



Oversight and Governance

Chief Executive's Department Plymouth City Council Ballard House Plymouth PLI 3BJ

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CABINET

Monday 08 December 2025 2.00 pm Council House, Plymouth

Members:

Councillor Evans OBE, Chair Councillor Laing, Vice Chair

Councillors Aspinall, Briars-Delve, Dann, Haydon, Lowry, Penberthy, Cresswell and Stephens.

Members are invited to attend the above meeting to consider the items of business overleaf.

This meeting will be webcast and available on-line after the meeting. By entering the Council Chamber, councillors are consenting to being filmed during the meeting and to the use of the recording for the webcast.

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Tracey LeeChief Executive

Cabinet

Agenda

Part I (Public Meeting)

I. Apologies

To receive apologies for absence submitted by Cabinet Members.

2. Declarations of Interest

Cabinet Members will be asked to make any declarations of interest in respect of items on this agenda.

3. Minutes (Pages I - 4)

To sign and confirm as a correct record the minutes of the meeting held on 24 November 2025.

4. Questions from the Public

To receive questions from the public in accordance with the Constitution.

Questions, of no longer than 50 words, can be submitted to the Democratic Support Unit, Plymouth City Council, Ballard House, Plymouth, PLI 3BJ, or email to democraticservices@plymouth.gov.uk. Any questions must be received at least five clear working days before the date of the meeting.

5. Chair's Urgent Business

To receive reports on business which, in the opinion of the Chair, should be brought forward for urgent consideration.

Items for discussion

6. Civic Centre: (Verbal Report)

7. The Director of Public Health Annual Report: The Health (Pages 5 - 38) and Wellbeing of Women in Plymouth:

8. Corporate Plan Monitoring Report Quarter Two: (To Follow)

Items for decision

9. Council Tax Base Setting 2026/27 and Council Tax Support (Pages 39 - 46) Scheme 2026/27:

10. The Food Waste Collection Project: (Pages 47 - 100)

11. Plymouth City-wide All-age Unpaid Carers Strategy 2025 - (Pages 101 - 2027:

12. Plymouth City Council People Strategy: (Pages 161 - 204)

Items for noting

- 13. Leader's Announcements:
- 14. Cabinet Member Updates:
- 15. LGA Update:



Cabinet

Monday 24 November 2025

PRESENT:

Councillor Laing, Vice-Chair in the Chair. Councillors Aspinall, Briars-Delve, Dann, Haydon, Lowry, Penberthy, Cresswell and Stephens.

Apologies for absence: Councillors Evans OBE

The meeting started at 7.30 pm and finished at 7.52 pm.

Note: The full discussion can be viewed on the webcast of the City Council meeting at www.plymouth.gov.uk. At a future meeting, the Council will consider the accuracy of these draft minutes, so they may be subject to change. Please check the minutes of that meeting to confirm whether these minutes have been amended.

56. **Declarations of Interest**

No declarations of interest were made.

57. **Minutes**

The minutes of the meeting held on 10 November 2025 were agreed as an accurate record.

58. Questions from the Public

There were no questions from members of the public.

59. Chair's Urgent Business

There were no items of Chair's urgent business.

60. Plymouth City Council's Local Government Reorganisation Proposal for Devon

Councillor Stephens (Cabinet Member for Strategic Planning and Transport) introduced the item and highlighted:

- a) He was pleased the proposal had received a high level of support from Councillors at Plymouth City Council;
- b) The proposal aimed to deliver authorities that were strong enough to plan strategically with partners, but local enough to deliver services that responded to the needs of every community;
- c) Three key arguments supported the proposal:

- Decisions must be made close to communities, not in distant council chambers and the proposal would protect the culture and identity of all communities across an expanded Plymouth through local decision-making;
- ii. The two-tier system had failed Devonians as it cost too much with many core services in significant difficulty, which had a serious impact on residents;
- iii. Plymouth needed room to grow and develop and benefit from Freeport and Langage opportunities, and to take full advantage of Team Plymouth and the defence dividend.

Councillor Stephens (Cabinet Member for Strategic Planning and Transport) responded to comments made by Councillors at City Council:

- d) Specific issues raised regarding social care, integration skills, education alignment, environmental focus, and financial stability and sustainability were fully reflected in the proposal;
- e) A communication strategy was being developed for the next stage of local government reorganisation (LGR), which was also in response to a recommendation made by the Scrutiny Management Board;
- f) Transport and development issues at Deep Lane could be addressed when a new local plan was prepared, as set out in the proposal;
- g) They were open to further discussions about the possibility of a new town council for Plympton, which could take place as part of the development of neighbourhood networks;
- h) There was a commitment to working collaboratively and the issues raised regarding the importance of parishes, historical identity and the vital necessity of resident engagement, were all reflected in the proposal;
- i) A consultation on all proposals in Devon would be run by the Government and Plymouth City Council (PCC) would be clear in how members of the public would be able to access this;
- j) In response to a query about involving Tavistock in the proposal, and principles of including a wider geography, Tracey Lee (Chief Executive) would be asked under delegated powers to review the options appraisal;
- k) The proposals had always sought to minimise the impact on the National Park and PCC was confident on its ability to work constructively with affected communities, and the National Park Authority, to ensure the proposal worked for all stakeholders.

Tracey Lee (Chief Executive) added:

I) This was a generational opportunity;

- m) PCC had tried to engage with as many people as possible;
- n) There had been a lot of involvement from staff, many of whom lived either within the city, or the 13 surrounding parishes;
- o) PCC had worked with other Councils across Devon, particularly with Exeter and Torbay;
- p) PCC had hosted a data room to ensure consistency in data in propositions;
- q) Subject to an agreement later in the week at Exeter City Council, the proposals would be submitted as one, to minimise any confusion from the public in the upcoming consultation, as they were the same;
- r) Thanked the team who had done a fantastic job working on the proposal, working well with colleagues from across the county.

Councillor Laing (Deputy Leader and Cabinet Member for Children's Social Care, Culture and Communications) added:

s) Thanked the team for getting the proposal to this point and for facilitating important engagement sessions.

During discussion the following points were discussed:

- t) PCC had made the decision to intensify the density of housing in the city centre in order to protect green spaces;
- u) The importance of ensuring decisions remained community-focused and not overly centralised;
- v) Plymouth was made up of small areas that used terminology such as 'the village' because it was made up of places that retained their identity, and the 13 parishes would add to this and community identity would be strengthened;
- w) The 13 parish chairs had all been invited to civic events for 2026/27, if not already invited;
- x) Recognition that the LGR document would need to evolve over time to reflect changing circumstances;
- y) Feedback from parishes and residents had been considered and would continue to inform the proposal;
- z) The significance of the proposal in shaping the future governance of Plymouth and its surrounding areas;
- aa) It was momentous and the submission could be made in confidence that Cabinet believed it was what was right for Plymouth and the 13 parishes they hoped to welcome in the future.

Having considered all relevant information, including the report, the Scrutiny recommendations, the Full Council debate, the alternative options, and the statutory, legal, financial and equalities implications and being satisfied that the decision is reasonable, proportionate, and in the best interests of the Council, Cabinet <u>agreed</u>:

 The "Plymouth City Council's Local Government Reorganisation Proposal for Devon" document as set out in Appendix A and approves its submission to the Secretary of State for Housing, Communities and Local Government;

Reason: To respond to the statutory invitation issued by the Secretary of State for Housing, Communities and Local Government to Plymouth City Council on 05 December 2024 and to comply with the requirement to submit final proposals by 28 November 2025

2. To delegate authority to the Chief Executive, in consultation with the Leader, to make any final changes to the "Plymouth City Council's Proposal for Local Government Reorganisation in Devon" before the deadline for submission;

Reason: To enable the Chief Executive to make any necessary final changes to the City Council's proposal as necessary in order to meet the Government's submission deadline of 28 November 2025;

3. Subject to agreement by Exeter City Council at a meeting of their Executive (Cabinet) on 26 November 2025, this proposal and Exeter's proposal be submitted to the Government as a single proposal comprising a shared Executive Summary and the detailed rationale for the Plymouth and Exeter position as appendices.

Reason: To acknowledge that the Plymouth and Exeter proposals are in essence the same; to streamline the future consultation process; and to send a strong message to Government that the urban centres of Devon are united in their support of the Four Unitary Model.

Cabinet



Date of meeting: 11 November 2025

Title of Report: The Director of Public Health Annual Report: The Health and

Wellbeing of Women in Plymouth

Lead Member: Councillor Mary Aspinall (Cabinet Member for Health and Adult Social

Care)

Lead Strategic Director: Professor Steve Maddern (Director of Public Health)

Author: Professor Steve Maddern

Contact Email: Steve.Maddern@plymouth.gov.uk

Your Reference:

Key Decision: No

Confidentiality: Part I - Official

Purpose of Report

Directors of Public Health have a statutory requirement to write an annual independent report on the health of the communities they serve. In response to the previous Director of Public Health Annual Report which highlighted that women in Plymouth are estimated to have one of the worst healthy life expectancies when compared to other similar areas, this year's report seeks to understand the issue further through exploring the health and wellbeing of women and girls in Plymouth as framed around the four Thrive Plymouth petals: Healthy Body, Healthy Mind, Healthy Places, and Healthy Communities.

The report uses a combination of local data, lived experience, and community insight and considers the many interconnected factors that keep women in Plymouth healthy, or indeed may get in the way of women in Plymouth being healthy. It purposely centres around the voices of underrepresented women in Plymouth, including women veterans, women with learning disabilities and women experiencing multiple disadvantage. Themes within the report include a need for better access to women specific healthcare, the impact of economic wellbeing on women and the influence of trauma and violence on women's mental health.

Recommendations and Reasons

That Cabinet agrees to:

I. Note the content of the Director of Public Health Annual Report

- 2. Consider the final reflections and how they can be supported
- 3. Acknowledge the contributions from women in the city and the organisations who support them
- 4. Commit to considering what more needs to be done to improve the health and wellbeing of women and girls in the city.

Alternative options considered and rejected

- 1. None Under the Health and Social Care Act 2012 there is a statutory duty for:
 - The Director of Public Health to prepare an independent annual report on the health of the communities they serve;
 - The Local authority to publish the report.

Relevance to the Corporate Plan and/or the Plymouth Plan

The Director of Public Health Annual Report makes specific reference to the Plymouth Plan within the context of the city's economic significance and the challenges women in experience in relation to this. The importance of women within the Inclusive Growth pillar of the Plymouth Economic Strategy is also emphasised. Healthy City in the Plymouth Plan also focusses on Plymouth residents having improved health, increased life expectancy, and a better quality of life which is also relevant.

Implications for the Medium Term Financial Plan and Resource Implications: None

Financial Risks

None

Legal Implications

None.

(Provided by Richard Hargreaves)

Under the Health and Social Care Act 2012 there is a statutory duty for:

- The Director of Public Health to prepare an independent annual report on the health of the communities they serve.
- The local authority to publish the report.

Carbon Footprint (Environmental) Implications:

None

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

None known

Appendices

Director of Public Health Annual Report 2025

Ref.	Title of Appendix	Exemption Paragraph Number (if applicable) If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.								
		ı	2	3	4	5	6	7		
Α	The Director of Public Health Annual Report									
В	Cabinet Briefing Report									

Background papers:

Please list all unpublished, background papers relevant to the decision in the table below. Background papers are <u>unpublished</u> works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	Title of any background paper(s) Exemption Paragraph Number (if applicable)						le)
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Sign off:

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Originating Senior Leadership Team member: Professor Steve Maddern											
Please confirm the Strategic Director(s) has agreed the report? Yes											
Date agreed: 08/10/2025											
	•										
Cabinet Member approval: Cllr Mary Aspinall [approved by email]											
Date a	nnroved	- Date 0	8/10/202	5							

^{*}Add rows as required to box below



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CABINET BRIEFING REPORT

The Director of Public Health Annual Report 2025: The Health and Wellbeing of Women in Plymouth



I. EXECUTIVE SUMMARY

Directors of Public Health have a statutory requirement to write an independent annual report on the health of the communities they serve. This year's annual explores key areas for women and girls' health in Plymouth as framed around the Thrive Plymouth Petals of Healthy Body, Health Mind, Healthy Places and Health Communities. The report considers the wider determinants of health rather than traditional aspects such women's reproductive health which is often focussed on.

The report has been informed by a combination of routinely collected data (intelligence) such as that held by the Office of National Statistics, alongside locally held feedback and information (insight). The biannual School Health Related Behaviour Survey for example, provides unique insight in the experiences of girls in Plymouth. Local organisations have contributed significantly to the report through sharing their ideas on what keeps women healthy in Plymouth and what might get in the way of women keeping healthy in Plymouth. This has been done with a particular emphasis on those Plymouth women, who are often underrepresented or hidden through collecting their lived experiences and voices.

2. BACKGROUND

In the 2024 Director of Public Health annual report, women in Plymouth were highlighted to have one of the worst healthy life expectancies, when compared to women in similar areas, despite having the highest-ranking overall life expectancy. Although women in the UK on average live longer than men, women spend a significantly greater proportion of their lives in ill health and disability and less time in 'good health', when compared with men.

3. KEY FACTS

- 134,784 women live in Plymouth.
- I in 10 women are from a minoritised ethnic group.
- Almost I in 4 women in Plymouth (23.4%) are considered 'disabled under the Equality
 Act' (31,885 women and girls). This is significantly higher than the England average of
 18.7%.
- Women in Plymouth can only expect to live **67.6**% of their lives in 'good health'. This compares to the England average of **74.5**%.

- The top three causes of death for Plymouth women are: cancer, dementia, and chronic lower respiratory disease.
- In 2023, **157** Plymouth women aged under-75 years died from causes considered preventable. This equates to **13** women each month.
- 1,330 young women in Plymouth are not in work or education compared to 1055 young men.
- **36,000** Plymouth women are likely to be subjected to at least one form of harassment in a year.

4. SUMMARY

Women and girls face several structural and cultural challenges, many of which may not be unique to Plymouth. Themes specific to Plymouth within the report include

- A need for better access to women specific healthcare, this includes better access to the HPV vaccine for girls in Plymouth and further focus on the direct and indirect harms of alcohol.
- 2. The benefits and challenges women experience from living in a coastal community. Blue and green spaces are valued by women in Plymouth, but access can be a challenge for some groups.
- 3. The impact of work, health and economic wellbeing on women in Plymouth, who not only earn less than men in the city on average, but also less than women in other areas when compared nationally.
- 4. The influence of trauma and violence on women's mental health and the importance of continuing to listen to the experiences of groups with least representation.

5. RECOMMENDATIONS

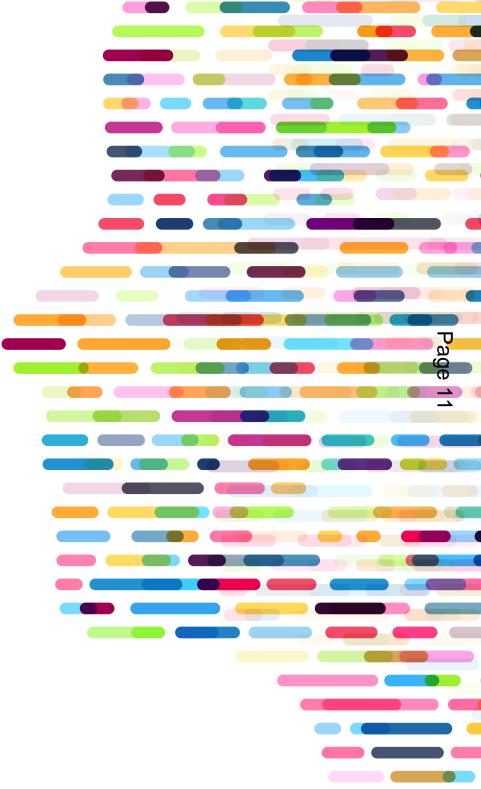
- Note the content of the Director of Public Health Annual Report
- Consider the final reflections and how they can be supported
- Acknowledge the contributions from women in the city and the organisations who support them
- Commit to considering what more needs to be done to improve the health and wellbeing
 of women and girls in the city.

THE HEALTH AND WELLBEING OF WOMEN IN PLYMOUTH

Director of Public Health Annual Report 2025







Foreword

Women in the UK on average live longer than men, although women spend a significantly greater proportion of their lives in ill health and disability when compared with men.

In the previous Director of Public Health annual report, women in Plymouth were highlighted to have one of the worst healthy life expectancies — an estimate of the years spent in good health- when compared to women in similar areas, despite having the highest-ranking overall life expectancy.

It is of great concern that women in Plymouth are spending a greater amount of time in poor health.

In this report, although we look in detail at the exact illnesses that people develop, the reasons for women in Plymouth having more years in poor health is likely to be complex, and made up of many factors.

Good health is about far more than our access to healthcare, and is linked to factors that we refer to as 'the wider determinants of health'; where we live, how much income we have, how easy it is to access green spaces, whether we feel safe and seen in our communities and many other factors.

In my first Annual Report as the Director of Public Health for Plymouth, I wanted to explore some of the factors that could be important, and to understand some of the experiences of women living in Plymouth.

Thrive Plymouth is the city's approach to tackling health inequalities and supporting the holistic wellbeing of residents, led by Plymouth City Council. It was re-launched in November 2024 with a framework built upon four petals: Healthy Body, Healthy Mind, Healthy Places, and Healthy Communities. This report is framed around the four petals and acknowledges that the wellbeing of women and girls is much broader than more traditional aspects of women's health such as pregnancy and reproductive health, which do not predominantly feature.

This report has been informed by a combination of routinely collected data, alongside local feedback and insight. Quite a lot of routinely collected, population level data does not differentiate men and women; in fact, much of our understanding of diseases and treatments has been based on studies on males, and

as such there is a general lack of sex specific data concerning women and their outcomes. Given these challenges, local organisations have been sharing their ideas on what keeps women healthy in Plymouth and what might get in the way of women keeping healthy in Plymouth. Most importantly, they have also been able to gather and share the experiences and stories of Plymouth women, with a particular emphasis on those women often who are underrepresented or hidden.

Through this report, I hope to challenge each one of us to consider what more could be done to work together to improve the wellbeing of girls and women, and through that to lead to a reduction in the number of women struggling with poor health at an early age.

It is with special thanks that I acknowledge the 27 women who contributed to the Listening Circles facilitated by the Changing Futures Peer Research Team at Improving Lives Plymouth.

Professor Steve Maddern

Director of Public Health, Plymouth

For the purpose of this report, the term woman is used to refer to the health of people who were registered as female on their birth certificate; this may include trans men and some non-binary people.

Introduction

When women and girls in Plymouth have **healthy bodies**, they will grow up and age well, enabling a better and longer quality of life. The concept of a 'healthy body' for the purpose of this report focuses on:

- Women and girls' lifestyle
- Cancer screening, and vaccination
- Gender specific conditions, impacting on women and girls

Having a **healthy mind** is profoundly important for women and girls in Plymouth as it directly impacts their overall quality of life, resilience, and ability to thrive across all aspects of their lives. The concept of a 'healthy mind' for the purpose of this report focuses on:

- The mental health of women and girls
- The impact of violence on women and girls
- The impact of mental health on women experiencing multiple disadvantage

When women and girls in Plymouth have access

to **healthy places**, they live in environments and circumstances that are supportive of health, and they have the access to the resources and services they need to thrive throughout their lives. The concept of healthy places for the purpose of this report focuses on:

- The impact of living in in a coastal community
- Access to money and resources
- The importance of creating safe physical spaces.

A core principle of Thrive Plymouth is to be human-centred and trauma-informed, putting the voice of people and their lived experience at the centre of work that takes place. The concept of **healthy communities** for the purposes of this report therefore focusses on ensuring that the voices of Plymouth's women are heard through the stories and experiences of:

- Women veterans
- Women with learning disabilities
- Women with long-term health conditions who have experienced multiple disadvantage.



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The health of Plymouth women: key facts

134,784

I in 10

women are from a minoritised ethnic group.

One in five women in Plymouth (23.4%) are considered 'disabled under the Equality Act' (31,885 women and girls). This is significantly higher than the England average of 18.7%.

Women in Plymouth can only expect to live 67.6% of their lives in 'good health'. This compares to the England average of 74.5%.

The number of years spent in good health from birth has reduced in recent years for women in Plymouth. Between 2016-2018 and 2021-2023 women in Plymouth have lost 5.5 years spent in good health, going from being very similar to the England average to below.

Plymouth is **82.4 years**

living in Plymouth 55.7 years (for England as a

This means that, compared

a longer life expectancy they are more likely to live longer in poor health.

36.000 Plymouth women are likely to be subjected to at least one form of harassment in a year.

In 2023, 157 Plymouth women aged under-75 years died from causes considered preventable. This equates to 13 women each month.

The top three causes of Years Lived with Disability for Plymouth women

- lower back pain,
- major depression, and
- migraine.

The top three causes of death for Plymouth women are:

- cancer.
- dementia, and
- chronic lower respiratory disease.

The three-year cancer mortality rate for women in Plymouth is 232 per 100,000, which is significantly worse than the national average of 211 per 100,000.

2,321 Plymouth women aged 65 and over are estimated to have dementia.

80% of women employed in Plymouth earn less than £38,000. They have a 50:50

19.5% compared to 18.9%

The top three <u>risk</u> factors making the largest contribution to deaths in Plymouth women are:

- high blood pressure,
- smoking, and
- high fasting plasma glucose.

1,330 young women in Plymouth are not in work or education compared to 1055 young men.

Taking a Thrive Plymouth approach

In this section we take a closer look into the factors that can impact on women's health and wellbeing in Plymouth.

HEALTHY BODY

Women and girls' lifestyle

Factors to do with lifestyle can profoundly effect women and girls' risk of developing chronic conditions, impacting her future health and life expectancy. Risk factors include smoking, poor diet, excess alcohol and physical inactivity. It is important to realise that these risk factors are often strongly influenced by factors that are not within our control, and they are not simply 'choices'.

Smoking

■ 15.7 % of women in Plymouth smoke, compared to 9.9% of women in England.

Diet

- Nationally, although the prevalence of overweight (including obesity) in adults is higher among men (69.7%) than women (59.2%), the
 - Access to good
 quality fresh food
 gets in the way of women
 having a healthy body. Lots of
 deprived areas are not well
 served, relying on convenience
 stores. Thrive Plymouth
 Network Member

- prevalence of obesity in adults is higher among women (26.9%) than men (26.2%).
- Evidence suggests both that food insecurity leads to poor heath and that poor health precipitates food insecurity. This is particularly relevant for women who are more likely to have overweight or obesity in relation to being food insecure.
- Only **30.8%** of adults in Plymouth eat the recommended '5-a-day' (similar to England 31.3%),
- Only 14% girls in Plymouth report that they eat the recommended 'five-a-day', almost one quarter (24%) reported that they had nothing to eat or drink before lessons that morning

Alcohol

- Nationally, young women aged 16 to 24 years are more likely to have 'drunk alcohol on five or more days in the past week' than young men (7% vs 3%).
- In Plymouth, **nearly half** of girls who had drunk alcohol in the last seven days reported being drunk the previous weekend compared to **one** in three boys.

- Women in Plymouth are also more likely to be impacted by indirect harms of male alcohol consumption. An analysis of domestic homicide reviews found that reports of alcohol-related assaults involving partners or ex-partners were significantly higher for women (20%) than men (2%).
- Young women and girls in Plymouth feel that violence is often fuelled by alcohol and worse in areas with a night-time economy including the City Centre and Barbican.

Physical activity

- **20.2%** of adults in the city do less than 30 minutes of exercise a week (similar to England's average of 22.0%).
- We know that <u>women are often less active than</u> <u>men</u> (nationally 20.5% of males and 23.2% of females are 'inactive').
- 57% of girls in Plymouth tell us that they enjoy physical activity 'quite a lot'/'a lot', compared to 81% of males.

Its lovely getting out
and about in the summer
but I do not like exercising
alone of a dark evening,
Thrive Plymouth
Network Member

Cancer screening and vaccination

Access to screening and vaccination is an important element of women and girls having a healthy body. It supports early detection of cancer and can prevent women from dying too early. Cancer affects women not only through gender differences in the diagnosis and treatment of general conditions, but also through conditions specific to women, like ovarian, uterine, cervical, vulval, and vaginal cancers.

Breast cancer

- About <u>one in eight</u> women in the UK will be diagnosed with breast cancer during their lifetime.
- In Plymouth, the incidence rate of breast cancer is not significantly different to England averages.
- The NHS Breast Screening Programme has been estimated to save around 1,300 lives each year in the UK. Figures show however that more than four in ten women don't act on their breast screening invitation.
- 73.5% eligible women in Plymouth have had a breast screen in the last three years, in line with national average levels of coverage. Over the last five years the proportion of eligible women in Plymouth having a breast screen has not significantly changed.

Cervical cancer

- <u>I in I42</u> females in the UK will be diagnosed with cervical cancer in their lifetime.
- It is estimated that cervical screening saves approximately <u>5,000</u> lives per year in England.
- Nationally, up to a <u>third</u> of women do not take up the offer of a screen.
- In Plymouth, the proportion of eligible Plymouth women having a cervical screen has been **decreasing**, a trend that has also been seen nationally. **66.7%** of 25 to 49 year old women and **74%** of 50 to 64 year old women have had a cervical screen in the last 3.5 years (both in line with national average levels of coverage).
- The HPV vaccination reduces the chances of getting the human papillomavirus (HPV). Most types of HPV are harmless, but some are linked to increased risk of cervical cancers.
- Only **66.4%** of girls aged 12 to 13 years old in Plymouth have had the HPV vaccine. This is **worse than** national average of 72.9%

'I mean, prevention
is, it's a hard one isn't
it, particularly when lots of
people have got incredibly busy,
complicated lives, when you know,
you don't think there's anything
wrong'.

Plymouth Cancer Champion 'We go through ill health, sometimes on our own, or we, you know, we choose to because we are stoic women who, you know, we look after other people. So, you know, we don't always put ourselves first.' Plymouth Cancer Champion

important for women's
voices to be heard as well,
because I can give an example of
a health care appointment. One of the
questions they ask you before you go in is
what would you prefer? Male or female? And
I said I prefer female, please. So they put that
on my notes, and when I turned up, they were
male. yeah. And you know, you don't want
to make a fuss of it's got to be done
but why ask me if you're not gonna
do it.' Plymouth Cancer
Champion

Plymouth Cancer Champions is a three-year project, funded by Macmillan Cancer Support and hosted by Zebra Collective in close collaboration with community partners Age UK Plymouth and the Wolseley Trust Social Prescribing team. The project is following a community development model, with a particular focus on addressing inequitable cancer outcomes across the city, focusing on low-income areas of Plymouth, minoritised ethnic groups and people aged over 50. One of its key elements is working with local communities to provide insights into the barriers that women, and other members of the Plymouth community, may face in accessing cancer services. They recently told us:

- Many women report opening screening invitation letters but taking no further action. In some cases, this is due to being too busy to respond immediately; in others, the letter is set aside and subsequently forgotten'.
- All genders but especially women, have difficulties with securing GP appointments. The limited times available to contact a GP surgery, typically between 8:00 and 8:30 am, coincides with a particularly busy period for many individuals who are preparing for work or getting children ready for school.
- Many individuals, but especially women reported avoiding cancer screenings and other health care appointments due to feelings of embarrassment, anxiety, or fear.

More information about the Plymouth Cancer Champions Project is available **HERE**

Gender specific conditions impacting on women and girls

Gynaecological and menstrual issues impact on women and girls and can significantly affect their ability to stay in the workforce, which can in turn exasperate gender inequalities. Many women who experience these issues also feel that their concerns are overlooked and trivialised by those they seek help from.

Gynaecology

Nationally, some women report difficulty getting a diagnosis of a gynaecological condition. About **I in I0** women in the UK have **endometriosis**, yet from the onset of symptoms it takes on average nearly **nine years** for a diagnosis.

As of May 2025, there are **3,915** women waiting for gynaecology treatment (under the 18-week referral to treatment pathway) with University Hospitals Plymouth. Of those, **42%** have been waiting fewer than **18 weeks. Half** of women waiting for treatment started their treatment within **21.6 weeks** whilst **6%** have been waiting **more than a year** for treatment. **2,524** of the women waiting, live in Plymouth.

General Practice is often the first port of call for women who need support with their health. GP's have an important role in helping women access important treatment options such as contraception, pre-conception advice and screening, and menopause management.

Women in Plymouth have told us that that they prefer to see their GP for contraception and to get advice about their contraception options. Whilst published data demonstrates that women in Plymouth have more prescribed activity for all forms of contraception from their GP when compared to the national averages, women have also told us they want better access to appointments, including evening and weekend appointments.

Menopause

Menopause usually occurs between the ages of 45 and 55 and can affect women physically and psychologically.

67% of working women in the UK aged 40 to 60 report menopause symptoms have had a **mostly negative** impact on them at work.

Local Engagement on the topic of **Menopause and Worklessness** has revealed that **I0% of women** have stopped working entirely during their perimenopausal years and a further **20% reduced their working hours**

Women in Plymouth have told us that navigating the health system often feels exhausting and risky, with medication shortages and poor menopause support

being major concerns.

'.. as a woman,
we're not heard, we're
not listened to. Nobody's
learning from our conditions.
So we're not moving forward with
menopause, etcetera, because no
one's learning from women, even
women.' Plymouth Trauma
Informed Network

In Plymouth, as part of our listening activities we have heard that a significant concern for women in Plymouth is the difficulty they face when accessing GP appointments and specialist services for menopause advice or coil fitting, with long waiting times reported. Women, including women of colour have told us about their struggles related to lack of employment and immigration, multiple health issues and then difficulty seeing a GP. Some women even report having to travel to London for gynaecological treatment and support because they cannot get appointments in Plymouth. A major recurring theme from women in Plymouth is that they do not feel listened to, or heard by healthcare providers. **Plymouth Community Builders**

'The people are great and professional, but it is not easy to get an appointment' Plymouth City Council Contraception
Survey

'Taking time off to get the pill isn't ideal' Plymouth City Council Contraception Survey

It's a rare clinician who actually listens and is able to deal with your request because I think a lot of us know what we need, and we ask for it and we get denied dismissed or gas lit. Plymouth Trauma Informed Network

Why does
everything have to
be a fight? Changing
Futures Listening
Circle

"A high proportion of women, often in their 40s and 50s are presenting to general practice with depression, anxiety, chronic pain, word finding I memory difficulties, fatigue (often diagnosed as fibromyalgia) and difficulties at work. In many cases, these women may have no idea they are going through hormonal transition, as the only widely recognised symptom of menopause continues to be the "hot flush." This lack of knowledge, coupled with gaps in GP provision, stigma, and a lack of employer support, is contributing to avoidable health inequalities, loss of income, and social isolation for women across Plymouth." Dr Sarah Jarvis

My chemist
helped me – they had
more time and explained
to me the interactions my new
prescription would have with have
with the other meds I take – my
GP hadn't had time to mention
that to me'. Changing
Futures Listening
Circle

In September 2023, through funding from the Department of Health and Social Care, NHS **Devon Integrated Care Board** invested in the development and implementation of a dedicated menopause pathway. As part of the national Women's Health Strategy, which highlights a key aim that "every woman has access to the care and support they need during the menopause and is supported to fulfil their potential though this stage of life". This investment has supported a comprehensive package of clinical education and training for GPs across the region, aimed at building confidence and capacity within primary care to better respond to the needs of women experiencing perimenopause and menopause. For Plymouth to date, six of the seven Primary Care Networks (PCNs) and 12 out of 22 practices have engaged with the training offer. The goal is to ensure that more women can access timely, informed, and appropriate menopause care through their local GP. Looking ahead, the continued engagement and insight from this valuable work will be critical to informing and facilitating future service design that meets the everevolving needs of all women.

HEALTHY MIND

The mental health of women and girls

Mental health is intrinsic to well-being, learning, working, having the capacity to cope with stresses of life, and enabling people to contribute to their community. Mental health conditions are not evenly distributed by sex. Women are more likely than men to face common mental health issues.

Nationally, around **one in five** women are currently dealing with mental illness. Women report higher rates of Post Traumactic Stress Disorder (PTSD), self-harm, suicidal ideation, eating disorders. **26%** of young women are currently experiencing a common mental health condition, nearly three times the rate of that in young men.

In Plymouth, 15.9% of all adults have a diagnosis of depression (higher than the national average of 13.2%), and 25.4% report high levels of anxiety (compared to 23.3% nationally).

19,774 of Plymouth women are estimated to experience common mental health problems. **46% of girls in Plymouth** worry about their mental health.

Many women encounter additional vulnerabilities during significant life stages, such as the perinatal period, perimenopause, and menopause. It is estimated that **27% of of pregnant women in Plymouth** may go on to experience mental health problems in their perinatal period

Many women also experience extra challenges, through their role as mothers and caregivers, which they are more likely to encounter compared to men. In Plymouth, the majority of people not in work due to caring responsibilities are women. Living in poverty and experiencing material deprivation can significantly increase the of poor mental health outcomes, creating a cycle of stress through which limited access to resources, and compounded vulnerabilities for women, can severely impact their overall health and wellbeing

Women in Plymouth are more likely to have a low 'happiness' score compared to men (15.5% vs. 13.2%). Conversely, they are more likely to report that the things they do in life and very 'worthwhile' compared to men (25.9% vs. 22.1%).

41% of girls in Plymouth feel in control of what happens in life but only **19%** feel in control of their health.

In young people, **body dissatisfaction** has been linked to <u>risk-taking behaviours</u> and mental health problems such as <u>depressive symptoms</u> and <u>anxiety disorders</u>. **57% of girls** in Plymouth 'would like to lose weight' compared to **34% of boys** whilst **42% of girls** 'don't like' or 'hate' the way they look' compared to **23% of boys**.

Life's difficult... the menopause, that's a critical one. There's ageing. That's another one. There's early 20s, that's very difficult, entering a relationship having children. You know, there's significant parts in our life that we just deal with as women. Plymouth Trauma Informed Network

The issues are getting
younger and younger as a
primary teacher, I see it in very
young children now. This expression
of feeling bad about body image, other
children commenting on body image
negatively. It's horrifying to be honest. You
see girls more than boys looking negatively
about their image, but often the
boys are commenting on the girls.
Plymouth Trauma Informed
Network

Women carry stress in their bodies. As children being told to shut up, or that they are too loud as teenagers when they have to cope with a sexualised world as young women - often childbearing, often not, ..as older women who start to develop serious health conditions through stress.. Plymouth Trauma Informed Network



Self-harm and suicide

Self-harm is an expression of personal distress and there are varied reasons for a person to harm themselves irrespective of the purpose of the act.

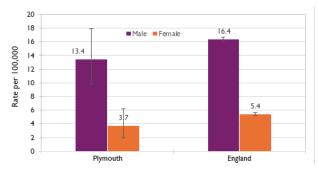
Nationally, women aged 16 to 24-year-old are at particular risk with 31.7% having reported self-harming at some point, compared to 15.4% of men the same age.

There is a known 'gender paradox' where women are more likely to attempt suicide or have suicidal thoughts compared to men.

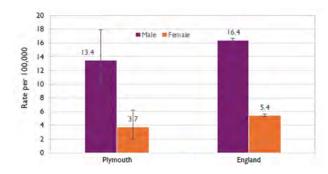
Whilst Plymouth has rates of self-harm* admissions and suicides that are similar to the England average for both sexes, **women in Plymouth** (and England) have significantly higher rates of hospital admissions for intentional self-harm than men, but significantly lower suicide rates.

*Self-harm data does not include patients who attend the Emergency Department and were not admitted, nor patients who were not seen by a medial professional.

Emergency hospital admissions for intentional self-harm (DSR per 100,000), 2023/24



Suicide rate (DSR per 100,000), 2021-23



'There's a lot of support for mental health out there, but a lot of people don't know about it sometimes. It's not about having it all, but knowing how to keep yourself well" Helping Hands Plymouth



The impact of violence on women and girls

Violence can affect anyone, but it does not affect people and communities equally. Violence is highly gendered with men committing the majority of violent crime. The reasons for this are complex and are driven by societal factors including gender inequalities, gender stereotyping, and harmful norms about masculinity. In 2024, the National Police Chiefs' Council (NPCC) and the College of Policing said that violence against women and girls is a "national emergency". The term VAWG (violence against women and girls), covers a range of crimes that have been identified as being committed primarily, but not exclusively by men against women.

Nationally I in I2 women report that they have experienced VAWG. Over one million VAWG related crimes were recorded by the police in 2022/23 or 3,000 offences each day. It should also be noted that many crimes go unreported, with barriers to reporting being particularly pertinent in relation to minoritised communities.

In Plymouth over one year:

- One in eight women will experience VAWG.
- 5,000 domestic abuse (approximately 21% of all crime) and 3,000 stalking and harassment crimes are reported.
- 1,000 sexual offences occur.

Violence against women and girls is a <u>determinant</u> <u>of health</u> with significant impacts on both physical and mental well-being of victims and the wider community.

The Plymouth City Council Violence Against Women and Girls Survey 2022 found that **89%** of respondents agreed that violence against women and girls was a problem and **60%** felt it happened more often now compared to five years ago.

Girls and young women in Plymouth also described their experiences of school feeling unsafe and feeling 'preyed on' by male teachers and students.

Although 11% of girls and boys in Plymouth experience violence in their home, **boys** in Plymouth are **twice as likely** to have been the victim of violence or aggression in the area they live, 12% compared to 6% of girls.

A review of a small sample of victim statements from Plymouth, highlights the profound effect that sexual and domestic abuse can have. Long-term impacts include being unable to work, health problems, and psychological issues including depression, anxiety and low self-esteem. Many victims lived in fear, were afraid to go out, and felt 'hopeless'.

The link between Violence Against Women and Girls and Online Safety is a growing and significant area of concern, with digital and online technologies increasingly playing a role in serious violence and exploitation, as well as online abuse, harassment, and cyberbullying.

Nationally, girls are more likely than boys to encounter harmful online content and more likely to experience unwelcome friend requests and targeted harassment.

Similarly, **girls in Plymouth** are more likely than boys to report harmful experiences related to online safety:

- 21% of girls report that they have experienced online bullying compared to 13% of boys
- 16% of girls report seeing images, videos, or games with violence that they found upsetting, compared to 10% of boys
- 13% of boys report using the internet for finding sexually explicit images, videos, or games, compared to 2% for girls
- 22% of girls report that someone they'd met online wanted to meet them compared to 12% of boys

The Plymouth VAWG Commission published a report in 2022 with a series of recommendations, which are being taken forward by Safer Plymouth and Plymouth's Domestic Abuse and Sexual Violence (DASV) Strategic Partnership. Both Boards seek to prevent and address all VAWG via a coordinated community response. This includes prevention and early intervention focussed on creating positive culture change that stops male violence against women and girls. You can read more about Plymouth's VAWG Strategy here.

The impact of mental health on women experiencing multiple disadvantage

Multiple disadvantage refers to women who experience multiple challenges, including homelessness, substance use, mental health issues, domestic abuse, and contact with the criminal justice system. Many women in this situation often face additional barriers to accessing health and social care due to distrust in "professionals" based on past experiences. Women experiencing homelessness for example, often have a history of traumatic life events, including violence and abuse, and are at a greater risk of mental ill-health. These women may frequently suffer from co-occurring physical and mental health problems and substance use issues.

A recent report from Healthwatch Plymouth sheds light on the mental health challenges faced by women in Plymouth who have experienced multiple disadvantages.

Mental health, yeah,
it's terrible, ...definitely
...it's so bad, trying to get the
help, trying to get the help, ...you
can't see a doctor. That stops people
being healthy. I think it's everywhere...
and I should be getting the help, not
just, try this, try that, or just up
your pills. And it's like, no, I need
help. Helping Hands
Plymouth

"Our Stories, Our Voices: The Power of Lived Experience" with Gifted Women and Healthwatch Plymouth

Key findings and observations from the report regarding the mental health of women in Plymouth include:

- Complexity of need: Women experiencing multiple disadvantages often have complex mental health needs that are difficult to communicate within the typical constraints of a ten-minute primary care appointment.
- Impact of trauma: Many of these women have experienced trauma, which often underlies their multiple disadvantage, including mental ill health. The report notes that not all GP practices are trauma-informed, suggesting a gap in care that could be addressed by utilising trauma training from the Trauma Informed Plymouth Network.
- Lack of holistic understanding: There is a perceived need for healthcare providers to understand their, 'mental, physical and emotional health', holistically. Women feel that providers should listen to patient/service users' story properly, because, 'we know our bodies.' The absence of a shared patient record system means women report that they repeatedly have to recount their complex stories, which can be overwhelming.
- **Medication concerns:** Participants expressed a desire for providers to, 'stop pumping people full of medication for mental health' and to consider non-pharmaceutical solutions. They also highlighted a concern about patients with a history of addiction being prescribed addictive medication in primary care.
- **Need for intermediaries:** Women identified a crucial need for an intermediary who can understand their full needs and then liaise with health and social care services on their behalf.
- Positive impact of compassionate care: When health professionals went 'above and beyond' for an individual, it significantly improved the experience beyond just resolving the immediate problem. Some positive examples included praise for Sexual Health in Plymouth (SHiP) for being clean, helpful, and easy to access, and 'Navy Doctors' at Derriford Hospital for being 'excellent, thorough, and 'caring.'

For more information, you can read the full report **HERE**

HEALTHY PLACES

The impact of living in a coastal community

Plymouth, as Britain's Ocean City, is deeply intertwined with its maritime identity and heritage. The city covers 30 miles of waterfront, including 9.3 miles of the South West coastal path, and is home to western Europe's largest naval base, a commercial ferry port, a substantial fishing industry, and is a major global centre for marine research and production.

Despite being one of the largest cities on the south coast of England and the most significant economic centre in the South West Peninsula, Plymouth's identity as a coastal community may also mean that women could be impacted by wider resource limitations, and a weaker infrastructure when compared women living in more 'inland' areas.

Coastal areas for instance, are more likely to have <u>poor transport connections</u>, which will disproportionately impact on women and girls their ability to access health care, <u>education and training</u> or employment opportunities.

A comprehensive report written by the Chief Medical

Officer in 2021, and informed significantly by work carried out at the University of Plymouth, showed that coastal areas tend to experience;

- a higher burden of heart disease, diabetes, cancer, mental health and Chronic Obstructive Pulmonary Disease
- a significantly lower life expectancy
- health service standards, indicators and emergency admissions which suggest that healthcare plays a part
- lower participation in Higher Education, as well as higher rates of hospital admissions for young people with 'health-risking behaviour'.

In contrast, however, the report also showed that living by the sea, with the benefits of green and blue spaces, can produce health and wellbeing benefits; the challenge is to maximise these benefits, and lessen the negative impacts.

It always comes
up about access to
transport in terms of being able
to get anywhere.. it's too difficult to
get anywhere because of lack of buses
and appropriate bus routes. But equally
yeah, we're a very hilly area. And so some,
particularly those that have got, you know, sort
of some health conditions, find it incredibly
difficult to get very far because of the
hills, which means if there's not a bus
route nearby, they just don't go.'

Plymouth Community

Builders

A significant issue has been identified for young parents in Plymouth, who are mostly women, and need to access childcare to be able to attend college or work.

If childcare
was not available
very near their college
or workplace, they could
face a 'marathon' journey with
a young child to first go to the
childcare provider, then to go
on to start their day. EET
HNA Plymouth City
Council

A lack of appropriate bus routes and the cost of journeys have also been identified as preventing women in Plymouth from attending health care appointments, particularly for those with children or disabilities.

The well documented extent of poverty, deprivation and inequality that exists in Plymouth, may well be exacerbated by factors associated with being a coastal community, yet there is still much to learn. Although there is lack of research and limited data on the issues that women and girls from coastal city's experience, women told us about the many things they like about living in Plymouth, including the health and wellbeing benefits that living in a coastal city provides.

We're a port, a naval port and we were bombed so heavily in the war that it brought people together, brought everybody in Plymouth to work as one and come together. Plymouth Community Builders

When I swim
in the sea, what
I look around at is lots
and lots of cellulite.Wobbly.
Fantastic, Awesome, courageous,
vulnerable, magnificent women.
That's what I see. And I find that
so empowering. Plymouth
Trauma Informed
Network

I love that as soon as it's dry, the Hoe is full and the sea is populated Plymouth Trauma Informed Network

I'm living in
Devonport. I love it...
It's brilliant and it's a real
community feel. I sat in the
park today for the first time and
six people said hello to me!
Plymouth Community
Builders

Where I lived before, I knew no more than five people and I moved to Plymouth and within a week I saw this café, I walked in and I met everyone and I loved it. I've been here one and a half years now I know about 100 people. Here I find people so helpful. I walk on the street and people are always saying hello to me. Elsewhere, the same people would walk past you.

Helping Hands

Lots of green
space and access to
water is good for mental
health and wellbeing
Thrive Plymouth
Network

Women and girls' access to money and resources

Having sufficient income is crucial for maintaining good health throughout life. Everyone needs a certain level of income to afford the basics for a healthy life, such as food and quality housing. People with lower incomes are more likely to report their health as 'bad or 'very bad'. Access to money and resources can therefore profoundly influence the physical, emotional and social health and wellbeing of women and girls.

Nationally, a significant proportion of employed women (36%) work part-time, contrasting with 14% of men. Women are more likely than men to have caring responsibilities and therefore will need to find employment that allows them to care. This sees more women in part-time work which is more likely to be low paid than full time work. Research shows caring responsibilities are a significant contributing factor to women's poverty.

Plymouth is already considered a **low wage economy**, with its workers receiving £553 weekly compared to £642 nationally. **Inclusive Growth** is a pillar of The **Plymouth Economic Strategy** and

work is already underway to try to better understand the shape of Plymouth's economy and what makes it different to elsewhere. **Women in Plymouth** face significant economic challenges when compared not only to men in the city, but also women in the rest of England. They are more likely to work than the national average, but earn less for it.

- Women in Plymouth earn £4 less per hour on average than men in Plymouth.
- Women in Plymouth earn **21% less** than men in Plymouth.

Local analysis shows that when we compare women in Plymouth who are already on a low income, those that live alone or as a single parent are also:

- More likely than men in the same circumstances to be living below the poverty line (in relative poverty)
- More likely than men in the same circumstances to be living in fuel poverty

Jobs routinely undertaken by women, are necessary for the functioning of society and enabling the employment of other workers but are consistently underpaid and undervalued.

- In Plymouth: **male** dominated sectors including manufacturing, construction, public administration and defence have **high** average weekly wages.
- In Plymouth: **female** dominated sectors including education and health and social care, have some of the **lowest** average weekly earnings.

The city-wide Economic Strategy has committed to supporting more women and girls in city into work by:

- Supporting the childcare strategy and promote flexible working practices.
- Consider caring facilities when looking at new employment spaces.
- Working with businesses to address the gender pay gap and to reduce violence and abuse against women and girls that is often caused by financial insecurity.
- Ensure that there is visibility of good practice in the city.

Gifted Women supports women in Plymouth who are facing multiple disadvantage by providing a traumainformed employability and empowerment programme. They provide:

- A 12-week employability course
- one-to-one support for barriers to work
- Weekly social and employability drop-ins
- Work experience placements
- Peer mentor training
- A Lived Experience Advisory Board

Of 50 women supported in one year

- 88% completed the employability course
- 26% gained paid employment
- 71% felt more ready for work
- 89% reported increased confidence
- 82% felt more hopeful for the future

More information about the Gifted Women Programme is available HERE

Gifted Women Jen - Jen was referred to Gifted Women by a women's refuge, where she was seeking safety after fleeing an abusive relationship. She experienced alcohol addiction and was trying to remain sober, but was in very early recovery. Jen had always worked and loved working, until her life fell apart due to abuse and addiction. Her dream was to work in retail, as she loved the idea of serving customers and helping people find what they need.

Jen completed the 12-week employability course, and part way through was offered her own flat. Gifted Women supported her with funding arranged through a local rotary club to furnish her new flat. Jen had a 'wobble' at this point with the change in circumstances and her new-found freedom and independence. She had a lapse in her sobriety, but after some support and accommodations, she managed to stay on the course.

After completing the course, Jen did a work experience placement at a golf club, working in the café. After just one week, they offered her paid shifts and soon gave her a contract. She enjoyed the job but remained focused on retail. She progressed into a job she secured on her own at a local retailer. Her long-term goal was Aldi.

"Just wanted to let you know I have been offered a job at Aldi! So happy! Couldn't have done it without Gifted Women. I did all the steps to apply myself including filming myself for a video interview. I got all the skills from Gifted Women. Also, I'm 1.5 years sober this month!"

Gifted Women Emily - Emily was referred to Gifted Women when she had been experiencing severe mental illness and other disadvantage. Emily was not able to go into Plymouth when she started, or access public transport, which left her very isolated. For the first few sessions, a Peer Mentor accompanied Emily on the bus to Gifted Women until she became confident using buses on her own. Emily had never worked before.

Emily completed the 12-week employability course and then went on to do a course to become a Teaching Assistant. She completed a voluntary work placement supporting teachers in a primary school setting. After six months of volunteering, Emily was offered a job there as a Meal Time Assistant. She has been in this paid position for six months now and until recently, she was still volunteering in the classroom too. She has stopped that now as she intends to apply for Teaching Assistant jobs in the same school.

"I have completed my first term of paid work. The teacher gave me these chocolates and flowers as a thank you."

The importance of creating safe physical spaces

Creating safe physical spaces is of paramount importance for women and their physical health, mental well-being and overall quality of life.

'You have to feel safe in your mind and you can only feel safe in your mind if you've got a safe geographical environment to walk through without threat of being attacked and being a disabled woman it's like you're just this target.' Plymouth Trauma Informed Network

Trevi is an award-winning charity based in Plymouth supporting women across the following main areas of work:

- Specialist, CQC-regulated and Ofsted-registered residential family centre providing comprehensive parenting assessments for mothers with substance use histories, often rooted in complex trauma.
- A whole person approach to support for women affected by trauma and abuse and who maybe experiencing mental health challenges, homelessness, poverty and the consequences of this.
- Provision of wrap-around community-based support and a 'no wrong door approach'.

As a result of Trevi receiving funding from The Home Office and Ministry of Justice (MOJ), the organisation developed specific support for women involved with the criminal justice system - establishing Blossom House as a result. This has capacity for nine women (seven residential beds, two crisis beds) and provides support and interventions to help women reintegrate into society.

Blossom House provides a safe, stable, and psychologically informed space that feels 'homely' rather than clinical, which is comforting for women who have experienced significant trauma and abuse. The emergency beds offered by Blossom House are vital in preventing vulnerable women from sleeping rough, which significantly reduces their exposure to further harm and exploitation, including sexual violence. The environment helps build trust and rapport, making women more receptive to support services.

The provision of 24/7 wraparound support within these safe spaces, along with co-located services (like probation at Sunflower Women's Centre), is crucial. The holistic approach helps women address complex needs like substance abuse and mental health issues, reducing the likelihood of re-offending often linked to trauma and a need to cope. By providing a safe and stable environment, women are less likely to engage in activities (e.g., street sex work) that expose them to further sexual violence.

'The women are extremely lucky. If the women of Plymouth did not have Blossom, we'd been in all sorts of trouble. The women would be on the streets, rates of offending would go up, rates of domestic abuse would go up, rates of criminality would go up. it would actually cost the public purse an awful lot of money.' (Probation Staff)

You can find more information about Trevi HERE

HEALTHY COMMUNITIES

Women veterans in Plymouth

The **Women Veterans Listening Circle Summary** provided a rich and heartfelt account of the lived experiences, health concerns, and aspirations of women veterans in the city.

Women defined their health in deeply personal and empowering terms. Mental health and identity were deeply impacted by male-dominated military environments. Health is about **reclaiming life** after military service.

"Living my personal best life."

"Space to be myself."

"Thriving now."

"Taking ownership and control"

(after feeling powerless in the military)

Participants shared frustrations with accessing healthcare. They told us that despite emotional suppression in service having lasting health impacts, they had experienced a lack of signposting and support during transition to civilian life. Emotional and physical health needs were often invalidated or misdirected. Post Traumatic Stress Disorder (PTSD) often led to referrals to domestic abuse services, which felt inappropriate. Menopause support was identified as expensive and inaccessible.

"Have to go through so much red tape to get the health care I think I need."

"There does seem to be specialist services, but they are very hard to access and are not known about by everyone."

They voiced concerns around long-term effects of military practices leaving women feeling misdirected when raising health concerns. Miscarriage care was traumatic with women being sent to maternity units. Use of contraception to suppress menstruation during deployment raised questions about future health impacts. A lack of research into women's unique military experiences and conditions like Gulf War Syndrome and Complex PTSD were seen as "male" and invalidated.

'I served in a unit with 45 men, I was the only woman'.

"Let down by the army."

They told us that supportive environments were crucial. Local spaces like Devils Point and South West Coast Path were healing. A female ex-military GP in Saltash was highly valued and women preferred to recieve their care in non-clinical, welcoming environments.

"I get in the water and everything goes."

"Veterans Hub" and "Volunteering" were repeatedly cited as vital.

"Having a purpose again."

Women expressed hope and desire for empowerment. They valued recognition of their unique experiences and voiced the need for better transitions from military to civilian healthcare and integrated support for mental, physical, and emotional health.

"Regaining back my life after leaving the military."

"Goal-related fitness is so good for my mental health."

Better Futures

The **Better Futures Listening Conversation** brought together nine women with learning disabilities in a psychologically informed, creative space. Their voices revealed powerful insights into what supports and hinders their health and wellbeing

Staying healthy: what matters most

- **Nutrition and Exercise:** Healthy eating, yoga, walking, dance, Wii games.
- **Hormonal Health:** Menopause impacts on mood and relationships.
- Taking care of physical health: Taking medication. Annual eye checks. Research physical conditions online/ Going to the doctors when needed.
- **Healthy Spaces:** Calm, clean homes and independence from disruptive and threatening environments. This included having access to female only spaces.
- **Supportive Communities:** help with emotional regulation, safety and social connection.
- Financial Security: Having a future free from financial and emotional abuse
- **Healthy relationships** through learning spaces like Better Futures and book clubs.

"My Mum and Dad shout all the time... I am happier now."

"Feeling calm is important to me."

"Menopause "Made me angry-snappy with people I cared about."

"I get quite frightened when I have to go for an appointment... I worry about how to tell them I don't want to see a man."

"The book club is helping me understand my brain and my feelings."

Places that support health - valued locations in Plymouth

Devils Point, Mount Batten, Hoe, Barbican (daytime). Better Futures Drop-In, Jan Cutting Centre, Canadian Muffin Co. Music and walking groups, knitting and craft groups

"The Better Futures group keeps me healthy, I can relax there."

"When I go to some of my groups it makes me feel good... I'm not on my own."

Barriers to health

- Fear and anxiety about ageing, medical procedures, and benefits.
- Accessibility issues with forms, online services,

and dental care.

- Feeling excluded from health decisions.
- "Forms are a barrier for me." "Fear of needles stops me going for blood tests."
- "Choices being made without me makes me feel out of control."

Visualising a healthy future

- **Security and independence** as ageing carers step back.
- **Health advocacy** and understanding medical need
- Planning for later life to reduce anxiety.

"Not being taken advantage of and keeping safe in my home."

"No one asks me – is there anything you'd like to tell us, do you have questions – I forget things at my appointments and if they don't ask me I forget to say'.

"My security, I want to be settled down before
I lose my Mum. It's important my money is
protected"

My Health, My Way

The **My Health, My Way** Listening Circle was held as a creative and supportive space for nine women, aged 26 to 60 to share their experiences, hopes, and aspirations in safe ways that felt right for them. None were in employment, mainly for health reasons. This was described as pivotal loss, deeply affecting identity, self-esteem, and overall wellbeing. Employment had provided purpose and connection, and its absence has led women to seek new ways to reclaim these vital aspects of life.

Health and access to care

Timely access to care and prescriptions is essential. "I want to be able to get the care and advice I need, when I need it."

Post-COVID challenges with prescriptions.

"Since COVID I have seen a real change in how I get my prescriptions, they are either late or my pharmacy just couldn't get them at all."

Mobility aids and transport costs are barriers.

"It takes me two hours and two buses just to get there, so I have to be quite well or pain free to get to it in the first place."

Health-related job loss impacts finances and wellbeing. "Having funds to be able to connect with life outside my home" was seen as vital."

Need for safe spaces and compassionate staff. "Women described needing safe spaces and trauma-informed responses when disclosing abuse."

Mental health and emotional wellbeing

Grief and identity loss due to health conditions. "I am trying to find my place now, I got my diagnosis and have been through my recovery and treatment but then had to almost restart my life, who am I, what can I do... it's like starting all over again. I miss my old life."

Therapy is transformative, but often only available privately making it unaffordable.

"Therapy had helped some of the women hugely and was described as 'life changing'."

Walking, gardening, and creativity support wellbeing. "Movement and Creativity: Nature, pets, and hobbies bring healing and joy."

Social connection and belonging

Peer groups and community spaces are vital.

"I love the walking group; it gets me out in the fresh air... I always feel better when I get back after one of the walks and seeing the different faces."

Purpose through creativity and volunteering.

"I help with a craft group — it gives me something to focus on and helps me feel useful again, which makes me feel better overall."

Green spaces and community hubs are highly valued. "Living near green spaces and gardens was seen to be ideal and highly valued."

Voice, agency, and respect

Being heard and respected builds trust. "I only ask for help when it is unavoidable."

Language in healthcare communication can cause shame

"The message led to a feeling of shame, I felt there was a lack of understanding."

Positive experiences with person-centred care.

"I went in there, I was worried and upset but they sat me down and explained what was happening and what was going to happen and it really helped. That was all I needed."

Need for trauma-informed and menopause-aware care.

"...because of my history, my life you know, it affects everything, even what I am treated for and medication I get, but that isn't always explained to me."

Aspirations for the future

Desire for a specialist women's health hub. "
Being heard - Being Listened to - Being Understood"
"All that you need is in one place" would be a model women would like to see in their healthy futures.

Final Reflections

Women and girls in Plymouth face significant and interconnected challenges when considering body, mind, places, and communities. Although these challenges are complex and not unique to women and girls in Plymouth, they may be shaped by the structural inequalities, lived experiences, and the unique context of Plymouth as a coastal city.

Body

- Harmful alcohol consumption affects women and girls in Plymouth both directly and indirectly.
- HPV vaccination uptake among girls in Plymouth is significantly below the national average which raises concerns about long-term cancer prevention. This also highlights the importance of local initiatives like the Cancer Champions for improved awareness and access
- Overwhelmingly, women in Plymouth are concerned that they do not have access to appropriate health care and deeply feel the need for women specific health places. This is particularly important for women who

experience additional vulnerabilities. Devon Integrated Care Board's focus on Women's Health is a promising step, and I look forward to more collaborative work to ensure more localised, accessible, and women-specific services.

Healthy Mind

- I am concerned about the cycle of stress that women and girls in Plymouth may be experiencing which impacts on both their economic and their overall health and wellbeing.
- Violence against women and girls remains a critical issue. Plymouth is an outlier in terms of VAWG-related crime statistics. The VAWG Commission and its findings show that young girls feel unsafe in schools and public spaces. Continued action on prevention, education, and safe environments are essential.
- Multiple disadvantage, including homelessness, addiction, and criminal justice involvement exacerbates mental health challenges.
 Best practice examples from Healthwatch Plymouth show the value of trauma-informed, compassionate care.

Places

- Plymouth's identity as a coastal community brings both benefits and barriers to women's health and wellbeing. While spending time in green and blue spaces can be supportive of better health, there are limits to the opportunities that women and girls have to access these spaces, especially those with caring responsibilities or disabilities.
- Access to well paid, good quality work is a challenge that is being addressed through the Civic Agreement and the prioritisation of women in Plymouth's Economic Strategy. This will be supported through the recruitment of the Women's Economic Equality Officer as part of our Communities Builders Programme.
- Places of safety, such as Blossom House have been highlighted as so important in supporting women to regain their physical and mental health.

Communities

- Women veterans face unique health challenges related to identity, trauma, and access to care, which are often overlooked. Building on existing links through the Armed Forces Covenant is essential to ensuring that their needs are met.
- Women with learning disabilities and those experiencing long-term conditions require more visibility; their voices must (continue to) be actively sought and included in future engagement work.
- My Health, My Way and similar projects show that when women are given space to reflect, connect, and be heard, they identify that clear priorities are access to care, emotional safety, financial security, and meaningful connection.

I am mindul that there is still so much we do not know. There are many data gaps, especially around sex-disaggregated health outcomes, which limit our understanding of the health of women and girls in the city. Ongoing work must prioritise:

- Improved data collection and reporting
- Lived experience engagement with women in Plymouth

- Intersectional approaches that consider how gender, sexuality, disability, ethnicity, and economic status interact
- Further focus with health partners on the provision of women-specific services and spaces

Plymouth has a strong history of working together; we will continue to build on our strengths to tackle the challenges identified so far, and to continue our work to understand, identify and act on others. As a city, we are determined to see the vision of 'Thrive Plymouth' realised, through achieving improvements in the health and wellbeing of women across the city.

Supporting the women and girls of Plymouth to live long, happy, healthy and independent lives is a priority for Plymouth - what can you do today to help achieve this?

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Improving Lives Plymouth

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Plymouth Trauma Informed Network

Plymouth Community Builders

The Thrive Plymouth Network

Sarah Brown Devonport Live

The Zebra Collective

Trevi

Cabinet



Date of meeting: 08 December 2025

Title of Report: Council Tax Base Setting 2026/27 and Council Tax

Support Scheme 2026/27

Lead Member: Councillor Mark Lowry (Cabinet Member for Finance)

Lead Strategic Director: Ian Trisk-Grove (Service Director for Finance)

Author: Carolyn Haynes (Lead Accountancy Manager)

Paul Walshe (Head of Revenues, Benefits and Service Centre)

Contact Email: Carolyn.Haynes@plymouth.gov.uk

Paul.Walshe@plymouth.go.uk

Your Reference: FIN/CTB26-27

Key Decision: No

Confidentiality: Part I - Official

Purpose of Report

The purpose of this report iso recommend the 2026/27 Council Tax Base to Council in accordance with the Local Authorities (Calculation of Tax Base) (England) Regulations 2012.

The calculation of the Tax Base reflects the impact of the Council Tax Support Scheme. These adjustments ensure that the Tax Base accurately accounts for the level of support provided to eligible households.

Recommendations and Reasons

That Cabinet recommend to Council:

1. The Council Tax Base for 2026/27 of 76,887 equivalent Band D dwellings as set out in the report.

Reason: to meet the legal requirements to set the Council Tax Base for budget

2. The continuation of the current Council Tax Support scheme and Exceptional Hardship Scheme for 2026/27 with no updates.

Reason: To help ensure that the Council Tax Support scheme treats claimants consistently, is clear to understand and is easy to administer.

Alternative options considered and rejected

It is a statutory requirement for Council to approve the Council Tax Base for the forthcoming financial year and annually review their CTS scheme. The option to amend the Council Tax Support scheme requires public consultation, and as there are no major Government amendments, it is considered correct to continue with the existing scheme.

Relevance to the Corporate Plan and/or the Plymouth Plan

The Council Tax Base and associated 2026/27 budget papers will set out the resources available to

deliver the Corporate Plan priorities.

Implications for the Medium Term Financial Plan and Resource Implications:

A collection rate of 97.5% has been used in calculating the Council Tax Base. Appendix A details the Tax Base calculations. The tax base is 76,887 band D equivalent properties.

Financial Risks

Council Tax Base assumptions include growth and demand on CTS scheme during 2026/27. A mid-year estimate will be prepared during Autumn 2026 to identify any surplus or deficit between forecast council tax collection and the council tax income target when 2026/27 budget set. Any surplus or deficit will be included in calculating resources for future medium term financial plans.

Legal Implications

Approval of the Council Tax base is required in accordance with the Local Authorities (Calculation of Tax Base) (England) Regulations 2012.

Carbon Footprint (Environmental) Implications:

No impact will directly arise from this report

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

* When considering these proposals members have a responsibility to ensure they give due regard to the Council's duty to promote equality of opportunity, eliminate unlawful discrimination and promote good relations between people who share protected characteristics under the Equalities Act and those who do not.

No impact will directly arise from this report

Appendices

*Add rows as required to box below

Ref.	Title of Appendix	Exemption Paragraph Number (if applicable) If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.								
		I	2	3	4	5	6	7		
Α	Council Tax Base Calculation									
В	Council Tax Base Calculation Table									
С	Council Tax Base Previous Years									

Background papers:

*Add rows as required to box below

Please list all unpublished, background papers relevant to the decision in the table below. Background papers are unpublished works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	If some/o	all of the in publication	aragraph Number (if applicable) formation is confidential, you must indicate why in by virtue of Part Tof Schedule 12A of the Local 272 by ticking the relevant box.						
	Governm	2	3	4	5	6	7		

Sign off:

	Fin	ITG.2 5.26.0 95	Leg	LS/00 003 I 97/36 /LB/2 8/1 I/ 25	Mon Off	N/A	HR	N/A	Asset s	N/A	Strat Proc	N/A
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Originating Senior Leadership Team member: Ian Trisk-Grove, Service Director for Finance

Please confirm the Strategic Director(s) has agreed the report? Yes

Date agreed: 28/11/2025

Cabinet Member approval: Cllr Mark Lowry (Cabinet Member for Finance) (approved by email)

Date approved: 28/11/2025



Council Tax Base Setting 2026/27

Council Tax Base Calculation



I. INTRODUCTION

- 1.1 The Local Authorities (Calculation of Tax Base) (England) Regulations 2012 make arrangements for the setting of the Council Tax. The arrangements include the determination of the Council Tax Base. A Council resolution is necessary. The decision must be notified to the major precept authorities.
- 1.2 For the year commencing I April 2026, the major precept authorities will be Devon and Cornwall Police and Crime Commissioner and Devon and Somerset Fire and Rescue Authority.
- 1.3 The Council must determine its Council Tax Base for 2026/27 during the period I December 2025 to 31 January 2026. The Council Tax Base is the measure of the taxable capacity of an area, for the purpose of calculating an authority's Council Tax. It represents the estimated number of Band D equivalent chargeable dwellings for the year. It also takes into account the authority's estimated Council Tax collection rate. The level of Council Tax subsequently set must be determined using the Council Tax Base figure. The Council Tax Base calculation is attached in Appendix B.
- 1.4 The calculation of the Council Tax Base allows for discounts under the Council Tax Support Scheme.

2. PURPOSE OF THE REPORT

- 2.1 The purpose of this report is to propose to Council the Council Tax Base of 76,887. The Council Tax Base for 2025/26 was 76,557, an increase of 330.
- 2.2 The Tax Base calculation reflects the impact of the Council Tax Support Scheme, including any agreed changes to the scheme for the coming year. These adjustments ensure that the Tax Base accurately accounts for the level of support provided to eligible households.

3. TAX BASE CALCULATIONS

- 3.1 Council Tax Base figures are calculated by the billing authority as the aggregate of the "relevant amounts" calculated for each property valuation band multiplied by the estimated "collection rate" for the year.
- 3.2 Relevant amounts are:
 - (a) The number of chargeable dwellings in that band shown in the valuation list as at 10
 September 2025 (Ministry of Housing, Communities & Local Government (MHCLG) return Council Tax Base (CTB));
 - (b) The number of premiums, discounts, disabled reductions and exemptions which apply to those dwellings;
 - (c) Estimated changes in the number of chargeable properties between 10 September 2025 and 31 March 2027;
 - (d) Impact of the Council Tax Support Scheme;
 - (e) The number of Band D equivalents within each different band.

- 3.3 The collection rate is the billing authority's estimate of the total amounts of 2026/27 Council Tax which will ultimately be paid or transferred into the Collection Fund.
- 3.4 This report assumes a collection rate for Council Tax of 97.5%. This rate reflects recent arrears collection performance, the pattern of write offs and the impact of Universal Credit. Analysis of collection rates across the age profile of debts suggests that an eventual collection rate of 97.5% is realistic and prudent in the current economic climate.
- 3.5 Appendix C shows the tax base used for the previous three years for comparison.
- 3.6 There are assumption in the tax base for growth, but the actual increase on the previous year's tax base was limited. The total number of dwellings in the valuation list as at 10 September 2025 was 123,424 compared to 123,273 in the valuation list as at September 2024. This represents a small increase of 151 dwellings on the previous year. There is a risk that this may impact on the Council Tax surplus/deficit position at the end of 2026/27.

4. COUNCIL TAX SUPPORT

- 4.1 Plymouth City Council provide a local assistance schemes known as Council Tax Support and a discretionary Exceptional Hardship Scheme. The main Council Tax Support (CTS) scheme requires all working age claimants to make a minimum 20% contribution towards their Council Tax bill. All local authorities administer the same Council Tax Support scheme for Pension Age council tax payers under regulations prescribed by central government.
- 4.2 Plymouth operates an income banded working age CTS scheme. The amount of support awarded is based on the composition of the household and the income band in which the household income falls. Those on a basic qualifying benefit, known as a passported benefit, and those who receive a war pension or war disablement benefit receive a maximum 80% towards their Council Tax.
- 4.3 CTS continues to provide vital support for many households in the city who have low incomes. It is expected that the caseload and scheme cost within 2026/27 can be funded within the available financial envelope.
- 4.4 All councils are required to annually review their local CTS schemes. Plymouth has reviewed the CTS scheme during 2025 to consider changes that could provide more financial support to families with children. To make these changes the current systems need to be developed to ensure a revised scheme can be administered, prior to any public consultation that would need to be undertaken. In light of these circumstances, Plymouth has decided not to make any changes to the scheme for 2026/27.
- 4.5 It is worth noting that just under 20% of all households in Plymouth are now in receipt of this support, a proportion that has remained broadly stable for several years. The increase in the total cost of the Council Tax Support Scheme (set out below) reflects annual Council Tax uplifts rather than growth in claimant numbers.

	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
	£m	£m	£m	£m	£m	£m
Total Council Support	16.971	16.981	18.935	20.181	21.535	22.145

APPENDIX B

Council Tax Base Calculation Table 2026/27										
	BAND A	BAND A	BAND B	BAND C	BAND D	BAND E	BAND F	BAND G	BAND H	Total
	with disabled relief									
Number of dwellings in valuation list as at 10th September 2025	C	48,175	33,411	23,688	10,321	5,261	1,893	619	56	123,424
Less number of exempt dwellings (including demolished)	C	(3,217)	(1,301)	(900)	(707)	(212)	(38)	(33)	(16)	(6,424)
Reductions to lower band due to disabled relief	C	(177)	(216)	(210)	(122)	(70)	(35)	(31)	(10)	(871)
Additions to band due to disabled relief	177	216	210	122		35	31	10	0	871
CHARGEABLE DWELLINGS FOR BAND	177	44,997	32,104	22,700	9,562	5,014	1,851	565	30	117,000
Total discounts at 25%	70	22,600	11,225	6,267	2,327	1,028	323	76	3	43,919
Total discounts at 50%	2	47	60	27	17	15	25	22	15	230
Total discounts at 100%	-	93	48	17	4	-	I	2	-	165
TOTAL DISCOUNTS - shown as whole dwelling equivalent	19	5,767	2,884	1,597	594	265	94	32	8	11,260
Number of chargeable dwellings classed as second homes on 6	_	417	218	161	96	57	15	8		973
October 2025						(2)	(-)	_		
Number of second homes not charged premium	-	(31)	(33)	(27)		(9)	. ,			(111)
Number of second homes charged 100% premium	-	386	185	134	87	48	13	8	I	862
		200								
Long Term Empty Premium I - 2 years at 100%	-	222	52	20	28	3	2	2	' '	330
Long Term Empty Premium 2 - 5 years at 100%	-	101	19	12	5	5	2	-	-	144
Long Term Empty Premium 5 - 10 years at 200%	-	51	3	4	ł	-	-	-	-	59
Long Term Empty Premium +10 years at 300%	-	18	3		-	-	-	-	-	22
LONG TERM EMPTY PREMIUM - impact of premium	-	479	86	43	35	8	4	2	I	658
GROWTH: Estimated number of dwellings not listed but which will be										
listed in the band for the whole or any part of the financial year	-	81	79	70	34	22	10	4	0	300
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,										
LOCAL COUNCIL TAX SUPPORT SCHEME REDUCTIONS	47	8,711	3,001	945	211	56	13	3	-	12,986
Family annexes discount at 50%	0	36	12	21	17	13	14	ı	0	114
FAMILY ANNEXES	0	17	6	П	8	7	7	I	0	55
TOTAL DWELLINGS (ROUNDED)	112	31,449	26,563	20,394	8,905	4,765	1,763	544	24	94,519
DATIO TO DANID D	5	6	7	8	9	П	13	15	18	
RATIO TO BAND D	9	9	9	9	9	9	9	9	9	
RELEVANT AMOUNTS FOR 2026/27	62	20,966	20,660	18,128	8,905	5,823	2,547	907	47	78,046
COLLECTION RATE										97.50%
ADJUSTED RELEVANT AMOUNT	61	20,442	20,144	17,675	8,683	5,678	2,483	884	46	76,095
MOD CONTRIBUTION										792
TAX BASE										76,887

PLYMOUTH CITY COUNCIL

APPENDIX C

C. Cound	cil Tax Base -	Previous Ye	ars							
		2023/24			2024/25		2025/26			
		Estimated	Adjusted		Estimated	Adjusted		Estimated	Adjusted	
	Number of	Collection	Band D	Number of	Collection	Band D	Number of	Collection	Band D	
Band	properties	Rate	Equivalent	properties	Rate	Equivalent	properties	Rate	Equivalent	
Α	48,050	97.5%	19,508	48,156	97.5%	19,681	48,103	97.5%	20,078	
В	33,261	97.5%	19,664	33,322	97.5%	19,776	33,380	97.5%	20,098	
С	23,575	97.5%	17,420	23,641	97.5%	17,526	23,673	97.5%	17,701	
D	10,213	97.5%	8,551	10,278	97.5%	8,567	10,305	97.5%	8,695	
E	5,186	97.5%	5,578	5,206	97.5%	5,616	5,238	97.5%	5,707	
F	1,859	97.5%	2,456	1,877	97.5%	2,477	1,894	97.5%	2,525	
G	614	97.5%	862	618	97.5%	869	624	97.5%	903	
Н	55	97.5%	42	55	97.5%	45	56	97.5%	47	
Total	122,813		74,081	123,153		74,557	123,273		75,753	
MOD			810			832			804	
Tax Base			74,891			75,389			76,557	

Cabinet



Date of meeting: 08 December 2025

Title of Report: The Food Waste Collection Project

Lead Member: Councillor Tom Briars-Delve (Cabinet Member for Environment and

Climate Change)

Lead Strategic Director: Glenn Caplin-Grey (Strategic Director for Growth)

Author: Rachel Hawadi

Contact Email: Rachel Hawadi@plymouth.gov.uk

Your Reference:

Key Decision: Yes

Confidentiality: Part I - Official

Purpose of Report

To request the approval of the Revenue Business Case for the implementation and phased roll out of a new city-wide weekly statutory Food Waste Collection Service commencing early in 2026 in order to meet the Government deadline of 01 April 2026.

Recommendations and Reasons

To approve the Revenue Business Case and associated phased roll out of Plymouth City Council's Household Food Waste Collection service.

Reasons:

- a) Statutory Compliance: The Food Waste Collection Project is a legislatively driven initiative and aligns with national legislation and Defra requirements for separate domestic food waste collections in England by 1st of April 2026.
- b) To commence phase I of the food waste collection service in early March 2026.
- c) To support the Council's Climate Emergency Action Plan and Net Zero targets by introducing a food waste collection service.
- d) To empower residents to reduce waste and improve recycling habits which will increase Plymouth's recycling rate.
- e) To divert food waste from residual waste streams, reducing disposal costs over time.

Alternative options considered and rejected

- An opt-in service for food waste collection from households but rejected on the basis of industry advice
 that it would not be in keeping with the statutory requirement and would also likely reduce participation
 levels.
- 2. A do-nothing approach was rejected on the basis that it is a statutory service.

Relevance to the Corporate Plan and/or the Plymouth Plan

GRO9 - Minimising Plymouth's waste: a) Circular economy principles b) Carbon reduction and promoting green technologies.

Corporate Plan

Making Plymouth a fairer, greener city, where everyone does their bit: The project contributes to the Council's Net Zero ambitions by reducing methane emissions and supporting renewable energy generation through anaerobic digestion.

Minimise the impact of the cost-of-living crisis: By helping residents reduce food waste, the project supports household budgeting and food security.

Green investment, jobs, skills and better education: The project contributes to the Council's Net Zero ambitions by reducing methane emissions and supporting renewable energy generation through anaerobic digestion.

Implications for the Medium-Term Financial Plan and Resource Implications:

- The proposed project costs for 2025/26 to 2028/29 total £4,256,333 and will be met by a combination of the council's revenue resources and DEFRA 'New Burdens' grant funding.
- Provision has been made in the MFTP to meet an estimated gap between the cost of introducing a food
 waste service and the grant funding provided by DEFRA. Budget growth has been approved in 2025/26 for
 £250,000 stepping up to £500,000 on an ongoing basis from 2026/27.
- DEFRA grant funding has been estimated the actual allocation for Plymouth has not been announced or received. For the purposes of finalising this Business Case the funding estimate has been assumed to meet the difference between the forecasted cost and existing budget. Once the actual Government funding is announced, budgets can be adjusted if appropriate through the council's budget monitoring and medium-term financial planning process.

Financial Risks

The principle financial risk is that DEFRA's New Burdens grant funding is lower than estimated, increasing the cost of the service beyond the budgeted position. This is considered unlikely because previous Stage I and 2 funding allocations have generally been in line with associated costs.

Legal Implications

The duty of local authorities to collect and dispose of household waste is set out in Section 45 of the Environmental Protection Act 1990. The Environment Act 2021 was enacted into UK Law in November 2021. This made several changes to the Environmental Protection Act 1990 and mandated that all local authorities in England must provide a separate, weekly food waste recycling service to all households from 31 March 2026.

Carbon Footprint (Environmental) Implications:

Diverting food waste to an anaerobic digestion (AD) which produces, biomethane, heat, electricity and nutrient rich fertilizer is very positive in relation to the disposal of food waste, however the addition of new vehicles operating each week across the city will add additional vehicle related emissions.

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

Plymouth City Council will be expected to follow a combination of national health and safety standards compliant with the Health & Safety Executive, COSSHH, Health and Safety at Work Act 1974, Manual Handling Operations Regulations 1992, Management of Health and Safety at Work Regulations 1999, Provision and Use of Work Equipment Regulations (PUWER). There is an intrinsic Duty of care to employees and the public, industry best practice, and existing PCC policies, Safe Working Operating Procedures when implementing the food waste collection service.

Appendices

Re	Ref Title of Appendix		ll of the in not for pub	aragrap formation is dication by ment Act 1	s confidenti virtue of Po	al, you mus art Tof Sche	st indica edule 12	ite 2A
		I	2	3	4	5	6	7
Α	Briefing Report- Food Waste Collection Project							
В	Revenue Business Case - Food Waste Collection Project							

Equalities Impact Assessment

Climate Impact Assessment

raye 49		PLYMOUTH CITY COUNCIL							

Background papers:

C

Ε

*Add rows as required to box below

Please list all unpublished, background papers relevant to the decision in the table below. Background papers are <u>unpublished</u> works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	Exemption Paragraph Number (if applicable)						
	is not for	publication	the information is confidential, you must indicate wh cation by virtue of Part 1 of Schedule 12A of the Lo ct 1972 by ticking the relevant box.				
	ı	2	3	4	5	6	7

Sign off:

.25.2	Finance		C/30/10/	Mon Of	N/A	HR	N/A	Assets	N/A	Strat Proc	N/A	
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Originating Senior Leadership Team member: Andy Sharp (Interim Service Director-Street Services)

Please confirm the Strategic Director(s) has agreed the report? Yes

Date agreed: 30/10/2025

Cabinet Member approval: Councillor Tom Briars-Delve (Cabinet Member for Environment and Climate

Change)

Date approved: 30/10/2025



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FOOD WASTE COLLECTION PROJECT BRIEFING PAPER

Revenue Business Case



I. EXECUTIVE SUMMARY

Plymouth City Council is actively preparing to commence the implementation of a brand-new, citywide, weekly food waste collection service in the Spring of 2026. Introducing a separate food waste collection service in Plymouth has the potential to significantly boost the city's household recycling rates.

This document summarises the business case for the next stage of the project, implementation and roll out to all Plymouth households. The food waste collection service is mandatory for all Waste Collection Authorities in England and is legislatively driven by the Environment Act (2021) which is overseen by the Department for Environment, Food & Rural affairs (Defra).

Defra has committed to providing funding in 3 stages. Stage I is Capital funding of £1,941,574 for the procurement of vehicles and food waste containers. Stage 2 is transitional revenue funding of £570,159, which has been allocated for the distribution of containers to households £323,014, communications £173,145 project staff £72,000 and procurement £2,000. The Council has now received stages I and 2 of the funding which in total is £2,511,733. Stage 3 New Burdens funding is yet to be confirmed. In November 2025 the Capital Officers Programme Group (CPOG) approved the reallocation of the variance of £252,778.01 from the £2,296,779.95 phase I Business Case in order to carry out essential works for the Chelson Meadow Transfer site and Prince Rock depot. These works are not only essential but are on the critical path for the project to meet the deadline for the successful implementation of the time sensitive food waste collection service. Additionally, an allocation was made for the provision of an initial supply of caddy liners to help encourage household participation.

The Government has committed to provide New Burdens funding (stage 3) for the ongoing costs of the new Service. The detail of the funding allocation is yet to be confirmed. For the purposes of finalising this Business Case and in order to secure approval to commence the Service, the yet to be agreed funding has been shown as a balancing amount between the forecast cost and existing budget.

The financial model underpinning this business case is based on a series of well-defined assumptions across staffing, vehicle operations, and waste processing. Salary costs have been calculated using PCC pay scales and projected annual uplifts. Vehicle maintenance and fuel costs have been estimated using current market rates and operational data, while haulage and disposal costs reflect estimated tonnage projections and known gate fees.

The Business Case sets out the case to use various funding streams made up of Stages 2 and 3 funding from the Government alongside existing Council budget provisions to roll out a citywide food waste collection service for every household in Plymouth throughout 2026.

2. BACKGROUND

In October 2023, the government launched a legislation-led initiative called Simpler Recycling, aimed at making recycling easier and more consistent across the country. This programme is designed to boost recycling rates and has supported the rollout of weekly food waste collection services. Food waste collected separately can be processed at anaerobic digestion facilities, where it is converted into renewable energy used for electricity, heating, or transport fuels. This process also significantly reduces greenhouse gas emissions, particularly methane, which is a major contributor to climate change. Globally, food waste is responsible for around 8 -10% of total greenhouse gas emissions.

Defra has allocated £295 million to support the 50% of Waste Collection Authorities that did not operate a food waste collection service at the time the relevant legislation was introduced. In addition to meeting

legal requirements, it's important to emphasise the environmental benefits of introducing separate food waste collections.

Plymouth's recycling rate is under performing with significant room to improve. The roll out of food waste collections will help improve matters through an expected 5-8% uplift in our overall rate. However, it forms part of a wider plan supported by an approved restructure to reintroduce the Recycling Officer function alongside updated waste strategies and policies, increased public engagement and targeted communications to target low participation and high contamination areas of the city.

The Food Waste collection service will align with government priorities and legislation by supporting Plymouth City Council's Net Zero Action Plan to reduce greenhouse gas emissions. Furthermore, the project support's Plymouth City Council Corporate Plan of "green sustainable city that cares about the environment'

3. CURRENT SITUATION

In November 2024, a capital business case of £2,296,779.95 was approved, made up of £1,941,574.00, Defra stage I funding and £355,205.95 service borrowing. The DEFRA funding was used to procure internal and external caddies and communal bins.

The Phase I Capital Business Case identified financial risks due to long vehicle procurement timelines and market saturation, with many councils purchasing similar assets simultaneously. Plymouth City Council mitigated these risks through early supplier engagement, benchmarking, and market research. This led to cost savings by securing lower prices for vehicles and containers.

Stage 2 DEFRA transitional funding which was received in March 2025, which will be used for Bin distribution £323,013.52, Project Management £72,000.00 Communications £173,145.43 and procurement £2,000.00.

4. PROPOSAL

To ensure a smooth and effective implementation, the food waste collection service will be introduced through a phased rollout. Phase I will begin early in 2026 with direct engagement with residents, followed by the distribution of food waste caddies. Collections will commence in early March 2026. This will be followed by a reflective period, allowing the Council to manage operational complexities and refine processes. Phase 2 will launch in mid-lune 2026, again starting with resident engagement and caddy distribution, with collections beginning in July 2026. Phases 3 to 5 will follow the same structure as the earlier phases, with a continued focus on infrastructure, staffing, communications, and community engagement. This phased approach will enable the service to scale up in a controlled and responsive manner.

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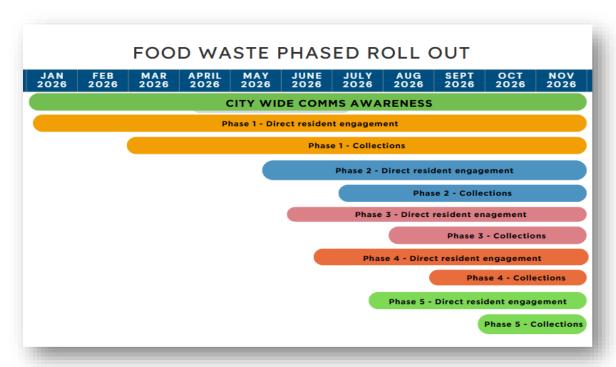


Fig 1: Food waste phased roll out plan

Phase I of the roll out is a carefully selected cluster of areas which has been chosen to represent a diverse mix of property types, including varying levels of accessibility, socioeconomic conditions, flatted properties, and Houses in Multiple Occupation (HMO). The food waste collection service has been designed to align with existing collection days to avoid disruption to current waste services. In designing the service, it was essential that the introduction of food waste collections did not require changes to established schedules and routes. During phase I the project team and collection crew will have a dedicated period to address any collection anomalies, resident feedback, analyse trends and other emerging factors in a controlled environment. This approach will enable the project team to gather valuable insights before progressing to subsequent phases.

During the phased roll out the Operations team will build up the number of drivers and crews focussing on recruiting, onboarding, and training crews and then building up to a full roll-out of the throughout the summer of 2026. The funding of the food waste collection crew will be financed by the New Burdens Funding.

4.1 PUBLIC ENGAGEMENT

As part of stage 2 funding Defra has provided £173,145.43 for Communications. The success of the food waste collection service depends not only on operational readiness but also on public understanding, participation, and sustained behavioural change.

The campaign will use multi-channel communication including printed materials, social media, and community events to inform residents about the new service and its environmental benefits. Recycling Officers will play a key role in face-to-face engagement, roadshows, briefings, school talks, attending local events and providing practical guidance.

Behavioural change will be supported through nudges such as bin stickers, reminder cards, and positive reinforcement. Messaging will be tailored to different housing types and communities, with accessibility and inclusion at the forefront.

Early engagement with councils who have been successful in increasing their food waste participation rates has shown that face to face engagement and door knocking were very effective in getting the public to participate in food waste recycling.

BRIEFING PAPER Page 3 of 7

4.2 RESOURCING

To support the successful delivery of the project, additional resources have been allocated, and further recruitment is underway to strengthen both operational and engagement efforts.

The Project team, consisting of a Senior Project Manager, Project Manager and 2 Recycling Officers. The Operational team (recruiting to reflect the phased roll out, each phase consisting of 2 Drivers and 4 Collectors) will be 2 Team Leaders, 10 Drivers 20 Collectors and a Business Support Officer in total.

All whilst utilising service leads and experts to support the project and Food Waste collection service.

4.3 FOOD WASTE CADDIES/CONTAINERS

The food waste collection service will enable Plymouth residents to dispose of food waste using 7-litre internal caddies, which are then emptied into 23-litre kerbside caddies for collection. Both recyclable caddies, include secure, lockable lids. Plymouth City Council has procured IPL(UK) Ltd which supplied the same caddies to Cornwall Council, South Ham District Council and West Devon Borough Council.

140 litre food waste bins are being used in communal collection areas. The internal caddy liners will be provided alongside the caddies as a one-off as part of an introduction to the Food Waste collection service.

4.4 VEHICLES/SITE MOBILISATION

Food waste will be collected by 10 bespoke 12-tonne vehicles that meet Waste and Resources Action Programme technical specifications. The fleet will be stored at Prince Depot, which will undergo infrastructure upgrades.

4.5 WASTE TRANSFER SITE (CHELSON MEADOW)

After collection, food waste will need to be transported to a waste transfer site to be kept in a sealed container. Early analysis and comparison of Prince Rock Depot and Chelson Meadow as potential sites favoured the usage of Chelson Meadow. Prince Rock had the disadvantage of not having a working weighbridge, vehicle congestion with current refuse fleet and the relative amount of work required to make the site fit for purpose.

4.6 ANAEROBIC DIGESTION SITE

From the waste transfer site, the food waste will be transported to an anaerobic digestion site where food waste is broken down into renewable energy.

The process releases biogas, (mainly a mixture of around 60% methane and 40% carbon dioxide) which can be used directly to provide heat, power or transport fuel. Biogas can also be purified by removal of the carbon dioxide to produce biomethane, which can be fed directly into the public natural gas grid in the same way as natural gas or used as a vehicle fuel. If not processed at an anaerobic digestion (AD) facility, these gases would otherwise contribute to greenhouse gas emissions and accelerate climate change.

BRIEFING PAPER Page 4 of 7

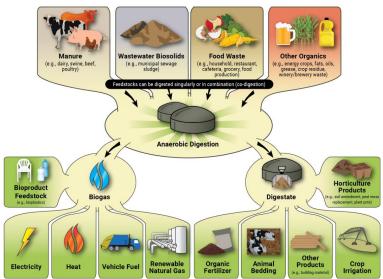


Fig 2: The Anaerobic Digestion process used to produce nutrient rich slurry (fertilizer for plants), biogas, heat and electricity from food waste.

4.7 FOOD WASTE CONTAINER OPERATIONS

The current rate of missed bins vs scheduled collections is roughly 0.13% across residual, recycling, and optional garden waste collections This amounts to around 700 missed collections per month across all waste streams.

Given the weekly frequency of food waste collections and the average time taken by residents to report a missed bin, providing this service drastically reduces the benefit to residents that comes from providing a missed bin service. Instead, residents will be encouraged to present their bins on the next scheduled collection day if they believe a collection has been missed and missed bin reports will be used to drive crew behaviour and service improvements.

In addition, the project team is launching Bartech Municipal Technologies' route mapping software, which will use the food waste project as a foundation for route optimisation. The software enables real-time tracking, data-driven scheduling, and efficient resource deployment, helping the council streamline operations and improve service quality across waste collection rounds. Coupled with more robust reporting and better insights into crew performance this will help make reviewing reported service failures easier and more efficient. This new system will give Crews the ability to log more detailed premise-level events regarding non-compliance, giving us detailed insights into resident behaviour. This intelligence will help drive direct, efficient public engagement and communications to inform residents what's gone wrong and how they can rectify this in future, driving behavioural change.

5. FINANCE

The Council has received stages I and 2 of Defra funding, totalling £2,511,732.95.

Stage I is Capital funding of £1,941,574.00 for the procurement of vehicles and food waste containers and Stage 2 transitional revenue funding of £570,158.95 has been allocated for the distribution of containers to households £323,013.52, communications £173,145.43 project staff £72,000.00 and procurement £2,000.00. Stage 3 New Burdens Funding was expected in August 2025 but to date has not been announced or received.

The financial model underpinning this business case is based on a series of well-defined assumptions across staffing, vehicle operations, and waste processing. Salary costs have been calculated using PCC pay scales, inclusive of statutory on-costs and projected annual uplifts. Vehicle maintenance and fuel costs have been

BRIEFING PAPER Page 5 of 7

estimated using current market rates and operational data, while haulage and disposal costs reflect realistic tonnage projections and known gate fees.

As part of the 2025/26 budget planning process, through the Medium-Term Financial Plan, a case was made to allow for a forecast that the DEFRA Stage 3 funding would be insufficient and to avoid a situation whereby delivering the statutory service was under funded budget growth has been approved in 2025/26 for £250,000 stepping up to £500,000 on an ongoing basis from 2026/27. At this stage, with no indication as to what the Stage 3 monies will be, it has been assumed that the amount we will receive will match the gap between pre-approved budgets and the forecast cost of operation. Once the actual Government funding is announced the appropriate budgets can be readjusted.

The full Business Case is for net revenue costs of £4,256,333 between 2025 and 2029 and recurring in future years, which is expected to be covered by the Stage 3 New Burdens funding and revenue budget growth allocated to the service area. The Stage 3 New Burdens funding was expected around August 2025, but to date has not been received, therefore funding has been forecasted for the purpose of producing a business case. Once the actual Government funding is announced the appropriate budgets can be readjusted.

	2025/26	2026/27	2027/28	2028/29	TOTAL
Service area revenue cost	2	2	2	3	3
Bin Distribution	64,603	258,411	0	0	323,014
Communications	50,000	123,145	0	0	173,145
Procurement Costs	1,000	1,000	0	0	2,000
Project Management	72,000	98,338	0	0	170,338
Staff Costs	74,102	959,683	1,384,487	1,408,821	3,827,093
Vehicle operational costs	13,092	148,283	185,329	190,870	537,574
Haulage and Disposal costs	1,766	137,755	216,852	227,695	584,068
Service Borrowing repayment	196	85,550	86,006	86,052	257,804
Total Revenue Cost (A)	276,759	1,812,165	1,872,674	1,913,438	5,875,036
Service area revenue	2025/26	2026/27	2027/28	2028/29	TOTAL
benefits/savings	3	3	2	£	£
Waste Disposal (removal of food					
waste from residual waste)	4,895	381,778	600,990	631,040	1,618,703
Total Revenue Income (B)	4,895	381,778	600,990	631,040	1,618,703
Service area net (benefit) cost (A-B)	271,864	1,430,387	1,271,684	1,282,398	4,256,333
	2025/26	2026/27	2027/28	2028/29	TOTAL
Service area revenue Funding	3	3	3	£	£
Defra Funding - Transitional Grant	187,603	382,556	0	0	570,159
Defra Funding - New Burdens	0	600,000	800,000	800,000	2,200,000
Revenue budget	250,000	500,000	500,000	500,000	1,750,000
Funding Total	437,603	1,482,556	1,300,000	1,300,000	4,520,159
Service area net (benefit) cost	(165,739)	(52,169)	(28,316)	(17,602)	(263,826)

Table I: Financial breakdown

6. RISK

The identified risks are summarised below

- A negative public reaction to a food waste service which could be deemed as 'waste of money' and or unnecessary. This will be mitigated by a robust public education and engagement programme throughout the project tapping into green communities as critical friends to support the initiative
- There is a risk of low participation rates to mitigate this risk a robust Public Engagement programme has been produced covering social media, schools, community engagement, engagement with third party sector.
- Lack of space to accommodate a waste transfer site and food waste vehicles and containers at Prince Rock Depot. To mitigate this risk, an early site planning to accommodate other projects, departments and assets currently in the Depot or planned.

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- There is a risk of issues with Manual handling of the food waste containers, which includes delivery
 and collections. To mitigate this risk, manual handling risk assessments will be carried out to
 implement control measures.
- Risk of shortfall of Stage 3 New Burdens funding, to mitigate this risk as part of the 2025/26 budget planning process, through the Medium Term Financial Plan, a case was made to allow for a forecast that the Defra Stage 3 funding would be insufficient and to avoid situation whereby delivering the statutory service was under funded budget growth has been approved in 2025/26 for £250,000 stepping up to £500,000 on an ongoing basis from 2026/27. At this stage, with no indication as to what the Stage 3 monies will be, it has been assumed that the amount we will receive will match the gap between pre-approved budgets and the forecast cost of operation.

7. SUMMARY AND RECOMMENDATION

To approve the Revenue Business Case and associated phased roll out of for Plymouth City Council's Household Food Waste Collection service.

Reasons:

- a) Statutory Compliance: The Food Waste Collection Project is a legislatively driven initiative and aligns with national legislation and Defra requirements for separate domestic food waste collections in England by 1st of April 2026.
- b) To commence phase I of the food waste collection service in early March 2026.
- c) To support the Council's Climate Emergency Action Plan and Net Zero targets by introducing a food waste collection service.
- d) To empower residents to reduce waste and improve recycling habits which will increase Plymouth's recycling
- e) To divert food waste from residual waste streams, reducing disposal costs over time.

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REVENUE BUSINESS CASE

(Food Waste Collection Project)



EXECUTIVE SUMMARY

The Executive Summary is a short summary of the Business Case and should be the last section you complete; this will enable you to extract or only the key facts from relevant sections i.e. 'project on a page'.

The summary is a 'snapshot' of the business case which will need to tell the story and sell the proposal. Plymouth City Council is actively preparing to commence the implementation of a brand-new, citywide, weekly food waste collection service in the Spring of 2026. Introducing a separate food waste collection service in Plymouth has the potential to be the transformative catalyst that significantly boost the city's household recycling rates. The Council has already successfully procured and obtained Value for Money for 10 bespoke food waste vehicles, 7-litre kitchen and 23-litre kerbside caddies. This document sets out the business case for the next stage of the project, implementation and roll out to all Plymouth households. The food waste collection service is mandatory for all Waste Collection Authorities in England and is legislatively driven by the Environment Act (2021) which is overseen by the Department for Environment, Food & Rural affairs (Defra).

Defra has committed to providing funding in 3 stages. Stage 1 is <u>Capital</u> funding of £1,941,574.00 for the procurement of vehicles and food waste containers. Stage 2 transitional <u>revenue</u> funding of £570,158.95. The stage 2 has been allocated for the distribution of containers to households £323,013.52, communications £173,145.43, procurement £2,000.00 and project staff £72,000.00. The Council has now received stages 1 and 2 of the funding which in total is £2,511,732.95. Stage 3 <u>New Burdens</u> funding is yet to be confirmed. The Government has committed to provide New Burdens funding for the ongoing costs of this new Service, but this is yet to be confirmed. For the purposes of finalising this Business Case and in order to secure approval to commence the Service, the yet to be agreed funding has been shown as a balancing amount between the forecasted cost and existing budget. Once the actual Government funding is announced the appropriate budgets can be readjusted.

The Business Case sets out the case to use various funding streams made up of Stages 2 and 3 funding from the Government alongside existing Council budget provisions to roll out a citywide food waste collection service for every household in Plymouth throughout 2026.

The full Business Case is for net revenue costs of £4,256,333 between 2025 and 2029 and recurring in future years. The breakdown for forecasted net revenue expenditure is £271,864 (2025/26), £1,430,387 (2026/27), £1,271,684 (2027/28) and £1,282,398 (2028/29).

- Staff Costs (Project Delivery): Senior Project Manager, Project Manager, 2 Recycling Officers
- Staff Costs (Operations): (10 drivers, 20 Collectors, 2 Team Leaders
- Vehicles: Ongoing costs associated with vehicle maintenance and fuel costs
- Disposal: Collection, transfer & processing of food waste in an Anaerobic Digestion plant

The proposed funding will be covered by both PCC Revenue Budget and Defra funding totalling: £437,603 (2025/26), £1,482,556 (2026/27), £1,300,000 (2027/28) and £1,300,000 (2028/29). Key Risks

There is a risk of a shortfall in the New Burdens funding, a risk of negative public perception due to misinformation/disinformation and low participation rates by residents.

SECTION I: PR	OJECT DETAIL		
Project Value (indicate capital or revenue)	(£4,256,333 Net Revenue excluding Defra Transitional grant spend) (2025/26), £271,864 (2026/27), £1,430,387 (2027/28), £1,271,684 (2028/29), £1,282,398	Contingency (show as £ and % of project value)	0
Portfolio Holder	Cllr Tom Briars-Delve,	Directorate	Growth Directorate
	Environment and Climate Change	Service Director	Andy Sharp (Interim Service Director- Street Services)
Senior	Martin Hoar (Interim Head	Project Manager	Rachel Hawadi (Senior
Responsible Officer (client)	of Environmental Operations-Street Services)		Project Manager)
Address and Post	Prince Rock Depot	Ward	Citywide
Code	Macadam Road .		,
	Plymouth		
	PL4 0RZ		

Current Situation: (Provide a brief, concise paragraph outlining the current situation and explain the current business need, problem, opportunity or change of circumstances that needs to be resolved)

The Council has a mandatory obligation to deliver a weekly food waste collection service in the Spring of 2026, in line with the Environment Act 2021. Defra has assigned £295 million to the 50% of Waste Collection Authorities (WCA) who did not have a food waste collection service at the time the legislation was brought in. The grant determination and allocation was based on several factors including number and type of properties (kerbside, flatted, rural), food waste yields, vehicle and container unit costs, levels of deprivation and rurality.

Legislation and Strategic Alignment

In November 2021, The Environment Act 2021 became law with "Simpler Recycling" being one of its core outcomes. The need for simpler recycling was the result of several factors including the rise in waste going to landfill during the pandemic, the focus on climate change, the declining recycling rates and the commitment to the UK's Net Zero Strategy. This meant an intentional move towards reformative measures underpinned by regulations. One of those measures was the introduction of a mandatory weekly domestic food waste collection by Ist of April 2026 for all WCAs in England.

The national costs associated with this food waste is £19 billion and has associated emissions of 36 million tonnes of carbon dioxide equivalent.² Plymouth's domestic food waste ends up in the household residual waste with a small percentage contributing to the contaminants in the recycling waste stream. The latest internal waste figures show that the total tonnage of kerbside collected residual waste is 53,867 tonnes per annum at an estimated cost of £5,225,099.³ The gate fees for

 $\underline{foodwaste/supporting_documents/Impact\%20Assessment_Improved\%20Food\%20Waste\%20Reporting\%202022.pdf}$

Simpler recycling collections and tougher regulation to reform waste system - GOV.UK (www.gov.uk)

² https://consult.Defra.gov.uk/environmental-quality/improved-reporting-of-

³ Source Phil Rudin Head of Strategic Contracts and Disposal • Street Services Food Waste Collection Project Revenue Business Case Author Rachel Hawadi (Senior Project Manager) Andy Sharp (Interim Service Director-Street Services)

processing food waste in an Anaerobic Digestion plant are significantly less than the cost of processing food waste in an Energy for Waste facility.

Plymouth City Council has stated in the Corporate Plan that creating a "green sustainable city that cares about the environment" is one of its priorities. On 18 March 2019, at a meeting of the City Council, councillors unanimously voted to declare a Climate Emergency, making a pledge to make Plymouth carbon neutral by 2030.

To tackle waste in general the government launched the Waste & Resources Action Programme (WRAP) in 2000 which created numerous solutions and research campaigns to not only reduce waste but to create consistent frameworks that could be followed by organisations.

Between November 2021 and March 2022 WRAP were commissioned to conduct a detailed study of Plymouth City Council's future waste and recycling service which included food waste. The report noted (at the time of the study) that the city of Plymouth provided waste and recycling collections to over 123,000 households of around 250,000 people on a fortnightly basis and recommended the implementation of a food waste service. The Council commissioned various studies into looking at implementing food waste which stem back from 2019 when the Environment Act was a bill. At the time many of the solutions offered were cost prohibitive and therefore not implemented.

Stage I: Capital Funding

In January 2024, Defra provided the Council with funding of £1,941,574.00 to procure internal caddies, external kerbside caddies and communal bins. In November 2024 the Food Waste Collection project submitted a Capital Business Case for the procurement of vehicles and containers only.

The approved Capital Business Case was for £2,296,779.95 based on market estimates and an uplift based on estimated supply and demand increases. The Capital Business case expenditure would be from the Defra grant and from service borrowing totalling £355,205.95 (£807.64 in 2024/25, £352,326.25 in 2025/26, £1,879.33 in 2026/27 and £192.73 in 2027/28). The service borrowing was for vehicles and the vehicles decal/livery.

The phase I Business Case had noted two critical financial risks because of long procurement timelines for vehicles influencing supply and demand cost indexing. In addition, escalating costs due to market saturation since round 50% of WCAs buying assets at same time from the same suppliers.

The project sought to mitigate that risk by early supplier engagement, benchmarking with peer group local authorities and a robust market intelligence exercise of the vehicle and container market in order to get value for money for the Council. This resulted in a variance of £264,778.01 which will allow the Council expenditure for some elements of the capital costs which will be submitted as a Change Request with the Capital Programme Officers Board.

The Business Case for vehicles and containers was strictly confined to the exact budget lines in the Defra grant although there were other known potential capital costs for:

- A supply of indoor kitchen caddy liners to incentivise resident participation
- 3 sealed tipping containers for Chelson Meadow transfer site
- Site preparation and parking space optimisation works at Prince Rock depot for the additional 10 x 12 tonne bespoke food waste vehicles.
- Food waste bulker vehicles.

The Phase I Business Case was therefore produced with the understanding that there would be a further Business Case to align with the additional funding that was unknown at the time of writing.

Stage 2: Transitional Funding

Stage 2 Transitional funding of £570,158.95 for the distribution of containers, project management costs, procurement fees and communications was received in March 2025.

Defra Transitional Funding Budget Line	£
Bin Distribution	£323,013.52
Project Management	£72,000.00
Procurement Fees	£2,000.00
Communications	£173,145.43
	£570,158.95

Table 1: Breakdown of stage 2 Defra Transitional (Revenue) Funding.

Stage 3: The New Burdens Funding

The funding was expected in August 2025 but to date has neither been announced on received. The financial model underpinning this business case is based on a series of well-defined assumptions across staffing, vehicle operations, and waste processing. Salary costs have been calculated using PCC pay scales, inclusive of projected annual uplifts. Vehicle maintenance and fuel costs have been estimated using current market rates and operational data, while haulage and disposal costs reflect estimated ranges of tonnage projections and known gate fees.

The Government has committed to provide New Burdens funding for the ongoing costs of this new Service, but this is yet to be confirmed. For the purposes of finalising this Business Case and in order to secure approval to commence the Service, the yet to be agreed funding has been shown as a balancing amount between the forecasted cost and existing budget. Once the actual Government funding is announced the appropriate budgets can be readjusted.

Assumptions:

PCC Salary Costs and Annual Uplift

- Base Salary Rates: Assume average salary bands for relevant roles (e.g. drivers, collectors, supervisors) based on PCC pay scales.
- Annual Uplift: Apply a standard annual inflationary uplift in line with PCC HR or finance guidance.
- On-Costs: Include employer pension contributions, National Insurance, and other statutory
 costs.
- FTE Assumptions: An estimate number of full-time equivalents (FTEs) required based on service model (number of rounds, estimated time for each round based on estimated participation rates).
- Training & Induction: Includes one-off costs for onboarding and health & safety training.

Maintenance and Fuel Costs for Vehicles

- Vehicle Type: Base assumptions on the type of vehicle used (i.e. 12 tonne food waste collection vehicle).
- Fuel Consumption: Estimate average miles per gallon (MPG) and route mileage per day.
- Fuel Price: Use current diesel rates.
- Maintenance Schedule: Assume manufacturers routine servicing every x miles or months, plus annual MOT and inspections.

Haulage and Disposal

- Tonnages were estimated using average figures derived from WRAP (6,736 tonnes per annum) and the Project's Waste Consultants Frith RM conducted in 2024 (4.483 tonnes per annum)
- 2. Number of collections during phased roll out in 2025/26.

- 3. Distance to Processing Site: Estimate average round-trip mileage.
- 4. Gate Fee: Initial estimation was done using gate fees of £35.

Food Waste and Recycling Rates:

Introducing a separate food waste collection service in Plymouth has the potential to significantly boost the city's household recycling rates. Plymouth's Recycling rate has shown a gradual decline of over the decade. Introducing a food waste collection service could help reverse this trend, as seen in other councils.

Wales, which has had mandatory food waste collection since 2016, now leads the UK with a recycling rate of 65%. Evidence from other UK local authorities shows that recycling rates can increase by 5 to 8 percentage points following the rollout of food waste services, with some areas achieving even greater improvements through strong public engagement and infrastructure investment.

Local Authority	Before (%)	After (%)	Positive Change	Additional Notes
Wales (national)	~43%	65%	22%	Mandatory food waste collection since 2016.
Norwich City CC	~30%	~38%	8%	WRAP interventions: caddy liners, bin stickers, leaflets.
Eastleigh	~35%	~42%	7%	WRAP support.
Derbyshire Dales	~32%	~39%	7%	WRAP-supported rollout;
Wokingham	~45%	~50%	5%	education campaign.
Essex County Council	~50%	~55%	5%	Pilot and comms strategy.
South Oxfordshire	~65%	~70%	5%	High participation
Stroud	~58%	~63%	5%	Strong community engagement.
Mole Valley District	~52%	~58%	5%	WRAP-supported service redesign.

Table 2: Sample of WCAs that have improved recycling rates by introducing a food waste collection service.

For Plymouth, where current rates are below national targets, the implementation of food waste recycling could be a transformative step toward meeting statutory obligations, reducing greenhouse gas emissions, and fostering more sustainable consumption habits across the city.

Proposal: (Provide a brief, concise paragraph outlining your scheme and explain how the business proposal will address the current situation above or take advantage of the business opportunity) **and** (What would happen if we didn't proceed with this scheme?)

This business case is a proposal for the progression to the next stage of a new citywide Food Waste Collection which will commence in.

I. The Scheme: The Food Waste Collection Service Definition

I.I Food Waste

The new food waste collection service will enable the residents of Plymouth to discard food waste in their internal food waste caddies. The following list is of food waste that can be collected:

- All uneaten food and plate scrapings
- Tea bags biodegradable and non-biodegradable accepted
- Coffee grounds
- Out of date or mouldy food
- Raw and cooked meat, including bones

- Raw and cooked fish, including skin and bones
- Shellfish and seafood shells
- Dairy products such as cheese
- Eggs and eggshells
- Rice, pasta and beans
- Baked goods such as bread, cakes and pastries
- Fruit and vegetables, including raw and cooked vegetables and peelings
- Cut flowers
- Pet food waste

1.2 Food Waste Caddies

As part of Plymouth City Council's food waste collection service, two types of caddies have been procured from IPL Plastics (UK) Ltd: a 7-litre internal kitchen caddy and a 23-litre kerbside caddy. These containers have been selected for their durability, usability, and value for money. They are made from 100% recyclable material and can be recycled at the end of life. The caddies are light grey in colour, designed for daily kitchen use and is dishwasher safe and resistant to chemical and biochemical degradation. The external kerbside caddy features a secure, lockable hinged lid to prevent spillage and access by animals. The external caddies have been tested by collectors in a blind test and were unanimously chosen for their ergonomic design that supports safe manual handling for the Council's Street Services team. Plymouth City Council has procured IPL Plastics (UK) Ltd which supplied the same caddies to Cornwall Council, South Ham District Council and West Devon Borough Council. A roll of caddy liner bags will be issued along with the delivery of the caddies to each household. WRAP research evidence points to a link between the use of liners and higher participation, and an initial supply will hopefully help remove any barriers to initial use. Residents will then have the choice of purchasing liners in future or presenting food waste loose within the caddies if preferred.

Fig 1. Plymouth City Council's 7 litre (internal) kitchen caddy and 23 litre kerbside caddy supplied by IPL Plastics (UK) Ltd (as featured on Plymouth Live).



1.3. Communal bins in flatted properties and Houses in Multiple Occupation

Communal waste facilities will be provided for flats, clusters of flats, housing estates, and houses in multiple occupation. Each designated collection point will include a 140-litre communal bin positioned alongside existing residual and recycling containers to ensure consistent and accessible waste management



Fig 2: 140 litre food waste communal bins.

The project is expecting 20-30% lower participation rates in flatted properties. Therefore, creating visually compelling and community-authored artwork for communal food waste bins in flats will play a powerful role in encouraging recycling and shifting behaviours. Acting as both an educational tool and an emotional prompt. Thoughtfully designed art transforms otherwise overlooked infrastructure into engaging landmarks that foster pride, awareness, and action.

1.4 Food Waste Vehicles

To support the operational delivery of Plymouth's statutory food waste collection service, the Council has procured 10 x 12-tonne food waste collection vehicles from Terberg Matec, a specialist manufacturer of municipal waste handling equipment⁴. These vehicles are engineered to meet WRAP technical specifications and are optimised for the collection of organic waste in urban environments. Each unit features a fully sealed, leak-proof body to prevent leachate discharge and odour, and is equipped with a slave bin lift mechanism compatible with 23-litre kerbside caddies and communal bins. The vehicles are designed for low payload, high-frequency collection, with a typical daily capacity of up to 3 tonnes and are fitted with hydraulic compaction systems to maximise load efficiency. Additional features include onboard weighing, telematics integration, and side guard protection systems, ensuring compliance with safety and environmental standards. The fleet will be based at Prince Rock Depot, with infrastructure upgrades underway to accommodate secure parking and maintenance.



Fig 3: An example of a bespoke Terberg Matec food waste truck (for illustration only).5

⁴ An example of a food waste vehicle can be viewed at "Food & Bio Waste (terbergmatec.co.uk)"

1.5. Prince Rock Depot Site Preparation

To accommodate the new fleet of 10 12-tonne food waste vehicles, Prince Rock Depot will undergo essential site preparation and infrastructure upgrades. This includes the demolition of a redundant training suite, resurfacing of the yard, and reconfiguration of the space to enable secure parking, manoeuvrability, and maintenance access for the vehicles. These works are critical to ensuring operational readiness ahead of the phased rollout in early 2026. The estimated cost of the site preparation is £150,000-£200,000 and has been included in the Change Control Request for the virement of funds from the phase I Business Case which will be presented to CPOG in October 2025.

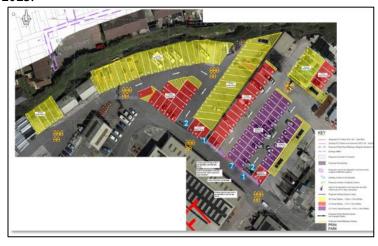


Fig 4: Drone schematic site plan showing proposed site optimisation at Prince Rock depot.

2. The Business Proposal:

This business proposal aims to provide a food waste collection service by using the stage 2 revenue funding to create a food waste collection service. The revenue elements include:

- Public Engagement and Behavioural Change Programme: A robust community engagement and behavioural change programme to drive participation.
- Resourcing for the service: collectors, drivers and team leaders
- Vehicle Maintenance: The ongoing costs associated with vehicle maintenance and fuel.
- Disposal: Onward disposal costs.
- Capital borrowing repayment.

1.1 Public Engagement & Behavioural Change Strategy

As part of stage 2 funding Defra has provided £173,145.43 for Communications. The success of the food waste collection service depends not only on operational readiness but also on public understanding, participation, and sustained behavioural change.

The campaign will use multi-channel communications including printed materials, social media, and community events to inform residents about the new service and its environmental benefits. Recycling Officers will play a key role in face-to-face engagement, roadshows, briefings, school talks, attending local events and providing practical guidance.



Fig 5: An Al generated image to demonstrate a public facing food waste collection roadshow in a mall.

Behavioural change will be supported through nudges such as bin stickers, reminder cards, and positive reinforcement. Messaging will be tailored to different housing types and communities, with accessibility and inclusion at the forefront.

Early engagement with councils who have been successful in increasing their food waste participation rates has shown that face to face engagement and door knocking were very effective in getting the public to participate in food waste recycling.⁶

Plymouth is a community centred city and fertile ground for engaging with groups, volunteers and communities who are invested in community issues in general but also specifically climate change related issues. A significant amount of public engagement intelligence exists internally, the project has included an early engagement exercise Natural Infrastructure Projects and Partnership colleagues, Community Empowerment Programme, Net Zero Team, the volunteer teams, Green Champions, Wellbeing Hubs and Family hubs. As a result, an extensive stakeholder database. Stakeholder workshops have taken place and will continue in the 6 months prior to launch.

Feedback mechanisms and Key Performance Indicators (KPIs) will be built in to monitor participation and adapt the strategy as needed. The goal is to achieve high initial uptake, reduce contamination, and embed food waste recycling as a routine behaviour across Plymouth. Measurement of the efficacy of the public engagement will be critical throughout the engagement programme. A soft launch of the public engagement commenced in 2024 and will commence in earnest from November 2025.

1.2 Route Design & Route Risk Assessment

The new food waste collection service in Plymouth will operate across 9 rounds, carefully overlaid onto the existing residual and recycling routes to ensure consistency and ease for residents. This means households will continue to present either their brown bins (residual waste) or green bins (recycling) on their usual collection day, with food waste collected alongside. To support this rollout, the Street Services team conducted an extensive route risk assessment, evaluating each round for safety, accessibility, and operational efficiency. This included analysing road layouts, traffic flow, bin placement, and crew safety to ensure the incoming food waste collection software is accurately configured for reliable service delivery. In addition, the project team is launching Bartech Municipal Technologies route mapping software, which will use the food waste project as a foundation for route optimisation. The software enables real-time tracking, data-driven scheduling, and efficient resource deployment, helping the council streamline operations and improve service quality across waste collection rounds.

Food Waste Collection Project Revenue Business Case Author Rachel Hawadi (Senior Project Manager) Andy Sharp (Interim Service Director-Street Services)

⁶ Oxford Council saw a 72% better engagement by door knocking to get users to participate in a food waste survey compared to 2 percent in an online survey at a Larac Food Waste Southern Conference held of 4 September 2024. In contrast, in a Teams meeting with Portsmouth council on *remaining residents*. I 2 September 2024 the council did not undertake public engagement, and their participation rate has not changed significantly.

In addition, the service is working to implement BARTEC's Domestic Waste Management system, with the food waste collection service being among the first to benefit from new in-cab technology, enhanced communication mechanisms and in-depth reporting solutions to provide business insights. BARTEC's system will help drive operational efficiencies, streamline reporting, improve staff feedback mechanisms and enable data-driven service improvements across all waste streams.

1.3 Phased Roll out

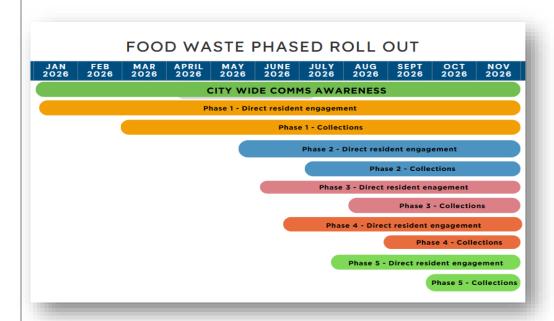


Fig 6: Food waste collection service phased roll out proposal.

To ensure a smooth and effective implementation, the food waste collection service will be introduced through a phased rollout. Phase I will begin early in 2026 with direct engagement with residents, followed by the distribution of food waste caddies. Collections will commence in early March 2026. This will be followed by a reflective period, allowing the Council to manage operational complexities and refine processes. Phase 2 will launch in mid-May 2026, again starting with resident engagement and caddy distribution, with collections beginning in July 2026.

Phases 3 to 5 will follow the same structure as the earlier phases, with a continued focus on infrastructure, staffing, communications, and community engagement. This phased approach will enable the service to scale up in a controlled and responsive manner.

Phase I of the roll out is a carefully selected cluster of areas which has been chosen to represent a diverse mix of property types, including varying levels of accessibility, socioeconomic conditions, flatted properties, and Houses in Multiple Occupation (HMO). The food waste collection service has been designed to align with existing collection days to avoid disruption to current waste services. In designing the service, it was essential that the introduction of food waste collections did not require changes to established schedules and routes. During phase I the project team and collection crew will have a dedicated period to address any collection anomalies, resident feedback, analyse trends and other emerging factors in a controlled environment. This approach will enable the project team to gather valuable insights before progressing to subsequent phases.

During the phased roll out the Operations team will build up the number of drivers and crews focussing on recruiting, onboarding, and training crews and then building up to a full roll-out of the throughout the summer of 2026. The funding of the food waste collection crew will be financed by the New Burdens Funding.

1.4 Food Waste Container Operations

The current rate of missed bins vs scheduled collections is roughly 0.13% across residual, recycling, and optional garden waste collections This amounts to around 700 missed collections per month across all waste streams.

Given the weekly frequency of food waste collections and the average time taken by residents to report a missed bin, providing this service drastically reduces the benefit to residents that comes from providing a missed bin service. Instead, residents will be encouraged to present their bins on the next scheduled collection day if they believe a collection has been missed and missed bin reports will be used to drive crew behaviour and service improvements.

The service is also in the process of introducing a new domestic waste management system, including more modernised in-cab software and links with our on-board CCTV systems. Coupled with more robust reporting and better insights into crew performance this will help make reviewing reported service failures easier and more efficient. This new system will give Crews the ability to log more detailed premise-level events regarding non-compliance, giving us detailed insights into resident behaviour. This intelligence will help drive direct, efficient public engagement and communications to inform residents what's gone wrong and how they can rectify this in future, driving behavioural change.

1.5 Resourcing

To support the successful delivery of the project, additional resources have been allocated, and further recruitment is underway to strengthen both operational and engagement efforts. A Project Manager has been appointed to coordinate bin distribution logistics and assist with public engagement and communications, while 2 Recycling Officers have been recruited specifically to support public engagement activities. 2 Team Leaders will also be hired to oversee operational delivery and support crews across nine service rounds, each staffed by one driver and two loaders. For Phase I rollout, 2 drivers and 4 loaders will be recruited, scaling up to 9 drivers and 18 loaders once the full service is operational. Since the nine rounds run from Monday to Thursday, a full team of nine drivers and eighteen loaders is required to maintain service delivery.

The resourcing for project delivery will be:

- Senior Project Manager
- Project Manager
- Recycling Officers

The Resourcing for Operations will be

- 2 x Team Leaders
- 10 x Drivers
- 20 x Collectors
- Business Support Officer

1.6 Waste Transfer Site (Chelson Meadow)

After collection, food waste will need to be transported to a waste transfer site to be kept in a sealed container. Early analysis and comparison of Prince Rock Depot and Chelson Meadow as potential sites favoured the usage of Chelson Meadow. Prince Rock had the disadvantage of not having a working weighbridge, vehicle congestion with current refuse fleet and the relative amount of work required to make the site fit for purpose. The Change Control Request to CPOG has made a

provision for small works like re-enforcing and sealing the floor to protect it from food waste leachate which has the potential to be acidic and corrosive.

1.7 Anaerobic Digestion Site

From the waste transfer site, the food waste will be transported to an anaerobic digestion site where food waste is broken down into renewable energy.

Anaerobic digestion is bio-renewable energy process through which bacteria break down organic matter such as animal manure, wastewater biosolids, and food waste in the absence of oxygen. Anaerobic digestion takes place in a sealed vessel called a reactor. These reactors contain complex microbial communities that break down the waste and produce resultant biogas and digestate. Digestate is the residual material left after the digestion process which can be made into nutrient rich fertilizers, compost and as foundation material for bio-based products (e.g., bioplastics).

The process releases biogas, (mainly a mixture of around 60% methane and 40% carbon dioxide) which can be used directly to provide heat, power or transport fuel. Biogas can also be purified by removal of the carbon dioxide to produce biomethane, which can be fed directly into the public natural gas grid in the same way as natural gas or used as a vehicle fuel. These gases when not treated in an AD site become part of the Greenhouse Gases contributing to climate change.

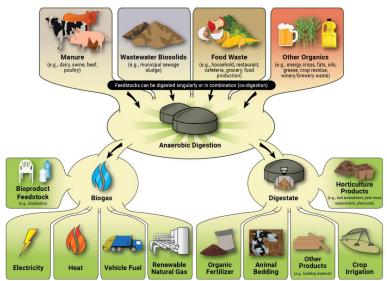


Fig 7: The Anaerobic Digestion process used to produce nutrient rich slurry (fertilizer for plants), biogas, heat and electricity from food waste.

Why is this your preferred option: (Provide a brief explanation why this option is preferred) and (Explain why this is a good capital investment and how this would be an advantage for the Council) and (explain how the preferred option is the right balance between the risks and benefits identified below).

This option aligns with government priorities and legislation. Furthermore, this option is preferred because it supports the delivery of the Council's Corporate Priorities and Net Zero Action Plan.

Option Analysis: (Provide an analysis of **'other'** options which were considered and discounted, the options considered must be a 'do Nothing' and 'do minimum' and 'viable alternative' options. A SWOT – Strength, Benefit, Opportunity, Threat analysis could be attached as an appendix).

	, , ,
Do Nothing Option	Do not deliver a Citywide Domestic Food Waste Collection Service
List Benefits:	Maintain status quo
	To not have disruption to current services and routes
	To not have to re-configure space to allow for additional vehicles at
	Prince Rock Depot.
	Not commit to further service borrowing

List Risk / Issues:	Inadequate funds in service borrowing to cover shortfall in estimated capital expenditure. Reputational risk of non-compliance Potential fines from central Government Public outrage and noncompliance from Environmental groups
	Negative Media coverage.
Cost:	Potential fines
Why did you discount	The "Do-Nothing" option is discarded because it would expose the
this option	council to significant reputational risk. Recycling food waste is also aligned with the Plymouth Net Zero Action Plan.
Do Minimum Option	To implement a food waste service that allows residents to "opt-in" if they want to participate.
List Benefits:	The Council would not be providing caddies and bins which would be unused. The Council would not have excess food waste drivers and loaders. The Council would not be in danger of over procuring vehicles. The Council would not have staff doing rounds with little or no collections. The Council would not have to recruit excess staff or staff with very little to do.
List Risk / Issues:	Reputational risk of non-compliance. Potential fines from central Government Public outrage from environmental groups. Negative media coverage.
Cost:	Lower cost but may result in fines
Why did you discount	The option was discounted because it is not aligned with Defra's
this option	expectations, lacks integrity and is not aligned with Plymouth Net Zero Action plan. It would expose the council to a reputational risk of being challenged by the media and The Green communities for lacking integrity.

Strategic Case:	
Which Corporate	Fewer potholes, cleaner, greener streets and transport
Plan priorities does	Green investment, jobs, skills and better education
this project deliver?	·

Milestones and Date:			
Contract Award Date	Start On Site Date	Completion Date	
10 Food Waste Collection Vehicles (Terberg-Matec) 7 March 2025	31 December 2025	Ongoing	
126,000 internal kitchen caddies (7-litre) IPL Plastics (UK) Ltd 13 August 2025	19 th January 2026	August 2026	

I03,000 external kerbside caddies (23-litre) IPL Plastics (UK) Ltd I3 August 2025	19th January 2026	August 2026
Distribution of container IPL Plastics (UK) Ltd 13 August 2025	19th January 2026	August 2026
Supply of food waste kitchen caddy liners. (Planned date December 2025)	January 2026	August 2026
Supply of communal bin vinyl wraps (Planned date December 2025)	January 2026	August 2026
Treatment of food waste in an Anaerobic Digestion Plant. (Planned Date March 2026)	March 2026	March 2027

SECTION 2: PROJECT RISK, OUTCOMES AND BENEFITS

Risk Register: The Risk Register/Risk Log is a master document created during the early stages of a project. It includes information about each identified risk, level of risk, who owns it and what measures are in place to mitigate the risks (cut and paste more boxes if required).

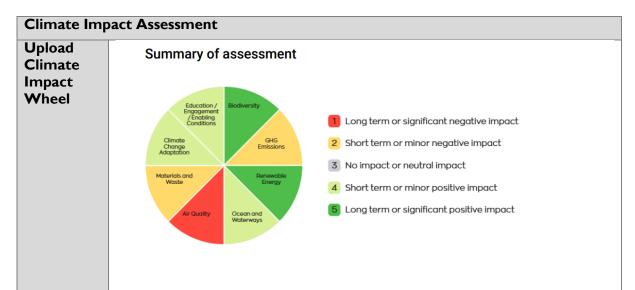
	Risks Identified	,	. ,	Likelihood	•	Overall Rating
Risk	A negative public reaction to a food waste service which could be deemed as a "waste of money" and or unnecessary.			High	High	High
Mitigation	,			Medium	Medium	Medium
Calculated	risk value in £	£25,000	Risk Owner	Andy Sharp	(Interim S	Service
(Extent of	financial risk)			Director-St	reet Servi	ces)
Risk	Lack of space to accommodate a waste transfer site and food waste vehicles and containers at Prince Rock Depot.			Medium	High	Medium
Mitigation	To undertake ea	ırly site planning	to accommodate	Medium	Low	Medium
	other projects, departments and assets currently in the Depot or planned.					
Calculated	risk value in £ £60,000 Risk Owner			Martin Hoai	(Interim	Head of
(Extent of	financial risk)		Environmen Street Servi	•	tions-	
	T				1	
Risk	There is a risk of a shortfall from the New Burdens Funding.			Medium	Medium	Medium
Mitigation	_		ancial Plan, a case was hat the Defra Stage 3	Low	Low	Low

Food Waste Collection Project Revenue Business Case Author Rachel Hawadi (Senior Project Manager) Andy Sharp (Interim Service Director-Street Services)

			nd to avoid a situation			
	•	•	ory service was unde			
	funded a budget of £500k was allocated. At this stage,					
	with no indicati					
	· ·		the amount we wi			
			etween pre-approve	d		
	budgets and the					
	risk value in £	£600K	Risk Owner	Andy Sharp	•	
(Extent of	financial risk)	2026/27,		Director-S	treet Servi	ces)
		£800K 2027/28.				
		£800 K				
		2028/29				
		2020/27				
Risk	There is a risk o	of low participati	ion rates.	Medium	Medium	Mediun
Mitigation			ramme covering socia		Low	Low
			gagement, engagemen	t		
alandata d	with third party	sector. £47,000	Risk Owner	Chris Parso		
	risk value in £ inancial risk)	£47,000	Kisk Owner	(Communi		ı
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SECTION 3: CONSULTA	ATION		
Does this business case need to go to CMT	Yes	Date business case approved by CMT (if required)	14 October 2025
Did a mandate go via CPOG/CPB	No	Date Capital Mandate approved by CPB	N/A

Does this project involve a corporately maintained property Yes/No		
Details of impact of this	Prince Rock Depot: Parking space optimisatio	n to enable the
project ie cost saving food waste vehicles to park at the depot.		
from this project or		
additional requirements		



Summary of the anticipated impact of the proposal on the climate (including any proposed mitigations and impacts beyond 2030)

Fig 8: Climate Impact Assessment Wheel for the Food Waste Collection Project.

The Plymouth Food Waste Collection Service represents a pivotal step in the city's commitment to climate resilience and sustainability. Mandated by the Environment Act 2021, this initiative is designed not only to meet legislative requirements but also to deliver substantial environmental benefits across multiple domains.

By transitioning food waste away from incineration and toward anaerobic digestion, the project significantly reduces greenhouse gas emissions. Incineration contributes to over 14 million tonnes of CO_2e annually in the UK, whereas anaerobic digestion has the potential to cut emissions by up to 30 million tonnes per year if scaled nationally. Although the introduction of diesel-powered collection vehicles will temporarily increase emissions, the plan includes transitioning to electric or hydrogen vehicles in future procurement cycles.

The project also enhances biodiversity by transforming food waste into nutrient-rich compost and biogas, which support soil health and pollinator habitats. This approach mitigates the environmental degradation associated with unmanaged food waste, including habitat destruction and water pollution. Compared to incineration, anaerobic digestion produces fewer hazardous by-products and significantly reduces the risk of toxic runoff into aquatic ecosystems.

In terms of air quality, the short-term reliance on diesel vehicles may lead to increased NOx and particulate emissions. However, this impact is being actively

mitigated through strategic planning, including the selection of a local anaerobic digestion site and future investment in cleaner vehicle technologies.

The allocated DEFRA funding for vehicle procurement was not sufficient for the operational requirement within Plymouth to purchase Electric vehicles at the time of purchase deadlines, the requirement for suitable infrastructure was not a consideration within the funding, which to convert the current depot was considerable. Current high costs of these vehicles would be prohibitive to budgets and not bring value for money to the Council. Future consideration once infrastructure and suitable alternatives are available can be reviewed with future procurement.

The materials and waste strategy includes the use of 100% recycled plastic caddies, which have a lower carbon footprint than virgin plastics. While the distribution of over 200,000 containers presents a plastic footprint risk, this is being addressed through a robust public engagement campaign aimed at maximising participation and proper usage.

Renewable energy generation is a core benefit of the anaerobic digestion process. The biogas produced will be converted into electricity and fed into the national grid, contributing to a closed-loop sustainability cycle and reducing reliance on fossil fuels. Public education and engagement are central to the success of this initiative. The project includes roadshows, school programmes, collaboration with green communities, and targeted media campaigns. These efforts aim to foster climate awareness and encourage behavioural change across Plymouth's diverse communities.

Leadership support is essential to ensure the success of this initiative. Investment in infrastructure, strategic procurement, and sustained public engagement will be key to maximising the climate benefits and securing long-term sustainability for Plymouth.

Confirm you have engaged (All business cases must be discuss submission to CPOG. If Procurement the procurement route, CPOG may CPB for approval)	Yes		
Who have you consulted wi	ith in Procurement/ who	Gosia Anthony (Procurement	
is your Procurement lead?		Lead)	
		27160	
	Where an existing contract is to be used could you		
include the contract title ar	nd reference number		
Procurement route		munication artefacts using DELT	
options considered	Shared Service.		
(Procurement Officer			
to complete this section only)			
Recommended No further procurement activ		vity required.	
Procurement route		-	
(Procurement Officer			
to complete this section only)			

Which Members have you engaged with and how have they been consulted (including the Leader, Portfolio Holders and Ward Members)

- Cllr. Tom Briars Delve: Regular engagement at portfolio meetings throughout the process.
- Cllr. Jemima Laing: -a meeting at the Council House to explain the project and to furthermore get advice on

Food Waste Collection Project Revenue Business Case Author Rachel Hawadi (Senior Project Manager) Andy Sharp (Interim Service Director-Street Services)

guidance on which communities to engage with and the approach the project should take.
 Cllr Sally Haydon: a Teams meeting with Cllr Sally Haydon to seek advice and guidance on engaging with Plymouth Community Homes and to share the tenets of the Food Waste Project's Public Engagement Strategy.
 All ward Councillors will be engaged in the future before the phased roll out commences and throughout the process.

Confirm you have taken necessary Legal advice, is this proposal State Aid compliant, if yes please explain why.	Yes, at the beginning of the project with the approval of the phase I Business Case.
Who is your Legal advisor you have consulted with?	Alison Critchfield (Assistant Head of Legal Services)

Equalities Impact Assessment completed (This is a working document which	Yes
should inform the project throughout its development. The final version will need to be	
submitted with your Executive Decision)	

SECTION 4: FINANCIAL ASSESSMENT

FINANCIAL ASSESSMENT: In this section the robustness of the proposals should be set out in financial terms. The Project Manager will need to work closely with the capital and revenue finance teams to ensure that these sections demonstrate the affordability of the proposals to the Council as a whole.

CAPITAL COSTS AND FINANCING								
Breakdown of project costs including fees surveys and contingency	Prev. Yr.	25/26 £	26/27 £	27/28 £	28/29 £	29/30 £	Future Yrs.	Total £
Total capital spend	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

Breakdow n of proposed funding	25/26 £	26/27 £	27/28 £	28/29 £	Future £	Total £
Total funding	0.00	0.00	0.00	0.00	0.00	£0.00

S106 or CIL (Provide Planning App or site numbers)	S106 for the costs associated with demolishing outbuildings in Prince Rock Depot and creating a parking area for vehicles but was informed that this was not appropriate.
Which alternative external funding sources been explored	N/A
Are there any bidding constraints and/or any restrictions or conditions attached to your funding	N/A
Tax and VAT implications	N/A
Tax and VAT reviewed by	N/A
Will this project deliver capital receipts? (If so please provide details)	N/A

REVENUE COSTS AND IMPLICATIONS					
Cost of Developing the Capital Project (To be incurred at risk to Service area)					
Total Cost of developing the project	£0				
Revenue cost code for the development costs	4055				
Revenue costs incurred for developing the project are to be included in the capital total, some of the expenditure could be capitalised if it meets the criteria	N				
Budget Managers Name	Andy Sharp (Interim Service Director-Street Services)				

	25/26 £	26/27 £	27/28 £	28/29 (Ongoing)	Total £
	~	~	~	£	~
Service area revenue cost					
Bin Distribution	64,603	258,411	0	0	323,014
Communication	50,000	123,145	0	0	173,145
Procurement	1,000	1,000	0	0	2,000
Project Management	72,000	98,338	0	0	170,338
Staff Costs	74,102	959,683	1,384,487	1,408,821	3,827,093
Vehicle Op. Costs	13,092	148,283	185,329	190,870	537,574
Haulage & Disposal Costs	1,766	137,755	216,852	227,695	584,068
Service Borrowing	196	85,550	86,006	86,052	257,804
Total Revenue Cost (A)	276,759	1,812,165	1,872,674	1,913,438	5,875,036

	25/26 £	26/27 £	27/28 £	28/29 (Ongoing) £	Total £
Service area revenue benefits/savings					
Revenue saving (Removal of food waste from residual waste)	4,895	381,778	600,990	631,040	1,618,703
Total Revenue Saving (B)	4,895	381,778	600,990	631,040	1,618,703
Service Area net (benefit) cost (A-B)	271,864	1,430,387	1,271,684	1,282,398	4,256,333
Funding					
DEFRA Funding - Transitional Grant	187,603	382,556	0	0	570,159
DEFRA Funding - New Burdens	0	600,000	800,000	800,000	2,200,000
Revenue budget	250,000	500,000	500,000	500,000	1,750,000
Total Funding	437,603	1,482,556	1,300,000	1,300,000	4,250,159
Service area net (benefit) cost	(165,739)	(52,169)	(28,316)	(17,602)	(263,826)

(Н	(Н					
Author of Business Case	Date	Document Version	Reviewed By	Date		
Rachel Hawadi	21/8/2025	v 1.0				
			Martin Hoar (Interim Head of Environmental Operations-Street Services	28/10/2025		
		v 2.0	Alison Critchfield (Head of Legal Services)	29/10/2025		
		v 3.0	Oliver Woodhams (Head of Finance)	29/10/2025		
		v 4.0	Andy Sharp (Interim Service Director-Street Services)	30/10/2025		

SECTION 5: RECOMMENDATION AND ENDORSEMENT

Recommended Decision

It is recommended that the Council's Cabinet:

Approves the Revenue Business Case and associated phased roll out of for Plymouth City Council's Household Food Waste Collection service.

Reasons:

- a) Statutory Compliance: The Food Waste Collection Project is a legislatively driven initiative and aligns with national legislation and Defra requirements for separate food waste collections in England by 1st of April 2026.
- b) Supports the Council's Climate Emergency Action Plan and Net Zero targets.
- c) Empowers residents to reduce waste and improve recycling habits which will increase Plymouth's recycling rate
- d) Diverts food waste from residual waste streams, reducing disposal costs over time.

Cllr Briars Delve		Glenn Caplin-Grey, Str	Glenn Caplin-Grey, Strategic Director			
Either email dated: Date: 30/10/2025		Either email dated:	Date 30/10/2025			
Or signed:		Signed:				
Date:		Date:				



EQUALITY IMPACT ASSESSMENT - [FOOD WASTE PROJECT]

SECTION ONE: INFORMATION ABOUT THE PROPOSAL

Author(s):	Rachel Hawadi	Department and service:	Street Services	Date of	14 October
This is the person completing the EIA template.				assessment:	2025
Lead Officer:	Andy Sharp	Signature:	A. Sharp	Approval	18 October
Head of Service, Service Director, or Strategic Director.	(Interim Service Director Growth)			date:	2025
Overview:	household Food Waste Collection by the Department for Environing caddie, a kerbside caddie and a conformation however have the option to particular collections and utilise current p	mpact Assessment (EIA) accompon Service to all residents of Plyment, Food & Rural Affairs (Defraommunal bin for flats, clusters of ficipate in the food waste collection ractices for assisted collections at that underpins the project there	outh by I April 2026. The project). The Council is obliged to prolats, Houses in Multiple Occupation service. The project will overlass requested by residents. As pass	t is legislatively d vide all residents on (HMO), and es y existing residua art of the public	riven and funded with an internal states. Residents I & recycle waste engagement and
Decision required:	Collection service. Reasons: a) Statutory Compliance: The requirements for separate b) To commence phase I of a component the Council's C d To empower residents to r	Food Waste Collection Project is a langular domestic food waste collections in Each of the food waste collections in Each of the food waste collection service in each of the food waste and improve recycling langular residual waste streams, reducing dis	egislatively driven initiative and align ingland by 1st of April 2026. early March 2026. Het Zero targets by introducing a foc nabits which will increase Plymouth's	s with national leg od waste collection	islation and Defra

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SECTION TWO: EQUALITY IMPACT ASSESSMENT SCREENING TOOL

Potential external impacts:	Yes		No	No
Does the proposal have the potential to negatively impact service users, communities or residents with protected characteristics?				
Potential internal impacts:	Yes		No	No
Does the proposal have the potential to negatively impact Plymouth City Council employees?				
Is a full Equality Impact Assessment required? (if you have answered yes to either of the questions above then a full impact assessment is required and you must complete section three)	Yes	Yes	No	
If you do not agree that a full equality impact assessment is required, please set out your justification for why not.				

SECTION THREE: FULL EQUALITY IMPACT ASSESSMENT

	Evidence and information (e.g. data and consultation feedback)	Adverse impact	Mitigation activities	Timescale and responsible department	
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Age **Plymouth**

- 16.4 per cent of people in Plymouth are children aged under 15.
- 65.1 per cent are adults aged 15 to 64.
- 18.5 percent are adults aged 65 and over.
- 2.4 percent of the resident population are 85 and over.

Southwest

- 15.9 per cent of people are aged 0 to 14.
- 61.8 per cent are aged 15 to 64.
- 22.3 per cent are aged 65 and over.

England

- 17.4 per cent of people are aged 0 to 14.
- 64.2 per cent of people are aged 15 to 64.
- 18.4 per cent of people are aged 65 and over.

(2021 Census)

Protected Characteristic: Age is explicitly considered in the assessment.

Assessment Findings:

- The service is designed to be inclusive of all age groups, from young families to older adults.
- No adverse impacts were identified for any specific age group.
- The Council acknowledges that older residents may face mobility challenges, and younger residents (e.g. students or young professionals in shared housing) may need tailored communication.

Participation in the service will require residents to present a kerbside container for collection. The Council will also provide a kitchen caddy that the resident can use to collect waste and transfer contents into the larger kerbside caddy.

Whilst participation in the Responsible service will be voluntary the Department: Council clearly want to ensure everyone can use it. Residents struggle with presentation of waste will be able to access the Assisted Waste Collection scheme and Senior Project application process will be amended to accommodate this Communications new service.

Older Adults (65+)

- Offer assisted collection services.
 - Providing printed materials and in-person support through door knocking and the use of Recycling Officers.
- Collaborating with Age UK and local care networks.

Young People (Under 18)

- School-based education programmes.
- Youth-friendly materials and interactive campaigns.
- Collaboration friendly campaigns.
- Collaborate with Age UK and local care networks.

Operations Manager and Street Services Team.

Manager, and Recycling Officers

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Older Adults (65+) Older people may struggle with lifting and transfer of the waste. They may not also have access to all the social media communications and information on when their bins will be available. Higher likelihood of living alone or with mobility issues.	 Working-Age Adults (18–64) Flexible communication (e.g. evening webinars, social media). Workplace outreach and community champions.
Young People (Under 18) There could be barriers because of a limited understanding and interest of food waste recycling.	
 Working-Age Adults (18–64) Time constraints due to work or caregiving responsibilities. Lack of awareness or engagement. 	

Care experienced individuals

(Note that as per the Independent Review of Children's Social Care recommendations, Plymouth City Council is treating care experience as though it is a protected characteristic). It is estimated that 26 per cent of the homeless population in the UK have care experience. In Plymouth there are currently 7 per cent of care leavers open to the service (6 per cent aged 18-20 and 12 per cent of those aged 21+) who are in unsuitable accommodation.

The Care Review reported that 41 per cent of 19–21-year-old care leavers are not in education, employment or training (NEET) compared to 12 per cent of all other young people in the same age group.

In Plymouth there are currently 50 per cent of care leavers aged 18-21 Not in Education Training or Employment (54 per cent of all those care leavers aged 18-24 who are open to the service).

There are currently 195 care leavers aged 18 to 20 (statutory service) and 58 aged 21 to 24 (extended offer). There are more care leavers aged 21 to 24 who could return for support from services if they wished to.

Care experienced individuals may face:

Mistrust of institutions due to past experiences in the care system. Reduced access to services because of limited social networks or support. Barriers to engagement stemming from trauma, instability, or lack of tailored communication.

No adverse impacts are anticipated from this decision,

However, targeted engagement will need to take place as.

- The project cannot assume care experienced individual have stable home environments or cooking facilities. This can exclude careexperienced individuals who may live in temporary accommodation or lack kitchen access.
- Young people in care may have additional safeguarding protocols that limit spontaneous involvement.
- If care-experienced voices aren't involved in planning, the project may not reflect their needs or interests.

 Include care-experienced young people in co-design and feedback loops.

 Offer flexible, low-barrier ways to participate (e.g. drop-in sessions, mobile kitchens, anonymous surveys). Senior Project Manager

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Disability	Disability	9.4 per cent of residents in Plymouth have their activities limited 'a lot' because of a physical or mental health problem.12.2 per cent of residents in Plymouth have	Protected Characteristic: Disability is explicitly addressed in the assessment.	Protected Characteristic: Disability is explicitly addressed in the assessment.	In line with roll out of the Service in 2026.
		their activities limited 'a little' because of a	Assessment Findings:	Assessment Findings:	
		physical or mental health problem (2021 Census)	The service may present challenges for some disabled residents, particularly those with mobility impairments, visual impairments, or cognitive disabilities.	The service may present challenges for some disabled residents, particularly those with mobility impairments, visual impairments, or cognitive disabilities.	Responsible Department: Operations Manager and Street Services Team.
			The requirement to present a kerbside caddy could be a barrier for individuals who cannot easily carry or move containers.	The requirement to present a kerbside caddy could be a barrier for individuals who	
			Participation in the service will require residents to present a kerbside container for collection. The Council will also provide a kitchen caddy that the resident can use to collect waste and transfer contents into the larger kerbside caddy. Those with physical disabilities may struggle with lifting and transfer of the waste.	cannot easily carry or move containers.	

Gender reassignment	0.5 per cent of residents in Plymouth have a gender identity that is different from their sex registered at birth. 0.1 per cent of residents identify as a trans man, 0.1 per cent identify as non-binary and, 0.1 per cent identify as a trans woman (2021 Census).	Protected Characteristic: Gender reassignment is explicitly listed and considered. Assessment Findings: The service is designed to be inclusive and equitable, with no identified adverse impacts on individuals undergoing or having undergone gender reassignment. The Council commits to ensuring that communications and service delivery are respectful and inclusive of all gender identities.	Not applicable.	Not applicable.
Marriage and civil partnership	40.1 per cent of residents have never married and never registered a civil partnership. 10 per cent are divorced, 6 percent are widowed, with 2.5 per cent are separated but still married. 0.49 per cent of residents are, or were, married or in a civil partnership of the same sex 0.06 per cent of residents are in a civil partnerships with the opposite sex (2021 Census).	Marriage and civil partnership is included in the assessment as required by law. Assessment Findings: The implementation of the food waste service is not expected to negatively impact individuals based on their marital or civil partnership status. The service is designed to be universal and inclusive, with equal access for all households regardless of relationship status.	Not applicable.	Not applicable.

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Pregnancy and maternity	The total fertility rate (TFR) for England was 1.62 children per woman in 2021. The total fertility rate (TFR) for Plymouth in 2021 was 1.5.	Pregnancy and maternity is explicitly considered in the Equality Impact assessment. Assessment Findings: No adverse impacts were identified for pregnant individuals or new parents. The service is designed to be inclusive and accessible to all households, including those with expectant or new mothers.	Mitigation and Support Measures. Kerbside Collection: Residents are required to present a food waste caddy at the kerbside. For those who may struggle (e.g. due to pregnancy or postnatal recovery), assisted collections are available upon request. Kitchen Caddies: Provided to all households to reduce the need for frequent trips outside, which can be helpful for those with limited mobility or caring responsibilities. Inclusive Communication: Outreach materials will be designed to ensure clarity and accessibility for all, including households with young children or expectant parents.	Not applicable.
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Race
In 2021, 94.9 per cent of Plymouth's population identified their ethnicity as White, 2.3 per cent as Asian and 1.1 per cent as Black (2021 Census)

People with a mixed ethnic background comprised 1.8 per cent of the population. I per cent of the population use a different term to describe their ethnicity (2021 Census)

92.7 per cent of residents speak English as their main language. 2021 Census data shows that after English, Polish, Romanian, Chinese, Portuguese, and Arabic are the most spoken languages in Plymouth (2021 Census).

Protected Characteristic: Race is explicitly considered in the assessment.

Assessment Findings:

- The service is designed to be inclusive and accessible to all residents, regardless of racial or ethnic background.
- No adverse impacts were identified specific to race.
- However, the EIA acknowledges that language barriers may affect understanding and uptake of the service among residents whose first language is not English.

Community Engagement:

The behavioural change programme underpinning the rollout will include consultation with diverse communities to ensure cultural sensitivity and relevance.

The project will produce food waste posters with the following non-English Languages

- Polish
- Romanian
- Arabic
- Chinese
- Urdu
- Punjabi

These will be provided in targeted areas, community centres, restaurants, places of worship.

Talks and presentations in targeted areas and events where non-English speakers are spoken to about Food Waste in their native languages where arise.

To attend talks and presentations where people from communities are present and could involve food and dining e.g. Grand BAME Business Conference & Gala, events during Chinese New

From November 2025 until end of roll out.

Responsible Department: Senior Project Manager and Recycling Officers.

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			Year, Ramadan, Holi, International Women's Day, monthly international dinner etc	
Religion or belief	48.9 per cent of the Plymouth population stated they had no religion. 42.5 per cent of the population identified as Christian (2021 Census). Those who identified as Muslim account for 1.3 per cent of Plymouth's population while Hindu, Buddhist, Jewish or Sikh combined totalled less than 1 per cent (2021 Census).	No adverse impacts are anticipated from this decision.	The project will produce food waste posters in English and the following non-English Languages Polish Romanian Arabic Chinese Urdu Punjabi These will be provided in areas of worship (churches, temples, halls, synagogues, mosques etc).	From November 2025 until end of roll out. Responsible Department: Senior Project Manager and Recycling Officers.

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Sex	51 per cent of our population are women and 49 per cent are men (2021 Census).	(m co	ale and female) is explicitly is explicitly insidered in the assessment. Seessment Findings: The service is designed to be equally accessible to all residents regardless of sex. No adverse impacts were identified that would disproportionately affect men or women. The Council commits to inclusive service delivery, ensuring that gender does not affect access to food waste collection.	Assisted Collections: Available for residents who may have physical limitations, which can include gender-related health conditions or caregiving roles often disproportionately held by women. Inclusive Communication: Outreach materials are designed to be gender-neutral and accessible to all. Household Flexibility: The service accommodates various household types, including single-person and multigenerational homes, which may reflect gendered living arrangements.	From November 2025 until end of roll out.
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Sexual orientation	88.95 per cent of residents aged 16 years and over in Plymouth describe their sexual orientation as straight or heterosexual. 2.06 per cent describe their sexuality as bisexual, 1.97 per cent of people describe their sexual orientation as gay or lesbian. 0.42 per cent of residents describe their sexual orientation using a different term (2021 Census).	 Protected Characteristic: Sexual orientation is explicitly listed and considered in the assessment. Assessment Findings: The service is designed to be inclusive and accessible to all residents, regardless of sexual orientation. No adverse impacts were identified that would disproportionately affect lesbian, gay, bisexual, or other sexual minority individuals. The Council commits to ensuring that communications and service delivery are respectful and non-discriminatory. 	 Inclusive Language: All public-facing materials will be reviewed to ensure they are inclusive of diverse sexual orientations. Community Engagement: Outreach efforts will include engagement with LGBTQ+ groups to ensure awareness and participation. Universal Access: The food waste service is available to all households, with no differentiation based on household composition or identity. 	From November 2025 until end of roll out.
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SECTION FOUR: HUMAN RIGHTS IMPLICATIONS

Human Rights	Implications	Mitigation Actions	Timescale and responsible department	
	No adverse impacts are anticipated from this decision.	Not applicable.	Not applicable.	

SECTION FIVE: OUR EQUALITY OBJECTIVES

Equality objectives		Implications	Mitigation Actions	Timescale and responsible department
Work together in promote ed inclusion	n partnership to: quality, diversity and	No adverse impacts are anticipated from this decision.	I.The project will produce food waste posters with the following non-English Languages Polish	

facilitate community cohesion		Romanian	Responsible Department:		
 support people with different 		Arabic	Senior Project Manager and		
backgrounds and lived experiences to get on well together		• Chinese	Recycling Officers.		
to get on wen together		• Urdu			
		Punjabi			
		These will be provided in targeted areas, community centres, restaurants, places of worship.			
		2. Talks and presentations in targeted areas and events where non-English speakers are spoken to about Food Waste in their native languages where arise.			
		3. To attend talks and presentations where people from communities are present and could involve food and dining e.g. Grand BAME Business Conference & Gala, events during Chinese New Year, Ramadan, Holi, International Women's Day, monthly international dinner etc			
Give specific consideration to care experienced people to improve their life outcomes, including access to training, employment and housing.	No adverse impacts are anticipated from this decision.	Not applicable.	Not applicable.		
Build and develop a diverse workforce that represents the community and citizens it serves.	No adverse impacts are anticipated from this decision.	Not applicable.	Not applicable.		
Support diverse communities to feel confident to report crime and anti-social behaviour, including hate crime and hate incidents, and work with partners to	No adverse impacts are anticipated from this decision.	Not applicable.	Not applicable.		

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ensure Plymouth is a city where		
everybody feels safe and welcome.		



Plymouth Food Waste Service Collection Service

Project details

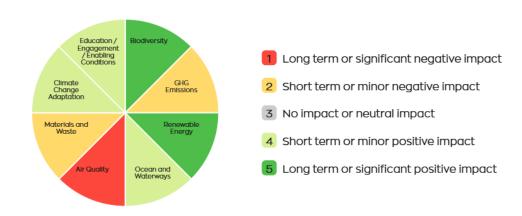
Assessment author

Rachel Hawadi

Project summary

The project is a legislatively driven initiative in accordance with section s45A of the Environment Act 1990 brought into legislation by The Environment Act 2021. The implementation of a city-wide food waste service is mandatory and scheduled to be implemented by 1 April 2026

Summary of assessment



Assessment scores

Biodiversity

Score

(5) Long lasting or extensive positive impact

Score justification

Bio Diversity 5

Positive impact of removing food waste: Climate Impact on Biodiversity



Introducing a food waste collection service supports biodiversity by reducing the volume of organic waste that would otherwise be improperly disposed of. When food waste is collected and treated through composting or anaerobic digestion, it can be transformed into nutrient-rich outputs such as compost or biogas. These outputs contribute to healthier soils and cleaner energy, which in turn support plant growth and reduce environmental stressors. By encouraging responsible food waste management, the service helps protect habitats, supports pollinator populations, and reduces the presence of harmful substances in natural ecosystems.

The project also has indirect impact on Biological Diversity in the following ways.

- 1. Habitat destruction and land use change. Growing and producing food requires a significant amount of land, water, and other resources. When food is wasted, all those resources go to waste as well. This land use change can lead to the destruction of natural habitats. This project will in the long term encourage people to change their consumption which originally leads to food waste but also to recycle food which can then be used for manure, renewable fuel to encourage biodiversity.
- 2. Water pollution: Food waste can pollute water sources. When food waste is dumped it decomposes and produces methane gas, which can seep into nearby water sources and contaminate them. Food waste can also contain harmful chemicals and pesticides that can pollute water sources and harm aquatic life. Anaerobic digestion significantly alters the chemical composition of food waste. Volatile fatty acids (VFAs), proteins, and lipids are broken down by microbial consortia into simpler compounds like methane, carbon dioxide, and digestate. Ammonia and hydrogen sulphide, which can be toxic in high concentrations, are produced but typically managed through process control. Digestate, the solid and liquid residue, contains fewer harmful organic compounds than raw food waste and can be used as fertilizer if properly treated. By treating food waste in this way there is a greater chance of a flourishing ecosystem that encourages biodiversity.
- 3. Loss of pollinators: Pollinators such as bees, butterflies, and birds are essential for maintaining plant biodiversity and food production. However, food waste can reduce the number of pollinators by destroying their habitats and reducing the availability of food sources. In addition, food waste can also contain harmful chemicals that can harm pollinators and other beneficial insects.

At present food waste goes to Energy for Waste. Energy for Waste facilities often require significant land area, which can lead to the destruction or fragmentation of natural habitats that support pollinators like bees, butterflies, and hoverflies. Incineration-based EfW plants may emit pollutants such as nitrogen oxides, particulate matter, and heavy metals. These can settle on nearby vegetation, potentially affecting the health of pollinators and the plants they rely on. Energy for Waste facilities with large paved or industrial surfaces can increase local temperatures, which may alter flowering times or reduce the availability of nectar and pollen.

By creating a food waste collection service, the amount of uncontrolled food waste can eliminate this issue.

GHG Emissions

Score

(2) Short term or limited negative impact

Score justification

Untreated food waste alone generates about 8% - 10% of global greenhouse gas emissions. Most of Plymouth's food waste goes to the Energy for Waste plant. UK EfW facilities emitted approximately 14.4 million tonnes of CON equivalent (MtCON e)n 2022, accounting for 3.5% of the UK's net annual territorial GHG emissions. About 50% of the waste processed in EfW plants is biogenic (e.g. food, paper), which can be considered carbon-neutral. The remaining fossil-based portion (e.g. plastics) contributes to net GHG emissions. Anaerobic digestion can reduce net CON e emissions by up to 30 million tonnes per year in the UK if scaled properly. There will be emissions from food waste vehicles which have been estimated at 568 tCO2e/year based on mileage of existing waste collections.

Renewable Energy

Score

(5) Long lasting or extensive positive impact



Score justification

First, the food is separated from its packaging and to further sort plastic packaging/polymer type. The food is converted to energy using the anaerobic digestion process which generates heat, biogas (biomethane) and electricity. The electricity generated is fed into the national grid. What is left after the anaerobic digestion process is pasteurised into a nutritionally rich slurry and used as organic fertiliser. This process will be critical for producing a closed loop sustainability cycle.

initially diesel trucks will be used which will increase the use of fossil fuels in the short term but that the plan would be for them to be replaced with EV trucks at the next scheduled replacement of the fleet.

Mitigatory measures applied:

To ensure that there are contractual KPIs to demonstrate sustainability outputs from the Anaerobic Digestion process which will be delivered by a third party. Ocean and Waterways Score:

Ocean and Waterways

Score

(4) Short term or limited positive impact

Score justification

Incineration process at the Energy for waste plant produces toxic ash and airborne pollutants (e.g. dioxins, heavy metals) that can settle into water bodies via atmospheric deposition or runoff from ash Leachate from storage or disposal of incineration residues can contaminate groundwater and surface water if not properly managed. Incineration does not remove microplastics from food packaging. These can enter waterways if waste is mismanaged before incineration. Marine debris and plastic pollution are exacerbated by poor segregation and pretreatment of food waste streams. Incineration also destroys organic nutrients that could otherwise be recycled, reducing the potential for soil improvement and nutrient retention that helps prevent runoff into waterways.

The processing of food waste via an Anaerobic Digestion process minimizes the release of nutrients and organic pollutants into water systems by stabilizing waste and producing digestate that can be safely used as fertilizer if treated properly. It supports nutrient cycling, reducing the need for synthetic fertilizers that often contribute to eutrophication in aquatic ecosystems. AD systems can however accumulate microplastics from contaminated food waste, which may enter soils and potentially leach into waterways if digestate is not properly filtered or treated. It should be noted however that advanced mitigation strategies (e.g. biochar, filtration) are being developed to address this risk.

Compared to incineration, AD produces less hazardous waste and is less likely to contribute to toxic runoff or leachate that harms aquatic life.

Air Quality

Score

(1) Long lasting or severe negative impact

Score justification

This project is likely to increase the number of diesel-powered waste vehicles on the road which is negative. Emissions of particular concern are NOX and particulates. NOX emissions arise primarily as nitric oxide (NO) which is rapidly oxidised to nitrogen dioxide (NO2). At high ambient concentration levels, NO2 has health impacts on sensitive people. Particulates arise from diesel vehicles and contain a mixture of soot, unburned fuel and hydrocarbon compounds produced during incomplete combustion. They are now the major source of grime in towns and cities throughout the UK. Air Quality in Plymouth is monitored and deemed to be overall "good". Adding an additional 10 diesel vehicles will add to the deterioration of air quality but at in incremental and insignificant level.



The allocated DEFRA funding for vehicle procurement was not sufficient for the operational requirement within Plymouth to purchase Electric vehicles at the time of purchase deadlines, the requirement for suitable infrastructure was not a consideration within the funding, which to convert the current depot was considerable. Current high costs of these vehicles would be prohibitive to budgets and not bring value for money to the Council. Future consideration once infrastructure and suitable alternatives are available can be reviewed with future procurement.

Mitigatory measures applied:

- 1. Procuring an Anerobic Digestion Site within close proximity to reduce the impact of using Diesel vehicles.
- 2. Procuring some or all electrical waste vehicles in the future when the market matures and infrastructure technology is competitive.
- 3. Cost v Benefit Analysis on procurement of hydrogen vehicles.

Materials and Waste

Score

(2) Short term or limited negative impact

Score justification

Food Waste Material:

Indicative food waste studies conducted in 2022 by a "Local Partnerships" study estimates a yield of a little over 10,000 tonnes per annum of food waste for Plymouth in 2026/2027. Frith RM Consultants working with the project estimated in 2024 food waste for Plymouth to be around between 4,483 tonnes (FRM 'top down) to 6,736 tonnes (WRAP yield). The food waste project would mean that in due time (depending on participation rates) the tonnage of food waste going to the Energy for Waste plant will be taken to an Anaerobic Digestion site which will produce slurry that goes back to the earth as fertilizer for plants and for renewable energy to be produced.

Plastic Footprint:

There is however a plastic footprint disbenefit of providing more than 200,000 plastic containers where potentially 60-80% may not be used for food waste recycling. This will be mitigated by a robust public engagement exercise to increase participation.

Plastic Lifecycle:

Environmental Performance of IPL Plastics Caddies: The Council has awarded a contract to IPL Plastics UK Ltd to supply its internal and external caddies. According to the IPL the caddies produced for PCC are produced from 100% recycled material and can be recycled at the end of life. In producing the caddies they produced 85% less GHG emissions from recycled plastics compared to virgin plastics.

66,500+ tonnes CO2 (equivalent) avoided, equivalent to powering over 13,000 homes for a year. Emission factors for IPL's recycled PP and HDPE are lower than DEFRA's closed-loop plastic benchmark

Liners:

Residents have the choice to use the initial "compostable" liners at the beginning of the roll out of the food waste collection service. In the future residents have the choice to use supermarket plastic bags, newspapers or nothing to collect their food waste. The Climate impact assessment of the different choices are:

Compostable Bioplastics (e.g. PLA, PBAT blends)

Made from renewable resources like corn-starch or sugarcane.

Designed to break down in industrial composting or anaerobic digestion (AD) facilities. Lower GHG emissions compared to conventional plastics.

Risk: If not certified or properly processed, may contaminate compost or digestate.

Conventional Plastics (e.g. HDPE, LDPE)



Durable and cheap but non-biodegradable. Can introduce microplastics into soil if not removed before composting or AD. Higher carbon footprint due to fossil fuel origin and poor end-of-life outcomes.

Paper Liners or Newspaper

Biodegradable and compostable. Low embodied carbon. May lack durability or leak resistance.

Climate Change Adaptation

Score

(4) Short term or limited positive impact

Score justification

Food waste recycling plays a critical role in climate adaptation by reducing greenhouse gas emissions and enhancing the resilience of urban systems. When food waste is processed through anaerobic digestion it prevents the release of methane—a potent greenhouse gas—and instead generates renewable energy or nutrient-rich soil amendments. This not only mitigates climate impacts but also supports sustainable agriculture and urban greening initiatives. By embedding food waste recycling into local infrastructure and behaviour change campaigns. Plymouth can reduce their carbon footprint, improve waste system efficiency, and foster community-level climate resilience.

Mitigatory measures applied:

By continuously consulting with the Net Zero Delivery Team throughout the life cycle of the project.

Education / Engagement / Enabling Conditions

Score

(4) Short term or limited positive impact

Score justification

This project is not just a technical delivery to meet legislative requirements. At the heart of the success of the project is winning the hearts and minds of the public through a robust, well managed, consistent, informed educational campaign. The message will likely need to be novel, innovative and collaborative and have long term climate awareness beyond food waste. Public engagement will begin with learning lessons from other local authorities on what has and has not worked well in the past. This will be followed by a steady messaging vehicle to include.

- 1. Roadshows
- 2. Engagement and collaboration with Green communities
- 3. A school's programme
- 4. Videos
- 5. Targeting all social Media platforms
- 6. Leaflets
- 7. Press articles

The overarching achievement of the education programme is to raise awareness of climate change and to change personal behaviour and personal responsibility towards climate change.

Mitigatory measures applied:

- 1. Research what has worked.
- 2. Collaboration.
- 3. To have champions in problem areas.
- 4. To have recycling officers.

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- 5. To undertake a through stakeholder Analysis.6. To understand stakeholder needs thoroughly.

Cabinet



Date of meeting: 20 October 2025

Title of Report: Plymouth City-wide All-age Unpaid Carers Strategy 2025 -

2027

Lead Member: Councillor Mary Aspinall (Cabinet Member for Health and Adult Social

Care)

Lead Strategic Director: Gary Walbridge (Strategic Director for Adults, Health and

Communities)

Author: Kate Lattimore, Karlina Hall & Mark Collings,

Contact Email: Mark.collings@plymouth.gov.uk

Your Reference:

Key Decision: No

Confidentiality: Part I - Official

Purpose of Report

To update Cabinet on the development and implementation of the Plymouth City-wide All-age Unpaid Carers Strategy.

Recommendations and Reasons

I. To endorse the strategy and ongoing activity to support unpaid carers in Plymouth. Reason: The city-wide carers strategy is essential because it establishes a clear framework for addressing the needs of unpaid carers, who play a critical role in supporting the health and well-being of others.

Alternative options considered and rejected

1. This is an update on the Carers Strategy no alternative options to consider

Relevance to the Corporate Plan and/or the Plymouth Plan

Policy HEA3: Supporting carers (unpaid/paid, adult/child) to carry out their caring role and have a full life outside of caring. Statutory duties to support carers.

Corporate Plan: Keeping Children, Adults and Communities safe.

Implications for the Medium Term Financial Plan and Resource Implications:

No further implications to the committed budget for Carers Support Services.

Financial Risks

No financial risk other than the already committed budget for Carers Support Services contracts

Legal Implications

Noting the statutory duty to support carers, this initiative appears to be sound and beneficial in that respect.

Carbon Footprint (Environmental) Implications:

None.

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

* When considering these proposals members have a responsibility to ensure they give due regard to the Council's duty to promote equality of opportunity, eliminate unlawful discrimination and promote good relations between people who share protected characteristics under the Equalities Act and those who do not.

The Carers Strategy, by nature, protects people with protected characteristics and ensures their needs are considered. In supporting carers, their needs are identified and given support to meet these needs such as their wellbeing, and access to welfare benefits,.

Appendices

*Add rows as required to box below

Ref.	Title of Appendix	Exemption Paragraph Number (if applicable) If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.						
		ı	2	3	4	5	6	7
Α	Briefing: Plymouth City-wide All-age Unpaid Carers Strategy 2025 – 2027							
В	Presentation							
С	Plymouth City-wide All-age Unpaid Carers Strategy 2025 – 2027							

Background papers:

Please list all unpublished, background papers relevant to the decision in the table below. Background papers are <u>unpublished</u> works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	Exemption Paragraph Number (if applicable)							
	If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.							
	ı	2	3	4	5	6	7	

Sign off:

Fin	OW. 25.26. 094	Leg	LS/44 52(10)/RH/ 2111 25	Mon Off	N/A	HR	N/A	Asset s	N/A	Strat Proc	N/A
Originating Senior Leadership Team member: Louise Ford											

^{*}Add rows as required to box below

Please confirm the Strategic Director(s) has agreed the report? Yes

Date agreed: 26/11/2025

Cabinet Member approval: Cllr Mary Aspinall approved by email

Date approved: 26/11/2025



PLYMOUTH CITY-WIDE ALL-AGE UNPAID CARERS STRATEGY 2025 – 2027

Strategic Co-operative Commissioning



I. EXECUTIVE SUMMARY

Plymouth City-wide All-age Unpaid Carers Strategy 2025 – 2027, brings together partners across the Plymouth health and social care system in a commitment that aims to ensure the City is a place where unpaid carers are recognised and valued for the incredible and hard work they do. Our vision is a community where carers are recognised and valued as essential partners in care, their contributions acknowledged, and their needs addressed. The strategy was co-created by Plymouth City Council, Livewell Southwest, University Hospitals Plymouth, St Luke's, and Improving Lives Plymouth in partnership with unpaid carers whose voice is at its heart and who were instrumental in helping to set the priorities.

The Plymouth City-wide All-age Carers Strategy is a public document that outlines a clear set of priorities and commitments for supporting unpaid carers across the city. This strategy addresses the needs of carers of all ages and backgrounds, ensuring that everyone who provides unpaid care has access to the support and resources they need. By detailing specific priorities, the strategy aims to create a more inclusive and caring environment for all individuals dedicated to supporting others. It reflects Plymouth's commitment to recognising and valuing the critical role that unpaid carers play in the community.

Six priorities are identified with related action plans created to ensure delivery, as follows:

1. Improved access to support services that work for carers (including young carers)

To enhance carers' access to a comprehensive range of support services, including occupational therapy and community-based resources, while improving service coordination, communication, and responsiveness.

Specific actions include Reduce general assessment waiting times; Increase responsiveness and maintain direct communication with carers

2. Enhanced financial support so carers have better access to support and information on financial matters and rights

To alleviate the financial burden on carers by helping them access available resources, grants, income support, and workplace flexibility.

Specific actions include Increase carers' access to financial support resources; Promote flexibility and understanding within employment settings

3. Improved health, safety and wellbeing of unpaid carers (emotional and psychological support)

To support carers' mental and emotional wellbeing through access to trusted support systems, counselling, peer support, tailored breaks, and safeguarding.

Specific actions include Develop trusted local support systems for carers; improve access to counselling and mental health support

4. Early identification and recognition of unpaid carers

To increase recognition of unpaid carers' contributions, create platforms for advocacy, and ensure their inclusion in decision-making processes.

Specific actions include Implement carer awareness programmes across Plymouth; include carers in decision-making processes

5. Improved information, advice and communication

To ensure that carers have clear, accessible information on available resources, support services, and care pathways, tailored to diverse needs

Specific actions include Develop user friendly online platforms; create and distribute comprehensive, easy-to-understand caregiving guides

6. When your caring role changes - supporting carers during transitions

To support carers through the emotional and practical changes of transitioning out of their caregiving role, providing guidance on rebuilding their lives and fostering social connections.

Specific actions include Provide emotional support and coping resources; encourage social connections and community engagement.

The full and detailed action plans against each priority contain timelines, action owners and outcome indicators.

By focusing on improved access to support services, enhanced financial assistance, effective communication amongst the other areas, we strive to alleviate the burdens faced by carers and foster an environment where they can thrive.

2. BACKGROUND

The 2021 census identified 23,956 unpaid carers living in Plymouth, with 44 per cent providing up to 19 hours of unpaid care per week. More women than men are carers, with the highest number in the 50-59 age group. The 2024 school census also found 730 young carers across both primary and secondary schools.

3 in 5 people in the UK will become carers at some point in their lives due to advances in healthcare treatment, an ageing population, changes in patterns of illness, systemic problems in social care sector and the move towards increased community-based care; all this means that awareness and support for carers is vital. Although many people are willing and happy to undertake a caring role for lovedones, data such as the annual GP survey reveal that carers are disadvantaged in comparison to the general population in terms of their health and wellbeing. Carers are also often disadvantaged in employment and financially. We know that carers are more likely to suffer depression, anxiety and stress and nearly two-thirds of carers have a long-standing health condition. The impact is often exacerbated by carers being unable to find the time for their own medical check-ups or treatment. Personal relationships can also suffer, and carers are more likely to be socially isolated, both at work and in their personal lives. The economic value of carers - Carers UK estimate that care provided by friends and family saves the state £132 billion each year in, the equivalent of another NHS.

With the average cost per week for a care home place being £600, and £800 for a nursing home place, carers help to ensure that the cared for person can remain living in their own home.

3. WHY HAVE A STRATEGY?

Having a city-wide carers strategy is essential because it establishes a clear framework for addressing the needs of unpaid carers, who play a critical role in supporting the health and well-being of others. This strategy helps to:

Recognise Contributions: It acknowledges the invaluable work that unpaid carers do every day, often without formal recognition or compensation.

Promote Inclusivity: By covering carers of all ages and backgrounds, the strategy promotes inclusivity, ensuring that no group is overlooked or underserved.

Guide Decision-Making: It serves as a reference for policymakers, helping to ensure that decisions affecting carers are made with their best interests in mind and to ensure that we are meeting our statutory duties. Our main duties are as part of the Care Act 20214 and the Children's and Families Act.

4. FINANCIAL IMPLICATIONS AND RISK

Plymouth City Council invests annually £632,860 for the delivery of the commissioned adult carers service. It will invest approximately £115,200 for the in-house young carers service and £116,715 for the commissioned service from The Children's Society in 2025/26. Adult Social Care, that is delivered by Livewell Southwest, also supports some unpaid carers as part of its duties under the Care Act. Last financial year, £198,409 was also spent on respite services that allow carers to take well-earned break from caring duties. £63,725 against a Budget of £119,599 has been spent this year so far.

As mentioned above the economic value of carers bring is huge, - Carers UK estimate that care provided by friends and family saves the state £132 billion each year in, the equivalent of another NHS. The economic risk to the Council to deliver the Strategy is minimal because the investments listed here will be held within existing budget values. Priority 2, above, Enhanced Financial Support, does not mean the Council will provide additional funding but will provide access to guidance, support and information to ensure income maximisation for unpaid carers.

5. NEXT STEPS

The partners that wrote the strategy have created an action implementation plan that will deliver the priorities and associated objectives and outcomes. Deliverance is reported to the Plymouth Carers Strategic Partnership Board. A Researcher in Residence from the Health Determinants Research Collaborative (HDRC) will be supporting with the creation of a monitoring and evaluation framework that will provide evidence to determine the effectiveness and impact of the Strategy.



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PLYMOUTH ALL AGE UNPAID CARERS STRATEGY

SUPPORTING
CARERS,
STRENGTHENING
COMMUNITY

















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SUPPORT FROM **OUR LOCAL LEADERS**



We are delighted to present our first all-age unpaid carers strategy that acknowledges the invaluable contributions of unpaid carers in the Plymouth community. This document outlines our joint commitment to supporting carers over the next three years, detailing key priorities and steps for achieving them.

Our strategy builds on past successes, pinpoints areas for improvement, and includes feedback from carers, local organisations, and community groups. It covers adult carers, young carers up to age 18, and parent carers, but excludes those who work as paid carers.

Our vision is to ensure carers are valued and recognised as pivotal in supporting people needing care across our agencies. Carers should be respected as equal partners in care and actively involved in decision-making related to their caring role. They should have consistent support to continue their caregiving duties if they choose to, while also maintaining their health, well-being, education/employment, and a life outside of caring.





Gary Wallbridge Strategic Director Adults, Health and Communities. Adult Social Care Retained Functions. Plymouth City Council



Michelle Thomas Chief Executive Officer **Livewell Southwest**



Mark Hackett Interim Chief Executive University Hospital Trust Plymouth



David Haley Director of Children's Services Plymouth City Council



Cllr Mary Aspinall Cabinet Member for Health and Adult Social Care. Plymouth City Council



Councillor Jemima Laing Portfolio Holder Children's Social Care, Culture, Comms and Legal Deputy Leader, Plymouth City Council



Chris Morley Local Director Integrated Care Board

We want to ensure young carers are enabled to be children and young people first and foremost and relieved of any inappropriate caring roles, while being involved in decisions relating to their caring role.

Ultimately, we aim to create communities where carers are recognised and valued and where they are neither marginalised nor discriminated against because of their caregiving roles.

CARERS IN THE UK

A carer is anyone who cares, unpaid, for a family member or friend who needs help and support due to illness, disability, a mental health condition or an addiction.

While caring can be rewarding, many carers often put their lives on hold, impacting their health, wellbeing, relationships, education, employment, and finances.

A young carer is a child or young person under the age of 18 who provides care and support to a family member or friend who has a physical illness, disability, mental health condition, or substance misuse issue.

Young Carers often have more responsibilities than their peers and this can impact on their friendships, school attendance and attainment as well as their mental health.

5.7 MILLION

Unpaid carers across the UK according to the 2021 Census



1 in 7 UK workers juggle work and care responsibilities



1 in 3 children in the UK have a parent with poor mental health

£445 MILLION

Carers in England and Wales contribute a staggering £445 million daily to the economy, totalling £162 billion annually (Petrillo and Bennett, 2023).

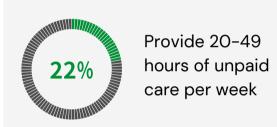
CARERS IN PLYMOUTH

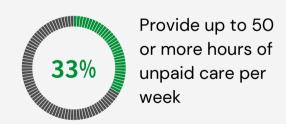


23,956

According to the 2021 Census, there are over twenty-three thousand carers in Plymouth.











In the 2024 School Census in Plymouth there were **730 young carers** identified in primary and secondary schools.



WHAT IS THE PLYMOUTH CITY CARERS STRATEGY?

The Plymouth city-wide all-age carers strategy is a public document that outlines a clear set of priorities and commitments for supporting unpaid carers across the city. This strategy addresses the needs of carers of all ages and backgrounds, ensuring that everyone who provides unpaid care has access to the support and resources they need.

By detailing specific priorities, the strategy aims to create a more inclusive and caring environment for all individuals dedicated to supporting others. It reflects Plymouth's commitment to recognising and valuing the critical role that unpaid carers play in the community.

This strategy aims to create a more inclusive and caring environment for all individuals dedicated to supporting others.



WHY HAVE A STRATEGY?

Having a city-wide carers strategy is essential because it establishes a clear framework for addressing the needs of unpaid carers, who play a critical role in supporting the health and well-being of others. This strategy helps to:

Recognise Contributions: It acknowledges the invaluable work that unpaid carers do every day, often without formal recognition or compensation.

Promote Inclusivity: By covering carers of all ages and backgrounds, the strategy promotes inclusivity, ensuring that no group is overlooked or underserved.

Guide Decision-Making: It serves as a reference for policymakers, helping to ensure that decisions affecting carers are made with their best interests in mind and to ensure that we are meeting our statutory duties.

WHO IS THE STRATEGY FOR?

The strategy was created by members of the Carers Strategic Partnership Board (CSPB) (listed below), who formed a subgroup to research and develop the strategy with input from carers who have first-hand experience.



Unpaid Carers

The strategy is designed for unpaid carers in Plymouth of all ages and backgrounds.



Those who work for carers

It also targets those who are involved in carers-related work within the city.



Carers Strategic Partnership Board (CSPB)

- Carers with lived experience
- University Hospital Plymouth
- Livewell Southwest
- Plymouth City Council (the commissioning body for carers services)
- Caring for Carers (the service provided by Improving Lives Plymouth)
- Time4U Partnership (young carers services delivered by in-house Community Youth Team and commissioned The Children's Society)
- St Luke's Hospice
- Healthwatch
- Other key stakeholders



Other VCSE Organisations

The strategy is also relevant to other interested Voluntary, Community, and Social Enterprise (VCSE) organisations.

HOW WAS THE STRATEGY FORMED?

To develop the carers strategy, a structured process was followed which gathered input from key stakeholders and carers with lived experience. Here's how it was formed:



Task and Finish Group

A Task and Finish subgroup within the Carers Strategic Partnership Board (CSPB) was formed to lead the project. This group was responsible for guiding the strategy's development, ensuring that a wide range of perspectives were considered.



Initial research and statutory guidance

Other carer strategies at local and regional levels were reviewed to understand best practices for developing and promoting the Plymouth strategy. National and local statutory frameworks were also considered to align with broader guidelines. A list of these can be found in the references section at the end of this document.



Collecting feedback through surveys

Feedback was collected through surveys which included (a) our own survey collecting insights from unpaid carers in Plymouth (b) by reviewing the findings from the bi-annual Survey of Adult Carers England (c) from the Plymouth Healthwatch Carers Survey. Findings from these surveys can be found in the Appendices of this document.



Engaging with carers

After reviewing the survey results and setting priorities, a carers engagement group was formed to discuss the findings and refine the strategy. Once the draft was complete, carers reviewed it in another session and suggested final changes. Young carers provided feedback through their existing group sessions. This collaborative approach ensured the strategy reflected the shared vision of all involved, leading to a plan aimed at improving health outcomes.



WHAT HAS CHANGED AND BEEN ACHIEVED SO FAR?

The Carers Strategic Partnership Board (CSPB) has implemented an action plan aimed at delivering key priority areas in collaboration with partners. These priorities align with the Devon Commitment to Carers. The following summarises achievements over the past two years:

1. Identification and Recognition of Carers

Plymouth has made significant strides in identifying and recognising carers. A Primary Carer Network (PCN) project has been created to support GP Practices to become more carer aware, including the identification of carer champions in each practice. A guide for identifying and supporting carers in general practice (GP) has been developed and trialled. Since the project began, the number of registered carers has increased across the three participating PCNs, with some appointing carer champions to advocate for them.

A carers passport, created in partnership with Livewell Southwest, University Hospitals Plymouth (UHP), Plymouth City Council (PCC), St. Luke's Hospice, and Caring for Carers, is actively promoted and distributed. This passport ensures great recognition within each organisation of carers and also provides benefits for them.

Key digital information has been updated on partner websites, including the Plymouth Online Directory (POD) and the Livewell Southwest website. In addition, Caring for Carers was chosen as a pilot service for the Carers Trust's virtual offer to carers and both Livewell Southwest and UHP have officially committed to supporting carers by adopting the Devon Commitment to Carers.

Carer awareness training has also been delivered to partners in domiciliary care, Dignity in Care, and Supported Living provider forums, building stronger connections with carers' services.

2. Effective Information and Support for Carers

To ensure effective information and support for carers, several key initiatives have been implemented in Plymouth. A hospital-based carers service has been established at Derriford Hospital in partnership with Devon Carers and Cornwall Carers. This service aims to improve carer recognition, encourage their involvement in patient care discussions, and facilitate smoother patient discharge process. The service also promotes support that is available to carers whilst in hospital with their cared for. Carer awareness training has been provided to relevant teams, and assessment documents now include a question about carer involvement.

A new policy for carer breaks has been launched, with updates to the Plymouth Online Directory to reflect the latest available services in Plymouth and beyond. Additionally, a joint bid has been submitted to the Department of Health and Social Care's Accelerating Reform Fund to explore options for supporting unpaid carers in taking breaks that are tailored to their needs.

For young carers, a re-commissioning process was carried out using co-design methods, leading to a new contract starting in June 2024. These efforts highlight the ongoing commitment to providing better information and support for carers across the Plymouth area.

3. Ensuring carers' voices are heard and can influence change

University Hospitals Plymouth (UHP) is leading a Carers
Ambassadors Partnership Group.
Livewell Southwest, Caring for
Carers and St Lukes will be
supporting the delivery of this
group.

Additionally, a Plymouth young carer participated in the national NHSE Health Champion programme and participates in the national Young Carer Festival.

4. Supporting carers experiencing changing roles, increased vulnerability, or key life transitions

Funding from the Carers Trust enabled the successful implementation of an innovative Young Adult Carers service, which has operated effectively over the past year and will continue for the next year, with funding now from Plymouth City Council.

OUR 6 PRIORITIES IN SUMMARY

Improved access to support services that work for carers

- Enhanced financial support helping carers to have better access to support and information on financial matters and rights
- Improved health, safety and wellbeing of unpaid carers (Emotional and Psychological support)
- Improve early identification and recognition of unpaid carers
- Improved information, advice and communication
- 6 Support for when your caring role changes

PRIORITY 1 - IN MORE DETAIL



IMPROVED ACCESS TO SUPPORT SERVICES THAT WORK FOR CARERS (INCLUDING YOUNG CARERS)

Carers told us they will benefit from improved access to a comprehensive range of support services such as, occupational therapy and community-based resources. We are committed to:

- reducing general assessment waiting times.
- enhancing coordination between services to build individual plans of support.
- Improving communication and information sharing between services including healthcare and social care services.

Furthermore, increasing the responsiveness of all agencies and services ensuring timely follow-ups and maintaining direct communication (including reminders). Also recognising the caregiver's role will significantly aid in the effective scheduling and attending of appointments.

Young carers, in particular, face unique challenges that require more targeted help.
They need access to resources through their educational settings including peer support and short breaks to minimise the impact of their caring role on their academic and personal development.

The Family Hubs and Wellbeing Hubs are available to support greater access to networks of support around young people and their families. The young carers service will integrate their offer into the Family Hubs and other community settings.

PRIORITY 2 - IN MORE DETAIL



ENHANCED FINANCIAL SUPPORT

Helping carers to have better access to support and information on financial matters and rights

We recognise the need to alleviate the financial strain of caregiving. Carers require increased assistance with accessing caregiving-related expenses, additional grants and income maximisation. These financial supports can help cover the costs associated with caregiving, reducing the economic burden on carers. We are committed to working closely with the Department for Work and Pensions (DWP) to deliver this priority.

Additionally, flexibility in employment, supported by employers, plays a significant role in reducing financial stress. By allowing carers to balance their work responsibilities with their caregiving duties, this flexibility helps them maintain their income while providing necessary care, thereby improving their overall financial stability and well-being.

Young Carers are more financially disadvantaged compared to their peers. Those entitled to claim carers allowance from the age of 16 should be supported to do so. Any financial support offered to Young Carers should also take into consideration the needs of their entire household.



PRIORITY 3 - IN MORE DETAIL



IMPROVED HEALTH, SAFETY AND WELLBEING OF UNPAID CARERS

(emotional and psychological support)

We recognise the significant emotional toll of caregiving, and our priorities are to:

- Support carers to develop robust local and trusted support systems
- · Signpost to access counselling as needed
- Build and promote peer support groups
- Provide accessible helplines
- Improve access to services that provide tailored breaks for carers
- Ensure all parties take responsibility to safeguard carers

Addressing the mental health needs of carers is critical for preventing burnout, fostering resilience, and promoting overall wellbeing. Ensuring that these resources are readily available and easy to access will help carers maintain their emotional and psychological health, enabling them to continue their vital caregiving roles.

Caring for individuals with dementia or cognitive impairments presents unique challenges, including managing behavioural issues and facilitating effective communication. There is a critical need for improved support and resources tailored to dementia care, equipping carers with the tools and knowledge necessary to navigate these complexities effectively.

It is also essential to **protect young carers** from taking on inappropriate caregiving responsibilities. Ensuring they are not overwhelmed by tasks beyond their capacity is vital for their physical, emotional, and educational well-being.

By providing adequate support and intervention, we can help young carers focus on their education, and social development, ensuring they grow up in a nurturing and safe environment. This approach not only safeguards their immediate health and well-being but also promotes their long-term success and happiness.

PRIORITY 4 - IN MORE DETAIL



IMPROVED EARLY IDENTIFICATION AND RECOGNITION OF UNPAID CARERS

Unpaid carers seek greater recognition for their invaluable contributions. This involves establishing platforms where carers, including young carer communities, can share their experiences and advocate for their needs, including raising awareness programmes. It is crucial to acknowledge their pivotal roles in supporting families and communities.

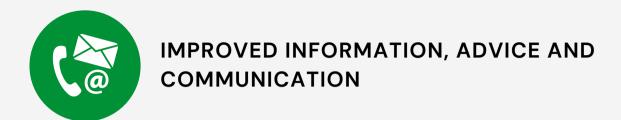
In Plymouth we recognise carers as essential members of the care team and ensuring their inclusion in decision-making processes is fundamental to fostering a supportive and inclusive caregiving environment. By amplifying their voices and addressing their concerns, we can enhance awareness, support networks, and advocacy efforts that benefit all carers.

We need to raise awareness of young carers in educational, health and social care settings, communities and across other partners to proactively promote carers, and young carer-friendly communities that can identify and support their caring role at the earliest point.

We will also apply the '10 Wishes' developed by the Young Safeguarders for young carers (see <u>plymouthscb.co.uk</u>). The 10 wishes audit tool will be completed to determine the commitment from each agency in relation to each wish from the perspective of young carers.



PRIORITY 5 - IN MORE DETAIL



Carers told us they need clear and easily accessible information on available resources, support services, and care pathways.

In response, we are committed to:

- Developing user-friendly online platforms
- Creating and distributing comprehensive, easy-to-understand caregiving guides
- Expanding offline support options such as printed materials, helplines, and community outreach initiatives
- Providing information in carers' first languages
- Ensuring carers who are digitally challenged can access services and support
- Offering information for young carers through various channels, including relevant social media platforms

Centralised information hubs will consolidate resources and offer clear guidance on available support services, accompanied by trusted recommendations. Additionally, we will develop more user-friendly guides and resources to help carers, especially those less familiar with digital tools, navigate care options effectively.

Consistent communication from healthcare providers and local councils is essential. By improving the flow of information, we will empower carers to make informed decisions and access the support they need.

PRIORITY 6 - IN MORE DETAIL



WHEN YOUR CARING ROLE CHANGES

Supporting carers when their caring role changes or ends is crucial for helping them transition to a new phase of life. This period can be emotionally challenging as carers adjust to the changes or to life without caregiving responsibilities. It is important to review their situation to address emotional needs and provide coping mechanisms, including signposting to age-appropriate bereavement support when necessary

Practical assistance, such as guidance on financial planning and employment opportunities, can also help carers rebuild their lives. Additionally, fostering social connections and encouraging participation in community activities can prevent feelings of isolation and promote a sense of purpose beyond caregiving.

By recognising and addressing the unique challenges carers face after their role ends, we can support them in navigating this significant life transition with resilience and positivity.

For **young carers**, planned and supported transitions across key stages, such as moving from school to adulthood, are essential in empowering them to pursue their aspirations and goals.

By providing support, guidance, and resources, we can ensure young carers transition smoothly into adulthood while achieving their ambitions. It is important to offer accessible information on ageappropriate activities that support their social, emotional, physical, and educational development, both for young carers and their support networks.

HOW WILL WE KNOW IF WE ARE MAKING A DIFFERENCE?

To ensure our strategy is making a difference in the lives of carers, we will develop a local performance dashboard to measure progress and achievements against a range of indicators aligned to the strategy's' priorities. Throughout, co-production opportunities with carers will be explored to help deliver the outcomes. Progress will be monitored and reviewed by the Carers Strategic Partnership Board (CSPB) to identify areas for improvement and celebrate success.

Key measures of our impact will include:



1. Carer feedback and satisfaction

- Regular surveys and feedback sessions with carers to gauge their satisfaction with the support and services provided.
- Establishing a Carer Voices Partnership Group to provide ongoing input and recommendations.



2. Access to services

- Monitoring the number of carers accessing support services, including respite care, financial assistance, and health services and whether these carers are representative of the local population e.g. age, ethnicity etc.
- Evaluating the timeliness and effectiveness of these services through carer feedback and service data.



Health and wellbeing

- Assessing improvements in carers' physical and mental health through regular check-ins and surveys.
- Tracking the utilisation of mental health and counselling services.

MAKING A DIFFERENCE CONTINUED...



4. Financial Assistance

- Measuring the impact of financial support on carers' economic wellbeing including young carers and their families.
- Monitoring the uptake of financial assistance programs and grants.



5. Awareness and recognition

- Tracking the increase in the number of carers identified and registered with local services and whether these carers are representative of the local population e.g. age, ethnicity etc.
- Evaluating the effectiveness of awareness campaigns and training programs for healthcare providers and employers.
- Quality Assurance of training and evaluation of the impact.



6. Education, employment and training

- Assessing the skills, capacity and support provided to young carers in educational settings and its impact on their attendance and attainment.
- Assessing support provided to young carers by employability services to improve the numbers of young carers in education, employment or training.
- Monitor support offered by employers to working carers.

MAKING A DIFFERENCE CONTINUED...



7. Engagement in carer specific activities

- Measuring the participation of carers in community activities and support groups.
- Evaluating the inclusivity, accessibility and age-appropriate community programs designed for carers.



8. Policy and systematic changes

- Tracking changes in national and local policies and practices that affect carers.
- Assessing the integration of carer support into health and social care systems.

By systematically measuring these aspects, we will be able to demonstrate the positive impact of the Carers Strategy on the lives of carers in Plymouth and ensure that their contributions are recognised and valued.

Regular reporting on these measures will be shared with stakeholders and the community to ensure transparency and accountability. Adjustments to the strategy will be made based on the findings to continuously improve the support provided to carers.



CLOSING STATEMENT

In conclusion, the Carers Strategy for Plymouth outlines our commitment to recognising, supporting, and empowering unpaid carers within our community. Unpaid carers play a vital role in maintaining the well-being of many individuals, often at great personal sacrifice. Through this strategy, we aim to provide support, ensuring that carers receive the recognition, resources, and respite they need and deserve.

Our vision is to create a community where carers are valued as essential partners in care, their contributions acknowledged, and their needs addressed. By focusing on improved access to support services, enhanced financial assistance, and effective communication, we strive to alleviate the burdens faced by carers and foster an environment where they can thrive.

This strategy reflects our collective efforts and dedication to making a tangible difference in the lives of carers across Plymouth. We commit to working together collectively in implementing these priorities through an action plan which will be delivered and monitored by the CSPB to ensure carers are at the forefront of our community.

We invite carers and those who support them to stay engaged with us, share their feedback and experiences, and help us continuously improve the support we offer. Together, we can build a more inclusive and caring Plymouth where every carer feels recognised, supported, and empowered.

For more information about this strategy or to offer suggestions or actions to add to the plan, please contact the Joint Commissioning team: jointcommissioning@plymouth.gov.uk or call 01752 307074.

Thank you for your dedication and commitment to making Plymouth a community that cares for its carers.

APPENDIX 1 - FEEDBACK FROM SURVEYS

1. Feedback from our survey to inform the strategy

A survey was distributed to collect insights from unpaid carers in Plymouth. The survey asked what they appreciated, what they found challenging, what was important to them, and what they would like to see in a carer's strategy. 145 responses were received, which helped identify the key priorities to focus on.

In the survey, carers highlighted helpful support including:

- Supportive employers and flexible work options
- Supportive family and friends
- External support from organisations like Caring for Carers, Improving Lives Plymouth, GP, hospice, local groups, and young carers groups
- Feeling privileged to care for loved ones, seeing it as a duty or returning a favour

Carers also told us more about the challenges they face:

- Lack of support (respite services, practical, and mental support)
- Financial struggles and limited access to financial aid
- Balancing home and work
- Emotional toll (isolation, fatigue, anger, depression)
- Difficulty accessing medication, GP, and transport
- Challenges leaving the house
- · Lack of information about available support
- · Not feeling listened to

After receiving four responses from young carers, we repeated the exercise to encourage more participation, resulting in an additional 39 responses which concluded:

- 23% mentioned that their friendships were a positive aspect for them currently.
- 31% expressed challenges related to their mothers, including disabilities, health conditions, separation, and grief.

They also expressed a desire for additional support such as respite care, increased financial assistance, better support tailored to young carers, access to skill-building groups, a helpline for emotional support, counselling or therapy services, and practical advice and assistance.

2. Feedback from the Survey of Adult Carers England (SACE) survey

In addition to the strategy-informing survey, we examined findings from the bi-annual Survey of Adult Carers England (SACE) ASCOF (Adult Social Care Outcomes 2023-24), which sampled adult carers and was published in October 2023.

Key findings are outlined below:

- 365 questionnaires were completed and returned.
- Two ASCOF national indicators improved: Social Contact and Overall satisfaction of carers with social services.
- Carer satisfaction increased by 41% (13.1 percentage points), moving Plymouth from 113th to 11th nationally.
- Three national indicators declined: Quality of life score, inclusion in decisions about the person they care for, and ease of finding information about services.
- Regionally, Plymouth ranks lowest in the proportion of carers included or consulted in decisions, and second lowest in ease of finding service information within the region.

The survey also included free text boxes where carers shared their comments, revealing recurring themes similar to those in the strategy-informing survey. These insights have contributed to identifying priorities and developing a delivery plan.

3. Feedback from the Healthwatch Carers Survey 2024

The report, based on feedback from surveys of unpaid carers in Plymouth and wider Devon area highlights the significant impact of unpaid care on carers' physical and mental health. The findings reveal that unpaid carers face numerous challenges, including reduced working hours, feelings of isolation, and difficulty accessing support services. Many carers report experiencing depression, anxiety, and fatigue. Additionally, administrative tasks further strain their time and energy, while their needs and those they care for are not always adequately met by paid care services.

Carers in Plymouth shared that a lack of proper training, insufficient support from paid care, and the inability to prioritise their own health have worsened their caregiving experience. Over half surveyed had to give up work or reduce hours, with many feeling overwhelmed. A substantial number of carers struggle to access respite care, which limits their personal time and worsens their ability to cope. The report recommends that local authorities and the NHS across Devon commit to improving access to health and social services, develop better support systems for carers, and raise awareness of available resources to ensure carers can sustain both their wellbeing and caregiving duties. These findings havei nformed the priorities and action plan within this strategy.

APPENDIX 2 - GLOSSARY OF TERMS

Carer	A carer is anyone who cares, unpaid, for a family or friend who needs help and support due to illness, disability, a mental health condition or an addiction
CSPB	The Carers Strategic Partnership Board (CSPB) is a group who are working to make things better for unpaid carers. The group includes carers with lived experience, University Hospital Plymouth, Livewell Southwest, Plymouth City Council, Caring for Carers, Time4U Partnership (young carers services), St Luke's Hospice, Healthwatch and other key stakeholders.
ICB	Integrated care board (ICB): is a statutory organisation that brings the NHS together locally to improve population health and care.
Lived experience	Lived experience means the special knowledge and understanding a person gets from their own personal experiences and interactions with different situations, places, or events
LSW	Livewell Southwest CIC
PCC	Plymouth City Council
PCN	Primary Care Network - GP's
SACE	Survey of Adult Carers in England
UHP	University Hospitals Plymouth NHS Trust
VCSE	Voluntary, Community, and Social Enterprise organisations
Young Carer	A young carer is a child or young person under the age of 18 who provides care and support to a family member or friend who has a physical illness, disability, mental health condition, or substance misuse issue.

APPENDIX 3 - REFERENCES

LEGISLATION, GUIDANCE & REFERENCES

The Care Act 2014

An Act to make provision to reform the law relating to care and support for adults and the law relating to support for carers.

One Devon Commitment to Carers

All the health and care organisations under Together for Devon signed up to a Devon-wide Commitment to Carers, based on seven principles.

The Triangle of Care (Carers Trust)

The Triangle of Care is a therapeutic alliance between carers, service users and health professionals. It aims to promote safety and recovery and to sustain mental wellbeing by including and supporting carers.

NICE Quality Standard: QS200 Supporting Adult Carers

NICE Quality Standard QS200, "Supporting Adult Carers": Provides guidelines and recommendations to improve the quality of support for adult carers.

NICE Guidelines: NG150

Supporting Adult Carers NICE Guidelines NG150, "Supporting Adult Carers": Offers comprehensive guidance on best practices and interventions to support adult carers effectively.

NHS Long Term Plan (2019)

The NHS Long Term Plan (2019) outlines goals for the next decade, focusing on improving patient care through prevention, service integration, and technology. It aims to reduce health inequalities, support the workforce, and ensure sustainability by enhancing mental health services, chronic disease management, and digital care solutions.

<u>Supporting people</u>
who provide unpaid
care for adults with
health or social care
<u>needs</u>

This guidance offers practical support for individuals caring unpaid for adults with health or social care needs.

<u>The White Paper –</u> <u>People at the Heart</u> <u>of Care: Adult Social</u> <u>Care Reform (2021)</u>

This white paper sets out a 10-year vision for adult social care and provides information on funded proposals that we will implement over the next 3 years.

Discharge from mental health inpatient settings (January 2024)

This guidance ensures safe, timely transitions from mental health facilities, emphasising coordinated support between health and social care services.

Together for Devon (ICS) Commitment to Carers

The "Together for Devon (ICS) Commitment to Carers" outlines integrated care system strategies and commitments aimed at supporting carers across Devon.

The Children's Act 1989

The Children Act 1989 is key UK legislation that governs childcare and protection, focusing on safeguarding welfare and guiding family court decisions on custody.

<u>Children's and</u> <u>Families Act (2014)</u>

The Children's and Families Act (2014) outlines legal provisions and guidelines concerning children and families in the UK.

Health and Care Act 2022

The Health and Care Act 2022 promotes integration between health and social care services in England, aiming to improve collaboration, patient safety, and local service delivery.

The Care and Support (Assessment) Regulations 2014

The Care and Support (Assessment) Regulations 2014 set out the framework for assessing an individual's needs for care and support in England.

Young Carers (Needs Assessment) Regulations 2015 Care and Support Statutory Guidance

The Young Carers (Needs Assessment) Regulations 2015 require local authorities in England to assess the needs of young carers, ensuring they receive appropriate support and services to balance their caring responsibilities with their own well-being, education, and development.

Working together to safeguard children (published 2015, updated in 2023)

Statutory guidance on multi-agency working to help, protect and promote the welfare of children. "Adult social care services should liaise with children's social care services to ensure that there is a joined-up approach when both carrying out such assessments and in the provision of support to families where there are young carers or parent carers."

Census 2021

The guidance provided by the Office for National Statistics (ONS) on unpaid care in England and Wales, based on the Census 2021, offers insights into the prevalence and impact of unpaid caregiving roles across the population.

No Wrong Doors for Young Carers Memorandum of Understanding (MOU)

This is a commitment to young carers from health and social care partners which will be signed initially by the Local Authority and the ICB followed by partner agencies. This will be reviewed annually through the CSPB action plan.

Young Safeguarders - Plymouth Safeguarding Children Partnership

The Plymouth Young Safeguarders have developed the Ten Wishes which describes what they need from all of us to help keep them safe and feel valued.

ASSURANCE REFERENCES

CQC Adult Social Care Assurance framework

The CQC Adult Social Care Assessment Framework evaluates the quality and safety of adult social care services, focusing on key areas such as care effectiveness, safety, responsiveness, and leadership to ensure high standards and continuous improvement.

OFSTED Inspecting Local Authority Children's Services (ILACS) framework

The Ofsted ILACS framework assesses the effectiveness of local authority children's services, focusing on how well they support and protect vulnerable children, improve outcomes, and ensure their safety and well-being.

CQC ICS assurance (Health and Care Act 2022 duties)

The CQC ICS assurance framework, introduced under the Health and Care Act 2022, evaluates the performance of Integrated Care Systems (ICSs), ensuring they meet their duties to coordinate health and care services effectively and improve outcomes for local populations.

Plymouth City All Age Unpaid Carers Strategy

Supporting carers, strengthening community

October/November 2025

Kate Lattimore, Karlina Hall & Clare Stirling







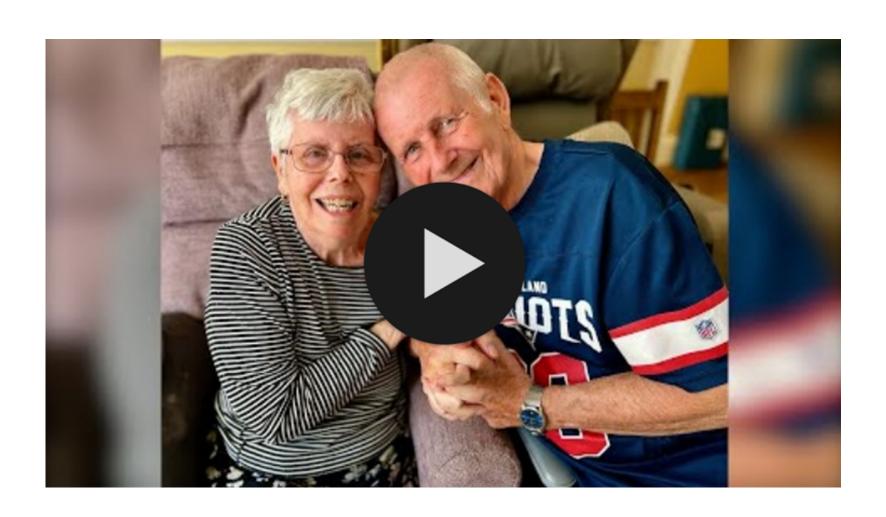








Introducing Rod & Barbara



Who are Carers?

- A carer is anyone, including children and adults who looks after a family member, partner or friend who needs help because of their illness, frailty, disability, a mental health problem or an addiction and cannot cope without their support. The care they give is unpaid.
- Young carers are **defined as above**, but under the age of 18
- Women have a 50:50 chance of providing care by the time they are aged 46, men by the age of 57; 11 years later women are more likely to provide care, and more likely to be working part-time
- Over **23,000 carers** in Plymouth according to last census
- Plymouth School Census 2025 identified **846 young carers** in schools, a **further 516 recorded on Eclipse** in Sept 2025 totalling **1,299 young carers** known to Children's Services.

Why do we need a strategy?

- Systemic problems in **social care sector**, retention and recruitment crises
- Insufficient funding, low pay, over reliance on informal family and friend carers
- An ageing population, people living longer with conditions, and care being brought closer to home
- Caring will feature in even more people's lives in the future
- Every day, **12,000 people** become unpaid carers

Why do we need a strategy?

- Carers more likely to have **health issues**, data shows health inequalities between those caring for disabled, older and ill-relatives and friends and those not.
- 2024 GP Patient survey in England 70% of carers **long-term physical or mental health condition**, disability or illness compared to 59% of non-carers.
- Carers less likely to work, more likely to live in poverty, Carer's Allowance, the main carers' benefit is the lowest benefit of its kind at £83.30 per week (2025/6 rates)
- Young carers, impact on attendance, attainment at school and access to higher education, employment and training opportunities.
- Numerous studies have highlighted the physical and mental health impact of caring on young people.
- Young carers caring for 35 hours a week or more are **86% less likely to obtain a degree** and 46% less likely to enter employment

What is the Plymouth All-Age Unpaid Carers Strategy?

- Co-produced, the carers strategy **outlines key priorities** and commitments to support unpaid carers for over 3 years, 2025 -2027 (inclusive)
- It addresses the needs of carers of all ages and backgrounds
- It aims to create an inclusive and caring environment for those providing unpaid care
- It reflects Plymouth's commitment to recognise and value the vital role of unpaid carers
- Guides decision-making by serving as a reference point

CARERS IN PLYMOUTH



23,956

According to the 2021 Census, there are over twenty-three thousand carers in Plymouth.





Provide 20-49 hours of unpaid care per week





More women than men are carers, with the highest number in the 50-59 age group



In the 2024 School Census in Plymouth there were 730 young carers identified in primary and secondary schools.



PLYMOUTH ALL AGE UNPAID CARERS STRATEGY

SUPPORTING
CARERS,
STRENGTHENING
COMMUNITY













Who is the Carers Strategy for?

- Unpaid carers in Plymouth of all ages and backgrounds
- Those who work with carers, including employers
- The Carers Strategic Partnership Board (explanation of CSPB)
- Other Voluntary, Community, and Social Enterprise (VCSE) organisations

How was the Carers Strategy formed?



Task & Finish Group



Research & statutory guidance



Feedback through surveys



Carer engagement

What have Carers identified as the priorities for the strategy?

1. Improved access to support services that work for carers (including young carers)

Enhance carers' access to a comprehensive range of support services, including occupational therapy and community-based resources, while improving service coordination, communication, and responsiveness.

2. Enhanced financial support so carers have better access to support and information on financial matters and rights

Alleviate the financial burden on carers by helping them access available resources, grants, income support, and workplace flexibility.

3. Improved health, safety and wellbeing of unpaid carers (emotional and psychological support)

Support carers' mental and emotional wellbeing through access to trusted support systems, counselling, peer support, tailored breaks, and safeguarding.

What have Carers identified as the priorities for the strategy?

4. Early identification and recognition of unpaid carers

Increase recognition of unpaid carers' contributions, create platforms for advocacy, and ensure their inclusion in decision-making processes.

5. Improved information, advice and communication

Ensure that carers have clear, accessible information on available resources, support services, and care pathways, tailored to diverse needs

6. When your caring role changes – supporting carers during transitions

Support carers through the emotional and practical changes of transitioning out of their caregiving role, providing guidance on rebuilding their lives and fostering social connections.

The Implementation Plan

- 1. A Working Group from the CSPB met regularly to develop the first draft of the action plan
- 2. The Action Plan is based on the 6 priorities from the strategy but also includes actions from the previous CSPB plan
- 3. Each member of the **Working Group is leading** the actions for each of the priorities.
- 4. Progress on the actions are reported back to the CSPB.

How will we know if it's making a difference?

- 1. Both qualitative and quantitative measures across the 6 priorities, i.e. carer feedback and satisfaction (surveys, voice groups)
- 2. Assessing improvements in carers' physical and mental health through check-ins
- 3. Tracking the increase in the number of carers identified
- 4. Measuring the participation of carers in community activities and support groups
- 5. Policy and systematic changes
- 6. The CSPB is working with the **HDRC** to create and implement an evaluation framework that encompasses all of the above

What is "No Wrong Doors for Young Carers"?

- 1. "No Wrong Doors" for Young Carers is a template MoU designed to **improve joint working** between adult and children's social care services, ICBs and other key organisations in respect of **identification and support for young carers and their families**. It covers a range of areas such as identification, whole-family approaches to support and transitions from children to adult services.
- 2. The 4th version of "No Wrong Doors for Young Carers" was published in February 2024. This was on the back of a national review and refresh of the MoU carried out by Carers Trust on behalf of the LGA and ADASS as Partners in Care and Health
- 3. Plymouth's MOU has been **signed by** the Director of Adult Social Services; Director of Children's Services; NHS Devon Integrated Care Board; Livewell Southwest; NHS UHP Trust; Time4U Partnership (The Children's Society & PCC Community Youth Team); Improving Lives Plymouth; and Cabinet Members for Health and ASC; Children's Social Care; and Education, Skills

MOU - Key Principles

We will work together to fulfil our legal duties to young carers and young adult carers, and ensure that the following key principles underpin practice across our system:

- 1. Responsibility for responding to the needs of young carers, and ensuring an **appropriate assessment** is completed, rests with the service responsible for assessing the person they support, rather than the age of the carer
- 2. ASC, Children's Services and health practitioners working with individuals with care and support needs and their families have an equal role in **identifying young carers at the earliest opportunity**
- 3. Starting point should be **to assess the adult or child who needs care and support** and then see what remaining needs for support a young carer in the family has
- 4. Presence of a young carer in the family will constitute an appearance of need and should **initiate either an** assessment, or the offer of an assessment, to the person needing care

MOU - Key Principles Continued...

- 5. The adult's assessment and eligibility for support should take into account their parenting responsibilities and take a **whole family approach**.
- 6. Assessments should ascertain why a child is caring and changes needed to **prevent them from undertaking excessive or inappropriate caring responsibilities**. Seeking the views of both adults and children within the family separately where appropriate.
- 5. Consideration must be given to whether a young carer is a 'child in need' under the Children Act 1989, and whether their welfare or development may suffer if support is not provided to them and/or their family.

Any Questions?

Thanks for listening















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EQUALITY IMPACT ASSESSMENT – PLYMOUTH CITY WIDE ALL AGE UNPAID CARERS STRATEGY 2025-2027

SECTION ONE: INFORMATION ABOUT THE PROPOSAL

Author(s): The person completing the EIA template.	Mark Collings	Department and service:	Strategic Commissioning	Date of assessment:	28/11/25		
Lead Officer: Head of Service, Service Director, or Strategic Director.	Lousie Ford, Head of Commissioning	Signature:	LANd	Approval date:	28/11/2025		
Overview:	To update Cabinet on the development and implementation of the Plymouth City-wide All-age Unpaid Carers Strategy						
Decision required:	 To endorse the strategy and ongoing activity to support unpaid carers in Plymouth. The city-wide carers strategy is essential because it establishes a clear framework for addressing the needs of unpaid carers, who play a critical role in supporting the health and well-being of others 						

SECTION TWO: EQUALITY IMPACT ASSESSMENT SCREENING TOOL

Potential external impacts:	Yes	No	x
Does the proposal have the potential to negatively impact service users, communities or residents with protected characteristics?			
Potential internal impacts:	Yes	No	x
Does the proposal have the potential to negatively impact Plymouth City Council employees?			
Is a full Equality Impact Assessment required? (if you have answered yes to either of the questions above then a full impact assessment is required and you must complete section three)	Yes	No	x

If you do not agree that a full equality impact assessment is required, please set out your justification for why not.

There are no identifiable negative impacts on people with protected characteristics, the carers strategy supports all carers

SECTION THREE: FULL EQUALITY IMPACT ASSESSMENT

Protected characteristics (Equality Act, 2010)	Evidence and information (e.g. data and consultation feedback)	Adverse impact	Mitigation activities	Timescale and responsible department
Age	 Plymouth 16.4 per cent of people in Plymouth are children aged under 15. 65.1 per cent are adults aged 15 to 64. 18.5 percent are adults aged 65 and over. 2.4 percent of the resident population are 85 and over. South West 15.9 per cent of people are aged 0 to 14, 61.8 per cent are aged 15 to 64. 22.3 per cent are aged 65 and over. England 17.4 per cent of people are aged 0 to 14. 64.2 per cent of people are aged 15 to 64. 18.4 per cent of people are aged 65 and over. (2021 Census) 			

Plymouth City	It is estimated that 26 per cent of the homeless population in the UK have care experience. In Plymouth there are currently 7 per cent of care leavers open to the service (6 per cent aged 18-20 and 12 per cent of those aged 21+) who are in unsuitable accommodation.	None identified	
	The Care Review reported that 41 per cent of 19-21 year old care leavers are not in education, employment or training (NEET) compared to 12 per cent of all other young people in the same age group.		
	In Plymouth there are currently 50 per cent of care leavers aged 18-21 Not in Education Training or Employment (54 per cent of all those care leavers aged 18-24 who are open to the service).		
	There are currently 195 care leavers aged 18 to 20 (statutory service) and 58 aged 21 to 24 (extended offer). There are more care leavers aged 21 to 24 who could return for support from services if they wished to.		
Disability	9.4 per cent of residents in Plymouth have their activities limited 'a lot' because of a physical or mental health problem. 12.2 per cent of residents in Plymouth have their activities limited 'a little' because of a	None identified	
	physical or mental health problem (2021 Census)		

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Gender reassignment	0.5 per cent of residents in Plymouth have a gender identity that is different from their sex registered at birth. 0.1 per cent of residents identify as a trans man, 0.1 per cent identify as non-binary and, 0.1 per cent identify as a trans women (2021 Census).	
Marriage and civil partnership	40.1 per cent of residents have never married and never registered a civil partnership. 10 per cent are divorced, 6 percent are widowed, with 2.5 per cent are separated but still married. 0.49 per cent of residents are, or were, married or in a civil partnerships of the same sex. 0.06 per cent of residents are in a civil partnerships with the opposite sex (2021 Census).	None identified
Pregnancy and maternity	The total fertility rate (TFR) for England was 1.62 children per woman in 2021. The total fertility rate (TFR) for Plymouth in 2021 was 1.5.	None identified

Race	In 2021, 94.9 per cent of Plymouth's population identified their ethnicity as White, 2.3 per cent as Asian and 1.1 per cent as Black (2021 Census) People with a mixed ethnic background	None identified	
	comprised 1.8 per cent of the population. I per cent of the population use a different term to describe their ethnicity (2021 Census)		
	92.7 per cent of residents speak English as their main language. 2021 Census data shows that after English, Polish, Romanian, Chinese, Portuguese, and Arabic are the most spoken languages in Plymouth (2021 Census).		
Religion or belief	48.9 per cent of the Plymouth population stated they had no religion. 42.5 per cent of the population identified as Christian (2021 Census).	None identified	
	Those who identified as Muslim account for I.3 per cent of Plymouth's population while Hindu, Buddhist, Jewish or Sikh combined totalled less than I per cent (2021 Census).		
Sex	51 per cent of our population are women and 49 per cent are men (2021 Census).	None identified	
Sexual orientation	88.95 per cent of residents aged 16 years and over in Plymouth describe their sexual orientation as straight or heterosexual. 2.06 per cent describe their sexuality as bisexual, 1.97 per cent of people describe their sexual orientation as gay or lesbian. 0.42 per cent of residents describe their sexual orientation using a different term (2021 Census).	None identified	

SECTION FOUR: HUMAN RIGHTS IMPLICATIONS

Human Rights	Implications	3	Timescale and responsible department	
	None identified			

SECTION FIVE: OUR EQUALITY OBJECTIVES

Equality objectives	Implications	Mitigation Actions	Timescale and responsible department
Work together in partnership to:			
promote equality, diversity and inclusion			
• facilitate community cohesion			
 support people with different backgrounds and lived experiences to get on well together 			
Give specific consideration to care experienced people to improve their life outcomes, including access to training, employment and housing.			
Build and develop a diverse workforce that represents the community and citizens it serves.			
Support diverse communities to feel confident to report crime and anti-social behaviour, including hate crime and hate incidents, and work with partners to ensure Plymouth is a city where everybody feels safe and welcome.			

Cabinet



Date of meeting: 08 December 2025

Title of Report: Plymouth City Council People Strategy

Lead Member: Councillor Sue Dann (Cabinet Member for Customer Experience,

Sport, Leisure and HR and OD)

Lead Strategic Director: Si Bellamy (Chief Operating Officer)

Author: Chris Squire, Service Director HR & Organisational Development

Contact Email: Chris.squire@plymouth.gov.uk

Your Reference:

Key Decision: No

Confidentiality: Part I - Official

Purpose of Report

To present the new People Strategy for Plymouth City Council.

Recommendations and Reasons

That Cabinet approve the new People Strategy for Plymouth City Council.

Reason: The strategy presents the risks and opportunities facing Plymouth City Council, in terms of the recruitment, retention and development of staff. The new strategy recognises the economic and social development of the city, and connects the development of the workforce to these influences.

Alternative options considered and rejected

I. Not having a People Strategy.

This was rejected. There are very real risks facing recruitment & retention of staff, and it is paramount that we have a strategy that focuses on workforce planning, the wellbeing of staff, and the connection of the workforce to the economic and social development of the city.

Relevance to the Corporate Plan and/or the Plymouth Plan

The People Strategy links directly to and supports the Plymouth Plan and the four principles of Democracy, Responsibility, Fairness and Co-operation in the Corporate Plan. The strategy also underpins how we will deliver our priorities in Plymouth and how we connect the workforce to these priorities.

Implications for the Medium Term Financial Plan and Resource Implications:

There are no adverse MTFP or resource implications arising from the strategy. Programmes of work arising from the strategy will be subject to business cases, and will lead to improved people services, efficiencies across the organisation, and reduced cost.

Financial Risks

This document represents a revised strategy and does not raise any direct financial risks. The application of this strategy to develop organisational change will be undertaken on a case-by-case basis, with risks raised and considered on that basis.

Legal Implications

The Council has wide powers to employ officers to deliver its responsibilities and objectives. The People Strategy is an integral part of the long-term workforce planning to ensure the Council meets its statutory duties and responsibilities to residents and to its workforce. There are no specific legal implications raised by the strategy.

Carbon Footprint (Environmental) Implications:

There are no direct carbon/environmental implications for the decision.

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

* When considering these proposals members have a responsibility to ensure they give due regard to the Council's duty to promote equality of opportunity, eliminate unlawful discrimination and promote good relations between people who share protected characteristics under the Equalities Act and those who do not.

Health & Safety

The People Strategy aims to enhance Plymouth City Council's already good H&S practices and support the wellbeing of staff.

Equality Duty

The People Strategy has been developed following extensive engagement with staff. It directly supports the development of an ambitious and inclusive workforce, connected to Plymouth's communities.

Appendices

*Add rows as required to box below

Ref. Title of Appendix		Exemption Paragraph Number (if applicable) If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.							
		ı	2	3	4	5	6	7	
Α	Plymouth City Council People Strategy								
В	Equalities Impact Assessment								

Background papers:

*Add rows as required to box below

Please list all unpublished, background papers relevant to the decision in the table below. Background papers are <u>unpublished</u> works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	Exemption Paragraph Number (if applicable)						ole)
	If some/all of the information is confidential, you must indicate w is not for publication by virtue of Part 1 of Schedule 12A of the Lo Government Act 1972 by ticking the relevant box.						
	ı	2	3	4	5	6	7

Sign off:

Fin	ITG.2 5.26.0 76	Leg	LS/00 0031 97/33 /LB/2 7/10/ 25	Mon Off	LS/00 0031 97/33 /LB/2 7/10/ 25	HR	N/A	Asset s	N/A	Strat Proc	N/A
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Originating Senior Leadership Team member: Chris Squire Service Director HR & Organisational Development

Please confirm the Strategic Director(s) has agreed the report? Yes

Date agreed: 23/10/2025

Cabinet Member approval: Approved by Councillor Sue Dann Cabinet Member for Customer

Experience, Sport, Leisure and HR and OD)

Date approved: 27/10/2025





THE HORIZONS ARE BIGGER HERE

Welcome to our people strategy





Introduction

As Cabinet Member for People and a proud champion of Plymouth, I am delighted to introduce our new People Strategy - an essential part of delivering the vision set out in the Plymouth Plan: to be one of Europe's most vibrant waterfront cities, where everyone enjoys an outstanding quality of life.

Our city is full of opportunity, but we also face real challenges. From the need to attract and retain talent, to supporting an ageing workforce and responding to financial pressures, we must work together to ensure Plymouth continues to thrive. The People Strategy is our commitment to meeting these challenges head-on, by investing in our staff and creating an environment where everyone can flourish.

Our workforce is absolutely central to life in Plymouth. Their dedication, professionalism, and care make a real difference to people's lives, and I am deeply grateful for all that they do.

Looking after the wellbeing of our staff is not just the right thing to doit is essential for the success of our city. By supporting wellbeing, and by fostering a culture of inclusion and respect, we ensure that our teams are equipped to deliver the very best for Plymouth. Together, we are building a council that reflects the communities we serve and is ready for the future.

Thank you for your commitment, your passion, and your service to Plymouth.



Councillor Sue Dann,
Cabinet Member for
Customer Experience, Sport,
Leisure and HR and OD
Plymouth City Council

Plymouth is a city of ambition, resilience, and opportunity. As we launch our new People Strategy, I am immensely proud of the dedication and professionalism shown by our workforce every day. Whether it's keeping our communities safe, ensuring our streets are clean, running world-class events, or driving economic growth, our staff are at the heart of everything that makes Plymouth a great place to live and work.

We face significant challenges as a council, but these challenges are matched by remarkable opportunities. Major investment in the Devonport Dockyard, the growth of our creative and digital sectors, and our commitment to innovation and partnership working all point to a bright future for our city.

Our people are central to our city. Their commitment to public service, their willingness to adapt and learn, and their passion for Plymouth underpin our success. I am proud of the way our teams support each other, champion wellbeing, and embrace diversity and inclusion. Together, we are building a workforce that reflects the communities we serve and is ready to meet the city's evolving needs.

This strategy is about empowerment - helping every member of staff to thrive, supporting our community, and ensuring Plymouth continues to grow and prosper. Thank you for all that you do for our city.



Tracey Lee,
Chief Executive
Plymouth City Council

Plymouth City Council's People Strategy 2025 - 2028

Welcome to our People Strategy

Our People Strategy fits with the bigger plans for our city and shows our dedication to creating a lively, caring, innovative, and inclusive organisation. This means we are not only handling today's challenges with flexibility and strength but also building strong foundations for a successful future.

A big part of this is taking care of and developing our workforce. We want to grow talent, encourage continuous learning, and use the diverse skills of our employees to provide exceptional public services and to ensure the development of our city. Our plans aim to make jobs satisfying, improve employee wellbeing, and create opportunities for career growth, ensuring our workforce stays motivated and prepared to meet our community's changing needs.

At the same time, we are committed to tackling the unique challenges and opportunities Plymouth faces. Investment in Devonport Dockyard, for example, presents great potential for growth as well as significant challenges, which we plan to address through smart investments and working in partnership with organisations and residents. Similarly, projects like our new Digital Academy, apprenticeship and management and leadership development programmes are designed to take advantage of technological progress, preparing our employees for the future while encouraging innovation across the city.

Our strategy is about empowerment - helping our employees excel in their jobs, supporting our community to thrive, and enabling Plymouth to achieve new heights of success and sustainability. This will be achieved whilst upholding the values and standards required of those who work in the public sector. By aligning our people strategy with the city's vision and the corporate plan, we are setting the stage for a future where every member of staff feels they can contribute to and benefit from Plymouth's growth and vibrancy.



Summary

Plymouth City Council's People Strategy 2025–2028 sets out a bold vision to develop the council as a vibrant, caring, innovative, and inclusive organisation that is equipped to meet both current and future challenges. This strategy is closely aligned with the city's wider ambitions and the Plymouth Plan, ensuring that every member of staff is empowered to contribute to Plymouth's growth and success.

Challenges facing Plymouth City Council

Plymouth is a proud city of opportunity and complexity. The Council operates in a context marked by:

- **Significant economic growth and investment**, such as the £4.4 billion planned for Devonport Dockyard, which brings both opportunities and acute workforce planning challenges.
- A projected gap of 25,000 between available jobs and the local workforce by 2034, necessitating innovative approaches to recruitment, retention, and partnership working.
- An ageing workforce, with nearly 50% of staff aged over 50, raising risks around turnover and the need for flexible working options.
- Persistent recruitment difficulties in key roles, due to competition, pay, and national shortages.
- **Financial pressures**, with ongoing budget constraints and rising demand for services, particularly in social care and homelessness.
- **Socio-economic challenges**, including high levels of economic inactivity, deprivation, and disparities in health and housing across the city.

Positive work and achievements

Despite these challenges, the Council has made significant progress:

- Workforce Health, Safety and Wellbeing: Sickness absence has reduced, supported by strong wellbeing programmes, a network of Wellbeing Champions, and the 'Work Safe Home Safe' campaign.
- **Equality, diversity, and inclusion:** The Council is a Disability Confident Leader, has achieved 'Gold' status in the Defence Employer Recognition Scheme, and supports vibrant staff networks.
- **Talent development:** Apprenticeships and early careers strategies have worked well, with 6.5% of the workforce currently undertaking apprenticeships.
- **Leadership and management:** New management and leadership programmes have been launched, and career development opportunities have reduced reliance on agency staff.
- **Staff engagement:** Workshops and appreciative enquiry sessions have shaped the new strategy, ensuring it reflects the real experiences and aspirations of the workforce.

Proposed outcomes

The People Strategy focuses on four key outcomes:

- People Valued and Supported: Creating an environment where staff feel valued, supported, and able to develop their careers, with a focus on wellbeing, flexible working, and financial support.
- 2 **Place Respectful and Inclusive:** Building a workforce that reflects the diversity of Plymouth's communities, with inclusive recruitment, support for young people and those with disabilities, and strong community engagement.
- 3 **Passion Innovative and Creative:** Fostering a culture of innovation and learning, with investment in digital skills, leadership, and behavioural change to embrace new technologies and ways of working.
- 4 **Purpose High Performing:** Ensuring clarity of expectation, robust performance management, and a culture of recognition and continuous improvement, underpinned by agreed values and behaviours and strong leadership.

A clear and ambitious people strategy is essential for Plymouth City Council because our ability to deliver high-quality services, drive city-wide growth, and respond to complex challenges depends on the strength, wellbeing, and adaptability of our workforce. This strategy is rooted in a deep understanding of our local context, shaped by the voices of our staff, and informed by evidence of what works. It builds on proven successes, addresses real and emerging challenges, and sets out practical, measurable outcomes. By focusing on inclusion, wellbeing, innovation, and high performance, this strategy ensures that every member of staff is empowered to contribute to Plymouth's future, making the Council not just a great place to work, but a driving force for positive change across the city.

The Plymouth Plan

The Plymouth Plan is the vision for our city and looks ahead to 2034, setting a shared direction of travel for the long-term future of the city. It talks about the future of the city's economy; it plans for the city's transport and housing needs; it looks at how the city can improve the lives of children and young people and address the issues which lead to child poverty, and it sets out the aspiration to be a healthy and prosperous city with a rich arts and cultural environment.

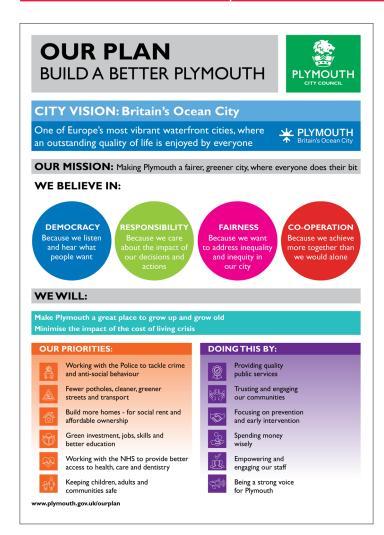
Plymouth City Council's Corporate Plan sets out a clear direction to build a better Plymouth. It is the guiding strategy for the Council and shapes what every directorate, service, team and member of staff does and how we can work together as one Council to achieve our shared ambition of making Plymouth a fairer, greener city where everyone does their bit

The Corporate Plan has four principles to guide our work:



"One of Europe's most vibrant waterfront cities where an outstanding quality of life is enjoyed by everyone."

Democracy	Because we listen and hear what people want
Responsibility	Because we care about the impact of our decisions and actions
Fairness	Because we want to address inequality and inequity in our city
Co-operation	Because we achieve more together than we would alone



The plan describes how we will deliver the council's priorities, and this is key to the development of this people strategy:

- Providing quality public services
- Trusting and engaging our communities
- Focusing on prevention and early intervention
- Spending money wisely
- Empowering and engaging our staff
- Being a strong voice for Plymouth

The People Strategy will ensure that staff feel connected to the vision and principles of the Plymouth Plan and the Corporate Plan, and that they understand how they will deliver the council's priorities.

The context in which Plymouth City Council operates highlights the strengths, weaknesses, opportunities and threats facing the authority. The city has a population of almost 268,700, a real economic output of over £6.97 billion and a growing workforce of almost 116,000 people. Our unique assets include the largest naval base in Western Europe; a vibrant manufacturing and engineering sector employing over 13 per cent of the workforce; a burgeoning creative and cultural sector; one of only 16 critical care teaching hospitals in the UK and the associated Plymouth Science Park, three universities and excellent higher education provision. However, there are challenges facing our growing city, including an increasing number of jobs, low unemployment, and high levels of economic inactivity and deprivation, and these are shown in figure 2.

Figure 2 Plymouth Population and Jobs

of Marine Autonomy

Plymouth has a population of **268,700**

Aged 0 to 15 46,000

Aged 65+ **50,000**

High levels of economic inactivity in Plymouth, almost

15,000

people economically inactive due to long-term sickness

3,600

people in Plymouth live in the 1% most deprived areas of England

46,000

people in Plymouth live in the 10% most deprived areas in England



Significant demand for new workers in Plymouth onsistently over

3,000 job vacancies across a diverse range of sectors



Low unemployment rate of only

3.8%

1 6,000 Employee jobs in 2022

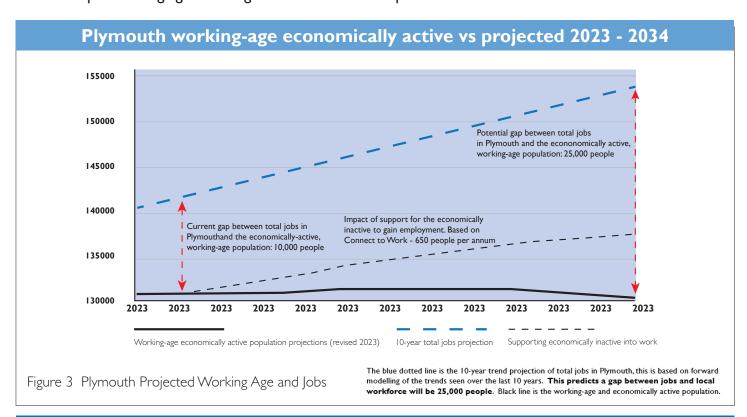
6,325

businesses across the city

Plymouth has the largest naval base in Western Europe and this is where the UK undertakes operational, training and maintenance activities for its naval fleet. There will be a £4.4 billion investment over the next 10 years in the base, with further orders anticipated. This means a skills requirement for 5,500 people, made up of 1,800 entry level jobs and 3,700 experienced workers, for the base alone. We are also forecasting a need for an additional 2,000 construction workers, rising to 4,240 in 2027.

This is a tremendous opportunity for Plymouth, but it also presents a unique challenge to the council and its own workforce planning. This is shown by analysing figures for the working-age economically active in the city, versus projected total jobs, and predicts a gap between jobs and local workforce of 25,000 people (figure 3).

This also highlights the importance of effective partnership working across the city, and a council workforce that looks and works across teams, directorates and organisations. The projected gap in labour will necessitate working with employers and educational institutions to attract and retain workers, as well as how we develop staff to adapt to emerging technologies to continue and improve our services.



Plymouth City Council - Context for change

This section presents direct impacts on the workforce, including summary data and strategic work programmes.

The Plymouth City Council Workforce - Summary Data

Workforce numbers at Plymouth City Council have remained stable over the past several years, at c. 2,250 whole time equivalent. Turnover of staff is below comparator local authorities, at c. 10%. Recruitment difficulties continue in several occupations, including social workers, project managers, and qualified roles in corporate functions. These difficulties arise from competition for staff in Plymouth and the South West, pay, national shortage occupations, and geographical location.

Sustained work on wellbeing and absence has seen sickness absence reduce to 9.27 days/employee in July 2025, compared to 10.5 days/employee 12-months previously and 9.7 days in comparator authorities.

Aside from short-term absence due to colds and stomach complaints, top reasons and themes for short-term and long-term absence are musculoskeletal conditions and mental health. This matches national trends, as reported by the Chartered Institute of Personnel and Development in its Wellbeing at Work report 2023.

Plymouth City Council has an aging workforce, with nearly 50% of staff aged over 50.

Figure 4 shows a breakdown of the workforce by age band

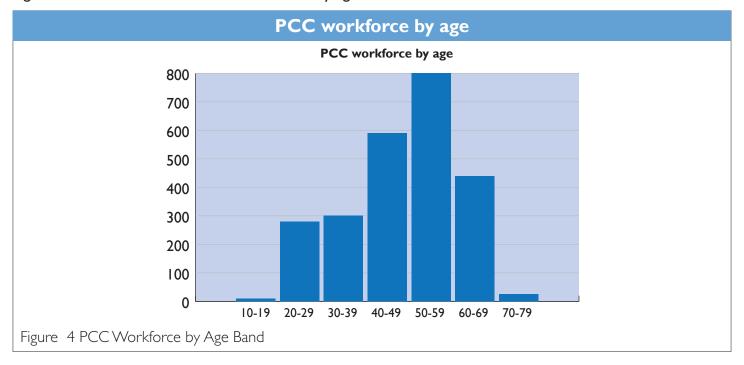


Figure 5 breaks this down, to show the percentage of each directorate's workforce by age band:

There is therefore a strong risk that turnover will increase as people move towards retirement age. We can also anticipate staff requesting more flexible working options, rather than opting for full retirement. And of course, a 10% turnover rate means that we need to recruit the equivalent of a new workforce every 10-years.

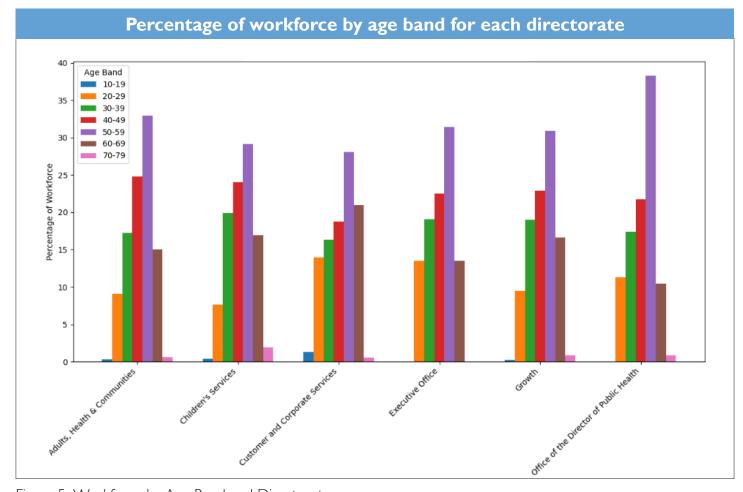


Figure 5 Workforce by Age Band and Directorate

Financial Context: adapting to economic pressures

Underpinning our ambition to adapt and change, is the requirement to save money and respond to growing pressures on key services. The financial landscape for local governments is challenging, with ongoing budget constraints and increasing demand for services, particularly in children's and adults' social care and homelessness provision.

It is a fact that Plymouth is an ageing city, with more people needing support from our social services every day. At the same time there are stark disparities in health outcomes, depending on where you live in the city. Access to housing continues to be one of the most pressuring issues, along with nearly a 10% rise in the number of children needing SEND support.

Therefore, the next step on our journey is not just about our improving services but also about ensuring financial sustainability.

Our Medium-Term Financial Plan (MTFP) is central to this effort. It aligns our resources with our strategic goals, ensuring that we can continue to deliver high-quality services while managing our finances prudently.

Moving forward we will need to find ways to identify those residents who might otherwise fall into crisis and support them before this happens, to reduce the long-term costs associated with reactive, crisis-driven services.

Strong Council, Strong City

To ensure that the Council and the city are strong and sustainable, we have to focus on boosting our local economy and improving the services we provide.

At its core, our focus is on addressing inequality, exclusion, and poverty while benefiting the economy by exploring new ways to run our services, making the most of our resources, and building strong partnerships with other organisations. This involves setting up new businesses, optimizing our resources, fostering collaborations, and making strategic investments in projects that deliver long-term benefits for Plymouth.

By focusing on growth, we're not just improving our services – we're also making Plymouth a more vibrant and prosperous place. This means better opportunities for residents and staff.

City help and support

Getting the basics right is vital to enable us to support residents and avoid them falling into crisis. This means we want to tackle problems early, use data to make smart decisions, and work closely with our community to find lasting solutions.

This programme is important for our growth and success. It will help us improve our services, support our communities, and make Plymouth an even better place to live.

We are calling this programme of work **City Help and Support**, a comprehensive programme that will focus on early intervention and community-based support.

This work will establish a capability to generate insights and intelligence using data across the organisation and wider partners. This will enable us to design and deliver services that are evidence-based, help us to address risks and ethically use artificial intelligence to achieve better outcomes for our residents.



Plymouth City Council's People Strategy 2025–2028 sets out a bold vision to develop the council as a vibrant, caring, innovative, and inclusive organisation that is equipped to meet both current and future challenges.

Our People Strategy – What we have achieved

Plymouth City Council's current People Strategy was launched in April 2020. It set out a plan over four years to establish the authority as an employer where People Feel Welcome, We Aspire to be the Best, We Attract and Keep the Right People, and We are Well Led (the four workstreams).

Excellent progress has been made with the People Strategy with some notable achievements. These include Health and Safety (our Work Safe Home Safe campaign), Apprenticeships, Management and Leadership Development, and support through our staff networks and wellbeing programmes. This work is described in **Appendix One.**

What the workforce is telling us

A series of workshops took place between March and May 2025, to involve staff in the creation of the new People Strategy and to explore the impact that positive culture in the workplace has on the delivery of services. The top four tiers of leadership in PCC also took part in a similar exercise.

The format of the workshops followed an Appreciative Enquiry model, a strengths-based approach to help build a vision for the future. The format also enabled staff to reflect on what wasn't working well and their experiences in delivering services to the residents of Plymouth.

This work has helped to form the basis of the new people strategy and can be seen in **Appendix Two**.

These conversations with staff will continue, to include the new people strategy and the values and behaviours we want to see in the council.

People Strategy SWOT analysis

This People Strategy considers information and data from different sources and strategies, as well as conversations and workshops with many colleagues. From these, there are strengths, weaknesses, opportunities and threats that impact on the current and future workforce at Plymouth City Council, as shown in **Appendix Three.**

Our strengths show Plymouth City Council's position as a good employer, operating in and providing leadership to a city that is attracting significant investment. We have a dedicated and talented workforce, which is committed to the city. The council is ambitious, and this helps provide 'purpose' to our workforce. Underpinning this, we operate with good employment relations, there is a visible focus on health and safety, and the overall employment offer is well-regarded.

But there are significant challenges that we face, including educational attainment, current housing supply, and local government finances. We are also seeing rising demand for services, a tight labour market, and a significant number of staff approaching retirement.

These weaknesses and threats are potentially offset by major opportunities, which is where this People Strategy will focus. These include the city regeneration, growth and prevention programmes, our adoption and use of technology, the council's assets, and a workforce that is keen to learn and has pride in the city.

Plymouth City Council People Strategy

Our Approach

This People Strategy will provide the direction for how we recruit, retain and develop our staff for the next 3-years. Building on the strengths of our previous people strategy, it will have an increased emphasis on how we work across teams, directorates and organisations to both tackle the challenges that the city faces and to realise the incredible opportunities presented by growth and regeneration.

People Strategy outcomes

I Plymouth: People - Valued and supported

A workforce that feels valued and supported by the City. A place where we value physical, mental and financial wellbeing and realise the contribution this makes to a productive organisation and fulfilled lives.

How will this look and feel

Plymouth City Council is seen as an innovative, caring and kind organisation, where people want to and are able to develop their careers at all stages of their lives. The working environment is flexible, adaptive and responsive and teams work with one another and across the organisation. Individuals feel supported and know where to turn to or who to ask when they need help. We nurture our community of people in the council, including all staff, contractors and volunteers.

- Test the impact of rapid interventions for physical and mental wellbeing. Extend network of Mental Health First Aiders across the organisation. Recognise and promote good practice in prevention and support to maintain and enhance staff wellbeing.
 - **Why?** We know that prevention and early intervention are right for our services, they are therefore also correct for helping avoid longer term health, wellbeing and performance concerns for staff.
- Support staff with financial wellbeing, for example through the continued promotion of salary sacrifice products, and awareness of debt and gambling harm.
 - Why? Financial stress has a detrimental impact on people's wellbeing and can lead to absenteeism, presenteeism, and reduced productivity Supporting financial wellbeing will help reduce sickness absence, improve focus and morale, and enhance individual and service performance.
- Design our jobs and role profiles to improve colleague experience, help set expectations and provide clarity of purpose. Develop clear career pathways and succession planning that provide staff the opportunity to progress and achieve their potential, whilst also understanding clear objectives and expectations. Assess our pay, grading and reward systems, linked to workforce planning and development of roles.
 - Why? Role profiles are central to setting expectations and as such provide clarity of purpose, helping colleagues understand their contributions and how they align with organisational goals. By establishing clear career pathways and succession plans, we can unlock internal talent, reduce reliance on interim appointments, and support staff to reach their potential.
- Ensure that our flexible and hybrid working offers underpin the delivery of services, promote the wellbeing of individual staff, and support colleagues and teams.
 - Why? An effective approach to hybrid working means that we maintain our visibility in the city, develop our services with energy and creativity, and check-in with each other and our teams, whilst enabling colleagues work in a way that supports them. This approach will help recruitment and retention, and help reduce sickness absence, whilst improving the quality of our services.
- Promote the lives of staff as citizens of Plymouth, who value and care for our communities.
 - Why? Plymouth City Council is not just an employer, it's a civic institution rooted in the life of the city. By encouraging staff to see themselves as active citizens, we align personal purpose with public service, fostering a culture where employees feel their work contributes directly to the wellbeing of their families, neighbours and communities. When staff feel connected to their city and its future, they are more likely to be motivated, resilient, and fulfilled in their roles.

- Continue to champion safety in the workplace, through our Health, Safety and Wellbeing Policy, to ensure that our staff work in a healthy and safe environment. Plymouth City Council responds when staff experience abusive behaviour towards them. Continue working with and developing our Wellbeing Champions and Mental Health First Aiders, to champion health and happiness across the organisation Why? The safety and wellbeing of staff remains a number one priority for the council. This commitment reinforces the council's duty of care and legal responsibility to provide a safe working environment. The development of our Wellbeing Champions and Mental Health First Aiders ensures that we provide early intervention and support to our colleagues. And happiness in the workplace is central to the Council's ability to deliver high-quality services, foster innovation and build a resilient workforce. This includes a consistent emphasis on kindness, support and open conversations
- Continue our strong, collaborative relationships with our trade unions, working in partnership to ensure that the voice of our workforce is heard and respected.
 - Why? This partnership approach helps us to foster a culture of trust, transparency, and shared purpose, ensuring that every member of staff can thrive and contribute to the success of our city.

2 Plymouth: Place - Respectful and Inclusive

A workforce that is representative of the communities we serve and inclusive to all who work for us and use our services. We listen to and are respectful of one another.

How will this look and feel?

Colleagues in Plymouth City Council feel confident and ambitious for themselves and their communities. Colleagues create networks and connections, working and developing with partner organisations and our communities.

- Using our Apprenticeships and Early Careers Strategy, increase opportunities for those aged under 25 in Plymouth. Increase the number of supported internships in the Council, to provide opportunities for young people with special educational needs and disabilities.
 - **Why?** Our workforce profile shows that we need to bring more young people into our workforce. As a public sector organisation, a leading employer in the city, and a provider and commissioner of statutory services to young people, we provide opportunities for young people to gain experience in the workplace and to take their first steps into working life.
- Ensure that our recruitment processes are inclusive. Provide different ways of applying for jobs, to encourage and welcome applications from all backgrounds and experiences. Improve opportunities for paid employment within the Council, for people with learning disabilities. Continue to develop our work with our staff networks to deliver improvements to how we recruit, retain and support our staff.
 - Why? People applying for jobs at Plymouth City Council come from diverse backgrounds, and a diverse workforce that reflects our communities is essential for the delivery of effective public services. Our focus will remain on breaking down barriers to employment and advancement, and fostering an environment where innovation can flourish through varied perspectives. Our application processes are the start of this process for employment at Plymouth City Council.
- Ensure that staff can raise concerns in a collegiate and respectful environment, where they will be listened to, and issues can be solved as early as possible.
 - Why? Concerns and issues should be solved as early and openly as possible and ideally without reverting to formal processes. This approach would provide a safe, informal channel for staff to raise concerns about behaviours, decisions, or processes that feel "off" but don't yet meet the threshold for formal action. The approach would cover interpersonal issues, procedural worries, or cultural observations that may otherwise fester and would support the Council's commitment to responsibility and continuous improvement.
- Work with our partner organisations to engage with communities in the more deprived areas of Plymouth, helping with work experience and employment opportunities.
 - Why? Through working in partnership with Plymouth's large employers, we can use our employment opportunities and practices to help ensure that growth across Plymouth's economy benefits our communities.

3 Plymouth: Passion - innovative and creative

A learning organisation where we are encouraged to be creative and innovative, comfortable and confident in considering different ways of doing things, working with our residents and partner organisations to realise opportunity and to support those that need our help.

How will this look and feel

Colleagues feel excited about technology which improves our work and the potential benefits this brings our residents. Staff appreciate the contribution of others, and work in a spirit of kindness and understanding. The organisation champions great leadership and management, and the difference this makes to our city.

- Management and Leadership programmes to focus on developing superb leadership, promoting respectful and collaborative work across Plymouth City Council and our partner organisations.
 - Why? These programmes are not just about skills, they're about empowering staff to meet the evolving needs of the city and its residents. The council will continue to equip current and future managers with the skills to lead change, manage performance, and foster team wellbeing. Our Leadership programmes promote a culture of adaptability and innovation, which are essential for delivering high-quality public services.
- Work with staff on the behaviours and values needed at all levels of the council. Promote a culture that encourages staff to support and value others.
 - Why? A culture where staff support and value one another is central to building a resilient, motivated, and high-performing workforce. A framework will help frame how we show up and behave at work each day, take accountability and work consistently with elected members and service users. A values and behaviours framework helps to recruit the right people, identifies skills gaps, and guides professional development.
- Develop our Digital Academy and our network of Digital Champions, linked to our City Help and Support Programme. Work on the behavioural change we need to make the best use of digital technology, data and artificial intelligence.
 - Why? Our work developing staff to use artificial intelligence and data insights is not just a technical upgrade for the council, it's a cultural transformation. Work in these areas will improve services and processes, reduce costs, and enable the council to use data, insights and AI to identify risks early and design services that are evidence-based. Technology alone doesn't transform services people do. We will therefore focus on behavioural change to ensure staff are not only equipped with new tools but also confident and motivated to use them effectively.



4 Plymouth: Purpose - High performing

A workforce that is focused on purpose and priorities, where colleagues respectfully challenge and support each other for the benefit of our residents, businesses and partners.

How will this look and feel

We are clear on our expectations of each other and what is needed in our work. Staff can challenge how things are done, with senior leaders open to new thinking. We celebrate our work throughout the year, showing great practice and learning from each other.

- Staff understand what is expected of them in their roles, including behaviours, standards, and contribution to strategic goals. Managers and staff engage in regular, open, and constructive performance conversations, and managers are equipped with the skills and confidence to lead performance effectively.
 - **Why?** A clear performance framework will ensure that all colleagues understand what high performance looks like and how their work contributes to the council's goals.
- Ensure that Plymouth City Council does the basics brilliantly, through great people management.
 Why? Brilliant basics include effective HR practices, clear communication and consistent leadership, and these are the bedrock of a high-performing council. These fundamentals create stability, trust and clarity, enabling staff to focus on delivering and developing excellent services.
- Use values based/behavioural based recruitment, where suitable, to ensure that we recruit people with a change-mindset and potential to grow with the organisation. Deliver a clear and distinct employer brand.
 - Why? The use of values and behaviours-based recruitment will support a workforce that is adaptive, purpose-driven and open to new thinking. A clear employer brand is essential for attracting talent and retaining staff, and signals what the council stands for purpose, inclusion, growth and social impact which resonates with candidates who have similar values. A brand also supports broader city promotion efforts, linking the city's cultural and economic development.
- Grow a network of coaches and mentors to support personal development. Implement a 'reverse mentoring' scheme, where leaders are mentored by more recent recruits and challenged on why things are done in certain ways.
 - Why? Coaching and reverse-mentoring will encourage leaders to reflect on legacy practices and embrace new thinking. This will foster a culture of learning and adaptability, and helps to promote inclusion and equity, Reverse mentoring, in particular, will help to drive culture change by dismantling hierarchical barriers and fostering openness to innovation.
- Celebrate and share great work
 - **Why?** We should of course celebrate the great work that we do. Celebration and recognition aren't just cultural, they're strategic, supporting behavioural change, transformation and civic engagement. This is also about learning and highlights the importance of showcasing great practice and learning from each other, throughout the year.

Measures

The impact of our new People Strategy will be measured and reported quarterly to the Corporate Management Team. This will be in addition to the 'standard' workforce metrics that are presented monthly to the Corporate Management Team and Directorate Management Teams.

The measures will focus on outcomes and impacts, across areas including Workforce Inclusion and Diversity, Career Development and Progression, Health Safety and Wellbeing, and Staff Support and Feedback. A proposed list can be seen in Appendix Four.

Delivering our People Strategy

Plymouth City Council's People Strategy will be implemented from November 2025. Much of the work described, including the 'Outcomes', is already in progress, and we are therefore not setting off from a standing-start; we see brilliant people-work across the organisation – as well as areas for improvement – and we will develop and showcase this within the council and across the city.

The strategy will be delivered using a framework and series of actions and will be reported to the Corporate Management Team and Directorate Management Teams on a quarterly basis. There will also be a series of workshops with staff, to show how their feedback has influenced and helped develop this strategy, as well as regular updates through internal communications.

Our People Strategy is vital to the development of Plymouth City Council as an organisation, the services it commissions and provides, and its leadership role in the city. The strategy is all about honesty, teamwork, and making sure everyone feels supported at work whilst understanding what is expected of them. By working together and always looking for ways to improve, the Council wants to celebrate what's going well and tackle any problems quickly. This way, staff wellbeing and development will stay a top priority, helping everyone do their best, both as individuals and as a team.



Page 182 Appendix One – Our People Strategy 2020-2024

This section describes the progress made as part of the previous people strategy.

Everyone feels welcome



"We want to be a diverse workforce which is strong, better performing and represents the community and citizens it serves. An inclusive workplace will make people feel comfortable to be themselves and they will thrive to be their best."

Plymouth City Council has been accredited by the Department of Work and Pensions as a Disability Confident Leader and we have achieved 'Gold' status in the veteran's charter, as part of the Defence Employer Recognition Scheme. Our Staff Networks are well-established, including a vibrant community for our neuro-diverse staff that hosted a hugely successful conference for organisations and staff in March 2025.

Our Health, Safety and Wellbeing and Human Resources teams are a significant positive presence, working with managers, staff and trade unions in promoting wellbeing and safety. This includes our memorable 'Work Safe Home Safe' campaign and our network of wellbeing champions and mental health first aiders, as well as support for staff and managers to reduce the personal and business impact of sickness absence. Our work on staff wellbeing has been recognised locally through a Wellbeing at Work gold award.

Aspire to be the best



"Our workforce is our biggest asset and we must have the right people in the right roles, retain them and grow them. We want our employees to know we value their talents and will help them develop."

Plymouth City Council has an apprenticeship and early careers' strategy and exceeds the national target of 2.3% of the workforce being apprentices. In the 15-months prior to July 2025, none of our apprenticeship levy was returned to the Treasury. We also use our levy to support partner organisations with their own apprenticeship schemes. We have seen success with our work placements programme, with good outreach to our schools and colleges. As of July 2025, there are 167 colleagues studying for an apprenticeship qualification in Plymouth City Council (this includes our new Digital Academy); this is 6.5% of the workforce.

Our Health and Safety Improvement Plan is progressing well and has put in place crucial assurance mechanisms, including a Corporate Steering Group, Management Framework and Toolkit, audit programme and training at all levels. The practical side of our work on Health and Safety includes our highly visible 'Work Safe Home Safe' initiative.



Attract and keep the right people



"We want to be recognised as an employer of choice. People should consider working for the Council to be a rewarding, fulfilling and valuable opportunity. This means we will attract the best talent and keep the best people."

We are working on a culture of improved recruitment practice, using effective modern tools such as LinkedIn, to target and attract good candidates, as well as the development of our recruitment 'brand'. This includes focused work on targeting young people (Generations 'Z' and 'Alpha'), engagement work with schools and colleges, and recruitment fairs including children's social work events.

We link recruitment and employment to improving outcomes for Plymouth residents, such as being a fostering friendly employer, guaranteed interview schemes for military veterans, care experienced and disabled candidates, and internships for young people with special educational needs and disabilities.

Pay and career progression are of course important tools for developing and retaining staff. In order to address employee turnover in senior professional roles, new grades were introduced in 2024, bridging the gap between the existing pay structure and chief officer roles. An improved focus on career development (including apprenticeships) has seen a reduction in our use of agency staff, with a 15.4% reduction in 2024-25 compared to the previous year.

Employee recognition and our staff communications have also been an important feature of our People Strategy, and we continue to celebrate achievements across the council through features on staff and our Staff Awards. Staff Awards are also linked to strategic priorities, for example celebrating the 'Apprentice of the Year' and 'Children's Social Worker of the Year'.

We actively support the council's Net Zero Action Plan including the Green Travel Plan. This includes using salary exchange mechanisms to enable staff to lease electric and hybrid cars. We also promote and encourage alternative means of transport within the working day and as methods of commuting.

Plymouth City Council takes the wellbeing of its staff extremely seriously. The programmes and policies in place include Occupational Health provision, an Employee Assistance Programme, a network of Wellbeing Champions and employees trained in Mental Health First Aid. Good work across HR, managers, trade unions and staff means that we are now seeing sickness absence decrease across the organisation. We have developed our staff support networks, with for example vibrant groups including Disabilities, Neuro-Diversity, Women, Race Equality and Cultural Heritage. These groups provide invaluable feedback to inform our work, as well as personal support to individual members of staff.

Be well led



"A great organisation needs great leadership. Our leaders from all levels of the organisation should be highly skilled and reflect our values. They lead by example, exhibiting the behaviours we wish to see from all our people. We need leaders for different purposes, and we need to prepare leaders for the future."

Plymouth City Council has developed three management and leadership development programmes, starting in 2024-25. These include a People Management Skills programme, initially delivered in Children's Services and now rolled out into other areas. We have recently launched the first cohort of our Management and Leadership Programme, with 100 managers taking part, followed by a level 3 'Pathfinder' programme for newer managers. These programmes are in addition to individual and sector specific development and qualifications, such as leadership programmes with the Local Government Association, Association of Directors of Adult Social Services, Association of Directors of Children's Services and leadership qualifications through apprenticeship frameworks.

Appendix Two – What the workforce is telling us

A series of workshops took place between March and May 2025, to involve staff in the creation of the new People Strategy and to explore the impact that positive culture in the workplace has on the delivery of services.



Whats going well?

- Flexible Working and Benefits: Work-life balance, salary-sacrifice schemes (e.g. electric vehicles).
- Equality and Inclusion.
- Teamwork: Strong internal and external collaboration.
- Training and Development: Apprenticeships, career progression.
- Leadership: Caring, visible, values-driven management, relationships with members.
- Investment and Innovation: Regeneration, partnerships, doing things for the good of the city and its residents.



What isn't going well?

- Outdated ICT systems in some areas, digital exclusion in the city
- Budget Constraints: stretched services.
- Communication Gaps: Internal silos need to ensure we talk across teams and directorates.
- Management Concerns: Turnover, inconsistent support, top-down culture in some areas.
- Processes and Policies: Bureaucracy, inefficiencies.
- Workplace Conditions: Safety in customer-facing roles, hybrid inconsistencies isolation when at home.
- Pressure and Stress: Risk of burnout.
- Team: lack of team-building (e.g. social), empathy from some, developing mini-cultures.



What you'd love to see at PCC

- Better Recruitment and Pay: Accessible job ads and application processes, fair pay and grading.
- Improved Induction and Training: Onboarding, coaching.
- Wellbeing and Recognition: Belonging, team celebrations.
- Stronger Team Culture: Cross-team collaboration.
- Leadership and Culture: Trauma-informed, psychologically-aware, curious, celebrating our city, recognising that staff are also residents.
- Hybrid Working: Consistency, visibility, community use of space.

The workshops also looked at people's motivations for working in an organisation. The largest factor was Purpose, including Values, Culture and Ethos in the workplace.

Appendix Three – SWOT analysis

This People Strategy considers information and data from different sources and strategies. From these, there are strengths, weaknesses, opportunities and threats that impact on the current and future workforce at Plymouth City Council.

Strengths

Ambitious council

City presence and visibility

Committed workforce

Developed Higher/Further Education sector with three universities in the city

Employment Relations

Focus on Health and Safety

Flexible employment offer

Government investment in Plymouth

Improving Children's Social Care

Innovation

Plymouth as 'Place'

Terms and conditions of

Use of apprenticeships



Weaknesses

Below national average levels of higher qualifications

Digital and ICT literacy in the workforce

Geographical location and difficulties relocating potential staff

Housing supply

Inequality in the city

Local government finances

Low population growth



Opportunities

Automation/artificial intelligence

City Help and Support Programme

City regeneration and growth

Civic Engagement and social value

Committed workforce

Data and Data Insights

Digital Academy and Digital Apprenticeships

Flexible employment offer

Government investment in Plymouth

Investment in management and leadership

Learning organisation

Local government reform

New HR Management, Recruitment

and Payroll system

Partnership working

PCC estate

Supported Internships

Use of apprenticeships and early careers framework



Threats

Cost of living

Digital exclusion in the city

Forecast retirement profile for PCC

Growth in jobs v. labour supply

Local government reform

Rising need for services

Tight labour market leading to overheated jobs market



Page 186 Appendix Four – Success measures

The impact of the new People Strategy will be reported on using measures across several key areas. These proposed measures include:

Workplace Inclusion and Diversity:

- Monitor recruitment process changes and the diversity of applicants and hired staff.
- Survey staff satisfaction regarding recruitment practices and career progression opportunities.
- Analyse feedback from staff networks on improvements in recruitment, retention, and support.
- Ensure the staff profile is representative of the city we serve.
- Increase in paid employment opportunities for people with learning disabilities within the Council.
- Track the number of supported internships for young people with special educational needs and disabilities.
- Assess the impact of the Civic Engagement Agreement in deprived areas of Plymouth, focusing on work experience and employment opportunities.

Career Development and Progression:

- Track the success of leadership programmes developed and the engagement levels among participants.
- Record the progression and achievements of staff in career pathways and succession planning.
- Workforce plans written for services and directorates.
- Succession planning in place for key roles and professions.

Workplace Health, Safety and Wellbeing:

- Evaluate the effectiveness of rapid interventions for physical and mental wellbeing, such as Mental Health first aiders.
- Monitor the uptake and impact of financial wellbeing support, including salary sacrifice products and awareness of debt and gambling harm.
- Conduct regular surveys to assess the working environment and staff satisfaction regarding wellbeing.
- Track incidents of abusive behaviour towards staff and the Council's response actions.

Staff Support and Feedback:

- Survey staff on their ability to raise concerns and the effectiveness of the resolutions provided.
- Analyse feedback on flexible and hybrid working offers and their impact on individual staff and team dynamics.

Increase in the number of staff who rate Plymouth City Council as a great place to work.





EQUALITY IMPACT ASSESSMENT – PEOPLE STRATEGY

SECTION ONE: INFORMATION ABOUT THE PROPOSAL

Author(s): The person completing the EIA template.	Chris Squire	Department and service:	HR & Organisational Development	Date of assessment:	26/10/2025
Lead Officer: Head of Service, Service Director, or Strategic Director.	Si Bellamy	Signature:	Smiles	Approval date:	28/11/2025
Overview:	Plymouth City Council's People Strategy 2025–2028 sets out a bold vision to develop the council as a vibrant, caring, innovative, and inclusive organisation that is equipped to meet both current and future challenges. The Equality Impact Assessment for the People Strategy provides an analysis of the risks to Plymouth City Council and its workforce, in relation to equalities legislation and practices. The People Strategy places diversity and inclusion at the heart of people practices in the council, for very real reasons of workforce planning, quality of services and aspiration for our city. PCC's workforce profile (Appendix I) has been considered as part of this assessment.				
Decision required:	Support and approval for Plym	nouth City Council's People St	rategy		

SECTION TWO: EQUALITY IMPACT ASSESSMENT SCREENING TOOL

	Potential external impacts:	Yes	No	X
	Does the proposal have the potential to negatively impact service users, communities or residents with protected characteristics?			
Potential internal impacts:		Yes	No	x

Is a full Equality Impact Assessment required? (if you have answered yes to either of the questions above then a full impact assessment is required and you must complete section three)	Yes No X
If you do not agree that a full equality impact assessment is required, please set out your justification for why not.	Failure to adopt the People Strategy 2025-28 could leave the potential to negatively impact PCC employees. A full impact assessment has therefore been completed to highlight the risks of not having a strategy that supports equalities legislation and principles.

SECTION THREE: FULL EQUALITY IMPACT ASSESSMENT

Protected characteristics (Equality Act, 2010)	Evidence and information (e.g. data and consultation feedback)	Adverse impact	Mitigation activities	Timescale and responsible department
Age	Plymouth • 16.4 per cent of people in Plymouth are children aged under 15. • 65.1 per cent are adults aged 15 to 64. • 18.5 percent are adults aged 65 and over. • 2.4 percent of the resident population are 85 and over. South West • 15.9 per cent of people are aged 0 to 14, 61.8 per cent are aged 15 to 64. • 22.3 per cent are aged 65 and over. England • 17.4 per cent of people are aged 0 to 14. • 64.2 per cent of people are aged 15 to 64. • 18.4 per cent of people are aged 65 and over. (2021 Census)	demographic. - Without a strategy, this has a potential adverse impact in terms of community engagement, and a definite impact in relation to workforce planning and the risk of a significant number of staff leaving due to retirement, or looking to work in different ways	 Workforce Planning – directorate and organisational levels Engagement with schools, colleges and universities. Work experience Supported internships Early careers' strategy 	- Currently trialling. HROD and directorates - Current - Current - Following agreement of People of Strategy.(O)

Care experienced individuals

(Note that as per the Independent Review of Children's Social Care recommendation s, Plymouth City Council is treating care experience as though it is a protected characteristic).

It is estimated that 26 per cent of the homeless population in the UK have care experience. In Plymouth there are currently 7 per cent of care leavers open to the service (6 per cent aged 18-20 and 12 per cent of those aged 21+) who are in unsuitable accommodation.

Care
Care
Care
Council is
Care Review reported that 41 per cent of 19-21 year old care leavers are not in education, employment or training (NEET) compared to 12 per cent of all other young people in the same age group.

In Plymouth there are currently 50 per cent of care leavers aged 18-21 Not in Education Training or Employment (54 per cent of all those care leavers aged 18-24 who are open to the service).

There are currently 195 care leavers aged 18 to 20 (statutory service) and 58 aged 21 to 24 (extended offer). There are more care leavers aged 21 to 24 who could return for support from services if they wished to.

Without a strategy: - Potential adverse impact on job/career prospects for care experienced individuals; Quality of services – lack of lived experience and understanding; Impact on other public services if care leavers cannot access good employment opportunities; Risk to recruitment and age demography of the council workforce

- Work with Children's to provide suitable Services roles, apprenticeships, internships and work experience
- Guaranteed interview scheme for care leavers
- Target of 25% of 'new' apprentices having care experience
- Development of inclusive recruitment processes to encourage and welcome applications from all backgrounds and experiences

- Happening –
 HROD,
 CYPFS
- In place
- In place
- April 2026 -HROD

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Disability	9.4 per cent of residents in Plymouth have their activities limited 'a lot' because of a physical or mental health problem. 12.2 per cent of residents in Plymouth have their activities limited 'a little' because of a physical or mental health problem (2021 Census)	-	3.14% of the PCC workforce have declared they have a disability Without a strategy, the council risks overlooking current and prospective employees, who have physical and/or mental disability. This presents a recruitment and retention risk, as well as presenting the council as not representative of our community.	- - -	Disability Confident Leader status, working with Department of Work & Pensions Engagement through Disability and Neurodiversity staff networks Extend network of mental health first aiders Include in management & leadership development Risk and DSE assessments, to determine reasonable adjustments	-	In place Ongoing May 2026 – HS&W team In place In place
Gender reassignment	0.5 per cent of residents in Plymouth have a gender identity that is different from their sex registered at birth. 0.1 per cent of residents identify as a trans man, 0.1 per cent identify as non-binary and, 0.1 per cent identify as a trans women (2021 Census).	-	Current legal uncertainties around status of gender identity may lead to potential uncertainties for some staff and a risk to mental wellbeing.	-	Engagement through LGBTQ+ staff network Work with Facilities Management on signage Equality, Diversity and Inclusion training as part of management and leadership development	-	Ongoing Current Current a
Marriage and civil partnership	40.1 per cent of residents have never married and never registered a civil partnership. 10 per cent are divorced, 6 percent are widowed, with 2.5 per cent are separated but still married.		No adverse impact linked to People Strategy	-	n/a	-	n/a 3
	0.49 per cent of residents are, or were, married or in a civil partnerships of the same sex. 0.06 per cent of residents are in a civil partnerships with the opposite sex (2021 Census).						
Pregnancy and maternity	The total fertility rate (TFR) for England was 1.62 children per woman in 2021. The total fertility rate (TFR) for Plymouth in 2021 was 1.5.	-	Risk that pregnant women and those on maternity leave are not engaged in the organisation and miss important news and career development. Risk that PCC is not seen as a supportive organisation	-	Increase maternity pay to Green Book levels Management and Leadership Development Engagement with Women's Network.	-	Complete In progress Ongoing

Race	In 2021, 94.9 per cent of Plymouth's population identified their ethnicity as White, 2.3 per cent as Asian and 1.1 per cent as Black (2021 Census) People with a mixed ethnic background comprised 1.8 per cent of the population. I per cent of the population use a different term to describe their ethnicity (2021 Census) 92.7 per cent of residents speak English as their main language. 2021 Census data shows that after English, Polish, Romanian, Chinese, Portuguese, and Arabic are the most spoken languages in Plymouth (2021 Census).	- Verbal aggression from staff and	 Staff communications and engagement e.g. Black History Month Engagement with REACH staff network Community outreach work to promote PCC as an employer Connection to Equality, Diversity and Inclusion action plan to pick up on pending legislation Staff training & awareness, inc. bystander training 	 In progress Ongoing April In place In progress
Religion or belief	48.9 per cent of the Plymouth population stated they had no religion. 42.5 per cent of the population identified as Christian (2021 Census). Those who identified as Muslim account for 1.3 per cent of Plymouth's population while Hindu, Buddhist, Jewish or Sikh combined totalled less than 1 per cent (2021 Census).	Risk that Staff Feel Unsupported - Loss of trust and confidence in PCC as an employer – potential increased turnover and reduced recruitment options - Legal and compliance risks, for example public sector equality duty - Reduction in service quality - Discrimination in the workplace - Verbal aggression from staff and public	Policy - Equality Impact Assessments, Employee Handbook, People Strategy Community - Faith and Belief Staff Network, links to community groups Training - EDI sessions, Modern Slavery awareness Data & Inclusion - Workforce surveys, census-informed planning Culture - Respectful dialogue, safe spaces including prayer rooms, inclusive language	- In place D - In place O - In progress - In progress - In progress - In progress - through - Management - Leadership - Development, - staff training

Sex	51 per cent of our population are women and 49 per cent are men (2021 Census).	Risks if PCC does not consider support on basis of sex:	Networks: Women's Network, Men's Network	-	In place
		- Legal & compliance risks, for example public sector equality duty, equal pay, grievances,	Training: e.g. Empowering Women, Henpicked webinars Men's Health Week, Alcohol Awareness, MAN culture	-	In place and ongoing
		whistleblowing - Loss of trust & confidence in PCC as an employer - Reduction in service quality - Failure to recruit - Reduction in wellbeing & from there, impact on service quality - Missed opportunities for	Policy: Equality Act compliance, EIA reviews, Gender Pay Gap analysis Wellbeing: Survey feedback, menopause guidance Targeted health	-	Ongoing Wellbeing Survey feedback January – March 2026
		leadership and innovation	Culture: Conversations on workplace experience	-	As part of People Strategy staff engagement

OFFICIAL PLYMOUTH CITY COUNCIL

Sexual orientation	88.95 per cent of residents aged 16 years and over in Plymouth describe their sexual orientation as straight or heterosexual. 2.06 per cent describe their	Risks if PCC does not support staff on the basis of sexual orientation:	Networks - LGBTQ+ Staff Network	-	In place
	sexuality as bisexual, 1.97 per cent of people describe their sexual orientation as gay or lesbian. 0.42 per cent of	Reduced morale and engagement. Higher turnover among LGBTQ+ employees.	Policy - Equality Act compliance, EIA reviews	-	In place
	residents describe their sexual orientation using a different term (2021 Census).	Missed opportunities to reflect the diversity of Plymouth's communities.	Training - EDI sessions covering sexual orientation	-	In place and in progress In place, staff
		Increased psychosocial risks.	Wellbeing - Annual surveys, targeted support		engagement planned
		Feelings of exclusion and isolation.			through
		Negative impacts on mental health.			January – March 2026
		Reputational damage	Community Links - External organisations and engagement	-	In place through Staff
		Legal and compliance risks (e.g. Equality Act)	Recruitment - Inclusive recruitment and onboarding	-	Network April 2026 as part of People Strategy implementati on

SECTION FOUR: HUMAN RIGHTS IMPLICATIONS

Human Rights	Implications	Mitigation Actions	Timescale and responsible department			
	The People Strategy should address the following areas: Legal Compliance - Must meet duties under the Human Rights Act and Equality Act.	Legal Compliance - Equality Impact Assessments, policy reviews, staff training Workforce Inclusion - Staff networks, engagement processes	 In place and in progress Management and Leadership development, governance training 			

Workforce Inclusion - Support all protected group Policy Development - Approgrammes arising from must undergo EIA screening Public Trust - Failure to rights could damage reput community relations.	All Accountability - Strategic risk register, governance updates, monitoring frameworks Culture and Values - Embedding kindness respect and dignity in March 2026 - People Strategy staff engagement – Values & Behaviours – January – March 2026
Operational Delivery - human rights improves ser and staff wellbeing.	

SECTION FIVE: OUR EQUALITY OBJECTIVES

Equality objectives	Implications	Mitigation Actions	Timescale and responsible department
 Work together in partnership to: promote equality, diversity and inclusion facilitate community cohesion 	If the People Strategy did not support PCC's equality objectives: Legal - Breach of Equality Act and PSED; tribunal cases	Mitigating actions are presented above. Individual programmes of work will be subject to an equality impact assessment.	
 support people with different backgrounds and lived experiences to get on well together 	Operational - Loss of talent, poor recruitment, reduced service delivery Cultural - Decline in morale,		
Give specific consideration to care experienced people to improve their life outcomes, including access to training, employment and housing.	exclusion, disengagement Reputational - Loss of public trust, failure to reflect community diversity		
Build and develop a diverse workforce that represents the community and citizens it serves.	Strategic - Misalignment with Plymouth Plan and Corporate Vision Procurement - Non-compliance with		
Support diverse communities to feel confident to report crime and anti-social	equality standards in contracts		

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behaviour, including hate crime and hate incidents, and work with partners to ensure Plymouth is a city where everybody feels safe and welcome.	Care experience – the People Strategy gives specific consideration to care experienced people. Without a strategy there could be a potential adverse impact on job/career prospects for care experienced individuals. See section 3 above.	
	The first outcome in the People Strategy reflects this corporate equality objective. We want to ensure that the workforce is representative of the communities we serve and inclusive to all who work for us and use our services.	

Appendix I

EQUALITY INFORMATION

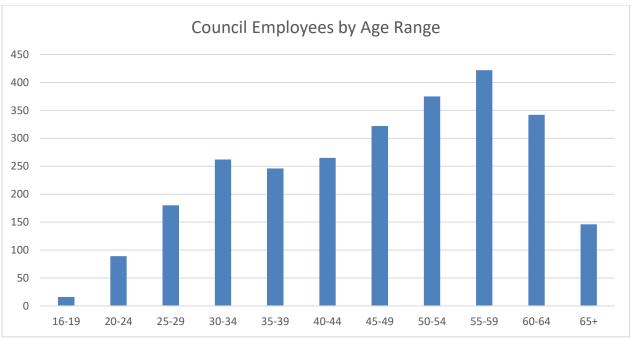
Plymouth has a statutory duty to publish workforce equality data and has published on an annual basis since 2011; the latest report is on our website, under 'Equality and Diversity'.

Information is taken from the iTrent database and is based on data from 30th September 2025,

Gender by Directorate								
	Fer	male		Male	To	otal		
	No.	%	No.	%	No.	%		
Adults, Health & Communities	264	80.24%	65	19.76%	329	12.35%		
Children's Services	664	85.24%	115	14.76%	779	29.23%		
Customer and Corporate Services	382	69.71%	166	30.29%	548	20.56%		
Executive Office	47	58.75%	33	41.25%	80	3.00%		
Growth	273	33.66%	538	66.34%	811	30.43%		
Office of the Director of Public Health	73	61.86%	45	38.14%	118	4.43%		
Grand Total	1703	63.90%	962	36.10%	2665	100.00%		

Age Range by Directorate							
			Direct	orate			
Age Ranges	Adults, Health & Communities	Children's Services	Customer and Corporate Services	Executive Office	Growth	Office of the Director of Public Health	Grand Total
16-19		5	8		3		16
20-24	8	19	31	5	22	4	89
25-29	27	42	43	8	51	9	180
30-34	33	75	51	7	87	9	262
35-39	24	84	43	3	79	13	246
40-44	35	84	45	10	80	11	265
45-49	42	97	60	10	98	15	322
50-54	59	107	71	14	105	19	375
55-59	52	114	84	11	137	24	422
60-64	36	94	78	9	113	12	342
65+	13	58	34	3	36	2	146
Grand Total	329	779	548	80	811	118	2665





Disability Status

Building on our status as Disablity Confident Committed, the Council became recognised as a Disability Confident Employer in 2019.

Disability by Directorate								
			Directo	rate				
Disability Response	Adults, Health & Communities	Health & Children's Corporate Corporate Growth Director of				Grand Total		
Yes	7	29	19		25	4	84	
Not Declared	322	750	529	80	786	114	2581	
Grand Total	329	779	548	80	811	118	2665	

^{*}fewer employees have disability information reported within iTrent than did in CoreHR before the change of system on 6th June 2025

Data migrated from CoreHR to iTrent included those employees who declared themselves 'with a disability' or who had declared 'no known disability'. The full data set will be migrated in the coming weeks to include where employees had responded 'no'.

Religion Status

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Religion by Directorate							
			Directora	te			
Religion Response	Adults, Health & Communities	Children's Services	Customer and Corporate Services	Executive Office	Growth	Office of the Director of Public Health	Corporate
Buddhist		3			6		9
Christian	86	266	186	21	181	35	775
No Religion	136	344	231	39	380	57	1208
Not Known	93	152	119	15	222	25	605
Any Other Religion Or Belief	9	11	8	3	13	1	45
Christian - Roman Catholic	1	1		1	4		7
Christian - Church of Scotland		1					1
Christian - Other Denomination			1				1
Muslim	4		2	1	1		8
Jewish		1	1		1		3
Atheist					3		3
Grand Total	329	779	548	80	811	118	2665

Ethnic Origin

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		Ethnic Ori	gin by Directo	orate			
Ethnic Origin Response	Adults, Health & Communities	Children's Services	Customer and Corporate Services	Executive Office	Growth	Office of the Director of Public Health	Grand Total
Asian or Asian British - Indian					3	1	4
Asian or Asian British - Pakistani			1				1
Black or Black British - African	2	21	1		5	1	30
Black or Black British - Caribbean			2		1		3
Chinese		2	1				3
Mixed - White and Asian	1	4		1	5	1	12
Mixed - White and Black African	2	1	2				5
Mixed - White and Black Caribbean	2	2			1		5
Not Known	45	72	22		76	8	223
Other Asian Background	2	2		3	2		9
Other Black Background		2			1		3
Other Ethnic Group	3	3	2		2		10
Other Mixed Background	3	2	1		2		8
Other White Background	11	18	12	2	26	2	71
White - British	254	649	500	73	686	105	2267
Asian or Asian British - Bangladeshi	2				1		3
White - Irish	2	1	1	1			5
Prefer Not To Say			2				2
Gypsy or Traveller			1				1
Grand Total	329	779	548	80	811	118	2665

Sexual Orientation

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Sexual Orientation by Directorate							
			Directo	rate			
Sexual Orientation Response	Adults, Health & Communities	Children's Services	Customer and Corporate Services	Executive Office	Growth	Office of the Director of Public Health	Grand Total
Bisexual	6	20	10	1	14	1	52
Gay Man	2	6	10	1	13	4	36
Heterosexual	218	561	376	59	512	82	1808
Not Declared	88	149	117	17	222	23	616
Other	1	2	4		1		8
Prefer Not to Say	9	28	27	1	39	7	111
Gay Woman/Lesbian	5	13	4	1	10	1	34
Grand Total	329	779	548	80	811	118	2665

ADDITIONAL EQUALITY INFORMATION

This category shows additional information about employees employed within the Council;

- Care (Service) Leaver
- Carer
- Reservist (or part of any military family)

Carer Information by Directorate								
Directorate								
Carer	Adults, Health & Communities	Children's Services	Customer and Corporate Services	Executive Office	Growth	Grand Total		
Yes	4	7	8	1	3	23		
Grand Total	4	7	8	1	3	23		

Service (Care) Leaver by Directorate							
Service (Care) Leaver	Children's Services	Grand Total					
Yes	2	2					
Grand Total		_					

Appendix I

Defence Categories by Directorate									
Directorate	Reservist	Veteran	Military Spouse/Ptnr	Cadet Force- AdultVol	Grand Total				
Adults, Health & Communities	0	1	2	0	3				
Children's Services	0	6	0	0	6				
Customer and Corporate Services	1	7	1	1	10				
Executive Office	1	0	0	0	1				
Growth	0	13	1	0	14				
Office of the Director of Public Health	0	0	1	0	1				
Grand Total	2	26	3	1	32				

EMPLOYEE NETWORKS

Ten internal employee networks have been set up to connect and support our diverse workforce:

- Men's network
- Disability network
- LGBTQ+ network
- Race
- Ethnicity and Cultural Heritage network
- Women's network
- Faith and Belief network
- Carer's network
- Armed Forces network
- Neurodiversity network

WHITE RIBBON ACCREDITATION

Bystander training has been rolled out to support the VAWG campaign alongside successful white ribbon accreditation.