



Oversight and Governance

Chief Executive's Department

Plymouth City Council

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Published 15/03/21

Delegated Decisions

Delegated Executive/Officer Decisions

Delegated Executive and Officer decisions are published every week and are available at the following link - <https://tinyurl.com/ms6umor>

Cabinet decisions subject to call-in are published at the following link - <http://tinyurl.com/yddrql6>

Please note – urgent decisions and non-key Council Officer decisions cannot be called in. Copies of the decisions together with background reports are available for viewing as follows:

- on the Council's Intranet Site at <https://modgov/mgDelegatedDecisions.aspx>
- on the Council's website at <https://tinyurl.com/jhnax4e>

The decisions detailed below may be implemented immediately.

Delegated Decisions

I. Councillor Evans OBE - The Leader:

I.1. Development of a Plymouth Short Term Care Centre

(Pages 1 - 20)

EXECUTIVE DECISION

made by a Cabinet Member




REPORT OF ACTION TAKEN UNDER DELEGATED AUTHORITY BY AN INDIVIDUAL CABINET MEMBER

Executive Decision Reference Number – L45 20/21

Decision	
1	Title of decision: Development of a Plymouth Short Term Care Centre
2	Decision maker (Cabinet member name and portfolio title): Leader - Cllr Tudor Evans OBE
3	Report author and contact details: Emma Crowther, Strategic Commissioning Manager, emma.crowther@plymouth.gov.uk
4	<p>Decision to be taken:</p> <p>It is recommended that the Leader of the Council:</p> <ul style="list-style-type: none"> • Approve the Business Case (Part I and Part II) • Approve the Council entering into a lease of part of the William and Patricia Venton Centre (“the Centre”) for use as a Short Term Care Centre (“STCC”) on the basis of a 25 year lease on the terms set out in Part II of the Business Case. • Allocate £823,415 into the Capital Programme funded by service borrowing. • Delegate authority to the Strategic Director for People to enter into all construction, care and support, and other relevant contracts in relation to the Centre.
5	<p>Reasons for decision: To progress the refurbishment of the Centre into a Short Term Care Centre for Plymouth, as part of the response to the ongoing pressures on the health and social care system.</p> <p>The Short Term Care Centre will allow a more coordinated therapeutic response to people who are being discharged from hospital, with an option for people living in the community to avoid unnecessary hospital admissions.</p> <p>The Council will carry out the works to the Centre itself under an agreement for lease and then entering into a lease of part of the Centre with Age UK Plymouth.</p>
6	<p>Alternative options considered and rejected:</p> <p>Leasing part of the Centre following completion of the works by Age UK Plymouth (funded by a loan from the Council)</p> <p>Investment into existing Council owned facility (e.g. Colwill Lodge once vacant)</p> <p>Co-locating the STCC with Super Care Hub</p> <p>Do nothing. Continuing to use a variety of care homes for the Discharge to Assess (D2A) patients discharged from hospital.</p>
7	<p>Financial implications:</p> <p>The capital costs will be funded by service borrowing</p>

	The revenue costs (including all occupational costs expended under Corporate Landlord) as set out in the financial analysis and part II Business Case will be funded by the People Directorate.			
8	Is the decision a Key Decision? (please contact Democratic Support for further advice)	Yes	No	Per the Constitution, a key decision is one which:
			X	in the case of capital projects and contract awards, results in a new commitment to spend and/or save in excess of £3million in total
		X		in the case of revenue projects when the decision involves entering into new commitments and/or making new savings in excess of £1 million
		X	is significant in terms of its effect on communities living or working in an area comprising two or more wards in the area of the local authority.	
	If yes, date of publication of the notice in the Forward Plan of Key Decisions			
9	Please specify how this decision is linked to the Council's corporate plan/Plymouth Plan and/or the policy framework and/or the revenue/capital budget:	<p>This decision supports the corporate priority of being a Caring Council by keeping adults protected and reducing health inequalities by supporting those who have been unwell to make a good recovery.</p> <p>The decision supports the Plymouth Plan policy HEA3 by supporting adults with health and social care needs. It also supports the vision of a healthy city by enabling all of the city's people to enjoy an outstanding quality of life, including happy, healthy, safe and fulfilled lives.</p>		
10	Please specify any direct environmental implications of the decision (carbon impact)	By developing a 24 bed Short Term Care Centre on one site we are reducing the carbon impact of health and social care professionals, by reducing the amount of travelling around the city to deliver care or therapy to individuals in different settings.		
Urgent decisions				
11	Is the decision urgent and to be implemented immediately in the interests of the Council or the public?	Yes	X	(If yes, please contact Democratic Support (democraticsupport@plymouth.gov.uk) for advice)
		No		(If no, go to section 13a)
12a	Reason for urgency:	Commercially confidential discussions in relation to the lease of the building have very recently concluded to the satisfaction of all parties. The intention is to begin refurbishment work on the building as soon as possible in order for the STCC to be operational to support hospital discharge from autumn 2021. In turn this will help mitigate some local system Winter Pressures.		

12b	Scrutiny Chair Signature:	Councillor Mary Aspinall (agreed via email)	Date	Briefed 12 th March 2021
	Scrutiny Committee name:	Health and Adult Social Care Overview and Scrutiny Committee		
	Print Name:	CLLR MARY ASPINALL		
Consultation				
13a	Are any other Cabinet members' portfolios affected by the decision?	Yes	<input checked="" type="checkbox"/>	
		No		(If no go to section 14)
13b	Which other Cabinet member's portfolio is affected by the decision?	Health and Adult Social Care Portfolio holder – Cllr Kate Taylor		
13c	Date Cabinet member consulted	12 th March 2021		
14	Has any Cabinet member declared a conflict of interest in relation to the decision?	Yes		If yes, please discuss with the Monitoring Officer
		No	<input checked="" type="checkbox"/>	
15	Which Corporate Management Team member has been consulted?	Name	Craig McArdle	
		Job title	Strategic Director for People	
		Date consulted	11 th March 2021	
Sign-off				
16	Sign off codes from the relevant departments consulted:	Democratic Support (mandatory)	DS116 20/21	
		Finance (mandatory)	pl.20.21.278.	
		Legal (mandatory)	36342/AC/11/3/21	
		Human Resources (if applicable)	N/A	
		Corporate property (if applicable)	JW 0112 11/03/21	
		Procurement (if applicable)	N/A	
Appendices				
17	Ref.	Title of appendix		
	A	Part I - Business Case: Development of a Plymouth Short Term Care Centre		
	B	Equalities Impact Assessment (see attached)		
Confidential/exempt information				

18a	Do you need to include any confidential/exempt information?	Yes	<input checked="" type="checkbox"/>	If yes, prepare a second, confidential ('Part II') briefing report and indicate why it is not for publication by virtue of Part I of Schedule 12A of the Local Government Act 1972 by ticking the relevant box in 18b below. (Keep as much information as possible in the briefing report that will be in the public domain)				
		No	<input type="checkbox"/>					
		Exemption Paragraph Number						
		1	2	3	4	5	6	7
18b	Confidential/exempt briefing report title: Part II – Business Case -Development of a Plymouth Short Term Care Centre			X				
Background Papers								
19	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. If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part I of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.							
Title of background paper(s)		Exemption Paragraph Number						
		1	2	3	4	5	6	7
Project Mandate				X				
CCIB Business Case				X				
Cabinet Member Signature								
20	I agree the decision and confirm that it is not contrary to the Council's policy and budget framework, Corporate Plan or Budget. In taking this decision I have given 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. For further details please see the EIA attached.							
Signature				Date of decision		15 March 2021		
Print Name		Cllr Tudor Evans OBE, Leader						

PART I - BUSINESS CASE

DEVELOPMENT OF A PLYMOUTH SHORT TERM CARE CENTRE



EXECUTIVE SUMMARY

This paper has been produced to support the Executive Decision to develop a Short Care Centre ("STCC") for Plymouth, by investing to refurbish part of the William and Patricia Venton Centre ("the Centre"), entering into a 25 year lease for the building, and contracting care and support services.

It is recommended that the Leader of the Council:

- Approves the Business Case (Part I and Part II);
- Approves the Council entering into a lease of part of the Centre for use as a STCC on the basis of a 25 year lease on the terms set out in Part II of the Business Case;
- Allocates £823,415 in to the Capital Programme funded by service borrowing;
- Delegates authority to the Strategic Director for People to enter into all construction, care and support, and other relevant contracts in relation to the Centre.

Statutory and voluntary sector partners have been discussing the need for a STCC for Plymouth for a number of years, to support discharge from hospital, promote independence and reduce reliance on long-term residential care and large long-term packages of domiciliary care. The Covid-19 pandemic has exacerbated the need to improve hospital discharge pathways which enable people to return to health, in a supported therapeutic environment.

It is proposed that the Council enters into an lease for a term of 25 years (subject to a break at years 10, 15 and 20) with a charitable partner, Age UK Plymouth, for the use of part of the Centre and uses service borrowing of £823,415 to fund the refurbishment of the top two floors of the Centre in which to deliver the STCC. The Council's project contract management team would oversee the refurbishment.

The Part 2 report contains commercially confidential information in relation to the lease agreement.

The Council will invest up to £823,415 to fund the reinstatement of 24 bedrooms, along with a number of offices and meeting and social spaces. The Centre will offer Step Down and Step Up, mainly for older people in Plymouth who are ready for discharge from hospital, but not yet well enough to return home.

In terms of the eligible cohort for the STCC, data shows us there is sufficient ongoing demand to fill 24 beds (figures below show a snapshot of current demand):

- 220 people in residential/nursing placements under the Discharge to Assess (D2A) team. The average length of stay in open D2A beds is currently 18 weeks;
- 29 people supported by the community crisis response team;
- From the D2A cohort, there are 13 people who are current or long term wheelchair users.

Physiotherapy, Occupational Therapy, and other support services will be available in the STCC. This will provide immediate and focussed interventions to speed up rehabilitation processes so that patients can be more quickly and confidently discharged home. The STCC will also offer support to older people who would otherwise be at risk of being admitted to hospital. The onsite care provider and therapy team would assist people to access Assistive Technology and equipment in order to support their recovery, in the STCC and beyond.

The Council and Age UK Plymouth will be parties to the lease agreement. The care and support provision operating within the building will be jointly commissioned by the Council and NHS Devon CCG. Funding for the service is not new spend; it will be offset against the existing spend on intermediate residential placements. The use of intermediate residential placements will reduce in proportion to the use of the STCC.

Outcomes and Benefits

- The provision will achieve savings through the provision of more cost effective rehabilitation beds by reducing length of stay to a maximum of 6 weeks, reducing hospital bed stays, and focusing therapy services for a number of residents on one site.
- The reduction of the use of D2A beds could be up to a maximum of 191 people (based on full occupancy of 24 beds over one year).
- There will be wider benefits to the wider health and social care system by reducing length of stay in hospital, reliance on long term care and promoting independence.
- There are potential savings for the Council, relating to the reduction of long term dom care packages. There are further potential savings for NHS Devon CCG through their D2A pathway by reducing the length of stay in a D2A bed.
- The proposal is key to the progression of the Council's approach to promote resilience and independence for our citizens and reduce reliance on specialist services, in line with Strategic Co-operative Commissioning's Caring for Plymouth approach.
- Working co-operatively with partners Age UK Plymouth, UHP, Livewell SW and care agencies to serve the best interests of our City and its communities.

SECTION I: PROJECT DETAIL

Project Value (indicate capital or revenue)	£823,415 capital works	Contingency (show as £ and % of project value)	£241,689 (41.5% of project value)
Programme	Community Infrastructure	Directorate	People
Portfolio Holder	Cllr Kate Taylor, Health and Adult Social Care	Service Director	Anna Coles (Integrated Commissioning)
Senior Responsible Officer (client)	Emma Crowther (Strategic Commissioning)	Project Manager	Karlina Hall (Strategic Commissioning)
Address and Post Code	William and Patricia Venton Centre, Astor Drive, Mount Gould, Plymouth PL4 9RD	Ward	Sutton and Mount Gould

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)*

There is an ongoing need to improve the range of options for people being discharged from hospital, who are clinically fit for discharge but not yet well enough to return home and live independently. An intermediate, reablement focused provision is needed, to provide more intensive care and therapy in the short term, with a focus on supporting a return to more independent living. Such a provision could also offer Step Up support, if a patient was to begin to need more support, but not require a readmission to hospital. Currently, patients needing this level of support are dispersed across the city into a range of residential homes or other provision.

An opportunity has arisen with the William and Patricia Venton Centre. Sited near to Mount Gould Hospital, the former residential care home contains a day centre on the ground floor, and living accommodation, meeting rooms and offices on the top two floors. The building is ideal in location and design to be remodelled into a STCC for Plymouth.

The STCC will reduce the time spent by the therapy services travelling across the city to numerous care homes. Unnecessary admissions to hospital will be reduced as well as the length of

stay in intermediate residential care placements and the size of long term dom care packages. The STCC will increase bed capacity in the Plymouth system to address “winter pressures”, as well as other pressures such as Covid 19.

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?)*

The proposal is to enter into a lease for a term of 25 years with Age UK Plymouth to lease the top two floors of the Centre and to fund the conversion of 24 bedrooms within the leased property, along with a number of offices and meeting spaces, into a STCC. The Centre will offer Step Down and Step Up, where up to 24 patients can be placed at one time, mainly for older people in Plymouth. There will be specialist bedrooms for wheelchair users and bariatric patients, although all bedrooms and communal spaces will be wheelchair accessible.

Physiotherapy, Occupational Therapy, and other support services will be available in the STCC. This will provide immediate and focussed interventions to speed up rehabilitation processes so that patients can be more quickly discharged home. The STCC will also offer support to older people, who would otherwise be admitted to hospital.

The Council and NHS Devon CCG will commission care and support for the residents from a suitably skilled care provider with a focus on reablement.

Planning and Building Control would be the responsibility of the Council who are funding, through service borrowing, and delivering the capital project.

This option is recommended due to:

Strategic fit – a long term collaborative partnership with the Council, NHS Devon CCG and a VCSE organisation

Commercially viable - compared to the long term costs of residential care placements and other options.

Best public value – appropriate use of public funds to support hospital discharge and independent living.

Deliverable – can be delivered within required timescales to reduce pressure on the local health and social care system.

Outcomes and Benefits

Financial outcomes and benefits:

The provision will achieve system efficiencies by supporting improved recovery from illness through reablement, and reducing higher level longer term care needs. Support services will be more efficient by being able to be based on one site. Potential savings to the Council on long term care. Exact savings cannot be quantified at this stage, but will be tracked closely during the progress of the project.

The rental costs for the building are affordable for the Council, compared with other types of provision. The rental costs have been independently assessed by the Valuation Office Agency as being at market value.

The Council and Age UK Plymouth will be parties to the lease agreement. The care and support provision will be jointly commissioned

Non-financial outcomes and benefits:

Improved customer experience, in being placed in a provision specifically designed to support reablement.

The proposal is key to the progression of the Council's approach to promote independence and reduce reliance on specialist services, in line with Strategic Co-operative Commissioning's Caring for Plymouth approach.

Working co-operatively with partners (Age UK Plymouth, UHP, Livewell SW and care agencies to serve the best interests of our City and its communities.

Reduce the number of older people being admitted to hospital, or readmitted following discharge.

by the Council and NHS Devon CCG from a suitably skilled care providers. Funding for the service will be offset against the existing spend on intermediate residential placements. The use of intermediate residential placements will reduce in proportion to the use of the STCC.	Improvement in at least one aspect of the Therapy Outcome Measure Improvement in the Elderly Mobility Score.
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SECTION 4: FINANCIAL ASSESSMENT

CAPITAL COSTS AND FINANCING

Breakdown of project costs including fees surveys and contingency	Prev. Yr. £m	20/21 £m	21/22 £m	22/23 £m	23/24 £m	24/25 £m	Future Yrs. £m	Total £m
Costs			£467,392					
Fees			£114,334					
VAT			£0					
Contingency			£241,689					
Total capital spend			£823,415					

Provide details of proposed funding: *Funding to match with Project Value*

Breakdown of proposed funding	Prev. Yr. £m	20/21 £m	21/22 £m	22/23 £m	23/24 £m	24/25 £m	Future Yrs. £m	Total £m
Service borrowing to the Council at 1.9% repayable of 25 years			£823,415					
Total funding			£823,415					

Tax and VAT implications	Age UK Plymouth have not opted to tax the Centre so VAT will not be payable on the rent and the lease will be an exempt transaction. The provision of social care services to clients by the Council under a statutory duty, is a non-business activity and also outside the scope of VAT. This means that any VAT incurred by the Council on costs relating to the project will be fully recoverable. Since the project will not generate any VAT-exempt income for the Council, there will be no adverse impact on the Council's partial exemption position.
Tax and VAT reviewed by	Sarah Scott

Ongoing Revenue Implications for Service Area							
	21/22 £k	22/23 £k	23/24 £k	23/24 £k	24/25 £k	Future Yrs. £k	Total £k
Loan repayment <i>(terms agreed with Treasury Management)</i>		42	42	42	42	874	1,042
Other <i>(running costs including cost of care)</i>	668	1,335	1,335	1,335	1,335	25,617	31,625
Total Revenue Cost (A)	668	1,377	1,377	1,377	1,377	26,491	32,667
Annual revenue income <i>Savings from current care packages across the Integrated System.</i>	(668)	(1,377)	(1,377)	(1,377)	(1,377)	(26,491)	(32,667)
Total Revenue Income (B)	(668)	(1,377)	(1,377)	(1,377)	(1,377)	(26,491)	(32,667)
Service area net (benefit) cost (B-A)	0	0	0	0	0	0	0
Has the revenue cost been budgeted for or would this make a revenue pressure		Costs would be offset by care package savings across the Integrated System					
Which cost centre would the revenue pressure be shown	Has this been reviewed by the budget manager	Y/N	Yes				
Name of budget manager		Anna Coles					
Loan value	Interest Rate	1.9%	Term Years	Annual Repayment		£41,682	
Revenue code for annual repayments		tbc					

Service area or corporate borrowing		Strategic Cooperative Commissioning
Revenue implications reviewed by		

Version Control: *(The version control table must be updated and signed off each time a change is made to the document to provide an audit trail for the revision and update of draft and final versions)*

Author of Business Case	Date	Document Version	Reviewed By	Date
Karlina Hall	08/09/2020	v 1.0	Michelle Endacott	08/09/2020
Karlina Hall	15/09/2020	v 3.0	Emma Crowther Michelle Endacott	17/09/2020 22/09/2020
Karlina Hall	18/11/2020	v 4.0	Mohammed Sajjad	25/11/2020
Karlina Hall	10/03/2021	V 5.0	Emma Crowther	11/03/2021
Karlina Hall	12/03/2021	V 6.0	Alison Critchfield & Chris Flower	12/03/2021
Karlina Hall	12/03/2021	V 7.0	Lisa Evans	12/03/2021

SECTION 6: RECOMMENDATION AND ENDORSEMENT

Recommended Decision

It is recommended that the Leader of the Council:

- Approves the Business Case (Part I and Part II)
- Approves the Council entering into the lease for the STCC on the basis of a 25 year lease with rental and service charge
- Allocates £823,415 in to the Capital Programme funded by service borrowing;
- Delegates authority to the Strategic Director for People to enter into all construction, care and support, and other relevant contracts in relation to the Centre.

<i>Cllr Kate Taylor</i>		<i>Craig McArdle</i>	
Either email dated:	<i>Date: 12/03/21</i>	Either email dated:	<i>Date 15/03/21</i>
Or signed:		Signed:	
Date:		Date:	

The following relates to exempt or confidential matters (Para(s) 3 of Part 1, Schedule 12A of the Local Govt Act 1972). Any breach of confidentiality could prejudice the Council/person/body concerned & might amount to a breach of the councillors /employees codes of conduct.

Document is Restricted

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EQUALITY IMPACT ASSESSMENT

Short Term Care Centre



STAGE 1: WHAT IS BEING ASSESSED AND BY WHOM?

What is being assessed - including a brief description of aims and objectives?	<p>Statutory and voluntary sector partners have been discussing the need for a Short Term Care Centre for Plymouth for a number of years.</p> <p>The project will transform 24 bedrooms located on the top two floors of the William and Patricia Venton Centre (owned by Age UK), along with a number of offices and meeting spaces, into a STCC. The Centre will offer Step Down and Step Up, where up to 24 patients can be placed at one time, mainly for older people in Plymouth.</p> <p>Physiotherapy, Occupational Therapy, and other support services will be located in the STCC. This will provide immediate and focussed interventions to speed up rehabilitation processes so that patients can be more quickly discharged home. The care centre will also offer support to older people who would otherwise be admitted to hospital.</p>
Author	Karlina Hall, Commissioning Officer
Department and service	Strategic Co-operative Commissioning
Date of assessment	11/09/2020

STAGE 2: EVIDENCE AND IMPACT

Protected characteristics (Equality Act)	Evidence and information (eg data and feedback)	Any adverse impact See guidance on how to make judgement	Actions	Timescale and who is responsible
Age	<p>Plymouth currently has a population of 261,574 (Office of National Statistics (ONS) 2014 mid-year population estimates).</p> <p>The proportion of the working-age (16-64 year old) population (65.7%) is higher than that</p>	<p>No adverse impact anticipated – the service will target interventions in an age appropriate way.</p> <p>The STCC aim to improve outcomes for older people by supporting their return home following hospital discharge or a step up from the community to</p>	Performance monitoring	Life of the contract

	<p>regionally (62.1%) and nationally (64.1%).</p> <p>It is estimated that the 65 years and over age group will grow by 14.7% and will account for 18.0% of Plymouth’s total population. In particular, the over-75’s age-group is predicted to rise from 20,472 in 2013 to 24,731 in 2021.</p>	<p>improve their health outcomes and independence for longer.</p>		
Disability	<p>28.5% of households in Plymouth declare themselves as having a long term health problem or disability (nationally this is 25.7%).</p> <p>10.0% of Plymouth residents reported having a long-term health problem or disability that limits their day-to-day activities a lot and has lasted, or is expected to last, at least 12 months (including problems related to old age). The national value was 8.3%.</p> <p>There are currently 220 people in residential/nursing placements under discharge to assess (D2A) team, there are an additional 29 people with the community crisis response team. From the D2A cohort, there are 13 people who are current or long term wheelchair users.</p>	<p>No adverse impact anticipated – we will ensure that the service is accessible to all regardless of disability</p> <p>The STCC aim to improve outcomes for older people, bariatric patients and people who use wheelchairs accessing the D2A pathway by supporting their return home following hospital discharge or a step up from the community to improve their health outcomes and independence for longer.</p>	<p>Contract monitoring</p>	<p>Life of the contract</p>
Faith/religion or belief	<p>According to the 2011 Census, Christianity is the most</p>	<p>No adverse impact anticipated.</p>	<p>Contract monitoring</p>	<p>Life of the contract</p>

	<p>common religion in Plymouth. 84,326 (32.9%) per cent of the Plymouth population stated they had no religion.</p> <p>Those with a Hindu, Buddhist, Jewish or Sikh religion combined totalled less than 1 per cent.</p>			
Gender - including marriage, pregnancy and maternity	<p>Overall 50.6 per cent of our population are women and 49.4 per cent are men: this reflects the national figure of 50.8 per cent women and 49.2 per cent men.</p> <p>Of those aged 16 and over, 90,765 people (42.9 per cent) are married. 5,190 (2.5 per cent) are separated and still legally married or legally in a same-sex civil partnership.</p> <p>Health inequality disproportionately affects men as they die younger than women in more deprived neighbourhoods</p>	No adverse impact anticipated – we will ensure that the service is accessible to all regardless of gender.	Contract Monitoring	Life of the contract
Gender reassignment	<p>Recent surveys have put the prevalence of transgender people between 0.5 and 1% of population (some very recent reports have upped this to 2%).</p> <p>Over the last 8 years the prevalence of transgendered people in the UK has been increasing at an average rate of</p>	No adverse impacts anticipated	Contract monitoring	Life of the contract

	<p>20%+ per annum in adults and 50% for children.</p> <p>The average age for presentation for reassignment of male-to-females is 40-49. For female-to-male the age group is 20-29. Twenty three transgender people belong to Pride in Plymouth.</p>			
Race	<p>92.9 per cent of Plymouth's population identify themselves as White British.</p> <p>7.1 per cent identify themselves as Black and Minority Ethnic (BME) with White Other (2.7 per cent),</p> <p>Chinese (0.5 per cent) and Other Asian (0.5 per cent) the most common ethnic groups.</p> <p>Our recorded BME population rose from 3 per cent in 2001 to 6.7 per cent in 2011, and therefore has more than doubled since the 2001 census.</p>	<p>No adverse impact anticipated</p> <p>There is currently a lack of understanding about the health needs of our BME communities and how they prefer to access services. This will need to be addressed over the coming years.</p>	Contract monitoring	Life of the contract
Sexual orientation - including civil partnership	<p>There is no precise local data on numbers of Lesbian, Gay and Bi-sexual (LGB) people in Plymouth, but nationally the government have estimated this to be between 5 - 7 per cent and Stonewall agree with this estimation given in 2005. This would mean that for Plymouth the figure is approximately</p>	No adverse impact anticipated	Contract monitoring	Life of the contract

12,500 to 17,500 people aged over 16 in Plymouth are LGB.			
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STAGE 3: ARE THERE ANY IMPLICATIONS FOR THE FOLLOWING? IF SO, PLEASE RECORD ACTIONS TO BE TAKEN

Local priorities	Implications	Timescale and who is responsible
Reduce the gap in average hourly pay between men and women by 2020.	N/A	
Increase the number of hate crime incidents reported and maintain good satisfaction rates in dealing with racist, disablist, homophobic, transphobic and faith, religion and belief incidents by 2020.	N/A	
Good relations between different communities (community cohesion)	The STCC will be based on the top 2 floors of the William and Patricia Venton Centre (WPVC) which is owned by Age UK. The ground floor of the WPVC is used for day services, cafe and community activities. This space and the activities held there will be accessible to the people staying in the STCC to help them to reintegrate back into the community which can continue after the person is discharged from the STCC.	The STCC will work with Age UK and other local partners to encourage engagement between different communities.
Human rights Please refer to guidance	N/A	

STAGE 4: PUBLICATION

Date 22 September 2020



Responsible Officer

Strategic Director for People

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