

## **BROMSGROVE DISTRICT COUNCIL**

**Cabinet**  
**2026**

**18<sup>th</sup> February**

### **Particulate Monitoring – Update Report**

Relevant Portfolio Holder	Councillor Kit Taylor
Portfolio Holder Consulted	Yes
Relevant Assistant Director	Simon Wilkes, Director - Worcestershire Regulatory Services
Report Author	Chris Poole Job Title: Specialist Lead Officer (Air Quality), WRS Contact email: chris.poole@worcsregservices.gov.uk Contact Tel: 01562 738069
Wards Affected	All
Ward Councillor(s) consulted	No
Relevant Council Priority	Infrastructure & Environment
Non-Key Decision	
If you have any questions about this report, please contact the report author in advance of the meeting.	

#### **1. RECOMMENDATIONS**

**The Cabinet is asked to RECOMMEND that:-**

- 1) Additional funding of £105,234.04 be added to the revenue budget for 2026/27;**

**And the Cabinet is asked to RESOLVE to NOTE that**

- 2) subject to agreement of recommendation 1 above, the recommendations arising from the particulate matter report considered by Cabinet on 7<sup>th</sup> January 2026 will be presented for Council's consideration alongside this recommendation in February 2026.**

#### **2. BACKGROUND**

- 2.1** Worcestershire Regulatory Services (WRS) were asked by Council to prepare an options paper for additional Particulate Matter Monitoring within Bromsgrove District Council (BDC) area.
- 2.2** A report was presented to Cabinet on 7<sup>th</sup> January 2026 outlining the background to air quality and particulate matter in the District. The report presented at that time provided a rationale for enhanced particulate matter and specifically source apportionment research to establish levels and sources of pollution.

2.3 A number of additional monitoring options were presented and Cabinet recommended Option E as set out in that report be considered at Full Council, subject to and with the requirement for, a further report being brought to Cabinet with greater clarity on costs for the recommended Option (E). This report provides clarity on final costs.

2.4 Option E was Option C and Option D combined. For reference a summary of these options is provided below:

**2.5 Low-cost sensors – extension [Option C].** This option would extend life of existing sensors for a further defined period, e.g. 1 – 3 years beyond expiration of current service and maintenance contract due December 2026. Option C addition allows for relocation of the existing units if required.

- Costs: £20,363.04 (3 units for 3 years, service and subscription)
- including costs for relocation (£3,915)
- Timeline for delivery: January 2027 to provide continuous monitoring
- Data: PM<sub>1</sub>, PM<sub>2.5</sub>, PM<sub>10</sub>, NO, NO<sub>2</sub> Monitoring Total only.

**2.6 Source apportionment study with UoB – mobile supersite [Option D].** This option would utilise state of the art air quality monitoring equipment at a fixed location for one month in summer and one in winter providing a comprehensive set of PM observations. Data analysis and written report provided by experienced academic researcher.

- Costs: £124,871
- Timeline for delivery: approximately 18 months
- Data: Chemical analyses and source apportionment of PM
  
- Costs: £124,871

2.7 The final costs of **Option E** therefore are £145,234.04

### **3 OPERATIONAL ISSUES**

3.1 There are no anticipated operational issues, as the majority of the research will be completed by the University of Birmingham in relation to the supersite. Any work associated with the low cost sensors will be completed as part of the team's business as usual.

### **4 FINANCIAL IMPLICATIONS**

- 4.1 The costs of the recommended Option E outlined within the report above are (One-off) £145,234.04.
- 4.2 It is proposed that expenditure would in year 2026/27.
- 4.3 There is currently no assigned budget available for this project. Any agreement to the proposal would need to be considered alongside other competing bids for funding from reserves.
- 4.4 Following request from WRS on behalf of the council, the Director of Public Health is committed to contributing £40,000 towards this project should approval by the Council be given. Thus the recommendation in 1 above is the cost of the project minus the contribution from the Director of Public Health.

## **5 LEGAL IMPLICATIONS**

- 5.1 Part IV of the Environment Act 1995, the Local Air Quality Management process (LAQM) and subsequent Policy Guidance (LAQM.PG22) and Technical Guidance (LAQM.TG22) documents set out the duty of local authorities to review and assess local air quality within their areas against a set of health-based objectives and work to improving poor air quality identified. Local Authorities in England are expected to report on nitrogen dioxide (NO<sub>2</sub>), PM<sub>10</sub> and sulphur dioxide (SO<sub>2</sub>) as standard within their Annual Status Reports. Under the Environment Act 2021, the UK government have set 2 legally-binding long-term targets to reduce concentrations of fine particulate matter, PM<sub>2.5</sub>. Whilst the responsibility for meeting the PM<sub>2.5</sub> targets sits with national government; local authorities have a role to play in delivering reductions in PM<sub>2.5</sub>. and are also required to report on actions taken within their ASR. The proposal supports the council's obligations to assess local air quality within its boundaries in accordance with LAQM regulations.
- 5.2 Poor air quality in general can affect peoples' health, playing a role in many chronic conditions such as cancer, asthma, heart disease and neurological changes linked to dementia. Air pollution is estimated to contribute to between 26,000 to 38,000 deaths per year in England (Chief Medical Officer's Report, 2022). Particulate Matter is considered to be the most important air pollutant in terms of health impacts. PM can have short-term health impacts over a single day when concentrations are elevated. Long-term exposure to PM increases mortality and morbidity from cardiovascular and respiratory diseases and can cause cancer. Effects are amplified in vulnerable groups including young children, the elderly, and those suffering from breathing problems like asthma. It is also causally linked to dementia

and decline in cognitive function. There is growing evidence for associations with adverse birth outcomes and diabetes. The World Health Organization (WHO) advises there is no safe exposure level to PM.

**6     OTHER - IMPLICATIONS**

**6.1   Local Government Reorganisation**

6.2   No impacts on LGR because it is anticipated the proposed schemes will be implemented before 1<sup>st</sup> May 2028.

**6.3   Climate Change Implications**

6.4   No impacts on climate change.

**6.5   Equalities and Diversity Implications**

6.6   No equality implications have been identified.

**7     RISK MANAGEMENT**

7.1   Risk from not taking proposed action is limiting understanding of PM<sub>2.5</sub> within the district's boundaries. Risks from implementing proposed action is that additional monitoring may identify an exceedance of an objective that is a national issue and the local authority is limited in powers to resolve.

**8     APPENDICES and BACKGROUND PAPERS**

Appendix 1. Cabinet Report 7<sup>th</sup> January 2026 with full information on the project.

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**9.     REPORT SIGN OFF**

<b>Department</b>	<b>Name and Job Title</b>	<b>Date</b>
Portfolio Holder	Councillor Kit Taylor.	Advised by email 30.01.2026
Lead Director / Assistant Director	Simon Wilkes	28.01.2026
Financial Services	Debra Goodall	06.02.2026
Legal Services	Nicola Cummings	28.01.2026
Policy Team (if equalities implications apply)	N/A	N/A
Climate Change Team (if climate change implications apply)	N/A	N/A