

Strategy & Business Plan 2025 - 28

A healthy, happy, sustainable
and thriving society for all
people



1. Contents

1. Contents	2
2. Executive Summary.....	4
3. Improving Lives Plymouth	5
Introducing ILP	5
Our Heritage	5
ILP today.....	6
4. Services and Programmes	7
Advice Plymouth.....	7
ILP Wellbeing Hubs.....	7
Long Term Conditions Self-Management	8
Caring for Carers	8
Sensory Solutions.....	8
Better Futures	9
Active for All	9
Age Positive.....	9
Plymouth Veterans and Family Hub.....	10
Co-design Centre	10
Devon Mental Health Alliance.....	11
Plymouth Wellbeing Hubs Network.....	11
Population Health Management	12
5. Strategic Challenges and Opportunities.....	12
6. Need and Demand	15
7. Strategic Objectives: 2025-2028.....	18
Delivering for Impact.....	18
Vision	19
Mission	19
Values	19
Principles.....	19

Objectives.....	19
8. Delivering Strategic Objectives: Priorities for Aligning : Sustaining : Developing the Organisation	22
9. Governance, Leadership and Management	28
Overview.....	28
Leadership and Management	30
10. Financial Plan.....	31
11. Strategic Marketing, Comms and Supporter Engagement	34
12. Monitoring Evaluation and Learning	35
13. Strategic Readiness and Risk Assessment	40
Readiness Assessment	40
Risk Assessment and Mitigation	42
Appendix: Thematic Analysis	46

2. Executive Summary

This strategic business plan for the period April 2025 to April 2028 represents the steps we will be taking to make Improving Lives Plymouth (ILP) a stable, sustainable, and high-impact organisation - one that works with people to create real change and improvement in lives, whilst building on our heritage and place in Plymouth's service landscape to secure our long-term future; through our 120th anniversary in 2027 and towards our 125th anniversary on 2032 and beyond.

The plan is built around five core objectives:

1. **Delivering high-quality preventative services** – we are strengthening our person-centred, trauma-informed approach through the development of an integrated Person-centred Wellbeing Hub (PCWH) model, bridging gaps in provision, and ensuring accessible, demand-led and data-driven service design.
2. **Communicating public messaging about healthy lifestyles** – we are amplifying voices, growing public awareness, and deepening engagement through strategic marketing, digital media, and evidence-based campaigns that connect positively with our supporters and communities.
3. **Developing and supporting our workforce** – we are committed to making ILP the best place to work and volunteer. Through leadership development, wellbeing initiatives and an excellent benefits package, underpinned by an inclusive 'One ILP' culture, we will continue investing in the people who drive our mission forward.
4. **Strengthening our role in system leadership** – we are positioning ILP as a trusted system partner, promoting and placing the organisation at the centre of shaping preventative health and wellbeing services through strategic partnerships, co-design initiatives, and innovation in service delivery.
5. **Building a sustainable future** – we are developing our infrastructure, investing in our property and facilities, strengthening our IT, digital and data capabilities, and diversifying income to make sure ILP remains resilient, financially secure, and positioned for future growth and development.

This plan represents an opportunity - a chance to work together, to take decisive and concerted action to make ILP a stronger, more effective organisation, aligned around our mission to support people and communities across Plymouth and surrounding areas to thrive by leading healthier, happier and sustainable lives.

3. Improving Lives Plymouth

Introducing ILP

ILP is a leading local health and wellbeing charity originally established in 1907 (the Plymouth Civic Guild of Help), that supports people to lead healthy, sustainable and thriving lives through a wide range of services and innovative partnerships. Constantly evolving to meet the changing needs and challenges in wider society.

We were established to meet local health needs long before the Welfare State, Social Services and the NHS existed. Through our history we have pioneered new services and have given birth to numerous organisations across the city of Plymouth.

Through our services, we want people to have the information, advice, and support which will provide them with the resilience, skills, knowledge and social networks to improve their health and wellbeing.

Our approach also combines working collaboratively with local and regional agencies, across different sectors, to influence policy and to codesign and codevelop meaningful and pioneering ways of increasing access to appropriate support for people across Plymouth and Devon.

Our Heritage

ILP is proud to have served the people and communities of Plymouth and Devon since 1907. Originally founded as the Plymouth Civic Guild of Help we changed our name in 2018 to reflect what we aim to do: Improving Lives.

Our story is a story of Plymouth.

We were established in response to a letter in the Western Evening Herald from Mary Higgs; a pioneering social reformer in the late 19th and early 20th century. She appealed in her letter for people to "help the needy by providing better housing, salvation from drink and true citizenship". This led to a public meeting on 19 March 1907 to consider the need for an organisation to do just that, and the Plymouth Civic Guild of Help was inaugurated on 23 September in the same year.

For over 100 years we have worked to increase the capacity of the voluntary and community sector to effectively respond to the evolving health and wellbeing needs of individuals and communities.

We have lived through much social and economic change, from the first female member of parliament in the UK, Viscountess Nancy Astor representing Plymouth Sutton, surviving two world wars, the 1941 Plymouth blitz, two global pandemics, and increasing demand for our services in recent years against a backdrop of austerity, a cost-of-living crisis and covid.

ILP developed versions of the embryonic Citizens Advice, Disability Advice and Information Centre, Foodbanks, Clothing Banks, Age Concern, Volunteer Bureaux, Community Transport Service, Domestic Abuse Service, Victim Support, MS Society, 5 x Community Centres, Parkinsons Society, Refugee Support Service, Veterans Welfare Support, Debt Advice, Parenting Support, a Red Cross bureau, Mental Health welfare support service, etc.

Our Ernest English House building in Plymouth City Centre was built by the City in 1959 for ILP to deliver services from and named in honour of a former CEO.

Our volunteer services have supported thousands of local people to give their time working for ILP with many also securing employment and new careers within ILP and across the wider health and wellbeing sector across Plymouth and Devon.

We have been public health champions and played a vital role in helping to secure Health Action Zone Status for Plymouth in 1999.

We were a founding member of the Plymouth Wellbeing Hubs Network in 2019 and the Wellbeing Hubs Alliance in 2022, as well as being a founding member of the Devon Mental Health Alliance in February 2022.

ILP today

Whilst we have had several names over the years, our commitment to adapting to local need has been a constant feature. In doing so, we have developed a wide range of activities and services to support and work alongside local people and now directly engage with around 10,000 people every year. Our annual income for the financial year ending March 2024 has risen to approximately £2.4 million. We generate this through a mix of individual donations, fundraising, earned income, grants and contracts.

We actively develop and deliver services that people can access from South-East Cornwall, Plymouth and West Devon where people gravitate towards Plymouth as their major centre for social, economic, health and wellbeing related activity and support. We are also seeking to support people across wider Devon alongside partner agencies when we have the skills and capacity to do so.

Our team of approx. 90 staff, 50 volunteers and seven Trustees, are based across two Wellbeing Hubs, also on an outreach basis across Plymouth and now reaching out more widely across Devon. Collaborating with grass root community groups, local, regional and national charities combined with local authorities and NHS bodies in both primary and secondary care.

4. Services and Programmes

We deliver positive social impact through a range of holistic and person-centred health and wellbeing services. These are constantly evolving but centre around the current services outlined below and delivery supported by [annual project plans](#), [summarised here](#) and with a [thematic analysis](#) of the opportunities and challenges and how these relate to the [ILP strategic business plan priorities](#).

Advice Plymouth

Our Information and Advice service is based at Ernest English House with an additional hospital outreach service and regular surgeries in various community locations. Advice Plymouth provides essential information, advice, and signposting services for individuals in need, helping them navigate welfare benefits, housing applications, financial challenges, and digital services. The service ensures that people, particularly those who are vulnerable or face barriers to accessing online services, receive timely and accurate support. High demand, increasing complexity in welfare systems, and a growing population of refugees and asylum seekers and disabled individuals have made Advice Plymouth a critical service for people seeking improved financial security and wellbeing. The project aims to enhance accessibility, expand service offerings, and ensure long-term sustainability through diverse funding and partnerships.

ILP Wellbeing Hubs

The ILP Wellbeing Hubs aim to improve community wellbeing by offering accessible, preventive services that reduce social isolation and support mental and physical health. The project provides a variety of community-led activities such as exercise classes, creative workshops, and peer support groups. These services address key issues like mental health, housing, and poverty, and target populations with long-term health conditions, particularly older women. By collaborating with health partners and delivering value-added services like professional training and community outreach, the project strives to enhance wellbeing and resilience in the community. The project will

expand services where needed, explore innovative funding solutions, and partner with arts and culture initiatives to increase impact and sustainability.

Long Term Conditions Self-Management

The Long-Term Conditions Self-Management project aims to empower individuals to take control of their health through structured workshops and support programs. It provides the "My Health, My Way" workshops, both in-person and online, offering tailored self-management plans, lifestyle change education, and access to resources. With over 344 referrals since April 2024, the project meets growing demand from healthcare providers and the community. It focuses on promoting prevention, improving health outcomes, and fostering peer support networks, while collaborating with healthcare professionals and organisations. The project will be exploring opportunities for service expansion, technology integration, and innovative service delivery, ensuring long-term sustainability and broader impact for individuals managing long-term health conditions.

Caring for Carers

The Caring for Carers project aims to improve the well-being of carers in Plymouth by providing comprehensive support services, including training, support groups, counselling, and financial assistance. It raises awareness of carers' needs through public initiatives and collaborates with local organisations to create a sustainable support system. Key objectives include preventing burnout, offering income maximisation, and addressing barriers to accessing services, as well as providing support specifically for young adult carers (17-25). The project seeks to expand services, strengthen partnerships, and secure sustainable funding to meet the increasing demand, ensuring carers receive the support and recognition they need.

Sensory Solutions

The Sensory Solutions project provides essential support to individuals with sensory impairments, offering services like assistive technology demonstrations, hearing aid support, Braille tuition, and IT training. The project aims to improve independent living for people with sensory loss, promote public awareness, and enhance workforce development through specialised training. Key activities include outreach services, resource centre support, and sensory awareness training for professionals. It seeks to address increasing demand due to a growing aging population and secure sustainable

funding, while expanding services and partnerships to improve the quality of life for individuals with sensory impairments in Plymouth.

Better Futures

Originally established by ILP in 1975, Better Futures is a community-based initiative dedicated to enhancing the health, wellbeing, and independence of adults with learning disabilities and/or autism. Aligned with ILP's strategic objective of delivering high-quality and accessible preventive services, the project provides a diverse range of activities, skill-building sessions, and social support to empower individuals in leading fulfilling lives. Through structured group activities, one-to-one sessions, and practical life skills development, Better Futures fosters social connections, improves mental and physical health, and promotes greater independence. By addressing key barriers such as social isolation, financial instability, and access to health education, the service aims to create a more inclusive and supportive environment where individuals can thrive within their communities.

Active for All

Active for All is a health improvement service dedicated to reducing health inequalities in Plymouth by supporting adults with disabilities and long-term health conditions to lead healthier, more active lives. Recognizing the barriers these groups face in accessing mainstream physical activity, the service provides tailored opportunities such as guided walks, community sports, and taster sessions, alongside expert health improvement advice. Working collaboratively with local services, networks, and organizations, Active for All ensures that physical activity is inclusive, accessible, and embedded within wider health and wellbeing initiatives. By increasing participation in physical activity, the service aims to improve overall health, prevent chronic conditions, and enhance quality of life, ultimately contributing to a healthier, more active, and more connected Plymouth.

Age Positive

The Age Positive project aims to improve the physical and mental wellbeing of older adults in Plymouth by providing preventive services such as Tai Chi, seated yoga, dance and social engagement programs. Through partnerships with healthcare providers like Social Prescribing and Timebank SouthWest, the project delivers a comprehensive approach to reducing isolation and frailty. Activities are held at Wellbeing Hubs and community spaces, with a focus on regular physical activity sessions, creative groups,

and mental health workshops. The demand for these services is growing as the aging population faces increased challenges, including isolation and frailty, leading to a need for more support. The project offers opportunities for service expansion, collaboration with community organisations, and the integration of digital services to ensure broader accessibility and long-term impact.

Plymouth Veterans and Family Hub

The Plymouth Veterans and Family Hub was established through a co-production approach with local veterans in 2019. However, ILP has been delivering targeted support to Veterans and their families since the first world war and in 2018 amended our constitution to reflect that we are also an armed forces community charity. In that context, PVFH is dedicated to providing tailored support to veterans, their families / carers and serving Armed Forces members. It offers peer support, mentoring, transition services, and resources to improve veterans' wellbeing, mental and physical health. Through collaboration with local charities and providers, the Hub advocates for veterans' needs, ensuring they receive integrated support. Demand for services is high, with many veterans facing challenges such as disability and loneliness, as well as difficulties accessing mental health care. The Hub seeks to expand its support offerings, strengthen connections within the veteran community, and continue evolving based on veterans' needs, ensuring long-term sustainability through diverse funding and community partnerships.

Co-design Centre

The Co-design Centre (CdC) is a flagship initiative for ILP, building on its partnership with the Changing Futures programme and support for the Trauma-Informed Plymouth Network. It aims to drive person-centred, preventative, and trauma-informed service design across Plymouth, ensuring that people with lived experience play a central role in shaping the services that impact their lives. The CdC will create a sustainable legacy beyond Changing Futures by embedding co-design and co-production (CD-CP) as standard practice, strengthening services, and improving life outcomes. By connecting individuals to meaningful opportunities in service design, training, and employment, the CdC will help create a healthier, happier, and more sustainable community. Aligning with both government and local priorities, it will support better health, increased employment, and reduced welfare dependency, positioning Plymouth as a leader in co-production and system transformation. Rooted in ILP's values - honesty, kindness,

respect, listening, and collaboration - the CdC will work in partnership with local and national organisations, ensuring services are responsive, inclusive, and impactful.

Devon Mental Health Alliance

A partnership between ILP, 4 further VCSE agencies, the Devon ICB (integrated Care Board – NHS), LiveWell South-West CIC and the Devon Mental Health Partnership Trust (DPT). Providing system leadership and innovative service delivery across mental health services for those with Severe and Enduring Mental Health issues. ILP takes a lead on Co-production for the Alliance and a lead for community development in Plymouth and West including the Plymouth Mental Health Network. By utilising the Asset-Based Community Development (ABCD) approach, the project facilitates the Plymouth Mental Health Collective (PMHC) to foster collaboration, learning, and improve service access. Four community development roles have been established across Plymouth and West Devon to build relationships, manage contracts, and secure additional funding. The project responds to the growing mental health needs, particularly post-COVID, by addressing service fragmentation, awareness challenges, and gaps in crisis support. Opportunities for service expansion, collaboration, and technology integration aim to enhance accessibility and impact, ensuring sustainable mental health services for the community.

Plymouth Wellbeing Hubs Network

ILP was a founding partner of the 5 original Wellbeing Hubs in Plymouth during 2018-19 and then the Wellbeing Hubs Network in 2022 working with Plymouth City Council Public Health Team. The Network has now grown to a partnership of 11 hubs and 9 organisations.

The Network aims to create an integrated web of health and wellbeing Hubs that provide a walk-in and or telephone service Monday to Friday between 9am and 5pm, for members of the public to discuss any aspect of their health, wellbeing and the wider social determinates that impact health. To be supported to access services at any of the hubs or the wider VCSE across the city. The network is also developing strategic alignments with LiveWell, University Hospitals Plymouth, Primary Care, Community Pharmacy and Plymouth Community Homes.

ILP currently chairs the Network Executive group and employs the Wellbeing Hubs Programme Lead who is responsible for co-ordination of the network and curating a broad offer of services between the partners and talking a lead on the annual Hubs Network business plan.

Population Health Management

The Population Health Management project aims to improve access to services and promote holistic support for people with long-term conditions, particularly within the most deprived communities, in alignment with the CORE20+5 approach. The project focuses on expanding the offer to ensure it addresses key health determinants, such as mental wellbeing, diet, physical activity, sleep, healthy relationships, and substance reduction. A key component is engaging both patients and NHS staff to understand needs, enhance referral pathways, and integrate better communication between various health services, including UHP, Livewell, PCC Public Health, and the voluntary sector. The project builds on the success of the 100-day challenge and seeks to create a consistent, system-wide approach to supporting long-term health conditions. Through data capture and evaluation, the project will provide evidence for future system design and population health management strategies.

5. Strategic Challenges and Opportunities

Challenges

ILP operates in an evolving political, social, economic and technological landscape, where persistent pressures such as the long-term impact of COVID-19, the cost-of-living crisis, an aging population, and widening health inequalities continue to shape service demands. These challenges affect not only the communities we serve but also the sustainability and effectiveness of our services. The key challenges include:

A changing operating environment

- Navigating significant reforms across the NHS, local government, and welfare systems.
- Ensuring compliance with evolving and a complex array of contractual, regulatory, accreditation and funding requirements while maintaining a person-centred approach.

Rising demand and increasing complexity of need

- Addressing the growing number of individuals requiring support due to economic hardship and social inequality.
- Managing increasingly complex cases, requiring staff to have specialised knowledge and skills.

- Expanding services while ensuring operational capacity, quality, and consistency.

Financial sustainability and competitive funding environment

- Reducing dependency on public sector contracts and external funding sources, which are increasingly uncertain.
- Balancing financial pressures while maintaining and improving ILP's property and facilities to support service delivery.
- Competing for limited grant and funding opportunities in a crowded charity and public sector space.

Workforce and organisational development

- Attracting and retaining skilled staff in a competitive job market.
- Ensuring staff receive ongoing training and development, including digital literacy and leadership skills, to meet evolving service demands.
- Sustaining volunteer engagement whilst avoiding over-reliance on unpaid workforce contributions to sustain operations.

Engagement, awareness, and organisational identity

- Raising awareness of ILP's brand, impact, and unique role in the community.
- Enhancing communication strategies to manage expectations and build trust among service users, stakeholders, and the public.
- Preventing siloed ways of working as ILP expands across dispersed geographies.

Opportunities

While the challenges are significant, ILP has the opportunity to strengthen and innovate its service delivery, partnerships, and operational models to drive long-term impact. Key opportunities include:

Expanding and innovating service delivery

- Strengthening integrated service delivery across ILP projects to improve client journeys and experience, whilst enhancing operational resilience and sustainability.
- Enhancing digital and hybrid service models to increase accessibility and efficiency.
- Co-producing services with communities to ensure they meet evolving needs.

- Exploring new ways to integrate services with system partners, for example, across the Plymouth Wellbeing Hub Network and Devon Mental Health Alliance to maximise reach and impact.

Strengthening strategic partnerships and system integration

- Deepening collaboration with health and social care providers, local authorities, and community organisations, including through the Devon Mental Health Alliance and Plymouth Wellbeing Hubs.
- Positioning ILP as a key coordination and support organisation for the charity sector in the city and travel to work/social/leisure area – a ‘go to’ partner.

Developing sustainable funding and income streams

- Diversifying funding sources through a segmented fundraising approach, including individual giving, community events and corporate sponsorships, as well as grants, and revenue-generating services such as training, research and consultancy.
- Strengthening financial models to ensure long-term resilience and reduced reliance on public sector funding.

Developing ILP property and facilities

- Investing in the maintenance and improvement of ILP property and facilities, aligned to the strategic ambition for our wellbeing hubs.

Leveraging technology for service enhancement

- Implementing digital health tools, telehealth services, and streamlined referral pathways.
- Enhancing internal systems for data collection, management and service coordination and reporting of outputs, outcomes and impact.

Workforce Development and Organisational Culture

- Investing in staff development to enhance skills, leadership, and job satisfaction.
- Fostering an outward mindset culture of innovation, learning, and cross-team collaboration to strengthen ILP’s culture, capacity and capability.
- Expanding volunteer engagement and community-led initiatives to strengthen service sustainability.

6. Need and Demand

Need

Plymouth faces multifaceted challenges impacting the health and wellbeing of its residents, influenced by economic deprivation, employment rates, housing conditions, and health inequalities. [The Plymouth Plan](#) and [The Plymouth Report](#) outline a complex picture of need, alongside initiatives and a strategic response, captured in [Thrive Plymouth: A Decade of Impact, a Future of Possibilities](#). All of which is reflected in the demand for ILP services that match up to the city's strategic approach to "Healthy Body, Healthy Mind, Healthy Places, Healthy Communities." An holistic approach that aims to address the broader determinants of health, including mental wellbeing, environmental factors, and community support.

Indices of Multiple Deprivation (IMD)

Plymouth ranks among the 20% most deprived local authority districts in England. Two (lower super output) areas fall within the most deprived 1% nationally, and 28 areas are in the most deprived 10%, affecting approximately 46,000 residents. These areas – predominantly in the west of the city - experience higher unemployment, lower educational attainment, and reduced access to healthcare, contributing to poorer health outcomes. Approximately 9,990 children, representing 18.6% of the city's child population, live in poverty. In certain deprived areas, over half of the children are estimated to be living in poverty. This is reflected in the fact that in 2022 Plymouth's average full-time weekly earnings by place of residence were £553.40, which is lower than both the Southwest average of £619.80 and the national average of £642.20.

Health Inequalities

Life expectancy in Plymouth's most deprived neighbourhoods is 4 years and 4 months lower than in the least deprived areas. Leading causes of mortality include cancer, heart disease, stroke, and respiratory diseases (such as COPD), accounting for approximately 54% of deaths, with higher rates in deprived wards.

Unpaid Carers and Long-Term Health Conditions

The 2021 Census identified 23,956 unpaid carers in Plymouth, with 44% providing up to 19 hours of care weekly. Unpaid carers often experience poorer health outcomes, with 60% reporting long-term health conditions or disabilities, compared to 50% of non-carers. Approximately 25,800 residents over 65 have long-term limiting illnesses affecting daily activities.

Housing Conditions

Housing quality is a concern for many in Plymouth, with 23% of privately rented homes classified as non-decent, particularly in deprived areas. Fuel poverty affects over 17,000 households (14.5%), exceeding the national average of 13.1%. Homelessness has risen, with a 69% increase in households in temporary accommodation from April 2021 to January 2023. Mental health issues are the most common support need among those facing homelessness.

Physical Activity

Plymouth boasts the most active population in the Southwest, supported by quality sports clubs, top-class facilities, active schools, and accessible community opportunities for physical activity and sport. However, challenges persist, including high rates of alcohol-related hospital admissions, elevated levels of physical inactivity, and issues surrounding the affordability of healthy food for many residents.

Military Service Veterans

Plymouth has a significant veteran population, with 18,250 individuals (8.4% of residents) having previously served in the Armed Forces, more than double the England average of 3.8%. The age group with the largest number of veterans is 65 to 74, totalling 3,404 individuals. Veterans often face unique challenges, including higher rates of disability; nearly half (48.7%) report having a disability, and approximately 31.3% experience loneliness. Access to healthcare can be problematic, with some veterans encountering difficulties in registering with NHS dentists due to availability issues. Housing conditions for veterans have also been concerning, with reports of substandard accommodations contributing to health issues. Plymouth City Council has implemented the Armed Forces Covenant to address these issues, aiming to ensure that veterans and their families receive equitable access to healthcare, housing, and employment opportunities.

Aging Population

Plymouth's aging population presents distinct challenges and indicates the need for targeted support to address evolving needs. According to the 2021 Census, 18.5% of Plymouth's residents are aged 65 and over, with 2.4% being 85 and over. This demographic is projected to grow, leading to increased demand for health and social care services.

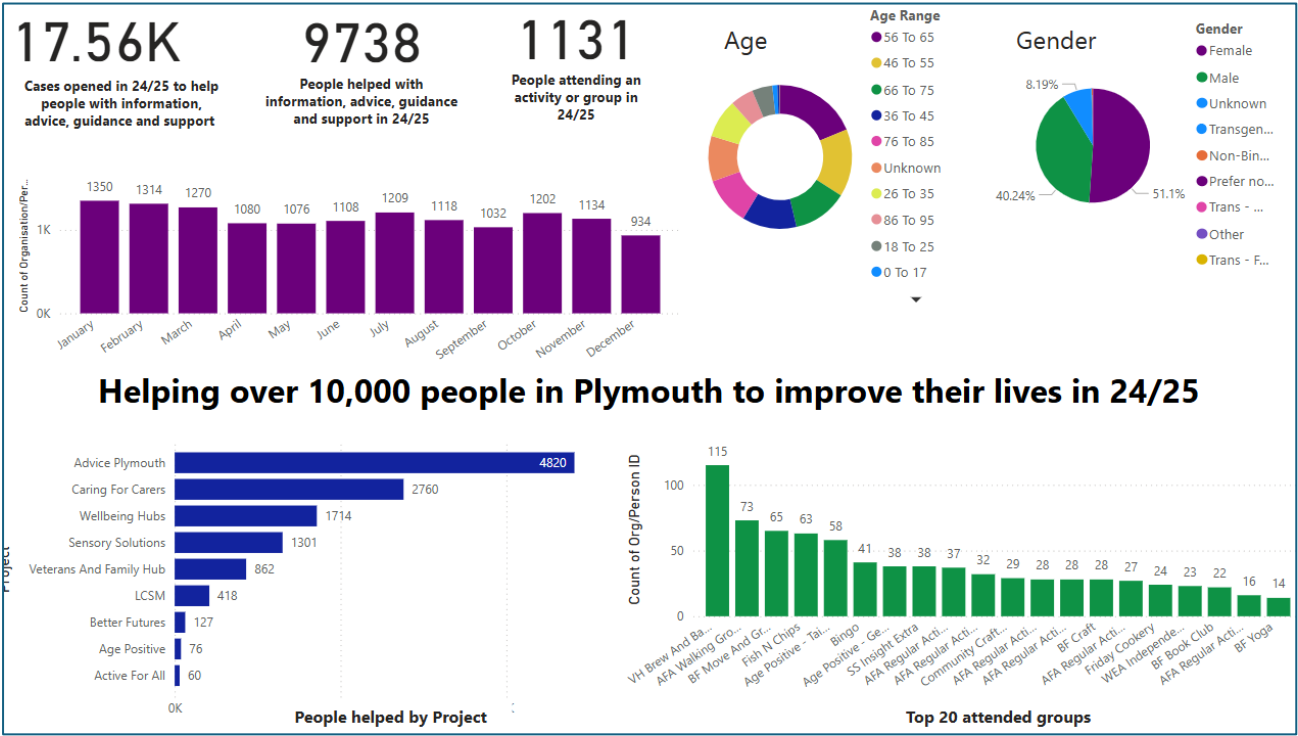
Sensory impairments are prevalent among older adults. Nationally, over 70% of individuals aged over 70 and 40% of those over 50 experience some form of hearing

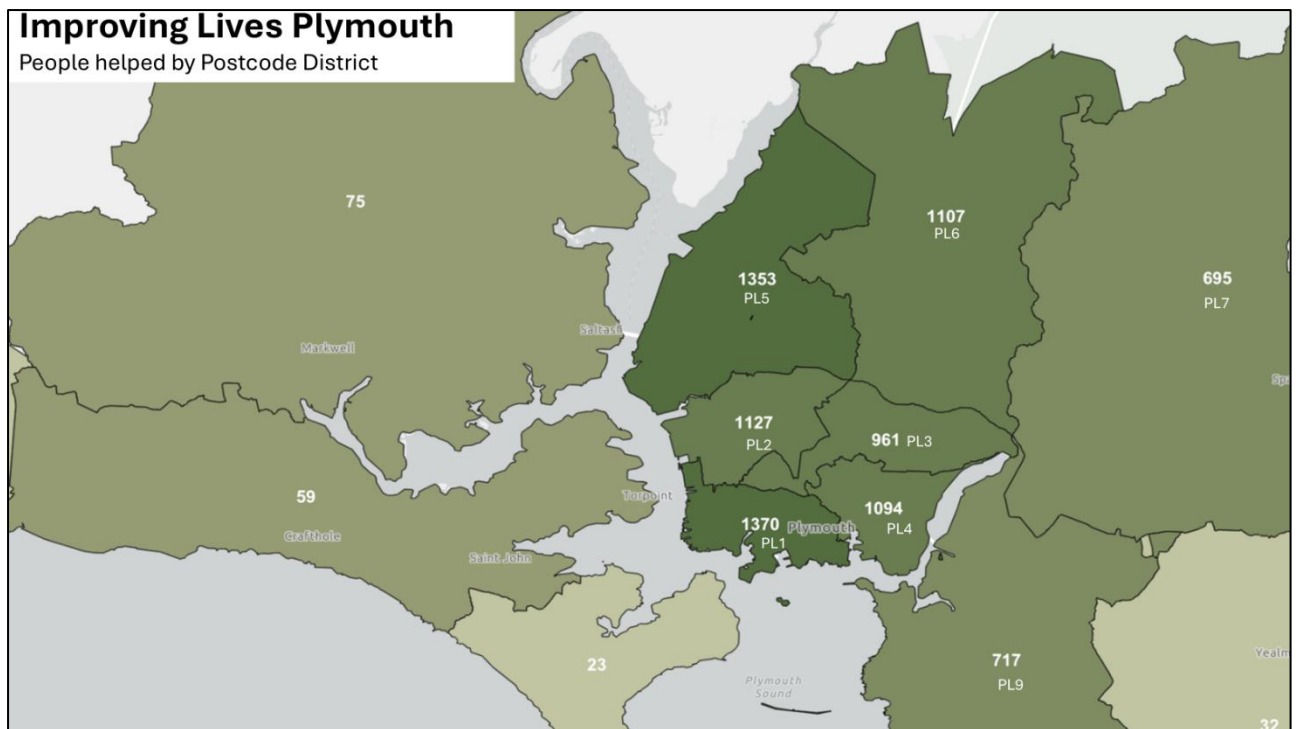
loss. Additionally, an estimated 1.6 million people aged 65 and over in the UK live with sight loss, with one in five aged 75 and over, and one in two aged 90 and over. In Plymouth, the rate of sight loss among those aged 65 and over is 123.8 per 100,000 population, higher than the England average of 110.5. This underscores the need for accessible eye care services and support for visual impairments.

Furthermore, the number of people aged over 65 with a limiting long-term illness in Plymouth is expected to rise from 12,600 to 18,000, indicating a growing demand for healthcare services tailored to chronic and long term conditions.

Demand

There is clearly a pressing need for comprehensive health and wellbeing support in Plymouth. Addressing economic disparities, improving housing conditions, and enhancing healthcare services are essential to mitigate health inequalities and promote better outcomes for all residents, including the substantial veteran community. It is within this context that ILP provides its services, helping over 10,000 people between April 2024 and March 2025, opening around 17,500 cases to provide information, advice, support and guidance, as well as supporting around 1,000 people through a range of clubs and clinics.





7. Strategic Objectives: 2025-2028

Delivering for Impact

Based on our understanding of the operating environment and following widespread reflection and consultation with colleagues, networks and partners, we have developed a set of five strategic objectives for the period April 2025 to March 2028.

We have captured that organisational intent as a Theory of Change to provide a focus for our vision, mission and values that will feed into our annual planning and quarterly review cycle.

This has created a platform for [our priorities](#), which we have profiled over 3 years (detail for Y1, leading to our ambition for Y2&3), which supports our [financial planning](#) for how we align, prioritise, balance and allocate organisational resources across our five strategic objectives. Working with our values and with emphasis on our operating principles and 'One ILP' culture, our strategic objectives and delivery priorities provide the direction for individual [project plans](#) developed across our portfolio of service delivery projects and programmes. These operational plans will drive the outputs and outcomes that we expect will effectively and efficiently deliver the impact we want to achieve:

- Improved health & wellbeing outcomes for all local people

- Improved health & wellbeing equity for identified groups at higher risk
- Improved impact of the wider health, social care & wellbeing systems

Vision

A healthy, happy, sustainable and thriving society for all people.

Mission

To support people and communities across Plymouth and surrounding areas to thrive by leading healthier, happier and sustainable lives.

Values

- We treat everyone with **honesty** and **kindness**
- We treat everyone with **respect**
- We **listen** and **respond** to people's needs
- We have a **one team culture** at Improving Lives Plymouth

Principles

Our approach is underpinned by five core principles that support our delivery.

Everything we do is designed and delivered with these in mind.

- 1) **Person-centred and holistic approaches** to support people's health and wellbeing that embraces body, mind, heart and spirit
- 2) Implementing an evidenced-based **lifestyle medicine** approach to health and wellbeing
- 3) Creating a **learning environment** for all people and partners
- 4) Embracing an **outward mindset** organisational culture that is solution focused to drive our outputs and outcomes
- 5) Taking a **system-based** approach to working in partnerships

Objectives

1. **Delivering high-quality preventative services** – we are strengthening our person-centred, trauma-informed approach through the development of an integrated Person-centred Wellbeing Hub (PCWH) model, bridging gaps in provision, and ensuring accessible, demand-led and data-driven service design.
2. **Communicating public messaging about healthy lifestyles** – we are amplifying voices, growing public awareness, and deepening engagement through strategic

marketing, digital media, and evidence-based campaigns that connect positively with our supporters and communities.

3. **Developing and supporting our workforce** – we are committed to making ILP the best place to work and volunteer. Through leadership development, wellbeing initiatives and an excellent benefits package, underpinned by an inclusive ‘One ILP’ culture, we will continue investing in the people who drive our mission forward.
4. **Strengthening our role in system leadership** – we are positioning ILP as a trusted system partner, promoting and placing the organisation at the centre of shaping preventative health and wellbeing services through strategic partnerships, co-design initiatives, and innovation in service delivery.
5. **Building a sustainable future** – we are developing our infrastructure, investing in our property and facilities, strengthening our IT, digital and data capabilities, and diversifying income to make sure ILP remains resilient, financially secure, and positioned for future growth and development.



Theory of Change

A healthy, happy, sustainable and thriving society for all people

We recognise the challenges brought by the persistent and emerging social and economic changes impacting the NHS and social care, including the long-term impact of covid, the cost-of-living crisis, an increasingly ageing population and health inequalities amongst our local communities. Our strategy for 2025 to 2028 focuses on supporting local communities to lead healthier and happier lives, addressing systemic challenges to well-being in Plymouth and surrounding areas according to this Theory of Change.

Who we are

ILP is a leading local health and well-being charity originally established in 1907 (the Plymouth Civic Guild of Help), that supports people to lead healthy, sustainable and thriving lives through a wide range of services and innovative partnerships. Constantly evolving to meet the changing needs and challenges in wider society.

We were established to meet local health needs long before the Welfare State, Social Services and the NHS existed. Through our history we have pioneered new services and have given birth to numerous organisations across the city of Plymouth.

What we do

Through our services, we want people to have the information, advice, and support which will provide them with the resilience, skills, knowledge and social networks to improve their health and well-being.

Our approach

Our approach combines working collaboratively with local and regional agencies, across different sectors, to influence policy and co-develop meaningful and pioneering ways of increasing access to appropriate support for people across Plymouth and Devon.

Our values

Respect – Honesty – Kindness-Listening

Mission
To support people and communities across Plymouth and surrounding areas to thrive by leading healthier, happier and sustainable lives.

Activities

Designing and delivering high quality, accessible and impactful preventative services

Communicating public messaging about healthy lifestyles

Workforce development and well-being

System leadership

Sustainable infrastructure

Outcomes

Co-produced a broad range of trauma informed, person-centred information, advice and support services that are focused on prevention and bridging service gaps and improving impact through data-driven design and development.

Enhanced community health and well-being through information, advice, and research, utilising digital and traditional media, including raised awareness of our work and impact.

The best place to work in Plymouth, offering structured roles, competitive pay, embracing diversity and a healthy workplace culture that values employee well-being and the contribution of volunteers.

Innovation in preventative health and well-being services supported by our system and thought leadership, and our role as a trusted partner and an active participant in key local initiatives, alliances and networks.

Diverse sources of income support improved organisational infrastructure and a robust, quality assured approach that lead to sustainable and environmentally responsible operations overseen by effective governance arrangements.

Impact

Improved health & wellbeing outcomes for all local people

Improved health & wellbeing equity for identified groups at higher risk

Improved impact of the wider health, social care & wellbeing systems

8. Delivering Strategic Objectives: Priorities for Aligning - Sustaining - Developing the Organisation

Our priorities are the basis for directing, aligning, balancing and coordinating our activities and resources across our five strategic objectives. Our priorities will drive concerted effort to fully align the organisation and our collective resources to our strategic ambition in Year 1 of our strategy (FY25/26). We are confident that will create a solid platform for sustaining and developing the organisation as we look to celebrate our 120th anniversary in 2027 and work towards the long term - looking ahead to celebrating the 125th anniversary of ILP in 2032.

Objective	Description	Year 1: FY 25/26 Priorities	Year 1 Plan: Align				Lead	Year 2 & 3: Sustain and Develop
			Q1	Q2	Q3	Q4		
1	Designing and delivering high quality, accessible and impactful preventative services:	Core project delivery: delivery and development of core projects as per project plans: aligning operational management and support to development and deployment of PCWH model through course of FY.	Delivery and development of core projects, aligning to deployment of PCWH model through course of year				Operational Management Team	The outcome of delivering Year 1 priorities leads to plans for Year 2&3 that are focused on sustaining and developing effective and efficient delivery through an improved person-centred, integrated Wellbeing Hub model representing the One ILP culture, delivery principles and approach, with finances and resources fully aligned to strategic intent.
	We are strengthening our person-centred, trauma-informed approach through the development of an integrated Person-centred Wellbeing Hub (PCWH) model, bridging gaps in provision, and ensuring accessible, demand-led and data-driven service design.	Integrated Person-centred Wellbeing Hub (PCWH) operating model: define and re-design: including establishing senior leadership and operational management structure for 25-28 strategy period.	Define & re-design PCWH model				Senior Leadership Team	
		PCWH operating model: deploy changes around integrated model. Evolving management briefs and ways of working. Embed roles and resourcing with		Deploy change to support PCWH model			Senior Leadership Team	

		continued support & investment in workforce, leadership and management capability (Objective 3)						
		PCWH model sustainability (link property, facilities and digital roadmap): resources & financial planning for 26-27 with outline financial modelling for 27-28, including links to Financial Plan covering property/facilities & digital med/long term investment.			PCWH financial modelling for future sustainability and development		Senior Leadership Team	
Objective	Description	Year 1: FY 25/26 Priorities	Q1	Q2	Q3	Q4	Lead	Year 2 & 3: Sustain and Develop
2	Communicating public messaging about healthy lifestyles: We are amplifying voices, growing public awareness, and deepening engagement through strategic marketing, digital media, and evidence-based campaigns that connect positively with our supporters and communities.	Strategic marketing, comms & supporter engagement: review and develop plan, including brand, optimising digital media & developing policy-based campaigns linking to segmented fundraising approach & supporter engagement. Recruit to a delivery role to support implementation and delivery. Deploy M, C & SE plan: including a summer, winter (xmas & new year) & spring campaigns – public messaging for supporter engagement, fundraising and diversifying income (Obj 5) Develop M,C&SE business case: for future years investment in Strategic M,C&SE, including investment in the	Review & develop M,C&SE Plan & recruit to role	Delivery of initial priorities.			Consultant/ Associate	The outcome of delivering Year 1 priorities leads to plans for Year 2&3 that are focused on capitalising on the improved understanding, engagement and public visibility and awareness of ILP. Meaning we have plans to sustain and develop our trusted voice in promoting public health messages and to be an organisation the public recognise and want to support.
				Summer campaign	Winter (xmas & new year) campaign	Spring campaign	Consultant/ Associate	
					Business case development for future investment in		Consultant/ Associate	

		development of brand, digital media and fundraising capability (Objective 5)			digital media & fundraising			
Objective	Description	Year 1: FY 25/26 Priorities	Q1	Q2	Q3	Q4	Lead	Year 2 & 3: Sustain and Develop
3	Workforce development and wellbeing: We are committed to making ILP the best place to work and volunteer. Through leadership development, wellbeing initiatives and an excellent benefits package, underpinned by an inclusive ‘One ILP’ culture, we will continue investing in the people who drive our mission forward.	Annual Staff and Pulse Surveys: Annual survey results to be shared in lead up to June away day, actions from survey incorporated into workforce development plan, and follow up Pulse Survey on key themes.	Annual Staff survey: April		Pulse Survey: October		Business Support/ Exec Asst.	The outcome of delivering Year 1 priorities leads to plans for Year 2&3 that are focused on continuing the trajectory for ILP to be the best place to work / volunteer in Plymouth. Meaning we have plans to support continued investment in our people and their development to improve organisational capacity and capability, built around a collective motivation and unified culture of delivering exceptional person-centred help and support services.
		Away days: June to be themed around 'One ILP', including celebrating/recognising contribution of volunteers. Theme helps embed vision, values and principles around PCWH model development.	Away day: June 05th		Away day: November TBD		Senior Leadership Team	
		Workforce Development Plan: workforce/volunteer and leadership and management development plan: define design and deploy, linked to PCWH model development (Objective 1) & survey results/pulse surveys for ongoing development.	Define & design workforce devt plan	Deploy workforce development plan		Business Support		
		Internal Comms & Engagement: monthly all staff and volunteers comms from the CEO to keep colleagues up to date on	Strategy & One ILP culture, financial	TBD	TBD	TBD	CEO/Exec Asst.	

		progress vs. strategy. Supplements existing monthly newsletter.						
		Benefits package and wellbeing support: cross-organisation working group to continuously review and improve benefits package and wellbeing support, including flexible working patterns.	Benefits package and wellbeing working group review and improve package				Exec Asst. & Business Support	
Objective	Description	Year 1: FY 25/26 Priorities	Q1	Q2	Q3	Q4	Lead	Year 2 & 3: Sustain and Develop
4	System Leadership: We are positioning ILP as a trusted system partner, promoting and placing the organisation at the centre of shaping preventative health and wellbeing services through strategic partnerships, co-design initiatives, and innovation in service delivery.	Wellbeing Hub Network: ILP continues to be a pivotal organisation in the delivery and development of the Wellbeing Hub Network with leadership support and hosting the Network Coordinator role.	CEO chairs the Wellbeing Hub Network Executive Group and continued ILP support for hosting Network Coordinator				CEO/Wellbeing Hub Coordinator	The outcome of delivering Year 1 priorities leads to plans for Year 2&3 that are focused on ILP sustaining and developing our strategic positioning as a 'go to' trusted system partner that is uniquely placed to support, develop and innovate around the health and wellbeing service-system.
		DMHA: ILP continues to support the delivery and development of the alliance.	ILP takes a lead on Co-production for the Alliance and a lead for community development in Plymouth and West including the Plymouth Mental Health Network.				CEO/Ops Manager and Co-P Lead	
		Co-design Centre: Developing and financing a sustainable 'go to' model for enabling and resourcing the co-design and co-production of health and wellbeing support services-systems in the city.	Delivery to Changing Futures priorities and strategic engagement around model and development plan & early business development.		Embed model in broader health & wellbeing areas, including sensory, learning disability and carers		Senior Leadership Team	
		Strategic Partnerships: stakeholder analysis supports prioritisation of partnership development to ensure ILP remains well-placed to influence,	Senior leadership continuous review and prioritisation for developing strategic connections and partnerships during period of significant change for NHS and local govt.				Senior Leadership Team	

		innovate and develop during significant NHS & local govt. changes, e.g. Livewell, Age UK and Active Devon.						
Objective	Description	Year 1: FY 25/26 Priorities	Q1	Q2	Q3	Q4	Lead	Year 2 & 3: Sustain and Develop
5	Sustainable Infrastructure: We are developing our infrastructure, investing in our property and facilities, strengthening our IT, digital and data capabilities, and diversifying income to make sure ILP remains resilient, financially secure, and positioned for future growth and development.	Property & facilities review and investment: develop business case and outline, staged approach for investing in the repair, maintenance and development of the Mannamead and City Centre Hubs.	Repair & maintenance costed schedule of works	Investment/ business case for property & facilities	Funding plans & applications, and some works being undertaken		Business Support/ Senior Leadership Team	The outcome of delivering Year 1 priorities leads to plans for Year 2&3 that are focused on continuing to deliver investment in our properties, facilities and supporting infrastructure. Meaning we have bold plans with a strong emphasis on capitalising on our asset-base to re-imagine the spaces to support a wide variety of interests and uses from advice and support, to group activities and spaces to connect with a food, leisure, fitness, exercise, growing and 'repair / re-use / recycle shed' offer.
		IT infrastructure and support: embed new phone systems and support design and development of the integrated PCWH with deployment of communications tech to help manage demand – contact centre. Plan for future needs.	Embed 3CX phone system and mobile plan & deploy tech to support managing demand in PCWH model		IT infrastructure plan, including volunteer/role recruitment for future contingency		IT Manager	
		Data roadmap: re-design and development of the Charity Log system supported by a cross-org user group. Live dashboards developed and data analysis training & support programme to build capability.	Charity Log re-design around client / person orientation	CL system/ Power BI live reports suite	Data analysis training & support programme to improve data-driven approach across ILP.		Business Support	
		Fundraising and digital strategy: define, develop and deploy plans to increase fundraised income and diversify income streams. Strategy supports a business case for investment in offline & online fundraising capability.	Define & develop strategy & plan	Deploy plan - linking with Objective 2 around Strategic Marketing, Comms and Supporter Engagement		Consultant/ Associate		

		Fundraising and business development pipeline: develop flow and processes in Charity Log for coordination of business development pipeline between Ops, BD, BS and Finance teams.	Design & develop business development pipeline	Train and embed business development flow and process, including around 'product development'		Business Support / Business Development
		Business development capacity: explore roles and coordination support for bidding for opportunities & innovations that support delivery & development of integrated PCWH operating model	Define BD roles	Plan and deploy business development activities		Senior Leadership Team / Business Development
		Quality Management System: secure AQS accreditation and embed standard as ILP quality management system, with internal audit plan – routines, scheduled, programmed and specific exercises.	AQS Apply	AQS Audit	Embed AQS as QMS	Business Support / Operational Management Team
		Business Support structure review: review organisational business support needs and budget / resources / capability and structure to meet, deploy changes and embed new fit for future structure.	Review	Deploy changes	Embed new structure	Senior Leadership Team / Business Support

9. Governance, Leadership and Management

Overview

Improving Lives Plymouth is a Registered charity and a Company Limited by Guarantee. This means it is accountable to the [Charity Commission](#) and [Companies House](#). All filings to these regulatory bodies are made each year within the required time frames. The area of benefit is Plymouth.

Objects and activities - Our Purpose

The objects for which Improving Lives Plymouth was established in 1907, and amended in June 2019, are:

- a) to assist, comfort and guide any person who may be in distress by reason of poverty, ill health, loneliness or any other cause.
- b) to promote and protect the health and wellbeing and to relieve need, suffering and distress among persons within Plymouth and the surrounding area, who are currently or have previously served in the armed forces and their dependents, through the provision of services, advice and facilities to assist in their rehabilitation and integration into the community.
- c) to promote, encourage and foster any objects which may be for the common good of the community within Plymouth and the surrounding area; and,
- d) to encourage, initiate and co-operate in the work of other voluntary or statutory bodies for the advancement of education, the furtherance of health, the relief of poverty, distress or sickness or for any other work of a charitable nature or which may hereafter be deemed by law to be charitable.

Board of Trustees

The Board of Trustees comprises company directors and honorary officers. The trustees set the pay of key personnel in line with the local market. The Chief Executive Officer is also the Company Secretary.

The board has responsibility for implementing the aims and objectives of the charity through the development of appropriate policies and strategies. Regular board meetings are held throughout the year to monitor and review the work of the charity, including monitoring and review of the Charity's financial position through the Finance sub-committee.

Once a year the trustees and the charity senior staff meet for a day to look at the strategic issues affecting the charity and its development.

Improving Lives Plymouth uses the Governance Code of Good Practice as a benchmark for its Trustee Board.

Recruitment of Trustees

The board has, and regularly considers (at least annually), the skills, knowledge, and experience it needs to govern, lead, and deliver the charity's purposes effectively. It reflects this mix in its trustee appointments, balancing the need for continuity with the need to refresh the board.

There is a transparent procedure to appoint new trustees to the board, which includes advertising vacancies on our social media and our website. Appointments or nominations for election are made based on the skills, knowledge, and experience the board needs and with full consideration of the benefits, including service user representation. We target recruitment to achieve both a balance of skills and representation.

All trustees have an induction programme which involves them visiting the Improving Lives Plymouth services and projects. They are also given all relevant documents, including the Articles, Business Plan, Annual Risk Assessment Plan, and other key documents and policies. The Charity Commission document 'The Essential Trustee CC3' is also included.

Trustees' responsibilities

The trustees, who are also directors for the purposes of company law, are responsible for preparing the trustees' report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the charity trustees to prepare [financial statements](#) for each year which give a true and fair view of the state of affairs of the charitable company and the incoming resources and application of resources, including the income and expenditure, for that period. In preparing these financial statements, the trustees are required to:

- select suitable accounting policies and apply them consistently; observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;

- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the charity's transactions and disclose with reasonable accuracy at any time the financial position of the charity and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

Leadership and Management

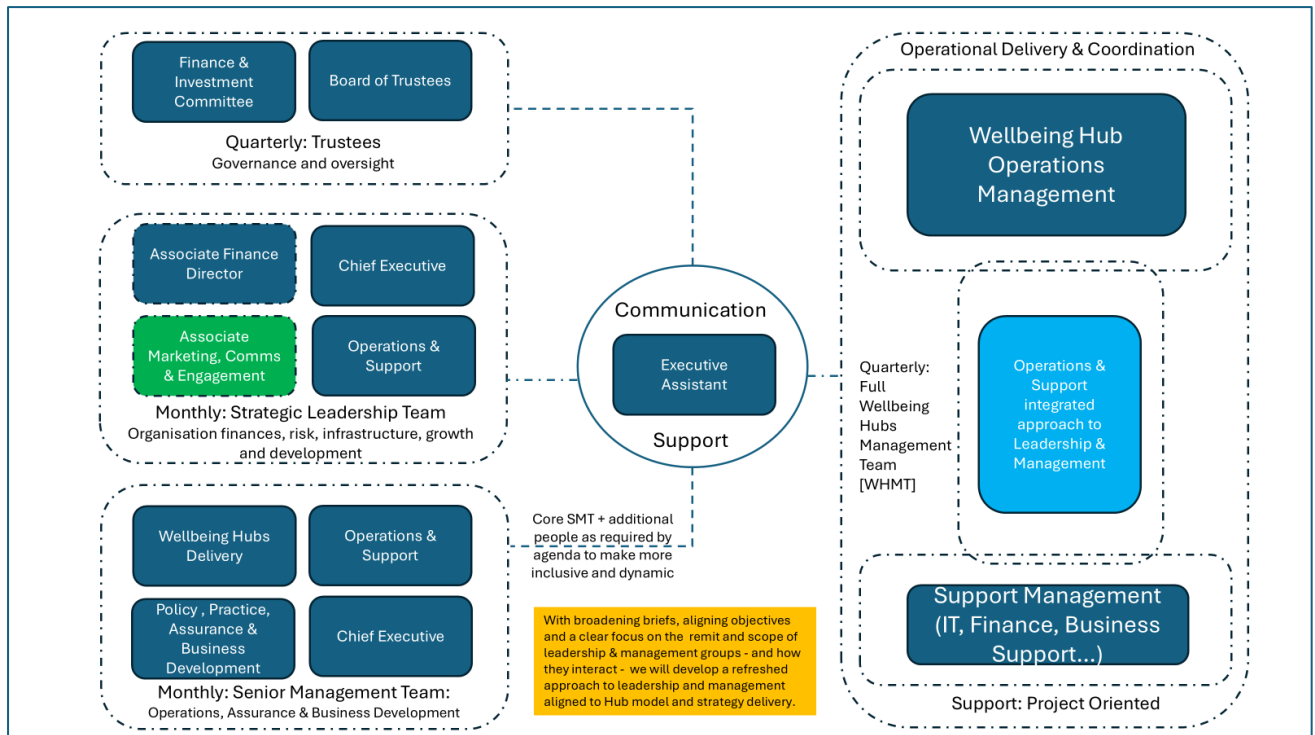
The Board is currently supported by the Chief Executive (Rob Smith) and a Senior Management Team, who oversee the operational implementation of the ILP strategic business plan.

It is our intention to continue to develop our model and approach to leadership and management in ILP, including the structures that support coordination, communication and interaction across leadership and management groups.

This will be informed by developments around the integrated, person-centred wellbeing hub model and will enable colleagues to take on broader briefs that support personal and professional development, giving opportunity to put into practice learning from participation in the recent leadership and management development programme.

We expect this to evolve through the course of FY25/26. Our approach will be based in the 'One ILP' cultural aspiration, values and principles and will be focused on maximising potential by developing the capability of our existing leaders and managers. By doing so, we anticipate we will create more capacity for people to take on broader briefs that balance operational delivery with playing key roles in developing the organisation.

Key to that will be implementing more effective arrangements for coordination, communication and support, as per the ideas set out in illustration below.



10. Financial Plan

As with most organisations in the VCSE sector, ILP faces potentially significant headwinds as we look at, and beyond, the short-term financial picture.

The baseline budget for 2025/26 shows a deficit of (£60k) from charitable activities, and a total deficit of (£50k) when including an anticipated investment gain over the year. Over FY 2023-25, consistent surpluses have been produced totalling circa £230k. This includes 2024/25, which is likely to produce a total surplus of circa £5k.

Despite the surplus in 2024/25, the budget for the year, after salary increases, had been a deficit of (£62k). The final year surplus includes an investment gain of £10k, that was not budgeted, and a favourable contract negotiation within Caring for Carers, allowing for a net increase in contribution in that department of £41k when compared to budget.

However, despite management action, the underlying position of the charity was that of a deficit position. This has continued into 2025/26. Due to the uncertain and volatile external contract funding (that we are heavily reliant on) we are in a pattern of preparing deficit budgets. This points to issues that cannot be resolved with a short-term view and management action to correct our financial position vs annual budget, but one which also requires working to a set of medium - long term financial goals to produce a sustainable operational position into future years.

The framing of this business plan is our ambition to align the organisation around our strategic objectives, creating a basis for sustaining and developing the organisation for the future. The following medium – long term financial goals will be a key driver for the work of the Strategic Leadership Team.

1. Operational financial stability & resilience

Ensure core operational costs are consistently met through predictable, sustainable income sources at full cost recovery.

- Through grant maximisation strategies, aim to achieve and maintain an operating surplus of at least 1-2% annually, ensuring a financial buffer for unexpected and organisational development costs, with decision-making on allocation held by the Chief Executive, to protect against funding disruptions across the project portfolio and/or to hedge against income generation targets not being met.
- Explore the benefits, risks, alternatives or ‘do nothing’ options around creation of secure, longer-term and consolidated funding (e.g. consolidated funding agreement with PCC covering all separate contracts – precedent set by Complex Lives Alliance) to reduce reliance on short-term grants and multiple contract management relationships.

2. Diversified & sustainable income mix

Reduce financial vulnerability by creating a balanced portfolio of funding / income streams according to a segmented funding strategy.

- At least maintain, but preferably increase, contracted / commissioned / grant income by end FY27/28 to provide stability through contribution to project and core organisational operating costs.
- Grow fundraised and philanthropic income (e.g., trusts, individual donations, community events, legacies, high net worth giving, lottery, crowdfunding etc.) by end FY27/28
- Develop earned income streams (e.g., training, room hire, social enterprise trading, payment for activities, consultancy activities) by end FY27/28.
- Secure at least 1 major corporate partnerships to provide long-term sponsorship and funding contributions.

3. Investment in infrastructure & property

Develop the physical and digital infrastructure needed for sustainable growth.

- Develop a long-term investment and property strategy, supported by a capital investment fund with decision-making on allocation held by the Chief Executive / the Board, to support organisational growth and development, alongside income generation from ILP property assets.
- Secure the capital investment funding through a mixed strategy of borrowing and grants and fundraising to undertake the necessary and appropriate short – medium term works to maintain, upgrade or expand property and facilities by end FY27/28, as a first phase in supporting a long-term investment and property strategy through to 2032.
- Invest in technology and digital infrastructure to improve diversified fundraising strategy as well as service design and delivery to create efficiencies – delivering better service through the integrated PCWH model at reduced cost by end FY27/28.

4. Service expansion & growth

Innovate and develop new revenue-generating services aligned with core purpose.

- Establish social enterprise activity (e.g., community café / food offer at Ernest English, market stall / food offer, recycle and repair shed etc.) by end FY27/28 to combine health and wellbeing support opportunities whilst generating diversified income by end FY27/28.
- Pilot and roll out paid-for specialist services such as consultancy, research, training and workshop facilitation, generating earned income whilst developing a sustainable model by end FY27/28.

5. Strategic partnerships & collaboration

- Leverage external funding and shared resources through collaboration and formalising a new partnership for joint funding bids and resource sharing by end FY27/28.
- Work with housing and supported living providers to explore revenue-generating opportunities with a new project supported by end FY27/28.

6. Efficient financial management & governance

Improve financial oversight, reporting, and long-term planning.

- Continue to strengthen financial management systems, ensuring monthly budget variance reviews and regular financial forecasting, supporting the finance

and investment sub-committee and management teams with improved financial information and insight.

- Develop financial literacy and improve financial management maturity across the ILP management layers.

Success indicators:

- Core projects are fully funded on full cost recovery basis.
- Financial reserves / infrastructure pots allow for investment in strategic priorities.
- Multiple revenue streams ensure resilience against external funding cuts.
- Facilities and technology support growth and development of the organisation.
- Expansion of paid-for services reduces reliance on public funding.

11. Strategic Marketing, Comms and Supporter Engagement

Year 1 delivery will involve significant investment in developing our organisational approach to strategic marketing, communications and supporter engagement.

That will involve exploring the potential of appointing an Associate Director to review the gaps in our current approach and to develop a strategy and plan, including covering our branding, optimising our utilisation of digital media & developing policy-based campaigns linking to a segmented approach to fundraising & supporter engagement.

We anticipate that in Year 1 this work will also include deploying summer, winter (Xmas & new year) & spring campaigns. These could support policy-based public health type messaging (for instance, around national issues and wider determinants of health with local relevance – welfare reform, NHS changes, cost of living, getting people back to work etc.) and would be integrated with supporter engagement and fundraising campaigns to support our objectives around diversifying income streams.

The approach initially will very much be emergent, driven by testing and learning, but with purposeful intent around creating a consistent and coherent approach around a refreshed brand, key messages and priorities for supporter and stakeholder engagement.

We also want to explore how our branding and key messages can work with ILP's incredible history and heritage in Plymouth, with a view to our 120th anniversary happening during this plan period (2027) and how that may help us think long-term to our 125th anniversary and beyond. Early conversations are happening that may lead to

an application to the Lottery Heritage Fund to support a community / social history project. The ideas need to be tested, but that could support work around brand, profile/awareness raising and lead to investment in our property and facilities.

12. Monitoring Evaluation and Learning

Beyond monitoring our progress against our strategic objectives and delivery against our various contracts and funding arrangements, we will work with evaluative thinking (ET) principles to embed a more developmental approach to evaluation across the organisation through this strategy period. This will help distinguish ILP as an organisation that seeks to promote an '[outward mindset](#)' culture to continually learn and adapt. We will do that through a rigorous approach to evaluation (the structured, systematic assessment of the merit, worth, or impact of our work) using evaluative thinking (a mindset of inquiry, critical reflection, and learning) as the basis for doing so.

Developmental Evaluation: the practice

- [Developmental Evaluation](#) (DE) is suited for dynamic, innovative contexts where goals evolve, using continuous feedback and adaptation. It is therefore suited to the ILP internal and external operating environment.
- DE supports learning-focused, real-time decision-making, making it ideal for complex, innovative organisations, projects and programmes.
- ET is about questioning, reflecting, and modifying, much like reflective practice, and is guided by values such as curiosity, humility, and honesty.
- While evaluation is a structured activity, ET is a way of thinking that should be embedded across all levels of an organisation, not just performed by evaluators.

Ultimately, embedding ET within ILP will ensure that evaluation is meaningful, dynamic, and contributes to continuous learning and improvement. Importantly, it is an approach that works with our desired outward mindset culture, shifting the focus from individual objectives to collective success, fostering collaboration, adaptability, and continuous learning as an organisation.

Applying the outward mindset perspective to evaluative thinking (ET) and developmental evaluation (DE) will support our intent to move beyond rigid, compliance-driven monitoring and reporting. That promotes a shift from conventional approaches to performance management by KPIs and targets to a much more rigorous and purposeful approach based in learning, transformation and impact.

A structured and systematic approach to MEL

Aligned with our intent around adopting a developmental evaluation (DE) approach, we have developed a MEL framework that is focused on embedding a learning culture, supporting organisational agility, and achieving system-wide impact, whilst enabling us to monitor organisational, reputational, financial, contractual and operational risks.

We will refine a set of quantitative measures and metrics, alongside qualitative evaluation around these aspects.

1. Learning & growth (people & culture)

Measures ILP's ability to develop its people, knowledge, and capacity.

Employee & volunteer engagement:

- Annual Staff & Pulse Survey participation rates and sentiment analysis
- Away Day participation & post-event evaluation of cultural alignment
- Measures of organisational 'health' – employee lifecycle measures: recruiting, diversifying, onboarding, developing, managing (performance & disciplinary), supporting (health & wellbeing at work), progressing (internal 'mobility' – growing our own), retaining and leaving

Leadership & workforce development:

- Measures of workforce engaging in training/development aligned with embedding the PCWH model
- Measures of progression around a workforce capability framework (skills audit pre/post-training), particularly around leadership and management styles reflecting operating environment and outward mindset approach.
- Measures of sentiment and leadership engaged in feedback loops on modelling and adopting outward mindset, values and behaviours

Internal communication & collaboration:

- Frequency & effectiveness of CEO/Senior Leadership 'set piece' staff engagement and communication
- 'Cultural entropy' – linked to sentiment analysis.

2. Person-centred service & stakeholder/partner impact (reputation & public value)

Measures ILP's effectiveness in delivering high-quality, accessible, and impactful services while maintaining credibility and trust.

Service impact & reach:

- Measures of people accessing PCWH help and support (including digital channels) connected to “20 + 5” – the 20 most deprived areas and 5 most common health issues
- Measures of equity of service provision (demographic reach across equality and community profiles – age, sex, race, religion etc.)
- Measures of client-reported satisfaction and Net Promoter Score (NPS)
- Measures of output, outcome and impact (including SROI/CBA) vs self-determined goals:
 - My life is improving
 - I’m learning to help myself
 - I’m developing a prevention mindset

Community & system leadership influence:

- Measures of ILP’s involvement in strategic health and wellbeing system initiatives (co-design projects, policy input etc.) and of partnerships formed and maintained
- Media and public engagement measures (reach and sentiment of campaigns, impact on supporter engagement)
- Measures of successful development, delivery and impact of a co-design centre, such as:
 - Co-design/Co-production: ensuring meaningful participation in shaping services and impact on health, wellbeing and social & community connection
 - Training and development: expanding access to volunteering, training, and employment.
 - Improved support and opportunities: Enhancing person-centred approaches to be more inclusive, accessible and developmental.
 - Collaboration: promoting effective collaboration to improve services across Plymouth and the surrounding areas in Devon and SE Cornwall.

Brand & public recognition:

- Growth in ILP’s supporter base and engagement levels (volunteers, donors, advocates)

- Increase in awareness and recognition of ILP (brand tracking survey)
- Share of voice in public health & wellbeing conversation (mentions and involvement/participation/leading in key forums, media etc.)

3. Internal process & operational excellence

Measures the effectiveness, adaptability, and sustainability of ILP's processes and systems.

Person centred integrated wellbeing hub model development & delivery:

- Progress of planned changes/alignment/adoption of the PCWH model - successfully deployed & embedded through measures of cultural alignment
- Measures of efficacy and efficiency of processes to support integrated approach to handling 'end to end' client journeys (e.g. time spent in queues, hand off/hand on, number of hands touching demand etc.)
- Adherence to quality assurance standards - AQS accreditation reviews (e.g. complaints, client feedback, service quality requirements etc.)

Technology & data capability:

- Implementation progress of the data roadmap (client orientation of system, live dashboard monitoring, analysis and reporting functionality, user adoption measures – data quality/consistency, user feedback, ease of use)
- Data / system literacy levels (pre/post-training effectiveness)
- IT infrastructure stability & future proofing business continuity

Governance & risk management:

- Effectiveness of risk management framework – systematic Trustee Board review of management and mitigation of key risks
- Compliance with legal, regulatory and ethical standards, including meeting required Charity Commission and Companies House reporting requirements
- Safeguarding and Serious Incidents reports

4. Financial & sustainability measures

Ensures ILP's long-term financial health and resilience.

Revenue diversification & fundraising effectiveness:

- % increase in fundraised income vs. prior year and time series

- % of funding secured from diverse sources (segmented - grants, partnerships, individual giving, events, corporates, legacies etc)
- Measures of ROI on fundraising campaigns and investment (cost-to-income ratio)
- Business development pipeline conversion rate (% of identified opportunities funded, values and timeline – exit strategies/plans)

Resource & infrastructure investment:

- Measures of scheduled property, IT and facilities investments and upgrades completed to time, quality and budget
- Improved value, service, cost savings or efficiencies achieved through improved operational process and systems and cultural ways of working

Financial resilience & risk management:

- Operational cash flow trends/liquidity/free reserves and assets
- Variance, forecasting and YTD/outturn vs budget
- Measure of budget alignment with strategic priorities and progress towards medium & long term financial goals

Summary

The ILP MEL framework ensures a robust approach to monitoring whilst adopting a systematic, learning-oriented approach to evaluating impact against strategic objectives. Rooted in Evaluative Thinking (ET) and Developmental Evaluation (DE), it shifts ILP from compliance-based monitoring and reporting to an adaptive, outward mindset approach, emphasising continuous learning, reflection, and improvement, supporting:

- Strategic alignment – The framework tracks ILP’s five strategic objectives, ensuring real-time decision-making supports evolving priorities.
- People & culture development – By monitoring workforce engagement, organisational health and people development, we foster an agile, learning-driven culture that values people’s contribution, and health & wellbeing.
- Service impact & reputation – Data on service reach, access, client journeys and client-reported outcomes help assess and improve effectiveness, ensuring we are aligned to community needs and do what matters to meet people’s demand for help and support

- Operational excellence – Evaluating process efficiency, technology adoption, and risk management ensures sustainable, high-quality service delivery and operational health.
- Financial sustainability – Monitoring income diversification, budget alignment, investment return on fundraising activities will help secure our long-term financial resilience.

13. Strategic Readiness and Risk Assessment

Based on a [thematic analysis](#) of the portfolio of individual project plans, we have undertaken a readiness assessment of how well positioned ILP is to implement this strategy and business plan. This provides a baseline position for our assessment of risk and the approach we need to take to manage and mitigate the risk of not delivering our strategy and business plan.

Readiness Assessment

This readiness assessment is a statement on the Senior Management Team's opinion on how well positioned ILP is for delivering our strategic objectives, considering factors such as cultural alignment, operational capacity and capability, leadership commitment, workforce engagement and motivation, financial sustainability, and external factors influencing our operating environment. It is effectively an assessment of alignment between operational delivery (captured in [the portfolio of project plans](#)), strategic intent and organisational business plan.

At this stage, we conclude that ILP is well-positioned to adopt and implement the strategic business plan, with the indication from the portfolio of project plans being that our key projects are strongly aligned to our overarching objectives.

1. Strategic Alignment

There is clear read across between project plans and strategic intent, ensuring a clear focus on:

- Service innovation & impact – developing a Person-Centred Wellbeing Hub (PCWH) model to improve integration, accessibility and service quality.
- Public engagement & visibility – strengthening marketing, communications, and supporter engagement to enhance awareness and fundraising potential.

- Workforce & leadership development – Creating a structured plan for staff and volunteer support, management and leadership development, and cultural alignment with ILP’s vision.
- System Leadership & Partnerships – Positioning ILP as a trusted system partner, actively shaping the preventative health and wellbeing landscape.
- Sustainable infrastructure & growth – Investing in properties, facilities, IT, data, and fundraising diversification to ensure long-term sustainability.

2. Organisational Capacity & Capability

- Leadership & governance: Senior leadership is committed to driving change, with clear communication, management and accountability structures in place or planned.
- Operational capacity: the strategy is building on a track record of core project delivery and success, but with clear recognition of the need for continued investment in people, processes, and systems in order to sustain momentum and greater resilience through closer integration of project delivery.
- Operating environment: building greater resilience and the need to innovate to the absorb and adjust to the impact of a volatile and uncertain operating environment is a key feature of project and strategic plans, recognising this strategy is being implemented through a period of significant change:
 - NHS reform and focus on community provision, prevention and digital / AI
 - a period of local government re-organisation
 - welfare reform and a focus on getting people back to work.
 - all set in a context of slow economic growth impacting on public expenditure and likely need for cuts to services.
- Financial & resource planning: within that volatile and uncertain context, the strategy prioritises investment for diversifying income streams, as well as to invest in our digital capability, property and facilities and approach to supporter engagement, all of which will work to foster growth and stability aligned to medium to long term financial goals.

3. Cultural Preparedness

- Based on the plans submitted, ILP’s workforce is clearly engaged in the vision for change, with strong buy-in for a One ILP culture
- Continued internal communication, staff wellbeing initiatives, and leadership, management and workforce development are recognised as crucial to embedding the planned strategic transformation.

Overall, the assessment is that ILP is in a strong position to implement this strategy, provided there is sustained focus on more integrated ways of working, aligned to a person-centred service design, investment in areas that will support long-term sustainability vs shoring up short-term project / contract delivery, support for workforce development, and organisational agility to adapt to a volatile and uncertain external operating environment and changes in the type, nature and frequency of demand.

Risk Assessment and Mitigation

1. Operational Risks

Readiness Considerations:

- ILP has a strong foundation in operational delivery, but continued investment in people, processes, and systems is needed to build resilience and sustainability across our operating model.
- The Person-Centred Wellbeing Hub (PCWH) model aligns with ILP's strategic intent but requires support for transformation around operational service/project integration, accessibility, and client journey / quality to be fully realised.

Risks:

- High demand for crisis and ongoing support exceeding current capacity and not aligning with our intent to be prevention-orientated.
- Digital exclusion and barriers to accessing essential services.
- Service fragmentation across wellbeing hubs affecting people's experience.
- Workforce strain, staff burnout, and staff and volunteer recruitment and retention challenges.
- Management of change / transformation does not lead to desired outcomes.

Mitigation Strategies:

- Invest in hybrid service models (digital & in-person) to enhance accessibility.
- Strengthen referral pathways and integrate PCWH model to reduce service fragmentation and create improved client journeys and experience.
- Implement structured workforce and leadership development plans to improve resilience, including dedicated support for volunteer and lived experience pathways.

2. Financial & Resource Risks

Readiness Considerations:

- ILP is prioritising investment in digital capability, property, facilities, and income diversification to build long-term sustainability.
- The volatile economic climate and public sector funding constraints pose risks to service continuity and growth.
- Competition for scarce resources impacts plans for growth and development.

Risks:

- Over-reliance on a limited set of funding streams affecting long-term sustainability.
- Lack of financial resources to scale community-based and prevention-oriented initiatives.
- Funding constraints limiting digital transformation, property and facilities and IT investment to support implementation of PCWH model.

Mitigation Strategies:

- Diversify income streams, leveraging a segmented fundraising strategy with investment in specialist roles, e.g. business development.
- Strengthen supporter engagement as a means to support fundraising strategies to increase financial resilience.
- Invest in cost-effective digital tools to improve accessibility, engagement and better efficiency and reduction in operating costs.

3. Strategic Risks

Readiness Considerations:

- ILP is well-positioned to lead system-wide collaboration, with strong alignment to the strategic intent around NHS reform and its focus on community provision, preventative approaches and digital innovation.
- However, the external landscape is highly volatile, with NHS change, local government reorganisation, welfare reform, and economic pressures creating uncertainty.

Risks:

- Siloed working and poor strategic engagement and networking between ILP, statutory services, NHS and local health and social care systems and networks.
- Missed opportunities for system leadership in preventative, community-based health and wellbeing provision.
- Failure to adapt to changing policy, economic, social and technological landscapes, including commissioning strategies and intentions

Mitigation Strategies:

- Strengthen multi-agency partnerships (e.g., Wellbeing Hubs Network and Devon Mental Health Alliance) to drive system-wide engagement, ILP profile and opportunity to create change.
- Position ILP as a thought leader in community-based, preventative health and wellbeing, advocating for person-centred, system-oriented approaches, supported by our investment in online and offline supporter and stakeholder engagement.
- Maintain agility in service design, ensuring flexibility to adapt to funding, economic and policy shifts across the local systems.

4. Workforce & Leadership Risks

Readiness Considerations:

- Senior leadership commitment is strong, and ILP is embedding a One ILP culture, with clear buy-in for transformation.
- Continued focus on staff wellbeing, leadership development, and internal communication is required to maintain engagement and resilience.

Risks:

- Workforce fatigue and risk of staff burnout.
- Difficulty in recruiting and retaining staff and volunteers.
- Ensuring lived experience representation in service delivery.
- Unable to invest time and resources in developing the capacity and capabilities we need to support different ways of working, aligned to person-centred model.

Mitigation Strategies:

- Build on leadership and management training to improve organisational capacity and capability
- Continue to strengthen the ILP benefits and wellbeing support packages and approaches to support people to promote good ‘operational health’ and to prevent burnout.
- Strengthen volunteer recruitment, peer-led models, and staff and volunteer engagement initiatives.

5. Reputational Risks

Readiness Considerations:

- ILP has strong credibility but must maintain clear boundaries around service provision (e.g., project plan “won’t do’s”, such as not providing direct clinical care, financial/legal advice).
- Expanding public engagement and visibility is a strategic focus, ensuring greater reach and impact.

Risks:

- Risk of overextending services beyond expertise (e.g., legal, addiction, personal care).
- Challenges in public perception and engagement, particularly in underrepresented communities.
- Ensuring ILP’s role is clearly understood by staff and volunteers, stakeholders, partners, funders, and service users.

Mitigation Strategies:

- Maintain clear service boundaries (Won’t Do: Clinical care, legal advice, long-term home visits).
- Prioritise co-production and lived experience involvement in service design.
- Implement targeted awareness / policy-based campaigns to strengthen public engagement in who we are, what we do and how we do it.

Appendix: Thematic Analysis

This analysis is based on the summary of the project plans produced by all the ILP project areas. It provides a basis for understanding the connections between the challenges and opportunities that projects are working with and the alignment to the ILP strategic business plan. This analysis has informed our readiness assessment and understanding and appreciation of the strategic risk assessment.

Challenges and Opportunities: Key Themes and Patterns

Challenges

1. Operational Constraints

- Limited staffing and resources affecting service delivery across multiple projects.
- Increased demand for services leading to capacity issues.
- Challenges in developing operations while maintaining capacity, quality and consistency. Impacts on opportunities for managers to focus on strategic development of services.

2. Financial Sustainability

- Heavy reliance on external funding, making services vulnerable to budget fluctuations.
- Need for sustainable income streams to ensure long-term viability.
- Competition for grants and funding limiting growth potential.

3. Reputational Risks

- Managing community and stakeholder expectations amid limitations of resources.
- Risk of brand confusion or lack of awareness affecting engagement.
- Need to build and maintain trust, particularly in sensitive service areas like veterans' support and mental health.

4. Legal and Contractual Compliance

- Navigating complex array of legal requirements, including funding contracts and regulatory obligations, whilst delivering to ILP purpose and strategy
- Ensuring compliance with data-sharing and privacy regulations.

- Adapting to policy changes that may impact service delivery.

5. Recruitment and Workforce Challenges

- Difficulties in hiring and retaining staff due to sector-wide issues and salary expectations.
- Dependency on volunteers, with potential challenges in sustaining engagement.
- Need for ongoing staff training to meet evolving service demands.

6. Engagement Barriers

- Overcoming stigma around accessing support, e.g. around mental health and aging.
- Ensuring accessibility of services for diverse populations, reflecting community profile and including older adults (aging population) and veterans (comparably higher proportion of veterans in Plymouth)
- Effectiveness of communication, public, stakeholder and supporter engagement to raise awareness and drive participation due to limited, specialist support.

Opportunities

1. Service Expansion

- Innovating service design to meet growing demand, including new service offerings.
- Expanding digital and virtual services to increase accessibility.

2. Collaboration and Strategic Partnerships

- Strengthening relationships with health and social care sector / providers, local authorities, and community organisations, e.g. through Wellbeing Hub Network and Devon Mental Health Alliance.
- Engaging with national charities and private sector partners to enhance service reach and effectiveness.

3. Sustainable Funding and Income Generation

- Exploring new funding models, such as grants, corporate sponsorships, and public-private partnerships.
- Developing revenue-generating activities like training programs and paid services.

4. Technology Integration and Innovation

- Leveraging digital health tools, telehealth, and online education platforms to improve service delivery.
- Streamlining referral pathways and data sharing through improved system integration.

5. Community Engagement and Volunteer Development

- Expanding volunteer-led initiatives to enhance service delivery and sustainability.
- Creating grassroots-driven models to strengthen community ownership and participation.

Top 5 Priorities to Address (Challenges)

1. Sustaining Service Delivery Amid Capacity Constraints

- Address staffing shortages and volunteer reliance to ensure consistent service provision.
- Implement workforce planning and training to respond to increased demand and to be more agile in meeting patterns in type, nature and frequency of demand.

2. Securing Long-Term Financial Stability

- Reduce reliance on uncertain external funding by diversifying income sources.
- Develop sustainable operational and financial models, including revenue-generating initiatives.

3. Managing Reputational Risks and Community Expectations

- Strengthen communication strategies to set realistic service expectations.
- Enhance brand identity to differentiate from national organisations and competitors and integrate with improved fundraising.

4. Navigating Legal and Regulatory Compliance

- Ensure adherence to funding contracts, data-sharing regulations, and service standards, whilst focusing on a person-centred approach.
- Develop flexible strategies to adapt to policy changes without service disruption, e.g. around welfare reforms etc.

5. Overcoming Barriers to Engagement and Access

- Address stigma and accessibility issues in services related to mental health, aging, and self-management.
- Enhance outreach efforts to reach underrepresented groups and improve participation.

Top 5 Priorities to Explore (Opportunities)

1. Expanding and Innovating Service Delivery

- Develop an operating model to meet growing demand, with a focus on integration between project areas and utilisation of digital and hybrid service models.
- Introduce new service offerings aligned with emerging community needs.

2. Strengthening Strategic Partnerships and Collaborations

- Deepen relationships with healthcare, education, and community partners to enhance impact.
- Leverage partnerships to access new resources, expertise, and referral pathways.

3. Developing Sustainable Funding and Income Streams

- Explore new funding opportunities, including individual giving, trusts/grants, corporate sponsorships, and social enterprise models.
- Expand revenue-generating activities such as training programs and consultancy services.

4. Leveraging Technology for Efficiency and Accessibility

- Integrate digital tools (e.g., telehealth, online support, and AI-driven resources) to enhance service delivery.
- Streamline internal systems (e.g. Charity Log) for data management and service coordination.

5. Enhancing Community Engagement and Volunteer Involvement

- Expand volunteer-led initiatives to support service delivery and sustainability.
- Foster stronger grassroots involvement to increase community ownership and participation.

Project Plan Priorities: Key Themes

Key themes and patterns across project priorities

Must Do (Core Services & Non-Negotiable Priorities)

1. Direct Support for Key Target Groups
 - Providing prevention-oriented services from information and advice, to guidance and support, statutory assessment to group activities.
 - Ensuring crisis support where needed.
2. Access to Essential Resources & Information
 - Income maximisation, welfare advice, and signposting to ensure financial stability and access to necessary services.
 - Ensuring people have the tools, assistive technology, and self-management resources to maintain independence.
3. Community-Based, Preventative Wellbeing Support
 - Delivering mental health and wellbeing programs, including social, leisure and physical activities.
 - Providing structured self-management and education programs for individuals, for example, with long-term conditions.
4. Collaboration & Integration with Health and Social Care Systems
 - Strengthening relationships between statutory and community sectors (e.g., NHS partnerships, Multi-Agency Teams, Wellbeing Hubs Network. DMHA).
 - Ensuring alignment with broader health strategies, referral pathways, and data-driven decision-making, accounting for changes in operating environment – NHS, welfare reform, local government reorganisation, government spending cuts.
5. Maintaining Organisational Credibility & Service Reputation
 - Upholding high service standards to maintain trust within communities.
 - Ensuring staff, volunteers, and partnerships reflect lived experience where relevant.

Should Do (Value-Added Services & Enhancements)

1. Expanding Peer Support & Group-Based Interventions

- Developing peer networks, support groups, and volunteer-led initiatives to enhance service accessibility.
- Strengthening the integration with other community-based wellbeing hubs to build resilience.

2. Enhancing Professional & Community Training

- Educating healthcare professionals and community workers, for example, around being trauma informed, on sensory loss, long-term condition management, and mental health.
- Improving internal staff training to build knowledge, capacity and capability on specific challenges faced by service users, e.g. around issues with money (benefits maximisation) and housing (gaps in local provision).

3. Strengthening Outreach & Engagement Efforts

- Expanding public awareness campaigns to improve uptake of services where relevant and to build support for ILP, including diversification of income streams.
- Working more closely with underrepresented groups in our demand profile to ensure equitable access to services.

4. Advocacy & Policy Influence

- Ensuring the voices of people who use services are included in decision-making through dedicated support for co-design and co-production.
- Advocating for improved access and availability of statutory and third-sector services.

5. Improving Service Coordination & Referral Pathways

- Strengthening collaboration with external agencies, including GPs, hospitals, and local authorities.
- Integrating more streamlined referral systems to ensure individuals access the right level of support at the right time.

Could Do (Innovation, Expansion & Future Opportunities)

1. Digital & Technological Integration

- Exploring digital tools, mobile applications, and AI-based support systems for self-management and service delivery.
- Offering hybrid services (in-person and online) to improve accessibility.

2. New & Creative Community-Based Initiatives

- Expanding physical activities, arts-based wellbeing programs, and sensory-friendly initiatives.
- Introducing more diverse events tailored to specific service user needs.

3. Broader Service Expansion & Scaling

- Extending reach to new geographic areas (e.g., West Devon for PMHC).
- Developing and delivering our existing services across multiple hubs in the PWHN.

4. Holistic & Complementary Support Approaches

- Integrating wellbeing initiatives with nutrition, exercise, and alternative therapies.
- Exploring partnerships with arts and cultural organisations to enhance mental and physical health.

5. Research, Innovation & Best Practice Sharing

- Engaging in research to inform better service delivery and self-management strategies.
- Collaborating with universities and health bodies to evaluate and improve impact.

Won't Do (Out of Scope Activities & Limitations)

1. Legal, Debt & Financial Advice

- Services will not provide legal aid, debt management, or financial services beyond signposting.

2. Clinical & Acute Medical Care

- No direct medical interventions, crisis response, or intensive psychiatric care beyond wellbeing support.

3. Long-Term Personalised Care

- No provision of personal care or overnight support.

4. Substance Misuse & Addiction Services

- Services will not provide addiction treatment or crisis intervention for substance misuse.