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Active Wellbeing Strategy

Teignbridge: active, healthy and thriving

June 2026



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Document control

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1. Active Wellbeing Strategy – Summary

The Active Wellbeing Strategy sets in motion a shift towards prevention, inclusion and community-based delivery to help residents live active and healthy lives.

- 1.1 Why do we need an Active Wellbeing Strategy and what does it aim to achieve?**
- 1.1.1 The Council is at a pivotal moment. Rising health inequalities, increasing demand on public services, financial pressures on traditional leisure provision and changing patterns of physical activity indicate that the current model is no longer enough. For a rural and coastal district like Teignbridge, these pressures are often amplified by geographic isolation, uneven access to services and seasonal fluctuations linked to the visitor economy.**
- 1.1.2 While the District benefits from a strong foundation of leisure facilities, sports clubs, parks, coastal and community assets, levels of physical active remain static.** Rural communities, residents with limited transport options and some coastal communities face additional barriers that directly contribute to poorer health outcomes and widening inequalities.
- 1.1.3 At the same time, population growth and Local Government Reorganisation (LGR) place new expectations on services.** Ensuring that facilities and programmes are financially viable, sustainable and socially relevant is essential if they are to meet the needs of the residents of the District.
- 1.1.4 In response, the Council is committed to moving beyond a conventional, facility-led leisure model.** Instead, it will establish an Active Wellbeing service that places prevention, inclusion and wider health and social outcomes at its core. This is a proactive shift – from simply providing facility-led activities to enabling healthier lives.
- 1.1.5 This new direction reflects compelling evidence.** Regular movement, social connection and active lifestyles are among the most effective ways to improve physical and mental health, reduce inequalities and help people live well for longer. **Investing in active wellbeing is not a cost – it is a long-term saving and a catalyst for community cohesion and resilience.**
- 1.1.6 The approach embraces everyday activity, locally delivered solutions, stronger partnerships and targeted support for those who face the greatest barriers.** It ensures that the people who benefit least from a traditional leisure service gain the most from this shift. This shift is especially important in a district where dispersed rural settlements and small coastal towns require more flexible, community-embedded models of delivery.
- 1.1.7 This Strategy sets a clear and confident policy direction for the future of active wellbeing.** It provides a practical framework for future service design, partnership working and commissioning. It gives the Council and its partners a shared blueprint for delivery. The framework recognises the need for approaches that are not one-size-fits-all, but instead reflect the diversity of Teignbridge’s rural villages, market towns and coastal communities.
- 1.1.8 It also positions the service to place a stronger role within the unitary authority post-LGR.** By enabling and supporting key statutory services such as Adult Services, Children’s Services and Public Health, the Active Wellbeing service becomes a valuable contributor to system-wide priorities. The model presented is scalable, replicable and aligned with emerging best practice.

- 1.1.9 **The Strategy is shared through extensive engagement with internal teams, external partners and community stakeholders** (outlined in section 3). This collaborative approach reflects both the strength of the District's partnership network and the reality that delivering meaningful change requires shared ownership.
- 1.1.10 The Council will lead the Strategy, but its success will depend on the continued commitment and energy of its partners. Partnerships are particularly vital in a geography where voluntary, coastal and rural community organisations often operate as the first point of support for local residents.
- 1.1.11 It strengthens connections across the local system, including health, social care, community and voluntary sector organisations. Providing clarity for delivery partners on the direction of travel.
- 1.1.12 **Ultimately, the Strategy establishes a compelling shared vision and clear strategic outcomes. It will shape how active wellbeing is supported and enabled across the District in years to come.**
- 1.1.13 **It sets out not just what the Council and its partners will do, but why it matters and how it will make a tangible difference to residents' lives.**
- 1.1.14 The key aims of the Strategy are:
- ▶ **To drive a shift from a traditional leisure model to a broader Active Wellbeing approach** – one that prioritises prevention, inclusion and improved physical and mental health outcomes, while still protecting and enhancing the core leisure offer.
 - ▶ **To reduce health inequalities across Teignbridge** – by enabling less active and underserved communities, including rural villages, coastal towns and residents facing the greatest barriers, to access affordable, inclusive and locally delivered opportunities to move more.
 - ▶ **To embed a whole-system approach** – aligning the service more closely with health, social care, education and the community and voluntary sector, ensuring collective effort towards shared outcomes.
 - ▶ **To strengthen everyday activity and community-based delivery** – making movement easier and more accessible through local settings, trusted community spaces and information environments that reflect the District's rural and coastal geography.
 - ▶ **To provide a clear strategic policy framework for active wellbeing** – guiding future service delivery, shaping partnerships working and informing the design of future operating and commissioning arrangements.
- 1.1.15 Development of the Strategy has been supported by SLC (The Sport, Leisure and Culture Consultancy). SLC are leading strategic advisors to local authorities, principal author of Sport England's Strategic Outcomes Planning Guidance and leading advocates in the public leisure sector for the transition to wider active wellbeing.

1.2 What did the research and review of evidence tell us?

- 1.2.1 A comprehensive review of Council and stakeholder strategies identified clear opportunities for the Active Wellbeing Strategy to support local strategic priorities, improve health outcomes and embed active wellbeing across policy and practice.
- 1.2.2 There is a clear opportunity for the Active Wellbeing Strategy to support the delivery of several key objectives in the Council's One Teignbridge Strategy including:
- ▶ Run leisure facilities to support community health and wellbeing across the district.
 - ▶ Create opportunities for healthier and happier living.

- ▶ Look after our play areas, parks and green spaces, making sure they are clean, safe, and wildlife friendly places where people of all ages want to go.

1.2.3 In addition to the Council’s priorities, **Active Devon’s Devon Moving Together Strategy** sets out shared principles that informed the vision and desired outcomes of this Strategy. These include collaboration and integration, tackling inequalities, and increasing accessibility and opportunity.

1.2.4 **Teignbridge faces significant health and lifestyle challenges.** Current strategic responses make limited explicit use of physical activity as a tool to address priority health outcomes. This highlights the importance of adopting a whole-system approach. It flags the need to strengthen links between wellbeing services, primary care and community-based programmes.

1.2.5 Teignbridge’s rural geography and pockets of deprivation, some within the 20% most deprived areas nationally, present specific access and engagement challenges. While the district benefits from an established leisure centre offer, there remains an opportunity to support more local, place-based physical activity provision, particularly in communities with lower participation.

1.2.6 **Overall, the evidence points to a clear role for the Strategy in providing a coherent framework for active wellbeing across the district** and in supporting delivery against a range of strategic priorities.

1.3 What did people and local organisations tell us?

1.3.1 To capture the perspectives of those involved in planning, commissioning, delivering, and ultimately accessing the service, a mixed-methods consultation and evidence-gathering approach was undertaken. This included an online consultation with community members and wider stakeholders, alongside one-to-one and group discussions with both internal and external stakeholders. Together, these methods ensured a broad and inclusive range of views informed the process.

1.3.2 The key themes that emerged from these consultations are summarised in Figure 1.

Figure 1: Key themes from the community and stakeholder consultation



1.4 Strategic framework

- 1.4.1 The Strategy has been shared through a series of structured workshops with internal teams, external partners and community stakeholders. These conversations helped identify the key themes, priorities and opportunities that underpin the draft Vision, Strategic Outcomes and Strategic Objectives for the new Active Wellbeing Strategy.

Figure 2: the Active Wellbeing Strategy framework



- 1.4.2 The resulting framework is built on four interconnected layers, each reinforcing the next.
- 1.4.3 It begins with a clear and ambitious **Vision**, setting out the future the district is striving to achieve and providing a unifying direction for the service.
- 1.4.4 The second layer, **Strategic Outcomes**, translates this vision into the tangible end results the Strategy aims to delivery – describing what success looks like for residents, communities and partners.
- 1.4.5 The third layer, **Strategic Objectives**, sets out the specific goals that provide focus and act as the stepping stones towards achieving the strategic outcomes.
- 1.4.6 Finally, the **Action Plan** outlines the practical steps, interventions and early priorities required to deliver on the objectives and move the Strategy into implementation.
- 1.4.7 Together, these layers create a clear and coherent “golden thread” that links long-term aspirations to short-term action. This ensures that every decision, investment and partnership contributes meaningfully towards delivering the desired outcomes and ultimately realising the Vision.

1.5 Vision

- 1.5.1 A series of draft vision statements were developed through workshops held with the Council's project team and key stakeholders. Participants reviewed the evidence from the consultations and brought their own perspectives to co-produce a vision for Teignbridge.
- 1.5.2 The vision statements were refined by SLC and the Council, resulting in the final agreed vision set out below.

► **Teignbridge: active, healthy and thriving**

- 1.5.3 A short vision statement provides clarity, memorability and flexibility, making it easy for partners, stakeholders and the public to understand, recall and align with the overall direction.

1.6 Strategic Outcomes and Objectives

- 1.6.1 Based on the outputs of the stakeholder workshops, SLC and the project team have developed a set of Strategic Outcomes centred around five themes.
- **Prevention - Active lives that protect long-term health**
 - **Workforce - Skilled people supporting active wellbeing**
 - **Infrastructure - Places and spaces that support active lives**
 - **Collaboration - Stronger partnerships that connect people to local activity**
 - **Accessibility - Local, digital and inclusive access to activity**
- 1.6.2 Each Strategic Outcome is underpinned by 3 Strategic Objectives, providing a total of 15 objectives to help focus resources on areas of greatest impact. A summary of Strategic Outcomes and Objectives is presented in Table 1.
- 1.6.3 The Strategic Objectives were developed through stakeholder workshops, align with the findings of the strategic review, and reflect the voices of individuals and groups involved in the consultation phase.

Table 1: Strategic Outcomes and Objectives

Strategic Outcomes	Strategic Objectives
<p>Prevention Active lives that protect long-term health</p>	<ul style="list-style-type: none"> ▶ Increase participation in physical activity among children and young people. ▶ Increase the proportion of older adults meeting weekly age-appropriate physical activity guidelines. ▶ Support people with the greatest needs to access inclusive, affordable opportunities to be active.
<p>Workforce Skilled people supporting active wellbeing</p>	<ul style="list-style-type: none"> ▶ Equip the leisure and active wellbeing workforce to confidently support people experiencing health inequalities and complex needs. ▶ Recognise, develop and support a skilled volunteer workforce that meets the needs of local groups, clubs and wellbeing services. ▶ Embed the active wellbeing workforce within prevention and early-intervention pathways.
<p>Infrastructure Places and spaces that support active lives</p>	<ul style="list-style-type: none"> ▶ Maintain and enhance the ability of existing leisure and active wellbeing facilities to meet the needs of all community groups. ▶ Support a network of sustainable, affordable and accessible community venues, school facilities, local parks and green spaces. ▶ Protect and develop safe, accessible walking and cycling networks, actively promoting community awareness and confidence to use them
<p>Collaboration Stronger partnerships that connect people to local activity</p>	<ul style="list-style-type: none"> ▶ Increase community awareness, visibility and engagement in local active wellbeing opportunities and services. ▶ Enhance collaboration and partnerships between community sport, physical activity and health and wellbeing providers (e.g. clubs, schools, local organisations). ▶ Strengthen cross-sector referrals, social prescribing, and signposting to support prevention and early intervention.
<p>Accessibility Local, digital and inclusive access to activity</p>	<ul style="list-style-type: none"> ▶ Maximise opportunities for residents to be active in their neighbourhood. ▶ Expand digital access to interactive and tailored active wellbeing opportunities. ▶ Improve the accessibility and inclusivity of physical activity opportunities by reducing participation barriers.

2. Format of the Strategy

A council owned Strategy, but one that is strongly partner led, with significant partner contribution

2.1 Introduction

- 2.1.1 As part of the development of the Strategy, the Council has explored how other local authorities and localities have developed their strategies. This also builds on the work of SLC in developing a number of high-profile strategies over the last 15 years. It has explored their design, content and approach linked to implementation and governance.
- 2.1.2 **A key consideration is who owns the Strategy and who the principal leads are.** In some localities where there are established partnerships, mature systems and developed relationships, the potential for it to be co-owned and co-produced is greater. This is linked to a growing movement in the public sector of **'Do with'**.
- 2.1.3 Teignbridge District Council has established a number of strong relationships and partnerships which have helped shape the strategic work. However, given the upcoming changes as a result of local government reorganisation, following discussion, **the Council has decided to develop a Strategy that it owns, but one that is strongly partner led, with significant partner contribution.**
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2.2 Strategy format

- 2.2.1 Building on recent exemplar strategies (for example, Sheffield City Council's Sport and Leisure Strategy 2023-2033), the Council will be using the following format for its strategy.
- 2.2.2 **Front cover** - utilising local physical activity / sport imagery from Teignbridge featuring residents.
- 2.2.3 **Introduction page** – setting the scene and vision. Includes contents section.
- 2.2.4 **What is active wellbeing?** explaining the concept in simple terms.
- 2.2.5 **A shared commitment to active wellbeing** - featuring contributions from key stakeholders.
- 2.2.6 **Why we need a strategy** - High level current state position on physical activity levels and key issues being experienced in Teignbridge.
- 2.2.7 **How we got here** – the steps undertaken to develop the strategy highlighting community and stakeholder input.
- 2.2.8 **Strategic Outcomes** – setting out and describing each of the five strategic outcomes.
- ▶ **Prevention** - Active lives that protect long-term health
 - ▶ **Workforce** - Skilled people supporting active wellbeing
 - ▶ **Infrastructure** - Places and spaces that support active lives
 - ▶ **Collaboration** - Stronger partnerships that connect people to local activity
 - ▶ **Accessibility** - Local, digital and inclusive access to activity
- 2.2.9 **Strategic Objectives** – setting out and describing each of the three strategic objectives linked to strategic outcomes.

- 2.2.10 This is framed around the insight developed and feedback from consultees and the community survey to make powerful points and the case for action.
- 2.2.11 **Making it happen** - together with our partners and communities – setting out governance and how the strategy will be taken forward with partners.
- 2.2.12 **What we are committed to do** – high level examples against each of the outcomes of what is already being done to showcase the work underway.
- 2.2.13 **Back page** – using local imagery and directing people to where they can learn more about the strategy.

2.3 Acknowledgements

- 2.3.1 Thanking those organisations who participated in the development of the Strategy.

3. Making it happen

Delivering meaningful and sustained change will rely on strong partnerships, evidence-led decisions and a flexible, adaptive approach to delivery.

The Strategy will be guided by clear principles and behaviours, a phased action plan and proportionate governance arrangements, ensuring early progress can be made while the wider system continues to evolve.

3.1 How we will deliver the Strategy

- 3.1.1 This section describes how the Active Wellbeing Strategy will be put into practice. It focuses on the behaviours, ways of working and delivery approaches required to turn ambition into action. Achieving sustainable improvements in health and wellbeing for residents.
- 3.1.2 By taking a flexible, collaborative and system-wide approach, the Strategy will remain relevant, responsive and firmly focused on improving outcomes. The Strategy will maximise the value of existing assets, partnerships and investment.
- 3.1.3 The following principles will underpin how the Strategy is delivered and reviewed. They reflect recognised best practice and the specific needs of Teignbridge's rural and coastal communities. These principles should guide decisions; shape partnership working and inform ongoing development of the service.
- ▶ **Collaboration and shared ownership** – Delivery depends on strong, focused collaboration with health, education, voluntary and community partners. Clear roles, shared goals and open community will drive co-ordinated action. This approach builds on the strong partnership networks already established across Teignbridge.
 - ▶ **A system-wide approach** – Active Wellbeing will be embedded across the wider health, wellbeing and place-based system. It will align with existing plans and contribute directly to priorities such as reducing inequalities, strengthening resilience and supporting healthy ageing. This includes aligning with emerging Neighbourhood Health Frameworks and Integrated Neighbourhood Teams. This will ensure Active Wellbeing is embedded in local, place-based prevention systems.
 - ▶ **Evidence-led and insight-driven** – Decisions on priorities and investment will be guided by robust data and local insight, particularly from rural, coastal and underserved communities where barriers to activity are greatest.
 - ▶ **Responsive and flexible delivery** – Delivery will adapt over time. Priorities and approaches will be reviewed regularly to respond to emerging needs, new evidence, funding opportunities and system pressures. Flexibility is essential in a district with diverse geographies and seasonal population change.
 - ▶ **Continuous learning and improvement** – Monitoring, evaluation and feedback will underpin delivery. A “test and learn” approach will identify what works, refine what doesn't, and scale effective models. This enables the service to evolve with confidence and continually strengthen impact.

3.2 Action planning

- 3.2.1 A collaborative and evidence-led approach has shaped the Action Plan to ensure the Strategy translates into practical and meaningful change.
- 3.2.2 SLC co-developed the action plan with the Council's leisure team and key stakeholders. Discussions centred on identifying priority actions, clarifying roles and responsibilities, and exploring how existing programmes and assets across the system can be more effectively aligned with the ambitions of the Strategy.
- 3.2.3 The result is a phased and proportionate Action Plan that recognises early opportunities alongside the longer-term system changes needed, while remaining realistic about capacity and resources.
- 3.2.4 **Teignbridge District Council has provided the current key actions and initiatives underway which can be included and feature in the strategy to show the progress that is already being made.** These actions will be incorporated into the detailed action plan and summarised in the strategy document itself. Examples include:
- 3.2.5 **Example 1** – A feasibility study for a new leisure centre was commissioned due to the issues identified from the leisure needs assessment in 2024. This work supports the objective to maintain and enhance the ability of existing leisure and active wellbeing facilities to meet the needs of all community groups.
- 3.2.6 **Example 2** – Concessionary entitlements have been reviewed and amended to support those with the greatest needs to access inclusive, affordable opportunities to be active. Free access for Care Leavers at Teignbridge leisure centres has already been agreed and implemented.
- 3.2.7 **Example 3** – Early stages of collaborative working to increase the proportion of older adults meeting weekly age-appropriate physical activity guidelines. This has included exploring wellbeing sessions in libraries and developing training plans for walk leaders.
- 3.2.8 Year 1 focuses on clear, achievable actions that build strong foundations for delivery. Priorities include:
- ▶ **Mapping needs and assets** – understanding current provision, local insight and gaps to inform targeted and evidence-based solutions
 - ▶ **Strengthening partnerships and governance** – ensuring shared ownership and effective coordination
 - ▶ **Aligning existing programmes** – realigning current activity and resources with the Strategy's outcomes
 - ▶ **Testing new approaches** – piloting and embedding new programmes or delivery models where evidence demonstrates a clear need
- 3.2.9 Years 2 and beyond are outlined at a higher level to allow flexibility as learning from year 1 emerges. Indicative priorities include:
- ▶ Longer-term system redesign.
 - ▶ Developing sustainable funding models.
 - ▶ Phasing investment.
 - ▶ Scaling successful pilots and proven approaches.

3.2.10 This phased structure allowed the plan to evolve in response to new insight, shifting local needs, funding opportunities and wider system developments, including LGR.

3.2.11 The Action Plan will remain a live document, reviewed and refreshed regularly to ensure it stays relevant, achievable and aligned to the Vision. Updates will be informed by monitoring, partner feedback and system changes.

Learning from other strategies

3.2.12 SLC's experience of supporting local authorities with strategies has highlighted a number of key learning points which can be applied to the Teignbridge AWS.

3.2.13 Surprisingly, action planning is often ignored in strategy development. It is considered "detail" and therefore not worthy of inclusion alongside the visionary and long-term aspirations of the strategy. Nothing could be further from the truth. **Without a robust action plan, no one knows if the strategy is deliverable.**

3.2.14 This stage is all about setting the next level of objectives – the operational objectives – that department heads and other organisations can take forward and build into their annual plans. The approach is to develop SMART objectives and allocate them to managers, with reporting every year or so.

3.2.15 The objectives set out what must be achieved and the key results that, if delivered, mean your objectives will have been achieved. This forces a very close relationship between operational objectives and their key results; it also means those operational objectives in turn reflect and underpin the strategic objectives created in the workshop.

3.2.16 This is the 'golden thread' from top to bottom. Specifically, key results focus on what must be delivered in the next 90 days which provides a real sense of urgency to the strategy.

3.2.17 We recommend a rolling two-year action plan, with the first year in detail, the second year in outline. Towards the end of year one, progress will be reviewed, year two will be planned out in detail and year three will be planned in outline. This process repeats every year for the life of the strategy.

3.2.18 It is critical that action plans are subject to financial appraisals. In other words what are the financial implications of delivering those action plans in full and are they affordable. If not, additional resources must be secured, or plans must be scaled back.

Launch Stage

3.2.19 Launch stage features the following key activities:

- ▶ Generate energy and excitement.
- ▶ Revisit stakeholder engagement plan.
- ▶ Large scale communications.
- ▶ Re-affirm commitment from stakeholders.
- ▶ Make commitments in public to deliver.

Monitoring and evaluation

3.2.20 The next phase, **Monitoring and Evaluation** (M&E) starts 90 days after the launch of the strategy. Realistically, this will be limited to monitoring of operational objectives. Regular monitoring not only helps ensure that the work is on track, but it also normalises monitoring. It becomes business as usual rather than a specific, end-of-year event.

3.2.21 Monitoring should consider progress on operational action plans, strategic objectives and the strategic outcomes themselves. The sum total should be evaluated to answer the questions of:

- ▶ How far have we come?
- ▶ What has gone well?
- ▶ What has gone not so well?

Review and adjustment

3.2.22 The final stage is **Review and Adjustment**. The Steering Group explored in detail at 3.5, takes a big picture view of all the M&E and asks: what have we learned? What needs to change? Normally this would mean trimming the sails rather than large scale changes to the strategy, but the validity and relevance of strategic objectives should still be considered.

3.2.23 Review and adjustment will be carried out by the Steering Group and actions leads as they review their rolling 2-year operational plans and firm up their plans for the subsequent year. Again, at this point, there should be a financial appraisal: what has been spent on the strategy, it is in line with projections, do we need to adjust?

3.2.24 A blank template Action Plan is included in Appendix 3.

3.3 Governance, monitoring and evaluation

Introduction

3.3.1 The development of the Active Wellbeing Strategy for Teignbridge has been designed from the outset with the end in mind:

- ▶ Building a shared commitment to active wellbeing across Teignbridge.
- ▶ Co-producing work that meets local needs.
- ▶ Using insight and community engagement to shape local solutions.
- ▶ Focusing on enabling others to deliver with impact.
- ▶ Being clear about priorities and commitments to get things done.

3.3.2 The governance model needs to reflect that this is a 'bottom up' and 'do with' Strategy.

3.3.3 In addition to overseeing delivery and outcomes, the Steering Group will play a role in championing and reflecting on the **values and leadership behaviours** that underpin the Active Wellbeing Strategy. This includes considering how partnership working, inclusivity, collaboration and community voice are demonstrated in practice.

3.3.4 This reflective approach ensures that not only *what* is delivered is monitored, but *how* it is delivered. This supports a values-led, system-wide shift towards prevention, equity and community-centred working.

3.3.5 Given the circumstances and short lead in period up to LGR, the Council will lead the Strategy but work collaboratively with its partners and communities.

3.3.6 This is in order to ensure effective stewardship and ownership of the Active Wellbeing Strategy for Teignbridge by and for stakeholders in Teignbridge.

3.4 Active Wellbeing Strategy Governance Structure

Purpose

- 3.4.1 This governance structure supports the delivery of the Active Wellbeing Strategy which will be Council owned, but community-focused and insight-led. It will seek to enable bottom-up engagement and seek to ensure strategic alignment across the whole system.

3.5 Strategic Group: Active Wellbeing Strategic Delivery Board

- 3.5.1 The strategic group provides overall stewardship and leadership and oversight of delivery of the strategy. Its key activities are set out below.

- ▶ Provides strategic direction and oversight for the Active Wellbeing Strategy.
- ▶ Monitors system-level outcomes and ensures alignment with health, social care, planning and community wellbeing priorities.
- ▶ Reflects on leadership behaviours and values demonstrated across the system to support a culture of trust, collaboration and continuous improvement.
- ▶ Approves major commissioning and investment decisions.
- ▶ Leads annual review and strategic adjustment cycles.
- ▶ Ensures community voice influences strategic priorities and decisions.

Membership

- 3.5.2 Core membership of this group is set out below.

- ▶ Teignbridge District Council Heads of Service (Leisure, Strategy, Development Management)
- ▶ Devon County Council Public Health
- ▶ NHS Devon ICS / ICB Prevention Lead
- ▶ Active Devon Strategic Lead
- ▶ CVS Infrastructure Lead
- ▶ Community Representatives (Rural, Coastal, Priority Groups, Sports Clubs)
- ▶ Education / Schools Representative
- ▶ Environment / Climate Representative

Co-Opted Membership

- 3.5.3 Co-Opted Members will be engaged and invited as appropriate.

- ▶ TDC Leisure & Communities Delivery Leads
- ▶ Active Devon Locality Leads
- ▶ Devon Public Health Practitioner
- ▶ NHS Social Prescribing Link Worker / PCN Representative
- ▶ CVS Community Development Lead
- ▶ CVS Delivery Partners
- ▶ Teignbridge Leisure Representatives
- ▶ Community Representatives (Rural, Coastal, Priority Groups, Sports Clubs)

Strategic Group – Roles and Responsibilities

- 3.5.4 Roles and responsibilities are set out below.

- ▶ Set, refine and safeguard the Strategy's Vision, Strategic Outcomes and Objectives
- ▶ Approve the annual Action Plan and financial budgets
- ▶ Champion active wellbeing across partner organisations
- ▶ Monitor strategic risks and remove system barriers
- ▶ Ensure alignment with key strategies including One Teignbridge, ICS Integrated Care Strategy and Active Devon
- ▶ Coordinates day-to-day delivery of the Active Wellbeing Action Plan
- ▶ Manages operational risks and dependencies
- ▶ Oversee coordination of delivery across the five Strategic Outcome themes
- ▶ Support co-production and community-led programme design
- ▶ Use insight, data and Monitoring, Evaluation and Learning (MEL) learning to adapt delivery
- ▶ Oversee accessible communications and local engagement
- ▶ Oversee identification of workforce development needs across partners

3.6 Decision-making

3.6.1 The following decision making and relationship between each tier of governance is set out below:

- ▶ The Strategic Group handles major (policy-level) decisions and investments over delegated thresholds
- ▶ Insight flows across from communities → Strategic Group
- ▶ Direction flows across from Strategic Group → Communities

Review cycle

3.6.2 These Terms of Reference will be reviewed annually or after major changes in system priorities or structure.

3.6.3 Partners agreed that governance should, where possible, use existing forums rather than establishing new groups. This reduces administrative burden and acknowledges the number of partnership forums that already exist.

3.6.4 Reporting will support informed decision-making and forward planning, rather than compliance-led performance management.

Continuous Improvement

3.6.5 Monitoring and evaluation will be embedded within a structured and proactive review cycle to ensure the Strategy continues to evolve and deliver meaningful impact. A **'test and learn' culture** will underpin delivery, encouraging partners to trial new approaches, reflect on what works, and adapt where needed.

3.6.6 An **annual review cycle** will provide a formal opportunity to assess progress, update the Action Plan and refine delivery approaches based on emerging evidence, insight and system changes.

3.6.7 This will be supported by **clear mechanisms for adjusting priorities** throughout the year, ensuring the Strategy remains flexible and responsive to new challenges, opportunities, and learning.

3.6.8 Together, these processes will ensure the Active Wellbeing Strategy remains dynamic, relevant and continuously focused on improving outcomes for residents.

3.7 RACI Application to the Active Wellbeing Strategy and Governance

- 3.7.1 To bolster the Council's approach to governance a RACI model can also be implemented.
- 3.7.2 RACI provides a clear framework for assigning roles and responsibilities across the Strategy's Vision, Strategic Outcomes, Objectives and Action Plan. It ensures decisions are made at the right level while embedding community voice and insight into governance. Each action and objective will include a defined RACI allocation, preventing duplication, enabling accountability and ensuring shared ownership.
- 3.7.3 Further details about this approach are provided in Appendix 2. It is not suggested that the RACI model be implemented as part of the initial governance structure.

3.8 Local Government Reorganisation

- 3.8.1 Teignbridge is in stage 2 of Local Government Reorganisation. It is assumed the **new unitary arrangements will commence on 1 April 2028**, but it is not yet formally confirmed.
- 3.8.2 This will be preceded by May 2027 elections to shadow unitary authority/authorities.
- 3.8.3 **In practical terms, this leaves Teignbridge with a time window of c 12 months when it has full control over the implementation of its Active Wellbeing Strategy.**
- 3.8.4 A key aim of the Strategy is to position Teignbridge and the front of any new arrangements to ensure that residents needs are clearly articulated and be embedded into future policy.

4. Supporting evidence

Supporting insight that has shaped this Strategy

4.1 What do Teignbridge District residents and stakeholders think?

- 4.1.1 This section sets out the key summary headlines from the evidence base that underpins the Active Wellbeing Strategy. It draws together the most consistent themes and insights emerging from stakeholder and public engagement, highlighting the issues and opportunities that have shaped the vision, outcomes, objectives and recommended actions of the new Strategy.
- 4.1.2 More detailed findings, analysis and supporting data can be found in Appendix 1.
- 4.1.3 The Strategy has been informed by a comprehensive mixed method consultation and evidence-gathering process. This process was specifically designed to capture the perspectives of those who plan, commission, deliver and will ultimately access the service.
- 4.1.4 This approach ensures that the new Strategy is grounded in local knowledge, informed by lived experience and aligned with wider system priorities.

Internal and external stakeholder consultation

- 4.1.5 **SLC engaged with 28 stakeholders through a several channels including one-to-one and group discussions, and workshops forums.** Stakeholders were specifically targeted following the completion of a robust stakeholder mapping process in partnership with the Council.
- 4.1.6 Stakeholders represented a broad cross-section of the local health, wellbeing and community 'system', including:
- ▶ **Council Members** including the Portfolio Holder for Leisure, Recreation, Resorts and Tourism
 - ▶ **Council officers** responsible for Leisure, Planning, Green Spaces, Communications, and Strategy
 - ▶ **Key local health, wellbeing and community partners**, including senior representatives from Devon County Council Public Health, NHS Devon Integrated Care Board, Teignbridge CVS, Libraries Unlimited, Active Devon, Sport England, Devon FA, Swim England.
- 4.1.7 The following key themes emerged from these consultations:
- ▶ **A shift from leisure toward prevention and community wellbeing:** There is strong desire to reposition leisure services from a facility-based, inward facing type model that supports well people to be active to one that instead focuses on enabling preventative health, wellbeing and community wellness aligned to Public Health and NHS priorities.
 - ▶ **Ageing facilities require modernisation:** Several facilities within the Council's leisure estate are considered outdated and inefficient. It is recognised there is a need to invest and improve facilities to increase participation and support the long-term sustainability of the assets, particularly Dawlish Leisure Centre.
 - ▶ **Financial pressures are recognised to be limiting the Council's ability to invest in leisure and meet growing demand:** The Council is challenged by depleting reserves and budget deficits, limiting its ability to invest in improvements to the leisure stock and respond to growing demand effectively.

- ▶ **Targeting support where it will have the greatest impact:** The Council recognises it cannot meet all community needs given its existing resources. An evidence-based targeted approach is instead required to identify and support those most in need where extra support would have the greatest benefit.
- ▶ **Workforce transformation:** It was recognised that the current workforce is not well positioned to support the shift to active wellbeing. New skills and roles are thought to be required to bolster the workforce and support the delivery of more specialist sessions. The development of an aligned training model and competency development framework with key health partners was recognised as a key opportunity.
- ▶ **Leisure team capacity gaps:** It was recognised that the existing leisure service was challenged by capacity gaps. This was identified as a risk and greater capacity was needed to support the transformation to active wellbeing, particularly at senior level if Teignbridge is to take a leading role to support active wellbeing.
- ▶ **Volunteer capacity and participation:** Volunteer numbers are recognised to be in decline, reducing local resource to support delivery of sport, leisure and wellbeing services. Greater investment in training and support recognised as an opportunity to improve engagement and retention of volunteers.
- ▶ **Working collaboratively through a whole-system approach:** Effective delivery of an active wellbeing model was recognised to require stronger and more proactive collaboration internally within Council services, as well as externally with delivery partners including DCC Public Health, NHS Devon, local CVS, schools, and NGBs. There was clear desire to establish a culture of collaboration among partners.
- ▶ **Accessibility and affordability are recognised as the key barriers to increasing participation:** Rural transport limitations, cost, limited active travel infrastructure, and confidence were highlighted by partners as the key barriers currently restricting participation, particularly for low-income and vulnerable groups.
- ▶ **Delivering services in place and developing a hub and spoke model:** There is strong support for a hub-and-spoke type model that makes better use of local halls, parks, green spaces, and other community settings to broaden the leisure offer and reduce barriers to engagement.
- ▶ **Protecting existing provision among housing growth:** Significant housing growth is anticipated to increase pressure on existing leisure, swimming, and playing pitch provision as well as wider wellbeing service in key growth areas. There is a need to protect and enhance provision to effectively support community need.
- ▶ **Local Government Reorganisation (LGR), both a constraint and an opportunity:** LGR was recognised by stakeholders to have created uncertainty and placed a restriction on the Council's long-term decision-making ability at present. However, it is viewed as an opportunity to reshape and align leisure services to more effectively support key health priorities and meet local needs.

Community and wider stakeholder engagement (online consultation)

4.1.8 Alongside direct stakeholder engagement, a programme of targeted online surveys was developed to gather broader community insight and complement qualitative discussions. These surveys generated responses from:

- ▶ **1,382 residents**
- ▶ **26 sports clubs and community groups**
- ▶ **9 local employers**
- ▶ **4 schools**

4.1.9 The following sections detail the key findings from each of the online consultation.

4.1.10 The raw data linked to each of the surveys has been shared with the Leisure team.

Community survey

4.1.11 SLC, in partnership with the Council, hosted an online public survey for local residents to complete, with an aim to better understand their needs, behaviours and attitudes towards physical activity and the Council's leisure service.

4.1.12 The survey was conducted between 3 December 2025 and 16 January 2026.

4.1.13 **A total of 1,382 complete responses were captured.** The Council noted this as one of the largest public surveys returns it has ever received. This strong engagement demonstrates significant community interest in leisure and wellbeing, as well as the broader strategy development.

4.1.14 The response group was largely made up by older adults with a large proportion identifying as female. Just over a quarter of the response group identified themselves to have a long-term health condition. This aligns with the older adult response group, who are more likely to be impacted by a long-term health condition.

4.1.15 It is important to interpret the findings within this context, as overlooking these factors may lead to conclusions that do not fully reflect the views or needs of the wider community, particularly younger adults and children.

4.1.16 A summary of the key findings that emerged from the community survey are shared below:

- ▶ **Women are more motivated by wellbeing and social connection.** Whereas male respondents more commonly referenced physical fitness, strength and performance-related goals as motivators. Barriers also differed by sex showing the needs for tailored approaches.
- ▶ **Older adults (65 years+) indicated strong demand for age-appropriate activities.** They consistently valued local, community-based provision with affordability, transport, and ease of access being key factors influencing participation and ongoing engagement.
- ▶ **Most respondents aren't meeting Chief Medical Officer Guidelines (CMO) of 150 minutes of physical activity per week.** Only 51.0% indicated they completed 150 minutes or more of physical activity each week. A further 40.4% indicated they completed between 30-150 minutes of activity, whilst 8.6% indicated they completed less than 30 minutes of activity.
- ▶ **Residents show strong motivation to be more active.** 75.9% of respondents indicated that they wished to increase their existing activity levels.
- ▶ **There is demand for placed-based delivery of services.** Supporting more opportunities in community settings was identified by the largest proportion of respondents as where they feel the Council should be prioritise efforts in the future. 38.6% of respondents specifically stated they would be more likely to take part in activity in community settings.
- ▶ **Improving holistic health and wellbeing is a key driver of participation.** Promoting physical and mental health were the two most frequently cited motivations for engaging in activity.
- ▶ **Cost is a key barrier to growing participation.** Responses highlighted a clear desire for lower-cost activities, and many residents identified lack of money as a key factor preventing them from being more active.
- ▶ **A review of programme design and strengthening behaviour-change initiatives could increase participation.** The most significant barriers to future engagement with leisure and wellbeing services were identified as lack of time, limited session availability, and low motivation.
- ▶ **There is desire for a broader activity offer to be made available at the Council's leisure facilities and more broadly.** Residents demonstrated interest in a more varied and expanded

activity programme, improved facility offer, and stronger activity networks, including enhanced walking and cycling routes, to enable greater participation.

- ▶ **There is strong desire among residents for an enhanced class-based exercise offer.** Exercise classes were the most commonly selected activities residents indicated they would choose to increase their participation. Swimming, gym sessions, and walking also attracted strong interest.
- ▶ **Word of mouth and digital communications are key to raising awareness of physical activity opportunities.** Residents most often indicated they become aware of activity opportunities through friends and family, social media, online searches, and Council communications, including its website.

Sports clubs and community groups survey

4.1.17 To better understand the needs and desires of local sports clubs and community groups linked to the Council's leisure provision, a short survey was issued to these groups.

4.1.18 **A total of 26 complete responses were captured**, with 126 organisations contacted to take part.

4.1.19 A summary of the key findings that emerged from the sports club and community group survey are shared below:

- ▶ **The majority of clubs have experienced limited membership growth recently.** 80.8% of respondents indicated their membership had either stayed the same (42.3%) or experienced a slight increase (38.5%).
- ▶ **Most clubs have some capacity to grow, indicating they could benefit from targeted support to boost membership recruitment.** 84.6% of respondents indicated they either had some (50.0%) or significant (34.6%) additional capacity for new members.
- ▶ **Clubs are challenged by a shortage of volunteers and coaches, which limits their ability to meet local demand, particularly in supporting hard-to-reach groups.** Number of volunteers and skilled coaches were highlighted as key barriers preventing general membership growth and that of beginner and underrepresented groups.
- ▶ **Accessibility and cost are viewed as the key barriers to enhanced participation among clubs and services.** Facility hire, equipment and training requirements were all identified to be high cost, limiting ability to support those with more complex specialist needs.
- ▶ **Council support for raising awareness of activities and facilities, encouraging inactive residents and strengthening partnerships with physical activity providers was recognised as most desirable to enable clubs to better meet the needs of less active groups.** Clubs also highlighted the need for increased funding opportunities (28.9%) and improved access to facilities (23.1%) as key areas to promote increased engagement among less active groups.
- ▶ **Clubs make limited use of the Council's leisure facilities, preferring informal or private venues for their activities.** Most clubs indicated they do not current use a Council facility (73.1%). This suggests a preference for private venues or a lack of awareness of which facilities are owned and managed by the Council in the District.

Schools survey

4.1.20 An online survey for schools was developed to understand how the Council could better support schools in the local area to promote more positive wellbeing outcomes for their pupils, staff and wider school community through the new strategy.

4.1.21 **A total of 4 complete responses were captured**, with 22 schools approached to take part.

4.1.22 A summary of the key findings that emerged from the school survey are shared below:

- ▶ **3/4 schools are already providing community access to their own sports facilities.** The remaining schools indicated it would consider doing so in the future. Activities currently supported included martial arts, football, and dance.
- ▶ **Primary schools actively use the Council leisure centres to deliver the curriculum.** All three primary schools reported using the Council's leisure centres to deliver elements of their curriculum.
- ▶ The **main barriers** to increasing engagement among children and young people are **cost of activities, limited options, and lack of awareness.**
- ▶ **Schools see strong value in establishing deeper partnerships with local clubs and organisations.** All schools highlighted that increased collaboration along with local club and delivery partners would provide the most meaningful support in helping students become more active.
- ▶ Schools see themselves as playing a key role in promoting physical activity by encouraging pupils, partnering with sports clubs to deliver sessions, and raising awareness of available opportunities.

Local employer survey

- 4.1.23 An online survey for local employers to complete was developed in order to better understand the current activities being implemented to support staff wellbeing and where employers felt the Council could assist with this in the future.
- 4.1.24 The survey was shared with local employers via the Council's Communications team and captured a total of 9 responses.
- 4.1.25 A summary of the key findings from the employer survey are provided below:
- ▶ **Employers consider physical and mental health and fitness as the most critical aspects of staff wellbeing**
 - ▶ **Employee wellbeing is acknowledged but is treated as a lower priority.** Most employers (55.6%) indicated that they have a dedicated wellbeing lead as part of another role, with none indicating they employ a full-time lead.
 - ▶ **Budget pressures and lack of resources are the key barriers** preventing further investment into staff wellbeing.
 - ▶ Employers indicated **support from the Council to improve access to local facilities and programmes would be most appreciated.**
 - ▶ Employers indicated **a need for additional guidance and resources to ensure employers are confident in managing employee wellbeing effectively.** Only 22.2% indicated that they are very confident in their ability.
 - ▶ **Building employee knowledge and skills in partnership with the Council** is viewed as a key opportunity to help establish better wellbeing outcomes among employees.
 - ▶ Employers believe the Council should **prioritise strengthening local partnerships, making facilities more accessible, and increasing awareness** of activities / services to promote staff wellbeing.

4.2 How will the new Active Wellbeing Strategy support wider strategic priorities?

- 4.2.1 The Council has several strategies which articulate its priorities and help to direct the work of different services. SLC has completed a review of a suite of these strategies to identify where there are opportunities to influence future cross cutting strategies and embed active wellbeing. The full list of strategic documents reviewed is shared in Appendix 1.
- 4.2.2 The Council's **One Teignbridge Strategy** emphasise an ambition to create healthier, more resilient and sustainable local communities within Teignbridge. These priorities create a natural alignment with active wellbeing. The Active Wellbeing Strategy complements this direction by focusing on activity being delivered in neighbourhoods. This makes it easier for residents to be active and engaged close to where they live.
- 4.2.3 **The Local Plan** supports improved wellbeing within local communities by protecting existing sport and leisure facilities and promoting the development of new provision. This is a shared ambition and outcome from the Active Wellbeing Strategy to provide places and spaces that support active lives.
- 4.2.4 The Active Wellbeing Strategy reflects key health and care system priorities by promoting prevention, supporting people to age well, reducing the risk of falls and strengthening mental wellbeing through active wellbeing approaches. This is delivered by strengthening links between wellbeing services, primary care and community-based programmes.
- 4.2.5 The Active Wellbeing Strategy supports environmental and sustainability ambitions by encouraging walking, cycling and greater engagement with outdoor spaces. This approach reinforces the aims of the Climate Action and Greenspace strategies by encouraging sustainable behaviours and wider involvement in nature-based activities.
- 4.2.6 Key partner Active Devon's strategy **Devon Moving Together** has several shared principles with the strategy including promoting collaboration and integration, tackling inequalities and increasing accessibility and opportunities. The development of the Active Wellbeing Strategy has already brought stakeholders together and provided the foundation for future collaborative working.
- 4.2.7 The Active Wellbeing Strategy also aligns with the emerging national direction set out in the NHS 10-year Health Plan. This highlights the shift from treatment to prevention and from hospital-based care to community and neighbourhood-based models. Integrated Care Systems will continue to develop Neighbourhood Health Frameworks and Integrated Neighbourhood Teams. There is a significant opportunity for Active Wellbeing Services to play a key enabling role.
- 4.2.8 Wellbeing services that demonstrate a strong understanding of neighbourhood health systems and partnership working will be well placed to connect with health and care partners. This will support more joined-up, preventative approaches that improve population health outcomes and reduce inequalities at a local level.
- 4.2.9 **Overall, existing strategies support a clear framework for active wellbeing across the district and links with multiple strategic priorities.**

4.3 Key health and population demographics data

- 4.3.1 A review of the key demographics and health inequalities faced by Teignbridge District residents has been completed to inform the development of the Active Wellbeing Strategy. This data provides a critical foundation, ensuring that priorities and actions directly respond to local need. Further data is shared in Appendix 1.

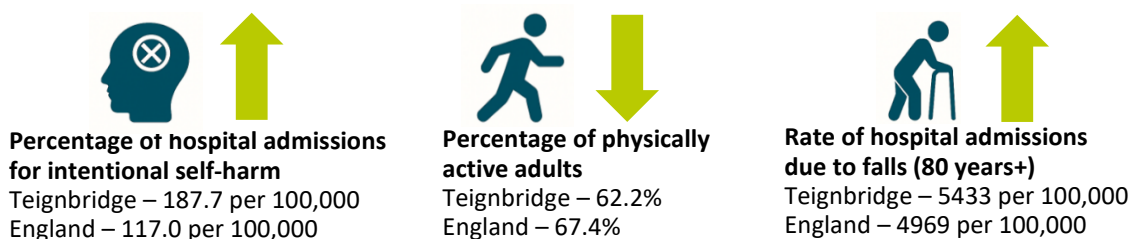
Summary overview of local health outcomes in Teignbridge

4.3.2 SLC has reviewed the following data sources to complete an overview of the overall health of Teignbridge residents:

- ▶ Teignbridge District Council Public Health Outcomes Framework Report (May 2025)
- ▶ Sport England Active Lives Survey Data (Nov 2021-2024)
- ▶ ONS Census 2021 Data.

4.3.3 The data details that **Teignbridge is challenged by significant health and lifestyle issues including physical inactivity, poor mental health and supporting older adults to age well.**

Figure 3: Key health challenges in Teignbridge compared to England statistics



4.3.4 **Physical inactivity is a major issue in Teignbridge, with a significant proportion of adults, children and young people failing to meet recommended activity levels.** This inactivity likely contributes to high rates of adult obesity and sickness absence from work in the area, which exceeds both regional and national averages. Smoking prevalence is also notably high. These trends indicate a need for more effective community-based interventions to promote active lifestyles and healthier behaviours.

4.3.5 **The mental health and wellbeing of Teignbridge residents is also a key area of concern.** Hospital admissions for intentional self-harm are significant in Teignbridge indicating a need for improved or additional mental health support or early intervention services.

4.3.6 **Other health burdens include an elevated prevalence of musculoskeletal conditions and a significantly high rate of emergency hospital admissions due to falls among adults aged 80 and over.** This highlights the importance of providing effective preventative health measures, particularly for older adults, to reduce avoidable hospitalisations and maintain independence.

4.3.7 Despite being faced by several major health outcome challenges, those living in Teignbridge tend to live longer than those living regionally and nationally. This suggests that those living in the area benefit from wider determinants of health that support longevity such as good-quality housing, access to green spaces, and safe neighbourhoods.

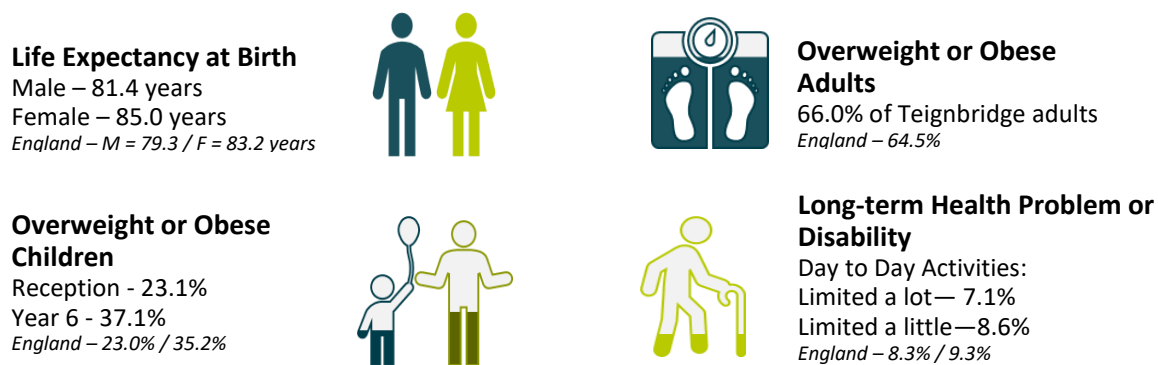
4.3.8 This demographic shift is already contributing to rising frailty-related demand within the health system, with falls representing a major driver of emergency activity.

4.3.9 At the heart of addressing this challenge is a preventative approach. Providing accessible, community-based physical activity opportunities will play a vital role in helping local people to age well, maintain independence, and recover effectively following periods of illness or decline. This approach not only improves individual quality of life but also has the potential to reduce avoidable demand and pressure on overstretched health and care services.

4.3.10 Employment data also presents a positive picture for residents with long-term health conditions. This suggests strong inclusion measures and potentially effective local support systems for people managing ongoing health issues.

4.3.11 A summary of the key health and wellbeing insights from these data sources is shown in Figure 4, with national (England) data shown for comparison.

Figure 4: summary of key health insights



Summary overview of Teignbridge population demographic data

4.3.12 SLC has reviewed the following data sources to complete an overview of the overall health of Teignbridge residents:

- ▶ ONS Census 2021 Data
- ▶ Subnational population projections for England
- ▶ Index of Multiple Deprivation rankings 2025.

4.3.13 Teignbridge is a fast growing, rural district with a rapidly ageing population. While many residents enjoy favourable socio-economic conditions, the presence of significant localised deprivation underscores the need for a balanced and inclusive approach to long-term planning and service delivery.

4.3.14 Census 2021 data recognised Teignbridge District’s resident population to have increased to a total of 134,800 people. This represented an increase of 8.5% in comparison to 2011 data, a rate notably higher than both the England average population growth rate of +6.6% and the South West regional average population growth rate of +7.8%. This above-average growth indicates that Teignbridge is growing at a fast rate.

4.3.15 A key characteristic of the district’s changing population is its rapidly ageing profile. The number of residents aged 65 and over grew by 25.8% between 2011 and 2021. This outpaced growth of the working-age population which increased by only 2.9% over the same period. This trend is anticipated to continue in the future and is likely to place increasing demands on public services, particularly those linked to promoting health and wellbeing.

4.3.16 Teignbridge has a lower population density than both the England and South West averages, reflecting its rural landscape.

4.3.17 The district’s population is also characterised by limited ethnic diversity. A total of 97.7% of residents identify as White British.

4.3.18 Teignbridge is considered a somewhat affluent district. It ranks 172nd out of 296 qualifying local authorities on the Index of Multiple Deprivation (IMD). However, this number masks notable inequalities within the district. Some neighbourhoods in Teignmouth and Newton Abbot fall within the top 20% most deprived areas nationally.

Figure 5: summary of key population demographic insights and projections



2022 Population - 135,972
2037 Population - 152,160
12.9% Population increase



Children/Young People (0-15)
15.8% (*Eng. 18%*) in 2022
16.2% (*Eng 18.8%*) in 2032



Older People (65+)
27.4% (*Eng 19%*) in 2022
26.9% (*Eng 19.5%*) in 2032



Working Age (16-64)
56.8% (*Eng. 62%*) in 2022
56.9% (*Eng 61.7%*) in 2032

5. Appendix 1 – Strategic review

5.1.1 SLC has reviewed the following key strategic documents to support the development of the strategy:

- ▶ Teignbridge Public Health Outcomes Framework Report (May 2025)
- ▶ Teignbridge Population Demographic Data (ONS Census, 2021)
- ▶ Teignbridge District Council Ten-year strategy 2020-2030
- ▶ One Teignbridge Council Strategy 2025-2030
- ▶ Teignbridge District Council Local Plan 2013-30
- ▶ Teignbridge District Council Housing Strategy 2021-26
- ▶ Devon Joint Health and Wellbeing Strategy 2020-25
- ▶ Active Devon – Devon Moving Together 2022-32
- ▶ The Future of Public Leisure in Devon Report – May 2024
- ▶ 4GLOBAL – Teignbridge Social Value Analysis Report (Aug 2023 – Sep 2024)
- ▶ Teignbridge District Council Strategic Asset Plan 2024-29
- ▶ Teignbridge District Council Playing Pitch Strategy 2018-23
- ▶ Teignbridge District Council Indoor Sports Assessment & Strategy Sep 2024
- ▶ NHS Devon Five-Year Commissioning Plan (2026-2031)

5.1.2 The review has been broken down into three categories; population demographic and health data, strategic documentation, and need assessment data.

5.1.3 SLC's high level analysis of the documents follows in this section and has been used to support the following areas:

- ▶ Identification of key local strategic priorities and opportunities for the Active Wellbeing Strategy to support the achievement of these.
- ▶ Identification of key target groups and health outcomes for the strategy to support.
- ▶ Development of key lines of enquiry for the consultation meetings.

5.2 Strategic documents

One Teignbridge Council Strategy 2025-2030

5.2.1 The One Teignbridge Strategy replaced the Council Ten Year Strategy in February 2025. It sets out the Council's long-term plan for delivering the services, projects, and improvements that matter most to local residents. It considers the key priorities for residents and how they expect the Council to work with them to deliver these.

5.2.2 The purpose of the strategy is to ensure what is important to residents and communities is reflected in the Council's priorities, actions, and investment decisions.

5.2.3 The five key priority areas for residents were identified as:

- ▶ **Community:** Listening and responding to communities on local issues

- ▶ **Economy:** Working with businesses and partners to support our local economy
- ▶ **Environment:** Protecting our environment and supporting communities and landscapes and responding to the challenge of climate change
- ▶ **Homes:** Take action to tackle the housing crisis and strive to give everyone the chance to live in a safe warm home
- ▶ **Infrastructure:** Providing with partners the services, facilities and travel networks that our residents and businesses need.

5.2.4 As part of the 'Infrastructure' key priority, the Council commits to 'run leisure facilities to support community health and wellbeing across the district.'

Teignbridge District Council Ten-year strategy 2020-2030

5.2.5 Teignbridge District Council's Ten-Year Strategy sets out the Council's key priorities and long-term vision for the period of 2020–2030. It is designed to guide decision-making, resource allocation, and service delivery to improve the quality of life for residents, workers, and visitors.

5.2.6 The Council's vision for the strategy is to make: *"Teignbridge a healthy and desirable place where people want to live, work and visit."*

5.2.7 To achieve this mission the Council recognises several challenges that will need to be overcome over the strategy period which include:

- ▶ Less money from the government
- ▶ Major changes in how councils raise money
- ▶ More people living here, including more older people
- ▶ Residents demanding more
- ▶ Fast pace of change in technology and communications
- ▶ Local, national, and global economic, environmental and social issues
- ▶ A complex public sector structure

5.2.8 Several key objectives have been established for the strategy to deliver against. These are:

- ▶ A carbon neutral district
- ▶ Better quality and affordable housing
- ▶ Good wages and jobs for all
- ▶ Active and sustainable travel choices
- ▶ Encouraging our young people to stay
- ▶ A healthier population living in resilient communities
- ▶ A clean, green and safe environment
- ▶ An open council

5.2.9 Ten programmes were designed to support the achievement of the above objectives. These included:

- ▶ Action on climate - to be a carbon neutral district
- ▶ A roof over our heads - to provide more, better and affordable homes
- ▶ Clean scene - to keep the district clean
- ▶ Going to town - to invest in town centres
- ▶ Great places to live and work - to provide well designed quality neighbourhoods
- ▶ Investing in prosperity - to create jobs and wealth
- ▶ Moving up a gear - to improve travel options
- ▶ Out and about and active - to provide opportunities for healthy active lifestyles
- ▶ Strong communities - to liaise with, help and support our communities
- ▶ Vital, viable council - to deliver quality, value for money and flexible services

- 5.2.10 There is a clear opportunity to design the Active Wellbeing Strategy to support the delivery of a several key objectives in the Council Strategy including 'A healthier population living in resilient communities', 'Active and sustainable travel choices', and 'A clean, green and safe environment'.

Teignbridge District Council Local Plan 2013-2030

- 5.2.11 The Teignbridge Local Plan sets out a 20-year framework for sustainable development across the district (excluding Dartmoor National Park).

- 5.2.12 The Strategy is built around three key themes:

- ▶ Economic prosperity
- ▶ Quality environment
- ▶ Wellbeing

- 5.2.13 It identifies that there is a housing allocation of 12,400 new homes across the strategy period. Key strategic site include:

- ▶ Newton Abbot - Houghton Barton, Whitehill and Wolborough developments - 3750 homes
- ▶ South West Exeter extension – 2000 homes
- ▶ Dawlish – 850 homes

- 5.2.14 The Local Plan sets out plans to establish additional sport and leisure provision. Key proposals include:

- ▶ A new leisure centre and playing pitches in Newton Abott
- ▶ A new multi-purpose community/sport building as part of the South West Exeter extension

- 5.2.15 The Local Plan can be identified to support improved wellbeing of the local community through supporting the protection of existing sport and leisure facilities and promoting the development of new facilities.

Teignbridge District Council Housing Strategy 2021-2026

- 5.2.16 The Council's Housing Strategy sets out its approach to improving housing outcomes for residents between 2021 and 2026. It aims to support the overarching Council Strategy 2020–2030 and the Local Plan 2013-30.

- 5.2.17 The strategy is built around five key themes:

- ▶ Build affordable homes
- ▶ Improve homes
- ▶ Prevent homelessness and address rough sleeping
- ▶ Put the client first
- ▶ Tackle climate change

- 5.2.18 The strategy outlines that there is a need to deliver 760 homes per year across the strategy period as per the Local Plan calculation.

Teignbridge District Council Carbon Action Plan – July 2022

- 5.2.19 In April 2019, the Council declared an environment and climate emergency. The Carbon Action Plan set out a strategy to respond to the climate emergency and support the Council towards becoming a net zero organisation.
- 5.2.20 The plan identifies a target of achieving net zero scope 1 and 2 emissions across the Council's owned and operated buildings by 2030. It also sets a target of achieving net zero supply chains by 2050.
- 5.2.21 The plan includes a total of 39 actions that are intended to enhance data capture, increase the scope of emissions report, increase in-house expertise in low carbon concepts, work towards becoming a carbon literate organisation, and identify where there is further work needed to enhance the net zero strategy.
- 5.2.22 The plan recognises that the majority of carbon emissions are generated by the leisure centres. Newton Abbot Leisure Centre is considered the largest source of carbon emissions.
- 5.2.23 The following actions are included that can be linked to the Council's leisure service:
- ▶ The development of a business case to decarbonise Broadmeadow Sports Centre in support of Target 1
 - ▶ Replace gas-fired boilers at Newton Abbot Leisure Centre, Forde House, and Teignmouth Lido with air source heat pumps
 - ▶ Continue to deliver 280 kW of new solar PV capacity under PSDS 1 funding, including 100 kW at Newton Abbot Leisure Centre, 75 kW at Forde House, 65 kW at Broadmeadow Sports Centre and 40 kW at the Teignmouth Lido. It is noted that these projects have now all been delivered.
- 5.2.24 The plan clearly identifies decarbonisation of the leisure centres as a key priority to support the achievement of the Council's net zero goals. Promoting improved environmental health and supporting carbon reducing practices will need to be key priorities of any new strategy.
- 5.2.25 The Council has already made strong progress in delivering actions linked to its leisure services, demonstrating its commitment to the Carbon Action Plan.

Devon Joint Health and Wellbeing Strategy 2020-2025

- 5.2.26 The Devon Joint Health and Wellbeing Strategy 2020–2025 is a strategic framework developed by Devon's Health and Wellbeing Board to improve health outcomes and reduce inequalities across the county. It brings together leaders from health, care, local government, and community organisations to coordinate efforts and respond to local challenges.
- 5.2.27 The vision for the strategy is for: *'Health outcomes and health equality in Devon will be amongst the best in the world and will be achieved by Devon's communities, businesses and organisations working in partnership.'*
- 5.2.28 The priorities of the strategy represent the four pillars of population health and are listed below:
- ▶ **Create opportunities for all:** Inclusive economic growth, education and social mobility
 - ▶ **Healthy, safe, strong and sustainable communities:** Creating conditions for good health and wellbeing where we live, work and learn
 - ▶ **Focus on mental health:** Building good emotional health and wellbeing, happiness and resilience

- ▶ **Maintain good health for all:** Supporting people to stay as healthy as possible for as long as possible

5.2.29 Despite there being an opportunity for local authority sport, leisure and active wellbeing services in Devon to support the achievement of each of the key priorities above, there is no clear role established.

5.2.30 There is also no mention of how physical activity could be used to promote the achievement of the key priorities.

5.2.31 A new Joint Health and Wellbeing Strategy was commissioned to be developed in July 2025 to guide the health improvement in the county post-2025.

Active Devon – Devon Moving Together 2022-2032

5.2.32 Active Devon's - Devon Moving Together strategy, sets out a countywide approach to embedding movement and physical activity into everyday life. The strategy's core purpose is to reduce inequalities and harness the power of movement to improve health, wellbeing, and community connection across Devon.

5.2.33 Active Devon identifies its role as a connector and enabler, working with local partners and communities to remove barriers and create opportunities for people to be active in ways that suit them.

5.2.34 The strategy's vision is "Everyone in Devon active for life," and its mission is "To unlock the ability of movement to change lives for the better."

5.2.35 The above ambitions are underpinned by three long term aims: ensure positive experiences of movement for everyone, reduce inequalities through active lifestyles, and building strong local partnerships to help change lives.

5.2.36 To deliver this, the strategy identifies four key priority themes for future efforts to focus on:

- ▶ **Movement for health and wellbeing:** To strengthen connections between health and community systems by sharing the benefits of physical activity using it routinely to improve physical and mental wellbeing.
- ▶ **Movement with communities:** To create positive change in communities facing multiple inequalities and build an inclusive workforce equipped to meet diverse individual needs.
- ▶ **Movement in early and later life:** To unite partners and gain their commitment behind the importance of these two pivotal segments of the population.
- ▶ **Everyday movement:** To make everyday movement a normal part of life through simple, accessible activities and opportunities, and to help more people enjoy the benefits of being active outdoors while connecting with nature.

5.2.37 The strategy outlines the need for an integrated whole system approach to support the delivery of the strategy through collaboration between health, education, local government, and voluntary groups.

5.2.38 Active Devon's Moving Together strategy includes several shared principles that Teignbridge's new Active Wellbeing Strategy will aim to promote and support. This includes promoting collaboration and integration, tackling inequalities and increasing accessibility and opportunities.

The future of public leisure in Devon report – May 2024

- 5.2.39 Active Devon’s future of public leisure report explores how the potential of Devon’s leisure services could be unlocked to support more people to become more active, more often.
- 5.2.40 10 themes emerged from an analysis of existing local leisure services:
- ▶ **Reframe public leisure:** Position public leisure as a key tool for addressing social and health inequalities, recognising its potential to unlock wider community benefits
 - ▶ **Foster cross-sector collaboration:** Create spaces for shared learning and relationship-building between leisure, health, and broader system partners across Devon
 - ▶ **Develop shared language and purpose:** Establish a shared language between leisure and health partners to support joint efforts
 - ▶ **Strengthen strategic alignment:** Secure commitment from Devon’s Integrated Care System and public leisure providers to collaborate on shared health and wellbeing goals
 - ▶ **Invest in sector leadership:** Promote leadership in the sport and leisure sector to support systems thinking, strategic advocacy, and career development
 - ▶ **Leverage data and technology:** Prioritise data sharing, insight, and digital innovation to better understand social needs, measure impact, and support more effective physical activity initiatives
 - ▶ **Embed environmental sustainability:** Prioritise sustainability in leisure services, from energy-efficient systems to active travel initiatives, and collaborate on managing rising energy costs.
 - ▶ **Modernise procurement approaches:** Co-design smarter procurement models for leisure contracts that include clear local social and health priorities linked to place-based need
 - ▶ **Support community-run provision:** Formally recognise the role of community-led leisure, especially in rural and coastal areas, and provide business support to strengthen local infrastructure
 - ▶ **Leverage Active Devon’s Role:** Utilise Active Devon’s position to advocate for public leisure, collaborate with national partners, and drive system change where it’s most needed.

5.3 Population demographic and health data

Teignbridge Public Health Outcomes Framework Report (May 2025)

- 5.3.1 The Teignbridge Public Health Outcomes Framework (PHOF) is a national framework used locally to measure and improve public health. It provides data that enables a local authority area to compare how well it is performing on a series of health outcomes in comparison to regional (South West) and national (England).
- 5.3.2 A review of key health and wellbeing indicators reveals:
- ▶ **Teignbridge residents live longer lives than national and regional average.** Life expectancy for both men (81.4 years) and women (85.0 years) living in Teignbridge is higher than regional (M= 80.2 years, F= 84.3 years) and national (M= 79.3 years, F= 83.2 years) averages.
 - ▶ **Teignbridge is challenged by high levels of adult and children and young people inactivity.** The Percentage of physically active adults in Teignbridge (62.2%) is significantly lower than the regional (71.4%) and national (67.4%) average. The Percentage of physically active children and young people is also significantly lower in Teignbridge (41.2%) than regionally (48.3%) and nationally (47.8%)

- ▶ **Prevalence of obesity is significant in Teignbridge.** 66.0% of adults are obese in Teignbridge, higher than identified regionally (62.7%) and nationally (64.5%)
- ▶ **Teignbridge has a high proportion of residents with a physical or mental long-term health condition in employment.** The percentage of the population with a physical or mental long term health condition in employment (aged 16 to 64) in Teignbridge is 74.4%, significantly above regional (69.4%) and national (65.3%) average
- ▶ **Teignbridge loses a high number of days to sickness absence.** The percentage of working days lost due to sickness absence is higher in Teignbridge (1.5%) than experienced regionally (1.4%) and nationally (1.2%)
- ▶ **Hospital admissions for intentional self-harm are significant in Teignbridge.** The percentage of emergency hospital admissions for intentional self-harm is significantly higher in Teignbridge (187.7 per 100,000) than national average (117.0 per 100,000) and above the regional average (174.6 per 100,000)
- ▶ **A significant proportion the Teignbridge population smoke.** Smoking Prevalence in adults is significantly higher in Teignbridge (17.0%) than regional (11.2%) and national (11.6%) average
- ▶ **The percentage of people with a musculoskeletal problem high in Teignbridge.** 19.1% of the population reported a MSK problem, higher than regional (19.0%) and national (18.4%) average
- ▶ **Falls prevention is an issue in Teignbridge, particularly among 80+ adults.** The rate of emergency hospital admissions due to falls in people aged 80 plus living in Teignbridge is significantly higher (5433 per 100,000) than experienced regionally (4712) and nationally (4969)

5.3.3 The above data indicates that Teignbridge is challenged by significant health and lifestyle issues including physical inactivity, poor mental health and supporting older adults to age well.

5.3.4 Physical inactivity is a major issue, with a significant proportion of adults, children and young people failing to meet recommended activity levels as shown by being below both regional and national benchmarks. This inactivity likely contributes to high rates of adult obesity and sickness absence from work in the area, which also exceeds both regional and national averages. Smoking prevalence is also notably high. These trends indicate a need for more effective community-based interventions to promote active lifestyles and healthier behaviours.

5.3.5 The mental health and wellbeing of Teignbridge residents is also a key area of concern. Hospital admissions for intentional self-harm are significant in Teignbridge indicating a need for improved or additional mental health support or early intervention services.

5.3.6 Other health burdens include an elevated prevalence of musculoskeletal conditions and a significantly high rate of emergency hospital admissions due to falls among adults aged 80 and over. These figures highlight the importance of providing effective preventative health measures, particularly for older adults, to reduce avoidable hospitalisations and maintain independence.

Teignbridge Population Demographic Data (ONS Census, 2021)

5.3.7 A review of key health and wellbeing indicators reveals:

- ▶ **Teignbridge has a total resident population of 134,800.** The population is anticipated to increase to c.152,160 people by 2037.
- ▶ **The population of Teignbridge is increasing quickly.** The population of Teignbridge increased by 8.5% between 2011 to 2021, 1.9% more than the England (6.6%) average and 0.7% more than the South West average (7.8%)

- ▶ **The population of Teignbridge is ageing rapidly.** The number of people aged 65+ in Teignbridge increased by 25.8% between 2011 to 2021. There was only a 2.9% increase in people aged 15 to 64 across the same period
- ▶ Teignbridge has a lower population density than England and the South West
- ▶ **Teignbridge is largely made up of White British nationals.** 97.7% of the local population considers themselves White British
- ▶ **Teignbridge has a mostly affluent population.** Teignbridge ranks 186th out of 317 qualifying local authorities for average rank of IMD. This indicates it has a majority affluent population

5.3.8 Future priorities should focus on preparing for an older population and addressing inequalities in deprived communities.

5.3.9 Teignbridge’s ageing population is a key challenge, with a 25.8% increase in residents aged 65+ between 2011 and 2021, compared to just 2.9% growth in the working-age group. This shift will increase demand for age-related services, healthcare, and accessible infrastructure. A preventative approach to health is required to support people to age well and reduce pressure on health care services.

5.3.10 While Teignbridge is generally affluent, it contains pockets of significant deprivation, particularly in Teignmouth, Dawlish, and Newton Abbot Town Centre. There is a need for targeted investment and support in these areas.

Index of Multiple Deprivation rankings 2025

5.3.11 Teignbridge ranks 172nd out of 296 qualifying local authorities on the Index of Multiple Deprivation (IMD). This indicates that it is a middling authority in terms of affluence.

5.3.12 Pockets of deprivation can be located in Teignmouth and Newton Abbot Town Centre. Parts of Teignmouth and Newton Abbot face particular challenges ranking in the top 20% most deprived areas in England.

5.3.13 Further pockets of deprivation exist in Dawlish, and Ashburton & Buckfastleigh. These areas rank in the top 30% most deprived areas nationally.

5.3.14 There is a need to target future interventions to support improvements to the quality of life of those living in these pockets of deprivation.

Sport England Active Lives Data – Teignbridge District (Nov 2021-2024)

Adult (16+) population data

5.3.15 The Sport England Active Lives Survey is a national survey that measures physical activity levels among adults (16+) in England.

5.3.16 Table 2 outlines the level of active, fairly active and inactive adult (16+) residents living in Teignbridge District in comparison to activity levels regionally and nationally.

Table 2: Teignbridge activity levels in comparison to regional and national average (adults)

Activity levels	Teignbridge District	South West regional average	England average
Inactive			
Nov 2021/22	17.4%	22.1%	25.8%

Nov 2022/23	20.3%	22.2%	25.7%
Nov 2023/24	27.5%	22.2%	25.1%
Fairly active			
Nov 2021/22	11.6%	10.8%	11.1%
Nov 2022/23	9.9%	10.2%	10.9%
Nov 2023/24	15.0%	10.7%	11.2%
Active			
Nov 2021/22	71.0%	67.1%	63.1%
Nov 2022/23	69.8%	67.5%	63.4%
Nov 2023/24	57.5%	67.1%	63.7%

- 5.3.17 Table 2 shows a clear and sustained decline in Teignbridge’s active adult population over the three-year data period. A particularly significant decrease was recorded in 2023/24, with the active population falling to 57.5%.
- 5.3.18 The fall in the active population has directly contributed to notable increases in both the inactive and fairly active groups. Of these two groups, there has been a more significant increase to the proportion of inactive adults. This suggests decreasing activity levels among both active and fairly active populations.
- 5.3.19 Overall, Teignbridge’s adult population has notably gone from being found to be more active than both regional and national (England) averages, to less active. The speed of the decline outlined in the data set is a cause for concern. Without targeted intervention, the widening gap between Teignbridge and broader benchmarks may continue to increase and impact community wellbeing.

Children and young people data

- 5.3.20 Table 3 outlines the level of active, fairly active and inactive children and young people (0-15) living in Teignbridge District in comparison to activity levels regionally and nationally.

Table 3: Teignbridge activity levels in comparison to regional and national average (children)

Activity levels	Teignbridge District	South West regional average	England average
Inactive			
*Nov 2021/22	35.7%	27.7%	30.1%
Nov 2023/24	34.6%	28.6%	29.5%
Nov 2024/25	31.9%	27.6%	28.4%
Fairly active			
Nov 2021/22	20.8%	23.2%	22.7%
Nov 2023/24	24.1%	23.1%	22.7%
Nov 2024/25	18.9%	22.5%	22.2%

Nov 2021/22	43.5%	49.1%	47.2%
Nov 2023/24	41.2%	48.3%	47.8%
Nov 2024/25	49.2%	49.9%	49.1%

**Nov 21/22 data used as no data is available for Teignbridge in 22/23.*

5.3.21 Table 3 shows a sharp increase to the active children and young people population in Teignbridge, generating three consecutive years where the inactive population fell. This suggests a meaningful shift towards more frequent participation in sport and physical activity has occurred during this period.

5.3.22 Despite these improvements, Teignbridge continues to record a higher proportion of inactive children and young people compared with both the South West and England averages. This indicates that, although progress is being made, the district continues to face structural and / or behavioural challenges in influencing children’s activity levels. Efforts should be targeted toward engaging less active groups to continue reducing the inactive population and grow the active one.

NHS Devon Five-Year Commissioning Plan (2026-2031)

5.3.23 The NHS Devon Five-Year Commissioning Plan (2026–2031) sets out how the health system will respond to rising demand, an ageing population, increasing complexity of need, and financial pressures by redesigning how care is delivered.

5.3.24 Core challenges identified:

- ▶ Rapidly ageing population, driving higher demand, multi-morbidity and frailty
- ▶ Increasing health inequalities and variation in outcomes
- ▶ Unsustainable demand on hospitals, including avoidable admissions and delayed discharge
- ▶ Workforce and financial pressures limiting the ability to sustain current models.

5.3.25 The Plan outlines three major system shifts: moving care from hospital settings into neighbourhoods, shifting from treatment to prevention, and modernising services through digital innovation.

5.3.26 Central to this approach is the development of Integrated Neighbourhood Teams> This brings together health, social care, and voluntary sector partners to deliver coordinated, community-based care tailored to local populations.

5.3.27 The commissioning approach places a strong emphasis on prevention, early intervention, reducing health inequalities, and enabling people to remain independent and well within their communities for longer.

5.3.28 It also highlights the need to reduce avoidable hospital admissions, improve discharge pathways, and increase system productivity.

5.3.29 There is a clear and strong alignment between the NHS Devon Plan and the Active Wellbeing Strategy. The shift towards neighbourhood-based care and prevention presents a significant opportunity for Active Wellbeing Services to play a key role in supporting population health outcomes.

- 5.3.30 Services that are embedded within communities, connected to Integrated Neighbourhood Teams, and focused on enabling people to be more active will be well positioned to contribute to system priorities, particularly in supporting ageing populations, reducing frailty, and alleviating pressure on health and care services.

5.4 Needs assessment and feasibility

TDC Strategic Asset Plan 2024-29

- 5.4.1 The Strategic Asset Plan sets out how the Council intends to manage, maintain and develop its property portfolio to support delivery of the Council's Strategy.
- 5.4.2 The overarching Asset Plan is built around three key priorities:
- ▶ Reducing costs
 - ▶ Growing income
 - ▶ Supporting communities and delivering housing.
- 5.4.3 The Plan recognises the Council's leisure facilities as central to promoting active lifestyles, community cohesion, and health improvement across the district. It emphasises the need for well-maintained, efficient, and modern leisure facilities that limit operational costs and environmental impact.
- 5.4.4 The leisure centres were recognised as some of the largest consumers of electricity within the Council estate. The centres are also considered as ageing and to have increasingly significant maintenance requirements.
- 5.4.5 It is detailed that a provision for the second phase of decarbonisation at Broadmeadow Sports Centre, partly funded from Public Sector Decarbonisation Fund grant, is included within the Council 2026/27 Capital Programme. This was delivered as part of the refurbishment programme completed July 2025.
- 5.4.6 The Action Plan sets out the following action for sports and leisure facilities '*Continue to safeguard the District park and leisure, green spaces and events.*'
- 5.4.7 The Plan identifies that a future Leisure Strategy will inform decisions on the future configuration, investment, or rationalisation of leisure assets.

TDC Indoor Sports Assessment and Strategy Sep 2024

- 5.4.8 The Council's Indoor Sports Assessment 2024 (ISFA) examines the supply and demand for indoor facilities across the authority area. It aims to provide a clear evidence base to help guide future investment for indoor sports and leisure facilities.
- 5.4.9 Table 4 includes key information on the current and future demand for core indoor facility provision in the authority area.

Table 4: Indoor facility provision – current and future demand

Facility type	Key headlines
Health and fitness	<ul style="list-style-type: none"> ▶ Total supply of 12 health and fitness gyms (+20 stations) which total 705 stations in Teignbridge ▶ Current shortfall of 122 stations based on existing population size ▶ By 2043, there will be a need for 1031 stations ▶ Public facilities are thought to be struggling to compete with private operators due to ageing stock ▶ Plans to refurbish and redevelop Newton Abbot are considered important projects for the future as it approaches capacity. Broadmeadow SC was refurbished in 2025. ▶ There is a large supply (28) of gyms located in neighbouring authorities within 2 miles of the Teignbridge boundary. ▶ Total supply of 16 exercise studios
Swimming pool	<ul style="list-style-type: none"> ▶ Total supply of 20 swimming pools in Teignbridge ▶ The two main public pool facilities are: Newton Abbot Leisure Centre: 6-lane 25m main pool and dedicated learner pool. Dawlish Leisure Centre: 5-lane 25m pool. These are both operated by the Council ▶ Both Council pools are considered below average quality. Newton Abbot LC is considered beyond life expectancy and requiring major investment ▶ There is a gap of swimming facilities in the north and west of the district ▶ Refurbishment and/or redevelopment identified as essential to sustain provision. ▶ By 2043, demand for water space is projected to rise by 4.08 lanes
Sports halls	<ul style="list-style-type: none"> ▶ 10 sports halls in Teignbridge (+3 courts) that offer the potential for community use ▶ Provision is considered good in the south / east of the District, but there are gaps in the rural north/centre ▶ Sports hall at Newton Abbot LC considered to require replacement within 2 years. Broadmeadow SC and Dawlish LC sport halls refurbished since 2021 ▶ There is a need to improve community availability of the sports halls at Dawlish Leisure Centre and Newton Abbot Leisure Centre ▶ By 2043, demand is projected to rise by 5.65 badminton courts (1.41 halls)

5.4.10 Several strategic recommendations are made based on the key findings of the assessment. These include:

- ▶ Prioritise energy efficiency in all refurbishments and new developments, aligning with the Council's carbon reduction goals.
- ▶ Work with schools to maintain and improve sports hall quality and ensure continued community access.

- ▶ Improve access for underserved groups, especially in deprived areas, by expanding use of community facilities and tailored activities.
- ▶ Expand provision for over-65s, including exploring a district health and wellbeing hub.
- ▶ Expand Newton Abbot Leisure Centre's daytime use to meet rising demand for pay-and-play fitness.
- ▶ Assist Dawlish and Newton Abbot LC's in finding additional or new space to meet growing demand.
- ▶ Simplify casual access to leisure centres, ensuring digital processes don't exclude users.

5.4.11 The Council's new Active Wellbeing Strategy will need to consider the above findings and identify opportunities to help mitigate the key strategic gaps and opportunities identified within this assessment.

Teignbridge DC Playing Pitch Strategy 2018-2023

5.4.12 The Council undertook a Playing Pitch and Outdoor Sports Strategy in 2018 to assist future strategic planning for this facility type.

5.4.13 Several key gaps in provision emerged from the review:

- ▶ There is a need for 1x additional full size 3G football pitch, ideally centrally located
- ▶ There is a need for 1x new full sized and centrally located Sand based AGP for hockey, ideally along A38 corridor
- ▶ Other key issues that require further consideration include:
 - ▶ Many grass football pitches are affected by poor quality drainage and maintenance as well as a lack of investment in ancillary facilities such as changing rooms
 - ▶ Overuse and limited pitch quality are key concerns linked to rugby pitch provision
 - ▶ Several cricket clubs are faced with capacity issues and there is a need to invest in expanded facilities that are currently under pressure

5.4.14 The strategy recommends prioritising investment in artificial surfaces, improving drainage and maintenance of existing pitches, securing long-term community access to school and private sites, and aligning new provision with housing growth. It also highlights the importance of supporting informal and emerging sports formats to meet changing participation trends.

5.4.15 The Council commissioned an updated Playing Pitch Strategy in 2026 to ensure the evidence base remains current and to guide future provision and investment.

6. Appendix 2 – RACI application to governance

6.1 RACI Application to the Active Wellbeing Strategy and Governance

- 6.1.1 The Strategic Group (Active Wellbeing Strategic Partnership Board) holds **Accountability (A)** for the Strategy. It approves the annual Action Plan, oversees strategic risks, ensures alignment with local and county-wide policy, and leads the annual review and adjustment cycle.
- 6.1.2 It is **Consulted (C)** by the Operational / Delivery Leads before major decisions and **Informs (I)** broader stakeholders of strategic updates. It does not deliver day-to-day actions but provides system leadership and strategic direction.
- 6.1.3 Operational / Delivery Leads are primarily **Responsible (R)** for delivery. They coordinate workstreams, test and evaluate new approaches, drive community-led design, and manage operational risks. They are also **Consulted (C)** on strategic matters and **Inform (I)** the Strategic Group through regular reporting. They ensure that lived experience and local insight directly shape programme design.
- 6.1.4 Across both governance tiers, RACI reinforces distributed leadership. Chairs rotate, community voices influence decisions, and leadership is shared rather than centralised. This supports the Strategy's commitment to 'bottom-up' delivery and ensures rural, coastal and underserved communities help shape priorities.
- 6.1.5 RACI also structures the relationship between tiers: insight flows upward from community partners to strategic leaders, while direction flows downward from strategic leaders to delivery teams.
- 6.1.6 RACI plays a central role in the 'Test & Learn' process, enabling transparent decision-making, strengthening fairness and equity in funding decisions:
- ▶ Operational / Delivery Leads are Responsible for reviewing and commissioning pilots
 - ▶ The Strategic Group is Accountable for decisions with major financial or policy impacts
 - ▶ Community and VCS partners are Consulted
 - ▶ Wider delivery partners are Informed
- 6.1.7 RACI is also embedded within the Monitoring, Evaluation & Learning (MEL) framework. The MEL subgroup is Responsible for generating learning and reflective insights. The Strategic Group is Accountable for system-wide interpretation of results and ensuring adaptations are made. Partners are Consulted during learning cycles, and the wider system is Informed through transparent reporting.
- 6.1.8 Overall, RACI ensures that governance is structured, transparent and inclusive. It clarifies where decisions sit, promotes collaboration, reduces duplication and supports continuous improvement.
- 6.1.9 By embedding the model throughout the Strategy and governance, Teignbridge will benefit from strong accountability, community ownership and a well-coordinated delivery system.

6.1.10 Table 5 provides a visual RACI matrix showing how responsibilities, accountability and consultation flows across the Strategic Group and wider system partners for key functions within the Active Wellbeing Strategy.

Table 5: RACI Matrix

Activity	Responsible (R)	Accountable (A)	Consulted (C)	Informed (I)
Action Plan Delivery	Operational / Delivery Leads	Strategic Group	Community & VCS Partners	Wider Partners
Test & Learn Commissioning	Operational / Delivery Leads	Strategic Group	Communities, VCS, PCNs	Wider System
Monitoring, Evaluation & Learning (MEL)	MEL Subgroup	Strategic Group	Operational / Delivery Leads	Public & Stakeholders
Strategic Outcomes & Annual Review	Operational / Delivery Leads (insight input)	Strategic Group	Communities & Advisors	Partners & Residents
Workstream Coordination	Operational / Delivery Leads	Strategic Group	Community Representatives	TDC, Active Devon, Health Partners

Strategic Group = Accountable

6.1.11 Holds overall responsibility, signs off reviews, approves major adjustments.

Operational / Delivery Leads = Responsible

6.1.12 Leads delivery, insight, reporting, MEL work, and Test & Learn.

MEL Subgroup = Responsible / Consulted

6.1.13 Provides technical oversight and supports evidence-led decisions.

Community & CVS partners = Consulted

6.1.14 Their lived experience and feedback underpin adjustments.

Wider system partners = Informed

6.1.15 Receive updates, changes, and learning outputs.

7. Appendix 3 – Action Plan template

Provided as a separate document – “TDC AWS action plan template v1.0.xlsx”.



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