

Monday, 1 June 2026

CABINET

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

Tuesday, 9 June 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 Jacqueline Thomas

Councillor Bye

Councillor Tranter

Councillor Chris Lewis

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 - 22)
To confirm as a correct record the Minutes of the meeting of the Cabinet held on 12 May 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 Chair decides are urgent.
5. **Matters for Consideration**
6. **Disposal of Ocombe Farm and Land laying North of Preston Down Road, Paignton** (Pages 23 - 40)
To consider a report on disposal of the Council's freehold interest of Ocombe Farm and land laying North of Preston Down Road, Paignton.
7. **Disposal of Land at Claylands (Phase 2), Paignton** (Pages 41 - 58)
To consider a report on the freehold disposal of land at Claylands (Phase 2), Brixham Road, Paignton.

8. **Budget Monitoring - Revenue and Capital Outturn 2025/26 Quarter 4** (Pages 59 - 84)
To consider a report that provides a summary of the Council's revenue and capital position for the financial year 2025/26.
9. **Local Special Educational Needs and Disabilities (SEND) Reform Plan** (Pages 85 - 180)
To consider a report that provides a summary of the national guidance for the Local Area SEND Reform Plan (March 2026), setting out the requirements for local area partnerships ahead of submission to the Department for Education (DfE) and NHS England by 19 June 2026.
10. **Torbay Youth Justice Plan 2026-27** (Pages 181 - 262)
To consider a report that seeks approval of the annual Youth Justice Plan.
11. **Tobacco and Vapes Framework 2026 - 2031** (Pages 263 - 350)
To consider a report that seeks approval of the Tobacco and Vapes Framework 2026 – 2031.
12. **Specialist Stop Smoking Service Procurement** (Pages 351 - 362)
To consider a report on the procurement of a specialist Stop Smoking Service.
13. **Social Mobility in Torbay - Report of the Overview and Scrutiny Board** (Pages 363 - 366)
To respond to the recommendations of the Overview and Scrutiny Board.

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

12 May 2026

-: Present :-

Councillor David Thomas (Chair)

Councillors Billings, Bye, Chris Lewis, Jacqueline Thomas, Tranter and Tyerman

(Also in attendance: Councillors Cowell (virtually), Johns (virtually), Law, Barbara Lewis (virtually), Long, Stevens (virtually) and Twelves(virtually))

111. Minutes

The Minutes of the meeting of the Cabinet held on 14 April 2026 were confirmed as a correct record and signed by the Chair.

112. Disclosure of Interests

No declarations of interest were made.

113. Matters for Consideration

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

114. Levelling Up Funding Round 3 - Brixham Port (Oxen Cove) and Paignton (Tech Park)

115. Redevelopment of former Crossways Shopping Centre, Paignton

116. Torbay Joint Health and Wellbeing Strategy - post consultation report

117. Gillard Road, Brixham - Public Path Creation Order

118. Lessons Learned from the Call-in of the Cabinet's Decision on the Implementation of the English Riviera Beach Standards - Report and Cabinet's Response

119. Child Friendly Torbay - Action Plan

120. Transfer of Land, at various sites in Brixham, to Brixham Town Council

Chair

Record of Decisions

Levelling Up Funding Round 3 - Brixham Port (Oxen Cove) and Paignton (Tech Park)

Decision Taker

Cabinet on 12 May 2026

Decision

1. that Cabinet approve the outline proposals for schemes at Brixham Port (Oxen Cove) and Paignton Tech Park as set out in the Strategic Outline Cases at Appendix 1 and Appendix 2 to the submitted report;
2. that Cabinet note that under delegated authority, the Director of Finance in consultation with the Cabinet Member for Housing and Finance, will allocate funding from grant monies to develop the schemes at Brixham Port (Oxen Cove) and Paignton Tech Park pursuant to the Capital Programme; and
3. that Cabinet confirm the current programme cost estimates as set out in Section 8 of the submitted report to enable the figures to be reported to Government at the end of May 2026 as is required by the new Local Regeneration Fund (LRF) quarterly monitoring return.

Reason for the Decision

The decision was based on the strong progress and deliverability of the Brixham Port (Oxen Cove) and Paignton (Tech Park) projects, supported by a clear programme that aligns with Government funding requirements and the continued use of the £20m Levelling Up Fund allocation, now within the Local Regeneration Fund. Both schemes are well advanced, on track for completion by April 2028, and will proceed as originally approved, with funding allocated in line with agreed timelines and assurance processes. The projects will help deliver Torbay's economic vision by investing in key sectors, creating high-quality employment space and supporting job growth. This includes expanding the photonics industry through Tech Park and strengthening the fishing and aquaculture sectors at Oxen Cove, while enhancing the area's reputation and visitor experience. Together, they are expected to generate long-term economic benefits and potential surplus income to reinvest in wider regeneration.

Implementation

The decision will come into force and may be implemented on 26 May 2026 unless the call-in procedure is triggered (as set out in the Standing Orders in relation to Overview and Scrutiny).

Information

The projects have been in development since autumn 2024, following confirmation of Levelling Up Fund support, and have progressed through a range of logistical and design challenges to reach their current stage. At Paignton, the success of the Electronic and Photonics Innovation Centre (EPIC) building has created a need for additional high-specification "grow-on" space, as existing capacity was now full and limiting the natural progression of photonics businesses. The Tech Park would address this by enabling high-value companies to scale and remain within Torbay. At Brixham, the port is operating beyond its intended capacity, with limited

facilities to support processing and added value, resulting in much of the catch being exported elsewhere for processing. The development at Oxen Cove will provide modern employment space to support expansion, diversification, and the growth of a more sustainable and higher-value fisheries sector, helping to retain economic benefits locally and strengthen the Brixham brand.

Alternative Options considered and rejected at the time of the decision

Choosing not to proceed would result in Government funding being returned and the loss of potential investment in the local economy. A range of options for the building design and layout have been explored, with the preferred proposals identified and set out in Appendices 1 and 2 to the submitted report.

Is this a Key Decision?

No

Does the call-in procedure apply?

Yes

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

None.

Published

15 May 2026

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

Record of Decisions

Redevelopment of former Crossways Shopping Centre, Paignton for the Delivery of Extra Care Housing

Decision Taker

Cabinet on 12 May 2026

Decision

That Cabinet:

1. provide delegated authority to the Director of Finance, in consultation with the Director of Regeneration and Cabinet Member for Place Development and Economic Growth, to award an NEC-A Design & Build contract to Willmott Dixon Construction for the redevelopment of the site, which will allow the Design Development to continue up to construction and then proceed to construction, subject to Final Business Case approval and securing the necessary Homes England grant funding for delivery; and
2. note that the Final Business Case for the redevelopment of the former Crossways site will be presented to Cabinet for approval on 15 July 2026, which will include the full and final build cost and associated project costs and funding breakdown (including internal capital resources, external grant secured capital receipts).

That Cabinet recommend to the Adjourned Annual Council meeting on 14 May 2026:

1. to use the Council powers of Appropriation for the Crossways Site and adjacent highway land as attached at Appendix 2 to the submitted report, that is no longer required for the purpose for which it is currently held and is now required for planning purposes to enable the proposed redevelopment (Redevelopment of site for residential extra care dwellings including Day Centre (Use Class E(f)), comprising a building of up to six storeys with communal facilities and cafe, associated parking, infrastructure and landscaping);
2. authorise the Director of Regeneration to undertake all necessary steps to affect the appropriation of the Crossways site and adjacent land as identified in Appendix 2 to the submitted report for planning purposes, and delegate to Cabinet consideration of any objections and final confirmation of decision;
3. that the Capital Programme be uplifted to a maximum of £54.000m to deliver the project; and
4. that a maximum of £16.300m of prudential borrowing to deliver the project be approved, noting that this level of prudential borrowing is supported by rental income based on the 91 extra care units and long lease for the Day Care facility.

Reason for the Decision

The proposed development is justified as a key component of the Council's long-term market transformation strategy to meet rising adult social care demand over the next 20 years. Evidence from service users show a strong preference for independent living with greater choice and control, which extra care housing enables while delaying or reducing reliance on higher-cost residential care and improving system efficiency. The Crossways scheme directly supports strategic priorities set out in the Adult Social Care Commissioning Blueprint, including promoting health and independence, strengthening community-based support, and delivering sustainable, modern services. It would also contribute significantly to the Council's target of delivering 200 additional extra care units by 2030 and fulfils commitments made under partnership arrangements to expand integrated care provision. Despite changes to NHS partnership structures, the need for additional extra care housing remains critical to achieving better outcomes and financial sustainability. In parallel, the proposal addresses increasing demand for specialist day services for adults with profound and multiple learning disabilities, replacing the existing Hollacombe facility which is no longer fit for purpose. The new purpose-built centre would expand capacity, enhance the quality of care and support, provide improved opportunities for independence and wellbeing, and ensure continued support and respite for carers, thereby meeting statutory duties and improving provision for some of the most vulnerable members of the community.

Implementation

The Cabinet's decisions in 1 and 2 above will come into force and may be implemented on 26 May 2026 unless the call-in procedure is triggered (as set out in the Standing Orders in relation to Overview and Scrutiny). The Cabinet's recommendations to Council in 1 and 2 above will be considered at the adjourned annual Council meeting on 14 May 2026.

Information

The Crossways site in Paignton was identified for redevelopment through a Compulsory Purchase Order approved in 2019, with an initial planning consent granted in 2021. However, that scheme became unviable due to post-COVID construction cost inflation, declining property values, and the introduction of the Building Safety Act 2022, which increased costs and complexity for taller buildings. A revised, deliverable scheme was therefore developed and approved in December 2025, comprising a six-storey, 91-unit extra care housing development alongside a purpose-built day care centre. This proposal responds to significant and worsening housing challenges in Torbay, including a shortage of affordable homes, reduced market delivery, high demand for social housing, and increasing need for specialist accommodation for an ageing population. The scheme would provide 100% affordable extra care housing, replace an outdated day care facility, and support vulnerable residents to live independently for longer. It also aligns with key strategic priorities, contributes to regeneration of Paignton town centre, and represents a major investment by the Council to address market failure, stimulate economic activity, and improve community wellbeing.

Alternative Options considered and rejected at the time of the decision

The Council has been progressing plans to redevelop the Crossways site for extra care housing

since 2021, supported by a series of corporate and strategic decisions, including land acquisition and approval of a revised planning application in 2025. While this establishes a clear strategic direction, further decision points remain before committing to significant capital investment. At this stage, three options have been considered: to proceed with delivery of the approved scheme, to withdraw from the project, or to pause pending potential market improvements. Not progressing would reduce financial risk but forgo the opportunity to deliver much-needed housing, jeopardise grant funding, and risk reputational damage, while delaying offers no certainty of improved conditions and may increase costs or funding risks. On balance, it is recommended that the Council proceeds with the scheme to deliver new extra care housing and a replacement day care facility.

Is this a Key Decision?

Yes

Does the call-in procedure apply?

Yes in respect of the Cabinet's decisions in 1 and 2 above and no in respect of the Cabinet's recommendations to Council in 1 and 2 above.

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

None

Published

15 May 2026

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

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Record of Decisions

Torbay Joint Health and Wellbeing Strategy

Decision Taker

Cabinet on 12 May 2026

Decision

That Council be recommended to approve the 'Our Healthy Neighbourhoods' Torbay Joint Health and Wellbeing Strategy 2026 – 2030 as set out in the revised Appendix 1 supplement published on 11 May 2026, to the submitted report as a Policy Framework document of Torbay Council.

Reason for the Decision

The 'Our Healthy Neighbourhoods' Torbay Joint Health and Wellbeing Strategy 2026 – 2030 reflects the importance of the programme of work in helping to realise the Council's vision for Torbay, by supporting healthier lives, improved wellbeing and long-term prosperity.

Implementation

The decision above will be considered at the adjourned annual Council meeting on 14 May 2026.

Information

The 'Our Healthy Neighbourhoods' Torbay Joint Health and Wellbeing Strategy 2026 – 2030 was developed in line with the statutory duty on local authorities and the NHS to address needs and inequalities identified in the Joint Strategic Needs Assessment (JSNA) and to set shared priorities for action. It was developed collaboratively with Health and Wellbeing Board Members during 2025, agreed for consultation by the Board and approved by Cabinet in December 2025. The Strategy focuses on supporting integrated working across health, care and wider council functions, with a clear vision centred on healthy neighbourhoods and prevention in place.

Alternative Options considered and rejected at the time of the decision

There was no alternative option, as local authorities and the NHS are subject to a statutory joint duty, exercised through the Health and Wellbeing Board, to produce both a JSNA and a Joint Health and Wellbeing Strategy. This legal requirement necessitates the development and publication of the Strategy, meaning that not proceeding was not a viable option.

Is this a Key Decision?

Yes

Does the call-in procedure apply?

No

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

None

Published

14 May 2026

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

Record of Decisions

Gillard Road, Brixham – Public Path Creation Order

Decision Taker

Cabinet on 12 May 2026

Decision

That Cabinet recommend to the Adjourned Annual Council meeting on 14 May 2026:

1. that the Divisional Director for Place Strategy be requested to exercise his delegated powers to authorise the making of a Public Path Creation Order under Section 26 of the Highways Act 1980 in respect of the footpath at/off Gillard Road, Brixham shown edged red on the plan shown on Appendix 1, attached to the submitted report; and
2. that the Divisional Director for Place Strategy, in consultation with the Cabinet Member for Place Development and Economic Growth, be given delegated authority to confirm the Order if there are no objections or objections are withdrawn. In circumstances where there are objections, the Divisional Director for Place Strategy shall seek confirmation of the Order from the Secretary of State.

Reason for the Decision

The proposal supports the delivery of Torbay's vision for a healthy, happy, and prosperous community by safeguarding a safe, reliable, and accessible walking route for everyday use. Protecting this link strengthens neighbourhood connectivity, promotes active travel, and contributes to improved health outcomes and community participation, in line with the Community and People theme.

Implementation

The decisions above will be considered at the adjourned annual Council meeting on 14 May 2026.

Information

The walking route alongside and connecting from Gillard Road, Brixham is currently a permissive path, meaning public access is allowed at the discretion of the landowner and can be withdrawn at any time. Risk to the route emerged when the land, previously owned by Torbay Coast and Countryside Trust (TCCT), entered liquidation and was offered for sale, creating uncertainty over the future of public access.

While Torbay Council manages and maintains the Public Rights of Way (PROW) network recorded on the Definitive Map and Statement, permissive paths are not legally protected and fall outside the Council's statutory responsibilities. As a result, continued public access to this well-used and valued route cannot be guaranteed, particularly following changes in land ownership.

Without formal designation, there is a real risk that the community could lose a safe and important walking link relied upon by residents and visitors. Designating the route as a PROW would secure its long-term availability, provide legal protection, and ensure it can be properly maintained as part of the wider network.

Alternative Options considered and rejected at the time of the decision

Continuing to rely on voluntary landowner permission would require no immediate legal or resource commitment and may preserve access in the short term. However, public access would remain unsecured and could be withdrawn at any time, particularly following the sale of the land, with a real risk of the route being lost.

Seeking a long-term permissive access agreement with new landowners would allow continued use without establishing a Public Right of Way (PROW) and would be less administratively complex. However, access would remain non-permanent, could still be withdrawn in future, and would carry no statutory maintenance obligation, potentially resulting in inconsistent path quality.

Alternatively, entering into a Public Path Agreement under Section 25 of the Highways Act 1980 would secure the route as a PROW through voluntary dedication. However, following the land sale, ownership is expected to be fragmented, making negotiations complex and potentially prolonged.

Is this a Key Decision?

Yes

Does the call-in procedure apply?

No

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

None

Published

14 May 2026

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

Record of Decisions

Lessons Learned from the Call-in of the Cabinet's Decision on the Implementation of the English Riviera Beach Standards

Decision Taker

Cabinet on 12 May 2026

Decision

That the Cabinet's response to the Lessons Learned from the Call-in of the Cabinet's Decision on the Implementation of the English Riviera Beach Standards – Report of the Overview and Scrutiny Sub-Board be approved as published.

Reason for the Decision

The Cabinet was required to respond to the findings of the Overview and Scrutiny Sub-Board.

Implementation

This decision will come into force and may be implemented on 26 May 2026 unless the call-in procedure is triggered (as set out in the Standing Orders in relation to Overview and Scrutiny).

Information

The Cabinet received the report of the Overview and Scrutiny Sub-Board on the Lessons Learned from the Call-in of the Cabinet's Decision on the Implementation of the English Riviera Beach Standards. In accordance with section D7 of Standing Orders in relation to Overview and Scrutiny as set out in the Constitution, the Cabinet was required to respond to the recommendations of the Overview and Scrutiny Sub-Board within two months. Subsequently the Cabinet prepared a response to the recommendations of the Overview and Scrutiny Sub-Board which was proposed by Councillor Billings and seconded by Councillor Jackie Thomas and agreed unanimously by the Cabinet, as set out above.

Alternative Options considered and rejected at the time of the decision

None.

Is this a Key Decision?

No.

Does the call-in procedure apply?

Yes

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

None.

Published

15 May 2026

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

Record of Decisions

Child Friendly Torbay Action Plan

Decision Taker

Cabinet on 12 May 2026

Decision

1. that the Cabinet approve the Child Friendly Torbay Action Plan as set out at Appendix 1 to the submitted report and endorses this as the framework for delivering Torbay's commitment to embedding children's rights in decision-making, and approve submission of the same to UNICEF, in order to receive their 'Certification of Commitment'; and
2. that Chief Executive be authorised to oversee implementation and governance arrangements for delivery of the Action Plan, including agreeing any minor amendments required to reflect the final UNICEF requirements, and to receive regular progress updates through established governance and scrutiny routes.

Reason for the Decision

To agree and endorse a sustainable, partnership-led Child Friendly Action Plan that supports the delivery of Torbay's vision for a healthy, happy and prosperous community by embedding a child rights-based approach across the Council and its partners. The Plan responds directly to extensive consultation with children and young people, reflecting their concerns about safety, access to mental health and healthcare services, and the need for clearer information and meaningful involvement in decision-making. It establishes clear priorities, outcomes, governance and accountability arrangements, alongside a monitoring framework to track progress and drive continuous improvement. Adoption of the Plan will strengthen participation, integrate child rights into policy and service design, and position Torbay to achieve UNICEF 'Certification of Commitment' by demonstrating a robust, evidence-led and deliverable programme of activity.

Implementation

The decision will come into force and may be implemented on 26 May 2026 unless the call-in procedure is triggered (as set out in the Standing Orders in relation to Overview and Scrutiny).

Information

Torbay Council has been part of UNICEF UK's Child Friendly Cities & Communities programme, working with partners to embed a child rights-based approach that ensures children and young people can influence and benefit from local decisions, services and spaces. This approach has been supported by strong partnership working and a cross-party commitment, alongside extensive engagement with children and young people which captured 1,860 voices and identified key priorities, including safety, access to mental health support, and meaningful involvement in decision-making. Following changes to UNICEF UK's programme,

the Council was now seeking endorsement of its proposed submission for a Certificate of Commitment, supported by an evidence-led Action Plan that sets out clear priorities, governance arrangements and participation mechanisms. The Plan has been designed in line with UNICEF's criteria to demonstrate a structured and deliverable approach to achieving sustained improvements for children and young people in Torbay, with ongoing monitoring, accountability and partner involvement.

Alternative Options considered and rejected at the time of the decision

None.

Is this a Key Decision?

No.

Does the call-in procedure apply?

Yes.

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

None

Published

15 May 2026

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

Record of Decisions

Transfer of Land, at various sites in Brixham, to Brixham Town Council

Decision Taker

Cabinet on 12 May 2026

Decision

1. that the Director of Finance be authorised to dispose of the Council's freehold interest in land at Churchill Memorial Gardens, Berry Head Road, Brixham, Brixham War Memorial, Berry Head Road, Brixham and Jubilee Gardens, Berry Head Road, Brixham to Brixham Town Council for £1, with each transfer including restrictive covenants on the future use of the land and financial clawback should any of the sites be sold for a higher value at a future point in time; and
2. that the Director of Finance be authorised to agree and finalise the detailed transfer terms based on estates and legal advice.

Reason for the Decision

The proposed disposal of the three identified assets to Brixham Town Council will reduce Torbay Council's economic and operational liabilities by removing associated ongoing operating costs. Brixham Town Council considers that the long-term stewardship of these assets is best managed locally, ensuring decisions reflect community priorities. Given the significant local value of each site, the transfer is expected to enhance accessibility, maintenance, and use for the benefit of residents and visitors to Brixham.

Implementation

The decision will come into force and may be implemented on 26 May 2026 unless the call-in procedure is triggered (as set out in the Standing Orders in relation to Overview and Scrutiny).

Information

In February 2026, Brixham Town Council requested the transfer of Churchill Memorial Gardens, Brixham War Memorial Garden, and Jubilee Gardens, citing the benefits of local stewardship aligned with community priorities. The request was assessed against financial, strategic, statutory, and best consideration criteria, and the sites were identified as surplus with limited redevelopment potential. Transferring the freehold will transfer ongoing liabilities to the Town Council, reducing Torbay Council's financial and operational responsibilities, while safeguarding the gardens' local heritage and community value.

Alternative Options considered and rejected at the time of the decision

The Council is not required to dispose of the assets and could retain ownership. However, continued Council ownership would require ongoing management and incur holding and maintenance costs. Disposal would remove this liability for Torbay Council and enable wider non-financial benefits through a strategic partnership with Brixham Town Council.

Is this a Key Decision?

No

Does the call-in procedure apply?

Yes

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

None.

Published

15 May 2026

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

Report title: Disposal of Occombe Farm and Land laying North of Preston Down Road, Paignton

Report to:	Cabinet
Date:	9th June 2026
Lead Cabinet Member:	Cllr Chris Lewis, Cabinet Member for Place Development and Economic Growth
Email:	chris.lewis@torbay.gov.uk
Lead Director:	Malcolm Coe, Director of Finance
Email:	malcolm.coe@torbay.gov.uk
Wards affected:	Preston and Cockington with Chelston

1. Summary of Report:

- 1.1. This report recommends the freehold disposal of the Council's freehold interest of Occombe Farm and land laying North of Preston Down Road, Paignton, extending to approximately 36.16 hectares (shown edged red in Appendix 1), to Greendale SPV 1 Limited (Greendale) for a sum in excess of Market Value, as determined by an independent Royal Institute of Chartered Surveyor's compliant valuation of the site.
- 1.2. The disposal will see Greendale reopen Occombe Farm and bring forward a proposal to redevelop the site to offer a range of leisure and retail facilities to the community, as well as develop part of the site into a glamping holiday destination. Greendale intends to inject considerable capital investment into the site over a multi-year period which will create new jobs for local residents.
- 1.3. The proposal aligns with the Council's Asset Management Strategy, which identifies surplus assets and seeks to dispose of them where appropriate to generate capital receipts, reduce liabilities, and stimulate economic development.

2. Recommendations and Proposed Decision:

2.1 That the Director of Finance in consultation with Cabinet Member for Place Development and Economic Growth be authorised to dispose of the Council's freehold interest of Occombe Farm and land lying north of Preston Down Road Paignton, (as set out in Appendix 1), to Greendale SPV 1 Limited for a sum in excess of Market Value (as set out in exempt Appendix 2 to the submitted report) and agree and finalise the detailed transfer process and terms based on estates and legal advice, which will include overage provisions.

3. Reasons for Recommendations/Proposed Decision:

- 3.1 The proposal to dispose of this asset to Greendale SPV 1 Limited will generate a capital receipt for the Council and will provide the following additional benefits:
- Support the growth of a Devon based business providing jobs and income to local residents.
 - Reduce the Council's ongoing holding and maintenance liabilities associated with the site.
 - Bring forward development of the site that has been closed since December 2025, following the demise of Torbay Coast and Countryside Trust ('The Trust').
 - Generate a significant capital receipt in excess of Market Value which will facilitate the fulfilment of other appropriate medium-term projects.
 - Will lessen the burden placed on SWISCo to maintain farmland and a wooded area that is protected under a Special Site of Scientific Interest designation.
- 3.2 Greendale's vision is to promote the sale of locally sourced produce including beef and fish and to sell these in the reopened farm shop and café at Occombe Farm. This sustainable model promotes healthy lifestyle, boosting local economy, and reducing carbon emissions. Additionally, the aim is to re-introduce the indoor play area, which was previously enjoyed by visitors to the site, ensuring the local community retain elements of the experience they have enjoyed under the previous ownership.
- 3.3 The vision will also see the wider land and buildings developed to include indoor sports courts, which will also provide new health and sports facilities promoting wellness within the community. Further, Greendale's long-term vision subject to planning, is to develop the wider land to create a glamping holiday retreat. This will attract tourism to the area, boosting local businesses, and help create jobs for local residents.

4. Background and Context:

4.1 Torbay Council Strategic Asset Management Plan sets out the Council's approach to the strategic management of its assets, how it will support service delivery, provide the Council

with income and how it will fulfil its mission to support, enable and empower its residents, our communities and our partnerships, to promote growth and place shaping within Torbay.

- 4.2 A identified principle of Strategic Asset Management Plan is at regular intervals to review all non-operational and surplus assets to identify opportunities to create or increase revenue income, provide investment opportunities or deliver capital receipts to stimulate development, growth and reinvestment.
- 4.3 The site was previously operated by the Trust under a long-term lease held from the Council. However, The Trust went into administration in December 2025, and the site was handed back to the Council. To keep the site secure, the Council has needed to deploy an on-site permanent external security firm throughout 2026, to protect the site whilst a long-term decision was made on the future use. The on-going holding costs of the vacant asset is and continues to be significant.
- 4.4 To facilitate the decision on future use and options for the site the Council's Asset team obtained an independent valuation undertaken by Stags Professional Services, producing a Market Value. This valuation formed the basis for negotiation with Greendale, following their interest becoming known. Negotiations crystalised and resulted in the submission of an unconditional offer above Market Value.

5. Alternative Options Considered:

- 5.1 SWISCo had approached the Council for part of the site for use as a depot for their fleet and operations in this part of Torbay. This option did not include the whole site and left the Council needing to seek a leasehold disposal of the remaining site. Splitting the site into multiple components would lessen the total capital value.
- 5.2 Retaining the asset in its current vacant state would result in increasing holding costs and liabilities.
- 5.3 Marketing the site and inviting other offers such as speculative or conditional offers would introduce risk, delay, and uncertainty.
- 5.4 Retain the site and market the opportunity on a leasehold basis. Whilst this option would provide a revenue, it was considered unlikely a lease of the whole site in its entirety to one operator would be secured. Even if that was a possibility, any incoming tenant would look to the Council to provide a significant lease incentive. More likely, the site would become multi-let and management intensive. Consequently, the Council would need to retain responsibility for the holding costs along with dealing with management issues such as securing boundaries and site security for any void units and the wider demise. This would come with an additional ongoing financial burden.

6. Contribution to Council Priorities:

- 6.1 The Council is not under any obligation to dispose of any given asset. However, the Council's ongoing management and cost of holding vacant assets is significant. Disposing of this asset will reduce this liability and generate a capital receipt.

7. Consultation and Engagement:

- 7.1 There has been no formal consultation or engagement undertaken in terms of the proposed disposal of the site.

8. Implications:

Financial Implications:

The Council's Asset Management Strategy states that the Council will 'always seek to maximise the full market receipt for their assets whether by way of freehold disposal or leasehold interest'. The independently appointed valuation established that Greendale's offer is above market value.

Legal Implications:

There are no legal implications anticipated with this disposal. Disposing of this asset will need to be documented, along with the preparation of legal packs to support a sale. This disposal will be dealt with by the Council's in-house Legal Team where capacity allows, otherwise it will be outsourced.

An overage clause has also been agreed that would be triggered should any part of the site be sold in the future for residential development.

Corporate Parenting/Children and Young People:

No impacts are anticipated with the disposal of this land. The land is currently unused and does not provide any service to children or young people. Greendale's proposal includes leisure facilities that improve health and wellbeing to the community.

Associated Risks, Risk Tolerance Level and Mitigations:

A summary of key risks associated with the recommendations in this report are:

1. Financial Risk – mitigated through maximising capital revenue above market value.
2. Missed Development Opportunity – monitored through legal practices such as an overage clause.

The risks of not approving the recommendations, include failure to obtain a capital receipt preventing regeneration strategies across Torbay, and a risk of retaining liability for the site in respect of land management and maintenance. Overall risk exposure is assessed as acceptable within the Council's risk tolerance appetite.

Full risks are set out below:

Risk	Risk score before mitigations (likelihood x impact)	Mitigations	Risk Score after mitigations (likelihood x impact)	Risk tolerance
Undervaluation	12	Independent valuation	4	By appointing an independent valuation, we have expert guidance on open market value.
Loss of future revenue	9	Overage clause and restrictive covenants	2	The Overage clause means that should a change of use planning application by lodged in the future, the Council do not miss out on lost revenue.
Social Value	9	Careful consideration of Greendale's proposal with community in mind	4	Greendale's proposal is community focussed and maintains many of the elements the community enjoyed at Occombe Farm previously.

Contributions to tackling climate change or achieving carbon neutrality:

Greendale propose to use their partnership with its sister company Waterdance Ltd, to source food for the farm shop and café via locally sourced, sustainable methods. This means food is travelling less distance from source, reducing transport and pollution. Greendale also plan to plant trees in a later phase of development as part of their glamping holiday park.

Social Value Considerations:

The development will include leisure facilities for the local community and create approx. 100 – 200 new jobs for residents.

Procurement Implications:

There are no significant procurement implications as this is an off-market transaction agreed above Market Value.

Other Implications:

There are no significant additional implications as all development will be outside of Council remit.

9. Equalities 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	<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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable

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
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable

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
Page 31 Space	<p>Torbay (average of 56.0 per 1,000) than the Southwest (53.4) and broadly in line with England (56.3).</p> <ul style="list-style-type: none"> For the period 2022 to 2024, rates in Torbay (44.6) have been significantly below England (50.0). 			
	<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>No adverse impacts are expected as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>

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
	<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>Religion and belief</p> <p>Page 32</p>	<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>No adverse impacts are expected as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>
<p>Sex</p>	<ul style="list-style-type: none"> 51.3% of Torbay's population are female. 	<p>No adverse impacts are expected as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>

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
	<ul style="list-style-type: none"> 48.7% of Torbay's population are male. 			
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 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable

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
<i>Additional considerations:</i>				
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. 	Potential to improve community engagement. Long term use will be employment related, creating new jobs within the locality.	Not applicable	Not applicable
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. 	Development will introduce new public health facilities and also provide additional employment.	Not applicable	Not applicable
Human Rights impacts		No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable
Child Friendly		No adverse impacts are expected as the space is currently unused.	Not applicable	Not applicable

10. Cumulative Council Impact:

None

11. Cumulative Community Impact:

None

12. Monitoring and Evaluation:

No monitoring is required as recommendation is a freehold disposal

Appendices:

1. Site Plan – EM4408
2. Valuation Note (Exempt)

Background Documents:

None

Officer Contact Details:

Name: Paul Palmer

Title: Strategic Head of Asset Management

Email address: paul.palmer@torbay.gov.uk

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Report title: Disposal of Land at Claylands (Phase 2), Paignton

Report to:	Cabinet
Date:	9 June 2026
Lead Cabinet Member:	Cllr Chris Lewis, Cabinet Member for Place Development and Economic Growth
Email:	chris.lewis@torbay.gov.uk
Lead Director:	Malcolm Coe, Director of Finance
Email:	malcolm.coe@torbay.gov.uk
Wards affected:	Goodrington with Roselands / Paignton

1. Summary of Report:

- 1.1 This report recommends the freehold disposal of land at Claylands (Phase 2), Brixham Road, Paignton, TQ4 7BA, extending to approximately 2.57 hectares / 6.39 acres to Brixham Trawler Agents Limited (BTA) for Market Value, as determined by an independent Royal Institution Chartered Surveyor's compliant valuation of the site as shown edged red in Appendix 1.
- 1.2 The land forms part of a wider employment allocation and has remained undeveloped for several years following development of the site adjacent, occupied by Investment Castings. Disposal to BTA will support local economic activity and reduce the Council's ongoing holding costs and liabilities. Disposal to BTA will facilitate their extraction from Oxen Cove, helping to unlock redevelopment of the area under the Port Infrastructure Project.
- 1.3 The proposal aligns with the Council's Asset Management Strategy, which identifies surplus assets and seeks to dispose of them where appropriate to generate capital receipts, reduce liabilities, and stimulate economic development.

2. Recommendations and Proposed Decision:

- 2.1 That the Director of Finance in consultation with Cabinet Member for Place Development and Economic Growth be authorised to dispose of the Council's freehold interest in land at

Claylands (Phase 2), Brixham Road, Paignton, as shown edged red in Appendix 1 to BTA for Market Value (as set out in exempt Appendix 2).

- 2.2 That the Director of Finance be authorised to agree and finalise the detailed transfer process and terms based on estates and legal advice, in consultation with the Cabinet Member for Place Development and Economic Growth.

3. Reasons for Recommendations/Proposed Decision:

- 3.1 The disposal of this surplus employment land to BTA will generate a capital receipt for the Council and will provide the following additional benefits:
- Support the growth of a significant local business operating within Torbay's marine and fisheries sector and enable BTA to develop new operational facilities.
 - Reduce the Council's ongoing holding and maintenance liabilities associated with the site.
 - Bring forward development on a site that has remained undeveloped due to viability and infrastructure constraints.
 - Unlock the Port Infrastructure Project involving redevelopment of Oxen Cove through relocation of BTA from this site.
- 3.2 The land is a former inert waste quarry with limited developable area (estimated at 1.8 hectares or 4.45 acres). The independent valuation reflects the site's constraints, including topography, woodland retention, access limitations, and the need for significant enabling works.

4. Background and Context:

- 4.1. Torbay Council Strategic Asset Management Plan sets out the Council's approach to the strategic management of its assets, how it will support service delivery, provide the Council with income and how it will fulfil its mission to support, enable and empower its residents, our communities and our partnerships, to promote growth and place shaping within Torbay.
- 4.2. An identified principle of Strategic Asset Management Plan is at regular intervals to review all non-operational and surplus assets to identify opportunities to create or increase revenue income, provide investment opportunities or deliver capital receipts to stimulate development, growth and reinvestment.
- 4.3 The site has been marketed previously for employment led development. No viable proposals have been progressed due to site constraints and development costs.
- 4.4 The independent valuation undertaken by Vickery Holman produced a Market Value that reflects the limited net developable area, ground conditions, ecological constraints, and infrastructure requirements.

5. Alternative Options Considered:

- 5.1 Retaining the asset would continue to incur holding costs and liabilities.
- 5.2 Leasehold disposal has been considered but rejected due to the constraints associated with the site.
- 5.3 Marketing the site and inviting other offers such as speculative or conditional offers would introduce risk, delay, and uncertainty. It would not facilitate the vacant possession strategy relating to Oxen Cove and may impact delivery of the Port Infrastructure Project.
- 5.4 BTA's unconditional offer provides certainty and aligns with the intended employment use.

6. Contribution to Council Priorities:

- 6.1 The Council is not under any obligation to dispose of any given asset. However, the Council's ongoing management and cost of holding vacant assets is significant. Disposing of this asset will reduce this liability and generate a capital receipt, whilst realising non-monetary benefits associated with relocating BTA away from Oxen Cove.

7. Consultation and Engagement:

- 7.1 No formal public consultation has been undertaken as the disposal relates to a surplus employment site. Any future development proposals by BTA will be subject to the statutory planning process.

8. Implications:

Financial Implications:

The Council's Asset Management Strategy states that the Council will 'always seek to maximise the full market receipt for their assets whether by way of freehold disposal or leasehold interest'. The independent valuation established that BTA's offer is in line with market value.

Legal Implications:

There are no legal implications anticipated with this disposal. Disposing of this asset will need to be documented, along with the preparation of legal packs to support a sale. This disposal will be dealt with by the Council's in-house Legal Team where capacity allows, otherwise it will be outsourced.

A restriction will also be placed on the Land Registry Title preventing use of the land for residential purposes.

Corporate Parenting/Children and Young People:

No impacts are anticipated with the disposal of this land. The land is currently unused and does not provide any service to children or young people. There are indirect benefits through economic activity.

Associated Risks, Risk Tolerance Level and Mitigations:

A summary of key risks associated with the recommendations in this report are:

1. Financial Risk – mitigated through maximising capital revenue above market value.
2. Risk of non-development – mitigated through BTA’s operational need for the site.

The risks of not approving the recommendations include failure to achieve market value if the Council was minded to dispose of the site to another party, risk of retaining liability for the site in respect of land management and maintenance, and risk of the Port Infrastructure Project being delayed or not deliverable through an inability to re-locate BTA to another site. Overall risk exposure is assessed as acceptable within the Council’s risk tolerance appetite.

Full risks are set out below:

Risk	Risk score before mitigations (likelihood x impact)	Mitigations	Risk Score after mitigations (likelihood x impact)	Risk tolerance
Risk of non-development	15	Mitigated by securing an occupier and BTA’s operational need for the site.	4	Acceptable
Financial risk – achieving market value		By appointing an independent valuation, we have expert guidance on open market value.		Acceptable

Contributions to tackling climate change or achieving carbon neutrality:

No differential impact.

Social Value Considerations:

Positive long-term employment benefits through bringing a long-term vacant employment site into use.

Procurement Implications:

None. This is an off-market transaction at market value.

Other Implications:

None.

9. Equalities 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	<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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable

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
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable

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
<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 49</p>	<p>Torbay (average of 56.0 per 1,000) than the Southwest (53.4) and broadly in line with England (56.3).</p> <ul style="list-style-type: none"> For the period 2022 to 2024, rates in Torbay (44.6) have been significantly below England (50.0). 			
<p>Place</p>	<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>No adverse impacts are anticipated from this decision as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>

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
	<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>Religion and belief</p> <p>Page 50</p>	<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>No adverse impacts are anticipated from this decision as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>
<p>Sex</p>	<ul style="list-style-type: none"> 51.3% of Torbay's population are female. 	<p>No adverse impacts are anticipated from this decision as the space is currently unused.</p>	<p>Not applicable</p>	<p>Not applicable</p>

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
	<ul style="list-style-type: none"> 48.7% of Torbay's population are male. 			
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 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable
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. 	No adverse impacts are anticipated from this decision as the space is currently unused.	Not applicable	Not applicable

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
<i>Additional considerations:</i>				
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. 	Long term use will be employment related, creating new jobs within the locality.	Not applicable	Not applicable
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. 	No differential impact specific to this group	Not applicable	Not applicable
Human Rights impacts		No adverse impacts are anticipated.	Not applicable	Not applicable
Child Friendly		No differential impact specific to this group	Not applicable	Not applicable

10. Cumulative Council Impact:

None

11. Cumulative Community Impact:

None

12. Monitoring and Evaluation:

No monitoring or evaluation required, this is a freehold sale of land.

Appendices:

- 1 Site plan
- 2 Valuation Note (EXEMPT)

Background Documents:

None

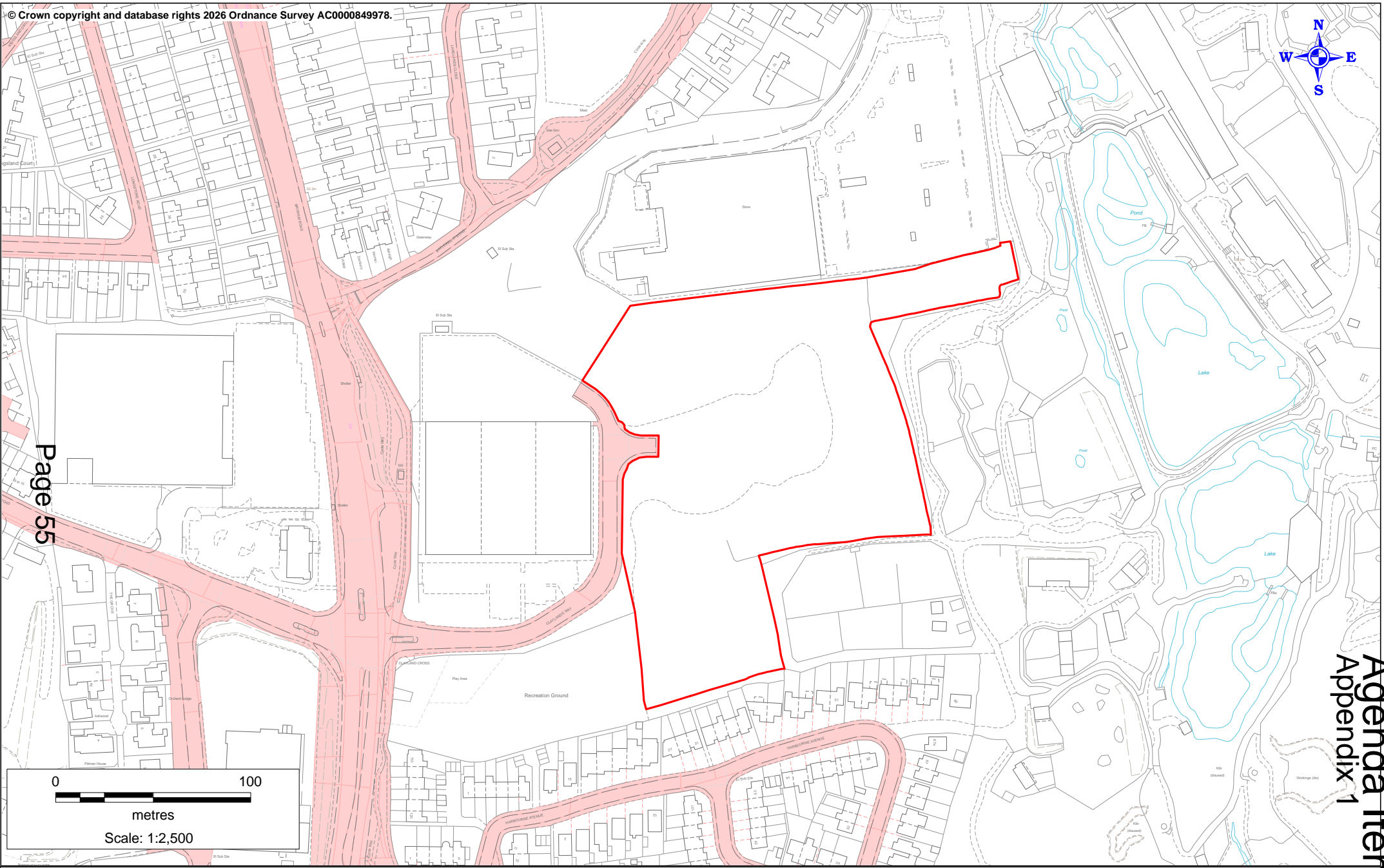
Officer Contact Details:

Name: Jon Veale

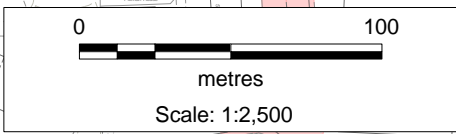
Title: Estates Manager

Email address: Jonathan.veale@torbay.gov.uk

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EM Plan No: EM4409
Date: 19 May 2026
Title: Land on the East Side of Brixham Road, Paignton

Asset No: P0157AB
LR Title No: DN547524
Scale: 1:2500 @ A4
Area: 25,720 m²

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Meeting: Overview and Scrutiny/Cabinet/Council

Date: 3/9 June & 23 July 2026.

Wards affected: All Wards

Report Title: Budget Monitoring – Revenue and Capital Outturn 2025/26 Quarter 4

When does the decision need to be implemented? N/A

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

Supporting Officer Contact Details: Ian Rowswell, Deputy Director of Finance,
ian.rowswell@torbay.gov.uk,

1. Purpose and Introduction

- 1.1. This report provides a summary of the Council's revenue and capital position for the financial year 2025/26. The year end outturn figures are based on spend and financial information at the end of the financial year, with variances against the approved budget.
- 1.2. The Council has delivered a year end underspend of £0.174m against its revenue budget, an improvement of £0.873m on the position projected at quarter 3 (Q3). The report highlights the areas where material variances have occurred, the reasons for them and treatment of the underspend.
- 1.3. An updated Capital Investment Plan is shown as Appendix 1 and highlights spend against a total revised capital budget of £131.083m for the period up to 2028/29 and a revised budget of £46.072m for 2025/26. This spend is funded from capital receipts, grants and contributions, reserves, revenue budget contributions, and long-term borrowing.

2. Recommendations

Recommendations for Overview and Scrutiny Board

- 2.1. That the Overview & Scrutiny Board notes the Council's forecasted revenue outturn position and makes any comments and/or recommendations to the Cabinet on the use of the £0.174m year-end underspend.
- 2.2. That the Overview & Scrutiny Board notes the Council's Capital outturn position and makes any comments and/or recommendations to the Cabinet.
- 2.3. That the Overview & Scrutiny Board notes the updates to the Capital Investment Plan and the revised budget and makes any comments and/or recommendations to the Cabinet.

Recommendations for Cabinet/Council

2.4. That the Cabinet considers the recommendations of the Overview and Scrutiny Board and recommends to Council:

- a. that Council notes the revenue outturn position.
- b. That Council approved the transfer of the £0.174m year-end surplus into a specific reserve to be allocated across priority initiatives, to be determined by Cabinet, with consideration given to areas identified through the 2026/27 budget setting consultation responses and December 2025 resident's survey results.
- c. That Council approves the revisions to the Capital Investment Plan, as set out in Appendix 1 to the submitted report.

3. 2025/26 Budget Summary – as at 31 March 2026

3.1. Across the Council there was a total underspend at the end of the 2025/26 financial year of (£0.174m).

3.2. The table below provides a summary across Council Service Directorates.

Service	Final Budget £m	Final Outturn £m	Year end Variance £m	Forecast at Q3 £m
Adults and Community Services	48.994	48.730	-0.264	-0.137
Children's Services	45.545	48.081	2.536	2.210
Corporate Services	15.417	15.831	0.414	0.402
Financial Services	13.045	10.128	-2.917	-1.857
Investment Portfolio	-4.134	-4.134	0.000	0.000
Pride in Place Services	28.620	28.687	0.067	0.081
Public Health Services	0.016	0.006	-0.010	0.000
Revenue sub-total	147.503	147.329	-0.174	0.699
Sources of Finance	147.503	147.503	0.000	0.000
Revenue Over/ (Under) spend	0.000	-0.174		

3.3. The significant overspend within Children's Services is due to increased spend on Childrens Social Care placements, which is detailed later in the report. This has been offset by underspends elsewhere within Childrens Services and the Council, particularly within Treasury Management budgets. Some areas of overspend have been addressed through the 2026/27 budget setting process, however, whilst over £2m additional funding was allocated to Children Social Care, this will not be sufficient if current spend levels continue – hence further action will be required, as detailed within the Financial Sustainability Plans.

3.4. The overall outturn position for the Council in 2025/26 has improved compared with the £699k overspend forecast at Quarter 3. Whilst this is a positive position, we will review variances across services with the aim of identifying lessons learnt for the future and budgets that may require further review and more robust monitoring throughout 2026/27.

3.5. Financial Sustainability Plans relating to key financial risks and opportunity areas continue to be developed and maintained by each Director, overseen collectively by the Chief Executive and Directors. These include:

- Adult Social Care – Transformation programme
- Adult Social Care – Market management
- Children’s Social Care placements
- Home to School Transport
- Children’s Locality Model and oversight of Safety Valve
- Prevention and relief of homelessness
- Legal Services – staffing and agency costs
- Revenue and Benefits (Council Tax and NNDR collection rates)
- Management of Heritage Assets (Cockington, Oldway, Torre Abbey and Pavilion)
- Optimisation of Council Assets
- Planning, Building Control and Land Charges income targets
- Council Use of Artificial intelligence and Overarching Plan (being developed)

3.6. Action taken in respect of these plans have had a positive impact in mitigating cost pressures although, as in Childrens Placements, a small number of complex and costly placements may result in costs far exceeding budgets and projections. In other areas such as Legal Services, we have seen the forecast overspend reduce through the year.

3.7. The Dedicated Schools Budget, and particularly the Higher Needs Block, is not currently shown within the table above. Spend has continued to be monitored as part of our Safety Valve agreement in order to facilitate the write-off of accumulated deficits, totalling £18.031m at the end of 2025/26. Achieving the targets outlined and agreed within the Safety Valve Plan has proved increasingly challenging with a final year end overspend on the DSG budgets of £3.563m for 2025/26. A summary of the position is detailed in para 3.22.

Service Budgets

3.8. The table below summarises the most material variances (over circa £0.100m), which are explained further within the service sections of the report.

Service	Current Budget £m	Final Outturn £m	Outturn Variance £m	Projected variance at Q3 £m
Adults and Community - Environmental Protection	0.898	0.715	-0.183	0.308
Childrens - Home to School transport	4.107	4.215	0.108	0.079
Children's - Social care placements (excl. UASC)	23.559	27.392	3.833	2.828
Children's – Staff costs (including agency)	22.228	21.630	-0.598	-0.605
Children's - Family Group Decision making and Therapeutic Team	0.583	0.183	-0.400	0.000
Children's - Preventative Services	0.150	0.022	-0.128	0.000
Children's – Adopt South West Service	0.688	0.798	-0.110	-0.090
Corporate – Legal Services	2.085	2.387	0.302	0.428
Corporate – IT Services	2.641	2.484	-0.157	-0.079
Corporate – Coroners Service	0.428	0.581	0.153	0.000
Finance – Investments and borrowing	18.572	16.448	-2.124	-1.100
Finance – Unused central pay contingency	0.757	0.000	-0.757	-0.757
Place – TCCT	0.315	0.555	0.240	0.000
Place - Highways – road closure income	(0.130)	(0.304)	-0.174	-0.100
Place – Concessionary Fares	3.656	3.474	-0.182	-0.140
Place – Resort Services	(0.139)	(0.011)	0.128	0.074
Place – Car Parking	(5.985)	(6.433)	-0.448	-0.450
Place - SWISCO	18.028	18.524	0.496	0.300

(Note: Other variances under £100k are not highlighted within this table hence totals will differ from overall variance mentioned above)

Adult and Community Services

3.9. Overall Adult Services are forecasting an underspend of **(£0.137m)**, which relates to Community Services rather than to Adult Social Care.

3.10. There was an overall underspend at year end of **(£0.183m)** across environmental protection services. This was mainly due to vacancies, but increased over the amount forecast at Q3 as a result of the optimisation of grant funding to offset spend.

3.11. In previous years we have experienced overspends and pressures within our Housing Options Service relating to increasing costs for homelessness prevention and the provision of Temporary Accommodation. A combination of increases in the 2024/25 and 2025/26 budget, alongside management actions such as the purchase of our own properties has resulted in no significant overspends being projected in this financial year. A Financial Sustainability Plan remains in place, which will continue to be monitored closely.

Children's Services

3.12. Overall Children's Services had a total overspend at year end of **£2.536m**, an increase on the £2.2m overspend forecast at Q3. The table below highlights the material variances.

Service	Budget £m	Outturn £m	Variance £m	Q3 Forecast £m
Childrens - Home to School transport	4.107	4.215	0.108	0.079
Children's - Social care placements (excl. UASC)	23.559	27.392	3.833	2.828
Children's – Staff costs (including agency)	22.228	21.630	-0.598	-0.605
Family Group Decision making and Therapeutic Team	0.583	0.183	-0.400	0.000
Preventative Services	0.150	0.022	-0.128	0.000
Children's – Adopt South West Service	0.688	0.798	-0.110	-0.090
Other variances	-	-	(0.169)	0.002
Outturn Position	-	-	2.536	2.210

3.13. The overspend is mainly due to pressures within budgets for Childrens social care placements, where there is a total overspend of **£3.833m**. This is attributable to high cost placements for children with complex needs, children not moving on to other low cost arrangements as planned and increases in weekly placement costs, which can lead to large variances against budgets and projections. These reasons plus challenges in projecting costs relating to unregulated placements, has resulted in the above variances.

3.14. There is a national sufficiency issue in respect of placements, affecting both fostering and residential children's homes. This challenge is further compounded by the requirement for post-16 placements to be Ofsted registered. These factors are causing significant disruptions in the market, with private providers substantially increasing their costs.

3.15. In practical terms, this means that for each available placement, there are a large number of local authority referrals. Despite receiving expressions of interest and attending matching meetings, providers often select children who are easier to place, leaving our more complex children, who may have dis-regulation issues or Deprivation of Liberty Safeguards (DoLS), struggling to find suitable placements. As a result, we are increasingly relying on unregulated provision, which is not only on the rise nationally but also comes at a significantly higher cost.

3.16. A financial sustainability plan remains in place as we strive to navigate these challenging circumstances and mitigate the risk to 2026/27 budgets and onwards.

- 3.17. There was an underspend of **(£0.598m)** in relation to staffing budgets (including agency), which has helped to offset the financial challenges highlighted above. This is due to the new staffing structure being implemented from 1st September 2025, where vacant posts were filled. Also, the use of agency staff continues to be reduced wherever possible.
- 3.18. The unplanned use of grant funding to meet costs within Family Group Decision Making and Therapeutic Team **(£0.400m)** and Preventative Services budgets (£0.128m) have also helped reduce the overspend and the total movement from Q3 projections.
- 3.19. The Home to School Transport budgets overspent by **£0.108m**, a slight increase on the projection at Q3. Actions taken within the Financial Sustainability Plan have managed to mitigate pressures through the year, but increasing requirements for more bespoke arrangements to get to and from school has resulted in costs exceeding budgets.
- 3.20. Outside of Local Authority funded activities, the schools' higher needs block in the Dedicated Schools Grant (DSG) remains under financial pressure from continual referrals and assessment for higher needs support for children. It has become increasingly challenging to keep costs within budget and an overspend has occurred on the DSG budgets in 2025/26 totaling £3.563m
- 3.21. The Council has been part of the Department for Education (DfE) Safety Valve programme, which supports councils in achieving future financial sustainability in this area. The Government's support will be replaced from 2026/27 with alternative arrangements whereby 90% of Councils' deficits will be funded on agreement of new SEND Reform Plans. For 2025/26 however, the DfE has provided additional funding in line with the Councils recovery plan, reducing the Council's cumulative DSG deficit.
- 3.22. Torbay Council has already received £9.810m from the DfE in response to its recovery plan, without which the DSG cumulative deficit at the end of 2025/26 would have been £18.031m. A summary of the year end position on the DSG is shown below:

Summary of Children's Services year end position 25/26

	DSG Over / (Under) Spend £
Special School / High Needs in-year adjustments	565,419
EHCP - In-year adjustments for Primary & Secondary Schools	564,565
No formal agreement with Health for their contributions towards EHCP costs	150,000
South Devon College placements	270,735
Independent Special School Placements	851,255
Recoupment between other Local Authorities for our pupils in their provision and vice versa	73,160
Education Other than at School - Bespoke Packages / Alternative Provision / SEND Direct Payments	1,639,190
Education element of Joint Funded Cared for Children Placements	(64,546)
Staff costs in-year vacancy savings	(106,861)
Medical Tuition Service - Contract Refund and savings from service coming back in-house from Sept 25	(351,611)
Vulnerable Children - including, Hospital Tuition & EAL	(66,063)
Other DSG	37,487
Totals	3,562,730

Corporate Services

3.23. Overall Corporate Services are forecasting an overspend of **£0.414m**, similar to the figure reported at Q3. The table below highlights the material variances

Service	Budget £m	Outturn £m	Variance £m	Q3 Forecast £m
Corporate – Legal Services	2.085	2.387	0.302	0.428
Corporate – IT Services	2.641	2.484	-0.157	-0.079
Corporate – Coroners Service	0.428	0.581	0.153	0.000
Other variances	-	-	0.116	0.053
Outturn position	-	-	0.414	0.402

3.24. The Legal Services budget overspent by **£0.302m**, an improvement on the £0.428m overspend forecast at Q3 and evidence that mitigating actions through the Financial Sustainability Plan has had an impact. The service has continued to experience financial challenges through 2025/26 due to increasing demand for services and difficulties in recruiting permanent staff. This is a national issue across the public sector, with difficulties competing with the salaries paid by other organisations, particularly within the private sector. Market factors have been reviewed to improve recruitment, but high demand levels mean vacancies and absences have been covered by agency staff and consequently spend levels have remained high.

3.25. The underspend for IT services projected at Q3 increased to **(£0.157m)** by year end. This was mainly due to vacancy savings and some planned non-staffing spend not materialising as expected in year.

3.26. The Coroners Service overspent by **£0.153m** at year end. This includes an estimated accrual for an charge based on a prudent approach. We are still awaiting mortuary bill apportionment figures and service costs, including overhead charges, which are in dispute with the provider.

Financial Services

3.27. Overall Financial Services are forecasting an underspend of (**£2.917m**), a larger figure than reported at Q3. The table below highlights the material variances:

Service	Budget £m	Outturn £m	Variance £m	Q3 Forecast £m
Finance – Investments and borrowing	18.572	16.468	-2.104	-1.100
Finance – Unused central pay contingency	0.757	0.000	-0.757	-0.757
Other variances	-	-	0.056	0.000
Outturn position	-	-	-2.917	-1.857

3.28. An underspend of (**£2.104m**) occurred across our Treasury Management budgets – an increase on the Q3 figure due to a prudent approach taken to projections. This is mainly as a result of increased interest rates being secured, meaning the Council has earned higher levels of interest on its cash investments than budgeted. We also have a saving on interest payable by the Council on the amounts borrowed as a result of managing borrowing requirements.

3.29. As part of setting the 2025/26 budget a central contingency was held to mitigate the risk from staff pay awards being higher than budgeted. This has not been required in 2025/26 and an underspend of (**£0.757m**) is being reported.

Investment Portfolio

3.30. The Council’s Investment Portfolio is forecast to provide a net revenue contribution, after the use of the investment property reserve, to cover lost rent, holding costs of vacant premises and landlord’s works.

3.31. The Council’s investment portfolio continues to contribute £4.134m towards Council activity, in line with the budget, whilst also maintaining its Investment Fund Reserve to offset future pressures as and when they arise.

Pride of Place

3.32. Overall Pride of Place services are projecting an overspend of **£0.067m**. The table below highlights the material variances.

Service	Budget £m	Outturn £m	Variance £m	Q3 Forecast £m
Place – TCCT	0.315	0.555	0.240	0.000
Place - Highways – road closure income	(0.130)	(0.304)	-0.174	-0.100
Place – Concessionary Fares	3.656	3.474	-0.182	-0.140
Place – Resort Services	(0.139)	(0.011)	0.128	0.074
Place – Car Parking	(5.985)	(6.433)	-0.448	-0.450
Place – SWISCO	18.028	18.524	0.496	0.300
Other variances	-	-	0.007	0.316
Outturn position	-	-	0.067	0.081

- 3.33. The budget relating to the Torbay Coast and Countryside Trust (TCCT) has overspent this year by **£0.240m**. This is a result of the Trust going into liquidation and having to take back and resume management of the land and buildings owned by the Council and previously leased back to the Trust. The Council incurred full year contractual costs with TCCT as well as costs with SWSICO to provide services during the later part of the year. The overspend relates to one-off costs and do not present a risk to the 2026/27 budget.
- 3.34. There is an underspend of **(£0.174m)** against Highways budgets, an increase on the year end projection made at Q3. This is mainly as a result of income from road closures continuing to exceed the annual budget.
- 3.35. The Concessionary fares budget underspent by **(£0.182m)** this year, a slight increase on Q3 figures. The costs are linked to the number of service users and figures for the year have been lower than estimated within the budget.
- 3.36. A over spend of **£0.128m** is forecast within our Resort Services budget, mainly due to one-off additional repair and maintenance costs, primarily due to weather damage.
- 3.37. The final underspend on budgets for Car Parking is **(£0.448m)**, as forecast at Q3. This is due to income exceeding budgets both from off street car parks and car parking enforcement. The warm weather during the summer months had a positive impact with increased demand for off street car parks in particular.
- 3.38. SWISCO's finished the 2025/26 financial year with an overspend of **£0.496m**, an increase on the £300k projected at Q3. This mainly relates to agency staffing and insurance costs exceeding budget plus the projected level of enforcement income being much lower than budgeted.

Public Health

3.39. Public Health is reporting a balanced position within its ring-fenced grant. There is a small underspend of £0.010m against Council budgets.

4. Collection Fund

- 4.1. Collection rates in 2025/26 do not have any impact on the current financial year with the Collection Fund equalisation reserve being maintained to manage any impact of shortfalls.
- 4.2. In-year income collection rates for 2025/26 were in broadly line with budgeted levels with no draw down from reserves required. A surplus was transferred into the equalisation reserve pending a further review around risk and appropriate reserve levels.

5. Wholly Owned Companies

- 5.1. As highlighted above SWISCo has experienced a number of financial pressures relating to operational delivery throughout 2025/26. A previous report provided for an additional loan to support a phased replacement of an ageing fleet of vehicles, to mitigate the additional costs associated with increased repairs and maintenance costs and associated hire costs, however these still had an impact during this financial year. SWISCO have also experienced increased insurance costs this year as well as agency staff costs that are much higher than budgeted due to the need to cover for various sickness and other absence in order to minimise service impact.
- 5.2. SWISCO also had a significant shortfall in enforcement income compared with the annual budget. An approach is now taken that focuses much more on education and community engagement rather than issuing penalty notices. This is working well but having an impact on the level of income collected.
- 5.3. TEDC staff returned to Council management in April 2024 and assets and contracts transferred at different times throughout the last year, with further transfers of assets taking place through this year. It is still necessary for the company to be in existence, until all assets are transferred, however we do not anticipate any material impact on the Council's accounts.

6. Capital

- 6.1. In 2025/26 the Council spent £46.072 on capital projects, which is part of a wider 4 year capital programme approved as part of the annual budget setting process
- 6.2. The spend for each project compared to budgets is shown in Appendix 1 to this report. The level of cost inflation on construction contracts remains high and along with supply chain issues have impacted on the "pace" of spend and capital expenditure for the year being less than forecast. The balance on unspent capital budgets will be transferred into future years.

6.3. The capital plan is amended quarterly in order to add the funding for projects which have been recommended at the Capital and Growth Board and subsequently approved by Council. The budget increased to £52.239m in quarter 1, increased to £73.771m in quarter 2 and reduced to £57.637m in quarter 3 due to re-profiling of spend into future years.

6.4. Details of the budget revisions, budget reprofiles and proposed budget carry forwards (variance to budget) are included in Appendix 1 and are summarised in the table below.

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend					
		Approved Budget	Budget Revisions	Budget Reprofiled	Revised Budget	Actual Spend	Variance to Budget
		£000's	£000's	£000's	£000's	£000's	£000's
Schools Capital Programme	54	4,663	65	339	5,067	2,918	(2,149)
Projects under Feasibility and Development	25,256	17,631	766	119	18,516	13,350	(5,166)
Economic Development / Regeneration	2,799	1,750	0	30	1,780	1,736	(44)
Housing Development / Investment	3,122	15,013	30	153	15,196	11,832	(3,364)
Environment / Climate Capital Investment	2,602	3,298	0	374	3,672	1,725	(1,947)
Transport Capital Investment	479	8,232	0	980	9,212	8,547	(665)
Coastal Defence / Flood alleviation	1,499	5,401	3,332	364	9,097	5,595	(3,502)
Sports, Leisure and Culture	635	205	12	0	217	190	(27)
Schools Closed Projects	7,325	767	0	0	767	128	(639)
Other Closed Projects	60,226	677	0	0	677	50	(627)
Total	103,998	57,637	4,205	2,359	64,202	46,072	(18,130)

The table below highlights the changes and provides a reconciliation from the approved budget to the revised budget.

Project Name	Amount	Comments
Revised Budget 2025/26	£57,637,000	Approved in February 2026
<u>Additions to the Capital Plan</u>		
Torbay Road, Paignton	£126,000	<p>Budget increase as per the project exception report presented to March CGB, required for the works to enhance the street scene on Torbay Road.</p> <p>Link to CGB Project Exception Report: Torbay Road, Paignton</p> <p>Source of Funding: Future High Street Fund</p>
Torquay Flood Alleviation Scheme	£1,410,000	<p>Funding required to enter into a contract to deliver the Property Flood Resilience element of the Torquay Flood Alleviation Scheme.</p> <p>Link to CGB Project Exception Report: Torquay Flood Alleviation Scheme</p> <p>Source of Funding: Environment Agency Flood Defence Grant in Aid</p>

Paignton Flood Alleviation Scheme	£977,000	Funding required to enter into a contract to deliver the Paignton Flood Alleviation Scheme Link to CGB Full Business Case: Brixham & Paignton Flood Alleviation Schemes Source of Funding: Environment Agency Flood Defence Grant in Aid
Brixham Flood Alleviation Scheme	£847,100	Funding required to enter into a contract to deliver the Paignton Flood Alleviation Scheme Link to CGB Business Case: Brixham & Paignton Flood Alleviation Schemes Source of Funding: Environment Agency Flood Defence Grant in Aid
Brixham Port Infrastructure	£640,000	Funding in respect of a further tranche of pre-construction activity to obtain planning consent and create further certainty on scheme viability. Link to CGB Strategic Business Case: Brixham Port Infrastructure Project Source of Funding: Local Regeneration Fund
2025/26 Other Budget Adjustments		
Various Project Budgets	£205,000	Funding Source: Various
Revised Budget before reprofiling	£61,842,100	
<u>Budgets Reprofiled from future years</u>		
Schools Capital Programme	£339,000	Budgets reprofiled from years based on spend profile in respect of projects (Detailed in Appendix 1)
Projects under Feasibility and Development	£119,000	
Economic Development /Regeneration	£30,000	
Housing Development	£153,000	
Environment / Climate Capital Investment	£374,000	
Transport Capital Investment	£980,000	
Coastal Defence / Flood alleviation	£364,000	
2025/26 Quarter 4 Revised Budget	£64,201,100	

6.5. Projects have been moved from feasibility and development to fully approved projects throughout the period on completion and approval of robust business cases. The business cases for these projects are reviewed by the Capital and Growth Board who recommend projects and funding for approval by Council.

6.6. The level of cost inflation on construction contracts remains high and along with supply chain issues have impacted on the “pace” of spend and capital expenditure for the year being less than forecast.

6.7. The balance on unspent capital budgets is proposed to be transferred into future years. For 2025/26, this balance is £18.130m which is variance to budget column detailed in the table in 6.4 and the table below.

6.8. Further details of the projects that have an underspend at year end, and which the budget is proposed to be carried forward, are included in Appendix 1.

2025/26 Quarter 4 Revised Budget	£64,201,100	
<u>Budgets Reprofiled to future years</u>		
Schools Capital Programme	(£2,149,000)	Budgets reprofiled to future years based on spend profile in respect of projects (Detailed in Appendix 1)
Projects under Feasibility and Development	(£5,166,000)	
Economic Development /Regeneration	(£44,000)	
Housing Development	(£3,364,000)	
Environment / Climate Capital Investment	(£1,947,000)	
Transport Capital Investment	(£665,000)	
Coastal Defence / Flood alleviation	(£3,502,000)	
Sports, Leisure & Culture	(£27,000)	
Schools Closed Projects	(£639,000)	
Other Closed Projects	(£627,000)	
2025/26 Proposed Budget Carry Forward	(£18,130,000)	
2025/26 Final Budget (after budget carry Forwards)	£46,072,000	

6.9. The range of capital projects demonstrates the breadth and scale of the capital programme projects affecting services including highways, schools, housing and regeneration.

7. Risks & Sensitivity

7.1. There are a number of financial risks facing the Council as shown below:

Risk	Impact	Mitigation
Financial sustainability and write-off of the DSG Deficit, given increasing spending challenges.	High	The Service continues to work closely with its schools and robustly manages and reports on its recovery plan approved with the Department for Education's Safety Valve programme. It is finalizing its SEND Reform Plan to meet new Government requirements replacing the Safety Valve.
Adult Social Care funding is not sufficient to meet forecast costs	High	Although notice has now been given on the contract the Director of Adult Social Care continues to work closely with Health Trust colleagues and our third-party transformation partners on a range of intervention activity and savings plans, in collaboration with the Trust.

Price increases from high inflation rates continue to have an impact on both revenue and capital costs.	Medium	The 2025/26 base budget included a higher than usual allowance for inflationary pressures and appropriate contingencies/reserves are held for revenue and capital.
The “cost of living” economic impact on the Council’s residents from higher fuel and utility costs is likely to impact on both demand for council services and may result in reduced income from Council Tax.	Medium	The Council will continue to mitigate where possible the impact on council services and support/signpost residents to support. The Council will continue to administer payments under both the Household Support Fund and Council Tax Rebates, whilst also monitoring collection rates.
Unable to recruit staff and need to use agency staff.	High	Work continues to identify solutions to these challenges which seem to be on a national scale. Legal services staff continues to be a challenging area and the Financial Sustainability Plan will continue to be updated and reviewed.
Delivery of financial sustainability plans	Medium	Plans continue to be monitored at Directors’ meetings to assess progress and potential risks/issues and opportunities. New plans are formulated as new risks and opportunities are identified.
Investment Property Income changes	High	The Investment Board will continue to review future leases and manage any potential break clause implications – maintaining appropriate balances within the Investment Reserve
Voids in commercial properties and sites held pending development incur costs in excess of budget.	High	The 25/26 budget allocated £300k to help establish a reserve that can be used to offset unplanned costs.
Demands on the Council Repairs and Maintenance (R&M) budgets exceed funding available.	High	The R&M budget was increased by £200k in 24/25 and a further £400k in 25/26.
Temporary Accommodation – increasing demand and cost pressures within the local housing market.	Medium	Budgets have been increased over recent years and robust monitoring will continue, including assessing the impact from directly procuring and properties to increase the stability of accommodation options available to the Housing Options team

Appendices

Appendix 1 – Capital Plan Summary for Outturn 2025/26
Appendix 2 – Write-offs over £5k - EXEMPT

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Appendix 1 - 2025/26 - Quarter 4

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	
Schools Capital Programme	54	4,663	65	339	5,067	2,918	(2,149)	2,918	5,102	1,580	1,381	10,980	11,034
Projects under Feasibility and Development	25,256	17,631	766	119	18,516	13,350	(5,166)	13,350	20,019	2,153	30	35,552	60,808
Economic Development / Regeneration	2,799	1,750	0	30	1,780	1,736	(44)	1,736	4,584	0	0	6,320	9,119
Housing Development / Investment	3,122	15,013	30	153	15,196	11,832	(3,364)	11,832	10,460	1,000	1,000	24,292	27,414
Environment / Climate Capital Investment	2,602	3,298	0	374	3,672	1,725	(1,947)	1,725	4,978	1,000	1,000	8,703	11,306
Transport Capital Investment	479	8,232	0	980	9,212	8,547	(665)	8,547	8,342	3,285	3,121	23,295	23,775
Coastal Defence / Flood alleviation	1,499	5,401	3,332	364	9,097	5,595	(3,502)	5,595	12,444	2,233	0	20,272	21,772
Sports, Leisure and Culture	635	205	12	0	217	190	(27)	190	33	0	0	223	858
Schools Closed Projects	7,325	767	0	0	767	128	(639)	128	638	0	0	766	8,091
Other Closed Projects	60,226	677	0	0	677	50	(627)	50	627	0	0	677	60,903
Total	103,998	57,637	4,205	2,359	64,202	46,072	(18,130)	46,072	67,228	11,251	6,532	131,083	235,080

Capital Plan Detail

Schools Capital Programme

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	
Capital Repairs and Maintenance	N/A	716	0	0	716	488	(228)	488	428	200	200	1,316	N/A
Education Review Projects	N/A	328	0	0	328	62	(266)	62	1,727	368	368	2,524	N/A
High Needs Capital Provision	N/A	962	(24)	339	1,277	1,277	(0)	1,277	910	750	750	3,687	N/A
Devolved Formula Capital	N/A	113	0	0	113	25	(89)	25	89	0	0	113	N/A
Foster Homes Adaptations	N/A	120	0	0	120	113	(7)	113	89	82	43	327	N/A
Childcare Expansion	18	180	0	0	180	142	(38)	142	38	0	0	180	199
White Rock Primary Defects	0	100	0	0	100	83	(17)	83	117	0	0	200	200
YMCA	28	152	12	0	164	164	0	164	0	0	0	164	193
Sherwell School Salix	0	44	12	0	56	56	(0)	56	0	0	0	56	56
Mayfield College Relocation	7	588	(2)	0	586	379	(206)	379	206	0	0	586	593
Family Time Relocation	0	200	0	0	200	14	(186)	14	186	0	0	200	200
Childrens Home	0	90	0	0	90	4	(86)	4	286	180	20	490	490
Chill'd Out Refurbishment	0	0	67	0	67	51	(16)	51	16			67	67
The NEST at South Devon College	0	370	0	0	370	27	(343)	27	343	0	0	370	370
Combe Pafford Redesignation	0	700	0	0	700	34	(666)	34	666	0	0	700	700
Total	54	4,663	65	339	5,067	2,918	(2,150)	2,918	5,102	1,580	1,381	10,980	16,048

Schools Closed Projects

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan				Total for Plan Period £000's	Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's		
Paignton Academy STEPS Relocation	969	281	0	0	281	100	(181)	100	181	0	0	281	1,250
Acorn Centre (Youth Investment Fund)	487	42	0	0	42	20	(22)	20	22	0	0	42	529
St Cuthbert Mayne Expansion	5,015	427	0	0	427	0	(426)	0	426	0	0	427	5,441
St Cuthbert Mayne Phase 2	854	17	0	0	17	8	(9)	8	9	0	0	17	871
Total	7,325	767	0	0	767	128	(638)	128	638	0	0	766	8,091

Projects under Feasibility and Development

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Outturn £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	
Crossways, Paignton - Regeneration	5,248	1,200	0	0	1,200	914	(286)	914	1,986	554	0	3,454	8,702
Edginswell Railway Station	2,809	49	0	0	49	0	(49)	0	129	30	30	189	2,998
Union Square Acquisition & Development (Town Deal)	7,079	2,000	0	0	2,000	1,096	(904)	1,096	2,867	0	0	3,963	11,042
Strand Redevelopment	3,126	2,047	0	0	2,047	1,555	(492)	1,555	2,922	0	0	4,477	7,603
Torquay Town Deal - Pavilion	205	1,296	0	0	1,296	988	(308)	988	907	0	0	1,896	2,100
Torbay Road Paignton (High Streets Funding)	123	145	126	0	271	265	(6)	265	6	0	0	271	395
Station Square (High Streets Funding)	479	1,271	0	0	1,271	491	(780)	491	2,257	0	0	2,748	3,227
Victoria Centre (Paignton) (FHSF)	2,466	1,547	0	0	1,547	1,547	0	1,547	(0)	0	0	1,547	4,013
Oldway Mansion - phase 1 of Master-Plan	531	2,500	0	119	2,619	2,619	(0)	2,619	4,281	1,569	0	8,469	9,000
Brixham Square Public Realm (part of LUP £20m)	3	747	0	0	747	636	(111)	636	111	0	0	747	750
Brixham Central Car Park (part of LUP £20m)	119	314	0	0	314	308	(6)	308	6	0	0	314	434
Torbay Tech Park (Part of LUF £20m)	84	4,000	0	0	4,000	2,343	(1,657)	2,343	3,973	0	0	6,316	6,400
Brixham Port Infrastructure (Part of LUF £20m)	158	383	640	0	1,023	480	(544)	480	544	0	0	1,023	1,181
Cultural Infrastructure (LUP part of £20m)	400	101	0	0	101	101	0	101	0	0	0	101	501
Edginswell Business Park - Unit 3	0	30	0	0	30	0	(30)	0	30	0	0	30	30
Total	25,256	17,631	766	119	18,516	13,350	(5,166)	13,349	20,019	2,153	30	35,551	60,808

Economic Development / Regeneration

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	Total Scheme Spend £000's
		Paignton Picture House (High Streets Funding)	2,430	1,600	0	30	1,630	1,630	0	1,630	4,540	0	0
Small Projects - UK Shared Prosperity Fund	369	150	0	0	150	106	(44)	106	44			150	519
Total	2,799	1,750	0	30	1,780	1,736	(44)	1,736	4,584	0	0	6,320	9,119

Housing Development / Investment

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	Total Scheme Spend £000's
		Disabled Facilities Grants	N/A	1,100	0	153	1,253	1,253	0	1,253	847	1,000	1,000
Collection St Mary Land Disposal	130	415	0	0	415	168	(247)	168	247	0	0	415	545
St Kilda's, Brixham - Affordable Housing	1,723	3,960	0	0	3,960	2,383	(1,577)	2,383	1,577	0	0	3,960	5,683
Hotels to Homes - Scheme 1 (Brampton Court)	288	2,712	0	0	2,712	2,626	(86)	2,626	86	0	0	2,712	3,000
Hotels to Homes - Scheme 2 (Seabury Hotel)	980	820	0	0	820	203	(617)	203	3,217	0	0	3,420	4,400
Local Authority Housing Fund - 4 Housing Units	0	1,360	0	0	1,360	1,275	(85)	1,275	85	0	0	1,360	1,360
Affordable Housing - Aria Heights	0	2,916	0	0	2,916	2,820	(96)	2,820	96	0	0	2,916	2,916
Affordable Housing - Midvale Road	0	774	0	0	774	769	(5)	769	5	0	0	774	774
Affordable Housing - Acquisition of Land	0	306	30	0	336	336	(0)	336	0	0	0	336	336
Affordable Housing - St Boniface	0	650	0	0	650	0	(650)	0	4,300	0	0	4,300	4,300
Total	3,122	15,013	30	153	15,196	11,832	(3,363)	11,833	10,460	1,000	1,000	24,293	27,415

Environment / Climate Capital Investment

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	
SWISCO Loan - Vehicle & Equipment Replacement	N/A	368	0	0	368	0	(368)	0	1,368	1,000	1,000	3,368	N/A
Tor Park Road Site Improvements	215	985	0	0	985	594	(391)	594	391			985	1,200
Grant Payment to SWISCO, Food Waste Collection Grant	120	29	0	0	29	29	(0)	29				29	149
Waste Recycling Centre	0	376	0	0	376	217	(159)	217	159			376	376
Car Park Investment	699	151	0	0	151	0	(151)	0	151			151	850
Climate Change Initiatives	92	319	0	0	319	0	(319)	0	319			319	410
Green Waste Bins	272	75	0	0	75	45	(30)	45	30			75	348
Solar Farm, Brokenbury (EGF)	867	51	0	0	51	16	(35)	16	35			51	918
Solar Farm, Nightingale Park (EGF)	338	50	0	0	50	30	(20)	30	164			194	532
Paignton Library Heat Decarbonisation	0	430	0	0	430	240	(190)	240	190			430	430
Tor Hill House Roof and Solar Panels	0	450	0	0	450	167	(283)	167	283			450	450
Street Lighting Upgrade	0	0	0	374	374	374	(0)	374	1,888			2,262	2,262
Energy Efficiency Programme	0	13	0	0	13	13	0	13				13	13
Total	2,602	3,298	0	374	3,671	1,725	(1,946)	1,724	4,978	1,000	1,000	8,702	11,305

Transport Capital Investment

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					Total Scheme Spend £000's
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	
Transport Highways Structural Maintenance	N/A	3,482	0	528	4,010	4,009	(0)	4,009	1,522	2,050	2,050	9,632	N/A
Transport Integrated Transport Schemes	N/A	800	0	0	800	508	(292)	508	2,979	1,071	1,071	5,628	N/A
Transport - Torquay Gateway Road Improvements	N/A	50	0	0	50	14	(36)	14	286	64	0	364	N/A
Transport - Western Corridor	N/A	50	0	0	50	13	(37)	13	337	100	0	450	N/A
Shiphay Lane (Active Travel Fund)	29	197	0	0	197	156	(41)	156	41	0	0	197	225
Zero Emission Buses Grant	N/A	3,000	0	452	3,452	3,452	0	3,452	2,073	0	0	5,525	N/A
Bus Improvement Plans	0	300	0	0	300	79	(221)	79	1,058	0	0	1,136	1,136
Clennon Valley Walking & Cycling Route	0	345	0	0	345	317	(28)	317	28	0	0	345	345
Babbacombe Beach Road	451	10	0	0	10	0	(10)	0	19	0	0	19	470
Total	479	8,232	0	980	9,213	8,547	(666)	8,548	8,342	3,285	3,121	23,296	23,776

Coastal Defence / Flood alleviation

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	Total Scheme Spend £000's
Flood Alleviation - Monksbridge	138	40	0	0	40	23	(17)	23	17	0	0	40	178
Paignton & Preston Waterfront	976	5,000	0	364	5,364	5,364	0	5,364	8,942	2,233	0	16,539	17,515
Flood Alleviation - Torquay	16	136	1,410	0	1,546	39	(1,507)	39	1,507	0	0	1,546	1,562
Paignton Flood Alleviation	45	107	977	0	1,084	6	(1,078)	6	1,078	0	0	1,084	1,130
Brixham Flood Alleviation	65	60	847	0	907	6	(901)	6	901	0	0	907	972
Collaton St Mary Flood Alleviation	259	58	98	0	156	156	0	156	0	0	0	156	415
Total	1,499	5,401	3,332	364	9,097	5,595	(3,502)	5,595	12,444	2,233	0	20,272	21,772

Sports, Leisure and Culture

Page 83 Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	Total Scheme Spend £000's
Haldon & Princess Pier	17	78	0	0	78	46	(32)	46	32	0	0	79	96
Torre Valley North Sports Facilities	423	19	0	0	19	22	4	22	0	0	0	22	446
Armada Park Refurbishment	168	0	0	0	0	0	0	0	0	0	0	0	168
Torre Abbey Renovation - Phase 3	28	108	12	0	120	121	0	121	0	0	0	121	148
Total	635	205	12	0	217	190	(27)	189	33	0	0	222	857

Closed Projects

Project Name	Total Spend Previous Years £000's	2025/26 Budget and Spend						Revised 4-Year Plan					
		Approved Budget £000's	Budget Revisions £000's	Budget Reprofiled £000's	Revised Budget £000's	Actual Spend £000's	Variance to Budget £000's	2025/26 Total Revised Budget £000's	2026/27 £000's	2027/28 £000's	2028/29 £000's	Total for Plan Period £000's	Total Scheme Spend £000's
The Pines (TCCT)	0	75	0	0	75	0	(75)	0	75	0	0	75	75
Maidencombe Beach CP (TCCT)	0	45	0	0	45	0	(45)	0	45	0	0	45	45
Claylands Redevelopment	10,757	20	0	0	20	0	(20)	0	20	0	0	20	10,777
Edginswell Business Park Unit 1	6,402	65	0	0	65	0	(65)	0	65	0	0	65	6,466
Edginswell Enabling Works (LEP GBF)	4,657	9	0	0	9	13	4	13	(4)	0	0	9	4,667
Harbour View Hotel Development	21,006	58	0	0	58	0	(58)	0	58	0	0	58	21,064
Temporary Accommodation	9,086	2	0	0	2	0	(2)	0	2	0	0	2	9,088
RICC Improvements - Backlog Repairs	1,226	24	0	0	24	0	(24)	0	24	0	0	24	1,250
Torre Abbey Gatehouse/SW Wing	1,217	132	0	0	132	36	(96)	36	96	0	0	132	1,350
Flood Alleviation - Cockington	337	11	0	0	11	0	(11)	0	11	0	0	11	348
Tor Hill House Lighting Upgrade	134	66	0	0	66	1	(66)	1	66	0	0	66	200
Torquay Strand Public Realm (Town Deal Funding)	130	125	0	0	125	0	(125)	0	125	0	0	125	254
Torquay Town Deal - Core Area Public Realm	5,275	45	0	0	45	0	(45)	0	45	0	0	45	5,320
Total	60,226	677	0	0	677	50	(627)	50	627	0	0	677	60,903

Meeting: Cabinet

Date: 9 June 2026

Wards affected: All wards

Report Title: Local Special Educational Needs and Disabilities (SEND) Reform Plan

When does the decision need to be implemented? Immediate

Cabinet Member Contact Details: Nick Bye, Cabinet Member for Children's Services,
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Director Contact Details: Nancy Meehan, Director of Children's Services,
nancy.meehan@torbay.gov.uk

1. Purpose of Report

- 1.1. The purpose of this report is to provide Cabinet with a summary of the national guidance for the Local Area SEND Reform Plan (March 2026), setting out the requirements for local area partnerships ahead of submission to the Department for Education (DfE) and NHS England by 19 June 2026.
- 1.2. We request delegated authority for the Director of Children's Services (DCS) to administer the SEND Reform Plan, including the High Needs Stability Grant which will be awarded pending the successful approval of this plan
- 1.3. The report provides an overview of the draft reform plan, outlines the key expectations, structure, and content of the plan, and seeks endorsement of the approach to developing and submitting a compliant and deliverable Local SEND Reform Plan.
- 1.4. To meet the required DfE deadline and in line with DfE expectations, sign off on the final plan must be by the Local Authority Chief Executive (CEO), the Integrated Care Board (ICB) Chief Executive, the Local Authority DCS, the Integrated Care Board NHS Place Director, and the Local Authority Chief Financial Officer (CFO/Section 151 Officer). The SEND Local Area Improvement Partnership (SLAIP) Board must also approve the final submission.

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 strengthening the local SEND system so that children and young people receive earlier, more consistent, and higher-quality support. This will improve

educational outcomes, promote inclusion, and support children to lead healthier, more independent lives.

- 2.2. The reasons for the proposal, and need for the decision are that all local area partnerships have been formally commissioned by government to produce a Local SEND Reform Plan, setting out how they will deliver systemic improvement and respond to national SEND reform expectations.
- 2.3. The benefits for residents include:
 - Earlier identification and support, reducing escalation of needs and crisis intervention.
 - More inclusive mainstream provision, enabling more children to be supported locally.
 - Improved joined up working across education, health, and care services.
 - Greater clarity and consistency in support available to families.
 - Strengthened accountability and oversight, ensuring ongoing improvement and transparency.
- 2.4. The Plan is also linked to access to national support and funding, including the High Needs Stability Grant, which is dependent on plan approval.

3. Recommendation(s) / Proposed Decision

- 3.1. That the SEND Reform Plan set out at Appendix 3 be approved and delegated authority be given to the Director of Children's Services to implement the Plan, including the high needs stability grant, once approval for the Plan is approved.
- 3.2. That Cabinet note the requirements and expectations of the Local Area SEND Reform Plan guidance.
- 3.3. That the Cabinet endorse the development of a Local SEND Reform Plan in line with national guidance and system partnership expectations.
- 3.4. That the Cabinet approve the submission of the Local SEND Reform Plan to the Department for Education (DfE) and NHS England by 19 June 2026.
- 3.5. That the Director of Children's Services, in consultation with the Cabinet Member for Children's Services, be given delegated authority to finalise the Plan prior to submission to the DfE and NHS.

4. Appendices

Appendix 1: The commissioning letter from the DfE and DHSC

Appendix 2: The Local SEND Reform Plan Guidance

Appendix 3: Torbay's DRAFT Local Area SEND Reform Plan (*This version is the initial draft submitted to the DfE and NHS Advisors on the 19th of May 2026 for initial review and feedback*)

5. Background Documents

- [Every child achieving and thriving \(HTML version\) - GOV.UK](#)
- [Explanatory note on the government's approach Dedicated Schools Grant deficits - GOV.UK](#)

Supporting Information

6. Introduction

- 6.1. On 9 March 2026, the Government wrote to local authorities formally commissioning the development and implementation of Local SEND Reform Plan. The expectation is for the Plan to clearly set out the actions that Torbay will take to drive system reform locally. The letter came jointly from the DfE and the Department for Health & Social Care.
- 6.2. **Introduction to the Plan:** The Local SEND Reform Plan is a nationally mandated requirement forming part of a wider programme to reform the SEND system across England. The guidance sets out how local area partnerships, led by the local authority as system convener, must work collaboratively with ICBs, schools, trusts, and other stakeholders to design and deliver a comprehensive improvement plan.
- 6.3. The reforms respond to significant and sustained pressures within the SEND system, including rising demand, inconsistent provision, delays in accessing support, and unsustainable financial pressures.
- 6.4. The Plan has been co-written by the SEND Local Area Partnership, including schools and settings, and influenced by the input of children, young people with SEND and their families through engagement and co-design sessions.
- 6.5. The Plan incorporates Torbay's Priority Impact Plan, which is the improvement plan in response to the Torbay's 2025 SEND Local Area Inspection.
- 6.6. **Requirements of the Plan:** Local SEND Reform Plans must:
- Be co-produced across the partnership, with shared ownership and accountability.
 - Set out a clear vision and outcomes for children and young people aged 0–25 with SEND.
 - Include a detailed delivery plan with actions, milestones, and measurable outcomes.
 - Demonstrate how services will shift towards early intervention and inclusive mainstream provision.
 - Embed the “Experts at Hand” offer, improving access to specialist advice for mainstream settings.
 - Provide a robust approach to governance, leadership, and system accountability.
 - Include monitoring and evaluation arrangements, including performance metrics and ongoing review.
 - Address financial sustainability, including use of funding and demand management.
- 6.7. The Plan must follow a standard template (Annex A)
- Vision and goals

- Strategy
- Monitoring and evaluation
- Governance
- Central government support

6.8. **Submission, Review and Monitoring:** Plans must be submitted by 19 June 2026 and will be assessed by the DfE and NHS England. Following submission:

- Plans will then be subject to formal review and final approval by the Secretary of State for Education.
- Local areas will receive ongoing support and challenge from government advisers.
- Delivery will be monitored through performance reporting and oversight arrangements.
- Areas with insufficient progress may be subject to increased scrutiny or intervention.

6.9. Approval of the Plan is also linked to eligibility for additional funding, reinforcing the importance of a credible and deliverable submission.

6.10. **Transformation and Experts at Hand Offer:** Local Inclusion Partnership Grant funding is provided to local authorities, working in partnership with ICBs and wider system partners, to develop and deliver a new “Experts at Hand” offer, aimed at improving access to specialist advice and support for early years settings, mainstream schools and further education providers.

6.11. This includes investment in additional specialist capacity, such as educational psychologists, specialist teachers, and health professionals, to strengthen inclusive practice and enable earlier intervention without reliance on statutory processes.

6.12. Alongside this, a transformation element of the fund supports local authorities to design and implement their Local SEND Reform Plans, including strategic planning, service redesign, and improved use of data.

6.13. Overall, the funding aims to build system capacity, improve mainstream inclusion, and ensure children and young people with SEND receive timely, coordinated support across education, health and care.

6.14. **Governance:** Torbay’s SLAIP Board will provide strategic system leadership, oversight, and assurance for the delivery of the Local Area SEND Reform Plan and the priority actions set out in the 2025–26 Priority Impact Plan.

7. Options under consideration

7.1. No other options have been considered as this is a DfE requirement.

8. Financial Opportunities and Implications

- 8.1. **High Needs Stability Grant:** The Government's updated approach to Dedicated Schools Grant (DSG) deficits, published in February 2026, represents a significant change in how local authority SEND-related deficits are managed.
- 8.2. The new arrangements introduce a High Needs Stability Grant, through which up to 90% of a local authority's verified DSG deficit as of 31 March 2026 may be funded by central government, subject to conditions and Plan approval.
- 8.3. This replaces previous arrangements, including the closure of the Safety Valve programme, reflecting a move to a more consistent national framework. The approach also clarifies how deficits are calculated, based on the overall DSG position held in unusable reserves, with scrutiny applied to exclude ineligible spend before grant allocation.
- 8.4. In addition, the statutory override has been extended to March 2028, allowing councils to continue holding DSG deficits off their main revenue budget while reforms are implemented and providing short-term financial stability.
- 8.5. Torbay's cumulative deficit at the end of 25/26 was £8.22m. Torbay should receive a £7.4m grant, which represents 90% of the accrued deficit.
- 8.6. The local authority would still be liable for the remaining 10% of the accrued deficit, which would be £822k.
- 8.7. As part of the 2026/27 budget setting process, £1.7m has been placed in reserve to meet these costs over the next few years.
- 8.8. This grant will be paid subject to each local authority securing the Secretary of State for Education's approval of their local area's Local SEND Reform Plan.
- 8.9. Payments will be made in Autumn 2026 for local authorities whose Plans are approved.
- 8.10. Local authorities whose Plans do not meet the threshold for approval will be required to revise their plans to ensure they meet the required threshold, with appropriate support.
- 8.11. Local authorities whose Plans are subsequently approved will receive the grant payment in Spring 2027.
- 8.12. Local authorities will not receive any payments until successful approval of their local area's Local SEND Reform Plan.
- 8.13. **Local Inclusion Partnership Grant:** £429 million funding has been allocated to local authorities in the financial year 2026 to 2027, the first year of this grant. Over the course of the 3-year spending review period the overall grant provides:
 - £1.8 billion in Experts at Hand (EAH) funding.
 - A share of £200 million in transformation funding.

8.14. To aid local authorities in delivering this support and writing their local area Plan, the Government are providing an indicative funding profile. We expect the approximate scale of funding to be around:

- £750 million in 2027 to 2028.
- £850 million in 2028 to 2029.

8.15. Using these assumptions below sets out the funding confirmed for 2026-7 and the anticipated funding for 2027-29.

26/27 (based on our % of the overall funding of £429m)

Experts at Hand direct delivery– 80%	£777,597
Admin / Transformation costs – 20%	£194,399
Total	£971,996

27/28 (based on our % of the overall funding of £750m)

Experts at Hand direct delivery – 80%	£1,358,490
Admin / Transformation costs – 20%	£339,623
Total	£1,698,113

28/29 (based on our % of the overall funding of £850m)

Experts at Hand direct delivery – 80%	£1,539,622
Admin / Transformation costs – 20%	£384,906
Total	£1,924,528

8.16. Permitted use of the funding:

- At least 80% of funding must be spent on EAH direct delivery for all settings, staff and their children and young people.
- No more than 10% of funding can be spent on admin costs for delivering the EAH offer.
- No more than 10% of funding can be spent on local authority transformation costs, including staff or other associated costs.

9. Legal Implications

- 9.1. The Local SEND Reform Plan is a nationally mandated requirement by Government, forming part of a wider programme to reform the SEND system across England. There are wider legal implications, where the loss or withholding of funding, including the transformation grant, High Needs Stability Grant and Capital funding, impacts service delivery and Consultation
- 9.2. A range of engagement and co-design sessions have taken place throughout April and May 2026. A Partnership Engagement Day, Education Conference and workshops to date have informed the development of this plan. These events have been attended by children and young people, parent carers and practitioners from across health, education, social care and the voluntary and community sector.
- 9.3. Key messages highlighted the importance of early help, prevention and clear pathways; the critical role of workforce capacity and confidence; and the need for flexible, personalised support, including accessible alternative provision.
- 9.4. Our local area partnership will adopt a structured, inclusive and transparent approach to engaging system partners and stakeholders in both the development and implementation of the SEND Reform Plan.
- 9.5. Engagement will be ongoing, inclusive and impact-focused, underpinned by early involvement, accessible communication and clear feedback loops.

10. Procurement Implications

- 10.1. No specific details on procurement to include at this stage.

11. Protecting our naturally inspiring Bay and tackling Climate Change

- 11.1. None

12. Associated Risks

- 12.1. The Local SEND Reform Plan is a DfE requirement for every Local Authority and Local Area Partnership. Failure to follow the submission requirements would likely result in increased Government intervention as this would be interpreted as lack of engagement with the national reform.
- 12.2. Non-submission would result in loss or withholding of funding, including the transformation grant, High Needs Stability Grant and Capital funding.
- 13.3 Failure to deliver a robust SEND Reform Plan or to secure the SEND stability funding, would ultimately impact on the quality of support and services for children and young people with SEND in Torbay.

13. Equality Impact Assessment

As this is a government consultation presently, we attach the government Equality Impact Assessment on the SEND Reform Plan which outlines all the aspects which may be affected should this consultation be taken forward in its current state:

https://assets.publishing.service.gov.uk/media/69985b33047739fe61889ebd/SEND_reform_equalities_impact_assessment_.pdf

14. Cumulative Council Impact

14.1. None

15. Cumulative Community Impacts

15.1. None



UK Government

To: Anne Marie Bond, Chief Executive, Torbay Council,
Nancy Meehan, Director of Children's Services, Torbay Council,
Libby Ryan-Davies, Chief Executive, NHS Devon ICB.

cc. Malcolm Coe, Director of Finance and S151 Officer.

9 March 2026

Dear Anne, Nancy, Libby,

Thank you for the work you do across children's services, from early years through to supporting learners in post-16 and on into adult education. For several years, local areas have been operating in a challenging SEND system that has often felt fragmented and difficult to navigate. We recognise that this has placed significant and growing pressures on services, and we do not underestimate the difficult decisions that many have taken to drive support for children and young people.

On Monday, 23rd February, this government published its Schools White Paper, setting out a clear and ambitious plan to create an education system where every child and young person can achieve and thrive. Our ambition is to raise standards, improve inclusion and broaden children's experiences so that every child leaves school with strong foundations for life and work. This is backed by over £7bn of investment over the next 3 years to embed inclusive practice in mainstream schools, deliver easy access without statutory assessments to experts including Educational Psychologists, Speech and Language Therapists and Occupational Therapists and create tens of thousands of new school places for children and young people with SEND in mainstream settings, with thousands of new inclusion bases, and in special schools. The funding and support to deliver these changes begins from 2026/27 and families must correspondingly start to feel this change now. Delivering this

ambition requires strong, transparent system leadership and a relentless focus on children's outcomes at every level of government.

It is important to reflect on what comparable data tells us about how outcomes for children and young people with SEND have played out locally, and what is now needed to drive a step change in transformative improvement. Despite all local areas operating within the same challenging system, we have seen wide variation in local outcomes that cannot be explained by systemic changes alone. We want to ensure that government investment is being spent in a way that delivers the best outcomes for children and all young people have access to local support that meets their needs at the earliest point.

With the Schools White Paper setting out a clear, ambitious plan to reform the education system, our expectations across local services are now unequivocal. We expect every local area to rise to the challenge and embed a robust approach to local system leadership, financial discipline and operational delivery to bring forwards a sustainable system that delivers strong outcomes for children and families. Government officials stand ready to support you in delivering this change.

We are commissioning each local area partnership to develop and submit a Local SEND Reform Plan in June 2026, underpinned by a Local Partnership Maturity Assessment. These documents should be used to clearly set out how you will improve and further strengthen your system, tilting provision towards stronger inclusive practice and early intervention, and ensuring that the conditions underpinning effective long-term outcomes are in place. This will help to identify and spread best practice as we work collectively to reform our SEND system.

For local areas with the most acute performance concerns, officials will be placing heightened scrutiny on the extent to which you are doing everything within your control to implement the reforms effectively. This includes a close examination of leadership capability, the pace and grip with which you act, and clear accountability through a named Senior Responsible Officer. The Department for Education will also use returned Local SEND Reform Plans to assess ongoing performance and delivery, in order to best allocate the support and challenge that we will offer throughout this period of reform.

To support the development of high-quality, ambitious plans, the attached commissioning pack contains the templates and guidance you will need, alongside further detail on timelines, plan expectations, and funding streams to support the delivery of local reform. In the delivery of high-quality plans, you will need to evidence sustained improvement and leadership-backed action to achieve agreed milestones.

As you develop and implement these plans, you will receive ongoing support and challenge from government officials, alongside your assigned SEND Advisers and Financial Advisers. We have asked officials for regular updates on your progress. Where exemplary practice from local areas is seen we will work with you to spread it recognising improvements, even in challenging conditions, are being delivered. Where progress does not materialise the Department for Education will act decisively. When failure is persistent, we will not hesitate to use the full range of intervention powers including removing the licence to deliver SEND services.

All local authorities with a SEND deficit will be eligible in 2026–27 to receive a High Needs Stability Grant covering 90% of their High Needs related DSG deficit accrued up to the end of 2025–26. This grant will only be paid once each local authority has secured approval of their local area's Local SEND Reform Plan. Payments will be made from Autumn 2026 for local authorities whose local area plans are approved in the first round of assessment.

Where a local authority's plan does not meet the threshold for approval, they will be required to revise and improve their plans, with continued support from advisers, to ensure they meet the required standard. Where revised plans meet the required approval threshold, payments will be made in Spring 2027, within the 2026-27 financial year. Local authorities will not receive any payments until their Local SEND Reform Plan has been approved.

For deficits that arise in 2026–27 and 2027–28, local authorities can expect that we will continue to take an appropriate and proportionate approach, though it will not be unlimited. Future support will take into account LAs' successful delivery of their approved Local SEND reform plan, including appropriate use of investment to establish an Experts at Hand offer.

All children with SEND and their families deserve a system that they can trust - one that is responsive, inclusive, and provides the conditions which enable every child to achieve and thrive. This is a shared responsibility across central and local government, working alongside schools, health partners, early years settings and post-16 providers. We are determined to transform our SEND system and to demonstrate the pace, grip and transparency essential for delivering change. We are asking your local area for the same clear commitment and credible action and stand ready to work with you to deliver the changes required to ensure that every child can achieve and thrive.

Yours Sincerely,

Bridget Phillipson

The Rt Hon Bridget Phillipson MP
Secretary of State for Education

Wes Streeting

The Rt Hon Wes Streeting MP
Secretary of State for Health and Social Care



The Local SEND Reform Plan

March 2026





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1. Introduction

Document Overview

This document is designed to support local area partnerships develop a **Local SEND Reform Plan** with most sections pertaining to the local area partnership as a whole, in particular, local authorities (LAs) and Integrated Care Boards (ICBs), multi-academy trusts (MATs) and schools. Sections that pertain solely to local authorities are clearly marked **Local Authorities**.

While this document addresses local area partnerships, the government's expectation is that the local authority is the system 'convener'; taking the lead to bring together all system partners and ensure they work together to develop and deliver the Local SEND Reform Plan. Similarly, the government has clear expectations on all system partners to proactively respond to the local authority's leadership, ensuring they commit resources and fulfil their responsibilities in the partnership. Central government will actively engage where system partners are not responding to the local authority's leadership.

The document contains the following:

1. **The Local SEND Reform Plan Guidance**

Overview and a practical guide to help local area partnerships complete the plan.

2. **Local SEND Reform Plan Template – Annex A**

The delivery plan that local area partnerships are expected to complete and return to the Department for Education and NHS England by **19 June 2026**.

3. **Supporting Documents – Annex B**

A list of key resources and references including links to relevant policy documents, tools, and guidance referenced throughout.




The Local SEND Reform Plan

The 0-25 SEND system has been under significant and prolonged pressure, resulting in a system that is failing too many children and young people. Local services are overstretched, some children's needs are escalating unnecessarily to crisis point, and financial pressures have become unsustainable. Yet within this challenging landscape, many local area partnerships have demonstrated determination and leadership - working very hard to improve their local services and often developing compelling and innovative approaches to meet the needs of children and young people with SEND. The government is committed to collaborating with local area partnerships to build on and scale what is working well.

We recognise that system-wide reform and investment is needed to deliver an inclusive and sustainable system that stands the test of time. However, realising this vision will only be possible if every local area takes full responsibility for driving significant improvement in the sustainable delivery of local services. It is imperative that all local areas begin this essential work through robust action plans that demonstrate clear ownership, ambition and accountability. This step change in the delivery of local services cannot be optional; it is a critical expectation of all local area partnerships.

As set out in the Schools White Paper, the government will reform the current SEND system, building on ongoing work to create a system that's rooted in inclusion, where every child and young person receives high-quality support early on and can thrive in their local early years setting, school or college. The government's plan is to ensure opportunity for all by delivering an excellent, inclusive education for every child with a world class education and highly trained workforce. This will be based on an inclusive mainstream education system, with professional support for children and young people that need it, and improved, efficient and effective local delivery, as detailed below.

- **Inclusive mainstream system:** most children and young people with SEND will be supported to achieve and thrive in mainstream education settings through high-quality teaching, inclusive practice, and targeted support. Settings will be equipped to create the right environments, and multidisciplinary professional support services will be commissioned at a group level to address needs efficiently.


- 
- **Specialist support for children that need it:** Specialist settings will continue to play a vital role for children and young people who require a substantially different curriculum or highly individualised approaches that cannot be delivered in mainstream educational settings.
 - **Efficient and effective local delivery:** investment in and improvement of local services, including health, care, and wider workforces and resources, will support the delivery of joined-up, place-based provision. Local authorities will work with Integrated Care Boards to commission multi-disciplinary professional support across early years settings, schools and post-16 providers, taking a whole school approach at group level, so children and young people can access the help they need. Improvement of local services eases the pressure on home to school transport, ensuring fewer children and young people with SEND need to travel a long way from home to attend a school or setting. Local authorities will work with all settings to plan and deliver the right physical spaces in mainstream nurseries, schools and colleges.

Delivering lasting change will take collective commitment and sustained effort from all of us; government, local authorities, health partners, early years, MATs, schools and colleges; working together with parents and carers to build the inclusive system our children and young people deserve.

The Local SEND Reform Plan is the key delivery and accountability vehicle for this collaborative commitment, with expectations that it is revised annually as proposed reform is rolled out. We recognise that delivery of the plan will be within the current statutory framework, as such, local area partnerships will not be required to implement any policy that is being consulted on or that will require legislative change.

This first iteration is about building on existing foundations and putting in place the groundwork for reform. It aims to:

- Support central government to understand how the SEND system is being transformed nationally, understand how investment funding is being used to achieve reform priorities, identify innovative practice that can be disseminated and scaled up, and identify where additional support may be required.
- Support local areas - local authorities, health partners, early years, MATs, schools and further education - to develop and deliver a clear pathway toward



an inclusive and sustainable local SEND system that identifies and supports needs **early**, meets needs within the **local** area, is **fair, effective** and **shared**; building on existing work and tailored to the unique context of the local area.

- Support local authorities to unlock investment funding and access support for historic and accruing deficits.

The Local SEND Reform Plan provides a framework that partnerships can use to establish a baseline for their local system and metrics against which transformation progress can be tracked.

The government, working alongside local area leadership, will use the plans - and the insights from regular progress reviews - to understand delivery, support decision-making on investment funding and access to the High Needs Stability Grant, and reflect progress on target metrics. The Department for Education, in particular, will use the plans - incorporating the data returns, local partnership maturity assessments and core local reform plan – to establish a baseline and ongoing monitoring of local area performance.

Throughout this process, DfE officials, health regional leads, SEND and financial advisers will support local area colleagues with access to tailored guidance and emerging insights to help shape and strengthen their plans. The Local Government Association (LGA) will also provide additional system leadership and transformation support through the children’s and SEND improvement advisers.

2. Laying the Foundation for Reform

A central focus of this first iteration of the Local SEND Reform Plan is the introduction of the **Experts at Hand (EAH) Offer** and a strengthened approach to ensuring there are sufficient high needs places within mainstream settings, alongside a continued strengthening of effective partnerships and practice. Together, these initiatives aim to build a more inclusive and sustainable SEND system by ensuring mainstream settings, supported by collaborative and maturing partnerships, are equipped with both the right infrastructure and the specialist expertise needed to meet the needs of children and young people with SEND.



The Experts at Hand Offer

The Experts at Hand Offer is a core pillar of the SEND reform programme, designed to strengthen the capability of mainstream education settings to meet the needs of children and young people with SEND more effectively and inclusively.


Local areas should provide a defined route for mainstream education settings to access specialist support, including from a range of experts with specialisms in education & health, such as in, educational psychology, speech and language therapy, and occupational therapy, as well as through outreach from specialist settings. By adding support to shift to increased group-based models and whole setting advice and support, health and education professionals can deliver evidence-based support and intervention with greater impact and value, ensuring, where possible, needs do not escalate. This not only makes better use of a limited workforce but also reduces dependence on costly, individualised provision. There will continue to be children and young people with complex needs that will require individualised and tailored support to meet their needs.

We know that strong practice and effective joint working already exist in many local areas where settings are supported to strengthen inclusive practice. We are keen to ensure that local areas are building on these as they develop and scale up their offer.

Local area partnerships (Local Authorities, ICBs, and system partners including settings) are expected to build their Experts at Hand Offer so that it becomes an ongoing and embedded element of the SEND system.

In order to achieve this, as well as to support a more effective SEND system overall, we need:

- To maintain access and referrals for those children who need specialist referral pathways identified at triage based on educational and clinical need.
- Better joint working across ICBs, LAs, and local system partners including education settings, Best Start Family Hubs, Parent Carer Forums (PCFs), health providers and children and young people.
- More effective joint commissioning between LAs and ICBs, including strategic planning and co-production with children, young people and families and local partners.

- 
- A strong universal offer and fluid layers of support which can be accessed from day one, one of which should include an offer of support for mainstream education settings giving them access to universal and targeted support from services across health and education – the new ‘Experts at Hand’ offer.

The aim of this offer is for mainstream early years settings, MATs, mainstream schools and further education providers to improve across the following areas:

1. Understanding the needs of children and young people in their setting.
2. Putting structures in place to build relationships and co-production with the parent/carer community.
3. Strengthening the baseline level of capacity of settings and staff to meet commonly occurring SEND needs.
4. Reviewing practice regularly to ensure current approaches are the most suitable.
5. Improving knowledge of when and how to draw down additional expertise when required.

This model allows for more efficient deployment of multidisciplinary professionals, promotes broader skill development across settings, and supports a more dynamic and sustainable workforce. It also puts a stronger focus on collaboration between health professionals and education settings, enhancing the role of health professionals in education and enabling them to focus on strategic support to schools and settings as well as system-wide impact.

The offer is designed to build capability within mainstream settings through joint working, empowering education staff to identify and meet a wider range of needs and enabling more children and young people to thrive in inclusive environments; and is expected to be jointly owned and resourced by the Local Authority and Integrated Care Board.

Local areas should consider how they will develop this offer to ensure there is support and appropriate provision across early years, primary, secondary, and further education settings. This should include developing effective models and partnerships for supporting young people with SEND who access further education in a different local area.



Local areas¹ have flexibility in how they commission or employ the multidisciplinary workforce required to deliver the offer. They are encouraged to explore, alongside other options, deployment through special schools and colleges, [alternative provision schools](#), [Neighbourhood Health Services](#), [Best Start Family Hubs²](#), and [Multi-disciplinary Family Help Teams](#). Local areas will need to work with neighbouring local area partnerships and representatives of the further education sector to consider how best to deliver this service to all colleges and other post-16 providers their young people attend – including those out of their area.

Local systems are expected to begin building this offer using allocated investment funding as a core focus of their delivery in the first year, with the aim of having all Experts at Hand offers established and operational as the new reforms are introduced.

Guidance relating to the Experts at Hand offer is due to be published **in Spring 2026**.

Core minimum requirements


Experts at Hand Offer

Local area partnerships will be expected to clearly and succinctly set out in their plan:

- The delivery approach for this offer and the rationale for why the outlined approach is optimal for the local area. This will include setting out if delivery will be local authority-led, contracted to the ICB, in partnership with another area or through an external partner, and setting out the role of Best Start Family Hubs. Where delivery involves an ICB or external partner, please specify the partnership vehicle (such as an SLA or MOU) and how performance will be assured.

¹ Local areas who have been involved in ELSEC and PINS can use the structures they have in place and the learning they have gained to support the design of their offer.

² New guidance to be published 23 March 2026. **Page 107**

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- A summary of the partnership approach to agreeing an optimal delivery model including how all system partners were engaged and how the approach was informed by needs-based data.
 - How the EAH funding will enhance existing routes to access specialist input, and how the delivery model will be integrated with other services or offers funded separately.
 - Proposal to collaboratively recommission alternative provision to align with the 3-tier model and best practice identified through Alternative Provision Specialist Taskforces (APST) models.
 - Where alternative provision capacity is constrained, whether the LA will contract provision, partner regionally, or share expertise and the route chosen.
 - Proposals for commissioning outreach from high-quality specialist providers, where appropriate.
 - Proposal for timely access to health and education professionals (e.g., in educational psychology, occupational therapy and speech and language therapy) for early years, schools and colleges based on assessed local need.
 - A detailed year 1 implementation plan, including recruitment approach and success metrics (e.g. coverage, scale of support available), and a high-level plan for years 2–3.
 - A proposed governance and accountability arrangement, as part of the Local Area Partnership Board, including oversight routes, budgets and funding arrangements, reporting cadence and escalation processes. This should include a single, named LA-based SRO to drive improvement and reform.
 - Clear expectations for joint governance, monitoring and shared accountability across education and health partners.
 - Proposed approach to settings accessing support which ensures support is not disproportionately accessed by the most proactive schools and settings and includes out of area mainstream further education settings attended by local young people with SEND.




Embedding the Experts at Hand Offer Within a Broader Reform Strategy

Local Authorities

While the Experts at Hand Offer will be a key building block to reform, it is not sufficient on its own to deliver the scale of change required for SEND. Local authorities are encouraged to continue to take a strategic approach to **place planning and capital investment** to ensure inclusive provision is available and accessible. Guidance relating to inclusion bases (formerly SEN units, resourced provision and pupil support units – SU/RP/PSUs) is due to be published in **Spring 2026**.

To support this, we expect that local authorities will:

- Set out how High Needs capital funding will be used to invest in new places and adaptations to the physical environment so that needs of children and young people with SEND are met in alignment with the reform aims of mainstream inclusion.
- Use capital investment to improve the inclusivity of provision in all settings, considering a range of interventions that could better support children and young people with SEND through the physical environment, working with professionals who can advise and support e.g. special school/alternative provision practitioners, Occupational Therapists, Speech and Language Therapists, specialist nurses, mental health practitioners and support workers.
- Identify where inclusion bases (formerly SU/RP/PSUs) in mainstream schools or nurseries, or specialist provision in colleges, currently exist, where additional capacity is needed, and how this varies across planning areas.
- Engage proactively with early years providers, schools, multi-academy trusts and further education providers as well as health providers, to co-develop strategies for enabling more children and young people with SEND to access mainstream education.
- Engage with parent carer forums and children and young people forums to co-produce strategies that work for children and families.
- Ensure that decisions about the location and type of new SEND provision explicitly consider the proximity where children and young people live and



the implications for transport, recognising this may not always be possible when commissioning SEND provision in large, further education colleges.


- Ensure that all sufficiency and capital investment decisions include an assessment of transport impact, with a focus on reducing long-distance travel and increasing access to local, inclusive settings.

Core minimum requirements

Sufficiency and Place Planning

Local area partnerships will be expected to clearly and succinctly set out in their plan:

- A summary of local sufficiency pressures and how planned place growth addresses demand trends, including EHCP drivers and opportunities to meet need through capacity in mainstream settings.
- How the planned increases in capacity across setting types will reduce reliance on special schools, especially out-of-area placements and independent specialist provision.
- How collaboration between LAs and MATs could be strengthened to identify suitable sites and jointly plan the development of inclusion bases.
- Assurance that proposed inclusion bases in early years settings, schools, and colleges would reflect local demographic need, maintaining high quality standards and clear expectations on type of provision.
- How existing school premises are factored in when planning new inclusion bases, including opportunities created by falling rolls.
- Detailed plans to meet need for specialist places, by increasing capacity in mainstream settings through inclusion bases, and to improve the suitability of the physical environment. This should set out how the investment would align with local need and reduce future pressure. Where plans propose use of high needs capital to create additional special school places, this should clearly explain why need cannot be met in mainstream, including how the investment would align with local need and reduce future pressure.
- Proposals for flexibility to accommodate rurality and local variation, ensuring provision remains viable and context appropriate.

- 
- Evidence that an impact assessment of travel arrangements has been carried out for any capital, inclusion base or special school expansion proposal, demonstrating expected changes to travel distances, journey times, and reliance on out of area placements. Including any explicit travel related mitigations.

Strengthening Effective Partnerships and Practice


Effective collaboration across all system partners, including local authorities, ICBs, health provider organisations, Parent Carer Forums, Best Start Family Hubs, early years settings, mainstream and specialist schools, further education, dioceses, multi-academy trusts (MATs), parents carers, and children and young people with SEND, is essential to delivering meaningful transformation.

A transformed system that works for children and families must include co-production, collaborative partnership working and stakeholder engagement. Strong relationships at system and setting level are central to this.

The success of this transformation depends on shared ownership of decision-making, design and delivery of the local offer, and responsibility by all system partners, particularly local authorities, Integrated Care Boards and education settings.

The department is clear that MATs and schools have clear responsibilities in the development and active deployment of a strong universal offer of support to children and young people with SEND in their settings. They are expected to proactively collaborate with their system partners, including local authorities and ICBs, drawing on up-to-date understanding of the needs of children and young people in their settings to deliver consistent and robust support, particularly for the most commonly occurring and growing areas of need.

In the long term, MATs and schools will work together to pool some funding from their Inclusion Share for a more collaborative, efficient system to meet needs across their group and allow for better sharing of expertise and resources across an area. Local school groupings will need to be actively engaged with the local authority and Integrated Care Board. We will look to local authorities and their partners to shape the formation of groupings in their areas and have an oversight role for



these groups. In designing local systems, local authorities, MATs, schools and other system partners should start to consider how they might integrate school groups into the bigger picture, to work closely with their Experts at Hand and wider reform offer to provide a comprehensive SEND system.

We would like to work with school and local authority partners to understand how these groups are best structured while we move long-term to a system where all schools are part of strong groups. Guidance relating to school groups and pooled funding will be published in due course.

Core minimum requirements

Local area partnerships will be expected to clearly and succinctly set out in their plan:

Effective Practice - Universal Offer

- Proposal to co-develop, and regularly refresh, a partnership-wide universal offer agreement with schools, MATs, early years settings and post-16 providers which will be underpinned by up-to-date, needs-based data and signed off by the local authority, ICB, MAT and school representatives and Parent Carer Forum (PCF). The agreed universal offer should draw on approaches that will be set out in the National Inclusion Standards.
- Evidence of the processes and mechanism through which MATs and PCFs are engaged in the development of the universal offer.
- How early intervention services will be strengthened, with enhanced mainstream support to prevent escalation of need.
- How a strengthened universal offer will support mainstream settings to meet the most commonly occurring and growing areas of need. This should include how well evidenced early intervention approaches focused on speech and language (e.g. ELSEC³/NELI⁴), autism spectrum disorder (ASD) and social, emotional and mental health difficulties (SEMH), could be deployed.

³ Early Language Support for Every Child

⁴ Nuffield Early Language Intervention

- How a strengthened universal offer and group level specialist support will reduce escalation into out-of-area placements with significant travel-assistance requirements.

Early Years (plans should align with LA Best Start in Life plans)

- Proposal for assessing sufficiency of current level of childcare provision for 0–5s, detailing: (a) availability of early years places; (b) availability of specialist SEND early years places; and (c) any local gaps for children with complex and emerging needs and plan to address these including the role of wider partners such as Best Start Family Hubs.
- Proposal to improve early years identification and intervention strategies, including the role of Best Start Family Hubs.
- Proposal to strengthen transitions from early years to primary school, ensuring effective information flow and timely specialist input.

Post-16

- Proposal to strengthen pathways to adulthood, supporting young people to access education, training, employment and supported internships.
- A clarification of pathways into and out of post-16 settings, informed by consistent information flow and timely, effective specialist support.

Effective Partnerships

- Evidence of effective, shared, partnership leadership and governance across all system partners, with clear and mutually understood accountability arrangements.
- Evidence of formal representation from early years, schools, MATs and further education on partnership boards, with appropriate links to Schools Forums to support coherent engagement across all settings.
- Proposal to underpin partnership working with shared, high-quality data, including joint dashboards and use of a partnership maturity matrix to assess effectiveness.


- How proposed/agreed mechanisms for engaging all schools, early years providers and post-16 providers (including out of area mainstream colleges accessed by local young people with SEND) would support collective responsibility for inclusive practice.
- Proposal to strengthen dispute resolution and decision-making processes so system partners can address issues early and consistently, supported by transparent escalation routes.
- A single named SRO who is part of the leadership team, to provide operational leadership and drive reform across the partnership. The SRO should be a senior local authority official.

Effective Co-production Practices

- Proposal to strengthen co-production arrangements so that parent carer forums are properly resourced and consistently engaged in shaping decision making.
- How the voice of children and young people is captured directly and distinctly from parent voice, with clear evidence of how their views influence decisions.
- How SENDIASS will be used to support parents carers with high quality, independent information and guidance, and how the local area will address variability in service quality where it exists, with reference to the minimum SENDIASS service standards. Please include proposed mitigation to any parental concerns about the perceived independence of SENDIASS within mediation processes.
- Proposal to adopt a minimum co-production benchmark (based on NHSE guidance) and self-assess against it in year one, identifying improvement actions where needed.

Mediation

- A description of local mediation and dispute resolution arrangements, demonstrating how they incorporate the voices of parents and children and young people.

- 
- Proposal to maintain metrics for timeliness, resolution rates and effectiveness to support monitoring and accountability.

Governance

The Local SEND Reform Plan should be a local area partnership plan. The local authority, as the system convener, has an oversight role over the process of preparing, submitting and delivering the overall Local SEND Reform Plan with active participation from all system partners.

Governance arrangement is expected to include active representation from all key partners, including ICBs, PCFs, MATs and schools, with clear roles and accountability. Where local area partnerships involve multiple education partners – including those not always located within their area such as further education colleges – or may commission therapy services from different health providers, they should agree how those institutions/providers can be represented and have a fair voice in decision making.

The local area partnership should agree a single, named Senior Responsible Officer (SRO) for the Local SEND Reform Plan and local area transformation who will be responsible for overseeing SEND improvement and reform for the area. The SRO should be a senior local authority official and part of the local area partnership leadership.

The Local SEND Reform Plan should be discussed, agreed, and signed off at the relevant SEND Governance Board. As a minimum, the plan should be formally signed off by the Local Authority Chief Executive (CEO), the Integrated Care Board (ICB) Chief Executive, the Local Authority Director of Children's Services (DCS), the Integrated Care Board NHS Place Director, and the Local Authority Chief Financial Officer (CFO/Section 151 Officer), reflecting the joint statutory responsibilities for SEND across the system.

We expect your Local SEND Reform plan to be aligned with other local strategic plans you are currently developing, including your Best Start local plan. Both plans sit firmly within the government's ambition to improve child development and health

outcomes, and to create a more inclusive, high-quality system of support for all children and young people with SEND. Together, they should provide a coherent local approach to raising outcomes for children, young people and families.

Funding

To deliver our ambition for an inclusive and sustainable SEND system, the Department has secured targeted funding through the Spending Review. Some of this funding will be delivered directly to LAs and ICBs, other funding streams will be delivered to settings and will need to be considered when developing plans.

LA and ICB Funding

Funding	Description
<p>Experts At Hand Offer Funding (for LAs and ICBs)</p>	<p>This funding is provided to support development of an Experts at Hand Offer which provides a defined route for mainstream education settings to access support, including but not limited to Educational Psychology, Speech and Language Therapy, and Occupational Therapy. Rather than relying on individual referrals, the offer enables a whole setting approach to group-level support, tailored guidance, and strategic advice, allowing for earlier and more impactful intervention.</p> <p>The funding will be paid via the Local Inclusion Partnership Grant after June 2026. LA allocations and methodology will be published in Spring 2026.</p>
<p>Transformation Funding</p> <p>Local Authorities</p>	<p>Transformation funding should support authorities to deliver the necessary changes to their local systems in line with the Schools White Paper while continuing to deliver effective and efficient services to children and young people with SEND through transition. This could be done through expanding capacity and capability within the Local Authority to deliver the required changes. For example, building data and analytical capability to enable effective monitoring of system performance so that decisions on</p>



	<p>delivery are informed by high quality and good use of data or building project management functions that can organise and sequence work, ensuring efficient and effective deployment of resources.</p> <p>The funding will be paid via the Local Inclusion Partnership Grant after June 2026. LA allocations and methodology will be published in Spring 2026.</p>
<p>Best Start Family Hubs Funding</p> <p>Local Authorities</p>	<p>This funding supports the rollout of Best Start Family Hubs across England. Best Start Family Hubs will have a children and family services professional specifically trained in working to support inclusion for children with additional needs.</p>
<p>High Needs Capital Funding</p> <p>Local Authorities</p>	<p>This funding is provided to support local authorities to provide places for children and young people with SEND, or who require alternative provision (AP). This funding is expected to fund a transformative expansion of inclusion bases, as well as adaptations to improve the accessibility and inclusivity of mainstream settings, reducing the need for pupils to travel a long way to a special school and the costs of LA arranged transport. It can also fund places in special schools for the most complex needs.</p> <p>More details on this funding and local allocations will be published in Spring 2026.</p>
<p>Inclusive Early Years Fund</p> <p>Local Authorities</p>	<p>We expect early years settings to use the Inclusive Early Years Fund to strengthen inclusive practices across the whole setting. This may include freeing up staff time to participate in continuing professional development (CPD), collaborate on inclusive planning, or engage in early assessments. The funding can also support activities such as adapting the curriculum, improving the learning environment, or implementing targeted, evidence-based interventions for groups of children. These approaches aim</p>



	to embed inclusive practice into everyday provision, reducing the need for individual applications or formal diagnoses.
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Local areas should consider how these funding streams will be used strategically and effectively to support reform priorities, build capacity, and ensure priority outcomes are realised.

Other Inclusion Funding


We are also investing in mainstream settings to ensure that they are able to meet the needs of more children with SEND effectively.

Funding	Description
Inclusive Mainstream Fund (for Schools, and Post-16 settings)	We expect settings to use this funding to identify commonly occurring, predictable needs such as difficulties with reading or emotional regulation and take meaningful steps to improve everyday teaching and universal provision, so that it works well for all from the outset. Settings will also be able to spend the funding on developing more targeted evidenced-based support offers such as transition support or specific group interventions for those who need them, without the need for as many formal assessments or diagnoses.

Structure of the Local SEND Reform Plan

The Plan is structured into five key sections:

1. **Vision** – What the local area partnership is trying to achieve
The vision and goals for your local system in line with the national vision set out in the Schools White Paper.
2. **Strategy** – How the local area partnership plans to achieve it



Where the local system expects to be in the next 3 years, its theory of change, roadmap for the next 3 years and delivery plan for the first year.

3. **Monitoring and Evaluation** – How the local area partnership will know delivery is on track

The processes for tracking progress against milestones and outcomes and reporting to decision-makers.

4. **Governance** – What action the local area partnership will take to stay on track

The governance and processes for monitoring progress and taking action to ensure delivery remains on track.

5. **Central Government Support** – How we can help the local area partnership

An opportunity to identify practical support from central government that will help you deliver your plan.


The Local SEND Reform Plan is set out in **Annex A**.

3. Submission, Review, and Monitoring Process

Submission

Local areas are expected to submit the first iteration of their Local SEND Reform Plan by **Friday, June 19, 2026**.

A month prior to final local leadership sign-off and formal submission of Local SEND Reform Plans; SEND and financial advisers will be available to review a final draft of local area plans to flag any significant gaps or concerns, and together with health regional leads and DfE officials, will offer intensive support if they believe a plan is at risk of not meeting the minimum quality threshold. Local area partnerships will then have an opportunity to action these concerns prior to formal submission to the department.



Local area leadership are encouraged to self-assess their plans using the **Local SEND Reform Plan Quality Assessment Framework** prior to sign-off and submission.

Further guidance on the submission and review process will be shared closer to the submission date.

Review

DfE and NHS England will use the plans to help identify effective, innovative practice and barriers, and identify how to effectively target support through the period of transformation.

The government will use the **Local SEND Reform Plan Quality Assessment Framework** to assess the quality of plans and facilitate access to the High Needs Stability Grant for local authorities.

The department will apply a consistent multi-tier assessment and moderation process to ensure that the review and assessment of plans is rigorous, consistent and fair.

DfE officials, health regional SEND leads, SEND and financial advisers will support local area partnerships in reviewing the plans using the **Local SEND Reform Plan Quality Assessment Framework** in the first tier.

Assessment tiers will include Regional Directors and independent senior civil servants from across the department. A SEND Delivery Board chaired by Regions Group Director-General, Tim Coulson, with DfE non-executive directors, DfE Performance and Risk Committee members and Sir Kevan Collins, the Secretary of State's delivery advisor in attendance will sign off final ratings and agree recommendations to the Secretary of State.

The Secretary of State will make the final decision to approve or not to approve a plan with assessment outcomes will be communicated in September

Monitoring

DfE Officials, health regional SEND leads, SEND and financial advisers will support local areas to develop iterative reform plans and, together with the local area



leadership, jointly monitor the implementation of plans as reforms are rolled out.

The purpose of the joint monitoring is to:

- i. provide assurance that funding is spent in line with reform priorities and that local area partnerships are working together to co-design and implement key changes to local service delivery, including changes to roles and responsibilities; and
- ii. provide assurance that the implementation of reforms is delivering the anticipated changes and outcomes, by rebalancing the system towards early intervention, inclusive education, and sustainable local services.

DfE officials, health regional SEND leads, SEND and financial advisers will join quarterly review meetings with local area partnerships (utilising existing governance forums) to understand implementation progress and provide appropriate support and challenge as needed. Where applicable, these review meetings will be consolidated with other engagement or monitoring meetings from DfE or health regional SEND leads.

Local area leadership and officials are expected to discuss progress against the plan, including:

- Progress against key metrics
- Whether key milestones are on track to be achieved
- Whether risks are being effectively mitigated
- Identifying effective and innovative practice that can be shared; and
- Identifying where additional support may be needed or barriers unblocked.

Local area partnerships are required to provide quarterly data returns to DfE against the selected metrics outlined in the accompanying data template. DfE will, in turn, provide quarterly data reports with visualised analysis and benchmarking that will support local delivery, monitoring, and evaluation.

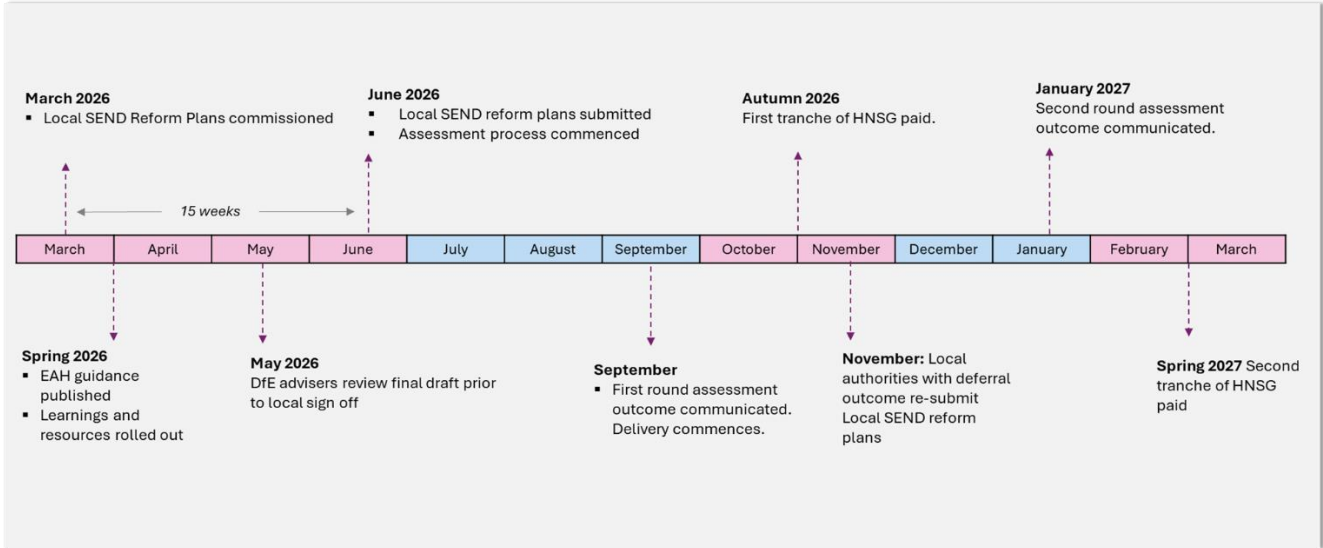
DfE officials and health regional SEND leads will use these data returns and discussions at review meetings, alongside submission of this Local SEND Reform Plan and the Local Partnership Maturity Assessment, as well as Area SEND inspection reports, to assess performance and delivery at the local level. These

assessments and this ongoing monitoring will ensure that support and engagement is best allocated and targeted throughout this period of reform.

High Needs Stability Grant

The government will address long standing SEND financial pressures by covering 90% of local authorities’ High Needs-related DSG deficits accrued up to the end of 2025–26 through the High Needs Stability Grant. This grant will be paid subject to each local authority securing the Secretary of State for Education’s approval of their local area’s Local SEND Reform Plan. Payments will be made in Autumn 2026 for local authorities whose plans are approved. Local authorities whose plans do not meet the threshold for approval will be required to revise their plans to ensure they meet the required threshold, with appropriate support. Local authorities whose plans are subsequently approved will receive the grant payment in Spring 2027. Local authorities will not receive any payments until successful approval of their local area’s Local SEND Reform Plan.

Review and payment timeline outlined below.



4. Questions

For any questions relating to this document or the Local SEND Reform Plan more widely, please get in touch with your DfE SEND Lead or contact

Implementationsupport.SEND@education.gov.uk



Annex A: Local SEND Reform Plan

Developing a Local SEND Reform Plan is an important first step for local areas to set out how they will lay the foundation for reform, and design an approach tailored to their local context. A shared plan which focuses on co-designing the local approach as system partners and with children, young people and families will help foster collective responsibility for delivering the reforms.

It is critical that all system partners, including health, education and childcare settings, work together to design and deliver the Local SEND Reform Plan, under the local authority's leadership. It is also crucial that representative family carers e.g. the local Parent Carer Forum, are involved in the development of the plan.

The expectation is that this plan is discussed, agreed, and signed off at your relevant SEND Governance Board. As a minimum, the plan must be formally signed off by the Local Authority Chief Executive (CEO), the Integrated Care Board (ICB) Chief Executive, the Local Authority Director of Children's Service (DCS), the Integrated Care Board NHS Place Director, and the Local Authority Chief Financial Officer (CFO/Section 151 Officer). We encourage other colleagues and partners who have contributed to also review and sign-off the plan, particularly early years, school, college and trust leaders.

Name of Local Authority:

Name of Integrated Care Board:

Local SEND Reform Plan SRO:



Signatories

Role	Name	Signature	Email contact	Date

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Executive Summary

A brief summary of your local system 'change story' – your local context, where you are now, where you want to get to in the next 3 years, how you know you are succeeding and how you will know you have achieved your vision for the next 3 years. Please include a brief qualitative summary. This summary should also include your assessment of current and forecast performance against the headline metrics.

Please structure your 'change story' using the following aims:

- *Build a 0-25 system where children and young people receive support to achieve and thrive through (a) more inclusive settings and (b) stronger local partnerships*
- *Improve capacity and capability of the mainstream and specialist workforce to identify and meet need*
- *Improve confidence of children, families, and stakeholders in reform and readiness of the system*
- *Stabilise finances and improve value for money*

500 words

Section 1 – Vision and Goals

1. What the local area partnership is trying to achieve?

Please set out your goals for your local system. These should be clear, aligned to the vision set out in the Schools White Paper, small in number and measurable. These goals should include clear reference to:

- Outcomes for children
- Confidence of parents, carers and young people in the system
- Management of finances to secure value for money

250 words

Section 2 – Strategy

2. Where the local area partnership expects to be in the next 3 years

A description of what your local system would look like in the next 3 years in line with the national vision set out in the Schools White Paper and set within the context of where you are starting from as a local system.



In particular, as commissioning system partners, you should reflect on and agree what your fully fledged **Experts At Hand Offer** model should be and how this will be deployed via mainstream settings and providers (including those not based in your area – e.g. further education colleges attended by your young people) to build their capacity as well as identify and meet the needs of children and young people earlier and without the need for a statutory assessment for Education, Health and Care.

To help you fully consider the scope and scale of change required, you may find it useful to structure your response using these 4 building blocks of an inclusive system, reflecting on what is working well in your system, what you are most worried about, what needs to change, and how the enablers will help you achieve your 3 year vision.

When summarising where your local area partnership currently is, please include an assessment of where you are in reference to the core minimum requirements above and how you bridge the gap, making reference to and attaching additional documents that provide underlying evidence for your summary.

Strengthening inclusion across education settings– organising places and provision to meet as many needs as possible, as close to home as possible, with all settings and providers moving towards a shared understanding and consistent practices around inclusion.

System leadership, local partnership collaboration and co-production– putting in place the enabling conditions across a local area that ensures planning and provision reflects the local area & is joined up, including strategic co-production with parent carers and children and young people.

Access to specialist support and local placements – improving collaboration between settings and deploying expertise from a range of specialist and expert sources, to support schools and settings to meet the needs of children and young people earlier and locally.

Encouraging inclusive culture & behaviours – using funding and shared accountability towards a system that works for children and families while achieving value for money.

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years
<p>Building blocks <i>Strengthening inclusion across education settings</i> <i>Access to specialist support and local placements</i> <i>System leadership, local partnership collaboration and co-production</i> <i>Encouraging inclusive culture and behaviours</i></p> <p>Enablers <i>E.g.</i> <i>Capital – investment strategy across EY, mainstream, FE</i> <i>Workforce</i> <i>Data/digital systems</i></p>	<p><i>(a short summary of where you are now including a reflection on what is working well, what needs to change and the status of the enablers that underpin your system)</i></p>	<p><i>(a short summary of the vision for your local system in the next 3 years including the system enablers, reflecting how your Experts At Hand Offer model will underpin this vision, helping you scale and enhance what is working well and change what is not working so well)</i></p>
<p>Success measures</p> <p><i>Drawing on metrics from the accompanying data template E.g.</i></p> <p><i>Improve attendance of pupils in all maintained schools (mainstream and special) with SEN</i></p> <p><i>Reduce reliance on independent special school places</i></p> <p><i>Mainstream settings with increased access to Education Psychologists/SaLT/OT</i></p> <p><i>Reduced NEET rates for SEND YP at age 16</i></p>	<p>Baseline</p> <p><i>(outline the baseline for your success measures reflecting where you are now – these should be drawn from the metrics in the data template)</i></p>	<p>Target Metrics</p> <p><i>(outline the target metrics that will demonstrate you have achieved the vision summarized above – these should be drawn from the metrics in the data template)</i></p>

INSERT DOCUMENT UPLOAD LINK

3. What is the local area partnership's strategy for delivering on the above?

A brief summary of your local system's theory of change or reform strategy. Reflect on the output of your **Local Partnership Maturity Assessment Tool**, particularly your *Local System 'change story.'*



250 words

4. **Please upload a completed copy of the Local Partnership Maturity Assessment Tool.**

INSERT DOCUMENT UPLOAD LINK

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5. **What is the local area partnership roadmap for the next 3 years?**

Reflecting on the broad timescales and expectation for deliverables set out in the Schools White Paper, key documents and core minimum requirements set out in this document, please provide a high-level roadmap for the next 3 years. Please highlight key milestones and a trajectory to the target metrics identified above, including leading indicators.

In the 2026-27 column, in particular, please reference how you plan to meet the core minimum requirements in your narrative, including details and evidence in supporting documents.

You can insert or upload supporting documents including graphics/visuals that illustrate your data trajectory.

Local roadmap for the next 3 years	2026/27	2027/28	2028/29
------------------------------------	---------	---------	---------

<p>Building blocks <i>Strengthening inclusion across education settings</i> <i>Access to specialist support and local placements</i> <i>System leadership, local partnership collaboration and co-production</i> <i>Encouraging inclusive culture and behaviours</i></p> <p>Enablers <i>E.g.</i> <i>Capital – investment strategy across EY, mainstream, FE</i> <i>Workforce</i> <i>Data/digital systems</i></p>			
<p>Success measures</p> <p><i>Drawing on metrics from the accompanying data template</i> <i>E.g.</i> <i>Improve attendance of pupils in all maintained schools (mainstream and special) with SEN</i> <i>Reduce spend on ISS places</i> <i>Increase # children and young people supported by Education</i> <i>Psychologists/SALT/OT in maintained provision</i> <i>Improve overall effectiveness of provision</i> <i>NEET data</i></p> <p><i>Leading indicators</i></p>			

INSERT DOCUMENT UPLOAD LINK

6. What will the local area partnership deliver in the first year?

Please outline the key workstreams, milestones and trajectory your local area partnership will deliver and achieve in 2026-27 as well as how you plan to spend the investment allocation that will help fund this year’s delivery. Please share key milestones and anticipated dates, success measures, cost breakdown and category. These should incorporate the core minimum requirements, be mapped to the building blocks above and should reflect a more detailed trajectory to the narrative, milestones and target metrics outlined in the 2026-27 column above.



2026-27 Local delivery plan		Q2		Q3		Q4	
Workstream outline – mapped to building block Outcome - what you want to achieve with this workstream Success measures – how you measure progress drawing on metrics from the accompanying data template	Responsible lead per workstream – accountable for the delivery of the workstream and the identified outcome.	Milestones per workstream What key milestones will enable you achieve your targeted trajectory	Target trajectory per workstream Where do you expect your data to be?	Milestones per workstream What key milestones will enable you achieve your targeted trajectory	Target trajectory per workstream Where do you expect your data to be?	Milestones per workstream What key milestones will enable you achieve your targeted trajectory	Target trajectory per workstream Where do you expect your data to be?
Building block - Workstream 1 <i>Outcome</i> <i>Success measure</i> Building block - Workstream 2 <i>Outcome</i> <i>Success measure</i> Building block - Workstream 3 <i>Outcome</i> <i>Success measure</i>							
Projected Investment Spend per quarter <i>Please specify funding source for each category</i> <i>Example categories:</i> Programme oversight/additional leadership capacity. Workforce Recruitment Workforce training and development Data/Digital Total Spend							

INSERT DOCUMENT UPLOAD LINK

7. How will the local area partnership deliver the first-year plan?

Please set out how you will ensure the required capacity and capability is in place from organisational corporate functions to support implementation of the plan. This could include reference to how you plan to build or bring in project delivery capability to manage delivery against the plan, support prioritisation, and effective use of resources; and how you plan to build the capacity and capability in data and analytics to support effective tracking against the measures in the plan and reporting that informs decision making.

250 words

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8. Other funding **Local Authorities**.

Block Transfers: If you have made a block transfer (Schools Block to High Needs Block) for 26-27, please set out how your plans for this funding align with the activities outlined above.

250 words



Capital: We have announced at least £3 billion in high needs capital between 2026-27 and 2029-30 to support children and young people (CYP) with SEND, or those requiring alternative provision (AP). This funding is intended to support place delivery across the full 0-25 age range, including early years and post-16. We expect funding to support the following outcomes:

- a. Inclusion at the core of high needs sufficiency strategy, resulting in more children and young people with SEND accessing suitable places in mainstream settings, across all phases of education
- b. Every child or young person who needs a place in an inclusion base can access one
- c. Fewer children and young people with SEND needing to travel a long way to access a suitable placement
- d. Improved suitability of the mainstream estate to support children and young people with SEND, with adaptations to improve inclusivity and accessibility of the physical environment

We also welcome innovative uses of high needs capital to drive inclusion, for example, investment in assistive technology for use in mainstream settings.

Please outline your strategy for how this funding will meet the outcomes above, with reference to the core minimum requirements and other workstreams in this reform plan where appropriate. We would like to see detail around your plans to increase capacity for inclusion bases (formerly known as SEN units, resourced provision and pupil support units – SU/RP/PSUs), such as schools, colleges or early years providers identified, engagement with relevant settings and trusts, and target cohort of needs.

If your plans include increases to places in special schools or specialist post-16 institutions, please include a clear rationale, showing the need that is being met, and why it cannot be met through other types of provision, such as inclusion bases.

If you are receiving additional capital funding to replace one or more planned special or AP free schools, please set out how this funding will meet need in your area, and plans for engaging relevant trusts in your sufficiency planning.

500 words

9. System partner and stakeholder engagement, and co-production.

Please outline how the local area partnership plans to engage system partners and stakeholders to develop and implement the plan – include planned engagement with schools and early years settings, alternative providers, FE and post-16 providers (including those your young people attend that are not within your local area), Parents and Carers and children and young people with SEND, with reference to the core minimum requirements. Consider changing roles and responsibilities in the context of the Schools White Paper and how you work collaboratively to manage the transition. Please indicate where additional support is required to engage partners or stakeholders - senior officials at the Department for Education will be available to contribute to summer term events with education

leaders and parent carer forum leaders.



500 words

10. Risks and Mitigations

What are the key risks that could affect the successful implementation of your Local SEND Reform Plan, and what mitigation strategies are in place to manage these risks? Please include a maximum of 5 risks with impact and likelihood RAG for each risk. See Annex C for suggested risk matrix.

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Risk	Impact	Likelihood	RAG	Mitigation	Residual RAG

11. Dependencies

Please detail the key areas of the local area partnership's proposed SEND future state and roadmap that may be impacted by wider reforms nationally and locally and outline how you will manage these. We expect these will include but not be limited to:

- NHS reforms
- Local Government Re-organisation
- Reforms to Children's Social Care
- Best Start in Life, including Family Hubs
- Best Start In Life Strategy
- Curriculum and Assessment Review

500 words

Section 3 – Monitoring and Evaluation

12. How will the local area partnership know delivery is on track?

Please set out how you will monitor and track progress referencing:

- **Monitoring tools and processes** - the specific tools, systems, and data you will use to track delivery milestones and measure the impact on outcomes.

Some Local Area Partnerships hold data in a central SEND operational dashboard. This is used by teams on a weekly basis to identify trends in demand or inform conversations with local school or setting leaders.

In some Local Area Partnerships, a view of the Key Performance Indicators (KPIs) is reviewed monthly by a SEND Board to take decisions on prioritisation, resourcing and delivery of services informed by regular data.

Please set out how you will use data to track demand (e.g., EHCP applications for assessment), Service delivery (e.g., Speech and Language Specialists deployment; places created), Service quality (e.g., parental satisfaction) and outputs (e.g., pupil attendance; pupil exclusions)

- **Feedback and adaptation mechanisms** - what feedback loops and stakeholder input you will use to review progress and adjust your approach.



500 words

13. Reporting to DfE

Using the attached data template, the local area partnership is required to provide quarterly data returns to DfE against selected key metrics. DfE will, in turn, provide quarterly data reports with visualised analysis and benchmarking that will support your local delivery, monitoring and evaluation. This will include data the department holds on **Attendance**, **Exclusions**, and **Unauthorised absence**.

Please use the attached data template to upload your initial data return to DfE.

*****INSERT DOCUMENT UPLOAD LINK*****

Section 4 – Governance

14. How will the local area partnership ensure delivery of plans remain on track?

Please outline the governance structures in place to oversee delivery. Clearly set out who is responsible for overseeing reform delivery, what each governance group or individual is accountable for, and how these arrangements ensure progress is monitored and decisions are made transparently. Please identify where the named SRO for the Local SEND Reform Plan sits within the governance structure and ensure your response incorporates the core minimum requirements.

Governance Mechanism <i>This may be a governance group, or an individual (e.g. SRO).</i>	Purpose/ Responsibilities <i>What is the function of this governance mechanism? What are they accountable for overseeing? What information is reported to this governance mechanism?</i>	Membership <i>Who does this governance mechanism comprise of? [should include health and PCF representation] What stakeholders are represented at this governance mechanism? Please indicate who chairs this. (Include n/a if an individual).</i>	Cadence <i>How regularly does this governance mechanism meet?</i>	Decision Rights <i>What decisions can this governance mechanism make?</i>	Escalation Route <i>Where can this governance mechanism escalate issues or decision to?</i>

If you have a diagram to show the relationship between these governance mechanisms, please upload this here.

INSERT DOCUMENT UPLOAD LINK



Section 5 – Central Government Support

15. How can we help you?

Please outline any practical support you need from central government to implement your plan effectively.

This may include:

- Access to specialist expertise or advisory support
- Help with workforce development or recruitment challenges
- Tools or templates to support data collection, reporting, or evaluation
- Facilitation of peer learning or regional collaboration
- Support with system-level coordination across education, health, and care
- Guidance on navigating regulatory or policy barriers

250 words

Annex B - Supporting Documents

Document	Link
The Schools White Paper	Every Child Achieving and Thriving
SEND Consultation Document	SEND reform: putting children and young people first.
LA and Schools Budget 2026-27	Schools Operational Guide 2026-27
Local Partnership Maturity Assessment Guidance and Tool	Included in commission pack
Local SEND Reform Plan – Data template	Included in commission pack
Local SEND Reform Plan Quality Assessment Framework	Included in commission pack
Local Inclusion Partnership Grant 2026-27	To be published Spring 2026
Experts at Hand Guidance	To be published Spring 2026
High Needs Capital Allocations 2026-27	To be published Spring 2026
Guidance on Inclusion bases	To be published Spring 2026

Annex C – Risk Matrix

IMPACT DESCRIPTION	IMPACT LEVEL	PROBABILITY/LIKELIHOOD				
		< 10%	>10% - <30%	>30% - <60%	>60% - <90%	>90%
		Very Unlikely	Unlikely	Possible	Likely	Very Likely
Cannot deliver Reform Plan; Failure of mission critical activity.	Crisis					
Significant impact to objectives; Significant and sustained disruption to activity.	Critical					
Delivery targets are compromised; Project delay / budget overrun.	Moderate					
Limited impact on delivery targets; Deviations from project resource, timescale or targets.	Marginal					
Minimal impact on delivery targets; Minimal impacts to project / programme efficiency.	Negligible					

Torbay SEND Reform Plan

Version 1.2

May 2026

Name of Local Authority: Torbay Council

Name of Integrated Care Board: Devon and Cornwall ICB

Local SEND Reform Plan SRO: Hannah Baker, Divisional Director for Education and SEND

Signatories

Role	Name	Signature	Email contact	Date

Executive Summary

1. Build a 0–25 system where children and young people achieve and thrive

Torbay is moving towards a fully integrated 0–25 SEND system, shifting from a reactive, fragmented model to one that is inclusive, preventative and coordinated. This reflects high levels of need driven by deprivation, health inequalities and complex family circumstances, alongside rising demand, delays in support and inconsistent family experiences.

a) More inclusive settings:

Currently, only 35.8% of pupils with EHCPs are educated in mainstream settings, with high levels of absence, persistent absence and exclusions. Inconsistent delivery of the universal offer and graduated response contributes to uneven inclusion and escalating need. Over the next three years, Torbay will implement a strengthened Ordinarily Available Provision (OAP), embed locality-based delivery, and scale early intervention, particularly for speech, language and communication needs (SLCN) and neurodevelopment. This will increase mainstream inclusion, reduce out-of-area placements, and ensure needs are met earlier and more effectively.

b) Stronger local partnerships:

The partnership has strengthened significantly following inspection and the Priority Impact Plan, with clearer governance and more aligned leadership through the SLAIP Board. However, historic weaknesses in joint working, commissioning and communication have contributed to system fragmentation and delays. The vision is for a fully integrated system where parent carers, education, health and care operate through shared pathways, joint commissioning and locality-based delivery, supported by Family Hubs, Families First and Sub-regional collaboration to improve consistency and efficiency at scale.

2. Improve workforce capacity and capability

Workforce capacity remains a key constraint, particularly in educational psychology, speech and language therapy and wider health services. Recruitment and retention challenges continue to impact timeliness, quality and system resilience. Variability in practitioner confidence also contributes to inconsistent early identification and a referral-led approach.

Over the next three years, Torbay will build a confident and skilled workforce across all sectors. This includes strengthening SENDCo capacity, expanding multi-agency training, and embedding specialist outreach through the Experts at Hand Offer. Improving workforce capability will enable earlier intervention, reduce reliance on EHCPs and support more needs to be met effectively within mainstream provision.

3. Improve confidence and experience of children, families and stakeholders

Inspection findings highlighted delays, inconsistent experiences, weak communication and limited co-production, resulting in low parental confidence. While governance, data use and engagement mechanisms are improving, these changes are not yet consistently experienced by families.

The next phase will focus on delivering visible impact in key pressure areas, EHCP timeliness, health waiting times and exclusions, alongside strengthening communication, accountability and co-production. The aim is for families to experience a more responsive, transparent system with clear pathways, timely support and meaningful involvement in decision-making.

4. Stabilise finances and improve value for money

Torbay continues to face financial pressure due to historically high EHCP demand and reliance on specialist and independent placements. Although the Safety Valve programme has reduced demand growth and improved sufficiency, pressures remain in key areas such as ASC, SEMH and alternative provision.

Over the next three years, the system will align resources more effectively through joint commissioning, data-led planning and a co-produced sufficiency strategy. By investing in early intervention, inclusive mainstream practice and integrated delivery, Torbay will reduce reliance on high-cost provision while improving outcomes.

Overall, financial sustainability is intrinsically linked to reform: a more inclusive, preventative and coordinated system will deliver better outcomes, improve experiences and ensure long-term value for money.

Section 1 – Vision and Goals

Our Vision

We will build a SEND system in Torbay that is inclusive and ambitious, where children and young people are valued, supported early, and able to do well in their local communities while growing in confidence for adult life.

We will work together across education, health and care services, families and the voluntary and community sector, to provide the right support at the right time and in the right place.

This will help children and young people with SEND learn, feel they belong, and be ready for independent and fulfilling lives.

To achieve this vision, three overarching priorities will guide delivery to 2029.

First, improving outcomes for children and young people through inclusive education, earlier identification of need and timely, effective support. Strengthened SEN Support, access to specialist advice and enhanced collaboration across settings will enable more children to succeed locally and transition confidently into adulthood.

Second, building confidence in the SEND system by ensuring clarity, consistency and transparency. Families will experience clear pathways, strong communication and meaningful co-production, with their voices shaping decisions, services and outcomes.

Third, making best use of resources by investing in early intervention, local provision and workforce capacity. Joint commissioning and strong financial governance will ensure services are sustainable, efficient and focused on delivering the best possible outcomes.

To achieve this vision, three overarching priorities will guide delivery to 2029.

Section 2 – Strategy

1. Where the local area partnership expects to be in the next 3 years

Local blueprint for the next 3 years	Where we are	Where we will be in the next 3 years
<p>SUMMARY TABLE</p> <p>See appendix 3 for full plan</p>		
<p>Building Block 1: Strengthening inclusion across education settings</p>		
<p>Summary of enablers and success measures</p> <p>The successful delivery of these SEND improvements is underpinned by a set of core enablers that collectively drive better outcomes, efficiency, and confidence across the system. Strong leadership and governance provide clear strategic direction, accountability, and consistent decision-making, while a skilled and sufficient workforce across education, health, and care ensures the capacity and expertise to meet need effectively. Inclusive practice in mainstream settings, supported by a robust graduated response and early intervention, reduces unnecessary escalation and improves access to support. This is complemented by investment in local provision and strategic commissioning, enabling more children to be educated closer to home and reducing reliance on independent placements. Effective processes and high-quality data support timely assessments, improved performance management, and reduced waiting times, while strong multi-agency partnership working ensures coordinated delivery across services. Early help</p>	<p>Where we are</p> <p>Torbay SEND Local Area Partnership is in a strong position to make rapid improvements over the next three years. Our recent Priority impact Plan, which has focused on many of the key building blocks, mean our infrastructure for change is already progressing. Changes to our governance mean we are starting from a strong and robust position, our priorities in universal support, commissioning and support whilst waiting mean we can enhance what has already been started. Recent work on our sufficiency has already made key changes to place numbers and types of need. Our improvement grants and pilot work have already trailed many 'Expert at Hand' services. Our Locality Pilots have given us a valuable 'test and learn' opportunity to now springboard and expand this style of collaboration. Support from</p>	<p>Where we will be in the next 3 years</p> <p>In three years, Torbay will have a confident, integrated SEND system underpinned by a strong universal offer that enables early identification and support within mainstream settings. Staff will be equipped to meet needs effectively, with clear and rapid pathways to specialist support where required. Inclusion will be strengthened through expanded mainstream provision, specialist outreach, and locality-based collaboration, reducing reliance on high-cost placements and exclusions while improving parental confidence. Planning will be fully evidence-led, using JSNA intelligence to shape a coherent, high-quality network of provision across all areas, ensuring equitable access and reduced variability. Surplus capacity will be repurposed to meet demand, and transport considerations will be embedded in decision-making.</p> <p>Overall, the system will deliver consistent, place-based</p>

<p><i>approaches and demand management pathways further prevent escalation to EHCPs, and meaningful engagement with parents, carers, and schools builds trust and confidence in the system. Together, these enablers support the achievement of key success measures, including increased inclusion in mainstream settings, stabilised demand for EHCPs, improved access and timeliness of services, better attendance and attainment outcomes, more efficient use of transport and resources, and strengthened confidence among families and professionals.</i></p>	<p><i>the DfE RISE universal programme is drawing all school settings together to support the wider inclusion work.</i></p>	<p><i>support, improved outcomes, and a more sustainable, inclusive SEND offer.</i></p>
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Building Block 2: Access to specialist support and local placements
 Pillars 4, 5 and 6

<p>Summary of enablers and success measures</p>	<p>Where we are</p>	<p>Where we will be in the next 3 years</p>
<p>Successful delivery of these SEND improvements for Building Block 2 is supported by a set of core enablers that strengthen capacity, consistency, and confidence across the system. A skilled and sufficient workforce, alongside increased access to specialist services, enables reduced waiting times and improved support within mainstream settings. Clear multi-agency pathways and efficient processes ensure a more coherent and navigable system for families and practitioners. Strong inclusive practice and early intervention underpin effective use of mainstream provision and support improved reintegration from alternative provision. A consistent and equitable service offer across all settings helps reduce disparities, including NEET outcomes, while a strong focus on data and performance drives improvements in attendance, behaviour, and attainment. Finally, effective engagement, communication, and co-production with families, schools, and practitioners build confidence in the system, resulting in better user experience and reduced complaints, disputes, and tribunal activity.</p>	<p><i>Torbay is well placed to deliver the Experts at Hand model, having already introduced many of its core components through strong partnership working over the past 18 months. A robust evidence base, combining JSNA intelligence and co-production with families, provides a clear understanding of local needs and priorities. Existing provision, such as specialist outreach, neurodiversity programmes and SEMH locality pilots, offers a solid foundation for integrated, multi-agency support, alongside early improvements in access to key therapies.</i></p> <p><i>The next phase will focus on scaling and aligning this work into a more coherent and consistent system, addressing gaps in alternative provision and workforce capacity. Strong governance through the SLAIP Board and Priority Impact Plan provides clear accountability. Over the next three years, Torbay will expand and embed the model, improving timeliness, consistency and access to specialist expertise across the system.</i></p>	<p><i>By year three, Torbay will have a fully embedded and mature Experts at Hand (EAH) model, delivered through a jointly owned partnership approach with clear governance, shared accountability and formalised delivery arrangements. The offer will be cohesive, consistent and shaped by robust data, ongoing co-production and a continuously evolving partnership pathway map.</i></p> <p><i>Alternative Provision will operate as part of a flexible, tiered system, with sufficient capacity and a stronger focus on early, needs-led intervention rather than exclusion. Mainstream settings will have consistent, timely access to specialist support, underpinned by a resilient, jointly commissioned workforce and strengthened regional collaboration.</i></p> <p><i>This will be supported by stable implementation frameworks, clear performance oversight, and locality-based working that brings partners together around shared priorities. The result will be a more integrated, preventative and responsive system, delivering more consistent experiences and improved outcomes for children, young people and families</i></p>

Building Block 3: System leadership, local partnership collaboration and co-production
Pillars 1, 3 and 5

<p>Summary of Enablers and Success Measures</p> <p><i>Building Block 3 focuses on strengthening early intervention, consistency, and user experience across the SEND system. Success is demonstrated through earlier identification of need, reduced time from identification to intervention, and consistent access to Early Advice and Help across all phases. A more equitable system is achieved through a universal offer that is consistently delivered across early years, schools, and post-16 settings, supporting improved outcomes in attendance, behaviour, and attainment. Alongside this, a stronger focus on experience and confidence ensures that families, young people, and practitioners can more easily understand, access, and navigate support, with increased satisfaction and trust in the system. Embedded co-production and meaningful participation further enhance responsiveness and transparency.</i></p> <p><i>These outcomes are enabled by a set of core system conditions: strong early identification processes and accessible early help pathways; clear and consistently applied multi-agency processes; a skilled and confident workforce able to deliver high-quality inclusive practice; and a commitment to equitable provision across all settings. Robust use of data supports improvements in timeliness and outcomes, while effective communication, co-production, and engagement build confidence and ensure services are shaped by the voices of families and young people. Together, these enablers create a more proactive, consistent, and user-centred SEND system that improves both experience and long-term outcomes.</i></p>	<p>Where we are</p> <p><i>Torbay has strong commitment and emerging foundations for an inclusive SEND system, but delivery remains inconsistent and not yet fully embedded. The universal offer and graduated response vary across settings, with unclear expectations, limited shared frameworks and inconsistent early intervention, meaning support is still often reactive and referral-led. While there are positive developments, such as early years pathways, post-16 expansion, locality pilots, and growing co-production, these are not yet consistently applied or aligned into a coherent system-wide approach.</i></p> <p><i>Variability in mainstream provision and access to specialist advice contributes to escalation of need and continued reliance on specialist placements. Workforce capacity and sufficiency challenges, particularly in alternative provision, further impact early support. Although data, participation and partnership working are improving, they are not yet fully integrated into decision-making or commissioning, which remains influenced by short-term pressures rather than prevention.</i></p> <p><i>Overall, Torbay is a system in transition, with strong building blocks but a need to embed consistency, strengthen early intervention and universal practice, and align partnership efforts into a single, coherent framework that improves inclusion and outcomes.</i></p>	<p>Where we will be in the next 3 years<i>In three years, Torbay will have a fully embedded, co-produced Universal Offer that is consistently understood and applied across all settings, supported by strong partnership working with schools, MATs, health and families. A locality-based early intervention model and fully operational Experts at Hand approach will ensure timely, predictable access to specialist support, strengthening mainstream inclusion and reducing escalation to statutory processes, specialist placements and exclusions.</i></p> <p><i>Provision will be shaped by shared data, locality profiles and evidence-based practice, with schools working collectively to meet need through agreed interventions and consistent high-quality teaching. Pathways from early years through to post-16 will be clear, coordinated and inclusive, supporting smoother transitions and stronger outcomes into adulthood, including reduced NEET rates.</i></p> <p><i>Co-production will be embedded as standard practice, with the voices of children, young people and families visibly influencing decisions at all levels. A stronger SENDIASS offer and improved early resolution processes will increase parental confidence and reduce conflict.</i></p> <p><i>The system will be underpinned by integrated, partnership-led commissioning, with shared accountability, real time intelligence and a focus on early intervention and prevention. Overall, Torbay will deliver a coherent, inclusive and sustainable SEND system, with improved outcomes, greater placement stability and more equitable experiences for children, young people and families.</i></p>
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Building Block 4: Encouraging inclusive culture and behaviours

Pillars 2, 6 and 7

Enablers and Success measures summary

Building Block 4 is focused on strengthening system leadership, accountability, and intelligence to ensure effective partnership working and sustained improvement. Success is demonstrated through robust governance arrangements, where boards provide clear oversight, strong decision-making, and effective escalation, underpinned by well-defined roles and accountability across education, health, and care partners. Consistent representation and active participation across partnership forums, alongside embedded co-production with families and young people, ensure that decision-making is inclusive and informed by lived experience. This is supported by widespread adoption of shared data dashboards, enabling all partners to access a single, consistent view of performance and need, with data routinely used to inform both strategic and operational decisions. Continuous improvement in partnership maturity further reflects the strengthening of collaborative working. These outcomes are enabled by strong, aligned leadership, clear governance structures, a culture of collaboration and transparency, robust performance management, and integrated data systems, all of which together create a more accountable, insight-driven, and effective SEND partnership.

Where we are

Torbay has a well-established SEND partnership governance structure, with the SLAIP Board providing a central forum for strategic decision-making and cross-agency accountability, supported by strong representation from all education phases and alignment with wider improvement priorities. Oversight is strengthened through links to the Children's Continuous Improvement Board and system leadership, while increasingly robust data dashboards, a multi-agency Data and QA subgroup, and clear escalation processes support transparent performance monitoring and shared ownership of improvement across partners.

Where we will be in the next 3 years

In three years, Torbay aims to have a confident, fully aligned SEND system where education, health and care work seamlessly together with shared leadership, governance and accountability. Education providers, from early years to further education, will be embedded as equal, influential partners in decision-making, helping to shape strategy and delivery. The system will be inclusive, consistent and responsive, supported by strong collaboration and a shared responsibility for outcomes. A fully data-driven approach, with unified dashboards and shared intelligence, will enable informed decisions, strengthen accountability and improve outcomes for children and young people with SEND.

2. What is the local area partnership's strategy for delivering on the above?

Torbay's SEND Partnership will deliver a focused three-year reform programme, underpinned by a clear theory of change: moving from a reactive, fragmented system to one that is proactive, inclusive and fully integrated.

Key inputs include strengthened partnership governance, embedded co-production with families, and a robust shared evidence base through the JSNA and data dashboards. Investment in workforce capacity, locality delivery models, Family Hubs and joint commissioning, supported by a sub-regional collaboration, provides the foundation for change. This is reinforced by a whole-system approach through the Families First Partnership Programme, neighbourhood working and integrated multi-disciplinary teams (MDTs), aligning education, health, social care and youth justice around the child and family. Shared thresholds, aligned front-door arrangements and common assessment frameworks reduce duplication and enable earlier intervention. A refreshed Ordinarily Available Provision (OAP), SEND Reform Plan and targeted pathways (e.g. SLCN, neurodevelopment) further drive consistency.

These inputs will produce outputs including consistent adoption of the graduated response across mainstream settings, more effective multi-agency pathways, improved EHCP timeliness and quality, reduced therapy waiting times, and stronger use of data to inform commissioning. Engagement and participation will also strengthen trust and co-production with families and wider stakeholders.

This will lead to outcomes where needs are identified earlier, reducing escalation and reliance on statutory plans. Mainstream inclusion will increase, with fewer out-of-area placements, improved attendance and reduced exclusions, alongside more consistent experiences for families. The long-term impact will be a sustainable, preventative SEND system that reduces inequalities, improves life outcomes, and delivers a responsive, trusted service while using resources more efficiently.

3. Please upload a completed copy of the Local Partnership Maturity Assessment Tool.

Please see Pink Column for our assessment of where we are as a Local Area Partnership.

TORBAY SEND & AP PARTNERSHIP SELF-ASSESSMENT

ASSESSMENT CONTEXT - please add any relevant information about how you have completed the tool, including any limiting factors in arriving at a shared assessment.

Initial meetings to coproduce the tool. This has led largely on the expansive coproduction work we completed as a partnership when we coproduced our Priority Impact plan; this was the result of surveys, workshops and meetings with children, young people, parents and carers and colleagues from the whole partnership.

STATUS - use this box for version control (e.g. DATE, v1.0) and to record any formal decisions/agreements about the assessment.

v1.0

Pillar 1: Co-production with parents and carers and children and young people

0 - NOT YET EMERGING	1 - EMERGING	2 - DEVELOPING	3 - MATURING	ASSESSMENT	DATE COMPLETED	STRENGTHS/SUCCESSES/IN PROGRESS	GAPS/ISSUES TO ADDRESS	FOCUS AREAS FOR IMPROVEMENT
Parental representatives are not involved in SEND and AP Partnership meetings. The Parent Carer Forum (PCF) is not formalised or in early stages, without wider parental representation evident. PCF Chair is not involved in SEND strategic partnership board meetings. Views of CYP and parents/carers not gathered. Very little evidence of the partnership engaging with parents/carers in co-production.	There is limited parental engagement in the SEND and AP partnership meetings. The area has a PCF that has a formalised structure but is not always supported to actively engage with local partners or is a recent newly formed forum. The PCF strategic leads of the local PCF do not regularly attend partnership board meetings and there is limited engagement. There is an awareness of the principles of co-production and parents, carers and children and young people are beginning to be involved in	The area has an active, effective, and sustainable PCF. Local SEND and AP youth forums or user groups are engaged with throughout planning and delivery. The partnership is developing practice to co-produce with parents and children and young people. Some aspects of service planning and review cycles actively seek input, but participation is not yet universal or embedded.	The area has an active PCF which meets regularly with the system partners. Strong feedback mechanisms ensure that children, young people and families know how their views influence decisions. There is strong evidence that their views shape services and outcomes. Co-production is a core feature of planning, delivery and review. Parents, carers and children and young people are equal partners, with clear and regular opportunities to influence strategic priorities, service design and quality	2 – DEVELOPING	3/18/2026	1) PCF Strategic Partner and actively attends and engages with partnership board meetings. 2) PCF have grown reach, well supported by Host PCF and host a number of initiatives across Local Area. 3) PCF meet regularly with system partners. 4) Area has a coproduction charter 5) Strong commitment to coproduce with young people and parents 5) Youth Forum and youth voice has grown and are beginning to be embedded across all areas 6) Summaries of Board meetings are provided video VLOGs, sharing of minutes and through social media and e-newsletters	1) Continue to support PCF to expand, grow and bring together a wider range of other SEND groups. 2) Continue the focus to embed Coproduction through our PIP to ensure coproduction becomes embedded at all levels. 3) Enable coproduction to be a core feature of all planning, delivery and review cycles. 4) Improve feedback mechanisms across all areas. 5) Wider range of opportunities and methods needed to encourage and support participation by parents, carers, children and young people 6) The range of current communication channels are being more widely used, but there needs to be	1) Coproduction is a key area in the Torbay PIP. This is being addressed via a recent coproduction event. The Area hopes to embed a framework for coproduction with support from the whole partnership and particularly through a SWRiia Grant. 2) A SWRiia Grant has enabled a family liaison role to support improved feedback and gathering of views for 2026/7. 3) Secure funding and support to continue the growth of the PCF. 4) Genuine Partnerships and CDC have been commissioned to support the collaboration with other parent groups.

	discussions about services. The partnership is beginning to engage with parents/carers but a clear approach of co-production has not yet been fully embedded as best practice. Relations with families / PCF are not entirely positive and key groups of parents are vocal in their concerns.		assurance. The partnership has embedded practices to co-produce with parents and children and young people.				further work to identify further channels in order to reach the right people, at the right time, in the right way	
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Pillar 2: Effective system leadership and governance

0 - NOT YET EMERGING	1 - EMERGING	2 - DEVELOPING	3 - MATURING	ASSESSMENT	DATE COMPLETED	STRENGTHS/SUCCESSES/IN PROGRESS	GAPS/ISSUES TO ADDRESS	PRIORITIES & SUPPORT NEEDS
Key leaders lack requisite knowledge and skills, either with vacant posts or with interim staff, resulting in ineffective practice. Local governance structures are not fully established and local partners are unclear where and how decisions are made about SEND and AP provision and services. No clear communication strategy and limited sharing of data	Leaders are in place and starting to influence strategic direction and build partnerships. Partners are working with initial governance structures and developing clarity on where strategic decisions are made. Opportunities exist to further engage stakeholders in operational and strategic planning. Communication is identified as an area for improvement. Accountability is supported by existing processes and compliance measures. The partnership is	Leaders have developed structures and forums for decision-making which are established and increasingly understood, with partners contributing meaningfully to discussions. Feedback pathways between operational and strategic levels are being implemented. Communication channels exist but need strengthening in parts of the system. An outcomes-based approach is developing, with agreed shared	Leadership is effective, and well-defined and embedded governance ensures decisions are collectively made at appropriate levels. All partners have clarity on their roles and can easily influence both operational and strategic planning. Processes are continually reviewed for improvement. Commissioning is well understood and integrated across the partnership. Robust, transparent systems for measuring and	2 – DEVELOPING	3/18/2026	1) New SEND local area improvement board, excellent engagement from all agencies. 2) Feedback pathways are improved and embedded to be escalated to the SLAIP through known escalation channels. 3) A new partnership data dashboard exists and is being utilised as well as a new refreshed JSNA - new methods to utilise this information for better outcomes have initialised. 4) Feedback is regularly discussed at Board with open and transparent discussions about areas of challenge.	1) Communications to our families. 2) Embed our use of data by closing this loop into our partnership planning processes	1) A Communications Strategy has recently been enacted in our partnership to ensure our families are hearing about improvements in a way which suits them. 2) A new Data and QA Board has been created to deep dive into all local area data to ensure strengthened outcome measuring.

performance measures.	focused on strengthening outcome measures and building shared understanding of system performance.	outcomes and initial steps to use data for evaluation. Partners are starting to communicate openly about progress, and feedback is more routinely discussed.	reporting outcomes are fully embedded. Success is judged by impact on CYP and families, and services are continually improved in response to honest evaluations involving all partners. Decision-making is both aspirational and innovative.					
<i>Pillar 3: Accurate understanding of needs and experiences of children and young people through effective use of quantitative and qualitative data</i>								
0 - NOT YET EMERGING	1 - EMERGING	2 - DEVELOPING	3 - MATURING	ASSESSMENT	DATE COMPLETED	STRENGTHS/SUCCESSES/IN PROGRESS	GAPS/ISSUES TO ADDRESS	PRIORITIES & SUPPORT NEEDS

<p>There is limited evidence of using data effectively to inform commissioning of services based on the needs profile of children in the local area. Data analysis is simple and descriptive. Qualitative data is not collected. The LA Self Evaluation does not accurately reflect provision and / or is incomplete, or has not been shared.</p>	<p>Data gathering methods are being established or updated and provide an initial understanding of needs and gaps. Planning is supported by available quantitative data, with opportunities to develop more comprehensive use of family and CYP perspectives. Commissioning is underway within each sector, with some early cross-agency conversations. Providers are engaged with current sufficiency, and there is scope for increasing dialogue and alignment to proactively meet future needs.</p>	<p>Partners collaborate to gather both quantitative and qualitative evidence of needs. There is a growing sophistication in analysing current provision against future demand, and plans are underway to address identified weaknesses and gaps. Partners are working together more actively, consulting providers and starting to coordinate commissioning processes. Efforts are made to co-produce solutions across agencies, with some shared ownership and responsibility.</p>	<p>A robust and comprehensive evidence base underpins strategic planning. Rich quantitative and qualitative data is routinely collected, shared, and used to monitor trends and inform sufficiency planning. Joint commissioning across the partnership ensures that services are in place to meet the range of needs and achieve positive outcomes for CYP with SEND.</p>	<p>1 – EMERGING</p>	<p>3/18/2026</p>	<p>1) New local area data dashboard 2) New JSNA 3) New events to analyse JSNA and new Commissioning multiagency meeting to enact data into commissioning as a partnership. 4) Improved qualitative data starting to routinely be gathered 5) Starting to develop partnership methods to coproduce solutions e.g NDPP, Locality Pilot, Belonging By Design</p>	<p>1) Continue with integration of whole partnership to utilise data to project future needs/provisions. 2) Use of qualitative data becomes completely embedded 3) Our cycle of data collection-analysis-action becomes embedded partnership wide. 4) The SEND Local Offer needs to be reviewed to ensure that it is up-to-date and legally compliant 5) Embed a consistent method of measuring impact of the services commissioned to ensure services continue to meet need, or be amended/developed in line with the needs of the children and young people.</p>	<p>1) Embed our data dashboard and analysis routinely into our governance cycles 2) Embed our joint commissioning processes 3) Develop a PowerBi data dashboard for the whole partnership in the long term.</p>
<p>Pillar 4: High quality service delivery at universal, targeted and specialist levels to promote inclusion</p>								
<p>0 - NOT YET EMERGING</p>	<p>1 - EMERGING</p>	<p>2 - DEVELOPING</p>	<p>3 - MATURING</p>	<p>ASSESSMENT</p>	<p>DATE COMPLETED</p>	<p>STRENGTHS/SUCCESSSES/IN PROGRESS</p>	<p>GAPS/ISSUES TO ADDRESS</p>	<p>PRIORITIES & SUPPORT NEEDS</p>

<p>No consistent guidance or support for schools to identify needs; inclusive practices are minimal and fragmented. Limited or no targeted interventions in place; AP is poorly integrated and rarely considered as part of the continuum of support. Statutory decision-making is inconsistent and delayed; quality assurance processes are absent or ineffective; specialist provision planning is reactive rather than strategic.</p>	<p>There is some guidance and support in place to support schools in identifying needs, but provision is inconsistent and AP is not well integrated. Schools and settings are beginning to expand their offer for CYP with SEND, but it remains largely focused on statutory responsibilities. Statutory decision-making is inconsistent and often delayed, SEND sufficiency planning is in development and looking at future projections but provision not able to meet demand.</p>	<p>Support services are developing; schools and settings are improving in identifying needs and accessing provision, including AP, evidenced in improving outcomes for CYP with SEND. Schools and settings are broadening their provision and starting to embed inclusive practices, with growing use of AP, and reducing requests for specialist provision. Processes are becoming more consistent and timely, with evidence of quality assurance and improvement. There is a strategic SEND sufficiency plan in place but recognition of some challenges in implementation.</p>	<p>There are effective arrangements and services in place to support schools and settings to identify needs and put in place appropriate provision, including Alternative Provision, evidenced in positive outcomes for CYP with SEND. Schools and settings are delivering a broad offer for all children and young people with SEND (beyond solely statutory responsibilities) that enables inclusive practice across the system, including Alternative Provision, and a higher% of CYP with EHCPs in mainstream. Decision-making and practice relating to statutory decisions is consistent and timely. SEND sufficiency planning is strategic and partners have confidence in the system's capacity to meet needs for the majority of children.</p>	<p>1 – EMERGING</p>	<p>3/18/2026</p>	<p>1) Our quality assurance processes are embedded and are making a significant impact on quality of EHCPs. 2) Graduated Response toolkits are detailed and coproduced with parents and carers to be holistic tools for support. 3) SEND Sufficiency planning is in development but constraints through the Safety Valve programme means that although sufficiency is much improved some provision cannot meet demands. 4) New ASC special school will go some way to meet needs from Sep26. 5) Commissioned outreach support from SPT (Belonging By Design) supporting mainstream schools to strengthen Universal and targeted provision (in progress) 6)CDC facilitated OAP workshops to develop a consistent and agreed OAP/Universal offer across all schools (in progress) We now not only have a QA safeguarding framework in place for AP but also a Impact and outcome assessment framework in place. This provides a list of approved providers which schools can commission.</p>	<p>1) A consistent delivery of a universal/OAP offer for all children and young people 2) An Experts at Hand universal offer which supports this delivery 3) Sufficiency improves to meet gaps 4) Coproduced Sufficiency Strategy for SEND is developed. This will include an AP impact framework to assure ourselves of the impact for the young people using the provision. Our next step is to work with schools to ensure we are capturing the impact and outcomes of the provision they are directly commissioning.</p>	<p>1) ASC special school delivery by Sep26. 2) OAP coproduced, launched and delivered, with monitoring which shows a consistent offer is available for all. 3) Long term sufficiency of key areas of need is improved.</p>
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Pillar 5: Effective Partnership working across education, health and social care

0 - NOT YET EMERGING	1 - EMERGING	2 - DEVELOPING	3 - MATURING	ASSESSMENT	DATE COMPLETED	STRENGTHS/SUCCESSES/IN PROGRESS	GAPS/ISSUES TO ADDRESS	PRIORITIES & SUPPORT NEEDS
<p>Education Providers: Limited evidence of joint planning or collaboration. Schools generally operate in isolation with no shared inclusion strategies. Engagement with local authority is minimal.</p>	<p>Education Providers: All school types are involved in some way and contribute to the local offer, with engagement variable but developing across providers. Collaborative planning processes and networks are being strengthened, and schools are starting to partner with the LA on inclusion strategies.</p>	<p>Education Providers: All settings, including AP, post-16, and early years settings, are represented and most take part in partnership work, with regular consultation on inclusion. Joint processes for planning and provision are developing. Fair access protocols show improving outcomes and growing confidence. SENCO and leader networks are forming, and shared responsibility for inclusion is growing.</p>	<p>Education Providers: All providers are fully represented and actively engage in strategic planning, sharing updates with their settings. Evidence shows collaborative work improves planning, transitions, and inclusion. Fair access protocols are trusted and effective. Strong networks enable clusters of schools to commission, support, and respond to needs.</p>	<p>1 – EMERGING</p>	<p>3/18/2026</p>	<p>1) Improved engagement and attendance of school colleagues at all levels of SEND improvement. 2) Planning processes are being strengthened throughout the partnership. 3) Partnership work with APs under the new EOTAS Programme is developing and evidencing the impact this collaboration has on the children and their families.</p>	<p>1) Gain better consistency by addressing schools who do not engage with the improvement work. 2) Recent improved collaboration and communication at SENDCo Forum is evident. 3) Fair Access protocols are being developed.</p>	<p>1) Embed the new support offers with SENDCos and engage all.</p>

<p>Health Services: No established communication or referral pathways between education and health. Health partners are not providing evidence of awareness of SEND responsibilities participating in planning. There is very little data sharing to inform commissioning.</p>	<p>Health Services: Education providers are aware of relevant NHS services and how to signpost or refer to them, with at least limited contact between education and health partners. Understanding of ICB SEND roles is developing, setting the stage for stronger partnerships and health is seeking to understand more about needs from education.</p>	<p>Health Services: Positive working relationships with NHS and hospital AP are developing, and strategic engagement is increasing. Health providers are aware of designated ICB leads and the executive SEND lead, but board engagement is still limited. Inspections highlight need for further improvement.</p>	<p>Health Services: Partnerships with health are strong and joint commissioning is routine, with clear feedback and resource sharing. Lines of communication with ICB and NHS including health providers are well-established. Inspection reports confirm effective collaboration.</p>	<p>2 – DEVELOPING</p>	<p>3/18/2026</p>	<p>1) Health is a strategic partner in the SEND partnership: Health providers are a more consistent and visible part of the partnership, contributing actively to strategic boards, workstreams and key improvement activity. Impact: More aligned decision-making and clearer shared ownership of SEND improvement.</p> <p>2) Improved pathways and multidisciplinary working: Emotional wellbeing, neurodevelopmental and early-years communication pathways have strengthened, with better alignment between health and education, expanded multidisciplinary assessments and some reductions in waiting times. Impact: Faster, more coordinated responses for children and families.</p> <p>3) Greater health input in early help: Health services are further developing our needs led offer and increasingly contributing to early-help offers, providing earlier support for emotional and developmental needs. Impact: Earlier identification and intervention, reducing escalation and unmet need.</p>	<p>1) Further collaboration between health practitioners and education settings could be strengthened to improve awareness of services and needs led support across the full partnership</p>	<p>1) strengthen joint commissioning and feedback loops: Improved commissioning arrangements and more effective feedback mechanisms are needed to ensure health intelligence consistently informs both strategic and operational planning. Impact: More coherent decision-making and better alignment of resources across the system.</p> <p>2) Increasing health involvement in inclusion and attendance work: Greater participation from health services in inclusion, attendance and reintegration activity—particularly for children with complex needs—will strengthen coordination and improve outcomes. Impact: More timely, holistic support and improved continuity for children with additional needs.</p>
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<p>Social Care/Local Authority: No evidence of strategic collaboration with education or health. Providers do not access local care offers. Early intervention models are not in place. There is very little data sharing to inform commissioning.</p>	<p>Social Care / Local Authority: Providers access the local care offer and engage with care teams for individual CYP needs. Strategic collaboration is starting, and the LA is initiating work on early intervention models, such as Families First reforms.</p>	<p>Social Care / Local Authority: Positive working relationships with LA care teams and managers are emerging. Designated social care officer helps embed care priorities. The LA is embedding Family Help and child protection reforms, and strategic coordination is improving.</p>	<p>Social Care / Local Authority: Strong, embedded relationships between education, health and care ensure joint planning and resource sharing. FFP and multi-agency reforms are routine. Children and families receive early support, and joint commissioning is mature.</p>	<p>2 – DEVELOPING</p>	<p>3/18/2026</p>	<p>ILACS inspection recently commented on effective multiagency working and delivery of Family First. 2) DSCO has DSC been working across multi agency partners to improve transition pathways between adults and children services. DSCO works with health in respect of Dynamic support register to improve the risk assessments. DSCO is working with SC in respect of accessing additional needs service at point of request for ECH assessment, DSCO is part of the team around the school meeting. At the point of the EHC assessment the DSCO calls the families and following discussions may offer a social care or EH referral, and also signposts to the family hubs.</p>	<p>1) Develop the collaboration with education and health already started through the Family First Programme.</p>	<p>1) Deliver the recently started locality hubs for improved multi-agency collaboration. 2) Further the work to base locality hubs in schools. 3) Strengthen joint commissioning and align partnership across SEND, FFP, Neighbourhood development and CYP INT MDT</p>
<p>Pillar 6: Skilled and organised workforce across local authority, education settings, health and social care</p>								
<p>NOT YET EMERGING</p>	<p>1 - EMERGING</p>	<p>2 - DEVELOPING</p>	<p>3 - MATURING</p>	<p>ASSESSMENT</p>	<p>DATE COMPLETED</p>	<p>STRENGTHS/SUCCESSES/IN PROGRESS</p>	<p>GAPS/ISSUES TO ADDRESS</p>	<p>PRIORITIES & SUPPORT NEEDS</p>

<p>No structured training or development plan for SEND across education, health, and social care. Many staff lack confidence and skills to effectively deliver support for CYP with SEND. No recognition of the need for coordinated training to share best practice.</p>	<p>Some education settings are beginning to build awareness and skills to support children with SEND, with early-stage training and resource development underway. There is initial recognition of the need for coordinated training across health, education, and social care. Early efforts are being made to identify best practices and include lived experiences.</p>	<p>The LA workforce accesses structured training and support. Supervision practices are being strengthened, leading to improved consistency in decision-making and casework quality. Education settings are developing the skills and confidence to meet the needs of children with SEND, supported by more coordinated training and guidance. Training and development across the SEND system is becoming more proactive and collaborative, with increasing integration of best practice and lived experience into professional learning.</p>	<p>The LA workforce is well-trained, regularly updated, and appropriately supported, managed and supervised. Wider workforce across education settings is skilled in meeting the needs of children with SEND. There is pro-active shaping of training and development of all practitioners in the local SEND system, including health and social care, to ensure there is a broad understanding of best practice, incorporating lived experiences into practitioners' professional development.</p>	<p>1 – EMERGING</p>	<p>3/18/2026</p>	<p>1) The LA workforce accesses structured training and support. Supervision practices are being strengthened, leading to improved consistency in decision-making and casework quality. All LA SEND officers have gained their L4 casework qualification in the last 12 months. They have a structured route to professional development and supervision is embedded. DSCO has developed a training package for children's social care, education and SEND officers in respect of role of children services in respect of SEND.</p>	<p>1) Educational settings need a structured training offer. 2) Coordinated training is required across the partnership.</p>	<p>1) The Experts at Hand offer will be developed as a partnership offer of training and support with a focus on workforce capacity and capability</p>
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Pillar 7: Targeted and judicious use of resources including place planning, sufficiency and use of capital

0 - NOT YET EMERGING	1 - EMERGING	2 - DEVELOPING	3 - MATURING	ASSESSMENT	DATE COMPLETED	STRENGTHS/SUCCESSES/IN PROGRESS	GAPS/ISSUES TO ADDRESS	PRIORITIES & SUPPORT NEEDS
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<p>No clear strategy for sufficiency or place planning and capital projects lack alignment with needs. Review and evaluation processes are absent, or extremely limited and stakeholder input is not systematically gathered. The Local SEND Reform Plan is incomplete or missing and there are no clear mitigating actions to ensure efficient use of resources or value for money.</p>	<p>Review and evaluation processes are being used periodically, and stakeholder input informs some service adjustments. Processes for regular monitoring and service improvement are taking shape. The Local SEND Reform Plan provides limited information on mitigating actions to improve the efficient use of resources and secure value for money.</p>	<p>Regular reviews are taking place, drawing on broader stakeholder input including schools, families, and young people. Performance is benchmarked against other areas and findings inform targeted improvement plans. The Local SEND Reform Plan provides evidence of efficient use of resources and value for money.</p>	<p>Comprehensive, ongoing monitoring using multiple sources of data and qualitative insights drives continuous improvement. Deep dives into specific issues lead to strategic changes, and effective benchmarking ensures consistent progress toward the best outcomes. There is clear evidence of efficient use of resources and a focus on value for money.</p>	<p>1 – EMERGING</p>	<p>3/18/2026</p>	<p>1) £1mill capital grants have improved accessibility for CYP in the last year - this was a targeted project on our highest area of need. 2) Place planning is improved with a new forecasting system of need being developed.3) Detailed oversight of place planning at upper levels, ensuring the 'best use of resources' is achieved - this has included the development of 'bespoke' offers in every special school to ensure that complex needs can be met locally without the need for expensive independent sector placements - Torbay is one of the lowest users of ISEP placements in the region. 4) Measures on placement sufficiency have been met through the Safety Valve Programme for the last 3 years.</p>	<p>1) A more holistic review and planning process with partners needs to be developed. 2) Local SEND Reform Plan is to be created.</p>	<p>1) A more holistic review and planning process with partners needs to be developed. 2) Local SEND Reform Plan is to be created.</p>
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4. What is the local area partnership roadmap for the next 3 years?

Year 1 (2026/27) – <i>Foundation & Alignment</i>	Year 2 (2027/28) – <i>Scaling & Systemisation</i>	Year 3 (2028/29) – <i>Embedded & High-Performing</i>
Building Block 1. Strengthening Inclusion Across Education Settings		
<p>Milestones</p> <ul style="list-style-type: none"> • Governance reforms embedded (SLAIP) • Locality pilots launched • Experts at Hand (EAH) introduced • ERP sufficiency review completed • LA–MAT collaboration begins • Mapping of sufficiency pressures • £1.1m mainstream SEND environment investment • Surplus capacity/falling rolls identified • EOTAS framework introduced • Post-16 pathways launched • Travel impact baseline established 	<p>Milestones</p> <ul style="list-style-type: none"> • Locality “families of schools” fully embedded • Universal SEND offer consistent across settings • EAH expanded • ERP capacity expanded (primary, SEMH, ASC) • Formal LA–MAT co-planning framework • Inclusion bases delivered via repurposed estate • Standardised quality frameworks • Clear mainstream–specialist pathways • EOTAS fully embedded • Travel impact assessment standardised 	<p>Milestones</p> <ul style="list-style-type: none"> • Universal inclusive practice fully embedded • Comprehensive local provision network (ERP, SEMH, ASC) • EAH embedded across all settings • Mature LA–MAT co-planning model • Optimised estate with minimal unused capacity • Inclusion bases aligned to demographic need • Travel considerations embedded in all planning • Specialist provision used only where evidenced • Strong specialist outreach • Continuous improvement cycle
<p>Success measures</p> <ul style="list-style-type: none"> • Engagement in locality pilots & ERP planning • Increased staff training & early intervention uptake • Clearer estate opportunities & sufficiency mapping • Baseline EHCP and crisis-placement trends 	<p>Success measures</p> <ul style="list-style-type: none"> • More EHCP pupils in mainstream • Better balance of specialist provision • Higher ERP utilisation & reduced waits • More pupils supported at SEN Support • Fewer out-of-area placements & reduced travel demand 	<p>Success measures</p> <ul style="list-style-type: none"> • High mainstream inclusion & stable ERP demand • Stronger JSNA alignment • Improved attendance for pupils with SEN • Reduced reliance on specialist/independent placements

	<ul style="list-style-type: none"> • Stronger MAT participation & alignment of need/provision • Faster specialist access & improved attainment 	<ul style="list-style-type: none"> • Consistent provision across localities • Faster specialist access & improved outcomes
Year 1 (2026/27) – Foundation & Alignment	Year 2 (2027/28) – Scaling & Systemisation	Year 3 (2028/29) – Embedded & High-Performing

Building Block 2. Access to Specialist Support & Local Placements (EAH & AP)

<p>Milestones</p> <ul style="list-style-type: none"> • EAH model launched • Defined roles across LA, ICB, education, Family Hubs • JSNA used to identify gaps • Early co-production • Initial SLA/MOU development • Pathways mapped (health, education, early help) • AP sufficiency challenges identified • SEMH locality pilot • Early workforce capacity improvements (EPS, SALT, OT) • Strengthened SENDIASS • Early steps to ensure equitable access 	<p>Milestones</p> <ul style="list-style-type: none"> • Fully agreed EAH delivery model • Formal SLAs/MOUs across partners • Partnership Pathway Map rolled out • EAH integrated with SEND, health, early help • AP recommissioned into 3-tier model • Expansion of registered AP capacity • Reduced unregistered AP use • Strengthened workforce capacity • Consistent triage and referral thresholds • Locality model embedded • Structured performance framework introduced 	<p>Milestones</p> <ul style="list-style-type: none"> • Fully embedded EAH system • Seamless integration across education, health, early help • Mature partnership governance • Fully implemented pathway infrastructure • AP system operating as preventative, tiered model • Sufficient specialist workforce aligned to demand • Locality-based equitable access • SENDIASS fully independent and embedded • Continuous improvement cycle
<p>Success measures</p> <ul style="list-style-type: none"> • Strong partner engagement in EAH design • More early advice requests • Consistent use of mapped pathways • Baseline waits for EPS/SALT/OT 	<p>Success measures</p> <ul style="list-style-type: none"> • Reduced waits for specialist services • Increased access to EP/SALT/OT in mainstream • Higher utilisation of EAH & pathway map 	<p>Success measures</p> <ul style="list-style-type: none"> • High utilisation of EAH & pathways • Stable specialist workforce • Reduced AP demand & transport pressures • Consistent performance reporting

<ul style="list-style-type: none"> • Baseline AP demand (capacity, exclusions, unregistered use) • Early coordination improvements & better system navigation 	<ul style="list-style-type: none"> • More partners under formal agreements • Reduced unregistered AP use & more reintegration • More equitable access across localities 	<ul style="list-style-type: none"> • Positive co-production feedback <ul style="list-style-type: none"> • Fewer complaints, disputes & tribunals
<p>Year 1 (2026/27) – Foundation & Alignment</p>	<p>Year 2 (2027/28) – Scaling & Systemisation</p>	<p>Year 3 (2028/29) – Embedded & High-Performing</p>
<p>Building Block 3. System Leadership, Partnership Collaboration & Co-Production</p>		
<p>Milestones</p> <ul style="list-style-type: none"> • Early co-development of Universal Offer • Identification of variation in practice • Initial engagement structures (MATs, PCF, CYP) • Family Liaison role introduced • Co-production strategy agreed • Early rollout of EAH for early intervention • SLAIP governance structures in place • Locality pilot development • SENDIASS expansion and baseline governance • Early Years & Post-16 pathway frameworks • Initial strategic commissioning alignment 	<p>Milestones</p> <ul style="list-style-type: none"> • Universal Offer finalised and implemented • National Inclusion Standards embedded • Routine structured engagement with MATs, PCF, CYP • “You Said / We Did” introduced • Co-production benchmark adopted • EAH expanded across all localities • “Families of schools” model established • • Locality Profiles of Need developed • Scaled training and evidence-based interventions • Emerging Leaders of SEND network 	<p>Milestones</p> <ul style="list-style-type: none"> • Universal Offer fully embedded (0–25) • Consistent high-quality inclusive practice • Co-production fully embedded and representative • “You Said / We Did” fully operational • EAH fully operational as early intervention model • Locality model fully embedded and data-driven • Workforce confident and delivering evidence-based practice • Leaders of SEND network driving improvement
<p>Success Measures</p> <ul style="list-style-type: none"> • Earlier identification of need • Strong partner engagement & co-production 	<p>Success Measures</p> <ul style="list-style-type: none"> • Universal Offer widely used 	<p>Success Measures</p> <ul style="list-style-type: none"> • High consistency in inclusive practice • Strong uptake of Universal Offer

<ul style="list-style-type: none"> • Draft Universal Offer developed • Increased early intervention • Baseline SENDIASS access & pathway clarity feedback • Workforce confidence baseline 	<ul style="list-style-type: none"> • More consistent SEND practice across settings • Growth in locality collaboration • Increased early intervention & fewer repeat referrals • Co-production embedded & participation sustained • Workforce confidence improving 	<ul style="list-style-type: none"> • Increase in needs met without escalation • Reductions in EHCP assessments, specialist referrals & out-of-area placements • High family/CYP satisfaction • Strong workforce retention & confidence • • Co-production fully embedded
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Building Block 4. Encouraging Inclusive Culture & Behaviours

<p>Milestones</p> <p>Establish shared partnership leadership & governance</p> <p>Ensure representation from early years, schools, MATs, FE</p> <ul style="list-style-type: none"> • Begin development of shared data dashboards • Partnership maturity matrix introduced • Early work on shared accountability and expectations 	<p>Milestones</p> <ul style="list-style-type: none"> • Strengthened partnership governance • Shared dashboards used routinely • Increased alignment of behaviours and expectations • Consistent partnership engagement across all settings 	<p>Milestones</p> <ul style="list-style-type: none"> • Mature, self-sustaining inclusive culture • High-quality shared data driving behaviour • Strong cross-system accountability • Embedded inclusive behaviours across all settings
<p>Success Measures</p> <ul style="list-style-type: none"> • Early use of shared dashboards • Broad engagement across settings • Baseline partnership maturity assessment 	<p>Success Measures</p> <ul style="list-style-type: none"> • Increased use of shared data • Stronger partnership consistency • Clearer alignment of expectations & behaviours 	<p>Success Measures</p> <ul style="list-style-type: none"> • Shared data driving behaviour change • Mature cross-system accountability • Consistent inclusive behaviours across settings

5. What will the local area partnership deliver in the first year?

The 2026–27 SEND Local Delivery Plan sets out a comprehensive first-year programme structured across four building blocks, focused on improving inclusion, early intervention, sufficiency, and system leadership.

In Building Block 1, the priority is strengthening inclusion across education settings. Key outcomes include implementing the Ordinarily Available Provision (OAP) in all schools, expanding specialist capacity through ERPs and inclusion bases, and improving access to tailored pathways. Early milestones focus on co-production, feasibility, and governance, moving to full implementation and system-wide consistency by Q4. Alongside this, improved transport planning and travel training aim to reduce costs and increase independence.

Building Block 2 focuses on improving access to specialist support and reducing reliance on independent placements. The Experts at Hand (EAH) model is introduced and scaled, alongside embedding a consistent graduated response across settings. The programme also prioritises increasing local capacity, strengthening ASC provision, and improving placement decision-making through locality-based approaches. By the end of the year, there is expected to be reduced escalation to statutory assessment and more children supported locally.

Building Block 3 strengthens early intervention, participation, and system quality. A consistent Universal Offer and Early Intervention Framework are developed, with a strong emphasis on earlier identification of need. Participation and co-production are embedded through structured feedback loops (“You said, we did”), alongside improved pathways for post-16 and preparation for adulthood. System leadership and commissioning are increasingly data-led, transparent, and collaborative.

Building Block 4 underpins delivery through stronger governance, shared data, and leadership. A refreshed SLAIP structure, a single shared dataset, and embedded lived experience ensure more effective decision-making and accountability.

Overall, Q2 focuses on design and co-production, Q3 on implementation, and Q4 on embedding and demonstrating impact, with clear progress toward a more inclusive, efficient, and responsive SEND system.

6. How will the local area partnership deliver the first-year plan?

The local partnership will deliver its first-year SEND Reform Plan through strong programme infrastructure, clear governance, and enhanced organisational capacity across corporate functions to support effective implementation.

Delivery will be led by an experienced, full-time Programme Manager, currently overseeing the Priority Impact Plan, ensuring continuity as this transitions into a single, aligned SEND Reform Plan from September. This provides established programme discipline, clear accountability and a strong delivery foundation. Additional targeted project support will be deployed where required, particularly for significant transformation activity such as the Experts at Hand Offer, ensuring key programmes are effectively mobilised and delivered.

Governance arrangements will be refreshed to strengthen strategic oversight, focusing on delivery against milestones, robust performance management and value for money. This will be supported by strengthened corporate functions, including finance, commissioning and performance, to ensure effective planning, monitoring and resource alignment. HR capacity will be critical in scaling the workforce required to deliver reform priorities, particularly the expansion of the Experts at Hand model, ensuring timely recruitment, retention and workforce development.

A key enabler will be the development of system-wide data and analytical capability. Devon, Torbay and Plymouth, are currently exploring the potential of collaborative approaches to improving data quality, statutory returns, and provide actionable insights to drive decision-making and address inequalities.

Further considerations are being given to commissioning arrangements, across wider partnerships, to embed SEND within contracts, and ensure coherence with Family Hubs, Families First and MDT delivery models.

A dedicated lead officer will also support capital planning and sufficiency, ensuring the system has the right provision in the right place.

Together, these enablers will ensure the partnership has the capability, capacity and infrastructure required to deliver impactful and sustainable reform in year one.

7. Other funding **Local Authorities**.

Block Transfers: If you have made a block transfer (Schools Block to High Needs Block) for 26-27, please set out how your plans for this funding align with the activities outlined above.

Torbay is not proceeding with a Schools Block to High Needs Block transfer for 2026–27.

This decision was formally agreed by Torbay Schools Forum following detailed consideration of financial impact and affordability.

Capital: We have announced at least £3 billion in high needs capital between 2026-27 and 2029-30 to support children and young people (CYP) with SEND, or those requiring alternative provision (AP).

We also welcome innovative uses of high needs capital to drive inclusion, for example, investment in assistive technology for use in mainstream settings.

Over the last 4 years, Torbay LA has been investing in SEND provision through large, targeted capital projects that have increased capacity in special schools and ERPs. Major capital projects have included the re-provision of the STEPs provision at Paignton Academy and enhancements to their in-house SEND offer; the expansion of Mayfield School by 25 places; the expansion of Mayfield Chestnut and Sixth Day provision; the relocation of Mayfield Sixth Form College to support expansion; improvements to The Harbour at Brixham College; and the Prosper and Supported Internship provisions at Brunel Academy.

Part of the Council's strategy has also been to allocate capital funding to mainstream schools across the Bay to enhance their in-house provision. The Council has allocated £1m from the HNPCA grant to support a Locality Model to include all schools and form locality Clusters for our three grammar schools and all Post 16 providers. The locality model focuses on the concepts of 'predictable' and 'exceptional' SEND, as well as 'Ordinarily Available Provision' within each cluster. All schools were able to bid for Locality funding to develop new or enhance existing in-house SEND provision. Projects ranged from providing sensory spaces and sensory gardens to the re-purposing of surplus accommodation to SEND provision.

The next phase of Torbay's SEND Capital Plan 2026-2030 will focus on delivering the re-designation of Combe Pafford School; the establishment of 3 primary ERPs in Torquay and Paignton; additional secondary SEMH provision and further development of The Nest at South Devon College.

The accommodation analysis for the primary ERPs will start with a review of any surplus accommodation resulting from falling rolls. This review will be mindful of ensuring that provision will be sustainable even when primary numbers recover.

The SEND Capital Plan will be managed through a Project Board reporting to the Council's Capital and Growth Board and the Children's Services Transformation Board. The Project Board will include officers from Children's Services, Finance, Procurement and Planning to ensure that capital projects are managed effectively and deliver value for money.

Key responsibilities of the SEND Capital Project Board will be:

- Strategic Planning and Portfolio Management:
- Scope Definition and Feasibility:
- Stakeholder Engagement:
- Risk Management:
- Execution and Monitoring:
- *Governance and Compliance:*
- *Closeout and Evaluation:*

8. System partner and stakeholder engagement, and co-production.

Our Partnership Engagement Day, Education Conference and workshops to date have informed the development of this plan. These events have been attended by children and young people, parent carers and practitioners from across health, education, social care and the voluntary and community sector. Key messages highlighted the importance of early help, prevention and clear pathways; the critical role of workforce capacity and confidence; and the need for flexible, personalised support, including accessible alternative provision. Our local area partnership will adopt a structured, inclusive and transparent approach to engaging system partners and stakeholders in both the development and implementation of the SEND Reform Plan. This approach is aligned with the Genuine Partnerships Four Cornerstones (co-production, communication, valuing participation and working together) and supports Pillars 1, 2, 3 and 5 of the SEND maturity matrix.

Engagement will be ongoing, inclusive and impact-focused, underpinned by early involvement, accessible communication and clear feedback loops. A refreshed SEND Communications Strategy provides a framework for delivering the right information, at the right time, through the right channels, recognising communication as both a strategic and cultural priority.

A "network of networks" approach will ensure information reaches families through trusted routes, including schools, early years settings and community networks. This is strengthened through Your Voice in Action, our partnership-wide framework demonstrating how feedback

leads to change. Feedback will be systematically gathered, analysed and used to inform decisions, with impact shared through newsletters, digital platforms, quarterly partnership summaries and an annual Local Offer report.

Engagement with Education Partners

We will build on established engagement structures to involve education partners in both development and delivery, including:

- Half-termly school leader briefings and video updates
- SENDCo forums, briefings and newsletters
- Schools Forum, Early Years Forum, STASS (Strategic Group for Special School Heads), LEIB and TAPHs locality groups
- RISE workstreams linked to education strategy and workforce development
- Torbay Education Conference

These mechanisms support collaborative development of inclusive practice, early intervention and place-based working.

Engagement with alternative provision, FE and post-16 providers, including those outside the local area, will be delivered through provider networks, commissioning relationships and structured transition processes, ensuring their involvement in pathway design and delivery, inclusion in locality forums and targeted workshops to improve understanding, access and pathways.

Engagement with Children, Young People and Families

Co-production is central and will include:

- SEND Family Voice Torbay (Parent Carer Forum) through forums and co-production activity
- SEND Youth Forum and engagement within education settings
- SEND Pledge workshops across schools and colleges
- Surveys to shape priorities, including the current communications survey
- Participation through community events (e.g. Fair Play Day)
- A Family Liaison role supporting engagement in school and community settings

To widen participation and ensure inclusivity, the partnership will:

- Provide non-digital engagement options, including face-to-face sessions, paper surveys and telephone engagement
- Offer accessible formats such as easy read, visual materials and translated information
- Hold engagement sessions in familiar community venues at flexible times
- Actively engage young people in post-16 and alternative provision settings
- Work with schools and partners to identify and engage families less likely to participate

This approach ensures engagement is meaningful, inclusive and sustained, enabling effective partnership working and improved outcomes for children and young people with SEND.

9. Risks and Mitigations

Risk	Impact	Likelihood	RAG	Mitigation	Residual RAG
<p>1. Insufficient Partner Engagement and System Alignment</p> <p>Risk: Education, health, and care partners do not consistently engage or align with reform priorities.</p>	<p>Impact Level: Critical</p> <p>a) Fragmented service delivery: Inconsistent multi-agency engagement leads to disjointed planning, with families navigating multiple uncoordinated pathways.</p> <p>b) Inconsistent implementation of reforms: Uneven partner buy-in results in variable adoption of SEND reforms and inequitable provision and outcomes. Reduced effectiveness of early intervention: Poor alignment delays identification and response, increasing reliance on specialist and statutory services.</p> <p>c) Pressure on statutory processes and resources: Misalignment increases demand for EHCPs and disputes, driving caseloads, delays, and backlogs.</p> <p>d) Diminished outcomes for children and young people: Lack of coordinated input reduces the effectiveness of support, impacting progress, wellbeing, and independence.</p> <p>e) Erosion of trust with families and stakeholders: Inconsistent messaging, duplication, and gaps in provision undermine confidence in the system. Inefficient use of funding: Weak shared priorities and commissioning lead to duplication, gaps, and poor value for money.</p> <p>f) Barriers to culture change: Limited engagement restricts progress toward inclusive practice and shared accountability.</p> <p>g) Difficulty meeting statutory duties and inspection expectations: Misalignment increases risk of non-compliance and adverse</p>	<p>Unlikely</p>	<p>RAG</p>	<p>a) Establish clear multi-agency governance Strengthen SEND Partnership Board with clear roles, authority, and accountability. Ensure senior representation with delegated decision-making powers.</p> <p>b) Agree and embed shared vision and priorities Co-produce a clear SEND strategy and plan with partners and families. Set measurable outcomes owned by all agencies.</p> <p>c) Formalise partnership commitments Develop MoUs outlining roles and expectations. Align organisational plans (ICS, LA, schools) to SEND priorities.</p> <p>d) Strengthen joint commissioning and resources Expand joint commissioning to reduce gaps and duplication. Align budgets to shared outcomes.</p> <p>e) Improve communication and engagement Establish regular strategic and operational forums. Provide clear, consistent messaging on reforms.</p> <p>f) Develop integrated working practices Promote multi-agency pathways, shared protocols, and integrated teams. Embed keyworker/lead professional roles.</p> <p>g) Build workforce capability and culture Deliver joint training on SEND, inclusion, and graduated response. Promote shared language and understanding.</p> <p>h) Use data for alignment and accountability Implement shared dashboards on outcomes, demand, and timeliness. Use data to challenge variation and drive improvement.</p> <p>i) Strengthen co-production with families and CYP Involve families and young people in design and review. Use feedback to improve services and build trust.</p> <p>j) Escalation and performance management Define escalation routes for disengagement. Link performance to governance and contractual levers.</p> <p>k) Phased implementation with pilots Test approaches locally before scaling. Use learning to refine and build confidence.</p>	<p>Impact: remains at critical</p> <p>Even with strong mitigations in place, the impact remains high because SEND reform depends on sustained multi-agency alignment. If engagement drops, consequences (e.g. poor outcomes for children, statutory pressures, inspection risk) are still significant.</p> <p>Likelihood: reduces to very unlikely</p> <p>With governance, shared accountability, and clear escalation in place, the likelihood reduces from high to medium. The risk is more controlled, but not eliminated due to:</p> <ul style="list-style-type: none"> • System complexity (multiple partners with different priorities) • Workforce pressures and turnover • External policy and funding changes

Risk	Impact	Likelihood	RAG	Mitigation	Residual RAG
<p>2. Limited Trust and Engagement from Children, Young People and Families</p> <p>Risk: If families and young people do not feel meaningfully involved, reforms may lack credibility and fail to address lived experience.</p>	<p>Impact Level: Critical</p> <p>a) Reforms lack credibility: Limited involvement reduces legitimacy and confidence in reforms.</p> <p>b) Poorly designed services: Lack of co-production leads to provision that does not meet needs or is hard to access.</p> <p>c) Reduced effectiveness of plans: EHCPs and support may not fully reflect needs and aspirations.</p> <p>d) Increased complaints and disputes: Low trust drives higher conflict, appeals, and system pressure.</p> <p>e) Erosion of trust: Ongoing disengagement undermines confidence in the SEND system.</p> <p>f) Worsening outcomes for CYP: Reduced engagement impacts participation, progress, wellbeing, and independence.</p> <p>g) Inequalities in voice and access: Underrepresented groups risk further marginalisation.</p> <p>h) Reduced uptake of early help: Lack of trust delays access to support, increasing escalation.</p> <p>i) Inspection and reputational risk: Weak co-production evidence risks negative Ofsted/CQC outcomes.</p> <p>j) Slower system improvement: Limited feedback reduces learning and adaptability.</p>	<p>Likely</p>	<p>Critical</p>	<p>a) Strengthen co-production Embed CYP and parent carers in design, delivery, and governance. Ensure influence is clear and evidenced.</p> <p>b) Improve communication and transparency Provide clear, accessible information on processes, decisions, and changes. Close the feedback loop (“you said, we did”).</p> <p>c) Enhance participation opportunities Offer varied, inclusive engagement routes (forums, surveys, outreach) to reach diverse groups.</p> <p>d) Build trusted relationships Invest in keyworker/lead practitioner roles and consistent points of contact for families.</p> <p>e) Target underrepresented groups Proactively engage seldom-heard communities to reduce inequalities in voice and access.</p> <p>f) Develop workforce skills Train staff in engagement, co-production, and person-centred practice.</p> <p>g) Use feedback to drive improvement Incorporate lived experience into service design, commissioning, and performance review.</p> <p>h) Strengthen complaints resolution and learning Improve early resolution processes and use learning from complaints and tribunals to improve practice.</p> <p>i) Align with participation standards and inspection Regularly review co-production against Ofsted/CQC expectations and local participation frameworks.</p> <p>j) Resource participation effectively Provide capacity and funding for parent carer forums, youth participation, and engagement activity.</p>	<p>Impact: remains at Critical</p> <p>Impact remains high as lack of trust would still significantly affect outcomes, demand, and system credibility.</p> <p>Likelihood: reduced to Possible</p> <p>Strong co-production, communication, and engagement reduce likelihood, but risks remain due to:</p> <ul style="list-style-type: none"> • Historical mistrust, • System pressures and delays, • Variable reach to all groups

Risk	Impact	Likelihood	RAG	Mitigation	Residual Risk
<p>3. Financial Pressure and Lack of Long-Term Sustainability</p> <p>Risk: High Needs funding pressures and demand growth may limit the ability to invest in early intervention and inclusive approaches that underpin SEND reform</p>	<p>Impact Level: <u>Critical</u></p> <p>a) Reduced investment in early intervention: Funding pressures limit preventative and inclusive support, increasing reliance on high-cost provision.</p> <p>b) Rising demand and system pressure: Lack of early help drives increased EHCP requests and service demand.</p> <p>c) Widening financial deficit: Ongoing overspends risk long-term financial instability.</p> <p>d) Restricted service development: Limited funding constrains innovation and capacity to expand provision.</p> <p>e) Inconsistent provision: Financial pressures may lead to rationing, variability, and reduced support.</p> <p>f) Workforce pressures: Budget constraints impact recruitment, retention, and service capacity.</p> <p>g) Increased costly placements: Greater reliance on independent and out-of-area provision raises costs.</p> <p>h) Reduced value for money: Reactive spending limits efficiency and investment in early help. Poorer outcomes for CYP: Delayed or reduced support affects progress, wellbeing, and independence.</p> <p>i) Risk to reform delivery: Financial constraints slow or limit implementation of SEND reforms.</p> <p>j) Reputational and inspection risk: Deficits and sustainability concerns increase external scrutiny.</p> <p>k) Strain on partnerships: Financial pressure can weaken collaboration and joint decision-making.</p>	<p><u>Possible</u></p>	<p style="background-color: yellow;"> </p> <p style="background-color: orange;"> </p> <p style="background-color: red;"> </p>	<p>a) Strengthen financial governance and oversight Implement robust High Needs Block monitoring, forecasting, and regular reporting through governance boards.</p> <p>b) Develop a sustainable financial strategy Agree a medium–long term SEND financial recovery and sustainability plan aligned to reform priorities.</p> <p>c) Prioritise early intervention investment Redirect resources toward preventative, inclusive approaches to reduce future demand and costs.</p> <p>d) Expand local inclusive provision Increase mainstream capacity and targeted support to reduce reliance on high-cost placements.</p> <p>e) Strengthen joint commissioning and pooled budgets Align funding across education, health, and care to maximise impact and reduce duplication.</p> <p>f) Improve demand management Strengthen graduated response and thresholds to ensure appropriate use of EHCPs and specialist provision.</p> <p>g) Enhance value for money and efficiency Review high-cost placements, contracts, and services to ensure cost-effectiveness.</p> <p>h) Develop workforce capacity Invest in training and retention to reduce reliance on costly external provision.</p> <p>i) Use data and modelling Implement predictive modelling to understand demand drivers and inform investment decisions.</p> <p>j) Engage partners in financial accountability Ensure shared ownership of cost pressures and savings across the system.</p> <p>k) Seek external funding and opportunities Maximise grants, transformation funding, and regional collaboration opportunities.</p> <p>l) Align with regulatory and recovery frameworks Ensure plans meet DfE expectations (e.g., Safety Valve/Delivering Better Value programmes where relevant).</p>	<p>Impact: <u>remains at critical</u></p> <p>Financial pressure remains a critical risk due to scale of demand and statutory duties. Failure would significantly affect service delivery and outcomes.</p> <p>Likelihood: <u>reduced to unlikely</u></p> <p>Mitigations reduce risk but the likelihood remains elevated due to:</p> <ul style="list-style-type: none"> • Ongoing demand growth • External funding constraints • Inflation and placement cost pressures • Limited short-term ability to reduce statutory demand

Risk	Impact	Likelihood	RAG	Mitigation	Residual Risk
<p>4. Workforce Capacity and Capability</p> <p>Risk: SEND reform requires new ways of working from an already stretched workforce across education, health, and social care. Skills gaps, recruitment challenges, and change fatigue may undermine implementation.</p>	<p>Impact Level: Critical</p> <p>a) Slower reform delivery: Limited capacity delays implementation and reduces momentum.</p> <p>b) Inconsistent practice quality: Skills gaps lead to variable support across services.</p> <p>c) Reduced early intervention: Workforce pressures limit timely, preventative support.</p> <p>d) Increased statutory pressure: Capacity gaps contribute to delays in assessments and EHCP processes.</p> <p>e) Recruitment and retention challenges: Vacancies and turnover reduce stability and continuity.</p> <p>f) Loss of expertise: Reliance on temporary staff weakens consistency and organisational knowledge.</p> <p>g) Workforce wellbeing impacts: High workloads and change fatigue increase burnout and absence.</p> <p>h) Reduced engagement with reform: Fatigue and low confidence limit buy-in and culture change.</p> <p>i) Weak multi-agency working: Capacity and skills variation hinder collaboration.</p> <p>j) Increased cost pressures: Greater reliance on agency staff raises costs.</p> <p>k) Poorer outcomes for CYP: Delays and inconsistency impact progress, wellbeing, and independence.</p> <p>Compliance and inspection risk: Workforce pressures increase risk of missed timelines and negative outcomes.</p>	<p>Possible</p>	<p>Amber</p>	<p>a) Develop a clear workforce strategy Align SEND reform priorities with a multi-agency workforce plan, including capacity modelling and role development.</p> <p>b) Strengthen recruitment and retention Implement targeted recruitment campaigns, retention incentives, and career development pathways.</p> <p>c) Invest in training and development Deliver joint SEND training (e.g. graduated response, inclusion, EHCP quality) to build skills and confidence.</p> <p>d) Promote new roles and ways of working Embed keyworker/lead practitioner roles and multidisciplinary team approaches.</p> <p>e) Improve workload management Review processes and streamline systems to reduce administrative burden and free up practitioner time.</p> <p>f) Support workforce wellbeing Implement wellbeing support, supervision, and manageable caseload expectations to reduce burnout.</p> <p>g) Use temporary capacity strategically Use agency or interim staff to address short-term gaps while building permanent capacity.</p> <p>h) Strengthen leadership and change management Equip leaders to support teams through change, reinforce priorities, and maintain engagement.</p> <p>i) Enhance multi-agency working Provide joint forums, shared protocols, and co-location/virtual working to improve collaboration.</p> <p>j) Leverage digital and process improvements Use digital tools to improve efficiency (e.g. case management systems, shared records where appropriate).</p> <p>k) Build specialist capacity in mainstream settings Upskill school-based staff to reduce reliance on external specialists.</p> <p>l) Monitor workforce data and risks Track vacancies, turnover, caseloads, and training uptake to identify and respond to risks early.</p>	<p>Impact: reduced to moderate</p> <p>Workforce limitations would still significantly affect delivery, quality, and outcomes if they materialise.</p> <p>Likelihood: reduced to unlikely</p> <p>Reduced through workforce planning and investment, but remains elevated due to:</p> <ul style="list-style-type: none"> •National workforce shortages •Ongoing demand pressures •Time needed to build skills and capacity

Risk	Impact	Likelihood	RAG	Mitigation	Residual Risk
<p>5. Pace and Deliverability of Reform</p> <p>The scale and ambition of the reform plan exceed local delivery capacity</p> <p>Risk that Local government reorganisation could impact on capacity to deliver the reforms</p> <p>Risk that the ICB restructure and the requirements for IMPR and neighbourhood working could impact resources to deliver the SEND reform Plan.</p>	<p>Impact Level: Critical</p> <p>Slower reform delivery: Programme scale exceeds capacity, causing delays and loss of momentum.</p> <p>Partial or inconsistent implementation: Priorities delivered unevenly, limiting overall impact.</p> <p>Reduced quality of delivery: Time pressures lead to superficial or poorly embedded changes.</p> <p>Loss of strategic focus: Competing priorities (LGR, ICB restructure, neighbourhood working) divert leadership and resources.</p> <p>Disruption from system change: Organisational restructuring delays decisions and disrupts continuity.</p> <p>Reduced partner capacity: Partners prioritise other transformation programmes, weakening alignment.</p> <p>Programme slippage risk: Missed milestones threaten delivery timelines and outcomes.</p> <p>Workforce strain and fatigue: Multiple changes increase pressure and reduce effectiveness.</p> <p>Inefficient resource use: Overextension leads to duplication, rework, and wasted effort.</p> <p>Reduced stakeholder confidence: Limited progress undermines trust in delivery.</p> <p>Inspection and regulatory risk: Insufficient progress may result in adverse Ofsted/CQC outcomes.</p> <p>Limited impact for CYP: Delays and inconsistency reduce improvements in outcomes and experience.</p>	<p>Possible</p>	<p>Yellow</p>	<p>Prioritise and phase delivery Sequence reforms into clear phases, focusing on highest impact priorities first.</p> <p>Establish strong programme governance Implement clear oversight, milestones, and accountability through a dedicated programme board.</p> <p>Develop a realistic delivery plan Align scope with available capacity, with clear timelines, dependencies, and critical paths.</p> <p>Align with wider system change Integrate SEND reform with local government reorganisation, ICB restructuring, and neighbourhood working plans.</p> <p>Maintain senior leadership focus Secure ongoing commitment and visibility from senior leaders across partners.</p> <p>Strengthen programme management capacity Allocate dedicated programme and project management resources to drive delivery.</p> <p>Use phased pilots and test-and-learn approaches Pilot key initiatives locally before scaling, using learning to refine delivery.</p> <p>Monitor progress and adapt Track delivery against milestones and adjust plans in response to risks, capacity, and feedback.</p> <p>Manage dependencies and risks proactively Identify and mitigate risks linked to external programmes and system changes.</p> <p>Support workforce through change Provide clear communication, training, and change support to maintain engagement and reduce fatigue.</p> <p>Ensure partner alignment and capacity planning Regularly review partner capacity and reprioritise activity where needed.</p> <p>Communicate progress transparently Share updates with stakeholders to maintain confidence and momentum.</p>	<p>Impact: reduced to moderate The scale of reform and external system changes mean failure would still affect delivery and outcomes.</p> <p>Likelihood: reduced to unlikely Reduced through planning and governance, but remains elevated due to:</p> <ul style="list-style-type: none"> • Competing system-wide transformation programmes • Structural changes (LGR, ICB) • Finite workforce and leadership capacity

Risk Matrix – See below for methodology of how the risks are assessed

IMPACT DESCRIPTION	IMPACT LEVEL	PROBABILITY/LIKELIHOOD				
		< 10%	>10% - <30%	>30% - <60%	>60% - <90%	>90%
		Very Unlikely	Unlikely	Possible	Likely	Very Likely
Cannot deliver Reform Plan; Failure of mission critical activity.	Crisis					
Significant impact to objectives; Significant and sustained disruption to activity.	Critical					
Delivery targets are compromised; Project delay / budget overrun.	Moderate					
Limited impact on delivery targets; Deviations from project resource, timescale or targets.	Marginal					
Minimal impact on delivery targets; Minimal impacts to project / programme efficiency.	Negligible					

10. Dependencies

The Torbay SEND Local Area Partnership's proposed future state reflects the national ambition set out in the *Schools White Paper: Every Child Achieving and Thriving*, shifting toward an integrated, locality-based, child-centred system. Central to this approach is early identification, joined-up delivery, and shared accountability across education, health and care. Torbay's roadmap recognises that delivery is interdependent with wider reforms and must align across shared workforce, environments, and cohorts of children and families to avoid siloed practice.

A whole-system approach is being delivered through the Families First Partnership Programme, neighbourhood working and integrated neighbourhood multi-disciplinary teams (MDTs), bringing together education, health, social care and youth justice at a local level to create a seamless integrated offer for families. Family Help, MDT and Family Hub working will enable services to organise around the child and family, supporting earlier intervention, reducing escalation and inequalities. This model aligns closely with Torbay embedding SEND expertise within MDTs, aligning thresholds and front-door arrangements, and adopting shared assessment frameworks to minimise duplication and improve outcomes.

Alignment with NHS 10 Year Health Plan and the Integrated Care System (ICS) is a key priority. Timely access to therapies and mental health services is critical to SEND outcomes, and Torbay is strengthening joint commissioning with the Integrated Care Board (ICB), introducing shared performance metrics and exploring pooled or aligned budgets. This supports coordinated workforce planning and improves system resilience. Integration with the Best Start in Life agenda and Family Hub network further enhances early identification, parent support and consistent early years pathways.

SEND reform is also aligned with local priorities including school place planning, curriculum reform, and youth justice. The use of surplus school capacity to expand inclusive mainstream provision demonstrates a proactive, place-based approach. Stronger links with youth justice services ensure SEND is central to prevention strategies, particularly for children at risk of exclusion or exploitation.

However, key risks remain. NHS and Ed psych workforce capacity and competing priorities may impact delivery of integrated health support. Local Government Reorganisation (LGR) could disrupt leadership, governance and commissioning continuity. There is also a risk of misalignment between SEND, Family Help, school led and Best Start programmes, potentially creating gaps or duplication. Workforce instability and the complexity of coordinating multiple reforms add further challenge.

To mitigate these risks, Torbay is prioritising strong system leadership, shared governance and coordinated oversight and pan Local Authority working. Formal links between SEND governance and the ICB, alongside joint leadership of MDT and Hub development, will ensure alignment and accountability. Transitional arrangements will protect leadership continuity during LGR, supported by clear governance structures. Shared workforce planning, cross-sector training and co-location within locality hubs will strengthen collaboration.

Coordination will be achieved through integrated performance frameworks, shared data systems and partnership arrangements. Stakeholder engagement and co-production with families, schools and practitioners underpin system design and delivery. Leadership forums spanning SEND, Family Help, Best Start and youth justice will actively manage interdependencies.

Contingency planning includes ongoing review of dependencies, flexible commissioning and scenario planning for workforce pressures. This proactive, system-wide approach will support a resilient SEND future state that is fully aligned with wider reforms, maximises shared resources, and improves outcomes for children and families.

Section 3 – Monitoring and Evaluation

11. How will the local area partnership know delivery is on track?

Monitoring tools and processes

Progress in delivering Torbay's SEND strategy will be tracked through a comprehensive, data-driven performance framework that enables timely oversight, challenge and improvement across the system. Our central SEND operational dashboard will be further developed to bring together key data from education, health and care into a single, accessible view. This dashboard will be used routinely by operational teams to monitor delivery milestones, identify emerging patterns in demand, and support proactive engagement with schools, settings and service leads.

A clearly defined set of Key Performance Indicators (KPIs), aligned to the strategic priorities and outcomes framework, will underpin monitoring arrangements. These KPIs will be reviewed 6-weekly by the SEND Local Area Improvement Partnership (SLAIP) Board and relevant partnership groups to support informed decision-making on priorities, resourcing and service delivery. Data will provide both system-level and local insight, enabling leaders to identify variation, target support and drive consistency.

The partnership will use data across four key domains:

- **Demand:** including volume and trends in EHCP requests for assessment, timeliness of decision-making, identification rates in early years and schools, and emerging patterns of need.
- **Service delivery:** such as sufficiency and occupancy of local provision, deployment of specialist services (e.g. Speech and Language Therapy), delivery of SEN Support, and progress in developing alternative and inclusive provision.
- **Service quality:** including parent and carer satisfaction, feedback from children and young people, complaints and tribunal activity, timeliness and quality of EHCPs, and effectiveness of co-production.
- **Outcomes and outputs:** including attendance, exclusions, attainment and progress, preparation for adulthood indicators, and successful transitions between phases and into adulthood.

This structured approach will ensure a clear line of sight between strategic intent, operational delivery and impact on children, young people and families.

Feedback and adaptation mechanisms

Alongside quantitative data, the partnership will embed strong qualitative feedback loops to ensure that lived experience informs ongoing

improvement. Regular engagement will take place with parent carer forums, children and young people's participation groups, and education, health and care practitioners through established networks and partnership boards.

Co-production will be embedded as a core principle, ensuring that children, young people and families are actively involved in shaping priorities, reviewing progress and designing solutions. Feedback will be gathered through a range of mechanisms, including surveys, focus groups, case audits and direct engagement, with clear processes for demonstrating how this input influences change.

Performance data and stakeholder feedback will be reviewed together at the Data and Quality Assurance Sub-group, SEND Reform Plan Sub-group, the Communication and Engagement Monitoring and Oversight Group and the SLAIP board, enabling triangulation of evidence to understand both what is working well and where improvement is needed. This will support a dynamic and responsive system, where learning is continuously applied to refine delivery approaches, address variation and respond to changing demand.

Through this integrated approach to monitoring, feedback and adaptation, Torbay will ensure that SEND reform remains focused on delivering meaningful, measurable improvements in outcomes, experience and value for money.

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12. Reporting to DfE

Using the attached data template, the local area partnership is required to provide quarterly data returns to DfE against selected key metrics. DfE will, in turn, provide quarterly data reports with visualised analysis and benchmarking that will support your local delivery, monitoring and evaluation. This will include data the department holds on **Attendance**, **Exclusions**, and **Unauthorised absence**.

Section 4 – Governance

13. How will the local area partnership ensure delivery of plans remain on track?

Torbay's Local Area Partnership is fully committed to delivering a high-quality, inclusive and sustainable SEND system that improves outcomes and experiences for our children, young people and their families. Strong, shared leadership and governance arrangements are in place across all system partners, underpinned by clearly defined and mutually understood lines of accountability. These arrangements ensure that the Local Authority, Integrated Care Board, education sector (including early years, schools, multi-academy trusts and further education), and wider partners operate as a collective system, taking joint responsibility for delivery, impact and ensuring value for money.

Formal representation from across the education sector is embedded within partnership governance structures, with clear links to Schools Forum and wider sector networks, ensuring strategic alignment, and effective two-way communication across all settings. Partnership working is further strengthened through shared, high-quality data, including integrated dashboards and a partnership maturity framework, which provide a consistent and transparent understanding of performance, progress, and system effectiveness.

Further exploration of wider shared governance arrangements, across a sub-regional footprint will be explored, to ensure effective monitoring and evaluation of impact from shared resources and approaches.

Operational leadership for the SEND Reform Plan is delivered through the Senior Responsible Owner (SRO), who is accountable for ensuring milestones are met and maintaining oversight of progress, and ensuring alignment across all partners. Collectively, these arrangements support a culture of transparency, co-production and continuous improvement, ensuring the partnership remains focused on delivering measurable and sustained improvements for children and young people with SEND.

Section 5 – Central Government Support

14. How can we help you?

To deliver our SEND Reform Plan in Torbay, sustained and coordinated support from central government is essential for both the Local Authority and health partners. Reform cannot be achieved through short-term initiatives alone; it requires long-term commitment, flexibility and system-wide alignment.

Prioritise stable, aligned and long-term commissioning arrangements that support us to meet demand and complexity of SEND in coastal and rural areas. Enabled joint and pooled budgets, multi-year contracts, mechanisms for structured parental coproduction will secure our strategic planning and workforce stability and enable the delivery early intervention, prevention and local provision, reducing reliance on costly specialist provision and placements.

National and regional workforce support is critical. Torbay faces challenges in developing, recruiting and retaining workforce including educational psychologists and therapists.

We need stronger levers for integrated working, clear integration guidance and nationally supported, to support with system level codesign and coordination across education, health NHS and local government. We are working effectively at a local level and planning SW Peninsular and regional approaches and welcome national support to ensure regulatory frameworks recognise the joint agendas.

Finally, support in data and digital infrastructure with nationally aligned data standards, shared digital platforms and sufficient lead-in times for policy change would enable more effective planning, transparency and evaluation of impact.

With these supports, Torbay's health and local authority partners will be better equipped to deliver inclusive, sustainable SEND reform that improves outcomes for children, young people and families.

Meeting: Cabinet **Date:** 9 June 2026

Wards affected: All

Report Title: Torbay Youth Justice Plan 2026-27

When does the decision need to be implemented? 30 June 2026

Cabinet Member Contact Details: Councillor Nick Bye, Cabinet Member for Children's Services, nick.bye@torbay.gov.uk

Director/Divisional Director Contact Details: Nancy Meehan Director of Children's Services. Nancy.Meehan@Torbay.gov.uk

1. Purpose of Report

- 1.1 Torbay Local Authority is required by the Crime and Disorder Act 1998 to approve an annual Youth Justice Plan that has been prepared in consultation with its partner agencies, staff, and service users.
- 1.2 The key outcomes for the Youth Justice Plan are to prevent children from offending, reduce re offending and prevent children entering custody.
- 1.3 The national Youth Justice Board (YJB) produces guidance on the production and contents of the [Youth Justice Plans](#) Torbay's plan has been produced in accordance with this guidance.

2. Reason for Proposal and its benefits

- 2.1 The Youth Justice Plan contributes to desired outcomes of the Community and Corporate Plan: -

'We want Torbay and its residents to thrive' - the Youth Justice Service works with vulnerable children whose offending behaviour if not addressed is likely to have lifelong impact on their ability to thrive.

'where our children and older people will have high aspirations' - the Youth Justice Service supports children to develop alternatives to their current behaviours and raise their expectations and aspirations

'Build safer communities: -

- *Work with partners to tackle crime, including exploitation, and its effects.*
- *Work with partners to reduce offending and reoffending and its impacts*
- *Work with partners to tackle domestic abuse and sexual violence and its effects'*

The Youth Justice Service directly contributes to the delivery of these three aspects of the 'Thriving Community' element of the Corporate Plan by its direct work with children to address the causes of their offending behaviour and the impacts for families and victims.

- 2.2 The local authority has a statutory duty to submit its Youth Justice Plan by 30th June each year to the YJB. The Draft Plan can be submitted by the Chair of the YJS Strategic Board, which is acceptable to the YJB if the 30th June date cannot be met. However the Plan must still be ratified by Torbay Council Cabinet. Failure to do so may result in YJB funding being withheld or delayed resulting in a reduced or delayed service as specified within the plan.

3. Recommendation(s) / Proposed Decision

1. That the Torbay Youth Justice Plan 2026-27 be approved and forwarded to the Youth Justice Board.

Appendices

Appendix 1: Final Draft Torbay Youth Justice Plan 2026-27

Supporting Information

4. Introduction

- 4.1 Torbay Local Authority is required by the Crime and Disorder Act 1998 to approve an annual Youth Justice Plan that has been prepared in consultation with its partner agencies, staff and service users.
- 4.2 Local authorities have a statutory duty to submit its Youth Justice Plan Youth Justice Board (YJB) by 30th June each year. Section 40 of the Crime and Disorder Act 1998 sets out the youth justice partnership's responsibilities in producing a plan. It states that it is the duty of each local authority, after consultation with the partner agencies, to formulate and implement an annual youth justice plan, setting out how youth justice services in their area are to be provided and funded, how it will operate, and what functions it will carry out. The plan should equally address the functions assigned to a youth justice service and include how services will prevent offending behaviour and reduce reoffending.
- 4.3 The key outcomes for the Youth Justice Plan are to prevent children from offending, reduce re offending and prevent children entering custody.
- 4.4 The national Youth Justice Board (YJB) produces guidance on the production and contents of the Youth Justice Plans Torbay's plan has been produced in accordance with this guidance.

Key line of Enquiry: What is being done to reduce ASB in Torbay (requested by the Children and Young People's Overview and Scrutiny Sub-Board and considered at their meeting held on 18 May 2026)

- 4.5 I have taken this to mean ASB committed by children and I have liaised with Child Centred Policing team for South Devon, Torbay Community Safety Team and members of Torbay Youth Justice Service.
- 4.6 **Child Centred Policing Team** covering S Devon was launched in April 2025 following recognition that better coordination and quicker response was needed to youth crime and ASB in the area. This team is pulling together all child focused police resources into a single team who will deal with the investigation and resolution of all Level 1 crime (low level). The team is not yet fully staffed but is already showing some positive result in terms of speedier resolution of crimes and ASB, this is not only good for children who commit crime but also good for victims (many of whom are also children)
- 4.7 **Police Intervention Clinic** meets every week and goes through all police intelligence reports re children that are coming to the attention of the police. It is led by Community Safety Sergeants from the Child Centred Policing and in attendance are the Police Youth Intervention Officers (YIO's), a Team Manager and data analyst from the Youth Justice

Service (YJS). Children are discussed and other records on YJS or Childrens Services for safeguarding concerns to make a decision about how to proceed. Options can include: - referral to YIOs for intervention, referral to the YJS Prevention Service, contact with the social worker to raise concerns, proceed with a criminal investigation or take no further action.

- 4.8 **Torbay Youth Justice Service** works with children who have committed ASB however they are dealt with ie informal, prevention, diversionary, civil or criminal proceedings. ASB is a very small area of our work as the Crime and Disorder Act 1998 sets the mandate for Youth Justice Services which is primarily to stop children re offending or prevent them from offending in the first place. Since ASB is primarily a civil matter until it is escalated to a criminal matter by breach of a civil order, we have very few children open to us for ASB. Child First practice is clear that they best ways to stop children offending is through keeping them out of the formal youth justice systems as long as possible, treating them as children, working to build a pro social identity, collaborating with them on how best to support them and diverting them from the stigma of a criminal record and involvement with the justice system. Torbay seeks to uphold these principles in its work whilst safeguarding children, protecting the public and victims.
- 4.9 **YJS Prevention Service (including Turnaround)** takes referrals for children who are at risk of becoming involved in the formal youth justice system. They will probably have already been discussed at the Police Intervention Clinic and will be known to Childrens Services where we get most of the referrals from. The prevention service completes an assessment of the child and their circumstances to devise an agreed intervention package which will provide a range of positive activities and support to the child to divert then from further offending or ASB.
- 4.10 **YJS (Summer) Activity Programme** was piloted in early 2025 by the YJS Prevention Service and provided weekly activity small group activities to children open to the YJS. The pilot was successful in engaging children known to the service in a range of activities through the summer and school holiday periods. We are seeking funding to restart this in the summer holidays when we know there can be a spike in ASB and offending and are conversations with Torbay Community Safety and the Holiday Activity and Food (HAF) programme.
- 4.11 **Torbay Council Community Safety** are investing £300,000 in 'Operation Town Centres' to make the bay a Safer and more welcoming by tackling ASB. The funding will be used to support the Public Space Protection Order (PSPO), enhance CCTV operations and employ a new town centre manager who will have lead responsibility for delivering ASB related initiatives. YJS and Police have links with the ASB team and attend the **Youth ASB meeting**. This tends to be location based and resources can be targeted at the areas, not individuals, by the most appropriate agency.

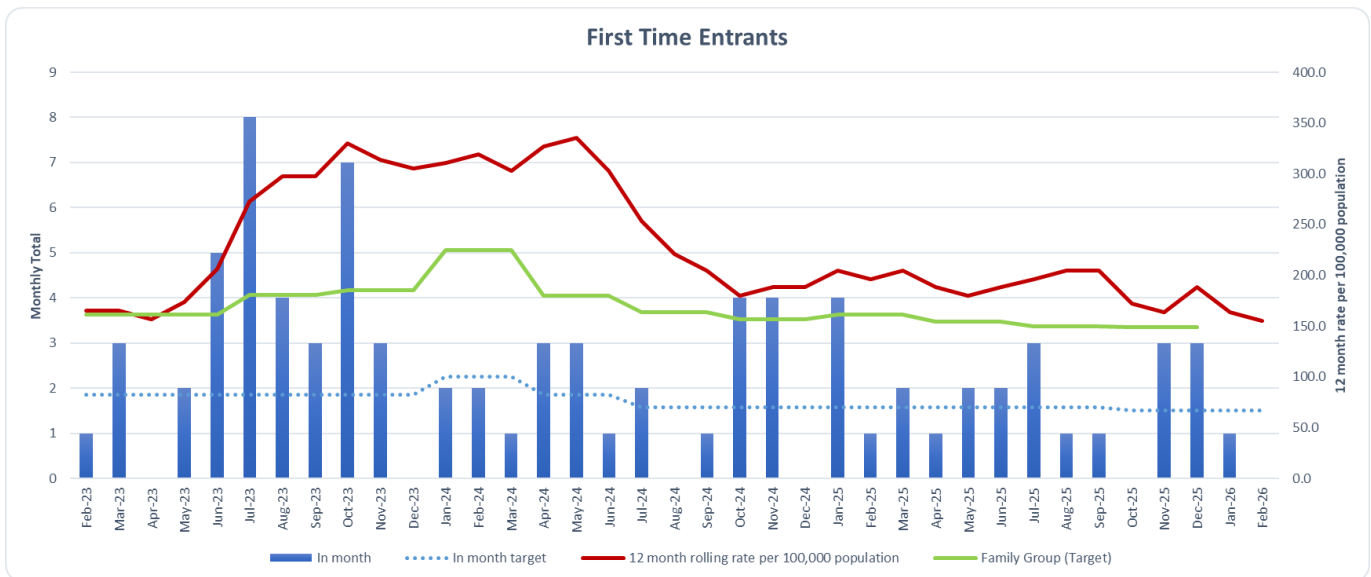
- 4.12 **Torbay Council Youth Hub** will bring together a range of services for children into one team in August 2025 this will include the Council Youth Service and the commissioning of the voluntary sector youth services and clubs alongside the drug and alcohol service, the homeless prevention team, and young carers.
- 4.13 **Early Help Panel** – reviews cases of children and families who may need additional help which cannot be met by universal services. This may include ASB being committed by children YJS and Police can be asked to attend in these cases and may offer support and intervention as part of an Early Help plan.

Other Updates requested

- 4.14 **Premises** – Un1t (Unit 1) at Torr Hill has now been fully refurbished and will have a grand opening on 21st May 2026. The internal design and layout have been developed through consultation with children open to the service and they have designed the artwork to go on the front of the building, chosen the name of the building and its logo and selected the colours and type of furnishing inside the building. Staff and children are really looking forward to having it fully open and available.
- 4.15 **First Time Entrants** - The data for this indicator comes from both the local case management system (red line below) and the YDS published by the YJB (green line of our Family group). The data is shown in rolling full years for the 12 months to March, July, September, and December of each year. First Time Entrants are children who receive a youth caution / youth conditional caution or court conviction for the first time within the period. The KPI is used to measure the effectiveness of the partnership in preventing young people from entering the criminal justice system for the first time and is expressed a rate per 100,000 10-17-year-old population to allow comparisons across areas of different sizes.

Historically, this has been an area of poor performance for Torbay YJS, with the rate consistently above the family group and national.

This downward trend from 2021 into 2022 did not continue into 2023/24, and Torbay's rate rose significantly above the target (to be below the family group) at the end of the year. Reducing FTEs has been a strategic priority for the local partnership board. The rate has steadily decreased since the peak in May 2024, narrowing the gap with the family group and national averages. Several factors have contributed to this improvement: swifter decision-making, the introduction of an intervention clinic where decision-making is informed by real-time data and intelligence to target children at risk of entering the youth justice system into the most appropriate preventative intervention, and regular auditing of decision-making at the pre-court panel. This was further aided by the introduction in September 2025 of the new Child First Pathway Protocol which sets out with greater clarity and consistency the options to divert children from criminal convictions. As you can see Torbay is now sitting just above it family group (statistical neighbours) and we maintain efforts to achieve our target to be below the family group.



2. Options under consideration

- 2.1 There are no other options being considered as there is a legal requirement to deliver this service and produce this plan.

3. Financial Opportunities and Implications

- 3.1 Torbay Youth Justice Service is a statutory partnership governed by Its Strategic Management Board. The statutory partners are required to agree the level of funding for the service and the amounts contributed by each statutory partner. The Draft Budget laid out within the plan has been set for 2026-27 subject to final agreement by some partner agencies. Torbay Council Children’s Services as one of the statutory partners has agreed funding for 2026-27 of £514,926 as part of a total budget of £935,400. The Youth Justice Board (YJB) is the next largest contributor granting £247,401, the remaining budget is made up of contributions for the other partners and other specific grants. Additionally, partners contribute £174,760 ‘in kind’ through the secondment of workers to the service. See Appendix 2 of the Youth Justice Plan 2026-27 for more details.
- 3.2 Failure to agree the Youth Justice Plan may result in funding from the Youth Justice Board (YJB) being withdrawn or withheld, as well as contributions from other partner agencies which would result in a reduced service to children in Torbay.

4. Legal Implications

- 4.1 [The Crime and Disorder Act 1998 \(Section 39\)](#) introduced a statutory requirement for local authorities to establish Youth Offending Teams (YOTs) in their area, requiring the involvement of the local authority (the lead agency), Police, Health and Probation – the statutory partners.

- 4.2 The local authority is also required, under Section 40, after consultation with the partner agencies, to publish a Youth Justice Plan each year outlining the composition of and funding for their YJS. This includes the steps taken to encourage children not to commit criminal offences.
- 4.3 The legislation refers to Youth 'Offending' Teams (YOTs) and youth 'offenders' this language has been replaced by updated guidance from the Youth Justice Board (YJB) as part of their Child First approach to stop labelling children as offenders and now refers to local YOTs as Youth Justice Services (YJSs), although the primary legislation has not been changed. The Child First model is based on evidence and research that shows a positive, pro social approach focussing on the child's strengths and capabilities is the most likely to result in desistance from offending.

5. Engagement and Consultation

- 5.1 All partners have been engaged in the development of the youth justice plan through representation at an 'Away Day' for the Strategic Board for the service with specific meetings held to oversee the development of the plan.
- 5.2 Staff and volunteers were involved through team meetings and workshops to help develop the vision and priorities for the service, and the views of children, families and victims has been gathered through the ongoing feedback systems of the service and used to influence the priorities of the service.

6. Procurement Implications

- 6.1 There will be very limited spend outside of the Council. Over 90% percent of Youth Justice Service funding is spent on staff employed on behalf within the Youth Justice Service by Torbay Council (not including seconded posts). The main areas of funding outside this are to a wide variety of providers relating to the delivery of direct work with children eg rental of community facilities to see children and activities provided or delivered as part of an agreed intervention plan.

7. Protecting our naturally inspiring Bay and tackling Climate Change

- 7.1 There will be no contribution to tackling climate change in this proposal.
- 7.2 Children known to the service may take part in environmental activities as part of either a positive activity or as reparation.

8. Associated Risks

- 8.1 If a Youth Justice Plan is not approved by the local authority it would potentially be failing to provide its statutory duty under as specified under the Crime and Disorder Act 1998 (section 40). This may result in funding being withheld by the YJB and therefore in a reduction in service to children, or increased expenditure by to the local authority and / or the other funding partners. This would also affect the reputation of the local authority and may open it to legal action by the government.

9. Equality Impacts - Identify the potential positive and negative impacts on specific groups

- 9.1 The Youth Justice Plan has a direct positive impact on children aged 10-17 years old by reducing their offending behaviour and increasing their likelihood of a positive future.
- 9.2 The Youth Justice Service works with some of the most vulnerable and deprived children and families within Torbay as is evidenced within chapter 15. Overrepresented groups section of the plan which shows that 72% of children known to the service are living in poverty (in receipt of free school meals which up from 63% last year). 39% live in areas that fall into the 10% most deprived in England. 57% have Special Educational Needs or an Education and Health Care Plan (EHCP), over three quarters are already known to Children's Services.

10. Cumulative Council Impact

- 10.1 None

11. Cumulative Community Impact

- 11.1 None

To

YJS

Torbay
Youth Justice
Service

YOUTH JUSTICE PLAN 2026-27

UNIT

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Agenda Item 10
Appendix 1

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Introduction, Vision and Strategy

Introduction by Chair of Torbay Youth Justice Board

As chair of Torbay Youth Justice Service Strategic Management Board, I am pleased to present the Youth Justice Plan for 2026-27. The Plan has been developed following our first joint staff and Board 'Away Day' where performance reports and summaries, feedback from children, parents, and victims and the wider community were reviewed to create the plan and its priorities for the year ahead. Excitingly this took place in our new facility in the centre of Torquay which although not fully open it was great to be in finally after many years of searching and planning.

Firstly, I would like to recognise the achievements of the service over the last year, specifically maintaining rates of children who reoffend in both the pre court and statutory court orders arenas. This is particularly true for the new Prevention / Turnaround service where early data shows that 81% of children accepted onto the programme did not go on to re-offend. We have also significantly reduced the number of First time Entrants (FTEs) coming into the service through the increase focus on both Prevention and Diversion work in conjunction with the Police Intervention Clinic and the Out of Court Resolution Panel. I am also proud that we have been reaccredited with our SEND Quality Lead Award with a Child First commendation for our work with children with SEND who are open to the service.

We are also pleased to note that in April 2025 Devon and Cornwall launched their new Child First Policing Team for South Devon (a slightly wider area than just Torbay). This pulled together resources for dealing with children into one team and has reduced delays in investigation and resolutions of low level youth crime. In the autumn of 2025 in partnership with the Police, we launched the new Child First Youth Pathway Protocol for Devon and Cornwall. This protocol has both clarified Child First practice expectations in the Police and increased the range of options for diverting children from entering the criminal justice system and reduced inconsistencies across the Police Force footprint.

Internal and partnership audits of our work have identified area of good provision and areas we need to improve upon; these are highlighted in the Service Improvement plan and priorities for the year ahead. Specifically, the Strategic Board will focus on: -

- Seeking to influence the education landscape to reduce the number of children being excluded and suspended from education provision and ensuring children open to the YJS are accessing appropriate education or training provision suitable to their needs and abilities.
- Maintaining the reduction in the number of First Time Entrants and reducing re offending rates so that the yearly rolling target reduces to below our statistical neighbours.
- Be more 'Child First' in the provision of our services.
- Opening our new location for face-to-face delivery work in Torquay.
- Develop our services to victims and ensure we provide a coordinated service with all the other providers of victim services

This is really exciting time for Torbay Youth Justice Service with a number of developments that we have been working on for some time coming to fruition and making a significant impact for children in the Bay



Nancy Meehan

Chair of Torbay Youth Justice Service Strategic Board

Director of Torbay Childrens Services

Voice of the child

'didn't get on with the worker at first as was in a bad place. Get on great now & feels he knows me and has my back'

Legal Framework

The Crime and Disorder Act 1998 (Section 39) introduced the statutory requirement for local authorities to establish Youth Justice Services (YJS) in their area, requiring the involvement of the local authority, Police, Health and Probation – the statutory partners.

The responsible local authority is also required, under Section 40, after consultation with partner agencies, to publish a Youth Justice Plan each year outlining the composition of and funding for their Youth Justice Service. This includes the steps taken to encourage children not to commit criminal offences. This document is the required Youth Justice Plan for Torbay.

Parts of the legislation refers to Youth 'Offending' Teams and youth 'offenders' this language has been replaced by updated guidance from the Youth Justice Board (YJB) as part of their Child First approach to stop labelling children as offenders and now refers to local services as youth justice services, although the primary legislation has not been changed. The Child First model is based on evidence and research that shows a positive, pro social approach focussing on the child's strengths and capabilities is the most likely to result in desistance from offending.

Vision

Torbay's Youth Justice Service vision is to: -

'Keep young people and their communities safe by working in collaboration with other services to help children recognise and repair the impact of harmful behaviour and develop a positive future'.

The Service will achieve this by delivering a '[Child First](#)' approach in all aspects of its work, as well as supporting the work of Torbay Council, UNICEF UK and other local partners towards international recognition as a [UNICEF Child Friendly Community](#).

The Youth Justice Service Vision supports the work of the Torbay local community Vision and Plan which is: -

'We want to see a healthy, happy and prosperous Torbay'

The Local Community Plan has three strategic themes: -

- ***Community and People***
- ***Pride in Place***
- ***Economic Growth***

The Youth Justice Service makes contributions to all three strategic themes but mainly sits within the 'Community and People' theme and the priority of: -

'Keeping children safe in their communities and providing safe environments for our young people to thrive in'

Parent feedback

Everyone involved supported us as a family and took time to understand our needs'

Local Context

Torbay is a glorious part of Devon with an inspiring natural environment. It is a magnet for tourists and is known as the English Riviera. It is home to globally significant technology businesses and has a rich leisure and cultural scene.

Torbay has total population of 139,322 (2021 census mid-year estimate) of which 11,896 are aged 10 -17 years. 96.1% of Torbay's population are white, 1.6% are Asian, 1.5% are mixed ethnicity, 0.3% black and 0.4% other. There are higher numbers of older people compared with the England average and far fewer people in their 20s and 30s.

Torbay has the highest number of residents living in deprived areas and the highest numbers of children living in income deprived areas when compared with all other councils in the South-West. 27% of Torbay's residents live in the 20% most deprived areas in England and 1 in 4 residents say they have a long-term illness or disability.

Average weekly earnings in Torbay are £467 (£123 less than the England average -2020) and 12.4% of households are in fuel poverty. Those born into deprived families are more likely to have worse educational and health outcomes. The life expectancy gap is 9 years males and 8 years females.

Approximately double the number of cared for children compared to other areas in England and the South-West. Over 1 in 3 children with Education, Health and Care Plans (EHCPs) have been excluded from school for a fixed period.

Torbay's SEND inspection in 2025 found: -

'There are widespread and/or systemic failings leading to significant concerns about the experiences and outcomes of children and young people with special educational needs and/or disabilities (SEND), which the local area partnership must address urgently.'

An improvement plan is in place address the concerns and the service will be reinspected in January 2027

Torbay Children's Service was rated as 'Good' at its last two Ofsted inspection (May 2022 and Feb 2026) the 2026 inspection report stated: -

'Services for children in Torbay have significantly improved. This improvement is demonstrable and making a tangible difference for Torbay's children. Strong political and corporate commitment to the improvement agenda has enabled the local authority to change the trajectory of social work practice so that services in Torbay are now good. This is an impressive achievement.'

Victim feedback

'Lynsey (victim worker) was extremely professional and put me at ease. She explained everything thoroughly in ways I could understand'

Governance, Leadership, and Partnership arrangements

A number of Partnership 'Deep Dives' have taken place since the last HMIP inspection of the YJS in 2020, led by the CEO of Torbay Council. The improvement recommendations from the Deep Dives have been completed and signed off. At the Away Day in 2026 the Board and staff team received a summary of performance, disproportionality and related data, presentations from the YJB and Education representative the annual feedback summary from children, parent and victims open to the YJS, and used these to set the new priorities for the year ahead which are set out in Chapter 13.

Attendance and participation at the board is good, all statutory partners are actively engaged in the boards as well as taking part in audits of the service (victim audit) and observing other activities of the service eg FTE and Reoffending reviews.

The Youth Justice Service Head of Service reports to both the Chair of the Strategic Board for service accountability matters and to the Director of Children's Services as the employing body for all non-seconded staff. In 2026-27 the chair of Board and the DCS are the same person.

The staffing and accountability structures are provided in [Appendix 1](#) and [1a](#).

Knife Crime

In February 2026 the Ministry of Justice (MoJ) introduced new guidance for [child knife crime possession offences](#) these set clear requirements for how children in possession of knives should be dealt with, specifically through the increased use of Deferred Prosecution Schemes (DPS). The guidelines also set tight timescales for notification from Police to Youth Justices Services (24hrs) and for the delivery of a mandated best practice programmes within 4 weeks of the referral. Prior to programme delivery an assessment and a multi-agency decision panel would be needed to agree a charge or deliver an out of court pathway and programme. The mandated implementation for this new approach was by 1st April 2026 which for many police forces nationally has been a significant challenge as most did not have a DPS in place. However, because of the work that Devon and Cornwall Police and the YJS's across the area have done in developing and implementing the Child First Justice Pathway Protocol which has a DPS the additional option of a Deferred Charge (there was already a Deferred Caution) could just be switched on and we were able to meet the requirements by the 1st April and are therefore fully compliant with all aspects of the new guidelines.

1. Progress on Previous Plan

The 2025-26 Improvement Plan contains one action which has remained unresolved since the HMIP inspection: - 'Secure access to suitable premises' which despite much work over the last 4 years has remained unresolved despite eleven buildings having been identified but ruled out due to either cost or planning issues. In 2025 a building in the centre of Torquay was identified that is in council ownership, plans were developed for its total refurbishment, costs have been established and agreed, planning and building control has been approved and in April 2026 work has been completed. Children open to the service have been involved in aspects of the design and decoration of the building. Specifically choosing the colours pallets of the decoration and range and types of furniture as well as designing with Sound Communities the artwork for the front window, designing the logo and naming the building as Un1t (Unit 1)

Last year's Improvement Plan is shown below; this is reviewed at each Strategic Board meeting and was last updated for the Board meeting in March 2026. There were 7 areas identified for improvement, there were 4 improvement actions that were **Green**, meaning they have either been completed or ongoing, or are on track to be completed. 3 were **Amber** meaning they were in progress but are behind the planned timescale for completion

March 2026 update

	Area for Improvement / Outcome desired	Action	Timescale	MB Lead	Update	RAG
1.	Child First approach to all we do	<ul style="list-style-type: none"> a) Hear and respond to the voice of the child and carers not only in the delivery of their intervention but in the development of the service. b) To support the development of the Child First Policing Team and the new Child First Protocols to improve how children are supported within the youth justice systems. c) Swifter Youth Justice - Reduce delays in intervention and resolution for all children in the youth justice system. d) Increase the range of positive activities and opportunities for children to develop their confidence, skills and abilities. 	<p>Over the next year</p> <p>Over the next year</p> <p>Monitor this through Police & YJS</p> <p>Summer 2025</p>	DP	<ul style="list-style-type: none"> a) A Child First Task and Finish group has been established through the LCJB to ensure that Child First principles are delivered across the whole DCP area. b) The Child Centred Policing Team is now established in the area and has improved the speed of interventions and resolution of level 1 cases. Update to Board in Nov 25. c) The new Child First Justice Pathway has been launched in which aims to reduce delays in youth justice, increase diversion options & reduce inconsistencies across the D&C footprint. More training will be delivered to Police and YJS teams later in the year and early in 2026. d) SH and JR are working with the Centre for Justice Innovation who will be support the role out of the new Youth Justice Pathway and the development of the Child Centred Policing team (see c. above) e) YJS have delivered a Positive Activity programme in the Spring & in summer holidays 2025 with additional funding from HAF and Community Safety and hope to run again in 2026 subject to funding. f) DP has linked with YJS and briefed his staff team re Child First practice within Community Safety & plan to complete the YJB Child First Toolkit 	
2.	Reduce the numbers of school suspension and exclusions and ensure children in contact with the Youth Justice Service are in appropriate	<ul style="list-style-type: none"> a) All Board members to consider what their agencies can do to support school attendance and inclusion eg Not make appointments with children in school time, professional curiosity by staff 	March 2026	HB	<ul style="list-style-type: none"> a) Following the SEND inspection report JR has joined the SLAIP Attendance Task Force, it has met once on 2nd July an improvement plan re attendance will be developed by this group. b) HB and JR have met to discuss what can work together re reducing suspensions. 	

	education, training, or employment.	<p>seeing children not in school during the school day.</p> <p>b) All agencies support Inclusion strategy / SLAIP?</p> <p>c) YJS staff to work with partners to reduce the number of children suspended & excluded from school and improve their attendance.</p>			<p>c) YJS colleagues are now joining SEND team anchor days for collaborative and joined up working – this is implementing and being embedded in practice.</p> <p>d) Discussions re YJS attending IPOP when children open to YJS are discussed so that YJS views can be presented.</p> <p>e) YJS now attend the Risk of Exclusion and Placement Panels & are working with Vulnerable Pupils Service to share more up to date information.</p> <p>f) HB brought a report to the March 26 Away Day re progress on reducing suspensions and exclusions from education. Recommendations were made for action for 2026-7.</p>	
3.	<p>Secure access to suitable child friendly, safe, accessible premises for delivery of face-to-face work (Outstanding Deep Dive Recommendation Continue work to secure a range of local facilities that are fit for purpose to enable services to be delivered effectively to children).</p>	<p>a) Open the new face to face delivery location in Torquay and ensure it is accessible and inclusive for children, parents, victims and partners.</p> <p>b) Develop plans so that it is a safe, confidential and inspirational place for children and all users of the building.</p>	<p>Oct 25</p> <p>June – Oct 25</p>	NB	<p>a) Refurbishment work is now nearing completion, painting work is almost completed, final fittings of kitchen and showers / toilets is nearly completed. Furniture will be taken out of storage & in late February</p> <p>b) Young people have been engaged with the selected artists since December to work on the designs for the front of the building and also with designing the internal look a furnishing the building. We have still to select and a name for the building.</p> <p>c) Health and safety planning re operational running of the building taking place on 11th Feb.</p> <p>d) Building will be used for Board & staff team away day on 19th March. Soft opening and Grand opening event dates to be decided.</p>	<p>Soft opening in April, grand opening in May</p>
4.	<p>Improve the services to victims and work to ensure better coordination with all agencies who support victims across the local area.</p>	<p>a) Increase the engagement of victims with our service.</p> <p>b) Ensure Victim safety planning is paramount in all aspects of our planning and delivery</p> <p>c) Ensure the YJS listen to victims and help them understand and navigate the justice system and its outcomes for them and</p>	Jan 2026	EP	<p>a) Victim report being presented to each Board to identify gaps in data re victims and areas for development.</p> <p>b) Regular briefings for staff on the requirement to evidence safety planning for victims.</p> <p>c) Improved feedback system from victims and the planned work with the Centre for Justice</p>	

		<p>the children who have caused them harm.</p> <p>d) Work with all the other agencies who provide services to victims to ensure victims are supported to access what they need.</p>			<p>Innovation will improve understanding & services for victims</p> <p>d) We are linking with the LCJB to ensure better coordination of services for victims in the D&C area. The 2nd meeting took place on 17th September.</p> <p>e) Victim Audit took place on 11.11.25 with auditors from Devon, Plymouth, Cornwall and EP from the Torbay Board and 4 staff from Torbay YJS, Report & Action plan presented to Nov 25 board. This to be written up for YJB good practice site.</p>	
5.	Maintain the reduction of children who become First Time Entrants (FTEs) in Torbay and seek to bring the rate below our statistical neighbours.	<p>a) Ensure the Prevention service is stopping children offending by monitoring in the performance report.</p> <p>b) Work with Police and Partners to increase Diversion outcomes at the Intervention Clinic & OOCR panel.</p> <p>c) Increases the Police awareness and understanding of the Child First approach and of the work of the YJS</p>	<p>Every 2 months</p> <p>March 26</p> <p>Jan 26</p>	HC / NY?	<p>a) Turnaround as part of the Prevention service was recognised by the MOJ being a high performer because of reoffending rate of 7% for children open on this programme last year.</p> <p>b) The new Child First Decision Protocol (Pathway) has been launched in July 25 which will increase the options for diversion at the OOCR panel, and informal Diversion options was launched in Sept which will divert children earlier.</p> <p>c) The Centre for Justice Innovation have supported YJS in the D&C footprint in the role out of the new Child First Joint Decision Protocol & specifically working with S Devon over the next year to support the new ways of working between YJS & the S Devon Child Centred Policing Team.</p> <p>d) FTE Review group meets quarterly to review all decisions to see if children could have been diverted.</p> <p>e) Jan 2026 Torbay FTE rate was 163, latest available family group rate was 157. This will be updated in the 19th March Away Day</p>	Go green if rate stays close to family group
6.	Maintain the success of the Prevention Service in stopping children entering the formal justice system and look for funding for 2026-27	<p>a) Ensure the Prevention & Turnaround funding & performance criteria requirements are met.</p> <p>b) Look for alternative funding to continue Prevention service or decommission in 2026</p>	<p>March 26</p> <p>Dec 25</p>	NM	<p>a) Turnaround as part of the Prevention service was recognised by the MOJ being a high performer because of reoffending rate of 7% for children open on this programme last year.</p> <p>b) The prevention service funding has now been made permanent through additional core funding</p>	

					from Torbay Council. All 3 workers have been issued with permanent contracts	
7.	Implement the 2024 Partnership Deep Dive recommendations	<ul style="list-style-type: none"> a) Board can properly lead, direct and empower those responsible for driving forward the YJS in the next phase of its development and ensure that its strategic priorities are set and delivered. b) The Board should ensure that it has an unfettered 'line of sight' to front line services to inform its activity. c) The Board should consider whether an Operations Board or a specialist sub-group network is the preferred mechanism for taking forward service priorities and providing the Strategic Board with the intelligence and data it needs to properly understand and direct the YJS. d) Ensure that all strategic and operational priorities are understood across the service. e) Strategic Board to assist in securing a base from which the service can deliver direct work to children. f) Assure itself that the plans are fit for purpose, actions are sufficiently clear with appropriately rigorous and fixed timescales, outcome ambitions are properly defined, and reporting and evaluation requirements are clear. 	<p>July 25</p> <p>Autumn 25</p> <p>May 25</p>	NM	<ul style="list-style-type: none"> a) July 25. In May the Strategic Board completed an 'Away Day' led by the chair of the Board with contributions from all partner agencies, the staff team and data and feedback from across the service to devise the Youth Justice Plan for 2025-26. Work included reviewing the key points and actions from the Deep Dive. Decisions included the dissolution of the Operational Board and Task and Finish groups will be established for areas of work or development needed. Board members have received several inputs and briefing re their role and function as Board members, and there will a particular focus on being ready for any HMIP inspection. b) July 25 Board members have taken lead roles for aspects of the Improvement Plan for the service which will increase their contact with the service. Additionally, more staff will attend Board meetings to present pieces of work and case studies. Other opportunities for engagement will take place over the next year. c) July 25. The Operational Board has been dissolved. Task and Finish groups will be established for any areas of development or action needed. d) July 2025. Staff and volunteers have been engaged in both an Away Day to develop Priorities for the Youth Justice Plan for 25-26 and sent a number of challenges and priorities to the Board. Staff have also engaged with Marjon University & South Devon College to review how Referral Orders can be made more Child First. The intention is to publish this as an Academic Review to be used nationally by YJS's (hopefully Sept / Oct 2025). The Police and YJS have also just received word that we are 1 of 10 YJS 	

					<p>nationally who will be receiving support from the Centre for Justice Innovation for the next year to roll out the new Child First Pathway and support the development of the Child Centred Policing Team for S Devon</p> <p>e) A base in Unit 1 Torr Hill House has been secured and is currently undergoing refurbishment</p> <p>f) The new Youth Justice Plan has been approved by the YJS Board and Torbay Council Cabinet and is now published on the website</p> <p>g) The Deep Dive actions have been completed and have been signed off by the CEO Deep Dive review group.</p>	
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2. Performance over the Previous Year

Torbay has taken an active and often leading role in regional and national developments to promote a Child First approach to policing and how we support children to not become involved in crime and the justice system. Specifically, we have worked with Devon and Cornwall Police in the development of the Child First Pathway Protocol which is being implemented across the whole force area and systemises the Child First approach to how we deal with children in the justice system from prevention, diversion and court work. The Service has also worked with the Office of the Police and Crime Commissioner (OPCC) to develop a Child First approach to reduce delays in investigation and decision making which has supported the development of the Child First Policing Team for Torbay which has brought together police resources who deal with all low level offending by children ensuring greater coordination and oversight. The OPCC through the LCJB has created a Child First Working Group led by the regional head of the Crown Prosecution Service (CPS) which is working to improve outcomes and reduce delays for children in the criminal justice system and on which the head of Service for Torbay sits. These changes will help to both reduce First time Entrants (FTEs) and reoffending rates

Torbay YJS has continued to increase the breadth and quality of performance data made available to managers, management boards other local authority departments eg Children’s Services and Community Safety etc as well as external partners. In early 2025 the Board requested a number of revisions to the performance report structure, a Draft report was presented and approved at the March 2025 Board meeting the first new report will come the next Board in July. This includes caseload data, demographics, links to wider services, exploitation, education, attendance, free school meals, SEND, timeliness of decision making, outcome types, offence types, court decisions, first time entrants, reoffending, custody, breaches, and victim data. More detailed analysis is often requested by the board and this year they have received supplementary reports regarding First Time Entrants, Disproportionality, and Education.

The data within this plan is taken from both the Torbay Youth Justice Service's case management system - ChildView, and the YJB data summary published on a quarterly basis by the Youth Justice Board. We have also developed the use of Power BI to help managers and staff review live performance data and after some trials this should be rolled out in 2026.

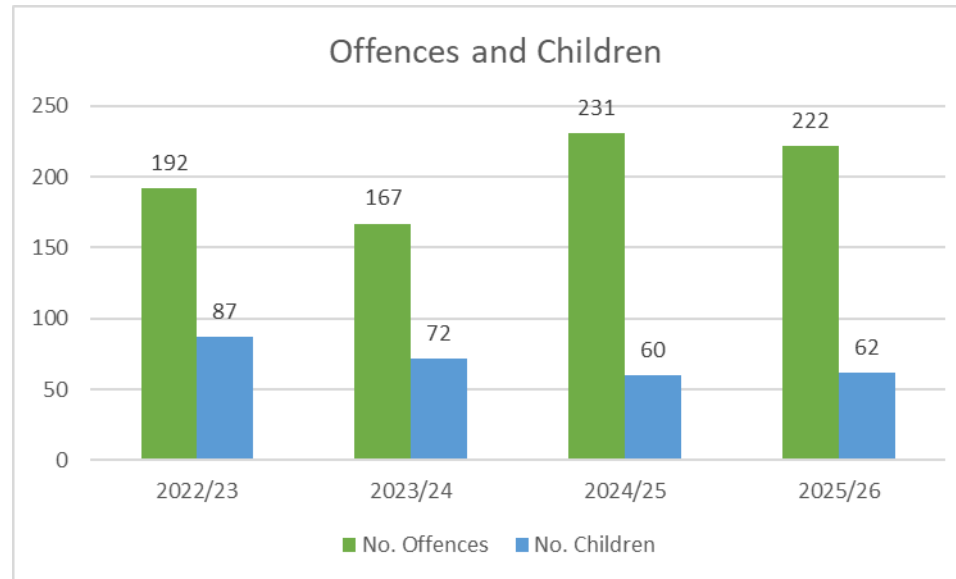
There remain 2 caveats to the data below which is we still do not have regular data updates from Devon and Cornwall Police that has been requested. Specifically, information on Police only Community Resolutions and Stop and Search data.

Quote from a child

'It's because of the difficulties I had previously where I got myself into trouble with some people doing things. I know I can't change that, but I can change the now and future'

Offences

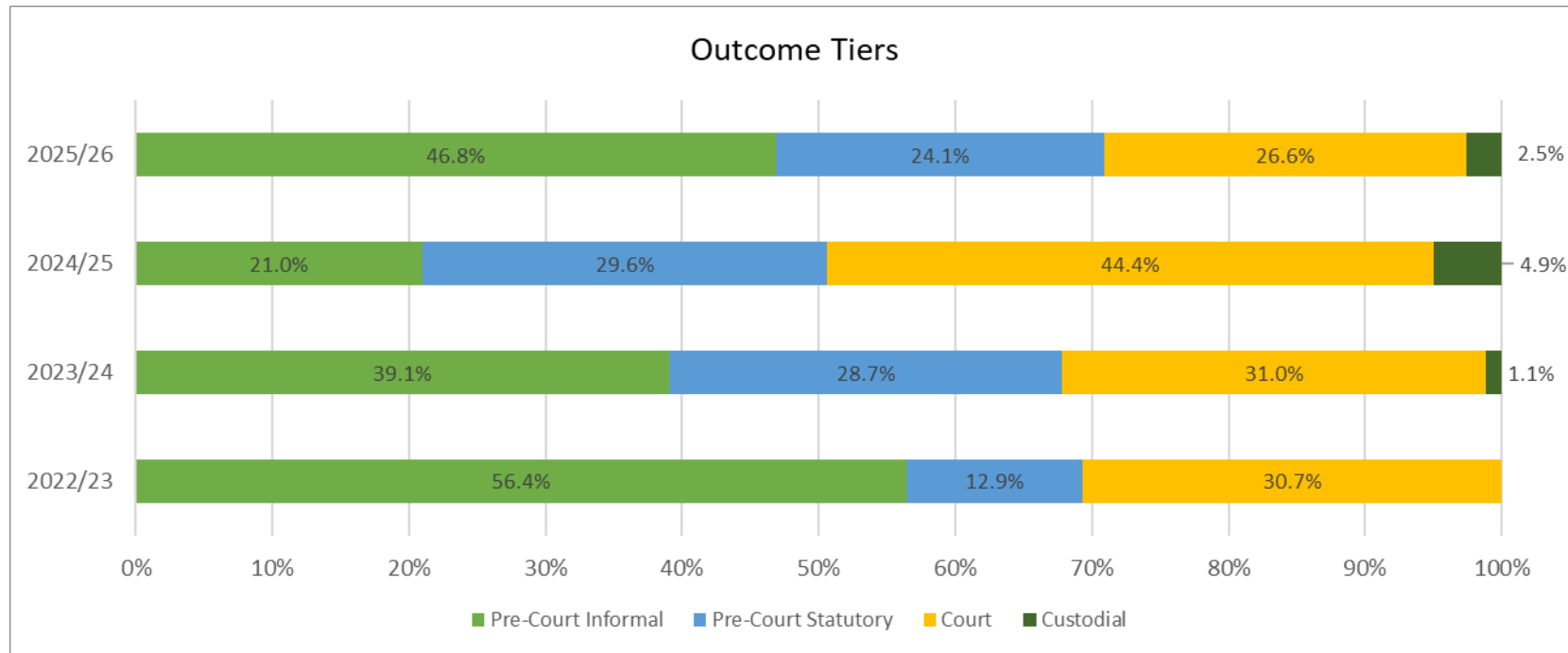
The number of children who received an outcome for an offence remained relatively low during the previous twelve months following the decline from 2023/24. The number of offences remains high and the gap between these two numbers reinforces the narrative that offending is increasingly concentrated among a small cohort of children committing multiple offences. (The data here uses date of outcome, not date of offence).



The ratio of offences per child is:

- 2.21 offences per child (2022/23)
- 2.32 offences per child (2023/24)
- 3.85 offences per child (2024/25)
- 3.58 offences per child (2022/26)

Outcome Tiers



The distribution of outcomes shows a clear shift towards diversion away from the formal court process over the four-year period. In 2025/26, 71% of outcomes were delivered out of court, the highest proportion across the period, indicating a continued emphasis on early intervention and diversion. This compares with a lower reliance on out-of-court outcomes in both 2023/24 and 2024/25, when the use of court disposals increased.

Pre-Court Informal outcomes accounted for 47% of all outcomes in 2025/26, a substantial increase compared with the previous year. This suggests improved use of informal resolution where appropriate and is consistent with reductions seen in First Time Entrants later in this report. At the same time, the number of Pre-Court Statutory outcomes reduced, indicating a rebalancing within out-of-court disposals towards less formal interventions.

Row Labels	Pre-Court Informal	Pre-Court Statutory	Court	Custodial	Total
2022/23	57	13	31		101
2023/24	34	25	27	1	87
2024/25	17	24	36	4	81
2025/26	37	19	21	2	79

Offending Behaviour

Violence Against the Person offences were the most common offence type to receive an outcome during 2025/26. They accounted for 21% of offences and, despite decreasing by eight offences, replaced **Theft and Handling Stolen Goods** offences as the most prevalent. The latter reduced from 68 to 39, and these offences accounted for 18% of outcomes during the previous 12 months.

There were increases in the number of **Criminal Damage** offences (+9), **Vehicle Theft / Taking** (+9), **Breach of Bail** (+16), **Domestic Burglary** (+11) and **Public Order** (+4).

There were reductions in the number of **Motoring Offences** (-14), **Non-Domestic Burglary** (-5), and **Drugs** (-7).

Parent feedback

'The worker genuinely cared about supporting our child and put in helpful support place'

There were 222 offences by Torbay YJS children that received a justice outcome between 1st April 2025 and 31st March 2026. (The numbers below offence type show increase/decrease on previous year).



47
**Violence Against
 The Person**
 -8



17
Breach Of Bail
 +16



12
**Non-Domestic
 Burglary**
 -5



39
**Theft & Handling
 Stolen Goods**
 -29



14
**Motoring
 Offences**
 -14



8
Sexual Offences
 +/- 0



22
**Criminal
 Damage**
 +9



13
Public Order
 +4



6
Drugs
 -7



19
**Vehicle Theft /
 Taking**
 +9



12
**Domestic
 Burglary**
 +11

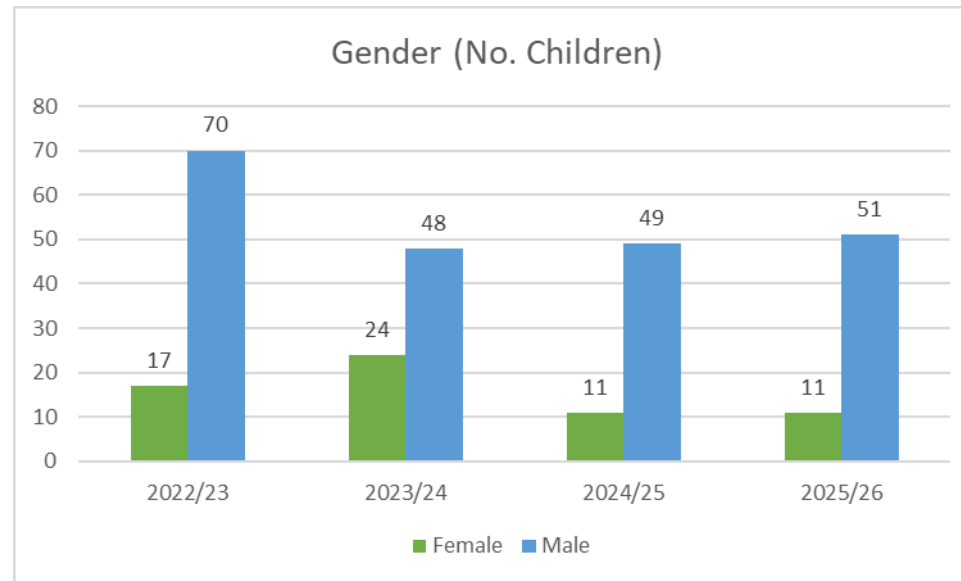


13
**Others (incl. Racially
 aggravated, Robbery,
 Breach of Order)**
 -11

Offending Profile

The children receiving an outcome for an offence in 2025/26 are again predominately male (83%). Across the four-year period, most offences have been committed by male children, who consistently account for between 67% and 82% of all cases. While 2023/24 saw a temporary increase in the proportion of females supported (33%), the overall trend indicates a sustained male majority. Total numbers supported have declined over time; however, the gender profile of the cohort has remained broadly stable.

- 2022/23 – Female 20% Male 80%
- 2023/24 – Female 33% Male 67%
- 2024/25 – Female 18% Male 82%
- 2025/26 – Female 18% Male 82%



Age (at Outcome date)

Across the period, offending is predominantly concentrated among teenage children aged 13 and over, with consistently low numbers of children aged 10–12. While 2023/24 saw a peak in offending among 13–15-year-olds, the age profile has since shifted, with those aged 16–18+ accounting for the majority of offences from 2024/25 onwards. This indicates an increasing concentration of offending behaviour among older children despite overall lower volumes compared with 2022/23.

Age	Outcome Date			
	2022/23	2023/24	2024/25	2025/26
10		<5		
11	<5	<5	<5	
12	8	<5	<5	6
13	6	14	4	5
14	17	13	8	8
15	17	16	10	7
16	16	11	18	17
17	20	12	11	16
18+	<5		<5	<5

Age	Outcome Date			
	2022/23	2023/24	2024/25	2025/26
10	0%	<5%	0%	0%
11	<5%	<5%	<5%	0%
12	9%	<5%	7%	10%
13	7%	19%	7%	8%
14	20%	18%	13%	13%
15	20%	22%	17%	11%
16	18%	15%	30%	27%
17	23%	17%	18%	26%
18+	<5%	0%	7%	5%

YJS Children and Interventions

The number of YJS interventions that began in 2025/26 was lower than in each of the previous two years.

75 children started an intervention last year (86 in 2024/25) across a variety of interventions. Some children will have had multiple interventions during the year.

- 23 Turnaround interventions (changes to the eligibility guidelines meant that all children were eligible for Turnaround and therefore no Prevention Programme interventions – previously reserved for children not eligible)
- 15 diversionary interventions (YJS Community Resolution or Outcome 22)

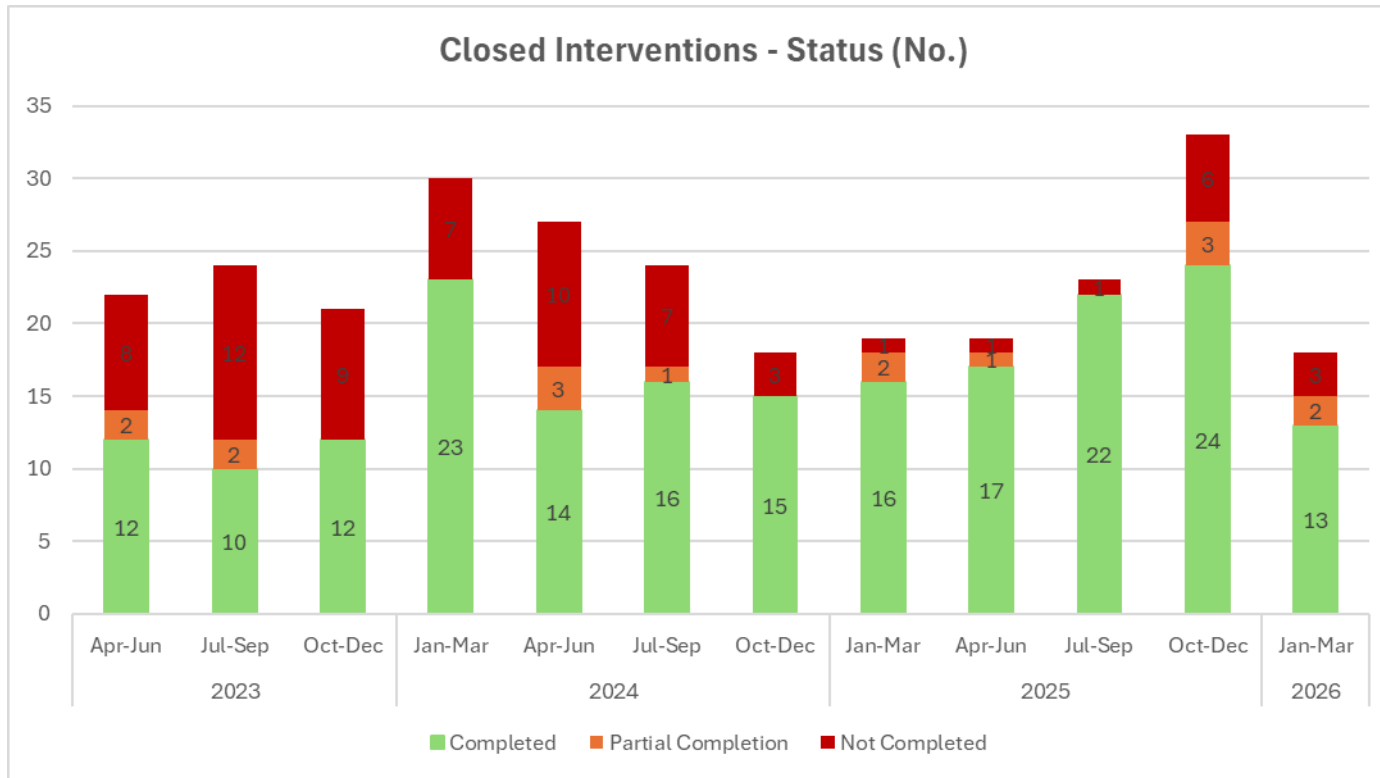
- 17 pre-court substantive outcomes (Youth Caution or Youth Conditional Caution)
- 18 court ordered interventions (Referral Order or Youth Rehabilitation Orders)
- 17 voluntary support programmes (these can be pre or post an intervention linked to an offence)
- 6 bail support or remand programmes
- 2 custodial sentences - DTO

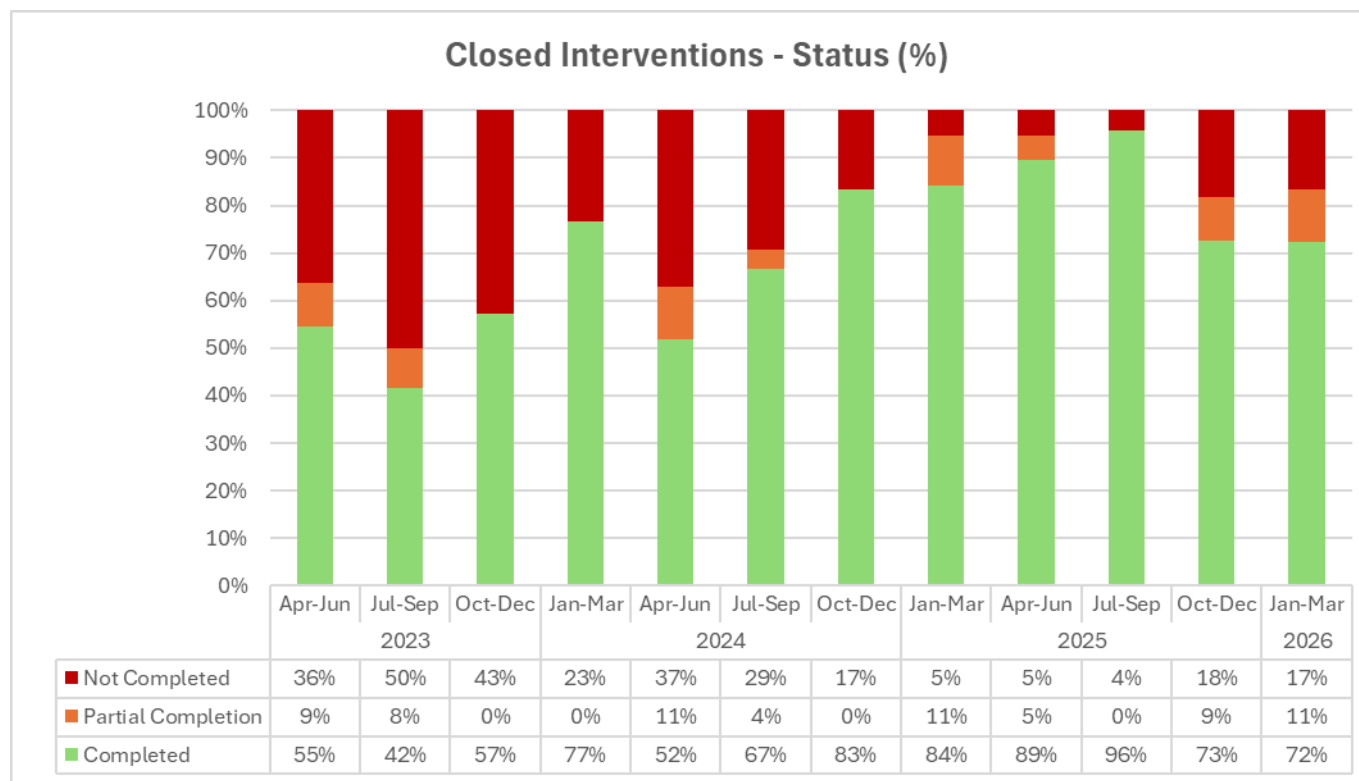
The full breakdown is shown below:

Intervention Type	2023/24		2024/25		2025/26	
	No.	%	No.	%	No.	%
Prevention Programme	12	9%	7	6%		
Turnaround	36	26%	24	21%	23	23%
Voluntary Support Programme	26	19%	19	17%	17	17%
Community Resolution with YOT Intervention	13	10%	7	6%	11	11%
Outcome 22 (Diversionary, Educational or Intervention Activity)	5	4%	5	4%	4	4%
Youth Caution	4	3%	8	7%	6	6%
Youth Conditional Caution	13	10%	12	11%	11	11%
Bail Support Programme	1	1%	2	2%	5	5%
Civil Supervision Order					1	1%
Criminal Behaviour Order	1	1%			1	1%
Referral Order	20	15%	14	12%	8	8%
Youth Rehabilitation Order	4	3%	12	11%	8	8%
Remand in Custody (YDA) YOI					1	1%
DTO Post Custody/Licence Programme			2	2%	1	1%
DTO/Custody Programme	1	1%	1	1%	2	2%
Total	136		113		99	

Intervention Outcomes

The chart below shows the number of interventions that closed in the period and the proportion of these that were successfully completed.





82% of interventions were completed successfully in 2025/26, this is an improvement on 2024/25 when the successful completion rate was 69%.

3. National Key Performance Indicators

First Time Entrants

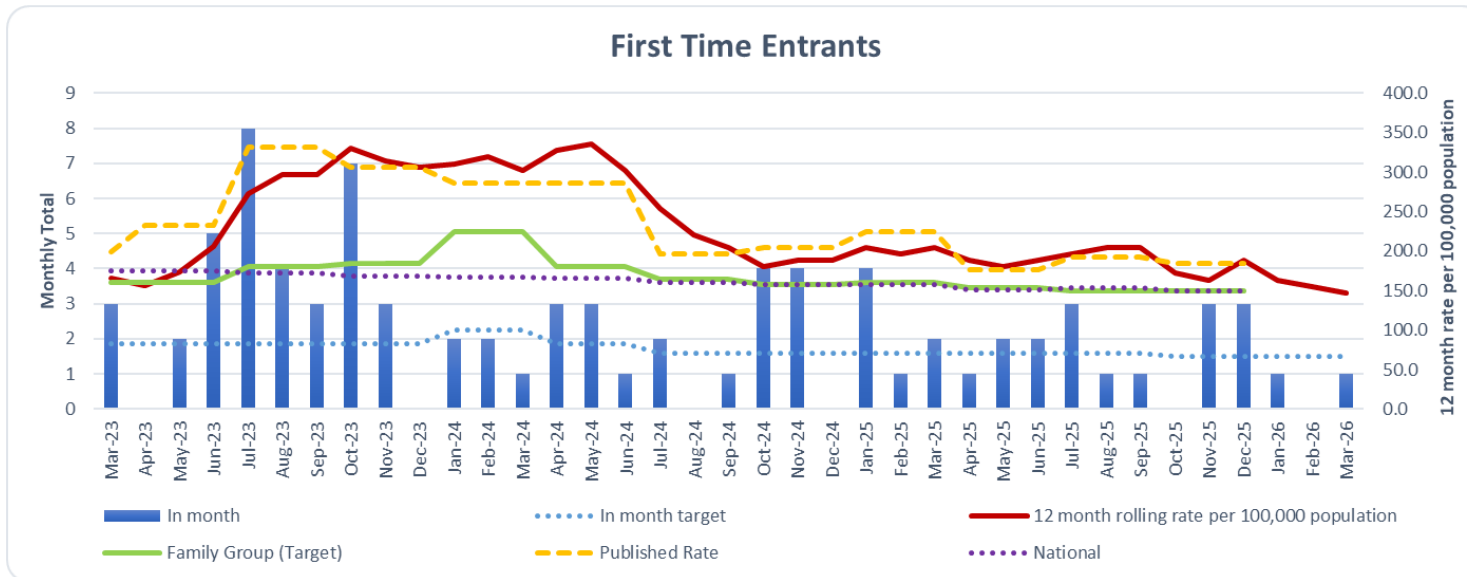
First Time Entrants (FTEs) to the youth justice system are children who have committed an offence and receive a youth caution or court conviction for the first time. This is a key performance indicator for the Youth Justice Partnership in Torbay.

Concerns around the high number of Torbay children becoming FTEs was one of the reasons why Torbay YJS were placed in the third quadrant (equivalent to a service requiring improvement) of the YJB’s oversight framework.

Following a peak in May 2024, when the rate reached 335 first-time entrants (FTEs) per 100,000 population aged 10–17, the most recent data demonstrates a significant and sustained reduction in Torbay. By March 2026, the FTE rate had fallen to 139 per 100,000, representing a reduction from 41 children to 17 children entering the youth justice system for the first time.

The Youth Justice Partnership has maintained a longstanding commitment to reducing the number of first-time entrants. This downward trend can be attributed to a range of targeted initiatives, including:

- **The success of preventative programmes**, such as *Turnaround*, which provide early support to children at risk of entering the youth justice system.
- **The Intervention Clinic**, a weekly intelligence-led triage meeting with Police, enabling swifter decision-making and increasing diversion from formal youth justice outcomes.
- **A consistent Child First approach across the partnership**, including initiatives such as the Child-Centred Policing Team, which prioritise children’s welfare and proportional responses.
- **The use of Deferred Prosecutions and Cautions** for children who do not enter a plea, supporting diversion and preventing unnecessary criminalisation.

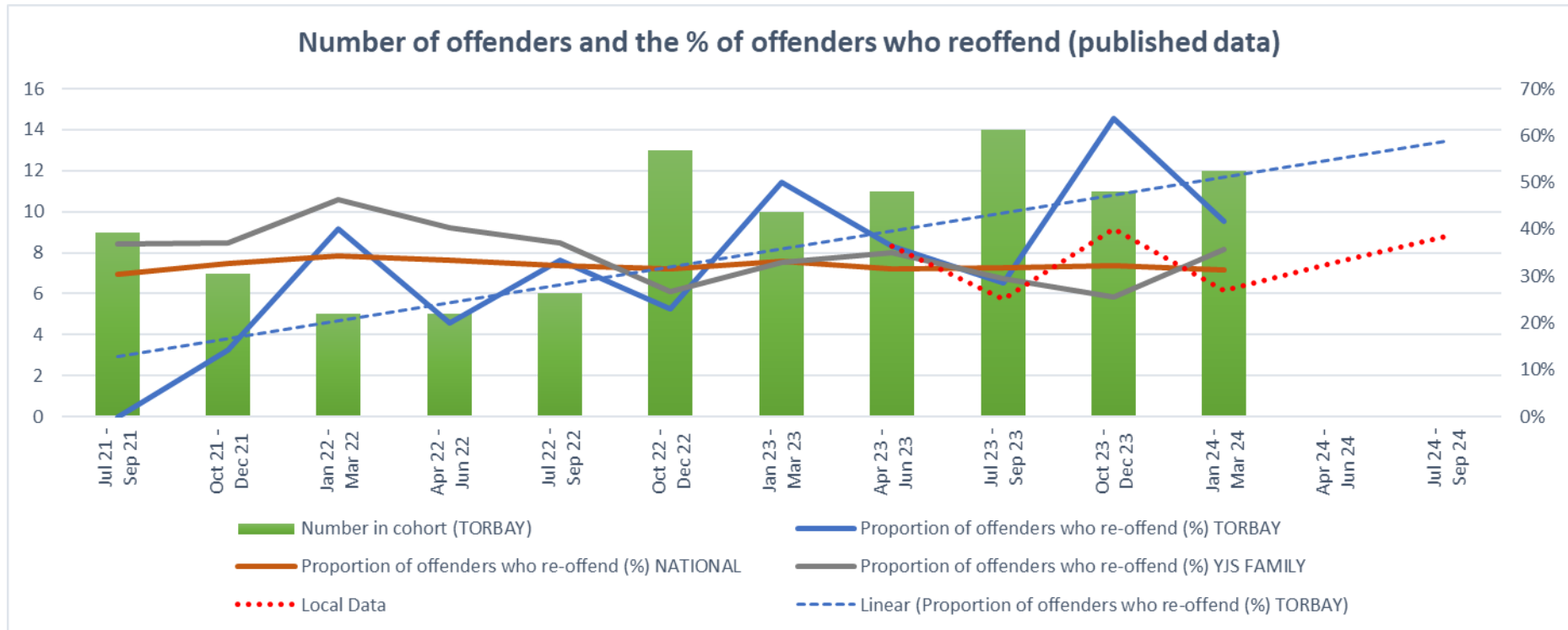


Binary reoffending rate

Reducing the number of children who reoffend is a primary key performance indicator (KPI) for youth justice services. The data for this KPI comes from the data summary published by the YJB and consists of all children who received a substantive outcome or were released from custody in that date range. The most recent cohort available is those children who received a substantive outcome between January and March 2024, tracked for 12 months.

The target is to remain below the family group, and this was achieved in only one of the previous four quarters. The increase in reoffending rates has coincided with the reduction in FTEs. Whilst many children are being diverted, those children who do enter the formal system often have multiple complex needs and this, plus the small cohort size in Torbay, is exhibited by the volatile reoffending rate.

The chart below shows the number of children in each three-month cohort for Torbay and the proportion of those children who reoffended compared against both the family group and national benchmarks.

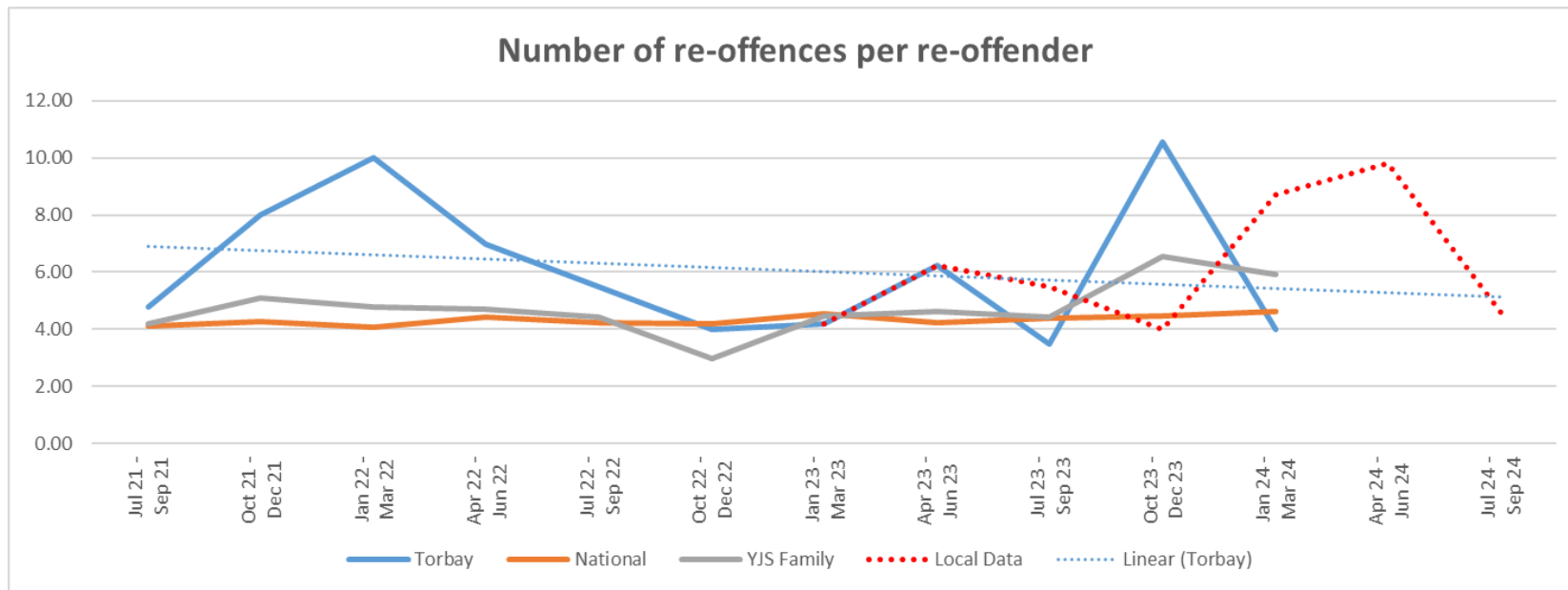


Frequency of reoffending

A further priority is reducing the number of offences committed by those children who go on to reoffend. The data for this indicator also comes from the data summary published by the YJB. The frequency rate of reoffending calculates how many re-offences are committed by each reoffender.

The target is to remain below the family group, and this was achieved in two of the previous four quarters. As shown by the chart below the number of reoffences committed by Torbay children is variable, and for some children they reoffend a significant number of times. This, and the increase in the binary rate, led to the Youth Justice Partnership launching a reoffending review group. This group looks in detail at each child who reoffended in a quarter. This highlighted some common factors:

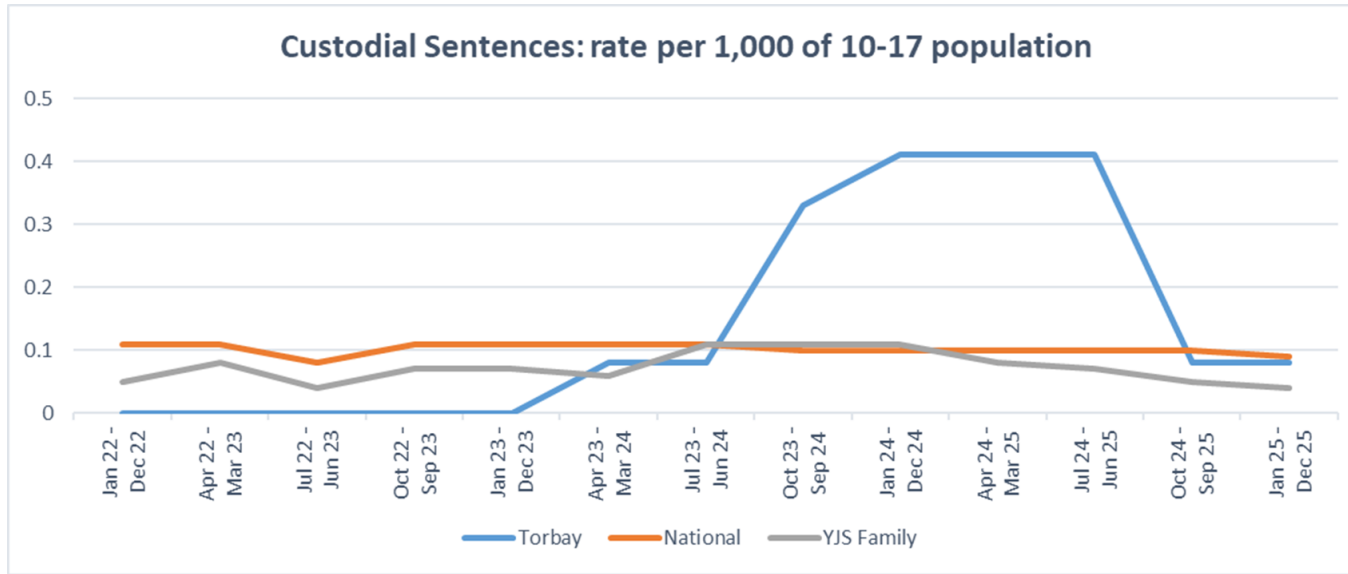
- Significant barriers to accessing education
- Parenting capacity limits
- Exploitation and unmet basic needs



Use of custody

Reducing the number of children sentenced to custody is another primary KPI for Youth Justice Services.

This indicator uses case level data from the YJ Application Framework and is the number of custodial sentences in the period given to children with a local residence aged under 18 years on the date of their first hearing related to the outcome. This data is presented as a rate per 1,000 children in the 10 to 17 local general population.



Historically this has been an area of strong performance for Torbay YJS, with rates consistently below the family group and national averages. However, 2024 saw a significant increase in custodial sentences causing the rate to rise above those comparators.

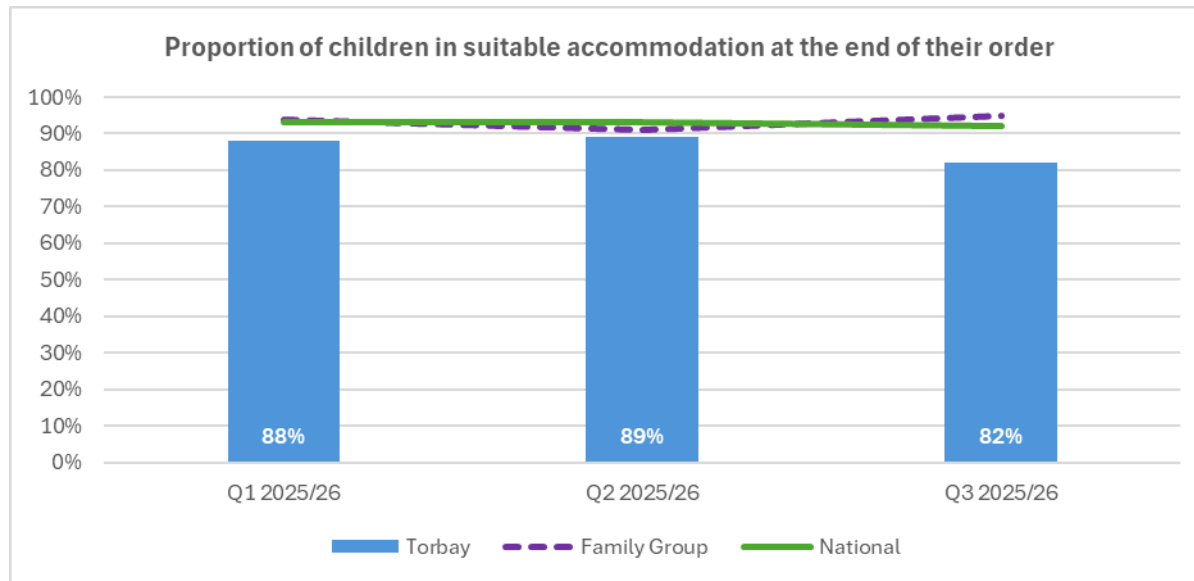
The rate improved into 2025 but is expected to remain above the target when the next round of data is released by the YJB following another custodial sentence in February 2026.

All 3 children sentenced to custody most recently have been known to Operation Hyphenate for burglaries to steal car keys and subsequently driving vehicles illegally. A multi-agency review has been led by the OPCC has been completed which has made a number of recommendations to partner agencies, these will be reviewed early in 2026. Additionally, a wider review of the Operation Hyphenate cohort has been commissioned by Torbay Safeguarding partnership and will take place in 2026 re concerns around adult exploitation of this group of children and how the partnership responds

KPI 1: Accommodation

Access to suitable accommodation is key in reducing the risk of reoffending.

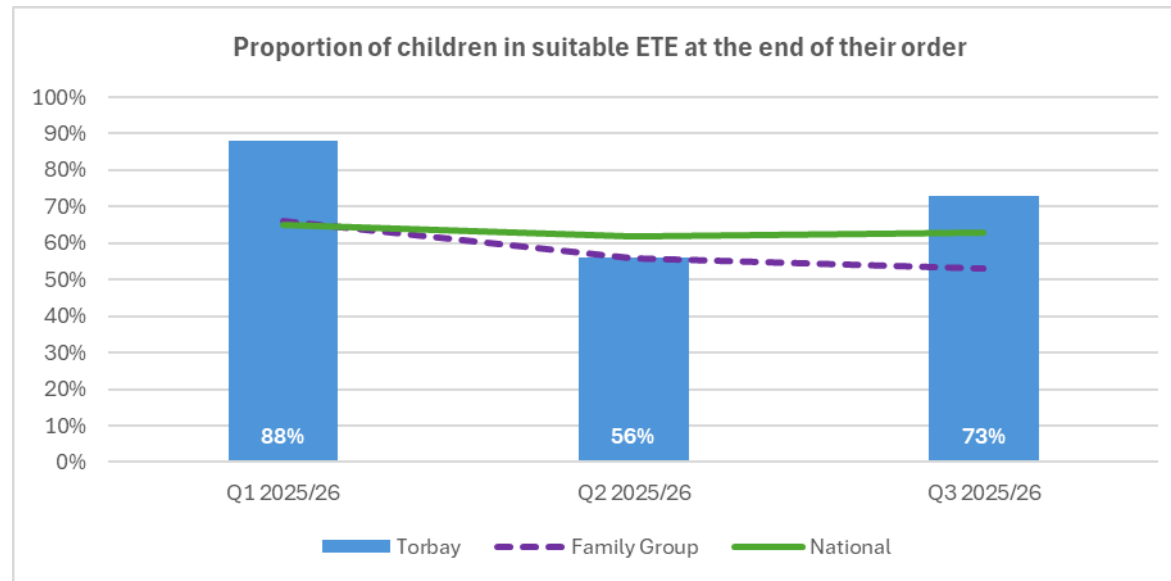
During 2025/26 the proportion of Torbay children in suitable accommodation at the end of their orders has remained constant at above 80%. However, this is below the Family Group and National benchmarks and represents a small number of children for whom their accommodation has not been assessed as meeting their needs. The YJS continue to work alongside partners to improve access to suitable accommodation for all children.



KPI 2: Education, Training and Employment (ETE)

There are well-established links between low educational engagement and attainment and an increased risk of childhood offending. Access to suitable education is critical in enabling a child’s pro-social identity and success in life.

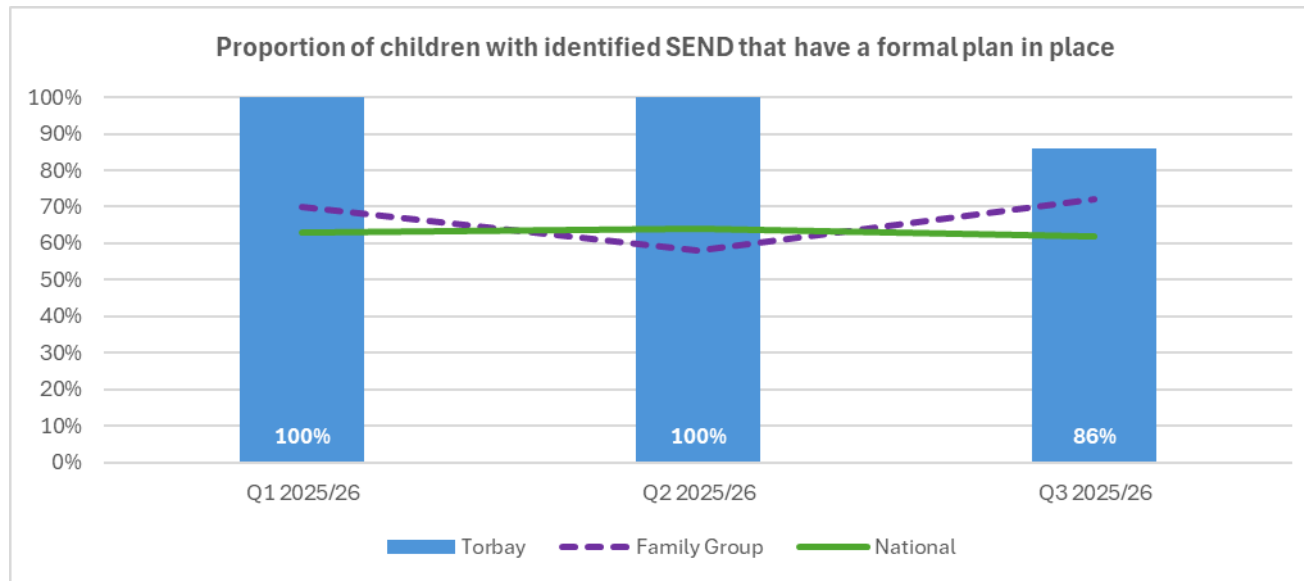
Performance against this indicator was strong in both Q1 and Q3, higher than both benchmark groups. However, the low proportion of children in suitable ETE at the end of their order in Q2 highlights the variability of need within the small groups of children Torbay YJS support. Even when ETE offers are suitable, data shows that attendance is often a barrier for Torbay YJS children with an average of 85% of school age children persistently absent throughout the year.



KPI 3: Special Education Needs and Disabilities

This KPI measures the proportion of children with identified Special educational needs and disabilities (SEND) / Additional learning needs (ALN). Early identification and support for SEND/ALN are crucial for a child’s engagement and success in education. A lack of appropriate support can lead to disengagement from education, which is a known risk factor for reoffending.

Data for 2025/26 shows that the percentage of children with SEND with a formal plan in place to be consistently higher than comparators.

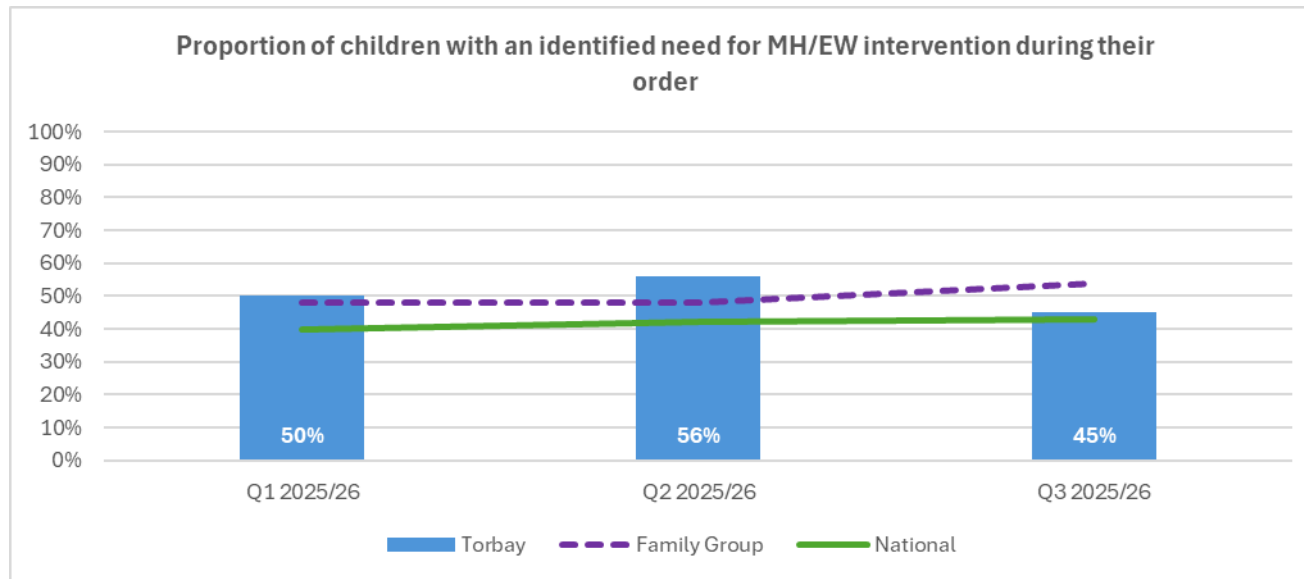


KPI 4: Mental Health and Emotional Wellbeing

This KPI measures the proportion of children identified as having a mental health or emotional wellbeing need. Children in the youth justice system experience significantly higher rates of mental health challenges compared to their peers in the general population.

Mental health and emotional wellbeing screening is offered to all children as part of the assessment process with referrals made to the dedicated in-house CAMHS Practitioner when a possible need is identified.

The proportion of Torbay children with an identified need for mental health or emotional wellbeing was above the national average for each quarter, and above the family group in all but quarter 3. This reflects a cohort of children with complex and overlapping challenges.

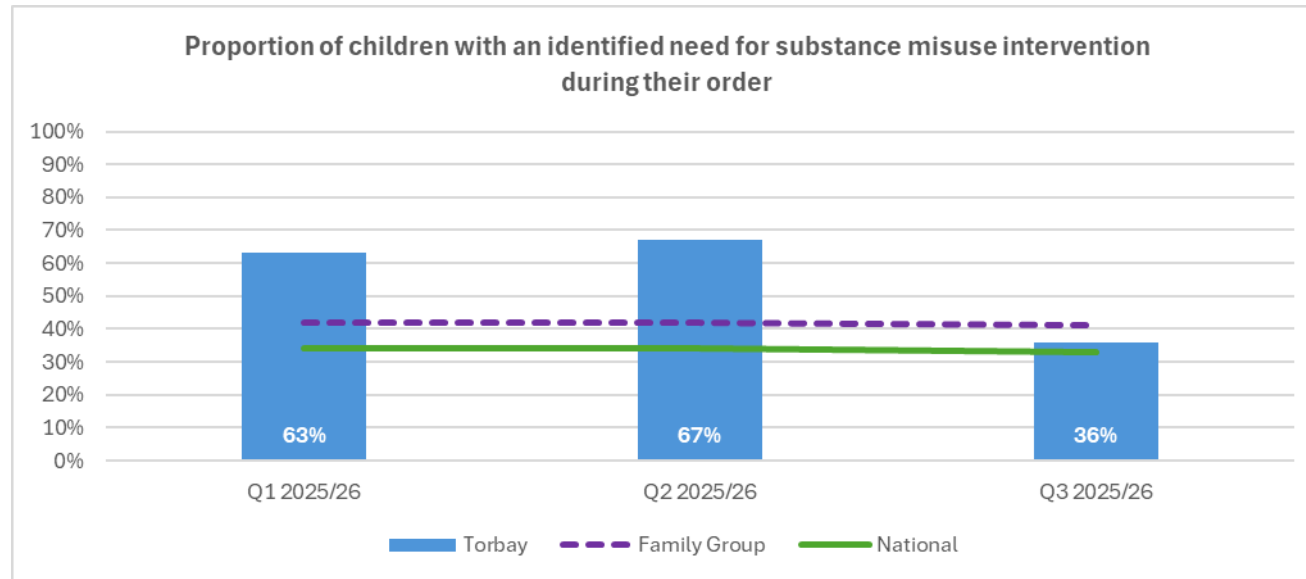


KPI 5: Substance misuse

This KPI measures the proportion of children identified as having a substance misuse need. Children in the youth justice system are particularly vulnerable to substance misuse.

Substance misuse screening is offered to all children as part of the assessment process with referrals made to the Torbay Youth Hub’s **Young Person's Drug and Alcohol Service** when a possible need is identified.

The proportion of Torbay children with an identified substance misuse need was above the national average for each quarter and often significantly so. The higher-than-average prevalence of substance misuse among children locally is reflective of a cohort presenting with increasingly complex and overlapping needs.

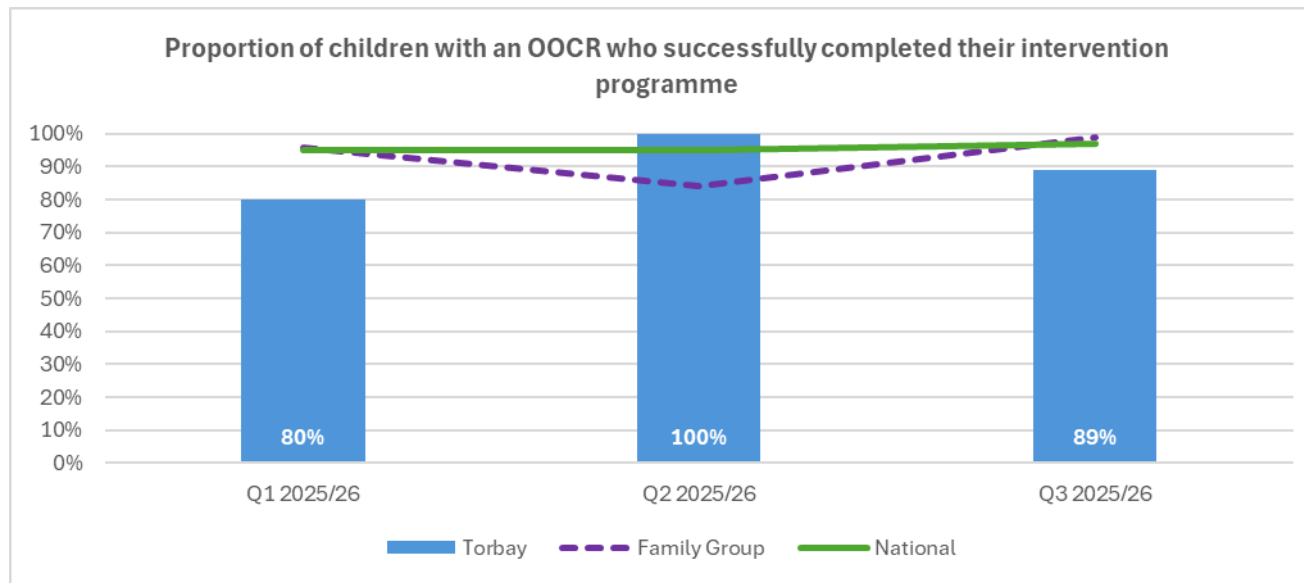


KPI 6: Out-of-court resolutions

This KPI measures the proportion of children receiving out-of-court resolutions (OOCRs) and their completion rates.

With an increasing number of cases managed through OOCRs, it is essential to ensure that assigned interventions are completed and that children achieve positive outcomes.

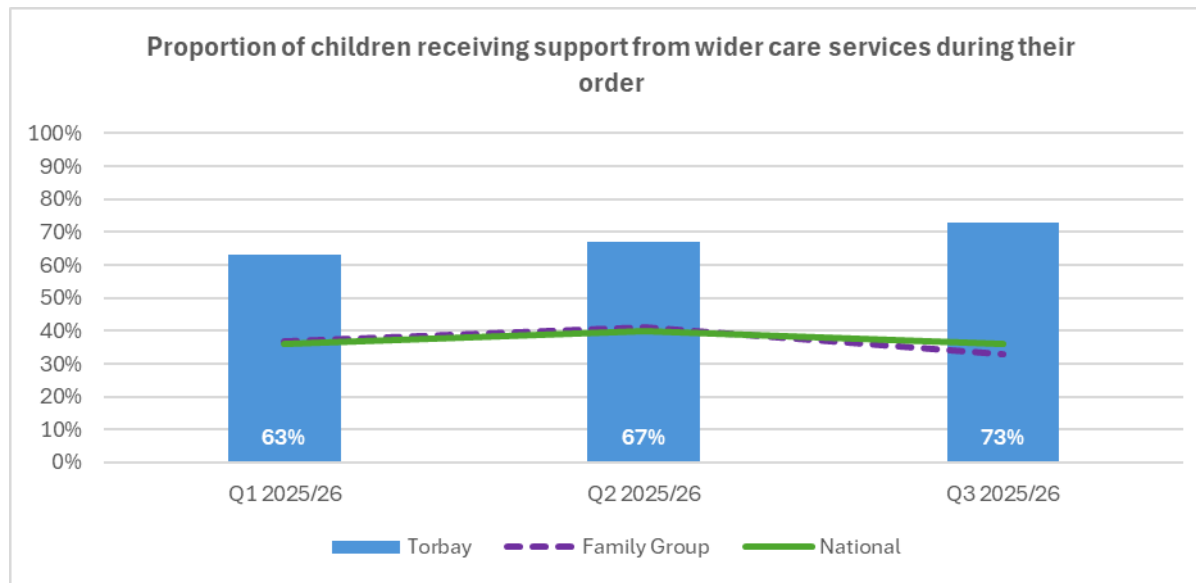
A high proportion of OOCRs are completed successfully; however, the small cohort size in Torbay leads to some variability in percentages. In Q1, 4 of 5 were successful; in Q2, 3 of 3; and in Q3, 8 of 9.



KPI 7: Wider Services

This KPI measures the proportion of children receiving support from wider care services during their order. Effective multi-agency working is essential to reducing offending and reoffending.

A significantly higher proportion of local children are supported by wider care services than both the family and national averages. This proportion has increased quarter on quarter.



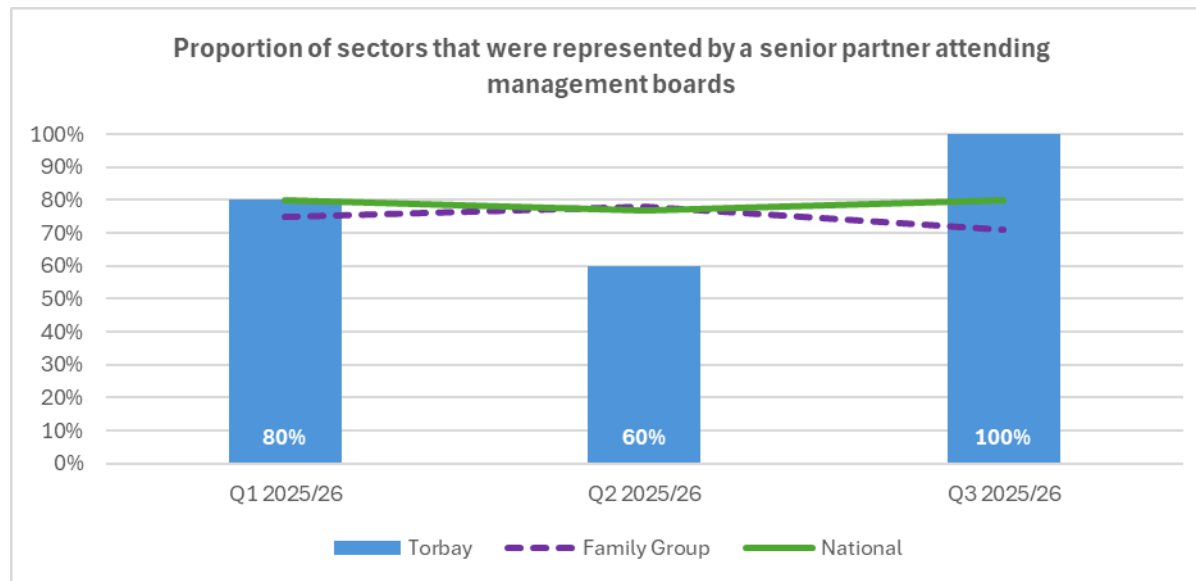
KPI 8: Management board attendance

This KPI measures the total number of sectors (out of five) that were represented by a senior partner attending YJS Management Boards.

YJS Responsibilities in Management Board Attendance:

- MBs are required to meet quarterly in line with the grant’s Terms and Conditions. Torbay aims to meet 6 times a year this cannot be reflected the YJB KPI because of the counting rules but practically this means there is increased oversight and engagement with the service
- Each MB should have clear, up-to-date terms of reference, a strong understanding of its accountability, and a proactive approach to driving change.
- It is essential that YJSs are represented at MBs by strong leadership and consistent senior-level attendance.

Torbay’s management board attendance from senior partners was above or equal to the benchmarks in two of the three quarters. In Q1 and Q2 a delegated representative was in attendance ensuring all sectors were represented each quarter.



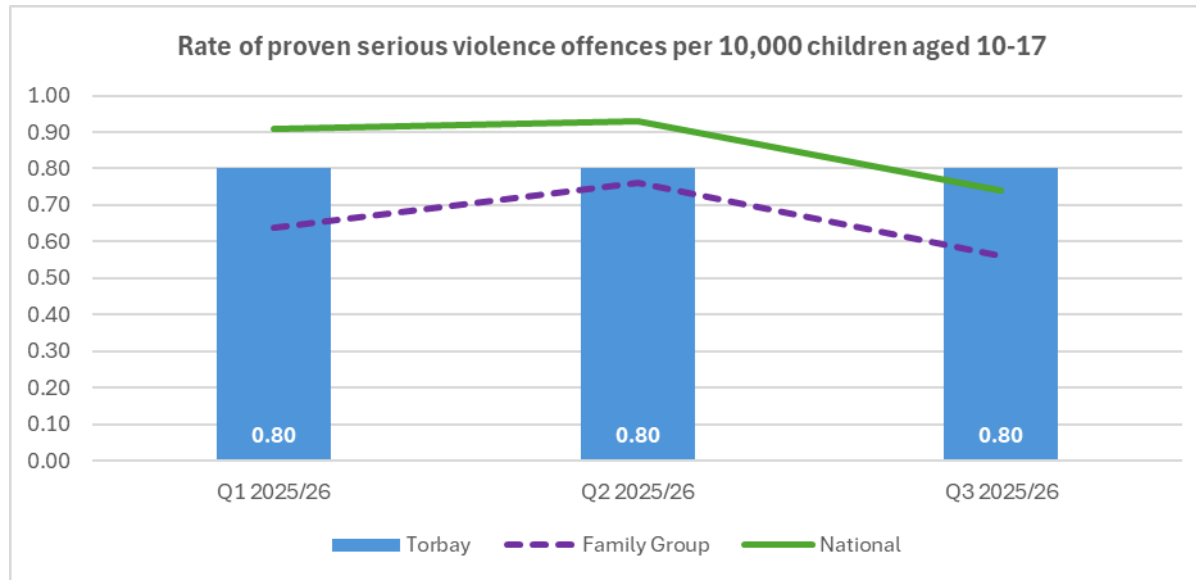
KPI 9: Serious violence

This KPI measures the rate of proven serious violence offences per 10,000 children aged 10-17, based on the number of children cautioned or convicted for these offences.

YJSs should work with the police, education, and health partners to ensure that children at risk of, or who have committed serious violence, receive the appropriate level of support for their needs.

YJSs should work with appropriate partners to prevent and reduce serious violence as part of their local strategy to implement the Serious Violence Duty.

The rate of 0.80 per 10,000 children aged 10-17 shown below is equivalent to one proven serious violence offence per quarter (2 * Robbery, 1 * Threats to kill). To achieve a rate below the family group Torbay needs to aspire to zero serious violence offences in the period.



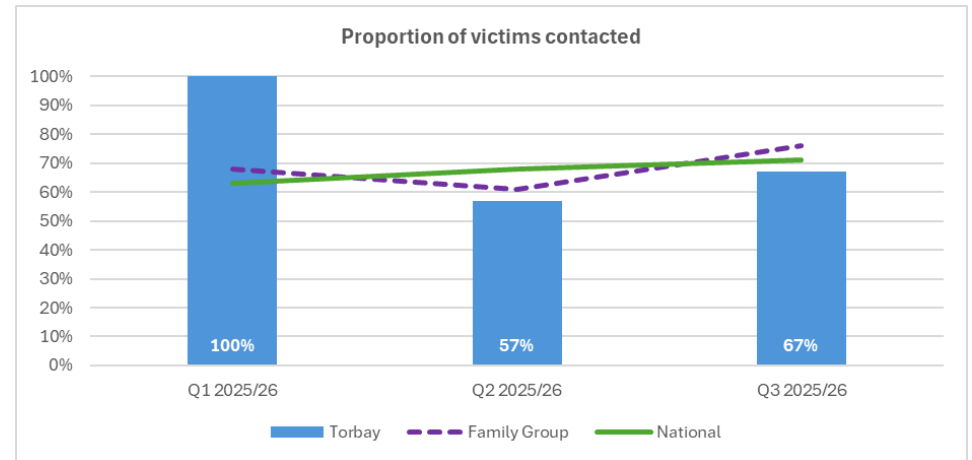
KPI 10: Victims

This KPI measures the number of victims of youth crime, and their level of engagement with Restorative Justice (RJ), as well as the support and information they receive about their case.

YJSs have a statutory duty to provide information and support to victims as set out in the Victims’ Code. YJSs need to ensure compliance with the Victims’ Code to protect the rights of victims.

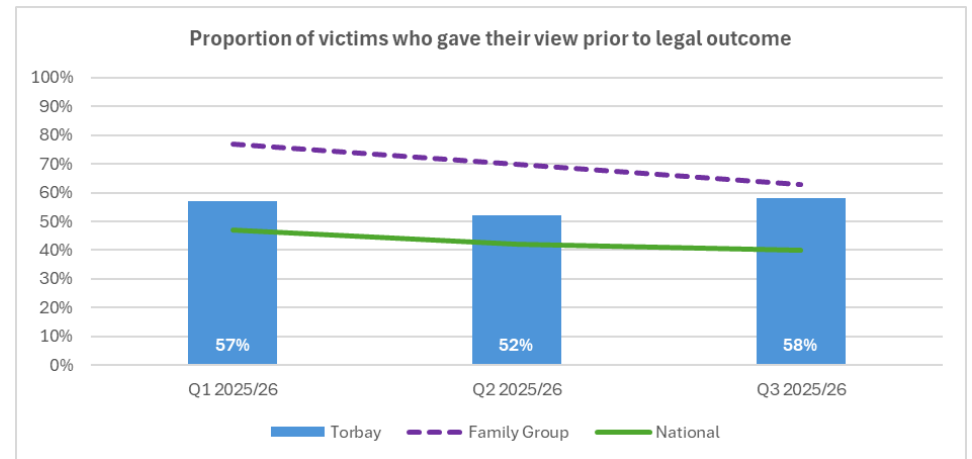
Proportion of victims contacted

The proportion of victims contacted by the YJS is variable across the three quarters. This is highlighted by all victims being contacted in Q1 but then dropping off into Q2. As part of the recent victim audit Torbay YJS is closely monitoring all recording on the case management system to ensure that is not under reported as we suspect the actual rate is much higher than this.



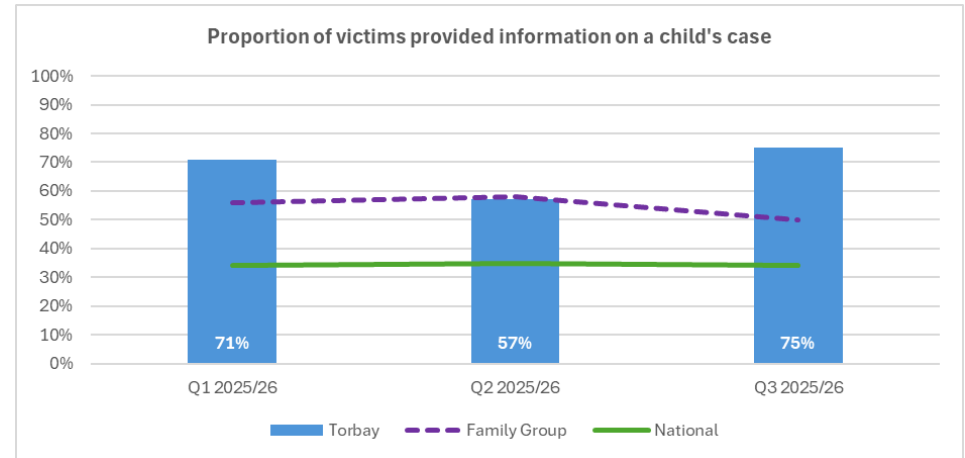
Proportion of victims who gave their view prior to legal outcome

The proportion of victims providing their views prior to the legal outcome in Torbay is consistently above the national average but below the Family Group.



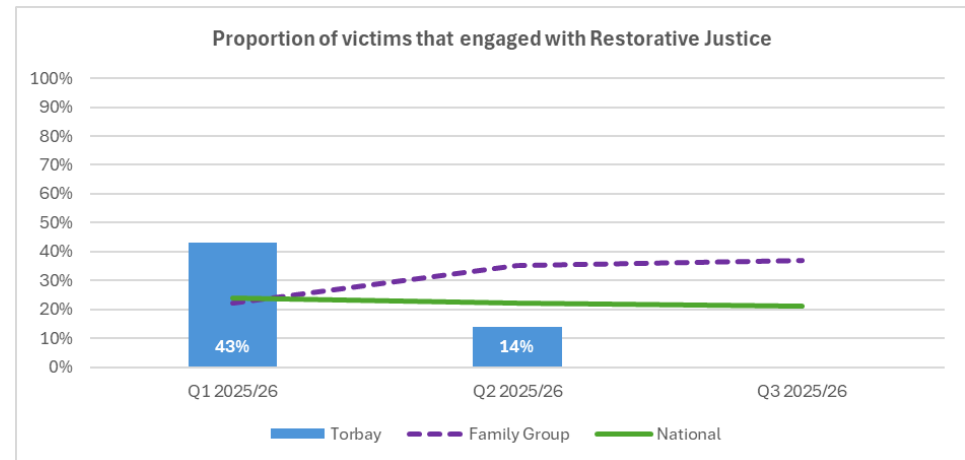
Proportion of victims provided information on a child's case

Torbay consistently performs above both the Family Group and national averages in providing victims with information on a child's case.



Proportion of victims that engaged with Restorative Justice

The proportion of victims engaging with Restorative Justice in Torbay has declined across the year (43% in Q1, 14% in Q2, and 0% in Q3), falling below both Family Group and national levels by Q3.



5. Challenges, Risks and Issues

The service has identified the following challenges that it needs to take action to ensure they don't impact on service delivery to children. A risk register has been created with actions and mitigations identified to address these circumstances.

- i) **First Time Entrants** – The service saw a significant increase in First Time Entrants (FTE) in 2023 and because the nature of the KPI (a rolling year) this adversely affected our performance until the end of 2024. Through significant focus and work in this area the service has significantly reduced the number of in FTE's 2025 but we remain just above the family group and national rates. To monitor performance this area the service holds quarterly reviews of all FTEs to check if all options for diversion we tried and provide feedback to workers and decision makers.
- ii) **Volatile Re offending rates** – due to our low numbers of children our rates of reoffending remain very volatile going from best in family group to worst. We will seek to do greater analysis of our most frequent offenders who have the most impact on these rates to see what else we can do or do differently to address these rates. This will be linked not the work within education to keep children in education.
- iii) **High rates of education suspension and exclusion** - Torbay has some of the highest rates of suspension and exclusion from school in the country. For children open to the youth justice system this is particularly true (77% of children worked with during 2025/26 had experienced one or more fixed exclusion and 21% had been permanently excluded from school), this coupled with low levels of attendance of children know to YJS means that they are not only receiving very limited education but are also not being seen or supervised through the school day. It is well evidenced that attendance at school is a major safeguarding factor as well as the positive effect on future life chances and success. Torbay YJS Board and staff team have identified this area as one we all need to seek to improve and both strategic and operational level. Torbay Education have delivered a number of pilots in local schools which have proved effective and the YJS will link with them to focus on the YJS cohort in the year ahead (see Improvement plan)
- iv) **Budget no Inflation increase** - The MOJ / YJB has confirmed the grant allocation for 2026-29 but it does not include any inflation uplift for the whole 3 years. The OPCC have confirmed their grant to YJS up until 2028, when they will be disbanded, as the same as last year again with no inflation increase. As over 90% of the YJS budget is spent on staffing it is predicated that due to salary inflation increase predicted at 3% per year we will have a budget deficit of £69,000 over the next 3 years.
- v) **Suitable available Childcare Placements and provision** - A few children under local authority care are placed in children's homes or other provisions. Last year, a very small number of children had to be placed in unregistered accommodation due to the national sufficiency challenges. At times this has resulted in the need for children to be moved to alternative placements away from Torbay, resulting in a number of caretaking arrangements with external youth justice services. The local authority does not commission either PACE or Remand beds and there is also a national

and local shortage of placements which makes this practically impossible and if beds were ‘held vacant’ it would only increase the pressure on the care system. Children's Services believe that a child centred approach should be maintained, and children should return home unless the offence is severe enough to warrant police custody until they appear in court.

The Youth Justice Plan for the year ahead:

6. Child First

Torbay Youth Justice Service (TYJS) supports the Youth Justice Board’s (YJB) vision of a ‘Child First’ youth justice system, which they define as a system where all services: -

- **Prioritise the best interests of children** and recognising their particular needs, capacities, rights and potential. All work is child-focused, developmentally informed, acknowledges structural barriers and meets responsibilities towards children.
- **Promote children’s individual strengths and capacities to develop their pro-social identity** for sustainable desistance, leading to safer communities and fewer victims. All work is constructive and future-focused, built on supportive relationships that empower children to fulfil their potential and make positive contributions to society.
- **Encourage children’s active participation, engagement and wider social inclusion.** All work is a meaningful collaboration with children and their carers.
- **Promote a childhood removed from the justice system,** using pre-emptive prevention, diversion and minimal intervention. All work minimises criminogenic stigma from contact with the system.

The Child First approach is a priority in this plan as evidence supports this as the best approach to achieve better child outcomes. Much of this is explored in the research by Loughborough University alongside UKRI, Child First Justice – the research evidence base. The summary report is [here](#).

Torbay YJS has significantly improved its feedback mechanisms for children, parents and victims, we are also reviewing how Referral Order Panels can be more Child First and this will be led and academically reviewed by a local University. Children have also stated that they want more things to do and the service ran a pilot Summer Activity programme in 2025 with funding from Serious Violence Fund and Holiday Activity and Food fund (HAF) we hope to run a similar programme in 2026 if we can access further funding.

Parent Feedback

‘I got a lot of support and group leader Jade did great, what was the best thing about the parenting group ‘knowing I wasn’t alone’

7. Voice of the Child

Torbay Youth Justice Service gathers feedback from children in a variety of different ways including: -

- Informal Feedback recorded by workers and collated.
- Self-Assessment Questionnaires (SAQ) are completed by the child and separately by their parent or carer at the start, review and the end of orders. These are used to gather data to help inform assessment, and the development of co-created intervention plan.
- User Feedback Surveys – these are more general feedback forms to gather data about the child’s (as well as the parent or carer and the victim) overall perception of the quality of the service they received including things such as timeliness, location of delivery and did it make a difference.
- Complaints – the service has received no complaints this year.

All of our feedback forms are now available electronically which has increased accessibility, confidentiality and increased the ease of data analysis from the current paper only format. We now are developing a statistically reliable range of data which is being analysed by the service management team, feedback to staff team and reported to the Service Boards alongside any improvement or change activity that is required.

Feedback is reviewed quarterly and information from feedback is used to develop practice in the service. A participation group has been established to have an opportunity for young people to review any changes in practice in the team and to provide support and insight in terms of any wider changes to the service. This group are also tasked to represent the wider community in respect of highlighting the impact of youth crime and what might help to reduce it.

Young person’s satisfaction survey:

Number of responses

- 2024/25 (26) vs 2025/26 (18)

Overall Experience

Children continue to report **very high levels of satisfaction** with Youth Justice Service support.

- 94.4% of respondents in 2025/26 rated their overall support as Good or Excellent, an increase from 84.6% in 2024/25.
- While “Excellent” ratings reduced slightly, there was **a clear shift away from ‘Okay’ responses towards ‘Good’**, showing more consistent positive experiences.

Relationships & Practice Quality

- Respect remains exceptionally high (over **83% ‘Excellent’** in both years).

- Significant improvement in children feeling **trusted, understood, and known**, with “Excellent” ratings for *being understood* rising to **77.8%**.
- Qualitative feedback consistently highlights **positive relationships with named workers**, trust, and feeling listened to.

Communication & Responsiveness

- Satisfaction with **initial contact times** decreased **85% to 72%** (Excellent/Good ratings)
- Perceptions of responsiveness from workers improved substantially:
 - “Excellent” ratings for response times increased from **42% to 61%**
 - This suggests improved communication, accessibility, or clearer expectations.

Safety & Environment

- Safety remains a key strength, with nearly **9 in 10 young people feeling safe**.
- Despite a shift towards community-based and public-space meetings, **feelings of safety and ease improved overall**.
- Slight reduction in “Excellent” confidentiality scores suggests privacy in non-office settings should remain a practice focus, particularly as **two children rated confidentiality at home as “Poor.”**

Participation & Planning

- Fewer young people rated planning processes as “Excellent” (62% to 33%), although **over 83%** still rated this area Good or Excellent.

Access to Wider Support

- Most young people said they received all the help they needed.
- Housing remains the most common unmet need across both years.

Overall Summary

The Youth Justice Service continues to deliver high-quality, relationship-based practice. Improvements in trust, responsiveness, and understanding offset small declines in structured areas such as planning and initial contact times.

Overall satisfaction is strong, stable, and improving.

Parent/Carer satisfaction survey

Number of responses

- 2024/25 (31) vs 2025/26 (13)

Overall Experience

Parent and carer feedback demonstrates exceptionally high and improving satisfaction with the Youth Justice Service.

- In 2025/26, 100% of parents and carers rated the overall help and support they received as Good or Excellent, compared with 93.5% in 2024/25.
- The proportion rating support as **Excellent** increased markedly year on year, indicating a strengthening overall experience.

Relationships, Trust and Respect

Relationships between workers and families are a significant strength of practice.

- In 2025/26, all respondents (100%) reported that they were treated with respect, trusted the Youth Justice Service worker, and felt that the worker took time to understand their child.
- Qualitative feedback consistently highlights workers' ability to build rapport, communicate honestly, and engage both parents and children effectively.

Communication and Responsiveness

Communication with parents and carers is **strong and improving**.

- Parents reporting that next steps were explained clearly increased from **80.6% 'Excellent'** in 2024/25 to **100% 'Excellent'** in 2025/26.
- Perceptions of timely responses to calls and messages also improved, this follows a small number of historic comments noting difficulties contacting services early in involvement.

Safety, Comfort and Practical Arrangements

Parents and carers report high levels of safety and comfort when engaging with the service.

- The proportion feeling safe and at ease during meetings rose to **100% Good or Excellent in 2025/26**.
- Home remains the most common meeting location, supporting accessibility and engagement.
- Confidentiality and ease of access both improved year on year.

Access to Wider and Specialist Support

- Confidence in accessing other services, including education, health, housing, and emergency services, improved significantly in 2025/26.
- Where unmet need was identified, this related primarily to wider system pressures (e.g. mental health or housing provision) rather than Youth Justice Service practice.

Supporting Parents to Support Their Child

There has been a notable improvement in how supported parents feel to help their child.

- Large year-on-year increases were seen in parents feeling supported to:
 - Explore ways to support their child
 - Understand child exploitation risks
 - Improve parent-child relationships
- Reduced “Not Applicable” responses in 2025/26 suggest support is more targeted and relevant.

Parenting Worker Support

- Uptake of Parenting Worker support increased from **32.3% (2024/25)** to **53.8% (2025/26)**.
- Feedback from those receiving this support is **overwhelmingly positive**, particularly in relation to understanding family circumstances and providing non-judgemental support.

Overall Summary

- Parent and carer **satisfaction is very high** and improving
- Relationship-based practice is a clear strength
- Improvements are evident across **communication, trust, safety, and empowerment**
- **Areas for development** relate mainly to timing of intervention and external service availability, not service quality

Victim satisfaction survey

Number of responses

- 2024/25 (14) vs 2025/26 (7)

Overall Experience

Victim feedback shows **generally positive experiences of Youth Justice Service support**, with some more polarised views in 2025/26, driven by a small number of complex cases.

- In **2024/25**, **85.7%** of victims rated the overall service as Good or Excellent.
- In **2025/26**, this reduced to **71.4%**, reflecting a small number of victims expressing dissatisfaction with outcomes rather than staff support.
- The proportion rating the service as Excellent increased, indicating that experiences were either very positive or, in a small number of cases, significantly negative.

Relationships, Trust and Respect

Relationships with Youth Justice Service staff remain a **clear and consistent strength**.

- Across both years, the vast majority of victims felt **treated with respect and able to trust their worker**.
- Even where victims disagreed with outcomes, feedback frequently acknowledged **professionalism, empathy, and supportive communication** from staff.

Feeling Supported and Listened To

- Most victims reported feeling **supported and listened to throughout their involvement**.
- Lower scores in 2025/26 are closely linked to **frustration with decision-making, timescales, or outcomes**, rather than the quality of interaction with workers.

Communication and Responsiveness

- Communication remains a **key strength**, with some mixed trends year on year.
- Responsiveness to calls and messages improved in 2025/26, with a higher proportion rating this as Excellent.
- Understanding of “what would happen next” dipped slightly, particularly in ongoing or unresolved cases, highlighting the importance of managing expectations where outcomes are delayed.

Safety, Accessibility and Meeting Arrangements

- Victims generally report **positive experiences of meeting arrangements**.
- Perceptions of feeling **safe and at ease improved year on year**.
- Accessibility of meetings also improved, with **remote contact** continuing to be an effective and preferred option for many victims.
- Confidentiality remained consistently strong across both years.

Restorative Justice (RJ)

Restorative Justice is viewed positively where it is appropriate and chosen.

- **All victims who took part in RJ reported that it was helpful.**
- In 2025/26, **all victims were offered the opportunity** to communicate with the person who caused harm.
- Lower participation rates reflect **choice, readiness, and suitability**, rather than lack of offer.

Perceptions of Justice Outcomes

This is the **most challenging and sensitive area** of feedback.

- Just over half of victims in 2024/25 felt justice was served; this reduced in 2025/26.
- Dissatisfaction was linked to:
 - Case outcomes
 - Delays in proceedings
 - Perceived lack of proportionality
- Importantly, **negative views of justice outcomes did not usually translate into negative views of Youth Justice Service staff**, who were often praised even in critical responses.

Overall summary

- Victims consistently experience **respectful, supportive, and professional practice**
- Communication and responsiveness are **strong and improving**
- Restorative Justice is **highly valued by those who participate**
- More negative feedback reflects **system outcomes and delays** (particularly related to initial contact), not staff conduct

- Small sample sizes mean individual cases significantly affect year-on-year trends, important to **boost responses to a more representative sample size.**

Complaints

There have been no complaints received in 2025-26

Summary and next steps

Feedback from children is generally very positive about their experience of the youth justice service. This is triangulated between the feedback mechanisms and informal feedback received by family. It may be that the more feedback that the Youth Justice Service receive that this feedback leads to more change as the range and depth of information increases. The Youth Justice Service aims to receive feedback from all young people completing their Court Orders.

The Victim Focus group was established in 2024 and one of the initiatives to come from it was to invite a local police inspector to the group to talk about police process, support and communication with victims. Additionally, the Police and Crime Commissioner Alison Hernandez attended at the request of one of the victims to talk about her specific case which has led to a multi-agency review of the case.

Victim feedback is generally positive however some victims do not feel that justice that was served i.e. that the incident was resolved appropriately, we have revised the survey question to ask for more details about why they justice has not been served and will report back to the board when we have the results.

8. Resources and Services

Torbay Youth Justice Service Budget is a 'pooled' budget held by Torbay Council on behalf of the Board and the Strategic Partners and funding bodies. The annual budget is approved by the Strategic Board for the year ahead and expenditure is against the budget is reviewed six times a year at each Board meeting. Operational day to day expenditure is approved by the Head of Service under the financial regulations of Torbay Council and in line with any criteria for which the funding is given. All funding is used for the primary roles of the Youth Justice Service i.e., prevent offending and re offending, the delivery of our Improvement Plan and achieving the [Key Performance Indicators](#) laid out in this plan.

The two largest funders are Torbay Council and the Youth Justice Board (YJB) each giving approximately one third of the overall budget with the final third made up of other partnership contributions and funding bodies for specific pieces of work. Over 95% of the budget is spent on staffing who are our key resource for delivery to children, with the remaining 5% spent on resources, facilities and consumables. Additional to the funding from statutory partners

the service receives ‘contributions in kind’ from organisations who ‘second’ staff to the service these include: - Children and Family Health Devon, Devon and Cornwall Police, and the Probation Service. See [Appendix 2](#) for a more detailed breakdown of the budget.

9. Board Development

An induction programme for board members is delivered to all new members. Additionally, there are planned inputs at Strategic Management Board to update members on significant changes in local or national practice as well as inputs from external examples of best practice and development. In the last year Board members have both been part of and received briefings following Victim, FTE and Reoffending audits on the quality of the work of the service. In April 2026 at the combined ‘Away Day’ the Board received a number of updates and briefings about performance and national changes and activities to set the priorities for the service in the year ahead. Members of the board have also attended staff meetings and case planning in the last year to meet the staff and develop better understanding of the work of the service.

At each board meeting staff from the service attends to present either case studies of the work they do directly with children, parents, or victims so the boards or provide updates on aspects of operational level work.

10. Workforce Development

The service has had a stable staff team for a number of years with limited turnover which has enabled the development of an experienced and well-trained team. In 2026 the service will see a number of positive moves within the staff team as a number of people have been promoted, and others changed career paths so it will be good to have some new people in the team bringing new ideas and fresh perspectives. As stated elsewhere for the first time we combined the Board and staff Away days and did so in our new building which although not entirely open was finished enough to hold us for the day. There was very positive feedback from both the board and the staff team that it was great to do the review and planning together and to meet on a more social level to get to know each other.

- All staff working with children are trained in Restorative Justice 3-day course provided through Torbay Council.
- All case workers are trained in AIM3 (Assessment and Intervention of Harmful Sexual Behaviour).
- The service’s Trauma Champion was also the Trauma Lead for the Southwest and has brought considerable knowledge and training to the staff team.
- Team Managers are trained by [NOTA](#) re: Autistic Children & People Displaying Problematic or Harmful Sexual Behaviour
- A further member of the team has signed up for the Domestic Abuse Risk Assessment for children tool training who will champion this in the team and complete train the trainer.
- 2 staff members have completed the Youth Justice Effective Practice Certificate (YJEPC) and one has completed a Degree in Youth Justice in 2025.
- 3 staff have attended training on Child to Parent Violence.
- 4 staff have attended training on Pre-Sentence Report (PSR) writing.

- Staff access mandatory training through Torbay Council’s ‘iLearn’ online training provision which tracks inductions, mandatory training and required refreshers for all staff directly employed, seconded staff can also have accounts added or access training in their home organisation.
- [Appendix 3](#) is the timetable of training that took place last year and into 2024-25

11. Evidence-based practice and innovation

Child First

In 2025 Torbay YJS completed the YJB Child First Toolkit – this involves assessing ourselves against the performance and best practice guidance and producing a plan about how the service can improve. The service has largely completed the actions this will be reviewed early in 2026. Through links with the Community Protection lead on the YJS Board we did a presentation on Child First practice to the whole ASB and town marshals and subsequently they will also be completing the Toolkit for their service area in 2026.

One of the areas that has also been challenged by the Child First approach is Referral Orders and to this end we have made changes to how these operate which has led to an academic review by South Devon College University of the Referral Order Panel and process to make it more participative for children. This should be published in 2026.

Victim Work

In late 2025 Torbay YJS invited the three other YJS in Devon and Cornwall to take part in an audit of our victim work in Torbay alongside members of our Board and the staff team. In total we had eight auditors who reviewed the case work of 26 victims who had been in contact with the service against the new HMIP standards. There were many areas of good practice identified specifically: - high levels of engagement by victims, individualised support, timely response to meet victims needs and wishes and well evidenced. Areas for improvement were also identified including more contact with the child case worker to be evidenced, improvements in victim safety planning, and poor information re victim details (eg ages, ethnicity etc). An improvement action has been created and largely completed by March 2026. All involved reported that it was both professional useful in terms of helping Torbay review our victim work but also learn from each other about how we work and share best practice. This type of audit has now been carried out in Devon, and both Plymouth and Cornwall plan to do the same.

MACD

Multi Agency Case Discussion (MACD) – this is an aspect of the HMIP inspection regime which Torbay practised last year for 2 children known to the service and of which the learning was found useful not just in terms of inspection process but also in terms of reviewing the child’s case. The service repeated this in early 2026 and again was found to be useful process the reports will come before the next board meeting in May 2026 with recommendations for practice improvements across the partnership.

Trauma Recovery Module

The service has well established practice in using the Trauma Recovery Model (TRM) as a tool to help understand children’s level of functioning and plan interventions based on this. All staff have been trained in the TRM approach. The service has a member of staff who is a ‘Trauma Champion’ to support the development of the nationally recognised (within youth justice services) Enhanced Case Management (ECM) approach. The Torbay Trauma Champion also shared a role leading the Trauma Champions across the Southwest indicating her high level of expertise.

Summer Activities

The Prevention service was reviewed in 2024 and evidence showed that 81% of children who received an intervention did not go on to offend and because of this success has been made permanent. In early 2025 the service started an initiative providing an ‘Adventure Activity group’ for children open to the service and which gave children the opportunity to try a range of positive activities and events that they will probably not had the chance to do previously. Engagement has been very positive and they were able to expand this during school holiday period through funding from the Serious Violence Fund and Holiday Activity and Food (HAF) funding. Due to the nature of the children we work with group numbers were small and the programme was tailored to them, it was deemed successful in terms of uptake by children and from the children and their parents’ feedback. The service plans to provide this again in 2026 and is looking for funding

Parenting work

The service has a very active parenting worker who supports many of the parents of children open to the service and quite often a long time after the children have closed to us. To help manage numbers some work is delivered through group work using the [Who’s in Charge](#) programme which is a 9 week programme for parent whose child is being abusive to them or is out of parental control. Feedback from parent sis very positive

Feedback from a Parent

Most helpful thing – ‘changing my perspective which enabled me to make positive changes’.

12. Evaluation and Standards for Children

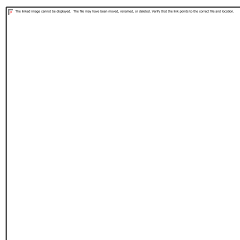
The service has carried out a high number of audits and quality assurance measures in the last these include: -

- a) **Multi Agency Case Discussions (MACD).** The service has carried out 4 MACD on children known to the service, these were carried out using the HMIP format that would be used in an actual inspection and were carried out to both practice the process prior to an inspection but they have been recognised as a very useful learning tool to reflect on our multiagency case management.

- b) Victim Audit** – In November 2025 8 staff were involved in auditing the case records of 26 victims known to Torbay YJS against the new HMIP standards for victims. To increase our learning colleagues from the 3 other YJS’s in the Devon and Cornwall were invited to take part as well as members from the Torbay YJS Board resulting in representatives from all 4 taking part. This combined with 4 staff from Torbay YJS established 4 pairs who audited the 26 cases. This was the first audit of this type for all YJS’s in the area and all staff commented what a useful process it was for both Torbay staff but also for the external organisations to understand both Torbay processes and share their own practices. All 3 other YJS’s indicated that they would be doing something similar in their own service in the near future. An action plan was developed to address key learning and this should be completed in 2026.
- c) Child Criminal Exploitation Multi Agency Case Audit (CCE MACA).** Led by Torbay Safeguarding Children Partnership (TSCP) 10 cases were audited, 9 of which were known to the Youth Justice. YJS produced its own Action Plan following the findings which is monitored by the Strategic Board.
- d) CEO Deep Dive Audit (CEO DD)** – This audit was completed following previous audits that commenced after the last HMIP inspection of the service. Good progress in many areas was noted from previous audits and outstanding areas for improvements were noted and have been prioritised in the new action plan produced. All improvement activity has now been completed and the plan formally closed.
- e) After Action Review C95** – This audit was completed following a murder by C95 a former looked after child who at the time of the murder was ‘relevant child’ meaning they were receiving support from children’s services and was previously known to the YJS. We are currently still waiting the final report to come from the TSCP.
- f) After Action Review C103 (AAR C103)** – This audit has been completed of a specific case that took nearly 3 years of investigation before it was resolved just short of the child’s 18th birthday. The final report and action plan has been completed and all aspects have been closed and signed off by the TSCP Executive Board
- g) Prevention Service Review** – In December 2023 the service completed a multi-agency review of the work and performance of the Prevention / Turnaround and made recommendations on improvement activity which will be put into place in early 2024. Subsequently
- f) Case File Audits** We have increased the number and reporting of full case file audits and will be reporting to this to both boards in early 2026-27.
- h) Accreditations**



In 2022 and again in 2025/26 the service achieved the prestigious Microlink Special Education Needs and Disability (SEND) Quality Mark for youth justice services with a Commendation for Child First practice, this required the service to audit current practice and address any gaps identified. Good practice within the service was recognised as part of the SEND inspection of Torbay.



Torbay Children's Services of which Torbay Youth Justice Service is a part, have been awarded Registered Restorative Status by the [Restorative Justice Council](#), the first Children Services in the UK. The Youth Justice Service was part of the audit of training, working practices and policies to achieve this status helped by our experience of working in Restorative Justice over a long period of time.

13. Priorities for the coming year

The full list of priorities are laid out in the [Service Development Plan](#)

- Being more Child First focused in all aspects of our service delivery.
- Ensuring children are accessing appropriate education or training provision suitable to their needs and abilities.
- Maintaining the reduction in the number of First Time Entrants so that the yearly rolling target reduces to below our statistical neighbours.
- Reduce the re offending rates of children open to the YJS
- Reduce criminal exploitation of children in Torbay by increasing their resilience and focusing on the adults who exploit them
- Increasing our focus and range of support for victims.

14. Service Development

The service has a comprehensive training plan for staff see [Appendix 3](#) to keep staff updated and refreshed re best practice in Youth Justice. Staff are also involved in audit work for the service last year we completed audits against the HMIP ETE Theme Inspection findings and against the Victim Code of Practice. We have also a very competent staff champions for both Restorative Practice and Trauma.

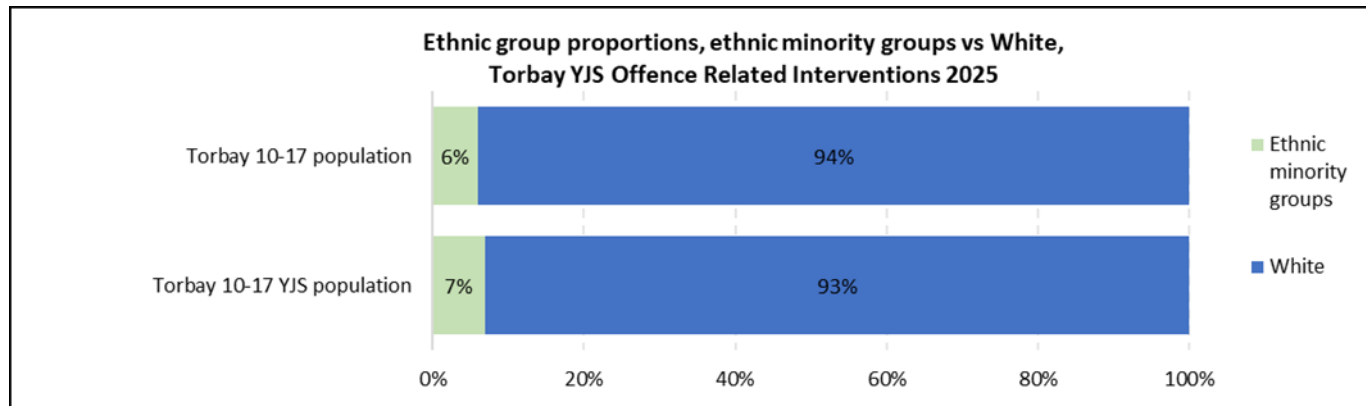
National Priority Areas

15. Children from groups which are over-represented.

Ethnic Disproportionality

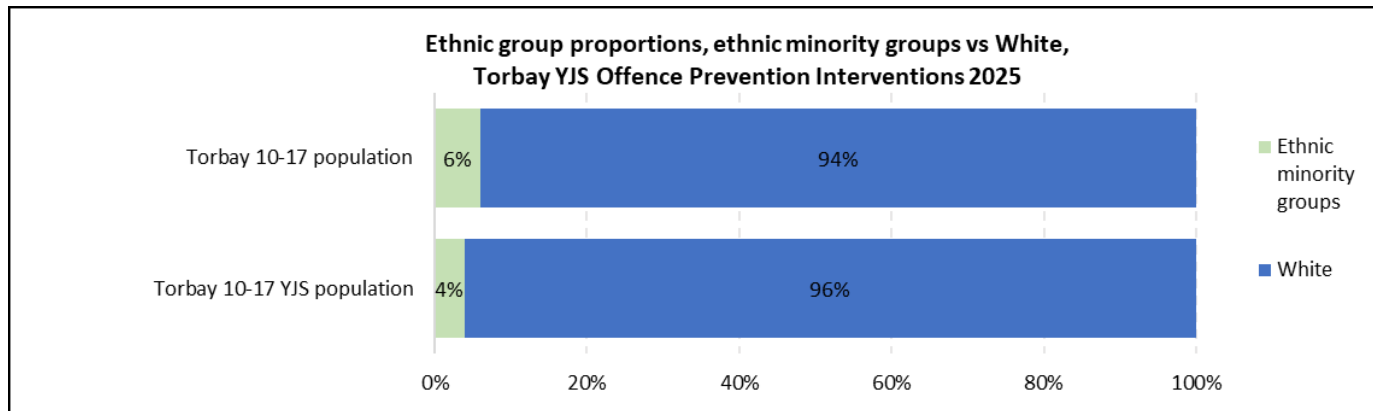
The charts below show a comparison of the ethnic composition of Torbay YJS population (all children worked with including prevention, diversionary and statutory interventions) with the local area 10-17 year old population (2021 census). Due to small numbers data has been aggregated for children from the Asian, Black, Mixed and Other ethnic groups into the ethnic minority group.

Offence related interventions:



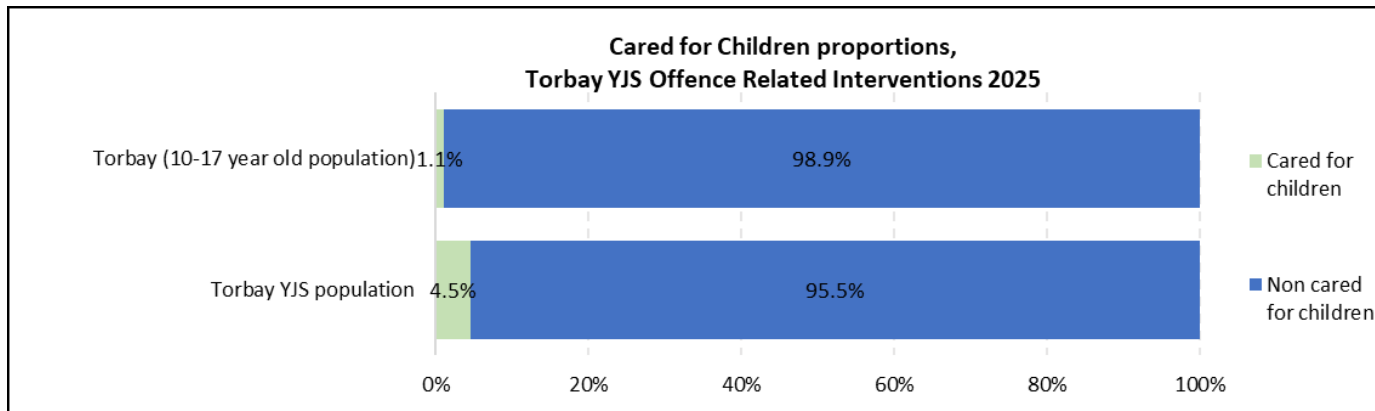
When comparing the YJS cohort to the wider population, there is no indication of disproportionality. Our cohort is composed of 6% ethnic minority group children and 94% White children, which closely aligns with the wider population makeup of 7% and 93% respectively. The small 1-percentage-point difference is not statistically meaningful and suggests that the representation of ethnic minority groups within our cohort reflects the broader population proportions.

Prevention and Turnaround interventions:



A comparison of the prevention cohort of children’s demographic composition, with that of the wider Torbay 10-17 year old population, indicates no evidence of disproportionality. The minimal variance, and small cohort size, is not statistically significant and suggests that the cohort is broadly reflective of the makeup of the wider population.

Comparison of proportion of cared for children between YJS population and local population.



Cared for children are overrepresented within the YJS. 4.5% of the children supported by the YJS were cared for, this compares to 1.2% of the local under 18 population. None of the children who were open on Prevention interventions were cared for children.

Deprivation

The Index of Multiple Deprivation (IMD) is the official measure of relative deprivation in England and is part of a suite of outputs that form the Indices of Deprivation (IoD). It follows an established methodological framework in broadly defining deprivation to encompass a wide range of an individual's living conditions. People may be living in poverty if they lack the financial resources to meet their needs, whereas people can be regarded as deprived if they lack any kind of resources, not just income. (Ministry of Housing, Communities & Local Government 2025). Areas are then ranked depending on their level of deprivation and grouped into deciles.

The table below shows the number of children living in each decile. Decile one being the most deprived and decile ten the least deprived.

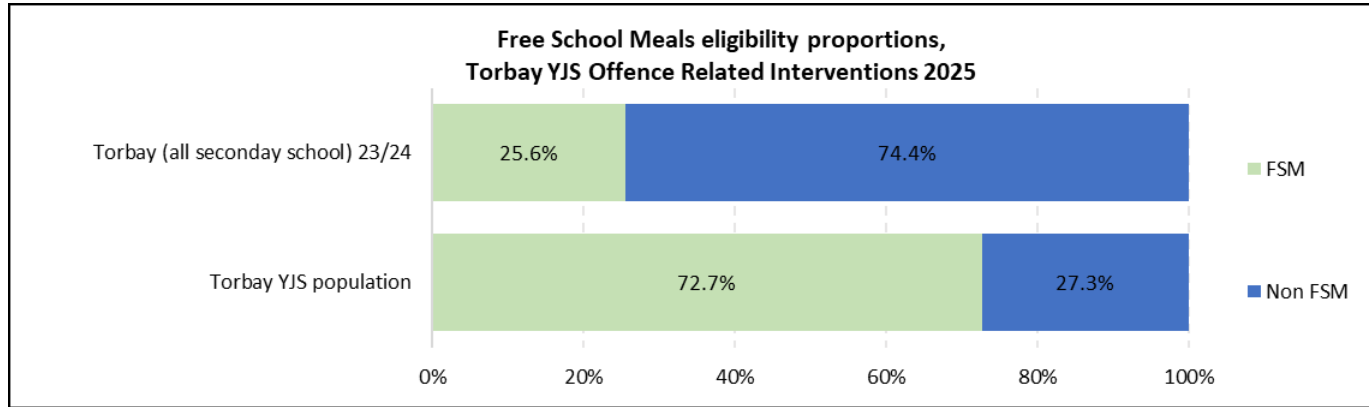
Index of Multiple Deprivation Decile	Offending		Prevention		All YJS	
	No. children	% Children	No. children	% Children	No. children	% Children
1 (The most deprived 10%)	10	23.3%	8	30.8%	18	26.1%
2	15	34.9%	3	11.5%	18	26.1%
3	4	9.3%	4	15.4%	8	11.6%
4	4	9.3%	4	15.4%	8	11.6%
5	8	18.6%	6	23.1%	14	20.3%
6	2	4.7%			2	2.9%
7						
8						
9			1	3.8%	1	1.4%
10 (The least deprived 10%)						

26% of Torbay children known to the YJS live in areas that fall into the 10% most deprived in England. (In 2024 this was 39%).

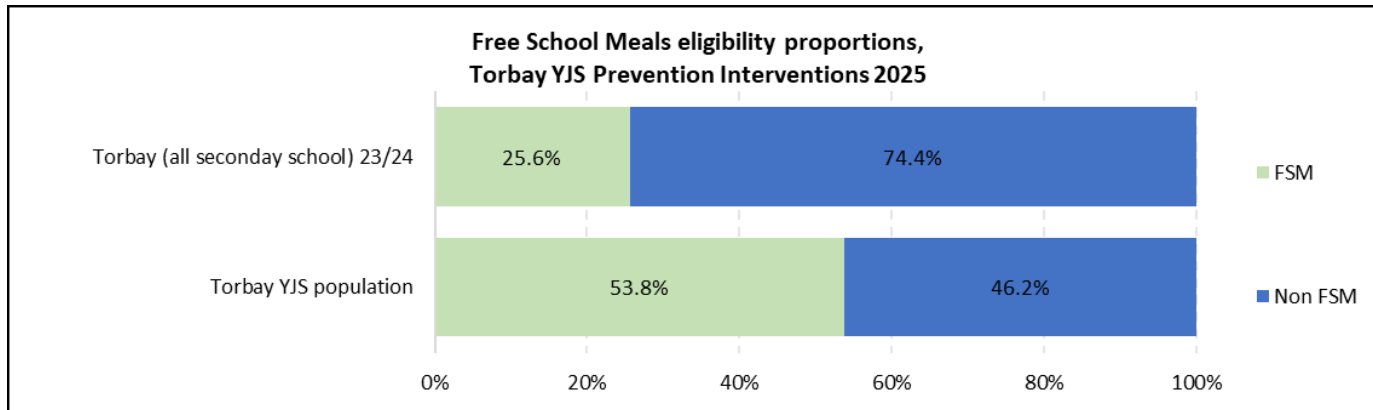
64% of Torbay children known to the YJS live in areas that fall into the top 30% most deprived in England. (In 2024 this was 82%).

Comparison of proportion of free school meals eligibility between YJS population and local secondary school population.

Offence related interventions:



Prevention and Turnaround interventions:

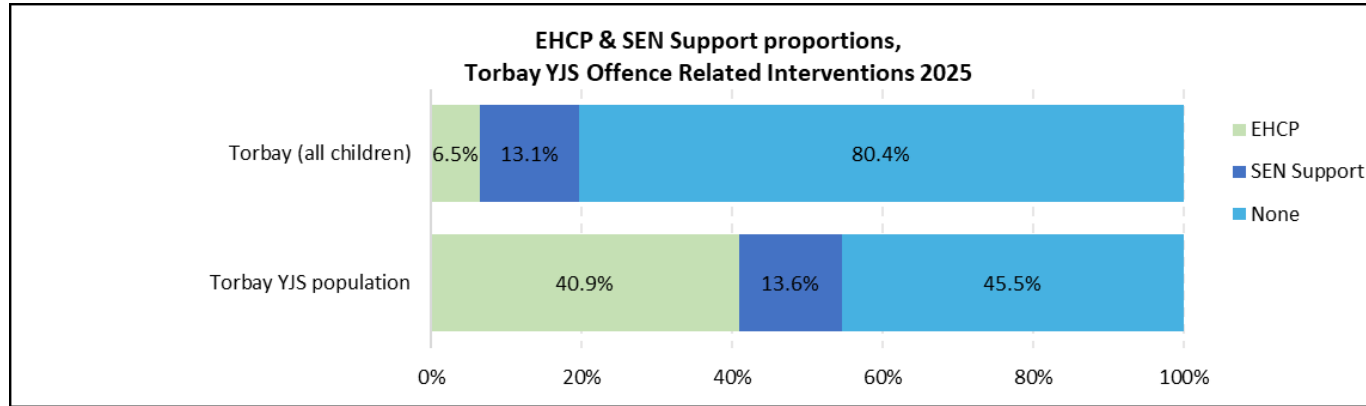


The proportion of children in the YJS who are eligible for free school meals is significantly higher than in the wider population.

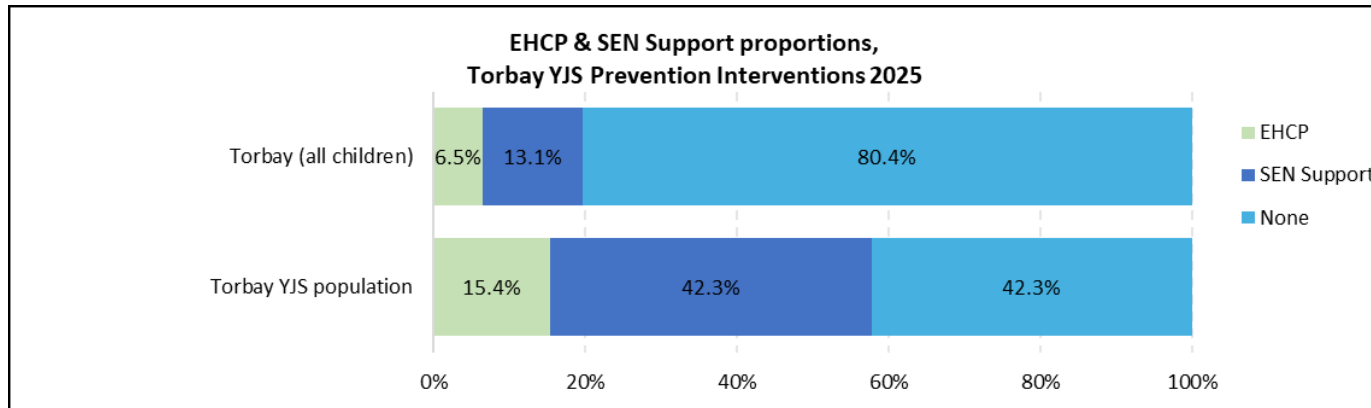
Special educational needs and disability (SEND)

Comparison of proportion of children with Education, Health and Care Plans (EHCP) and Special Educational Needs (SEN) Support between YJS population and local population.

Offence related interventions:



Prevention and Turnaround interventions:



The proportion of children within the YJS who have an EHCP, and also those that have SEN Support is significantly higher than that for all children living in Torbay.

16. Policing

Torbay Youth Justice Service has developed strong links with Devon and Cornwall Police, the Police and Crime Commissioner and the Local Criminal Justice Board (LCJB). Torbay Youth Justice Service has played a key role in working with the Police and other partners to develop the new Child First Pathway Protocol and helped instigate the Child Centred Policing Team covering Torbay and South Devon. The new Protocol was launched in autumn 2025 and has increase the range of options for Out of Court Resolutions for children including Deferred Prosecution Scheme (DPS). The Child Centred Policing Team has brought together all child focused Police and resources under central management through one Inspector who will oversee all level one (low level) police investigations and oversight for children suspected of committing a crime in the South Devon area. It already showing an increase in the coordination of children who offend and lead to swifter resolutions of investigations and decisions.

17. Prevention

The Youth Justice Board (YJB) defines Prevention as support and intervention with children (and their parents / carers) who may be displaying behaviours which may indicate underlying needs or vulnerability. In practice this involves a tiered approach of early and targeted prevention. The aim being to address unmet needs, safeguard, promote positive outcomes and stop children entering the formal youth justice system.

In the summer of 2022 Torbay Youth Justice Service expanded its prevention offer in recognition of the numbers of children known to other services who were entering the formal Youth Justice System after being arrested or charged with offences. The service adopted a set of criteria for referrals for children who were exhibiting a range behaviours or circumstances that research indicated correlate to an increased risk of offending. In December 2022 the Ministry of Justice (MoJ) and the Youth Justice Board (YJB) announced the Turnaround fund with a very similar set of criteria. Torbay combined the Turnaround criteria and our local criteria under the Prevention programme to expand the offer. Since August 2022 there have been over 216 Prevention and Turnaround Referrals to the Youth Justice Service. Referrals have mainly come from social workers for children who have a Child in Need (CIN) Plan, which is reflective of the enhanced model of joint working between Children's and Youth Justice Services. More recently, and as a result of quicker triaging of children at the weekly intervention clinic, there has been an increase in referrals from Police colleagues. A review of the Prevention / Turnaround service has shown that 81% of children who have completed their intervention have not gone on to offend. The YJS Board noted the success and were able to access funding from Torbay Council to continue the full funding for the programme for 2025-26 before the Turnaround grant was approved by central government. The grant has now been received at a much-reduced amount for the current year but Torbay Council has increased its contribution so we can maintain the 3 full time staff for the project.

Devon and Cornwall Police in conjunction with the Youth Justice Service have a now well established 'Intervention Clinic' in Torbay. The clinic meets twice a week and reviews all the intelligence reports of children to identify who may need additional intervention to prevent offending. If interventions are required these are primarily delivered by the Police Youth Intervention Officers (YIOs) and a smaller number are referred for YJS Prevention Service. This addresses one of the recommendations from the Prevention Review completed in December 2023 to offer interventions earlier.

Torbay Youth Justice Service continues to offer voluntary support to children, parents and victims after any formal intervention or Court Order has ended.

18. Diversion

The Youth Justice Board (YJB) defines Diversion as children receiving an alternative outcome that does not result in a criminal record but has an element of support and intervention. The intent is to stop further offending and avoid escalation into the formal youth justice system and potentially becoming a 'First Time Entrant' (FTE) which is one of the national measures for diversion and youth justice services.

Diversionary disposals allow Police to refer children who have committed low-level offences who would have previously been charged and potentially sentenced at court (and becoming both an FTE and get a criminal record) to be offered a voluntary intervention and support that potentially does not mean they become an FTE or get a criminal record.

Reducing the number of First Time Entrants has been a key priority and prior to 2023 Torbay had seen a significant drop which was largely been due to the creation and development of the Out of Court Disposal (OoCD) process. However, in 2023-4 Torbays rate rose significantly above the target (at the end of the year. Reducing FTEs has been a strategic priority for the local partnership board who instigated a number of measures to address this including: - working with Police and the LCJB to increase the speed of decision-making, the introduction of an intervention clinic where decision-making is informed by real-time data and intelligence to target children at risk of entering the youth justice system into the most appropriate preventative intervention, and regular auditing of decision-making at the pre-court panel. The rate has steadily decreased since the peak in May 2024, narrowing the gap with the family group and national averages which we are sitting just above.

Torbay Youth Justice Service has worked with Devon and Cornwall Police and the three other Youth Justice Services in the southwest to improve the consistency and clarity of local guidance on the use of Out of Court Resolutions as the national guidance and legislation is unclear leading to different interpretations locally and nationally. This revised guidance called the Child First Pathway Protocol was launched in the autumn of 2025 and this combined with the new Child Centred Policing Team for South Devon is making a difference in the early identification of children, the speedy investigation and resolution of any offences, and stop escalation into the formal justice system. Early results of the Child Centred Police team are showing very positive results.

19. Education, Training and Employment

The staff team identified education as a major factor for the coming year to support children in not becoming involved in criminal activity and to improve their safety, future prosperity and wellbeing. Torbay has very high rates of exclusion and suspension and this is particularly true for children open to the service. Many children known to YJS have already missed significant amount of education and supporting them to re-engage after long periods out is very challenging particularly if they have criminal convictions. The Torbay Board have agreed that this will be a priority for work for the board and the service in the year ahead however in the current education landscape this will be a significant challenge.

All children who are supported by the YJS have their educational needs reviewed as part of their assessment and will potentially have aspects of their intervention focus on accessing education, training or work. Education attendance and attainment is reviewed minimally every 6 weeks by the YJS Education Worker and colleagues from Torbay Council's Education Services, including SEN, and the CSW group.

At the start of their interventions 83% of the children are in Education, Training or Employment. 17% were NEET/Missing from Education.

A disproportionate number of children are receiving their education outside of mainstream schools, with 36% registered with an alternative provision or outside of mainstream education. The table below shows the breakdown by establishment type:

Establishment Type	No. children	%
School/Mainstream Education	35	47%
At School Alternative Programme Pupil Referral Unit/Special Unit	17	23%
NEET	13	17%
Education Other Than At School (EOTAS)	7	9%
Elective Home Education	3	4%

There is also an over representation of children who have an **Education, Health, and Care Plan (EHCP)**. 32% of children worked with have an EHCP whilst the comparative figure for Torbay secondary school age children is 6.5%.

A further indicator of vulnerability is children who are (or have been) eligible for **free school meals**. 60% of YJS children are or were eligible for free school meals and the comparative figure for all secondary school aged children in Torbay is 26%.

77% of children worked with during 2025/26 had experienced one or more fixed exclusion and 21% had been permanently excluded from school.

Attendance is often a barrier for Torbay YJS children with an average of 85% of school age children persistently absent throughout the year.

20. Restorative approaches and victims

Torbay Youth Justice Service has a stated priority to be 'victim focussed in all we do'. Torbay YJS has a single full time Victim, Restorative Justice and Reparation Worker who offers support to the victims of crime, and restorative processes to put right the harm they have experienced. In 2024 due to their success in engaging victims, we increased the Victim worker element to become full time we will maintain this in 2026-27. The additional resource has improved our victim offer from which we have developed a victims focus group which has called in the local Police Partnership Inspector and the Police a Crime Commissioner to hear their views. Victim feedback has challenged the level of support available to victims (in comparison with what we provide to children who do harm) and we are now providing general and specialist support to children and adults who are harmed ie we have supported an adult to access counselling, and child victim to access CAMHS support.

Victim feedback surveys are generally very positive in all but one area: - 'do they feel that justice has been served' which is more negative than any other area. We believe this may be due to either time delays in investigations or the outcome for the child (ie not going to court) so we will be asking a flowing up clarifying question in future surveys to try to understand this better.

The service has implemented the data collection requirements for the new Key Performance Indicators (KPI's) for victim work within Youth Justice Services. We were one of the first services ready to report against (all) the new KPIs from 1st April 2023 when they came into place. It is unfortunate that the national caparisons and data returns from the YJB are not yet available after 2 full years of the requirement to report on all the new KPIs.

The service has developed and has launched a victim satisfaction survey so that victim's views can be used to inform and shape the service. We have redesigned and tested our survey which is now live and will be providing insight for future improvement activity when a robust level of data has been gathered. This survey is now be completed in paper format and online.

21. Serious Violence and Exploitation

The Youth Justice Board's operational definition of Serious Violence is any drug, robbery or violent offence committed against the person that has a gravity score of five or more. Gravity scores range from 1 (least serious) to 8 (most serious) Robbery offences all carry a gravity score of 6. The YJB Serious Violence Tool shows that for Torbay children there were three Serious Violence offences that received an outcome during the calendar year 2025. This equates to a rate of 2.5 per 10,000 of the general 10–17 year old population which is below the YJS family group rate (4.3) and below the national (5.6). This is a 50% reduction on 2024.

The responsibility for the development and delivery of the local response to the Serious Violence Duty in Torbay is held by Safer Torbay the Community Safety Partnership (CSP). As a member of the CSP and as a specified authority under the Duty, Torbay Youth Justice Service will work with other the other specified authorities and key partners to develop Torbay's response under the Duty.

A key aspect of the Service's role has been to contribute to the development of the local strategic needs assessment through provision and analysis of data. The strategic needs assessment is key to developing understanding of the local profile in relation to serious violence and the delivery of a local strategy and response.

In 2025-26 the Service received funding to run a pilot (summer) activity programme for children open to the service, this was aimed at children at the open to Prevention or Diversion but did have a small number of children on statutory orders. The programme was useful in attracting the numbers planned for each event, group size was kept to a maximum of 5 and a range of activities was agreed with those involved using local providers and facilities. The intention was to give children the chance to try some new activities (ie paddle boarding), develop some news skills (ie plastering) develop new social skills and help develop relationships with staff. Overall it was deemed successful but did put a strain on staff as it was done 'on top of the day job' and the service hopes to run this again in 2026 if the we can access further funding.

The Head of Service for Torbay Youth Justice is a core member of the Torbay Channel Panel and offers support through discussion at Panel as well as intervention and support to children where appropriate. The Torbay Channel Panel links directly to the Torbay and Devon Prevent Partnership Board where themes, risks and approaches are shared to improve the wider operational and strategic approach to Prevent across the two local authorities.

The Service has good working relationships with the local Exploitation Team based within Children's Services as well as the multi-agency partnership meetings of Child Exploitation and Missing Operational Group (CEMOG) which the Service's Team Manager and Police Officer attend and the strategic Child Young Person Exploitation Group (CYPEG) which the Head of Service attends. A red Exploitation Toolkit is one of the criteria for referral to the Prevention Service.

22. Detention in police custody

The resumption of quarterly police custody review meetings re children held in police custody overnight has given the service for first time in several years to access this data. It is pleasing to note that generally decisions and processes to keep children overnight appear to be sound. However, with the rollout of the Child First Pathway Protocol and other Child First measures it is hoped that children being held overnight will reduce, the data will help us to track this.

There remains a small number of children who are held overnight frequently, data shows that these children are either the children we have most concerns about that are being exploited in some way or are children (mainly girls) who have Deprivation of Liberty Safeguards (DOLS) in place and despite having 3 or 4 staffing to safeguard them but are still going missing or committing offences in the community, against staff or police officers . This is an aspect of the insufficient supply of suitable placements for children.

A Childrens Service senior officer is always available on call overnight, along with qualified senior social workers as part of the Emergency Duty Team (EDT) to discuss alternatives for children instead of remaining in police custody. Further work is necessary to address differing opinions on the most appropriate child-focused response to certain situations. Torbay does not commission a PACE bed for the reasons outlined in Chapter 5.

23. Remands

In 2025-26 the service had only one child remanded into custody which was the first child remand in 2 years. The child was not able to reduce his offending despite the very intensive package of support and control measures put in place to keep him and the community safe, and went on to receive a 12 month custodial sentence for 56 offences of domestic burglaries to steal cars and related driving offences.

Torbay Youth Justice Service has good relationship with the local Youth Magistrates and the Chair of the Youth Panel sits on the Strategic Board. Magistrates have been briefed on the changes to Remand thresholds as part of the briefings for the Boards, and in June 2025 the Youth Justice Head of Service will be briefed the Magistrates Youth Panel on youth justice matters at a training event.

The Service has made significant steps to improve the relationship and understanding of our differing roles with Children's Services social care and Education over the last year and this had led to closer working to ensure better coordination of services for all children we are working with and specifically those at risk of remand into custody. However there remains a national and local challenge in finding suitable and available placements for children at all levels of the care system and particularly when a child is subject to criminal proceedings. The Board is well sighted on this matter as is national government who have published a consultation '[Children's social care: stable homes, built on love](#)' followed by '[Keeping Children Safe, Helping Families Thrive](#)' which focusses on keeping children safe in and outside their home, keeping families together by providing the support they need, increasing the number of foster and children's homes placements.

Torbay's work with the Family and Friends Programme (FFP) is increasingly focused on reducing statutory escalation. By prioritising preventative approaches and early intervention, the FFP aims to support families at an earlier stage, helping to keep children safely within their family networks wherever possible. This not only aligns with the national vision for keeping families together and providing the support they need but also strengthens our local response to the placement challenges faced by children in the justice system.

24. Use of Custody and Constructive Resettlement

In 2025-26 two children were given custodial sentences. Both children were victims of exploitation and had conclusive ground NRMs but due to their ongoing, high level offending. This combined with noncompliance with court orders, despite very high levels of support and challenge to them and their parents, we could not reduce their offending and protect the public. Both were involved on domestic burglaries and car theft followed by driving offences all over the southwest. Both children had high levels of SEND, nonengagement with education for a number of years, and multiple other histories of abuse and neglect. We continue to support them during and post custodial sentence and will be leading both internal and multi-agency reviews of why we were not successful in diverting them from custody and what we need to change for other children in the future.

25. Working with Families

Case workers are experienced and practiced in working with the parents and families of children open to the service and will provide levels of support and communication with care givers so that the child has the most chance of successfully completing their order or programme. If more support is required, the service has a full time Parenting Worker who completes assessments with all parents or carers of children on the statutory caseload. Support is offered through both individual work directly with parents in their homes and through group work parenting programmes (ie [Who's in Charge](#)). Currently there is not capacity to offer this to parents of children open on Prevention / Turnaround programmes.

All aspects of the Service have close links with Early Help as well as services for children open on CIN / CP or CLA and work to ensure plans and interventions are coordinated to avoid duplication as well as not overwhelming parents and children with multiple professionals entering their lives at stressful and difficult times.

26. Service Development Plan 2026-27

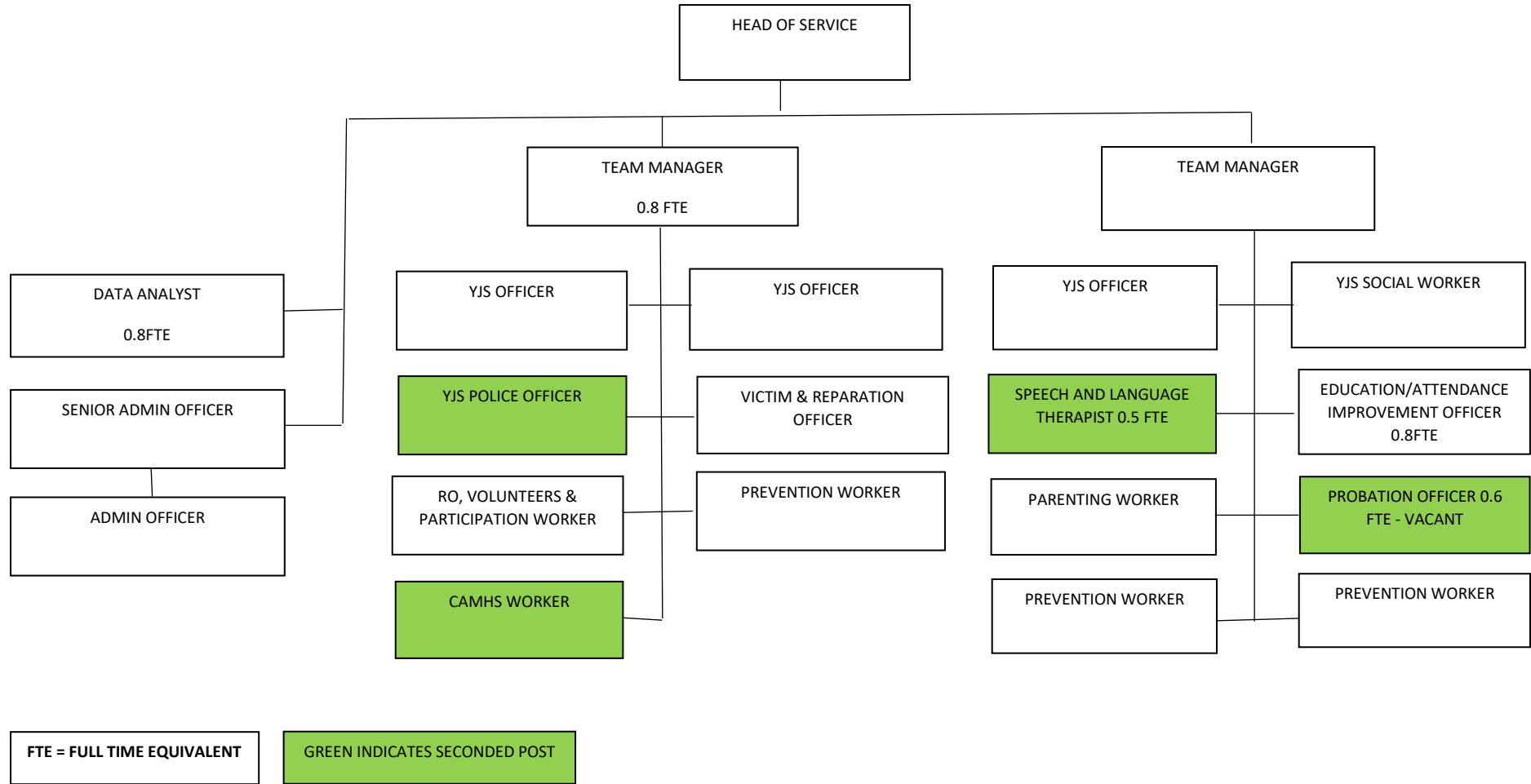
	Area for Improvement / Outcome desired	Action	Timescale
1.	Child First approach to all we do	<ul style="list-style-type: none"> a) Hear and respond to the voice of the child and carers not only in the delivery of their intervention but in the development of the service. b) To support the development of the Child First Policing Team and the new Child First Protocols to improve how children are supported within the youth justice systems. c) Swifter Youth Justice - Reduce delays in investigation and resolution for all children in the youth justice system. d) Increase the range of positive activities and opportunities for children to develop their confidence, skills and abilities. e) 	Ongoing

2.	Reduce the numbers of school suspension and exclusions and ensure children in contact with the Youth Justice Service are in appropriate education, training, or employment.	<ul style="list-style-type: none"> a) Strengthen multi-agency integration through the locality approach, using locality hubs to support more cohesive, coordinated interventions for families where a child is known to YJS. b) Develop and implement a specific action plan for persistently and severely absent YJS learners, with clearly defined interventions, responsibilities, timescales and review points. c) Align YJS operational engagement with emerging locality ‘huddles’ (for example, the Brunel special school pilot within the Paignton/Brixham locality hub), to improve information-sharing and earlier problem-solving. d) Prepare for the ‘Experts at Hand’ expectations set out in the Schools White Paper by developing a written local offer and a structured approach to building whole-school capacity (in addition to support for individual children). 	
3.	Reduce child criminal exploitation in Torbay	<ul style="list-style-type: none"> a) Work children to increase their understanding and resilience to grooming and exploitation b) Work with the Police, Exploitation Team and wider Childrens Services to reduce exploitation by targeting the adults involved by the use of powers available to disrupt exploitation ie Civil Injunctions. 	
4.	Maintain the reduction of children who become First Time Entrants (FTEs) in Torbay and seek to bring the rate below our statistical neighbours.	<ul style="list-style-type: none"> a) Ensure the Prevention and Diversion services and options are being fully utilised through the Child First Pathway Protocol at Intervention Clinic and Out of Court Resolution Panel is stopping children offending by monitoring in the performance report and quarterly reviews of all FTEs. b) Link with schools to build focussed interventions for those children that are most likely to become FTEs (see 2. above) c) Increases the Police awareness and understanding of the Child First approach and of the work of the YJS. 	
5.	Improve the services to victims and work to ensure better coordination with all agencies who support victims across the local area.	<ul style="list-style-type: none"> e) Increase the engagement of victims with our service. f) Ensure Victim safety planning is paramount in all aspects of our planning and delivery g) Ensure the YJS listen to victims and help them understand and navigate the justice system and its outcomes for them and the children who have caused them harm. h) Work with all the other agencies who provide services to victims to ensure they are supported to access what they need. 	

27. Sign Off, Submission and Approval

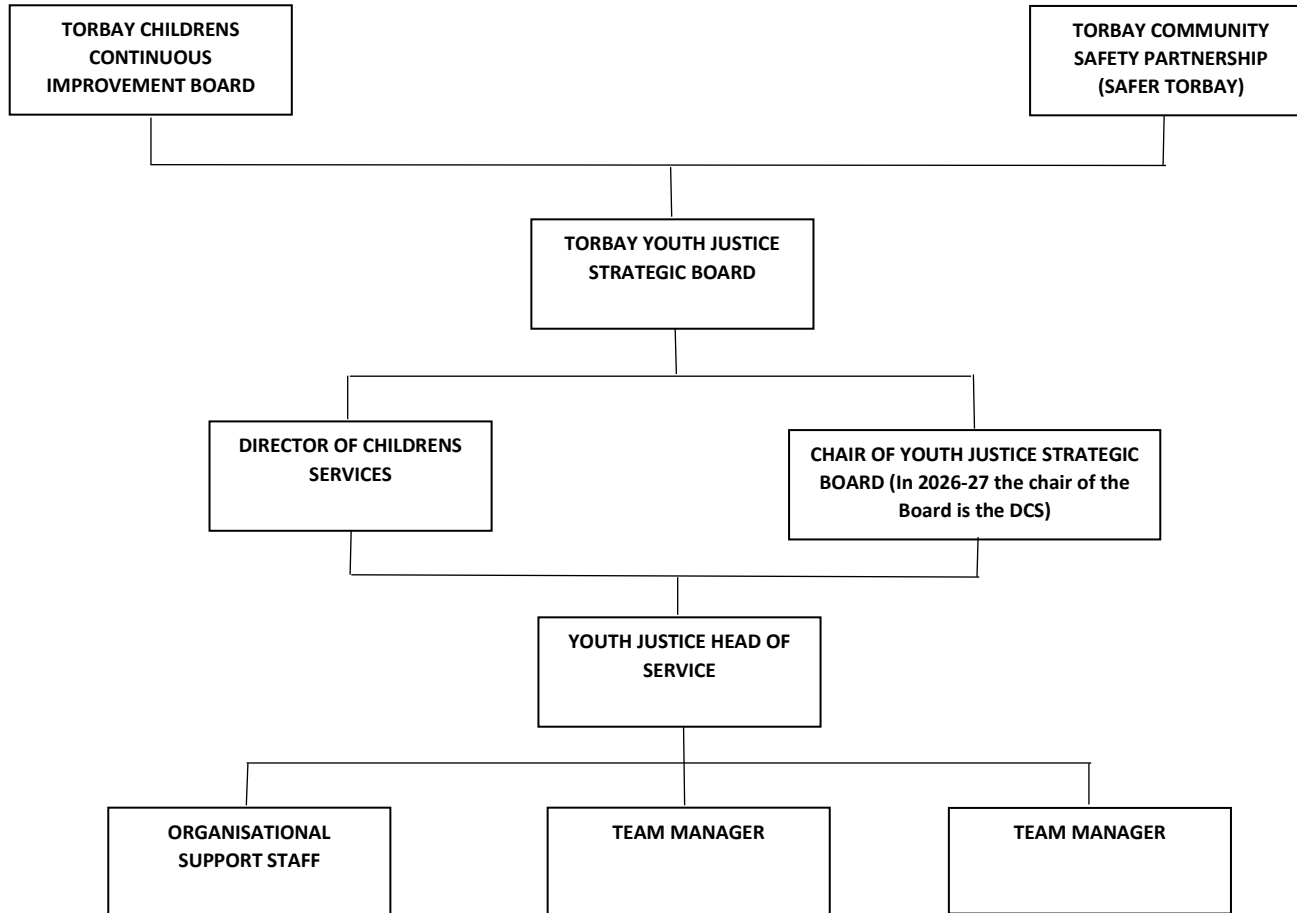
Chair of Torbay Youth Justice Service Board	Nancy Meehan, Director of Childrens Services, Torbay Council
Signature	
Date	

Appendix 1 Torbay Youth Justice Service Staff Structure



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Appendix 1a – Service Reporting Structure Chart



Appendix 2 DRAFT Budget Costs and Contributions 2026-27

Expenditure	
Staffing	£895,900
Training	£1,500
Rent	£13,000
Service Provision	£10,900
Travel	£8,000
Other expenses	£5,600
Support to families	£500
TOTAL	£935,400

Income	
Torbay Local Authority	£514,926
YJB Grant	£247,369
Remand Grant (25/26 value, as 26/27 not yet announced)	£11,339
PCC	£68,346
Community Safety – Data Analyst	£11,100
NHS	£38,204

Probation Service	£5,000
Turnaround Programme Grant	£39,116
TOTAL	£935,400

In Kind contributions

The service is in receipt of non-cash resources in the form of seconded staff from the statutory partner organisations which support the multi-agency approach of the service.

Organisation	Contribution	In Kind cost
Probation Service	Probation Officer 0.6 FTE	£34,509
Devon and Cornwall Police	Police Officer – 1 FTE	£76,108
NHS Devon	CAMHS 1 FTE and SALT worker 0.5 FTE	£73,881
TOTAL	FTE 3.1	£184,498

Appendix 3 YJS Training Programme 2025-26

This training is service specific and additional to the required training all staff complete as part of the corporate training requirements eg safeguarding, data protection health and safety etc.

Date	Topic	For whom	By whom
2025-26	Youth Justice Degree	Prevention Worker	UNITAS
Feb 2025	Who's in Charge (parenting programme)	Parenting Worker	WIC
July 2024	FASD	Staff Team	Internal staff
Nov 2024	ASSET+ 2 day	New starter	Silver Bullet
Sept 2025	AIM3 Refresher	All AIM3 Trained staff	The AIM Project
Jan – Feb 2025	6 sessions of Volunteers / panel members training	Volunteers	YJS Team Manager & Vol coordinator
June 2025	Referral Order Child First review	YJS staff & volunteers	Suth Devon University
July 2025	Emotional Literacy training	All staff	Torbay Educational Psychologist
Sept 25	Children Facing Sexual allegations	Case workers	YJLC
Jan 2026	12hr Assessment and planning	New workers	Silver bullet
March 26	First Aid for all staff	Business support staff	
Feb 2026	Food Hygiene	All staff working with children	
	Requested / Planned for 2026 but not yet booked		
	Sexual health		
	Drug and Alcohol work updates		
	Vehicle theft best practice		
	NRM processes and court work		

Common youth justice terms

ACE	Adverse childhood experience. Events in the child's life that can have negative, long-lasting impact on the child's health, and life choices
AIM 2 and 3	Assessment, intervention and moving on, an assessment tool and framework for children who have instigated harmful sexual behaviour
ASB	Anti-social behaviour
AssetPlus	Assessment tool used for children who have been involved in offending behaviour
CAMHS	Child and Adolescent Mental Health Services
CCE	Child Criminal Exploitation, where a child is forced, through threats of violence, or manipulated to take part in criminal activity
Children	We define a child as anyone who has not yet reached their 18th birthday. This is in line with the United Nations Convention on the Rights of the Child and civil legislation in England and Wales. The fact that a child has reached 16 years of age, is living independently or is in further education, is a member of the armed forces, is in hospital or in custody in the secure estate, does not change their status or entitlements to services or protection.
Child First	A system wide approach to working with children in the youth justice system. There are four tenants to this approach, it should be: developmentally informed, strength based, promote participation, and encourage diversion
Child Looked-After	Child Looked After, where a child is placed in the care of the local council.
CME	Child Missing Education (ie child not on any school roll)
Constructive resettlement	The principle of encouraging and supporting a child's positive identity development from pro-offending to pro-social
Contextual safeguarding	An approach to safeguarding children (mainly teenagers) which considers the wider community and peer influences on a child's safety

Community Resolution	Community Resolution or CR, is an informal disposal, administered by the police, for low level offending where there has been an admission of guilt
ECM	Enhanced Case Management – a psychology-based approach for youth justice services to work with children.
EHCP	Education and Health Care Plan, a plan outlining the education, health, and social care needs of a child with additional needs
ETE	Education, Training, or Employment
EHE	Electively Home Educated, children who are formally recorded as being educated at home and do not attend school
EOTAS	Education Other than at School, children who receive their education away from a mainstream school setting
FTE	First Time Entrant. A child who receives a statutory criminal justice outcome for the first time (youth caution, youth conditional caution, or court disposal)
HMIP	Her Majesty Inspectorate of Probation. An independent arms-length body who inspect youth justice services and probation services
HSB	Harmful Sexual Behaviour, developmentally inappropriate sexual behaviour by children, which is harmful to another child or adult, or themselves
JAC	Junior Attendance Centre
MAPPA	Multi Agency Public Protection Arrangements
MFH	Missing from Home
NRM	National Referral Mechanism. The national framework for identifying and referring potential victims of modern slavery in order to gain help to support and protect them
OOCD	Out-of-Court Disposal. A recorded disposal for a crime when an outcome is delivered but the matter is not sent to court
OOCR	Out-of-Court-Resolution. The new terminology for OOCD (see above).

Outcome 22/21	An informal disposal, when the child agrees to undertake an intervention to build strengths to minimise the possibility of further offending.
Over-represented children	Appearing in higher numbers than the local or national average within the population
RHI	Return Home Interviews. These are interviews completed after a child has been reported to the police as missing.
RJ	Restorative Justice – a variety of approaches seeking to repair the harm for victims and who caused the harm.
SLCN	Speech, Language and Communication Needs
STC	Secure Training Centre (Custodial establishment for 14–16-year-old children)
SCH	Secure Children’s Home (Custodial establishment for under 16-year-old children)
TIP	Trauma Informed Practice – children who have suffered Trauma in their past are more likely to have impaired emotional and cognitive skills
TRM	Trauma Recovery Model – A psychological approach to help workers build working relationships and affect change for those who have suffered trauma.
Young adult	We define a young adult as someone who is 18 or over. For example, when a young adult is transferring to the adult probation service.
YJS	Youth Justice Service. This is now the preferred title for services working with children in the youth justice system. This reflects the move to a child first approach
YOI	Young Offender Institution (Custodial establishment for 16-18 year old children)

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Meeting: Cabinet

Date: 9 June 2026

Wards affected: All wards

Report Title: Tobacco and Vapes Framework 2026 - 2031

When does the decision need to be implemented?

From July 2026 onwards.

Cabinet Member Contact Details: Hayley Tranter, Cabinet member for Adult and Community Services, Public Health and Inequalities hayley.tranter@torbay.gov.uk

Director Contact Details: Lincoln Sargeant, Director of Public Health, lincoln.sargeant@torbay.gov.uk

1. Purpose of Report

- 1.1. The UK Government has set out an ambition for England to smokefree by 2030 (defined as less than 5% of the population smoking).
- 1.2. The tobacco and vapes framework has been developed to set out priorities and areas of work to move us towards this ambition in Torbay.
- 1.3. The decision required is to agree the framework.

2. Reason for Proposal and its benefits

- 2.1. The proposal will help us to deliver our vision of a healthy, happy, and prosperous Torbay by working to reduce rates of smoking, protecting residents from the harms of second-hand smoking and reducing illegal and illicit trade.
- 2.2. The proposed framework will serve to direct and coordinate work across Council departments and partner organisations.
- 2.3. The proposed framework will set the basis for the commissioning of Public Health funded services to support young people and adults.
- 2.4. The proposal will support local progress towards the UK Government's Smokefree 2030 ambition (defined as less than 5% of the population smoking).
- 2.5. The proposal will support the implementation of the Tobacco and Vapes Bill (set to become law from the 1st of January 2027).

3. Recommendation(s) / Proposed Decision

3.1. That the Tobacco and Vapes Framework 2026 – 2031 be approved.

4. Appendices

Appendix 1: Tobacco and Vapes Framework 2026 – 2031

Appendix 2: Torbay Young People’s Vaping Research Project Report (March 2026)

5. Background Documents

- Stopping the Start: our new plan to create a smokefree generation (Department for Health and Social Care, 2023) <https://www.gov.uk/government/publications/stopping-the-start-our-new-plan-to-create-a-smokefree-generation/stopping-the-start-our-new-plan-to-create-a-smokefree-generation>
- Smoking in Torbay – a rapid health needs assessment
<https://www.southdevonandtorbay.info/media/pksnmmgv/smoking-rapid-hna-2024.pdf>

Supporting Information

6. Introduction

- 6.1. In October 2023 the UK Government launched the Smokefree Generation 2030 plan. This refreshed the commitment, vision and resource to achieving the target of fewer than 5% of adults smoking by 2030, a target that was originally set out in the tobacco control plan for England in 2017.
- 6.2. Currently, around 15,000 adults (13.8%) in Torbay smoke. To meet the smokefree generation 2030 ambition in Torbay, we need to support around 9,400 adults to stop smoking.
- 6.3. The emergence vaping and other nicotine products has introduced new opportunities to help smokers to reduce and quit, but also new ways of influencing non-smokers towards tobacco use.
- 6.4. Drawing from national survey data, it is estimated that around 12,300 adults (11%) in Torbay may currently vape. Of these, around 3,260 may have been using one for over 3 years.
- 6.5. Data from a local survey undertaken by Engaging Communities Southwest indicated that of the 437 respondents aged 11-18, approximately 61% reported having ever tried a vape. The most common age at which respondents had begun using a vape was 13-14 years old. Similar to national findings, vaping tended to be higher amongst girls than boys.
- 6.6. Data from this local survey indicated that vaping behaviours were influenced by experience of stress and anxiety, curiosity and sharing of devices amongst peers, high visibility in schools, public spaces and on transport, role modelling by family members and ease of access at some local shops and online.
- 6.7. The framework has been developed to set priorities to direct and coordinate action to move towards the smokefree 2030 ambition in Torbay. The five priority areas are:
- Prevent the uptake of vapes amongst children and adolescents, and support those who vape to stop.
 - Diversify the support available for adults to help them take steps towards quitting smoking and long-term vaping.
 - Create smoke and vape free environments.
 - Support tobacco control efforts.
 - Monitor changes in tobacco use and potential new and emerging harms.
- 6.8. The framework has been developed based on the World Health Organisation's Framework Convention on Tobacco Control and UK best practice from Greater Manchester.

7. Options under consideration

- 7.1. No other options are considered.

8. Financial Opportunities and Implications

- 8.1. There are no financial implications to the proposal to adopt the framework.

9. Legal Implications

- 9.1. There are no legal implications of the proposal to adopt the framework.

10. Engagement and Consultation

- 10.1. Stakeholder engagement has been undertaken with those working across the areas set out in the framework to determine the priorities, areas of work and to ensure viability of them.
- 10.2. Community engagement has been undertaken in conjunction with a specialist behavioural insights organisation and community and voluntary sector organisations to understand smoking and vaping related beliefs and behaviours amongst adults and young people. The feedback will be used to inform how specific areas of work set out are delivered.
- 10.3. On 21 May 2026, the Adult Social Care and Health Overview and Scrutiny Sub-Board considered the Tobacco and Vapes Framework 2026 – 2031 and supported the recommendation as set out above.

10.4.

11. Procurement Implications

- 11.1. There are no procurement implications to the proposal to adopt the framework.

12. Protecting our naturally inspiring Bay and tackling Climate Change

- 12.1. Reducing rates of smoking will have a positive impact on reducing cigarette and vape waste which can contribute to litter and pollution and contribute to reducing air population.

13. Associated Risks

- 13.1. Lack of coordination across areas of work which may result in slowed progress towards achieving the smokefree 2030 ambition locally.

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	<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. 	The proposal will support improved coordination of activities across changing tobacco use trends which will support a reduction in rates across all age groups.	Not applicable	Not applicable
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. 	The proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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 proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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 	The proposal is anticipated to have a positive impact by reducing exposure to second hand smoke that may exacerbate	Not applicable	Not applicable

	a little or a lot by a physical or mental health condition or illness.	conditions of certain long-term illnesses.		
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. 	The proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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 proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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). 	<p>The proposal is anticipated to have a positive based on this characteristic.</p> <p>By reducing first- and second-hand smoke exposure, we might reduce negative impacts on maternal and foetal health including the risk of miscarriage.</p>	Not applicable	Not applicable
Race	In the 2021 Census, 96.1% of Torbay residents described	The proposal neither has a specific positive or negative impact based on this	Not applicable	Not applicable

	<p>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. 	characteristic.		
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 	The proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
Sex	<ul style="list-style-type: none"> • 51.3% of Torbay's 	The proposal neither has a specific	Not applicable	Not applicable

	<p>population are female.</p> <ul style="list-style-type: none"> 48.7% of Torbay's population are male. 	positive or negative impact based on this characteristic.		
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 	The proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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. 	The proposal neither has a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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. 	<p>Higher rates of smoking tend to be observed amongst those living in deprived areas, working in lower wage occupations and amongst those who are long term unemployed.</p> <p>By supporting timely and accessible smoking support and reducing illegal and</p>	Not applicable	Not applicable

		illicit trade, it is anticipated that this will support both health and social inequalities.		
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. 	Reducing the prevalence of smoking will have positive impacts on reduction of hospital care to manage long-term illnesses including respiratory conditions, chronic obstructive pulmonary disease, and some cancers.	Not applicable	Not applicable
Human Rights impacts		Reducing smoking rates within the population supports the human right to breathe clean air.	Not applicable	Not applicable
Child Friendly		By reducing rates of smoking, the proposal will support an improvement for children growing up in smokefree homes and enjoy smokefree outdoor spaces.	Not applicable	Not applicable

15. Cumulative Council Impact

- 15.1. The proposal supports work within Licensing and Planning teams on promoting smokefree environments and tobacco control efforts. Therefore, the proposal is expected to further extend the beneficial socioeconomic impacts of these teams.

16. Cumulative Community Impacts

- 16.1. The proposal supports work across Anchor Institutions and other local businesses which is expected to have positive impacts on reducing short- and long-term adverse health outcomes related to smoking that affect business productivity.
- 16.2. By improving smokefree environments and reducing illegal and illicit trade, the proposal is expected to contribute to improving the safety of communities across Torbay.



Tobacco and vapes framework – 2026 - 2031

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Foreword

Tobacco use remains one of the most significant causes of preventable illness and early death. While smoking rates have steadily declined over recent decades, tobacco still contributes to profound health inequalities. At the same time, the rapid rise in vaping and the emergence of new nicotine products have introduced fresh complexities - creating both opportunities for harm reduction and new risks, especially for children and young people.

The UK Government has set out an ambition to reduce the rate of smoking amongst adults in England to 5% or less by 2030. This framework sets out our shared ambition to protect health, reduce inequalities, and create a smokefree future for the next generation. It provides a plan for how we will work collaboratively across the Council, the NHS, partner organisations and our communities to prevent uptake, support people to take steps towards quitting, shape healthier environments, and strengthen tobacco control. By monitoring data and using local insights we can ensure our actions remain responsive to emerging trends and grounded in what works.

Achieving a smokefree generation by 2030 is an ambitious goal, but it is one we must pursue to improve health, protect children, and support a fairer, healthier Torbay.

Dr Lincoln Sargeant - Director of Public Health, Torbay Council

Councillor Hayley Tranter - Cabinet Member for Adult and Community Services, Public Health and Inequalities

Context

Tobacco use remains one of the leading preventable causes of illness and death, contributing to increased risk of cardiovascular disease, respiratory conditions and cancer. While smoking rates in England have declined over recent decades to the lowest rate since records began in 1972, tobacco still poses a major public health challenge. Currently, around 5.3 million adults in England smoke, and smoking still accounts for around 64,000 preventable deaths in England every year. Importantly, smoking is more prevalent among people from lower socioeconomic groups and with long term mental health conditions. It therefore contributes to health and economic inequalities, and differences in life expectancy.

Currently, around 13.8% of adults in Torbay smoke, which equates to around 15,000 adults. Of these, we estimate that around 3,000 (20.1%) are employed in routine and manual occupations and around 2,085 (19.1%) have a long-term mental health condition. Smoking attributable mortality for Torbay (adjusted to take account of differing areas' age profile) is around 210 people per 100,000 (2017/19) which is similar to the England value.

The emergence of vapes and other nicotine products such as pouches have introduced new complexities to tobacco use. Vapes deliver nicotine without the tar and carbon monoxide found in cigarettes, which means they can play an important role in reducing adverse health risks for smokers. However, people can become dependent on nicotine and the habit of vaping. Therefore, it is not recommended for those who do not smoke. Messages comparing the relative risks between vapes and cigarettes can be misinterpreted or manipulated, creating the illusion that vaping is harm-free. Marketing strategies such as colourful packaging, prominent placements in shops and online, and low-price points all contribute to attracting new users, including adolescents. The physiological effects of nicotine combined with social influences have driven increased uptake. There is currently no evidence that an increase in vaping is leading to an increase in smoking rates. However, the unknown long term health effects of vaping, and the health impacts of nicotine on children's health are growing public health concerns.

Purpose

In October 2023, the UK Government launched the Smokefree Generation 2030 plan. This refreshed the commitment, vision and resource to achieving the target of fewer than 5% of adults smoking by 2030, a target that was originally set out in the tobacco control plan for England in 2017. Broadly, the plan includes:

- Bringing forward the Tobacco and Vapes Bill, which proposes raising the legal age of sale for tobacco, introducing restrictions on marketing for tobacco and vaping products.
- Providing increased funding for local stop smoking services,
- Providing increased funding to strengthen enforcement on underage sales and illicit trade.

Smoking rates in Torbay have reduced from 19.1% in 2011 to 13.8% in 2024, however rates remain significantly higher than the England value. To meet the smokefree generation 2030 ambition in Torbay, we need to support around 9,400 adults to stop smoking. This is a significant challenge given the rates of decline to date.

This framework has been developed to set out priority areas to guide action on smoking and vaping across Council departments, work with partner organisations, and use funding to work towards the Government's Smokefree generation 2030 ambitions locally in Torbay.

Strategic alignment

In addition to, and supporting, the UK Government's smokefree 2030 ambition, is the NHS Long Term Plan. This includes a commitment to treating tobacco dependency, by providing NHS-funded cessation support to inpatients who smoke, pregnant women and birthing people, and patients in specialist mental health services. This framework is aligned to the regional and local approaches for delivering this NHS commitment as set out in the Southwest Tobacco Control framework and the Devon ICB Prevention Programme.

Torbay Council is a member of the Smokefree Devon Alliance; a partnership of organisations committed to reducing smoking in Devon. This framework is also aligned to the Smokefree Alliance strategy and action plan (2023 – 2028) which has committed to three priority areas of for tobacco control action: protecting children from the harms of tobacco, reducing health inequalities related to smoking and promoting strong collaboration around tobacco control.

Guiding principles

The framework, actions and recommendations are guided by the following principles:

1. Reasonable promotion and use of vapes

Vapes can be an effective way to help smokers reduce or quit smoking and can in the short term reduce exposure to harmful substances associated with risk of cancer, respiratory and cardiovascular conditions. However, vapes are not risk-free and the long-term health impacts of vaping (beyond 2 years) are not yet known.

Therefore, our message is that smokers should consider switching to a vape, but those who do not smoke should not vape.

2. Test new ways of supporting people to quit

We adhere to best practice guidance set out by the National Institute for Health and Care Excellence (NICE) that offering behavioural and pharmacological support together is the most effective approach to helping smokers to quit, and to the national Russell Standard for assessing performance of local stop smoking services.

Key criteria: Russell Standard

- A 'treated smoker' (TS) is a smoker who undergoes at least one treatment session on or prior to the quit date and sets a quit date.
- A 'self-reported 4-week quitter' is a 'treated smoker' assessed (face to face, by postal questionnaire or by telephone) 4 weeks after the designated quit date (minus 3 days or plus 14 days) and declares they have not smoked even a single puff on a cigarette in the past 2 weeks.
- A 'CO-verified 4-week quitter' is a 'treated smoker' who is a self-reported 4-week quitter with an expired-air CO assessed 4 weeks after the designated quit date (minus 3 days or plus 14 days) and found to be less than 10ppm.
- A treated smoker is counted as 'lost to follow up at 4-weeks' if, on attempting to determine the 4-week quitter status they cannot be contacted.
- The self-reported 4-week success rate should generally be above 50%.

However, there is currently a lack of evidence about how support can be effectively tailored to meet the needs of higher risk populations. Therefore, we need to adapt and test new way of workings to ensure support meets the needs of those currently underrepresented in smoking cessation services to reduce health inequalities.

3. Encourage steps towards quitting

There is no safe level of smoking and therefore, all smokers need to be encouraged to quit. However, focussing on immediately quitting may feel unachievable to some and could inadvertently stifle willingness to make incremental changes that could achieve health benefits, and build motivation and self-efficacy towards eventually quitting.

Therefore, we need to create a pathway of opportunities that encourage people to take positive steps forwards and that values and celebrates all achievements.

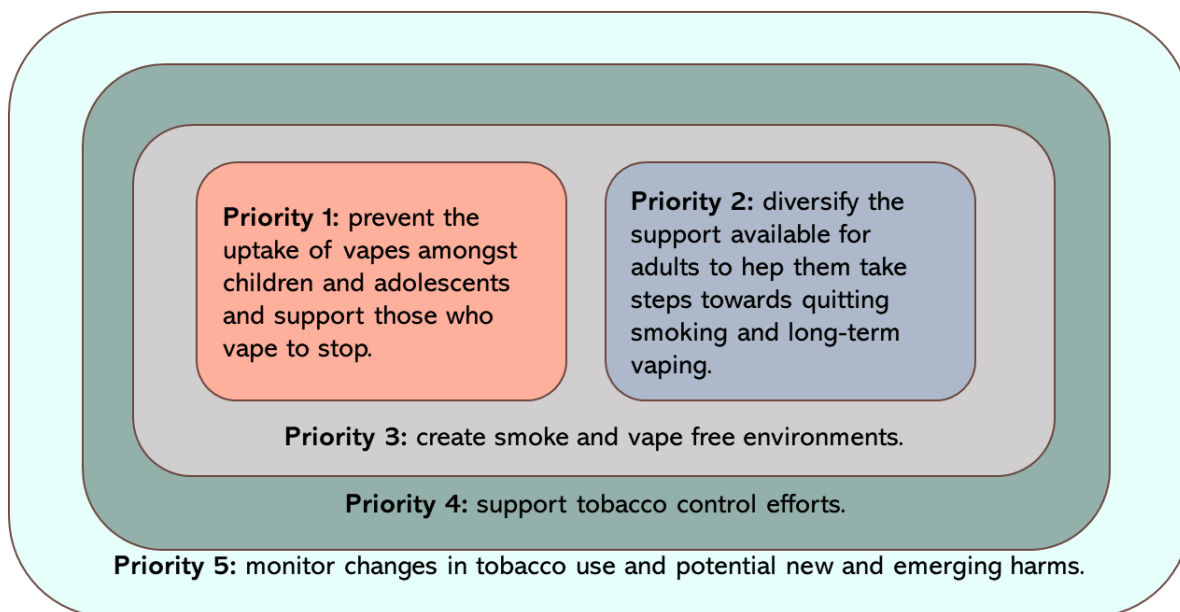
4. Smoking cessation for wealth and health

Increasing the price of tobacco has been one of the most effective ways of reducing use. However, for entrenched smokers, this increase may result in reducing spend on other household bills leading to an increase in existing social inequalities.

Therefore, we need to improve saving money as a motivator for reducing and stopping smoking and equip those working with people experiencing financial hardship to have conversations about smoking.

Framework

Figure 1 sets out the framework and priority areas for action to move us towards creating a smokefree generation:



Priority areas

Priority 1 – prevent the uptake of vapes amongst children and adolescents, and support those who vape to stop

Situation

Reducing the number of new starters has been one of the main successes in reducing overall rates of smoking. Between 2004 and 2023, regular smoking amongst 15 years olds in England fell from 21% to 2.2%. This success has been a result of policy and educational interventions that have worked to denormalise smoking by making it expensive and unattractive.

The availability of vapes and nicotine pouches have introduced new ways of influencing young people towards nicotine use. The range of flavours, coloured packaging and low-price points are particularly attractive to adolescents and have contributed to interest in experimentation. The increased visibility of vape use amongst adolescents has formed new social norms and peer dynamics which have helped to further increase uptake. National survey data indicates that in 2025, around 20% of those 11-17 years have ever vaped, and 7% currently use vapes regularly. Extrapolating these data suggests that around 1,000 young people in Torbay may currently use vapes, and around 2,600 have ever used a vape. Whilst rates are significantly higher than 10 years ago, current rates have been stable since 2023.

Short term health effects of using vapes include headaches, dizziness, irritability, difficulty concentrating, respiratory issues, sore gums and dental issues. The effects of nicotine use are particularly harmful on developing brains and can negatively affect school attendance and performance. Additionally, in some instances vapes have been used as a mode of administration for other substances including synthetic cannabinoids which pose additional health concerns to young people.

Response

The forthcoming Tobacco and Vapes Bill will bring forward legislation to increase the legal age of sale for tobacco and is expected to reduce marketing powers around vapes and make the sale of nicotine pouches illegal to those under 18 years old. This is vital to reducing uptake and protecting young people from the harms of nicotine. However, education and support interventions are also required. The evolving nature of products, influencing factors and impacts mean that there is currently little published research on effective approaches to prevent uptake of vaping amongst adolescents, reduce use and in both those who use them experimentally, and those who are nicotine dependent. Therefore, we will use local youth engagement and behavioural science approaches to inform and evaluate potential approaches.

Areas of delivery

1. Educate young people about vapes, and support the management of vapes within schools:

- Use Torbay Healthy Learning to provide teachers, school leaders, parents and students (in-school and home educated) with information and resources that educate about the harms of vaping (including the use of vapes for use of other substances than nicotine), build resilience and refusal skills, and where to go for support.
- Provide schools with guidance to support the management of vapes on their premises, including how to handle those suspected of containing additional substances, and pathways to refer to specialist support for nicotine dependence and drug use support.
- Ensure that School Nurses have training and support to have conversations with young people about vaping, provide support and pathways to refer to specialist support.

2. Develop social media and community-based initiatives

- Gain insights about vaping amongst local young people and influencing factors.
- Create and deliver health messages from trusted, credible sources which highlight the harms of vaping, its negative effects on stress and mental health and to reduce social appeal.
- Provide information to youth workers and community and voluntary sector organisations supporting young people to have conversations about vaping, and suggestions for developing peer support systems to prevent and reduce vape use.

3. Ensure that young people have access to specialist support

- Develop specialist support for those who are nicotine dependent.
- Develop pathways to ensure that those who use vapes for substances controlled under the Misuse of Drugs Act have access to specialist support and address associated harms.

Priority 2 – diversify the support available for adults to help them take steps towards quitting smoking and long-term vaping

Situation

In Torbay, recent estimates indicate that around 15,000 adults currently smoke. Whilst smoking rates have been reducing, there remain distinct differences in rates of smoking

between groups based on socioeconomic position, unemployment, mental health condition, housing tenure, use of drugs and alcohol and complex needs. These groups may face additional barriers to quitting including a greater association between smoking and managing stress, mental health conditions and even pain, have more people in their social network who also smoke, and may find it harder to access services. Together, these factors can reduce motivation and self-efficacy which are key to initiating a quit attempt. Research shows that structured support is an effective way of helping people to stop smoking compared to information and advice. However, many people try to quit alone and without support. This can be for a range of reasons, including, lack of awareness of what support is available, concern around losing autonomy, fear of judgement from professionals, feeling they should be able to quit alone and even feeling like they should not need or deserve help.

Vaping can play an important role in reducing the harms of smoking and helping adults to quit. However, the availability and promotion of vapes and their use by young people have altered perceptions and smoking habits amongst adults. For some, vaping is seen as a way of moderating how much they smoke and reducing the expense of smoking. For others, the potential to constantly vape and the lack of evidence of harms means they perceive it as more harmful than smoking. And, for some adults who are not current smokers, the message that vaping is less harmful than smoking has been an incentive to take up vaping. National survey data from 2025 indicate that nationally, around 11% of adults currently vape. Extrapolating this indicates that around 12,300 adults in Torbay may currently vape. According to this survey, nationally, just over half (53%) of those who currently vape are ex-smokers. Of these, around half reporting vaping for over three years. This indicates that potentially around 5,800 adults in Torbay who currently vape have not smoked and around 6,500 are ex-smokers. Of those who have used a vape to stop smoking, around 3,260 may have been using a vape for over 3 years.

Response

To reduce inequalities in smoking rates and to address the changing perceptions and behaviours around smoking and vaping, there is need to develop a continuum of support that meets people where they are and helps them to take steps towards quitting. This will include approaches that build motivation, reinforce autonomy and willpower, and that promote harm reduction. Additionally, approaches will seek to harness the growing popularity and ease of access to information and support provided by digital technology.

Areas of delivery

1. Keep making steps towards quitting in people's minds:

- Deliver regular campaigns to encourage smokers and long-term vapers to take steps towards quitting, and to improve the awareness of the tools and support available.
- Use campaigns to showcase local places and local people's stories to improve the relevance of information and contribute to building a local social movement.
- Develop a network of smokefree champions across health and social care, and voluntary and community sector organisations who can provide evidence-based advice on smoking and vaping cessation.

2. Improve the availability of information and quit tools:

- Use targeted advertising, social media and optimise website pages to make information about local support easier to find.
- Develop self-support tools that provide advice and ideas to help bolster individual willpower to direct their own reduction and quit of smoking or vaping.
- Develop peer support systems to encourage friends to take steps towards quitting together and to avoid risk of relapse.

3. Diversify structured support options:

- Continue to provide access to support from trained stop smoking advisors and access to stop smoking aids.
- Offer vaping reduction and cessation support for those who vape to a high level and have done so for some time.
- Support delivery of the NHS treating tobacco dependence programme to ensure patients accessing maternity, inpatient and specialist mental health services are offered smoking cessation support.
- Provide access to digital smoking cessation services.
- Develop new models of professional led smoking cessation support into drug and alcohol services, community mental health services, and family planning services, including offering harm reduction approaches of up to 26 weeks of support.

Priority 3 – create smoke and vape free environments

Second-hand smoke exposure poses a risk to all smokers and non-smokers. It is a particular risk to those who are pregnant, children and those with long term health conditions. Second-hand smoke inhalation can cause lung cancer, increase the risks of developing asthma, respiratory infections, COPD, heart disease and stroke. In young children, it can also increase the risks of respiratory and ear infections, asthma attacks, and sudden infant death syndrome. Smoke can cling to carpets, can penetrate through doors etc. and therefore even smoking in one room in a house or opening a window do not protect individuals or household members. Second-hand smoke exposure is not just a risk indoors. The harmful chemicals in tobacco smoke can also be inhaled outside. The risk is heightened in enclosed areas such as parks and outdoor seating areas or patios at hospitality venues.

Whilst current research indicates that second hand exposure to vape smoke is less harmful than tobacco smoke, research is still in its infancy. Therefore, caution should be exercised. In addition, inhalation of vape smoke can be unpleasant and can lead to the influencing of impressionable people like children who are likely to copy what they see adults do. Therefore, vaping should not be done in front of babies or children. The Tobacco and Vapes Bill is expected to provide additional provisions to regulate against smoking in specific environments. However, Local Authorities and other anchor institutions have some local powers and services to champion smokefree sites. Anchor institutions refer to organisations, typically not for profit, public organisations whose long-term sustainability is tied to the wellbeing of the populations they serve. Locally, these are Torbay Council, Torbay and South Devon NHS Trust and South Devon College.

Areas of delivery

1. Support the creation of smokefree homes:

- Provide training, support, and equipment to enable Health Visitors to identify second hand exposure risk in the homes of young families, and to promote safety measures and access to cessation support.
- Work with housing officers and those undertaking home safety checks to promote conversations about second hand smoke exposure, carbon monoxide exposure and smoking cessation.

2. Promote smokefree outdoor spaces:

- Expand smokefree signage to all playparks in Torbay and explore options to extend signage to other locations where children play such as beach fronts.
- Ensure smokefree signage is displayed across Council owned assets, and that this directs people to support.
- Ensure Council events display smokefree signage and have clear messages for vendors about smoking and vaping.

3. Encourage businesses to create more smokefree spaces:

- Support the development of smokefree sites in local anchor institutions.
- Working with anchor institutions, provide resources and support to local businesses to promote smokefree workplaces.
- Encourage supermarkets and shops to improve smokefree areas and signage around customer entrance and exits.

4. Utilise licensing arrangements to reduce outdoor smoking spaces and access to vapes:

- Use pavement licences issued under the Business and Planning Act 2020 to develop a certificated voluntary scheme to incentivise hospitality businesses to become 100% smokefree, and to amend the pavement conditions to introduce a minimum 50% smokefree area.
- Explore opportunities to review and reduce the number of vape shops in highly concentrated areas and those with heavily footfall of young people.

Priority 4 – support tobacco control efforts

Policy drivers to increase the price of tobacco are an effective way of motivating people to quit and reduce the interest in taking up smoking. However, for entrenched smokers, the increased cost of tobacco may lead some to engage with illegal and illicit tobacco. Illicit tobacco products encompass those which are manufactured legally but are smuggled into and sold illegally in other destinations other than their intended one, while illegally manufactured counterfeit products that mimic well known tobacco brands, and foreign brands lawfully produced in one country but intended for smuggling into another.

Illicit products are cheaper and are not produced or controlled in the regulated way that protects consumers. Additionally, the illicit tobacco trade has strong links with organised crime. Sellers often target children and young people which increases the risk they may begin using products. Of increasing concern is the risk posed by illegal vapes. These are more likely to contain more than the legal limit of nicotine concentration (<20mg/ml (2%)), not have health

warnings on the packaging, or have this in another language and contain other ingredients such as caffeine and taurine. Illegal vapes are more likely to be low priced and therefore are likely to be particularly attractive to those most vulnerable, including young people.

Areas of delivery

1. Support and advocate for national policy:

- Respond to government consultations and calls for evidence to support the progress of the Tobacco and Vapes Bill.
- Provide information to national advocacy organisations such as ASH support lobbying efforts.

2. Work with Police and Trading Standards to improve sharing of information and the knowledge of reporting channels for illegal and illicit tobacco and underage sales:

- Use intelligence from Police and Trading Standards to direct the development of education and support offers around smoking and vaping.
- Use social media, smokefree champions network and voluntary and community sector organisations to improve the knowledge of reporting channels.

3. Develop guidance to support settings to safeguard children and young people safe from exploitation:

- Integrate information about risks of exploitation around illegal and illicit tobacco trade, how to spot signs of danger and reporting channels into the Torbay Healthy Learning resources for teachers and school leaders
- Work with services and settings working with vulnerable children and young people (including social care, care leavers and SEND providers) to provide this information.

Priority 5 – monitor changes in tobacco use and potential new and emerging harms

Monitoring data is vital to understanding how tobacco use changes overtime and to identifying health inequalities linked to tobacco use. Additionally, as industries continue to innovate and consumer behaviours change, new products are likely to continue to emerge. These can introduce unfamiliar health risks or patterns of use which are likely to be particularly harmful and detrimental to young people. It is therefore essential to monitor data and trends to identify how strategies and support need to be adapted to ensure we continue to decrease tobacco use within the local population.

Areas of delivery

1. Monitor impact of work to identify changing trends and areas for improvement:

- Use routine survey and service data to identify who is being reached by support, and where improvements are needed to ensure equitable access and uptake.
- Use qualitative research and local evaluation to improve the understanding of how approaches are working, and for who.

2. Identify potential future risks:

- Use research, market analysis and population behaviour analysis to detect new and emerging products and potential new harms.
- Use local intelligence networks and partnerships with Trading Standards and Police to identify potential new substances that may be administered through vapes to inform local drug strategies and support.

Oversight and governance

An action plan will be established to monitor progress against the priority areas set out in the framework. The plan will be owned and overseen by a delivery group comprising stakeholders from the local stop smoking service, planning, licensing, education, drug and alcohol services, police, trading standards, Healthwatch, and community and voluntary sector organisations. Progress will be reported through Public Health governance and the Health and Wellbeing Board.

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Torbay Young People's Vaping Research Project Report

March 2026

COMMISSIONED BY TORBAY PUBLIC HEALTH



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Introduction

Torbay Public Health commissioned Engaging Communities South West to explore young people's experiences, views and understanding of vaping in Torbay, and to help identify what information, prevention work and support may be needed locally. The project was designed to hear directly from children and young people aged 11–18, while also gathering a smaller amount of feedback from parents, carers, teachers and other professionals.

The work used a mixed-method, youth-led approach. This included a Young People's Panel, a wider young people's survey, collaboration with Sound Communities, a primary school session with Year 6 pupils, and short adult surveys for parents, carers and staff. Together, these methods aimed to build a local picture of how vaping is viewed, where it happens, why some young people try it or continue using it, and what might help prevent or reduce harm.

This report brings those findings together. It is intended for both public health stakeholders and the wider public. The report therefore uses clear, accessible language while maintaining an independent and evidence-based tone.

About Us

Engaging Communities South West (ECSW) is a not-for-profit organisation offering a range of services, including community voice, facilitation of engagement events, data capture and analysis, report writing, communications support, training and service/project evaluation and review. We provide these services to advance three key areas: Community Voice, Access & Empowerment, and Strategic Support. We also manage the contract for local independent health and social care champion Healthwatch Torbay.

Executive Summary

Engaging Communities South West, commissioned by Torbay Public Health, carried out this project to understand young people's experiences, perceptions and behaviours relating to vaping across Torbay.

A mixed-methods approach combined quantitative survey data with qualitative insight. A survey of 445 young people aged 11–18 was complemented by input from teachers, parents/carers and engagement with primary-aged children. Qualitative data from open responses and discussions was analysed thematically to identify key patterns and drivers.

Key Findings from the Survey Respondents

- Over 60% of young people reported having tried vaping, often by age 13–14 or younger
- Around 70% of current users report vaping regularly throughout the day
- Vaping is commonly reported in schools, on buses and in public spaces, with around two-thirds vaping on journeys to school
- Curiosity (46%) and sharing with others (45%) are the most commonly reported reasons for trying vaping, while around 15% report direct peer pressure
- Nearly 40% of current users report vaping to manage stress or anxiety
- Nearly 9 in 10 young people believe vaping is unsafe, but this does not prevent continued use
- Vapes are widely reported as easy to access through shops, peers and family, with parental behaviour also influencing use.

Observations from this Project

- Early normalisation and visibility reduce perceived risk and boundaries
- Social belonging and group behaviour drive uptake more than explicit pressure
- Vaping is often used as a coping mechanism for stress and anxiety
- Knowledge of harm does not consistently translate into behaviour change
- Regular use and difficulty quitting indicate habit and dependence
- Strong non-vaping identities and early awareness present opportunities for prevention
- Findings are broadly consistent with national evidence on youth vaping, while also highlighting how visible vaping feels in everyday local settings.

Project Recommendations

A coordinated, system-wide response is required, combining prevention, support and enforcement. Key priorities include:

1. Early prevention and education, particularly in upper primary and early secondary years
2. Strengthening vape-free environments across schools, transport and public spaces
3. Addressing social norms through peer-led approaches and positive alternatives
4. Integrating vaping into mental health support, recognising its role in coping behaviours
5. Providing clear, consistent information to address misconceptions and uncertainty
6. Developing youth-focused cessation support that addresses both habit and dependence
7. Engaging families and carers to support consistent messaging and role modelling
8. Strengthening enforcement to reduce access through retail and informal routes.

Together, these actions aim to reduce early uptake, support informed choices, and address the wider factors driving youth vaping in Torbay.

Background

1. What we mean by vaping (and why it matters)

Vaping usually means using an electronic cigarette (e-cigarette) to inhale an aerosol. Vapes can contain nicotine (which is addictive) and other chemicals, plus flavourings. Vapes are intended for adults – particularly adults who smoke – but increasing numbers of children and young people are trying them.

It is illegal to sell nicotine vapes to anyone under 18, and illegal for an adult to buy them on behalf of someone under 18. Despite this, national surveys show that underage access is common, including buying from shops.¹

2. Youth vaping prevalence in Great Britain

The most widely used national youth vaping trend data in Great Britain comes from the ASH Smokefree GB Youth Survey (run annually since 2013, with 2025 fieldwork in March–April 2025).¹ Key findings include:

Overall prevalence (ages 11–17, Great Britain, 2025):

- 79% have never tried vaping.¹
- 20% have ever tried vaping (around 1.1 million children).¹
- 7% currently vape (around 400,000 children).¹
- 4% vape regularly (more than once a week).¹
- 3% vape daily.¹

Vaping increases with age (2025):

- Ages 11–15: 16% ever vaped; 5% currently vape.¹
- Ages 16–17: 30% ever vaped; 12% currently vape.¹

Vaping and smoking overlap:

- Among 11–17 year olds who currently smoke, 49% also vape.¹
- Among those who report never having smoked, 10% have tried vaping and 2% currently vape.¹

These findings are consistent with the NHS Digital Smoking, Drinking and Drug Use survey for England, which reported in 2023 that 25% of 11–15 year olds had ever tried vaping and 9% were current users.²

Changing attitudes are also evident. In 2025, 63% of young people believed vaping is as harmful as, or more harmful than, smoking.¹ However, concern about harm does not prevent

¹ Action on Smoking and Health (ASH) (2025). *Use of vapes among young people in Great Britain*. <https://ash.org.uk/resources/view/use-of-vapes-among-young-people-in-great-britain>

² NHS Digital (2024). *Smoking, Drinking and Drug Use among Young People in England, 2023*. <https://digital.nhs.uk/data-and-information/publications/statistical/smoking-drinking-and-drug-use-among-young-people-in-england/2023>

experimentation on its own.

A 2025 umbrella review of 56 systematic reviews examining harms of vaping in young people found consistent associations between e-cigarette use and subsequent smoking initiation. Many studies suggested that young people who vape are around three times more likely to go on to smoke. The review also identified associations with marijuana use, alcohol use, asthma, cough, injuries and adverse mental health outcomes.³ While much of the evidence is observational, the findings strengthen concerns about progression to smoking and wider health risks among adolescents.

3. How young people get vapes, and where they see them promoted

National evidence suggests that access is often social at first, then becomes more direct.

First vape is usually given by someone else

- 76% of 11–17 year olds who have ever vaped report being given their first vape.¹

Underage purchase from shops is common

- 46% of current youth vapers say they usually buy vapes from shops.¹
- 25% buy from friends or informal sources.¹
- 10% buy online.¹

Exposure to promotion is high

- 71% of young people report seeing vape promotion.¹
- 55% notice promotion in shops.¹
- 29% report seeing promotion online.¹
- Among those aware of online promotion, the most commonly cited platforms were TikTok (42%), YouTube (33%) and Instagram (30%).¹

This helps explain why underage use can persist even where the law is clear.

4. Policy change and the risk of an illegal market

When asked what they would do following a ban on disposable vapes:

- 59% of current youth users said they would continue vaping.¹
- Of those who would continue, 68% said they would switch to reusable devices, while 44% said they would try to obtain illegal disposable vapes.¹

This suggests enforcement and youth support need to sit together locally.

5. The local picture: why Torbay and Devon matter

5.1 Smoking, inequality and vulnerability in Torbay

Smoking remains a major cause of preventable illness and early death.⁴ In Torbay:

³ Golder S, Hartwell G, Barnett LM, et al. (2025). *Vaping and harm in young people: umbrella review*. Tobacco Control. Available at: <https://tobaccocontrol.bmj.com/content/early/2025/08/17/tc-2024-059219>

⁴ Devon Smokefree Alliance (2023). *Smokefree Devon Alliance Strategy 2023–2028*. <https://www.devonsmokefreealliance.org.uk/strategy>

- Adult smoking prevalence is 15.4% (18+), higher than England.⁴
- Smoking-at-delivery and smoking-related admissions remain above England averages.⁴
- 27% of residents live in the 20% most deprived areas nationally.⁵
- Torbay has higher rates of self-harm admissions among 10–24 year olds compared to England.⁵
- Hospital admissions for dental decay among children are significantly above England averages.⁵

Torbay has a population of around 140,000, with 27.8% aged 65+.⁵ These indicators highlight structural inequality and health vulnerability.

These factors do not prove higher vaping rates locally. However, they show why Torbay is a priority area for prevention and early support.

5.2 Underage supply and enforcement activity in Torbay

Devon Smokefree Alliance reports ongoing Trading Standards activity to tackle illegal tobacco and vapes, including seizures of over 600 illegal vapes in Torbay.⁴

5.3 Local strategic priorities already include youth vaping

The Devon Smokefree Alliance Strategy (2023–2028) prioritises:

- Protecting children and young people from tobacco harms
- Monitoring youth vape use
- Strengthening enforcement of underage sales
- Supporting education and prevention in schools⁴

This project supports those aims.

6. What other local youth vaping work shows (and why youth voice matters)

Local and regional youth engagement reports highlight common themes.

A Healthwatch Northamptonshire study found:

- Young people reporting easy shop access and inconsistent age checks.⁶
- Vaping described as addictive.⁶
- Preferences for flexible, youth-specific support.⁶

A ‘Youthwatch’ vaping study in Cambridgeshire & Peterborough found:

- Vaping often increases at the start of secondary school.⁷
- Stress and social pressure are common reasons.⁷

⁵ **Torbay Council** (2025). *Torbay Joint Strategic Needs Assessment (JSNA) 2025/26*.
<https://www.southdevonandtorbay.info/media/4wacnujo/2025-2026-torbay-jsna.pdf>

⁶ **Healthwatch Northamptonshire** (2024). *Young People and Vaping*.
<https://www.healthwatchnorthamptonshire.co.uk/report/2024-08-28/young-people-and-vaping>

⁷ **Healthwatch Cambridgeshire & Peterborough** (2025). *Youthwatch Vaping Report*.
https://nds.healthwatch.co.uk/sites/default/files/reports_library/20250121_Cambs%20%26%20Peterborough_Youthwatch_Vaping%20Report.pdf

- Young people recommend earlier prevention (ages 11–12), PSHE education, and youth-specific cessation support.⁷

Healthwatch Derbyshire reported similar findings, including peer influence, social media drivers, and confusion about health risks.⁸

Across these reports, common themes include peer influence, stress, ease of access, and the need for clearer information and youth-specific support.

These are not Torbay findings. However, they show consistent themes nationally and reinforce the importance of asking young people locally about what is happening in their community.

7. Why this project is significant in Torbay

Bringing the evidence together:

1. A significant minority of young people vape nationally.¹
2. Underage access remains common.¹
3. Evidence shows associations with smoking initiation and wider harms.³
4. Enforcement challenges exist locally.⁴
5. Torbay faces high deprivation and youth health vulnerability.⁵
6. Youth engagement elsewhere shows the importance of tailored, age-appropriate prevention and support.^{6 7 8}

Torbay comprises of three coastal towns. National research shows that coastal communities face reduced youth service provision and increased structural disadvantage, including higher self-harm rates and reduced access to safe leisure spaces.⁹

Because of this, listening directly to young people in Torbay is essential to designing effective prevention and support.

⁸ Healthwatch Derbyshire (2025). *Students' Experiences of Smoking and Vaping*.

https://cdn.prod.website-files.com/6325e07facd3d82fad5f0eee/679385fe7d5fc17027ae8b85_Students%27%20Experiences%20of%20Smoking%20and%20Vaping%20Report%20080125%20HA%20V1%20.pdf

⁹ UCL Institute of Education (2025). *Young people and coastal communities: Policymaker and practitioner perspectives (Interim Report, July 2025)*.

[https://discovery.ucl.ac.uk/id/eprint/10210706/1/UCL%20Coastal%20Youth%20Life%20Chances%20interim%20Report%20July%202025%20\(002\).pdf](https://discovery.ucl.ac.uk/id/eprint/10210706/1/UCL%20Coastal%20Youth%20Life%20Chances%20interim%20Report%20July%202025%20(002).pdf)

Methodology

This project used a mixed-method, youth-led approach to explore vaping among children and young people in Torbay. It combined a Young People's Panel, a wider young people's survey, community-based qualitative interviews, a primary school engagement session, and short adult surveys for parents, carers and staff. This approach is detailed in this section.

1. The Young People's Panel

The Young People's Panel had an advisory and co-design role throughout the project. We recruited 12 young people aged 11–17 from Torquay, Paignton and Brixham, including 16 year old Torquay female resident as the Young People's Lead. All panel members gave consent, received an incentive token and travel costs, and were supported to take part safely. The Young People's Lead set up and ran a WhatsApp group, including a virtual listening wall, which became the main way the group stayed in touch and shared what they were seeing, hearing and thinking about vaping. Meetings took place at People's Parkfield, The Paignton Club, Paignton Library and, on one occasion, on the streets of Paignton to support adult survey collection. These are summarised below.

Introductory meeting: 31 October, People's Parkfield

- Built rapport and introduced the project aims and approach
- Set expectations around respect, openness and young people as experts
- Ice-breaker led by the Young People's Lead to help the group feel comfortable
- Reviewed and refined the draft young people's survey
- Introduced the 'listening wall', which generated immediate insight.



2nd meeting: 30 November, The Paignton Club

- Warm-up activity and group check-in
- Added further observations to the listening wall
- Co-designed a primary school lesson on vaping in small groups
- Shared ideas back and discussed key messages for younger children
- Distributed surveys for members to share with peers and family.



3rd meeting: 22 December, Paignton Library

- Reflected on survey responses collected so far
- Discussed early patterns and any surprises
- Introduced different research methods
- Explored how to gather deeper insight from young people
- Planned how members would carry out their own research.

4th meeting: 25 January, People’s Parkfield

- Reviewed progress on survey collection
- Shared original work including artwork, scripts, video ideas and interviews
- Reflected on what worked well when gathering views
- Identified key insights emerging from conversations
- Planned the street-based adult survey session.

5th meeting: 1 March, “On the streets” of Paignton

- Seven members took part in a street survey session
- Wore project T-shirts to build confidence and group identity
- Approached adults to complete surveys in person or via QR code
- Increased responses from parents, carers and staff
- One member carried out a simple observation of vaping in public.



Young People’s Panel members in Paignton Town Centre

6th meeting: 29 March

- Shared emerging findings and draft report with the panel
- Discussed what felt expected and what felt surprising
- Identified key messages for adults and decision-makers
- Reflected on individual involvement in the project
- Prepared short presentations for the final event.

7th meeting: 13 April

- Shared the final report and film with public health and partners
- Young people presented their reflections and key messages
- Celebrated the contribution of the panel.

Overall contribution of the panel

The Young People’s Panel was central to the project, shaping the survey, activities and overall approach from start to finish. Their involvement ensured the work was grounded in real experiences, language and social contexts, rather than adult assumptions about vaping.

The panel provided valuable insight into local attitudes, behaviours and norms, including where and how vaping is taking place and how it is viewed among different peer groups. Their contributions helped refine the survey, strengthen engagement methods and test emerging findings, improving the credibility and relevance of the results.

The group also built confidence and skills over time. Members developed communication and research skills, shared different perspectives and worked across age groups. Participation varied depending on individual strengths, but all members contributed in meaningful ways. Importantly, the panel created a safe, non-judgemental space where both vapers and non-vapers could speak openly. This led to more honest discussions and richer insight, strengthening the overall quality of the project and ensuring young people were active partners rather than passive participants.

2. The Young People's Survey

The young people's survey (see appendix) captured both quantitative and qualitative feedback about vaping in Torbay. The Young People's Panel helped shape the final questionnaire and supported its distribution.

Drawing on earlier survey work, we knew printed surveys produced much stronger completion rates than QR-only methods. We therefore prioritised paper surveys, despite the extra data-entry time involved, in order to improve focus, engagement and response quality.

South Devon College hosted four survey sessions, and Torquay Academy shared the survey with a Year 8 cohort. We used a short introductory PowerPoint to explain anonymity and encourage honest responses. The survey was also shared with Young Carers in Torbay. Although only a small number of Young Carers responded, this highlighted the value of deeper partnership work or a tailored focus group in future.



A survey session held in the theatre at SDC

3. Sound Communities Collaboration

We worked with Sound Communities, a Torbay-based social enterprise that engages and supports vulnerable or marginalised young people aged 11–24 through music, radio and digital media. This helped us reach young people who might not engage through school or more formal settings.

Because Sound Communities staff already had trusted relationships with participants, young people were willing to talk openly about their vaping habits, opinions and knowledge. Staff used questions based on the main survey, but delivered them in familiar, informal settings and with adults the young people already knew. In total, we gathered 11 one-to-one audio interviews, which were transcribed and analysed alongside the main survey findings.



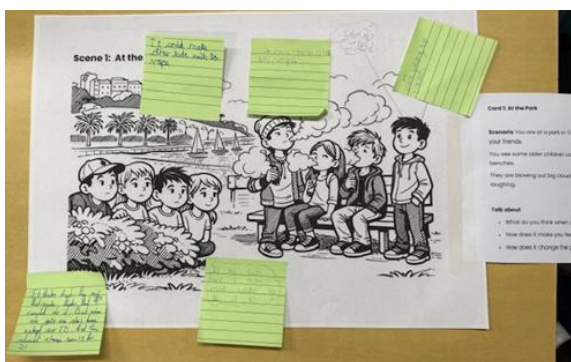
4. Primary School Engagement

The primary school element focused on Year 6 pupils, mostly aged 11, to hear from the youngest age group included in the project. A standard survey was not suitable for this age, so we used a more creative and interactive approach.

Using ideas developed by the Young People’s Panel, and drawing on teaching experience, a lesson plan was created and delivered with the Young People’s Lead at Watcombe Primary School, who kindly hosted the session and obtained parental consent. The session encouraged honesty, respect and open discussion, and included the following activities relevant to vaping:

- a four corners warm-up game using ‘agree’, ‘disagree’, ‘not sure’ and ‘never heard of this’ signs to hold up to ten statements.
- group discussion using viewpoint scenario pictures related to vaping.
- a listening wall, where children wrote what they think, know and see about vaping.
- a final activity using coloured water bottles labelled with chemical names to prompt discussion about what might be in vape liquid.
- anonymous voting slips to understand whether any children had tried vaping.

The session gave useful insight into how younger children view vaping before secondary school.



Viewpoint scenario pictures



Listening Wall



End session activity (above and right)



5. Adult Surveys

We developed two short adult surveys – one for teachers and other professionals, and one for parents and carers. These were designed to give additional context and to compare adult views with what young people were saying.

Response rates were modest despite promotion through schools and social media, so the Young People’s Panel also supported face-to-face survey collection in Paignton. In total, we received 16 parent/carer surveys and 44 teacher surveys. Each survey was deliberately brief, with 11 questions focused on knowledge, concern and perceived norms. Although the adult sample was small, it still provided a useful additional perspective.

Summary of approach

This mixed-method, youth-led approach produced a rich and varied picture of vaping among young people in Torbay. By combining survey data, qualitative interviews, creative engagement and youth co-design, the project explored both prevalence and lived experience rather than relying on one method alone.

The Young People’s Panel helped ensure the language, methods and activities felt grounded in young people’s real experiences. School and community survey work helped maximise reach, while the Sound Communities partnership extended access to more marginalised young people. The primary school session added early insight from Year 6 pupils, and the adult surveys provided a contrasting perspective from parents, carers and staff.

Across the project, consent, anonymity and safe participation were prioritised. The process also helped build young people’s confidence, research skills and sense of ownership, giving them a meaningful role in local public health work. Taken together, the methods produced credible, practical findings to inform future education, prevention and support around youth vaping in Torbay.

Limitations

The young people’s survey provides the strongest quantitative evidence in this report. However, it was not designed to be statistically representative of all young people in Torbay. The sample was weighted towards older teenagers, with more girls than boys taking part. The parent/carer and teacher surveys were smaller and should be treated as indicative.

Where differences by age, gender or location were not clear, these have not been over-interpreted and may reflect sample size or distribution.

The mixed-method, youth-led approach enabled deeper insight than survey data alone. The Young People’s Panel, interviews and primary school session provided consistent, real-world insight into attitudes and behaviours.

There is limited locally grounded research of this kind in Torbay. While not fully representative, these findings provide a credible and useful evidence base to inform local understanding and decision-making.

Key Findings

These findings combine survey data from young people, teachers and parents with qualitative insight from discussions and lived experience.

1. Vaping is common, starts early and is highly visible in daily life

60.6% (265 of 437) said they had tried vaping. Of these, 79.3% (207 of 261) first did so before age 15, including 34.9% (91 of 261) before 13. Vaping is widely seen across schools, public spaces and journeys to school, with 62.9% (105 of 167) reporting use on the way to school and 39.5% (66 of 167) on buses.

2. Curiosity & social sharing drive experimentation, with peer influence more subtle

Curiosity (45.5%, 122 of 268) and being given or sharing a vape (45.1%, 121 of 268) were the most common reasons for trying vaping. Direct peer pressure was less common (15.7%, 42 of 268), indicating influence is often indirect and embedded in group behaviour.

3. Vaping becomes habitual and is often linked to stress and emotional coping

Among current users, 69.2% (117 of 169) vape regularly throughout the day. Over half (57.7%, 94 of 163) have vaped for three years or more, and 37.4% (58 of 155) report using vapes to manage stress or anxiety. Quitting is challenging, with 72.2% (122 of 169) saying it would be difficult or nearly impossible, although 44.3% (66 of 149) would like to stop.

4. Awareness of harm is high, but does not prevent continued use

Most recognise potential harms. Among current users, 86.7% (143 of 165) said vaping is not safe, compared with 96.0% (215 of 224) of non-users. All parents (100%, 15 of 15) also believed vaping is unsafe, yet use continues, indicating a gap between awareness and behaviour.

5. Family behaviour and role modelling are strongly linked to youth vaping

75.9% (126 of 166) of current users reported someone in their household also vapes, compared with 46.7% (106 of 227) of non-vapers, suggesting a strong association between family behaviour and use.

6. Access to vapes remains relatively easy despite age restrictions

44.1% (75 of 170) of current users reported buying vapes from shops and 45.9% (78 of 170) buying liquids. Additionally, 47.6% (80 of 168) said they were rarely or never refused due to age, indicating widespread access through retail and informal routes.

7. There are clear gaps in support, information and confidence across settings

Only 9.09% (4 of 44) of professionals felt policies work very well, while 73.33% (11 of 15) of parents wanted clearer information on health risks. Teachers reported mixed confidence, and parents highlighted the need for practical, non-judgemental support.

8. Early awareness & non-use in younger children show prevention opportunities

Primary-aged children showed strong awareness of vaping harms and largely negative attitudes towards use, indicating a clear opportunity for early prevention.

Overall, these findings are broadly consistent with national evidence on youth vaping, particularly in relation to early uptake, social influence and awareness of harm. However, the local data highlights the extent to which vaping is experienced as highly visible and embedded within everyday environments.

Detailed Survey Results

This section summarises the survey responses gathered through the project. It begins with the main young people’s survey, followed by shorter sections on the parent/carers and teacher surveys.

The figures below are based on the final dataset. As not every respondent answered every question, the total number of responses varies by question. Percentages should therefore be read alongside the number of respondents answering each question.

Where segmentation by age, gender or other characteristics showed clear differences, these have been included. Where differences were small or unclear, they have not been over-interpreted.

Please Note: All commentary is included as verbatim as said by participants to illustrate the themes identified from the data analysis. Not all comments are included, and some relate to more than one theme.

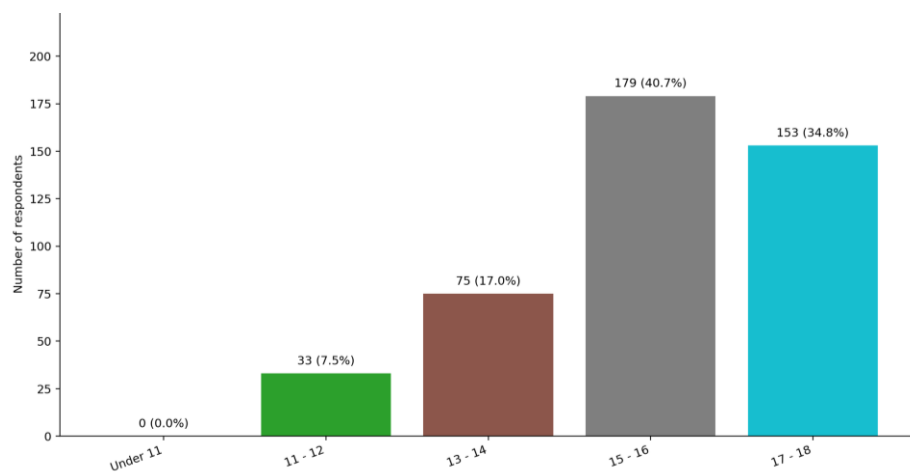
1. Young People’s Survey

Respondent profile (Survey Questions 1-5)

A total of **445** young people aged 11–18 were included in the survey dataset.

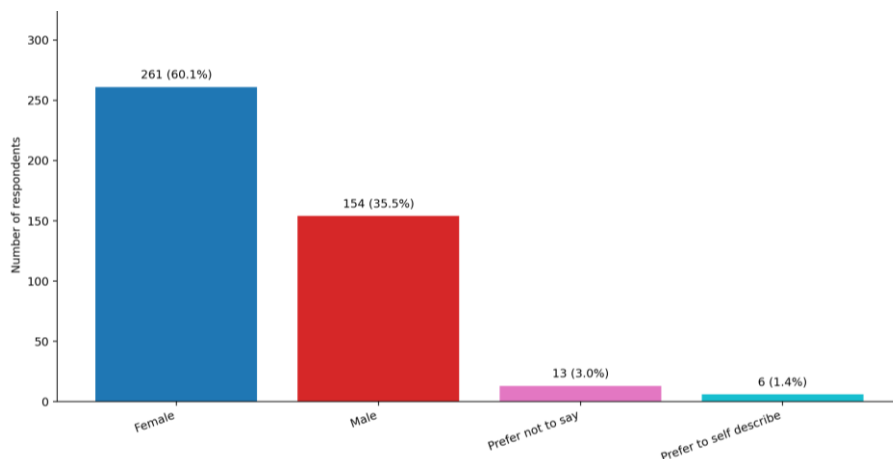
Of the 440 respondents who answered the age question:

- 33 (7.5%) were aged 11–12
- 75 (17.0%) were aged 13–14
- 179 (40.7%) were aged 15–16
- 153 (34.8%) were aged 17–18.



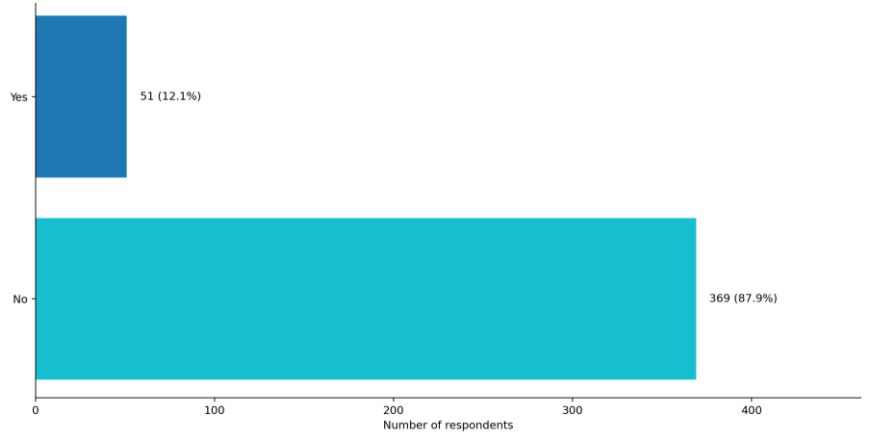
Of the 434 respondents who answered the gender question:

- 261 (60.1%) were female
- 154 (35.5%) were male
- 13 (3.0%) preferred not to say
- 6 (1.4%) preferred to self-describe.



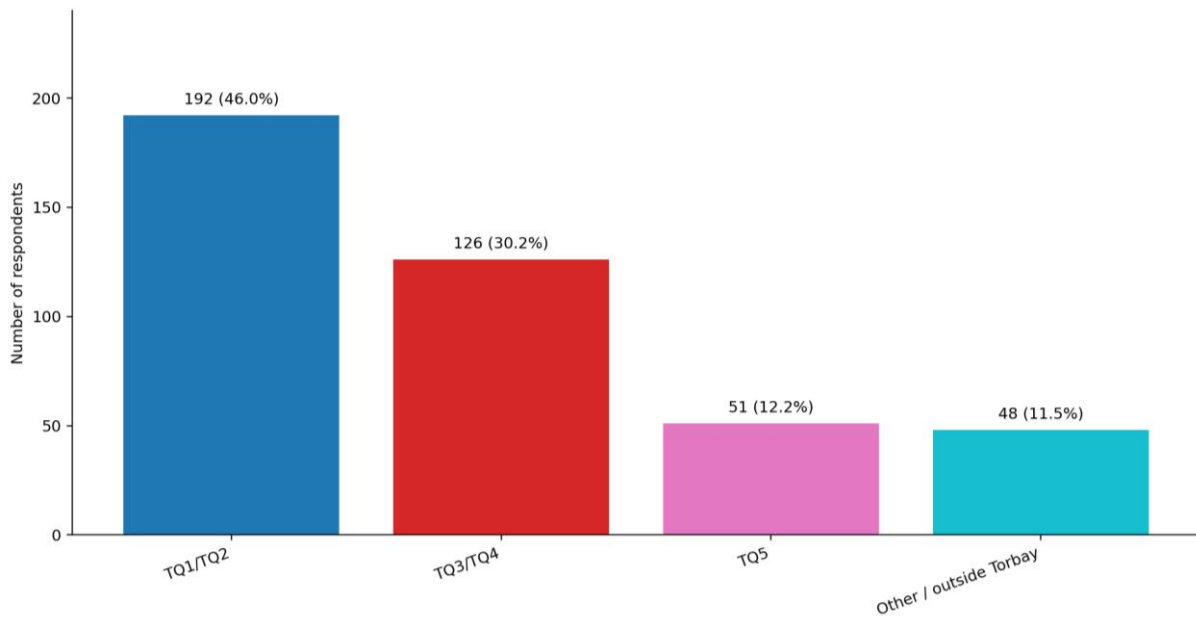
Of the 420 respondents who answered the disability question:

- 51 (12.1%) said they had a disability
- 369 (87.9%) said they did not.



Of the 417 respondents who answered the postcode question:

- 192 (46.0%) were from TQ1/TQ2 (Torquay)
- 126 (30.2%) were from TQ3/TQ4 (Paignton)
- 51 (12.2%) were from TQ5 (Brixham)
- 48 (11.5%) were from outside Torbay or did not provide a Torbay postcode.

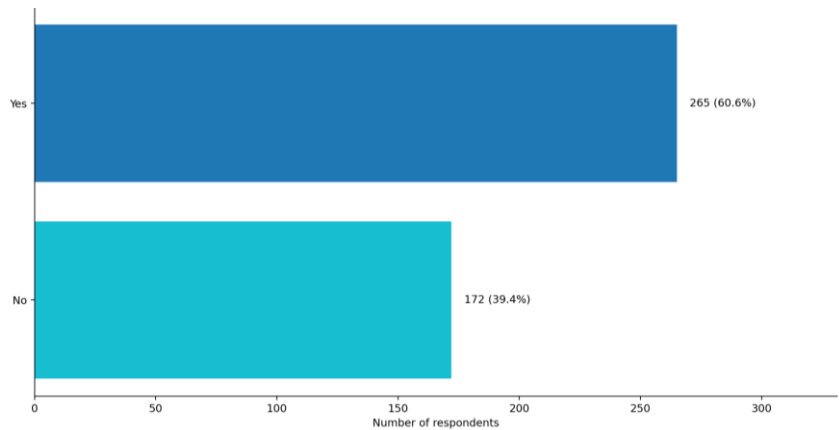


This means the sample was weighted towards older teenagers, particularly those aged 15–18, and towards girls. The sample included young people from across Torbay, with the largest group from Torquay (46%).

Question 6: Have you ever tried vaping?

Of the 437 respondents who answered this question:

- 265 (60.6%) said they had tried vaping at least once
- 172 (39.4%) said they had not.



Notable findings

In this sample, trying vaping was common. Experimentation increased sharply with age:

- 4 of 33 respondents aged 11–12 (12.1%) had tried vaping
- 29 of 71 respondents aged 13–14 (40.8%) had tried vaping
- 123 of 175 respondents aged 15–16 (70.3%) had tried vaping
- 108 of 153 respondents aged 17–18 (70.6%) had tried vaping.

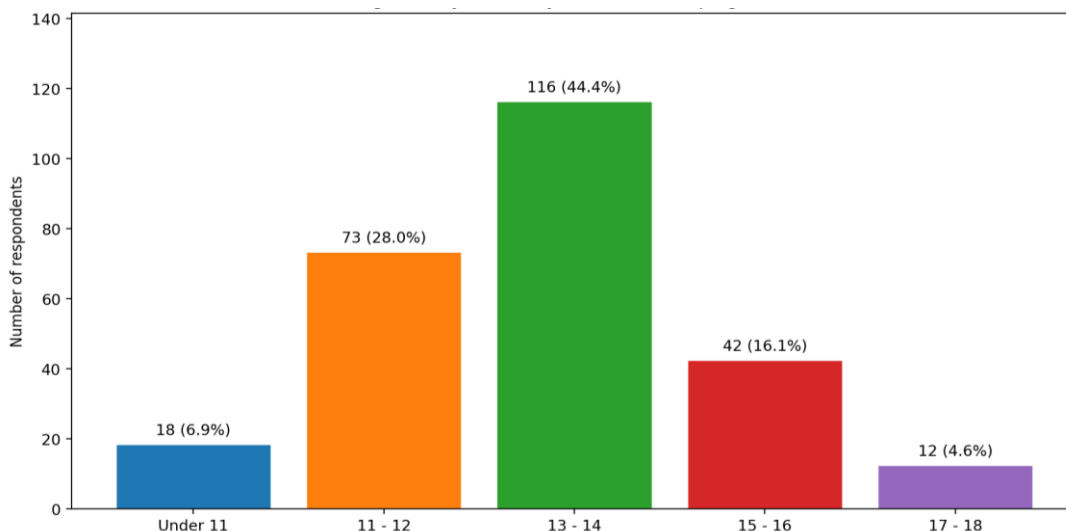
Girls were more likely than boys in this sample to report having tried vaping:

- 169 of 259 female respondents (65.3%)
- 80 of 149 male respondents (53.7%).

Question 7: What age were you when you first tried vaping?

Of the 261 respondents who answered this question:

- 116 (44.4%) said they first tried vaping at age 13–14
- 73 (28.0%) said age 11–12
- 42 (16.1%) said age 15–16
- 18 (6.9%) said under 11
- 12 (4.6%) said age 17–18.



Notable findings

- The most common age for first trying vaping was 13–14.
- 91 of 261 respondents (34.9%) said they first tried vaping before age 13.
- 18 of 261 respondents (6.9%) said they first tried vaping under 11.

Respondents who started younger were more likely to still vape:

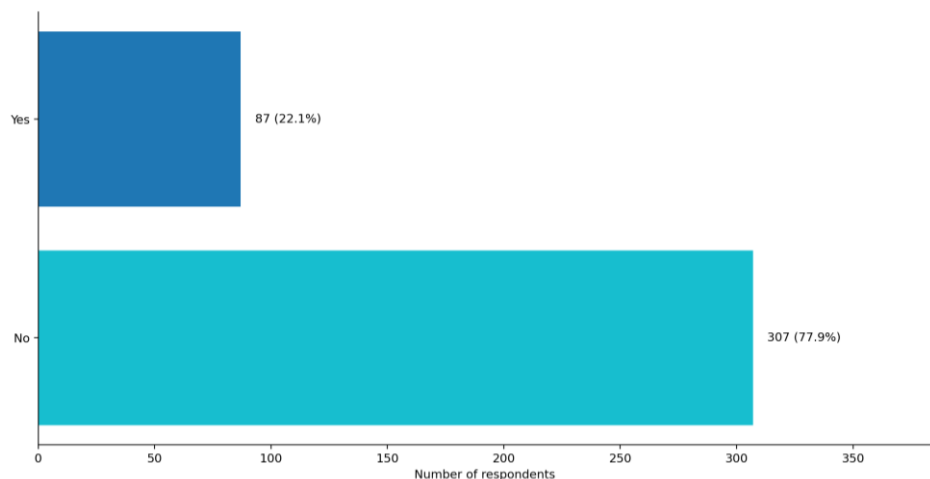
- 13 of 17 who first tried under 11 (76.5%) still vaped
- 51 of 72 who first tried at 11–12 (70.8%) still vaped
- 78 of 115 who first tried at 13–14 (67.8%) still vaped.

compared with 2 of 11 who first tried at 17–18 (18.2%).

Question 8: Do you use any illicit substances?

Of the 390 respondents who answered this question:

- 303 (77.7%) said no
- 87 (22.3%) said yes.



Notable findings

Most respondents did not report using other illicit substances.

However, the relationship with vaping in this sample was strong:

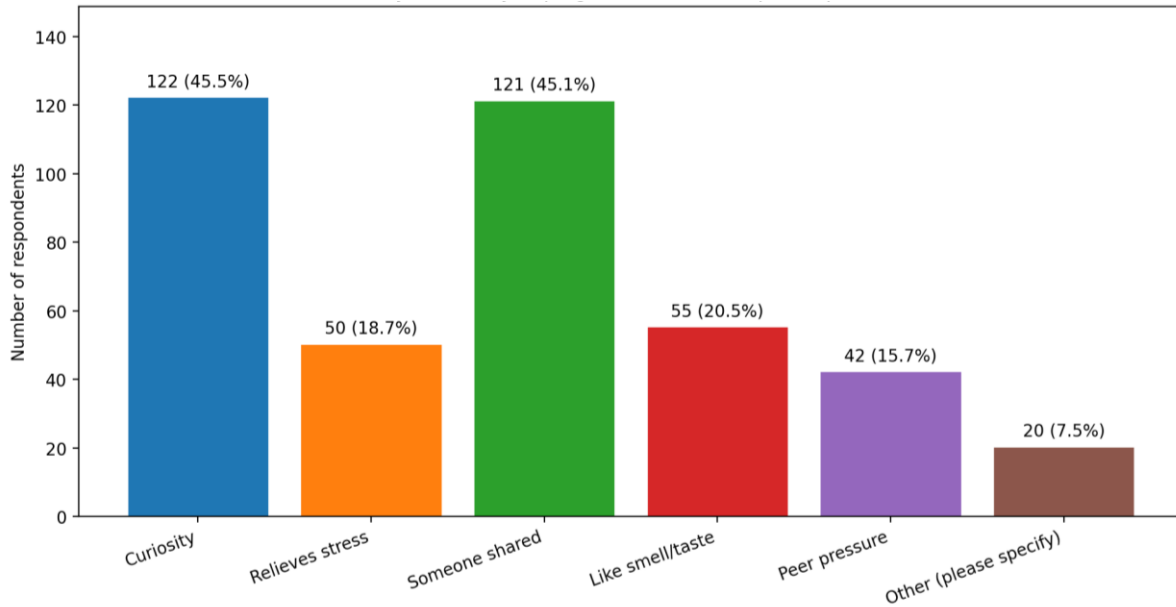
- 86 of 87 respondents who reported illicit substance use (98.9%) had tried vaping
- 73 of 86 respondents who answered both questions (84.9%) said they still vape.

compared with 95 of 296 respondents who said no to illicit substances (32.1%) who still vape.

Question 9: What made you first try vaping?

This question allowed more than one answer. Of the 268 respondents who selected at least one reason:

- 122 (45.5%) said curiosity
- 121 (45.1%) said someone shared a vape
- 55 (20.5%) said they liked the smell or taste
- 50 (18.7%) said stress relief
- 42 (15.7%) said peer pressure
- 20 (7.5%) selected other.



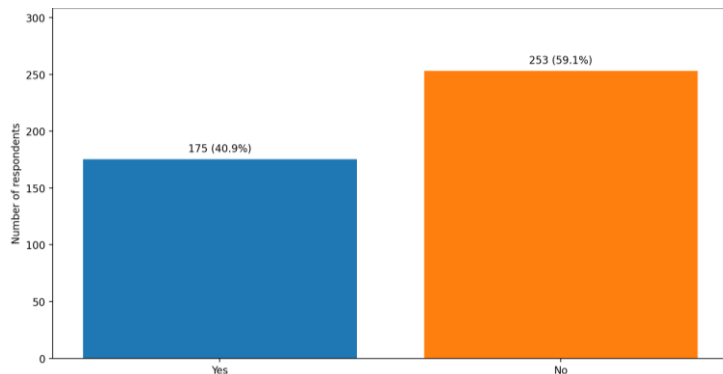
Notable findings

- Curiosity and social sharing were the two most common reasons for first trying vaping.
- Direct peer pressure was less common than social exposure through sharing.
- Stress relief was already a factor for 50 respondents (18.7%) at the point of first trying vaping.

Question 10: Do you still vape?

Of the 428 respondents who answered this question:

- 175 (40.9%) said yes
- 253 (59.1%) said no.



Notable findings

Current vaping also increased with age in this sample:

- 1 of 25 respondents aged 11–12 (4.0%) said they still vape
- 21 of 71 respondents aged 13–14 (29.6%)
- 79 of 178 respondents aged 15–16 (44.4%)
- 73 of 149 respondents aged 17–18 (49.0%).

Girls were more likely than boys in this sample to say they still vape:

- 111 of 251 female respondents (44.2%)
- 54 of 148 male respondents (36.5%).

Q10: Clarification on current vaping:

In the survey, respondents were directed to different question pathways depending on whether they vaped or not. In this context, Question 10 (“Do you still vape?”) functioned as a measure of current vaping status. However, due to the wording of the question, this should be interpreted as an indication of current use rather than a precise continuation measure.

Exploratory analysis:

Based on comparison of responses to “ever tried vaping” and current vaping, it is estimated that around one in five respondents may have tried vaping but were not currently vaping at the time of the survey. This should be treated as indicative only and interpreted with caution.

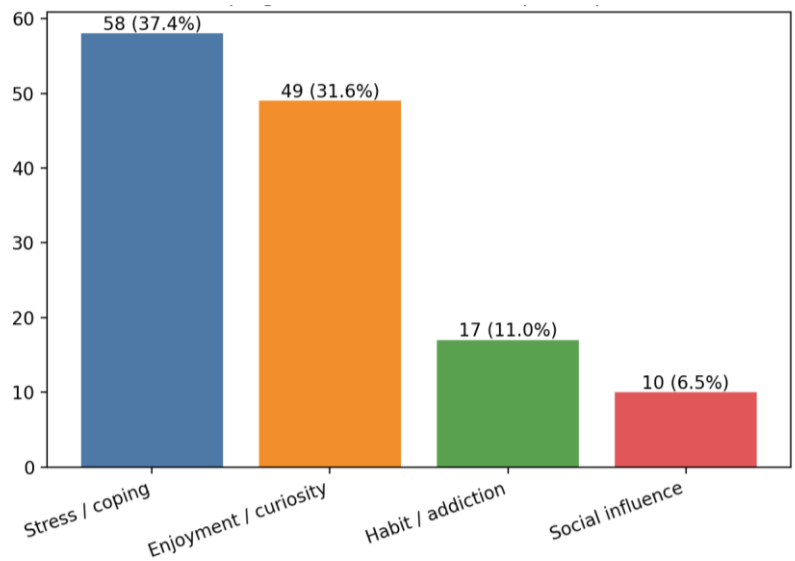
Question 11: Why do you vape?

The open-ended question received 155 responses.

Key Themes

Responses suggest that vaping is often linked to:

- Stress and emotional coping – 58 respondents (37.4%)
- Enjoyment or curiosity – 49 respondents (31.6%)
- Habit and addiction – 17 respondents (11.0%)
- Social influence and normalisation – 10 respondents (6.5%).



Note: Responses could include more than one theme.

Young people frequently described vaping as something that helps them manage feelings or fits into their daily routine.

Selected respondent quotes

“Because it calms me down and people around me do”

“stress, addicted”

“I enjoy it”

Responses Summary & Observations

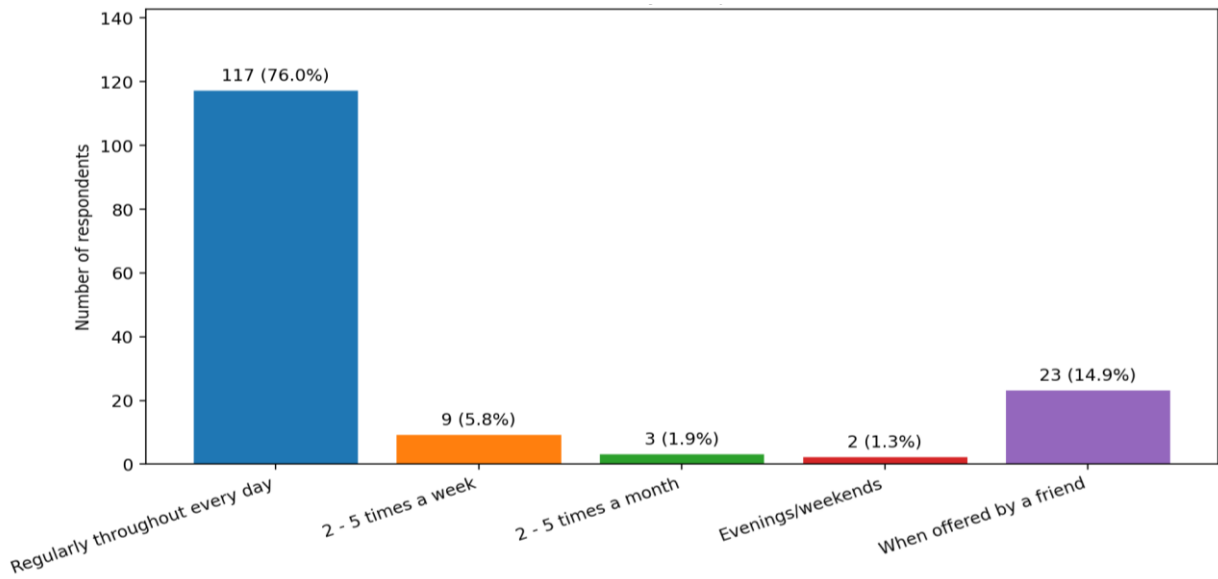
Stress and anxiety relief was the most common reason for continuing to vape, followed by enjoyment and curiosity. Habit and addiction were also evident, suggesting that for some young people vaping had become embedded behaviour rather than occasional use.

Social influence was mentioned less frequently in direct responses, but still appears to play a role in shaping behaviours. Very few respondents described vaping as a way to stop smoking. Overall, the qualitative responses suggest that, for some young people, vaping has moved beyond experimentation and become part of how they manage stress, routine or social situations.

Question 12: How often do you vape?

Of the 169 respondents who answered this question:

- 117 (69.2%) said regularly throughout every day
- 23 (13.6%) said when offered by a friend
- 15 (8.9%) said 2–5 times a day
- 9 (5.3%) said 2–5 times a week
- 3 (1.8%) said 2–5 times a month
- 2 (1.2%) said evenings or weekends.



Notable findings

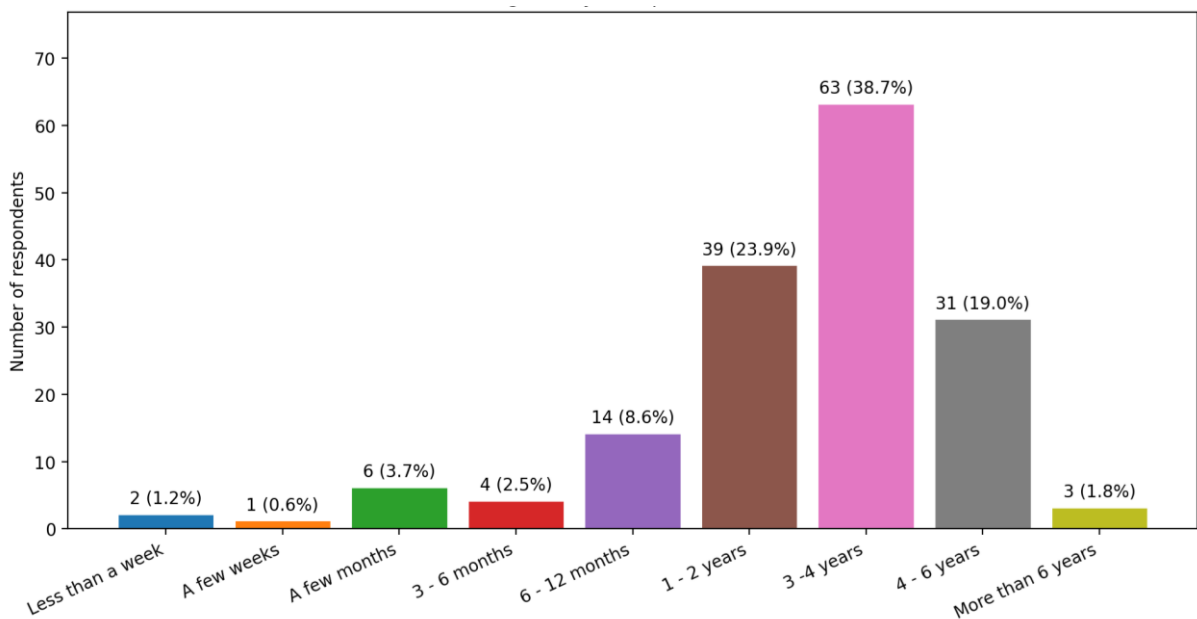
Most current vapers in this sample described vaping as frequent, with 117 of 169 respondents (69.2%) saying they vape regularly throughout every day.

This supports the observation that vaping often appeared to be an established daily habit rather than occasional use.

Question 13: How long have you vaped for?

Of the 163 respondents who answered this question:

- 63 (38.7%) said 3–4 years
- 39 (23.9%) said 1–2 years
- 31 (19.0%) said 4–6 years
- 14 (8.6%) said 6–12 months
- 6 (3.7%) said a few months
- 4 (2.5%) said 3–6 months
- 3 (1.8%) said more than 6 years
- 2 (1.2%) said less than a week
- 1 (0.6%) said a few weeks



Notable findings

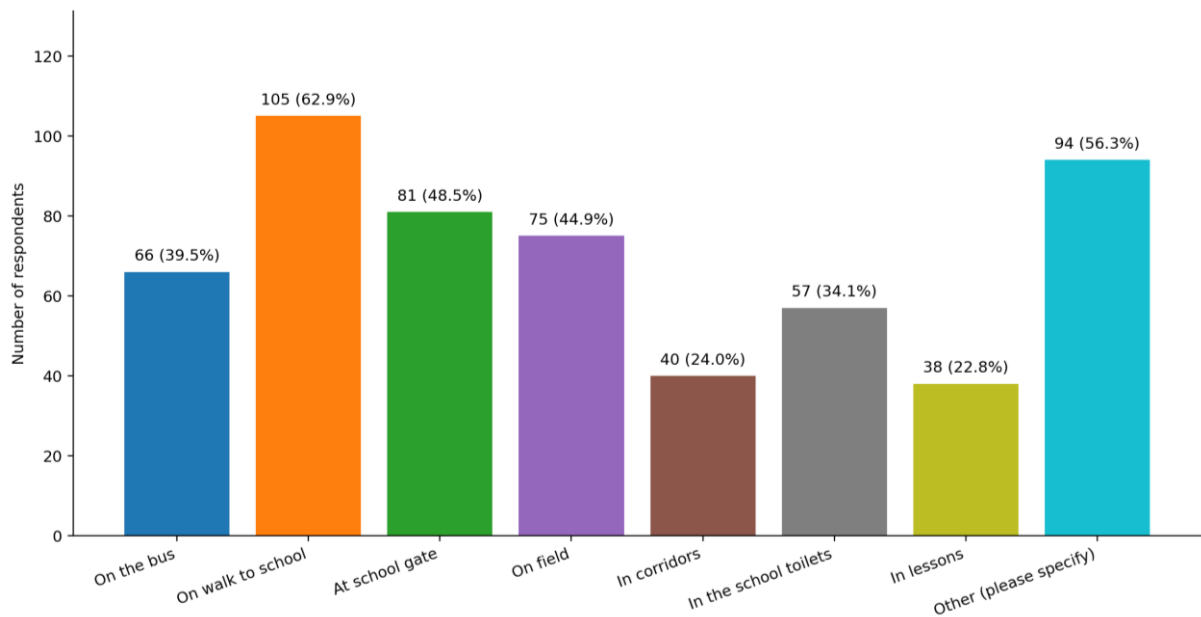
94 of 163 respondents (57.7%) said they had been vaping for 3 years or more.

This supports the observation that for many current vapers in this sample, vaping was not short-term experimentation.

Question 14: Where do you usually vape?

This question allowed more than one answer. Of the 167 respondents who selected at least one location:

- 105 (62.9%) said on the walk to school
- 94 (56.3%) selected other
- 81 (48.5%) said at the school gate
- 75 (44.9%) said on the field
- 66 (39.5%) said on the bus
- 57 (34.1%) said in the school toilets
- 40 (24.0%) said in corridors
- 38 (22.8%) said in lessons



Notable findings

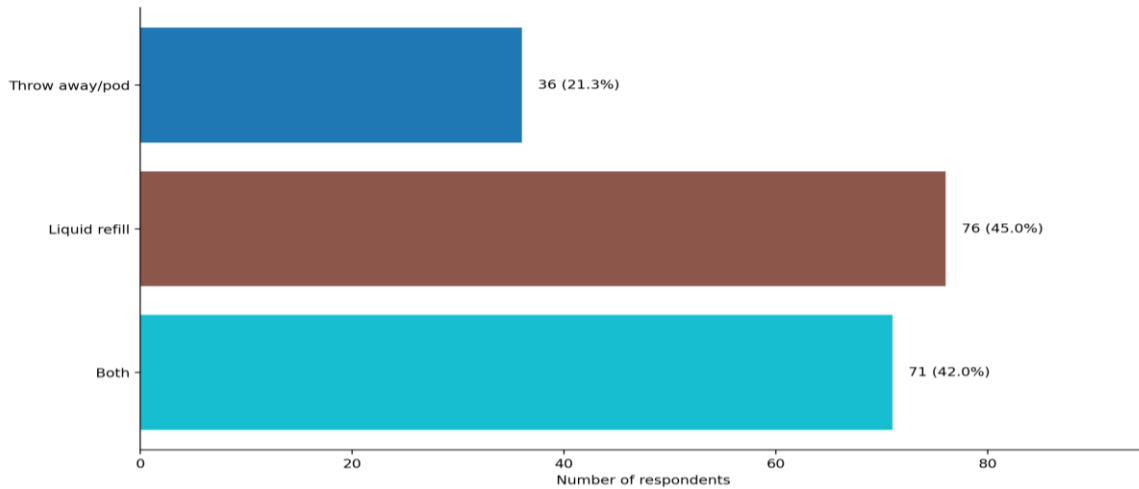
Vaping was described across a wide range of everyday spaces.

School settings featured strongly, especially gates, fields, toilets, corridors and lessons.

Question 15: What type of vape do you use?

This question allowed more than one answer. Of the 169 respondents who answered:

- 76 (45.0%) said liquid refill
- 71 (42.0%) said both
- 36 (21.3%) said throw away or pod



Notable findings

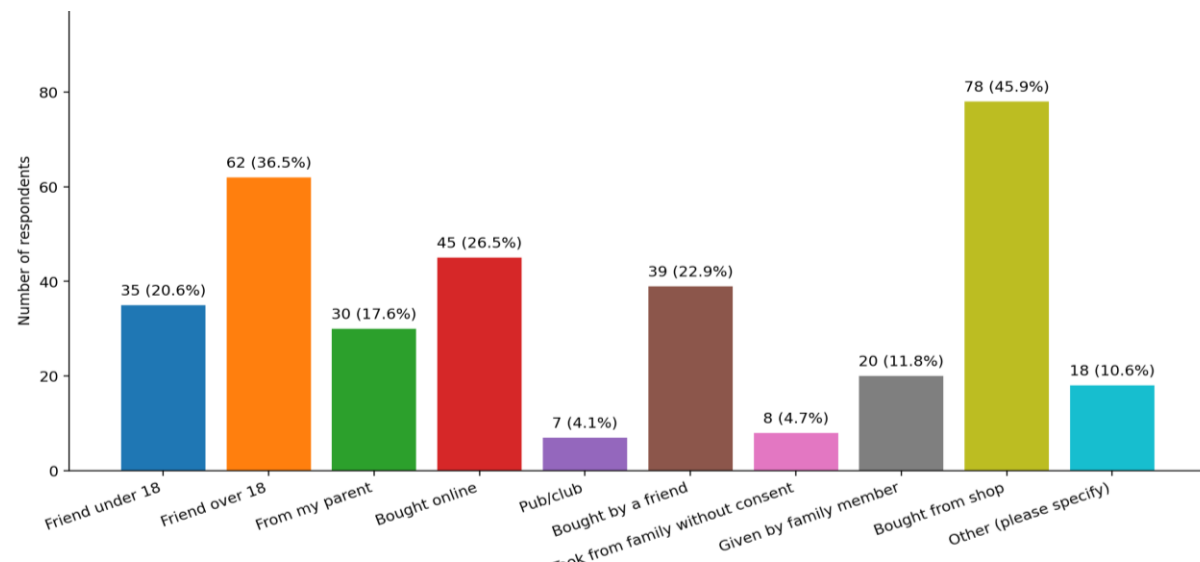
Refillable products appeared slightly more common than disposables in this sample.

The high “both” response suggests some respondents were using more than one type or interpreted the question as current and past use.

Question 16: Where do you get your vape liquid?

Of the 170 respondents who answered:

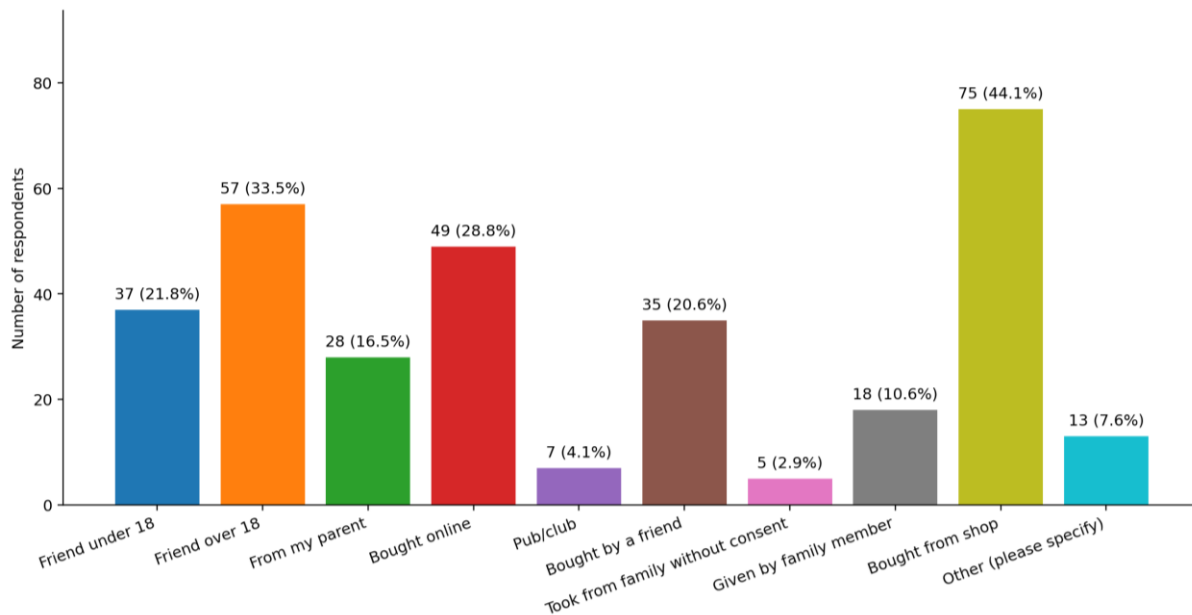
- 78 (45.9%) bought it from a shop
- 62 (36.5%) got it from a friend over 18
- 45 (26.5%) bought it online
- 39 (22.9%) said bought by a friend
- 35 (20.6%) said friend under 18
- 30 (17.6%) said from a parent
- 20 (11.8%) said given by a family member
- 18 (10.6%) selected other



Question 17: Where do you get your vape?

Of the 170 respondents who answered:

- 75 (44.1%) bought it from a shop
- 57 (33.5%) got it from a friend over 18
- 49 (28.8%) bought it online
- 37 (21.8%) said friend under 18
- 35 (20.6%) said bought by a friend
- 28 (16.5%) said from a parent
- 18 (10.6%) said given by a family member
- 13 (7.6%) selected other



Notable findings

Multiple routes of access were reported. Shop purchases, older friends and online access were all common.

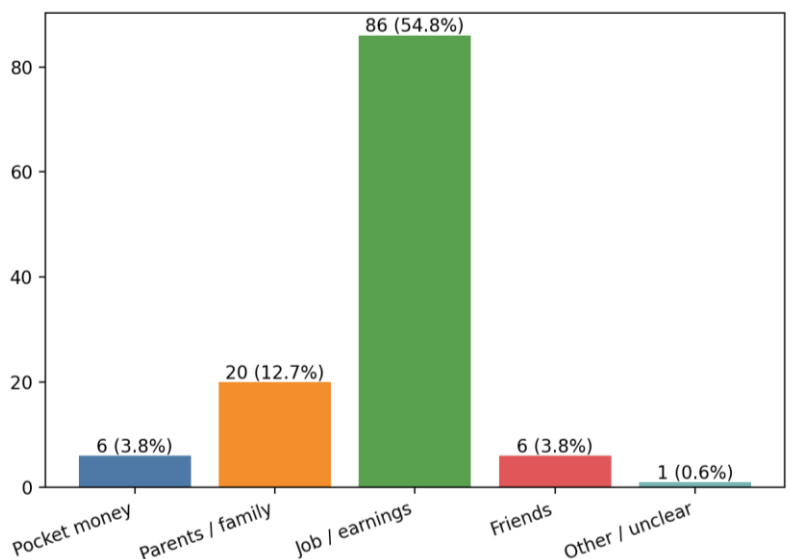
Question 18: Where do you get the money to vape?

The open-ended question received 157 responses.

Key Themes

Responses suggest that young people most commonly obtain money for vaping through:

- Job or personal earnings – 86 respondents (54.8%)
- Parents or family members – 20 respondents (12.7%)
- Pocket money or allowance – 6 respondents (3.8%)
- Friends – 6 respondents (3.8%)
- Other or unclear sources – 1 respondent (0.6%)



Note: Responses could include more than one theme.

Selected respondent quotes

“my job”
“family”
“I make my friends buy them”
“my savings”

Responses Summary & Observations

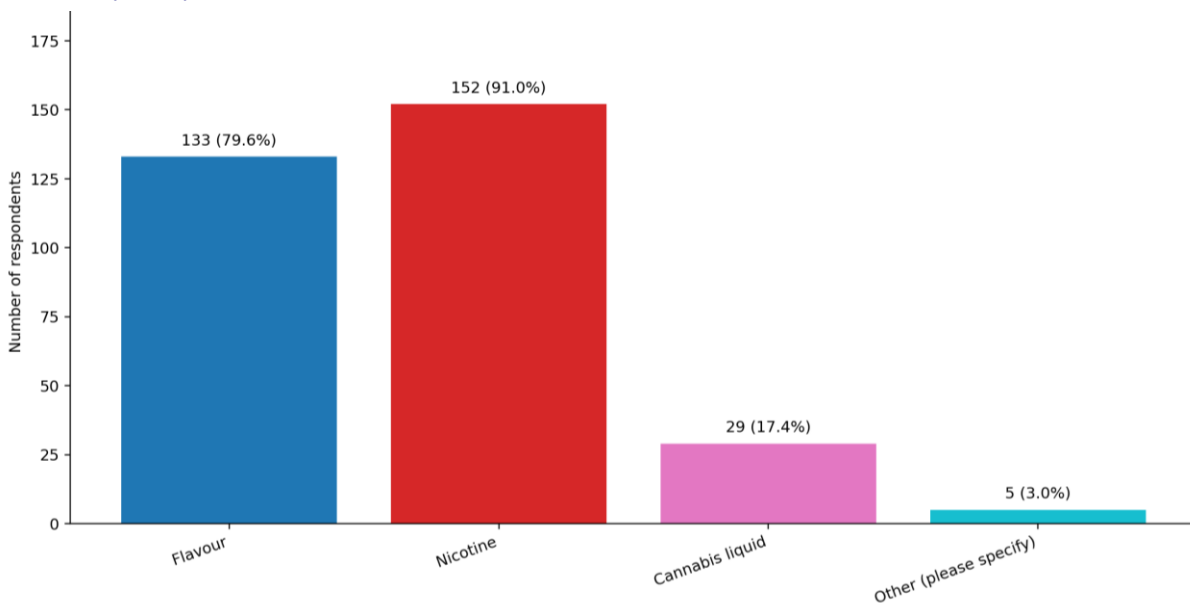
The majority of respondents indicated that vaping is funded through their own earnings, suggesting a level of financial independence among users.

A smaller proportion rely on family or pocket money, while very few referenced friends or were unclear. This indicates that cost may not be a significant barrier for some young people who vape.

Question 19: What’s in the vape you use?

This question allowed more than one answer. Of the 167 respondents (100.0%) who answered:

- 152 (91.0%) said nicotine
- 133 (79.6%) said flavour
- 29 (17.4%) said cannabis liquid
- 5 (3.0%) selected other



Notable findings

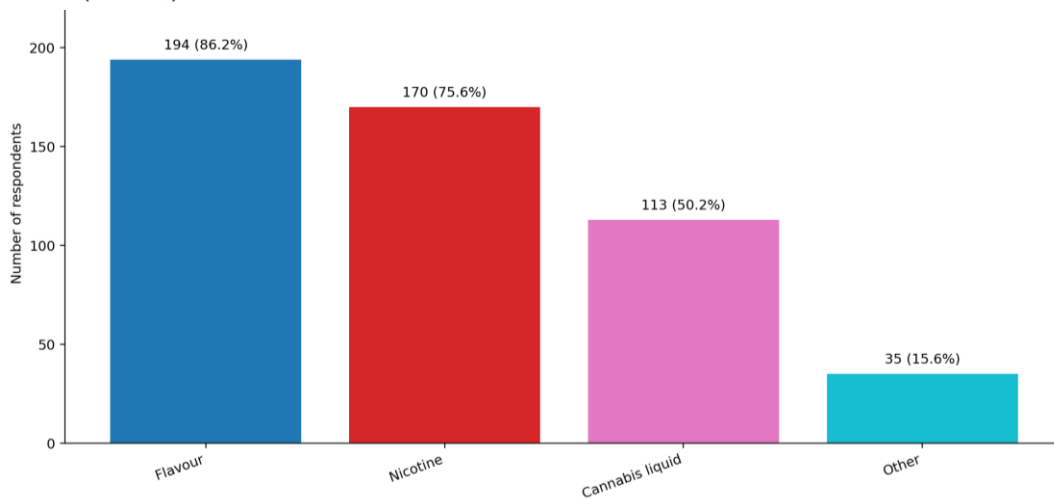
Nicotine was reported by 152 of 167 respondents (91.0%).

Cannabis liquid was reported by 29 respondents (17.4%), which is a sizeable minority in a school-age sample.

Question 19b: What vapes have you heard about? (answered by non-vapers)

This question allowed more than one answer. Of the 225 respondents who answered:

- 194 (86.2%) had heard about flavour vapes
- 170 (75.6%) had heard about nicotine vapes
- 113 (50.2%) had heard about cannabis liquid
- 35 (15.6%) selected other



Notable findings

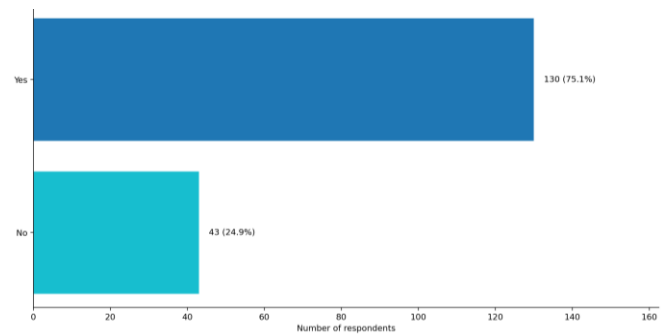
Awareness of cannabis vapes among non-vapers was higher than actual reported use among vapers. Cannabis vaping may have a larger presence in awareness and conversation than in direct reported use.

Question 20: Do your parents, guardians or anyone else in your family vape?

Among current vapers

Of the 166 current vapers who answered:

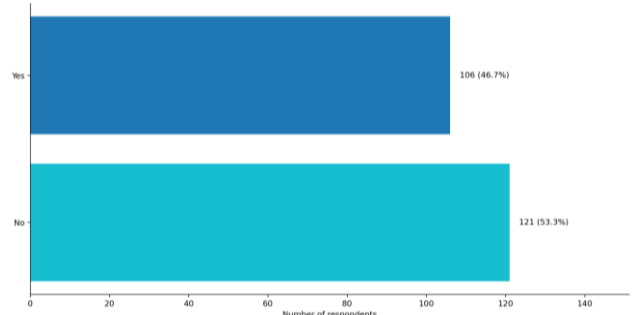
- 126 (75.9%) said yes
- 40 (24.1%) said no



Among non-vapers

Of the 227 non-vapers who answered the parallel question:

- 106 (46.7%) said yes
- 121 (53.3%) said no



Notable findings

Family vaping was much more common among current vapers in this sample than among non-vapers. This is best described as a clear association within the sample, not proof of cause.

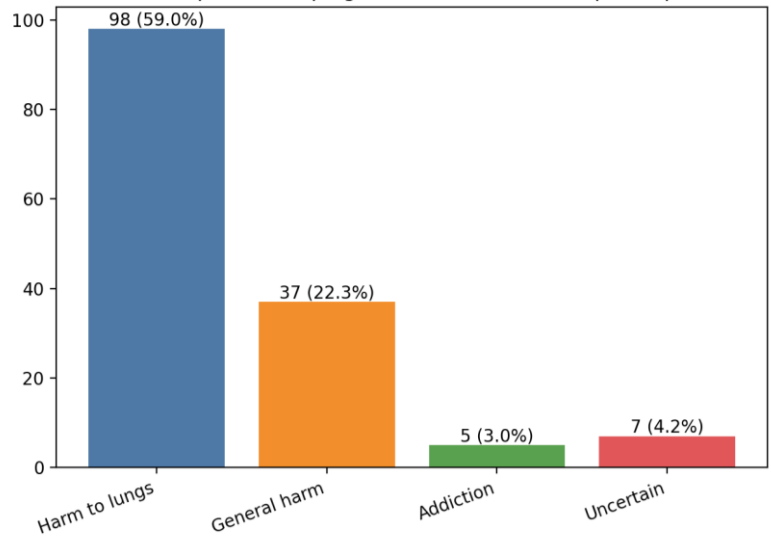
Question 21: How do you think vaping affects your health?

The open-ended question received 166 responses.

Key Themes

Responses suggest that young people believe vaping:

- Harms the lungs and breathing – 98 respondents (59.0%)
- Is generally harmful to health – 37 respondents (22.3%)
- Is not well understood or uncertain – 7 respondents (4.2%)
- Leads to addiction (nicotine dependence) – 5 respondents (3.0%)



Note: Responses could include more than one theme.

Selected respondent quotes

- “make my lungs bad”
- “bad for you”
- “gives you popcorn lungs”

Responses Summary & Observations

Most respondents clearly associate vaping with lung damage, indicating strong awareness of respiratory harm. However, understanding beyond this is often limited, with fewer references to addiction or wider health impacts.

This suggests that while key messages are reaching young people, understanding remains relatively surface-level.

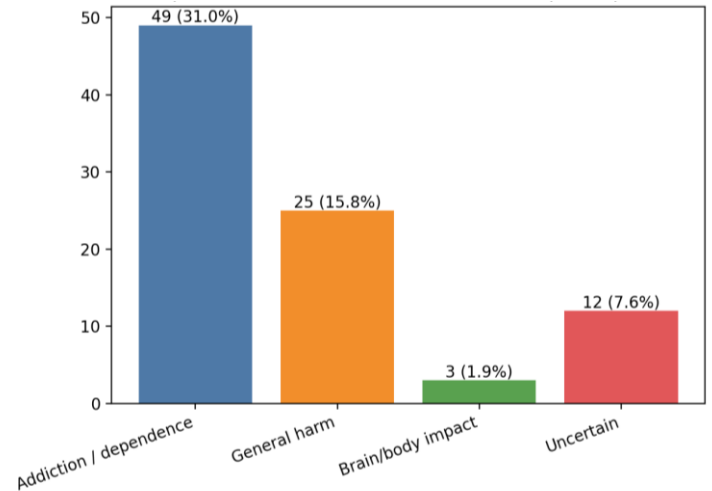
Question 22: How do you think nicotine affects your health?

The open-ended question received 158 responses.

Key Themes

Responses suggest that young people believe nicotine:

- Leads to addiction and dependence – 49 respondents (31.0%)
- Is generally harmful to health – 25 respondents (15.8%)
- Is not well understood or uncertain – 12 respondents (7.6%)
- Harms the brain or body – 7 respondents (4.4%)



Note: Responses could include more than one theme.

Selected respondent quotes

“it’s addictive”

“bad for you”

“I don’t really know”

Responses Summary & Observations

Addiction was the most commonly identified impact of nicotine, suggesting a reasonable level of awareness among young people. However, fewer responses referenced specific physical effects, and some uncertainty remains.

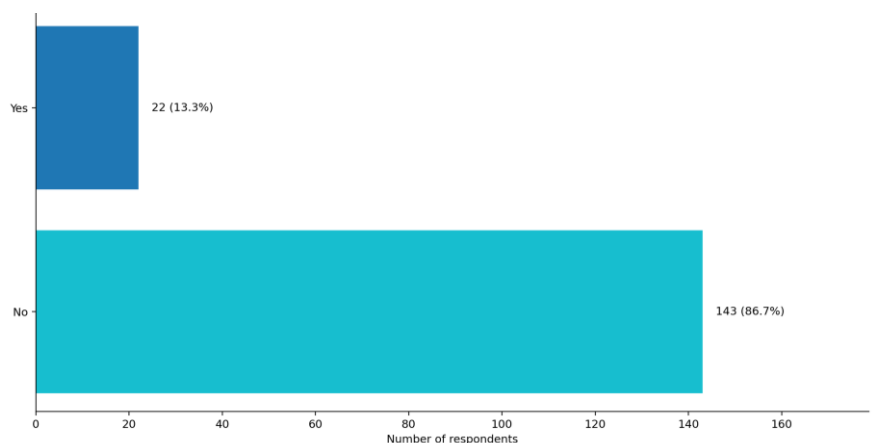
This indicates that while key messages about addiction are reaching young people, understanding of wider health impacts is more limited.

Question 23: Do you think vaping is safe?

Among current vapers

Of the 165 current vapers who answered:

- 143 (86.7%) said no
- 22 (13.3%) said yes



Among non-vapers

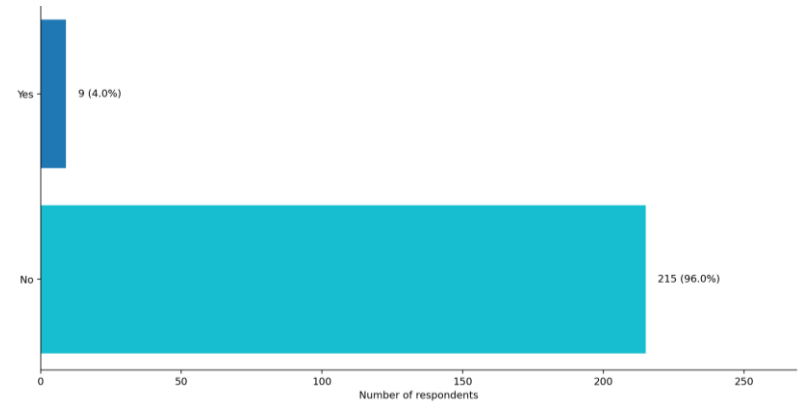
Of the 224 non-vapers who answered the parallel question:

- 215 (96.0%) said no
- 9 (4.0%) said yes

Notable findings

Most respondents in both groups said vaping was not safe.

Even among current vapers, 143 of 165 respondents (86.7%) said it was not safe.



Question 24: Do you think vaping is safer than smoking?

Among current vapers

Of the 160 current vapers who answered:

- 89 (55.6%) said yes
- 71 (44.4%) said no

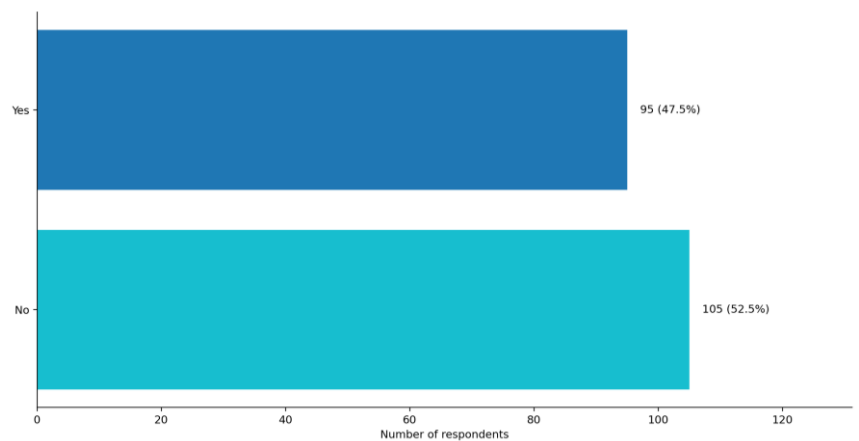
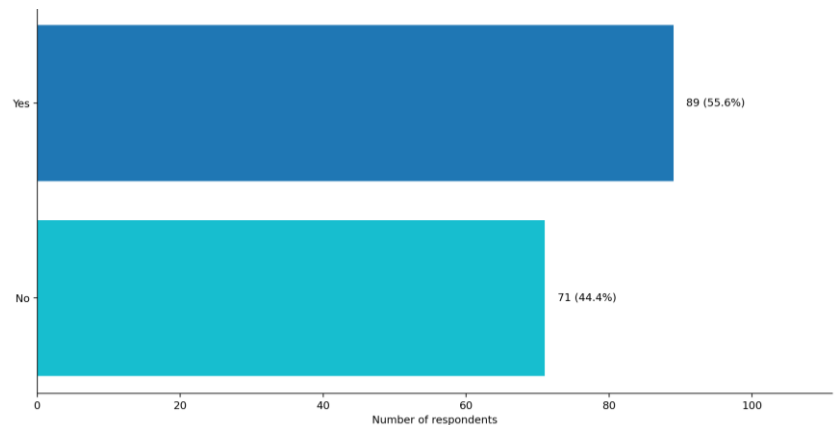
Among non-vapers

Of the 200 non-vapers who answered the parallel question:

- 95 (47.5%) said yes
- 105 (52.5%) said no

Notable findings

Views were mixed in both groups, supporting the view that there was no clear consensus on the relative safety of vaping versus smoking.



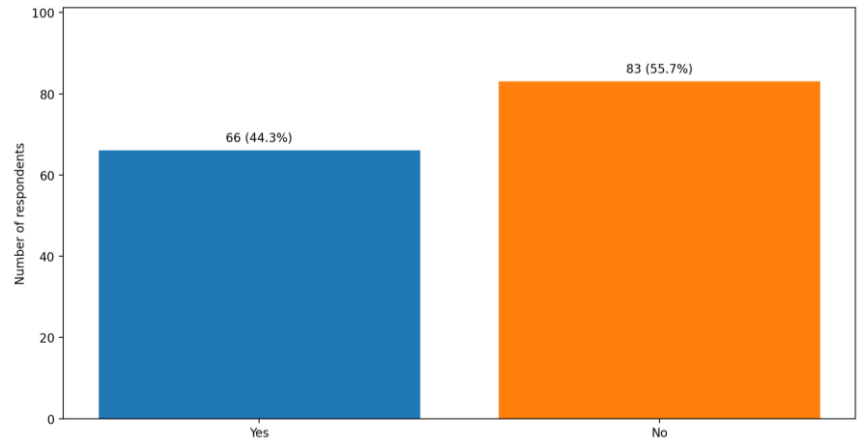
Question 25: Do you want to quit?

Of the 149 current vapers who answered:

- 66 (44.3%) said yes
- 83 (55.7%) said no

Notable findings

Almost half of the current vapers answering this question said they wanted to quit. A sizeable minority may welcome support.



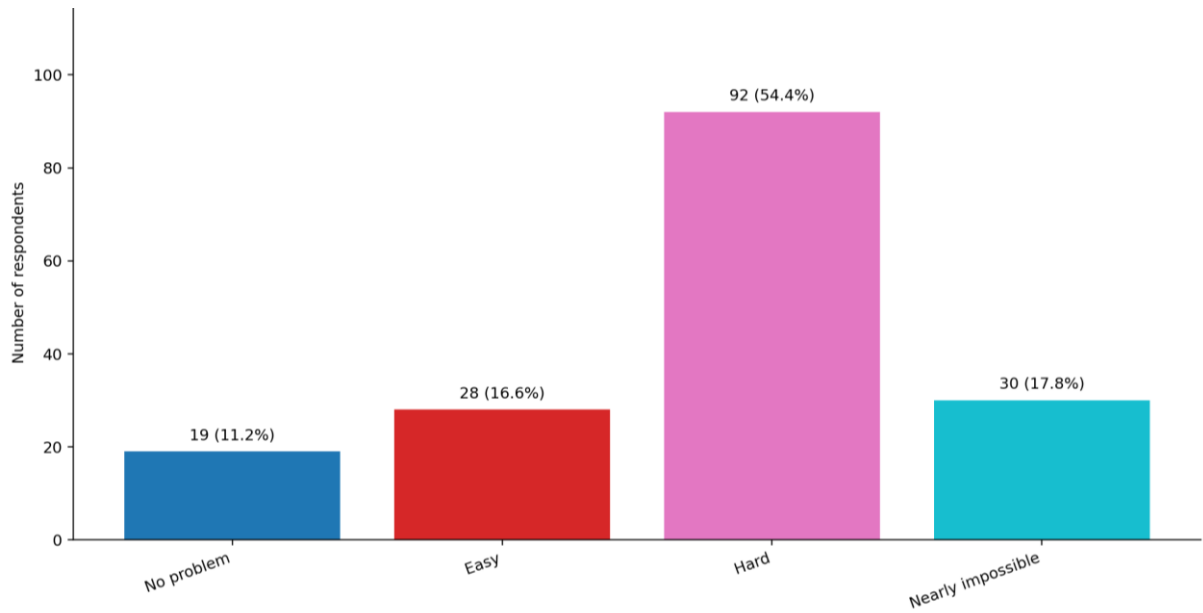
Question 26: How hard do you think quitting is?

Among current vapers

Of the 169 respondents who answered:

- 92 (54.4%) said hard
- 30 (17.8%) said nearly impossible
- 28 (16.6%) said easy
- 19 (11.2%) said no problem

Combined, 122 of 169 respondents (72.2%) said quitting would be hard or nearly impossible.

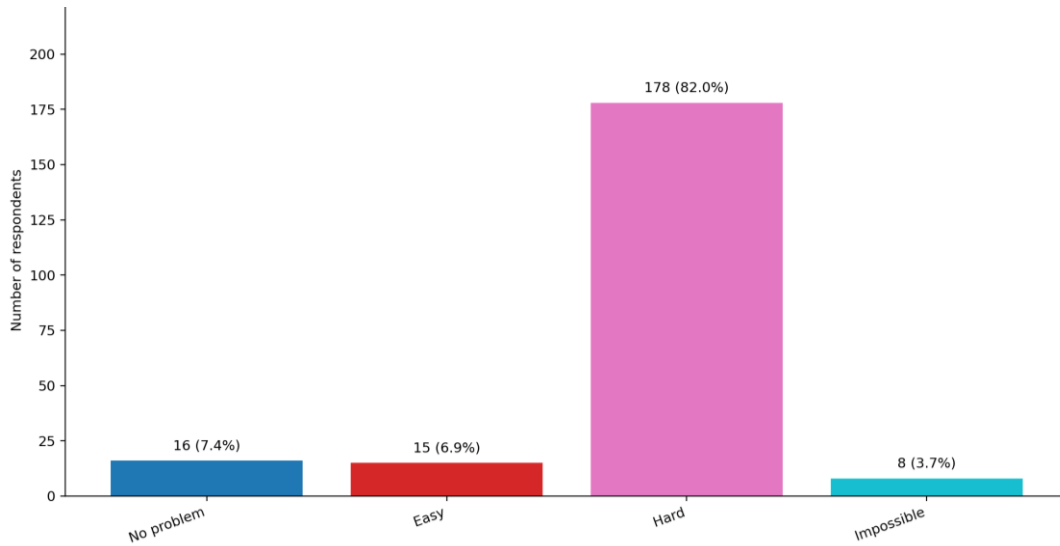


Among non-vapers

Of the 217 respondents who answered the parallel question:

- 178 (82.0%) said hard
- 16 (7.4%) said no problem

- 15 (6.9%) said easy
- 8 (3.7%) said impossible



Notable findings

Quitting was widely seen as difficult, especially by non-vapers.

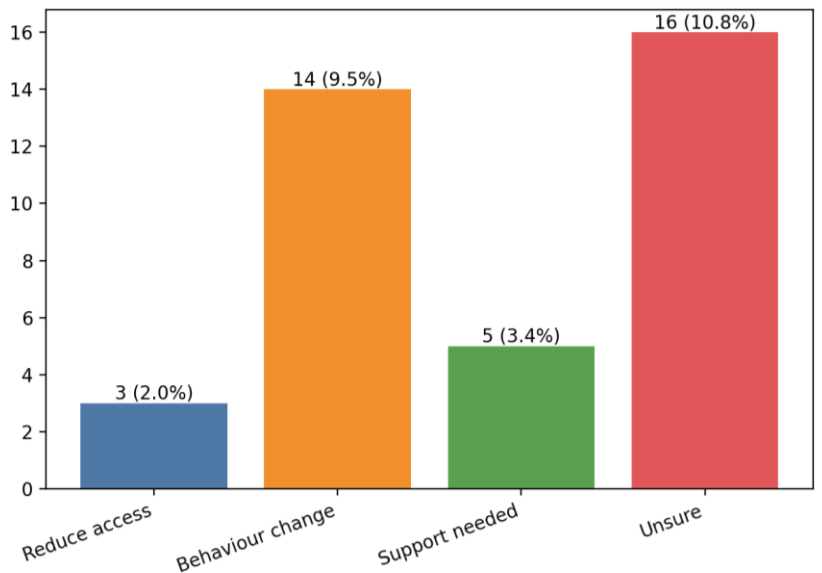
Question 27: What might help you quit?

The open-ended question received 148 responses.

Key Themes

Responses suggest that quitting may be supported by:

- Uncertainty about how to quit – 16 respondents (10.8%)
- Behaviour change and self-control strategies – 14 respondents (9.5%)
- Access to support or guidance – 5 respondents (3.4%)
- Reducing access and availability – 3 respondents (2.0%)



Note: Responses could include more than one theme.

Selected respondent quotes

- “not buying one. not having one at home.”
- “barriers to prevent access”
- “I don’t know”

Responses Summary & Observations

A notable finding is the level of uncertainty around quitting, with “I don’t know” being the most common response. Where suggestions were given, these focused on individual behaviour change rather than formal support.

This highlights a clear gap in awareness of available support and suggests the need for more visible, youth-friendly quitting interventions.

Question 28: Why do you not vape?

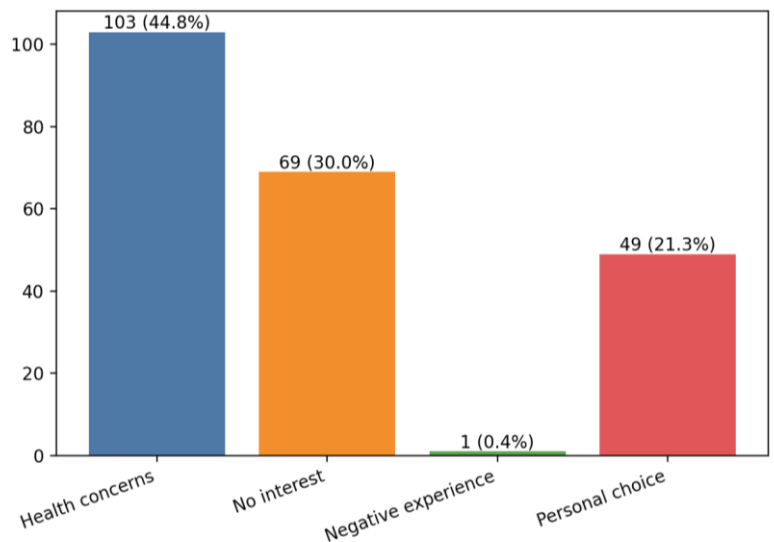
The open-ended question received 230 responses.

Key Themes

Responses suggest that young people do not vape due to:

- Health concerns – 103 respondents (44.8%)
- Lack of interest or perceived benefit – 69 respondents (30.0%)
- Personal choice and values – 49 respondents (21.3%)
- Negative experiences (e.g. feeling unwell) – 1 respondent (0.4%)

Note: Responses could include more than one theme.



Selected respondent quotes

“I did not see a point in it, and it also made me feel nauseous”

“don’t want to”

“I don’t like it”

Responses Summary & Observations

Health concerns were the most common reason for not vaping, alongside a general lack of interest or perceived benefit. Some young people described negative personal experiences, while others framed not vaping as a clear personal choice.

Overall, responses suggest that non-vaping is often an active decision, even within environments where vaping is common.

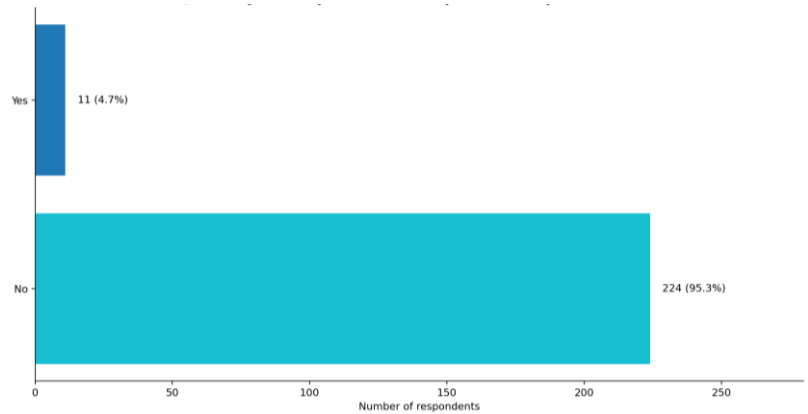
Question 29: Do you feel pressured to vape?

Of the 235 non-vapers who answered:

- 224 (95.3%) said no
- 11 (4.7%) said yes

Notable findings

Direct pressure was uncommon in this sample. Social influence may be more subtle than overt.



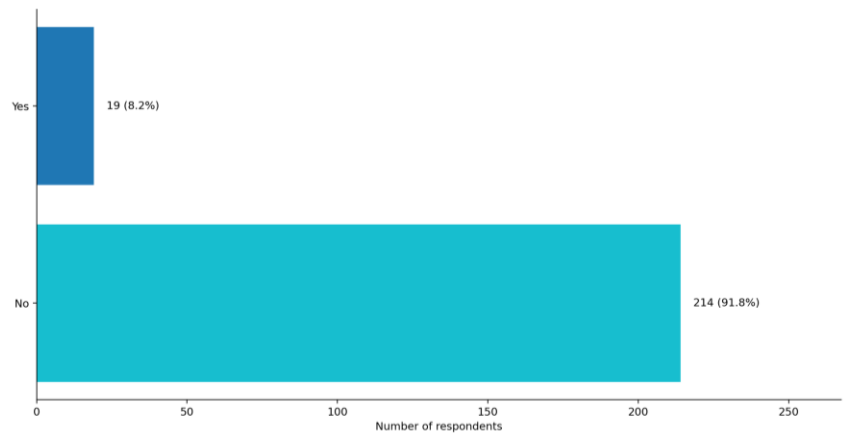
Question 30: Do you feel left out because you do not vape?

Of the 233 non-vapers who answered:

- 214 (91.8%) said no
- 19 (8.2%) said yes

Notable findings

Most non-vapers did not feel left out. A smaller minority did report some exclusion, which is still worth noting.



Question 31: How do you feel about friends who vape?

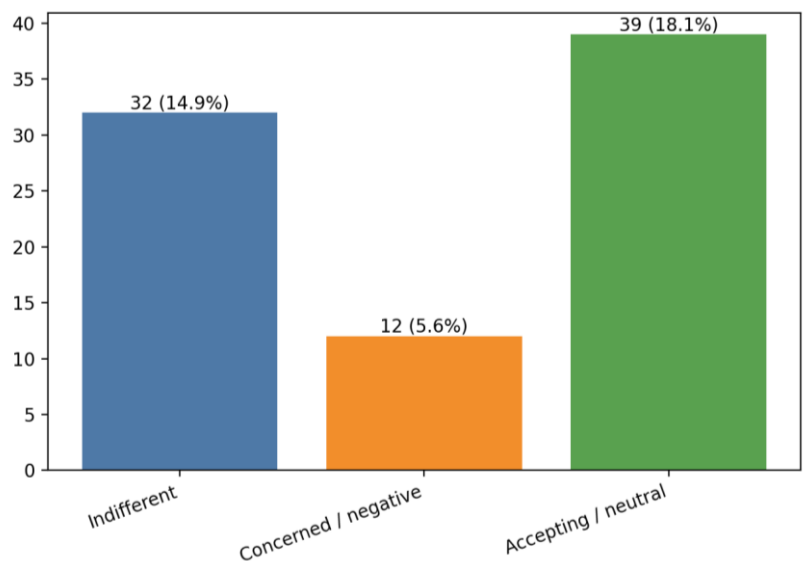
The open-ended question received 215 responses.

Key Themes

Responses suggest that young people feel:

- Indifferent or unconcerned – 32 respondents (14.9%)
- Concerned or negative about vaping – 14 respondents (6.5%)
- Accepting or neutral towards friends who vape – 8 respondents (3.7%)

Note: Responses could include more than one theme.



Selected respondent quotes

"I don't care"

"It's their choice"

"I think it's bad for them"

Responses Summary & Observations

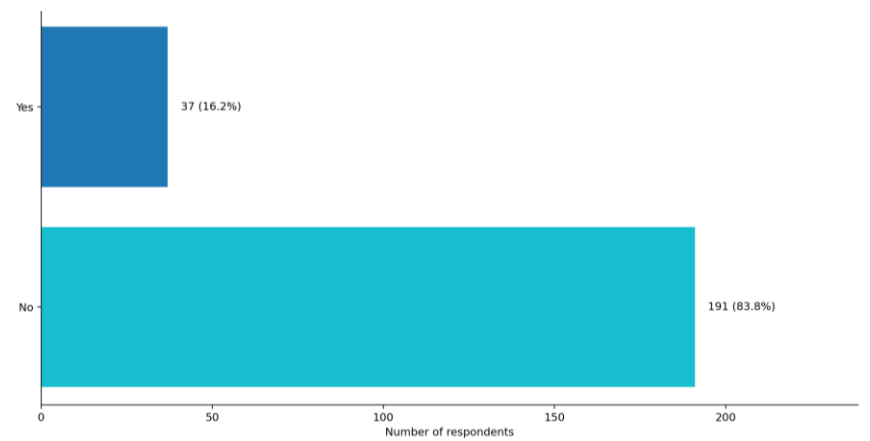
Many respondents expressed indifference towards friends who vape, suggesting that vaping may be normalised within peer groups. Others showed concern about the health impacts, while some took a more accepting stance, framing it as a personal choice.

Overall, responses indicate that peer attitudes may not strongly discourage vaping, which may contribute to its continued prevalence.

Question 32: Is money part of the reason you do not vape?

Of the 228 non-vapers who answered:

- 191 (83.8%) said no
- 37 (16.2%) said yes



Notable findings

For most non-vapers, money was not the main reason they did not vape. Cost seems not to be a major barrier overall.

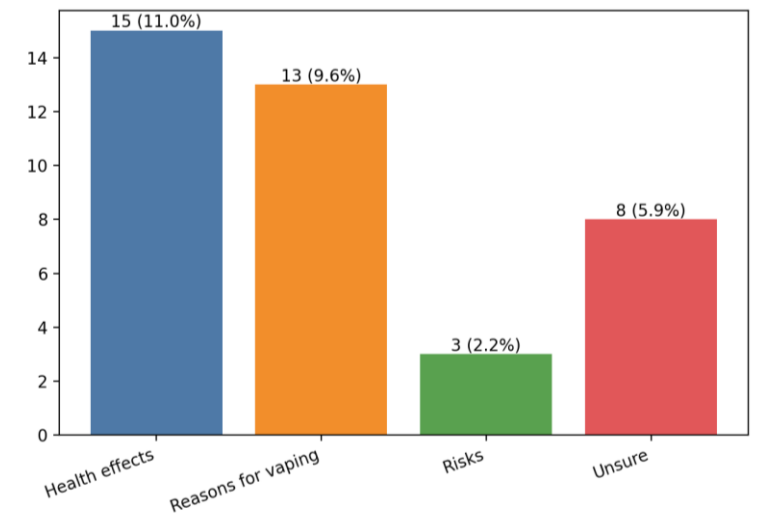
Question 33: What information would you like about vaping?

The open-ended question received 136 responses.

Key Themes

Young people expressed a need for:

- Clear information on health effects – 15 respondents (11.0%)
- Reasons why young people vape – 13 respondents (9.6%)
- Uncertainty or lack of specific information needs – 8 respondents (5.9%)
- Understanding what vaping does to the body – 2 respondents (1.5%)



Note: Responses could include more than one theme.

Selected respondent quotes

"Why do young people vape? What does it do to your body exactly?"

"I don't know"

Responses Summary & Observations

Responses indicate a desire for clearer and more detailed information, particularly around health effects and why vaping is appealing to young people.

However, relatively low response volumes and frequent uncertainty suggest that existing information may not be engaging or clearly understood.

Final open question: Is there anything else you would like to add?

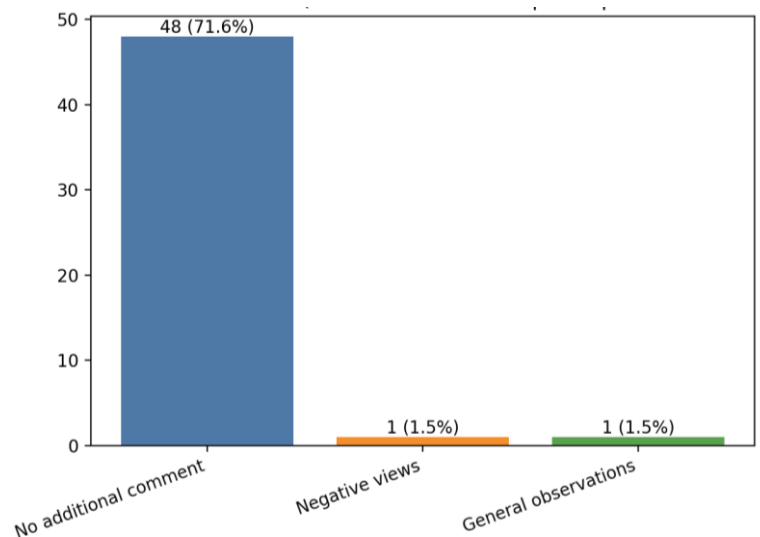
The open-ended question received 67 responses.

Key Themes

Responses were limited but suggest:

- No additional comment or low engagement – 48 respondents (71.6%)
- General observations about vaping or peers – 1 respondent (1.5%)
- Negative views of vaping (e.g. smell or nuisance) – 1 respondent (1.5%)

Note: Responses could include more than one theme.



Selected respondent quotes

"Curiosity – what are the long term effects on health?"

"Vaping can start young. I know someone who started in primary school."

"I hate the smell of vapes."

"Vaping has been romanticized but it is not good."

Responses Summary & Observations

Most respondents did not provide additional comments, suggesting limited further input beyond the structured questions. Where comments were provided, these tended to reinforce negative perceptions of vaping rather than introduce new themes.

This indicates that the survey questions captured the majority of relevant views.

Summary of the young people's survey

In this sample, trying vaping was common and often began in early adolescence, with most first use reported before the age of 15. Curiosity and social sharing were the most common reasons for experimentation, while continued use was more often linked to stress, anxiety, habit and routine.

Current vaping was more common among older respondents, among girls than boys, and among those reporting other substance use.

Further exploratory analysis also suggests some differences in experience across age groups, with younger respondents more likely to describe social influences around first use, and older respondents more likely to describe regular use, stress-related reasons and difficulty quitting. These patterns should be treated as indicative, but they support the case for age-appropriate prevention and support.

Family vaping was also reported more frequently by current vapers than non-vapers, suggesting a strong influence of home environment and role modelling.

Although most respondents recognised that vaping is not safe, this awareness did not consistently prevent use. Regular use was common among current vapers, many of whom described patterns of frequent daily use and difficulty stopping. While almost half said they would like to quit, most reported that quitting would be difficult or nearly impossible.

2. Teacher and Professional Survey

To complement the insights gathered from young people, a survey was conducted with teachers and professionals working with children and young people across Torbay. The aim was to understand frontline perspectives on youth vaping, including perceived trends, behaviours, risks, and the effectiveness of current responses.

A total of 44 responses were received. While the sample size is modest, it provides valuable insight from those working directly with young people in educational and support settings. These perspectives help to contextualise the experiences shared by young people and identify areas where additional support or intervention may be needed.

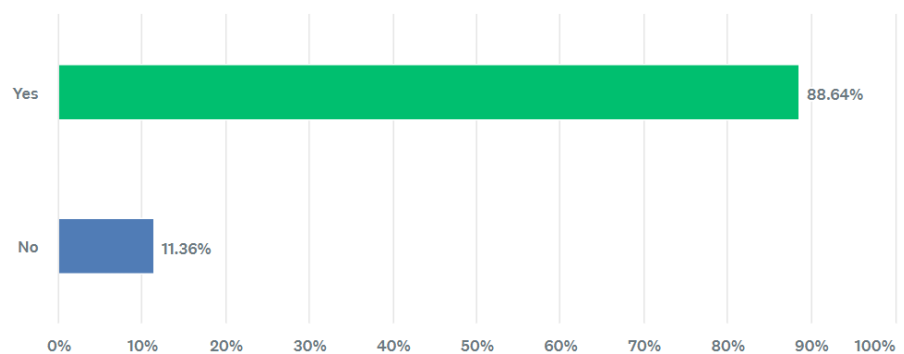
Q1. In your experience, has vaping increased among the young people you work with over the past few years?

Of the 44 respondents:

- 39 (88.64%) said yes
- 5 (11.36%) said no

Summary

The vast majority of respondents (88.64%, 39 of 44) reported that vaping has increased among the young people they work with.



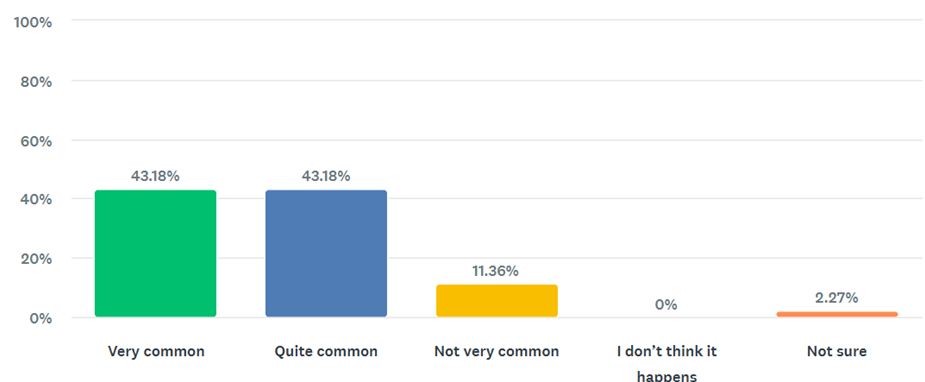
Q2. How common is vaping among the young people you work with?

Of the 44 respondents:

- 19 (43.18%) very common
- 19 (43.18%) fairly common
- 5 (11.36%) not very common

Summary

Most respondents (86.36%, 38 of 44) described vaping as common or very common among young people.

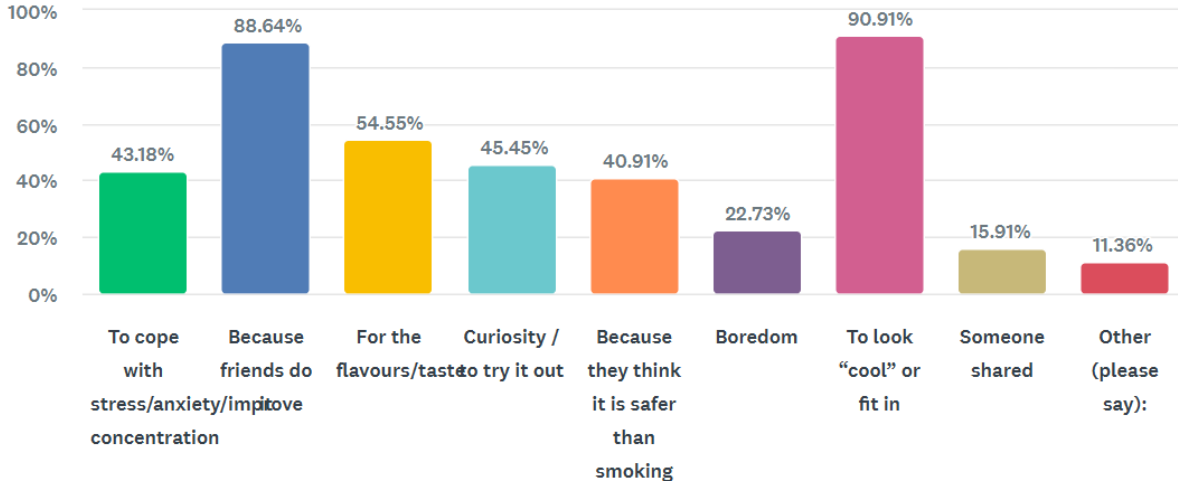


Q3. What do you think are the main reasons young people vape? (multiple responses)

Of the 44 respondents:

- 40 (90.91%) To look "cool" or fit in
- 39 (88.64%) Because friends do it
- 24 (54.55%) For the Flavours/taste
- 20 (45.45%) Curiosity

- 19 (43.18%) To cope with stress/anxiety/improve concentration
- 18 (40.91%) Because they think it is safer than smoking
- 10 (22.73%) Boredom
- 7 (15.91%) Someone shared



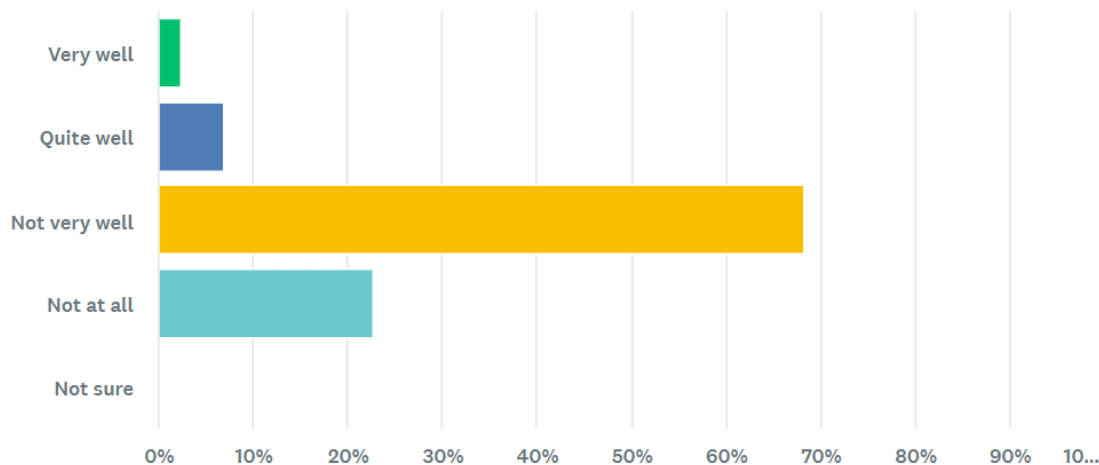
Summary

Social influence was the most commonly identified driver, with over 90% citing fitting in or peer behaviour, alongside notable contributions from flavours, curiosity and stress-related factors.

Q4. How well do you think young people understand the health risks of vaping?

Of the 44 respondents:

- 30 (68.18%) Not very well
- 10 (22.73%) Not at all
- 3 (6.82%) Quite well
- 1 (2.27%) Very well



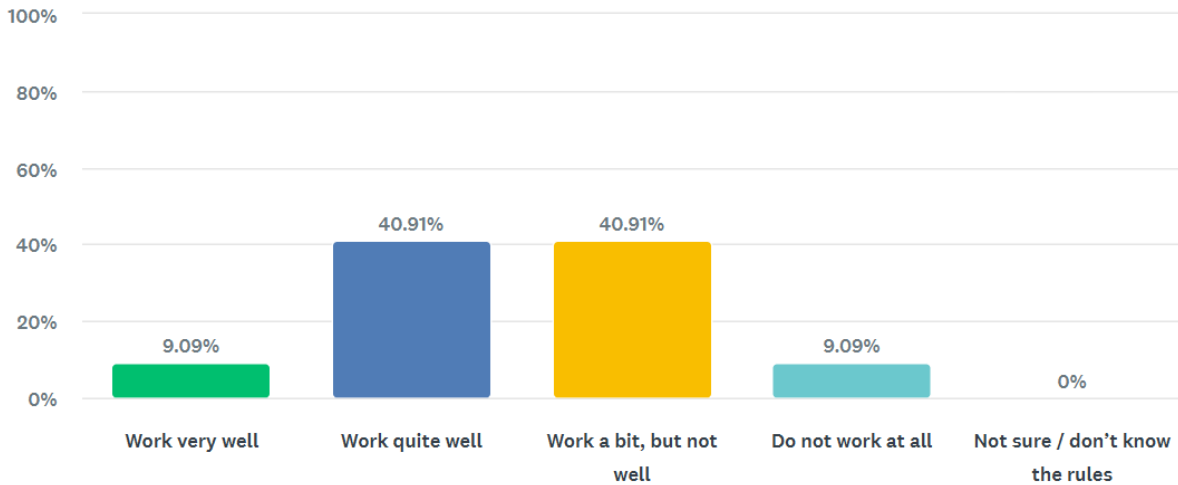
Summary

Most respondents (90.91%, 40 of 44) felt young people have limited or no understanding of the health risks of vaping.

Q5. How effective do you think current school or organisational policies are in addressing vaping?

Of the 44 respondents:

- 18 (40.91%) Work quite well
- 18 (40.91%) Work a bit, but not well
- 4 (9.09%) Work very well
- 4 (9.09%) Do not work at all



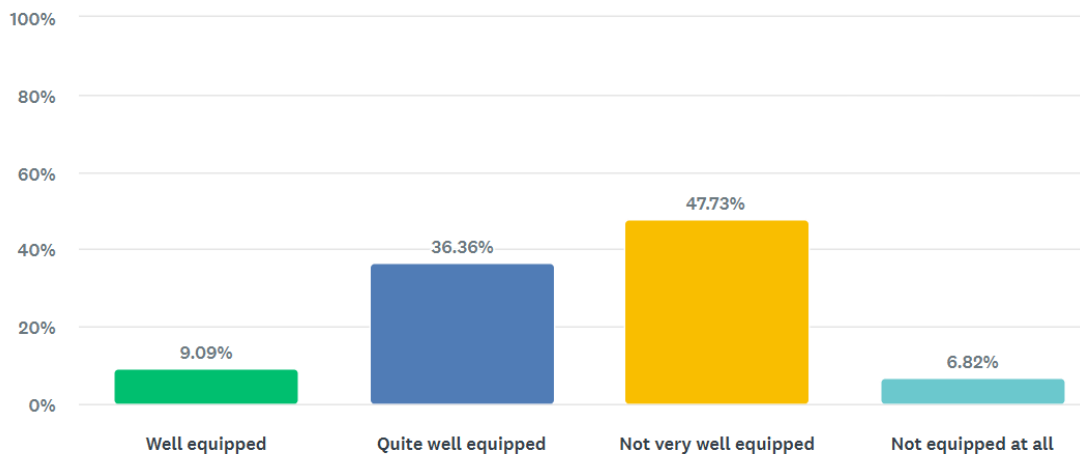
Summary

Only a small minority (9.09%, 4 of 44) felt current policies are fully effective, with most indicating they are only partially effective or inconsistent.

Q6. Do you feel you are equipped with enough knowledge, guidance, training and support to speak with young people about vaping?

Of the 44 respondents:

- 21 (47.73%) Not very well
- 16 (36.36%) Quite well
- 4 (9.09%) Well
- 3 (6.82%) Not at all



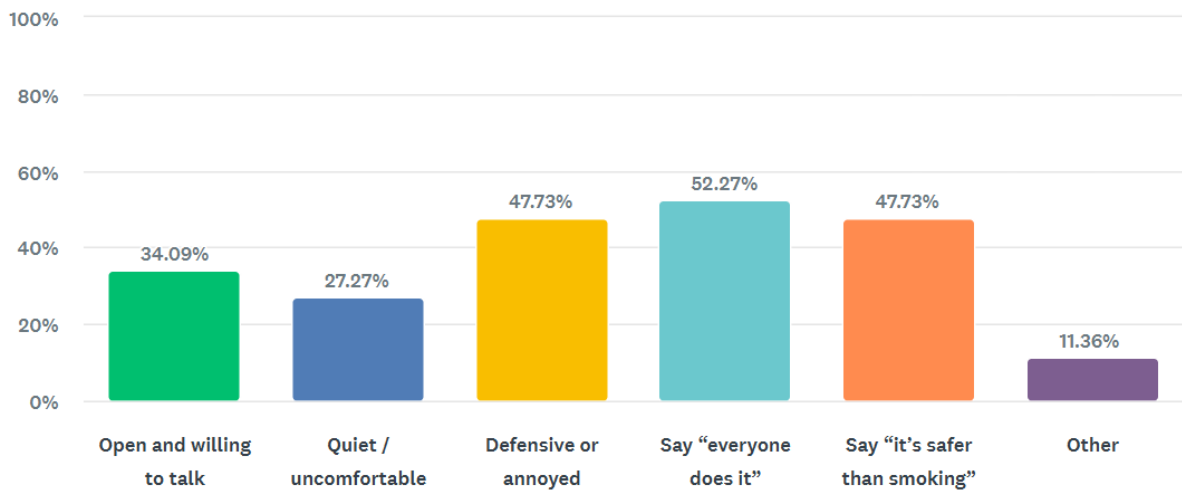
Summary

Confidence among staff was mixed, with a substantial proportion reporting they do not feel fully equipped to address vaping with young people.

Q7. When staff speak to young people about vaping, how do young people usually react?

Multiple responses were allowed on this question.

- 23 (52.27%) say “everyone does it”
- 21 (47.73%) say “it’s safer than smoking”
- 21 (47.73%) get defensive or annoyed
- 15 (34.09%) are open and willing to talk
- 12 (27.27%) are quiet or uncomfortable



Summary

Young people were most often described as responding defensively or dismissively, suggesting that vaping may be seen by many as normalised and relatively low-risk.

Selected respondent quotes (other)

“Depends on the student, mixed response. Unfortunately we treat children more and more like adults. We give them a choice even if they are illegal for their age group or harmful. Vaping is also an addiction and needs to be treated as such. Many people who vape never meant it to be a long term addiction.”

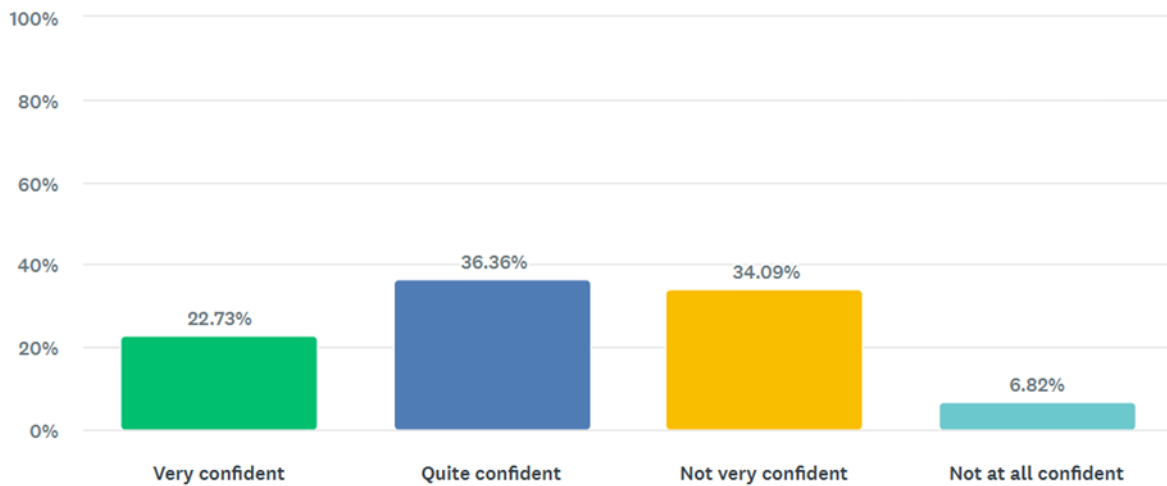
‘It appears to be the norm and accepted as a way of life that doesn’t have any health implications.’

‘Depends on the child but it is the sort of thing they know is wrong so would be kept quiet so as not to get in trouble.’

Q8. How confident do you feel dealing with vaping (talking with young people, giving advice, following rules)?

Of the 43 respondents to this question:

- 13 (30.23%) Sometimes
- 11 (25.58%) Not sure
- 10 (23.26%) Quite Often
- 5 (11.63%) Rarely
- 4 (9.30%) Very Often



Summary

Confidence in dealing with vaping was inconsistent, indicating that staff may benefit from clearer guidance, training and more consistent procedures.

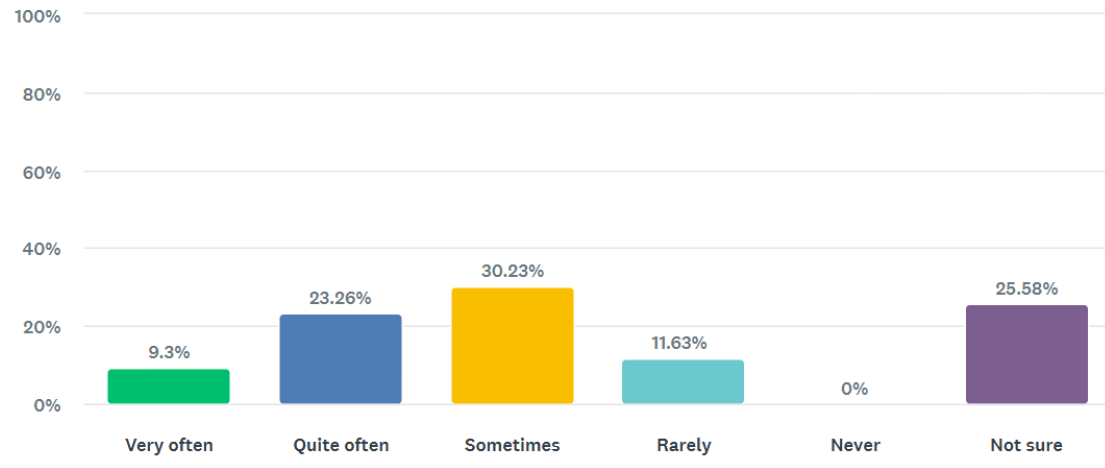
Q9. In your work, how often do you see vaping linked to other issues (for example mental health, school attendance, behavioural issues, alcohol or drug use)?

Of the 43 respondents to this question:

- 13 (30.23%) said sometimes
- 11 (25.58%) were unsure
- 10 (23.26%) said quite often
- 5 (11.63%) said rarely
- 4 (9.30%) said very often

Summary

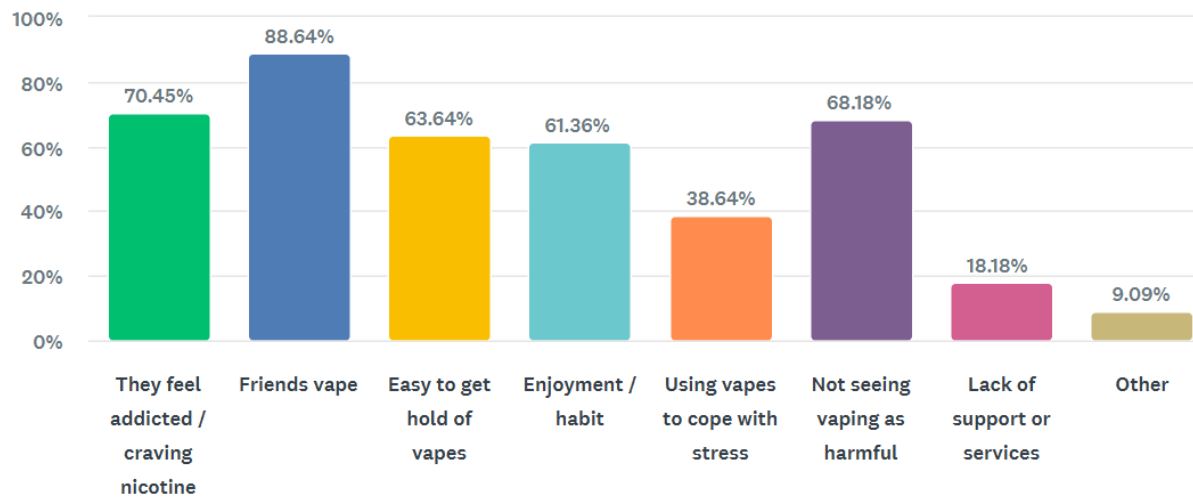
Most respondents (62.79%, 27 of 43) had observed vaping alongside other issues such as mental health, behaviour or substance use.



Q10. What makes it hard for young people who vape regularly to cut down or stop?

Multiple responses were allowed on this question.

- 39 (88.64%) Their friends vape
- 31 (70.45%) They feel addicted or crave nicotine
- 30 (68.18%) They don't see vaping as harmful
- 28 (63.64%) It's easy to get hold of vapes
- 27 (61.36%) Enjoyment/habit
- 17 (38.64%) Using vapes to cope with stress
- 8 (18.18%) Lack of support services



Summary

Barriers to quitting were most commonly linked to social environment (88.64%) and addiction (70.45%), alongside low perceived risk and easy access.

Selected respondent quotes (other)

'I don't think most of them care very much about the negative side effects and just enjoy feeding the addiction.'

'We should still be guiding and boundarying [sic] them as they are children in the eyes of the law and need support and guidance.'

'Most are not actually addicted to the nicotine, because across the day they have little opportunity to Vape, the addiction is more a psychological need.'

Q11. If you could change one thing locally to reduce youth vaping in Torbay, what would it be?

Key themes

Responses most commonly suggested:

- Increased education and awareness
- Stronger enforcement around sales and access
- Clearer and more consistent policies
- Greater support for staff and parents.

Selected respondent quotes

'I would like parents to be more aware of the risks of vaping. This would make the issue easier to tackle if it were being discouraged both at home and on campus.'

'Make them considerably more difficult to buy and make them less like fun, sweets/toys that appeal to kids.'

'Better education in schools / college on the risks of using them.'

'Enforce banning them in schools and colleges or stricter procedure.'

Summary

Responses consistently pointed towards the need for a coordinated approach combining education, enforcement and clearer, consistent policies.

Overall Summary

Teachers and school staff describe vaping as an increasing and visible issue within school environments, with use reported in toilets, corridors and on journeys to and from school. This suggests that vaping is becoming embedded within everyday routines and more difficult to manage through existing school policies alone.

While enforcement measures are in place, staff report ongoing challenges in preventing use, particularly where vaping is discreet and easily concealed. Teachers also highlight concerns around the impact on learning, behaviour and wellbeing, alongside the time and resource required to respond to incidents.

There is a clear sense that schools are managing the issue reactively, with limited capacity to address the wider drivers of use. Staff consistently emphasise the need for stronger external support, including clearer guidance, education and enforcement beyond the school setting.

3. Parent and Carer Survey Findings

A separate survey was conducted with parents and carers to understand their awareness, concerns and perceptions of youth vaping. This provides an important perspective on how vaping is experienced and understood within the home environment.

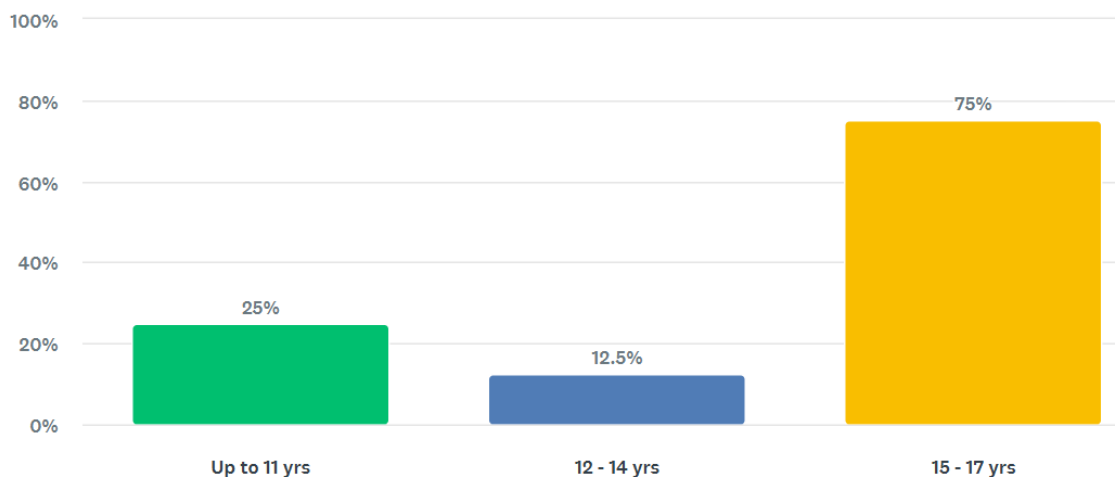
A total of 16 responses were received. While the sample size is small, the findings offer useful insight into levels of concern, awareness and confidence among parents and carers.

The parent and carer survey did not ask whether respondents' children currently vape. Findings should therefore be understood as reflecting overall parental and carer perceptions and concerns, rather than direct experience in all cases.

Q1. What age group(s) are the children or young people you care for? *(multiple responses)*

Of the 16 respondents:

- 12 (75%) were aged 15-17
- 4 (25%) were aged up to 11
- 2 (12.5%) were aged 12-14



Summary

Most responses (75%, 12 of 16) related to older secondary-aged children.

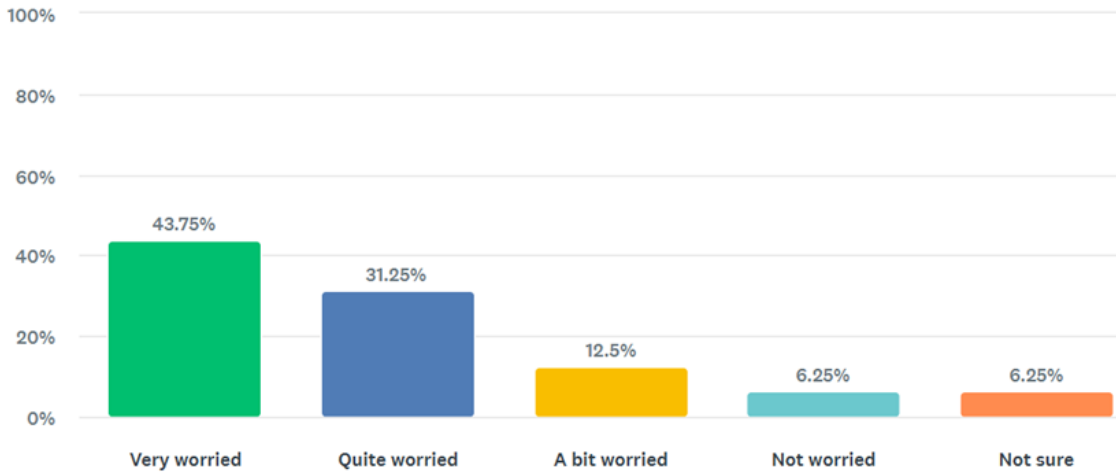
Q2. How worried are you about young people vaping?

Of the 16 respondents:

- 7 (43.75%) were very worried
- 5 (31.25%) were quite worried
- 2 (12.5%) were a bit worried
- 1 (6.25%) was not worried
- 1 (6.25%) was not sure

Summary

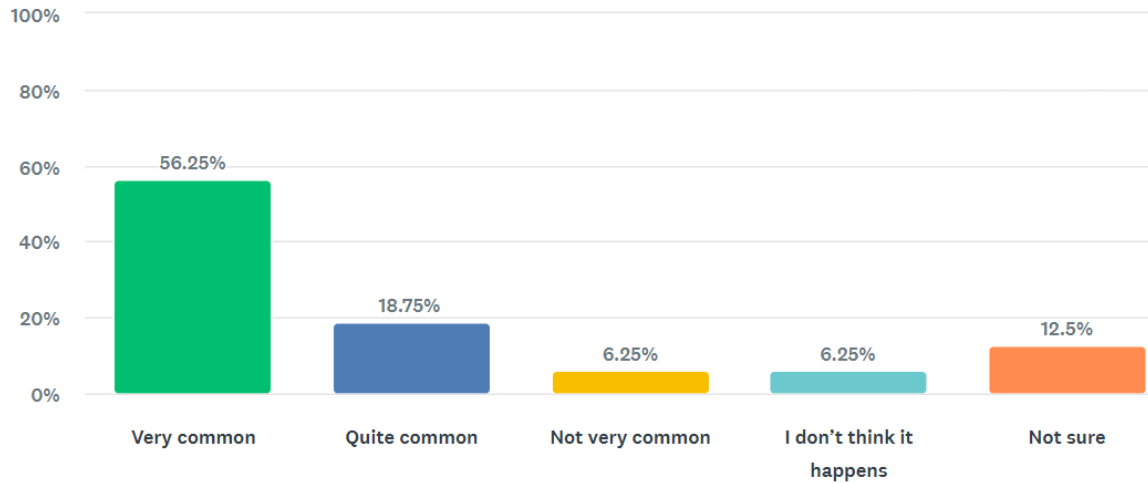
The majority of respondents (87.5%, 14 of 16) expressed concern about young people vaping.



Q3. How common do you think vaping is among young people in Torbay?

Of the 16 respondents:

- 9 (56.25%) very common
- 3 (18.75%) common
- 2 (12.5%) were not sure
- 1 (6.25%) not very common
- 1 (6.25%) didn't think it happens



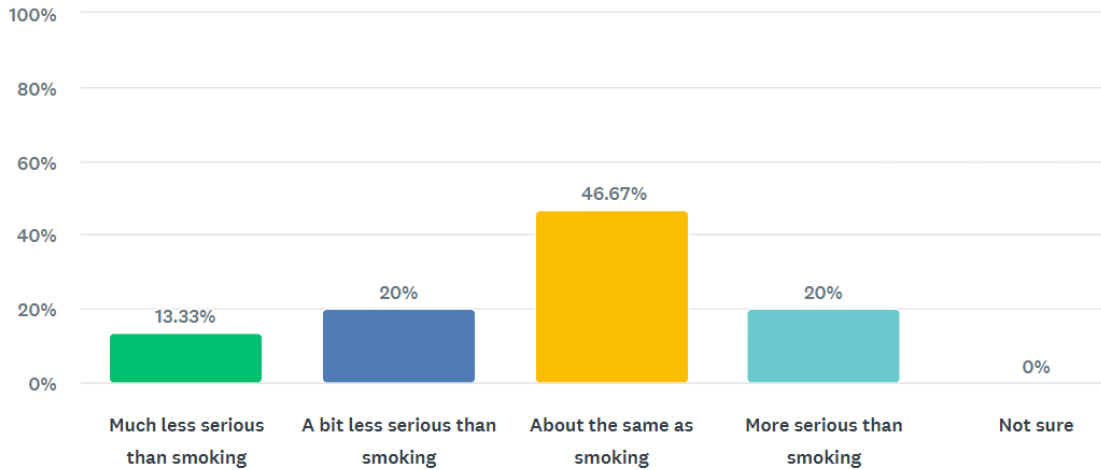
Summary

Most respondents (75%, 12 of 16) believed vaping is common among young people in Torbay.

Q4. Regarding under 18s, how harmful do you think vaping is compared to smoking?

Of the 15 respondents to this question:

- 7 (46.67%) said about the same as smoking
- 3 (20%) said it was more serious than smoking
- 3 (20%) said it was a bit less serious than smoking
- 2 (13.33%) said it was much less serious than smoking



Summary

Two thirds of respondents (66.67%, 10 of 15) felt vaping is at least as harmful as smoking for under 18s.

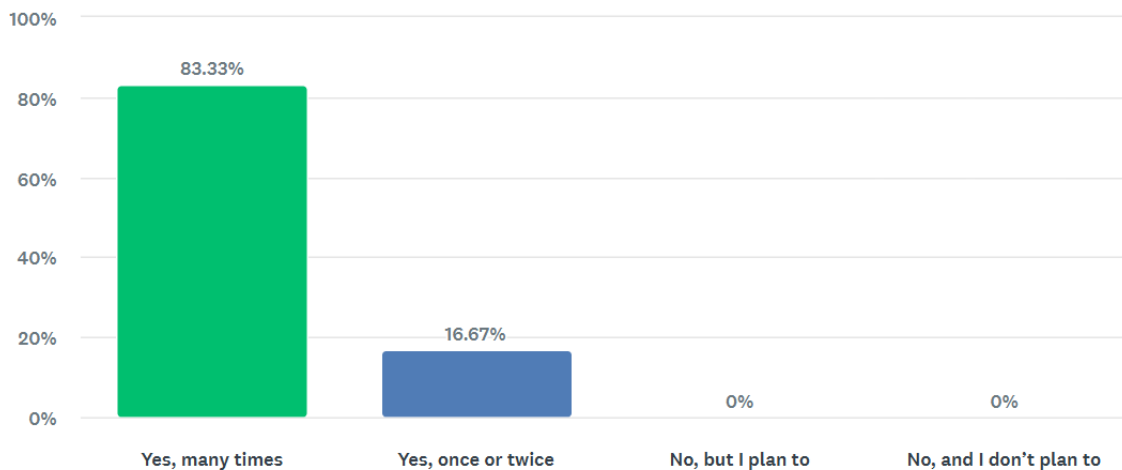
Q5. Do you think vaping is safe for under 18s?

Summary

Every single one of the 15 respondents (100%) to this question said they think vaping is unsafe for under 18s.

Q6. Have you ever talked to your child about vaping?

Only 6 people responded to this question. 5 (83.33%) said they had many times, with one (16.67%) saying they had once or twice.



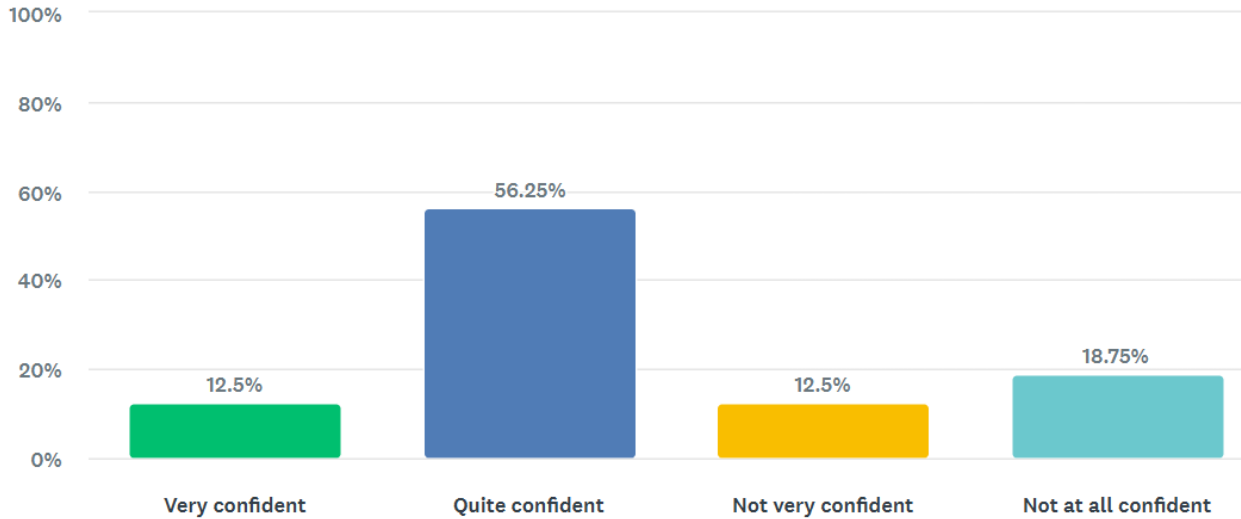
Summary

Among the small number who responded, most (83.33%) said they had spoken to their child about vaping multiple times.

Q7. How confident do you feel about your own knowledge of vaping risks and the law/school rules for under 18s?

Of the 16 respondents to this question:

- 9 (56.25%) said they were quite confident
- 3 (18.75%) said they were not at all confident
- 2 (12.5%) said they were not very confident
- 2 (12.5%) said they were very confident



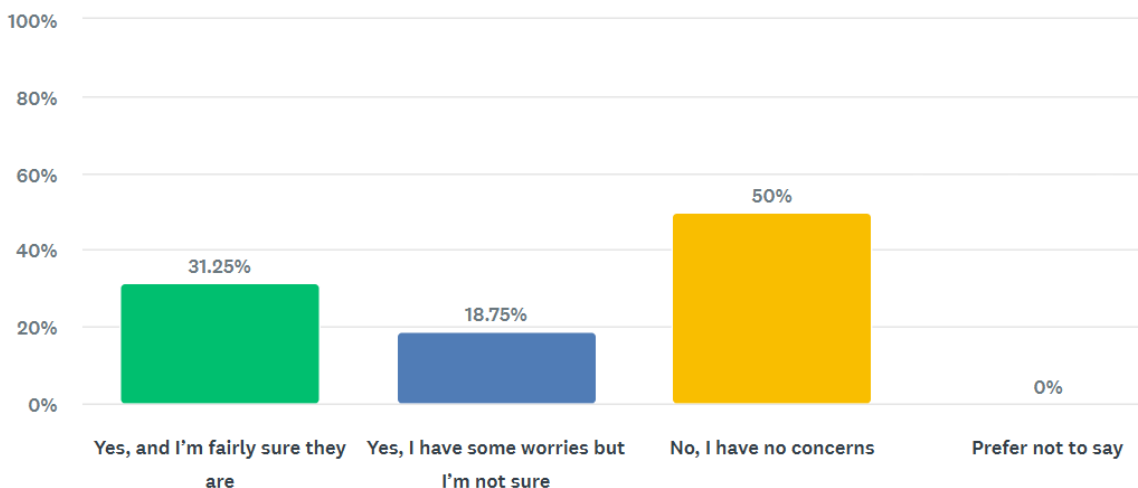
Summary

Around two thirds (68.75%, 11 of 16) felt confident in their knowledge of vaping risks and rules, though a notable minority lacked confidence.

Q8. Have you ever had any concerns that your child or their friends might be vaping?

Of the 16 respondents to this question:

- 8 (50%) had no concerns
- 5 (31.25%) had concerns and were fairly sure they were vaping
- 3 (18.75%) had concerns but were not sure they were vaping



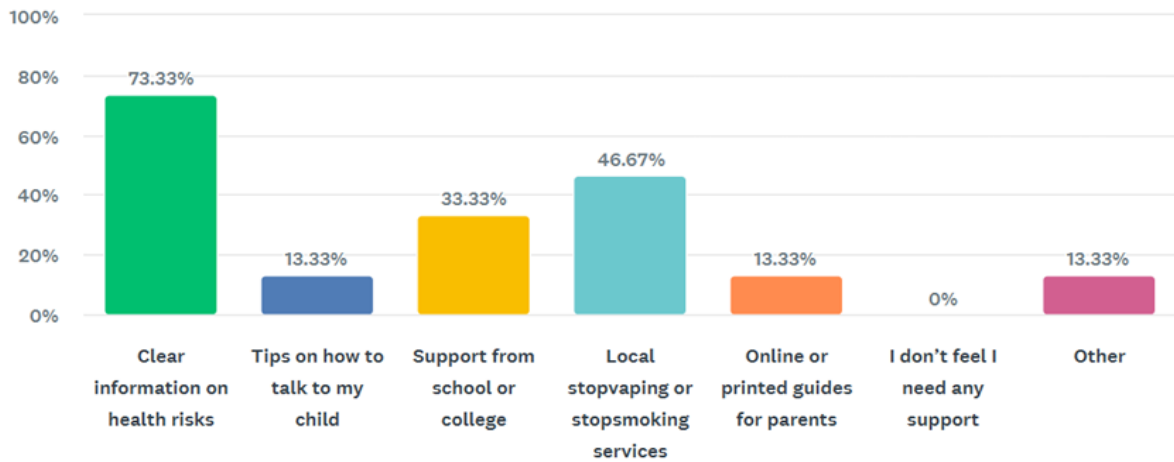
Summary

Half of respondents (50%, 8 of 16) reported some level of concern that their child or their friends may be vaping.

Q9. What support would help you most with vaping issues?

Multiple responses were allowed for this question.

- 11 (73.33%) said clear information on health risks
- 7 (46.67%) said local stop vaping or stop smoking service
- 5 (33.33%) said support from school or college
- 2 (13.33%) said tips on how to talk to my child
- 2 (13.33%) said online or printed guides for parents



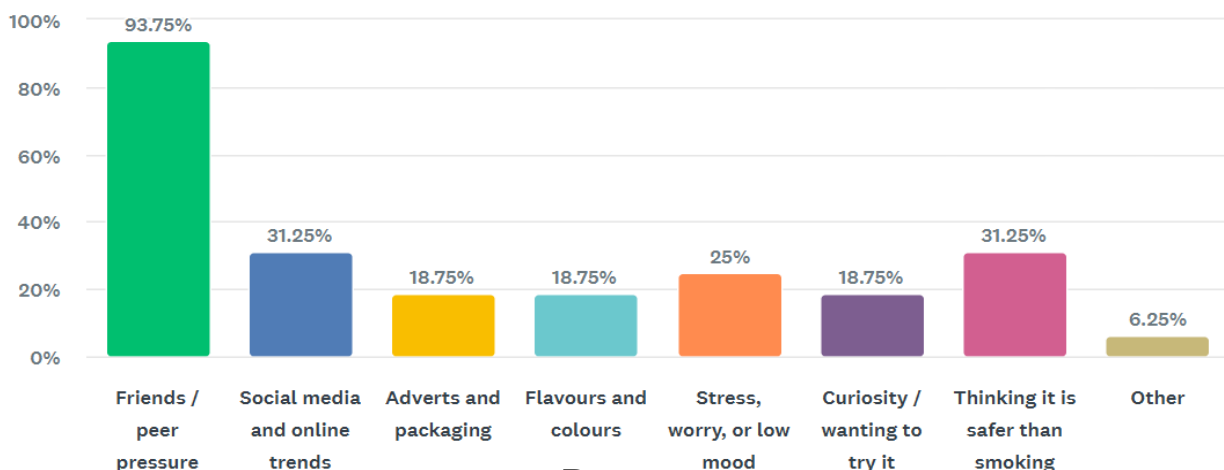
Summary

The most commonly requested support was clearer information on health risks (73.33%, 11 of 15), alongside access to local services.

Q10. What do you think most influences young people's decisions to vape?

Multiple responses were allowed for this question.

- 15 (93.75%) said friends or peer pressure
- 5 (31.25%) said social media and online trends
- 5 (31.25%) said thinking it's safer than smoking
- 4 (25%) said stress, worry or low mood
- 3 (18.75%) said adverts and packaging
- 3 (18.75%) said flavours and colours
- 3 (18.75%) said curiosity or wanting to try it



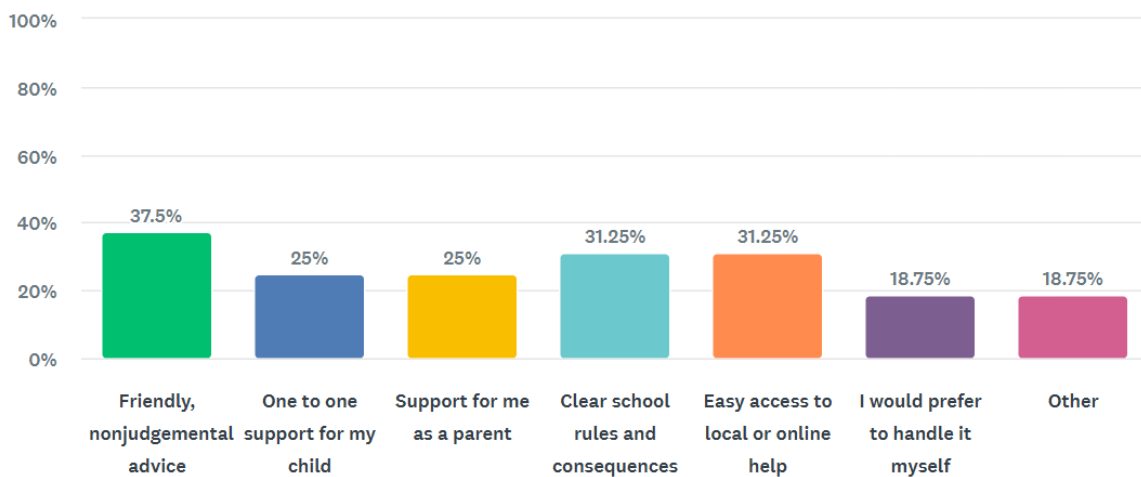
Summary

Social influence was overwhelmingly identified as the main driver (93.75%, 15 of 16), with other factors such as social media and perceived safety also noted.

Q11. If your child was vaping, what would you most want from local services and schools?

Multiple responses were allowed for this question.

- 6 (37.5%) Friendly, non judgemental advice
- 5 (31.25%) Clear school rules and consequences
- 5 (31.25%) Easy access to online help
- 4 (25%) One to one support for my child
- 4 (25%) Support for me as a parent
- 3 (18.75%) Prefer to handle it myself



Summary

Parents most often wanted practical, accessible and non-judgemental support, with demand spread across advice, clear school responses and direct support for both young people and parents.

Q12. What one change at home, in school, or in the community do you think would most help stop young people in Torbay from starting to vape?

Multiple open ended responses were allowed for this question.

Open responses most often pointed to three broad themes: more education and awareness, better access to clear evidence on harms, and making vapes less accessible to under-18s, especially through stronger action on underage sales. Respondents also mentioned the need for more funding, wider community awareness and more things for young people to do.

Selected Responses

'More education and help.'

'Just more advice and need more research.'

'Having no access to it. Lots of shops in town will sell to underage kids.'

'Stop being so easily accessible.'

'Money/funding and word needs to be spread.'

'More things to do - community knowledge.'

'Increase scaremongering videos on social media.'

'Clear informed information and evidence of the harm.'

Summary

Responses pointed most strongly towards prevention through better education, clearer information on harm, and stronger action to reduce underage access.

Overall Summary

Parents and carers express widespread concern about youth vaping, alongside uncertainty about the risks, signs of use and how best to respond. While many report awareness of vaping within their child's peer group, confidence in discussing or managing the issue varies.

The findings suggest that vaping is not only a school-based issue but one that extends into home and social environments, where access, peer influence and family behaviour all play a role. Parents highlight challenges in monitoring use, particularly given the discreet nature of vaping products.

There is a clear need for accessible, consistent information to support parents and carers, alongside stronger alignment between schools, services and families. This includes practical guidance, early education and support to help reinforce consistent messages and expectations.

Thematic Analysis

Overview

This section brings together the survey data, qualitative responses, and wider engagement activities to identify the key themes shaping young people's experiences and perceptions of vaping in Torbay. While the survey findings highlight what is happening, this analysis explores why these patterns are emerging and how they are experienced in everyday life.

Across all datasets – including young people, teachers, and primary-aged children – vaping emerges not as a single issue, but as a complex social, behavioural and environmental phenomenon, shaped by accessibility, peer dynamics, emotional wellbeing, and wider community influences.

1. Early and Widespread Experimentation

Vaping is now a common early experience for many young people in Torbay, with a majority reporting that they have tried it at least once. First use typically occurs in early adolescence, often in informal and social settings such as school toilets or among friendship groups. These early experiences are rarely described as deliberate decisions, but rather as spontaneous, curiosity-driven moments shaped by opportunity and environment.

Teachers reinforce this picture, describing a noticeable rise in vaping in recent years and its increasing visibility across different age groups. For many, vaping is no longer seen as unusual behaviour but as something embedded within everyday school life. Staff also report that awareness of harm does not necessarily deter experimentation, with some young people appearing disengaged from health messaging.

Together, these accounts suggest that early experimentation is both accessible and normalised, with limited barriers to first use.

Young people and staff described:

"I was in the toilets at school and someone said, pull this... we vaped all over school."

"You can do it pretty much anywhere and get away with it."

"If you catch someone vaping... they'll just take it out again when you leave."

"Students usually just go 'yeah, yeah, we know'."

"It appears to be the norm and accepted as a way of life."

"They know it's wrong but just keep it quiet."

Taken together, these accounts show that early experimentation is normalised and widely accessible within everyday environments. The data highlights how opportunity, visibility and low perceived consequences shape first use. This helps explain why awareness of harm does not necessarily deter experimentation at this stage.

2. Vaping as an ‘Everywhere’ Behaviour

Across all groups, vaping is consistently described as something that happens “everywhere”. Young people report seeing and using vapes across a wide range of settings, including schools, buses, public spaces and journeys to and from school. This constant visibility contributes to a perception that vaping is unavoidable and part of the everyday environment.

The design of vapes appears to play a key role in this. Compared with smoking, vaping is easier to conceal, produces less noticeable smell and can be used more discreetly. Young people describe this as making it easier to use in spaces where smoking would be challenged, reinforcing both accessibility and normalisation.

Non-vaping young people and younger children also describe the impact of this environment. Shared spaces such as toilets and buses are often described as dominated by vaping, making them uncomfortable or difficult to use. Primary-aged children in particular highlight that vaping feels inescapable and affects how safe and clean public spaces feel.

Young people described:

“You can do it pretty much anywhere and get away with it.”

“The toilets are basically just a vape lounge... you can’t even go in there.”

“There are vaping circles where people sit around the sinks.”

“It makes us feel sad because you can’t go anywhere without seeing people vape.”

“I hold my nose when I walk past someone vaping.”

“People really don’t care... you can do it anywhere.”

“You can’t even go into the toilets without it being full of vape smoke.”

Overall, these accounts show that vaping is experienced as a constant and unavoidable part of daily life. The data highlights how visibility, ease of concealment and widespread use reinforce normalisation across shared spaces. This helps explain why non-use can feel difficult to maintain and environments can feel dominated by vaping.

3. Curiosity, Sharing, Social Dynamics and Subtle Pressure

Young people most commonly describe curiosity and social sharing as the reasons they first try vaping. However, while direct peer pressure is less frequently reported, qualitative insight suggests that social influence operates in more subtle but powerful ways.

Vaping is often embedded within friendship groups and shared social spaces, where passing around devices and vaping together becomes part of social interaction. In this context, behaviour is shaped less by explicit pressure and more by a desire to belong, participate and avoid feeling excluded.

Teachers also describe vaping as linked to identity and peer group dynamics, with some young people using it to fit in or present a certain image. For non-vapers, this can create environments where opting out feels isolating, even if no one is directly pressuring them.

Young people described:

"It's cheaper... I just use my friends... they call me a vape sponge but pass it anyway."

"It's just normal in my friend group and it's fun."

"Only socially at parties... like a prop."

"Because it calms me down and people around me do it."

"The toilets are basically just a vape lounge... you can't avoid it."

"Being a non-vaper is like going to a party and there is a buffet, but you can't eat anything."

Across these accounts, vaping emerges as not simply an individual choice but a socially embedded behaviour shaped by group norms and shared environments. The data highlights how influence often operates subtly, through belonging, visibility and routine interaction. This helps explain why awareness of risk does not consistently prevent use.

4. Stress, Anxiety and Emotional Regulation

As vaping becomes more regular, many young people describe using it as a way to manage stress and anxiety. For some, vaping provides a sense of relief, distraction or comfort, particularly in response to school pressures, social challenges or wider emotional difficulties.

Young people often frame vaping as a coping mechanism, even when they are unsure whether it genuinely helps. Some describe it as a short-term escape or a way to manage overwhelming feelings, while others link it to habits such as needing to do something with their hands or mouth.

There is also evidence of more complex and serious emotional contexts, including references to mental health struggles and limited access to alternative coping strategies. At the same time, some young people question whether vaping ultimately makes things worse, highlighting uncertainty around its longer-term impact.

Further analysis suggests that respondents who self-identified as disabled reported slightly higher levels of ever trying vaping and current vaping, and were more likely to report family exposure to vaping. They were also less likely than non-disabled respondents to view vaping as safer than smoking. Given the small numbers involved and the fact that disability status was self-defined, these findings should be treated as indicative rather than definitive. Qualitative responses also included references to vaping as a form of comfort or sensory regulation, highlighting the importance of inclusive prevention and support approaches.

Young people described:

"It helps with my anxiety."

"It's like a tiny five-minute holiday from revision."

"It's nice after a stressful class."

"It helps me with my anxiety, but it might not help someone else...it might make it worse."

"It's something to do... like I need to be doing something."

"It's a coping mechanism."

“I use it for enjoyment and mental health reasons.”

“Because of my autism it’s comforting for me.”

“It’s a way of stimming.”

Taken together, these accounts show that vaping is often used as a coping mechanism linked to stress, anxiety and emotional need. The data highlights how it is framed as relief, distraction or routine, even where its effectiveness is uncertain. This helps explain why use can persist despite awareness of potential harm.

5. Awareness of Harm, Ambivalence and Normalisation

Most young people demonstrate a clear awareness that vaping can be harmful, often referencing risks to lungs, health and addiction. However, this awareness does not consistently translate into behaviour change, and many continue to vape despite recognising potential risks.

Young people express mixed and sometimes contradictory views about vaping, including uncertainty about long-term effects and confusion about how it compares to smoking. Some describe vaping as harmful, while others minimise risks or frame it as a safer alternative.

This ambivalence reflects a wider lack of clear, trusted information and contributes to ongoing use. It also highlights how normalisation and visibility can weaken the impact of health messaging.

Young people described:

“It has so much more nicotine... way more addictive.”

“You can’t even pronounce the chemicals.”

“Do you prefer your nicotine electric or acoustic... it’s the same thing.”

“I think smoking is safer because you know what’s in it.”

“It’s just water vapour... like breathing in steam.”

“You can die from vaping... your lungs can explode.”

“I see people coughing after they vape.”

“I stopped after I couldn’t breathe... that’s when I quit.”

Overall, these accounts show that awareness of harm coexists with uncertainty, contradiction and continued use. The data highlights how mixed messages and normalisation weaken the impact of health information. This helps explain why knowledge alone does not consistently lead to behaviour change.

6. Addiction, Habit and the Challenge of Quitting

Young people’s accounts show that vaping often moves beyond experimentation into regular, habitual use. Many describe patterns of frequent use throughout the day, with vaping becoming part of daily routines and behaviours.

Although not all young people describe themselves as addicted, many express a sense of dependence, particularly linked to habit, routine and psychological comfort. Vaping is often described as something that fills time, provides reassurance or becomes part of everyday rituals.

Quitting is widely described as difficult, both physically and emotionally. Young people report challenges such as cravings, emotional responses and difficulty adjusting to life without vaping.

Young people described:

“it’s like a constant cigarette... you just have it there all the time”

“When I tried to stop it was like quitting smoking... if not worse.”

“It’s like a safe haven... without it I feel lost.”

“It’s not impossible, I just make it hard.”

“Not vaping was absolute hell.”

“It’s like a dummy... I see no difference with it”

“It’s the ritual... just holding it.”

“You need something to replace it... like gum or lollipops.”

Across these accounts they show that vaping often becomes habitual and difficult to stop. The data highlights the role of routine, dependence and psychological comfort in sustaining use. This helps explain why quitting is widely described as challenging, even among those who want to stop.

7. Family Modelling and Intergenerational Patterns

Family environments play an important role in shaping young people’s attitudes and behaviours around vaping. Many young people describe growing up in environments where vaping is present, which can influence how normal or acceptable it feels.

For some, this leads to normalisation and increased likelihood of use. Others describe feeling uncomfortable or concerned about family members vaping, sometimes using this as a reason not to start themselves.

Primary-aged children also show strong awareness of adult behaviour, often linking it directly to health risks and expressing concern about exposure at home and in shared spaces.

Young people and children described:

“All my family vape.”

“I’d feel left out if I didn’t.”

“My entire family did it and I grew up around it.”

“My sister vapes in the house and car.”

“It causes lung cancer.”

“I see people coughing and being sick.”

“It takes time away from family.”

Taken together, these accounts show that family environments play a significant role in shaping attitudes and behaviour. The data highlights how exposure within the home can reinforce both normalisation and concern. This helps explain the strong association between family vaping and young people’s experiences.

8. Access, Cost, Availability and Commercial Influences

Despite age restrictions, young people report that vapes are easy to access through a range of routes, including shops, friends, family and online. Many describe being able to purchase vapes without age checks, highlighting gaps between policy and practice.

Cost is not generally seen as a barrier, with young people finding ways to afford vaping, sometimes prioritising it over other spending. At the same time, there is strong awareness of how products are marketed and designed to appeal to younger audiences.

Teachers and young people raise concerns about branding, flavours and availability, suggesting that current regulation is not keeping pace with how products are being used and promoted.

Young people and staff described:

“They don’t even check ID.”

“It’s just too easy.”

“I use money meant for lunch.”

“From mum without telling her.”

“They’re colourful... like sweets or toys.”

“No adult smoker wants a raspberry vape with cartoons on it.”

“Too many shops sell them.”

“They should be more regulated.”

Across these accounts they show that access to vaping products is easy and widespread despite age restrictions. The data highlights how availability, affordability and appealing product design support continued use. This helps explain the gap between policy and young people’s lived experience.

9. Protective Factors, Values and Opportunities for Prevention

Alongside risks, the data highlights strong protective factors. Many young people choose not to vape based on health concerns, personal values and a desire for independence. Non-vapers often express confidence in their decisions and a clear sense of identity.

Primary-aged children in particular show strong awareness of harm and largely negative attitudes towards vaping, suggesting that early intervention has significant potential. Many also call for clearer rules, stronger enforcement and better information.

Young people themselves identify what might help, including honest, relatable information, better education about risks and support to manage stress without relying on vaping.

Young people and children described:

“I don’t want to ruin my lungs.”

“I’ve never felt the urge.”

“I’m my own person.”

“It’s not a smart decision.”

“It’s disgusting.”

“It’s harmful to your lungs and heart.”

“There needs to be more awareness.”

“People are desensitised to it.”

Overall, these accounts show that many young people actively choose not to vape based on health awareness and personal values. The data highlights strong early attitudes and a clear appetite for better information and support. This helps explain the opportunity for early, preventative approaches.

Thematic Summary

This thematic analysis provides important context to the survey findings, showing not just what is happening, but why. Across all groups, vaping emerges as an early, visible and socially embedded behaviour, shaped by accessibility, peer environments and everyday exposure.

Young people describe vaping as something that develops gradually, shaped by curiosity, social interaction and constant visibility rather than a single decision. While awareness of harm is high, this is often outweighed by social dynamics, ease of access and the role vaping can play in managing stress and anxiety.

The qualitative insight highlights the complexity of these experiences. Vaping is described as a habit, a coping mechanism and, for some, a source of dependence, alongside clear uncertainty about its longer-term impact. At the same time, wider influences – including family behaviour, commercial drivers and gaps in information and support – continue to shape attitudes and behaviours.

Importantly, strong protective factors are also evident, particularly among younger children and non-vapers, highlighting clear opportunities for early prevention and positive intervention.

Taken together, these findings show that youth vaping in Torbay is driven by a combination of social, behavioural and environmental factors, requiring a coordinated response that reflects young people’s lived experiences.

Project Observations

Drawing on the survey findings and thematic analysis, several key observations emerge about youth vaping in Torbay. These reflect not only individual behaviours, but the wider systems and environments shaping them.

1. Vaping is normalised early and widely

Vaping is becoming established in early adolescence, with many young people exposed before or during early secondary school. It is widely perceived as a normal part of growing up rather than a risky behaviour.

2. Vaping is embedded in everyday environments

Young people experience vaping as something that happens “everywhere”, particularly in schools, on transport and in public spaces. This reduces visibility of rules and weakens perceived boundaries.

3. Social influence is subtle but significant

While overt peer pressure is uncommon, vaping is closely linked to social belonging, shared behaviours and group identity. Some young people feel excluded if they do not participate.

4. Vaping is used as a coping mechanism

For many young people, vaping is associated with managing stress, anxiety and emotional pressures, particularly linked to school and wider life experiences.

5. Awareness of harm does not prevent use

Most young people understand that vaping carries health risks. However, uncertainty about long-term effects and mixed messaging reduce the impact of this knowledge on behaviour.

6. Vaping behaviours are habitual and difficult to change

Regular use, routine behaviours and psychological attachment make quitting difficult for many young people, even where there is a desire to stop.

7. Family environments influence behaviour

Parental and household vaping behaviours play a key role in shaping young people’s attitudes, either reinforcing normalisation or influencing decisions not to vape.

8. Access to vapes remains easy despite restrictions

Young people report multiple access routes, including retail, social and online sources. Current restrictions are not consistently preventing underage access.

9. There are clear opportunities for prevention

Many young people actively choose not to vape and can clearly articulate their reasons. These perspectives provide a strong foundation for prevention and education.

10. Local findings are consistent with national patterns

While this study was not designed to measure prevalence or directly compare with national data, the findings are consistent with national evidence on early experimentation, social influences and continued use despite awareness of harm.

Recommendations

The following recommendations are informed by the survey findings and thematic analysis, and are designed to support a coordinated, evidence-based response to youth vaping in Torbay.

1. Prioritise early prevention and education

Deliver age-appropriate education in upper primary and early secondary settings (Years 6–9), focusing on early exposure, curiosity and decision-making. Use interactive, locally relevant approaches to increase engagement and ensure messaging reflects young people’s real experiences.

2. Strengthen vape-free environments

Work with schools, transport providers and community settings to reinforce vape-free policies. Increase visibility and consistency of enforcement, and co-design practical solutions with young people to ensure they are realistic and effective.

3. Address social norms and peer influence

Develop peer-led approaches that challenge the perception that “everyone vapes”. Equip young people with practical strategies to refuse or avoid vaping, and promote positive, vape-free identities and activities.

4. Integrate vaping into mental health and wellbeing support

Embed vaping within wider mental health support in schools and youth services. Provide alternative coping strategies for stress and anxiety, and support staff to have confident, informed conversations with young people.

5. Improve clarity and consistency of information

Provide clear, consistent messaging about the health risks of vaping, including uncertainty around long-term effects. Address common misconceptions such as vaping being “just vapour”, and co-produce materials with young people to improve credibility.

6. Develop accessible, youth-focused cessation support

Provide visible and accessible support for young people who want to stop vaping. This should address both nicotine dependence and behavioural habits, and be available through schools, colleges and youth settings.

7. Engage families and carers in prevention

Provide information and support for parents and carers to help them understand youth vaping and its impacts. Encourage consistent messaging between home and school, and promote whole-family approaches where appropriate.

8. Strengthen enforcement and reduce access

Increase enforcement of age-of-sale regulations through joint working with trading standards, retailers and local partners. Address informal supply routes, including social and online access, to reduce availability.

9. Amplify non-vaping voices and positive choices

Highlight and promote the reasons why many young people choose not to vape, including health, identity and personal choice. Involve young people in designing prevention approaches and support positive peer influence.

10. Take a coordinated, system-wide approach

Align work across public health, education, community organisations and enforcement partners. Combine prevention, support and regulation, and continue to monitor trends to inform future action.

Response from Torbay Public Health

“This report provides important insights which will help us to reduce vaping amongst children and young people in Torbay.

The findings show that vaping often starts at a young age and is closely linked to social situations and shared experiences which can make it feel normal and harder to avoid.

We will use these insights to guide work to prevent vaping, create vape free environments at home, school and in the community, and to improve access to relevant education and support that addresses both mental and physical health impacts and concerns.

We will also continue to work with young people to co-design approaches and solutions to ensure they are relevant, trusted and effective.

We will share the findings with partner organisations including education, police, trading standards, youth services, and community and voluntary sector organisations.

Together, we will develop an action plan to translate these findings into coordinated action. We encourage partners to engage with this report and to work together to protect and improve the health and wellbeing of young people in Torbay.”

Statement from Torbay Public Health



Recognition

Engaging Communities South West would like to thank everyone involved in the production of this report, particularly all the children and young people in Torbay who shared their valuable feedback in this report and Torbay Public Health for the opportunity to explore the important issue of young people and vaping in Torbay.

We would also like to thank:

- South Devon College
- Sound Communities
- Healthwatch Torbay
- Watcombe Primary School
- A Better Life
- Local Motion

for their support in helping us connect with young people and contribute to this research.

Most importantly, we would like to thank the Young People’s Panel. Their dedication, honesty, and commitment have been at the heart of this work. Despite the many pressures they face, they have given their time and energy so generously, and we are truly grateful.

Appendix

1. Young Peoples Survey

CONFIDENTIAL



What do YOU think?

Please put a tick or cross in the answer boxes or write your answer in the boxes provided

Your Age: Under 11: 11-12: 13-14: 15-16: 17-18:

First 3 digits of your postcode (e.g. TQ1): What is your school year?

What best describes your gender? Female: Male: Prefer not to say:

Prefer to self describe:

Do you have a disability? Yes: No: Explain:

Have you ever tried vaping? Yes: No: What age were you when you first tried? Under 11: 11-12: 13-14: 15-16: 17-18:

Do you use any illicit substances? Yes: No: Explain:

What made you first try vaping? curiosity: relieves stress: someone shared:
like smell/taste: peer pressure: Other:



An Engaging Communities South West project
with Torbay Public Health
Project Lead rebecca.hodgson@ecsw.org.uk



IMPORTANT: Please answer the **left hand side** if you **EVER** vape (even just occasionally with your friends at evenings/weekends). Please only answer **right hand side** if you don't vape at all, ever!

Do you still vape? Yes: Continue on this side ↓

No: Continue on this side ↓

1) Why do you vape? (Please explain:)

2) How often do you vape? (Tick one)

Regularly throughout every day:

2-5 times a day: 2-5 times a week:

2-5 times a month:

Evenings/weekends:

When offered by a friend:

3) How long have you vaped for?

Less than a week: A few weeks:

A few months: 3-6 months:

6-12 months: 1-2 yrs: 3-4 yrs:

4-6 yrs: More than 6 yrs:

4) Where do you usually vape?

On the bus: on walk to school:

At school gate: on field:

In corridors: In the school toilets:

In lessons: other, explain below:

5) What type of vape do you use?

Throw away/pod: Liquid refill: Both:

1) Why do you NOT vape? (Please explain:)

2) Do you feel pressured to vape?

Yes: No: Explain why below:

3) Do you feel left out because you don't vape?

Yes: No: Explain why below:

4) Where do your friends usually vape?

On the bus: on walk to school:

At school gate: on field:

In corridors: In the school toilets:

In lessons: other, explain below:

6) If needed where you get your vape liquid?

Friend under 18: Friend over 18:

From my parent: Bought online:

Pub/club: Bought by a friend:

Took from family without consent:

Given by family member:

Bought from shop: Other, explain below

7) Where do you get your vape?

Friend under 18: Friend over 18:

From my parent: Bought online:

Pub/club: Bought by a friend:

Took from family without consent:

Given by family member:

Bought from shop: Other, explain below:

8) Where do you get the money to vape?

9) What's in the vape you use?
(you can tick more than one)

Flavour: Nicotine:

cannabis liquid: If other, explain below:

10) Do your parents/guardians or anyone else in your family vape?

Yes: No: Explain who:

5) How do you feel about friends who vape?

6) Is money part of the reason you don't vape?

Yes: No: Explain why below:

7) What vapes have you heard about?

Flavour: Nicotine:

Cannabis liquid: Other, please explain:

8) How do you think vaping affects people's health? Share your thoughts below:

9) How do you think nicotine affects people's health? Please explain below:

10) Do your parents/guardians or anyone else in your family vape?

Yes: No: Explain who:

11) How do you think vaping affects your health?

12) How do you think nicotine affects your health?

13) Do you think vaping is safe?
Yes: No: Explain your answer:

14) Do you think vaping is safer than smoking?
Yes: No: Explain below:

15) Do you want to quit? Yes: No:
Explain your answer:

16) How hard do you think quitting is?
No Problem: Easy:
Hard: Nearly Impossible:

17) What might help you quit?

11) What do you think might help someone quit vaping? Share your thoughts below:

12) Do you think that vaping is safe?
Yes: No: Explain your answer below:

13) Do you think vaping is safer than smoking?
Yes: No: Explain below:

14) How hard do you think quitting is?
No problem: Easy:
Hard: Impossible:

Whether you are a vaper or a non-vaper, what information would you like about vaping? Please explain below:

Is there anything else you would like to add?

Thank you for completing this survey

Engaging Communities South West

“An inclusive, innovative and independent champion for the aspirations of local people.”

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In Partnership with **healthwatch**
Torbay

Meeting: Cabinet

Date: 9 June 2026

Wards affected: All wards

Report Title: Specialist Stop Smoking Service Procurement

When does the decision need to be implemented?

The procurement process will need to commence in July 2026.

Cabinet Member Contact Details: Hayley Tranter, Cabinet member for Adult and Community Services, Public Health and Inequalities hayley.tranter@torbay.gov.uk

Director Contact Details: Lincoln Sargeant, Director of Public Health, lincoln.sargeant@torbay.gov.uk

1. Purpose of Report

- 1.1. Public Health receives core funding as part of the ring-fenced grant to deliver smoking services and tobacco control activities. From 2026-27 it will also receive as part of the core public health ring fenced grant, a separate allocation, also ring-fenced, from the Department for Health and Social Care to further increase support for smokers to quit.
- 1.2. This additional allocation requires Local Authorities to achieve a target of at least 5% of the adult smoking population setting a quit date per year. Local authorities must also not disinvest in smoking services funded through the core public health ring-fenced grant and will be monitored to ensure equity of spending across years
- 1.3. The current specialist stop smoking service is commissioned as part of the integrated Healthy Behaviours Service (Your Health Torbay) delivered by ABL Health. The current contract ends on 31st March 2027 with no further contract extensions available.
- 1.4. An open market procurement is required to select a provider who can deliver the updated requirements and to ensure value for money.
- 1.3 The decision required is two-fold:
 - That the Director for Public Health has delegated authority to award the contract the selected provider as a result of a compliant procurement process.
 - That this decision will be on the basis that through the procurement procedure none of the specification, the budget nor the procurement processes proposed are materially different from what is outlined in this report. If any of these do change materially, an

updated report will be submitted for reconsideration before the Director for Public Health awards the contract.

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 working to enable residents to have good access to high quality preventative smoking cessation services.
- 2.2. This proposal will support delivery of a range of options to assist behaviour change and meets the new and emerging trends in tobacco use.
- 2.3. The proposal will ensure residents have access to best practice, evidence-based support.
- 2.4. The proposal will support local progress towards the UK Government's Smokefree 2030 ambition (defined as less than 5% of the population smoking).
- 2.5. A reduction in tobacco products use will contribute to reducing cigarette and vape waste and litter across Torbay.
- 2.6. A reduction in the demand for tobacco products will also contribute to reducing illegal and illicit activity, promoting safer communities and reducing negative economic impacts.
- 2.7. The reason for the decision to delegate the authority to award the contract to the Director of Public Health is to facilitate a timely and efficient procurement process. The award will only be made on the provision that through the procurement procedure none of the specification, the budget nor the procurement processes proposed are materially different from what is outlined in this report. If any of these do change materially, an updated report will be submitted for reconsideration before the Director for Public Health awards the contract.

3. Recommendation(s) / Proposed Decision

- 3.1. That the Director of Public Health in consultation with the Cabinet Member for **Adult and Community Services, Public Health and Inequalities** be given delegated authority to award the contract to the selected provider as a result of a compliant procurement process.
- 3.2. That this decision will be on the basis that through the procurement procedure none of the specification, the budget nor the procurement processes proposed are materially different from what is outlined in this report. If any of these do change materially, an updated report will be submitted for reconsideration before the Director for Public Health awards the contract.

4. Appendices

None provided.

5. Background Documents

- Smoking in Torbay – a rapid health needs assessment
<https://www.southdevonandtorbay.info/media/pksnmmgv/smoking-rapid-hna-2024.pdf>

Supporting Information

6. Introduction

- 6.1. The current Specialist Stop Smoking Service is provided as part of the integrated Healthy Behaviours Service (Your Health Torbay) delivered by ABL Health Ltd. This offers support to those wishing to make changes to improve their health, including losing weight and stopping smoking.
- 6.2. Future support to promote a healthier weight is set out in the Torbay Healthier Weight Framework 2026 – 2036. Therefore, following the current contract term, an integrated healthy behaviours service will not be required.
- 6.3. A specialist stop smoking service will still be required. The changes proposed to the scope of the service will seek to respond to changes in tobacco use and offer a greater range of support options to better meet the needs and preferences of residents.
- 6.4. The current stop smoking service offers behavioural support delivered over the phone and in-person and direct supply of nicotine replacement therapies.
- 6.5. The proposed future service will support those who want to reduce and quit smoking and long-term vaping, through:
 - In-person and phone based behavioural support,
 - Direct supply of nicotine replacement therapies,
 - Delivery of campaigns to motivate people to quitting and to improve knowledge and recall of the support available,
 - Provision of a fully digital (app based) stop smoking service,
 - Provision of self-management tools to assist reduction and quit,

7. Options under consideration

- 7.1. There were three options considered:
- 7.2. Option 1: Commission the specialist stop smoking service using the current service specification and budget. Not being pursued as will not allow us to modernise the service or make use of the additional ringfenced funding for smoking services. Therefore, it will not support the increased level of activity required by the Department for Health and Social Care.
- 7.3. Option 2: Commission a joint children's and adult's specialist stop smoking service. Not being pursued due to lack of suitable providers in the market who can deliver equitably to both population groups, and differences in the type of support that would be required.

- 7.4. Option 3: Commission an adult only specialist stop smoking service with an updated service specification and budget. Recommended option to allow for expansion and modernisation.
- 7.5. It is option 3 which is recommended for decision making.

8. Financial Opportunities and Implications

- 8.1. There are no implications upon the revenue budget for Torbay Council. The proposed budget for this service has been planned for within the existing resource from the current Public Health Ring Fenced Grant and the additional smoking ringfenced grant.
- 8.2. To be compliant with the conditions of the smoking ringfenced grant, Local authorities must not disinvest in core public health ring-fence funded smoking services and will be monitored to ensure equity of spending across years.
- 8.3. The service is being redesigned with a budget of circa £1.4M over 3 years, and, if over the maximum contract term of 6 years will be circa £3M.

9. Legal Implications

- 9.1. If the grant conditions are not met, Torbay Council may be liable for some or all of the ring-fenced grant for smoking services being recalled by the Department for Health and Social Care
- 9.2. There are no known legal implications other than a failure to award the contract without due justification which could result in a challenge to the procurement process by the successful bidder.

10. Engagement and Consultation

- 10.1. Community engagement has focussed on groups underrepresented in the current service and where smoking rates remain higher. Insights have been gathered through a specialist behavioural insights organisation. The feedback and findings have been taken into account when developing the proposed service model.
- 10.2. Specifically, insights have highlighted challenges around lack of knowledge of services and support available, the desire for individuals to maintain autonomy around when and how they quit, the need for convenience, and for more clarity and consistency around health messaging and support around both smoking and vaping.
- 10.3. On 21 May 2026, the Adult Social Care and Health Overview and Scrutiny Sub-Board considered the Specialist Stop Smoking Service Procurement and supported the recommendation as set out above, subject to the inclusion of consultation with the relevant Cabinet Member.

11. Procurement Implications

- 11.1. An open market procurement will be undertaken, led by Torbay's Commercial and Procurement team.

- 11.2. Social value will be built into the invitation to tender for which the supplier is required to submit proposals on their social value commitments to Torbay.
- 11.3. The tender submission will be assessed by Torbay Council officers and social value will form an essential and proportionate element of the award criteria.
- 11.4. The monitoring of Social Value commitments will be undertaken as part of the contract monitoring processes at Torbay.

12. Protecting our naturally inspiring Bay and tackling Climate Change

- 12.1. Addressing climate change will be assessed within this proposed procurement through the social value framework and bidder submission.
- 12.2. By improving digital and self-support access, it is anticipated that this will have a positive impact in terms of reducing the need to travel as far within Torbay to access services.

13. Associated Risks

- 13.1. Failure to agree to award the contract will result in insufficient and ineffective support for those who want to stop smoking or vaping. This will cause a risk to reducing local smoking rates amongst adults in Torbay.
- 13.2. There is a risk that Torbay Council comes under scrutiny from the Department for Health and Social Care should we not achieve the minimum number of quit dates set (5% of the smoking population) that is a requirement of the Smoking ringfenced grant, should the proposal in this paper not be agreed.

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 356	<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. 	<p>The impact of this proposal will support improved access to services that offer support in keeping with emerging trends in tobacco use which affect all age groups.</p> <p>Digital services are anticipated to have a positive impact on the working age population. Retaining the in-person and over the phone support options will ensure the older population are not disadvantaged.</p>	Not applicable	Not applicable
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. 	<p>The impact of this proposal will support improved access to services. Incorporating digital services and self-management support are anticipated to have a positive impact on carers by offering 24/7 support which can be more easily accessed around caring responsibilities.</p>	Not applicable	Not applicable

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. 	<p>The impact of this proposal will support improved access to services that offer support in keeping with emerging trends in tobacco use.</p> <p>Digital services are anticipated to have a positive impact on care experienced young people.</p>	Not applicable	Not applicable
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. 	<p>The proposals neither have a specific positive or negative impact based on this characteristic.</p>	Not applicable	Not applicable
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. 	<p>The proposals neither have a specific positive or negative impact based on this characteristic.</p>	Not applicable	Not applicable
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. 	<p>The proposals neither have a specific positive or negative impact based on this characteristic.</p>	Not applicable	Not applicable
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 	<p>The proposals are anticipated to have a positive based on this characteristic.</p> <p>By improving access to support to women of reproductive age, we might</p>	Not applicable	Not applicable

	<p>Torbay (average of 56.0 per 1,000) than the Southwest (53.4) and broadly in line with England (56.3).</p> <ul style="list-style-type: none"> For the period 2022 to 2024, rates in Torbay (44.6) have been significantly below England (50.0). 	<p>reduce smoking rates before pregnancy. Smoking negatively impacts maternal and foetal health including increasing the risk of miscarriage.</p>		
<p>Race</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Page 358</p>	<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 proposals neither have a specific positive or negative impact based on this characteristic.</p>	<p>Not applicable</p>	<p>Not applicable</p>
<p>Religion and belief</p>	<p>The 2021 Census showed that the residents in Torbay</p>	<p>The proposals neither have a specific positive or negative impact based on this characteristic.</p>	<p>Not applicable</p>	<p>Not applicable</p>

	<p>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 			
Sex	<ul style="list-style-type: none"> • 51.3% of Torbay's population are female. • 48.7% of Torbay's population are male. 	The proposals neither have a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable
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>The proposals are anticipated to have a positive impact on this group.</p> <p>Emerging data from digital services indicate higher rates of engagement amongst gay, lesbian, bisexual and pan sexual people. This is potentially due to greater ability to access tailored support, and lower anticipated stigma from healthcare professionals.</p>	Not applicable	Not applicable
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. 	The proposals neither have a specific positive or negative impact based on this characteristic.	Not applicable	Not applicable

	<ul style="list-style-type: none"> In Torbay, 5.9% of the population have previously served in the UK armed forces. 			
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. 	<p>Higher rates of smoking tend to be observed amongst those living in deprived areas, working in lower wage occupations and amongst those who are long term unemployed.</p> <p>By supporting a more timely and accessible smoking service, it is anticipated that this will support both health and social inequalities.</p>	Not applicable	Not applicable
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. 	<p>Reducing the prevalence of smoking will have positive impacts on reduction of hospital care to manage long-term illnesses including respiratory conditions, chronic obstructive pulmonary disease, and some cancers.</p>	Not applicable	Not applicable
Human Rights impacts		<p>Reducing smoking rates within the population supports the human right to breathe clean air.</p>	Not applicable	Not applicable
Child Friendly		<p>By reducing rates of smoking, the proposal will support an improvement for children growing up in smokefree homes</p>	Not applicable	Not applicable

15. Cumulative Council Impact

15.1. None

16. Cumulative Community Impacts

16.1. None

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Social Mobility in Torbay – Report of the Overview and Scrutiny Board

Report to Cabinet on 9 June 2026

Background

1. The Overview and Scrutiny Board met on 22 April 2026 to consider a report on Social Mobility in Torbay, introduced by the Cabinet Member for Place Development and Growth – Councillor Chris Lewis. Members were advised that the report focused on partnership working aimed at improving life outcomes for residents, ensuring that starting circumstances do not determine long-term outcomes.
2. The Board received a presentation from the Director of Public Health – Lincoln Sargeant, UK SPF Programme Manager - Gemma Fitsimmons, Consultant in Public Health - Julia Chisnell and Liz Muir - Torbay Communities covering (see [Agenda for Overview and Scrutiny Board on Wednesday, 22 April 2026, 5.30 pm](#)):
 - Progress achieved through multi-agency working.
 - Improvements in early years and school readiness.
 - Work to prevent young people becoming not in education, employment or training (NEET).
 - The contribution of programmes funded through the UK Shared Prosperity Fund (UKSPF).
 - Risks associated with the ending of UKSPF funding in March 2026.
 - Recent investment proposals to support economic growth.
3. Members questioned the following points:
 - How could successful projects and partnerships be sustained following the ending of UK Shared Prosperity Fund funding?
 - What long-term benefits were expected from continued investment in social mobility initiatives?
 - How early should intervention begin to have the greatest impact on aspiration and outcomes?
 - How many supported businesses remain operational after two years? (A written response would be provided.)
 - What work was being undertaken with local businesses to engage children from age 11 onwards?
 - How were children eligible for free school meals being supported to narrow development gaps?

- How effectively were young people being tracked across education and employment pathways?
- What was being done to connect young people from different areas to successful existing programmes?
- Was there an overarching strategy for engagement between schools and employers?
- How were mental health services being integrated into education and employment support?
- How were barriers unrelated to skills or motivation being identified and addressed?
- What support was available for people requiring long-term or intensive assistance into work?
- What provision was available locally to support speech and language needs?
- How could the legacy of community-based programmes be secured once funding ends?
- What work was being done to support children in Brixham to link with the Torquay Coastal Navigators?

4. The Board received responses which included the following:

- Early years and school readiness are key priorities, with ambition to improve the proportion of children with Good Level of Development (GLD) scores and narrow the gaps with those eligible for free school meals through targeted intervention.
- Engagement with local businesses is taking place through work experience, site visits, careers hubs and employer-led activities, although practice varies between schools.
- There is currently no single overarching strategy for business-school engagement, though multiple programmes are active.
- Targeted employment support programmes are in place for different cohorts, including those ready for work and those requiring wrap-around support.
- Mental health challenges are a significant factor for many individuals; relationship-based support and trust-building are essential to addressing underlying barriers.
- Government-funded employment programmes are supporting individuals who would not otherwise be work-ready, with early positive engagement.
- Improvements have been made in SEND support and speech and language provision although there is still more to be done (further details on the number of speech and language officers and provision to be provided in writing).
- UKSPF-funded programmes have delivered strong outcomes but are coming to an end; alternative funding sources are being explored.
- Officers are working to align existing and future initiatives, including employment, health and regeneration programmes, to maximise impact.
- The work of the Torquay Coastal Navigators Network project will be replicated across all networks in Torbay.

5. Members welcomed the progress made to date and acknowledged the strength of partnership working across public, voluntary and private sectors.

6. The background papers can be found at [Agenda for Overview and Scrutiny Board on Wednesday, 22 April 2026, 5.30 pm](#)
 7. The Board formed the following recommendations to the Cabinet. On being put to the vote, the motion was declared carried unanimously.
 - 8. Recommendations**
 - 8.1 That the Cabinet be recommended:
 - a. to explore options for an external careers fair inviting representatives across all different sectors including professional and creative sectors; and
 - b. to identify the financial gap in funding following ending of UK Shared Prosperity Fund and consider how they will address this as part of the budget setting progress.
-

For information only:

That the Chair of the Overview and Scrutiny Board writes to the local Members of Parliament, Local Government Association and Torbay and Devon Combined County Council, on behalf of the Board, and recommends them to lobby Government on how they will address the gap in funding following the ending of the UK Shared Prosperity Fund to support social mobility in Torbay, highlighting our demographics and the success of the work to date using that fund.

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