

Meeting: Torbay Health & Wellbeing Board **Date:** 6 March 2025

Wards affected: All

Report Title: Torbay Joint Health & Wellbeing Strategy 6 monthly progress report

When does the decision need to be implemented? No decision required, report for information

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1. Purpose of Report

- 1.1 The Torbay Joint Health and Wellbeing Strategy 2022-26 was published in July 2022. The Health and Wellbeing Board receives six monthly progress reports and this paper provides a sixth progress report on implementation.
- 1.2 The paper highlights latest developments and any risks or challenges that have been flagged by individual programmes, for members to review.

2. Reason for Proposal and its benefits

- 2.1 The proposals in this report will help us to deliver improvements in the health and wellbeing of our population by setting priorities for delivery and monitoring achievement.

3. Recommendation(s) / Proposed Decision

- 3.1 Members are asked to note progress in delivery and to agree to receive one further 'outturn' report on the implementation of the 2022/26 Strategy in March 2026.

1. Introduction

- 1.1 The Joint Health and Wellbeing Strategy is a statutory requirement for all upper tier local authorities and represents the priorities and work programme of the Health and Wellbeing Board in response to the Joint Strategic Needs Assessment.
- 1.2 The Joint Health and Wellbeing Strategy 2022-26 sets out four areas of focus and seven cross-cutting areas:



- 1.3 An outcome framework was developed to monitor delivery of the Strategy. Each priority area has been required to report to the Health and Wellbeing Board on a six monthly basis, covering progress against objectives, support for cross-cutting areas, and any engagement work undertaken with communities. Each report has also given an overall statement on progress with the opportunity to highlight risks or barriers.
- 1.4 A data summary report is produced by the Public Health Intelligence team with the latest data indicators for each priority area. These are included under each priority programme area below.

1.5 It should be noted that figures fluctuate and the important factor is the overall, consistent trend. Many figures are reported one or two years retrospectively. Figures highlighted in red have been updated since the September 2024 report. Figures in black have not been updated.

2. Progress on delivery to March 2025

2.1 Progress is reported against each priority programme area below.

Mental health and wellbeing

Programme update: Overall on track

An update on the Torbay Multi-agency Suicide Prevention Plan 2024-27 is being presented to the Health & Wellbeing Board at the March meeting.

The data section of the self-harm health needs assessment has been shared in draft with relevant stakeholders.

Mental health and wellbeing support via the helpline has continued for another year, with a reduced capacity for higher level mental health needs. Continued investment means Torbay residents are able to access mental health and wellbeing support that is person-centred, accessible, timely and can work alongside NHS provision where relevant. Arrangements are being made to continue this support for 2025/26.

NHS Devon and partners have collaborated on the re-procurement of children's emotional health and wellbeing services which includes face to face and digital support prior to CAMHS for 11-18 year olds.

Torbay has been successful in its application to the national Baton of Hope charity to host the South West leg of the tour on 30 September 2025. This is the UK's largest suicide prevention initiative.

Risks and issues:

Data report

Number	Measure	Time period	Unit type	Torbay	Devon wide	England	Trend of previous figures	Which way is better	RAG rating compared to England/goal
Good mental health									
1	People with a low happiness score - self reported (aged 16+)	2022/23	%	11.4%	7.3%	8.9%		Lower is better	●
2	People with a high anxiety score - self reported (aged 16+)	2022/23	%	27.4%	21.8%	23.3%		Lower is better	●
3	Prevalence of mental health issues (all ages)- on GP registers (schizophrenia, bipolar affective disorder and other psychoses)	2023/24	%	1.29%	1.02%	0.96%		Lower is better	Highest quintile in England
4	Prevalence of depression (aged 18+) - on GP registers	2022/23	%	14.8%	13.8%	13.2%		Lower is better	2nd highest quintile in England
5	Hospital admissions as a result of self-harm (aged 10 to 24 years)	2022/23	Per 100,000	605.4	458.5	319.0		Lower is better	●
6	Suicide rate	2021-23	Per 100,000	12.5	12.4	10.7		Lower is better	●

The Annual Population Survey asks people to rate their personal wellbeing:

- In Torbay 11.4% of people reported **low happiness levels** (1) in 2022/23, the England average was 8.9%. Torbay has increased since previous years but is not statistically different (using 95% confidence intervals) to England or other years. The previous five years have varied from 8% - 9% in Torbay.
- The percentage reporting **high anxiety levels** (2) in Torbay has fluctuated in the last few years but is on a generally increasing trend over the years shown and is 27.4% in 2022/23.

The GP Quality and Outcomes Framework (QOF) records the proportion of patients with various mental health issues:

- The recorded percentage of patients with **schizophrenia, bipolar affective disorder and other psychoses** (3) in Torbay practices has remained in the highest quintile (i.e. the highest fifth) in England over the decade. The figure is significantly higher than England throughout the decade.
- Just over one in seven patients aged 18+ are recorded as having **depression** (4) in Torbay GP registers in 2022/23. Torbay has been in the second highest quintile in England for seven years. It is on a steadily increasing trend, as is the England figure. This measure is no longer being updated in the QOF.
- Hospital admissions for self-harm are more prevalent in younger people and in females. The admission rate for **self-harm in 10 to 24 year olds** (5) continues to remain significantly higher than the England average as it has for at least the last decade. It has been on a generally reducing trend since a peak in 2015/16. As this data shows admissions rather than individuals it will be influenced by individuals admitted more than once, sometimes several or many times.
- Torbay has historically had a significantly higher **suicide rate** (6) (classified as intentional self harm or injury/poisoning of undetermined intent) than the England average. It remained at around 20 registered suicides a year for a number of years. However, the most recent period (rolling figure of 3 years combined), 2021-23, sees a drop in the rate which appears to show a rate similar to the regional one. However it is our understanding that this drop is due to a significant backlog in coroners' inquests

rather than a reduction in suicides so the new figure is not being used to guide activity in this area.

Good start to life

Programme update: Overall on track

Ensuring families have access to the services they need

The Family Hubs Start for Life programmes continue to be delivered from the Family Hubs in Torbay. The offer continues to be collaborative across the Council, health care services, and voluntary sector. Start for Life government grant funding has been extended for another year, 2025 – 2026.

A new Family Hubs 0-19 contract will be in place from April 2025 that incorporates the Healthy Child Programme and is jointly commissioned between Torbay Public Health and Children's Services.

Public Health Nurses were accredited with UNICEF BFI (Baby Friendly Initiative) Gold accreditation, the highest standard for health services offering infant feeding and parent infant relationship support to families.

Public Health Nurses are delivering mandated health checks in families' homes to a high standard, and are in general meeting the nationally set targets.

Infant Feeding clinics and peer support programmes continue to be delivered from the Family Hubs, with good uptake and excellent feedback from those accessing them.

A face-to-face antenatal programme is being delivered from the Family Hubs by Health Visitors, Action for Children and Maternity, with excellent attendance.

Parenting Programme as part of the Family Hubs offer

A dedicated parenting worker has been employed who is attached to the hubs and has a particular focus on delivering the Solihull Parenting Programme to parents with children under 5. The work is also undertaking outreach work to local nurseries and working with early years practitioners to support parents with young children using evidence based techniques.

The Housing and Cost of Living surgeries at the Hubs continue to have very good attendance, especially with children's services. Parents can self-refer through the bookings system on the Family Hubs website.

AfC and Family Hubs parenting offers have QR codes for self-referral including into Early Help - which is the mechanism for targeted support with multi agency planning. Early help has its own front door in terms of a portal and referrals no longer must come via the Multi Agency Safeguarding Hub (MASH), which reduces barriers for families receiving support.

Early Years Settings, Health Visitors, midwives, parent care panels and other practitioners are signposting and referring into the Hub services which enables families to access support at a universal level. Examples of the parenting support offer includes:

- Adapted parenting offer (i.e. parenting workshops 4 weekly).
- Parenting with play sessions operate monthly.
- Weekly parenting drop ins (Torquay and Brixham),
- housing and cost of living surgeries monthly in each hub.
- Reducing parental conflict offer - virtual and physical in each Hub
- Restore relationships course (women only) run from Paignton Hub (Jan - April 2024).

Risks and issues:

Data report

Number	Measure	Time period	Unit type	Torbay	Devon wide	England	Trend of previous figures	Which way is better	RAG rating compared to England/goal
A good start to life									
7	Children in relative low income families (aged under 16) ¹	2022/23	%	21.5%	19.1%	19.8%		Lower is better	●
8	Good level of development at the end of the Early Years Foundation Stage ²	2023/24	%	68.8%	68.4%	67.7%		Higher is better	●
9	Key Stage 2 pupils meeting the expected standard in reading, writing and maths (combined) ³	2023/24	%	60.3%	58.4%	61.1%		Higher is better	●
10	Pupils with SEND (special educational needs and disabilities)	2023/24	%	18.8%	19.8%	18.1%		Lower is better	●
11	Children in care/ looked after	2024	Per 10,000	121	75	70		Lower is better	●
12	Population vaccination coverage- MMR (Measles, mumps and rubella) for two doses (aged 5 years)	2023/24	%	89.2%	90.4%	83.9%		Higher is better	●
13	Children overweight (including obesity) in year 6 ⁴	2023/24	%	34.1%	32.4%	35.8%		Lower is better	●
14	16-17 year olds not in education, employment or training (NEET) or whose activity is not known	2024	%	5.9%	5.8%	5.4%		Lower is better	●

¹ Figures for the latest year are marked as provisional

² The statistics releases for 2019/20 and 2020/21 were cancelled due to COVID-19. Due to significant revision of the Early Years Foundation Stage profile (assessment framework) in 2021, the years from 2021/22 onwards are not comparable with previous years

³ The statistics releases for 2019/20 and 2020/21 were cancelled due to COVID-19. Attainment is not directly comparable previous to 2017/18 due to changes in the writing teacher assessment frameworks

⁴ 2017/18 and 2020/21 figures not published due to low participation rates, the latter year impacted by COVID-19

- The percentage of **children in relative low income families** (7) is 21.5% in Torbay in 2022/23 which is significantly higher (worse) than the England figure. This was also the case in the previous year. The percentage has been on an increasing trend since 2016/17. A family is defined as being in relative low income when their income is below 60% of the UK median income and they must have claimed Universal Credit, Tax Credits and/or Housing Benefit in the year. These low income statistics do not take housing costs into account.
- Almost seven out of ten children (68.8%) have attained a **good level of development at the end of the Early Years Foundation Stage (EYFS)** in 2023/24 in Torbay schools (8). This is five percentage points higher than the previous year while the England average has increased by half a percentage point compared to the previous year. Torbay's percentage is now similar to the England average after being

significantly lower than England in the previous year. Data covers children who at the end of the EYFS are registered for government funded early years provision.

- **Key Stage 2, meeting the expected standard in reading, writing and maths combined (9)** is similar in Torbay to the England figure in 2023/24 (Torbay- 60.3%, England- 61.1%). Torbay's percentage has increased slightly since 2021/22. Figures published in 2018/19, before the COVID-19 pandemic, are significantly higher in Torbay at 66.0% which is also the trend for England. Data covers state funded schools and shows attainment in assessments taken by pupils at the end of year 6, when most are aged 11.
- The percentage of school pupils with **special educational needs and disabilities (SEND) (10)** is significantly higher than England at 18.8% in Torbay in 2023/24 and has been gradually increasing for the last four years. England's percentage is on an increasing trend. This encompasses children with special educational needs (SEN) support or an education, health and care (EHC) plan who are pupils in state-funded nursery, primary, secondary and special schools, non-maintained special schools and alternative provision schools.
- The rate of **children in care (11)** (also known as children looked after) remains significantly higher than the England average in 2024 as it has been in the previous years shown. Rates in Torbay have remained quite level for several years. Figures encompass children aged under 18 years and exclude those looked after under a series of short-term placements. The rate is as on 31 March of each year.
- Coverage of the **MMR vaccine** (two doses by aged five years) (12) has been on a decreasing trend since 2017/18 (six years) in Torbay. In 2023/24, 89.2% of five year olds had completed the course, this is red compared to the goal of 95% coverage. Torbay's coverage, however, has been significantly higher than the England average for the last nine years. England has been on a decreasing trend during this time.
- Just over a third of **children in year 6 (10 to 11 year olds) are overweight (including obesity) (13)** in 2023/24. This is similar to the England figure as Torbay has been for the last decade (please note that there was no published data in 2017/18 or 2020/21). Torbay has remained broadly level over this time. These figures are calculated from height and weight measurements taken in mainstream state-maintained schools by the National Child Measurement Programme.
- Torbay's percentage of **16 to 17 year olds who are NEET** (not in education, employment or training) or whose activity is not known (14) fluctuates over the six years shown and is similar to the England figure in 2024- Torbay is 5.9% and England is 5.4%. Torbay was significantly higher than England in the year before (2023) as well as in 2020.

Supporting people with multiple complex needs

Programme update: Whilst there has been improvement in delivery, the transformational change afforded by commissioning the Multiple Complex Needs Alliance (MCNA) is not on a path for realising its full potential at this juncture.

- To date, there has been evidence of improvement in experience and outcomes, as well as evolution in how the Alliance works collaboratively. However, progress against some of the transformative aspects of the Alliance Agreement have been sub-optimal for this point in the contract term. The areas for development that require greatest attention are:
 - The primacy of relationships for people who use services, to avoid unnecessary handovers, so that people keep the trusted relationships with professionals that is known to matter most.
 - The development of a sustainable and resourced learning model. This is to allow the Alliance to gain an understanding of people's experience of the support offer and using this to change and develop the offer in a continuous way to improve the experience and outcomes for people.
 - The creation of an optimal coproduction model. There is recognition of the transformational opportunities of involving people with lived experience in understanding how services, work can be improved and shaped, but this can mean it takes longer to progress key activities, to ensure that those who use services are heard and acted upon. Getting the balance between benefit of coproduction as an approach; developing optimal methods for meaningfully involving those who use services; representation of service users; pace of change; and understanding impact need further work.
 - Development of an Alliance-wide workforce rather than a service-specific one.
 - To promote a greater focus and progress on these transformational elements, greater input and support from the MCN Oversight Board has been occurring through regular meetings and a joint session focusing on Human Learning Systems.

Risks and issues:

- The main challenge facing the Alliance has been around access to affordable 'move on' accommodation, which is affecting throughput. This relates to the homeless hostel, the community and residential rehabilitation services as well as those in safe accommodation with the Domestic Abuse Service. Addressing these sits outside the control of the Alliance itself.
- Staff within the Alliance remain unaligned with the alliance vision and are not engaged with the transformational expectation of the Alliance Agreement
- A clear 'end-state' model in accordance with the Alliance Agreement has not been developed.

These risks are recorded and managed through the Alliance programme and are not recommended for inclusion separately in the Health and Wellbeing Board risk register.

Data report

Number	Measure	Time period	Unit type	Torbay	Devon wide	England	Trend of previous figures	Which way is better	RAG rating compared to England/goal
Supporting people with complex needs									
15	Domestic abuse crimes and incidents	2024/25 (Oct-Dec 24)	Number	963				Lower is better	N/A
16	Households owed a duty (prevention or relief) under the Homelessness Reduction Act	2023/24	Per 1,000	16.2	12.9	13.4		Lower is better	●
17	Hospital admissions for alcohol related conditions (narrow definition)	2023/24	Per 100,000	672	519	504		Lower is better	●
18	Successful drug treatment- opiate users (aged 18+)	Apr 23 - Mar 24 ⁵	%	5.85%	4.07%	5.16%		Higher is better	●
19	Successful alcohol treatment (aged 18+)	Apr 23 - Mar 24 ⁵	%	36.20%	36.96%	34.42%		Higher is better	●

⁵ Reported quarterly as a rolling annual figure in this report

- The quarterly number of **domestic abuse crimes and incidents** (15) has fluctuated over the six and a half years shown (from the beginning of 2018/19) but the first three quarters of 2024/25 (April to December) are showing higher numbers than this period in any of the previous years. These are crimes and incidents recorded by the police and include domestic abuse non crime incidents. It should be taken into account that figures only relate to crimes and incidents that are reported. Domestic abuse is often not reported to the police so data held by the police can only provide a partial picture of the actual level of domestic abuse experienced.
- **Households owed a prevention or relief duty under the Homelessness Reduction Act** (16) is where a statutory duty is owed to assist eligible households who are threatened with homelessness within 56 days (prevention) or who are already homeless (relief). The Act came into force in 2018. Torbay is significantly higher than England for the five years with a 2023/24 rate of 16.2 per 1,000 households which equates to 1,051 Torbay households, compared to an England rate of 13.4 per 1,000.
- **Hospital admissions for alcohol related conditions** (narrow definition) (17) is where the primary diagnosis of someone admitted to hospital is an alcohol-related condition. Torbay's rate of alcohol related admissions is significantly higher than the England average in 2023/24 as it has been for all but one of the eight years of data. This is the case for both male and female admissions. The male rate is much higher than the female rate as is the situation in England as a whole. In the last three years combined (2021/22 to 2023/24), males made up 68% of these admissions in Torbay and 65% in England as whole.
- **Drug and alcohol treatment** (18 and 19)- this is successfully completing treatment (free of drug(s) of dependence) and then not re-presenting to treatment services within six months. The data is shown quarterly in this report with each data point being a rolling annual figure:
 - **Drugs-** the success rate for treatment for opiates is 5.85% in April 23 to March 24 which is similar to the England figure of 5.16%. The value has fluctuated over the years

- **Alcohol**- the success rate for alcohol treatment is 36.20% in April 23 to March 24, similar to the England figure of 34.42%. The figure has been on a generally decreasing trend for a couple of years but has been broadly steady over the last year.

Healthy Ageing

Programme update: On track

This work is overseen by the *Torbay and South Devon Healthy Ageing Partnership Board* which reports into the *Torbay and South Devon Local Care Partnership*.

Age Friendly Torbay

- The Torbay Citizens Assembly remains very active in this arena and the Council is looking to work increasingly closely with Assembly members on specific areas of *age Friendly* activity over the next year.

South Healthy Ageing Partnership Board

- The Partnership Board is looking to run a workshop in May that brings groups together to review priorities and plan a shared work programme.

The Torbay Live Longer Better (LLB) programme is progressing well.

- Delivery is on track and the programme is embarking on a new citizen activation 'Healthy Ageing Programme' working in a collaborative partnership that includes Paignton / Brixham PCN, Baywide PCN, Active Devon, Learning With Experts, Teignbridge CVS and Newton Abbot CIC, extending the LLB delivery to work with South Devon. There will be four training options available from online to group to professional training, partially funded through NHS prevention and inequalities funding.
- The course themes continue to be developed based on participant feedback and now include nutrition, hydration, stress release, breathing and a range of other topics. The programme seeks to make all material relevant to local context. There is a waiting list for each course in Torquay, Paignton and Brixham.
- Torbay and South Devon have brought together a new Healthy Ageing Prevention Group that includes VCSE and statutory members, meets 6 times a year and reports to the South Healthy Ageing Programme Board and Local Care Partnership. The group has started to map local delivery and submitted a first summary report of activity.

Risks and issues:

- Securing recurrent funding remains a challenge for the Live Longer Better programme delivery.
- VCSE groups report dealing with increasingly complex needs in the sector across all programmes, including for mental health support, which can be challenging for staff and volunteers.
- Access to affordable public transport remains an issue highlighted by members of the community.

Data report

Number	Measure	Time period	Unit type	Torbay	Devon wide	England	Trend of previous figures	Which way is better	RAG rating compared to England/goal
Healthy ageing									
20	Proportion who use adult social care services who reported that they had as much social contact as they would like (aged 65+)	2023/24	%	42.9%	42.3%	43.1%		Higher is better	●
21	Healthy life expectancy at 65 (Female)	2021-23	Years	12.1	12.3	11.2		Higher is better	●
22	Healthy life expectancy at 65 (Male)	2021-23	Years	10.8	11.1	10.1		Higher is better	●
23	Population vaccination coverage - Flu (aged 65+)	2023/24	%	75.6%	80.6%	77.8%		Higher is better	●
24	Emergency hospital admissions due to falls (aged 65+)	2023/24	Per 100,000	2,334	1,650	1,984		Lower is better	●
25	Emergency hospital admissions due to hip fractures (aged 65+)	2023/24	Per 100,000	535	449	547		Lower is better	●
26	Dementia- estimated diagnosis rate (aged 65+)	2024	%	61.4%	58.1%	64.8%		Higher is better	●

- The proportion of Adult Social Care users aged 65+ who reported that they had **as much social contact as they would like** (20) has stayed almost level in 2023/24 with the year before, back towards pre COVID-19 levels. Percentages in the previous two years (2020/21 and 2021/22) were in the early to mid 30s in Torbay, covering periods affected by social restrictions, guidance and anxiety caused by COVID-19 which is likely to have affected the figures.
- **Healthy life expectancy at 65** (21 and 22) shows the average number of years a person aged 65 can expect to live in good health (rather than in poor health) going forward. This uses a change in methodology and previous periods have been updated to reflect this. Each period is reported annually as a rolling figure of three years combined and the first period in this report is 2014-16. For females, healthy life expectancy was slightly rising until the last few years as is the case in England. For males it has been slightly reducing for several years now, as in England. In Torbay, females and males are similar to England figures throughout the last decade.
- The percentage of **flu vaccinations of those aged 65+** (23) is measured based on the World Health Organisation target of 75%. Torbay has exceeded this for the last four years as has the England average. However, the national vaccine uptake ambition for 2023/24 was to equal or exceed the uptake levels of the previous year (2022/23) but both Torbay and England saw a decrease in uptake in 2023/24. Uptake has decreased in the last couple of years (2022/23 and 2023/24) after a steep increase in 2020/21 and a further rise in 2021/22.

- Torbay's rate of **emergency hospital admissions due to falls for those aged 65+** (24) is significantly higher than England in 2023/24 and has significantly increased from the previous year. Future data will determine if this is a one off or becomes a trend. Previously the figure moved between significantly lower and similar to England over seven years and there is no discernible trend. Many falls injuries do not result in emergency hospital admissions so this does not show the extent of need in this area.
- The rate of **emergency hospital admissions due to hip fractures in people aged 65+** (25) has been broadly in line with England for the years shown. This measures a primary diagnosis of fractured neck of femur. Those who suffer this debilitating injury can experience permanently lower levels of independence and the need to move into long term care.
- The **estimated diagnosis rate of dementia** (aged 65+) (26) measures the percentage of people diagnosed with dementia out of the number estimated to have it- therefore higher is better. Torbay's estimated diagnosis rate is on a generally decreasing trend in the eight years shown although it has slightly increased in 2024 to 61.4% but still below the goal of 66.7%. The England average has been increasing in the last three years.

2.2 A final report will be brought to the Board in March 2026.

5. Financial Opportunities and Implications

5.1 None.

6. Engagement and Consultation

6.1 Engagement is included in the Strategy progress reports in Section 2.

7. Tackling Climate Change

7.1 Environmental sustainability is one of the cross-cutting areas in the Strategy.

8. Associated Risks

8.1 No new significant risks identified. The risks remaining to the digital programme remain as detailed in the Health and Wellbeing Board risk register.

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

	Positive Impact	Negative Impact & Mitigating Actions	Neutral Impact
Older or younger people	Y		
People with caring Responsibilities	Y		
People with a disability	Y		
Women or men	Y		
People who are black or from a minority ethnic background (BME) (Please note Gypsies / Roma are within this community)	Y		
Religion or belief (including lack of belief)	Y		
People who are lesbian, gay or bisexual	Y		
People who are transgendered	Y		
People who are in a marriage or civil partnership			Y
Women who are pregnant / on maternity leave			Y
Socio-economic impacts (Including impact on child poverty issues and deprivation)	Y		
Public Health impacts (How will your proposal impact on the general health of the population of Torbay)	Y		

10. Cumulative Council Impact

10.1 None.

11. Cumulative Community Impacts

11.1 Impact is expected to be positive if programmes are delivered.

