P/2024/0532 BNG (BGP) condition discharged	On- site	Area habitat biodiversity units 2.1808 Area habitat biodiversity units +41.51 % change

On-going and future planning actions for biodiversity:

- 3.14 In the next reporting period, we aim to continue to support applicants through the planning system through the provision of expert advice from our commissioned ecologists and the systems and process that we have put in place to record and report on BNG.
- 3.15 It is expected that many more Biodiversity Gain Plans will be approved by the Planning team from January 2026 onwards, (with the assistance of the specialist ecological advice from DCC colleagues) and the associated delivery of the net gain.
- 3.16 The Council has initiated exploratory work to establish the viability of potential Habitat Bank land within its ownership. This included commissioning of a limited number of ecological reports to provide the Baseline Biodiversity Net Gain Assessments and recommendations exploring options to enhance certain landholdings, in order to potentially deliver Biodiversity Units. This work will be reviewed and the scoping for potential Habitat Bank land on Torbay Council assets will continue, initially, at an internal officer level.

Other Local Planning Authority actions:

Ecological Advice:

- 3.17 Torbay Council has a service level agreement with Devon County Council Ecology Team to provide advice and scrutiny on Planning Applications beyond the BNG element. The

service agreement outlines the ecological and biodiversity support that Devon County Council (DCC) will provide to Torbay Council across various planning stages. This includes strategic advice during policy and guidance development, pre-application ecological and Biodiversity Net Gain (BNG) input, validation list support, and detailed assessments of ecological reports and BNG metrics during application determination.

- 3.18 Devon County Council can also offer recommendations on planning applications. Post-determination, DCC will review evidence for discharging ecological conditions, monitor BNG compliance through site visits and reports, and advise on enforcement actions where necessary (subject to a fee schedule).

Ecological data:

- 3.19 Torbay Council has a Service Level Agreement with Devon Biodiversity Records Centre (DBRC) which includes the provision of periodic updates to ecological data GIS layers and, more detailed County Wildlife Site Assessments where sites are owned by the Local Authority. DBRC plays a key role in providing local ecological data for the County as a whole. It holds valuable information on designated sites, including local wildlife areas, as well as records of protected, rare, and invasive species and habitats. This data is gathered through collaborative partnerships with various non-governmental organisations and the Devon Wildlife Trust.

Torbay Development Plan

- 3.20 In December 2015, we adopted our [Local Plan 2012-2030](#) – ‘A landscape for success’. Alongside Neighbourhood Plans, this Plan provides the basis for planning decisions within Torbay.
- 3.21 This covers the spatial strategy and strategic delivery objectives. It covers all three towns, Torquay, Paignton and Brixham. It works alongside policies for managing change and development in the Bay. The Plan allocates areas for:
- investment in tourism
 - future growth areas for housing and employment
 - proposed Country Parks
 - existing and proposed shopping centres and transport hubs
- 3.22 It works with the Countryside Area, Urban Landscape Protection Areas and Undeveloped Coast. It also includes information and policies about things such as:
- waste and minerals
 - showing sites for potential housing and or employment development

- heritage and nature conservation information such as Conservation Areas and European protected sites
- landscape and environment designations such as SDNL (AONB)

3.23 The Adopted Local Plan has five key Aspirations but two clear aims related to the conservation and enhancement of biodiversity and natural environment. (see Aspiration 3, and Policies SS8 and SS9 and Aspiration 5), in recognition of the environmental, social and economic value of those assets. Specific policies, covering the natural environment, green infrastructure and historic environment, promote protection and improvement of the environment.

3.24 **Aspiration 3: *Protect and enhance a superb natural and built environment.***

To conserve and enhance the richness and diversity of the built, historic, marine and natural environments, which provide Torbay with its unique setting and important economic benefits. This will be achieved by meeting the following objectives:

- *To safeguard heritage assets including those at risk in a manner appropriate to their significance, having regard to their ability to deliver economic regeneration, express local identity, reveal social histories and narratives and increase the connection of communities with place.*
- *To ensure new development makes a positive contribution to local character and identity, including the wider landscape character, river corridors, open spaces, country parks and natural areas, and setting of proposals.*
- *To avoid mediocre design by the application of clear design standards, including the use of Torbay's Design Review Panel to maintain quality development that is well integrated in its surroundings and responds successfully to local character.*
- *To require conversions and extensions to positively enhance the existing building, especially in Conservation Areas, removing unsympathetic extensions and rectifying poor quality alterations where necessary.*
- *To safeguard existing and maximise opportunities for biodiversity enhancement in and around developments to deliver a net gain for biodiversity.*
- *To encourage the re-use of empty homes and businesses, including bringing back historic buildings into beneficial use.*
- *To make the most of the English Riviera's status as the world's first internationally recognised Urban Geopark in recognition of its geological, historical and cultural heritage and sustainable tourism value.*

3.25 **Aspiration 5: *Respond to climate change:***

To ensure the use of energy and natural resources, the sensitivity of the natural environment and public health needs are taken into consideration when planning new development. This will be achieved through meeting the following objectives:

- *To support the development of ‘green collar’ businesses in the Bay.*
- *To promote the installation of low carbon and renewable technologies.*
- *To improve the energy efficiency of developments to reduce the reliance on fossil fuels and the impact of rising utility bills on poverty.*
- *To help deliver ‘invest-and-save’ projects to allow scarce resources to be channelled to the most productive use.*
- *To become resilient and adaptable to climate change.*
- *To minimise flood risk to new and existing development by incorporating climate change factors such as run-off, sea level rise, increased storminess and unpredictable weather.*
- *To recognise the multiple benefits provided by open spaces, biodiversity, green infrastructure such as green corridors/wedges, rural landscapes, beaches and the Bay itself, having regard to their statutory significance and value to the community over the lifetime of development.*
- *To minimise the generation of household, business and construction waste and reduce its negative impacts upon the environment by focusing on the prevention, re-use and recycling of waste as set out in the waste hierarchy and prevent pollution.*

Monitoring Contributions:

3.26 The existing Local plan is accompanied by Supplementary Planning Documents (SPD) including the Planning Contributions and Affordable Housing SPD ([planning-contributions-spd_2022.pdf](#)) Section 2.5 deals with biodiversity and mitigation of development impacts upon it. The SPD provides a greater level of detail support the relevant Torbay Local Plan 2012-30 Policies, particularly SS8 and NC1. It sets out detailed sections on the following habitats and species, which must be addressed as “site delivery matters” when considering development proposals :

- 2.7 Greater Horseshoe Bats (HRA issue)
- 2.8 Recreational Impacts on Berry Head to Sharkham Point (HRA Issue)
- 2.9 Impacts on Coastal and Marine Habitats and Species (HRA and National Nature Reserve issue)
- 2.10 Cirl Buntings
- 2.11 Protected species- locally important sites for biodiversity and geodiversity.

2.12 Offsite habitat compensation (Biodiversity offsetting. Now partly superseded by Biodiversity Net Gain requirements)

3.27 Section 2.16 of the SPD seeks monitoring contributions. The latest (2022) version of the SPD makes these a “site deliverability matter” including for Ecological Mitigation works. The starting figure is £4,800 (index linked) for a development of 100 dwellings. The notes in Table 2.4 state that:

Ecological Mitigation Works. £4,800: Based on 2 full days data assessment and/or site visit per annum for years 1, 3, 5, 10, 15, 20, 25 and 30, charged at £300 per day. Cost is per development site. This figure would be typical of a large major development (e.g., 100 dwellings) requiring significant ecological monitoring. The figure will be adjusted upwards or downwards according to the complexity of the ecological mitigation and the level of monitoring required.

2.16.3 Monitoring of Ecological Mitigation. The effectiveness of ecological mitigation relies on appropriate monitoring. Where mitigation measures or compensation land are necessary in order to address the ecological impacts of a development and to secure a net gain in biodiversity (as sought by Local Plan Policy NC1), the Council will also seek a monitoring contribution to enable a suitably qualified ecologist to ensure that the mitigation measures or compensation land have been implemented appropriately and are being maintained effectively, and to identify any remedial works where necessary.

2.16.4 The monitoring contribution sought will be proportionate to the nature of the ecological mitigation measures required, and the level of monitoring need that they give rise to. It is anticipated that many ecological mitigation measures would give rise to a need for two full days of monitoring per annum, carried out on years 1, 3, 5, 10, 15, 20, 25 and 30 of the development. Charged at a rate of £300 per day (as at May 2022), this results in a total monitoring contribution of £4,800. The level of monitoring required will depend on the complexity and extent of the ecological mitigation, and the monitoring contribution sought will be increased accordingly on a case by case basis.

3.28 CIL may also, in principle, be used to monitor ecological mitigation, although the Council has generally sought to target CIL to the delivery of infrastructure including green infrastructure rather than monitoring.

3.29 The **emerging [Torbay Local Plan 2025-2045](#)** plan also includes policies which seek to protect and enhance our natural environment and build resilience and sustainability in the context of climate change key issues are set out below:

For countryside, landscape, ecology, biodiversity, and geodiversity:

- *Policies for the protection South Devon National Landscape (formerly AONB) in the South of Torbay.*

- *Policies for the protection and enhancement of South Hams Special Area of Conservation (SAC) at Berry Head and the surrounding countryside which is important for Greater Horseshoe Bats (sustenance zone) and the Berry Head calcareous grassland 8 km 'zone of influence'. Which is also indicates the need for Suitable Alternative Natural Greenspace (SANG) and active management and dog-friendly facilities to reduce recreational pressure on Berry Head grassland.*

3.30 Delivery of homes/holiday accommodation in south Torbay requires a positive strategy to manage impacts on South Hams SAC. This is a critical soundness measure for the Local Plan.

Climate Change, Flooding and Water Management:

- *Net Zero & Climate Change Strategy All new homes built after Plan adoption must produce 75% fewer carbon emissions than 2013 Building Regulations. Policies to embedded carbon in existing buildings, and guidance on Heritage, and Climate Change*
- *Torbay is a Critical Drainage Area. There is a legacy of shared sewers creates flooding and water management issues which raises Habitats Regulations concerns due to combined sewer overflows into Marine SAC. (note the importance of the evidence base Strategic Flood Risk Assessment and Water Cycle Study). The Infrastructure Delivery Plan will include costed flood mitigation measures. In addition to physical infrastructure, policies need to deliver reduced water run-off through Sustainable Drainage & Marine Protection measures.*

3.31 The Local Plan will need to set out s106 and CIL funding mechanisms for biodiversity mitigation. It will not be possible to introduce or prepare new Supplementary Planning Documents after June 2026 (due to change in plan making Regulations as part of the LURA Act). Updated contributions policies will therefore need to be embedded in the new Local Plan.

3.32 The emerging Torbay Local Plan 2025-2045 plan is accompanied by a wide evidence base² that together provide valuable data on our natural environment its resilience and capacity to support growth. The following studies to support the development of the above-mentioned planning policies and particularly assist with the assessment of our natural environment:

These include:

- Agricultural Land Survey - A Strategic Study of the Best and Most Versatile Land
- Required for Housing and Employment

² <https://www.torbay.gov.uk/council/policies/planning-policies/evidence-base-and-monitoring-2025-2045/>

- Strategic Landscape Study, comprising four related studies. The other studies are: Landscape Sensitivity Assessment (in two parts); Open Space Review (in three parts) and Review of Valued Landscapes.
- Wildlife screening assessment
- Assessment of Sewer Capacity Study*
- Water Cycle Study*
- Strategic Flood Risk Assessment Update (currently in draft)*
- Infrastructure Delivery Plan (to be prepared)*

*These studies will be particularly relevant to ensure no changes to water quality (which can have an adverse effect on the integrity of the Lyme Bay and Torbay Marine Special Area of Conservation (SAC)) as a result of additional growth proposed in the emerging Plan. It will be necessary to consider the effectiveness of any adopted mitigation measures and whether any additional measures may be required.

Other LPA initiatives: The Berry Head Management Plan

- 3.33 Berry Head is designated as a Site of Special Scientific Interest (designated 1952) and forms part of the Berry Head to Sharkham Point National Nature Reserve (designated 2001) and part of the South Hams Special Area of Conservation (SAC) (designated 2005) under the European Habitats Directive. The site is also designated as a regionally important geological site (RIGS), a Country Park and lies within the South Devon National Landscape (AONB).
- 3.34 The Strategic Planning Team has commissioned (2026) the preparation of a comprehensive 10 year management plan for Berry Head NNR, to ensure its long-term conservation and sustainable use.
- 3.35 The site is of cultural, natural and historical significance due to its:
- Habitats of European importance: including calcareous grassland, heathland, vegetated sea cliffs and caves, which support a suite of nationally rare and scarce plants and diverse invertebrates;
 - Iconic wildlife colonies: including protected and declining Greater Horseshoe Bats *Rhinolophus ferrumequinum* and Red-listed Guillemots *Uria aalge*
 - Imposing Napoleonic Forts: dating from 1775-1807 and built from stone quarried on site. The two forts are considered to be some of the best-preserved remains of this period in Britain.
 - Recreational opportunities: the site is used for a range of activities including walking, dog walking, wildlife appreciation, sea angling, and general enjoyment of the outstanding views and scenery

- Geological interest: dramatic and important features associated with Middle Devonian stratigraphy and sedimentology are revealed by the vertical faces of the quarries and the sea cliffs

3.36 The Berry Head Management Plan will be developed with key stakeholders (including Natural England), public engagement and should be completed in the spring/summer 2026 so that it can inform the Regulation 19 version of the Torbay Local Plan 2025-2045.

Chapter 4: Information about our authority and how we can affect biodiversity

Torbay's Natural Environment:

- 4.1 Torbay has a natural environment of international importance in terms of its biodiversity, geodiversity and landscape beauty. There is a high concentration of designated conservation sites, including two European Special Areas of Conservation, a National Nature Reserve and a number of Sites of Special Scientific Interest.
- 4.2 Torbay's natural environment is of great importance for its own sake, but also of considerable value as a tourist attraction. The English Riviera was one of the first urban Global Geoparks designated by UNESCO, recognising Torbay's varied and internationally significant geology across a range of geological periods. The south of the Bay is part of the South Devon National Landscape (Area of Outstanding Natural Beauty). The Council is committed to promoting sustainable development which protects and enhances the natural environment and helps to restore degraded assets.

Actions to support our internationally important Special Areas of Conservation:

- 4.3 **The South Hams SAC** is situated in Devon on the south coast of England and covers an area of 129.53ha. The site is divided into 5 separate sites, including the Berry Head-Sharkham Point SSSI component, adjacent to the town of Brixham. It is considered to include one of the best areas of European dry heath and semi-natural dry grasslands and scrubland facies in the UK. It also supports a number of rare and scarce vascular plants

typical of the oceanic southern temperate and Mediterranean-Atlantic elements of the British flora. The South Hams SAC is thought to hold the largest population of greater horseshoe bat (*Rhinolophus ferrumequinum*) in the UK . Vulnerabilities of the bat population arise through disturbance to the cave systems, disused quarries and mine-shafts used by the bats as a result of public access and recreational activities. The vulnerabilities of the bat population are not limited to within the SAC itself; disturbance and damage to wider countryside feeding and commuting routes (Figure 1), such as agriculturally unimproved grassland, woodlands and hedgerows, can also have a detrimental impact on the population.

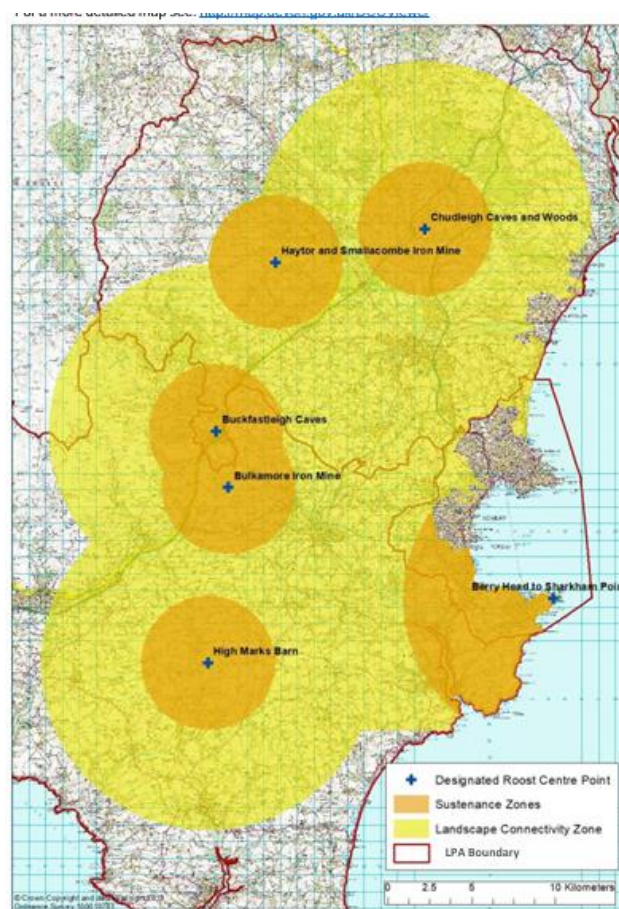


Figure 1

4.4 The Lyme Bay and Torbay Marine SAC

site lies off the south coast counties of Dorset and Devon (Figure 2). The site comprises two sections, Lyme Bay Reefs and Mackerel Cove to Dartmouth Reefs and Sea Caves travelling from east to west respectively. It covers 31,248 ha and includes 14,289 ha of reef and at least 85 caves. The Lyme Bay and Torbay SAC has been identified by Natural England as one of the best examples of the range and diversity of bedrock reef, stony reef, and sea caves in the UK for protection under the Habitats Directive. It is estimated to contribute 0.9 percent of the UK’s total reef resource to the Natura 2000 network.

4.5 Torbay Council officers have been party to the South Hams SAC Steering Group for Greater Horseshoe Bats (The Steering Group includes the other local authorities affected: Dartmoor National Park Authority, Devon County Council, Teignbridge District Council, South Hams District Council, Torbay Council and Natural England). Together, the Steering Group has produced [Greater Horseshoe Bats, South Hams SAC, HRA Guidance - Torbay Council](#). This

document is aimed at those preparing and validating planning applications in the South Devon area which may impact on the South Hams SAC population of greater horseshoe bats. It provides advice on which applications may have a likely significant effect on the SAC greater horseshoe bat population. It also provides advice on the information that applicants may need to submit with a planning application in order for the LPA to undertake an HRA.



Figure 2

4.6 The cirr bunting is a UK priority species of principal importance under Section 41 of the Natural Environment and Rural Communities (NERC) Act 2006. These species were identified as requiring action under the UK Biodiversity Action Plan and remain conservation priorities.

4.7 Torbay is important for Cirr Buntings and the Council has prepared, in partnership with Devon County Council, Teignbridge District Council, Torbay Council and the RSPB, a [Wildlife and development guidance note for Cirr Buntings](#) to help anyone (e.g. developers, agents, consultants, Local Planning Authorities) considering built developments that may affect cirr buntings in Devon.

4.8 These birds need a mixed farmland landscape to flourish and in particular the retention of suitable nesting sites (traditionally managed hedgerows and scrub and sources of both summer (for breeding: tussocky pasture on which to forage for invertebrates to feed young) and winter food (a source of small seeds over the winter, ideally arable weeds within an over-winter stubble following harvest of a low input spring barley crop).

4.9 This Guidance also has wider benefits for the natural environment - preserving a network of suitable habitats isn't just good for cirr buntings. It also preserves the characteristic

Devon landscape and benefits a number of other priority species and habitats such as bats, dormouse, wildflowers, arable plants and hedgerows.

Torbay Community:

- 4.10 The Office for National Statistics estimates that Torbay has 139,485 people living in our area in approximately 63,000 households. The overall population in Torbay has grown by 4.9% in 2023 since 2013, this compares to 7% growth across England. 27% of our population is over 65 years of age which is set to increase to 34% during the next 20 years.
- 4.11 Torbay offers an inspiring coastal, maritime and landscape setting. Kown as the English Riviera it has a strong history of being a premier coastal resort, with a tourism sector that supports local and regional businesses.

Chapter 5: How we have considered other strategies and how our policies, objectives and actions have helped the environment

The Devon Local Nature Partnership

- 5.1 Devon Local Nature Partnership (LNP) was established in 2012. It is a voluntary strategic collaboration of a huge range of organisations, groups and individuals committed to working together to restore and enhance the natural environment. Torbay Council officers are on the LNP Working Group which co-ordinates Natural Devon's routine activity, progresses the initiatives and provides a link between the Forum and Board members.
- 5.2 The LNP has three key goals:
1. **Deliver a Nature Recovery Network** – Protect and restore a network of wildlife rich habitats and natural systems across the county in towns, villages, rural areas and at sea.
 2. **Respond to the Climate Emergency** – Use natural solutions to capture carbon and increase our resilience to climate change and flooding.
 3. **Connect people and nature** – Support communities and businesses to value, enhance and connect with the natural environment which underpins our health, wellbeing and economy.
- 5.3 These goals are closely related to the production of a Local Nature Recovery Strategy.

Devon Local Nature Recovery Strategy – a joint strategy for Devon, Plymouth and Torbay

- 5.4 Local Nature Recovery Strategies (LNRS) are a new approach to setting priorities for nature at a local level in England. They are a statutory requirement, defined in [Sections 104 to 106](#) of the Environment Act 2021. More information can be found at [Defra regulations and guidance summary document](#).
- 5.5 The County Council is the appointed Responsible Authority to lead the statutory Devon Local Nature Recovery Strategy (LNRS), covering Devon and the areas of Plymouth City

Council and Torbay Council. This identifies the priorities for habitats and species, the actions needed to achieve these priorities and a map that shows where actions are most needed to reverse the decline of wildlife.

- 5.6 The LNRS has been developed in collaboration with a wide range of partners and wildlife experts under the umbrella of the Devon Local Nature Partnership. This has included discussion through LNP networks including farming, communities, education and health and collaborating with the 'Supporting Authorities' These are the Local District Authorities, including, the two National Parks of Dartmoor and Exmoor, as well as Natural England. LNRSs must be produced in collaboration with SAs and all other relevant stakeholders. A Supporting Authorities Officer Group was set up and Torbay Council officers were part of the meetings held regularly throughout the preparation of the LNRS.
- 5.7 Torbay Council has been involved in the development of the LNRS through the Devon LNP . In it's role as supporting Authority, Torbay Council provided consent for the Devon Local Nature Recovery Strategy (LNRS) to be published (cabinet Decision 17th February 2026). At the time of writing formal publication is expected imminently (following the approval by all Supporting Authorities).
- 5.8 The Devon-wide LNRS will provide local planning authorities and developers with information to enhance the planning system, including the delivery of Biodiversity Net Gain requirements, and investment in our urban green spaces. It will guide public and private investment, including through the new Environmental Land Management Schemes (ELMS). It will support communities and businesses in their actions to protect and enhance Devon's land and marine environments, and the benefits we gain from them, such as health, access and learning.
- 5.9 The Devon LNRS is hosted on the [LNRS Viewer](#) that allows everyone to explore the spatial priorities and opportunities identified in the Devon Local Nature Recovery Strategy. This includes the statutory Local Habitat Map which shows where actions are most needed. These High Opportunity Areas will help to direct BNG as action is incentivised in these areas. The Viewer also shows Species Opportunity Areas and brings together lots of other Useful Layers in one place.
- 5.10 A [delivery map](#) was launched on the LNRS Viewer in October 2025, so that anyone taking action for biodiversity can add their contribution – even in their own garden. In the first three months, as of December 2025, 21 delivery projects had been added to the map.
- 5.11 The Country Council will continue to work with Partners to deliver and monitor the Strategy under the umbrella of the Local Nature Partnership.

Devon Tree and Woodland Strategy

- 5.12 A significant partnership achievement has been the publication of the Devon Tree and Woodland Strategy. Through the strategy countywide tree planting has taken place, delivering tens of thousands of new trees annually through multiple funding schemes, including the Treescapes Fund and Saving Devon's Treescapes.
- 5.13 The Council partnered with other local authorities the Woodland Trust, Forestry Commission, Devon Wildlife Trust and other stakeholder organisations in steering the creation of the Devon Tree and Woodland Strategy for the Local Nature Partnership. The strategy, published in April 2024, sets out priorities and actions for the delivery of an additional 3000ha of woodland and trees in Devon by 2030, to help achieve an increase in the county's tree cover from 14% to 16.5% by 2050, meeting the UK's national targets as set with the England Tree Action Plan. Devon Tree and Woodland Strategy [DTWS Full-Mar 2024 Accessible Version](#) & [DTWS Summary Apr 2024 Accessible Version](#)

The South Devon National Landscape and Management Plan

- 5.14 The SDNL Partnership Committee provides a strategic lead in the protection, conservation and enhancement of the South Devon National Landscape (AONB) and consists of 18 representatives including the local authorities, Natural England, Environment Agency, Historic England local organisations and community representatives. The South Devon National Landscape Management Plan is a statutory document that seeks to ensure that the South Devon Area of Outstanding Natural Beauty is conserved, managed and enhanced to support and benefit present and future generations. It also serves the purpose of a plan for the South Devon Heritage Coast which shares many of its special qualities. The current plan (April 2019 to March 2024) has been formally adopted by the Local Planning Authorities : [South Hams District Council](#), [Devon County Council](#), [Torbay Council](#) and [Plymouth City Council](#).
- 5.15 The Plan contains policies support partners by driving sustainable development whilst conserving and enhancing the natural beauty and special qualities. The Management Plan includes key policy objectives: To conserve and enhance the biodiversity and geological assets so that they are bigger, better and more connected in the landscape and to support the sustainable management of natural resources. For Strategic Planning and Development Management, the Management Plan is a material consideration in the plan making and decision-taking process. The Management Plan includes a Planning Guidance Annex which forms an integral and important part of the Management Plan.

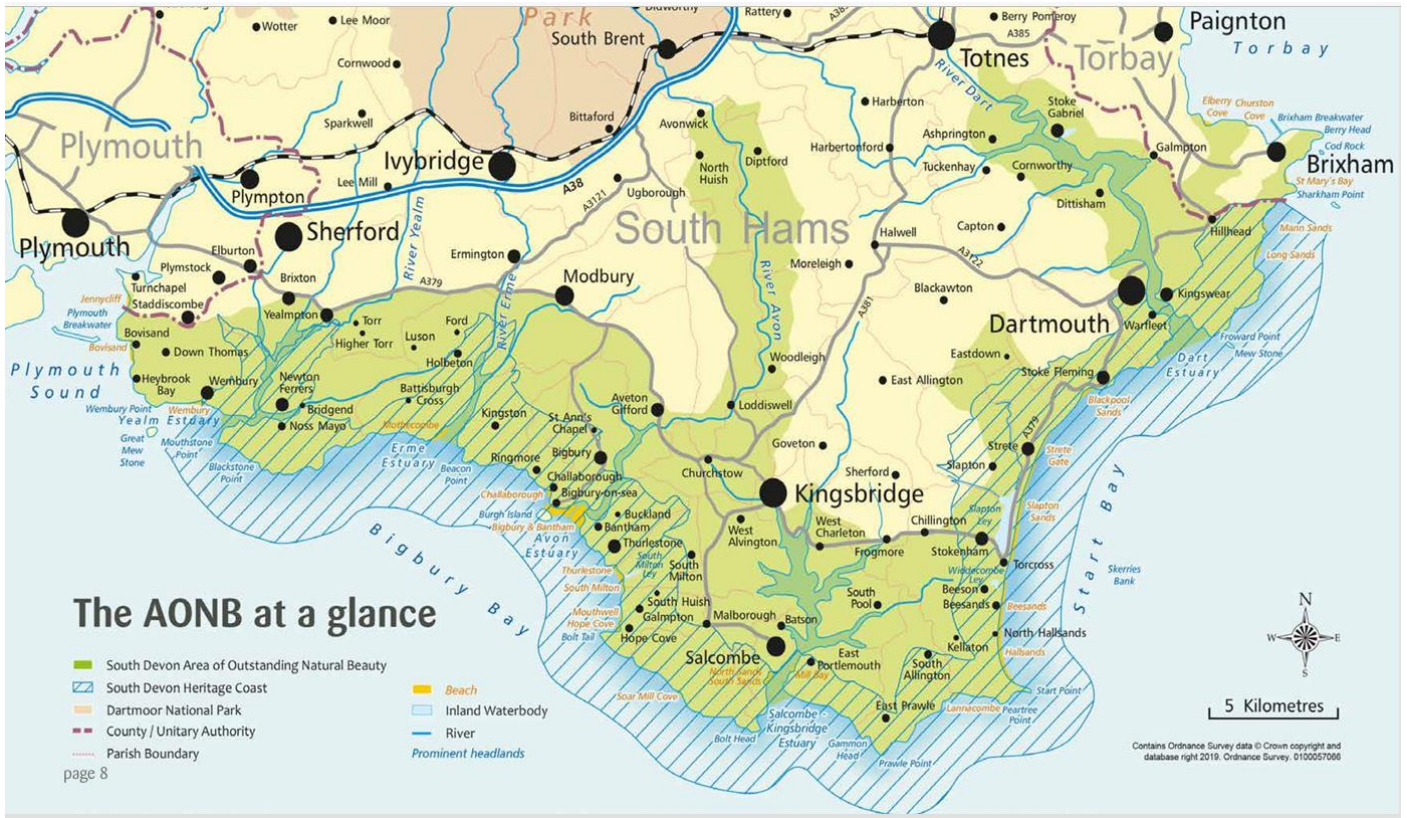


Figure 3

Tor Bay Harbour Authority:

- 5.16 The **Port Masterplan for Tor Bay Harbour** acts as a framework document to set the scene for the future of the port and to ensure sustainable development. It highlights environmental measures to ensure that the Harbour Authority makes a positive contribution to the environment and amenity.
- 5.17 As part of ongoing efforts to minimise the impact of human activity on Tor Bay’s natural environment – while also allowing, where possible, for those activities to take place - the Harbour Authority have been closely involved in several Bay-wide initiatives to improve sustainability. These have included monitoring the recently introduced Torbay inshore Marine Conservation Zone; working alongside Living Coasts and others by contributing to the design and installation of experimental eco moorings to hopefully reduce scouring of the seabed caused by mooring and anchor chains; and working with the Community Seagrass Initiative and Fishing for Litter projects, among others.

The Devon and Torbay Combined County Authority

- 5.18 The Devon and Torbay Combined County Authority is a legally recognised, single body. Our Combined County Authority looks at issues that affect the whole area and includes responsibility for strategic transport - **The Devon and Torbay Local Transport Plan 4 (LTP4)** is the strategic document that sets out the priorities for transport across the county

between 2025 and 2040. Two of the six objectives set out below will also closely align to objectives in the emerging Green and Blue Infrastructure Strategy and our Climate Change Action Plan. The Local Transport Plan is therefore an additional document that has influence on these goals. The LTP is also a material consideration in planning matters:

- *The Place to be naturally active: Enabling people to be more active with improved public health outcomes by expanding the multi-use trail network, delivering a network of quiet lanes and improving facilities and safety in urban areas*
- *Decarbonisation: Reaching net zero carbon emissions by 2050, and a 50% reduction against 2010 levels by 2030, by reducing the need to travel, increasing digital access and shifting trips to sustainable transport and fuels*

6. How we've raised awareness and educated the community

- 6.1 The Council has carried out various engagement events and consultations related to its numerous strategies and action plans.
- 6.2 A key example would be 'A Greener Way for Our Bay' which proposes ten key things to help reduce Torbay's carbon emissions. One of these key aims is '*Ensure the community is at the heart of local action*' by engaging with community, schools and businesses to raise awareness and promote: saving energy, reducing waste, growing food, protecting and enhancing the natural world as well as encouraging walking and cycling.



Figure 4

- 6.3 The Greener Way For Our Bay Framework and Action Plan was developed following two public consultations, a series of climate conversations and a comprehensive engagement programme in 2023 and 2024.

The Climate Change Partnership consulted on the Plan through three surveys and a range of engagement events. During the consultation, 1,263 people were engaged by Tonic Creatives on behalf of the Partnership. In the most recent round of surveys, more than 600 people responded.

Staff Training and awareness:

- 6.4 The Council has an internal staff training and awareness system. This now includes a Climate Change Module on iLearn system. As identified in Table 2, the Council will seek to add an additional section relating to the biodiversity duty within this module.

7. Monitoring and Evaluation actions

- 7.1 The Council's Overview and Scrutiny Board is a committee of councillors that can hold the Council's decision-makers and partners to account and improve services for the people of Torbay. Overview and Scrutiny acts as the Council's watchdog – monitoring and challenging decisions taken by the Leader and other decision makers. To help improve services overview and scrutiny also reviews existing policies, procedures, and practices.

- 7.2 The Council Business Plan sets out, against each theme of the Community and Corporate Plan (Community and People, Pride in Place and Economic Growth), the priority actions and milestones for delivering those actions. The Council produces a Quarterly Performance Report using various performance indicators, to inform and update Councillors on performance against the three themes of the Community and Corporate Plan. This will be one way in which actions, such as those within the Climate Change Action Plan, the Torbay Carbon Neutral Plan, will be monitored and measured.
- 7.3 This includes the Council Climate Action Officers Group to assess and discuss progress on identified Actions. The Greener Way for Our Bay the Action Plan is reviewed annually.
- 7.4 There are various monitoring mechanisms for the numerous corporate strategies and plans containing objectives for the natural environment. One key Evaluation and monitoring method is the [Sustainability Appraisal](#) and [Habitats Regulations Assessment](#), which accompany the adopted The Torbay Local Plan 2012-2930. The SA has also been published alongside the consultation [Local Plan Update \(2025–2045\) Evidence Base and Monitoring](#) and an HRA will be produced for the Submission version.

Table 4 The SA includes a specific sustainability objective for biodiversity, flora and fauna:

<p>To conserve, protect and enhance habitats and species, and geodiversity</p>	<ul style="list-style-type: none"> • Ecological Footprint • Condition and number of nationally or locally designated sites • Amount of green infrastructure delivered • Number and condition of global, national and local geological designated sites • Percentage of major developments generating overall biodiversity enhancement • Number of planning approvals that generated any adverse impacts on sites Biodiversity, flora and fauna • Hectares of biodiversity habitat delivered through strategic site allocations
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- 7.5 The effectiveness of ecological mitigation relies on appropriate monitoring. The Adopted Torbay Local Plan is also accompanied by Supplementary Planning Documents and the Planning Contributions and Affordable Housing Supplementary Planning Document (SPD) (detailed in Chapter 3 paragraphs 3.26 to 3.28 above), specifically includes a section on biodiversity and mitigation of development. In addition, it sets out the need for ongoing assessments and associated monitoring contributions for relevant ecological mitigation works for years 1, 3, 5, 10, 15, 20, 25 and 30 of a development.

8. Biodiversity highlights and challenges

This section includes some example positive actions and initiatives:

Miyawaki Forests

- 8.1 The tree planting at Watcombe Primary School, Torquay is currently the first of two Miyawaki Forests for Torbay.
- 8.2 Torbay Council, SWISCo, the Environment Agency and Department for Environment, Food and Rural Affairs (Defra) planted a Miyawaki Forest with 700 trees, which will trial this nature-based solution's ability to reduce flooding and support wider work to address climate change. It forms part of the Devon County Council Devon Resilience Innovation Project (DRIP) funded by Defra. The tree planting at Watcombe Primary School, Torquay is currently the first of two Miyawaki Forests for Torbay.
- 8.3A Miyawaki Forest is a very dense planting (3-5 trees per sqm) that recreates the conditions of a natural clearing in a forest and can result in much faster growth rate (5-10x faster or 1m per year on average) as the trees compete with each other for nutrients and light.
- 8.4 Around 20 different tree species are being randomly planted to mimic the canopy layers in a natural woodland, which will help increase biodiversity as well as capturing carbon. SWISCo are leading on the planting but school pupils have also joined in.
- 8.5 Miyawaki Forests aim to:
- Increase biodiversity, capture carbon, improve air quality, support more wildlife
 - adapt to climate change
 - show how practical actions can improve resilience to flooding

Improved LED street lighting

- 8.6 Improved LED street lighting which will significantly improve the energy efficiency of our streetlights and lower our carbon emissions, and importantly, also save money in the long term, saving thousands of pounds over its lifetime.
- 8.7 As a result of the changes to streetlighting, it will be centrally controlled and upgrade the rest of our streetlights to LED Holophane Lanterns and to procure Telensa's Control Management System (CMS). This means more than 3,000 of the Bay's street lights will be upgraded and centrally controlled.

8.8 The proposed new streetlighting scheme will be fantastic for Torbay with the ability to vary the brightness of the lights in all areas enabling us to be more responsive, will be better for the environment, and also save both energy and costs in the long term. The new lighting will also help address anti-social behaviour and reduce the impact on our biodiversity across the Bay from artificial streetlighting. This is just one of the projects under our Climate Change Action Plan that Torbay will benefit from.

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