

**Chief Executive's Office**

Chief Executive: CJ Bull

**To: All Members of Cabinet:**  
**RJ Phillips (Leader)**  
**LO Barnett**  
**AJM Blackshaw**  
**H Bramer**  
**JP French**  
**JA Hyde**  
**JG Jarvis**  
**DB Wilcox**

Your Ref:

Our Ref: CJB/SAHC

Please ask for: Mr CJ Bull

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16th January 2008

Dear Councillor,

**MEETING OF CABINET**  
**THURSDAY, 24TH JANUARY, 2008 AT 2.00 P.M.**  
**COUNCIL CHAMBER, BROCKINGTON, 35 HAFOD ROAD, HEREFORD**

**AGENDA (08/17)**

**HEREFORDSHIRE COUNCIL - NOTICE UNDER REGULATION 15 OF THE LOCAL  
 AUTHORITIES (EXECUTIVE ARRANGEMENTS((ACCESS TO INFORMATION) REGULATIONS  
 2000 (AS AMENDED)**

Notice is hereby given that the following reports contain key decisions. When the decisions have been made, Members of the relevant Scrutiny Committee will be sent a copy of the decision notices and given the opportunity to call-in the decisions.

<b>Item No</b>	<b>Title</b>	<b>Portfolio Responsibility</b>	<b>Scrutiny Committee</b>	<b>Included in the Forward Plan Yes/No</b>
10	Assessments of 18-64 Year Olds' Future Needs and Services: Mental Health and Physical Disabilities	Social Care and Health	Adult Social Care and Strategic Housing	No
11	Replacement Livestock Market	Economic and Community Services and Resources	Strategic Monitoring and Community Services	Yes



**Putting People First Providing for our Communities Preserving our Heritage Promoting the County Protecting our Future**

County of Herefordshire District Council, PO Box 239, HEREFORD, HR1 1ZU

Main Switchboard (01432) 260000 - www.herefordshire.gov.uk

## 1. APOLOGIES FOR ABSENCE

To receive any apologies for absence.

## 2. DECLARATIONS OF INTEREST

To receive any declarations of interest by Members in respect of items on the Agenda.

### **GUIDANCE ON DECLARING PERSONAL AND PREJUDICIAL INTERESTS AT MEETINGS**

The Council's Members' Code of Conduct requires Councillors to declare against an Agenda item(s) the nature of an interest and whether the interest is personal or prejudicial. Councillors have to decide first whether or not they have a personal interest in the matter under discussion. They will then have to decide whether that personal interest is also prejudicial.

A personal interest is an interest that affects the Councillor more than most other people in the area. People in the area include those who live, work or have property in the area of the Council. Councillors will also have a personal interest if their partner, relative or a close friend, or an organisation that they or the member works for, is affected more than other people in the area. If they do have a personal interest, they must declare it but can stay and take part and vote in the meeting.

Whether an interest is prejudicial is a matter of judgement for each Councillor. What Councillors have to do is ask themselves whether a member of the public – if he or she knew all the facts – would think that the Councillor's interest was so important that their decision would be affected by it. If a Councillor has a prejudicial interest then they must declare what that interest is and leave the meeting room.

## 3. MINUTES

To approve and sign the minutes of the meeting held on 13 December 2007. *(Pages 1 - 8)*

## 4. DRAFT FINANCIAL STRATEGY 2008/11

Council approved the Medium Term Financial Strategy (MTFS) for 2007 – 2010 when the budget for 2007/08 was set in March 2007. This report is seeking Cabinet approval to Corporate Management Board's (CMB's) recommendations for updating the current MTFS for the 2008 – 2011 period. The report has been drafted by the Director of Resources in consultation with the CMB.

Cabinet will receive a further report on the MTFS for 2008 – 2011 from the CMB at its meeting on 24th February 2008 that will include details of the final local government finance settlement and any other suggested changes. Cabinet will also consider views expressed by the Strategic Monitoring Committee (SMC) on this report and finalise its recommendations to Council on the financial strategy for 2008 – 2011, budget for 2008/09 and Council Tax for



2008/09 at that meeting.  
(Pages 9 - 24)

**5. DRAFT CAPITAL PROGRAMME 2008/09**

To propose the draft capital programme for 2008/09.  
(Pages 25 - 42)

**6. PROGRESS ON IMPROVEMENT CHILDREN AND YOUNG PEOPLE'S SERVICES**

To update Cabinet on the performance of the Children and Young People's (CYP) Directorate as part of the continuing performance management process specifically established since the Joint Area Review (JAR) inspection in 2005.  
(Pages 43 - 70)

**7. INTEGRATED PERFORMANCE REPORT**

To report:

- (i) the Council's performance for the first eight months of 2007-08 against the Annual Operating Plan 2007-08 and national performance indicators used externally to measure the performance of the Council;
- (ii) partnership performance for the first six months in delivering the Local Public Service Agreement, Local Area Agreement and Herefordshire Community Strategy; and
- (iii) performance against revenue and capital budgets and corporate risks, and remedial action to address areas of under-performance.

(Pages 71 - 146)

**8. HEREFORDSHIRE SATISFACTION SURVEY 2007**

To summarise the findings of the recent survey and the corporate actions that will be taken as a result.  
(Pages 147 - 152)

**HEREFORDSHIRE SATISFACTION SURVEY 2007 FULL REPORT**

**9. PLANNING OBLIGATIONS SUPPLEMENTARY PLANNING DOCUMENT**

To receive and adopt a Supplementary Planning Document (SPD) setting out the Council's policy on the use of planning obligations, following statutory public consultation. (Pages 153 - 232)

**10. ASSESSMENTS OF 18 - 64 YEAR OLDS' FUTURE NEEDS AND SERVICES: MENTAL HEALTH AND PHYSICAL DISABILITIES**



To make proposals for the development of high-performing health and social care services by 2012 to meet the expected future needs of 18-64 year-olds in Herefordshire with mental health problems and physical disabilities.

*(Pages 233 - 390)*

#### **EXCLUSION OF THE PUBLIC AND PRESS**

**In the opinion of the Proper Officer, the next item will not be, or is likely not to be, open to the public and press at the time it is considered.**

#### **RECOMMENDATION:**

**That the public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in Schedule 12(A) of the Act as indicated below.**

#### **11. REPLACEMENT LIVESTOCK MARKET**

Cabinet is asked to review the progress being made to replace the current livestock market and to approve next steps in delivering the project.

**This information relates to the financial or business affairs of any particular person (including the authority holding that information).**

*(Pages 391 - 412)*

Yours sincerely,



**CJ BULL  
CHIEF EXECUTIVE**

Copies to: Chairman of the Council  
Chairman of Strategic Monitoring Committee  
Vice-Chairman of Strategic Monitoring Committee  
Chairmen of Scrutiny Committees  
Group Leaders  
Directors  
Head of Legal and Democratic Services



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- Inspect minutes of the Council and all Committees and Sub-Committees and written statements of decisions taken by the Cabinet or individual Cabinet Members for up to six years following a meeting.
- Inspect background papers used in the preparation of public reports for a period of up to four years from the date of the meeting. (A list of the background papers to a report is given at the end of each report). A background paper is a document on which the officer has relied in writing the report and which otherwise is not available to the public.
- Access to a public Register stating the names, addresses and wards of all Councillors with details of the membership of the Cabinet, of all Committees and Sub-Committees.
- Have a reasonable number of copies of agenda and reports (relating to items to be considered in public) made available to the public attending meetings of the Council, Cabinet, Committees and Sub-Committees.
- Have access to a list specifying those powers on which the Council have delegated decision making to their officers identifying the officers concerned by title.
- Copy any of the documents mentioned above to which you have a right of access, subject to a reasonable charge (20p per sheet subject to a maximum of £5.00 per agenda plus a nominal fee of £1.50, for postage).
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# **COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL**

**BROCKINGTON, 35 HAFOD ROAD, HEREFORD.**

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COUNTY OF HEREFORDSHIRE DISTRICT COUNCIL

**MINUTES of the meeting of CABINET held at THE COUNCIL CHAMBER, BROCKINGTON, 35 HAFOD ROAD, HEREFORD on Thursday, 13th December, 2007 at 2.00 p.m.**

**Present: Councillor RJ Phillips (Chairman)**

**Councillors: LO Barnett, AJM Blackshaw, H Bramer, JP French, JA Hyde, JG Jarvis and DB Wilcox**

**In attendance: Councillors: WJS Bowen, PJ Edwards, TM James, MD Lloyd-Hayes, SJ Robertson,**

**1. APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor RI Matthews.

**2. DECLARATIONS OF INTEREST**

Councillor ACR Chappell declared a personal interest in Agenda item 4 Wyebridge Academy Position Statement. Councillor PJ Edwards declared a personal interest in Agenda item 8 Annual Monitoring Report.

**3. LOCAL GOVERNMENT ANNUAL FINANCIAL SETTLEMENT 2008/09**

Cabinet received the report on the Provisional Financial Settlement 2008/09, 2009/10 and 2010/2011. The formula grant for Herefordshire over the next three years is 2008/09 £53.373m percentage increase of 5.1%, 2009/10 £55.445m percentage increase of 4.0% and 2010/11 £57.652m percentage increase of 4%. Cabinet was advised that the increase was better than expected as the prediction had been for a much tighter settlement. Cabinet was informed that the detail of the Area Based Grants was still awaited.

Cabinet was reminded that whilst the settlement was better than anticipated the lobbying by the Local Government Association on adult care had reaped some dividends. A Member in attendance requested that the details on the financial settlement be distributed to all Members of the Council.

**RESOLVED That the report be noted.**

**4. WYEBRIDGE ACADEMY - POSITION STATEMENT**

The Cabinet Member (Children's Services) presented to Cabinet the position statement for Wyebridge Academy and stated that the outline business case that had been proposed was not ready, as there were outstanding issues which should be completed in time for the next scheduled Cabinet meeting. The issues were around third party use of the school premises and the building costs, with the new accommodation being built on the playing fields allowing the existing school and other users of the premises to carry on in the current accommodation until the new building was completed. The cost for this has been costed by Partnership for Schools at £800,000, which is in excess of the funds available. Cabinet was advised

that further information from Partnership for Schools was awaited. Due to the design work that has to be carried out it was unlikely that further information would be available until February.

Cabinet was advised that local Members in the South Wye area had been kept informed on the issues and it was noted how acute the timing was for the Academy. Cabinet was informed that local neighbours to the school had been consulted and that as far as possible the wishes of the community had been taken into account.

A Member in attendance raised concerns over the provision of a Sixth Form in the Academy and the effect this could have on the existing Sixth Form College in Hereford City, which is currently one of the highest performing Sixth Forms in the Country. Cabinet was advised that it was proposed to target those young people in South Wye not currently attending Sixth Form. It was also intended to give a broader breadth of education and to compliment and not compete against Hereford Sixth Form.

A Member in attendance raised a point of order over the advertising for the headteacher position for the Academy whilst still discussing the building of the school. Cabinet was advised that this would be addressed in the next report to Cabinet when discussing the outline business case.

## **RESOLVED**

### **THAT**

- (a) the interim report on the progress on this project be noted; and**
- (b) the final decision on the outline business case be deferred to the next meeting of Cabinet.**

## **5. HEREFORDSHIRE CONNECTS PROGRAMME UPDATE**

Cabinet received a report recommending the preferred technology to replace the current client systems, including the CLIX system, used within both Adult Social Care and the Children and Young People's Directorate. Cabinet was informed that the implementation to get a replacement in place was part of the JAR Action Plan and was advised that the Director of Adult and Community Services had been tasked strongly by the Commission for Social Care Inspection on when it was to be replaced.

It was stated that a number of site visits to other local authorities had taken place to find a suitable system. Discussions were held with three suppliers with Corelogic coming out as the most suitable alternative system to the SAP system in the provision of adult social care. Cabinet was advised that procurement was continuing through Deloitte using the arrangements currently in place, however should Cabinet decide to implement new procedures for the procurement; the process could take another six months.

A Cabinet Member spoke of the problems at the Bath Street premises and stated that the issues had been identified in the report but believed they had not been adequately addressed, as it had not been proven that the local area network to the building was capable of accommodating Corelogic. Upon request officers advised that to up grade the Bath Street premises to accommodate Corelogic could cost £130 – 150, 000.

A Member in attendance expressed concern that the report did not adequately cover

the stage that the Herefordshire Connects project was at and did not believe Cabinet was in a position to adopt the report without the whole Council being provided with a full update. Cabinet was informed that the Corporate Management Board had addressed the Herefordshire Connects project on 23 November when all directors had been happy with the specifications and financial recommendations. A Member in attendance raised doubts over the summary of costs due to differences in the figures. Cabinet was advised that an out of date table of figures had been inadvertently put in the first report, which had been rectified in the second report to Members.

A Member of the Executive reminded Cabinet that the option before them was the best way forward for the Council. The Head of Legal and Democratic Services was requested to confirm to Cabinet that the Hereford Connects project had met due process. The Head of Legal and Democratic Services stated that five tenders had initially been put forward, with three tenders put forward for the SAP system. The Head of Legal and Democratic Services confirmed that due process had been carried out and had been observed by himself and other members of staff.

Cabinet discussed further the various systems available in particular the system used in Trafford and some other authorities. Again concern was voiced over the Bath Street premises and whether it would be sold in the near future. The Chief Executive advised Cabinet that having listened to the debate he understood Members' concern over the robustness of the costs and undertook to investigate the robustness of the financial situation and report back to Members.

## **RESOLVED**

### **THAT:**

- (a) Cabinet authorise the Head of Legal and Democratic Services to sign the framework agreement with Deloitte;**
- (b) Cabinet confirm Corelogic Framework as the preferred solution and authorise the Directors of Corporate and Customer Services and Resources, in consultation with the Director of Children's Services and Director of Adult and Community Services, to proceed with this acquisition on a fixed price basis through the Deloitte framework agreement; and**
- (c) Cabinet receive assurance on budget savings in relation to the accommodation strategy.**

## **6. COMMUNITY FORUMS**

Cabinet received the report on the decision of the Herefordshire Partnership Chief Executives' Group and Group Leaders on the future of Community Forums. Cabinet was reminded of the history of the Community Forums through to the current pilot style of forums which are run in conjunction with West Mercia Police and the Herefordshire Association of Local Councils (HALC). Cabinet agreed the current forums had mixed success rates but were maintaining reasonable attendance figures from the public. Cabinet agreed that the Herefordshire Partnership Group needed to address issues around style, advertising and the involvement of all partner organisations in the forums. Cabinet was advised that the Hereford and Worcester Fire and Rescue Authority, as one of the Herefordshire Partnership organisations, was considering using the forums for public consultation. It was agreed that as many partner organisations as possible needed to be involved with the forums to ensure the benefit to the community.

Cabinet addressed the issue of the number of forums, which had now increased to 12, but also the location of the various forums in the county. Cabinet agreed the need to expand the number of organisations using the forums and raised concerns that although the Police Consultative Committee was being disbanded, it was being replaced by another similar body. Cabinet discussed the various possible differing styles for the forums and agreed they needed to be relatively brief and informal and that Councillors were able to talk with local residents.

#### **RESOLVED**

##### **THAT:**

- (a) the decisions by Herefordshire Partnership Chief Executives' Group and Group Leaders referred to in the report be noted;**
- (b) Community Forums be managed and badged by Herefordshire Partnership in the future; and**
- (c) publicity, content, style, resourcing and involvement of all partner organisations be reviewed.**

#### **7. THE HEREFORDSHIRE COMPACT**

Cabinet received a report on a revised Herefordshire Compact. Cabinet was informed the current compact involved the Council, the Primary Care Trust and the Alliance representing the Voluntary Sector. However it was government policy to have an agreed and published local compact covering all public sector services' engagement with the voluntary and community sector, with a code of good practice. Cabinet agreed the Compact and for it to be endorsed by the Chief Executives' Group, with the Herefordshire Compact to supersede the existing Health and Social Care Compact.

#### **RESOLVED**

##### **THAT:**

- (a) the Herefordshire Compact be adopted; and**
- (b) codes of good practice be developed to support the implementation of the Herefordshire Compact.**

#### **8. ANNUAL MONITORING REPORT**

Cabinet received the Annual Monitoring Report 2006/07 for approval and its formal submission to the Secretary of State in accordance with the requirements of the Planning and Compulsory Purchase Act 2004. Cabinet was advised that the Act introduced new provisions and requirements for development planning including the regular review and monitoring of development plans through mandatory Annual Monitoring reports. The report is based on the period 1 April to 31 March and is to be submitted no later than 31 December.

Cabinet referred to the one planning approval given on a floodplain at Paytoe, but agreed the advantages of it outweighed the objections. Officers were thanked for their work in providing the report.

**RESOLVED That the Annual Monitoring Report 2006/07 be approved for submission to the Secretary of State.**

**9. LOCAL DEVELOPMENT SCHEME**

Cabinet received a report on a revised Local Development Scheme for approval, which is a statutory requirement of the Planning and Compulsory Purchase Act 2004. Cabinet was referred to the principal amendments which included the adoption of the Unitary Development Plan and the demise of the Structure/Local Plans and the deletion of the Development Plan Document (DPD) as a result of discussions with Government Office, the Planning Inspectorate and the Planning Advisory Service. In the future reference is to be made to national and regional planning policies setting out key policies within the Core Strategy. This will include a new Hereford Area Action Plan taking forward Hereford City's growth point status and further DPDs addressing the market towns and rural areas with the intention of greater emphasis on 'place shaping'.

Cabinet was advised that a Planning Delivery Grant had been awarded of £173k with an indication for a future grant of £218k. Priority setting needed to be done for the growth areas. West Midland transport priorities were significant to the Hereford Area Action Plan. Herefordshire was also in line for rural funding with some areas getting capital funding with the potential for significant funding for the future.

**RESOLVED That the revised Local Development Scheme be approved and have effect from 31 January 2008.**

**10. PLANNING OBLIGATIONS SUPPLEMENTARY PLANNING DOCUMENT**

Cabinet was advised that several issues had arisen in the last two days, which required further consultation on. Cabinet agreed that due to the importance of the issues more time was required to carry out cross directorate discussions. Cabinet moved to defer the Planning obligations Supplementary Planning Document to a future meeting of Cabinet.

**RESOLVED That the Planning Obligations Supplementary Planning Document report be deferred to a future meeting of Cabinet.**

**11. POLYTUNNEL DEVELOPMENTS IN HEREFORDSHIRE**

Cabinet was advised that since the publication of the Polytunnel Developments In Herefordshire report further advice had been received from legal Counsel. Cabinet moved to defer the report to a future meeting of Cabinet in order to consider the advice of legal Counsel.

**RESOLVED That the Polytunnel Developments in Herefordshire report be deferred to a future meeting of Cabinet.**

**12. COLWALL RAILWAY BRIDGE**

Cabinet was asked to approve expenditure to provide a temporary bridge over the sub-standard bridge in Colwall carrying the B4218 should an assessment prove it to be the appropriate means for opening the bridge to normal highway traffic. The Cabinet Member (Highways and Transportation) stated that information on the assessment of the bridge had only been received 48 hours prior to the Cabinet meeting and had shown the bridge could be used by vehicles up to three tonnes in weight. Cabinet was informed that Network Rail owned the bridge with the road across it belonging to the Council. Network Rail has stated that it has no plans to replace the bridge until 2011/12. Cabinet was advised that the recommendation was

for the purchase of a Bailey bridge in partnership with Network Rail should it be found necessary after further tests had been carried out.

Cabinet was informed that Network Rail had indicated they would be agreeable to a 50/50 share on the cost of the Bailey bridge. However, Cabinet would be obliged to approve the whole cost as it would need to be purchased through just the one provider. It was added that the basis of the charge between Network Rail and the Council was complicated and it would need to be checked by the legal department to ensure it was favourable to the Council. A Member of the Executive raised concern over the quality of the Bailey bridge and whether it was reusable. Cabinet was advised that each bridge was made to meet the specific needs.

A Member in attendance felt that the cost of the bridge should have been reflected in the report to Cabinet, along with an indication of what Network Rail would pay towards the bridge, prior to Cabinet making any decision.

Cabinet was reminded of the impact the loss of the bridge had so far been on the people and the business community of Colwall and it was felt that to wait until 2011/12 before replacing the bridge would be too long.

**RESOLVED That approval be given for the purchase and installation of a temporary Bailey bridge if it is considered the most appropriate means to carry the B4218 over the existing sub-standard bridge in Colwall.**

**13. A BETTER LIFE: PERSONALISED SERVICES FOR PEOPLE WITH LEARNING DISABILITY IN HEREFORDSHIRE**

Cabinet received a report on two major developments in personalised services for people with learning disability in Herefordshire and Cabinet's endorsement was sought on the approach.

Cabinet was advised that the two main issues for people with learning disabilities was to have self-directed support and own accommodation. It was emphasised that service users wanted to have a move towards self-directed support and to have their own accommodation, as opposed to institutional accommodation, thus giving independence and choice. It was noted that there were 535 local residents with learning disabilities in receipt of services, with an additional 140 people placed locally by other authorities who require the use of local health services.

Cabinet was reminded that learning disability was life long and the aim was to improve outcomes for residents giving the means to work and be part of the community. The report was commended by Cabinet and Members were encouraged to attend the forthcoming seminar for all Councillors on services for people with learning disabilities.

**RESOLVED**

**THAT:**

- (a) Cabinet endorse self-directed support as the mainstream service response to meeting the needs of people with learning disability from April 2008, and authorise the Cabinet Member (Social Care Adults and Health) to agree the level of the Resource Allocation System;**
- (b) Cabinet authorises officers to complete the partnership**

**agreement negotiations on the detail of the contract with Focus Futures. A further report to be brought to Cabinet as a key decision for agreement of the contract and financial terms and conditions;**

- (c) a seminar on services for people with learning disability be provided for all Members; and**
- (d) all Members receive a copy of the Cabinet Report.**

#### **14. REVIEW OF POLLING STATIONS, POLLING PLACES AND POLLING STATIONS**

Cabinet received a report on the proposed changes to the number and locations of polling stations in Herefordshire. Cabinet was advised of the new Electoral Administration Act 2006, which requires that relevant authorities conduct a review of all polling districts and polling places by the end of 2007 with a further review conducted every four years thereafter. It is a requirement that the Returning Officer must make representations to the relevant authority as to the location of existing or proposed stations and the Returning Officer's comments must be published within 30 days of receipt.

It was noted that there had been some concerns from Members over the review but it was emphasised that it was a statutory duty. Cabinet was informed that there had not as yet been the opportunity to return to consultees, such as parish councillors, to gain their views or to gain the view of the new Chief Executive as the new Returning Officer.

A Member in attendance expressed the view that it was felt that more work needed to be done, with particular regard to the disputed polling stations. It was pointed out to Cabinet that the Strategic Monitoring Committee was awaiting a report on the issues that had arisen at the last local elections. The Head of Legal and Democratic Services advised that a response was still awaited from the electoral supplier.

Cabinet was advised that the advice of the Electoral Commission was that the review needed to be completed even if that meant the Executive did not approve the review. This would mean that the current arrangements for polling stations would remain until the review was revisited. Cabinet agreed that a further review needed to be carried out ensuring that it did not coincide with any proposed election date.

#### **RESOLVED**

##### **THAT:**

- (a) the existing arrangement of polling districts and polling places remain unchanged;**
- (b) the Returning Officer's recommendations as indicated in Appendix 2 of the report (Changes to Polling Stations) be not approved and Appendix 3 (No changes to Polling Stations) be approved; and**
- (c) the review of Polling Stations be revisited and a further consultation take place before March 2008 with a report to Cabinet with the Returning Officer's recommendations in April 2008.**

The meeting ended at 5.00 p.m.

**CHAIRMAN**





# DRAFT FINANCIAL STRATEGY 2008 – 2011

## PROGRAMME AREA RESPONSIBILITY: CORPORATE STRATEGY AND FINANCE

CABINET

24TH JANUARY 2008

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### Wards Affected

County-wide.

### Purpose

Council approved the Medium Term Financial Strategy (MTFS) for 2007 – 2010 when the budget for 2007/08 was set in March 2007. This report is seeking Cabinet approval to Corporate Management Board's (CMB's) recommendations for updating the current MTFS for the 2008 – 2011 period. The report has been drafted by the Director of Resources in consultation with the CMB.

Cabinet will receive a further report on the MTFS for 2008 – 2011 from the CMB at its meeting on 24th February 2008 that will include details of the final local government finance settlement and any other suggested changes. Cabinet will also consider views expressed by the Strategic Monitoring Committee (SMC) on this report and finalise its recommendations to Council on the financial strategy for 2008 – 2011, budget for 2008/09 and Council Tax for 2008/09 at that meeting.

### Key Decision

This is not a Key Decision.

Cabinet will not be confirming its financial strategy recommendations to Council until 24th February 2008. Council will be meeting on 7th March 2008 to set the budget and Council Tax for 2008/09.

### Recommendation

**THAT Cabinet approves the CMB's recommendations for updating the current medium term financial strategy and resource model highlighted in the body of this report.**

### Reasons

The current financial strategy set the financial framework within which corporate and service planning for 2008 – 2011 has been taking place. This strategy now needs updating in the light of the:

- a) Pressures revealed by the corporate and service planning process.
- b) Provisional local government finance settlement for 2008/09 – 2010/11.
- c) External assessments and reviews that have taken place since March 2007.

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Further information on the subject of this report is available from Sonia Rees, Director of Resources, on (01432) 383519

- d) Refresh of the Corporate Plan for the 2008 – 2011 period that is currently underway.
- e) Continuing need to modernise and improve internal business processes and key services to the public.
- f) Plans to modernise the way in which Herefordshire Council and Herefordshire Primary Care Trust (PCT) work together to better meet the needs of the community.
- g) Latest view of corporate financial risks – reflecting quantifiable pressures within policies for balances and reserves and highlighting other potential issues.
- h) Latest view of likely outturn for the current financial year.

The external auditor commented favourably on the Council's MTFs for 2007 – 2010 in her Use of Resources report for 2007. The CMB's recommended updates endeavour to ensure that the financial strategy continues to support corporate priorities, despite the pressures listed above, whilst maintaining as much flexibility as possible to respond to the emerging agenda for change.

## Considerations

### 2007/08 Revenue Budget Summary

1. Council set a net revenue budget excluding specific grant funding for schools of £122m for 2007/08. Herefordshire Council's element of householders' overall Council Tax bill was increased by 3.8%. This resulted in a Band D Council Tax of £1,083.44 for Herefordshire Council services. Schools funding provided by the government in the form of Dedicated Schools Grant (DSG) amounted to £78m.
2. The net revenue budget excluding schools is funded as follows:

Source of funding	£m	%
Herefordshire's share of national business rates provided by the government	41	34
Revenue Support Grant provided by the government	7	6
Herefordshire's Council Tax	74	60
<b>TOTAL</b>	<b>122</b>	<b>100</b>

3. The revenue budget allocated to each of the Council's core service areas (excluding schools) amounts to £111.4m out of the total net revenue budget available for 2007/08. The remaining £10.6m is spent on corporate budgets such as:
  - a) The net cost of borrowing.
  - b) Local Authority Business Growth Incentive (LABGI) grant.
  - c) Funding set aside for modernising social care services and business processes.
  - d) Contingency funding for social care services.
4. The following table shows how resources for core services have been allocated in the

current financial year:

<b>CORE SERVICE BUDGET 2007/08</b>	<b>£m</b>	<b>%</b>
Adult & Community Services	44.5	40
Central Services	3.4	3
Children & Young People's Services	23.2	21
Corporate & Customer Services	7.9	7
Environment	24.8	22
Human Resources	1.4	1
Resources	6.2	6
<b>TOTAL CORE SERVICE BUDGET</b>	<b>111.4</b>	<b>100</b>

5. In setting the budget for 2007/08, Council ensured that cash resources were allocated in line with priorities. A corporate contingency of £1.3m for social care services was maintained within the base budget. A £2.7m 'Invest to Save / Mitigate' (increasing demand pressures) budget was created and held corporately to support a modernisation programme for adult social care services (older people and learning disabilities). A £824k 'Invest to Save / Mitigate' (increasing demand pressures) budget was also created and held corporately to support a modernisation programme for children's social care services. More minor adjustments to core service base budgets were also made. A tough policy of no inflation on non-pay budgets provided the scope to create additional resources for the priority areas of the budget and ensured that all core services continued to deliver improved levels of efficiency.

#### **2007/08 Forecast Outturn**

6. The latest forecast of revenue outturn for the current financial year (the Integrated Performance Report for the year to 30th November 2007 refers) predicts an over spend of £4.7m on core service budgets and an under spend of £3.7m on corporate budgets giving rise to an overall over spend of £1m. The position is summarised in the following table:

<b>FORECAST OUTTURN 2007/08</b>	<b>NET BUDGET £m</b>	<b>OVER / UNDER (-) £m</b>	<b>%</b>
Adult & Community Services	44.5	3.7	8.3
Central Services	3.4	- 0.4	- 11.8
Children & Young People's Services	23.2	0.7	3.0
Corporate & Customer Services (including cost of Siemens contract not currently in the revenue budget)	7.9	1.2	15.2

Environment	24.8	- 0.4	- 1.6
Human Resources	1.4	0	0
Resources	6.2	- 0.1	- 1.6
<b>FORECAST OUTTURN FOR SERVICE BUDGETS</b>	<b>111.4</b>	<b>4.7</b>	<b>4.2</b>
<b>FORECAST OUTTURN FOR CORPORATE BUDGETS</b>	<b>10.6</b>	<b>- 3.7</b>	<b>-34.9</b>
<b>FORECAST OUTTURN FOR THE REVENUE BUDGET</b>	<b>122</b>	<b>1.0</b>	<b>0.8</b>

7. The position outlined in the table shown in paragraph 6 could improve further if:
- a) Delays in revenue and capital programmes continue.
  - b) The reduction in the forecast over spend for adult social care services detected for the first time between September and November 2007 for 2007/08 continues a downward trend.
  - c) More LABGI grant is awarded.
  - d) The outturn cost of the June and July flood repairs and the settlement of the Belwin grant claim.
8. The table in paragraph 6 shows an overall over spend of 0.8% of the total net revenue budget is currently forecast for 2007/08. This is within the Council's current policy of managing to within a +1% tolerance of net budget. There are three points to note however:
- a) The current practice of holding the social care contingency in the corporate base budget distorts the over spend position for the Adult & Community Services and Children & Young People's core service budgets.
  - b) The current practice of holding the modernisation funding for adult social care and children's social care in the corporate base budget distorts the over spend position for these service budgets and for corporate budgets.
  - c) The current policy of requiring core services to manage within a +1% tolerance of net budget means that managers potentially do not achieve excellence in financial management.
9. The presentational issues outlined in 8 a) and 8 b) above are important in terms of the Council's Use of Resource assessment. Given the Comprehensive Spending Review 2007 (CSR07) sets out a challenging agenda for public services within challenging financial constraints, a policy of allowing a +1% tolerance on net revenue spending compared to budget cannot be sustained. Managers at all levels must achieve efficiency and performance improvements in support of corporate plans within the agreed budget.
- 10. The CMB therefore recommends the following amendments to the current MTFS to**

address the issues identified in paragraph 8:

- a) That the social care contingency of £1.3m in the corporate base budget be shared equally between the adult and children's social care base budgets.
- b) That the adult social care modernisation funding of £2.7m be transferred from the corporate base budget to a ring-fenced budget within the Adult & Community Services service budget and that it is released by the Director of Adult & Community Services in consultation with the Director of Resources.
- c) That the children's social care modernisation funding of £824k be transferred from the corporate base budget to a ring-fenced budget within the Children & Young People's Services core service budget and that it is released by the Director of Children & Young People's Services in consultation with the Director of Resources.
- d) That all managers with budget responsibilities shall ensure that spending is within the agreed budget.

#### **Provisional Local Government Finance Settlement 2008/09 – 2010/11**

11. The provisional local government finance settlement for 2008/09 – 2010/11 was announced on 6th December 2007. In overall terms, it was in line with the funding allocated within CSR07 for local government spending programmes and was widely heralded as the worst settlement for 10 years.

12. The provisional Formula Grant funding figures for Herefordshire for the next three years are as follows:

<b>Year</b>	<b>Formula Grant £m</b>	<b>Increase £m</b>	<b>Increase</b>
2008/09	53.373	2.569	5.1%
2009/10	55.445	2.143	4.0%
2010/11	57.652	2.234	4.0%

13. The table in paragraph 12 indicates that Herefordshire's cash increase on a like-for-like basis is 5.1% for 2008/09 falling to 4% in the following two years. Using the government's inflation figure of 2.75%, this represents a real terms increase of 2.35% in 2008/09 and 1.25% thereafter. The increase for 2008/09 matches the average increase for shire unitaries without fire service responsibilities. Cabinet considered the outcome of the provisional local government finance settlement in more detail at its meeting on 13th December 2007.

14. The current MTFs assumed there would be a cash standstill in Formula Grant for 2008/09 and 2009/10. When the MTFs was agreed in March 2007, the prognosis for CSR07 was that it would prove very challenging and there were concerns that proposed changes to the distribution formulae would have an adverse effect. The Council's assumptions were in line with those made by most other authorities when setting their budgets for 2007/08.

**15. The CMB recommends that the Financial Resource Model (FRM) within the MTFs is updated with the provisional Formula Grant figures for the next three financial**

**years and for known transfers in and out of the local government finance system.**  
The resource model will be updated again when the final figures have been announced later this month. A financial risk is that the final figures may vary from the provisional more significantly than was the experience for 2007/08.

### **Financial Resource Model (FRM) 2008/09 – 2010/11**

16. The CMB has reviewed the FRM within the current MTFs and has a series of recommendations to make to Cabinet for the FRM within the draft MTFs for 2008 – 2011 concerning:

- a) Future Council Tax increases.
- b) Inflation uplifts.
- c) Deliverable efficiency gains.
- d) Base budget adjustments.
- e) Funding for modernisation and integration programmes.

#### Future Council Tax Increases

17. The current MTFs assumes Council Tax increases of 4.7%. The government has been clear about its expectation for an **average** Council Tax increase of well below 5% in 2008/09. Whilst the situation will need to be carefully monitored, a 4.7% increase is not expected to present a difficulty in terms of the government's stated policy intention. A 1% increase in Council Tax represents approximately £750k of additional cash resource in the first year it is generated, a figure that compounds over time with subsequent increases. A corresponding reduction in planned spend would be required if the Council Tax were lower than the planning assumption which would affect the Council's ability to improve services in line with corporate priorities. **The CMB therefore recommends that the 4.7% planning assumption for Council Tax increases is retained for the draft MTFs for 2008 – 2011.**

#### Inflation Uplifts

18. The current FRM for 2007 - 2010 includes 2% for pay inflation in each year in line with government assumptions at the time. The pay award for 2007/08 was settled at 2.475%. The government's assumption for pay inflation for the next three financial years remains at 2% and its stated intention is to negotiate a three-year pay agreement for public sector workers. **The CMB therefore recommends that the 2007/08 salary base budget be uplifted by an additional 0.475% and that the policy of a 2% uplift for pay inflation be retained for the draft MTFs for 2008 – 2011.**

19. The current FRM for 2007 – 2010 does not provide for an inflationary uplift on non pay expenditure budgets. This challenging policy ensures that managers:

- a) Negotiate robust contracts for the provision of services.
- b) Manage contracts and contractor performance effectively.
- c) Continually review service delivery arrangements to ensure improvements in efficiency and value for money.

20. The CMB has checked that this approach to securing efficiency gains for 2008/09 – 2010/11 in can be achieved in all service areas through better use of resources without any significant reductions in the level of service provided. The following table identifies the core services where this policy creates the most financial pressure in absolute terms and explains how CMB expects that pressure to be managed:

Core Service	Estimated Financial Pressure	Management action
Adult social care	£880k	This pressure reduces to £596k after allowing for additional income from Fairer Charging in the FRM and the effect of the proposed efficiency targets outlined in paragraph 23 of this report. The Director of Adult & Community Services advises that this pressure cannot be managed without a reduction in the level of service provided. He further advises that he will have an efficiency plan in place by the end of March 2008 designed to manage this pressure without a reduction in the level of service provided. The CMB recommends that the adult social care base budget should be increased by £596k in order to avoid service cuts.
Waste	£360k	The Environment Directorate's efficiency plan is designed to manage this pressure without a reduction in the level of service provided.
Children's social care	£220k	This pressure can be managed by allocating £650k from the social care contingency currently in the corporate base budget to the service base budget.
Highways	£200k	The Environment Directorate's efficiency plan is designed to manage this pressure without a reduction in the level of service provided.
Schools Transport	£180k	The Director of Children's Services plans to review the school transport policy.

21. The CMB has only identified one significant example of the current policy for efficiency gains causing difficulty if retained for the FRM for 2008 – 2011. A reduction in the level of adult social care services that can be provided is clearly not acceptable given this service is a corporate priority. **The CMB therefore recommends that the current policy is retained as an incentive to improve efficiency and value for money with the exception of a one-off increase of £596k to the base budget for adult social care.**

22. The current FRM assumes inflation on client and customer receipts budgets of 2.5%. The key exceptions are income budgets where the fee is dictated by a statutory arrangement. **The CMB recommends that this policy is retained for the draft FRM for 2008 – 2011 and that the review of all fees and charges is integrated into the budget policy framework.**

#### Deliverable Efficiency Gains

23. The CMB has assessed corporate opportunities to reflect the efficiencies managers deliver on a day-to-day basis in the base budget for core services. **The CMB recommends that the following efficiency gains that are already delivered on a routine basis are included in the draft FRM for 2008 – 2011:**

- a) A vacancy turnover rate of 1% thereby reducing the Council's overall pay bill by £500k.
- b) A reduction in expenditure on supplies and services of 1% thereby reducing overall expenditure by £200k.
- c) A further reduction in the cost of employing agency and temporary staff of £100k through consistent use of the new framework contract.

24. The CMB has also reviewed proposals from the Benefits Group that exists as part of the governance arrangements for the Herefordshire Connects programme on efficiencies both within that programme and outside of it that can be delivered whilst waiting for final approval to proceed with the programme. In total, further efficiency gains totalling £750k a year from 1st April 2008 have been identified as follows:

Efficiency Gain	Estimated Saving
Printer / copier rationalisation	£100k
New mobile telephone tariff	£25k
New postal services contract	£70k
New BT line rental contract	£10k
New PC supplier contract	£10k
Improved WMS usage	£50k
Increase in WMS dividend	£90k
Externalise travel management arrangements	£10k
Standardisation of PC specification	£200k
Purchasing card rebate	£25k
Strategic sourcing	£160k
<b>TOTAL</b>	<b>£750k</b>

25. **The CMB recommends that the efficiency gains outlined in the table in paragraph 24 are included in the FRM within the draft MTFS for 2008 – 2011.**

26. The Director of Environment is in the process of implementing a plan to achieve efficiencies and improvements in service delivery within the limits of the cash allocations for his area of responsibility. The CMB supports this proactive approach to financial management and service improvement as an example of good practice in obtaining value for money from public money.

27. The Director of Adult & Community Services is currently preparing an efficiency plan to ensure services are delivered within budget without the need for any significant change in the level of service provided. This efficiency plan will need to complement the service modernisation plan for adult social care. The CMB endorses this approach as an essential component of every Director's financial management responsibilities. The plans need to be finalised and formally approved as a matter of urgency in readiness for the new financial year.

Base Budget Adjustments

28. The current FRM needs to be continually reviewed to refine the way the model works and to reflect the most up-to-date information that is available.



29. **The CMB recommends removing grant budgets from the list of income budgets to be inflated by the agreed uplift of 2.5%.** This will make the model more precise and avoid creating unrealistic income expectations.
30. **The CMB recommends that the following adjustments to the FRM are made to reflect the latest available information:**
- a) **Updating capital financing costs to reflect slippage in the approved capital programme and a prudent level of additional borrowing to fund new capital investment.**
  - b) **Removing £100k spare capacity in corporate budgets such as banking, insurance and audit fees.**
  - c) **Adding £1.1m to revenue to cover the net revenue cost of the Siemens contract (Community Network Upgrade or CNU project).**
  - d) **Additional property related pressures due to changes in the empty properties rate relief scheme (£126k), loss of income following the sale of industrial units (£201k) and service charges for Plough Lane (£100k).**
  - e) **Additional funding needed to prepare the Local Development Framework (£500k in 2009/10 and 2010/11).**

#### Modernisation Funding

31. The current FRM allows £2.7m a year to support the modernisation of adult social care services for older people and those with learning disabilities. This funding was allocated following a detailed needs analysis for these particular client groups. The needs analysis for adults with mental health and physical disabilities has now been completed and modernisation funding for these services of £275k in 2008/09 rising to £550k in 2009/10 is required. **The CMB recommends that modernisation funding for adult social care services:**
- a) **Is included in the FRM within the draft MTFS for 2008 – 2011 as modernisation of these services is a key corporate priority.**
  - b) **Is ring-fenced within the base budget for adult social care for modernisation purposes only.**
  - c) **Is released by the Director of Adult & Community Services following consultation with the Director of Resources.**
32. The CMB anticipate that plans to modernise both service provision and support services will start to take shape now that the new joint Chief Executive has taken up post. The PCT has already taken an opportunity to set aside some cash to help support implementation of emergent plans for modernisation. The PCT will transfer £300k to the Council to manage on its behalf. **The CMB recommends that the FRM within the draft MTFS for 2008 – 2011 includes a Council match funding contribution to be held in an earmarked reserve called ‘Modernisation Plans’ until such times as an modernisation plan for the two organisations has been formally approved.**
33. The Council has been developing a corporate programme to modernise the way in which day-to-day business is transacted to deliver improved value for money and better services for the community. That programme – Herefordshire Connects – is poised at a

strategic decision making point pending conclusion of discussions on the affordability of the programme in the context of the MTFs and to give the new Chief Executive the opportunity to influence the way forward.

34. The FRM within the MTFs for 2007 – 2010 includes the financial envelope for Herefordshire Connects programme as outlined in April 2006 but adjusted to reflect estimated timings of investment and benefits as at March 2007. The passage of time means that the original financial model is now too old to be a reliable basis for the FRM within the draft MTFs for 2008 – 2011. Much work has been done since Deloitte were appointed as the preferred supplier to revise the financial envelope. **However, the CMB recommends that the assumptions in the current FRM about the Herefordshire Connects programme are removed and replaced with the following:**

- a) **The investment requirement for a replacement social care management information system (£706k in 2008/09 reducing to £154k thereafter – subject to the call-in process).**
- b) **Funding for the Herefordshire Connects Core Team so there is a resource to maintain a Council-wide modernisation programme (£450k in 2008/09 reducing to £300k in 2009/10 and £200k in 2010/11).**
- c) **Funding for urgent ICT strategy work needed to support the Herefordshire Connects programme and ICT infrastructure (£247k in 2008/09 rising to £647k thereafter).**
- d) **The Herefordshire Connects programme is a modernisation programme awaiting review and formal decision. Detailed financial information is yet to be finalised pending that review and may not be available in time for decisions on the budget for 2008/09. The CMB therefore recommends that the financial capacity to support the programme is provided through a new earmarked reserve called ‘Modernisation Plans’ rather than through the FRM until such times as a formal decision on the way forward has been taken.**

#### **Financial Capacity 2008 - 2011**

35. Were Cabinet minded to agree the CMB’s recommendations for updating the MTFs and FRM outlined in this report so far, the updated FRM for 2008 – 2011 indicates financial capacity figures as follows:

- a) 2008/09 – financial capacity £542k.
- b) 2009/10 – financial capacity £3.002m.
- c) 2010/11 – financial capacity £4.689m.

36. The CMB is acutely aware that the agenda for change is significant in terms of the need to modernise:

- a) Transactional business processes – the Herefordshire Connects programme.
- b) Working practices – introducing alternatives to having a fixed office base where that supports business need more efficiently and supporting better use of ICT.

- c) Schools infrastructure – supporting plans to make more efficient use of cash and assets to release resources for improving educational attainment and supporting plans to structure the Children & Young People’s Directorate by September 2008.
  - d) Services other than those mentioned already in this report – the learning disability service is one such proposal in the pipeline. A new accommodation and support contract may be agreed by Cabinet in 2008.
  - e) Office accommodation – improving value for money and efficiency.
  - f) Positively in response to the Crookall report – including investing in additional strategic procurement and ICT audit capacity.
  - g) Council and PCT service provision and support functions (paragraph 32 refers).
37. There are a range of strategic issues that need to be brought together into one coherent plan for modernisation that the Council will need help and support to develop over the next 5 – 6 months. **The CMB therefore propose that the financial capacity available in 2008/09 (currently estimated at £542k) is used as an initial contribution to a proposed earmarked reserve to be called ‘Modernisation Plans’ to be released as such plans are formally approved.**
38. The FRM indicates financial capacity of approximately £3.0m for 2009/10 and £4.7m for 2010/11. This flexibility is most welcome but CMB would caution against allocating that resource in advance of the modernisation plan referred to in the preceding paragraph so that cash can be allocated in line with corporate priorities yet to be established. **The CMB therefore recommends that the financial capacity indicated in the updated FRM for 2009/10 and 2010/11 be allocated in line with corporate priorities for modernisation as these are distilled in the coming months.**

### **Reserves and Balances**

39. The CMB has identified an opportunity to use an earmarked reserve that is no longer needed to provide for another purpose. An earmarked reserve was created at the end of 2007/08 for £505k to deal with an expected change in the accounting treatment for a certain type of loan instrument. The proposed change has been dropped and the earmarked reserve is no longer needed for this purpose. **The CMB recommend that this funding is used to create an earmarked reserve to cover the Bellwin threshold to be called the ‘Bellwin Threshold Reserve’ in the event it is triggered due to flooding or other eligible emergency.**
40. The audited accounts for the 2006/07 financial year confirmed an opening position on the general reserve for the current financial year of £8m. The MTFS for 2007 – 2010 included planned use of balances of £1.4m that would reduce this figure to £6.6m. This figure may reduce by up to a £1m on the basis of the current forecast for outturn. At £5.6m, the level of general reserve balance is comfortably in excess of the Council’s current policy to retain a minimum of £3m. However, the £3m minimum represents just 2.5% of the current net revenue budget and is at the low end of the 2.5% to 5% recommended by the Chartered Institute of Public Finance & Accountancy (CIPFA).
41. The external auditor commented favourably on the Council’s improved approach to managing reserves and balances as set out in the MTFS for 2007 – 2010 but she also noted that there was scope for further improvement. **The CMB therefore recommends the following changes to the current MTFS for the draft MTFS for 2008 – 2011:**

- a) **The policy for a minimum general reserve balance be increased to £4.5m (approximately 3.5% of the net revenue budget) to provide adequate cover for demand pressures that are volatile, difficult to predict or unforeseen at the time the budget is set.**
- b) **That the excess above the £4.5m minimum requirement for the general reserve is allocated to the proposed earmarked reserve to be called 'Modernisation Plans' to be released as such plans are formally approved.**

42. Application of this policy, based on the latest assessment of outturn for the current financial year, the changes to the FRM outlined in this report and the provisional local government finance settlement figures, would establish an earmarked reserve for Modernisation Plans totalling approximately £2.242m (estimated £1.1m excess on the general reserve, estimated financial capacity in 2008/09 of £542k and £600k funding set aside by the Council and PCT for modernising health & social care services).

## **Financial Implications**

43. As outlined in the body of the report.

## **Risk Management**

- 44. The CMB recognises that core service areas need to manage financial pressures within the resources made available for each area. This section of the report highlights potential risks that Directors consider might be difficult to contain within the resource allocation. This list will be kept under review and may change as new pressures emerge or potential ones are absorbed within budget. Formal agreement to over spend must be sought (emergency situations are allowed for within the Constitution) before a commitment to over spend is entered into.
- 45. ICT budgets could potentially experience pressure in the future as measures to balance the budget in the current financial year have been incisive. It has not yet certain that the cuts are sustainable in the long term. There may be a need for further investment in the ICT infrastructure due to the increasing level of risk associated with some elements of the ICT platform that have not be upgraded due to expected replacement through the Herefordshire Connects programme.
- 46. Customer Services budgets are supported through to the end of 2008/09 with additional funding of £500k a year as frontline services transfer from Directorates to the Customer Services team. Progress with implementing this policy needs to be carefully tracked against the current financial resource provision.
- 47. There may be financial pressure on the Coroners budget if the Herefordshire Coroner is required to assist with an increased number of inquests into the deaths in service of members of the armed forces.
- 48. Pressure on Democratic Services continues to grow with the volume of scrutiny work that is under way that requires officer support. This is a position that is being carefully monitored.
- 49. If Council opts to carry out a strategic consultation exercise on corporate priorities later in the year, this would involve currently unplanned expenditure of approximately £32k.
- 50. Full details of how the new Area Based Grant (ABG) will work are awaited. The ABG will comprise 38 former specific and special grants totalling approximately £8.8m that

currently make a significant contribution to the Council's financial capacity and ability to deliver core services.

## **Alternative Options**

The CMB considered a number of options for managing the financial pressures to produce a balanced revenue budget for 2008/09 with cash allocated to priorities and flexibility for the future. The reasoning underpinning CMB's recommended approach is explained in the body of the report.

## **Consultees**

The CMB and the Monitoring Officer have been consulted on the content of this report.

## **Appendices**

Appendix 1 – CMB's draft Financial Resource Model (FRM) 2008 – 2011.

## **Background Papers**

Medium Term Financial Management Strategy 2007 – 2010.  
Provisional local government finance settlement 2008/09 – 2010/11.

## **Glossary**

**CMB** – Corporate Management Board; the most senior management team within the Council.

**CSR07** – Comprehensive Spending Review 2007; the government's review of its public spending priorities for 2008 – 2011 published in October 2007.

**DoH** – Department of Health; the government department responsible for the National Health Service.

**DSG** – Dedicated Schools Grant; ring-fenced grant funding provided for the government to run schools, calculated on a per capita basis.

**FRM** – Financial Resource Model; a term used within the Council to refer to the financial model for the revenue account in future years.

**LABGI** – Local Authority Business Growth Incentive; a grant allocation from government redistributing additional national business rate income.

**MTFS** – Medium Term Financial Strategy; a term used within the Council to refer to the financial strategy for the revenue account, the capital account, treasury management, reserves and balances, financial management etc.

**NHS** – National Health Service; needs no further explanation.

**PCT** – Primary Care Trust; commissioners / providers of public health services.

**SHA** – Strategic Health Service; represent the Department of Health at regional level.

**SMC** – Strategic Monitoring Committee; the Council's over-arching policy scrutiny

committee.

	2007/2008 Budget £'000	2008/2009 Budget £'000	2009/2010 Budget £'000	2010/2011 Budget £'000
<b>Base Budget</b>	<b>118,285</b>	<b>122,371</b>	<b>131,920</b>	<b>138,602</b>
<b>Inflation - Staff</b>	1,152	1,159	1,290	1,362
<b>Inflation - Income</b>	(534)	(308)	(316)	(323)
	<b>118,903</b>	<b>123,622</b>	<b>132,895</b>	<b>139,640</b>
<b>Deliverable Efficiency Gains</b>				
- Audit Fees/bank charges/insurance	0	(100)	0	0
- Employee savings	0	(500)	0	0
- Supplies & Services savings	0	(200)	0	0
- Pertemps Saving	0	(100)	0	0
- Improved procurement practices	0	(750)	0	0
<b>Transfers to/from RSG</b>				
- Children's Services Grant	0	490	0	0
- Delayed Discharge	0	384	0	0
- Access Systems Capacity	0	2,059	0	0
- Waste PEG	0	183	0	0
- Gower Review	0	13	0	0
- Food Hygiene Enforcement on Farms	0	28	0	0
- Animal feed	0	4	0	0
- Contaminated land	0	1	0	0
- New conduct regime	0	9	0	0
- Student Finance	0	12	(18)	(63)
<b>MTFMS changes</b>				
- Waste management - PFI Contract (net of £2m reserve)	550	450	500	500
- Whitecross PFI requirement (net of schools contribution)	451	0	0	168
- Queenswood Park	25	0	0	0
- Procurement & Efficiency Staff	55	0	0	0
- Herefordshire Matters	50	0	0	0
- Chief Executives Development Fund	150	0	0	0
- HB & CT Benefit Administration	150	0	0	0
- Support Services Review	100	0	0	0
- ESG	225	0	0	(225)
- Local Development Framework	0	0	500	0
<b>Herefordshire Connects (revenue)</b>				
- Social Care System	0	706	(552)	0
- Core team costs	0	450	(150)	(100)
<b>Capital Financing Costs</b>				
- Herefordshire Connects	189	(189)	0	0
- Accommodation Strategy	0	146	254	492
- Repayment of LGR SCA	0	(453)	(334)	(230)
- Existing SCE(R) & Prudential Borrowing	210	470	633	303
- New Prudential Borrowing Bids	68	23	108	193
- Cash flow implications of externally funded projects	500	0	0	0
- Social Care System	0	246	89	(13)
<b>Funding Sources</b>				
- Use of existing Herefordshire Connects Reserve	(1,500)	1,500	0	0
- Transfer of Part of Social Care Contingency Reserve	(1,300)	1,300	0	0
- Transfer of Budget Management Reserve	(1,100)	1,100	0	0
- LABGI Grant	(2,000)	2,000	0	0
- Increased Cash Transactions Income	(500)	0	0	0
- Balance Sheet Review	(300)	300	0	0
- Procurement & Efficiency	(250)	0	0	0
- Use of 2008/09 capacity reserve	0	(1,500)	1,500	0
- Use of reserves to maintain capacity	0	0	0	0
<b>Emerging Pressures</b>				
- Customer Services Division	500	0	(500)	0
- Corporate Capacity	400	0	0	0
- Community Network Upgrade	0	1,100	0	0
- ICT Strategy	0	247	400	0
- Adult social care	0	596	0	0
- Match funding contribution to proposed Modernisation Plans reserve	0	300	0	0
- Plough Lane Service Charge	0	100	0	0
- NNDR Empty Properties	0	126	0	0
- Rotherwas - loss of Income	0	201	0	0
<b>Capacity to achieve desired Tax increase</b>				
<b>2008/09 capacity reserve</b>	<b>1,500</b>	<b>(1,500)</b>	<b>0</b>	<b>0</b>
<b>Herefordshire Connects</b>	<b>1,771</b>	<b>(1,771)</b>	<b>0</b>	<b>0</b>
<b>Invest to save</b>	<b>3,524</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Needs Analysis Mental Health/Physical Disabilities</b>	<b>0</b>	<b>275</b>	<b>275</b>	<b>0</b>
<b>Capacity</b>	<b>0</b>	<b>542</b>	<b>3,002</b>	<b>4,689</b>
<b>TOTAL BUDGET</b>	<b>122,371</b>	<b>131,920</b>	<b>138,602</b>	<b>145,354</b>
<b>Council Tax increase</b>	3.80%	4.70%	4.70%	4.70%
<b>Assumptions</b>				
Assumed Pay and Price Increases				
- Employees	2.0%	2.5%	2.0%	2.0%
- Employers pension contributions - additional on basic pay	0.6%	0.6%	0.5%	0.6%
- Other Expenditure	0.0%	0.0%	0.0%	0.0%
- Income	2.5%	2.5%	2.5%	2.5%
Provisional Formula Grant increase on adjusted baseline	2.4%	5.1%	4.0%	4.0%
Assumed Collection Fund Surplus (£'000)	256	-	300	300
Assumed Taxbase Increase	0.7%	0.75%	0.75%	0.75%
New prudential borrowing (£m)	0	1.00	1.00	1.00
<b>Dedicated Schools Grant b/fwd</b>	<b>78,151</b>	<b>81,892</b>	<b>84,484</b>	<b>86,272</b>
Increase	3,741	2,592	1,788	2,707
<b>Dedicated Schools Grant</b>	<b>81,892</b>	<b>84,484</b>	<b>86,272</b>	<b>88,979</b>
DSG % increase	4.8%	3.2%	2.1%	3.1%





## DRAFT CAPITAL PROGRAMME 2008/09

### PORTFOLIO RESPONSIBILITY: RESOURCES

CABINET

24 JANUARY 2008

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#### Wards Affected

County-wide

#### Purpose

To propose the draft capital programme for 2008/09.

#### Key Decision

This is not a Key Decision.

Cabinet will confirm its capital budget recommendations to Council on 7 March 2008 at its meeting on 24 February 2008.

#### Recommendation(s)

- THAT**
- (a) the funding available be noted;
  - (b) the funding allocations to capital bids be endorsed;
  - (c) the impact of capital spend on Herefordshire Connects in 2008/09 be noted; and
  - (d) the position on the capital receipts reserve be noted.

#### Reasons

To bring the Council's capital spending plans up to date, noting the available funding and capital bid funding recommendations.

#### Considerations

##### OVERALL

1. The Council has received funding notifications from central government for 2008/09 and subsequent years. A table showing the anticipated position for the next three years (taking into account 2007/08 slippage as reported in the November IPR) is detailed in **Appendix 1**. These indicative budgets include corporate accommodation forecasts as included in the Financial Resource Model (FRM) of £3.25m in 2008/09, £2.89m in 2009/10 and £8.6m in 2010/11.

2. Supported Capital Expenditure (Revenue) allocations for 2008/09 receiving Revenue Support Grant (RSG) support total £12.75m, split £2.373m towards children's services (compared to an indicative allocation of £1.5m for provisional budget setting processes) and £10.377m towards environmental services (compared to an indicative allocation of £8.023m for provisional budget setting processes).
3. The Council faces a number of uncertainties around future capital projects with the precise likely financial commitment being unknown. These areas include the Schools Review, office accommodation, the Master's House at Ledbury as well as Edgar Street Grid and the Livestock Market. It is for this reason that the Council needs to exercise caution when releasing funding for the capital programme. An additional area of uncertainty is the Council's claim under the Bellwin Scheme for the July floods. If any unfunded repair work is not supported by central government the Council will need to look at possible use of capital funding.

### **CAPITAL BIDS**

4. Prudential borrowing commitments already allocated in previous years following the submission of successful capital bids totals £15.98m in 2008/09. The financing costs of existing allocations, including allocations previously committed to for future years, are included in the FRM along with a capacity for additional financing costs of £1m per annum. Capacity is also generated each year through slippage in capital schemes but this cannot be relied upon.
5. Of the £15.98m prudential borrowing already committed, £7.475m has been committed to Herefordshire Connects. This includes the commitment to the Core Logic capital programme of £508k. If the Herefordshire Connects programme was removed there would be a reduction in prudential borrowing commitments of £6.967m in 2008/09 and £1.406m in 2009/10.
6. The total capital bids received are noted in **Appendix 2**. A total of 27 bids for £8.793m was received. Of these bids £665k is recommended to be funded through the capital receipt reserve and £1.015m through prudential borrowing. The prudential borrowing funded bids have future year commitments of £414k in 2009/10, £354k in 2010/11 and £354k in 2011/12. Bids of £839k are recommended to be funded through prudential borrowing from anticipated revenue savings and base budget. This leaves bids totalling £6.274m not recommended for funding at this stage.
7. Schemes recommended for funding through Right to Buy Capital Receipts Reserve are as follows:
  - a) Disabled Facilities Grant  
This is to fund adaptations to clients' homes in order to facilitate independent living. There is a direct link with the independent living agenda and helps reduce pressure on the adult social care budget. The funding contributes towards matched grant funding.
  - b) Empty Property Scheme  
This will bring empty properties back into use and tackles homelessness and reduces the use of B & B accommodation for homeless families. The funding assists the Registered Social Landlord (RSL) (together with their own funding) to bring a property up to a lettable standard.

- c) Sold/Own Home  
This scheme assists people with mental health and learning disabilities to purchase their own homes through shared ownership. The scheme is operated through an RSL partner.
8. Schemes recommended for funding by Prudential Borrowing are as follows:
- a) Strangford landfill site  
There is a legal requirement to assess the impact of the landfill site on groundwater. The scheme will provide groundwater monitoring boreholes.
- b) Holmer School Flood alleviation  
This will fund remedial works to the school to prevent a re-occurrence of the flooding problems experienced in July 2007.
- c) Legionella prevention work  
This scheme upgrades hot water installations to meet code of practice requirements in council owned buildings across the county.
- d) Prospect Wall repairs  
Part of the existing retaining wall between The Prospect in Ross-on-Wye and the adjacent graveyard has collapsed. A large section of the wall needs to be rebuilt.
- e) Sustrans Lottery Match Funding  
This covers the estimated match funding needed for a walking and cycling route exploiting an existing bridge over the River Wye by the Welsh Water treatment works. The current scheme includes extending the route along the disused Hereford to Ross railway line between Rotherwas and Holme Lacy. There is a requirement to get clarity from Sustrans about the timing of funding and the £300k represents an estimate of the 2008/09 requirement.
9. Directorates have been encouraged to bring forward schemes that can be funded by revenue savings or budget to make the prudential borrowing repayments. The following fall into this category:
- a) Development of Specialised AWLD Day opportunities  
A scheme funded by £40k annual savings. Savings need to be signed off, but once this is confirmed the scheme could proceed.
- b) Development of Community Support Centres  
A scheme funded by £65k annual savings. Scheme rises to £100k in 2009/10. Savings need to be signed off, but once confirmed the scheme could proceed.
- c) Server virtualisation  
This scheme can be funded by the additional resources for the ICT Strategy built in to the financial model. The scheme is one of the 'top 10' projects identified by ICT.
- d) Salix funded Schemes  
The Council has been awarded £100k towards carbon reduction works. This grant is based on match funding of £100k from the Council. The £200k is

then 'lent' to the relevant properties and paid back. The ability to fund repayments needs to be signed off.

10. A capital bid was submitted for the Ledbury Centre at Masters House however due to the uncertainty surrounding any external funding available and the requirement to fund other options this bid has not been recommended at this stage.
11. The funding of the temporary Bailey Bridge at Colwall has been secured using £450k of the Council's Local Transport Plan allocation. The benefit of using this source is that it gives funding certainty. However, it is clear that the use of this funding will mean less resources being available for maintenance of bridges across the county. A capital bid to backfill the use of the £450k was not agreed because other projects did not have access to any alternative funding sources and in some cases match funding was needed.

### **CAPITAL RECEIPTS RESERVE POSITION**

11. The capital receipts reserve totalled £22.426m as at 1st April, 2007. Receipts of £1.8m have been received to date in 2007/08 and expected capital receipt reserve spending in 2007/08 totals £7.104m leaving a balance of £17.122m to be carried forward into 2008/09. This may change if additional receipts arise before 31st March.
12. Capital receipts reserve funding of £10.108m has been committed to fund the 2008/09 capital programme however additional capital receipts from the sale of smallholdings and the old Whitecross High School site are expected.

### **Risk Management**

The risks associated with proceeding or not with each bid need to be considered on an individual basis.

The risk of committing funding needs to be considered as part of the FRM and revised Prudential Indicators. These can be mitigated through careful financial management and monitoring of the programme's funding against the relevant Prudential Indicators.

### **Appendices**

- Appendix 1 Medium Term Capital Plan
- Appendix 2 Summary of 2008/09 Prudential Borrowing bids

### **Background Papers**

Medium term Financial Management Strategy  
Capital strategy

### **Consultees**

None identified

## APPENDIX 1

### MEDIUM-TERM CAPITAL PLAN

	2007/08	2008/09	2009/10	2010/11
	<b>Budget</b>	<b>Budget</b>	<b>Budget</b>	<b>Budget</b>
	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>	<b>£'000</b>
Children and Young People's Services	12,235	15,380	30,120	26,354
Resources	1,966	4,436	2,890	8,600
Corporate and Customer Services	322	669	-	-
Adult and Community Services	10,135	15,794	3,005	844
Environment Services	27,566	16,369	12,847	13,266
Herefordshire Connects	944	7,475	1,406	-
	<b>53,168</b>	<b>60,123</b>	<b>50,268</b>	<b>49,064</b>
Funded by:				
Supported Capital Expenditure (Revenue)	9,963	12,750	12,695	13,814
Prudential Code Borrowing	9,296	17,833	4,760	8,640
Capital Receipts Reserve	7,104	10,108	1,858	300
Revenue Contribution	161	170	-	-
Government Grants & Contributions	26,644	19,262	30,955	26,310
	<b>53,168</b>	<b>60,123</b>	<b>50,268</b>	<b>49,064</b>

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £

Recommended to be funded by RTB capital receipts reserve funding

<b>Disabled Facilities Grant</b>	215,000				1	N/A				
DFG adaptations within client homes are made in order to facilitate independent living & assist in early hospital discharge. The funding contributes towards 40% of the grants paid with the other 60% funding from the DCLG. Implications will result in a loss of grant funding. Any shortcomings will increase the waiting list which will impact on social care & health services. There are revenue implications.										
<b>Empty Property Scheme</b>	150,000				1	N/A				
In partnership with RSL, the scheme is to bring back empty properties into use, primarily through leasing the property from the owner for 6 years. If not agreed there will be an increase										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
in revenue due to using B&B										
<b>Sold/Own Home</b>	300,000				1	N/A				
Sold and own home assists people with mental health & learning disabilities to purchase their own homes through Shared Ownership providing independence & security. The Scheme is operated through Advance (RSL partner). Key priority with Housing Strategy & Supporting People Strategy.										
	665,000									

Recommended to be funded by Prudential Borrowing

<b>Strangford Landfill Site</b>	65,000				10	2,925	9,133	8,840	8,548	51,643
The provision and monitoring of these boreholes will provide additional information which will help to better define the groundwater regime in the vicinity of the landfill & enable a more reliable assessment of any potential pollution from										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
the wastes in the landfill site. There are revenue implications.										
<b>Holmer School Flood Alleviation</b>	190,000				25	8,550	15,808	15,466	15,124	246,202
Remedial works to school site to prevent recurrence of the flooding problems experienced in July. It will include remodelling the contours, pumps barriers and the access doors and improve drainage. There will be revenue implications of servicing the pumps every year.										
<b>Legionella Upgrade Works</b>	80,000				15	3,600	8,693	8,453	8,213	79,840
Upgrading of hot water installations to meet Code of Practice requirements are being undertaken in council owned buildings and across the county. A number of poor installations have been identified which could										



## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
result in a Legionella problem.										
<b>The Prospect Wall, Ross on Wye</b>	380,000	20,000			25	17,100	32,516	32,596	31,876	519,912
Part of the existing retaining wall between The Prospect and the adjacent graveyard has collapsed. A survey by a structural engineer has identified the need to rebuild a large section of the wall.										
<b>Sustran Lottery Match Funding</b>	300,000	393,550	353,550	353,550	25	13,500	42,670	74,873	106,368	2,109,485
A walking & cycling route with radial links exploiting an existing bridge over the River Wye by the Welsh Water treatment works & the disused Hereford – Ross line between Rotherwas & Holme Lacy. It is supported by the Rotherwas Travel plan and envisaged in the UDP. There are revenue implications.										
	1,015,000	413,550	353,550	353,550		45,675	108,820	140,228	170,129	3,007,082

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £

Recommended to be funded by revenue savings

<b>Development of Specialised AWLD Day Opportunities</b>	296,000				25	13,320	24,627	24,094	23,562	383,557
Provide & improve appropriate workforce training & skills development. Help to improve the quality of health & social care for vulnerable adults. There are revenue implications.										
<b>Development of Community Support Centres</b>	30,000	100,000	100,000	100,000	1	30,000	100,000	100,000	100,000	-
To provide a wide range of re-ablement, therapy & social facilities, it is an integral part of the Target Operating Model for Adult Social Care. In turn this is a key component of the overall Hfds Connects Transformation Programme. There will be revenue implications.										
<b>Server Virtualisation</b>	412,862				5	18,579	97,435	93,720	90,004	168,861

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
Most of the Council's servers are over 5 years old and are difficult to replace and expensive to maintain. Server virtualisation allows virtual servers to be run on a pool of physical computer servers with no loss of functionality or speed. There will be revenue implications.										
<b>Salix Funding</b>	100,000				5	4,500	23,600	22,700	21,800	40,900
The council has been awarded £100,000 towards reduction works. This grant is based upon £100,000 coming from the council. The £200,000 is then lent to properties and paid back over a 5-year period.										
	838,862	100,000	100,000	100,000		66,399	245,662	240,514	235,366	593,318

Not recommended at this stage

<b>Ledbury Centre</b>	900,000	1,100,000			25	40,500	124,380	164,780	161,180	2,679,160
The scheme is to create a multi-use & combined centre in Ledbury,										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
bringing together services as reflected in the Corporate Customer Services Strategy. The current library is not DDA compliant. It is likely that a cultural service priority will be included in the new LAA and this project once completed will contribute to an upturn in performance.										
<b>Replacement Talis Servers</b>	37,184				5	1,673	8,775	8,441	8,106	15,208
Capital to purchase new self-service PC booking & print management system for libraries & info shops. The new system will provide management information – not provided at the moment.										
<b>Self Service PC Booking System</b>	34,000				5	1,530	8,024	7,718	7,412	13,906
The purchase of new self-service PC booking system for libraries & info shops. Will reduce the amount of paper										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
used in printing and so contribute to a sustainable service. Current system requires excessive amount of ICT support. No traceable booking in info shops. No GEM benefits.										
<b>Networking of Old House &amp; Ross Heritage Centre</b>	11,876				5	534	2,803	2,696	2,589	4,857
A number of Heritage Services sites remain remote from the council network, Old House, Ledbury Heritage Centre & Ross Heritage Centre, the lack of network access is becoming a problem. There will be revenue support costs.										
<b>Transfer of TICs to Alternative Sites</b>	40,000	63,000			25	1,800	6,163	8,498	8,312	138,482
To support & facilitate the transfer of tourist information centres to alternative sites to maximise resources & create a "shared service model" with reduced service in the market										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
towns with Hereford TIC acting as a central hub. There are revenue implications.										
<b>Transport Asset Mgt Planning/Network Mgt Inventory Overhaul</b>	190,000	300,000	315,000		5	8,550	58,340	128,105	183,860	534,820
The Council has set out its commitments to TAMP in its Local Transport Plan. It is also developing its Network Mgt Plan as needed to meet its Network Management duty under the Traffic Mgt Act 2004. Both must be supported by systems. This scheme will overhaul the inventory to ensure that it is a true representation of the Adopted Highway, the Council's transport assets which extends over £200k has an estimated gross replacement value of £2.5 billion. There are revenue implications.										
<b>Colwall Railway</b>										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
<b>Bridge – Temporary Bailey Bridge</b>	500,000				3	2,250	181,667	174,167	166,667	-
The bridge is beyond normal maintenance requirements & now requires full reconstruction. The community is split in ½ and their businesses. Paddles Lane has become dangerous and cannot be left in this state. There are revenue implications.										
<b>Elmhurst</b>	1,200,000				1	1,200,000				
Redevelopment of Elmhurst to provide affordable housing to meet the needs of vulnerable households which could include potentially those with learning disabilities or mental health problems. If not proceeded with alternative funding will be needed to ensure the property does not stay empty.										
<b>LCHO</b>	2,220,000	2,560,000	2,780,000		1	2,220,000	2,560,000	2,780,000		
Scheme includes DIY Ownership, Festival										

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
Property Purchase and Mortgage Rescue all schemes assisting those with housing needs to either gain a foot on the housing ladder or retain their existing accommodation. DIYSO and FFP provide grant funding through a RSL partner. Those assisted are registered with Home Point as being in Housing needs and are unable to access the open market without grant assistance. The 3 schemes together could potentially assist 29 households.										
<b>Building Energy Management Out Stations</b>	288,000				15	12,960	31,296	30,432	29,568	287,424
<b>Leominster Broad St Car Park</b>	265,000				25	11,925	22,048	21,571	21,094	343,387
New petrol interceptor and drainage layout to protect river. This is the second phase of the scheme.										



## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
<b>Butter Market</b>	150,000				25	6,750	12,480	12,210	11,940	194,370
Upgrading Works Phase 1 Butter Market. Essential maintenance works and improvements to the section of the Butter Market at the rear of the properties in Widemarsh Street. Work includes re-surfacing and fire precaution improvements to ensure safe means of access.										
<b>Small Holdings Capital Work</b>	300,000	600,000	1,000,000		25	13,500	51,960	119,340	155,920	2,630,780
This is essential maintenance and some improvements works to the houses and farm buildings within the council's smallholdings estate. The work includes electrical re-wiring, re-roofing, replacement windows and heating.										
<b>Hereford Art Gallery</b>	8,000				N/A					N/A

## 2008/09 PRUDENTIAL BORROWING BIDS

BID	AMOUNT				LIFE	ESTIMATED CAPITAL FINANCING COSTS				
	2008/09 £	2009/10 £	2010/11 £	2011/12 £		2008/09 £	2009/10 £	2010/11 £	2011/12 £	FUTURE YEARS £
Creation of a small exhibition space within the Art Gallery at Hereford Museum & Art Gallery to display the works of Brian Hatton, the reputation of the gallery is at risk without the possibility of loans of major works.										
<b>Broad St Library</b>	130,000				N/A					N/A
Essential maintenance works to a Grade II listed building involving repairs to coping stones, corbel brickwork and lead valley areas.										
	6,274,060	4,623,000	4,095,000	0		3,821,972	3,367,936	3,757,958	756,648	6,842,394
<b>TOTAL BIDS RECEIVED</b>	8,792,922	5,136,550	4,548,550	453,550		3,934,046	3,722,418	4,138,700	1,162,143	10,442,794

# PROGRESS ON IMPROVEMENT CHILDREN AND YOUNG PEOPLE'S SERVICES

## PORTFOLIO RESPONSIBILITY: CHILDREN'S SERVICES

CABINET

24 JANUARY 2008

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### Wards Affected

Countywide.

### Purpose

To update Cabinet on the performance of the Children and Young People's (CYP) Directorate as part of the continuing performance management process specifically established since the Joint Area Review (JAR) inspection in 2005.

### Key Decision

This is not a Key Decision.

### Recommendation

#### THAT

- (a) **Cabinet note the significant progress reported and the cessation of formal intervention by Government Office West Midlands; and**
- (b) **Cabinet return to the usual performance monitoring and reporting of the Directorate.**

### Reasons

Previous Cabinet meetings have required special focus on performance monitoring of the CYP Directorate since the JAR inspection in 2005. It has been a requirement to update Cabinet on progress at quarterly intervals. As at January 2008, with the cessation of formal intervention by Government Office West Midlands (GOWM) and the regular forms of scrutiny and performance management now being well established, it seems appropriate for Cabinet to consider reducing the need for additional reporting mechanisms.

### Considerations

1. The new Director of Children's Services established a positive relationship with GOWM early in April 2007 and agreed three key success criteria, against which progress could be more effectively monitored with a view to reducing/removing formal intervention from GOWM as soon as possible thereafter.

2. The success criteria were:

	<b>Success criteria</b>	<b>Evidence</b>	<b>Timescales</b>
<b>Performance Management</b>	<ol style="list-style-type: none"> <li>1. Embedded practice in monitoring performance at all levels of the organisation</li> <li>2. Good management and performance data</li> <li>3. The interrogation and interpretation of data</li> <li>4. Appropriate response and action that flows from the understanding of the DMT</li> </ol>	<p>Quarterly performance digest</p> <p>Paper trail through minutes of CYP DMT and team meetings</p> <p>Observation at CYP DMT – Rob Willoughby</p> <p>Identification of areas for concern/celebration by CYP DMT and subsequent action taken/plans being informed by this evidence</p>	<p>Initiate immediately</p> <p>PM on agenda of DMT</p> <p>Monthly management meetings and team meetings</p>
<b>Change management</b>	<ol style="list-style-type: none"> <li>1. Strategic plan agreed which sets out the way forward and timescales for closures/ amalgamations</li> <li>2. Develop a growing awareness in Herefordshire of the need for change in school provision and a shared vision</li> <li>3. Build support for a new approach in the education community</li> <li>4. Develop policy objectives of members as part of the process before recommendations are developed</li> <li>5. Be clear about both the objectives of the strategic plan as well as the weaknesses to be overcome</li> <li>6. Political approval for the plan</li> </ol>	<p>Paper trail of data/meetings and consultation process for the strategy</p>	<p>Autumn term</p>
<b>Children with Disabilities Strategy</b>	<ol style="list-style-type: none"> <li>1. Strategic document approved</li> <li>2. Appropriate action taken to develop</li> </ol>	<p>Completed document – to high quality, relevant to Herefordshire context, evidence based and</p>	<p>September 2007</p>

	taken to develop services according to need identified through the strategy	costed Paper trail of consultation, formal approval process Issues/areas identified for development to meet need and in our plans	
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3. Subsequently, meetings took place, both formally and informally, to agree actions and progress. Formal Improvement Board meetings were held on 27 June and 21 September 2007, where the criteria were set and actions monitored. Minutes of these meetings are attached as Appendix 1.
4. It was clear that the relationship between the Directorate and GOWM had improved but the Children's Services Adviser, Mr. R Willoughby, was also invited to monitor performance through attendance at Children and Young People Directorate Management Meetings, which he did on a number of occasions.
5. In September, the Directorate prepared and underwent their Annual Performance Assessment (APA) by Ofsted. A self-evaluation document has to be completed before the inspection. This forms the basis of their enquiry during a day visit where they interview officers and key partners. The Cabinet Member and Scrutiny Chair were both involved in the preparatory meetings, which was helpful and gave a very positive message to all partners.
6. GOWM were keen to know the outcome of the APA before making their formal recommendations to the Minister.
7. The final APA letter was published at the end of November and is attached at Appendix 2. In summary, this is a very positive letter. There are, of course, many things we do well but the key points were:

Outcome area	Strengths
<b>Be Healthy</b> "The contribution of services to improving outcomes for children and young people in this aspect is good"	<ul style="list-style-type: none"> <li>▪ Very good progress towards the provision of a comprehensive Child and Adolescent Mental Health Service (CAMHS)</li> <li>▪ Good access and services for looked after children and children and young people with learning difficulties and/or disabilities</li> <li>▪ Programmes to address local priorities including obesity, substance misuse and sexual health</li> </ul>
<b>Stay Safe</b> "The contribution of services to improving outcomes for children and young people in this aspect is adequate"	<ul style="list-style-type: none"> <li>▪ Strengthened arrangements to combat bullying</li> <li>▪ Significant increase in numbers of referrals to social care and the proportion of referrals leading to initial assessments</li> <li>▪ Compliance with requirements for allocation of child protection cases and timeliness of reviews</li> <li>▪ Enhanced effectiveness of Herefordshire Safeguarding Children Board</li> <li>▪ Good arrangements to support looked after children, including placement stability and quality of foster care</li> </ul>

Outcome area	Strengths
	<ul style="list-style-type: none"> <li>Very good planning and provision for young people leaving care</li> </ul>
<b>Enjoy and Achieve</b> “The contribution of services to improving outcomes for children and young people in this aspect is good”	<ul style="list-style-type: none"> <li>Substantial improvement in educational standards since 2005</li> <li>Good educational outcomes for looked after children, and those with learning difficulties and/or disabilities</li> <li>Increased places for young children in Early Years settings</li> <li>Increase in the proportion of schools judged to be good or better</li> </ul>
<b>Make a Positive Contribution</b> “The contribution of services to improving outcomes for children and young people in this aspect is adequate”	<ul style="list-style-type: none"> <li>Development of a family support strategy to improve coordination and provision of earlier intervention and preventative services</li> <li>Good consultation processes for children and young people</li> <li>Well used, specific consultation and review processes for vulnerable groups</li> <li>Timely reviews of looked after children and high participation rates</li> </ul>
<b>Achieve Economic Wellbeing</b> “The contribution of services to improving outcomes for children and young people in this aspect is adequate, with several good features”	<ul style="list-style-type: none"> <li>Good outcomes in terms of basic qualifications and training</li> <li>Successful reduction in the numbers of 16 to 18 years olds not in education, employment or training, including looked after children</li> <li>Transition plans for up to 90% of learners with learning difficulties and/or disabilities</li> <li>Suitable accommodation for all young care leavers</li> </ul>
<b>Service management</b> “The capacity to improve, including the management of children’s’ services is adequate, with some good features”	<ul style="list-style-type: none"> <li>Good partnerships between agencies to improve health and welfare for children and young people.</li> <li>Good leadership and management of school improvement services and effective participation by schools</li> </ul>

There are also some things, which were agreed as requiring further improvement, and these were:

Outcome area	Areas for improvement
<b>Be Healthy</b>	<ul style="list-style-type: none"> <li>Improving the oral health of children and young people</li> </ul>
<b>Stay Safe</b>	<ul style="list-style-type: none"> <li>Improving performance against timescales for initial and core assessments</li> <li>Auditing of compliance with safe recruiting practices across agencies</li> <li>Provision to combat domestic violence</li> </ul>
<b>Enjoy and Achieve</b>	<ul style="list-style-type: none"> <li>Standards at Key Stage 1</li> <li>Absence in secondary schools</li> </ul>
<b>Make a Positive Contribution</b>	<ul style="list-style-type: none"> <li>Addressing the numbers of first-time entrants into the youth justice system, the rate of recidivism and the</li> </ul>

<b>Outcome area</b>	<b>Areas for improvement</b>
	proportion of young offenders who are in education, employment and training
<b>Achieve Economic Wellbeing</b>	<ul style="list-style-type: none"> <li>▪ Improving progress towards developing an area-wide programme for 14-19 learning</li> </ul>
<b>Service management</b>	<ul style="list-style-type: none"> <li>▪ Embedding performance management across all service areas</li> <li>▪ Ensuring a sufficient proportion of local authority resources is allocated to children's service, in the light of demographic pressures and falling rolls</li> </ul>

8. GOWM confirmed the view of the Minister in their letter dated 8 November 2007 which is attached as Appendix 3.
9. Subsequently, a 'Priorities Meeting' was held with key partners and GOWM and the following are key areas which will be used to inform the new Children and Young People's Plan in 2008 and also the 'Local Area Agreement' Priorities and future funding decisions:
  - Improve dental health of children and young people
  - Increase the percentage of initial assessments completed in timescale
  - Improve educational attainment, particularly at Key Stages 1 and 2
  - Reduce offending of young people
  - Deliver the revised strategy for a coherent area-wide 14-19 curriculum
  - Deliver an effective strategy for education, employment and training of 16-19 year olds, particularly vulnerable groups
10. There are established patterns of monitoring and reporting performance of the Children's Trust and the Directorate, both with the Cabinet Member and the Children Services' Scrutiny Committee. The newly established Quarterly Performance Report forms the basis of this.
11. It is important to monitor progress carefully as there is still much developmental work to be completed. The close working relationship with GOWM will be a requirement of all local authorities as they develop their Children's Trust arrangements and it is clear that Herefordshire now has a much more positive relationship with GOWM on which to build.

## **Alternative Options**

No alternative options proposed.

## **Risk Management**

### **Consultees**

Not applicable.

## **Appendices**

1. Improvement Board minutes of meetings dated: 27 June and 21 September 2007

2. APA Letter
3. GOWM formal notification letter of the Minister's decision regarding formal intervention.

## **Background Papers**

Previous improvement reports to Cabinet.



**GOWM PROJECT BOARD MEETING  
WEDNESDAY, 27 JUNE: 3.30PM  
ROOM 7D, BLACKFRIARS**

**Present:**

Kathy Lee Cole	Government Office for the West Midlands
Rob Willoughby	Government Office for the West Midlands
Councillor Jenny Hyde	Cabinet Member Children's Services
Sharon Menghini	Director of Children's Services
Shaun McLurg	Head of Safeguarding & Assessment Services
George Salmon	Head of Commissioning and Improvement
Marcia Perry	Joint Services Manager
Philippa Granthier	Children's Trust Business Manager
Hillary Hall	Performance Team Manager

**Apologies:**

Anne Heath	Head of Integrated Services & Inclusion
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<u>AGENDA ITEM</u>	<u>Discussion</u>
1.	<b>Welcome and Introductions: Kathy Lee Cole</b>
2.	<b>Success Criteria:</b> Rob Willoughby thanked Sharon Menghini and colleagues for allowing him to work with the management team and view the work being done to take forward management strategies. He acknowledged the honesty of the process.
3	<b>Progress Report Success Criteria/Plans to Review School Organisation: Report by The Director</b> The Director and a number of her team are relatively new in post and are in the process of learning and understanding the work of the previous incumbents. Councillor Jenny Hyde, Cabinet Member for Education has also recently taken over from Cllr Don Rule. Jenny has a background in Fostering Care. The Director's statutory obligation is to move CYPD towards a Children's Trust. Progress has already been made and there is a need to move forward significantly.  The Director is confident with their self-assessment and believes a fair judgement has been made. CYPD has erred on the side of caution, by being realistic with a view that most areas are better than adequate.  Anne Heath and Marcia Perry are working on the Child Disability Strategy and there is still some progress to be made.
3.1	<b>School Reorganisation:</b> There has been an important step-change in the way the CYPD approach this. There have been meetings with headteachers and feedback has been welcomed from them.
3.2	<b>Children's Trust:</b> The Director referred the meeting to her overview diagram on how the Trust will look and work, moving existing boards into the Children's Trust. This is still the process of refining and redefining membership to strengthen the decision making process. 18 July will be the date to finally ratify the terms of reference. Work will proceed alongside the plans of the PST.

3.3	<p><b>Governance Arrangements:</b> The good work of the sub-groups, core and key activities will be pulled into the centre of the trust for commissioning and be properly funded. The groups will know where they are reporting and governance. Partners and schools will be agreed. The Director explained to the meeting her diagram showing the governance arrangements. This model will make sure the process goes in the right direction and gives opportunities for debate and reporting back. The process can be refined year on year to encompass new priorities.</p>
3.4	<p><b>Partnership Day:</b> Councillor Jenny Hyde reported very positive feedback after initial surprise at the new Model. The model faced a challenging debate but parties were pleased that positive progress was being made and going forward. SML reported that for the first time there was a clear pathway to the Children's Trust.</p> <ul style="list-style-type: none"> <li>• CLC queried the "road traffic" being on the agenda and 14-19 reforms, which cuts across all areas of the agenda.</li> <li>• RW acknowledges that work is still in progress and would be happy to hear how this develops – "it is a driving change function".</li> <li>• Monitoring of commissioning; more debate and refining is required on the finance aspect. The Director is confident that once the Trust is in place by April 2008, commissioning will be secured by April 2009.</li> </ul>
3.5	<p><b>Performance Management/Digest:</b></p> <ul style="list-style-type: none"> <li>• A significant amount of work has been completed prior to the New Director's arrival. Hilary Hall, Performance Manager will have a major impact in this area, as will the New Chair of Scrutiny who is interested and supportive. The Digest will in fact become the "Bible" and bring together all performance information.</li> <li>• There will also be a regular monthly slot on DMT to look at performance.</li> <li>• CLC questioned the middle management structure and how they would be involved? <ul style="list-style-type: none"> <li>○ The Director answered that some areas of performance management was linked to financial planning and managers would be encourage to own this. Performance management would exist via the regular team meeting patterns. Hillary would be key in this area.</li> </ul> </li> <li>• GS reported 12 service managers have gone through IPC with a further 12 starting next September. Project work is linked to work of the Directorate.</li> <li>• APA/Benchmarking exercise. RW and CLC agreed this was a good document which communicates well.</li> <li>• GS: IPC ran a successful Commissioning seminar which was highly participatory as a result local network meetings will be established.</li> <li>• The Director emphasised good management links in regard to well performing SRD's. CYPD had a 100% return.</li> </ul> <p>CLC offered the Director and Team her help and resources to make useful links.</p> <ul style="list-style-type: none"> <li>• SM asked for contact details for Coventry Council, to enable Hilary Hall to make a visit. The website is very modern. CYPD need to make their website bright and simple and easy to access. Need to modernise and achieve a few quick wins.</li> </ul>
3.6	<p><b>Marcia Perry briefed the meeting:</b></p> <ul style="list-style-type: none"> <li>• Document has gone to CYPD Strategy Board, which received helpful feedback.</li> <li>• There are key areas of focus to make to complete a more robust and overarching paper.</li> <li>• MP reported that they have found high performing data for Herefordshire on Disabled People and Duke of Edinburgh awards.</li> <li>• The document will be ready for consultation on the 1 September.</li> </ul> <p>RW found feedback was very useful and significant developments were in progress.</p>

3.7	<b>Treasury Document: £280 Million Fund. A result will soon be known.</b>
3.8	<p><b>School Review:</b></p> <ul style="list-style-type: none"> <li>• Officer time and capacity allied with falling rolls has been a factor in trying to complete the school review process.</li> <li>• The Director had a productive away day with CYPD staff involved in the review and discussions had been held with head teachers. From dialogue with schools it had become apparent that there were no underlying set down principles or even professional debate on school review.</li> <li>• The Director is in the process of drafting a document to consult formally with schools, then Cabinet. The document will be sent out this term.</li> <li>• Shared idea with heads that they must be bold about difficult and emotional issues. The document will also give strength to Cabinet Members in their decision making.</li> <li>• CLC gave details of a published paper by Andy Brown the Director of the LSC in the Black country regarding falling rolls.</li> <li>• GS flagged up problem being experienced regarding new build for Staunton on Wye where rolls had fallen. Monies for build would go back to a central pot.</li> </ul> <p><b>ACTION: GS would email RW the details for him to take-up with Government.</b></p>
3.9	<p><b>Federation/Trust Schools</b></p> <p><b>Discussion points:</b></p> <ul style="list-style-type: none"> <li>• RW concerned lack of reference to ECM.</li> <li>• How do Trusts combat falling rolls?</li> <li>• Do schools federate or amalgamate?</li> <li>• Trust schools can be achieved in Hereford City, Federation will not work in rural areas.</li> <li>• Wigmore and Primary and Secondary going for Federation.</li> <li>• GS reported all 14 high schools have achieved specialist college status.</li> </ul>
3.10	<p><b>Attendance at SMT Meetings: Rob Willoughby</b></p> <p>RW thanked the meeting for the opportunity to attend two of the SMT meetings. Found the open and frank discussion very constructive. The APA document is a good helpful working document.</p>
5.	<p><b>Refreshed C&amp;YP Plan: Philippa Granthier</b></p> <p>Phillippa Granthier gave a brief summary.</p> <ul style="list-style-type: none"> <li>• SM shared her view of a new slimmer 10-page document. This had not been debated at SMT.</li> <li>• RW reflected that the document would depend on the audience. Would need a more detailed document if it were to be viewed by Ofsted.</li> <li>• RW would like an invitation from the LA to attend the APA meeting on the 27 September</li> </ul>
6.	<p><b>Ministerial Reports: Rob Willoughby</b></p> <p>A summary of their findings/Report would be shared with C&amp;YPD on an informal basis.</p>
	<p><b>ACTIONS:</b></p> <ul style="list-style-type: none"> <li>• <b>To continue working to develop the Children’s Trust. Thanks from the GOWM for being very helpful.</b></li> <li>• <b>SM to invite RW to the APA meeting on the 27 September.</b></li> </ul>



**GOWM PROJECT BOARD MEETING  
FRIDAY 21 SEPTEMBER 2007 AT 9.30 AM  
COUNCIL CHAMBER, TOWN HALL, HEREFORD**

**Present:**

Kathy Lee Cole	Government Office for the West Midlands	(KLC)
Rob Willoughby	Government Office for the West Midlands	(RW)
Councillor Jenny Hyde	Cabinet Member Children's Services	
Sharon Menghini	Director of Children's Services	(SM)
Anne Heath	Head of Integrated Services & Inclusion	(AH)
George Salmon	Head of Commissioning and Improvement	(GS)
Marcia Perry	Directorate Manager – Children's Services	(MP)
Philippa Granthier	Children's Trust Business Manager	(PG)
Hillary Hall	Performance Improvement Manager	(HH)

**Apologies:**

Shaun McLurg                      Head of Safeguarding & Assessment Services

**1. Welcome**

KLC welcomed everyone to the meeting.

**2. Minutes of Last Meeting**

The following corrections were noted:

Marcia Perry's job title should read "Directorate Manager – Children's Services".

School Review

Staunton on Wye - RW would try to take forward the issue of keeping the money in Herefordshire rather than it going back into a central pot.

APA – RW would be attending the APA meeting on 27 September 2007.

**3. Report from DCS**

SM went through her report that had been circulated prior to the meeting.

Children's Trust

- SM highlighted that the Children's Trust arrangements were moving forward. However, more work was still required re commissioning. There had been a re-organisation so that there was an Executive Level, then a Management Group, followed by five outcome groups which were multi-agency. The outcome groups had been requested to look at their terms of references.
- The outcome groups have set out what they are working on. SM handed out a document which set out the roles of each group. The outcome groups were aware that they would need to work across the different

areas.

#### Herefordshire Partnership LSP Group

- This group was a small executive group of which SM was not a member. SM would be attending the next meeting. SM was aware that the different partners needed to “knit” together and work out a more streamlined approach.
- RW requested that the latest strategies be discussed at this meeting.
- SM’s impression was that work on drugs issues start from community safety rather than from the Children’s Trust. SM’s view was that there should be some link with the Children’s Trust.
- With the new style LAA, there may be different priorities.
- KLC offered to talk to the Hereford Lead with regard to the matrix structure.
- SM had had discussions with the Leader with regard to children’s issues.
- KLC said that given the geographical spread of Herefordshire, there would need to be more connectivity.
- Cllr Mrs Hyde said that children issues were at the top of the agenda and that a significant amount of funding does go to children.
- The PST proposals had been approved by both the Council and the PCT. The PST Chief Executive interviews were due to take place on 27 September. There were four candidates. SM said that the issues would need to be discussed and monitored carefully to ensure that they were right for Herefordshire. However the appointment of a Chief Executive was seen to be positive. RW said that the DCFS would want to know how it would work for children. SM indicated that Neil Pringle had not wished to get caught up in a debate with regard to the structure / restructure at this stage as the new Chief Executive would like his own input.

Action: **Copies of the latest documents would be requested from Russell Hamilton, Project Manager.**

#### Flood Damage

- All schools were opened.
- Cllr Mrs Hyde had visited all affected schools to view the damage and has had a review visit.
- Cllr Mrs Hyde said that all the staff had shown tremendous commitment.
- There were still concerns with regard to future flooding at Holmer and Bosbury. It was possible that a capital bid may be made to install some flood prevention measures.
- GOWM’s help in transferring monies from the Staunton on Wye project would be appreciated.

would be appreciated.

#### New Head of Service

- The interviews would take place at the end of October and would provide support with regard to commissioning for the Children's Trust.

#### APA

- APA was imminent and staff were working hard to prepare as much as possible.

#### Extended Schools

- The recent meeting had been very positive. SM was grateful for colleagues' efforts
- KLC indicated that she was very proud of the work and that it had been noted regionally.

#### Safeguarding

- Recruitment was still high profile and that we were on target to meet Government targets.
- ICS was being implemented via Herefordshire Connects and was across the Council. There would be a link with Adult Social Services. RW asked whether there was a link in with the Cap GEM. The Council need to make sure that there was communication and that Cap GEM were kept up to speed. If ICS was not implemented by April 2008, it would mean a red rating. The Council needed to ascertain whether the paper basis can be ICS rated.

**Action: SM to find out from Derek Forknall and feed back to RW.**

- KLC indicated that integrated youth support issues were high on the agenda and that more work would be expected. AH said that Jon Ralph had pulled together a multi-agency team to look at the issues in conjunction with CAF. There would also be a consultation on 25 November with young people to ascertain their engagement. Work on the 14-19 area was moving forward.
- Yvonne Clowsley had been seconded to the Council for six months and was being funded by health. YC would be dealing with specific activities which had been set out.

#### Three Success Criteria

- SM had asked for a group of RADAR PIs to be reported monthly as well as the quarterly digest.

#### 4. **Update on Performance Management**

Hilary Hall presented her report.

- The 2<sup>nd</sup> quarterly digest would be more informative as more comparative information and graphical representation of the Best Value Performance Indicators was included in it. The 1<sup>st</sup> quarter was just a starting point..
- SM reminded those present that the digest would be presented to Scrutiny, Cabinet, Children's Trust.
- RW said that the quarterly report was a real achievement and exactly what GOWM were looking for.
- RW – the RADAR PI's are a step in the right direction. However he would feel reassured if the children's protection PI's were also in there. HH passed out a document which illustrated that the children's protection PI's were there.
- RW asked about a further development of comparators and suggested Worcestershire or the creation of teams within Herefordshire to act as comparator groups.
- HH indicated that learning from best practice is the next step and that this was coming out in the performance clinics that had been held.
- SM said that HH had given her a copy of a Needs Analysis which was really useful. The PowerPoint presentation could be used to start a debate with other colleagues.
- RW was interested to know what the perception of IPC was. GS said that it was good quality training. The only concern for some staff was that a dissertation was required and that this was hard for staff given their workload. The Council had made the dissertation optional provided they had completed the course. However, some staff had done the dissertation.

### 5 Update on Change Management – Schools Re-Organisation

GS presented his report.

- There would be a meeting on 9 October with the secondary schools.
- The primary school heads had met yesterday (20 September) to start the debate.
- The review was on track.
- The technical work was now starting.
- The feedback from schools was that proposals on the next stage would not be welcomed just before Christmas and that it would be better to send them out in possibly early January.
- RW said that he was pleased that the schools were engaged and that the proposals were increasingly strategic.
- SM said that while visiting schools, the review is brought up in discussions



discussions.

- Members were collectively aware of the big picture
- The meeting with the Schools Commissioner Office in July had gone well.
- SM indicated that a wider accommodation review was taking place.
- MP said that work on the integrated teams had started.
- SM indicated that the review needed to think about the community and not just facilities all on one site.
- RB suggested that the review should reflect the new commissioning language

## 6 Children with Disability

AH presented her report. Due to technical difficulties, RW had been unable to print off the Children with Disability strategy. RW would feed detailed comments back on the Strategy to AH, copy to SM.

### **Action: RW to feed back comments**

- AH reported that a significant amount of work had been done on the strategy by Richard Watson. Richard had worked with multi-agency colleagues and had taken on board all comments that he had received.
- Further work was still required, however, we were on target to meet the deadlines.
- MP reported that this time the process felt different and that group felt stronger. Comments were still being received and were wide-ranging. However, there had been a significant improvement. The strategy was more robust and user friendly.
- MP – thought needed to be given on how to join the NFC / ECM agenda to the disability strategy.
- SM said that she had attended the Health Commissioning Group and the Hereford Hospital Trust and given a presentation with regard to the Children's Trust which had been well received.
- RW said that he could see that progress had been made.

## 6. Next Steps

SM reported that more work was still needed.

KLC reported that she and RW would discuss. They would wait until after APA to prepare a Ministerial briefing.

KLC said that the partnership working over the last few months shows that significant progress had been made

significant progress had been made.

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26 November 2007

Ms Sharon Menghini  
Director of Children's Services  
Herefordshire Council  
Children's Services Directorate  
Brockington  
35 Hafod Road  
Hereford  
HR1 1SH

Dear Ms Menghini

## **2007 ANNUAL PERFORMANCE ASSESSMENT OF SERVICES FOR CHILDREN AND YOUNG PEOPLE IN HEREFORDSHIRE COUNCIL**

This letter summarises the findings of the 2007 annual performance assessment (APA) for your local authority. The judgements in the letter draw on your review of the Children and Young People's Plan where it was available, and the evidence and briefings provided by Ofsted, other inspectorates and relevant bodies. We are grateful for the information you provided to support this process and for the time given by you and your colleagues during the assessment.

### **Overall effectiveness of children's services**

**Grade 2**

Herefordshire Council delivers adequate services for children overall. Children's services are making good contributions to improving the educational achievement and health of children and young people. Provisions for safeguarding children, involving them in their community and equipping them for future prosperity are adequate.

### **Being healthy**

**Grade 3**

#### **Summary of strengths and areas for development**

The contribution of services to improving outcomes for children and young people in this aspect is good.

Most children and young people consider themselves to be healthy, according to the Tellus2 survey. Children have a good start with a higher proportion of mothers breastfeeding than nationally. Although numbers of infant mortalities and babies with low birth weights have increased recently and are higher than national averages, perinatal mortality rates are lower than the average. A review of the underlying factors has revealed no significant pattern of concern. Immunisation rates are consistent with national averages. Improving the oral health of children and young people remains a key priority for the council and its partners. The introduction of a

fluoridation process is being actively considered. In the interim, all children and young people requiring dental care are prioritised.

All schools are engaged in the Healthy Schools programme and 68% have achieved Healthy Schools Status. Programmes address local priorities including obesity, substance misuse and sexual health. Services to reduce teenage pregnancy are well coordinated and centred on schools. The number of teenage pregnancies is low and reducing, although the national target of a 50% reduction is difficult when starting from a low percentage. Provision has increased to reduce the level of obesity which at 12% is consistent with the national average. Improved joint working arrangements to combat substance misuse have led to substantially higher numbers of young people receiving treatment. Provision is addressing alcohol misuse, which contributes to high numbers of hospital admissions.

Very good progress has been made on provision of a comprehensive Child and Adolescent Mental Health Service (CAMHS). Waiting times for assessment and treatment have reduced and compare well with national targets. Provision for children and young people who are looked after, young offenders and those with learning difficulties and/or disabilities is good. Arrangements have been strengthened to ensure safe care for young people requiring hospital treatment. Transfers to externally commissioned CAMHS beds are arranged quickly following local emergency admissions. Access and services for looked after children are very good with health assessments being maintained at a high level of 90%. Newly integrated services for children and young people with learning difficulties and/or disabilities promote earlier identification and support.

### **Area(s) for development**

- Improve dental health of children and young people.

## **Staying safe**

**Grade 2**

### **Summary of strengths and areas for development**

The contribution of services to improving outcomes for children and young people in this aspect is adequate.

The council have maintained the improved safeguarding arrangements identified in the previous APA, but some weaknesses remain to be addressed. There are some good features. Parents and carers have good access to information and guidance on helping them to keep their children safe. The Tellus2 survey notes that more children and young people report that they feel safe in Herefordshire than nationally. Arrangements to combat bullying have been strengthened and the numbers of children killed or seriously injured on roads are reducing.

Thresholds for service have been reviewed, are understood across agencies and have resulted in higher numbers of children receiving support. Numbers of referrals

to social care services have increased significantly, as has the proportion of referrals that lead to initial assessments. Performance against timescales for initial and core assessments fell during the year to levels below national and comparable council averages. Improving these timescales remains a challenge for the council. Plans to fully implement the Common Assessment Framework and the Integrated Children System are progressing well. The council has delayed full implementation beyond April 2008, appropriately, to ensure connectivity with the new and wider ranging Herefordshire Connects system.

Compliance with requirements for allocation of child protection cases and timeliness of reviews are very good. However, the proportion of child protection investigations that lead to initial child protection conferences within 15 days is below national and comparable councils' averages.

The effectiveness of the Herefordshire Safeguarding Children Board has been enhanced through new appointments of a business manager and a permanent training manager. Good progress has been made on training provision and the development of new joint safeguarding procedures with neighbouring authorities. However, the Board has been slow to respond to requirements for auditing of compliance with safe recruiting practices across agencies and to improve provision to combat domestic violence, which remains a weak area. Additional funding has recently been secured in order to appoint an independent chair and increase strategic capacity.

Arrangements to support looked after children are good. Placement stability is good, as is the quality of care provided in foster placements. All looked after children are allocated to a qualified social worker. The number of children adopted fell in 2006–07 although completion of adoption proceedings was timely. Planning and provision, including accommodation options, for young people leaving care is very good. Integrated service provision for children and young people with learning difficulties and/or disabilities has led to more families having access to short breaks and support, and to better transition planning for young people moving into adult social care provision.

### **Area(s) for development**

- Increase compliance with timescales for initial and core assessments.
- Improve services to combat domestic violence.
- Complete audit of compliance with safe recruitment practice across agencies.

## **Enjoying and achieving**

**Grade 3**

### **Summary of strengths and areas for development**

The contribution of services to improving outcomes for children and young people in this aspect is good.

Outcomes for children and young people are better than at the previous APA primarily because of a substantial improvement in educational standards at Key Stage 4 since 2005. Standards in 2006 were above average, significantly better than in 2005, and showed above average value-added. Indicative data for 2007 support the continuing upward trend. Almost every young person in the authority gains at least one GCSE or equivalent qualification, which is noticeably better than almost all other authorities. Educational outcomes for looked after children, and those with learning difficulties and/or disabilities, are also good in comparison with other authorities. In 2006, Key Stage 3 performance was better than nationally, and similar to statistical neighbours.

Key Stage 2 results in 2006 were lower than expected overall, because of an unexpected dip in mathematics, but nevertheless were still in line with national averages. Unvalidated 2007 data show improved standards of attainment in mathematics, because the local authority has been effective in using individual school performance data to target explicit support where it was most needed. Standards at Key Stage 1 have been slightly decreasing over time, again indicative data for 2007 continues this trend, although they remained above the national averages for reading and mathematics in 2006, with writing the weaker of the three measures. The local authority had already identified a shortfall in writing and instituted guided writing programmes. It has considered a number of possible causes behind these Key Stage 1 figures and eliminated obvious factors, for example the accuracy of teacher assessments. No single cause is responsible, and based on the success of guided reading programmes the local authority is confident that a similar focus on writing will be effective.

The Foundation Stage profile data show a slight decline although it remains broadly similar to national averages. The LA attributes this to much better assessment practice, not to a real decline. There are more places for young children in early years settings, and the local authority has met targets to provide childcare support for young mothers.

Overall school attendance matches the national value, with relatively low unauthorised absence in primary schools contrasting with recently increased figures in the secondary sector to above the national average. The causes are known and are the focus of intense local authority support in specific schools. Permanent exclusions are slightly below national figures; although they have risen in the primary sector numbers are very small.

Inspection data for schools since the previous APA show a marked and welcome increase in the proportion judged to be good or better. In particular, personal development and well-being are very good as a result of explicit support from the authority's 'Values' education programme. Two schools have a notice to improve, a further one has been removed and there are no schools in special measures.

Children and young people say they enjoy school and inspection judgements show that in almost every school pupil enjoyment is good. However, a high proportion of

children and young people said their participation in out-of-school activities was weak, because of transport challenges and limited variety. In contrast, children and young people with learning difficulties and/or disabilities do have good support from the local authority in accessing these activities, through provision delivered in partnership, for example with Barnados.

There is a higher proportion of children and young people in the authority identified with special educational needs than nationally and a higher proportion are taught in mainstream settings. This is because some children nominally in the special schools are actually taught in mainstream settings by special school staff. There is also good outreach support for mainstream schools from specialist staff.

### **Area(s) for development**

- Monitor Key Stage 1 standards to ensure the effectiveness of guided writing programmes.
- Increase attendance by reducing unauthorised secondary school absence.

### **Making a positive contribution**

**Grade 2**

### **Summary of strengths and areas for development**

The contribution of services to improving outcomes for children and young people in this aspect is adequate.

The Tellus2 survey indicated that children and young people's views about their opportunity to contribute to their schools and communities, and about the extent to which they feel listened to, are consistent with those nationally. However, substantially smaller than usual proportions of children and young people participated in democratic school council elections.

Plans for improving coordination and provision of earlier intervention and preventative services for children and young people are progressing well through the development of a comprehensive family support strategy. Although the strategy is yet to be finalised and fully implemented, it builds on overall good existing child care provision and children's centres, and on well-established joint working arrangements between statutory and voluntary sectors. A wide stakeholder consultation about the plan has included children and young people, and their parents and carers. The council is aware of who and where its groups of vulnerable children and young people are and is targeting provision appropriately.

The council has some good consultation processes for children and young people including the Youth Council, school councils, and the recently established Shadow Children and Young People Partnership Board. Representation on the Youth Council and the Shadow Board appropriately reflects the local community and specific groups of children and young people, including those who are looked after and children with learning difficulties and/or disabilities. Young people were directly involved in the

development of services to increase leisure opportunities, particularly for those hard-to-reach, such as those with learning difficulties and/or disabilities. The proportion of young people aged 13–19 in contact with Youth Services increased from 11.5% to 15.5% but remains well below the national target of 25%. The council's Teenage Lifestyle Survey conducted in 2006 revealed that 12% of children and young people undertake voluntary work. Opportunities are wide-ranging and include a mentoring scheme funded through the Children Fund.

Services to reduce anti-social behaviour are effectively linked to the family support strategy and well coordinated through the well-regarded 'Prevent and Deter' strategy. The joint youth offending service covering Herefordshire and Worcestershire is an improving service. However, it has yet to effectively address the numbers of first-time entrants into the youth justice system, up by 15.7% to 358 which is well above statistical neighbours, and the rate of recidivism, currently at 54.5% compared to 48.7% for statistical neighbours. During 2006–07 performance fell against both of these aspects. More recently, the number of first-time entrants has fallen significantly and the rate of recidivism has shown an upward trend. The proportion of young people aged 16 and above known to the youth offending service and who are in education, employment and training is lower than the national average. The council and its partners have strengthened provision through appointment of education, employment and training support workers but these are yet to make an impact.

Children and young people who are looked after and those with learning difficulties and/or disabilities have specific consultation and review processes which are well used. Reviews of looked after children are timely and the participation of children and young people is high.

### **Area(s) for development**

- Complete and implement the family support strategy.
- Reduce re-offending of young people.
- Increase the proportion of young offenders in education, employment and training.

## **Achieving economic well-being**

**Grade 2**

### **Summary of strengths and areas for development**

The contribution of services to improving outcomes for children and young people in this aspect is adequate, with several good features.

The outcomes for young people in terms of basic qualifications and training are good, given the high proportion of learners gaining qualifications at Level 2 or Level 3. The local authority has successfully reduced the numbers of 16 to 18 years olds not in education, employment or training, to below the national average (5.5% in



2006). An even lower proportion of looked after children are not in education, employment or training. Up to 90% of learners with learning difficulties and/or disabilities have transition plans. Concerns remain that too many young people are taking up readily available local low-wage employment that offers no training.

Standards for A-levels are just above national averages, both per student and per qualification, across all further education settings. In schools with sixth forms, A-level standards are rising quickly and are now broadly similar to the national figures. Student success rates within the College of Technology have increased and are approaching the national average. Overall, outcomes for 16–19 year old learners are satisfactory, and good for vulnerable young people. All young care leavers are in suitable accommodation. The proportion of young apprentices who complete their training is much higher than the national value. The number of young apprenticeship placements has risen rapidly.

Previous progress towards developing an area-wide programme for 14–19 learning had been slow. Some collaborative work between schools is taking place to provide a wider range of vocational opportunities but the numbers involved have been relatively low. There are signs of better progress now, as the original strategy group has recently become a formal delivery board, with a full-time lead officer and a seconded secondary headteacher with considerable experience in developing vocational pathways in school. The local authority was unsuccessful in its bid to develop diplomas, and is now not expecting to start offering these qualifications until 2009.

### **Area(s) for development**

- Deliver the revised strategy for a coherent area-wide 14–19 curriculum that provides access to a wider range of vocational courses.

## **Capacity to improve, including the management of children's services**

**Grade 2**

### **Summary of strengths and areas for development**

The capacity to improve, including the management of children's services is adequate, with some good features.

There are good partnerships between agencies to improve health and welfare for children and young people. The improvement in educational outcomes is thanks to good leadership and management of school improvement services and effective participation by schools. Outcomes for children and young people with learning difficulties and/or disabilities, and those looked after, are good. The recently appointed director of children's services has quickly analysed the strengths and weaknesses of service provision, and begun to drive through improvements in strategy and performance management. Her vision for inclusive and collaborative

working with service providers is already evident in better consultation and wider ownership of the key challenge facing the authority as a consequence of falling numbers of pupils in schools. Better systems for analysing data are being rolled out, for example in special educational needs support, with a realistic understanding of what remains to be done in terms of information and communication technology systems.

But in children's social care, some outcomes remain at lower than expected levels. The Herefordshire Safeguarding Children Board has still to appoint an independent chair although this has now been authorised and funded. It has also slipped against its own targets for completing work, for example in the auditing of compliance with safe recruitment practices across all agencies. Previous limitations in area-wide 14–19 development still limit vocational and educational opportunities for all. Appropriate steps to strengthen performance management have been taken but as yet are not embedded across all service areas.

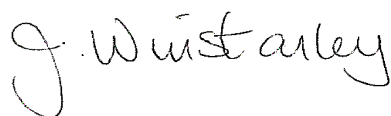
Despite these remaining areas for development, there is a sense of common purpose amongst service managers. Falling rolls will produce a downward pressure on resources for children's services, and the service leadership is consulting with its providers on strategies to manage this change. At the same time, the post-retirement aged population is rising, further increasing the challenge to ensure a sufficient proportion of local authority resources are allocated to children's services. These demographic pressures are occurring just as the council establishes a Public Services Trust to combine health and children's services functions.

### **Area(s) for development**

- Improve performance management across front-line services.
- Strengthen the capacity for children's services to influence local priorities by ensuring children's services targets are integral to wider local authority plans.

The children's services grade is the performance rating for the purpose of section 138 of the Education and Inspections Act 2006. It will also provide the score for the children and young people service block in the comprehensive performance assessment and to be published by the Audit Commission.

Yours sincerely



Juliet Winstanley  
Divisional Manager

Local Services Inspection

Publication





GOVERNMENT OFFICE  
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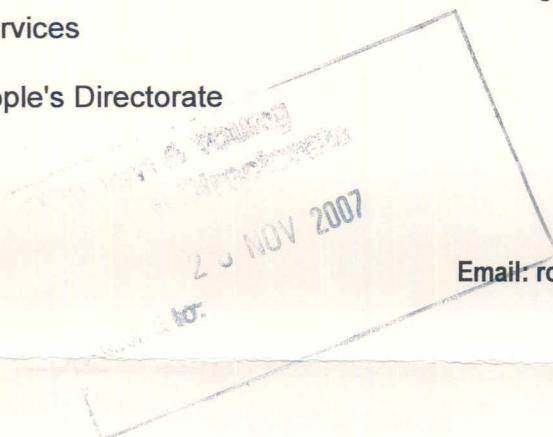
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22 November 2007

Dear Sharon

**Ending of DCSF formal engagement with Herefordshire**

I am writing to notify you of the decision to end the DCSF formal engagement with Herefordshire as a result of the poor Joint Area Review in 2005.

In the view of the Minister the improvement in outcomes for children and young people in the last 18 months is significant and that services are now adequate or better across the five ECM outcome areas.

May I add my congratulations to all the staff in Herefordshire for the progress that has been made.

I would also like to confirm that on behalf of DCSF and Government Office I would like to meet with you and your team on a quarterly basis to review progress in implementing your priorities as outlined in the Children and Young People's Plan and in other agreed priority areas.

Many thanks.

Yours sincerely

**Rob Willoughby**  
Children's Services Adviser

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# INTEGRATED PERFORMANCE AND FINANCE REPORT

## PORTFOLIO RESPONSIBILITY: CORPORATE, CUSTOMER SERVICES AND HUMAN RESOURCES; AND RESOURCES

CABINET

24 JANUARY 2008

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### Wards Affected

County-wide

### Purpose

To report

- i the Council's performance for the first eight months of 2007-08 against the Annual Operating Plan 2007-08 and national performance indicators used externally to measure the performance of the Council;
- ii partnership performance for the first six months in delivering the Local Public Service Agreement, Local Area Agreement and Herefordshire Community Strategy; and
- iii performance against revenue and capital budgets and corporate risks, and remedial action to address areas of under-performance.

### Key Decision

This is not a Key Decision

### Recommendations

#### **THAT**

- (a) **performance to the end of November 2007, and the adequacy of the proposed remedial actions to address areas of under-performance, be considered; and**
- (b) **Cabinet decides what, if any, advice it wishes to give the Herefordshire Partnership Performance Management Group on underperformance of any indicators led by partners.**

### Reasons

The Council's current Corporate Plan sets out the Council's objectives, priorities and targets for the three years 2007-10. The Annual Operating Plan (AOP) is the detailed action plan for the first of these years, 2007-08; it includes all the indicators in the Local Public Service Agreement (LPSA), the Local Area Agreement (LAA) and the Herefordshire Community Strategy (HCS), as well as the Council's own indicators.

## Considerations

### HIGHLIGHTS OF PERFORMANCE

- 23 of 111 Council-led indicators from the AOP are currently marked **R**, compared to 17 at the end of September;
- 24 are marked **G** compared to 21 at the end of September.

The greatest area of concern is within the priority area of 'maximising the health, safety, economic well-being, achievements and contribution of every child' where 14 indicators are marked **R**.

Relevant data from the Annual Satisfaction Survey, conducted in September and October 2007, have been included in this report. These account for the increase in 3 of the 6 additional indicators marked **R** since the last report, and all 3 of the additional indicators marked **G**.

- 62% of indicators used in external judgements, where data is available, show an improvement against last year's performance, the same as at the end of September, although a quarter of indicators are currently worse than last year.

These indicators will now be reported to CMB on a monthly basis for the remainder of the year. A similar exercise in 2006-07 led to an increase in the number of indicators improving during the last quarter of the year.

- The overall revenue budget forecast is an overspend of £1.005m, compared with the overspend of £3.219m forecast at the end of September.

- The revised capital budget forecast is £53.2m, compared with the original forecast of £65.5m.

- As reported to the Partnership's Performance Management Group on 16<sup>th</sup> November, at the end of September:
  - 6 LPSA indicators and 17 LAA indicators were marked **R**, compared to 4 and 15 at the end of July.
  - 4 LPSA indicators and 14 LAA indicators were marked **G**, the same as at the end of July.



- The overall Comprehensive Performance Assessment judgement for the Council, to be announced by the Audit Commission on 7th February, is predicted to show a fall in star rating from 3\* to 2\*.

The announcement is expected to confirm improved scores of 3 for Benefits and 3 for Environment, the maintenance of the scores of 3 for Culture and 2 for the key areas of Adult Social Care and Children and Young People, but a drop to 2 for the Use of Resources and to 1 for Housing.

Although the score for Housing has fallen to 1, this is not the result of a deterioration in performance; instead this is the result of a one-year change in the selection of housing performance indicators used by the Audit Commission. As has previously been reported to Cabinet, the good work by Strategic Housing in moving families into permanent accommodation is not reflected in the indicators used in CPA.

### ***Progress against the Council's AOP Priorities (Appendix A)***

1. Performance has been monitored for each indicator using the following system.

		<b>G</b>	On target or met target
	<b>A</b>		Some progress, or data not yet available so not possible to determine trend
<b>R</b>			Not on target

2. Analysis of performance against **target** by Council priority is detailed in the following table:

Priority	No. of Indicators	Judgement			n/a <sup>1</sup>
		<b>R</b>	<b>A</b>	<b>G</b>	
Securing the essential infrastructure for a successful economy	3	0	2	0	1
Giving effective community leadership	1	0	0	0	1
Improving transport and the safety of roads	9	0	7	2	0

<sup>1</sup> 16 indicators have been considered as not suitable for awarding a judgement, essentially because they are either tracker indicators (indicators that are unlikely to be affected by actions over a short period, such as climate change) or indicators that require a baseline to be set during the year.

Priority	No. of Indicators	Judgement			n/a <sup>1</sup>
		R	A	G	
Maximising the health, safety, economic well-being, achievements and contribution of every child	30	14	9	4	3
Sustaining thriving communities	36	5	18	6	7
Reshaping adult social care to enable vulnerable adults to live independently and, in particular, to enable many more older people to continue to live in their own homes	8	0	2	6	0
Protecting the environment	10	0	4	3	3
Understanding the needs and preferences of service users and Council Tax-payers, and tailoring services accordingly	2	0	1	0	1
Recruiting, retaining and motivating high quality staff	4	2	0	2	0
Embedding corporate planning, performance management and project management systems	3	0	3	0	0
Promoting diversity and community harmony	4	1	2	1	0
Ensuring that essential assets are in the right condition for the long-term cost-effective delivery of services, and ensure business continuity in the face of emergencies	1	1	0	0	0
<b>Total number of indicators (with last report's judgements in brackets)</b>	<b>111</b>	<b>23 (17)</b>	<b>33 (57)</b>	<b>24 (21)</b>	<b>16 (16)</b>

3. Details of the indicators in the table in paragraph 2 above are in **Appendix A**.

***Exceptions – indicators judged R at the end of November***

4. There are 23 indicators marked **R** at the end of November. The 6 additional indicators marked **R** since the last IPR are:

60b HCS Net perceived improvement rating over the last 3 years for Quality of Life factors (adults) for affordable decent housing *fell*

60f HCS Net perceived improvement rating over the last 3 years for Quality of Life factors (adults) for wage levels and local cost of living *fell*

65b HCS % of adults who use libraries at least once a month *fell*

*Data for the above 3 indicators has come from the Annual Satisfaction Survey, which was conducted in September and October 2007. They will therefore remain **R** for the remainder of this year.*

73 HC Investors in people accreditation

*Following an external assessment of our readiness, an action plan is being developed with the aim of gaining accreditation by the end of 2008. The Council will therefore not achieve accreditation before the target date of March 2008.*

100a HC % of employees from black and ethnic minorities

*Performance is currently below last year's outturn and is not on track to achieve this year's target. An action plan is in place as part of the Pay and Workforce Development Strategy to improve performance.*

101 HC Use of Resources score

*The Audit Commission will formally publish the Use of Resources judgement this month, using auditor assessments on 5 elements. The assessment is expected to show a fall from 3 to 2 (against a target of 3) based on the following auditor assessments:*

<i>Financial Reporting</i>	<i>3</i>
<i>Financial Management</i>	<i>3</i>
<i>Financial Standing</i>	<i>2</i>
<i>Internal Control</i>	<i>1</i>
<i>Value for Money</i>	<i>2</i>

The remaining 17 indicators marked as **R** were previously reported as part of the IPR to the end of September. The judgement has not changed against those indicators, which are:

22a HCS Measure of healthy lifestyles for 11-15 year olds: Smoking rates

22b HCS Measure of healthy lifestyles for 11-15 year olds: participating in sport/physical activities

22c HCS Measure of healthy lifestyles for 11-15 year olds: eating 5-a-day

22d HCS Measure of healthy lifestyles for 11-15 year olds: obesity

22e HCS Measure of healthy lifestyles for 11-15 year olds: alcohol consumption

22f HCS Measure of healthy lifestyles for 11-15 year olds: drug use

22g HCS Measure of healthy lifestyles for 11-15 year olds: scores for mental health

*There are currently no plans to undertake a follow-up survey this year. However, the importance of these indicators mean that a set of proxy indicators are being developed to act as a measure in respect of progress in-year against each of them. These will be presented to the next meeting of the Partnership's Performance Management Group and will be available for the next report to the end of January..*

13 HCS Average length of stay in B&B accommodation for homeless households

26 HCS % of children on the child protection register that are re-registrations

29 HCS Expenditure on family support services per capita aged under 18

30 HCS % of pupils achieving 5 or more GCSEs at grades A\* - G or equiv. including Maths and English (LEA schools)

35b HCS No. of half day sessions missed by looked after children as % of total number of sessions in primary schools

89a HC No. of referrals for children in need

89b HC Completion rate of initial assessments of children in need within 7 working days of referral

94 HC Grade for the year-on-year reduction in the total number of incidents and increase in total number of enforcement actions taken to deal with 'fly-tipping'

96 HC % of abandoned vehicles removed within 24 hours from the point where the Council is legally entitled to remove the vehicle

103 HC SRD completion rates

*Commentary on the above indicators has not changed since the last IPR to the end of September and is contained in Appendix A.*

### **Local Public Service Agreement (LPSA)**

5. As reported to Cabinet in the IPR to the end of July, the full set of indicators used in the LPSA and LAA is now presented to Cabinet following consideration by the partnership's performance management group (PMG), which is chaired by the Director of Environment. Information on partner lead indicators is included at the end of **Appendix A**.
6. As reported to the Partnership's Performance Management Group on 16<sup>th</sup> November, the position at the **end of September** was:

- 6 indicators were judged **R**; 21 **A**; and 4 **G**, compared to 4, 23 and 4 at the end of July.

Of these, judgement of the Council led indicators was

- 2 **R**; 11 **A**; and 4 **G**, which was reported to Cabinet in the end of September IPR, compared to 0, 13 and 4 at the end of July.

7. The 6 LPSA indicators judged **R** at the end of September, and considered by the PMG on 16<sup>th</sup> November, are listed below:

<b>Council led</b>
30 HCS % of pupils achieving 5 or more GCSEs at grades A* - G or equiv. including Maths and English (LEA schools) (covered in paragraph 4)
35b HCS No. of half day sessions missed by looked after children as % of total number of sessions in primary schools (covered in paragraph 4)
<b>Primary Care Trust led</b>
21a HCS % of babies born to teenage mothers who are breastfeeding at 6 weeks
21b HCS % of babies born to mothers in S.Wye area who are breastfeeding at 6 weeks
<i>Latest figures suggest that these indicators will not reach target, although the PCT are confident that the situation can be recovered.</i>
<b>West Mercia Constabulary (WMC) led</b>
42b HCS No. of criminal damage incidents
45 HCS No. of violent crimes

8. 2 further Council led indicators are now judged **R** and will be reported to the PMG at its next meeting on 14<sup>th</sup> February. The indicators are:

- 61a HCS '% of adult residents who feel that they can influence decisions affecting their local community'; and

- 64 HCS ‘% of adult residents who are satisfied with their local community as a place to live’

each of which were measured through the Annual Satisfaction Survey and are reported in the first table in paragraph 4 above.

**Local Area Agreement (LAA)**

9. For the LAA, the position at the **end of September** was that

- 17 indicators were judged **R**, 56 **A** and 14 **G**, compared to 15, 60 and 14 at the end of July. These include the LPSA indicators.

Of these, judgement of the Council led indicators was

- 11 **R**, 34 **A** and 10 **G**.

10. In addition to those LPSA indicators listed in the table in paragraph 7, the other 11 LAA indicators judged as **R** at the **end of September**, were:

<b>West Mercia Constabulary (WMC) led</b>
<p>42a HCS BCS Comparator crimes</p> <p><i>This indicator is a composite of all crimes, so increases in crime in respect of other areas, such as 42b HCS – criminal damage incidents, have a negative impact on performance against this indicator.</i></p>
<p>50 HCS No. of Class A drug supply offences brought to justice</p> <p><i>Latest figures suggest that these indicators will not reach target, although WMC are confident that the situation can be recovered.</i></p>

## Council led

13 HCS Average length of stay in B&B accommodation for homeless households

22a HCS Measure of healthy lifestyles for 11-15 year olds: Smoking rates

22b HCS Measure of healthy lifestyles for 11-15 year olds: participating in sport/physical activities

22c HCS Measure of healthy lifestyles for 11-15 year olds: eating 5-a-day

22d HCS Measure of healthy lifestyles for 11-15 year olds: obesity

22e HCS Measure of healthy lifestyles for 11-15 year olds: alcohol consumption

22f HCS Measure of healthy lifestyles for 11-15 year olds: drug use

22g HCS Measure of healthy lifestyles for 11-15 year olds: scores for mental health

29 HCS Expenditure on family support services per capita aged under 18

*\* see the table in paragraph 4 for latest position on all of these indicators*

### **Herefordshire Community Strategy (HCS)**

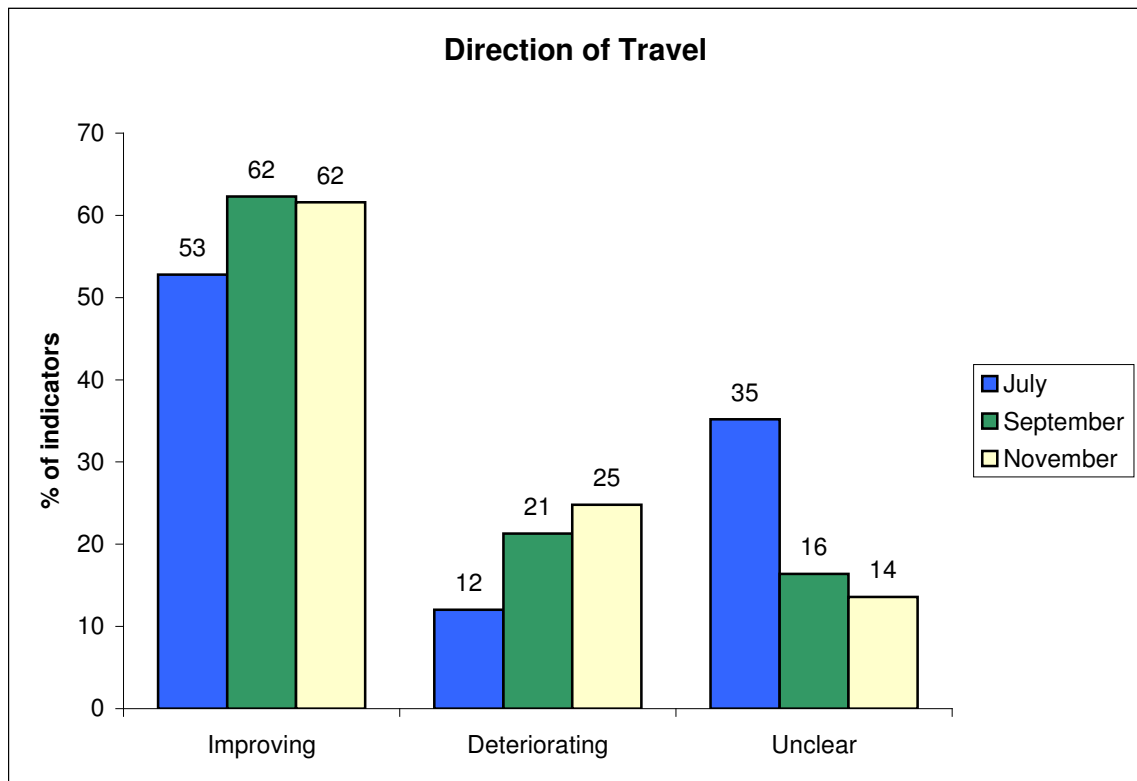
11. At the end of September, and as reported to the Partnership's Performance Management Group, there had been little change in the judgements given to indicators included in the HCS. The HCS indicators are included in Appendix A; a few are included in the LAA.

- 7 were judged **G** compared to 6 at the end of July.
- 13 were judged **R** compared to 12 at the end of July.

### **Direction of Travel**

12. In addition to those indicators which the council measures itself against through its Annual Operating Plan, the council is externally judged on its performance against a number of national indicators, including Best Value Performance Indicators (BVPIs) and Performance Assessment Framework indicators (PAF). Performance against these indicators is shown in **Appendix B**. Primarily, the council is judged **on its performance against the previous year**, rather than against target. This comparison will be used by the Audit Commission to inform the annual Direction of Travel Assessment in February 2009.

13. Of those indicators where in-year data is currently available, 62% are on course to improve on last year, the same as at the end of September. However, 25% of indicators, compared to 21% at the end of September, are now predicted to be worse than last year. The focus of attention is now at least to maintain performance in those areas that are currently performing well against last year's outturn, and to address the current under-performance in those areas that are falling below last year's performance.



### ***Comprehensive Performance Assessment (CPA)***

14. The Audit Commission will publish the Council's overall 2007 CPA score, as well as the relevant service block scores, on 7<sup>th</sup> February 2008. The score will be based on the service assessment scores, using performance data primarily covering 2006-07, and the protected Corporate Assessment score from 2002. The overall score, when published, is expected to show a fall from 3\* to 2\*. This is derived from the following expected service assessment scores:



	2006	2007
Adult Social Care	2	2
Children & Young People	2	2
Use of Resources	3	2
Benefits	2	3
Culture	3	3
Environment	2	3
Housing	2	1
Corporate Assessment	3 (protected)	3 (protected)
Overall Star Rating	3*	2*

15. Details of the rules-based approach used by the Audit Commission to categorise councils according to their performance is contained in the document 'CPA – the harder test framework for 2007'. The key rule affecting the Council's overall score is that, with a Corporate Assessment score of 3\*, if any service is scored below 2 the overall star rating is 2\*.
16. It should be noted that although the score for Housing has fallen to 1, this does not represent a deterioration in performance; instead, this is the result of a one-year change in the selection of housing performance indicators used by the Audit Commission for the purpose of the assessment, which do not reflect the success that the service has had in moving families out of temporary accommodation
17. Further changes to the performance indicators used in the housing service assessment for 2008 are expected to return housing to a score of 2, again without this reflecting any change in overall performance. If all other service scores are maintained, the overall 2008 CPA score for the Council, which will be published by the Audit Commission in February 2009, is forecast to remain at 2\*. This would come about as a result of the removal of protection of the 2002 Corporate Assessment score, which has been applied since 2005, and of its replacement by the 2005 Corporate Assessment score of 2.
18. The CPA system will end with the 2008 judgement, being replaced by the new system of the Corporate Area Assessment. A separate report about the preparation for the new system will be made to Cabinet at a subsequent meeting.

### ***Revenue Monitoring***

19. Details of the revenue budget position are at **Appendix C** in summary and then directorate-by-directorate.
20. The overall position shows a projected overspend of £1.005m compared with the projected overspend of £3.219m at the end of September. This total is just under 1% of the Council's £122.37m net revenue budget (excluding Direct Schools Grant). The projected position is after allowing for the use of the £1.3m Social Care contingency, an estimated £2.1m underspend on Spend to Save/Spend to Mitigate funding, additional Local Authority Business Growth Incentive (LABGI) grant of £600k and additional interest from cash transactions.
21. The key areas of concern are the Adult and Community Services, with a projected £3.66m overspend; Children and Young People's Directorate, with a £703K projected overspend; and Corporate & Customer Services where a £1.195m overspend is projected. Underspends of £407k and £60k are projected for the Environment Directorate and Resources Directorates respectively.
22. Appendix C includes a section on the July floods that caused significant damage to council assets. The estimated total cost of the damage is £3.55m.

### ***Capital Monitoring***

23. Details of the capital programme are at **Appendix D**.
24. As at the end of November, capital programme end of year out-turn forecast is £53.2m, compared with the original forecast of £65.5m. The change arises because of revisions to the programme, which are outlined in Appendix D. Actual expenditure as at end of November was £22.28m, representing 42% of the revised programme.

### ***Corporate Risk monitoring***

25. **Appendix E** contains the corporate risk log, which shows the current key risks facing the Council in terms of operations, reputation and external assessment.
26. The format of the Corporate Risk Register, which accompanies this report, has been revised, where possible, to include actions to be taken to mitigate the risks, the responsible officer for the action and a target date for completion or review.
27. The main issues arising from the register are as follows:
  - The number of Corporate Risks has increased to 21 (from 17) due to the inclusion of 4 new risks (CR29 – CR32). These relate to the risks identified in connection with data centre capacity, disaster recovery for ICT and unreliable internet feed. Action owners and target/review dates are to be added so these risks are managed appropriately.
  - There are seven risks that continue to score 'high' even after the mitigating actions have been taken into account. These risks are:

- a. CR2 – ‘Corporate Spending pressures outweigh the level of resources available to meet them.’ (See paragraph 20 above)
- b. CR4 – ‘Failure to maintain CPA 3\* rating and move from improving adequately to improving strongly’. (See paragraphs 14-17 above).
- c. CR5 – ‘The inability to provide critical services due to the failure of the ICT networks’. This risk has been superseded by the new four risks described above and may well be removed so as reduce duplication.
- d. CR17 – ‘Reduction in the Use of Resources overall assessment’.
- e. CR28 – ‘Deliverable benefits from Herefordshire Connects not realised’.
- f. CR29 – ‘Both Data Centres are in leased accommodation, are near capacity, plus there are environment issues such as power and fire suppression that need to be addressed. Loss of data centres will affect delivery of all services. This is linked with accommodation strategy risk CR13.
- g. CR32 – ‘Currently the Council’s websites use the Star Internet feed which is becoming increasingly unreliable. The target is to move the Internet feed to the 16 Mbytes pipe as soon as possible, however this is already reaching capacity usage at peak times from school traffic that already uses this feed.’

## **Alternative Options**

None.

## **Risk Management**

Effective performance reports and their follow-up are an essential element in the management of risks and the delivery of the Council’s and Herefordshire Partnership’s priorities.

## **Consultees**

Partners are involved in delivery of the Local Public Service Agreement, Local Area Agreement and Herefordshire Community Strategy.

## **Background Papers**

None





APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	April-July	April-September	April-November	Frequency of Reporting	Commentary (where relevant)
<b>Secure the essential infrastructure for a successful economy</b>															
1	HCS Ratio of earnings compared to West Midlands Region	✓			0.94:1					Tracker indicator, to be reported at year-end	A	n/a	n/a	Annually @ end of March	As a tracker indicator no judgement should have been made in the last report
2	HCS No. of VAT registered businesses	✓	✓		8,520					2% increase	A	A	A	Annually @ end of March	
3	HCS No. of people employed in technology and knowledge intensive industries	✓	✓	✓	10,577 (2005)			Action Plans		=>10,286	A	A	A	Annually @ end of March	
<b>Give effective community leadership</b>															
12	HCS % of adults undertaking 30mins of moderate physical activity at least 5 days per week (adult healthy lifestyles)	✓			47%			Action Plan		see commentary	A	n/a	n/a		Data for this indicator comes from the Healthy Lifestyle Survey. No date has been agreed for future surveys so future targets have not been set. Although a template is submitted showing progress against relevant actions, it would be wrong to make a judgement since there is currently no means of measurement.
<b>Improve transport and the safety of roads</b>															
52	HCS No. of people (all ages) killed or seriously injured on Herefordshire roads	✓	✓		119		43 (6 months)	84 (8 months)	95 (9 months)	<=134	G	G	G	Monthly	Performance relates to the calendar year so is currently on track to achieve target, albeit marginal.
99	HC No. of people slightly injured in road traffic collisions				732		194 (6 months)	464 (8 months)	524 (9 months)	<=788	G	G	G	Monthly	
6	HCS The percentage of adult residents in Herefordshire that usually travel to work for their main job by driving a car or van - on their own. (Method of Travel to Work)	✓			61%				58%	<=57%	A	A	A	Annually @ end of November	No significant change.
7	HCS Index of annual average daily traffic (AADT) volumes into Hereford City	✓	✓		100.63					<=108	A	A	A	Annually @ end of March	Integrated transport projects included in the LTP are being implemented
7	HCS Index of annual average daily traffic (AADT) volumes on principle rural road networks	✓	✓		100.63					<=109	A	A	A	Annually @ end of March	
72	HC Indexed number of cycling trips				118.99					=>118	A	A	A	Annually @ end of March	
76	HC No. of passenger journeys per year on public buses in Herefordshire (thousands)				3,433,043			Action Plans		=>3,948,000	A	A	A	Annually @ end of March	
83a	HC Principal Roads condition				14%					<=5%	A	A	A	Bi-annually November & March	Survey work has been brought forward so more timely use can be made of the data. The results are currently being analysed and should be available for the next report to the end of January.
83b	HC Non Principal Roads condition				21%					<=19%	A	A	A	Bi-annually November & March	The current highway maintenance plan is being delivered, but was affected by the recent flooding. The impact of flooding on the network has been assessed and bids submitted under the Bellwin Scheme

APPENDIX A - AOP INDICATORS  
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<b>Maximise the health, safety, economic well-being, achievements and contribution of every child</b>												
13	HCS Average length of stay in B&B accommodation for homeless households	✓	✓		15		4 weeks (June)	7 weeks	6 weeks	0 weeks	R R R	24 families with children (FWC) currently remain in temporary accommodation who will, once rehoused, be counted towards this indicator. This figures compares with 53 FWC in Q1 07/08 and 99 FWC in Q1 06/07. Continued pressure in homelessness presentations means that FWC are still placed in B&B at peak times. Those FWC to whom a duty is owed will continue to appear in this PI if rehoused.
24	HCS No. of schools with National Healthy Schools status	✓	✓		51		65 (June)	70		=>78	G G G	
26	HCS % of children on the child protection register that are re-registrations	✓			14.50%	0%	15.8% (June)	18.80%		<=15%	R R R	Performance has fallen during the year and is not on track to achieve target. Action is in place for monthly monitoring so the recommendations regarding de-registration are reached through robust, multi-agency assessments.
29	HCS Expenditure on family support services per capita aged under 18	✓	✓		£85			£36		£29	A R R	It is anticipated that the expenditure this year will mirror the outturn for 2006/07, given that there has been no increase in the budget and the current overall overspend position. The 2007/08 target is, therefore, unlikely to be achieved.
30	HCS % of pupils achieving 5 or more GCSEs at grades A* - G or equivalent including Maths and English (LEA schools)	✓	✓		92.80%			94.30%		=>96%	A R R	Performance has improved against previous year but has not achieved target.
31	HCS % of pupils achieving 5 or more GCSEs at grades A* - C or equivalent including Maths & English (LEA schools)*	✓	✓		48.20%			52.50%		=>51.6%	A G G	Significant improvement of 4.3% on the baseline of 2006. The gap between 5 A*-C and 5 A*-C including English and Maths reduced from 13.6% to 10.6%. Results in both English and Maths separately improved. At Wigmore, 93% of pupils achieved 5 A*-C and the gap between 5 A*-C and 5 A*-C including English and Maths reduced from 28% to 4%.
40	HCS % of 16-18 year olds NOT in education, employment or training	✓	✓		7.20%		5.73% (June)			<=5.3%	R A A	Providing data quarterly against this indicator does not provide an accurate depiction of progress due to fluctuations experienced throughout year. Full year's figures will be available for quarter 3 with a full analysis of progress.

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Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	Frequency of Reporting	Commentary (where relevant)												
66	% of 3 year olds who have access to a good quality free early years education place				85%	85%	85%	85%	85%	=>85%	<table border="1"> <tr> <td>April-July</td> <td>G</td> <td>G</td> <td>G</td> </tr> <tr> <td>April-September</td> <td>G</td> <td>G</td> <td>G</td> </tr> <tr> <td>April-November</td> <td>G</td> <td>G</td> <td>G</td> </tr> </table>	April-July	G	G	G	April-September	G	G	G	April-November	G	G	G	<p>Predicted outturn is 85% although the final calculation will be made at the end of the financial year. The list of eligible children is obtained from the PCT and packs are sent to parents as direct contact. In addition, there is outreach across the County to advertise Nursery Education Funding places including at Children's Centres. Leaflets continue to be distributed via normal information outlets in line with the action plan.</p>
April-July	G	G	G																					
April-September	G	G	G																					
April-November	G	G	G																					



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Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	Frequency of Reporting	Commentary (where relevant)
89	HC a No. of referrals for children in need	✓	✓	Local Public Service Agreement - second generation (LPSA2G)	266		248 (June)	242	240	=>280	R R	Performance on this indicator has levelled off below target. The relationship with the percentage of referrals designated as "no further action" and percentage repeat referrals requires further examination. Early indications suggested that threshold criteria were better understood by other agencies but this is not borne out by current figures. The audit of initial assessments will assist in assessing understanding and decision-making regarding threshold criteria.
89	HC b Completion rate of initial assessments of children in need within 7 working days of referral	✓	✓		58.70%		56.9% (June)	54.70%	52.80%	=>68%	R R	Performance continues to decline because of the increased workload and insufficient numbers of suitably qualified and experienced social workers able to undertake the work. Practice has been reviewed and revised to ensure that initial assessments are undertaken more quickly and is managed through monthly meetings with PCT and Education staff. Deloitte have been commissioned to audit the processes for initial assessments and to make recommendations for improving performance. This work begins 17/10/07 and will be completed by 26/10/07; further details will be available for the next IPR to end of January.
89	HC c Completion of core assessments for children in need within 35 working days	✓	✓		61%		73% (June)	78%	79%	=>66%	G G G R R R R R R R R R R R R R R R R R R	Performance is continuing to improve and at second quarter is well ahead of target. This reflects the focus at team manager level on ensuring core assessment timescales are adhered to and review assessments are undertaken appropriately.
22	HCS a Measure of healthy lifestyles for 11-15 year olds: Smoking rates	✓	✓		No baseline					To be set	R R	A set of proxy indicators are being developed for consideration by the partnership's performance management group in the new year.
22	HCS b Measure of healthy lifestyles for 11-15 year olds: participating in sport/physical activities	✓	✓		No baseline					To be set	R R	
22	HCS c Measure of healthy lifestyles for 11-15 year olds: eating 5-a-day	✓	✓		No baseline					To be set	R R	
22	HCS d Measure of healthy lifestyles for 11-15 year olds: obesity	✓	✓		No baseline					To be set	R R	
22	HCS e Measure of healthy lifestyles for 11-15 year olds: alcohol consumption	✓	✓		No baseline					To be set	R R	
22	HCS f Measure of healthy lifestyles for 11-15 year olds: drug use	✓	✓		No baseline					To be set	R R	
22	HCS g Measure of healthy lifestyles for 11-15 year olds: scores for mental health	✓	✓		No baseline					To be set	R R	

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Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	Frequency of Reporting	Commentary (where relevant)
28	HCS % of 11-15 year olds who stated they have been bullied in the last 12 months	✓			No baseline					Baseline to be established through Youth Survey	April-July April-September April-November Annually @ end of January	Because of the need to establish a baseline this indicator should not have been judged in the last report. Online reporting system now in place with first data for period April-July available in second quarter. 2007 Youth Survey results will be available in September and a baseline should be established by the new year.
33	HCS % of half day sessions missed by children in primary schools	✓	✓	✓	5.67%					<=4%	Annually @ end of May 2008	Unaudited data for all Councils indicates that Herfordshire remains in the average band for performance nationally. Two schools are now designated as PA (Persistent Absenteism) - previously 3. A range of work is being undertaken to address the areas where improvement is needed. Initiatives to promote awareness of the importance of regular attendance are under way in primary schools.
34	HCS % of half day sessions missed by children in secondary schools	✓	✓	✓	7.90%					<=6%	Annually @ end of May 2009	As for 33 HCS above
35	HCS a No. of looked after children who missed a total of 25 days or more schooling	✓	✓	✓	10.50%					<=9%	Annually @ end of January	The data for this indicator will be available for the next IPR but the prognosis for this year's outcome is not good. Again around 12 children are currently in the missed more than 25 days cohort.
35	HCS b No. of half day sessions missed by looked after children as % of total number of sessions in primary schools	✓	✓	✓	3.49%					<=4.25%	Annually @ end of January	The data for this indicator will be available for the next IPR but the prognosis for this year's outcome is not good.
35	HCS c No. of half day sessions missed by looked after children as % of total number of sessions in secondary schools	✓	✓	✓	5%					<=7%	Annually @ end of January	The data for this indicator will be available for the next IPR but the prognosis for this year's outcome is not good.
37	HCS No. of 11-15 year olds volunteering	✓			No baseline					Baseline to be established through Youth Survey	Annually @ end of January	Because of the need to establish a baseline this indicator should not have been judged in the last report. 2007 Youth Survey results will be available in September and a baseline should be established for the next IPR.
38	HCS % of young people that feel that they can influence decisions affecting important local services	✓			No baseline					Baseline to be established through Youth Survey	Annually @ end of January	Because of the need to establish a baseline this indicator should not have been judged in the last report. 2007 Youth Survey results will be available in September and a baseline should be established for the next IPR.
41	HCS No. of young people looked after in 17th year in education, training or employment at age 19	✓	✓	✓	14/14					46 (cumulative)	Annually @ end of March	Performance is good and the initiatives set in place will continue to support care leavers into suitable EET. Good liaison and data sharing between Connexions, Education of Looked After Children Service (ELSS) and after-care.
84	HCS The percentage annual increase in the number of schools with an approved school travel plan (STP)	✓	✓	✓	54%					=>68%	Annually @ end of March	
85	HCS Conception rate below age 18 (per 1,000 girls age 15-17)	✓	✓	✓	-15.70%					<=-19%	Annually @ end of March	
91	HC % of schools that have a functioning school council				No baseline					100%	Annually @ end of March	

Sustain thriving communities, including by securing more efficient, effective and customer-focused services, clean streets, tackling homelessness and effective emergency planning

APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Local Public Service Agreement - second generation (LPSA2G)	Local Area Agreement (LAA)	Herfordshire Community Strategy (HCS)	Baseline	May Report	July Report	September Report	November Report	Target	Frequency of Reporting	Commentary (where relevant)
14	HCS No. of people accepted as homeless & towards whom the council has a full statutory duty	✓	✓	✓	149	16	35	81	81	<=160	Monthly	Figures are cumulative. Current performance suggests that achievement of target will be marginal.
54	HCS % of streets and public areas falling below Grade B for cleanliness (litter)	✓	✓	✓	17%		21%	16%	14%	<=15%	Monthly	
92	HC Proportion of relevant land and highways from which unacceptable levels of graffiti are visible				2%		2%	1%	2%	<=2%	Monthly	
93	HC Proportion of land and highways from which unacceptable levels of fly-posting are visible				1%		0%	0%	0%	<=1%	Monthly	
94	HC Grade for the year-on-year reduction in the total number of incidents and increase in total number of enforcement actions taken to deal with fly-tipping (Grading 1 - very effective; 2 - effective; 3 - good; 4 - poor)				Grading 1 (very effective)	1	3	3	3	1	Monthly	The number of fly-tipping incidents has increased since May, following the introduction of permits at household waste amenity sites. Performance against this indicator has now levelled-off, but is not anticipated to improve above level 3 in the current financial year.
96	HC % of abandoned vehicles removed within 24 hours from the point where the Council is legally entitled to remove the vehicle				99%			94.74%	96.67%	100%	Monthly	Performance fell during the summer. One team deals with both abandoned vehicles and fly-tipping; handling a significant, and initially unexpected, increase in fly-tipping incidents resulted in a reduction in the response times for abandoned vehicles. Arrangements have now been put in place to provide back-up for the team and performance has improved in recent months; however, as the target is 100% this will not be achieved this year.
59	HCS % of respondents finding it easy to access: Library	✓	✓	✓	69%				70%	4% improvement by 2009	Annually @ end of November	Statistically, this does not represent a significant change
59	HCS % of respondents finding it easy to access: Sports/leisure centre	✓	✓	✓	64%				69%	4% improvement by 2009	Annually @ end of November	
59	HCS % of respondents finding it easy to access: Cultural/recreational facility e.g. theatre, cinema	✓	✓	✓	47%				52%	4% improvement by 2009	Annually @ end of November	
60	HCS Net perceived improvement rating over the last 3 years for CoL factors (adults): Activities for teenagers	✓	✓	✓	-32%				-31%	4% improvement by 2009	Annually @ end of November	Statistically, this does not represent a significant change
60	HCS Net perceived improvement rating over the last 3 years for CoL factors (adults): Affordable decent housing	✓	✓	✓	-50%				-57%	4% improvement by 2009	Annually @ end of November	
60	HCS Net perceived improvement rating over the last 3 years for CoL factors (adults): Job prospects	✓	✓	✓	-42%				-40%	4% improvement by 2009	Annually @ end of November	Statistically, this does not represent a significant change
60	HCS Net perceived improvement rating over the last 3 years for CoL factors (adults): Level of traffic congestion	✓	✓	✓	-77%				-70%	4% improvement by 2009	Annually @ end of November	
60	HCS Net perceived improvement rating over the last 3 years for CoL factors (adults): Wage levels and local cost of living	✓	✓	✓	-56%				-64%	4% improvement by 2009	Annually @ end of November	
61	HCS % of adult residents who feel that they can influence decisions affecting their local community	✓	✓	✓	35%				33%	=>40% in 2008 survey	Annually @ end of November	Statistically, this does not represent a significant change
61	HCS % of adult residents who feel that they can influence decisions affecting their local area	✓	✓	✓	29%				30%	=>33% in 2009 survey	Annually @ end of November	Statistically, this does not represent a significant change
62	HCS % of adult residents who engaged in formal volunteering for an average of 2 hrs a week or more over the previous year	✓	✓	✓	17%				17%	=>22% in 2008 survey	Annually @ end of November	Statistically, this does not represent a significant change

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63	HCS % of adult residents who feel that Herefordshire is a place where people from different backgrounds get on well together	✓			46%				49%	=>77% in 2009 survey	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
64	HCS % of adult residents who are satisfied with their local community as a place to live	✓	✓	✓	80%				79%	=>87% in 2008 survey	A	A	R	Annually @ end of November	Statistically, this does not represent a significant change
65	HCS % of adults who use: Sports and Leisure facilities at least once a month	✓	✓	✓	25%				30%	=>30% in 2008 survey	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
65	HCS % of adults who use: Libraries at least once a month	✓	✓	✓	32%				29%	=>34% in 2008 survey	A	A	R	Annually @ end of November	
65	HCS % of adults who use: Museums or galleries at least once every 6 months	✓	✓	✓	19%				24%	=>21% in 2008 survey	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
65	HCS % of adults who use: Theatres or concert halls at least once every 6 months	✓	✓	✓	32%				32%	=>36% in 2008 survey	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
65	HCS % of adults who use: Parks, open play areas and other recreational facilities at least once a month	✓	✓	✓	49%				50%	maintain baseline	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
70	HC % of adult residents that feel the Council does enough to give them opportunity to influence important decisions about local services				26%				28%	=>28% (in 2009 survey)	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
79	HC Compliance with Civil Contingencies Act, Data Protection and Freedom of Information				Compliant					Compliant	A	A	A	Annually @ end of March	
86	HCS % of people who feel that parents in their local area are made to take responsibility for the behaviour of their children	✓			35%				35%	=>39% in 2009 survey	R	A	A	Annually @ end of November	
87	HCS the percentage of people who feel that people in their area treat them with respect and consideration	✓			45%				44%	=>49% in 2009 survey	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
95	HC % of people satisfied with the cleanliness standard in their area				66%				63%	=>66%	A	A	A	Annually @ end of November	Statistically, this does not represent a significant change
90	HC Adult perceptions of improvement in facilities for young children				-5%				-2%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in CLEAN STREETS				-28%				-28%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in EDUCATION PROVISION				15%				11%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in PUBLIC TRANSPORT				-24%				-18%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in RACE RELATIONS				-13%				-17%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in ROAD AND PAVEMENT REPAIRS				-51%				-56%		n/a	n/a	n/a	Annually @ end of January	
97	HC Adult perceptions of improvement in THE LEVEL OF POLLUTION				-42%				-40%		n/a	n/a	n/a	Annually @ end of January	
<b>Reshape adult social care to enable vulnerable adults to live independently and to enable many more older people to continue to live in their own homes</b>															
16	HCS No. of people aged 65+ helped to live at home (per 1,000 population)	✓			81.1			83 (forecast)	83 (forecast)	=>83	G	G	G	Monthly	Unverified figures, when compared to the same period last year, suggest that the target will be achieved.

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74	HC	No. of adults with learning difficulties helped to live at home (per 1,000 population)			2.9		3 (forecast)	3 (forecast)	3 (forecast)	=-3	G	G	G	Monthly	Unverified figures, when compared to the same period last year, suggest that the target will be achieved.
74	HC	No. of adults with mental health difficulties helped to live at home (per 1,000 population)			4.1		4 (forecast)	4 (forecast)	4.4 (forecast)	=-4.4	G	G	G	Monthly	Unverified figures, when compared to the same period last year, suggest that the target will be achieved.
74	HC	No. of adults with physical difficulties helped to live at home (per 1,000 population)			6		6 (forecast)	6 (forecast)	6 (forecast)	=-6	G	G	G	Monthly	Unverified figures, when compared to the same period last year, suggest that the target will be achieved.
17	HCS	Satisfaction with homecare services provided through Social Care via direct payments (65+)	✓	✓	58%					=>66% in 2009 survey	A	A	A	Next survey due in 2009	
18	HCS	No. of people in receipt of Pension Credit	✓	✓	7,596					=-8,138	G	G	G	Annually @ end of March	
18	HCS	No. of people in receipt of Attendance Allowance	✓	✓	5,874					=-6,702	G	G	G	Annually @ end of March	
18	HCS	No. of people in receipt of Council Tax Benefit aged 60 or over**	✓	✓	6,862					=-8,061	A	A	A	Annually @ end of March	
<b>Protect the environment, producing much less waste, recycling much more of what remains and reducing carbon emissions</b>															
56	HCS	a Amount of household waste collected per person per annum	✓	✓	505.82kg		127.26kg (3 months)	219.33kg (5 months)	299.92kg (8 months)	<=505kg	A	A	A	Monthly	
56	HCS	b % of household waste going to landfill	✓	✓	72.65%		73.68% (3 months)	70.85% (5 months)	69.62% (8 months)	<=68.5%	A	G	G	Monthly	
56	HCS	c % of municipal waste (excluding household waste) recycled	✓	✓	0%		0% (3 months)	0% (5 months)	0% (8 months)	0%	G	G	G	Monthly	Although current performance is behind target, projections suggest year-end performance may achieve target
56	HCS	d % of municipal waste (excluding household waste) landfilled	✓	✓	100%		100% (3 months)	100% (5 months)	100% (8 months)	100%	G	G	G	Monthly	
56	HCS	e % of household waste recycled	✓	✓	18.71%		18.02% (3 months)	19.42% (5 months)	20.54% (8 months)	=>23.97%	A	A	A	Monthly	
55	HCS	% of Sites of Special Scientific Interest (SSSIs) in favourable condition	✓	✓	22%						A	n/a	n/a	Annually @ end of March	As a tracker indicator no judgement should have been made in the last report
57	HCS	No. of key species	✓	✓	No baseline						n/a	n/a	n/a	Annually @ end of March	Key species are still to be defined
58	HCS	Environmental/Climate change measure (Carbon per head)	✓	✓	No baseline						n/a	n/a	n/a	Annually @ end of March	
67	HC	% of Council-owned or managed land without a nature conservation designation, managed for biodiversity			13.42%					=>15%	A	A	A	Annually @ end of March	Data will be available at year-end
102	HC	Council carbon dioxide equivalent emissions			To be set					10% reduction by 2010	A	A	A	Annually @ end of March	
<b>Understand the needs and preferences of service users and Council-Tax payers</b>															
68	HC	% of those who have contacted Herfordshire Council with a complaint who are satisfied with the way in which it was handled overall			36%				27%	=>50% (in 2009 survey)	R	A	A	Annually @ end of November	Statistically, this does not represent a significant change
69	HC	% of young people that feel the Council does enough to give them opportunity to influence important decisions about local services			No baseline					Baseline to be established through Youth Survey	n/a	n/a	n/a	Annually at end of January	
<b>Recruit, retain and motivate high quality staff</b>															

APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Local Public Service Agreement (LPSA2G)	Local Area Agreement (LAA)	Herefordshire Community Strategy (HCS)	Baseline	May Report	July Report	September Report	November Report	Target	April-July	April-September	April-November	Frequency of Reporting	Commentary (where relevant)
71	HC	Average number of working days lost due to sickness absence per member of council staff			8.41	7.88	8.17	7.63	7.99	<=8	A	G	G	Monthly	
77	HC	Staff turnover			9%	6.66%	7.02% (June)	6.81% (August)	8%	<=9%	G	G	G	Monthly	
103	HC	SRD completion rates			94%	86.16%	97%			100%	R	R	R	Annually @ end of July	Although performance has improved to 97%, target has not been achieved.
73	HC	Investors in people accreditation			Not accredited		Action Plan			Accreditation by October 2007	A	A	R	Data available @ end of November	
<b>Embed corporate planning, performance management and project management systems</b>															
76	HC	Status of Best Value Performance Plan			Unqualified		Action Plans			Unqualified	A	A	A	Annually at end of January	Awaiting audit of plan and indicators by the Audit Commission. Feedback will not be available until year-end.
81	HC	Number of BVPIs qualified			0					0	A	A	A	Annually at end of January	
82	HC	Outcome of key process audit			Compliant					Compliant	A	A	A	Annually @ end of March	
<b>Promote diversity and community harmony and strive for equal opportunities</b>															
80	HC	Equality Standard			2	2	2	2	2	=>3	A	A	A	Monthly	
100	HC	a % of employees from black and ethnic minorities			0.64%	0.66%	0.66%	0.66%	0.61% (6 months)	=>0.8%	G	A	R	Monthly	A judgement of G was incorrectly applied in the July report. Current performance suggests that achievement of target is in doubt.
100	HC	b % of employees from black and ethnic minorities who are amongst the top 5% of wage earners			2.14%				2.73% (6 months)	=>2.85%	A	A	A	Monthly	
100	HC	c % of employees declaring a disability			0.69%	0.77%	0.77%	0.88% (August)	0.88% (6 months)	=>0.75%	G	G	G	Monthly	
<b>Ensuring that essential assets, including schools, other buildings, roads and ICT are in the right condition for the long-term cost-effective delivery of services, and ensure business continuity in the face of emergencies</b>															
101	HC	Use of Resources score			3				2	3	A	A	R	Annually	Annual assessment results due for end-of-January report
<b>PARTNER LED</b>															
<b>Herefordshire Infrastructure Consortium</b>															
51	HCS	a No. of calls to the Herefordshire Women's Aid Helpline		✓	860 (2005-06)	104 (cumulative)	149 (June)	315 (cumulative)		=>654	A	A		Monthly	
<b>LEARNING &amp; SKILLS COUNCIL</b>															
4	HCS	a % of working age population qualified to at least Level 4 (% of working age population with higher level qualifications)		✓	26% (2005)					Tracker indicator, to be reported at year-end	n/a	n/a		Annually @ end of March	
4	HCS	b No. of residents (19+) achieving Level 2 qualification in manufacturing & engineering		✓	57 (2005-06)						A	A		Annually @ end of March	

APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	Frequency of Reporting	Commentary (where relevant)
4	HCS c No. of residents (19+) achieving Level 2 qualification (excl. manufacturing & engineering)	✓	✓	✓	2,247 (2005-06)		Action Plans			=>1,872	Annually @ end of March	
4	HCS d No. of residents (19+) achieving Level 3 qualification in manufacturing & engineering	✓	✓	✓	44 (2005-06)					=>44	Annually @ end of March	
4	HCS e No. of residents (19+) achieving Level 3 qualification (excl. manufacturing & engineering)	✓	✓	✓	855 (2005-06)		Action Plans			=>878	Annually @ end of March	
5	HCS Measure of basic skills (Train to Gain)	✓			No baseline						Annually @ end of March	
<b>PRIMARY CARE TRUST</b>												
10	HCS No. of deaths per annum from chronic diseases (per 100,000)	✓	✓	✓	169.6 (2003-05)	46 (cumulative)	183 (cumulative)	242		<=>174.7 (2005-07)	Monthly	
15	HCS No. of emergency unscheduled hospital bed days occupied by a person 75 and over	✓	✓	✓	38,490 (2005-06)	5796 (cumulative)	10,303 (cumulative)	15,081		<=>31,222	Monthly	A change in data reporting has adversely affected this target. Discussions are currently underway with Gov Office.
20	HCS % of babies born who are breastfed at 6 weeks	✓	✓	✓	48% (2005-06)		32.02%	33.06%		=>43%	Monthly	
21	HCS a % of babies born to teenage mothers who are breastfeeding at 6 weeks	✓	✓	✓	13% (2005-06)		13.04%	12.73%		=>30%	Monthly	
21	HCS b % of babies born to mothers in S.Wye area who are breastfeeding at 6 weeks	✓	✓	✓	41% (2005-06)		29.19%	29.50%		=>40%	Monthly	
23	HCS Measure of sexually transmitted infections for young people	✓			No baseline	288 (cumulative)	487 (cumulative)	809		Reduction of 1% per annum	Monthly	
46	HCS No. of people in drug treatment	✓	✓	✓	632 (2005-06)		504 (June)	551		=>720	Monthly	
47	HCS Measure of Drugs Intervention Programme	✓	✓	✓	No baseline		(1) 95% (2) 100% (3) 92% (June)				Monthly	
53	HCS Mortality rate from accidents (per 100,000)	✓	✓	✓	21.26 (2003-05)					To be set	Annually @ end of March	
8	HCS Mortality rate from cancer for people aged under 75 (per 100,000)	✓	✓	✓	104.2 (2003-05)					<=>93	Annually @ end of March	
9	HCS Mortality rate from circulatory diseases for people aged under 75 (per 100,000)	✓	✓	✓	81.4 (2003-05)					<=>77	Annually @ end of March	
11	HCS Gap in all-cause mortality between deprived areas and Herefordshire as a whole	✓	✓	✓	23.7% (2003-05)					<=>26% (3 year average)	Annually @ end of March	
12	HCS a The number of adults helped to stop smoking	✓	✓	✓	No baseline			530		=>1,200	Annually @ end of March	PMG have agreed to a change of this indicator from % of adults who smoke'
12	HCS b % of adults who consume more than the recommended intake of alcohol per week (adult healthy lifestyles)	✓	✓	✓	17%					see commentary	n/a	Data for this indicator comes from the Healthy Lifestyle Survey. No date has been agreed for future surveys so future targets have not been set.
12	HCS c % of adults eating less than 5 portions of fruit and vegetables on a typical day (adult healthy lifestyles)	✓	✓	✓	34%					see commentary	n/a	

APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	Target		Frequency of Reporting		Commentary (where relevant)
						4% improvement by 2009	4% improvement by 2009	Annually @ end of January	Annually @ end of January	
59	a % of respondents finding it easy to access: Doctor	✓	✓		80%	4% improvement by 2009	4% improvement by 2009	April-July	A	
					57%			April-September	A	
59	b % of respondents finding it easy to access: Local hospital	✓	✓		57%	4% improvement by 2009	4% improvement by 2009	April-September	A	
								April-November	A	



APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Herfordshire Community Strategy (HCS)	Local Area Agreement (LAA)	Local Public Service Agreement - second generation (LPSA2G)	Baseline	May Report	July Report	September Report	November Report	Target	April-July	April-September	April-November	Frequency of Reporting	Commentary (where relevant)
<b>WESTMERCIA CONSTABULARY</b>															
25	HCS No. of young people (under 25) who are victims of crime in Herefordshire	✓			6,338 (2005-06)	1,101 (cumulative)	1,896 (June) (cumulative)	3,446		<=6,173	R	R		Monthly	July 07: A breakdown of incidents for all categories under YP as victims of crime including grouped incidents/patterns of crime has been provided to appropriate HCSDP team who are in discussion with Crime Risk Manager.
42	HCS a BCS Comparator crimes	✓			6,002 (2005-06)	1,350 (cumulative)	1,964 (June) (cumulative)	3,390		<=5,872	A	R		Monthly	
42	HCS b No. of criminal damage incidents	✓	✓		2,890 (2005-06)	588 (cumulative)	785 (June) (cumulative)	1,408		<=2,101	R	R		Monthly	Criminal damage figures have started to reduce slightly during June and July 2007. Criminal damage awareness posters to be distributed and targeted at schools, and youth centres etc, work by the ASB Support Worker and Marketing Officer.
42	HCS c No. of all recorded crimes	✓			11,535 (2005-06)	2,152 (cumulative)	3,199 (June) (cumulative)	6,166		<=10,229	R	R		Monthly	As this comprises all crime, the increases in other areas has an impact on this target.
45	HCS No. of violent crimes	✓	✓		2,589 (2005-06)	541 (cumulative)	847 (June) (cumulative)	1,558		<=2,563	R	R		Monthly	Violent crime incorporates wounding, harassment, assault on a constable and common assault. Common assaults are currently being analysed between data analysts to ascertain the volume of incidents reported by schools to the Police. There has also been an increase in wounding. An Acting Detective Inspector has been appointed to review all volume crime processes and management.
48	HCS a Measure of Priority and Prolific Offenders Scheme	✓			No baseline					15% reduction	A	A		Quarterly	Data not yet available
49	HCS a No. of domestic burglaries per 1,000 households	✓			372 (2005-06)	45 (cumulative)	72 (June) (cumulative)	136		<=600	G	G		Monthly	
49	HCS b No. of vehicle crimes per 1,000 population	✓			971 (2005-06)	152 (cumulative)	229 (June) (cumulative)	422		<=1086	G	G		Monthly	
50	HCS No. of Class A drug supply offences brought to justice	✓			33 (2005-06)	2 (cumulative)	3 (June) (cumulative)			=>28	R	R		Monthly	Trends over the past 3 years naturally peak and trough. The figures for Q1 2007/08 was 3, but are expected to increase.
51	HCS b No. of domestic violence incidents reported	✓			462 (2005-06)	176 (cumulative)	281 (June) (cumulative)	576		=>425	G	G		Monthly	
51	HCS c No. of arrests for domestic violence offences	✓			326 (2005-06)	88 (cumulative)	137 (June) (cumulative)	249		To be set	A	A		Monthly	
51	HCS d % of sanction detections for domestic violence	✓			67% (2005-06)	49%	56% (June)	42%		=>55%	G	G		Monthly	

APPENDIX A - AOP INDICATORS  
PERFORMANCE AGAINST TARGET

Reference Number	Indicator	Baseline	Action Plan				Target	Frequency of Reporting	Commentary (where relevant)
			May Report	July Report	September Report	November Report			
36	HCS % of young offenders re-offending (recidivism rates of young offenders in Herefordshire)	50%	✓	✓	✓	✓	<=45%	Annually @ end of March	
43	HCS a % of people thinking speeding traffic is a problem in their area	70%	✓	✓	✓	✓	<=76% (2008)	Annually @ end of November	
43	HCS b % of people thinking vandalism, graffiti and other deliberate damage is a problem in their area	52%	✓	✓	✓	✓	<=55% (2008)	Annually @ end of November	
43	HCS c % of people thinking people using drugs is a problem in their area	60%	✓	✓	✓	✓	<=56.7%	Annually @ end of November	
43	HCS d % of people thinking people dealing drugs is a problem in their area	53%	✓	✓	✓	✓	<=0.2%	Annually @ end of November	
43	HCS e % of people thinking people being drunk or rowdy in public places is a problem in their area	51%	✓	✓	✓	✓	<=48% (2008)	Annually @ end of November	
43	HCS f Percentage of people with a high level of worry about anti-social behaviour	No baseline	✓				To be set	Annually @ end of November	
44	HCS a % of residents worried about house burglary	30%	✓				4% over 3 years	Annually @ end of November	
44	HCS b % of residents worried about vandalism or damage to property	28%	✓				4% over 3 years	Annually @ end of November	
44	HCS c % of residents worried about drunk people causing a problem	21%	✓				4% over 3 years	Annually @ end of November	
44	HCS d % of residents worried about their car being broken into	18%	✓				4% over 3 years	Annually @ end of November	
44	HCS e % of residents worried about having their car stolen	12%	✓				4% over 3 years	Annually @ end of November	
44	HCS f % of residents worried about being harassed whilst in a public place	12%	✓				4% over 3 years	Annually @ end of November	
44	HCS g % of residents worried about hate crime	3%	✓				4% over 3 years	Annually @ end of November	
44	HCS h % of residents worried about being assaulted in a public place	9%	✓				4% over 3 years	Annually @ end of November	
44	HCS i % of residents worried about being mugged or robbed	11%	✓				4% over 3 years	Annually @ end of November	
44	HCS j % of residents worried about crime (other than a-i above)	3%	✓				4% over 3 years	Annually @ end of November	
48	HCS b Number of adults re-offending	No baseline					To be set	Annually @ end of November	
60	HCS d Net perceived improvement rating over the last 3 years for QoL factors (adults): Level of crime	-46%	✓				4% improvement by 2009	Annually @ end of November	
98	HCS the percentage of people who feel informed about what is being done to tackle anti-social behaviour in their local area.	No baseline	✓				To be set	Annually @ end of November	

KEY													
△	Performance is better than last year												
◁▷	Performance is either the same or likely to be the same as last year												
▽	Performance is worse than last year												
n/a	There is either no guidance to suggest whether high / low performance is good or bad; or, a direction of travel judgement does not apply to this indicator												
BVPI	Best Value Performance Indicator												
CPA	Comprehensive Performance Assessment - these indicators are used in CPA service assessments for Culture, Environment and Housing												
PAF	Performance Assessment Framework - used by CSCI in Adult Social Care and Children's Services												
BLOB	Used by Commission for Social Care Inspection (CSCI) to indicate performance thresholds, with 5 being the best and 1 the worst												
BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
126			Domestic burglaries per 1,000 households	Low	4.2	0.9 (June)	1.8	Monthly	4.2	△			

Performance indicator national reference

Performance indicator

Indication as to whether good performance is High or Low outcome

Last year's performance

Performance to date

How often and when will data be reported

Current year's target

Commentary on performance

Shaded boxes signify data was not due to be reported in this period; unshaded boxes signify data was expected but not available

A number of the national indicators also feature in Appendix A, primarily through inclusion in either the LPSA or LAA. Where this is the case, the target may differ between appendices. This is because the LPSA and LAA targets were set using historical outcome data.

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BPVI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
<b>ADULT AND COMMUNITY SERVICES</b>													
<b>Economic &amp; Community Development</b>													
126			Domestic burglaries per 1,000 households	Low	4.2		0.9 (June)	1.8 (cumulative)		Quarterly	4.2	△	
127a			Violent crime per 1,000 population	Low	15.1		4.7 (June)	8.7 (cumulative)		Quarterly	14.7	▽	
127b			Robberies per 1,000 population	Low	0.4		0.1 (June)	0.1 (cumulative)		Quarterly	0.4	△	
128			The number of vehicle crimes per 1,000 population.	Low	5.1		1.3 (June)	2.4 (cumulative)		Quarterly	5.1	△	
225			Actions against domestic violence - The percentage of questions from a checklist to which a local authority can answer 'yes'	High	81.80%		81.8% (June)	72.70%		Quarterly	81.80%	▽	
178	C1		The percentage of the total length of rights of way in the local authority area that are easy to use by the general public	High	48%	31%				Bi-annually @ end of May & November	50%	▽	The result for the year is collected annually through 2 surveys - one in May and the other in November. This is a random survey of 5% of the network. We have a large network of public rights of ways and the random survey picks up a range of paths, including ones that are least used. If we survey our popular and promoted routes we will get a 100% return for access. The May result is 31%, and the November survey is unlikely to be able to pull the result up to our target of 50%. The service has been identified by Cultural Services inspection conducted by the Audit Commission as a service that needs additional investment. Some remodelling will improve the operation of the service, but the contract cannot be re-negotiated until it comes to an end.
226a			The total amount spent by the Local Authority on advice and guidance services provided by external organisations	n/a	£195,232					Annually @ end of March	£195,232	n/a	
226b			The percentage of monies spent on advice and guidance services provision which was given to organisations holding the CLS Quality Mark at 'General Help' level and above	High	12%					Annually @ end of March	12%	No data	
226c			The total amount spent on advice and guidance in the areas of housing, welfare benefits and consumer matters which is provided directly by the Local Authority to the public	n/a	£756,997					Annually @ end of March	£756,997	n/a	
170a	C2c		The number of visits to/uses of Local Authority funded or part-funded museums and galleries per 1,000 population	High	876					Annually @ end of March	880	No data	
170b			The number of those visits to Local Authority funded, or part-funded museums and galleries that were in person, per 1,000 population	High	689					Annually @ end of March	720	No data	
170c			The number of pupils visiting museums and galleries in organised school groups	High	6491					Annually @ end of March	6,500	No data	
220			Compliance against the Public Library Service Standards (PLSS)	High	1					Annually @ end of March	3	No data	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
	C2a		Proportion of households living within a specified distance of a static library (PLSS 1)	High	44% (1 mile) 62% (2 miles)					Annually @ end of March	44% (1 mile) 62% (2 miles)	n/a	
	C2b		Aggregate scheduled opening hours per 1,000 population for all libraries (PLSS 2)	High	115					Annually @ end of March	115	n/a	
	C3a		Percentage of static libraries providing access to electronic information resources connected to the internet (PLSS 3)	High	100%					Annually @ end of March	100%	n/a	
	C3b		Total number of electronic workstations available to users per 10,000 population (PLSS 4)	High	7					Annually @ end of March	=>6	n/a	
	C19		Percentage of population that are within 20 minutes travel time (urban areas – by walk; rural areas – by car) of a range of three different sports facility types, of which one has achieved a specified quality assured standard	High	68.75%					Annually @ end of March	50%	n/a	
	C4		Active borrowers as a percentage of population	High	17.80%					Annually @ end of March	20.4%	n/a	
	C16		Percentage of 5-16 year olds in school sports partnerships engaged in two hours a week minimum on high quality PE and school sport within and beyond the curriculum	High	88%					Annually @ end of March	85%	n/a	
	C17		Percentage of adults participating in at least 30 minutes moderate intensity sport and active recreation on three or more days a week	High	24.37%					Annually @ end of March	24%	n/a	
	C18		Percentage of population volunteering in sport and active recreation for at least one hour per week	High	6.12%					Annually @ end of March	5%	n/a	
	C11a		Requests supply time (PLSS 5) - 7 days 15 days 30 days	High	51% 70% 86%					Annually @ end of March	50% 70% 85%	n/a	
	C11b		Annual items added through purchase per 1,000 population	High	148					Annually @ end of March	183.6	n/a	
	C11c		Time taken to replenish the lending stock on open access or available on loan	Low	5.9					Annually @ end of March	<=6.7	n/a	
	C14a		Public library service standards on satisfaction – assessment of users 16 and over of their library service	High	90%					Annually @ end of March	87.42%	n/a	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BPVI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
	C15		Museums accreditation – where applicable (this applies to museums that fall under the definition for BVPI 170)	High	2					Annually @ end of March	2	n/a	
	C13		Cost per visit (libraries)	Low	£2.67					Annually @ end of March	<=£3.46	n/a	
<b>Adult Social Care</b>													
53		AO / C28	Households receiving intensive home care per 1,000 population aged 65 or over.	High	6.7	>6.7 (Forecast)	>6.7 (Forecast)	7.5 (Forecast)		Monthly	8.1	△	
54		AO / C32	Older people helped to live at home per 1,000 population aged 65 or over	High	81.1	83 (Forecast)	83 (Forecast)	83 (Forecast)		Monthly	83	△	
56		AO / D54	Percentage of items of equipment delivered and adaptations made within 7 working days	High	96%	>96% (Forecast)	>96% (Forecast)	>96 (Forecast)		Monthly	96%	△	
195		AO / D55	Acceptable waiting time for assessment - For new older clients (that is over 65 years of age), the average of: the percentage where the time from first contact to the percentage where the time from first contact to the time from first contact to completion of assessment is less than or equal to 48 hours (that is, 2 calendar days), and the percentage where the time from first contact to completion of assessment is less than or equal to four weeks (that is, 28 calendar days).	High	83.60%	90% (Forecast)	90% (Forecast)	90% (Forecast)		Monthly	90%	△	
196		AO / D56	For new older clients, the percentage for whom the time from completion of assessment to provision of all services in the care package is less than or equal to four weeks.	High	76%	85% (Forecast)	85% (Forecast)	85% (Forecast)		Monthly	85%	△	
201		AO / C51	Adults and older people receiving direct payments at 31st March per 100,000 population aged 18 or over (age standardised)	High	82	100 (Forecast)	100 (Forecast)	100 (Forecast)		Monthly	100	△	
		AO / B11	The number of households receiving intensive home help/care as a percentage of all adults and older people in residential and nursing care and households receiving intensive home help/care.	High	18	>18 (Forecast)	>18 (Forecast)	<17.8 (Forecast)		Monthly	22	▽	
		AO / B12	Average gross weekly expenditure per person on supporting adults and older people in residential and nursing care and providing intensive home care.	Low	£531.73	<£531.73 (Forecast)	<£531.73 (Forecast)	<£531.73 (Forecast)		Monthly	<£500	△	
		AO / B17	Unit cost of home care for adults and older people - average gross hourly cost for home help/care.	Low	£17.80	<£17.80 (Forecast)	<£17.80 (Forecast)	<£17.80 (Forecast)		Monthly	£15	△	
		AO / D37	The percentage of single adults and older people going into permanent residential and nursing care who were allocated single rooms.	High	90%	90% (Forecast)	90% (Forecast)	90% (Forecast)		Monthly	90%	△	
		AO / D39	Percentage of people receiving a statement of their needs and how they will be met	High	95%	100% (Forecast)	100% (Forecast)	100% (Forecast)		Monthly	100%	△	
		AO / D40	Adult and older clients receiving a review as a percentage of those receiving a service	High	76%	>78% (Forecast)	>78% (Forecast)	>78% (Forecast)		Monthly	78%	△	
		AO / E82	Assessments of adults and older people leading to provision of service	High	82%	77% (Forecast)	77% (Forecast)	77% (Forecast)		Monthly	77%	▽	
		AO / C72	Older people aged 65 or over admitted on a permanent basis in the year to residential or nursing care	Low	73	<70 (Forecast)	<70 (Forecast)	<70 (Forecast)		Monthly	70	△	
		AO / C73	Adults aged 18-64 admitted on a permanent basis in the year to residential or nursing care	Low	1.9	>3 (Forecast)	>3 (Forecast)	>3 (Forecast)		Monthly	1.5	▽	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		AO / C29	Adults with physical disabilities helped to live at home per 1,000 population aged 18-64.	High	6		6 (Forecast)	6 (Forecast)	6 (Forecast)	Monthly	6	◀▶	
		AO / C30	Adults with learning disabilities helped to live at home per 1,000 population aged 18-64.	High	2.9		3 (Forecast)	3 (Forecast)	3 (Forecast)	Monthly	3	△	
		AO / C31	Adults with mental health problems helped to live at home per 1,000 population aged 18-64.	High	4.1		4.4 (Forecast)	4.4 (Forecast)	4.4 (Forecast)	Monthly	4.4	△	
		AO / C62	The number of carers receiving a 'carer's break' or a specific carers' service as a percentage of clients receiving community based services	High	10.20%		>10.5% (Forecast)	>10.5% (Forecast)	<10.2 (Forecast)	Monthly	12%	▽	
<b>Strategic Housing</b>													
183b	H15		The average length of stay in hostel accommodation of households that are unintentionally homeless and in priority need	Low	26 weeks		23 weeks (June)	36 weeks	30 weeks	Monthly	6	▽	The year-end forecast is 47 weeks. By the team taking action to secure settled accommodation for homeless people the outturn increases, because households are only counted towards this indicator at the point at which they are rehoused. It is not clear if the position will improve in 08/09 as economic / housing market conditions may impact on housing stress.
202			The number of people sleeping rough on a single night within the area of the authority	Low	0		Survey not scheduled to be undertaken this year				<3	△	The year-end forecast is 0. This survey is not scheduled to be undertaken this year so last year's outturn figure should be maintained
213			The number of households who considered themselves as homeless, who approached the local authority's housing advice service(s), and for whom housing advice casework intervention resolved their situation, per 1,000 households	High	3.12		0.87 (June)	1.45	1.45	Monthly	4	△	The year-end forecast is 4
64	H23		Number of non-local authority-owned vacant dwellings returned to occupation or demolished during the financial year as a direct result of action by the local authority	High	52		13 (June)	83	83	Monthly	55	△	The year-end forecast is 110
		H18	Percentage of total private sector homes vacant for more than 6 months	Low	0%					Annually @ end of March	0%	n/a	
<b>CHILDREN'S SERVICES</b>													
<b>Be Healthy</b>													
		1041YJ	The referral of juveniles manifesting mental health difficulties to Child and Adolescent Mental Health Services	High	91.2%		100% (June)			Quarterly	100%	△	Quarter 2 data not yet available
		1042YJ	Substance Misuse: the proportion of young people with identified substance misuse needs who receive specialist assessment within 5 working days and, following the assessment, access the early intervention and treatment services they require within 10 working days (Substance Misuse Assessment)	High	100%		100% (June)			Quarterly	100%	△	Quarter 2 outturn not yet available although it looks likely that 100% will be achieved
		1040NT	Proportion of those in substance misuse treatment who are aged less than 18	n/a	24%		12% (June)			Quarterly	Not set	n/a	Quarter 2 data not yet available

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
197		1047SC	Percentage change in number of conceptions amongst 15-17 year olds	Low	-15.7%					Annually @ end-of-March	-19%	No data	The target is unlikely to be met because we began at a very low baseline, and still have one of the lowest rates in the West Midlands. Progress is monitored in identified hotspots, with the usual caution around small numbers. However, South Wyke remains of concern and a number of initiatives are in place there, including the Infozone and clinic at the High school. Overall, a county-wide action plan is nearing completion to be ratified by the Sexual Well-being and Health Network (SWAHN) in November.
		1037SC / PAF CF / C19	The average of the percentages of children looked after who had been looked after continuously for at least 12 months, and who had their teeth checked by a dentist during the previous 12 months and had an annual health assessment during the previous 12 months	5 BLOB = 80<=100 4 BLOB = 70<80 3 BLOB = 60<70 2 BLOB = 50<60 1 BLOB = 0<50	90%					Annually @ end of October	93%	No data	This is a priority for Herefordshire children. The appointment of the LAC Nurse is expected to secure an up-turn in performance.
		1043SC / PAF CF / A70	Councils' self assessment of progress on four elements of the implementation of the CAMHS framework	5 BLOB = 15-16 4 BLOB = 12-14 3 BLOB = 9-11 2 BLOB = 6-8 1 BLOB = 4-5	15					Annually @ end of March	15	No data	Progress towards a comprehensive CAMHS is based on a self-assessment against 4 elements, each element is scored on a scale 1 to 4 (where 4 is best). This self-assessment is undertaken at the end of the financial year and data will be available in March 2008. A comprehensive CAMHS strategy is in place and is subject to review currently. Additional outreach workers are being recruited.
<b>Staying Safe</b>													
49		2043SC / PAF CF / A1	The percentage of Looked After Children at 31 March with three or more placements during the last financial year	5 BLOB = 0<16.01 2 BLOB = 16.01<20 1 BLOB = 20<=100	8.90%		9% (June)	7%		Quarterly	8%	△	
		2028SC / PAF CF / A3	The percentage of children who became the subject of a child protection plan, or were registered, during the year, and were the subject of a child protection plan, or were registered, at 31 March, who had been previously registered.	5 BLOB = 10<15 4 BLOB = 8<10 or 15<17.21 3 BLOB = 6<8 or 17.21<20 2 BLOB = 3<6 or 20<24 1 BLOB = 0<3 or 24<=100	14.50%		15.8% (June)	18.80%		Quarterly	15%	▽	Action is in place for monthly monitoring through multi-agency core groups so the recommendations regarding de-registration are reached through robust assessments and at a multi agency level
162		2034SC / PAF CF / C20	The percentage of child protection cases which were reviewed regularly as a percentage of those cases that should have been reviewed during the year	5 BLOB = 100 4 BLOB = 97.5<100 3 BLOB = 95<97.5 2 BLOB = 92.5<95 1 BLOB = 0<92.5	100%		100% (June)	100%		Quarterly	100%	△	
		2036SC / PAF CF / C21	The % of children de-registered from the Child Protection Register during the year who had been on the Register continuously for two years or more	4 BLOB = 0<10 3 BLOB = 10<15 2 BLOB = 15<20 1 BLOB = 20<=100	1.2%		1.1% (June)	0%		Quarterly	5%	△	
163		2059SC / PAF CF / C23	The number of children who ceased to be looked after during the year as a result of the granting of an adoption or special guardianship order, as a percentage of the number of children looked after at 31st March (excluding unaccompanied asylum seekers) who had been looked after for 6 months or more on that day	5 BLOB = 8<25 4 BLOB = 7<8 3 BLOB = 6<7 2 BLOB = 3<6 or 25<=100 1 BLOB = 0<3	4.1%		4.6% (June)	6.00%		Quarterly	8%	△	
		2022SC / PAF CF / C64	The % of core assessments that were completed within 35 working days of their commencement	5 BLOB = 80<=100 4 BLOB = 75<80 3 BLOB = 70<75 2 BLOB = 60<70 1 BLOB = 0<60	61%		73% (June)	78%	79%	Monthly	66%	△	Performance is continuing to improve and at second quarter is well ahead of target. This reflects the focus at team manager level on ensuring core assessment timescales are adhered to and review assessments are undertaken appropriately.



APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		2064SC / PAF CF / C68	The percentage of children looked after cases which should have been reviewed during the year which were reviewed during the year	5 BLOB = 95<=100 4 BLOB = 90<95 3 BLOB = 85<90 2 BLOB = 80<85 1 BLOB = 0<80	97%	98% (June)	99%			Quarterly	100%	△	We continue to have a "5 blob" rating which is the highest category possible. The direction of travel is to increase the current statistical performance through current monitoring by the Independent Reviewing Officers and the auditing system that is in place within the Planning Audit & Review Team.
		2067SC / PAF CF / D74 or D78	The percentage of children aged under 16 at March 31 who had been looked after continuously for at least 2.5 years, who were living in the same placement for at least 2 years, or are placed for adoption	5 BLOB = 70<80 4 BLOB = 60<70 3 BLOB = 50<60 2 BLOB = 40<50 or 80<=100 1 BLOB = 0<40	62.2%	65.8% (June)	67.60%			Quarterly	62%	△	
		2068 / PAF CF / B79	Of children aged at least 10 and under 16 looked after at 31 March (excluding those placed with parents) the percentage who were in foster placements or placed for adoption	5 BLOB = 85<90 4 BLOB = 80<85 or 90<95 3 BLOB = 70<80 2 BLOB = 55<70 or 95<=100 1 BLOB = 0<55	77.90%	78.4% (June)	80%			Quarterly	80%	△	
		2054SC / DIS 1111	Percentage of looked after children fostered by relatives or friends	High	19.5%	18.6% (June)	16.70%			Quarterly	20%	▽	This target is under pressure currently because of the shortage of experienced social work staff in post. The recruitment and retention strategy continues to address this, and the individual looked after young people receive a service from the teams, under interim arrangements managed by the team managers and kept under review through the Performance Improvement Group.
		2060SC / DIS 1114	Percentage of looked after children with a named social worker who is qualified as a social worker	High	100%	99% (June)	99%			Quarterly	100%	▽	
		2058SC / DIS 1115	The percentage of looked after children adopted during the year who were placed for adoption within 12 months of the agency deciding that the child should be placed for adoption	High	100%	100% (June)	100%			Quarterly	100%	△	
		2024SC / DIS 1219	Percentage of children and young people who are the subject of a child protection plan, or on the child protection register, who are not allocated to a social worker.	Low	0%	0% (June)	0%			Quarterly	0%	△	Performance is being maintained despite increasing pressure because of the reduction in availability of suitably qualified and experienced social workers. The recruitment and retention strategy continues to address this.
		2020SC / DIS 1704	Percentage of initial assessments within 7 working days of referral	High	58.7%	56.9% (June)	54.70%	52.80%		Monthly	68%	▽	Performance continues to decline because of the increased workload and insufficient numbers of suitably qualified and experienced social workers able to undertake the work. Practice has been reviewed and revised to ensure that initial assessments are undertaken more quickly and is managed through monthly meetings with PCT and Education staff. Deloitte have been commissioned to audit the processes for initial assessments and to make recommendations for improving performance. This work begins 17/10/07 and will be completed by 26/10/07.
		2023SC / KIGS CH01	Children and young people who are the subject of a child protection plan, or on the child protection register, per 10,000 population aged under 18.	n/a	14.8	13.7 (June)	15.1			Quarterly	17%	n/a	Performance is low in relation to the target and national comparative group. The indicator is addressed at a Performance Improvement Group to ensure the development of thresholds are identified and kept under review
		2019SC / KIGS CH02	Initial Child protection conferences per 10,000 population under 18	n/a	23.9	24.7 (June)	21			Quarterly	29	n/a	Performance is low in relation to the target and national comparative group. The indicator is addressed at a Performance Improvement Group to ensure the development of thresholds are identified and kept under review

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		2027SC / KIGS CH03	Children who became the subject of a child protection plan, or were registered, per 10,000 population aged under 18.	n/a	20.4	20.4 (June)	17.2			Quarterly	21	n/a	This target is addressed in a performance clinic to ensure that we remain vigilant about the thresholds for Section 47 investigations
		2035SC / KIGS CH10	Children whose child protection plans were discontinued, or were de-registered, per 10,000 population aged under 18.	Low	22.3	23.7 (June)	21.8			Quarterly	20	△	The plans for de-registration are agreed at a child protection case conference following the completion of a child protection plan and multi-agency decision making.
		2042SC / KIGS CH39	Children looked after per 10,000 population aged under 18	n/a	45.4	44.9 (June)	45.4			Quarterly	45	n/a	
		2052SC/KIGS CH44	Percentage of children looked after in residential accommodation	Low	12.60%	13.5% (June)	12.90%			Quarterly	12%	▽	The growth of children in the residential sector represents a challenge to the Authority. As a Authority we must consider using family-base care as a serious option for these children.
		2015SC / KIGS CH141	Numbers of referrals of children per 10,000 population	n/a	266	248 (June)	242	240		Monthly	280	n/a	Performance on this indicator has levelled off at slightly below target. The relationship with the percentage of referrals designated as "no further action" and percentage repeat referrals requires further examination. Early indicators suggested that threshold criteria were better understood by other agencies but this is not borne out by current figures. The audit of initial assessments will assist in assessing understanding and decision-making regarding threshold criteria.
		2016SC / KIGS CH142	Percentage of referrals that are repeat referrals within 12 months	Low	20.3%	19.5% (June)	20.90%			Quarterly	18%	▽	Performance on this indicator is closely related to CH141 (number of referrals) and CH143 (referrals leading to initial assessments). Further work will be decided following audit of initial assessments.
		2017SC / KIGS CH143	Percentage of referrals of children in need that led to initial assessments	n/a	66%	64.5% (June)	59.60%			Quarterly	65%	n/a	There has been a dip in performance, the reasons for which are complex, and dependent on the inter-relationship of a number of factors, including the level of understanding of threshold criteria, impact of the CAF pilot and the ongoing work of the Child Concern Model. Further work to be decided after audit of initial assessments.
		2021SC / KIGS CH145	Number of core assessments of children in need per 10,000 population aged under 18	n/a	51.6	56.7 (June)	59.4			Quarterly	50	n/a	
		2039SC	The ratio of the proportion of children subject to a child protection plan, or on the child protection register, that were from minority ethnic groups to the proportion of children in the local population that were from minority ethnic groups.	n/a	1.25	2.7 (June)	1.23			Quarterly	2	n/a	
		2029SC / KIGS CH04	First time registrations on the child protection register as a percentage of total registrations during the year ended 31st march	High	85.50%	84.2% (June)	81.30%			Quarterly	85%	▽	Action is in place for monthly monitoring through multi agency core groups so that recommendations regarding de-registrations are reached through robust assessments and a multi agency level in order to prevent re-registrations. This is monitored through the Herefordshire Safeguarding Children Board
		2037SC / KIGS CH12	Percentage of children who were subject to s47 enquiries which led to initial child protection conferences which were held within 15 working days	High	18%	27.2% (June)	35.90%			Quarterly	>18%	△	

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APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
38			Percentage of 15 year old pupils in schools maintained by the local education authority achieving five or more GCSEs at grades A* - C or equivalent	High	61.80%			63%		Annually (unvalidated) in September; final results in January)	66%	△	Unvalidated results for 2007 exams now available. There has been an improvement by 1% in line with national figures. Particular success story was Wyebridge which saw a 19% improvement in 5 A*-C from 33% to 52%.
39			Percentage of 15 year old pupils in schools maintained by the local education authority achieving 5 or more GCSEs or equivalent at grades A*-G including English and Maths	High	92.80%			94.30%		Annually (unvalidated) in September; final results in January)	96%	△	
40			Percentage of pupils in schools maintained by the local education authority achieving Level 4 or above in the Key Stage 2 Mathematics test	High	75.50%			77%		Annually (unvalidated) in September; final results in January)	82%	△	Maths results have improved by 2% at Level 4+ overall and are now in line with the national performance at 77%, and broadly in line with slightly below statistical neighbours. Boys outperform girls at both levels in this subject. Girls' performance at level 4 and 5 will be a focus for 2007/8. Boys' performance below Level 3 has improved and is now in the upper quartile for year on year change, but the performance of all pupils taken together puts us in the lower quartile at this Level. (Please note that these are unvalidated results)
41			Percentage of pupils in schools maintained by the local education authority achieving Level 4 or above in the Key Stage 2 English test	High	80.60%			81%		Annually (unvalidated) in September; final results in January)	83%	△	English has improved at Level 4+ to 81 % and is above the national average (80%). Boys' English results have improved by 4% and are now above the national results; girls remain above the national. We are slightly above Statistical Neighbours this year at 81% compared to 80.7 for SN. Girls continue to outperform boys at both Level 4 and 5. Performance at below Level 3 is in the upper quartile for both boys and girls in reading and writing for year on year change. Reading is up by 2% and above the national figures. At Level 4+ boys are improving at a particularly fast rate and are up 5% on last year. Girls' performance remains above the national. Writing is up 3% overall and is 1% above the national. Boys' writing performance has improved at Level 4+ by 7%. Girls' performance is slightly down on last year and has not improved at the rate of the boys' performance but is still above the national.
43a			Percentage of proposed statements of special educational need issued by the authority in a financial year and prepared within 18 weeks excluding exceptions under the Education (Special Educational Needs) (England) (Consolidation) Regulations 2001 and set out in Annex A of the SEN Code of Practice	High	100.00%		100% (June)	100%	100%	Monthly	100%	△	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
						100% (June)	100%						
43b			Percentage of proposed statements of special educational need issued by the authority in a financial year and prepared within 18 weeks including 'exceptions' set out in the Education (Special Educational Needs) (England) (Consolidation) Regulations 2001 and reproduced in Annex A of the SEN Code of Practice	High	100.00%		100% (June)	100%		Quarterly	100%	△	
181a			The percentage of 14 year old pupils in schools maintained by the Local Education Authority achieving Level 5 or above in the Key Stage 3 test in English	High	76.50%			80.50%		Annually (unvalidated in September; final results in January)	83%	△	Significant improvement in results at Level 5+ (5%), now 7% above national. Big improvement in boys results, closing the gender gap.
181b			The percentage of 14 year old pupils in schools maintained by the Local Education Authority achieving Level 5 or above in the Key Stage 3 test in Mathematics	High	79.80%			79.20%		Annually (unvalidated in September; final results in January)	83%	▽	There has been a 1% drop, mirroring the drop in this area nationally. Action is underway to drive improvement in this area.
181c			The percentage of 14 year old pupils in schools maintained by the Local Education Authority achieving Level 5 or above in the Key Stage 3 test in Science	High	77.50%			78.00%		Annually (unvalidated in September; final results in January)	84%	△	There has been a 1% increase, which is in line with national figures.
181d			The percentage of 14 year old pupils in schools maintained by the Local Education Authority achieving Level 5 or above in the Key Stage 3 test in ICT	High	74.00%			76.50%		Annually (unvalidated in September; final results in January)	84%	△	
194a			The percentage of 11 year old pupils achieving Level 5 in Key Stage 2 test in English	High	31%			35%		Annually (unvalidated in September; final results in January)	33%	△	At Level 5, there is a 4% improvement overall; boys have improved by 1% and are now 2% above the national; girls have improved by 2% and are now 4% above the national. Level 5 performances have improved by 5% for boys and 2% for girls. They are above the national figures, and in the upper quartile for year on year change.
194b			The percentage of 11 year old pupils achieving Level 5 in Key Stage 2 test in Mathematics	High	30.20%			34%		Annually (unvalidated in September; final results in January)	35%	△	Boys' performance at level 5 is 2% above the national. Girls show a 4% improvement. Both are above the national and in the upper quartile for year on year change.

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		3085SC / PAF CF / C69	The percentage of children newly looked after in the year, and still looked after, at 31 March, who were placed at 31 March more than 20 miles from their home address from which first placed	Low	14%	17% (June)	0%			Quarterly	12%	△	All children newly looked after are placed within 20 miles of their home.
		3080YJ	Education, Training and Employment – Proportion of supervised juveniles in full time ETE	High	62.4%	65.2% (June)				Quarterly	90%	△	Quarter 2 data not yet available
		3074SC / PAF CF / C24	Percentage of children looked after continuously for at least 12 months, of compulsory school age, who missed at least 25 days schooling for any reason during the previous school year	5 BLOB = 0-5 4 BLOB = 5<10 3 BLOB = 10<15 2 BLOB = 15<20 1 BLOB = 20+	10.5%					Annually @ end of October	9%	No data	The prognosis for this year's outturn is not good. Again around 12 children are currently in the missed more than 25 days cohort.
		3071SC / DIS 1406	The percentage of children looked after who were pupils in year 11 who were eligible for GCSE (or equivalent) examinations who sat at least one GCSE or equivalent exam	High	84.6%					Annually @ end of October	85%	No data	This year we have an unusually high number of children whose statement of needs mean that they will not be able to sit for GCSE
45			Percentage of half days missed due to total absence in secondary schools maintained by the local education authority	Low	7.90%					Annually @ end of May 2008	6%	No data	Unaudited data for all Councils indicates that Herefordshire remains in the average band for performance compared nationally. Two schools are now designated as PA (Persistent Absenteeism) from the previous 3, and a range of work is being undertaken to address the specific areas where improvement is needed.
46			Percentage of half days missed due to total absence in primary schools maintained by the local education authority	Low	5.67%					Annually @ end of May 2008	4%	No data	
50		3072SC / PAF CF / A2	The percentage of young people leaving care aged 16 or over with at least one GCSE at Grade A* - G or a GNVQ	5 BLOB = 70<=100 4 BLOB = 50<70 3 BLOB = 45<50 2 BLOB = 25<45 1 BLOB = 0<25	76.50%					Annually @ end of March	90%	No data	The data for the indicator will be available in March 2008. This year we do not anticipate doing quite as well as last year. However, we do expect 4 young people to meet the 5 A*-C target. Regular school visits monitor progression and targeted support is deployed where needed.
		3073SC / DIS 1403	The percentage of young people leaving care aged 16 or over with 5 or more GCSEs at grade A*-C or a GNVQ	High	5.90%					Annually @ end of March	10%	No data	
<b>Make a positive contribution</b>													
		4016SC / PAF CF / C63	The number of children and young people who communicated their views specifically for each of their statutory reviews as a percentage of the number of children and young people who had been looked after at 31 March for more than four weeks	5 BLOB = 95<=100 4 BLOB = 90<95 3 BLOB = 80<90 2 BLOB = 70<80 1 BLOB = 0<70	95%	94% (June)	96%			Quarterly	97%	△	
221a			Youth Work – The percentage of young people aged 13-19 gaining a recorded outcome compared to the percentage of young people in the Local Authority area	High	58.2%	35.1% (June)	37.2% (August)			Quarterly	60%	▽	We are below both national and local targets although trend is up. Performance in this area has been delayed due to long delays by an external organisation in completing validation of students' work.
221b			Youth Work – The percentage of young people aged 13-19 gaining an accredited outcome compared to the percentage of young people in the Local Authority area	High	33.4%	20.8% (June)	25.6% (August)			Quarterly	30%	▽	We are below both national and local targets although trend is up. Performance in this area has been delayed due to long delays by an external organisation in completing validation of students' work.

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		4015SC / PAF CF / C18	The percentage of children aged 10 or over who had been looked after continuously for at least 12 months, who were given a final warning/reprimand or convicted during the year, for an offence committed whilst they were looked after, expressed as a ratio of the percentage of all children aged 10 or over given a final warning/reprimand or convicted for an offence in the police force area.	3 BLOB = 1<-3 2 BLOB = 0<1 or 3+	2.5					Annually @ end of October	2.5	No data	
<b>Achieve economic well-being</b>													
		5026SC	What percentage of children with disabilities aged 14+ had a transition plan to support their move from Children's Services to Adult Services?	High	up to 90%	66.67% up to 75% (June)	66.67% up to 75% up to 75%			Quarterly	up to 90%	▽	Since the last round of reporting, 5 young people have moved on into adult services, all of which had transition plans in place. One transition plan is not in place for a 17 year old because, so far, the family has not given consent for other agencies to be contacted. All other 17 year olds have transition planning in place. Young people who are LAC and are under 17 years old have transition plans as part of the review process. We have no additional young people reaching the 14 + age group this quarter. Therefore, the figure has reduced.
161		5022SC / PAF CF / A4	The ratio of the percentage of those young people who were looked after on 1st April in their 17th year (aged 16), who were engaged in education, training or employment at the age of 19 to the percentage of young people in the population who were engaged in education, training or employment at the age of 19	5 BLOB = 0.6+ 3 BLOB = 0.5<0.6 2 BLOB = 0.4<0.5 1 BLOB = 0<0.4	1.25					Annually @ end of March 2008	0.99	No data	Performance is good and work is in train to sustain this. Work opportunities through the Council and local employers are being developed. Links to local colleges and prompt action to address individual cases, where necessary, is in place.
		5037SC	Percentage of care leavers at age 19 who are living in suitable accommodation (as judged by the council)	High	100%					Annually @ end of March 2008	100%	No data	Performance is good and work is continuing to develop the range of accommodation available further.
<b>Service Management</b>													
		6024SC / PAF CF / B8	Average gross weekly expenditure per looked after child in foster care or in a children's home.	Low	£735	£767				Quarterly	£619	▽	The cost of children looked after continues to rise given the increased numbers of children in residential and agency placements. As a result, it is unlikely that the target for 07/08 will be achieved.
		6010SC / PAF CF / E44	Gross expenditure on children in need but not looked after, as a percentage of gross expenditure on all children's services	4 BLOB = 32<43 3 BLOB = 27<32 or 43<48 2 BLOB = 0<27 or 48<=100	29%	29%				Quarterly	35%	◁▷	There has been no increase in the budget for this area and expenditure is currently being limited to the 2006/2007 outturn figure. There has been a low demand from universities for placements in children's services in the County, and the unavailability of an appropriate placement in Safeguarding and Assessment for one student who went into private, independent or voluntary adult setting instead. We will direct the New Year requests into children's practice areas in order to reach the target. We are currently awaiting written approval for a project to establish placements for students in the Children's Centres to increase range and number of practice learning opportunities on offer.
		6044SC / PAF MR / D74	Practice learning: The number of assessed social work practice learning days per whole time equivalent social worker for employees working in children's services	5 BLOB = 17+ 4 BLOB = 11<17 3 BLOB = 5<11 2 BLOB = (>0)<5 1 BLOB = 0	17.2	10				Bi-annually @ end of September & end of March	14	▽	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		6011SC / DIS 3118	Percentage of SSD directly employed staff for children that left during the year.	n/a	13.8%	16.19% (June)	11%			Quarterly	11%	↔	11 directly employee staff members left between 1st October 2006 and 30th September 2007. 7 Social Workers, 1 Team Manager, 1 Aftercare Worker, 2 Family Centre Workers. Reasons for leaving were associated to a variety of different reasons, 2 Social Workers left in Fostering, 1 by reason of retirement, the other to set up a private fostering business. 1 Social Worker left in Children with Disabilities Team, who left the profession altogether. 3 Social Workers left across the Children and Families Teams: 1 left to continue with studies, 2 relocated to other parts of the County, 1 Social Worker left in Referral & Assessment Team to take up a post in a neighbouring Authority. 1 Team Manager retired.
		6012SC / DIS 3119	Percentage of SSD directly employed posts for children and families vacant on 30 September	n/a	11.3%	7.85% (June)	7.43%			Quarterly	6.80%	↔	Total vacancies as at 30th September 2007 are 7.6. 1 x CAMHS Social Worker 1 x Fostering Social Worker, 1 x Referral & Assessment Social Worker, 1 Children and Families Social Worker, Children with Disabilities Team Social Worker, 1 x Assistant Team Manager Fostering, 1 x Assistant Team Manager - Referral & Assessment (Temporary Maternity Cover), 1 Family Support Worker. Recruitment continues for permanent Social Workers: interview taking place for Referral & Assessment Social Worker and Children and Families post. Fostering posts (ATM and SW) have been advertised. Interviews to take place shortly. Discussions underway on how to fill the 0.6 vacancy in CWD Team. Temporary ATM post in R&A advertised.
		6013SC / DIS 3120	% of working days/shifts lost to sickness absence during the financial year for Social Services staff working with children & families	Low	3.75%	3.74% (June)	4.37%			Quarterly	4%	△	% of days/shifts lost equates to 1523.86 days lost across Children's Social Services. 931.35 (61%) days relates to long term absence, which is absence over 4 weeks or more. Of the 11 long-term cases 1 has left on ill-health retirement grounds, 1 is leaving shortly on ill-health retirement grounds, 3 have left the authority, 2 are on maternity leave, 2 cases relate to post op recovery, 1 has returned to work, and 1 is still currently absent. Of the 1523.86 days, 35% relates to Stress & anxiety, followed by Viral Infections (16.3%). Other reasons for absence include Headaches, back, Stomach, chest & respiratory, post op etc
		6015SC / DIS3121	Percentage of SSD gross current expenditure on staffing for children and families which was spent on training the council's directly employed staff working with children and families during the financial year	n/a	3.10%		4.11%			Quarterly	3.25%	n/a	Although we run NVQ courses throughout the year, we also run foundation degrees, scholarships and sponsored students. Because of this, we have to pay course fees and replacement time in September and October. Therefore, the expenditure by Learning and development was higher in the 6th and 7th month of the financial year
		6006SC / KIGS EX61	Gross expenditure on services to children per capita aged under 18	n/a	£356		£370			Quarterly	£319	n/a	This indicator will be affected by the increased expenditure on children looked after, particularly the rising numbers of children in residential and Agency placements. As a result, it is unlikely that the target for 07/08 will be achieved.

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
		6045SC / KIGS EX66	Gross expenditure on adoption service per capita aged under 18	n/a	£10.50			£10		Quarterly	£20	n/a	Placements of adoptive children have generated very little expenditure so far this year due to placements being made on an exchange basis or at a reduced consortium cost. There are a number of children waiting to be matched so costs could increase in the second half of year.
		6008SC / KIGS EX 77	Expenditure on family support services per capita aged under 18	n/a	£35			£36		Quarterly	£29	n/a	It is anticipated that the expenditure this year will mirror the outturn for 2006/07, given that there has been no increase in the budget and the current overall overspend position. The 2007/08 target is, therefore, unlikely to be achieved.
		6022SC / KIGS EX 62	Gross expenditure on children looked after per capita aged under 18	n/a	£164			£170		Quarterly	Not set	n/a	The increase in expenditure is due to the increased numbers of looked after children particularly in residential and agency placements
		6020SC / KIGS ST03	Social Services Department (SSD) operational staff working specifically for children's services (WTEs) per 10,000 population aged 0-17	n/a	23.74		27.39 (June)	27.5		Quarterly	Not set	n/a	Increased numbers of Assistant Team Managers, Team Managers, Social Workers and Senior Prac post
		6021SC / KIGS ST12	Social workers and care managers specifically for children (WTEs) per 10,000 population aged 0-17	n/a	15.4		16.89 (June)	18.12		Quarterly	Not set	n/a	Increase in Team Manager, 2 Assistant Team Managers and 1 Senior Prac
		6004SC / KIGS EX12	Percentage of (PSS) actual expenditure on provision for children and families	n/a	20.59%					Quarterly	22.70%	n/a	This indicator requires an adult component to be calculated which has not yet been completed. Data will be provided for inclusion in the next report.
222a			The percentage of leaders of integrated early education and childcare settings funded or part-funded by the Local Authority with a qualification at Level 4 or above	High	29.24%					Annually @ end of March	34.90%	No data	Data will continue to be collected via annual audit of settings until we are able to put into practice a method of alternative collation (via Mentors/Dev Team etc.)
222b			The percentage of leaders of integrated early education and childcare settings funded or part-funded by the Local Authority which have input from staff with graduate or post graduate training in teaching or child development	High	100%					Annually @ end of March	100%	No data	All early years leaders continue to have input from staff with graduate or post-graduate training in teaching or child development. Data will continue to be collected via annual audit of settings until we are able to put into practice a method of alternative collation (via Mentors/Dev Team etc.)
		6017SC / DIS 3124	The percentage of social workers and residential managers working with children who need to obtain the child care PQ who have achieved the PQ1 award in child care	n/a	58.10%					Annually @ end of March	Not set	n/a	PQ1 becomes the Consolidation Unit of the P.O. Specialist Award. Intake to academic Programmes will begin in September. The new programme of development for Newly Qualified Social Workers will prepare them for entry to this in the future.
		6043SC / DIS 3125	The estimated % of current staff working with children in need who are skilled and qualified as at 31 Mar as in the VCI audit	High	100%					Annually @ end of March	100%	No data	All staff working with children will be recruited with the appropriate qualifications i.e. Social Work degree & GSCC registration. A number of social workers are also completing post qualifying awards. Data available March 2008
		6005SC / KIGS BU01PSS	PSS budget for children and families per population aged under 18	n/a	£321					Annually @ end of March	£313	n/a	
		6003SC / KIGS BU07	Total Personal Social Services (PSS) budget per capita	n/a	£280					Annually @ end of March	£287	n/a	



BPVI CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
<b>CORPORATE AND CUSTOMER SERVICES</b>												
2a		The level of the Equality Standard for local government to which the Authority conforms in respect of gender, race and disability	High	2	2	2	2	2	Monthly	3	△	The year-end forecast is 3
2b		The quality of an Authority's Race Equality Scheme (RES) and the improvements resulting from its application	High	79%	79%	79%	79%	79%	Monthly	79%	◁▷	
174		The number of racial incidents reported to the local authority, and subsequently recorded, per 100,000 population	n/a	26.33			12.22	12.22	Monthly	57	n/a	
175	H19	The percentage of racial incidents reported to the local authority that resulted in further action	High	100%	100%	100%	100%	100%	Monthly	100%	△	
<b>ENVIRONMENT</b>												
82a i		The percentage of household waste arisings which have been sent by the Local Authority for recycling	High	18.71%		18.02% (June)	19.42% (August)	20.54% (October)	Monthly	23.97%	△	
82a ii		Tonnage of household waste arisings which have been sent by the Local Authority for recycling	High	16,921.66		4,100.41 (cumulative) (June)	7,617.45 (cumulative) (August)	9,665.28 (cumulative) (October)	Monthly	22,444.11	◁▷	
82b i		The percentage of household waste sent by the Local Authority for composting or treatment by anaerobic digestion	High	7.36%		8.3% (June)	9.73% (August)	9.84% (October)	Monthly	6.85%	△	
82b ii		The tonnage of household waste sent by the Local Authority for composting or treatment by anaerobic digestion	High	6,657.02		1,888.49 (cumulative) (June)	3,814.63 (cumulative) (August)	4,626.25 (cumulative) (October)	Monthly	6,413.94	△	
82c i		The percentage of the total tonnage of household waste arisings which have been used to recover heat, power and other energy sources	High	1.08%		0% (June)	0% (August)	0% (October)	Monthly	1.05%	▽	
82c ii		The tonnage of household waste arisings which have been used to recover heat, power and other energy sources	High	974.5		0 (June)	0 (August)	0 (October)	Monthly	983.16	▽	
82d i		The percentage of household waste arisings which have been landfilled	Low	72.85%		73.66% (June)	70.85% (August)	69.62% (October)	Monthly	68.50%	△	
82d ii		The tonnage of household waste arisings which have been landfilled	High	65,887.51		16,764.62 (cumulative) (June)	27,995.47 (cumulative) (August)	32,998.31 (cumulative) (October)	Monthly	63,792.96	◁▷	
E6		Recycling and composting performance (BPVI 82a i + BPVI 82b i)	High	26.07%		26.32% (June)	29.15% (August)	30.38% (October)	Monthly	30.82%	n/a	
84a	E26	The number of kilograms of household waste collected per head of the population	Low	505.82		127.26 (June)	219.33 (August)	289.92 (October)	Monthly	505.00	◁▷	
84b		The percentage change from the previous financial year in the number of kilograms of household waste collected per head of the population	Low	-3.04%		-6.52% (June)	-1.42% (August)	-2.99% (October)	Monthly	-0.15%	n/a	
91a		The percentage of households resident in the Local Authority's area served by a kerbside collection of recyclables	High	68%		70%	70%	70%	Monthly	70%	△	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
91b	E45		The percentage of households resident in the Local Authority's area served by a kerbside collection of at least 2 recyclables	High	68%		70%	70%	70%	Monthly	70%	△	
99a i			The number of people killed or seriously injured (KSI) in road traffic collisions (in 2006)	Low	147						<134	△	This BVPI uses data from 2006. The number of KSIs in 2006 was 119.
99a ii			The percentage change in the number of people killed or seriously injured (KSI) in road traffic collisions since the previous year	Low	4%						-28%	n/a	
99a iii			The percentage change in the number of people killed or seriously injured (KSI) in road traffic collisions since the 1994-98 average	Low	-41%						-46%	n/a	
E12			The number of people killed or seriously injured (KSI) in road traffic collisions (in 2007)	Low	119 (2006)		43 (cumulative)	95 (cumulative)		Quarterly	<130	n/a	
99b i			The number of children (aged under 16 years) killed or seriously injured (KSI) in road traffic collisions (in 2006)	Low	13						<15	△	This BVPI uses data from 2006. The number of KSIs of children in 2006 was 10.
99b ii			The percentage change in the number of people killed or seriously injured (KSI) in road traffic collisions since the previous year	Low	63%						-7%	n/a	
99b iii			The percentage change in the number of children killed or seriously injured (KSI) in road traffic collisions since the 1994-98 average	Low	-41%						-30%	n/a	
99c i			The number of people slightly injured in road traffic collisions (in 2006)	Low	732						<788	△	This BVPI uses data from 2006. The number of slight injuries in 2006 was 663.
99c ii			The percentage change in the number of people slightly injured in road traffic collisions since the previous year	Low	-6%						5%	n/a	
99c iii			The percentage change in the number of people slightly injured in road traffic collisions since the 1994-98 average	Low	2%						10%	n/a	
E40			The number of people slightly injured in road traffic collisions (in 2007)	Low	663 (2006)		464 (cumulative) (June)	524 (cumulative)		Quarterly	<772	n/a	
100			Number of days of temporary traffic controls, or road closure, on traffic sensitive roads, caused by road works, per km of traffic sensitive road	Low	0		0	0		Quarterly	0	△	
109a			The percentage of major applications determined within 13 weeks	High	75%		59%	61%	55.60%	Monthly	76%	◁▷	Despite current performance falling below last year's outturn, expectations are that last year's performance may still be equalled
109b			The percentage of minor applications determined within 8 weeks	High	84%		78%	80%	79.50%	Monthly	85%	◁▷	
109c			The percentage of 'other' applications determined within 8 weeks	High	92%		91%	91%	89.10%	Monthly	93%	◁▷	
E2			The percentage of major applications determined within 13 weeks (to-end-of-June)	High	63.89% (June 2006)					Annually @end of June 2008	60%	n/a	
E2			The percentage of minor applications determined within 8 weeks (to-end-of-June)	High	77.11% (June 2006)					Annually @end of June 2008	65%	n/a	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BPVI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
	E2		The percentage of 'other' applications determined within 8 weeks (to-end-of-June)	High	85.84% (June 2006)					Annually @ end of June 2008	80%	n/a	
165	E16		The percentage of pedestrian crossings with facilities for disabled people, as a proportion of all crossings in the Local Authority area	High	92%	92%	92%	92%	92%	Monthly	100%	◁▷	
166a	E21		Score against a checklist of best practice for Environmental Health	High	98.75%					Annually @ end of March	100%	No data	
166b	E27		Score against a checklist of best practice for Trading Standards	High	100%					Annually @ end of March	100%	No data	
199a			The proportion of relevant land and highways (expressed as a percentage) that is expressed as having combined deposits of litter and detritus that fall below an acceptable level	Low	17%	21%	21%	16%	14%	Monthly	15%	△	The year-end forecast is 15%
				Low	5%		0%	5%		Quarterly	<=20%		This relates to primary retail / commercial land use
				Low	12%		8%	10%		Quarterly	<=20%		This relates to secondary retail / commercial land use
				Low	17%		18%	14%		Quarterly	<=20%		This relates to high density housing
				Low	21%		35%	23%		Quarterly	<=30%		This relates to low density social housing
				Low	10%		17%	13%		Quarterly	<=20%	n/a	This relates to low density private housing
			Cleanliness of public places (litter and detritus)	Low	23%		20%	19%		Quarterly	<=30%		This relates to industry / warehouse / retail sheds
				Low	20%		14%	12%		Quarterly	<=20%		This relates to main roads
				Low	21%		14%	11%		Quarterly	<=30%		This relates to rural roads
				Low	29%		29%	23%		Quarterly	<=30%		This relates to other highways
				Low	14%		0%	5%		Quarterly	<=20%		This relates to recreation areas
199b			The proportion of relevant land and highways (expressed as a percentage) from which unacceptable levels of graffiti are visible	Low	2%	2%	2%	1%	2%	Monthly	2%	△	
199c			The proportion of relevant land and highways (expressed as a percentage) from which unacceptable levels of fly-posting are visible	Low	1%	0%	0%	0%	0%	Monthly	1%	△	
199d			The year-on-year reduction in the total number of incidents and increase in the total number of enforcement actions taken to deal with 'fly-tipping'	Low	Grading 1 (Very Effective)	1	1	3	3	Monthly	1	▽	Following the introduction of the permit scheme at household waste sites there has been a significant increase in the number of incidents of fly-tipping. The score of 3 is predicted to remain for the year.
204	E42		The number of planning appeal decisions allowed against the authority's decision to refuse on planning applications, as a percentage of the total number of planning appeals against refusals of planning applications	Low	22%		30%	32%	32%	Monthly	21%	▽	
205	E43		The local authority's score against a 'quality of planning services' checklist	High	94%		94%	94%	94%	Monthly	94%	◁▷	
215a			The average number of days taken to repair a street lighting fault, which is under the control of the Local Authority	Low	8.78		2.79	8.43	3.5	Monthly	5	△	
215b			The average time taken to repair a street lighting fault, where response time is under the control of a Distribution Network Operator (DNO)	Low	57.16		0	22	27.5	Monthly	30	△	
218a			The percentage of new reports of abandoned vehicles investigated within 24 hours of notification	High	98%			89.16%	92.20%	Monthly	100%	▽	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BPVI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
218b			The percentage of abandoned vehicles removed within 24 hours from the point at which the Local Authority is legally entitled to remove the vehicle	High	98%			94.74%	96.67%	Monthly	100%	▽	Performance fell during the summer. One team deals with both abandoned vehicles and fly-tipping; handling a significant and initially unexpected, increase in fly-tipping incidents resulted in a reduction in the response times for abandoned vehicles. Arrangements have now been put in place to provide back-up for the team and performance has improved in recent months; however, as the target is 100% this will not be achieved this year.
219b			Percentage of conservation areas in the local authority area with an up-to-date character appraisal	High	12.50%	20%	20%	20%	23.43%	Monthly	26.56%	△	
223			Percentage of the local authority principal road network where structural maintenance should be considered	Low	14%					Bi-annually November & March	5%	No data	Survey work has been brought forward to September / October so that more timely use can be made of the data, which is currently being analysed.
224a			Percentage of the non-principal classified road network where maintenance should be considered	Low	21%					Bi-annually November & March	19%	No data	The current highway maintenance plan is being delivered, but was affected by the recent flooding. The impact of flooding on the network has been assessed and details submitted under the Bellwin Scheme.
224b	E11		Percentage of the unclassified road network where structural maintenance should be considered	Low	24.28%					Bi-annually November & March	19%	No data	
E32			Trading standards, visits to high risk premises	High	85.7			17%	73%	Monthly	95	n/a	Performance is typical for this period of the year.
E33			Trading standards, levels of business compliance, high-medium and low-risk premises	High	83.5% 85.3% 87.7%			98% 83% 100%	98% 83% 100%	Monthly	92% 93% 90%	n/a	Performance is typical for this period of the year.
86			Cost of household waste collection per household	Low	£47.03					Annually @ end of March	£52.13	No data	
87			Cost of waste disposal per tonne of municipal waste	Low	£79.09					Annually @ end of March	£82.33	No data	
102			Number of local bus passenger journeys originating in the authority area undertaken each year	High	3,433,043					Annually @ end of March	3,948,000	No data	
106	E23		Percentage of new homes built on previously developed land	High	76.70%					Annually @ end of March	60%	No data	
187	E18		Percentage of the category 1, 1a and 2 footway network where structural maintenance should be considered	Low	31%					Annually @ end of March	27.50%	No data	
200a			Did the Local Planning Authority submit the Local Development Scheme (LDS) by 28 March 2006 and thereafter maintain a 3-year rolling programme?	n/a	Yes					Annually @ end of March	Yes	△	The year-end forecast is Yes
200b	E44		Has the Local Planning Authority met the milestones that the current Local Development Scheme (LDS) sets out?	n/a	Yes					Annually @ end of March	Yes	△	The year-end forecast is Yes
216a			The number of 'sites of potential concern' (within the Local Authority area), with respect to land contamination	n/a	2,896					Annually @ end of March	5,841	n/a	

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

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216b			The number of sites for which sufficient detailed information is available to decide whether remediation of the land is necessary, as a percentage of all 'sites of potential concern'	Low	0.2					Annually @ end of March	2	No data	
217			Percentage of pollution control improvements to existing installations completed on time	High	96.80%					Annually @ end of March	96.80%	No data	
E19			Intervention by the Secretary of State under Traffic Management Act powers	n/a	No					Annually @ end of March	No	n/a	
E30			Consumer satisfaction with trading standards service	High	82.9					Annually @ end of March	80	n/a	Surveys are now being conducted quarterly. The first survey has been undertaken, but results are not yet available.
E31			Business satisfaction with trading standards service	High	89.6					Annually @ end of March	90	n/a	Surveys are now being conducted quarterly. The first survey has been undertaken, but results are not yet available.
E38			% of people satisfied with the cleanliness standard in their area	High	66%		Not measured in 2007-08					n/a	
90a	E8A		The percentage of people satisfied with household waste collection	High	82%		Not measured in 2007-08					n/a	
90b	E8B		The percentage of people satisfied with waste recycling	High	70%		Not measured in 2007-08					n/a	
90c	E8C		The percentage of people satisfied with waste disposal	High	86%		Not measured in 2007-08					n/a	
103			Satisfaction with passenger transport information	High	48%		Not measured in 2007-08					n/a	
E14			Satisfaction with passenger transport information (that have seen information)	High	70%		Not measured in 2007-08					n/a	These indicators are included in this report because the outturn from 2006 (the baseline) will be used in the CPA results announced in February 2008 and 2009
104			Satisfaction with bus services	High	49%		Not measured in 2007-08					n/a	
E15			Satisfaction with bus services (users)	High	62%		Not measured in 2007-08					n/a	
E3			Satisfaction with Planning Service	High	76%		Not measured in 2007-08					n/a	
E1			Progress with local transport plan	n/a	Good		Not measured in 2007-08					n/a	
<b>HUMAN RESOURCES</b>													
12			The number of working days/shifts lost to the Authority due to sickness absence	Low	8.41	7.88	8.17 (June)	7.63 (August)	7.99 (October)	Monthly	8.00	△	
16			The percentage of local authority employees with a disability	High	0.69%	0.77%	0.77%	0.88%		Monthly	0.75%	△	
17a			The percentage of local authority employees from ethnic minority communities	High	0.64%	0.66%	0.66%	0.61%		Monthly	0.80%	▽	
11a			Percentage of top-paid 5% of staff who are women	High	38.57%			42%		Monthly	42%	△	Data will be available for the next report to end-of-November
11b			The percentage of the top 5% of local authority staff who are from an ethnic minority	High	2.14%			2.73%		Monthly	2.85%	△	Data will be available for the next report to end-of-November
11c			Percentage of the top paid 5% of staff who have a disability (excluding those in maintained schools)	High	0.71%			0.91%		Monthly	1.40%	△	Data will be available for the next report to end-of-November

APPENDIX B - NATIONAL INDICATORS  
DIRECTION OF TRAVEL AGAINST LAST YEAR'S PERFORMANCE

BVPI	CPA	PAF	Indicator	Good Performance	Baseline	May Report	July Report	September Report	November Report	Frequency of Reporting	Target	Direction of Travel	Commentary
14			The percentage of employees retiring early (excluding ill-health retirements) as a percentage of the total work force	Low	0.16%			0.25%		Monthly	0.14%	▽	Data will be available for the next report to end-of-November
15			The percentage of local authority employees retiring on grounds of ill health as a percentage of the total workforce	Low	0.14%			0.18%		Monthly	0.13%	▽	Data will be available for the next report to end-of-November
<b>RESOURCES</b>													
8			Percentage of invoices for commercial goods & services paid by the Authority within 30 days of receipt or within the agreed payment terms	High	92.67%	92.97%	93.80%	92.66% (August)	91.80%	Monthly	92.67%	◁▷	
9			The percentage of council tax collected by the Authority in the year	High	98.34%	21.31%	40.40%	49.5% (August)	77.58%	Monthly	98.34%	◁▷	
10			The percentage of national non-domestic rates collected in-year	High	98.90%	21.89%	39.45%	54.18% (August)	79.81%	Monthly	98.90%	◁▷	
76b			The number of fraud investigators employed by the Local Authority, per 1,000 caseload	n/a	0.29	0.26	0.26	0.26 (August)	0.34	Monthly	0.28	n/a	
76c			The number of Housing Benefit and Council Tax Benefit (HB/CTB) fraud investigations carried out by the Local Authority per year, per 1,000 caseload	n/a	40.00	48	43	43 (August)	42	Monthly	35.00	n/a	
76d			The number of Housing Benefit and Council Tax Benefit (HB/CTB) prosecutions and sanctions, per year, per 1,000 caseload, in the Local Authority area	n/a	7.50	14	13	15 (August)	13	Monthly	8.00	n/a	
78a			The average processing time taken across all new Housing and Council Tax Benefit (HB/CTB) claims submitted to the Local Authority, for which the date of decision is within the financial year being reported	Low	29.80	28	27.8	27.45 (August)	26.15	Monthly	26	△	
78b			The average processing time taken for all written notifications to the Local Authority of changes to a claimant's circumstance that require a new decision on behalf of the Authority	Low	15.60	15	15	14.65 (August)	13.34	Monthly	15.00	△	
79a			The percentage of cases within a random sample for which the Authority's calculation of Housing and Council Tax Benefit (HB/CTB) is found to be correct	High	98.40%		96%	96% (August)	96.8	Monthly	98.80%	▽	
79b i			The amount of Housing Benefit overpayments (HB) recovered as a percentage of all HB overpayments	High	66.58%	66%	69%	69% (August)	53.44	Monthly	66%	△	
79b ii			HB overpayments recovered as a percentage of the total amount of HB overpayment debt outstanding at the start of the year, plus amount of HB overpayments identified during the year	High	51.24%		13.50%	13.5% (August)	32.64	Monthly	55%	◁▷	
79b iii			Housing Benefit (HB) overpayments written off as a percentage of the total amount of HB overpayment debt outstanding at the start of the year, plus amount of HB overpayments identified during the year	n/a	4.78%		1.36%	1.36% (August)	2.15	Monthly	9%	n/a	
156			The percentage of authority buildings open to the public in which all public areas are suitable for, and accessible to, disabled people	High	63.80%					Annually @ end of March	70%	No data	

**2007/08 REVENUE BUDGET MONITORING****Contents**

	<b>Page</b>
<b>Summary</b>	<b>2</b>
<b>Adult and Community Services Directorate</b>	<b>5</b>
<b>Children and Young People's Services Directorate</b>	<b>8</b>
<b>Corporate and Customer Services Directorate</b>	<b>10</b>
<b>Environment Directorate</b>	<b>12</b>
<b>Corporate Budgets</b>	<b>14</b>
<b>Resources Directorate</b>	<b>15</b>
<b>Human Resources</b>	<b>16</b>

## Summary

1. The following table summarises the 2007/08 projected outturn as at the end of November 2007. It also includes figures from the previous IPR report to permit comparison between current and previously reported figures.

	2007/08 Budget	September 2007 Net over or (-) Underspending	November 2007 Net over or (-) Underspending	Change since last report
	£000	£000	£000	£000
Adult & Community	44,484	4,070	3,661	-409
Children & Young People	23,218	793	703	-90
Corporate & Customer	7,839	1,295	1,195	-100
Environment	24,734	-357	-407	-50
Central Services	3,254	-120	-350	-230
Resources	6,468	-60	-60	0
Human Resources	1,401	0	0	0
<i>Directorate Position</i>	<u>111,398</u>	<u>5,621</u>	<u>4,742</u>	<u>-879</u>
Flood Damage Repairs	0	800	1,032	232
Capital Financing Costs	10,753			
Interest Received	-1,220	-300	-400	-100
Invest to Save	3,524	-1,000	-2,139	-1,139
Transfers to Reserves	1,500			
Herefordshire Connects	1,893	0	-328	-328
Social Care Contingency	1,302	-1,302	-1,302	0
LABGI	-1,000	-600	-600	0
WMS Profit Share	-300	0	0	0
Transfer from Reserves	-4,322	0	0	0
Transfer from Revenue Balances	-1,157	0	0	0
<b>Net Position</b>	<u>122,371</u>	<u>3,219</u>	<u>1,005</u>	<u>-2,214</u>



2. The overall position shows a projected £1.005million overspend. This is just under 1% of the Council's £122.37 million revenue budget (excluding Direct Schools Grant funding).
3. As part of the overall 2007/08 budget, there is contingency funding of £1.3m available to mitigate Social Care pressures. However the use of the contingency and the level applied to meet the overspend can only be sanctioned after a review of the causes for the overspend and assurances that mitigating action was taken.
4. The projected year-end outturn figures include an estimated £2.0m projected underspend against the Spend to Save/Spend to mitigate allocations in the 2007/08 budget. The majority of the total relates to the allocation to modernise social care and community services for older people.
5. The November projected outturn shows an improvement over the position reported at the end of September. This is largely due to an increase in the level of underspend against the spend to save allocations of £3,524k, an increase in the projected interest to be received on cash balances due to continuing slippage in the capital programme and an estimated £328k underspend on the Herefordshire Connects programme.

### **Revenue Reserves Position as at 30<sup>th</sup> November 2007**

#### **General Reserves**

6. As at 1st April 2007 the estimated General Reserve is £8.0 million. This included releasing £100k contribution to the Partnership Fund with the PCT for developing the proposed PST arrangements.
7. The Council's Medium Term Financial Management Strategy sets out the council's approach to managing General Fund balances and Specific Reserves and ensuring a balanced budget. A key message is a move away from a higher level of General Fund balances to specific Reserves to deal with key corporate financial risks. In 2006/07 this was achieved as the general fund balance had been £14.525m at 1st April 2006. The estimated General reserve balance at the end of this financial year is £5.6m after allowing for a planned use of reserve (£1.4m) and the £1.0m projected overspend.

#### **Earmarked Reserves**

8. At 1st April 2007 the Council held £19.8million of earmarked reserves. This includes school balances reserves of £8.137m that are ring-fenced.

#### **July Floods and the Bellwin Claim**

9. The heavy rain that affected Herefordshire in July caused significant damage. Financial Services is co-ordinating the gathering of data to support claims for funding from central government.
10. The central government funding process, known as the Bellwin Scheme, sets thresholds and conditions for funding. The threshold of £408,526 applies to Herefordshire and expenditure over and above this amount is 100% recoverable. All works for which a claim is to be made, must be completed before the claim is submitted on 2<sup>nd</sup> February. One key area of exclusion exists covering items deemed

to have been insurable. This is an important definition because even if items are not insured but are viewed as being insurable they are excluded.

11. The overall estimate of damage as of the end of July was £3.605m. The largest single category covers Highways and Transportation at £2.058m. Within this total is work to repair roads and signs as well as checking and cleansing drainage systems. The latest estimate of damage is £3.545m of which £2.752m will be submitted as a Bellwin Claim. The difference of £793k comprises the “insurable” part that cannot be covered and the threshold sum of £409k.
12. The flooding badly affected a number of schools in the county, with costs now estimated at £655k. These are not recoverable under current rules because the risk is viewed as insurable and in any case we self-fund our school premises. The total will be partly covered by self-insured funding but there will still be a shortfall. There will also be grants of £170k from central government specifically for schools-related damage.

## ADULT AND COMMUNITY SERVICES DIRECTORATE

Directorate Summary as at 30<sup>th</sup> November 2007

	September 2007 Net over or (-) underspending	November 2007 Net over or (-) underspending
	£000	£000
Adult Services	+4,614	+4,210
Strategic Housing	+19	+104
Community Services	+40	0
Commissioning and Improvement	-103	-153
Total	4,570	4,161
Less needs analysis monies	-500	-500
<b>Total</b>	<b>4,070</b>	<b>3,661</b>

**Adult Services**

13. The projected outturn for Adult Services is an overspend of £4.210 million, which is an improvement on the September position. These figures are based on updated information up to November. Details of the major variances are as follows:
- Learning Disabilities - £2.832 million overspend
  - Physical Disabilities - £0.587 million overspend
  - Mental Health - £1.135 million overspend
  - Older People - £0.221 million underspend
14. The main area of concern is Learning Disabilities, which continues to increase. Other areas have demonstrated a reduction in the forecast spend level with the projected underspend on Older People increasing.
15. The recent pay award of 2.475% is higher than the 2% allowed for in council budgets. The shortfall will be addressed for 2008-09 onwards as part of the MTFMS update, however for the current year Directorates will be required to bear the cost, which is an added pressure and is the main contributor to the increase of £300k in Learning Disabilities since the last report to the end of September.
16. In line with national trends, the major budget pressures across all service groups within Adult Social Care continue to be residential and nursing care placements and domiciliary care costs. Since April the overall number of packages across learning disabilities, mental health, and physical disabilities have increased which inevitably impact on budgets, which were already under pressure.
17. The movements between September and November have been far less than the level of increases experienced earlier in the year, for example in August in Mental Health there was a net increase of nine placements, costing £213k in the current

year.

18. Under the terms of the agreement with Shaw Homes, the Council must pay a standard 'unitary fee' for the new accommodation at Leadon Bank in Ledbury, which is in addition to the rent and other charges paid by the tenants. The amount is index-linked and the full year effect for the current year would be approximately £430k. The arrangement commences from December 21<sup>st</sup> and the projected cost for 2007-08 will be approximately £116k, however this amount will be mitigated by a reduction in the charge paid for the existing facility, which is due to close. This unitary charge represents a significant cost for future years. There is also a likely additional benefit cost of £60k. Officers are in dialogue with Shaw with a view to reducing the whole life costs of the scheme and to mitigate some of the risk around the overall financial model. These discussions should enable the financial impact of the scheme on the overall Social care budget to be clearly demonstrated.
19. In recognition of the demographic pressures in social care (both adults and children's) a centrally held contingency of £1.3m has been set aside, but the allocation between the directorates has not yet been determined.
20. Invest to save monies of £2.7m have been ring-fenced to address issues highlighted in the Older People's Needs Analysis completed in the autumn of 2006. As this funding will be underspent at the year-end, £500k has been used to fund specific short-term packages, pending redesign of service provision. Once these packages have ceased, the funding will not be used for further residential care but will revert to its original purpose of supporting the operational change agenda.
21. Work continues to bring expenditure back in line with budget, but changing the model of service delivery is a lengthy process. The Adult and Community Services Transformation Programme Board is driving forward a range of projects designed to change the way in which services are provided across the board, with a view to moving away from residential care towards more cost-effective community-based solutions. As well as reducing costs, income generation schemes including fairer charging are being implemented and a more stringent assessment process introduced. Supporting People funding has been agreed in principle to identify cases where such funding would be appropriate. A review of all existing clients is being carried out to ensure that income from the PCT is optimised and the appropriate level of care provided. The report assessing the financial impact of the strategies to bring the expenditure back in line with budget is being finalised.
22. There is a potential one-off cost in respect of writing off some debt due from the PCT, however recent changes in management arrangements may provide an opportunity to re-negotiate the position.

### **Strategic Housing**

23. The projected outturn for Strategic Housing has increased to an overspend of £104k. This is due to increases in temporary accommodation within Homelessness which was predicted in the last IPR. There has also been an increase in staff costs to cover temporary staff during the course of the restructure. Opportunities to house a number of bed and breakfast tenants are likely to arise soon due to improvements in voids management at Herefordshire Housing.

### **Community Services**

24. Action has been taken to address the projected overspends highlighted in the previous IPR and further action is required to address the impact of the pay award (£20k). However, it is anticipated that sufficient one-off savings can be identified to cover this amount. The figures include the base budget adjustment to mitigate the effect of Hereford City Council's refusal to contribute towards parks and countryside services (£138k).
25. An issue has emerged regarding the Council's responsibility to indemnify HALO for the costs related to their implementation of single status and job evaluation. HALO has submitted claims in excess of the available budget however these claims are being challenged and negotiations with HALO continue.
26. The ARCH (Actively Regenerating Communities in Herefordshire) programme (a £1.7m programme funded by European Objective 2 grant money) recently received an audit visit by GOWM. Herefordshire Council is the accountable body for this programme, which is mainly delivered by third party organisations. A significant number of eligibility and evidence issues emerged and a dedicated team has been tasked to resolve issues where possible. The Council has until February to work with third party providers to demonstrate compliance with eligibility criteria and to identify satisfactory evidence. Although this work is on-going it is likely that GOWM will claw-back some of the grant funding and as the accountable body, Herefordshire Council will be responsible for repaying any grant.
27. The issues outlined above will result in additional costs however until the work outlined above is completed it is too early to be able to give an accurate figure.

#### **Commissioning & Improvement**

28. This area is expected to underspend by £153k as a result of delayed recruitment following a restructuring and economies derived from carrying out a data cleansing exercise in-house rather than utilising external resources.

#### **Efficiency Savings**

29. All the Adult Services efficiency savings have been allocated out to client groups.
30. The Community Services efficiency savings were all netted off at the start of the year and the required savings are being achieved on an on-going basis.

**CHILDREN AND YOUNG PEOPLE'S SERVICES DIRECTORATE**

Directorate Summary as at 30th November 2007

	<b>September 2007</b>	<b>November 2007</b>
	<b>Net over or (-)</b>	<b>Net over or (-)</b>
	<b>underspending</b>	<b>underspending</b>
	<b>£000</b>	<b>£000</b>
Central directorate Budgets	-85	-208
Safeguarding and Assessment	+878	+911
<b>Total</b>	<b>+793</b>	<b>+703</b>

31. The current position is a projected overspend of £703k compared to a projected overspend of £793k in September 2007. The reduction in the overspend is mainly due to the confirmation that the £100,000 'Invest to Save' funding can be used to offset staffing costs for performance management.

**Dedicated Schools Grant**

32. The Dedicated Schools Grant (DSG) funds delegated school budgets and central services to schools and pupils. DSG is determined by government based on the number of pupils in the county and is finalised in June annually. Any under or overspending must be carried forward into the DSG for 2008/09.
33. DSG has been now been finalised at £82.535m which is £416k greater than expected. However, the extra income must be used to fund the additional costs arising from extra nursery pupils estimated at £440k. Expenditure on the Joint Agency Management budget is expected to be approximately £300k lower than the original budget of £1.751m and expenditure on Banded Funding is expected to be £192k overspent. School Forum has agreed that the overall underspend of £245k should be used to help meet savings in the Schools Budget in 08/09.

**Directorate Central Budgets**

34. The Dedicated Schools Grant does not fund the remaining education services such as strategic management, SEN assessment, asset management and transport. The projected underspend is £208k mainly arising from savings on school transport (£184k) and carried forward Standards Fund from 2006/07 which used to offset costs in the School Improvement Service (£156k). The budget for severances is expected to overspend but cannot be accurately assessed until schools begin to set their budgets early in the new year.

**Children's Social Care/ Safeguarding and Assessment Services**

35. The projected overspend on Children's Social Care is £911k and is mainly related to external residential agency placements (£714k) and fostering (£222k). External agency placements have risen last year from 24 in April 2006, 37 in September 2007 falling to 32 in October but rising to 34 in November. Unless numbers can be reduced or the service provided in a more cost effective way, this cost pressure will continue into future financial years. The number of children in foster care had largely stabilised at around 103 in August and September however has increased to 114 in November.

**Summary**

36. Overall, the Children and Young People's budget is expected to overspend with a projected deficit of £703k. This will continue to be monitored closely throughout the rest of the financial year.

**Efficiency Savings**

37. The efficiency savings required for 2007/08 have been based upon the Invest to Save/Spend to mitigate proposals approved by Cabinet last year and additional transport savings identified from route reviews effective from September 2007.

## CORPORATE AND CUSTOMER SERVICES DIRECTORATE

Directorate Summary as at 30<sup>th</sup> November 2007

	September 2007 Net over or (-) underspending	November 2007 Net over or (-) underspending
	£000	£000
Herefordshire Partnership	0	0
Communications	0	0
Director and Administration	0	0
Emergency Planning	0	0
Legal and Democratic Services	100	100
Info. By Phone	100	0
Policy & Performance	0	0
Information Services	0	0
Corporate ICT Projects	-427	-427
ICT Trading Account	217	217
Corporate Programmes	205	205
Community Network Costs	1,100	1,100
<b>Total</b>	<b>1,295</b>	<b>1,195</b>

38. The ICT Trading Account and Corporate ICT projects are performing in line with revised budgeted projections. The vacancies identified have been frozen until April 2008. This still assumes that all existing contractual commitments for software and other operating costs have been identified and budgeted for.
39. Considerable work has been done on identifying the costs and software to successfully complete phase 2 of Customer Services. It is anticipated Customer Services will not overspend the budget. Work is continuing with directorates to integrate with Customer Services. Customer Services has until the end of 2008-09 to lever £500k of customer-facing functions from directorates and this has not yet been fully identified.
40. Legal and Democratic Services have a shortfall in staff budget within Members Services. Over a full year this is in the region of £100,000. However, the service is carrying some vacancies, which should reduce the shortfall. Members Services' operating costs continue to rise to support the increasing number of meetings. The Legal Services budget includes some unachievable income targets. However, the projected overspend is likely to come down as work on establishing robust SLA's is developed and the services are reimbursed for work already delivered.
41. Investigations into the planned funding for the community network upgrade have established that the annual revenue cost is £1.6m. However, work is in progress to challenge elements of the Siemens contract in order to drive down the cost. £500k of the revenue cost will be funded from the Standards Fund within Children's Services



but the remainder is still unfunded and represents a significant projected overspend. Assumptions around savings in the old network have yet to be realised because of delays in decommissioning some building's connectivity to the network.

## ENVIRONMENT DIRECTORATE

Directorate Summary as at 30<sup>th</sup> November 2007

	September 2007 Net over or (-) underspending	November 2007 Net over or (-) underspending
	£000	£000
Environmental Health and Trading Standards	-600	-650
Planning	143	143
Highways and Transportation	100	100
Directorate Management & Support	0	0
<b>Total</b>	<b>-357</b>	<b>-407</b>

**Environmental Health and Trading Standards**

42. In order to meet Waste Collection contract inflation pressures, budget was re-allocated at the beginning of the financial year from the Roads Maintenance budget. However, Waste Contract prices did not increase at the estimated level of 10% therefore £165k revenue budget has been transferred back to the Roads Maintenance budget.
43. The current projected underspend of £600k relates to the Waste Disposal budget. This projection is mainly based on forecasts from Worcestershire County Council in relation to the joint Waste Disposal contract. In previous years there has been significant underspend and until the new Contract variations are agreed this position will continue. However, the cost of the new contract will be considerably higher than at present. The final position will be reflected in the overall revenue account but, as in previous years, any underspend against the contract will need to be earmarked for reserves to meet future waste management pressures.
44. There is also a projected underspend in relation to Commercial Environmental Services of £50k. This relates to additional income received in the current year in relation to the Cadbury's case compensation for expenditure incurred and loss of inspection income in the previous year.

**Planning**

45. There is likely to be an overspend in relation to IT SLA charges in Planning of £100k. This is being reviewed to check the impact on the ICT trading account. In the previous year, on a one-off basis, this pressure was met by Planning Delivery Grant however there is no capacity to do this in the current year.
46. There is also an additional projected overspend of £43k in relation to a revenue contribution to capital for the purchase of land at Belmont.
47. Although Planning Fee income is on target for the Period to 30<sup>th</sup> November 2007, current forecasts based on income patterns in the previous two years, which take seasonal fluctuations into account, indicate a potential shortfall of income of £30-50k

for the year. However, the proposed changes to Planning Fees from 1st April 2008 may create a surge of applications in March, hopefully meeting the annual income targets. Any surplus will be used to mitigate IT charges.

**Highways & Transportation**

- 48. Concessionary travel is expected to overspend by £100k. This projection is based on inflationary increases during the year on fares of 10% and an increase of patronage of 5%, based on increases already seen so far this year.
- 49. Pressure on the Roads Maintenance budget have been reduced following the re-allocation of £165k budget from the Waste contract budget.

**Efficiency Savings**

- 50. The efficiency savings have all been taken into account in the Directorate's budget. Action is being taken to ensure the savings are made.

## CORPORATE BUDGETS

	<b>September 2007</b>	<b>November 2007</b>
	<b>Net over or (-) underspending</b>	<b>Net over or (-) underspending</b>
	<b>£000</b>	<b>£000</b>
Corporate Budget	-120	-350

51. A net underspending of £350k is expected on Corporate budgets due to the anticipated savings on corporate subscriptions, insurance, audit commission fees and Environment Agency levies.
52. There will be a transfer of £1.16m budget for Job Evaluation adjustments and unfunded pensions to other Directorates.
53. The remaining Corporate capacity budget and agency staff efficiency savings will be allocated in the 2008/09 base budget to Directorates.

## RESOURCES DIRECTORATE

Summary as at 30th November 2007

	September 2007 Net over or (-) underspending	November 2007 Net over or (-) underspending
	£000	£000
Asset Managementt & Property Services	0	0
Audit, Benefit and Exchequer and Financial Services	-60	-60
<b>Total</b>	<b>-60</b>	<b>-60</b>

**Asset Management & Property Services**

54. At this stage of the year there is an estimated break even.

**Audit Services, Benefit and Exchequer Services and Financial Services**

55. There is a projected underspend of £60k due to savings from rent rebates expenditure.

**HUMAN RESOURCES**

Summary as at 30th November 2007

	<b>September 2007 Net over or (-) underspending</b>	<b>November 2007 Net over or (-) underspending</b>
	<b>£000</b>	<b>£000</b>
Human Resources	0	0

**Human Resources**

56. At this stage of the year there is an estimated break even.
57. However due to vacancies being filled using interim agency staff it is possible this area could overspend.

**Efficiency Savings**

58. The efficiency savings have all been taken into account in the Directorate's budget. Action is being taken to ensure the savings are made.

## 2007/08 CAPITAL PROGRAMME BUDGET MONITORING

### OVERALL SUMMARY POSITION

1. The capital programme forecast outturn for 2007/08 as at 30<sup>th</sup> November totals £53,168k, which is a decrease of £8,434k from the previous capital programme forecast outturn for 2007/08 as at 30<sup>th</sup> September. The decrease represents a reduction in the Herefordshire Connects and crematorium project capital forecasts for 2007/08. Further details of forecast changes are given in this report.
2. A summary of the overall capital programme position for 2007/08 is provided in table D1. Detailed capital programmes for directorates are reported to the relevant scrutiny committees. There is no unfunded capital expenditure and no conditional funding resources are expected to be lost.
3. Details of total capital scheme costs, their funding, spend to date and any potential issues for capital schemes with a revised forecast spend for 2007/08 exceeding £500k are provided in table D2.

### CHILDREN AND YOUNG PEOPLE'S SERVICES DIRECTORATE

4. The capital programme forecast for this directorate has increased by £750k. The forecast expenditure in 2007/08 on Minster school replacement has increased by £766k to £866k. This is in line with the revised cash flow submitted to Department for Children's Services and Families (DCSF) following expectations that this scheme will go out to tender in December to complete in July 2010. This scheme is funded by DCSF grant.

### CORPORATE AND CUSTOMER SERVICES DIRECTORATE

5. The capital programme forecast for this directorate has decreased by £256k. The forecast expenditure on disaster recovery has decreased by this amount because the scheme is under review. A successful capital bid for prudential borrowing funding was submitted in 2004/05, this bid is under review to ensure the expenditure plans fulfil the bid requirements. The prudential borrowing allocation has been carried forward into 2008/09.

### HEREFORDSHIRE CONNECTS

6. Herefordshire Connects expenditure forecast has decreased by £7.475m to £944k representing the capital spend in 2007/08 to replace the current client systems used within both Adult and Community Services and Children and Young People Directorates as reported separately to Cabinet on the 13<sup>th</sup> December 2007. The remainder of the project is currently on hold.

### ENVIRONMENT SERVICES DIRECTORATE

7. The capital programme forecast for this directorate has decreased by £1.365m. This represents the anticipated reduction in spend on the provision of a new crematorium in Hereford before March of £1.348m following the delayed signing of contract of works. This budget and associated prudential borrowing has been carried forward into 2008/09 when the works should be completed (work is expected to start on site in January). The profiling of spend on this scheme is being closely monitored to avoid VAT penalties described later in this report
8. Each scheme under the Local Transport Plan (LTP) has been reviewed and the expenditure forecast has been amended accordingly to reflect anticipated

expenditure. This has enabled the expected expenditure on Colwall Bailey bridge of £450k to be funded through the LTP allocation in 2007/08 (reported separately to Cabinet on the 13<sup>th</sup> December 2007). Actual spend to date on LTP funded schemes is low however this funding allocation is expected to be spent by using other contractors available through Amey.

## VAT

9. The VAT position will now be included in as part of the budget monitoring reports. Herefordshire Council recovers VAT charged on supplies on a monthly basis. Authorities however have to analyse the VAT recovered to identify VAT recovered in relation to schemes classified as exempt from VAT (usually land and property schemes). This is because authorities can only recover exempt input VAT when it represents an insignificant proportion of the total VAT recovered, determined as 5%.
10. In 2006/07 the Council recovered 3.18% of exempt input tax. Current estimates for 2007/08 show a recovery of 3.24% of exempt input tax. Approximately 2% of the 5% relates to exempt input VAT incurred on recurring revenue expenditure each year leaving an ability to recover a total exempt input VAT of 3% on capital schemes. If the 5% limit is breached (even by £1) all the VAT recovered on exempt schemes becomes repayable, currently approximately £870k and a further financial review covering the previous ten years would be necessary which may result in further repayments.
11. A Partial Exemption calculation is updated following each round of capital budget monitoring so that pre-emptive action can be taken if necessary. One way of doing this is to opt to tax property transactions converting the supply from exempt to standard rated. This course of action is recommended in relation to the cattle market, Rotherwas futures and Edgar Street Grid property transactions. However the provision of a crematorium is a VAT exempt scheme which cannot be opted to tax so must be managed within the 5% limit. Currently cashflow predictions show that the bulk of expenditure in 2008/09 can be accommodated within the 5% limit but this position will require careful monitoring and does mean that no other capital expenditure on VAT exempt schemes can go ahead in 2008/09.

## Prudential Borrowing Position as at 30<sup>th</sup> November 2007

12. A summary of the Prudential Borrowing position for 2007/08 is set out below.

2007/08 Original Prudential Borrowing Allocation		£16,995,000
Add: Subsequent Allocation (Rotherwas Enterprise)		£90,000
Add: Slippage from 2006/07		£16,288,000
Less: Slippage into future years	(£22,874,000)	
No longer required	(£1,078,000)	
Funded by available SCE(R)	(£125,000)	(£24,077,000)
Forecast use of Prudential Borrowing in 2007/08		<u>£9,296,000</u>

## Capital Receipts Reserves Position as at 30<sup>th</sup> November 2007

13. The capital receipts reserve totals £22.426m as at 1<sup>st</sup> April 2007. £7.103m will be used to fund 2007/08 capital programme. The remaining balance will be used to fund future year's capital programme including strategic housing, Rotherwas futures and cattle market.



TABLE D1

## FUNDING OF REVISED 2007/08 CAPITAL PROGRAMME

Capital Programme Area	2007/08 Revised Forecast 30/11/07	SCE(R)	Prudential Borrowing	Grant	Revenue Contribution	Capital Receipts Reserves
	£'000	£'000	£'000	£'000	£'000	£'000
Children & Young People's Services	12,234	2,163	2,275	5,127	-	2,669
Resources	1,967	-	254	1,618	60	35
Corporate and Customer Services	322	-	322	-	-	-
Herefordshire Connects	944	-	944	-	-	-
Environment Services	27,566	7,582	4,088	15,803	45	49
Adult and Community Services	10,135	218	1,413	4,097	56	4,350
<b>Total Revised Forecast</b>	<b>53,168</b>	<b>9,963</b>	<b>9,296</b>	<b>26,645</b>	<b>161</b>	<b>7,103</b>
<i>September Forecast</i>	<i>61,602</i>	<i>9,963</i>	<i>16,503</i>	<i>25,291</i>	<i>54</i>	<i>9,791</i>
<i>Change from September</i>	<i>(8,434)</i>	<i>-</i>	<i>(7,207)</i>	<i>1,354</i>	<i>107</i>	<i>(2,688)</i>

<b><u>Reported to date</u></b>						
<i>Original Budget</i>	<i>65,462</i>	<i>9,963</i>	<i>28,256</i>	<i>18,358</i>	<i>170</i>	<i>8,715</i>
<i>July 2007 Forecast</i>	<i>62,433</i>	<i>9,963</i>	<i>15,926</i>	<i>25,781</i>	<i>54</i>	<i>10,709</i>
<i>Sept 2007 Forecast</i>	<i>61,602</i>	<i>9,963</i>	<i>16,503</i>	<i>25,291</i>	<i>54</i>	<i>9,791</i>
<b><i>Nov 2007 Forecast</i></b>	<b><i>53,168</i></b>	<b><i>9,963</i></b>	<b><i>9,296</i></b>	<b><i>26,645</i></b>	<b><i>161</i></b>	<b><i>7,103</i></b>

TABLE D2

## Schemes with a forecast spend exceeding £500k in 2007-08

Scheme Detail By Directorate	Whole Scheme Cost £'000	Funded by	Current 2007-08 expenditure forecast £'000	Actual spend to 30-11-07	Comments
<b>Children &amp; Young People's Services</b>					
Sutton Primary Replacement School	2,811	Grant, Parish Council & capital receipts	2,144	914	Scheme running six weeks behind schedule however no funding issues reported to date
Riverside Amalgamation	9,005	Grant & capital receipts	4,540	2,004	Scheme in progress, should complete ahead of schedule
Minster School Replacement	20,086	Grant	866	33	To go out to tender in December 2007
Condition property works	n/a	SCE®	900	623	Annual programme of works
<b>Resources</b>					
Property Purchase	1,446	Grant	1,446	1,409	Purchase under Edgar St Grid development
<b>Corporate &amp; Customer Services</b>					
Herefordshire Connects – Social Care Solution	1,452	Prudential borrowing	944	-	Remainder of capital scheme currently on hold
<b>Environment Services</b>					
Rotherwas Access Road	11,697	Grant, LTP & prudential borrowing	7,459	4,374	This forecast does not include compensation claims that may become payable
Crematorium	3,150	Prudential borrowing	810	189	Cashflow requires careful management to avoid a VAT PE breach
Road Maintenance	n/a	LTP allocation	5,417	3,020	Annual programme of works yet to be fully committed for the year

<b>Scheme Detail By Directorate</b>	<b>Whole Scheme Cost £'000</b>	<b>Funded by</b>	<b>Current 2007-08 expenditure forecast £'000</b>	<b>Actual spend to 30-11-07</b>	<b>Comments</b>
Hereford Flood Defences	2,172	Private developer	2,172	-	Pending completion of legal agreement
Footways	n/a	LTP allocation	1,065	222	Annual programme of works
Ross on Wye Flood Alleviation	6,974	Grant	5,000	1,167	Scheme in progress
Assessment Strength of Bridges	n/a	LTP allocation	700	361	Annual programme of works
<b>Adult &amp; Community Services</b>					
Cattle Market	5,022	Capital receipts	1,150	134	Indications are that project cost will exceed initial assessments
Affordable Housing Grants	n/a	Capital receipts	2,000	1,421	Annual programme of works
Private Sector Housing	n/a	Grant & capital receipts	953	305	Annual programme of works
Friar St Museum and Resource Centre	2,040	Grant, prudential borrowing & capital receipts	1,364	796	Scheme delayed by eleven weeks effect on cost still under negotiations
Rotherwas Futures Est. Dev. Work	4,358	Grant & capital receipts	668	102	Scope of scheme to be finalised
Disabled Facilities Grant	n/a	Grant & capital receipts	712	373	Annual programme of works
Aylestone Hill Park	627	Prudential borrowing & private developer	507	515	Scheme complete
<b>Total</b>			<b>40,817</b>	<b>17,962</b>	
<b>Schemes with a forecast spend in 2007/08 of less than £500,000</b>			<b>12,432</b>	<b>4,322</b>	
<b>Total</b>			<b>53,249</b>	<b>22,284</b>	



**Managing Risk - Corporate Risks**  
November 2007



Stage One		Stage Two			Stage Three							
Identified Risk Area	Risk Reference Number	Assessment of Risk (Assume NO controls in place) using risk matrix			Responsible Directors	Potential Mitigation Strategy Summary	Assessment of Residual Risk (With control Measures Implemented)					
		Impact (Severity)	Likelihood (Probability)	Priority Rating			Impact (Severity)	Likelihood (Probability)	Residual Priority Rating			
Corporate spending pressures outweigh the level of resources available to meet them. Particular pressures prevalent in Adult Social Care, Childrens Social Care and ICT & Customer Service.	CR2	4	4	High	ALL/SR	The Council's Medium Term Financial Strategy highlights the requirements for all Directorate budgets to be managed within a 1% overspend tolerance. Budgetary pressures continue for both adult and children social care services. Contingency funding has been set aside within the Council's budget plan to help mitigate this risk. A significant overspend on social care budgets is currently expected. The forecast outturn for ICT & Customer Services is now significant under and over spends within that position. Additional budget pressures include flood recovery costs and unbudgeted revenue costs of the Siemens contract. A new potential pressure is grant clawback on the ARCH programme.	3	3	High	1. Budget management plan for A&CS agreed.  2. Budget management plan for C&YP agreed.  3. ICT base budget issues being examined by DC&CS with support from Financial Services.  4. Robust challenge of monthly budget monitoring reports from Directorates by Financial Services.  5. Medium Term Financial Strategy being reviewed	GH  SM  JEJ  DP  DP  DP	Target/Review Date
Failure to maintain CPA ~"3 star" rating and move from improving adequately to improving strongly	CR4	4	4	High	ALL/CB	The key threats to the direction of travel are now a failure to increase the proportion of satisfaction indicators that are improving year on year, data quality and adverse inspection results, recent governance/control issues and uneven annual service scores. The removal of the Council's current 'protected' corporate assessment score in 2008/09 will affect our star rating unless the national rules are changed or we achieve at least a score of 3/4 in each of the three 'first tier' services. The impact of the rules base approach to service scores could mean a drop in our star rating if any service dropped below a 2/4.	3	3	High	a) continue to respond positively to all corporate audits e.g. performance indicators and data quality, b) develop and implement robust improvement plans where audit results are poor, c) Direction of travel audit handled well, e) getting agreement for a standard approach prior to all future audits/inspections, f) redirect PIMs to the areas that need most support, g) Herefordshire connects provides corporate performance management solution - interim solution to be investigated.	a) TF b) relevant HoS/Director d) TG e) TG f) TG g) Herefordshire Connects Board/TG	d) November 07 e) January 08 f) as required g) visits to other authorities from January 08
					SR	Use of Resources Improvement Plan for 2006 has been implemented.				Use of Resources assessment for 2007 expected shortly, SR to lead on development of an improvement plan.	SR/ALL	
					CB/JJ	Considerable work has taken place embedding a strong performance management framework including structured meetings between Chief Executive and Directors. Performance Improvement Managers have been appointed for all Directorates. Additional support is being given to the service planning for 2008 through a series of training modules.				Action plans resulting from internal audit reviews implemented to agreed timescales	ALL	Ongoing
												November 07 - March 08

**Managing Risk - Corporate Risks**  
November 2007



Stage One				Stage Two			Stage Three		
Identified Risk Area	Risk Reference Number	Assessment of Risk (Assume NO controls in place) using risk matrix			Responsible Directors	Potential Mitigation Strategy Summary	Assessment of Residual Risk (With control Measures Implemented)		
		Impact (Severity)	Likelihood (Probability)	Priority Rating			Impact (Severity)	Likelihood (Probability)	Residual Priority Rating
						Action Description	Action Owner	Target/Review Date	
The inability to provide critical services due to the failure of the ICT networks	CR5	3	4	High	ALL/CB	Substantial capital investment has been made in ICT network and disaster recovery arrangements. Extensive ICT specific service continuity plans have been developed. Workshops held for all directorates and service continuity plans have been prepared and due for testing during the year in business critical systems and services. Monthly checks made to ensure amendments are made to all plans. The Council is reviewing the Community Network Contract with Siemens to ensure it provides value for money.			
Corporate Capacity to deliver a range of changes the Council has embarked upon.	CR7	4	3	High	CB	Programme Management, Clear Leadership and Senior Management Restructuring. Capacity issues identified within CPA inspection and were part of Improvement Plan. A minimum of 20% of corporate directorate time will be spent on corporate issues. Discussed by CMB as part of 2007 PIC and adjustments proposed for the budget. New CMB/ SMT joint working has also been launched.		Medium	
Achievement of LPSA2 targets and hence the Performance Reward Grant (PRG). Failure to manage future PRG will have a significant and detrimental impact on the Council's ability to invest in future performance initiatives in services.	CR8	3	3	High	JEJ	Herefordshire Partnership Manager and the Head of Policy & Performance now meet regularly with the assigned project manager and have agreed responsibilities for chasing progress and ensuring action. In addition performance indicators are reviewed every 2 months, in line with the Council's performance management arrangements, enabling proactive management through this management group.	JW/TG	a) BCG convened in August, thereafter meeting at least monthly (b) HCPB convened and meeting monthly	
Delivery of Local Area Agreement	CR9	3	2	Medium	JJ	Financial and performance management process in place and working. Herefordshire Partnership Performance Management Group (PMG) to monitor PIs and LAA Single Pot and agree detailed actions.		Medium	
Failure to recruit and retain staff where there are national skills shortages and including the impact of Job Evaluation. Ensuring consistent treatment of Equal Pay Claims.	CR11	3	3	High	ALL/GC	Succession planning as part of management development provision  Utilise SRDs / implement career development posts and conclude job evaluation. 94% SRDs completed by the end of May. HR to support Directorates deliver to identified training needs, to work to investor in People standard.  Focused recruitment activity to support identified shortages e.g. Social Work (Childrens) and more recently difficulties in recruiting to Asset Management & Property Services posts, plus development of a workforce plan, and work to implement national data sets. Actions to address ICT shortages are in place, and progressing in Building Control.  Promote professional development support through training agreements and payment of professional fees. Develop secondment opportunities internally and with partners. Implement Market Forces Supplement. Improving leadership and management through revised management development provision.  Implement software to review new pay structure to ensure that it is equally proofed.  Pride in Herefordshire approach to be implemented.  Adult Strategy being developed first phase focusing on Learning Disabilities		Low	
Lack of development in the Adults Workforce Strategy					GH				
						Looking at traineeships in building control, overseas recruitment for social workers. Council's establishment to be reviewed quarterly.		Mar-08	
						Market Forces Supplement in place. Numbers in receipt of MFS included in quarterly directorate performance reports.			
						Equal pay software implemented and initial review in progress. Review completed by end of Jan '08.	GI Cheesman	Jan-08	
						Awards ceremony arranged			
						Initial focus on learning disability	GC		

**Managing Risk - Corporate Risks**  
November 2007



Stage One		Stage Two				Stage Three						
Identified Risk Area	Risk Reference Number	Assessment of Risk (Assume NO controls in place) using risk matrix			Responsible Directors	Potential Mitigation Strategy Summary	Assessment of Residual Risk (With control Measures Implemented)			Action Description	Action Owner	Target/Review Date
		Impact (Severity)	Likelihood (Probability)	Priority Rating			Impact (Severity)	Likelihood (Probability)	Residual Priority Rating			
Lack of development in the Children's Workforce Strategy					SM	Children's draft workforce strategy agreed in principle and implementation plans being developed					Shaun McLurg	
Approach to Diversity. Risk of not achieving level and not improving Standard	CR12	3	2	Medium	JEJ	Long term development plan produced. EIA action plans to be incorporated into Service Plans and monitored through the performance management process. The approach needs improving for 2007/08		2	Medium	a) increased/improved training provision focussed on critical services. B) improved service planning guidance and adherence to this. c) corporate focus in contracts and consultation requirements. D) external assessment during 2007/08	a) CT b)TG/ail HoS c) CT / DH / MHR d) CT	a) from June 2007 b) October 07 - March 08 c) July 07 - March 08 d) March 08
Review of Accommodation Strategy.	CR13	4	4	High	SR	An Accommodation Strategy Group has been established to review future options for the new Council to consider in Autumn 2007. Cabinet are considering officer recommendations.		2	Medium	Future options for consideration by Council have been developed by the Accommodation Strategy Group.	SR	Jan-08
Timetable for the establishment of a Public Services Trust for Herefordshire	CR15	3	2	Medium	CB	A Project Manager appointed. Steering group and work streams established.		2	Medium			
Failure of Waste Management Contract leading to failure to meet diversion targets and the potential for the Authority to be paying £150 per tonne extra on our missed target tonnages. Failure of the contract would also lead to the loss of PFI credits	CR16	4	3	High	MH	"Ongoing commitment from Herefordshire and Worcestershire (H&W) to retaining the existing contract. The incorporation of subcontractors into the existing contract as a variation should enable adequate waste to be diverted to ensure the authority does not become subject to penalties under the Landfill Allowance Trading Scheme (LATS).		2	Medium	"H&W have an agreement to Trade LATS between the two authorities at "no cost" to offset risks - this risk needs to be formalised. The failure of negotiations with ReEnergy means that the issue of MWM identifying and introducing a new sub-contractor will need to be monitored to ensure early warning can be given of likely timescales for the negotiations and implementation of a varied contract. Because of the timescales involved in delivering a variation to the Contract it will be necessary to offset our risks of LATS penalties by maximising our recycling performance, through Waste Collection, to deliver increased diversion from landfill. In addition the two authorities are now also negotiating a contract to secure capacity at an Energy from Waste Plant to ensure we collectively meet our diversion targets.	MH	
Reduction in the Use of Resources overall assessment	CR17	4	2	Medium	SR	Adverse opinion on Value for Money in Annual Governance letter, due to the financial governance issues in ICT & Customer Services highlighted in the Section 151 Officer report dated 20.09.07 and the Crookall report, will impact on the 2007 Use of Resources score for Internal Control and Value for Money.		3	High	Directorate Management Teams to review progress implementing actions arising from internal audit reviews on a monthly basis.	ALL	Ongoing
Benefits CPA Score 2007	CR18	2	2	Low	SR	The BFI Performance Measures have been monitored closely. We have regained a 3 score.		1	Low	The BFI has confirmed the self assessment in November 2007. This is now a 'good' service.	SR	Completed for 2007

Managing Risk - Corporate Risks  
November 2007



Stage One				Stage Two				Stage Three				
Identified Risk Area	Risk Reference Number	Assessment of Risk (Assume NO controls in place) using risk matrix		Potential Mitigation Strategy Summary	Responsible Directors	Assessment of Residual Risk (With control Measures Implemented)		Action Description	Action Owner	Target/Review Date		
		Impact (Severity)	Likelihood (Probability)			Priority Rating	Residual Priority Rating					
The inability of the Council to provide critical services and an effective emergency response due to non-IT related failures (Loss of accommodation, staff or resources)	CR19	4	3	High	Service continuity plans are in place to mitigate the effects of major incidents on the delivery of essential services. A monthly review of Service Impact assessments and continuity plans ensures the plans meet the changing requirements of the Council. Annual update of Council emergency response plans in support of the emergency services and the Council's arrangements to assist recovery and return to normality of the community and environment following an emergency. Bi-annual exercising of the Emergency Response Team. Annual exercising of emergency response plans.	ALL/GB	2	2	Low	A major review of service continuity plans to be undertaken in 07/08 to ensure compliance with BS 25993.	ALL	Ongoing
CRB process not carried out to an appropriate and reliable level	CR27	4	3	High	Officers agreed areas of concern and an action plan to be drawn up to redress the issues as quickly as possible.	SM	4	2	Medium	Action plan to be developed that will address the 7 areas of concern as raised by the Director of C&YP. Appropriate financial support to be allocated so that the recommendations of the plan can be actioned speedily and readily. Report to Members.	SM	
Deliverable benefits from Herefordshire Connects not realised	CR28	4	3	High	The MTFMS highlights the investment and expected savings in the short and long term whilst minimising service cuts to balance the budget. Benefit realisation framework in place and being managed through Benefits and Commercial Group (BCG), IPG and Programme Board. The Herefordshire Connects programme is in 'strategic' pause. Savings are being utilised to balance Directorate budgets.	JEJ	3	3	High	a) BCG in place and meeting regularly, benefits envisaged to be assessed at each meeting; b) Programme Board receive regular exception reports; c) Actual investment and savings monitored against the MTFMS.	a) DP b) AK c) DP	Monthly, next review January 2008
Both Data Centres are in leased accommodation, are near capacity, as there are environment issues such as power and fire suppression that need to be addressed. Loss of data centres will affect delivery of all services. This is linked with accommodation strategy CR13	CR29	4	4	High	Decisions required form accommodation strategy to establish where future data centres should be located. Project to be established to relocate data centres to these locations. Investment required, server virtualisation will reduce risk in part.	JJ / SR	4	4	High	To be completed by risk owner		
Legacy systems out of support with vendors, and on old hardware. Compounded by CR28 Benefits from Connects eg Cedar	CR30	4	4	High	Establish which systems are deemed critical and make good the systems. Any expenditure may need to be deducted from connects benefits.	JJ/SR	1	1	Low	To be completed by risk owner		
Disaster Recovery and Business continuity does not fully support critical systems	CR31	4	4	High	Immediately establish some recovery process for each system. Then in conjunction with Data Centre relocation CR29 implement DR to support systems to agreed recovery parameters and Business Continuity	JJ/SR	1	1	Low	To be completed by risk owner		
Currently the council's websites use the Star internet feed which is becoming increasingly unreliable. The TOM target is to move the internet feed to the 16 Mbytes pipe as soon as possible however feedback from Networks is that this is already reaching capacity usage at peak times from School traffic which WLEVEY uses this feed. In addition the additional demands on this bandwidth but the level of additional traffic is not known	CR32	4	4	High	Siemens are currently working on an alternative supplier to BT, whose costs are very high, and they hope to significantly reduce the costs provided so far. These costs will also take into consideration any cancellation charges as the BT circuits were procured on a 3 year rental basis. Also, these costs will be based on the service being provided to the 2 current data centres; if internet feeds are required at any new data centres it would require a "B" end shift(s). In reality, this will be a new circuit and no provider will provide costs for doing this until the final destinations are known and the router/fibre capacity etc checked out.  The technology used by BT the current feeds can only be increased up to a total bearer bandwidth of 34Mb which gives 32Mb of usable bandwidth (limitation of ATM) (Asynchronous Transfer Mode) over SDH (Synchronous Digital Hierarchy). As mentioned above Siemens are looking at other technology options that can provide bandwidths from 30Mb up to 120Mb for HC to consider. Another option is to retain the existing 16Mb feeds for corporate and install totally new ISP internet feed for schools	ALL	4	4	High	To be completed by risk owner		

Signed: \_\_\_\_\_ Position: \_\_\_\_\_

Date: \_\_\_\_\_



**Managing Risk - Corporate Risks  
November 2007**



Stage One		Stage Two		Stage Three		
Identified Risk Area Key to Assessment of Risk Scores	Risk Reference Number	Assessment of Risk (Assume NO controls in place) using risk matrix		Responsible Directors	Assessment of Residual Risk (With control Measures Implemented)	
		Impact (Severity)	Likelihood (Probability)		Priority Rating	Residual Priority Rating

Impact Rating	Score	Description/Examples
Catastrophic	4	<ul style="list-style-type: none"> <li>One or more fatalities</li> <li>Service disruption for more than 5 days</li> <li>Adverse national publicity</li> <li>Financial loss up to 75% of budget</li> <li>Litigation almost certain and difficult to defend</li> <li>Breaches of law punishable with imprisonment</li> </ul>
Critical	3	<ul style="list-style-type: none"> <li>Extensive, permanent injuries, long term sick</li> <li>Service disruption 3 - 5 days</li> <li>Adverse local publicity</li> <li>Major injury to individual/several people</li> <li>Litigation is expected</li> <li>Financial loss up to 50% of budget</li> <li>Breaches of law punishable by fines only</li> </ul>
Significant	2	<ul style="list-style-type: none"> <li>Severe injury to individual/several people</li> <li>Service disruption 2 - 3 days</li> <li>Needs careful public relations</li> <li>Financial loss of up to 25% of budget</li> <li>Higher potential for complaint, litigation possible</li> <li>Breaches of regulations/standards</li> </ul>
Negligible	1	<ul style="list-style-type: none"> <li>No injuries beyond first aid level</li> <li>No significant disruption of service capability</li> <li>Unlikely to cause any adverse publicity</li> <li>Financial loss of up to 10% of budget</li> <li>Unlikely to cause complaint/litigation</li> <li>Breaches of local procedures/standards</li> </ul>

Likelihood Rating	Score	Description
Very Likely	4	Is expected to occur in most circumstances i.e. there is a more than 75% chance of occurrence.
Likely	3	Will probably occur in most circumstances, i.e. there is a 40 - 75% chance of occurrence.
Unlikely	2	May occur in exceptional circumstances i.e. there is a 10 - 40% chance of occurrence.
Very Unlikely	1	Is never likely to occur i.e. a less than 20% chance of occurrence.





## HEREFORDSHIRE SATISFACTION SURVEY 2007

### PORTFOLIO RESPONSIBILITY: CORPORATE & CUSTOMER SERVICES AND HUMAN RESOURCES

**CABINET**

**24 JANUARY 2008**

#### **Wards Affected:**

County-Wide

#### **Purpose**

To summarise the findings of the recent survey and the corporate actions that will be taken as a result.

#### **Key Decision**

This is not a Key Decision.

#### **Recommendations**

**THAT Cabinet note the results of the survey and approve the actions outlined in paragraphs 21 to 26**

#### **Reasons**

Customer satisfaction should be at the centre of every authority's improvement programme. Satisfaction levels generally are not high across the country although it varies between services. Top performing authorities generally manage combine quality service provision with high levels of customer satisfaction. Satisfaction levels will become even more important under the Comprehensive Area Assessment from 2009. The authority should take action to improve its satisfaction ratings where this is required.

#### **Considerations**

##### **The background**

1. Local authorities have had a statutory duty to conduct best value general surveys every three years, the last being in 2006. This authority also conducts a similar survey in the intervening years to provide more recent information to inform service improvement planning. This report relates to the latest survey, which was conducted in autumn 2007.
2. The survey covers best value indicators for a number of council provided services

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Further information on the subject of this report is available  
from Tony Geeson, Head of Policy and Performance on 01432 261855

such as waste collection, cultural and recreational facilities and venues and complaints handling. It also tracks residents' perceptions of a broader range of issues including the quality of life in Herefordshire.

3. The survey data has been weighted to correct for over or under representation of citizens based on a number of demographic factors (for example, age) according to the Audit Commission methodology for the statutory surveys.
4. The full report on the survey is attached at appendix 1. It includes the detailed results of the survey together with the results for previous years - as far back as 2000 for some indicators. Where available, comparison is made with median and quartile results for all English authorities up to the latest available (2006).
5. The full report on the survey was distributed to CMB and heads of service in December. A summary article will be published in the January edition of Herefordshire Matters and the report will be made available on the Council website at the same time.
6. The Department for Communities and Local Government is currently consulting on a successor to the best value general survey – the one conducted in 2006 is the final one in that form. Planned for introduction in autumn 2008, it is called the new Place Survey and will be radically different. It will focus much more on residents' perspectives on living in Herefordshire rather than the service related topics previously included.

### Summary of findings

7. 1,578 completed questionnaires were returned from the 3,954 successfully delivered to households across the county, giving a response rate of 40% which is fairly typical for this type of survey.
8. The majority of the indicators have not changed significantly since 2006, a few have improved and fewer still have deteriorated.
9. At 44%, the **overall satisfaction with Herefordshire Council** has not changed significantly since 2006 when it was 43% and in the bottom quartile of English authorities. This was the same quartile position in 2000 and 2003.
10. When considering how various aspects affecting **quality of life** are perceived to have changed over the last three years:
  - The most positive aspects are education provision, sports and leisure facilities and access to nature. In each of these cases more respondents feel these have got better rather than worse.
  - The worst are the level of traffic congestion (where for instance 4% say it has got better, 74% say got worse), wage levels / local cost of living, affordable decent housing, and road and pavement repairs.
11. A large majority (79%) of residents were satisfied with their **local community as a place to live**. This is similar to the 2006 result.

12. Of the eleven aspects of **anti-social behaviour** included in the questionnaire, one has improved - fewer respondents find drug use or dealing a problem in their local area. One has deteriorated - more respondents consider attacks on people due to skin colour, ethnic origin etc to be a problem in their local area and the remainder have not changed significantly.
13. The "Respect Agenda" score, which is a composite of several of the anti-social behaviour aspects, has not changed significantly since 2006 and therefore maintains the improvement seen since 2003.
14. **Ease of access to services** has improved for three services out of fifteen (dentist, sports / leisure centre and cultural / recreational facility), and deteriorated for one (post office).
15. With regard to **waste services**, since 2006, satisfaction with household waste collection has improved (82% to 88%) and there has been no significant change with litter clearance (66%) or local recycling facilities (70%). Satisfaction with doorstep recycling has fallen from 69% to 63% and the local tip from 87% to 79%.
16. There has been no significant change with the satisfaction of users of the 5 aspects of **cultural and recreational services** included. (sports / leisure facilities and events, libraries, museums and galleries, theatres / concert halls, and parks and open spaces).
17. The two most commonly used **sources of information** about Herefordshire Council are information provided by the Council itself followed by the local media. In 2006 the same two were the most popular, but the local media was top.
18. 20% of respondents had contacted the Council with a complaint. Of these, 27% were satisfied with the way it was handled. The apparent drop in satisfaction with **complaints handling** (from 36% in 2006) is not significant (The sample size of around 300 complainants requires a large difference to be statistically significant). In 2006 Herefordshire Council was in the 2<sup>nd</sup> quartile of all English authorities.
19. 17% of respondents **volunteered** their unpaid help to groups, clubs or organisations in the last 12 months for an average of 2 hours or more per week. This is not significantly different from 2006.
20. 30% of respondents felt they could **influence decisions** affecting their local area. This score has not changed significantly since 2006.

### **Action plan**

21. The results of the survey are being communicated to members, officers and the public – see the communications plan in paragraph 27 below.
22. Directors and heads of service will use the survey findings to further inform their service improvement planning. To provide further insight, the full report also includes analysis of the results by factors such as respondents' age, gender and the rurality of the area in which they live.

23. The Herefordshire Voice citizens panel programme complements the satisfaction survey and will be used to further investigate specific aspects of the findings. These will be selected based on aspects where more information is needed in order to better understand what actions are required to improve the satisfaction ratings.
24. Customer feedback produced by surveys such as this is a valuable source of information for public services such as the Council. In common with many authorities, we do not currently make sufficient use of such data. To go some way to rectifying this, the Council has agreed to join a project sponsored by the Regional Partnership for Improvement and Excellence that is designed to identify and share best practice.
25. Looking to the future, the forthcoming Comprehensive Area Assessment means that central government and regulatory bodies will be emphasising customer's opinions in their judgements of local authorities and their partners. The new Place Survey will be one of their key sources of comparative customer data but it will not cover all aspects. This is an additional reason for the Council to develop a full range of customer data and use it in a demonstrable way.
26. As part of its continuing programme of improvement, the Council will need to make explicit efforts to maintain high satisfaction levels where they exist and increase them where required. There is already some information from national studies that identifies the main drivers of improved satisfaction. These include aspects of what is referred to as 'street scene' and simply communicating what is being done. In future it will be necessary to focus both on those actions that are important, as well as those that make a real difference.

### **Communications plan**

27.
  - Basic results published to CMB and Heads of services 26<sup>th</sup> November – done
  - Full report published to CMB and heads of service 19<sup>th</sup> December – done
  - News and Views article published – 7<sup>th</sup> January
  - Report to CMB – 14<sup>th</sup> January
  - Leader's briefing – 15<sup>th</sup> January
  - Summary e-mailed to Members and full report referenced (internet) – 16<sup>th</sup> January
  - Hard copies available to members – 16<sup>th</sup> January
  - Herefordshire Matters article published – 21<sup>st</sup> January
  - First Press article published - 25<sup>th</sup> January
  - Included in member's seminar - 25<sup>th</sup> February

### **Financial and Legal Implications**

There are no financial implications. The survey is funded from with the base budget of the policy and performance service as is the citizens panel. Action by individual service will be funded from their base budgets

There are no legal implications although there is a requirement to conduct the survey currently every three years and it is expected that it will also be a requirement that the replacement survey is conducted, probably annually.

## **Risk management**

The authority has to comply with Government requirements. In addition a failure to address levels of customer satisfaction will damage its reputation locally, regionally and nationally as well as having a potentially adverse impact on future inspection scores, partnership working etc.

## **Alternative Options**

The alternative would be to ignore the results or appear unwilling to learn from them. This would incur the risks outlined in the preceding section.

## **Consultees**

None. This is a report of a survey whose content is largely prescribed by central government. Any consultation will be on the types of response required and their timing. Where necessary, this will follow Cabinet approval of this report

## **Appendices**

Appendix 1

Herefordshire Satisfaction Survey 2007 – Full report – Issue 1, December 2007.

## **Background Papers**

Appendix 1 above







HEREFORDSHIRE  
COUNCIL

## **Herefordshire Satisfaction Survey 2007**

### **Full Report – Issue 1** December 2007

Herefordshire Council Research Team

Contact address: [researchteam@herefordshire.gov.uk](mailto:researchteam@herefordshire.gov.uk)  
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# Contents

Executive Summary .....	4
Introduction .....	7
Methodology.....	7
Report Contents .....	9
Results .....	11
Section 1: About your local area.....	11
Changes in quality of life .....	11
Satisfaction with the local area as a place to live .....	17
Satisfaction with the local community as a place to live .....	17
Anti-social behaviour.....	20
Community relations.....	28
Access to local services.....	30
Section 2: Your local authority.....	33
Waste and litter services.....	33
Household waste collection .....	34
Doorstep recycling collection .....	35
Local recycling facilities .....	37
The local tip / household waste recycling centre .....	38
Public transport information .....	39
The local bus service .....	41
Cultural and recreational activities and venues .....	44
Sports / leisure facilities and events .....	44
Libraries.....	46
Museums and galleries .....	48
Theatres / Concert halls .....	51
Parks and open spaces.....	53
Other services provided by Herefordshire Council .....	55
Planning Services.....	55
Personal social services.....	57
Local authority education service .....	58
Overall satisfaction with the authority .....	60
Section 3: Information about Herefordshire Council and its services .....	63
Information provision .....	63
Finding out about Herefordshire Council.....	65

Section 4: Contacting Herefordshire Council.....	67
Making a complaint.....	67
Contacting Herefordshire Council for other reasons.....	70
Satisfaction with customer service .....	72
Section 5: Local decision making and your local community .....	73
Satisfaction with opportunities for participation .....	73
Ability to influence decisions affecting the local area .....	75
Ability to influence decisions affecting the local community .....	75
Section 6: Volunteering through organisations.....	77
Section 7: About yourself.....	80
Access to technology at home .....	80
Transport to work .....	82
Respondents' comments.....	83
Respondent profile .....	85
Appendix 1: Further background data.....	89
Section 1: About your local area.....	89
Section 2: Your local authority.....	95
Section 3: Information about Herefordshire Council and its services .....	103
Section 4: Contacting Herefordshire Council.....	107
Section 5: Local decision making and your local community .....	108
Appendix 2: Medians and quartiles .....	109
Appendix 3: Ward groups.....	110
Appendix 4: Urban / rural categories.....	111
Appendix 5: Deprivation quartiles .....	111
Appendix 6: The questionnaire .....	112

## Executive Summary

- Every three years, each authority in the country is required to carry out a Best Value General Survey, known locally as the "Herefordshire Satisfaction Survey". In addition, Herefordshire Council carries out a similar survey in the intervening years. The last statutory survey was completed in 2006; this is the report of the 2007 intermediary survey.
- The aim of the survey is to find out what people think of the Council's service delivery and the quality of life in Herefordshire, and to provide data to monitor performance of the Best Value Performance Indicator (BVPI) scores between statutory surveys.
- This report contains the results of the 2007 Herefordshire Satisfaction Survey and comparisons with the results in previous years, with national trends where these are available<sup>1</sup>.
- In September 2007 a postal survey was sent to 4,000 households in Herefordshire (5% of the 81,739 residential and mixed business / residential addresses in the county).
- Of the 3,954 which were successfully delivered, 1,578 questionnaires were completed and returned, giving a response rate of 40%. This is a fairly typical response rate for a Satisfaction Survey, but is lower than the 51% response seen in 2006.

### *Key findings:*

- The overall level of satisfaction with Herefordshire Council has not changed significantly since 2006 (43% in 2006, 44% in 2007). The pattern of no change seen in this headline score can be found repeated in perceptions of many other services and aspects of life in Herefordshire throughout this survey report. Relatively few scores have shown a significant change since 2006, whether positive or negative.

The following bullet points summarise the significant changes seen:

- Out of a total of twenty, the results for two aspects of quality of life have improved and two have deteriorated since 2006.
- Of eleven aspects of anti-social behaviour, one has improved and one has deteriorated.
- Ease of access to services has improved for three services out of fifteen, and deteriorated for one service.
- Of the five waste-related services, one has improved while two have deteriorated.
- With regard to the Council's information provision, one aspect has improved out of a total of ten.
- The top two most commonly used sources of information about Herefordshire Council this year (information provided by the Council, followed by the local media) have swapped relative positions since 2006.
- Access to the internet, email and broadband in the home has increased since 2006.

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<sup>1</sup> If you have any questions regarding comparison of these results with other sources please contact the Research Team on 01432 383615.

*Summary of survey results:*

- When considering how aspects affecting **quality of life** are perceived to have changed over the last 3 years, the most positive aspects are education provision, sports and leisure facilities and access to nature. The worst are the level of traffic congestion, wage levels and the local cost of living, affordable decent housing, and road and pavement repairs. Since 2006, results have improved for public transport and the level of traffic congestion; results have deteriorated in affordable decent housing and wage levels and the local cost of living.
- 69% of respondents were satisfied with their “**local area**” as a place to live, while 79% were satisfied with their “**local community**” as a place to live. Neither score has changed since 2006.
- With regard to **anti-social behaviour**, most aspects have not changed significantly since 2006. However, there has been a significant improvement since 2006 in the perception of people using or dealing drugs, and a significant deterioration in the perception of people being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation (since 2005, when this question was last asked). Overall, 27% of respondents perceive their local area to have a “high” level of anti-social behaviour (based on the “Respect Agenda” score – see the anti-social behaviour section of this report for an explanation of this score). This has shown no change since 2006.
- Around half of respondents agreed that the local area was somewhere where **people from different backgrounds got on well together**, which is not significantly different from 2006.
- Perceived ease of **access to services** has improved with regard to a dentist, a sports / leisure centre, and a cultural / recreational facility (e.g. a theatre or cinema). There has been a deterioration with regard to ease of access to a Post Office.
- In **waste services**, the following patterns have been seen in the level of satisfaction since 2006:
  - **litter clearance** has shown no significant change
  - **household waste collection** has improved (82% to 88%)
  - **doorstep recycling** has deteriorated (69% to 63%)
  - **local recycling facilities** have shown no significant change
  - **the local tip** has deteriorated (87% to 79%).
- There has been no significant change in satisfaction with **public transport information** amongst those who have seen or received that information. Amongst bus users, the apparent rise in satisfaction with the **bus service** is not statistically significant.
- With regard to **cultural and recreational services** (i.e. **sports / leisure facilities and events, libraries, museums and galleries, theatres / concert halls, and parks and open spaces**) there has been no significant change in satisfaction amongst users of each service.
- Amongst respondents who have used each of **planning, personal social, or local education services**, or who have a family member who is a user of each service, there has been no significant change in satisfaction with the services.

- At 44%, **overall satisfaction with the authority** has shown no significant change since the score of 43% in 2006.  
Analysis against the answers given to other questions in the survey (for example satisfaction with individual Council services) has been carried out, with the aim of highlighting services or areas which have a strong impact on overall satisfaction. However, a strong positive relationship was found between overall satisfaction, and almost every other question against which it was analysed, i.e. respondents who are satisfied with the Council overall also tend to be satisfied with the individual services. It is not possible therefore to pinpoint a service or services which are more important in driving overall satisfaction with the Council.
- For the individual aspects of **information provision**, the only significant change since 2006 was seen in what the Council spends its money on. 60% of respondents feel well informed, compared to 54% well informed in 2006. 44% feel well informed about the Council overall (no significant change since 2006).
- The most commonly used main source for finding out about the Council is information provided by the Council, followed by the local media. These top two **information sources** have swapped relative positions since 2006, when the local media was the most commonly used.
- 20% of respondents had contacted the Council with a complaint. Of these, 27% were satisfied with the way it was handled. The apparent drop in satisfaction with **complaints handling** (from 36% in 2006) is not statistically significant.
- When **contacting the Council** for reasons other than to make a complaint, the most common method of doing so was by telephone (65% of respondents), followed by contact in person (29%).  
Amongst those who made contact in person, 40% did so at an “**Info in Herefordshire**” centre, while 58% went to a different Council building. Amongst those who telephoned, just 2% called “**Info by Phone**”. 47% called the main Council switchboard, and 43% called a member of staff or department directly.
- When looking at satisfaction with aspects of **customer service**, none has shown a significant change since 2006. No significant differences in satisfaction were seen between respondents who used each phone number or point of contact.
- 28% of respondents were satisfied with the opportunities for **decision making** provided by the Council, which is not significantly different from 2006. 30% felt they could **influence decisions** affecting their “local area”, while 33% felt they could influence decisions affecting their “local community”. Neither of these scores has changed significantly since 2006.
- 17% of respondents **volunteer** for an average of 2 hours or more per week, which is not significantly different from 2006.
- **Access to technology at home** has increased since 2006 with regard to the internet, e-mail and most markedly in broadband.
- Driving a car (either with or without a passenger) is the usual method of **transport to work** for 66% of respondents who are in employment. 11% normally walk, and 2% normally use a form of public transport. There has been no significant change in the use of any forms of transport to work.

## Introduction

Every three years, the Department for Communities and Local Government (previously Office of the Deputy Prime Minister, ODPM) requires each local authority in the country to carry out a Best Value General Survey, known in Herefordshire as the "Herefordshire Satisfaction Survey". The aim of the surveys is to find out what people think of the Council's service delivery and the quality of life in Herefordshire, and to provide data for Best Value Performance Indicators (BVPIs).

To track performance between statutory surveys and to aid improvement, Herefordshire Council has made the decision to carry out a similar survey annually. Statutory surveys took place in 2000, 2003 and 2006, while intermediary surveys began in 2005. This is the report of the 2007 survey, which is the second intermediary survey to have taken place.

## Methodology

Herefordshire Council Research Team conducted the survey, in line with guidance produced by the Audit Commission on behalf of the Department for Communities and Local Government (DCLG). The survey used postal, self-completion questionnaires. The Research Team obtained a file containing all 81,739 residential and mixed business / residential addresses in Herefordshire. 4,000 addresses were selected, spread evenly through the list (i.e. a systematic sample). This was considered sufficient to easily achieve the 1,100 responses needed to ensure statistical reliability. 4,000 addresses represent around 5% of the 81,739 residential and mixed addresses in the county.

Following the initial mailing at the start of September 2007, two reminder letters were sent at approximately 2 week intervals. A total of 6 weeks was initially timetabled for survey returns. However, Royal Mail postal strikes during this period forced an extension to the original deadline of 12<sup>th</sup> October. Returns were accepted as late as possible after this date, and all returns received by 1<sup>st</sup> November were included.

The majority of the questions included in the survey were repeats of questions that were statutory requirements in Best Value General Surveys. These included the BVPI questions and others which had been identified as necessary, most of which had been asked in previous Herefordshire Satisfaction Surveys. Data from these additional questions were required for certain local indicators and tracking local services. A copy of the questionnaire can be found in Appendix 6, at the end of this report.

Questionnaires were marked with a serial number for two reasons: in order to track responses and thus send reminders only to those who had not yet replied to the survey; and to link responses with their postcode from the address list, to allow geographic analysis of results. As each postcode typically refers to more than one household, this did not compromise respondents' anonymity.

The target population for the survey was the adult population (18 years and over) of Herefordshire. As each survey was sent to a household rather than a specific

individual, it included the instruction that it should be completed by any resident aged 18 or over at that address.

A total of 4,000 questionnaires were sent out, of which 46 were returned undelivered, giving a successful delivery of 3,954 questionnaires. 1,578 questionnaires were completed and returned, giving a response rate of 40%. This is a fairly typical response rate for a Satisfaction Survey, but is lower than the 51% response seen in 2006. The lower response this year may be explained to some extent by the less persistent reminders used – in 2006 there were two reminders, each containing a new copy of the questionnaire. This year, there were two reminder letters with contact details to request another copy of the questionnaire if needed.

Unless otherwise stated, the sample base is the number of valid responses to that question, and is the base from which the percentages are calculated. “Valid responses” excludes respondents who didn’t answer, or who ticked “don’t know”, from the sample base. This is in line with guidance published by DCLG for Best Value General Surveys, but may not always be consistent with calculations made by other organisations.

BVPI surveys are occasionally referred to using the financial year rather than the calendar year in which they took place, e.g. the 2007 survey would sometimes be referred to as 2007-08. For brevity in this report, the surveys are always referred to by the calendar year in which the questionnaire was sent out i.e. 2007.

### *Weighting*

Survey results have been weighted in line with the methodology used by the Audit Commission to weight Best Value General Surveys. The weighting scheme aimed to correct over- and under-representation in a number of demographic categories, namely respondents’ gender, age, household size, and ethnicity. For example, we know from looking at the demographic makeup of the county and comparing it to the demographics of respondents to this survey that young males were less likely to respond than older females. Responses from young males were thus given more emphasis in the analysis, and responses from older females were given less emphasis. This helped to ensure that the results better reflected the views of all adult Herefordshire residents. It should be noted that results from the 2000 survey were not initially weighted, but the 2000 figures quoted in this report have been re-calculated making use of the 2003 weighting scheme. This makes them comparable with scores from other years, but means that they may differ from previously published 2000 figures.

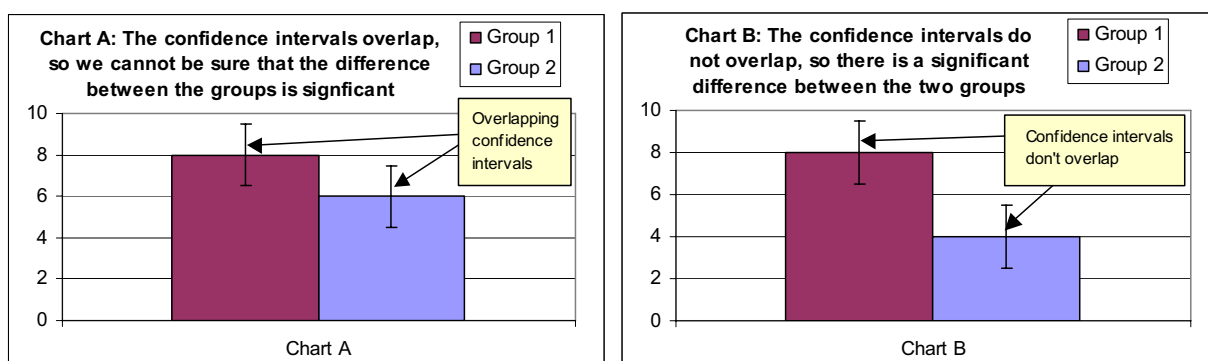
### *Confidence Intervals*

When estimating the views of the whole adult population of Herefordshire based on the views of those answering a question in the survey, a margin or confidence interval must be considered. This is calculated by taking into account the number of respondents to each question and the number ticking a particular answer option. As a guide, if there are 1,601 responses to a question and 50% have ticked a particular option, the 95% confidence interval is  $50\% \pm 2\%$ . This determines a range of 48% - 52% that is likely to contain the true value for the percentage of all adults in Herefordshire who would give that answer. With fewer responses, the width of the interval would increase. Irrespective of the number of responses, the confidence interval will be widest when 50% of respondents have ticked a particular answer



option. With a smaller or greater proportion ticking an answer option, the confidence interval would be narrower.

95% confidence intervals are presented on charts in this report, wherever a comparison is made between two sets of data. Examples of this include comparing data from different years, or when investigating the difference between groups of people – for example the difference in views held by different age groups. Confidence intervals are used as a clear and simple method of determining whether the difference between two groups is “statistically significant”, i.e. whether there is sufficient evidence to suggest that it reflects a real difference in the wider population. If the confidence intervals of the two comparative sets of data overlap, then the difference is not statistically significant (e.g. Chart A, below). If the confidence intervals do not overlap, then the difference is statistically significant (e.g. Chart B, below).



Whenever the term “significant” is used in this report, it is a shorthand for “statistically significant” at the 5% level. Thus a small but “significant” difference can occur, where the difference between groups is real, but not marked.

## Report Contents

The main body of this report contains tables, charts, commentary and further analysis, as appropriate, for all questions in the survey. Trend data showing how headline results have changed over time and comparisons with national quartiles are included where this data is available. For an explanation of quartiles, please refer to Appendix 2. The main body of the report largely follows the question order used in the questionnaire.

Appendix 1 contains further data which may be of use to service areas, such as confidence intervals and full details of quartile positions. These additional data were not included in the main body of the report in order to keep it as concise as possible. Not all questions are represented in Appendix 1.

Where appropriate, some questions have been investigated based on a number of different factors, including: demographic data, for example respondents age; geographic data, for example the rurality of respondents' residence; and the way respondents have answered other questions in the survey. This has not been carried out for all questions, but only for those where it was thought that there might be an interesting relationship.

It should be noted that in these further analyses, the existence of a statistically significant relationship does not necessarily imply a direct causal link. Satisfaction or dissatisfaction with services is likely to be dependent on a number of contributory factors, and the relationship may reflect the work of indirect factors. For example, it might be found that satisfaction with a service is higher amongst older respondents. However, older respondents might also be more likely to use the service, and users tend to be more satisfied than non-users. Thus the relationship of higher satisfaction amongst older respondents would really only be reflecting the higher usage of the service amongst those respondents.

The further analysis contained in this report, while hopefully covering the main areas likely to be of interest to service areas, is intended very much as an example of the information available from this data set. It is appreciated that there are many different ways in which the data can be investigated, and inevitably only a few have been included here. Readers are invited to contact the Research Team if they would like to discuss any further analysis, tailored to specific needs. Contact details can be found on the front cover of this report.

Percentages and confidence intervals are presented rounded to the nearest whole number. It should be noted that this rounding occasionally produces apparent anomalies in the presentation of grouped categories. For example, if 10.4% of respondents were “very satisfied”, and 10.4% were “fairly satisfied”, these percentages would be presented in the table as 10% and 10%. However, when presented as the total who are “satisfied”, the correct figure would be  $10.4 + 10.4 = 20.8$ . Rounded to the nearest whole number, this would be quoted as 21%. Thus at a glance, it would appear that  $10 + 10 = 21$ . Such anomalies will never be more than 1 percentage point. Whenever a difference is visible between the quoted figure and the figure obtained from adding two categories, the figure quoted in the commentary should be used.

An asterisk (e.g. \*% ) refers to a figure of less than 0.5, that would otherwise have been rounded to 0. These are presented this way in order to differentiate between a very low score and zero.

Unless otherwise stated, all data are weighted (please refer to the weighting section of the methodology on page 8 for an explanation of the weighting scheme used).

# Results

## Section 1: About your local area

### Changes in quality of life

*Q1: Thinking about your local area, for each of the following things below, do you think each has got better or worse over the last three years, or has it stayed the same?*

Note that this question asks about changes to aspects of quality of life, and not simply whether they are good or bad. The net score is the percentage who said each aspect had got better, minus the percentage who said it had got worse. A positive score means more people said “better” than said “worse”. A negative score means more people said “worse” than “better”. Net scores are in percentage points, hereafter presented as “pp”.

<b>Q1: Changes in quality of life</b>					
	Better	Same	Worse	Net	Base
Access to nature	11%	82%	6%	+5	1,330
Activities for teenagers	9%	51%	40%	-31	937
Affordable decent housing	6%	31%	63%	-57	1,237
Clean streets	9%	54%	37%	-28	1,468
Community activities	13%	70%	18%	-5	1,122
Cultural facilities (e.g. cinemas, museums)	6%	73%	21%	-15	1,282
Education provision	20%	72%	9%	+11	1,094
Facilities for young children	19%	59%	21%	-2	971
Health services	13%	58%	29%	-16	1,406
Job prospects	5%	50%	45%	-40	1,053
Parks and open spaces	9%	74%	17%	-8	1,399
Public transport	13%	56%	31%	-18	1,236
Race relations	5%	73%	22%	-17	815
Road and pavement repairs	6%	32%	62%	-56	1,448
Shopping facilities	17%	61%	22%	-5	1,483
Sports & leisure facilities	16%	74%	10%	+6	1,279
The level of crime	4%	47%	49%	-46	1,251
The level of pollution	4%	53%	44%	-40	1,255
The level of traffic congestion	4%	23%	74%	-70	1,476
Wage levels & local cost of living	3%	30%	67%	-64	1,299

The best net scores can be seen in education provision (+11 pp), sports and leisure facilities (+6 pp) and access to nature (+5 pp). The worst scores can be seen in the level of traffic congestion (-70 pp), wage levels and local cost of living (-64 pp), affordable decent housing (-57 pp) and road and pavement repairs (-56 pp).

Changes in quality of life – trend over time				
	Net 2005	Net 2006	Net 2007	Change in net since 2006
Access to nature	+11	+5	+5	
Activities for teenagers	-30	-32	-31	
Affordable decent housing	-54	-50	-57	↓
Clean streets	-9	-23	-28	
Community activities	-5	-5	-5	
Cultural facilities (e.g. cinemas, museums)	-6	-14	-15	
Education provision	+8	+15	+11	
Facilities for young children	+2	-5	-2	
Health services	-17	-18	-16	
Job prospects	-35	-42	-40	
Parks and open spaces	+8	-3	-8	
Public transport	-13	-24	-18	↑
Race relations	-8	-13	-17	
Road and pavement repairs	-44	-51	-56	
Shopping facilities	-9	-6	-5	
Sports & leisure facilities	+9	+5	+6	
The level of crime	-45	-46	-46	
The level of pollution	-37	-42	-40	
The level of traffic congestion	-77	-77	-70	↑
Wage levels & local cost of living	-64	-56	-64	↓

Trends over time can be seen in the table above and the chart on the following page. As confidence intervals are not applicable to net scores, a change in the net score of 5 pp or more is considered sufficient to be likely to reflect a change in the wider population.

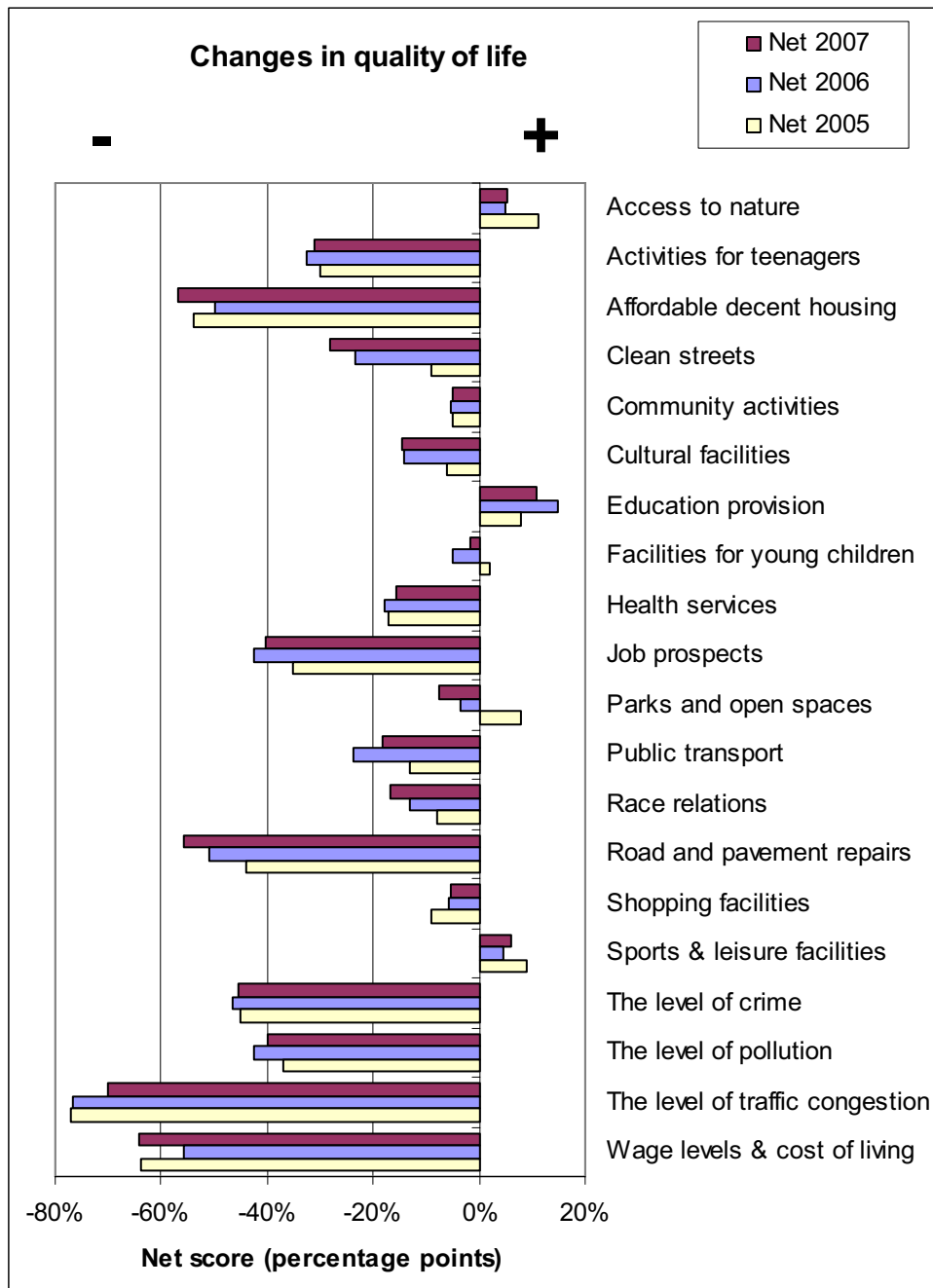
Note that presenting rounded figures gives the impression that some meet the 5 pp change threshold, when they in fact have not. This led to some additional changes mistakenly being highlighted in the early release of summary data report. *Only those figures accompanied by an arrow on the table above meet the 5 pp change threshold.*

The affordable decent housing net score of -57 pp has shown a deterioration from the score of -50 pp in 2006.

The public transport net score of -18 pp has shown an improvement from the score of -24 pp in 2006.

The level of traffic congestion score of -70 pp has shown an improvement from the 2006 score of -77 pp.

The wage levels and local cost of living score of -64 pp has shown a deterioration from -56 pp in 2006.



The net scores obtained were analysed to determine whether any differences of opinion were present amongst different groups of people. As when comparing previous years' data, a difference of 5 pp or more is considered sufficient to reflect a likely difference in the wider population.

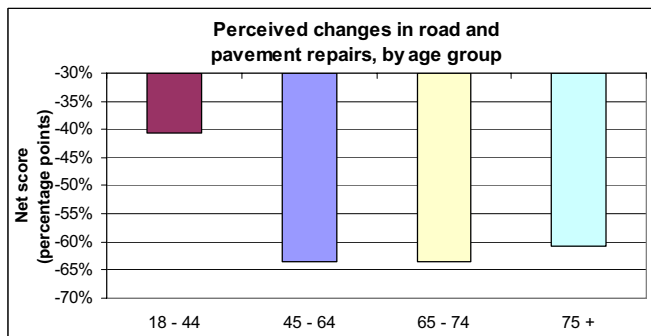
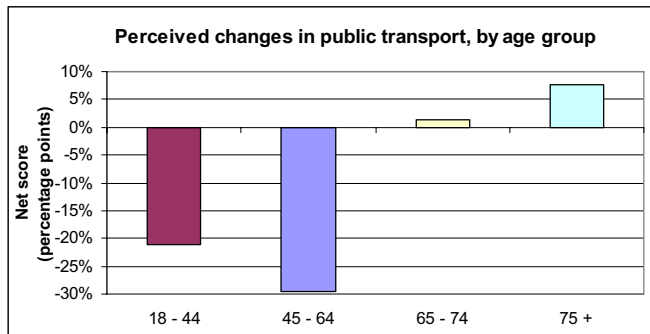
It is not possible to include charts for all those items meeting the 5 pp threshold, as there are too many which meet the criteria. The charts included are intended to highlight the most marked variations, or as an example of a recurring pattern.

Male respondents had higher net scores than female respondents with regard to education provision, job prospects and shopping facilities.

Females had higher net scores than males with regard to facilities for young children, public transport, the level of pollution and the level of traffic congestion.

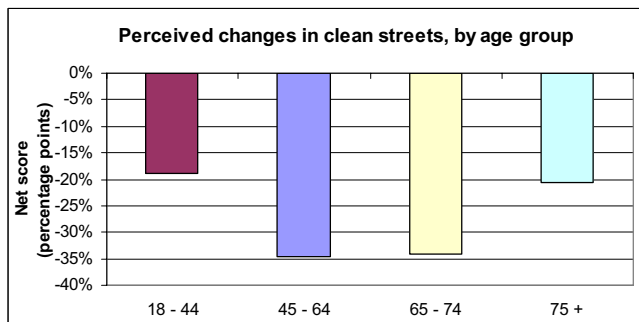
When looking at variation by respondents' age group, all the aspects of quality of life met the 5 pp threshold.

A pattern whereby respondents aged 18 to 64 had worse net scores than respondents aged 65 and over was seen in activities for teenagers, affordable decent housing, community activities, cultural facilities, facilities for young children, public transport and sports and leisure facilities.



A pattern of 18 – 44 year olds having better net scores than the older age groups was seen in job prospects, road and pavement repairs, the level of crime and the level of traffic congestion.

A pattern of the worst net scores being seen in the middle age groups (45 – 74 year olds) was seen in clean streets, education provision, health services, race relations and shopping facilities.



A peak with the best net scores in 65 – 74 year olds was seen in access to nature, parks and open spaces, and wage levels and the local cost of living.

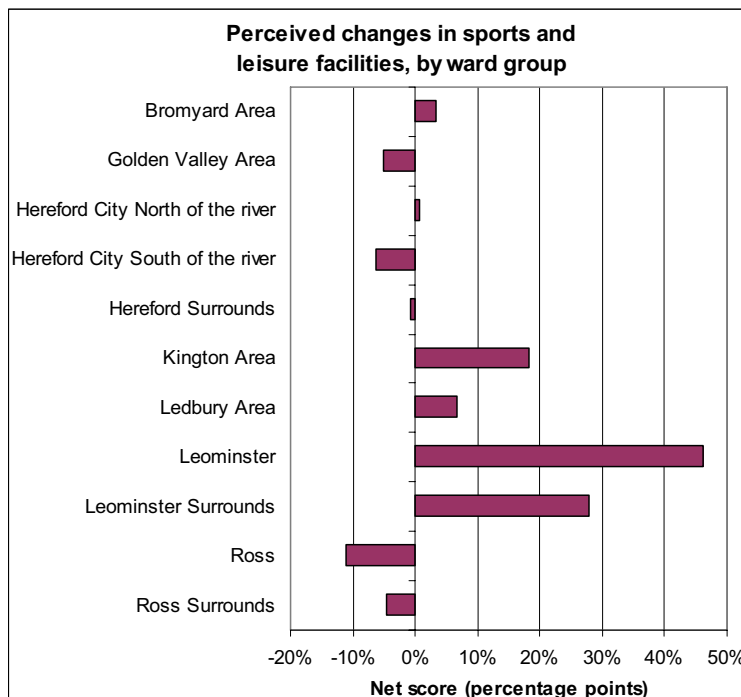
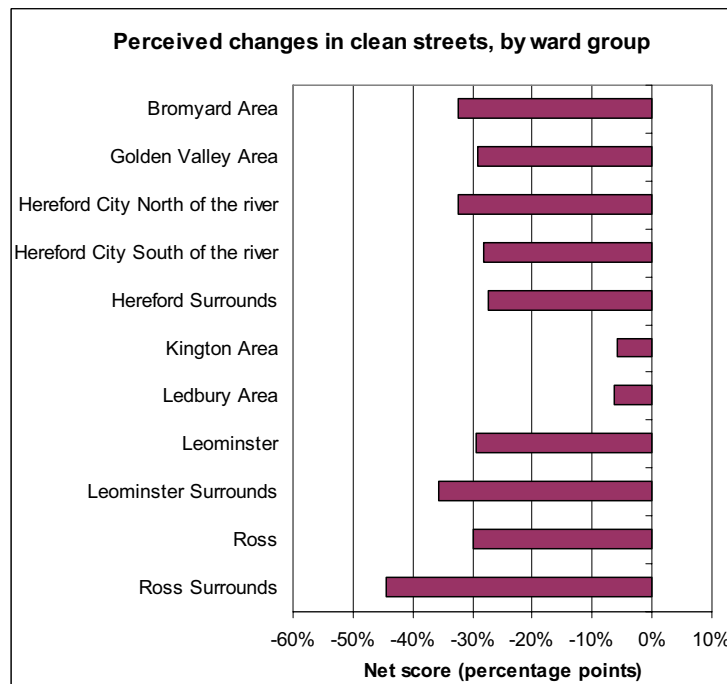
The level of pollution showed a better net score in 75+ year olds than in other age groups.

Variations between ward groups meeting the 5 pp threshold were seen in all aspects of quality of life. Please refer to Appendix 3 for an explanation of the ward groups used. There were a number of cases where a small number of ward groups were noticeably different from the majority, and only these are reported here. For full details of all variations by ward group, please contact the Research Team.

For activities for teenagers, Leominster Surrounds had the only positive net score at +8 pp, with Hereford City having the worst net score – South of the river at -45 pp, North of the river at -43 pp.

For road and pavement repairs, Kington Area had a net score of -26 pp, while most other groups lay in a range from around -50 pp to around -65 pp. Ross Surrounds had a score of -73 pp.

For clean streets, Kington Area and Ledbury Area had noticeably better net scores than other groups, each at -6 pp. Most other ward groups had scores between around -25 pp and -35 pp. Ross Surrounds had a score of -44 pp.

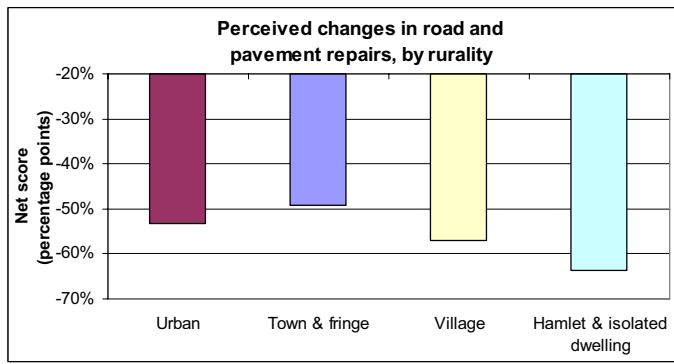
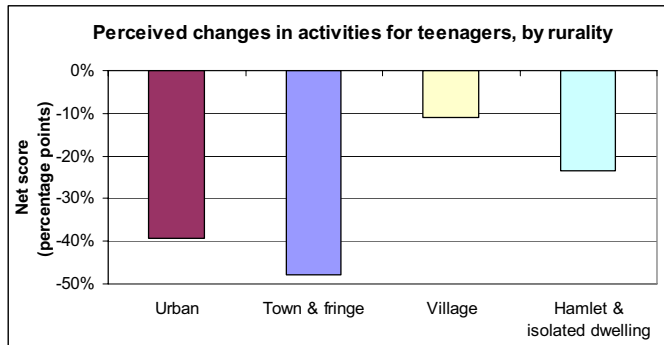


For sports and leisure facilities, Leominster, and to a lesser extent Leominster Surrounds, had markedly higher net scores than other groups (+46 pp and +28 pp respectively). Other groups lay in the range of +18 pp to -11 pp.

This variation may be explained to some extent by the new swimming pool in Leominster, which opened in January 2006.

A number of aspects of quality of life varied according to the rurality of the area in which respondents live. Please refer to Appendix 4 for an explanation of the urban / rural classifications.

In a number of cases, urban areas or both urban and town & fringe areas showed worse net scores than villages and hamlets & isolated dwellings. These were activities for teenagers, community activities, cultural facilities, facilities for young children, race relations, the level of crime, the level of pollution and wage levels & local cost of living.



The best net score was seen in town & fringe areas for each of: access to nature, clean streets, health services, public transport, road and pavement repairs and sports & leisure facilities.

Town & fringe areas had a poorer net score than other areas for job prospects and parks & open spaces.

Although variation in perception of the level of traffic congestion met the 5 pp threshold, no clear pattern was seen.



**Satisfaction with the local area as a place to live**  
**Satisfaction with the local community as a place to live**

Q2: Overall, how satisfied or dissatisfied are you with your local area as a place to live?

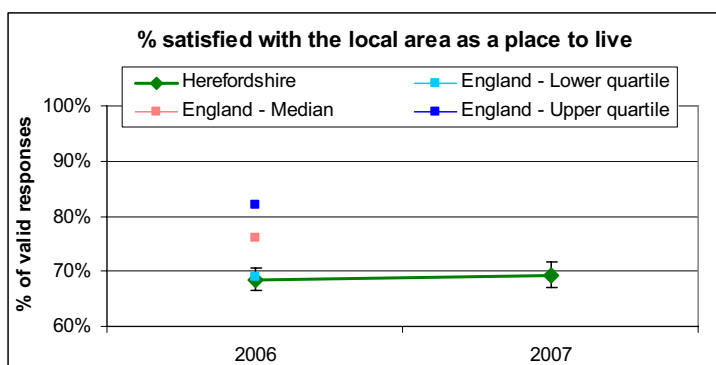
Q30: How satisfied or dissatisfied are you with your local community as a place to live?

Q2 is a statutory question which is very similar to Q30, required for the purposes of a local indicator. Where Q2 refers to the “local area”, Q30 refers to the “local community”. Neither of the terms “local area” or “local community” were defined in the questionnaire. Because of their similarity, these questions are presented together, to avoid the accidental use of results from the wrong question.

<b>Q2: Satisfaction with the local area as a place to live</b>	
Very satisfied	20%
Fairly satisfied	50%
Neither satisfied nor dissatisfied	18%
Fairly dissatisfied	9%
Very dissatisfied	4%
Base	1,559

Of those who responded to Q2, 69% were satisfied with their local *area* as a place to live. This score has shown no change since 2006.

<b>Q2: Trend over time and quartile position</b>		
	2006	2007
Score	69%	69%
Quartile position	Worst	

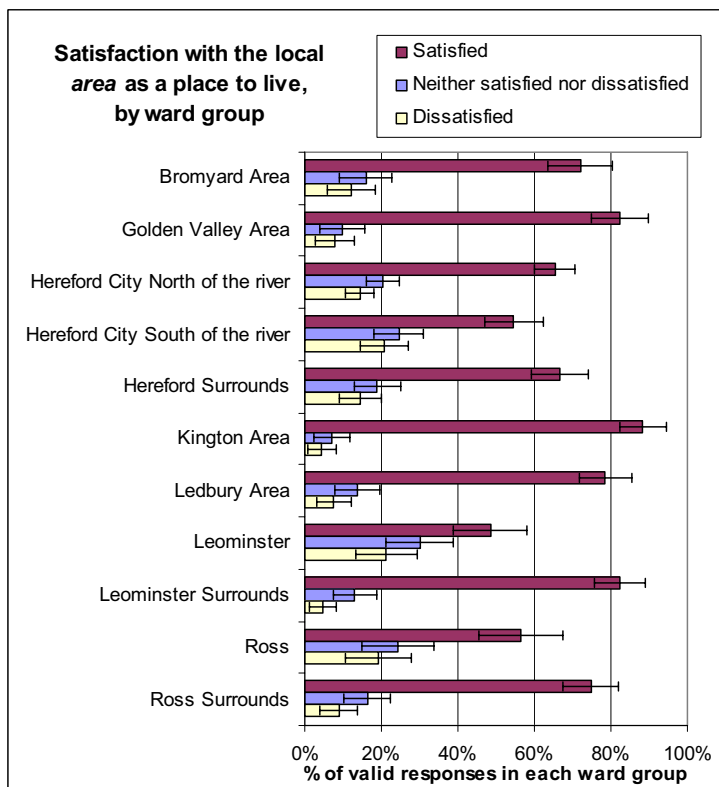
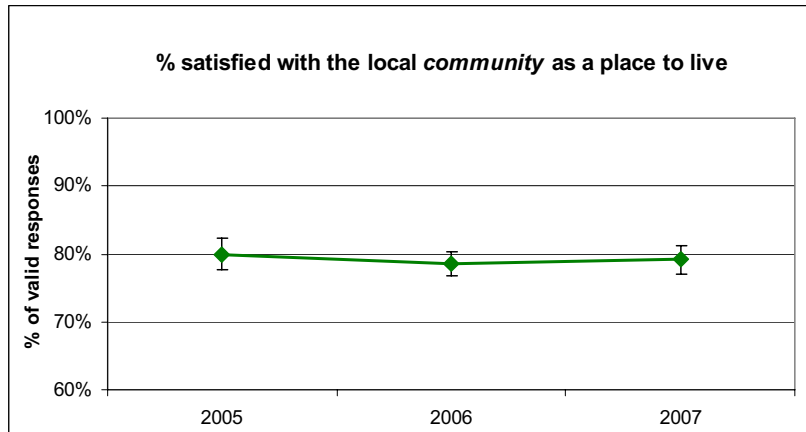


<b>Q30: Satisfaction with the local community as a place to live</b>	
Very satisfied	26%
Fairly satisfied	53%
Neither satisfied nor dissatisfied	12%
Fairly dissatisfied	7%
Very dissatisfied	2%
Base	1,549

Of those who responded to Q30, 79% were satisfied with their local *community* as a place to live. This score has shown no change since 2006.

**Q30: Trend over time**

	2005	2006	2007
Score	80%	79%	79%

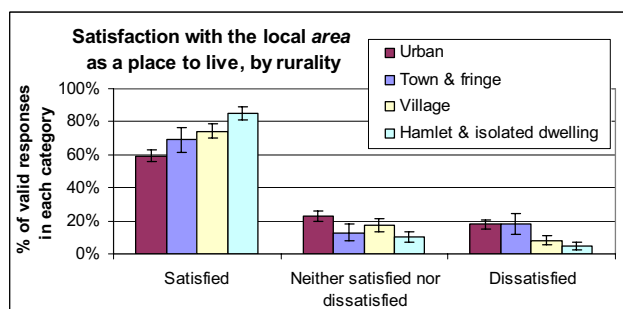


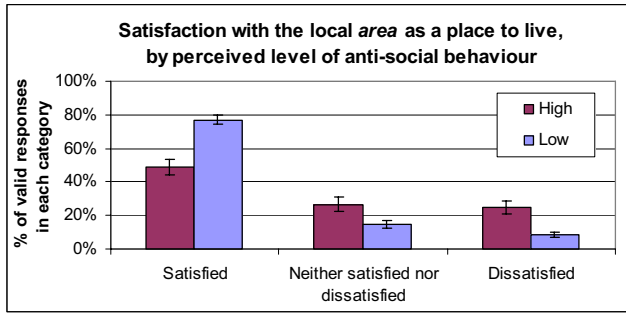
Satisfaction with the local area as a place to live was highest in the Kington Area and lowest in Leominster.

When looking at satisfaction with the local community, a similar but less marked variation in satisfaction was seen, and the highest satisfaction was seen in the Ledbury Area.

Please refer to Appendix 3 for more details of the ward groups used.

Satisfaction with the local area increases with increasing rurality of the area in which respondents live. A similar but less marked pattern was seen when looking at satisfaction with the local community. Please refer to Appendix 4 for an explanation of the urban / rural classifications.

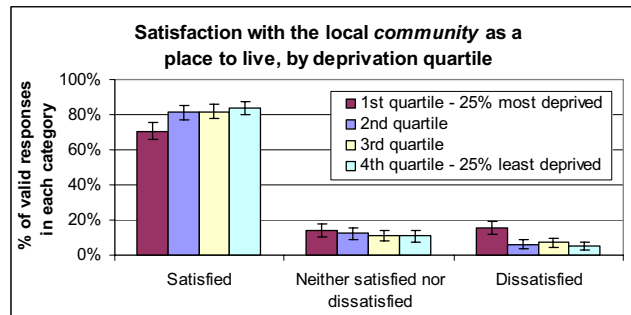




Satisfaction with the local area as a place to live was higher amongst those who perceived their local area to have a low level of anti-social behaviour overall. A similar but less marked pattern was seen when looking at satisfaction with the local community as a place to live.

Please refer to the anti-social behaviour section of this report for an explanation of the high / low perception of anti-social behaviour categories.

Respondents who lived in an area which was in the 25% most deprived in Herefordshire were less likely to be satisfied with their local community as a place to live, than those who lived in less deprived areas. In contrast to the previous analyses where more marked patterns were seen in satisfaction with the local *area*, here a more marked pattern was seen in satisfaction with the local *community*. Please refer to Appendix 5 for an explanation of the deprivation quartiles used.



## Anti-social behaviour

Q3: Thinking about this local area, how much of a problem do you think are...

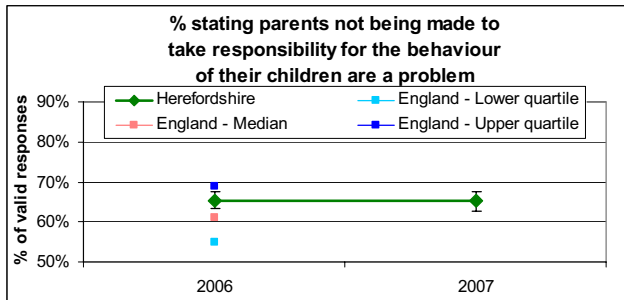
When the "score" is referred to for this question, it means the percentage who said each aspect was either a very big or fairly big problem, so a lower score indicates a better result.

Q3: Anti-social behaviour					
	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	Base
Parents not being made to take responsibility for the behaviour of their children	29%	37%	26%	8%	1,444
People not treating other people with respect and consideration	22%	35%	31%	13%	1,506
Noisy neighbours or loud parties ‡	8%	12%	44%	37%	1,468
Teenagers hanging around on the streets ‡	21%	28%	31%	20%	1,410
Rubbish and litter lying around ‡	18%	31%	39%	12%	1,534
People being drunk or rowdy in public spaces ‡	16%	21%	38%	25%	1,391
Abandoned or burnt out cars ‡	2%	6%	33%	60%	1,359
Vandalism, graffiti and other deliberate damage to property or vehicles ‡	11%	24%	40%	25%	1,443
People using or dealing drugs ‡	25%	27%	24%	24%	1,177
Speeding traffic	21%	36%	33%	10%	1,505
People being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation	5%	12%	35%	48%	1,099

The aspects that were perceived to be a fairly or very big problem by the greatest proportion of respondents were: parents not being made to take responsibility for the behaviour of their children (65% of respondents), speeding traffic (57%), and people not treating other people with respect and consideration (56%). The aspect least thought to be a problem was abandoned or burnt out cars (8%).

**Q3a: Parents not being made to take responsibility for the behaviour of their children - Trend over time and quartile position**

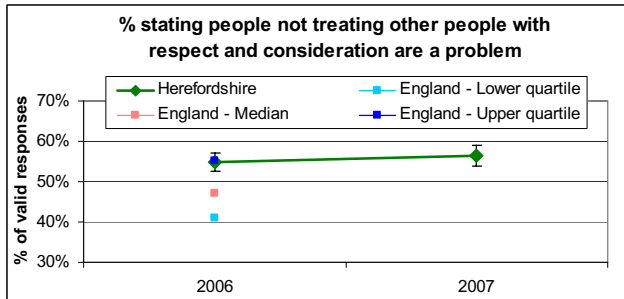
	2006	2007
Score	65%	65%
Quartile position	3rd	



There has been no change in the perception of parents not being made to take responsibility for the behaviour of their children since 2006.

**Q3b: People not treating other people with respect and consideration - Trend over time and quartile position**

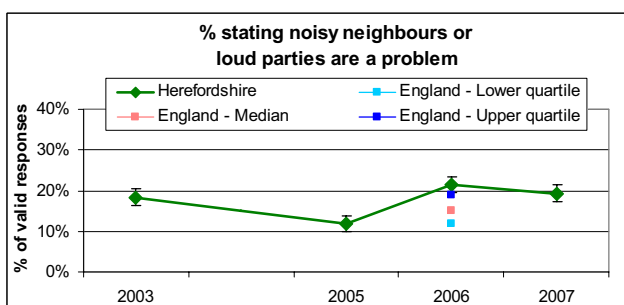
	2006	2007
Score	55%	56%
Quartile position	3rd	



There has been no significant change in the perception of people treating others with respect and consideration since 2006.

**Q3c: Noisy neighbours or loud parties – Trend over time and quartile position**

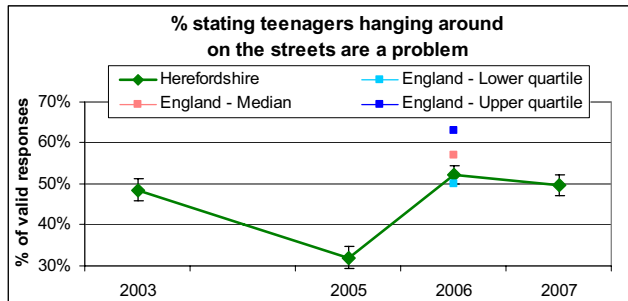
	2003	2005	2006	2007
Score	18%	12%	21%	19%
Quartile position			Worst	



There has been no significant change since 2006 with regard to the perception of noisy neighbours or loud parties, staying at a score worse than that seen in 2005.

**Q3d: Teenagers hanging around on the streets – Trend over time and quartile position**

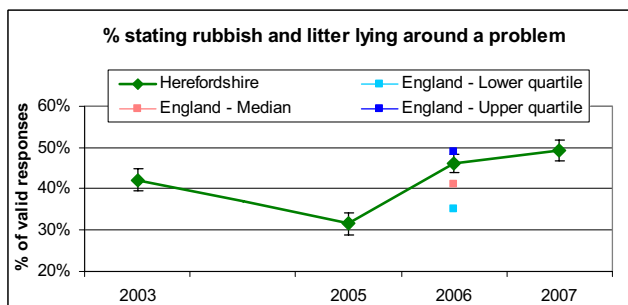
	2003	2005	2006	2007
Score	49%	32%	52%	50%
Quartile position			2nd	



There has been no significant change in the perception of teenagers hanging around on the streets since 2006, staying at a score worse than that seen in 2005.

**Q3e: Rubbish and litter lying around – Trend over time and quartile position**

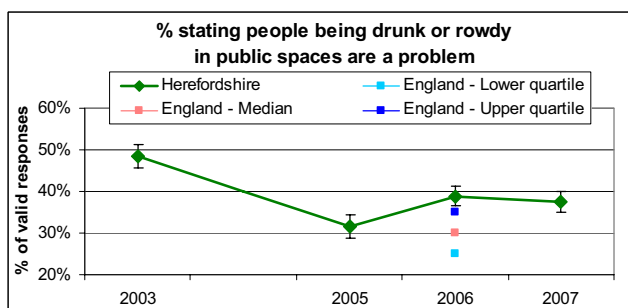
	2003	2005	2006	2007
Score	42%	32%	46%	49%
Quartile position			3rd	



There has been no significant change in the perception of rubbish and litter lying around since 2006, staying at a score worse than that seen in 2005.

**Q3f: People being drunk or rowdy in public spaces – Trend over time and quartile position**

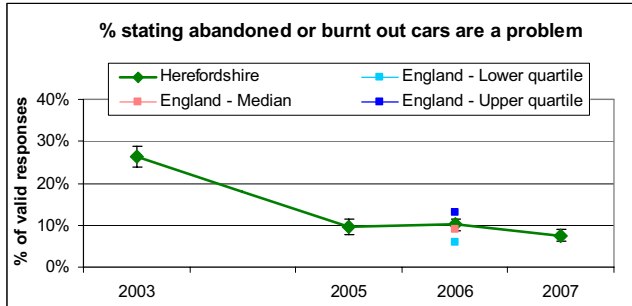
	2003	2005	2006	2007
Score	48%	32%	39%	37%
Quartile position			Worst	



The perception of people being drunk or rowdy in public spaces has shown no significant change since 2006. Long-term, this has maintained an improvement since 2003.

**Q3g: Abandoned or burnt out cars – Trend over time and quartile position**

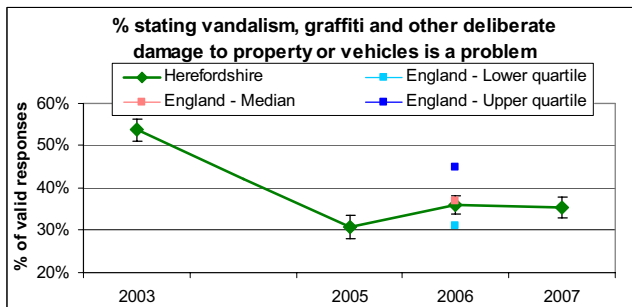
	2003	2005	2006	2007
Score	26%	10%	10%	8%
Quartile position			3rd	



There has been no significant change in the perception of abandoned or burnt out cars since 2006, maintaining an improvement since 2003.

**Q3h: Vandalism, graffiti and other deliberate damage to property or vehicles – Trend over time and quartile position**

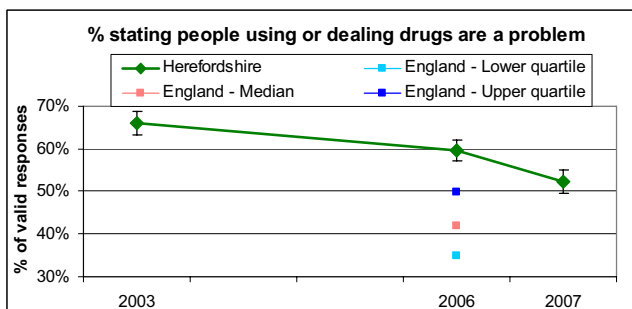
	2003	2005	2006	2007
Score	54%	31%	36%	35%
Quartile position			2nd	



There has been no significant change in the perception of vandalism, graffiti and other deliberate damage since 2006, maintaining an improvement since 2003.

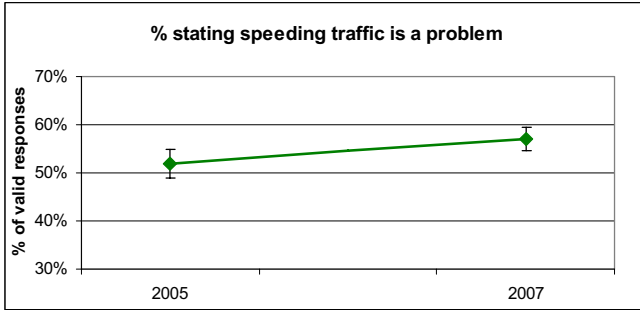
**Q3i: People using or dealing drugs - Trend over time and quartile position**

	2003	2006	2007
Score	66%	60%	52%
Quartile position		Worst	



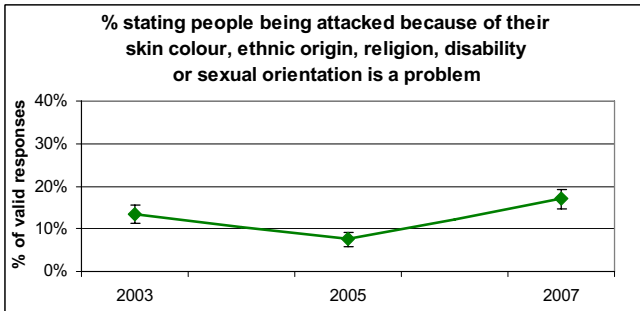
There has been a significant improvement in the perception of people using or dealing drugs since 2006, with the score dropping from 60% down to 52%. There is a long-term trend of improvement in the score since 2003.

Q3j: Speeding traffic - Trend over time		
	2005	2007
Score	52%	57%



There has been no significant change in the perception of speeding traffic since 2005 (this question was not asked in 2006).

Q3k: People being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation - Trend over time			
	2003	2005	2007
Score <sup>2</sup>	13%	8%	17%



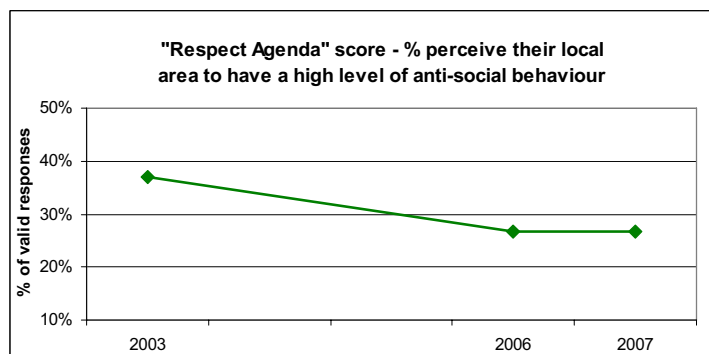
There has been a significant deterioration in the perception of people being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation since 2005, with the score going up from 8% to 17% (this question was not asked in 2006).

For the purposes of the Government’s “Respect Agenda”, an overall score is calculated which gives an indication of respondents’ perception of anti-social behaviour in general. This score is calculated by taking into account responses to seven of the anti-social behaviour strands, from “noisy neighbours” down to “people using or dealing drugs” on the table at the beginning of the anti-social behaviour section of this report (marked ‡). This effectively gives each respondent an average score across the seven strands. Respondents with a score above a certain threshold are deemed to perceive there to be a “high” level of anti-social behaviour in their local area; those below the threshold perceive there to be a “low” level of anti-social behaviour. Note that the Respect Agenda also uses the first two strands in the table (“parents taking responsibility” and “treating other people with respect”) in their own right.

<sup>2</sup> NB Not strictly comparable. 2003 survey did not include “disability or sexual orientation”. 2005 survey had “sexuality” for “sexual orientation”.



<b>"Respect Agenda" score - Trend over time</b>			
	2003	2006	2007
Score	37%	27%	27%



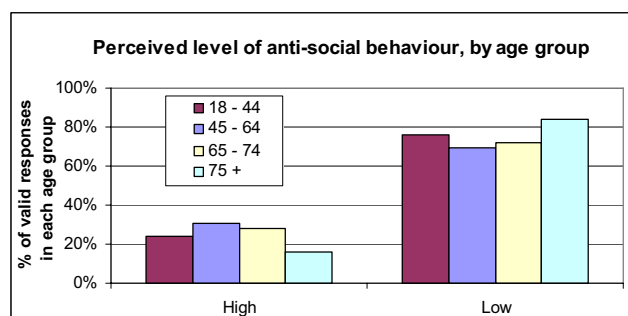
The overall perception of anti-social behaviour score achieved this year is 27% - i.e. 27% of all survey respondents perceive there to be a "high" level of anti-social behaviour in their local area. This score has shown no change since 2006, maintaining an improvement since 2003.

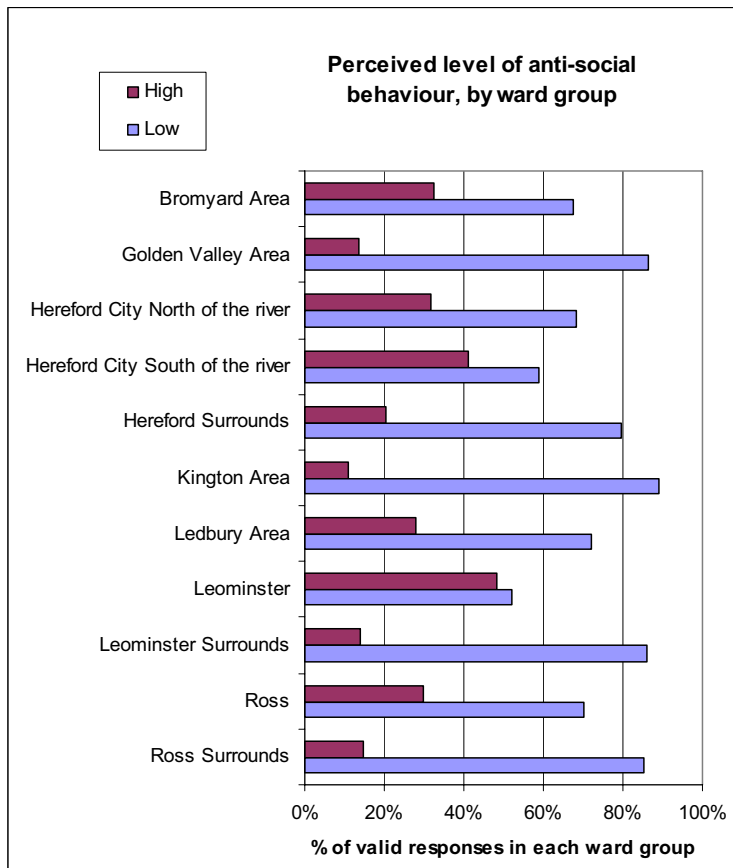
The Respect Agenda score can also be used as a convenient indication of respondents' overall perception of anti-social behaviour in their local area, for the purposes of further analysis. Respondents are divided into those who perceive their local area to have a "high" level of anti-social behaviour, and those who perceive it to have a "low" level.

As confidence intervals cannot be applied to a composite score such as the Respect Agenda, a difference in the net score of 5 pp or more is considered sufficient to reflect a likely difference in the wider population.

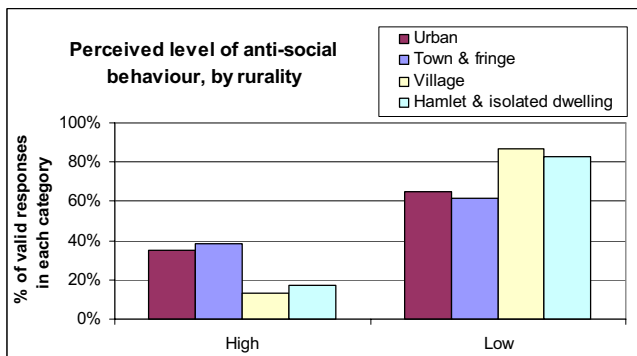
The use of this score is not perfect, as it covers only seven of the eleven anti-social behaviour strands, and respondents' opinions are likely to be different with regard to different strands. A fuller breakdown of opinions on each individual aspect of anti-social behaviour has thus been carried out. With a few exceptions (found on page 27), it was not considered appropriate to include them all in this report; they are available on request from the Research Team.

There is a peak in perception of a high level of anti-social behaviour amongst 45 to 64 year olds. Respondents aged 75 years and over had the lowest perception of anti-social behaviour.



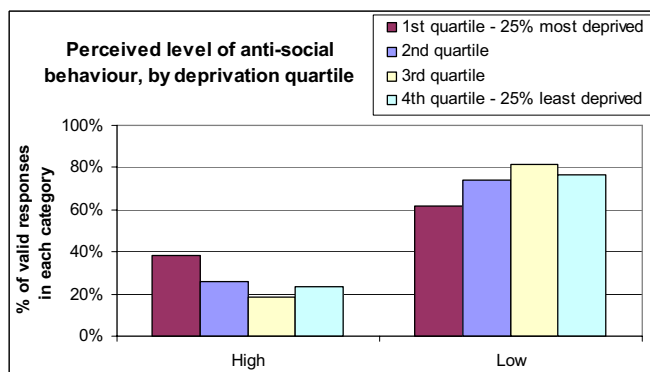


Perceptions of anti-social behaviour were seen to vary markedly between different ward groups. Respondents living in Leominster (48%) and Hereford City South of the river (41%) were most likely to perceive their local area to have a high level of anti-social behaviour, while those in the Kington Area were the least likely (11%). Please refer to Appendix 3 for more details of the ward groups used.



Respondents who lived in urban or town & fringe areas were more likely to perceive their local area to have a high level of anti-social behaviour, than those who lived in villages or hamlets & isolated dwellings. Please refer to Appendix 4 for an explanation of the rurality categories used.

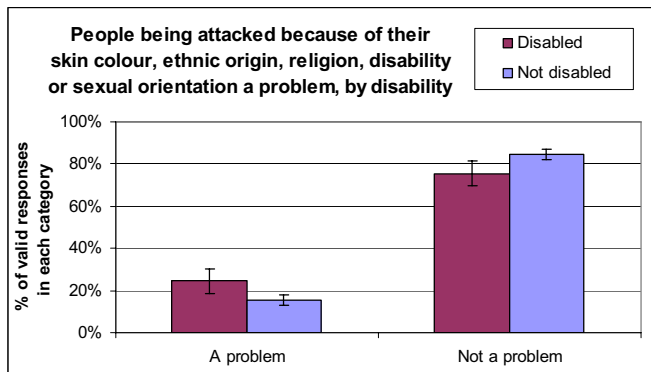
Respondents who lived in an area which fell into the 25% most deprived in Herefordshire were more likely to perceive a high level of anti-social behaviour, than those who lived in less deprived areas. Please refer to Appendix 5 for an explanation of the deprivation quartiles used.



The question “people being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation” was analysed according to whether respondents were members of a minority group in any of the categories mentioned in the question text. In some cases, the categories used on the questionnaire have been grouped. Even so, the numbers of respondents falling into each minority group were sometimes very low, so the ability to draw conclusions from the data may be limited.

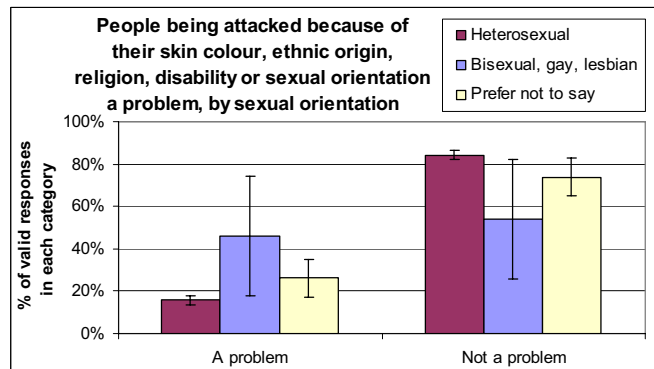
No significant difference was seen between respondents who identified as “White British”, and those who identified as a different ethnic group.

No significant difference was seen between respondents who said they had no religion, those who identified as Christian, and those who identified as a different religion.



Disabled respondents were more likely to perceive there to be a problem, than respondents who did not have a disability.

Care should be taken with this analysis, as there were only 13 persons in the “bisexual, gay or lesbian” category. The size of the confidence intervals on that category means that statistical significance is only just achieved.



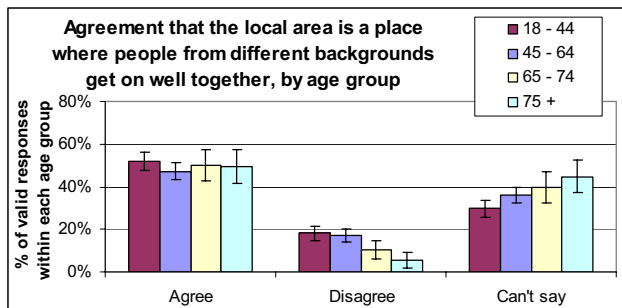
Respondents who identified as bisexual, gay or lesbian were more likely to perceive there to be a problem, than respondents who identified as heterosexual.

## Community relations

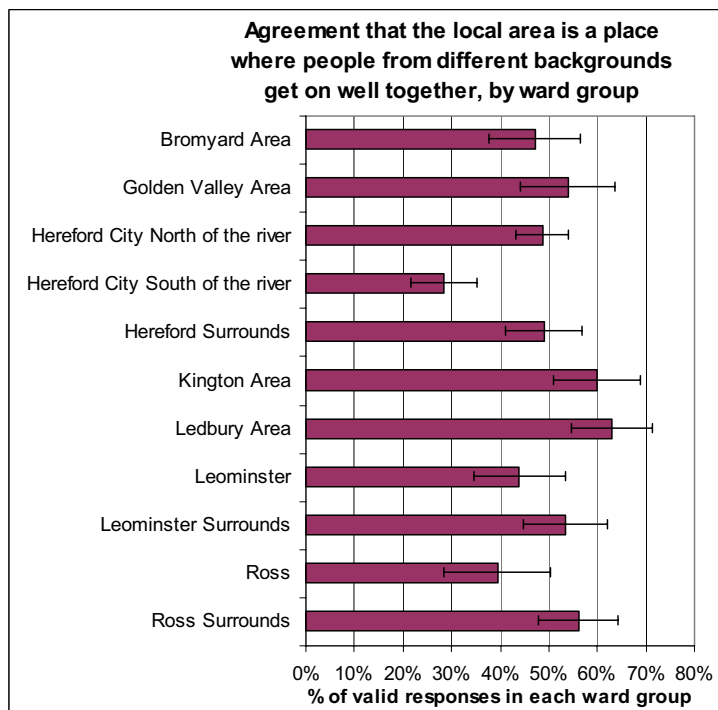
Q4: To what extent do you agree or disagree that this local area is a place where people from different backgrounds get on well together?

Q4: Community relations	
Definitely agree	5%
Tend to agree	44%
Tend to disagree	11%
Definitely disagree	5%
Don't know	19%
Too few people in local area	11%
All the same background	6%
Base	1,565

Around half (49%) of those who answered the question agreed that the local area was somewhere where people from different backgrounds got on well together, compared to 15% who disagreed. 36% felt they couldn't give an answer, either because they didn't know, or because they felt the population was too homogenous to make a judgement. The score of 49% this year is not significantly different from the score of 46% in 2006.



Although there is no significant difference in agreement with age, it can be seen that respondents aged 18 to 64 are more likely to disagree than those aged 75 and over.

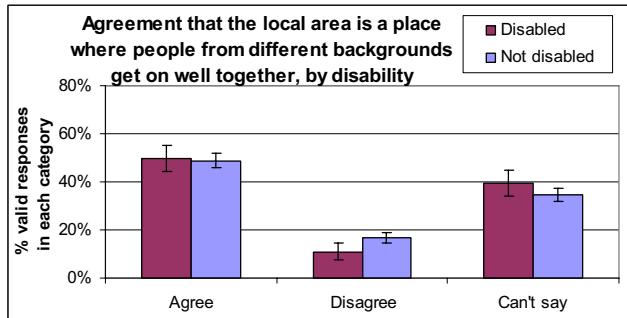
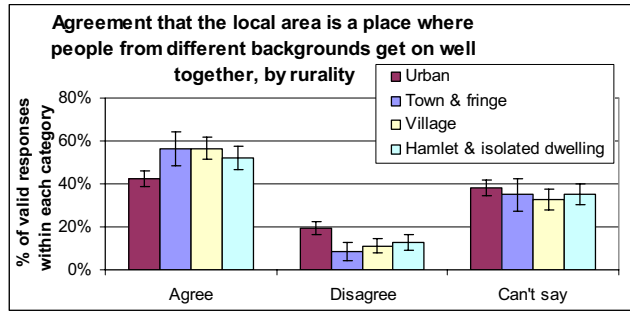


For simplicity, only agreement is shown on this chart.

There is significant variation in views according to the ward group in which respondents live. The lowest agreement can be seen in Hereford City South of the river (28%), with the highest in the Ledbury Area (63%).

Please refer to Appendix 3 for an explanation of the ward groups used.

Respondents who lived in urban areas were less likely to think that people from different backgrounds got on well together, than those who lived in rural areas. Please refer to Appendix 4 for an explanation of the rurality categories used.



Although there was no difference in agreement, respondents who were disabled were less likely to *disagree* than respondents who had no disability.

There was no significant difference between respondents who identified as bisexual, gay or lesbian, and those who identified as heterosexual.

There was no significant difference between respondents who said they had no religion, those who identified as Christian, and those who identified as a different religion.

There was no significant difference between White British respondents and those of different ethnicities.

## Access to local services

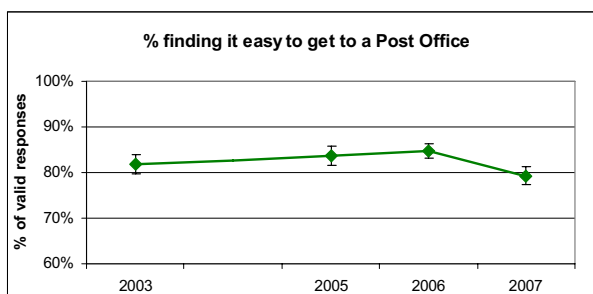
Q5: From your home, how easy is it for you to get to the following using your usual form of transport?

Q5: Access to local services						
	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	Base
Local shop	63%	25%	6%	4%	2%	1,503
Shopping centre or supermarket	45%	37%	11%	6%	2%	1,532
Post Office	50%	30%	9%	8%	4%	1,559
GP	42%	37%	12%	7%	2%	1,549
Dentist	26%	33%	16%	15%	10%	1,453
Chemist or pharmacy	42%	36%	13%	7%	2%	1,549
Shop selling fresh fruit and vegetables	47%	34%	9%	8%	3%	1,543
Local hospital	24%	34%	19%	16%	6%	1,532
Publicly accessible green space e.g. park	48%	33%	11%	6%	2%	1,447
Public transport facility e.g. bus stop, train station	37%	35%	9%	12%	7%	1,513
Library	32%	38%	17%	10%	4%	1,506
Sports / leisure centre	29%	39%	18%	9%	4%	1,429
Cultural / recreational facility e.g. theatre, cinema	17%	35%	20%	18%	10%	1,443
Bank or cashpoint	35%	41%	13%	8%	3%	1,554
Council or neighbourhood office	23%	35%	20%	14%	7%	1,448

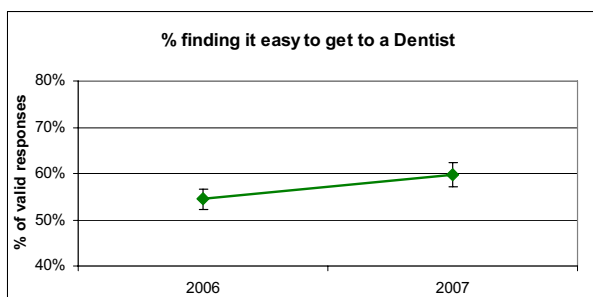
The services most frequently seen as easy to get to were a local shop (88% found it easy), a shopping centre or supermarket, a shop selling fresh fruit and vegetables and a publicly accessible green space (81% for each). The aspects least often seen as easy to get to were a cultural or recreational facility (52% found it easy), a local hospital and a Council or neighbourhood office (each 59% easy), and a dentist (60% easy).

Access to local services – trend over time				
	2003	2005	2006	2007
Local shop	86%	89%	89%	88%
Shopping centre or supermarket	79%	80%	80%	81%
Post Office	82%	84%	85%	79%
GP	77%	79%	80%	79%
Dentist	-	-	54%	60%
Chemist or pharmacy	77%	80%	78%	78%
Shop selling fresh fruit and vegetables	80%	80%	80%	81%
Local hospital	56%	57%	57%	59%
Publicly accessible green space e.g. park	81%	80%	80%	81%
Public transport facility e.g. bus stop, train station	75%	73%	69%	72%
Library	69%	70%	69%	70%
Sports / leisure centre	66%	69%	64%	69%
Cultural / recreational facility e.g. theatre, cinema	53%	55%	47%	52%
Bank or cashpoint	73%	73%	74%	76%
Council or neighbourhood office	60%	55%	58%	59%

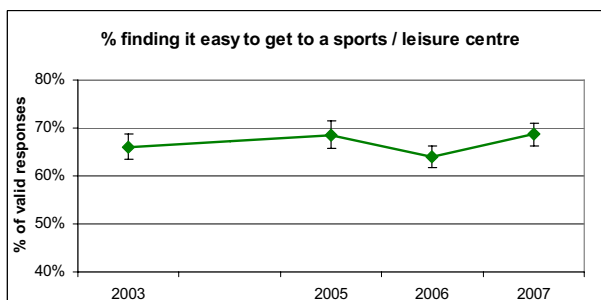
There has been no significant change since 2006 in the perceived ease of access to most of the services listed. The following are the exceptions.



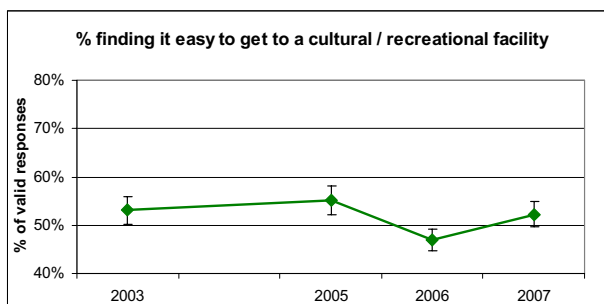
There has been a significant deterioration in ease of access to a Post Office, with the score dropping from 85% in 2006 to 79% in 2007.



There has been a significant improvement in ease of access to a dentist, with the score going up from 54% in 2006 to 60% in 2007.



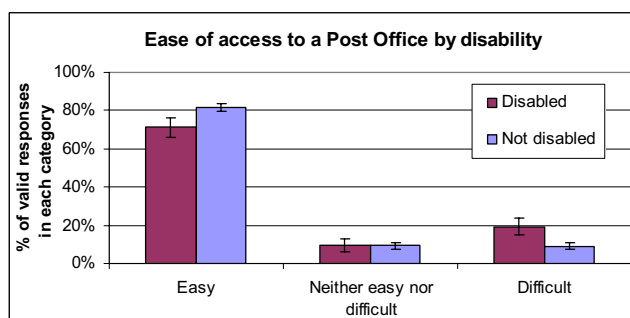
There has been a significant improvement in ease of access to a sports / leisure centre, with the score going from 64% in 2006 up to 69% in 2007, returning to the same score as was seen in 2005.



There has been a significant improvement in ease of access to a cultural / recreational facility, with the score going from 47% in 2006 up to 52% in 2007, returning to a similar score as was seen in 2005.

Ease of access to services was investigated according to respondents' disability. Respondents who were disabled were less likely to find it easy, or more likely to find it difficult, to get to the following services than respondents who were not disabled:

a local shop, a Post Office, a local hospital, a publicly accessible green space, a library, a sports / leisure centre, a cultural / recreational facility, a bank or cashpoint, and a Council or neighbourhood office.



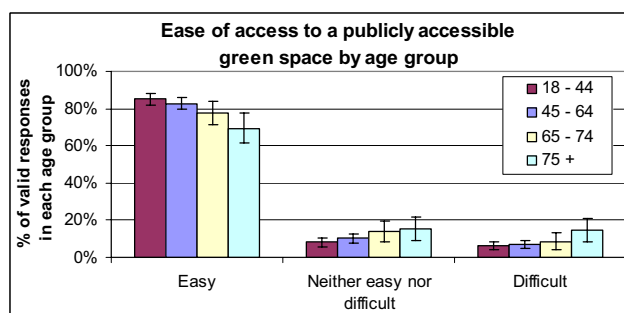
Despite this difference between disabled and non-disabled respondents, it should be noted that for all services, disabled respondents were still more likely to find them easy to get to than difficult to get to.

The following significant differences were found between respondents of different age groups:

Respondents aged 75 and over were more likely to find it difficult to get to a Post Office than those aged 18 to 44.

Respondents aged 18 to 44 were less likely to find it easy to get to a dentist than those aged 45 to 64.

Respondents aged 75 and over were less likely to find it easy to get to a publicly accessible green space than those aged 18 to 64.



Respondents aged 45 to 64 were less likely to find it easy to get to a public transport facility than those aged 18 to 44.

Respondents aged 45 to 64 were less likely to find it easy to get to a library than those aged 65 to 74.

Respondents aged 45 to 64 were less likely to find it easy to get to a sports / leisure centre than those aged 18 to 44.



## Section 2: Your local authority

Respondents were given an overview of the main services provided by Herefordshire Council, to act as a point of reference if necessary to help complete questions about these services.

### Waste and litter services

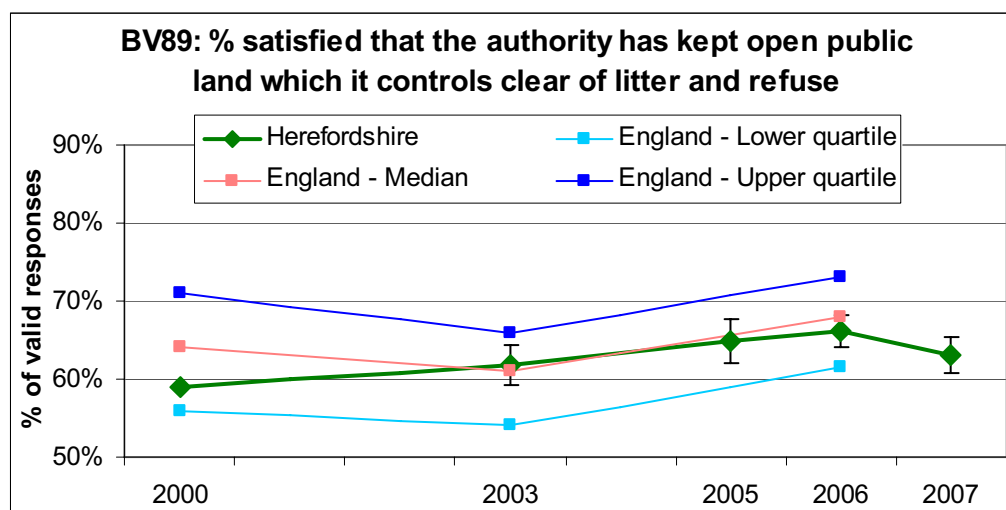
Respondents were told that Herefordshire Council has a duty to keep all open public land which it controls clear of litter and refuse, and asked:

*Q6: How satisfied or dissatisfied are you that Herefordshire Council has kept this land clear of litter and refuse?*

<b>Q6: Satisfaction with litter clearance (BV89)</b>	
Very satisfied	12%
Fairly satisfied	51%
Neither satisfied nor dissatisfied	17%
Fairly dissatisfied	15%
Very dissatisfied	5%
Base	1,567

Of those who answered this question, 63% were satisfied that the Council has fulfilled its duty of litter clearance, while 20% were dissatisfied and 17% were neutral. There has been no significant change in satisfaction since 2006.

<b>BV89 - Trend over time and quartile position</b>					
	2000	2003	2005	2006	2007
Score	59%	62%	65%	66%	63%
Quartile position	3rd	2nd		3rd	



## Household waste collection

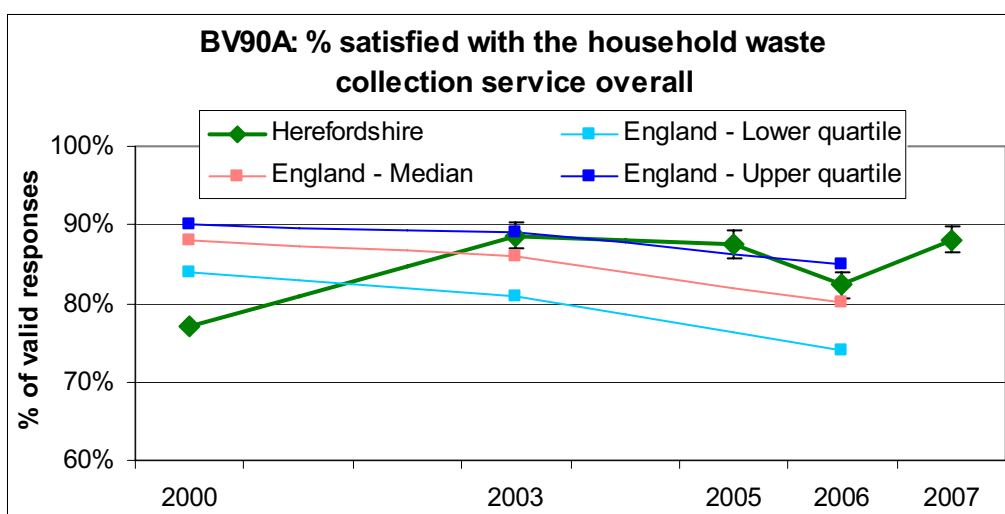
Respondents were told that Herefordshire Council undertakes a weekly collection of general household waste, and asked:

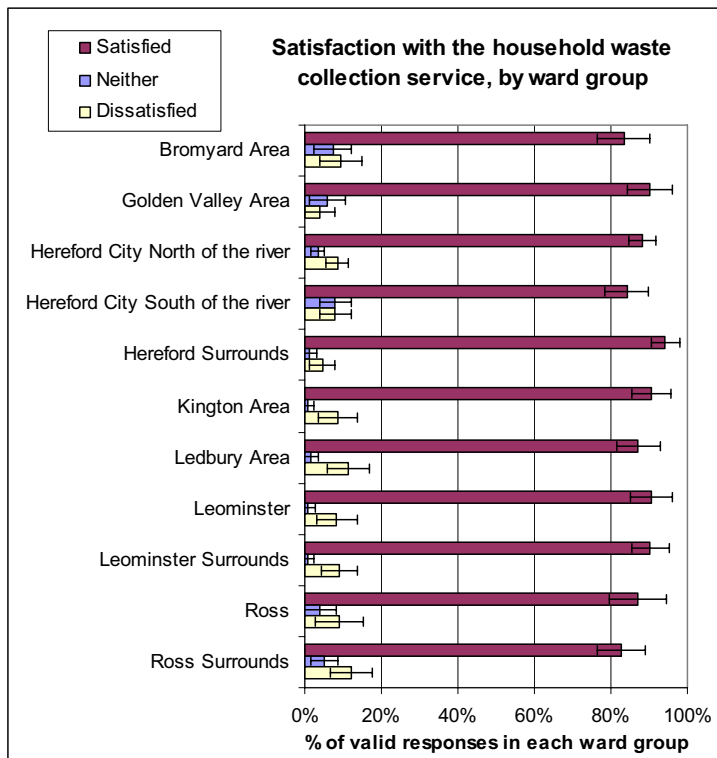
*Q7: Please indicate whether you are satisfied or dissatisfied with the waste collection service overall*

<b>Q7: Satisfaction with household waste collection (BV90A)</b>	
Very satisfied	50%
Fairly satisfied	38%
Neither	3%
Fairly dissatisfied	6%
Very dissatisfied	3%
Base	1,579

Amongst those who answered the question, 88% were satisfied with the household waste collection service, while 8% were dissatisfied and 3% were neutral. There has been a significant improvement in satisfaction since 2006, with the score going from 82% up to 88%, returning to the same score as was achieved in 2005.

<b>BV90A - Trend over time and quartile position</b>					
	2000	2003	2005	2006	2007
Score	77%	89%	88%	82%	88%
Quartile position	Worst	2nd		2nd	





There was some variation in satisfaction with the household waste collection service by ward group. The highest satisfaction was seen in Hereford Surrounds (94% satisfied), while the lowest was seen in the Bromyard Area and Ross Surrounds (83% satisfied for both).

Please refer to Appendix 3 for an explanation of the ward groups used.

There was no significant difference in satisfaction with the household waste collection service seen between urban areas and rural areas.

### Doorstep recycling collection

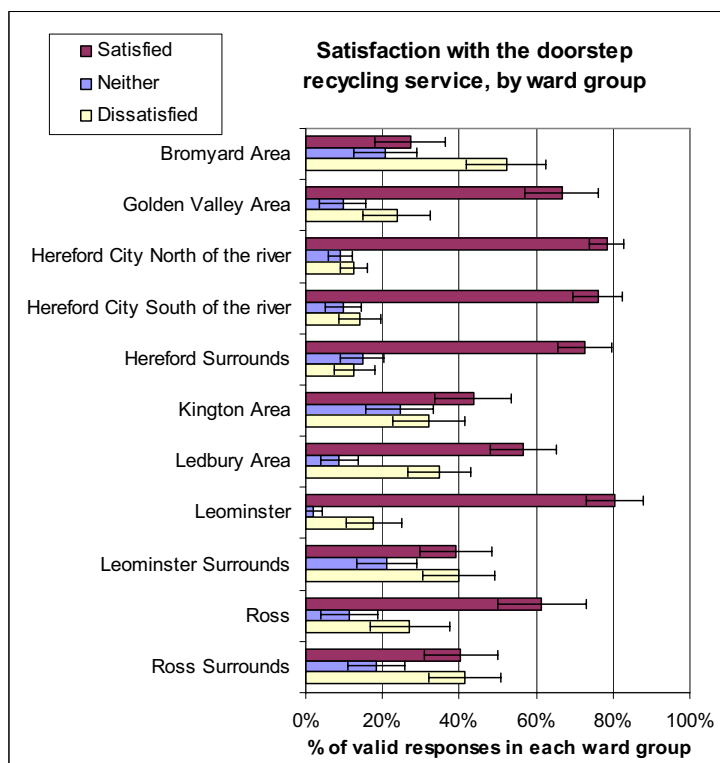
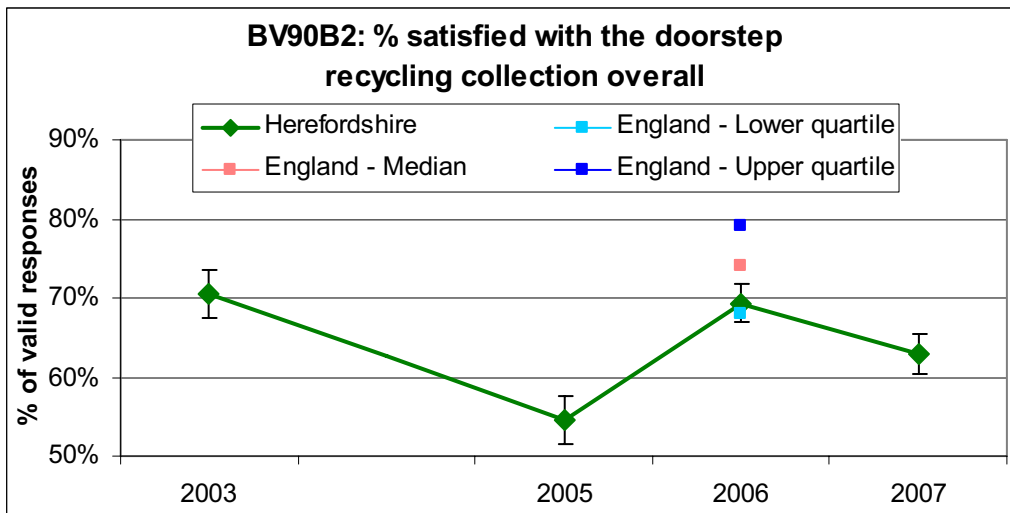
Respondents were told that Herefordshire Council undertakes a weekly collection of waste for recycling in certain areas, and given a list of these areas.

*Q8: Please indicate whether you are satisfied or dissatisfied with the service for the collection of items for recycling overall*

Q8: Satisfaction with doorstep recycling collection (BV90B2)	
Very satisfied	29%
Fairly satisfied	34%
Neither	13%
Fairly dissatisfied	8%
Very dissatisfied	17%
Base	1,444

Of those who answered the question, 63% were satisfied with the doorstep recycling collection, compared with 24% who were dissatisfied, and 13% neutral. The score has shown a significant deterioration from 69% in 2006, though this is still significantly higher than the score in 2005.

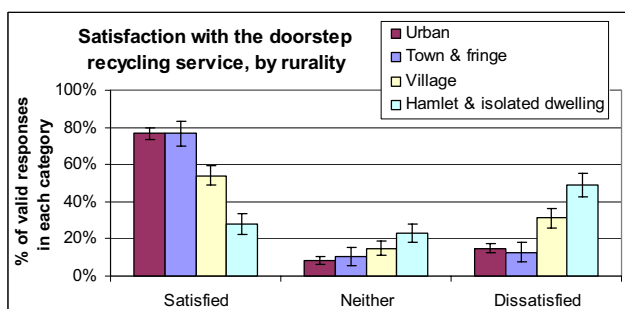
BV90B2 – Trend over time and quartile position				
	2003	2005	2006	2007
Score	71%	55%	69%	63%
Quartile position			3rd	



There was considerable variation in satisfaction with the doorstep recycling service, according to the ward group in which respondents live.

Note that the pattern of satisfaction may be influenced to some extent by the variable provision of this service in different areas of the county.

Please refer to Appendix 3 for an explanation of the ward groups used.



Respondents who lived in urban or town & fringe areas were more likely to be satisfied than those who lived in villages, who were in turn more likely to be satisfied than those who lived in hamlets & isolated dwellings. Please refer to Appendix 4 for an explanation of the rurality categories used.

## Local recycling facilities

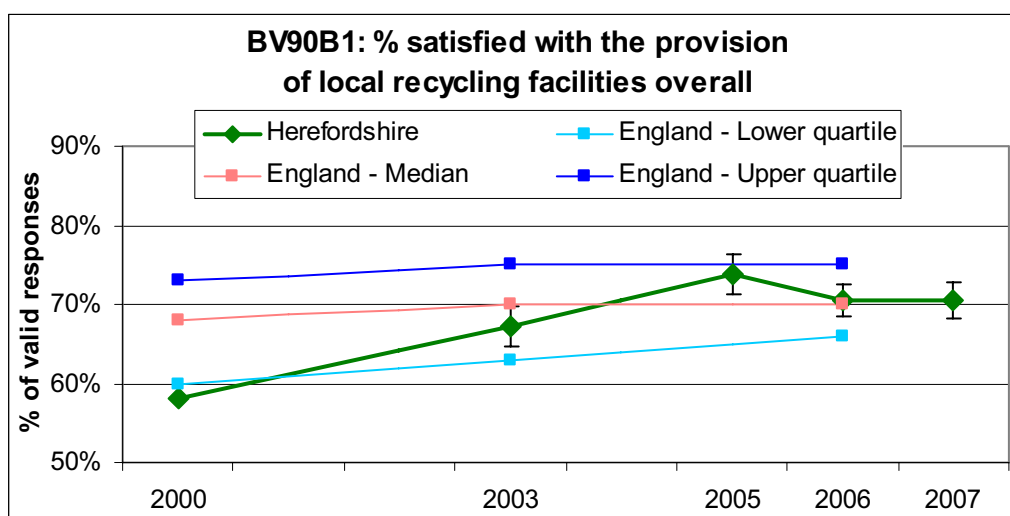
Respondents were told that Herefordshire Council provides a range of recycling facilities such as bottle, paper, textile and can banks at supermarkets, retail parks and on Council owned parks, and asked:

*Q9: Please indicate whether you are satisfied or dissatisfied with the provision of local recycling facilities overall*

<b>Q9: Satisfaction with local recycling facilities (BV90B1)</b>	
Very satisfied	26%
Fairly satisfied	45%
Neither	12%
Fairly dissatisfied	11%
Very dissatisfied	6%
Base	1,569

Of those who answered the question, 71% were satisfied with local recycling facilities, compared to 17% dissatisfied and 12% neutral. There has been no significant change in satisfaction since 2006, maintaining a long-term improvement since 2000.

<b>BV90B1 - Trend over time and quartile position</b>					
	2000	2003	2005	2006	2007
Score	58%	67%	74%	70%	71%
Quartile position	Worst	3rd		2nd	



## The local tip / household waste recycling centre

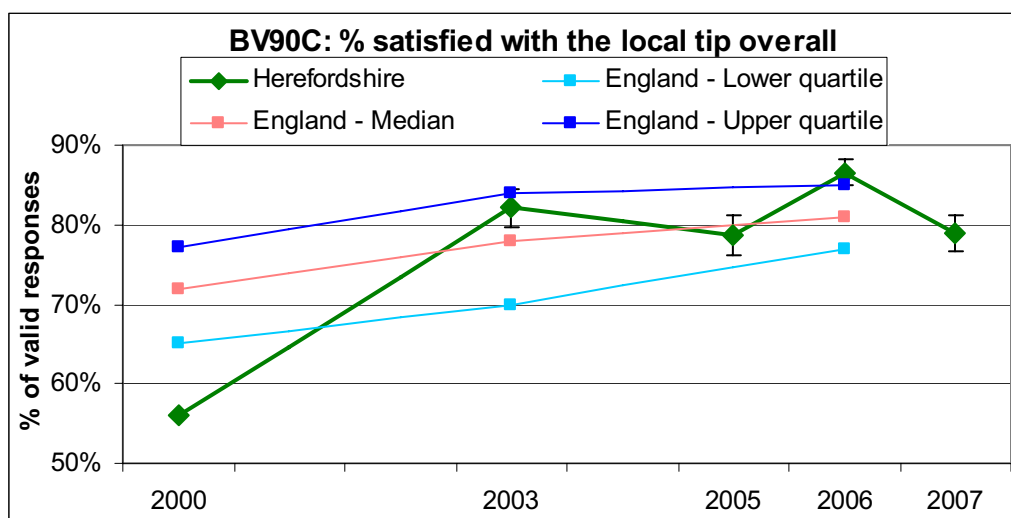
Respondents were told that Herefordshire Council provides tips for the disposal and recycling of bulky household waste, and told their locations.

*Q10: Please indicate whether you are satisfied or dissatisfied with the local tip / household waste recycling centre overall*

<b>Q10: Satisfaction with the local tip (BV90C)</b>	
Very satisfied	40%
Fairly satisfied	39%
Neither	9%
Fairly dissatisfied	7%
Very dissatisfied	5%
Base	1,334

Of those who answered the question, 79% were satisfied with the local tip, while 13% were dissatisfied and 9% were neutral. There has been a significant drop in satisfaction from 87% in 2006 down to 79% this year, returning to the same score as was seen in 2005.

<b>BV90C - Trend over time and quartile position</b>					
	2000	2003	2005	2006	2007
Score	56%	82%	79%	87%	79%
Quartile position	Worst	2nd		Best	



## Public transport information

Respondents were given a summary of the types of public transport information provided by Herefordshire Council.

*Q11: Please indicate whether you are satisfied or dissatisfied with the provision of public transport information overall*

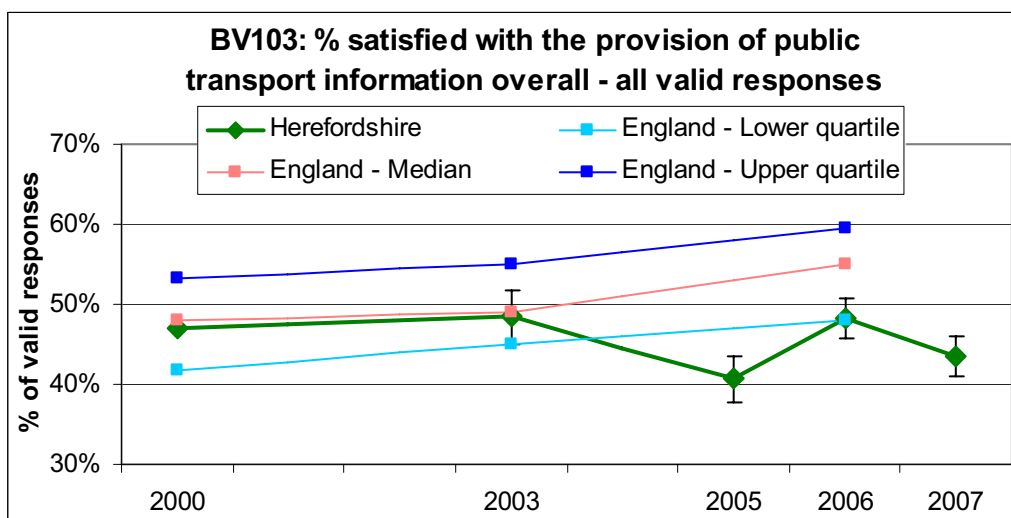
### Q11: Satisfaction with the provision of public transport information (BV103) All valid responses

Very satisfied	10%
Fairly satisfied	33%
Neither	39%
Fairly dissatisfied	11%
Very dissatisfied	7%
Base	1,534

When looking at responses from everyone who answered the question, 43% were satisfied with the provision of public transport information overall, while 18% were dissatisfied and 39% were neutral. There has been no significant change in satisfaction since 2006.

### BV103 - Trend over time and quartile position All valid responses

	2000	2003	2005	2006	2007
Score	47%	48%	41%	48%	43%
Quartile position	3rd	3rd		3rd	



*Q12: Have you received or seen any of the information provided on local transport services, in the last 12 months?*

### Q12: Seen or received public transport information in the last 12 months

Yes	31%
No	69%
Base	1,334

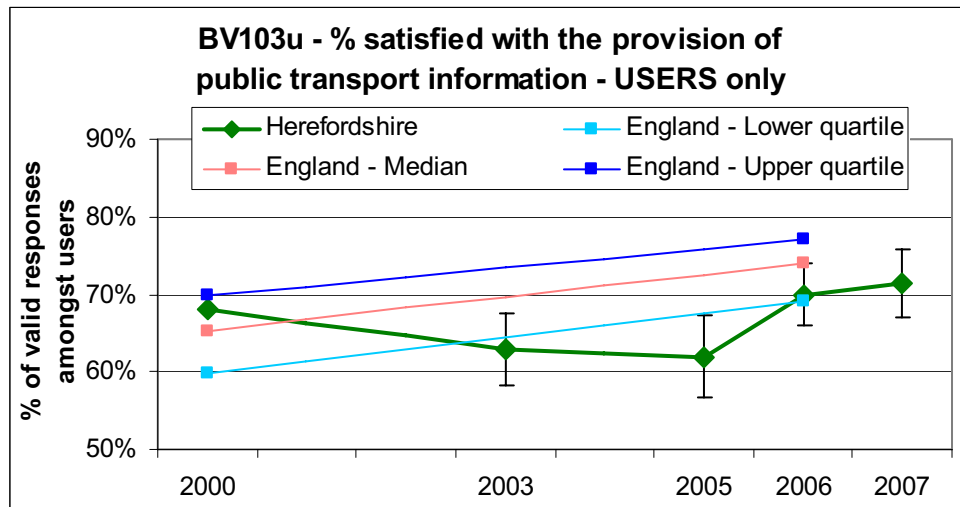
Respondents were asked this question in order to determine which respondents were “users” of the information, and which were “non-users”. “Users” are defined as those who have seen or received any of the information provided in the 12 months prior to the survey – i.e. those who ticked “yes” to Q12. “Non-users” are those who ticked “no” to Q12. 31% of those who answered this question had seen or received the information in the last 12 months.

“yes” to Q12. “Non-users” are those who ticked “no” to Q12. 31% of those who answered this question had seen or received the information in the last 12 months.

<b>BV103u, BV103nu - Satisfaction with the provision of public transport information USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	19%	6%
Fairly satisfied	52%	24%
Neither	16%	47%
Fairly dissatisfied	8%	14%
Very dissatisfied	5%	9%
Base	412	889

<b>BV103u, BV103nu - Trend over time and quartile position USERS and NON-USERS</b>					
	2000	2003	2005	2006	2007
Users' score	68%	63%	62%	70%	71%
Users' quartile position	2nd			3rd	
Non-users' score		32%	29%	32%	30%

Amongst the users who answered the question, 71% were satisfied with the provision of public transport information overall, while 13% were dissatisfied and 16% were neutral. There has been no significant change in satisfaction amongst users since 2006.



The following analyses were carried out looking only at respondents who were “users” of the public transport information.

No significant difference was found in satisfaction with the provision of public transport information between respondents who were disabled and those who had no disability.

It had been intended to investigate whether respondents with a sight-based disability (blind, partially sighted or sensitive to light) had different views from other respondents, but there were too few “users” with a sight-based disability for any meaningful analysis to be carried out.



## The local bus service

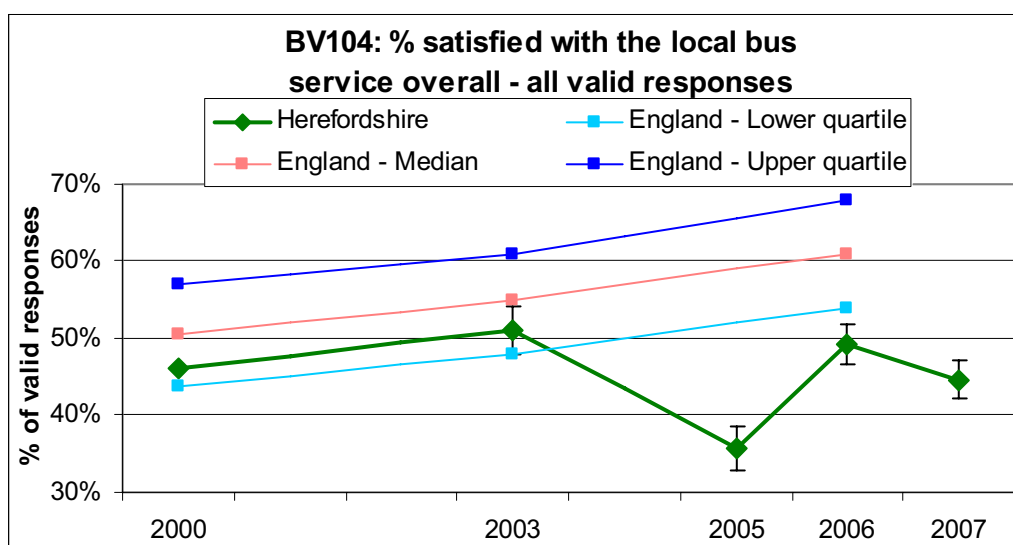
Respondents were given a summary of the role Herefordshire Council plays in supplementing local bus services and providing bus shelters, and asked:

*Q13: Please indicate whether you are satisfied or dissatisfied with the local bus service overall*

<b>Q13: Satisfaction with the local bus service (BV104)</b> <i>All valid responses</i>	
Very satisfied	12%
Fairly satisfied	33%
Neither	35%
Fairly dissatisfied	11%
Very dissatisfied	9%
Base	1,547

When looking at responses from everyone who answered the question, 45% were satisfied with the local bus service, while 21% were dissatisfied and 35% were neutral. There has been no significant change in satisfaction since 2006, maintaining an improvement since 2005.

<b>BV104 - Trend over time and quartile position</b> <i>All valid responses</i>					
	2000	2003	2005	2006	2007
Score	46%	51%	36%	49%	45%
Quartile position	3rd	3rd		Worst	



Q14: How frequently, if at all, do you use the local bus service?

<b>Q14: Frequency of use of the local bus service</b>	
Almost every day	4%
At least once a week	10%
About once a month	10%
Within the last 6 months	10%
Within the last year	9%
Longer ago	17%
Never used	37%
Don't know	*%
Not provided	2%
Base	1,601

Respondents were asked this question in order to determine which respondents were “users” of the bus service, and which were “non-users”. “Users” are defined as those who have used the bus at least once in the 12 months prior to the survey. “Non-users” are those who have used the bus longer ago, or never used it.

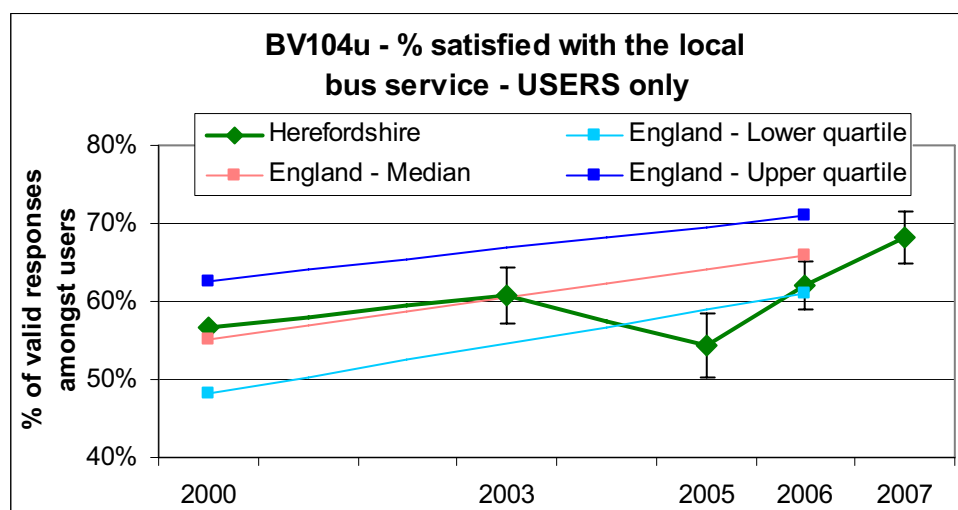
44% of all survey respondents have used the bus at some point in the last 12 months. Just over half (54%) have used it longer ago or never used it.

<b>BV104u, BV104nu - Satisfaction with the local bus service USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	20%	5%
Fairly satisfied	48%	21%
Neither	11%	54%
Fairly dissatisfied	12%	11%
Very dissatisfied	8%	10%
Base	698	835

Amongst the users who answered the question, 68% were satisfied with the local bus service overall, while 20% were dissatisfied and 11% were neutral. As a result of the relatively small sample base and thus large confidence intervals, the apparent

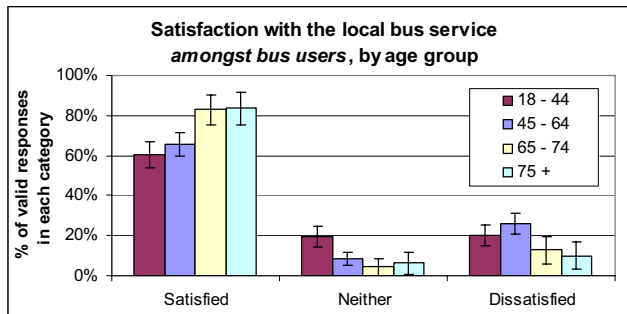
improvement in score from 62% in 2006 to 68% this year is not statistically significant. There has, however, been a significant improvement since 2005.

<b>BV104u, BV104nu - Trend over time and quartile position USERS and NON-USERS</b>					
	2000	2003	2005	2006	2007
Users' score	57%	61%	54%	62%	68%
Users' quartile position	2nd			3rd	
Non-users' score		32%	17%	29%	25%

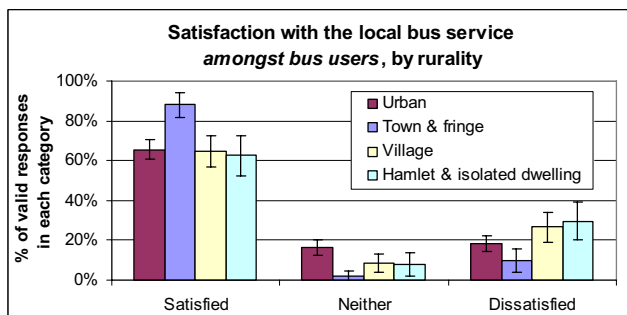


The following analyses look only at respondents who are bus users.

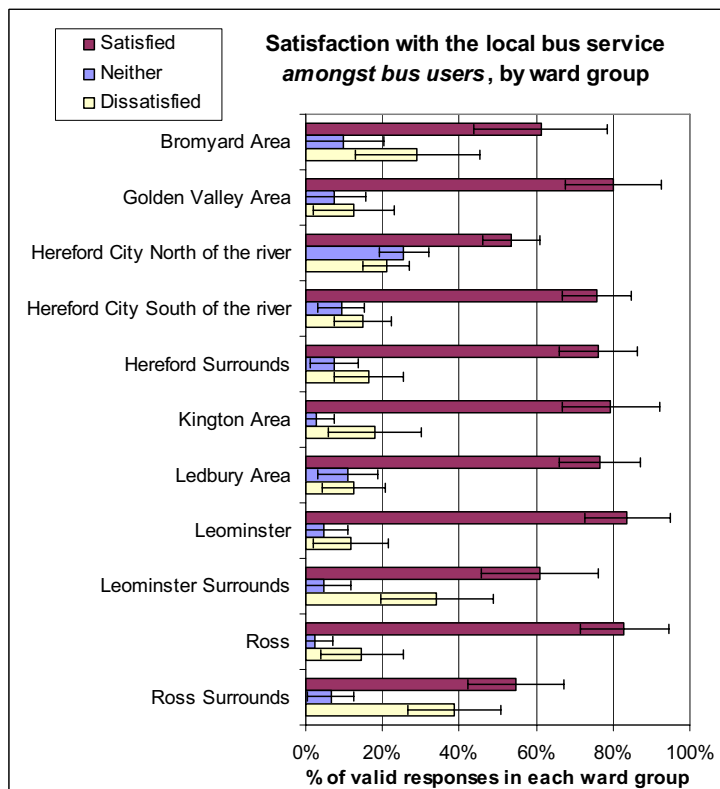
There is no significant difference in satisfaction with the bus service between respondents who are disabled and those who have no disability.



Bus users aged between 18 and 64 are less likely to be satisfied with the bus service, than bus users aged 65 and over.



Bus users who live in town and fringe areas are more likely to be satisfied with the bus service, than bus users who live in other areas. Please refer to Appendix 4 for more details of the rurality categories used.



Amongst bus users, satisfaction with the bus service is highest for respondents who live in Leominster and Ross (84% and 83% respectively), and lowest for those who live in Hereford City North of the river and Ross Surrounds (53% and 55%).

Please refer to Appendix 3 for an explanation of the ward groups used.

## Cultural and recreational activities and venues

Respondents were informed of Herefordshire Council's level of support and involvement in cultural and recreational activities and venues. For each of the five cultural and recreational services, respondents were asked their level of satisfaction and frequency of use of the service. Each of the five services is considered here in turn.

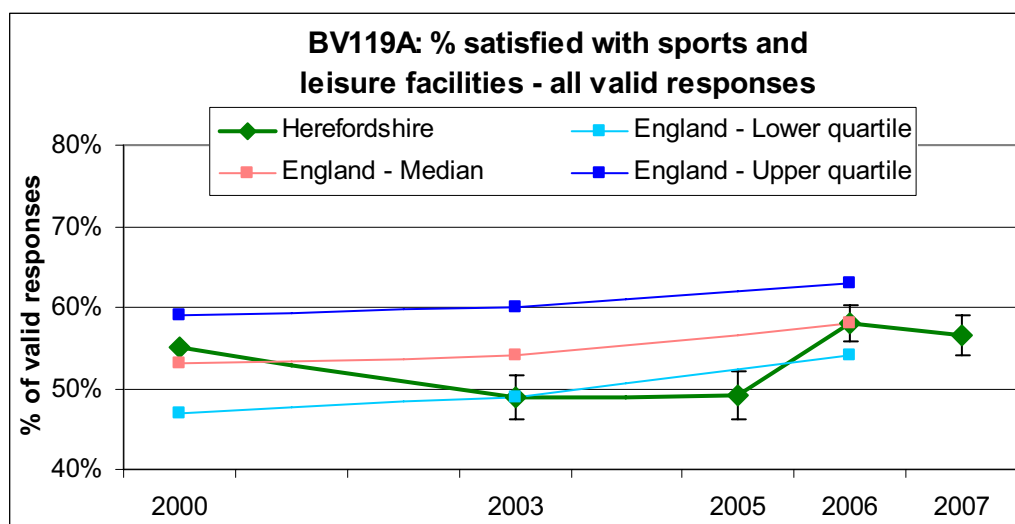
### Sports / leisure facilities and events

Q15a: Satisfaction with sports / leisure facilities and events

<b>Q15a: Satisfaction with sports / leisure facilities and events (BV119A) - All valid responses</b>	
Very satisfied	11%
Fairly satisfied	45%
Neither	34%
Fairly dissatisfied	7%
Very dissatisfied	2%
Base	1,530

When looking at responses from everyone who answered the question, 56% were satisfied with sports and leisure facilities and events, while 10% were dissatisfied and 34% were neutral. There has been no significant change in satisfaction since 2006, maintaining an improvement since 2005.

<b>BV119A - Trend over time and quartile position</b>					
<i>All valid responses</i>					
	2000	2003	2005	2006	2007
Score	55%	49%	49%	58%	56%
Quartile position	2nd	Worst		2nd	



Q16a: Frequency of use of sports / leisure facilities and events

<b>Q16a: Frequency of use of sports / leisure facilities and events</b>	
Almost every day	2%
At least once a week	16%
About once a month	12%
Within the last 6 months	15%
Within the last year	10%
Longer ago	15%
Never used	23%
Don't know	4%
Not provided	3%
Base	1,601

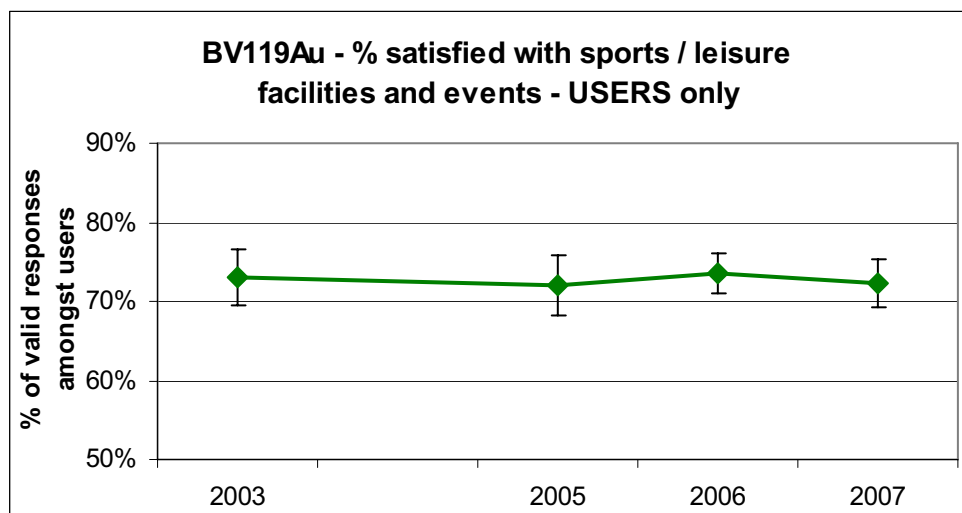
Respondents were asked this question in order to determine which respondents were “users” of sports and leisure facilities or events, and which were “non-users”. “Users” are defined as those who have used the facilities at least once in the 12 months prior to the survey. “Non-users” are those who have used the facilities or events longer ago, or never used them.

More than half of respondents (55%) had used sports and leisure facilities or events in the last 12 months. 38% had used them longer ago or never used them.

<b>BV119Au, BV119Anu - Satisfaction with sports / leisure facilities and events USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	15%	6%
Fairly satisfied	57%	28%
Neither	17%	58%
Fairly dissatisfied	9%	6%
Very dissatisfied	3%	1%
Base	877	576

<b>BV119Au, BV119Anu – Trend over time USERS and NON-USERS</b>				
	2003	2005	2006	2007
Users’ score	73%	72%	74%	72%
Non-users’ score	28%	26%	36%	35%

Amongst the sports and leisure users who gave an answer to the question, 72% were satisfied with the service, compared to 11% who were dissatisfied and 17% neutral. There has been no significant change in satisfaction since 2006.

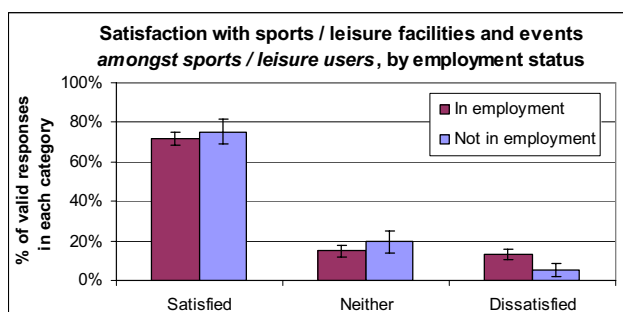


The following analyses look only at users of sports / leisure facilities and events.

There is no significant difference in satisfaction between disabled users and users who are not disabled.

No significant difference in satisfaction was seen between respondents of different ages.

Although there is no significant difference in satisfaction, sports / leisure users who are in employment are significantly more *dissatisfied* with the facilities and events than users who are not in employment (including retired respondents).



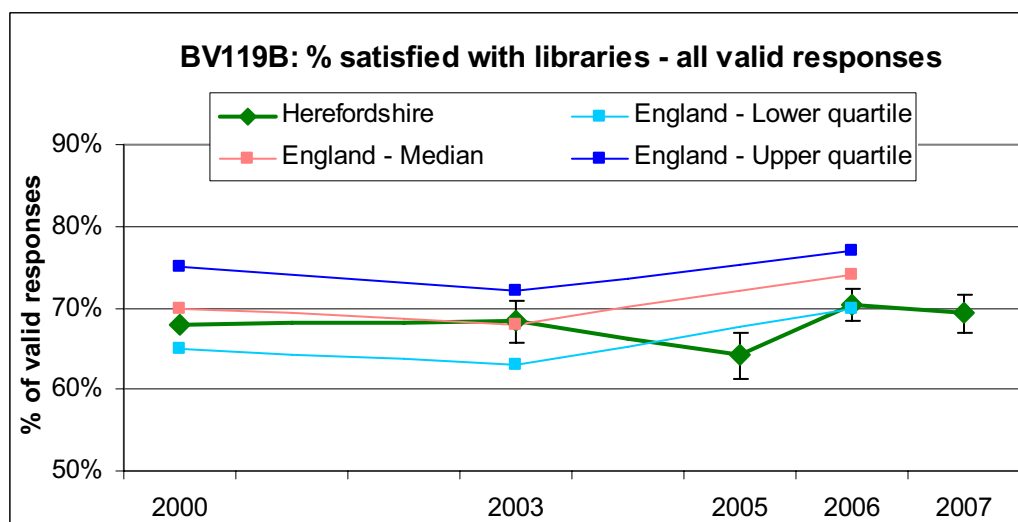
## Libraries

Q15b: Satisfaction with libraries

Q15b: Satisfaction with libraries (BV119B) - All valid responses	
Very satisfied	23%
Fairly satisfied	46%
Neither	25%
Fairly dissatisfied	4%
Very dissatisfied	1%
Base	1,525

Amongst all respondents who answered the question, 69% were satisfied with libraries, while 6% were dissatisfied and 25% neutral. There has been no significant change in satisfaction since 2006.

BV119B - Trend over time and quartile position All valid responses					
	2000	2003	2005	2006	2007
Score	68%	68%	64%	70%	69%
Quartile position	3rd	2nd		3rd	



Q16b: Frequency of use of libraries

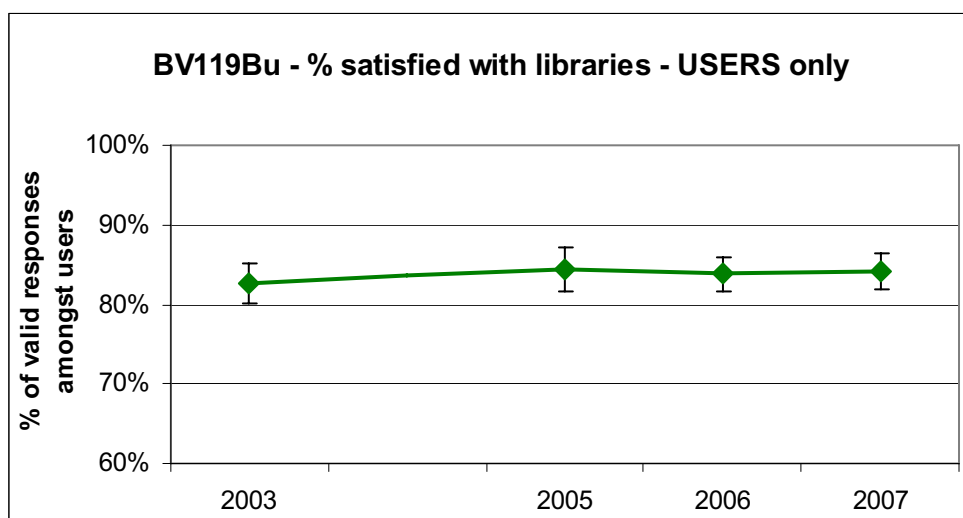
<b>Q16b: Frequency of use of libraries</b>	
Almost every day	*%
At least once a week	10%
About once a month	19%
Within the last 6 months	18%
Within the last year	12%
Longer ago	18%
Never used	18%
Don't know	2%
Not provided	3%
Base	1,601

59% of all survey respondents had used libraries at least once within the last 12 months ("users"), while 36% had used them longer ago or never used them ("non-users").

<b>BV119Bu, BV119Bnu - Satisfaction with libraries USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	32%	9%
Fairly satisfied	52%	37%
Neither	9%	50%
Fairly dissatisfied	5%	3%
Very dissatisfied	2%	1%
Base	928	550

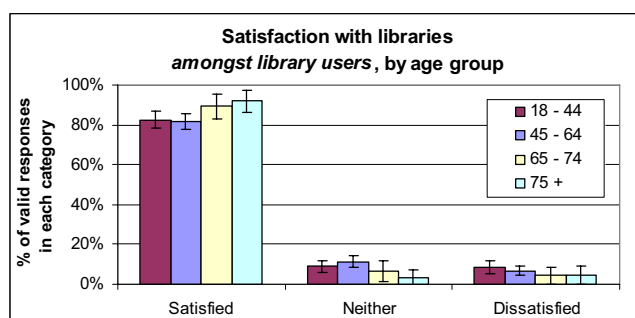
<b>BV119Bu, BV119Bnu – Trend over time USERS and NON-USERS</b>				
	2003	2005	2006	2007
Users' score	83%	84%	84%	84%
Non-users' score	42%	34%	47%	46%

Amongst the library users who gave an answer, 84% were satisfied with the service, compared to 7% who were dissatisfied and 9% who were neutral. There has been no change in satisfaction since 2006.



The following analyses look only at users of libraries.

No significant difference in satisfaction with libraries was seen between library users who are disabled, and those with no disability.



Library users aged 75 and over were more likely to be satisfied with the library than users aged 45 to 64.



Although there is no significant difference in satisfaction, library users who are in employment are more likely to be *dissatisfied* than users who are not in employment (including the retired).

## Museums and galleries

Q15c: Satisfaction with museums and galleries

<b>Q15c: Satisfaction with museums and galleries (BV119C)</b> <i>All valid responses</i>	
Very satisfied	9%
Fairly satisfied	37%
Neither	45%
Fairly dissatisfied	7%
Very dissatisfied	2%
Base	1,518

Amongst all the survey respondents who gave a response to this question, 46% were satisfied with museums and galleries, compared with 9% who were dissatisfied and 45% who were neutral. There has been no significant change in satisfaction since 2006.

<b>BV119C - Trend over time and quartile position</b> <i>All valid responses</i>					
	2000	2003	2005	2006	2007
Score	51%	48%	42%	45%	46%
Quartile position	2nd	2nd		2nd	





*Q16c: Frequency of use of museums and galleries*

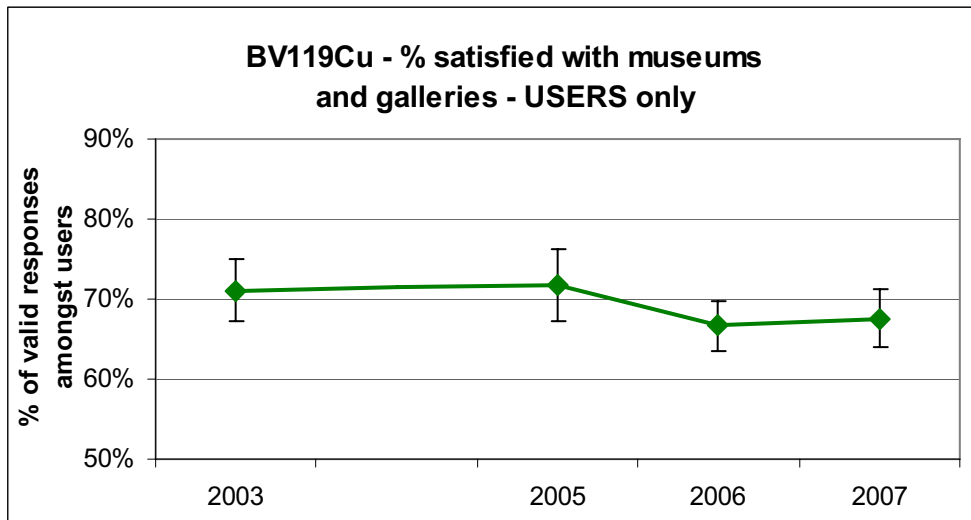
<b>Q16c: Frequency of use of museums and galleries</b>	
Almost every day	*%
At least once a week	1%
About once a month	6%
Within the last 6 months	17%
Within the last year	17%
Longer ago	24%
Never used	27%
Don't know	5%
Not provided	4%
Base	1,601

40% of all survey respondents had used museums and galleries at least once in the 12 months prior to the survey ("users"), and 51% had used them longer ago or never used them ("non-users").

<b>BV119Cu, BV119Cnu - Satisfaction with museums and galleries - USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	14%	5%
Fairly satisfied	53%	26%
Neither	22%	61%
Fairly dissatisfied	8%	6%
Very dissatisfied	3%	1%
Base	635	789

<b>BV119Cu, BV119Cnu – Trend over time USERS and NON-USERS</b>				
	2003	2005	2006	2007
Users' score	71%	72%	67%	68%
Non-users' score	31%	25%	31%	31%

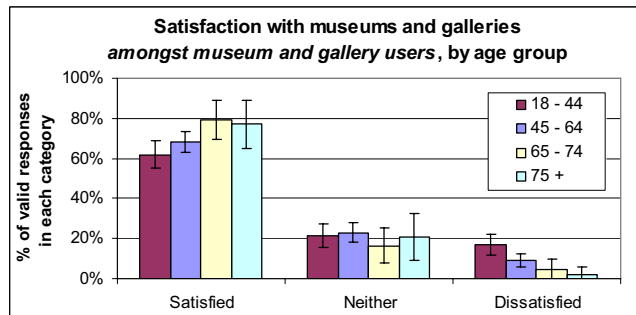
Amongst the museum and gallery users who answered the question, 68% were satisfied with the service, compared to 10% dissatisfied and 22% neutral. There has been no significant change in satisfaction since 2006.



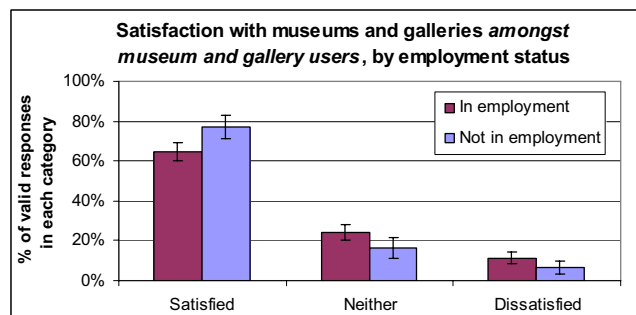
The following analyses look only at museum and gallery users.

There is no significant difference in satisfaction with museums and galleries between disabled users and users who are not disabled.

Museum and gallery users aged between 65 and 74 are more likely to be satisfied than users aged 18 to 44.



Museum and gallery users who are not in employment (including retired respondents) are more likely to be satisfied with the service than those who are in employment.



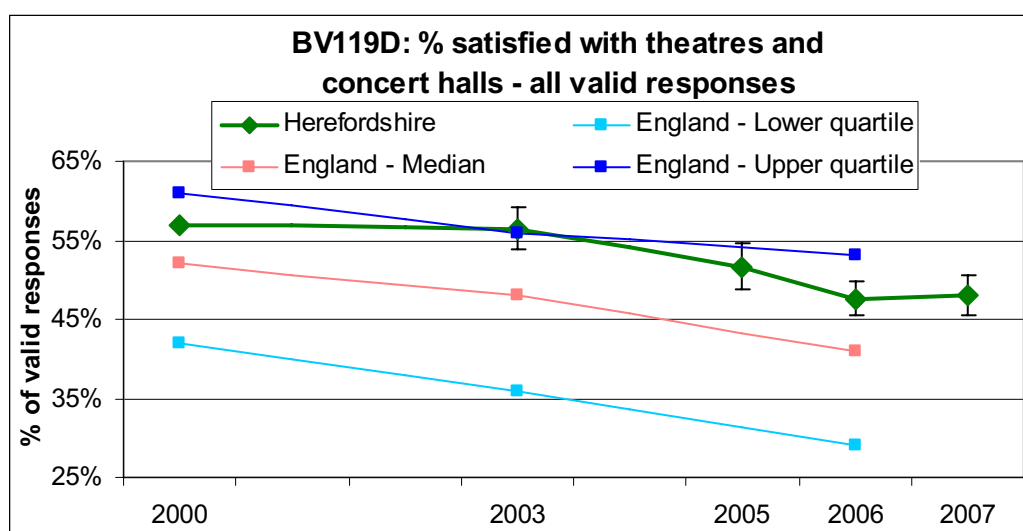
## Theatres / Concert halls

### Q15d: Satisfaction with theatres / concert halls

<b>Q15d: Satisfaction with theatres / concert halls (BV119D)</b> <i>All valid responses</i>	
Very satisfied	10%
Fairly satisfied	38%
Neither	39%
Fairly dissatisfied	9%
Very dissatisfied	3%
Base	1,532

Amongst all the survey respondents who gave an answer, 48% were satisfied with theatres and concert halls, compared to 13% who were dissatisfied and 39% neutral. There has been no change in the level of satisfaction since 2006, staying at a worse score than was seen in 2003.

<b>BV119D - Trend over time and quartile position</b> <i>All valid responses</i>					
	2000	2003	2005	2006	2007
Score	57%	57%	52%	48%	48%
Quartile position	2nd	Best		2nd	



### Q16d: Frequency of use of theatres / concert halls

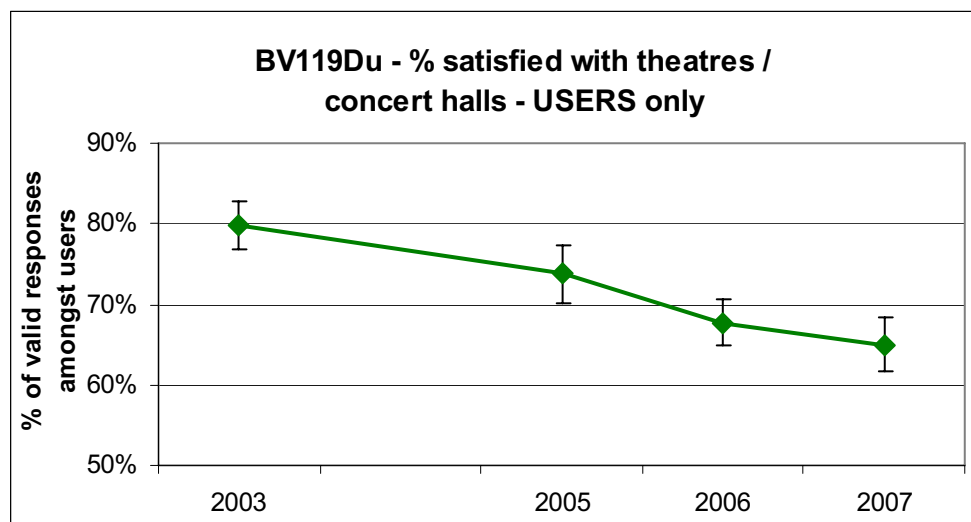
<b>Q16d: Frequency of use of theatres / concert halls</b>	
Almost every day	0%
At least once a week	1%
About once a month	9%
Within the last 6 months	22%
Within the last year	20%
Longer ago	19%
Never used	23%
Don't know	4%
Not provided	4%
Base	1,601

Around half of all survey respondents (51%) had used theatres or concert halls at least once within the last 12 months ("users"). 42% had used them longer ago, or never used them ("non-users").

<b>BV119Du, BV119Dnu - Satisfaction with theatres / concert halls - USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	14%	5%
Fairly satisfied	51%	24%
Neither	22%	60%
Fairly dissatisfied	10%	9%
Very dissatisfied	3%	3%
Base	809	647

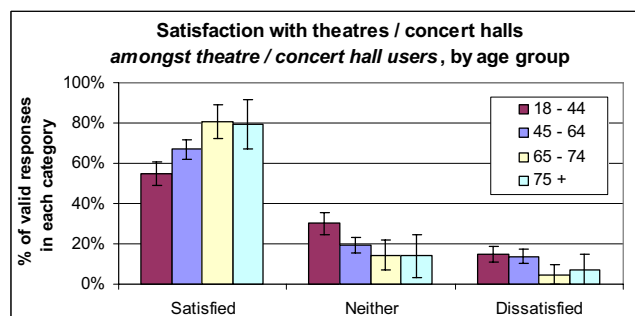
<b>BV119Du, BV119Dnu – Trend over time USERS and NON-USERS</b>				
	2003	2005	2006	2007
Users' score	80%	74%	68%	65%
Non-users' score	26%	27%	27%	29%

Amongst the theatre and concert hall users who gave an answer to the question, 65% were satisfied with the service, compared to 13% who were dissatisfied and 22% who were neutral. There has been no significant change in satisfaction since 2006, making no improvement to the general downward trend seen since 2003.

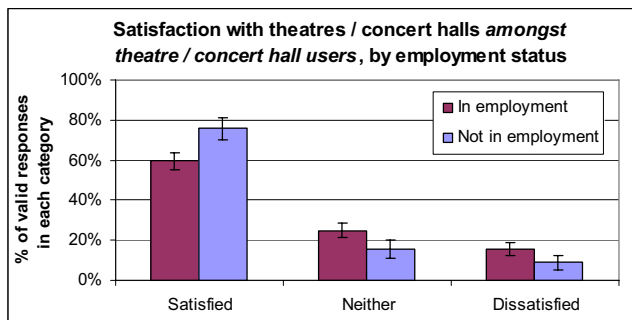


The following analyses look only at theatre and concert hall users.

No significant difference was seen in satisfaction with theatres and concert halls between users who were disabled, and those who had no disability.



Users aged 65 and over were more likely to be satisfied with theatres and concert halls than users aged 18 to 44.



Satisfaction with theatres / concert halls was higher amongst users who were not in employment (including the retired), than amongst those who were in employment.

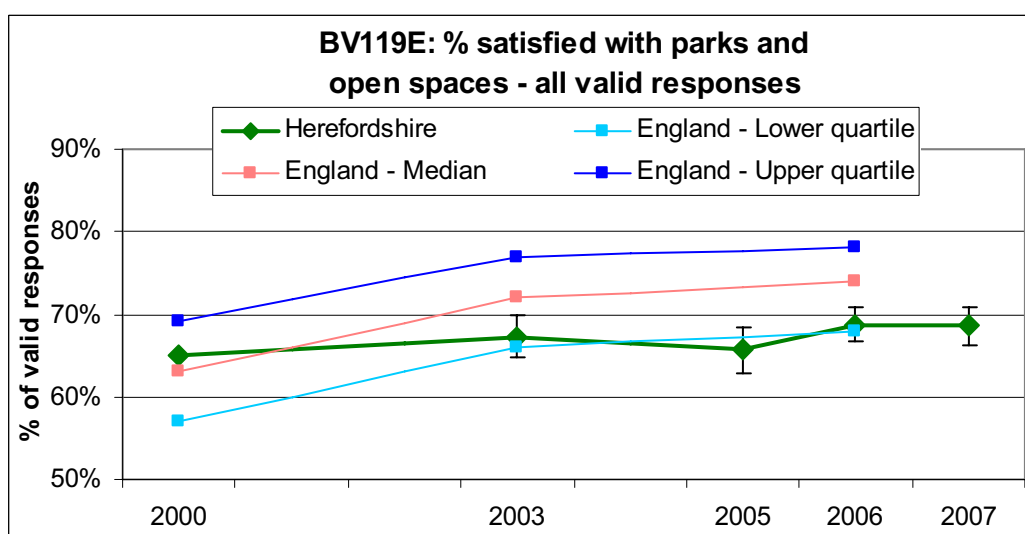
## Parks and open spaces

Q15a: Satisfaction with parks and open spaces

<b>Q15d: Satisfaction with parks and open spaces (BV119E)</b>	
<i>All valid responses</i>	
Very satisfied	16%
Fairly satisfied	52%
Neither	22%
Fairly dissatisfied	7%
Very dissatisfied	2%
Base	1,547

Amongst all the survey respondents who gave an answer to this question, 69% were satisfied with parks and open spaces, compared to 10% who were dissatisfied and 22% who were neutral. There has been no change in the level of satisfaction since 2006.

<b>BV119E - Trend over time and quartile position</b>					
<i>All valid responses</i>					
	2000	2003	2005	2006	2007
Score	65%	67%	66%	69%	69%
Quartile position	2nd	3rd		3rd	



Q16e: Frequency of use of parks and open spaces

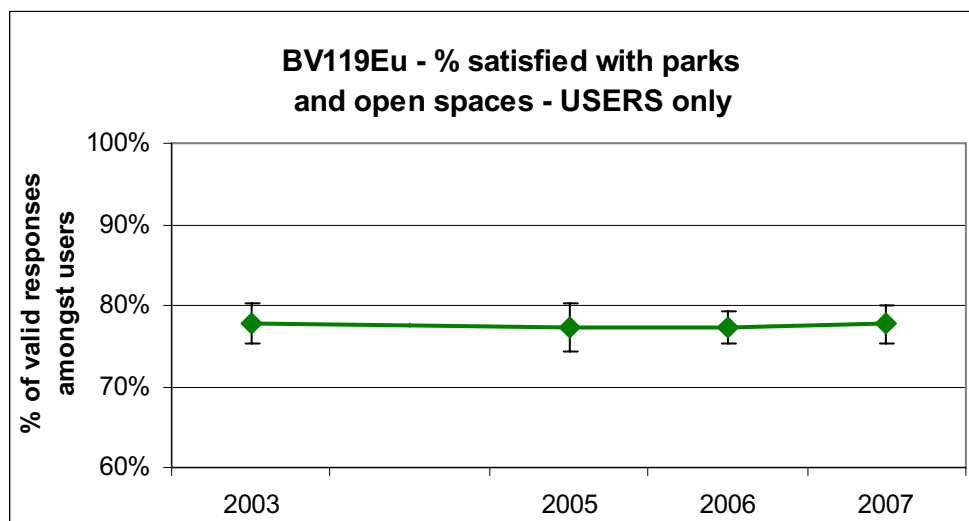
<b>Q16e: Frequency of use of parks and open spaces</b>	
Almost every day	11%
At least once a week	22%
About once a month	17%
Within the last 6 months	15%
Within the last year	11%
Longer ago	7%
Never used	10%
Don't know	4%
Not provided	3%
Base	1,601

Around three quarters of all survey respondents (76%) had used parks or open spaces at least once within the previous 12 months (“users”), while 17% had used them longer ago or never used them (“non-users”).

<b>BV119Eu, BV119Enu - Satisfaction with theatres / concert halls - USERS and NON-USERS</b>		
	Users	Non-users
Very satisfied	19%	6%
Fairly satisfied	59%	26%
Neither	12%	58%
Fairly dissatisfied	7%	8%
Very dissatisfied	3%	1%
Base	1,217	253

<b>BV119Eu, BV119Enu – Trend over time USERS and NON-USERS</b>				
	2003	2005	2006	2007
Users’ score	78%	77%	77%	78%
Non-users’ score	28%	30%	35%	32%

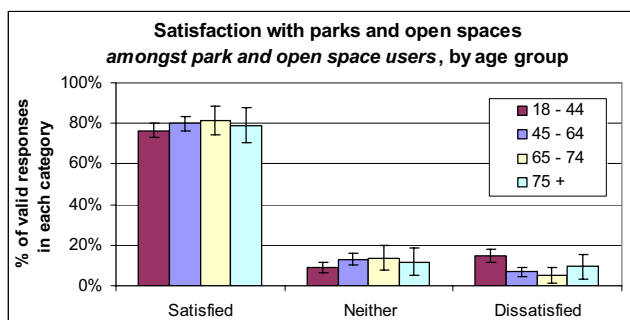
Amongst the park and open space users who gave an answer, 78% were satisfied with the service, while 10% were dissatisfied and 12% neutral. There has been no significant change in satisfaction since 2006.



The following analyses look only at users of parks and open spaces.

No significant difference was seen in satisfaction with parks and open spaces, between disabled park users and users who were not disabled.

Although there was no significant difference in satisfaction, park users aged 18 to 44 were more likely to be *dissatisfied* than those aged between 45 and 74.



No significant difference was seen in satisfaction between parks users who were in employment and those who were not in employment (including the retired).

## Other services provided by Herefordshire Council

Respondents were asked their satisfaction with some other Council services, and then whether they or a member of their family had used each service in the 12 months prior to the survey.

### Planning Services

*Q17a: Satisfaction with planning services*

<b>Q17a: Satisfaction with planning services</b>	
<b>All valid responses</b>	
Very satisfied	6%
Fairly satisfied	25%
Neither	52%
Fairly dissatisfied	10%
Very dissatisfied	8%
Base	1,535

Amongst all the survey respondents who gave an answer to this question, 30% were satisfied with planning services, compared to 18% who were dissatisfied and 52% neutral. There has been no significant change in satisfaction since 2006.

<b>Q17a – Trend over time</b>				
<b>All valid responses</b>				
	2003	2005	2006	2007
Score	30%	20%	29%	30%

*Q18a: Usage of planning services*

<b>Q18a: Usage of planning services</b>	
Used service	25%
Base	1,601

A quarter of all survey respondents (25%) said that they, or a member of their family, had used planning services in the 12 months prior to the survey.

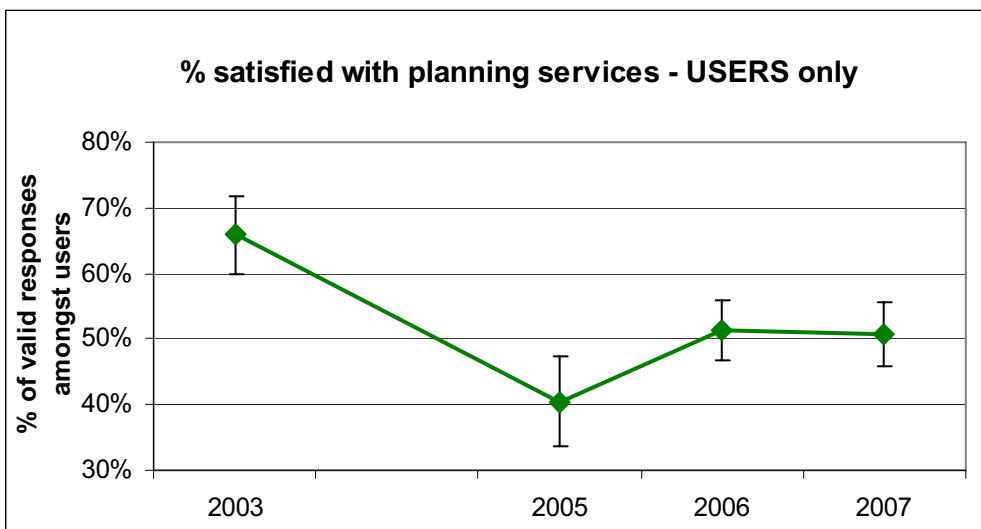
**Q17a: Satisfaction with planning services**  
**USERS (including usage by a family member)**

Very satisfied	12%
Fairly satisfied	39%
Neither	13%
Fairly dissatisfied	18%
Very dissatisfied	18%
Base	405

Amongst users who answered the question (“users” includes those who have a family member who had used the service), around half (51%) were satisfied with planning services. 36% were dissatisfied, and 13% were neutral. There has been no change in the level of satisfaction since 2006, staying at a worse score than was seen in 2003.

**Q17a – Trend over time**  
**USERS (including usage by a family member)**

	2003	2005	2006	2007
Score	66%	41%	51%	51%





## Personal social services

### Q17b: Satisfaction with personal social services

<b>Q17b: Satisfaction with personal social services</b> <i>All valid responses</i>	
Very satisfied	3%
Fairly satisfied	18%
Neither	70%
Fairly dissatisfied	6%
Very dissatisfied	2%
Base	1,509

Amongst all the survey respondents who answered this question, 22% were satisfied with personal social services, compared with 8% who were dissatisfied and 70% neutral. There has been no significant change in satisfaction since 2006.

<b>Q17b – Trend over time</b> <i>All valid responses</i>				
	2003	2005	2006	2007
Score	30%	18%	25%	22%

### Q18b: Usage of personal social services

<b>Q18b: Usage of personal social services</b>	
Used service	17%
Base	1,601

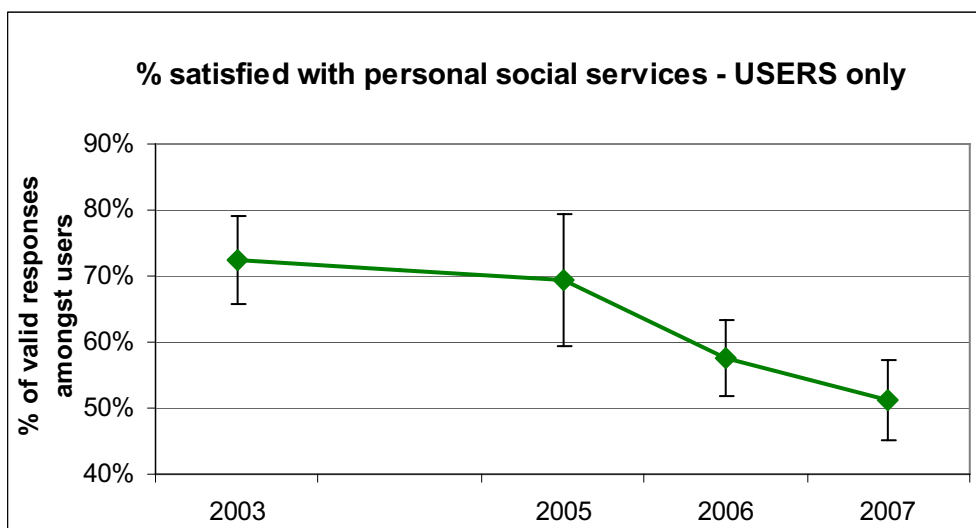
17% of all survey respondents said that they, or a member of their family, had used personal social services in the 12 months prior to the survey.

<b>Q17b: Satisfaction with personal social services</b> <i>USERS (including usage by a family member)</i>	
Very satisfied	13%
Fairly satisfied	39%
Neither	27%
Fairly dissatisfied	16%
Very dissatisfied	6%
Base	256

Amongst users who answered the question (“users” includes those who have a family member who had used the service), around half (51%) were satisfied with personal social services. 22% were dissatisfied, and 27% were neutral. As a result of the relatively small sample base and thus large confidence intervals, the apparent deterioration in the score since

2006 is not statistically significant. There has, however, been a significant deterioration since both 2003 and 2005.

<b>Q17b – Trend over time</b> <i>USERS (including usage by a family member)</i>				
	2003	2005	2006	2007
Score	72%	70%	58%	51%



### Local authority education service

*Q17c: Satisfaction with the local authority education service*

<b>Q17c: Satisfaction with the local authority education service</b> <i>All valid responses</i>	
Very satisfied	6%
Fairly satisfied	27%
Neither	61%
Fairly dissatisfied	4%
Very dissatisfied	2%
Base	1,511

Amongst all the survey respondents who gave an answer to this question, one third (33%) were satisfied with the local authority education service, compared to 6% who were dissatisfied and 61% who were neutral. There has been no significant change in satisfaction since 2006.

<b>Q17c – Trend over time</b> <i>All valid responses</i>				
	2003	2005	2006	2007
Score	47%	34%	32%	33%

*Q18c: Usage of the local authority education service*

<b>Q18b: Usage of the local authority education service</b>	
Used service	23%
Base	1,601

Just under a quarter of all survey respondents (23%) said that they, or a member of their family, had used the local authority education service in the 12 months prior to the survey.

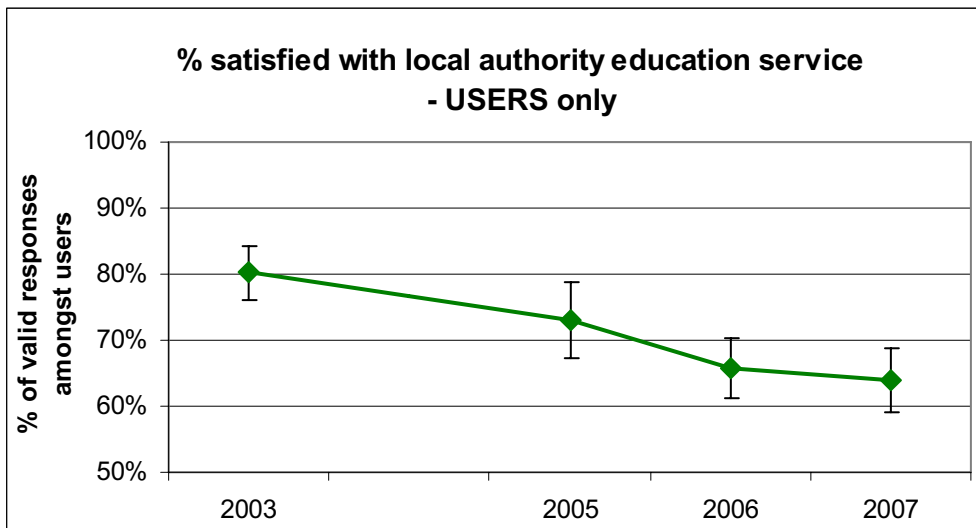
**Q17c: Satisfaction with the local authority education service  
USERS (including usage by a family member)**

Very satisfied	13%
Fairly satisfied	51%
Neither	24%
Fairly dissatisfied	9%
Very dissatisfied	3%
Base	360

Amongst users who answered the question (“users” includes those who have a family member who had used the service), 64% were satisfied with the local authority education service. 12% were dissatisfied, and 24% were neutral. There has been no significant change in satisfaction since 2006. There has, however, been a deterioration since 2003.

**Q17c – Trend over time  
USERS (including usage by a family member)**

	2003	2005	2006	2007
Score	80%	73%	66%	64%



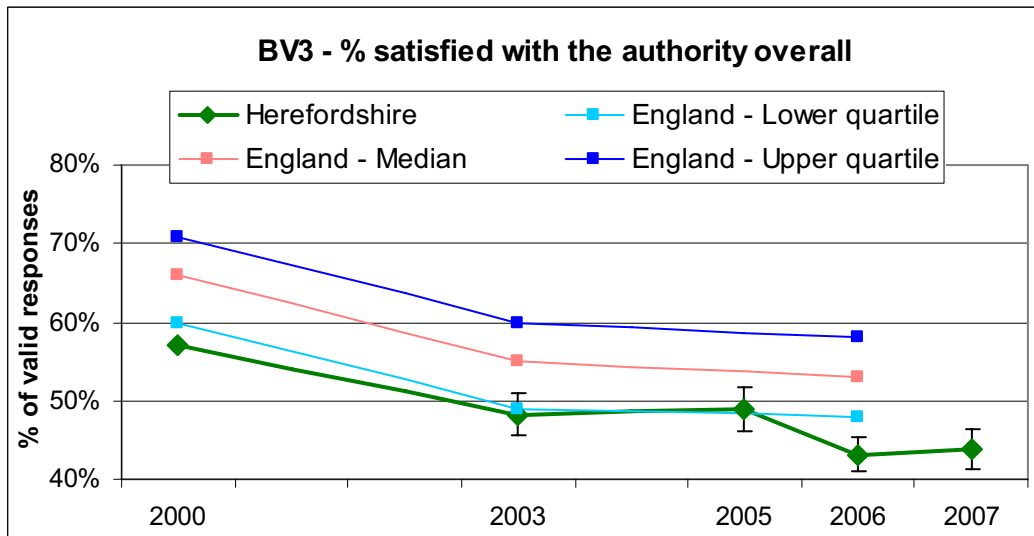
## Overall satisfaction with the authority

Q19: Taking everything into account, how satisfied or dissatisfied are you with the way the authority runs things?

Q19: Overall satisfaction with the authority (BV3)	
Very satisfied	4%
Fairly satisfied	40%
Neither satisfied nor dissatisfied	39%
Fairly dissatisfied	12%
Very dissatisfied	5%
Base	1,509

Amongst those who answered this question, 44% were satisfied with the way the authority runs things overall, compared with 17% who were dissatisfied and 39% neutral. There has been no significant change in satisfaction since 2006, making no improvement to the long-term downward trend seen since 2000.

BV3 - Trend over time and quartile position					
	2000	2003	2005	2006	2007
Score	57%	48%	49%	43%	44%
Quartile position	Worst	Worst		Worst	



When looking at the factors that are linked to overall levels of satisfaction with the authority, the analyses carried out fall into one of two types:

Analysis against other questions

Analysis against the answers given to other questions in the survey (for example satisfaction with individual Council services) can be carried out. The aim of this is to highlight services or areas which have a strong impact on overall satisfaction, and thus to indicate areas on which the Council should focus in order to improve customer satisfaction amongst the residents of Herefordshire.

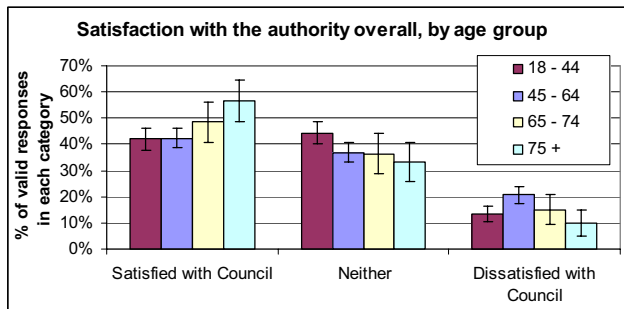
However, a strong positive relationship was found between overall satisfaction, and almost every other question against which it was analysed, i.e. respondents who are satisfied with the Council overall also tend to be satisfied with the individual services. It is not possible therefore to pinpoint a service or services which are more important in driving overall satisfaction with the Council.

The Research Team is considering additional methods by which a greater understanding of the drivers of overall satisfaction could be achieved.

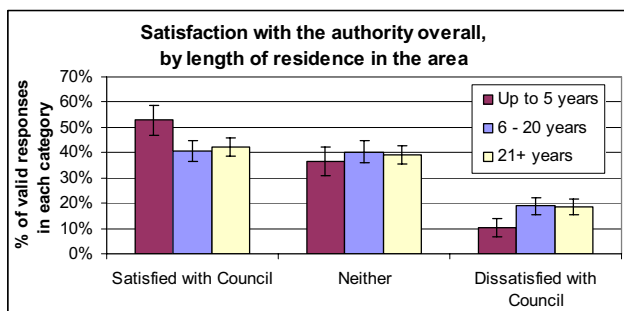
Analysis against demographic categories

As has been carried out in other sections of the questionnaire, respondents' overall opinion of the Council can be analysed according to various demographic and geographic variables. This may help to shed light onto the kinds of people who tend to be satisfied with the Council overall.

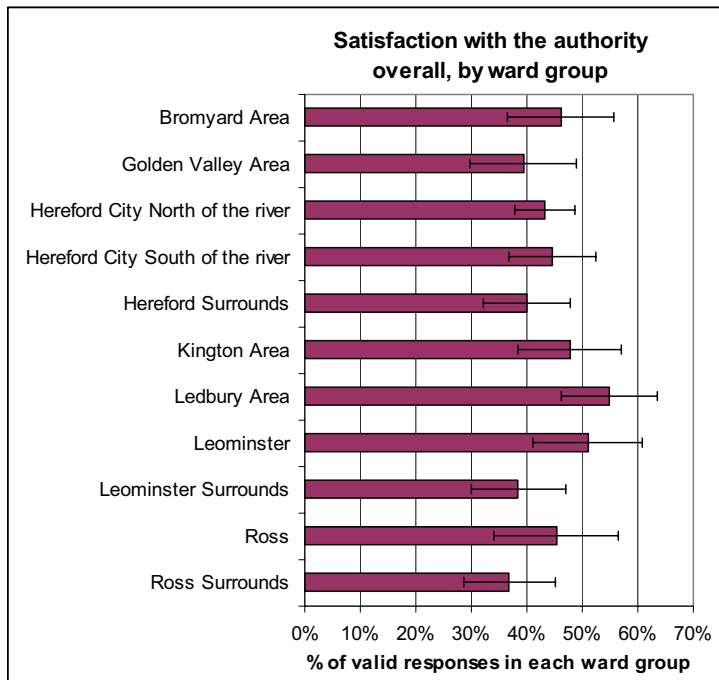
The following relationships were found:



Respondents aged 75 and over were more likely to be satisfied with the authority overall, than those aged 18 to 64.



Respondents who had lived in this area for 5 years or less were more likely to be satisfied with the authority overall, than those who had lived here for longer.



For simplicity, this chart shows only the % satisfied in each ward group.

There was some variation in overall satisfaction with the authority, depending on the ward group in which respondents live.

Note however that the relatively large confidence intervals mean that the majority of these differences are not large enough to be statistically significant.

Please refer to Appendix 3 for an explanation of the ward groups used.

No significant difference in satisfaction with the authority overall was found between respondents based on the following variables:

- Gender
- Employment status
- Disability
- Rurality of respondents' residence
- Deprivation quartile of the area in which respondents live

## Section 3: Information about Herefordshire Council and its services

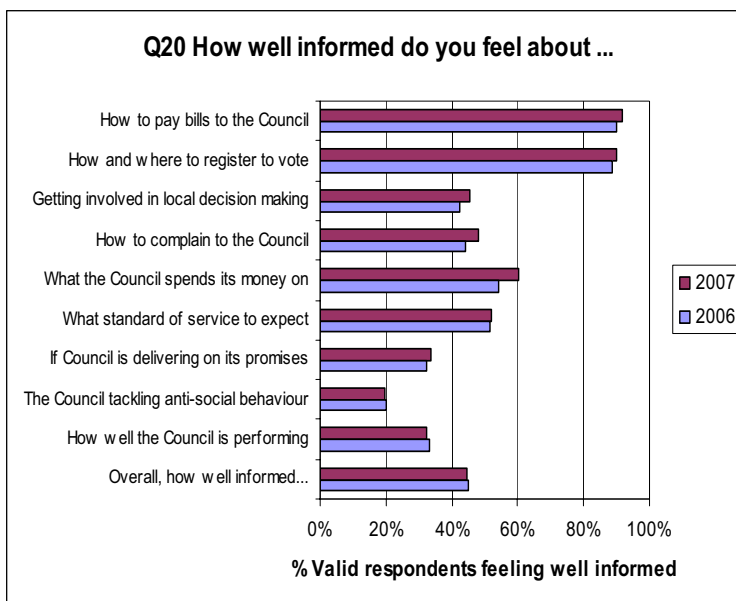
### Information provision

Q20 How well informed do you feel about each of the following?

Q20: Information provision					
	Very well informed	Fairly well informed	Not very well informed	Not well informed at all	Base
How to pay bills to the Council	38%	54%	6%	2%	1,483
How and where to register to vote	42%	48%	7%	3%	1,515
How you can get involved in local decision making	8%	37%	38%	17%	1,384
How to complain to the Council	11%	37%	37%	15%	1,423
What the Council spends its money on	10%	50%	24%	16%	1,449
What standard of service you should expect from the Council	9%	43%	34%	14%	1,425
Whether the Council is delivering on its promises	5%	29%	43%	23%	1,336
What the Council is doing to tackle anti-social behaviour in your local area	3%	17%	44%	36%	1,305
How well the Council is performing	4%	28%	43%	25%	1,324
Overall, how well informed do you think your Council keeps residents about the services and benefits it provides	5%	39%	37%	19%	1,430

Q20: Information provision – Trend over time			
	Very or fairly well informed		
	2006	2006 quartile	2007
How to pay bills to the Council	90%	3rd	92%
How and where to register to vote	89%	3rd	90%
How you can get involved in local decision making	42%	2nd	45%
How to complain to the Council	44%	Worst	48%
What the Council spends its money on	54%	2nd	60%
What standard of service you should expect from the Council	52%	2nd	52%
Whether the Council is delivering on its promises	32%	3rd	34%
What the Council is doing to tackle anti-social behaviour in your local area	20%	3rd	20%
How well the Council is performing	33%	3rd	32%
Overall, how well informed do you think your Council keeps residents about the services and benefits it provides	45%	3rd	44%

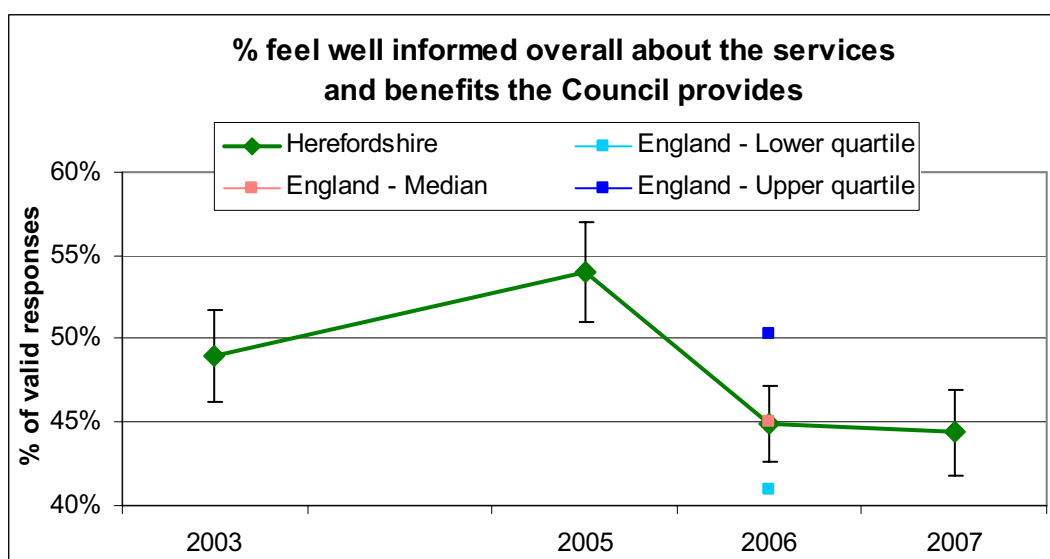
A large majority (over 90%) of respondents feel at least fairly well informed about where to pay Council bills and how and where to register to vote. In contrast, respondents feel least well informed about what the Council is doing to tackle anti-social behaviour locally (20%) and how well the Council is performing (32%).



Of the topics listed, the only one where the views have changed significantly since last year is what the Council spends its money on, which has increased from 54% feeling at least fairly well informed in 2006 to 60% in 2007.

<b>Q20j: Overall, how well informed do you think your Council keeps residents about the services and benefits it provides - Trend over time</b>				
	2003	2005	2006	2007
Very or fairly well informed <sup>3</sup>	49%	54%	45%	44%

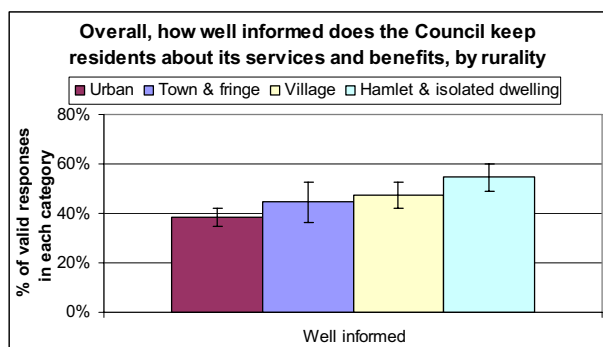
Results for the overall question in earlier years are shown in the table. 44% of respondents answering the question felt that the Council keeps residents at least fairly well informed about the services and benefits it provides. This is similar to 2006 but significantly lower than 2005.



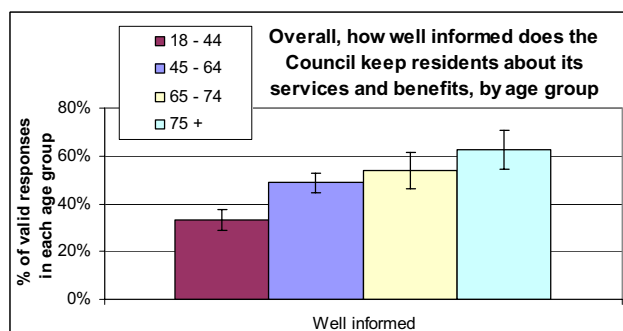
<sup>3</sup> Not strictly comparable: the 2003 and 2005 surveys had slightly different answer options to the 2006 and 2007 surveys, although the overall meaning was the same.



As can be seen in the chart, views about how well the Council keeps residents informed overall vary significantly according to the rurality of the area in which they live (see Appendix 4 for definition of rurality categories). 55% of respondents from areas defined as hamlets and isolated dwellings feel well informed, significantly higher than the 38% of respondents from urban areas.



Respondents aged 18 to 44 are less likely to feel well informed overall than those aged 45 and over.



## Finding out about Herefordshire Council

Q21 How do you find out about Herefordshire Council?

Respondents were asked to identify the single main source they use.

Q21: Finding out about Herefordshire Council		
	% selecting this method	
	2006	2007
Local media (newspapers, television, radio)	38%	32%
Information provided by the Council (newspaper / magazine, leaflets, posters)	35%	35%
Council website / internet	7%	12%
From local Councillor	1%	2%
Direct contact with the Council	7%	7%
Word of mouth (e.g. family or friends)	8%	7%
Other source	2%	2%
None of the above	2%	2%
Base	1,722	1,305

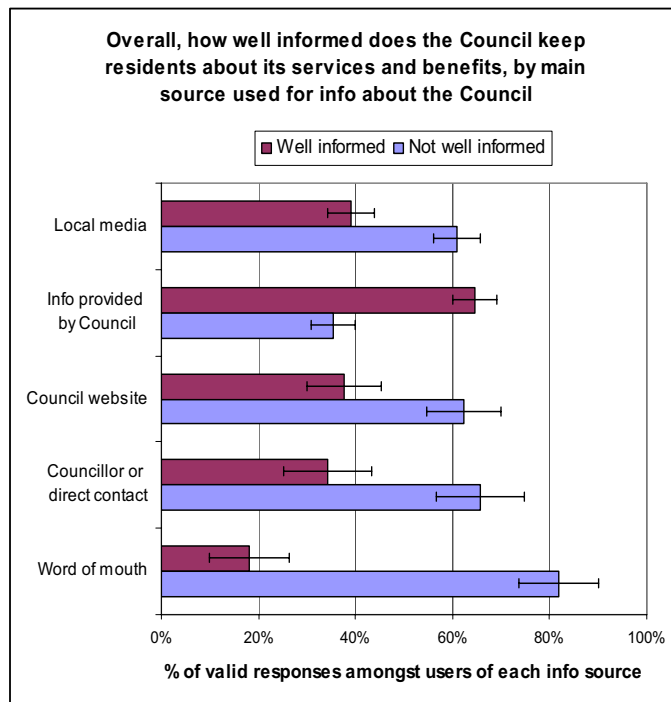
Information provided by the Council and the local media are the two most common methods, each used by about a third of respondents. This is similar to 2006, but the use of local media has fallen from the most popular at 38% in 2006 to the second most used at 32% in 2007.

12% of respondents use the Council website as their main source of information, up from 7% in 2006.

Around one third of the 20 “other” sources specified by respondents mentioned the phone book, presumably indicating that this is how they found out how to contact the Council before doing so by phone.

Respondents who use information provided by the Council as their main source of information are more likely to feel “well informed” than those who use other sources of information.

It is also interesting to note that only users of this source are more likely to feel “well informed” than they are to feel “not well informed”. For users of all other sources of information, respondents are more likely to feel “not well informed” than they are to feel “well informed”.



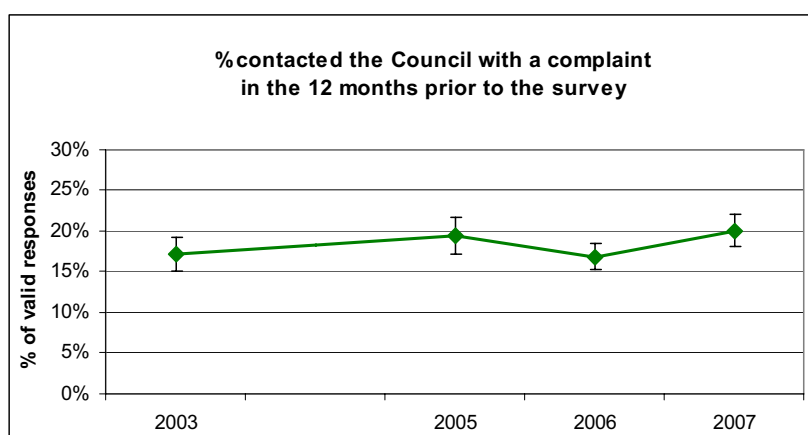
## Section 4: Contacting Herefordshire Council

### Making a complaint

Q22 Have you contacted the authority with a complaint(s) in the last 12 months?

Q22: Contacted the authority with a complaint(s) in the last 12 months?				
	2003	2005	2006	2007
Yes	17%	19%	17%	20%
No	83%	81%	83%	80%
Base	1,325	1,154	2,033	1,538

20% of those answering this question had made a complaint to the Council in the 12 months leading up to the survey. This proportion has not changed significantly since 2003.



Q23 What did the complaint(s) relate to?

If the respondent had made one or more complaints, they were asked what they related to. 276 of the people who made contact with a complaint provided a comment, of which 266 described the nature of concerns (there were 10 don't knows or not applicable comments). Several of the descriptions included more than one complaint making a total of 328 complaints described. The full comments will be passed to the relevant service areas, but a summary indicating the topics or service areas to which the issue related is given in the table below. Note that in this table the figures are unweighted.

<b>Q23 What did the complaint(s) relate to?</b>	
Related service area or topic	Comments relating to this area or topic
Highways and public transport, including the condition of roads or footpaths	88
Environmental services, including household waste collection, fly tipping, dog fouling, trading standards	72
Planning services	30
Flooding or drainage issues	25
Recycling	16
Anti-social behaviour	14
Footpath access / right of way issues	14
Council Tax, charges and payments	13
Noise (inc. dogs barking)	13
Health, Education or Social care	8
Topics related to Housing Associations and social housing	6
Cultural and recreational services inc. parks	3
Miscellaneous / Unclassified	26
<b>Total</b>	<b>328</b>

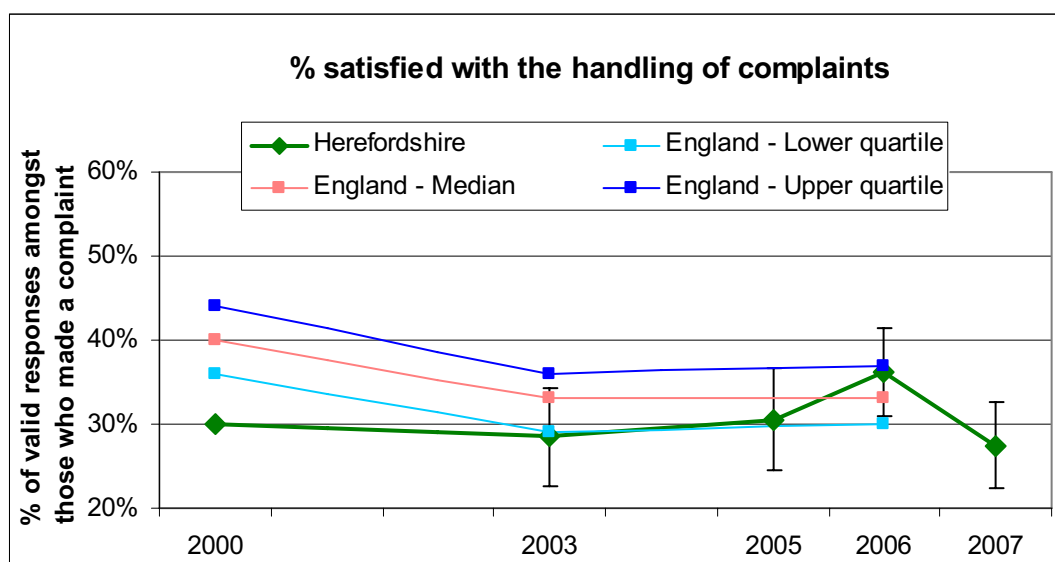
Q24 How satisfied or dissatisfied are you with the way in which your complaint(s) was (were) handled?

Of the 283 respondents who had contacted the Council with a complaint in the last 12 months and answered this question, 27% were satisfied with the way the complaint was handled. 62% were dissatisfied, including 39% who were very dissatisfied.

Q24: Satisfaction with complaints handling (BV4)	
Very satisfied	9%
Fairly satisfied	18%
Neither satisfied nor dissatisfied	10%
Fairly dissatisfied	23%
Very dissatisfied	39%
Base	283

Whilst the proportion of satisfied respondents has fallen from 36% in 2006 to 27% this year, the change is within the confidence interval and therefore it cannot be said to be significant. The relatively few respondents who have contacted the Council with a complaint means that a change of over 10.5 percentage points would be required to be 95% confident of a real change in the views of the wider population (in this case, the “wider population” refers to everyone in the county who has made a complaint to the Council in the last 12 months).

Q24 Satisfaction with complaints handling (BV4) – trend over time					
	2000	2003	2005	2006	2007
Score	30%	29%	31%	36%	27%
Quartile position	Worst	Worst		2nd	



## Contacting Herefordshire Council for other reasons

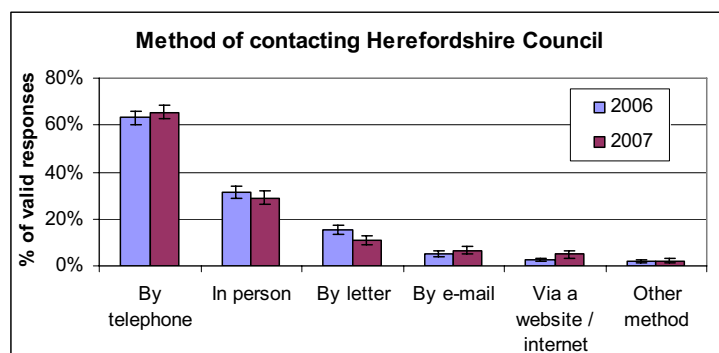
Questions 25 to 27 asked about respondents' most recent contact with the Council, for reasons other than to make a complaint. Respondents were asked to answer these questions only if they had contacted the Council for reasons other than to make a complaint, in the 12 months prior to the survey.

*Q25: When you MOST RECENTLY contacted the Council (other than to make a complaint) how did you do so?*

Respondents were asked to select as many options from the list as applied.

Q25: Method of contacting Herefordshire Council		
	2006	2007
By telephone	63%	65%
In person	31%	29%
By letter	15%	11%
By e-mail	5%	7%
Via a website / internet	3%	5%
Other method	2%	2%
Base	1,195	958

Of those that answered the question, around two thirds (65%) had made contact by telephone, 29% had made contact in person, and 11% by letter.



Since 2006, there has been a significant reduction in the proportion of respondents using a letter (from 15% down to 11%), and a significant increase in the proportion using the website (from 3% up to 5%). Other methods of contact have shown no significant change since 2006.

Respondents were given the opportunity to write in their "other" methods of contacting the Council. 13 respondents did so. 4 respondents made contact via a second party (for example through an architect or family member), 2 attended a public meeting, 2 made direct contact with their local Councillor, and 5 made contact by other methods. NB these "other" frequencies are unweighted.

Respondents who selected “in person” in Q25 were asked:

*Q26a: If you made contact in person, where did you do so?*

Respondents were asked to select as many options from the list as applied.

<b>Q26a: Location of contact in person</b>	
At an "Info in Herefordshire" centre	40%
At another Council building	58%
Somewhere else	4%
Base	260

Amongst respondents who made contact in person and answered this question, 40% did so at an “Info in Herefordshire” centre, and 58% did so at a different Council building.

Respondents who selected “by telephone” in Q25 were asked:

*Q26b: If you made contact by telephone, who did you call?*

Respondents were asked to select as many options from the list as applied.

<b>Q26b: Person / number called</b>	
The main switchboard (01432 260000)	47%
"Info by Phone"	2%
A member of staff or department directly	43%
Not sure / can't remember	14%
Other	1%
Base	601

Amongst respondents who made contact by telephone and answered this question, 47% called the main switchboard, 43% called a member of staff or department directly, and 2% called “Info by Phone”. 14% could not remember which number they had called.

## Satisfaction with customer service

Q27: Still thinking about your most recent contact with the Council, please indicate how satisfied or dissatisfied you were with each aspect of the service you received.

Q27: Satisfaction with customer service						
	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Base
How easy it was to find the right person to deal with	29%	44%	14%	8%	6%	918
The length of time it took to deal with the person you contacted	25%	45%	14%	9%	8%	911
Any information you were given	26%	40%	13%	11%	11%	896
How competent the staff were	33%	39%	14%	6%	8%	896
How helpful the staff were	34%	38%	13%	7%	8%	902
The final outcome	27%	34%	14%	10%	14%	875

The highest level of satisfaction was seen in how easy it was to find the right person to deal with (73% satisfied), and the lowest with the final outcome (61%). None of the scores for Q27 have shown a significant change since 2006.

Q27 – Trend over time		
	% satisfied 2006	% satisfied 2007
How easy it was to find the right person to deal with	70%	73%
The length of time it took to deal with the person you contacted	71%	70%
Any information you were given	68%	66%
How competent the staff were	72%	71%
How helpful the staff were	74%	72%
The final outcome	64%	61%

Respondents' answers to Q27 were analysed according to their answers to Q26a and Q26b – i.e. according to the person, place or telephone number with whom or at which they made contact. No significant differences were seen in any of the aspects of customer service covered in Q27, according to answers given to Q26a and Q26b.



## Section 5: Local decision making and your local community

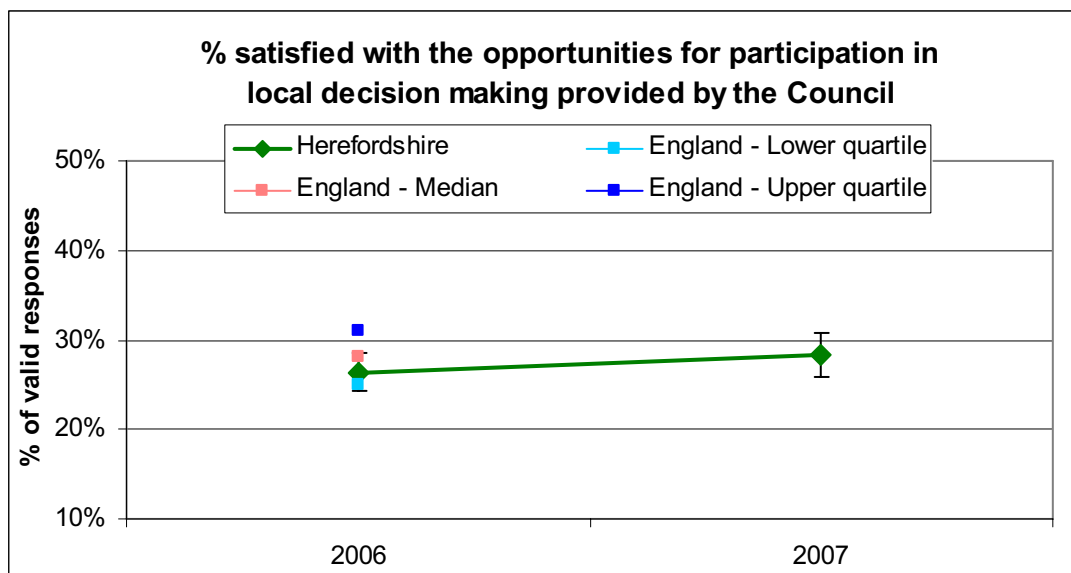
### Satisfaction with opportunities for participation

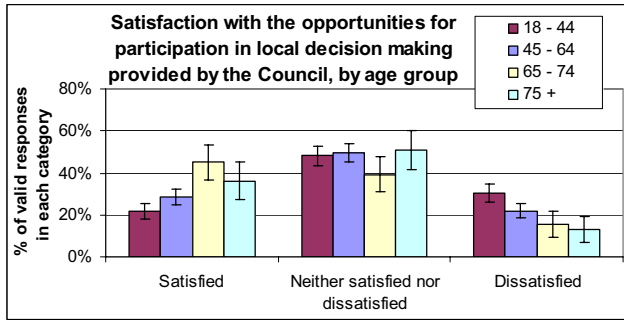
Q28: Overall, how satisfied or dissatisfied are you with the opportunities for participation in local decision making provided by your Council?

<b>Q28: Satisfaction with the opportunities for participation in local decision making provided by the Council</b>	
Very satisfied	3%
Fairly satisfied	25%
Neither satisfied nor dissatisfied	48%
Fairly dissatisfied	13%
Very dissatisfied	11%
Base	1,274

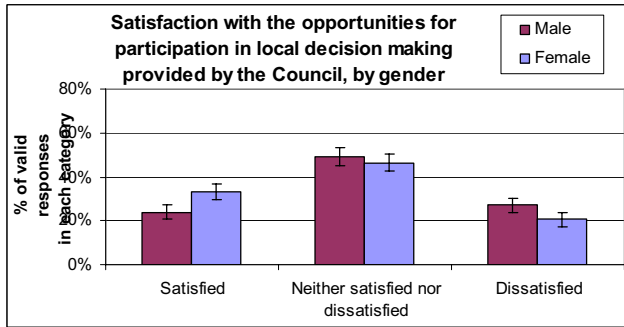
Amongst those that answered this question, 28% were satisfied with the opportunities for participation in local decision making provided by the Council. 24% were dissatisfied, and almost half (48%) were neutral. There has been no significant change in satisfaction since 2006.

<b>Q28 – Trend over time and quartile position</b>		
	2006	2007
Score	26%	28%
Quartile position	3rd	



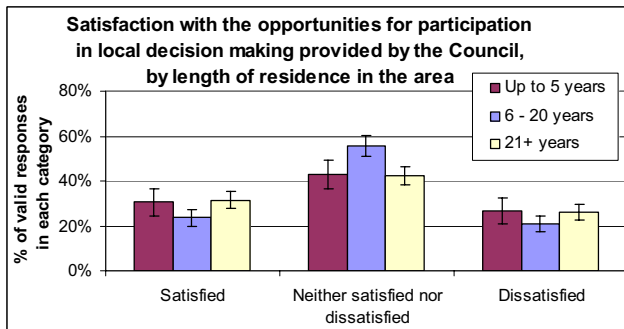


Respondents aged 65 to 74 were more likely to be satisfied with the opportunities for participation in local decision making, than those aged between 18 and 64.

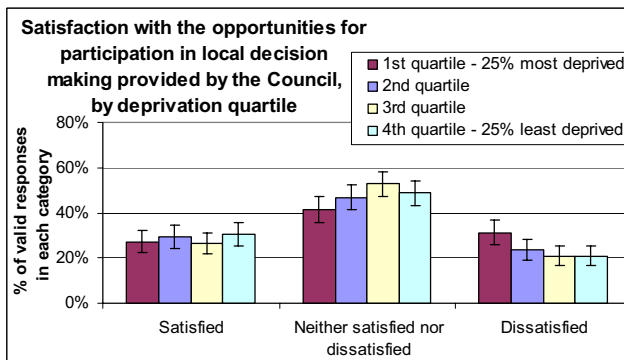


Female respondents were more likely to be satisfied with the opportunities for participation than male respondents.

No significant difference was seen with the rurality of the area in which respondents live.



Respondents who had lived in the area for between 6 and 20 years were less likely to be satisfied with the opportunities for participation than those who had lived here for 21 years or longer.



Although there was no significant difference seen in satisfaction, respondents who lived in an area in the most deprived 25% in Herefordshire were more likely to be *dissatisfied* than those in the least deprived 50%. Please refer to Appendix 5 for an explanation of the deprivation quartiles used.

**Ability to influence decisions affecting the local area**  
**Ability to influence decisions affecting the local community**

*Q29: Do you agree or disagree that you can influence decisions affecting your local area?*

*Q31: Do you agree or disagree that you can influence decisions affecting your local community?*

Q29 is a statutory question which is very similar to Q31, required for the purposes of a local indicator. Where Q29 refers to the “local area”, Q31 refers to the “local community”. Neither of the terms “local area” or “local community” were defined in the questionnaire. Because of their similarity, these questions are presented together, to avoid the accidental use of results from the wrong question.

It should be noted that the answer options vary between these questions. As well as having slightly different wording for the range of agreement, the crucial difference is that Q29 does not have a “neutral” option in the middle of the scale, while Q31 does have one (“neither agree nor disagree”). The omission of a neutral option is very likely to affect the percentage who “agree” or “disagree”, so direct comparisons between the two questions are not advisable.

<b>Q29: Ability to influence decisions affecting the local area</b>	
Definitely agree	2%
Tend to agree	28%
Tend to disagree	45%
Definitely disagree	25%
Base	1,262

Amongst those that answered the question, 30% agreed that they could influence decisions affecting their local area, compared to 70% who disagreed. There has been no significant change in agreement since 2006.

<b>Q29 – Trend over time</b>		
	2006	2007
Score	29%	30%

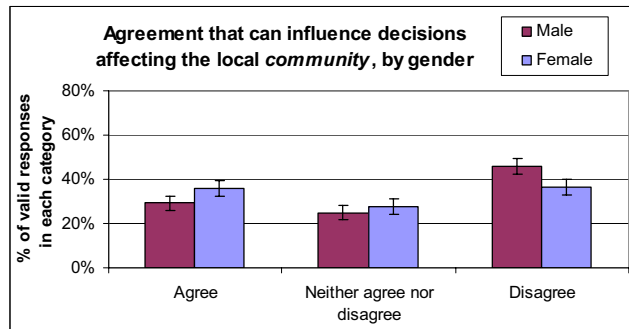
<b>Q31: Ability to influence decisions affecting the local community</b>	
Strongly agree	3%
Slightly agree	29%
Neither agree nor disagree	26%
Slightly disagree	21%
Strongly disagree	20%
Base	1,371

Amongst those who answered the question, around a third (33%) agreed that they could influence decisions affecting their local community. 41% disagreed, and 26% were neutral. There has been no significant change in agreement since 2006.

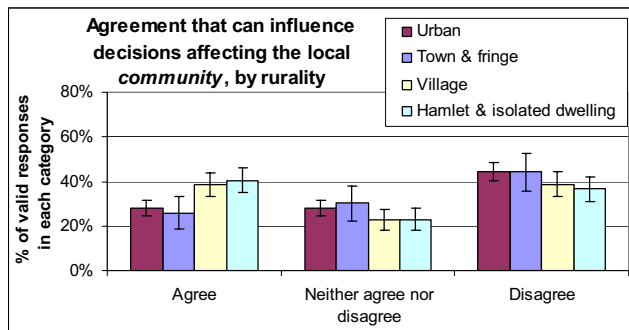
<b>Q31 - Trend over time</b>			
	2005	2006	2007
Score	35%	32%	33%

When looking at the perceived ability to influence local decisions, no difference was seen with the age of respondents with regard to either the local area or the local community.

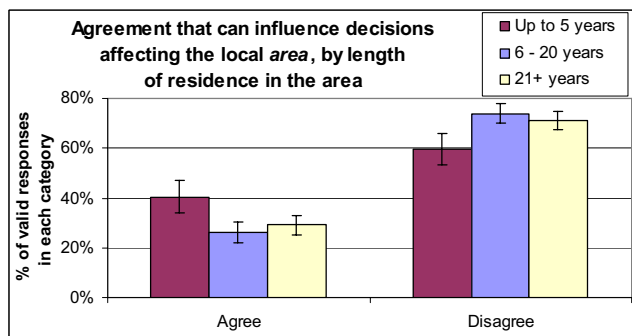
Although there was no significant difference in agreement, male respondents were more likely to *disagree* that they could influence decisions affecting their local *community* than female respondents. No significant difference was present with regard to the local *area*.



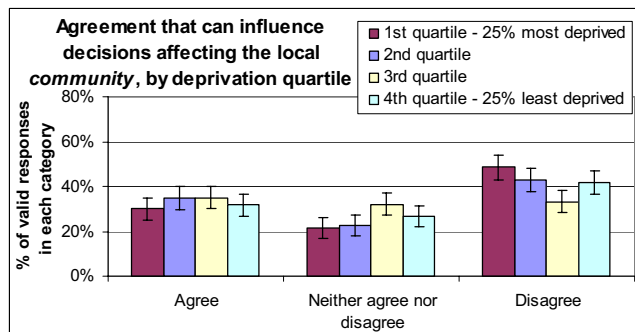
Respondents who lived in urban areas were less likely to agree that they could influence decisions affecting their local *community*, than those who lived in villages or hamlets & isolated dwellings. No significant difference was present with regard to the local *area*. Please refer to Appendix 4 for an explanation of the rurality categories used.



Respondents who had lived in this area for 5 years or less were more likely to agree that they could influence decisions affecting the local *area*, than those who had lived here for 6 years or more. A similar pattern was seen with regard to the local *community*.



Although there was no significant difference in agreement, respondents who lived in an area that fell into the most deprived 25% in Herefordshire were more likely to *disagree* that they could influence decisions affecting their local *community*, than those who lived in the 3<sup>rd</sup> quartile. No significant difference was seen with regard to the local *area*.



Please refer to Appendix 5 for an explanation of the deprivation quartiles used.

## Section 6: Volunteering through organisations

Q32: *In the last 12 months, have you provided unpaid help to groups, clubs or organisations to benefit other people or the environment?*

<b>Q32: Volunteered in the last 12 months</b>			
	2005	2006	2007
Yes	37%	30%	34%
No	63%	70%	66%
Base	1,137	2,040	1,538

Around a third of those who answered this question (34%) had provided unpaid help to groups, clubs or organisations in the 12 months prior to the survey. There has been no significant change in the proportion who volunteer since 2006.

Q33: *If “Yes”, on average, how much time (in total) do you spend providing such help?*

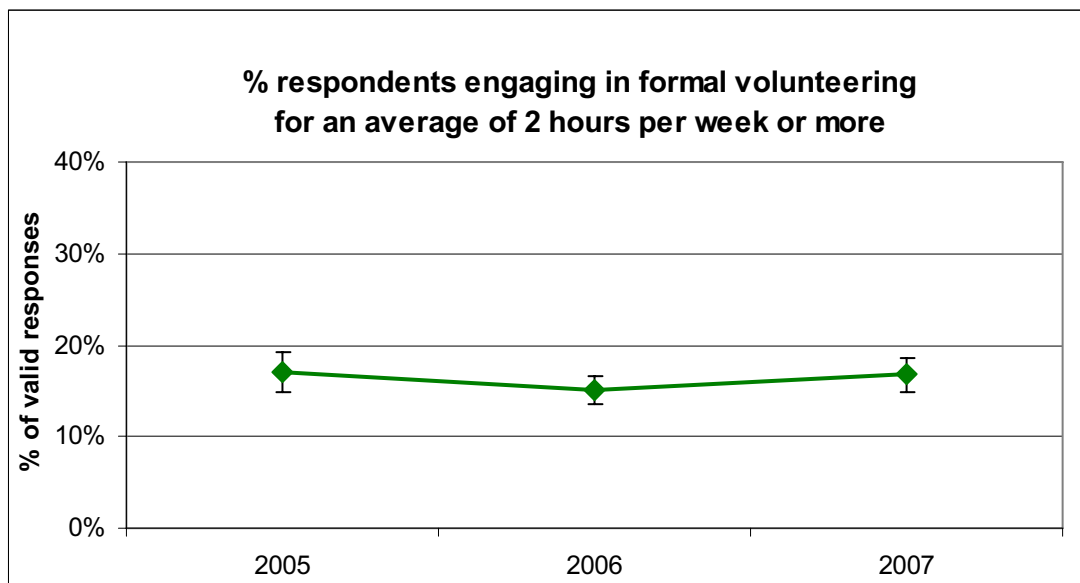
<b>Q33: Volunteered in the last 12 months</b>			
	2005	2006	2007
Less than 2 hours per week (less than about 100 hours a year)	53%	50%	48%
2 to 4 hours per week (about 100 – 200 hours a year)	34%	34%	36%
5 hours per week or more (about 250 hours a year or more)	13%	16%	16%
Base	412	609	500

Of the respondents who answered “yes” to Q32 and gave an answer to Q33, just under half (48%) gave an average of less than 2 hours per week, while 52% gave 2 or more hours. There has been no significant change since 2006.

For the purposes of a local performance indicator, the percentage who give an average of 2 or more hours per week as a proportion of all respondents can be calculated.

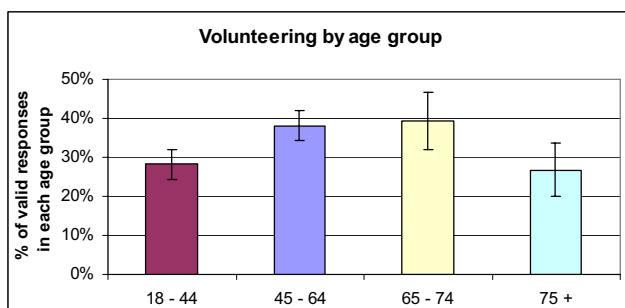
<b>Q33: Volunteered in the last 12 months</b>			
	2005	2006	2007
% of all respondents who give 2 hours a week or more	17%	15%	17%
Base	1,137	2,040	1,538

17% of all respondents give an average of 2 or more hours of help a week. This is not significantly different to the score in 2006.



The following analyses use Q32 – i.e. the charts show the percentage of respondents in each category who had volunteered for any amount of time in the 12 months prior to the survey.

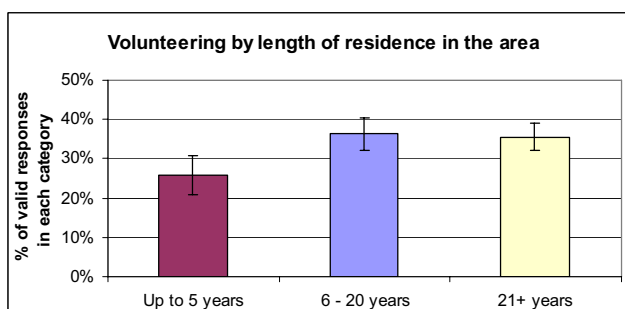
No significant difference was found between male and female respondents; both were equally likely to have volunteered in the last 12 months.



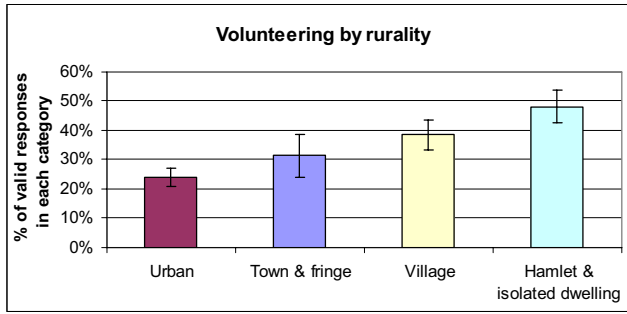
Respondents aged between 45 and 64 were more likely to volunteer than those aged 18 to 44 or 75 and over.

No significant difference was seen between disabled respondents and those who were not disabled.

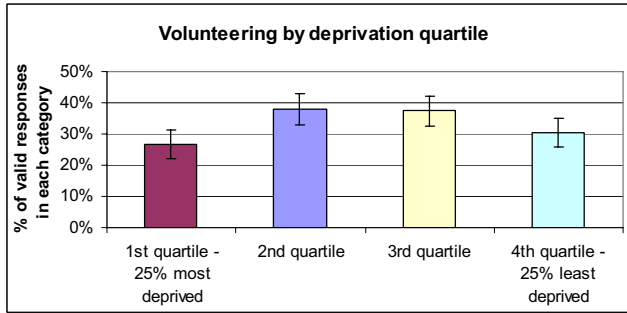
No significant difference was seen between respondents who were in employment and those who were not in employment (including the retired).



Respondents who had lived in this area for 6 years or longer were more likely to have volunteered in the last 12 months than those who had lived here for 5 years or less.



There is a pattern whereby respondents are increasingly likely to volunteer in more rural areas. Please refer to Appendix 4 for an explanation of the rurality categories used.



Respondents who lived in an area in the most deprived 25% in Herefordshire were less likely to volunteer than those who lived in an area in the 2<sup>nd</sup> or 3<sup>rd</sup> quartiles. Please refer to Appendix 5 for an explanation of the deprivation quartiles used.

## Section 7: About yourself

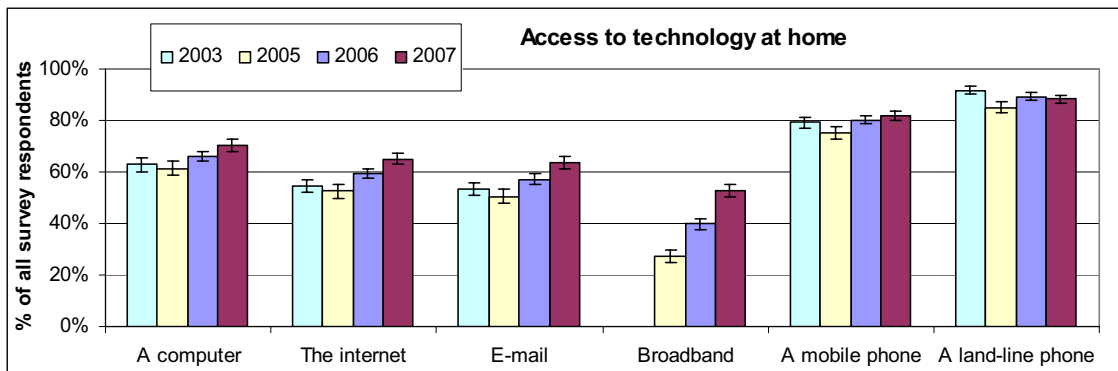
### Access to technology at home

Q50: To which of the following do you have access at home?

Q50: Access to technology at home				
	2003	2005	2006	2007
A computer	63%	61%	66%	70%
The internet	55%	53%	59%	65%
E-mail	53%	51%	57%	64%
Broadband <sup>4</sup>	-	27%	40%	53%
A mobile phone	79%	75%	80%	82%
A land-line phone	92%	85%	89%	88%
None of these	1%	3%	1%	1%
Not provided	1%	2%	2%	5%
Base	1,373	1,177	2,131	1,601

Respondents could select as many from the list as were appropriate. The sample base is all survey respondents.

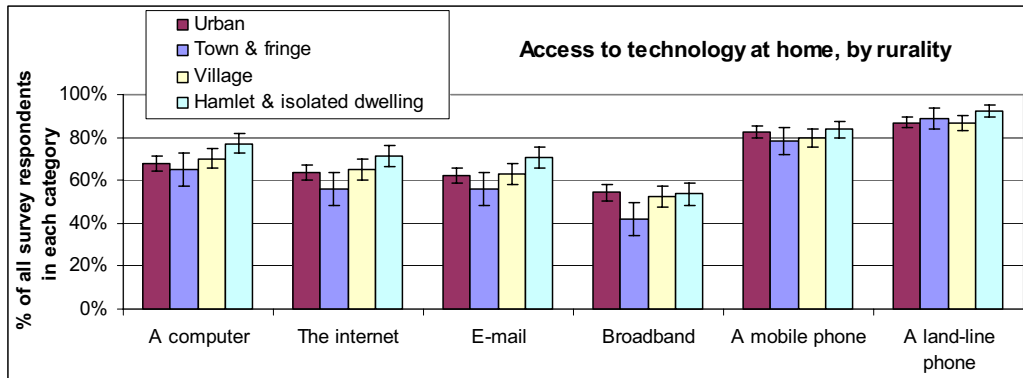
Since 2006, there has been a significant growth in the prevalence at home of the internet, e-mail, and most markedly in broadband. Other technologies have shown no significant change since 2006.



<sup>4</sup> Note that broadband was not offered as an answer option in the 2003 questionnaire; the lack of a figure for this year does not necessarily indicate that no respondents had access to broadband in their homes.



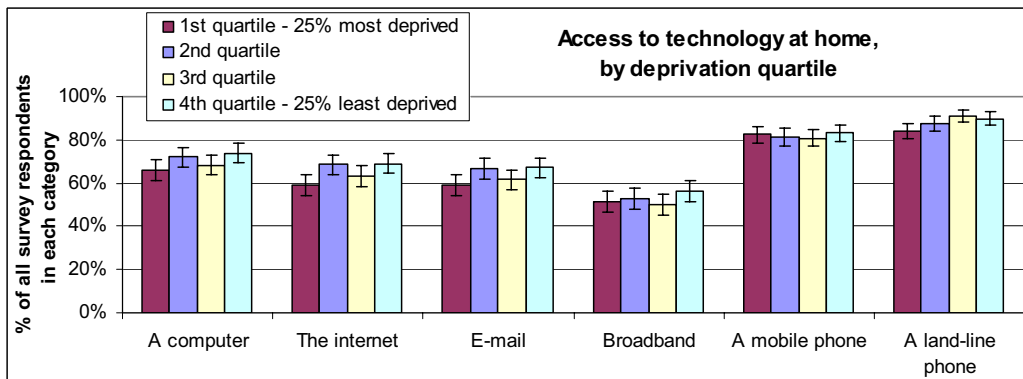
There are significant variations in access to technology at home with the rurality of respondents' residence, with regard to all technologies except a mobile phone. Please refer to Appendix 4 for an explanation of the rurality categories used.



Respondents who lived in areas in the 25% most deprived in Herefordshire were less likely than those in the least deprived 25% to have access to the internet at home.

Respondents in the 25% most deprived in Herefordshire were less likely than those in the 3<sup>rd</sup> quartile to have access to a land-line phone at home.

No significant differences were seen in other technologies. Please refer to Appendix 5 for an explanation of the deprivation quartiles used.



## Transport to work

Q51: How do you usually travel to work for your main job (i.e. the job for which you usually work the most hours)?

Q51: Mode of transport to work		
	2006	2007
Work mainly at or from home	8%	10%
Train	1%	1%
Bus, minibus or coach	1%	1%
Motorcycle, scooter or moped	1%	1%
Bicycle	6%	4%
Driving a car or van - on your own	61%	58%
Driving a car or van - with a passenger	9%	8%
Passenger in a car or van	2%	3%
Taxi	*%	*%
On foot	11%	11%
Other	1%	2%
Base	1,244	1,022

Respondents were asked to answer for the longest part (by distance) of their usual journey to work. The sample base is those who work, who answered the question.

Around two thirds (66%) of those who work normally drive to get there. 11% walk, while 2% use a form of public transport. There has been no significant change in the usage of any of the forms of transport since 2006.

Amongst the “other” methods of transport specified were two car sharers (not having specified whether they normally drive or are driven – presumably because this alternates), one who flies, one who uses a tractor, three who indicated that they used different methods of transport in different situations, and one who indicated that they normally worked at or from a location other than their home. NB these “other” frequencies are unweighted.

Q52: Approximately how far do you travel to work for your main job (one way)?

Q52: Distance travelled to work		
	2006	2007
Less than 1 mile	12%	14%
1 up to 2 miles	17%	13%
2 – 5 miles	24%	27%
6 – 10 miles	14%	13%
11 – 25 miles	20%	22%
2 – 50 miles	6%	6%
Over 50 miles	6%	6%
Base	1,124	879

The sample base is those who gave a valid answer to this question, who had also indicated in Q51 that they normally travelled away from their home to work.

Of those who travel away from their home to work, around a quarter (27%) travel less than 2 miles. 40% travel between 2 and 10 miles.

There have been no significant changes in the proportion of respondents travelling each distance to work since 2006.

<b>Mode of transport to work, by distance travelled</b>							
	Less than 1 mile	1 up to 2 miles	2 – 5 miles	6 – 10 miles	11 – 25 miles	26 – 50 miles	Over 50 miles
Train	0%	0%	0%	0%	3%	0%	6%
Bus, minibus or coach	0%	3%	2%	1%	1%	0%	0%
Motorcycle, scooter or moped	4%	0%	*%	2%	3%	0%	0%
Bicycle	3%	9%	9%	2%	0%	0%	0%
Driving a car or van - on your own	16%	48%	71%	85%	79%	92%	84%
Driving a car or van - with a passenger	3%	9%	11%	8%	9%	6%	6%
Passenger in a car or van	1%	4%	5%	3%	2%	2%	0%
Taxi	1%	0%	*%	0%	0%	0%	0%
On foot	71%	22%	*%	0%	0%	0%	0%
Other	2%	4%	1%	0%	3%	0%	4%
Base	120	117	237	112	194	49	50

The figures in the table above are the percentages within each distance group, e.g. the percentage of people who travel less than 1 mile to work. Note the low bases for groups travelling the furthest to work. These figures should be used with caution.

Amongst those who travel less than a mile to work, 71% walk, while 19% drive (either with or without a passenger).

## **Respondents' comments**

*Q53: Is there anything else you would like to add?*

In Q53, respondents were given the opportunity to write in any further comments they wished to make. In addition to comments made in this question, a number of respondents made comments in other places in the questionnaire. These are also included in the table on the following page. In total, 425 comments were made.

The comments were divided into categories, in order to extract common themes. Many of the comments made touched on more than one theme; where this has happened, they have been counted in all relevant categories. The figures in the table that follows are UNWEIGHTED.

Due to the large number of comments made, it is not possible to include them in full. They will be passed to the relevant service areas for consideration.

<b>Respondents' comments</b>	
Topic covered	Number of comments covering this topic
Rubbish and recycling (excluding comments about litter)	128
Traffic, congestion and the state of local roads	97
Appropriateness of the questionnaire, including concerns about cost and content	88
Public transport	59
Litter, street scene and dog fouling	46
Value for money, Council Tax and Council spending	43
Concerns with Council management, bureaucracy and local democracy	40
Cultural and recreational facilities, including sports facilities and shopping	36
Customer service and complaints handling, including "Info in Herefordshire" centres	33
Planning and development, including agricultural development and polytunnels	32
Anti-social behaviour	24
Access to services	18
Comments of relevance to the PCT	17
Information provision and Council communications	16
Regeneration in the county, including the Edgar Street Grid	15
Activities for children and teenagers	14
Speeding traffic	14
Policing	14
Housing issues including the provision of affordable housing	12
Flooding and flood protection	11
Parking	9
Perceived inequality in service provision between urban and rural areas	8
Issues affecting older people	7
Race relations and the perceived impact of foreign and migrant workers in the county	6
Comments relating to respondents' position close to the border of the county	4
The local economy, jobs, wage levels and local cost of living	4
Education	4
The Rotherwas Ribbon / Dinedor Serpent	3
Generalised positive comments that did not easily fit into another category <i>(NB positive comments directed at a specific service were included in the relevant category for that service)</i>	3
Social services and social care	3
Tourism and public rights of way	3
Street traders and fairs, including the May Fair	2
Miscellaneous	8

## Respondent profile

Q34 – 49: Data making up the respondent profile is presented both weighted and unweighted. Please refer to the methodology section towards the beginning of this report for more details of the weighting scheme. Unweighted figures are included in addition to weighted figures to give an indication of the types of people who actually responded to the survey, and also to show the effect weighting has had on these results.

Respondent profile					
Unweighted base:	1,578	Unweighted		Weighted	
Weighted base:	1,601	Number	%	Number	%
Q34: Gender					
Male		627	40%	752	47%
Female		900	57%	789	49%
Other		1	*%	1	*%
Not provided		50	3%	59	4%
Q35: Age <sup>5</sup>					
18 – 24 years		25	2%	55	3%
25 – 44 years		289	18%	473	30%
45 – 64 years		555	35%	642	40%
65 – 74 years		308	20%	177	11%
75 years and over		319	20%	164	10%
Not provided		82	5%	90	6%
Q36: Length of residence in current accommodation					
Under 1 year		86	5%	109	7%
1 – 2 years		140	9%	198	12%
3 – 5 years		233	15%	267	17%
6 – 10 years		285	18%	291	18%
11 – 20 years		354	22%	344	21%
21 + years		429	27%	340	21%
Don't know / can't remember		5	*%	3	*%
Not provided		46	3%	49	3%
Q37: Length of residence in this area					
Under 1 year		42	3%	58	4%
1 – 2 years		69	4%	75	5%
3 – 5 years		141	9%	164	10%
6 – 10 years		200	13%	221	14%
11 – 20 years		293	19%	309	19%
21 + years		775	49%	714	45%
Don't know / can't remember		9	1%	6	*%
Not provided		49	3%	54	3%
Q38: Housing tenure					
Owned outright		801	51%	634	40%
Buying on a mortgage		407	26%	599	37%
Rent from Housing Association / Trust		169	11%	131	8%
Rented from private landlord		126	8%	153	10%
Other		26	2%	35	2%
Not provided		49	3%	49	3%

<sup>5</sup> NB Respondents were asked to write in their exact age. These data were subsequently grouped into the above categories.

<b>Respondent profile (cont.)</b>				
Unweighted base: 1,578 Weighted base: 1,601	Unweighted		Weighted	
	Number	%	Number	%
<b>Q39: Number of adults aged 18 or over living in the household</b>				
One	480	30%	245	15%
Two	850	54%	952	59%
Three	118	7%	201	13%
Four	49	3%	114	7%
Five	5	*%	15	1%
More than five	1	*%	2	*%
Not provided	75	5%	71	4%
<b>Q40: Any children 0 – 15 years of age living in the household</b>				
Yes	251	16%	389	24%
No	1,265	80%	1,152	72%
Not provided	62	4%	61	4%
<b>Q41: Any young people 16 – 17 years of age living in the household</b>				
Yes	58	4%	89	6%
No	1,437	91%	1,421	89%
Not provided	83	5%	92	6%
<b>Q42: Employment status</b>				
Employee in full-time job (30 hours plus per week)	356	23%	575	36%
Employee in part-time job (under 30 hours per week)	171	11%	200	12%
Self employed full or part-time	161	10%	183	11%
On a government supported training scheme (e.g. Modern Apprenticeship / Training for Work)	1	*%	2	*%
Full-time education at school, college or university	4	*%	6	*%
Unemployed and available for work	15	1%	21	1%
Permanently sick / disabled	54	3%	49	3%
Wholly retired from work	596	38%	354	22%
Looking after the home	95	6%	98	6%
Doing something else	28	2%	32	2%
Not provided	97	6%	81	5%
<b>Q43: Long-standing illness, disability or infirmity</b>				
Yes	429	27%	324	20%
No	1,030	65%	1,185	74%
Not provided	119	8%	92	6%
<b>Q44: Illness or disability limits respondents' activities (Base = those who said "yes" to Q43, i.e. 429 unweighted figures, 324 weighted)</b>				
Yes	332	77%	247	76%
No	91	21%	73	23%
Not provided	6	1%	4	1%

<b>Respondent profile (cont.)</b>				
Unweighted base: 1,578 Weighted base: 1,601	Unweighted		Weighted	
	Number	%	Number	%
<b>Q45: Nature of illness or disability</b> (Base = those who said "yes" to Q43, i.e. 429 unweighted figures, 324 weighted)				
Deaf / hard of hearing / acute hearing	71	17%	50	15%
Blind / partially sighted / sensitive to light	18	4%	11	3%
Learning disability or difficulty	4	1%	3	1%
Mental health	30	7%	30	9%
Progressive / chronic illness (e.g. MS, cancer)	72	17%	59	18%
Mobility difficulties	216	50%	141	44%
Other	133	31%	108	33%
Not provided	9	2%	6	2%
<b>Q46: Sexual orientation</b>				
Heterosexual	1,200	76%	1,288	80%
Bisexual	10	1%	8	1%
Gay	6	*%	7	*%
Lesbian	2	*%	2	*%
Prefer not to say	134	8%	124	8%
Not provided	226	14%	173	11%
<b>Q47: Religion / belief</b>				
None	285	18%	368	23%
Christian	1,157	73%	1,100	69%
Muslim	4	*%	5	*%
Jewish	3	*%	6	*%
Hindu	1	*%	2	*%
Sikh	0	0%	0	0%
Buddhist	9	1%	7	*%
Other	18	1%	15	1%
Not provided	101	6%	98	6%
<b>Q48: National identity</b>				
British	715	45%	732	46%
English	666	42%	670	42%
Scottish	18	1%	19	1%
Irish	5	*%	3	*%
Welsh	73	5%	73	5%
Other	21	1%	30	2%
Not provided	80	5%	74	5%

<b>Respondent profile (cont.)</b>				
Unweighted base: 1,578 Weighted base: 1,601	Unweighted		Weighted	
	Number	%	Number	%
Q49: Ethnicity				
<b>White</b>				
British	1,448	92%	1,472	92%
Irish Traveller	0	0%	0	0%
Romany / Gypsy	0	0%	0	0%
Other White background	20	1%	31	2%
<b>Black</b>				
British	0	0%	0	0%
African	0	0%	0	0%
Caribbean	0	0%	0	0%
Other Black background	0	0%	0	0%
<b>Asian</b>				
British	0	0%	0	0%
Indian	3	*%	3	*%
Pakistani	1	*%	2	*%
Bangladeshi	0	0%	0	0%
Other Asian background	2	*%	2	*%
<b>Mixed</b>				
British	2	*%	1	*%
White & Black African	0	0%	0	0%
White & Black Caribbean	0	0%	0	0%
White & Asian	0	0%	0	0%
White & Chinese	0	0%	0	0%
Other Mixed background	0	0%	0	0%
<b>Chinese</b>				
British	0	0%	0	0%
Chinese	0	0%	0	0%
Other Chinese background	0	0%	0	0%
<b>Other</b>				
Any other background	0	0%	0	0%
Not provided	102	6%	90	6%



## Appendix 1: Further background data

This appendix contains further data which may be of use to service areas. This additional data was not included in the main body of the report in order to keep it as concise as possible. Data is presented in the same order as the main body of the report, which roughly follows the order of the questionnaire. Note that not all questions are represented in this appendix.

### Section 1: About your local area

<b>Q2: Satisfaction with the local area as a place to live – Trend over time</b>		
	2006	2007
Satisfied	69%	69%
Neither satisfied nor dissatisfied	19%	18%
Dissatisfied	13%	13%
Base	2,056	1,559
Score C.I.s	± 2%	± 2%
<b>Q2: Quartiles</b>		
	2006	2007
Herefordshire score	69%	69%
England - Lower quartile	69%	
England - Median	76%	
England - Upper quartile	82%	
Herefordshire quartile	Worst	

<b>Q30: Satisfaction with the local community as a place to live – Trend over time</b>			
	2005	2006	2007
Satisfied	80%	79%	79%
Neither satisfied nor dissatisfied	12%	15%	12%
Dissatisfied	8%	6%	9%
Base	1,143	2,033	1,549
Score C.I.s	± 2%	± 2%	± 2%

<b>Q3a: Parents not being made to take responsibility for the behaviour of their children – Trend over time</b>		
	2006	2007
A problem	65%	65%
Not a problem	35%	35%
Base	1,866	1,444
Score C.I.s	± 2%	± 2%
<b>Q3a: Quartiles</b>		
	2006	2007
Herefordshire score	65%	65%
England - Lower quartile	55%	
England - Median	61%	
England - Upper quartile	69%	
Herefordshire quartile	3rd	

<b>Q3b: People not treating other people with respect and consideration – Trend over time</b>		
	2006	2007
A problem	55%	56%
Not a problem	45%	44%
Base	1,925	1,506
Score C.I.s	± 2%	± 2%
<b>Q3b: Quartiles</b>		
	2006	2007
Herefordshire score	55%	56%
England - Lower quartile	41%	
England - Median	47%	
England - Upper quartile	55%	
Herefordshire quartile	3rd	

<b>Q3c: Noisy neighbours or loud parties – Trend over time</b>				
	2003	2005	2006	2007
A problem	18%	12%	21%	19%
Not a problem	82%	88%	79%	81%
Base	1,262	1,122	1,876	1,468
Score C.I.s	± 2%	± 2%	± 2%	± 2%
<b>Q3c: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	18%	12%	21%	19%
England - Lower quartile			12%	
England - Median			15%	
England - Upper quartile			19%	
Herefordshire quartile			Worst	

<b>Q3d: Teenagers hanging around on the streets – Trend over time</b>				
	2003	2005	2006	2007
A problem	49%	32%	52%	50%
Not a problem	52%	68%	48%	50%
Base	1,259	1,104	1,890	1,410
Score C.I.s	± 3%	± 3%	± 2%	± 3%
<b>Q3d: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	49%	32%	52%	50%
England - Lower quartile			50%	
England - Median			57%	
England - Upper quartile			63%	
Herefordshire quartile			2nd	

<b>Q3e: Rubbish and litter lying around – Trend over time</b>				
	2003	2005	2006	2007
A problem	42%	32%	46%	49%
Not a problem	58%	68%	54%	51%
Base	1,306	1,121	1,970	1,534
Score C.I.s	± 3%	± 3%	± 2%	± 2%
<b>Q3e: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	42%	32%	46%	49%
England - Lower quartile			35%	
England - Median			41%	
England - Upper quartile			49%	
Herefordshire quartile			3rd	

<b>Q3f: People being drunk or rowdy in public spaces – Trend over time</b>				
	2003	2005	2006	2007
A problem	48%	32%	39%	37%
Not a problem	52%	68%	61%	63%
Base	1,189	1,042	1,804	1,391
Score C.I.s	± 3%	± 3%	± 2%	± 3%
<b>Q3f: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	48%	32%	39%	37%
England - Lower quartile			25%	
England - Median			30%	
England - Upper quartile			35%	
Herefordshire quartile			Worst	

<b>Q3g: Abandoned or burnt out cars – Trend over time</b>				
	2003	2005	2006	2007
A problem	26%	10%	10%	8%
Not a problem	74%	90%	90%	92%
Base	1,170	1,019	1,740	1,359
Score C.I.s	± 3%	± 2%	± 1%	± 1%
<b>Q3g: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	26%	10%	10%	8%
England - Lower quartile			6%	
England - Median			9%	
England - Upper quartile			13%	
Herefordshire quartile			3rd	

<b>Q3h: Vandalism, graffiti and other deliberate damage to property or vehicles – Trend over time</b>				
	2003	2005	2006	2007
A problem	54%	31%	36%	35%
Not a problem	46%	69%	64%	65%
Base	1,271	1,092	1,838	1,443
Score C.I.s	± 3%	± 3%	± 2%	± 2%
<b>Q3h: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	54%	31%	36%	35%
England - Lower quartile			31%	
England - Median			37%	
England - Upper quartile			45%	
Herefordshire quartile			2nd	

<b>Q3i: People using or dealing drugs – Trend over time</b>			
	2003	2006	2007
A problem	66%	60%	52%
Not a problem	34%	40%	48%
Base	1,107	1,545	1,177
Score C.I.s	± 3%	± 2%	± 3%
<b>Q3i: Quartiles</b>			
	2003	2006	2007
Herefordshire score	66%	60%	52%
England - Lower quartile		35%	
England - Median		42%	
England - Upper quartile		50%	
Herefordshire quartile		Worst	

<b>Q3j: Speeding traffic – Trend over time</b>		
	2005	2007
A problem	52%	57%
Not a problem	48%	43%
Base	1,123	1,505
Score C.I.s	± 3%	± 2%

<b>Q3k: People being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation – Trend over time</b>			
	2003	2005	2007
A problem	13%	8%	17%
Not a problem	87%	92%	83%
Base	975	947	1,099
Score C.I.s	± 2%	± 2%	± 2%

<b>Q4: Community relations – Trend over time</b>		
	2006	2007
Agree	46%	49%
Disagree	16%	15%
Can't say	37%	36%
Base	2,070	1,565
Score C.I.s	± 2%	± 2%

<b>Q5a: Access to local shop – Trend over time</b>				
	2003	2005	2006	2007
Easy	86%	89%	89%	88%
Neither easy nor difficult	7%	5%	5%	6%
Difficult	7%	6%	6%	6%
Base	1,289	1,099	1,971	1,503
Score C.I.s	± 2%	± 2%	± 1%	± 2%

<b>Q5b: Access to shopping centre or supermarket – Trend over time</b>				
	2003	2005	2006	2007
Easy	79%	80%	80%	81%
Neither easy nor difficult	11%	10%	11%	11%
Difficult	10%	11%	10%	8%
Base	1,338	1,128	2,027	1,532
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5c: Access to Post Office – Trend over time</b>				
	2003	2005	2006	2007
Easy	82%	84%	85%	79%
Neither easy nor difficult	9%	7%	7%	9%
Difficult	9%	9%	8%	12%
Base	1,333	1,130	2,036	1,559
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5d: Access to GP – Trend over time</b>				
	2003	2005	2006	2007
Easy	77%	79%	80%	79%
Neither easy nor difficult	12%	10%	10%	12%
Difficult	11%	11%	10%	9%
Base	1,319	1,128	2,009	1,549
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5e: Access to dentist – Trend over time</b>		
	2006	2007
Easy	54%	60%
Neither easy nor difficult	17%	16%
Difficult	29%	24%
Base	1,868	1,453
Score C.I.s	± 2%	± 3%

<b>Q5f: Access to chemist or pharmacy – Trend over time</b>				
	2003	2005	2006	2007
Easy	77%	80%	78%	78%
Neither easy nor difficult	12%	9%	12%	13%
Difficult	10%	11%	10%	9%
Base	1,322	1,118	2,011	1,549
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5g: Access to shop selling fresh fruit or vegetables – Trend over time</b>				
	2003	2005	2006	2007
Easy	80%	80%	80%	81%
Neither easy nor difficult	12%	10%	11%	9%
Difficult	9%	10%	9%	10%
Base	1,316	1,115	2,000	1,543
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5h: Access to local hospital – Trend over time</b>				
	2003	2005	2006	2007
Easy	56%	57%	57%	59%
Neither easy nor difficult	18%	18%	17%	19%
Difficult	26%	24%	25%	22%
Base	1,320	1,121	2,004	1,532
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q5i: Access to publicly accessible green space – Trend over time</b>				
	2003	2005	2006	2007
Easy	81%	80%	80%	81%
Neither easy nor difficult	11%	13%	12%	11%
Difficult	8%	7%	8%	8%
Base	1,227	1,038	1,888	1,447
Score C.I.s	± 2%	± 2%	± 2%	± 2%

<b>Q5j: Access to public transport facility – Trend over time</b>				
	2003	2005	2006	2007
Easy	75%	73%	69%	72%
Neither easy nor difficult	11%	14%	14%	9%
Difficult	14%	13%	17%	19%
Base	1,274	1,082	1,944	1,513
Score C.I.s	± 2%	± 3%	± 2%	± 2%

<b>Q5k: Access to library – Trend over time</b>				
	2003	2005	2006	2007
Easy	69%	70%	69%	70%
Neither easy nor difficult	16%	16%	17%	17%
Difficult	14%	14%	14%	13%
Base	1,258	1,084	1,948	1,506
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q5l: Access to sports / leisure centre – Trend over time</b>				
	2003	2005	2006	2007
Easy	66%	69%	64%	69%
Neither easy nor difficult	18%	19%	19%	18%
Difficult	16%	13%	17%	14%
Base	1,157	1,010	1,824	1,429
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q5m: Access to cultural / recreational facility – Trend over time</b>				
	2003	2005	2006	2007
Easy	53%	55%	47%	52%
Neither easy nor difficult	23%	23%	24%	20%
Difficult	24%	22%	29%	28%
Base	1,186	1,041	1,885	1,443
Score C.I.s	± 3%	± 3%	± 2%	± 3%

<b>Q5n: Access to bank or cashpoint – Trend over time</b>				
	2003	2005	2006	2007
Easy	73%	73%	74%	76%
Neither easy nor difficult	14%	13%	13%	13%
Difficult	13%	14%	13%	12%
Base	1,303	1,117	2,015	1,554
Score C.I.s	± 2%	± 3%	± 2%	± 2%

<b>Q5o: Access to Council or neighbourhood office – Trend over time</b>				
	2003	2005	2006	2007
Easy	60%	55%	58%	59%
Neither easy nor difficult	24%	23%	22%	20%
Difficult	16%	22%	19%	21%
Base	1,185	1,038	1,836	1,448
Score C.I.s	± 3%	± 3%	± 2%	± 3%

## Section 2: Your local authority

<b>Q6 (BV89): Satisfaction with litter clearance – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	59%	62%	65%	66%	63%
Neither satisfied nor dissatisfied		18%	17%	19%	17%
Dissatisfied		20%	18%	14%	20%
Base		1,316	1,100	2,059	1,567
Score C.I.s		± 3%	± 3%	± 2%	± 2%

<b>Q6 (BV89): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	59%	62%	65%	66%	63%
England - Lower quartile	56%	54%		62%	
England - Median	64%	61%		68%	
England - Upper quartile	71%	66%		73%	
Herefordshire quartile	3rd	2nd		3rd	

<b>Q7 (BV90A): Satisfaction with household waste collection – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	77%	89%	88%	82%	88%
Neither		6%	5%	9%	3%
Dissatisfied		5%	7%	9%	8%
Base		1,317	1,154	2,044	1,579
Score C.I.s		± 2%	± 2%	± 2%	± 2%

<b>Q7 (BV90A): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	77%	89%	88%	82%	88%
England - Lower quartile	84%	81%		74%	
England - Median	88%	86%		80%	
England - Upper quartile	90%	89%		85%	
Herefordshire quartile	Worst	2nd		2nd	

<b>Q8 (BV90B2): Satisfaction with doorstep recycling collection – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	71%	55%	69%	63%
Neither	13%	20%	12%	13%
Dissatisfied	16%	25%	19%	24%
Base	864	996	1,484	1,444
Score C.I.s	± 3%	± 3%	± 2%	± 2%
<b>Q8 (BV90B2): Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	71%	55%	69%	63%
England - Lower quartile			68%	
England - Median			74%	
England - Upper quartile			79%	
Herefordshire quartile			3rd	

<b>Q9 (BV90B1): Satisfaction with local recycling facilities – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	58%	67%	74%	70%	71%
Neither		13%	13%	13%	12%
Dissatisfied		20%	13%	17%	17%
Base		1,279	1,147	1,897	1,569
Score C.I.s		± 3%	± 3%	± 2%	± 2%
<b>Q9 (BV90B1): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	58%	67%	74%	70%	71%
England - Lower quartile	60%	63%		66%	
England - Median	68%	70%		70%	
England - Upper quartile	73%	75%		75%	
Herefordshire quartile	Worst	3rd		2nd	

<b>Q10 (BV90C): Satisfaction with the local tip – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	56%	82%	79%	87%	79%
Neither		10%	14%	8%	9%
Dissatisfied		8%	7%	6%	13%
Base		1,049	1,015	1,634	1,334
Score C.I.s		± 2%	± 3%	± 2%	± 2%
<b>Q10 (BV90C): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	56%	82%	79%	87%	79%
England - Lower quartile	65%	70%		77%	
England - Median	72%	78%		81%	
England - Upper quartile	77%	84%		85%	
Herefordshire quartile	Worst	2nd		Best	



<b>Q11 (BV103): Satisfaction with the provision of public transport information – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	47%	48%	41%	48%	43%
Neither		27%	44%	26%	39%
Dissatisfied		24%	15%	25%	18%
Base		883	1,070	1,434	1,534
Score C.I.s		± 3%	± 3%	± 3%	± 2%
<b>Q11 (BV103): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	47%	48%	41%	48%	43%
England - Lower quartile	42%	45%		48%	
England - Median	48%	49%		55%	
England - Upper quartile	53%	55%		60%	
Herefordshire quartile	3rd	3rd		3rd	

<b>BV103u: Satisfaction with the provision of public transport information – Users – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	68%	63%	62%	70%	71%
Neither		19%	26%	16%	16%
Dissatisfied		18%	12%	14%	13%
Base		426	334	505	412
Score C.I.s		± 5%	± 5%	± 4%	± 4%
<b>BV103u: Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	68%	63%	62%	70%	71%
England - Lower quartile	60%			69%	
England - Median	65%			74%	
England - Upper quartile	70%			77%	
Herefordshire quartile	2nd			3rd	

<b>BV103nu: Satisfaction with the provision of public transport information – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	32%	29%	32%	30%
Neither	38%	54%	33%	47%
Dissatisfied	31%	18%	35%	23%
Base	443	684	782	889
Score C.I.s	± 4%	± 3%	± 3%	± 3%

<b>Q13 (BV104): Satisfaction with the local bus service – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	46%	51%	36%	49%	45%
Neither		23%	41%	26%	35%
Dissatisfied		26%	23%	25%	21%
Base		1,016	1,089	1,512	1,547
Score C.I.s		± 3%	± 3%	± 3%	± 2%
<b>Q13 (BV104): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	46%	51%	36%	49%	45%
England - Lower quartile	44%	48%		54%	
England - Median	51%	55%		61%	
England - Upper quartile	57%	61%		68%	
Herefordshire quartile	3rd	3rd		Worst	

<b>BV104u: Satisfaction with the local bus service – Users – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	57%	61%	54%	62%	68%
Neither		14%	18%	13%	11%
Dissatisfied		25%	27%	25%	20%
Base		674	547	933	698
Score C.I.s		± 4%	± 4%	± 3%	± 3%
<b>BV104u: Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	57%	61%	54%	62%	68%
England - Lower quartile	48%			61%	
England - Median	55%			66%	
England - Upper quartile	63%			71%	
Herefordshire quartile	2nd			3rd	

<b>BV104nu: Satisfaction with the local bus service – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	32%	17%	29%	25%
Neither	41%	64%	48%	54%
Dissatisfied	27%	18%	23%	21%
Base	333	526	550	835
Score C.I.s	± 5%	± 3%	± 4%	± 3%

<b>Q15a (BV119A): Satisfaction with sports / leisure facilities and events – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	55%	49%	49%	58%	56%
Neither		41%	41%	31%	34%
Dissatisfied		10%	10%	11%	10%
Base		1,275	1,061	1,987	1,530
Score C.I.s		± 3%	± 3%	± 2%	± 2%
<b>Q15a (BV119A): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	55%	49%	49%	58%	56%
England - Lower quartile	47%	49%		54%	
England - Median	53%	54%		58%	
England - Upper quartile	59%	60%		63%	
Herefordshire quartile	2nd	Worst		2nd	

<b>BV119Au: Satisfaction with sports / leisure facilities and events – Users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	73%	72%	74%	72%
Neither	15%	19%	13%	17%
Dissatisfied	12%	10%	13%	11%
Base	585	524	1,157	877
Score C.I.s	± 4%	± 4%	± 3%	± 3%

<b>BV119Anu: Satisfaction with sports / leisure facilities and events – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	28%	26%	36%	35%
Neither	65%	65%	57%	58%
Dissatisfied	7%	10%	7%	7%
Base	616	499	686	576
Score C.I.s	± 4%	± 4%	± 4%	± 4%

<b>Q15b (BV119B): Satisfaction with libraries – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	68%	68%	64%	70%	69%
Neither		25%	30%	24%	25%
Dissatisfied		7%	6%	6%	6%
Base		1,313	1,077	2,003	1,525
Score C.I.s		± 3%	± 3%	± 2%	± 2%
<b>Q15b (BV119B): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	68%	68%	64%	70%	69%
England - Lower quartile	65%	63%		70%	
England - Median	70%	68%		74%	
England - Upper quartile	75%	72%		77%	
Herefordshire quartile	3rd	2nd		3rd	

<b>BV119Bu: Satisfaction with libraries – Users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	83%	84%	84%	84%
Neither	10%	10%	9%	9%
Dissatisfied	8%	5%	8%	7%
Base	832	627	1,240	928
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>BV119Bnu: Satisfaction with libraries – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	42%	34%	47%	46%
Neither	53%	59%	49%	50%
Dissatisfied	5%	7%	3%	4%
Base	442	421	670	550
Score C.I.s	± 5%	± 5%	± 4%	± 4%

<b>Q15c (BV119C): Satisfaction with museums and galleries – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	51%	48%	42%	45%	46%
Neither		44%	53%	44%	45%
Dissatisfied		8%	4%	10%	9%
Base		1,274	1,044	1,965	1,518
Score C.I.s		± 3%	± 3%	± 2%	± 2%

<b>Q15c (BV119C): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	51%	48%	42%	45%	46%
England - Lower quartile	41%	31%		29%	
England - Median	49%	42%		40%	
England - Upper quartile	55%	50%		51%	
Herefordshire quartile	2nd	2nd		2nd	

<b>BV119Cu: Satisfaction with museums and galleries – Users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	71%	72%	67%	68%
Neither	22%	24%	22%	22%
Dissatisfied	8%	4%	11%	10%
Base	537	368	815	635
Score C.I.s	± 4%	± 5%	± 3%	± 4%

<b>BV119Cnu: Satisfaction with museums and galleries – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	31%	25%	31%	31%
Neither	62%	71%	61%	61%
Dissatisfied	8%	4%	8%	8%
Base	670	633	982	789
Score C.I.s	± 3%	± 3%	± 3%	± 3%

<b>Q15d (BV119D): Satisfaction with theatres / concert halls – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	57%	57%	52%	48%	48%
Neither		35%	43%	37%	39%
Dissatisfied		8%	5%	15%	13%
Base		1,282	1,062	1,966	1,532
Score C.I.s		± 3%	± 3%	± 2%	± 2%
<b>Q15d (BV119D): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	57%	57%	52%	48%	48%
England - Lower quartile	42%	36%		29%	
England - Median	52%	48%		41%	
England - Upper quartile	61%	56%		53%	
Herefordshire quartile	2nd	Best		2nd	

<b>BV119Du: Satisfaction with theatres / concert halls – Users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	80%	74%	68%	65%
Neither	14%	22%	17%	22%
Dissatisfied	7%	4%	16%	13%
Base	714	557	1,011	809
Score C.I.s	± 3%	± 4%	± 3%	± 3%

<b>BV119Dnu: Satisfaction with theatres / concert halls – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	26%	27%	27%	29%
Neither	65%	67%	59%	60%
Dissatisfied	9%	6%	14%	11%
Base	522	481	808	647
Score C.I.s	± 4%	± 4%	± 3%	± 3%

<b>Q15e (BV119E): Satisfaction with parks and open spaces – All valid responses – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	65%	67%	66%	69%	69%
Neither		23%	29%	23%	22%
Dissatisfied		9%	5%	8%	10%
Base		1,320	1,086	2,005	1,547
Score C.I.s		± 3%	± 3%	± 2%	± 2%
<b>Q15e (BV119E): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	65%	67%	66%	69%	69%
England - Lower quartile	57%	66%		68%	
England - Median	63%	72%		74%	
England - Upper quartile	69%	77%		78%	
Herefordshire quartile	2nd	3rd		3rd	

<b>BV119Eu: Satisfaction with parks and open spaces – Users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	78%	77%	77%	78%
Neither	13%	18%	14%	12%
Dissatisfied	10%	5%	8%	10%
Base	1,040	811	1,590	1,217
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>BV119Enu: Satisfaction with parks and open spaces – Non-users – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	28%	30%	35%	32%
Neither	64%	64%	57%	58%
Dissatisfied	8%	6%	8%	9%
Base	240	241	317	253
Score C.I.s	± 6%	± 6%	± 5%	± 6%

<b>Q17a: Satisfaction with planning services – All valid responses – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	30%	20%	29%	30%
Neither	60%	63%	56%	52%
Dissatisfied	10%	17%	15%	18%
Base	1,194	940	1,992	1,535
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q17a: Satisfaction with planning services – Users (including usage by a family member) – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	66%	41%	51%	51%
Neither	15%	22%	16%	13%
Dissatisfied	19%	37%	33%	36%
Base	244	195	455	405
Score C.I.s	± 6%	± 7%	± 5%	± 5%

<b>Q17b: Satisfaction with personal social services – All valid responses – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	30%	18%	25%	22%
Neither	65%	75%	69%	70%
Dissatisfied	5%	7%	6%	8%
Base	1,181	899	1,969	1,509
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q17b: Satisfaction with personal social services – Users (including usage by a family member) – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	72%	70%	58%	51%
Neither	17%	15%	20%	27%
Dissatisfied	11%	16%	22%	22%
Base	172	82	279	256
Score C.I.s	± 7%	± 10%	± 6%	± 6%

<b>Q17c: Satisfaction with the local authority education service – All valid responses – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	47%	34%	32%	33%
Neither	47%	58%	63%	61%
Dissatisfied	6%	8%	5%	6%
Base	1,214	899	1,956	1,511
Score C.I.s	± 3%	± 3%	± 2%	± 2%

<b>Q17c: Satisfaction with the local authority education service – Users (including usage by a family member) – Trend over time</b>				
	2003	2005	2006	2007
Satisfied	80%	73%	66%	64%
Neither	11%	14%	20%	24%
Dissatisfied	9%	13%	14%	12%
Base	350	230	404	360
Score C.I.s	± 4%	± 6%	± 5%	± 5%

<b>Q19 (BV3): Overall satisfaction with the authority – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	57%	48%	49%	43%	44%
Neither		33%	28%	40%	39%
Dissatisfied		18%	23%	17%	17%
Base		1,335	1,149	1,942	1,509
Score C.I.s		± 3%	± 3%	± 2%	± 2%

<b>Q19 (BV3): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	57%	48%	49%	43%	44%
England - Lower quartile	60%	49%		48%	
England - Median	66%	55%		53%	
England - Upper quartile	71%	60%		58%	
Herefordshire quartile	Worst	Worst		Worst	

### Section 3: Information about Herefordshire Council and its services

<b>Q20a: How to pay bills to the Council – Trend over time</b>		
	2006	2007
Well informed	90%	92%
Not well informed	10%	8%
Base	1,926	1,483
Score C.I.s	± 1%	± 1%

<b>Q20a: Quartiles</b>		
	2006	2007
Herefordshire score	90%	92%
England - Lower quartile	89%	
England - Median	91%	
England - Upper quartile	93%	
Herefordshire quartile	3rd	

<b>Q20b: How and where to register to vote – Trend over time</b>		
	2006	2007
Well informed	89%	90%
Not well informed	11%	10%
Base	1,976	1,515
Score C.I.s	± 1%	± 2%
<b>Q20b: Quartiles</b>		
	2006	2007
Herefordshire score	89%	90%
England - Lower quartile	88%	
England - Median	90%	
England - Upper quartile	91%	
Herefordshire quartile	3rd	

<b>Q20c: How you can get involved in local decision making – Trend over time</b>		
	2006	2007
Well informed	42%	45%
Not well informed	58%	55%
Base	1,709	1,384
Score C.I.s	± 2%	± 3%
<b>Q20c: Quartiles</b>		
	2006	2007
Herefordshire score	42%	45%
England - Lower quartile	39%	
England - Median	41%	
England - Upper quartile	45%	
Herefordshire quartile	2nd	

<b>Q20d: How to complain to the Council – Trend over time</b>		
	2006	2007
Well informed	44%	48%
Not well informed	56%	52%
Base	1,793	1,423
Score C.I.s	± 2%	± 3%
<b>Q20d: Quartiles</b>		
	2006	2007
Herefordshire score	44%	48%
England - Lower quartile	45%	
England - Median	48%	
England - Upper quartile	52%	
Herefordshire quartile	Worst	



<b>Q20e: What the Council spends its money on – Trend over time</b>		
	2006	2007
Well informed	54%	60%
Not well informed	46%	40%
Base	1,885	1,449
Score C.I.s	± 2%	± 3%
<b>Q20e: Quartiles</b>		
	2006	2007
Herefordshire score	54%	60%
England - Lower quartile	46%	
England - Median	53%	
England - Upper quartile	58%	
Herefordshire quartile	2nd	

<b>Q20f: What standard of service you should expect from the Council – Trend over time</b>		
	2006	2007
Well informed	52%	52%
Not well informed	48%	48%
Base	1,813	1,425
Score C.I.s	± 2%	± 3%
<b>Q20f: Quartiles</b>		
	2006	2007
Herefordshire score	52%	52%
England - Lower quartile	45%	
England - Median	49%	
England - Upper quartile	53%	
Herefordshire quartile	2nd	

<b>Q20g: Whether the Council is delivering on its promises – Trend over time</b>		
	2006	2007
Well informed	32%	34%
Not well informed	68%	66%
Base	1,702	1,336
Score C.I.s	± 2%	± 3%
<b>Q20g: Quartiles</b>		
	2006	2007
Herefordshire score	32%	34%
England - Lower quartile	30%	
England - Median	33%	
England - Upper quartile	37%	
Herefordshire quartile	3rd	

<b>Q20h: What the Council is doing to tackle anti-social behaviour in your local area – Trend over time</b>		
	2006	2007
Well informed	20%	20%
Not well informed	80%	80%
Base	1,628	1,305
Score C.I.s	± 2%	± 2%
<b>Q20h: Quartiles</b>		
	2006	2007
Herefordshire score	20%	20%
England - Lower quartile	20%	
England - Median	22%	
England - Upper quartile	25%	
Herefordshire quartile	3rd	

<b>Q20i: How well the Council is performing – Trend over time</b>		
	2006	2007
Well informed	33%	32%
Not well informed	67%	68%
Base	1,703	1,324
Score C.I.s	± 2%	± 3%
<b>Q20i: Quartiles</b>		
	2006	2007
Herefordshire score	33%	32%
England - Lower quartile	31%	
England - Median	35%	
England - Upper quartile	39%	
Herefordshire quartile	3rd	

<b>Q20j: Overall, how well informed do you think your Council keeps residents about the services and benefits it provides – Trend over time</b>				
	2003	2005	2006	2007
Well informed	49%	54%	45%	44%
Not well informed	51%	46%	55%	56%
Base	1,222	1,065	1,845	1,430
Score C.I.s	± 3%	± 3%	± 2%	± 3%
<b>Q20j: Quartiles</b>				
	2003	2005	2006	2007
Herefordshire score	49%	54%	45%	44%
England - Lower quartile			41%	
England - Median			45%	
England - Upper quartile			50%	
Herefordshire quartile			3rd	

## Section 4: Contacting Herefordshire Council

<b>Q24(BV4): Satisfaction with complaints handling – Trend over time</b>					
	2000	2003	2005	2006	2007
Satisfied	30%	29%	31%	36%	27%
Neither		13%	16%	9%	10%
Dissatisfied		59%	53%	55%	62%
Base		228	219	320	283
Score C.I.s		± 6%	± 6%	± 5%	± 5%

<b>Q24(BV4): Quartiles</b>					
	2000	2003	2005	2006	2007
Herefordshire score	30%	29%	31%	36%	27%
England - Lower quartile	36%	29%		30%	
England - Median	40%	33%		33%	
England - Upper quartile	44%	36%		37%	
Herefordshire quartile	Worst	Worst		2nd	

<b>Q27a: How easy it was to find the right person to deal with – Trend over time</b>		
	2006	2007
Satisfied	70%	73%
Neither	14%	14%
Dissatisfied	16%	13%
Base	1,126	918
Score C.I.s	± 3%	± 3%

<b>Q27b: The length of time it took to deal with the person you contacted – Trend over time</b>		
	2006	2007
Satisfied	71%	70%
Neither	15%	14%
Dissatisfied	14%	16%
Base	1,116	911
Score C.I.s	± 3%	± 3%

<b>Q27c: Any information you were given – Trend over time</b>		
	2006	2007
Satisfied	68%	66%
Neither	15%	13%
Dissatisfied	17%	21%
Base	1,087	896
Score C.I.s	± 3%	± 3%

<b>Q27d: How competent the staff were – Trend over time</b>		
	2006	2007
Satisfied	72%	71%
Neither	14%	14%
Dissatisfied	14%	14%
Base	1,094	896
Score C.I.s	± 3%	± 3%

<b>Q27e: How helpful the staff were – Trend over time</b>		
	2006	2007
Satisfied	74%	72%
Neither	11%	13%
Dissatisfied	15%	15%
Base	1,111	902
Score C.I.s	± 3%	± 3%

<b>Q27f: The final outcome – Trend over time</b>		
	2006	2007
Satisfied	64%	61%
Neither	14%	14%
Dissatisfied	23%	24%
Base	1,080	875
Score C.I.s	± 3%	± 3%

## Section 5: Local decision making and your local community

<b>Q28: Satisfaction with the opportunities for participation in local decision making provided by the Council – Trend over time</b>		
	2006	2007
Satisfied	26%	28%
Neither	49%	48%
Dissatisfied	25%	24%
Base	1,533	1,274
Score C.I.s	± 2%	± 2%

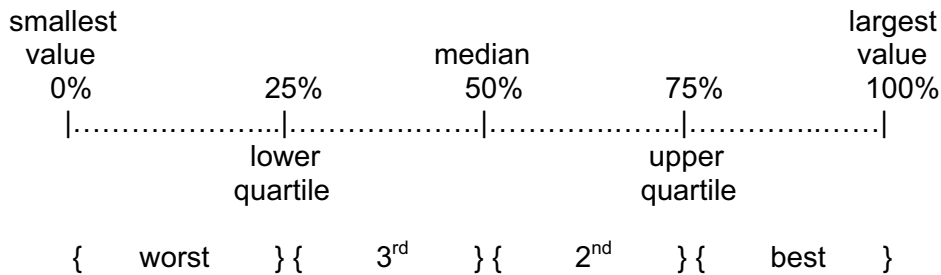
<b>Q28: Quartiles</b>		
	2006	2007
Herefordshire score	26%	28%
England - Lower quartile	25%	
England - Median	28%	
England - Upper quartile	31%	
Herefordshire quartile	3rd	

<b>Q29: Ability to influence decisions affecting the local area – Trend over time</b>		
	2006	2007
Agree	29%	30%
Disagree	71%	70%
Base	1,653	1,262
Score C.I.s	± 2%	± 3%

<b>Q31: Ability to influence decisions affecting the local community – Trend over time</b>			
	2005	2006	2007
Agree	35%	32%	33%
Neither	27%	34%	26%
Disagree	39%	34%	41%
Base	1,061	1,775	1,371
Score C.I.s	± 3%	± 2%	± 2%

## Appendix 2: Medians and quartiles

The median for a dataset is the value such that 50% of the data is lower and 50% of the data is higher. It is an overall summary measure that is less affected by the presence of extreme values (outliers) than the mean.



The lower quartile for a dataset is the value such that 25% of the data is lower and 75% of the data is higher. The upper quartile for a dataset is the value such that 75% of the data is lower and 25% of the data is higher. The term “quartile” is also used to refer to a range bounded by the quartile values. For example, saying that a score lies “in the upper quartile” really means it lies in a range bounded by the upper quartile value and the highest score achieved. Saying it lies “in the second quartile” really means it lies in a range bounded by the median and the upper quartile value.

In this report when referring to quartiles, the terms “best” and “worst” are used in preference to “upper / lower” or “top / bottom”, as in some questions a desirable score is high, while in others it is low. The “best” quartile therefore always refers to the most desirable quartile, whether high or low.

### Example

If the upper quartile value is 70%, the median is 61% and the lower quartile value is 54%, and a high score is desirable:

A score of less than 54% would be reported as lying in the worst quartile; a score of 54% up to 61% lies in the 3<sup>rd</sup> quartile; a score of 61% up to 70% lies in the 2<sup>nd</sup> quartile; and a score of 70% or above lies in the best quartile.

In this report, the following colours are used to shade quartile cells:

Quartile colours
Best
2 <sup>nd</sup>
3 <sup>rd</sup>
Worst

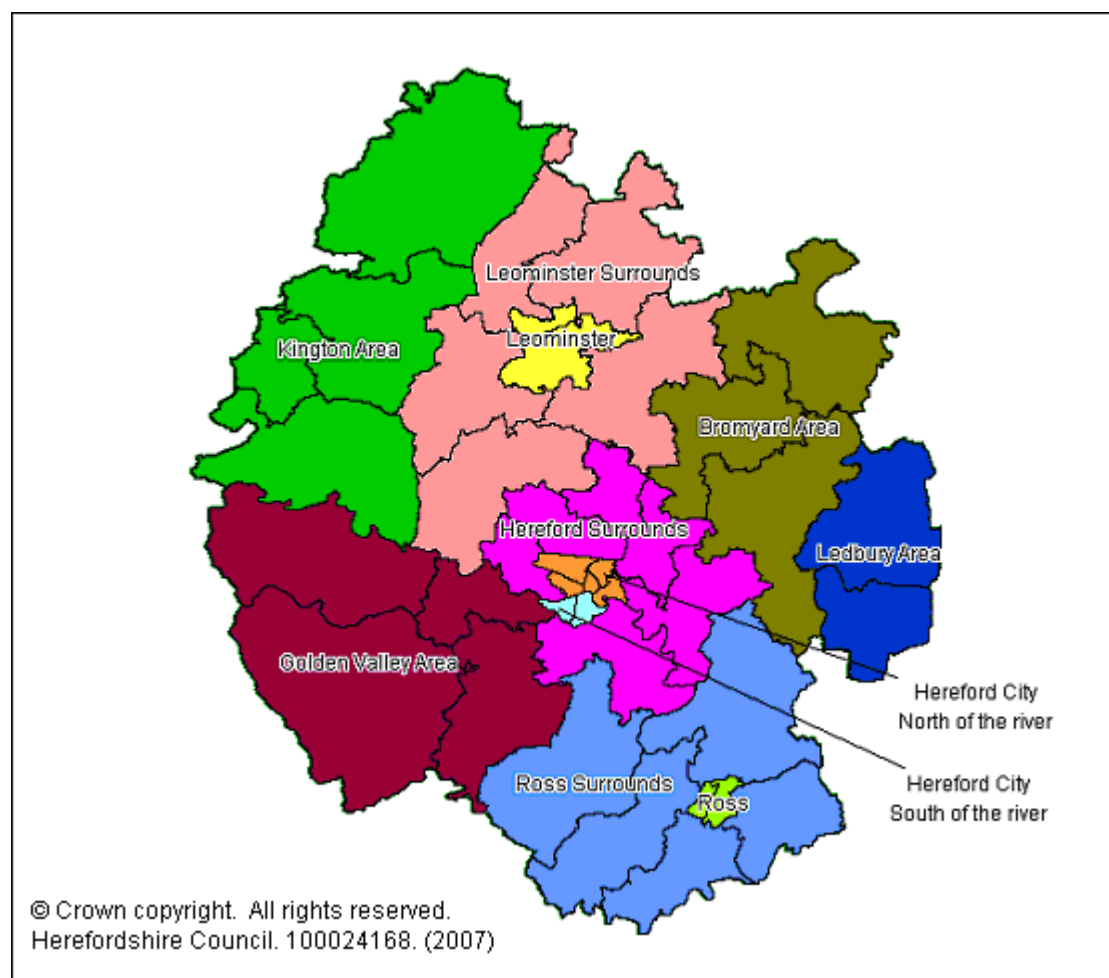
## Appendix 3: Ward groups

In order to investigate how responses to certain questions varied according to the area in which respondents live, it is useful to look at the ward in which respondents' residences lie. Ideally, we would produce results on a ward-by-ward basis, but there are too few respondents from each ward for this to be statistically robust. Wards were thus categorised into 11 groups, based on their physical location and the number of respondents in each.

In order to fully appreciate the results obtained using ward groups, it is important to note the makeup of each group:

- "Hereford City North of the river", "Hereford City South of the river", "Leominster" and "Ross" are mostly built-up areas, with minimal rural areas.
- "Bromyard Area", "Kington Area" and "Ledbury Area" each contain a market town and a large surrounding rural area.
- "Hereford Surrounds", "Leominster Surrounds", "Ross Surrounds" and "Golden Valley Area" contain largely rural areas.

The map below shows the areas in relation to one another within the County.



## Appendix 4: Urban / rural categories

As part of a project commissioned by the Office for National Statistics (ONS), the Department for Environment, Food and Rural Affairs (Defra), the Office of the Deputy Prime Minister (ODPM), the Countryside Agency (CA) and the Welsh Assembly Government, all Census output areas<sup>6</sup> in the country have been classified as “urban” or “rural”. The rural group can also be broken down into three smaller categories.

- Urban
- Rural
  - Town & Fringe
  - Village
  - Hamlet & Isolated Dwelling

“Urban” refers to settlements with a population of at least 10,000 – so the market towns of Leominster and Ross, as well as the city of Hereford, are considered “urban”.

## Appendix 5: Deprivation quartiles

The Index of Multiple Deprivation (IMD 2004) is used widely to identify areas of deprivation. Deprivation levels have been calculated by combining a number of indicators across seven “domains” of deprivation: income deprivation; employment deprivation; health deprivation and disability; education, skills and training deprivation; barriers to housing and services; living environment deprivation; and crime. The score calculated is then used to rank each super output area<sup>7</sup> relative to others in the country, relative to those in the region (West Midlands) and relative to those in the county.

For the purposes of further analysis in this report, the ranking of the 116 super output areas in Herefordshire is used to divide these super output areas into four groups, known as “quartiles”. The resulting groups contain the 25% most deprived in Herefordshire, the 25% least deprived in Herefordshire, and two categories in between.

NB the 2004 IMD was used because the 2007 IMD was not available at the time that the analysis was carried out.

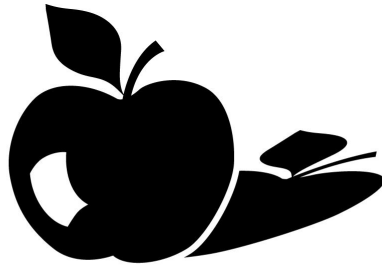
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<sup>6</sup> Census “output areas” are the smallest defined physical areas used for analysis, each containing roughly 125 resident households.

<sup>7</sup> Output areas are collected into groups to form “super output areas”.

## **Appendix 6: The questionnaire**





# HEREFORDSHIRE COUNCIL

## Herefordshire Satisfaction Survey 2007

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### Helpful hints for completing this questionnaire

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- The questionnaire should be completed by any resident aged 18 or over living at this address.
- Please read each question carefully and tick a box to indicate your answer.
- In most cases you will only have to tick one box, but please read the questions carefully as sometimes you will need to tick more than one box.
- Answer the next question unless asked otherwise.
- Once you have finished, please take a minute to check you have answered all the questions that you should have answered.
- The survey consists of 16 pages and should take no longer than 20 or 30 minutes to complete.
- If you have any queries about the questionnaire, please do not hesitate to contact Herefordshire Council Research Team on 01432 383 615.
- Once you have completed the questionnaire, please return it in the pre-addressed envelope supplied by **Friday 12th October**. **You do not need to add a stamp.**
- If you cannot find or did not receive the pre-addressed envelope, please send to the following address or call 01432 383 615:

Herefordshire Council Research Team  
FREEPOST SWC4816  
PO Box 4  
Hereford  
HR4 0BR

- If you would like help to understand this document, or would like it in another format or language, please call Tony Cramp on 01432 383 615 or e-mail [tcramp@herefordshire.gov.uk](mailto:tcramp@herefordshire.gov.uk)

**For a large print copy, please call 01432 383 615**

## Section 1: About your local area

Q1 Thinking about your local area, for each of the following things below, do you think each has got better or worse over the last three years, or has it stayed the same?

Please tick ✓ one box per row

	Better	Stayed the same	Worse	Don't know
Access to nature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities for teenagers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable decent housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clean streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural facilities (e.g. cinemas, museums)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Education provision	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilities for young children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job prospects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Road and pavement repairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shopping facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports & leisure facilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The level of crime	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The level of pollution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The level of traffic congestion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wage levels & local cost of living	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q2 Overall, how satisfied or dissatisfied are you with your local area as a place to live?

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Anti-Social behaviour

Q3 Thinking about this local area, how much of a problem do you think are...

Please tick ✓ one per row

	A very big problem	A fairly big problem	Not a very big problem	Not a problem at all	Don't know
...parents not being made to take responsibility for the behaviour of their children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...people not treating other people with respect and consideration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...noisy neighbours or loud parties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...teenagers hanging around on the streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...rubbish and litter lying around	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...people being drunk or rowdy in public spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...abandoned or burnt out cars	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...vandalism, graffiti and other deliberate damage to property or vehicles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...people using or dealing drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...speeding traffic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
...people being attacked because of their skin colour, ethnic origin, religion, disability or sexual orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q4 To what extent do you agree or disagree that this local area is a place where people from different backgrounds get on well together?

Please tick ✓ one box only

Definitely agree	Tend to agree	Tend to disagree	Definitely disagree	Don't know	Too few people in local area	All the same background
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Access to local services

Q5 From your home, how easy is it for you to get to the following using your usual form of transport?  
Please tick ✓ one box per row

	Very easy	Fairly easy	Neither easy nor difficult	Fairly difficult	Very difficult	It does not apply / Don't know
Local shop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shopping centre or supermarket	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
GP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dentist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chemist or pharmacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shop selling fresh fruit and vegetables	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local hospital	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Publicly accessible green space e.g. park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public transport facility e.g. bus stop, train station	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Library	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports / leisure centre	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural / recreational facility e.g. theatre, cinema	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bank or cashpoint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Council or neighbourhood office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

# What does Herefordshire Council do?

This section summarises what some of Herefordshire Council's service departments do:

## Transport Services

- Plans and delivers schemes to improve the transport network, including new footways and roads, cycle facilities, bus stops, park & ride, and road safety measures
- Manages the transport network
- Maintains the highway, which includes roads, footpaths, cycle-ways and bridges
- Provides financial support for bus services that are socially necessary but unprofitable, provides concessionary travel, transport and travel information
- Controls car parking, including enforcement of street parking restrictions
- Provides bus travel to school and services for people with special needs

## Environmental Services

- Collection, recycling and disposal of domestic waste
- Cleans streets and public places
- Provides lighting to streets and public places
- Consumer advice services
- Pest control
- Dog warden services
- Animal health and welfare on farms and markets
- Public protection activities, e.g. safety of premises like petrol stations, entertainment centres and shops
- Monitors and takes enforcement action on a range of environmental pollution issues

## Local Authority Education Service

- Schools, and other forms of education
- Special Education Needs (including educational psychology and teaching support staff)
- Education welfare, exclusions from school, school inclusion and child protection
- Inspection and advice to schools (Education Development Plan)
- Instrumental music service
- Early years and childcare services
- Support services for schools
- Admissions, transport and school places
- Health and safety
- Governor services
- Student awards, grants and loans

## Personal Social Services

- Assessment of people's needs
- Day care, home care, respite and residential services
- Meals on Wheels
- Supported living and personal support
- Support for carers
- Advocacy
- Social work in hospitals, GP surgeries and in community teams
- Equipment and aids to daily living
- Referral to other appropriate services
- Provision of information on services
- Services to looked after children
- Child protection services
- Adoption services
- Aftercare

## Planning Services

- Prepares development plans and documents regarding land use
- Gives advice to developers to help ensure that proposals relate to policy and design advice
- Determination of planning applications and building regulations approvals
- Investigates contraventions of planning control and building regulations and takes appropriate action
- Provides detailed policy and practice advice on the historic and natural environments

## Cultural and Recreational Services

- Arts, festivals and special events
- Provides sports & leisure services
- Library services - including mobile libraries
- Museums, heritage centres and conservation work - including mobile museum
- Tourism development and marketing
- Support for arts businesses and venues
- Neighbourhood and community centres
- Grant aid to local voluntary groups
- Manages parks & open spaces - including playing fields, nature reserves, woodland and allotments
- Manages public rights of way

## Strategic Housing Services

These services EXCLUDE the ownership and management of houses - these were transferred to Herefordshire Housing and other housing associations

- Development of affordable housing in partnership with the housing associations
- To identify and meet the current and future housing needs of local residents
- Supporting People grant administration (supports vulnerable people)
- Grants to improve properties
- Grants for disabled adaptations to homes
- Advice on improving home energy efficiency
- Housing advice services
- Homeless services
- Homepoint - the Choice-Based Lettings partnership which holds the common housing register
- Enforcement of Housing Standards
- Licensing of Houses in Multiple Occupation

## Benefits Service

- Administration of the Housing Benefit and Council Tax Benefit schemes

## Section 2: Your local authority

Herefordshire Council provides many services to the local community and also has a role in planning, supporting, encouraging or overseeing many other services. We would like to hear your views on these services. Further information is given in "What does Herefordshire Council do?" on the previous page.

### Waste and litter services

Herefordshire Council has a duty to keep all open public land which it controls clear of litter and refuse.

Q6 How satisfied or dissatisfied are you that Herefordshire Council has kept this land clear of litter and refuse?

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Household waste collection

Herefordshire Council undertakes a weekly collection of general household waste.

Q7 Please indicate whether you are satisfied or dissatisfied with the waste collection service overall:

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Doorstep recycling collection

Herefordshire Council undertakes a weekly collection of waste for recycling in the following areas: Bartestree, Blakemere, Bodenham, Bredwardine, Bromyard and Winslow, Burghill, Clehonger, Clifford, Colwall, Credenhill, Cusop, Dinmore, Dorstone, Eardisland, Eardisley, Eaton Bishop, Hampton Bishop, Hereford City, Holme Lacy, Holmer, Kingsland, Kingstone, Kington, Ledbury, Leominster, Lower Bullingham, Lugwardine, Luston, Madley, Marden, Moccas, Mordiford, Moreton-on-Lugg, Pembridge, Peterchurch, Pipe and Lyde, Preston-on-Wye, Shobdon, Stretton Sugwas, Sutton, Tyberton, Vowchurch, Wellington, Weobley, Westhide, Withington.

Q8 Please indicate whether you are satisfied or dissatisfied with the service for the collection of items for recycling overall:

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Local recycling facilities

Herefordshire Council provides a range of local recycling facilities such as bottle, paper, textile and can banks at supermarkets, retail parks and on Council owned parks.

Q9 Please indicate whether you are satisfied or dissatisfied with the provision of local recycling facilities overall:

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## The local tip / household waste recycling centre

Herefordshire Council provides sites for the disposal and / or recycling of bulky household waste, that is the local "tip" or "household waste recycling centre". The household waste sites are located at: Chapel Road, Rotherwas, Hereford; Bridge Street, Leominster; Station Approach, Ross-on-Wye; Little Marcle Road, Ledbury; Linton Tile Works, Bromyard.

Q10 Please indicate whether you are satisfied or dissatisfied with the local tip / household waste recycling centre overall. PLEASE ONLY ANSWER THIS QUESTION IF YOU HAVE USED A LOCAL TIP OR HOUSEHOLD WASTE RECYCLING CENTRE IN THE LAST 12 MONTHS

Please tick ✓ one box only

Very satisfied

Fairly satisfied

Neither

Fairly dissatisfied

Very dissatisfied

## Public transport information

Herefordshire Council produces three area based timetable booklets covering the county, a public transport map & guide, various information leaflets and timetable information at bus stops. There is also a website with bus, coach and train information and a Herefordshire journey planner. The authority also has a role in ensuring the information produced by private transport companies for local services is of the standard required.

Q11 Please indicate whether you are satisfied or dissatisfied with the provision of public transport information overall

Please tick ✓ one box only

Very satisfied

Fairly satisfied

Neither

Fairly dissatisfied

Very dissatisfied

Q12 Have you received or seen any of the information provided on local transport services, in the last 12 months?

Please tick ✓ one box only

Yes

No

Don't know

## The local bus service

Herefordshire Council has responsibility for supplementing whatever local bus services are provided commercially where a need is identified. In addition, Herefordshire Council provides bus shelters throughout the county in partnership with Parish Councils. The authority also has a role in ensuring local services are meeting the needs of the local community.

Q13 Please indicate whether you are satisfied or dissatisfied with the local bus service overall. PLEASE ANSWER THIS QUESTION WHETHER YOU USE THE BUS OR NOT.

Please tick ✓ one box only

Very satisfied

Fairly satisfied

Neither

Fairly dissatisfied

Very dissatisfied

Q14 How frequently, if at all, do you use the local bus service?

Please tick ✓ one box only

Almost every day

At least once a week

About once a month

Within the last 6 months

Within the last year

Longer ago

Never used

Don't know

## Cultural and recreational activities and venues

Herefordshire Council directly supports cultural and recreational activities and venues. The authority's licensing and planning responsibilities also make a difference to the level of private and voluntary cultural provision in your area.

Q15 Please indicate how satisfied or dissatisfied you are with each of the following services provided or supported by Herefordshire Council. **PLEASE ANSWER THIS QUESTION WHETHER YOU HAVE USED THESE SERVICES OR NOT.**

Please tick ✓ one box per row

	Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
Sports / leisure facilities and events*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Museums and galleries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theatres / Concert halls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q16 Please indicate how frequently you have used the following cultural and recreational services provided or supported by Herefordshire Council in the last 12 months.

Please tick ✓ one box per row

	Almost every day	At least once a week	About once a month	Within the last 6 months	Within the last year	Longer ago	Never used	It does not apply / Don't know
Sports / leisure facilities and events*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Libraries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Museums and galleries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Theatres / Concert halls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parks and open spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**\*Many sports and leisure facilities (including leisure and sports centres) are managed by halo on behalf of Herefordshire Council. In addition, the Council directly manages others.**



## Other services

Herefordshire Council also provides other services.

Q17 Please indicate how satisfied or dissatisfied you are overall with the following services provided by Herefordshire Council. **PLEASE ANSWER THIS QUESTION WHETHER YOU HAVE USED THESE SERVICES OR NOT.**

**Please tick ✓ one box per row**

	Very satisfied	Fairly satisfied	Neither	Fairly dissatisfied	Very dissatisfied
Planning services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal social services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local authority education service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q18 Please indicate whether you or any other member of your family have used any of the following services provided by Herefordshire Council in the last 12 months

**Please tick ✓ all boxes that apply**

Planning services	<input type="checkbox"/>
Personal social services	<input type="checkbox"/>
Local authority education service	<input type="checkbox"/>

Q19 Taking everything into account, how satisfied or dissatisfied are you with the way the authority runs things?

**Please tick ✓ one box only**

Very satisfied	<input type="checkbox"/>	Fairly satisfied	<input type="checkbox"/>	Neither satisfied nor dissatisfied	<input type="checkbox"/>	Fairly dissatisfied	<input type="checkbox"/>	Very dissatisfied	<input type="checkbox"/>
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## Section 3: Information about Herefordshire Council and its services

Q20 How well informed do you feel about each of the following?

**Please tick ✓ one box per row**

	Very well informed	Fairly well informed	Not very well informed	Not well informed at all	Don't know
How to pay bills to the Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How and where to register to vote	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How you can get involved in local decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How to complain to the Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What the Council spends its money on	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What standard of service you should expect from the Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Whether the Council is delivering on its promises	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
What the Council is doing to tackle anti-social behaviour in your local area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How well the Council is performing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, how well informed do you think your Council keeps residents about the services and benefits it provides	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q21 How do you find out about Herefordshire Council? Please tick the MAIN source you use from the list below  
Please tick ✓ one box only

- |  |                          |
|--|--------------------------|
| Local media (newspapers, television, radio)                                      | <input type="checkbox"/> |
| Information provided by the Council<br>(newspaper / magazine, leaflets, posters) | <input type="checkbox"/> |
| Council website / internet   | <input type="checkbox"/> |
| From local Councillor  | <input type="checkbox"/> |
| Direct contact with the Council  | <input type="checkbox"/> |
| Word of mouth (e.g. family or friends)   | <input type="checkbox"/> |
| Other source ( ✓ and write in below)   | <input type="checkbox"/> |

- |                   |                          |
|-------------------|--------------------------|
| None of the above | <input type="checkbox"/> |
| Don't know        | <input type="checkbox"/> |

## Section 4: Contacting Herefordshire Council

### Making a complaint

Q22 Have you contacted the authority with a complaint(s) in the last 12 months?  
Please tick ✓ one box only

Yes (Please continue to Q23)

No (Please go to Q25)

Q23 What did the complaint(s) relate to?  
Please write in below. Write in 'don't know' if you cannot recall

Q24 How satisfied or dissatisfied are you with the way in which your complaint(s) was (were) handled?  
Please tick ✓ one box only

Very satisfied

Fairly satisfied

Neither satisfied  
nor dissatisfied

Fairly dissatisfied

Very dissatisfied

## Contacting Herefordshire Council for other reasons

**QUESTIONS 25 TO 27 ARE ABOUT YOUR MOST RECENT CONTACT WITH THE COUNCIL FOR OTHER REASONS THAN TO MAKE A COMPLAINT.**

**IF YOU HAVE CONTACTED THE COUNCIL FOR ANY REASON OTHER THAN TO MAKE A COMPLAINT IN THE PAST 12 MONTHS, PLEASE CONTINUE TO Q25. OTHERWISE, PLEASE GO TO Q28.**

**Q25** When you MOST RECENTLY contacted the Council (other than to make a complaint) how did you do so?

**Please tick ✓ all boxes that apply**

- |                                       |   |   |
|---------------------------------------|---|---|
| <input type="checkbox"/> In person    | <input type="checkbox"/> By e-mail                | <input type="checkbox"/> By letter                              |
| <input type="checkbox"/> By telephone | <input type="checkbox"/> Via a website / internet | <input type="checkbox"/> Other method<br>(✓ and write in below) |

**Q26a** If you made contact in person, where did you do so?

**Please tick ✓ all boxes that apply**

- At an "Info in Herefordshire" centre
- At another Council building
- Somewhere else

**Q26b** If you made contact by telephone, who did you call?

**Please tick ✓ all boxes that apply**

- The main switchboard (01432 260000)
- "Info by Phone"
- A member of staff or department directly
- Not sure / can't remember
- Other

**Q27** Still thinking about your most recent contact with the Council, please indicate how satisfied or dissatisfied you were with each aspect of the service you received. If any aspect does not apply to your particular experience, please tick 'not applicable'.

**Please tick ✓ one box per row**

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know	Not applicable
How easy it was to find the right person to deal with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The length of time it took to deal with the person you contacted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any information you were given	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How competent the staff were	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How helpful the staff were	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The final outcome	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section 5: Local decision making and your local community

Herefordshire Council and partners provide opportunities for residents to participate in decisions that affect your local area, such as Parish Plans, Community Forums, a citizens' panel (Herefordshire Voice) and a Youth Council. In addition, surveys and public meetings are conducted on specific issues, for example the proposed development of the Edgar Street Grid in Hereford.

Q28 Overall, how satisfied or dissatisfied are you with the opportunities for participation in local decision making provided by your Council?

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q29 Do you agree or disagree that you can influence decisions affecting your local area?

Please tick ✓ one box only

Definitely agree	Tend to agree	Tend to disagree	Definitely disagree	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q30 How satisfied or dissatisfied are you with your local community as a place to live?

Please tick ✓ one box only

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q31 Do you agree or disagree that you can influence decisions affecting your local community?

Please tick ✓ one box only

Strongly agree	Slightly agree	Neither agree nor disagree	Slightly disagree	Strongly disagree	Don't know
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Section 6: Volunteering through organisations

Q32 In the last 12 months, have you provided unpaid help to groups, clubs or organisations to benefit other people or the environment?

Please tick ✓ one box only

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Q33 If "Yes", on average, how much time (in total\*) do you spend providing such help?

Please tick ✓ one box only

<input type="checkbox"/> Less than 2 hours per week (less than about 100 hrs a year)	<input type="checkbox"/> 2 - 4 hours per week (about 100 - 200 hrs a year)	<input type="checkbox"/> 5 hours per week or more (about 250 hrs a year or more)
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\* If you provide help to more than one group, please give the total for all help given.

## Section 7: About yourself

Q34 What is your gender?

Please tick ✓ one box only

Male

Other

( ✓ and write in below)

Female

Q35 What was your age on your last birthday? Please write in

Years

Q36 How long have you / your household been living in your current accommodation?

Please tick ✓ one box only

Under 1 year

1 - 2 years

3 - 5 years

6 - 10 years

11 - 20 years

21 + years

Don't know / can't remember

Q37 How long have you / your household been living in this area?

Please tick ✓ one box only

Under 1 year

1 - 2 years

3 - 5 years

6 - 10 years

11 - 20 years

21 + years

Don't know / can't remember

Q38 In which of these ways does your household occupy your current accommodation?

Please tick ✓ one box only

Owned outright

Rent from Housing Association / Trust

Other

( ✓ and write in below)

Buying on a mortgage

Rented from private landlord

Q39 How many adults aged 18 or over are living here?

Please tick ✓ one box only

One

Three

Five

Two

Four

More than five ( ✓ and write in number below)

Q40 Are there any children 0 - 15 years of age living in your household?

Please tick ✓ one box only

Yes

No

Q41 Are there any young people 16 - 17 years of age living in your household?

Please tick ✓ one box only

Yes

No

Q42 Which of these activities best describes what you are doing at present?

Please tick ✓ one box only

- |   |  |
|---|--|
| <input type="checkbox"/> Employee in full-time job<br>(30 hours plus per week)  | <input type="checkbox"/> Full-time education at school, college or<br>university |
| <input type="checkbox"/> Employee in part-time job<br>(under 30 hours per week)   | <input type="checkbox"/> Unemployed and available for work                       |
| <input type="checkbox"/> Self employed full or part-time  | <input type="checkbox"/> Permanently sick / disabled                             |
| <input type="checkbox"/> On a government supported training scheme<br>(e.g. Modern Apprenticeship /<br>Training for Work) | <input type="checkbox"/> Wholly retired from work                                |
|   | <input type="checkbox"/> Looking after the home                                  |
|   | <input type="checkbox"/> Doing something else ( ✓ and write in<br>below)         |

Q43 Do you have any long-standing illness, disability or infirmity? (long-standing means anything that has troubled you over a period of time or that is likely to affect you over a period of time)

Please tick ✓ one box only

- |   |  |
|---|--|
| <input type="checkbox"/> Yes (Please continue to Q44) | <input type="checkbox"/> No (Please go to Q46) |
|---|--|

Q44 Does this illness or disability limit your activities in any way?

Please tick ✓ one box only

- |                              |                             |
|------------------------------|-----------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> No |
|------------------------------|-----------------------------|

Q45 What is the nature of your illness or disability?

Please tick ✓ all boxes that apply

- |   |  |
|---|--|
| <input type="checkbox"/> Deaf / hard of hearing / acute hearing         | <input type="checkbox"/> Progressive / chronic illness (e.g. MS, cancer) |
| <input type="checkbox"/> Blind / partially sighted / sensitive to light | <input type="checkbox"/> Mobility difficulties                           |
| <input type="checkbox"/> Learning disability or difficulty              | <input type="checkbox"/> Other ( ✓ and write in below)                   |
| <input type="checkbox"/> Mental health                                  |  |

Q46 Your sexual orientation:

Please tick ✓ one box only

- |                                       |                                  |  |
|---------------------------------------|----------------------------------|--|
| <input type="checkbox"/> Heterosexual | <input type="checkbox"/> Gay     | <input type="checkbox"/> Prefer not to say |
| <input type="checkbox"/> Bisexual     | <input type="checkbox"/> Lesbian |  |

Q47 Your religion / belief:

Please tick ✓ one box only

- |                                    |                                 |                                |   |
|------------------------------------|---------------------------------|--------------------------------|---|
| <input type="checkbox"/> None      | <input type="checkbox"/> Muslim | <input type="checkbox"/> Hindu | <input type="checkbox"/> Buddhist                         |
| <input type="checkbox"/> Christian | <input type="checkbox"/> Jewish | <input type="checkbox"/> Sikh  | <input type="checkbox"/> Other ( ✓ and write<br>in below) |

Q48 Your national identity:  
Please tick ✓ one box only

British

Scottish

Welsh

English

Irish

Other

( ✓ and write in below)

Q49 Your ethnicity:  
Please tick ✓ one box only

**White**

British

Irish Traveller

Romany / Gypsy

Other White background  
( ✓ and write in below)

**Black**

British

African

Caribbean

Other Black background  
( ✓ and write in below)

**Asian**

British

Indian

Pakistani

Bangladeshi

Other Asian background  
( ✓ and write in below)

**Mixed**

British

White & Black African

White & Black Caribbean

White & Asian

White & Chinese

Other Mixed background  
( ✓ and write in below)

**Chinese**

British

Chinese

Other Chinese background  
( ✓ and write in below)

**Other**

Any other background  
( ✓ and write in below)

Q50 To which of the following do you have access at home?  
Please tick ✓ all boxes that apply

A computer

E-mail

A mobile phone

None of these

The internet

Broadband

A land-line phone

Q51 How do you usually travel to work for your main job (i.e. the job for which you usually work the most hours)?

Please tick ✓ one box only for the longest part (by distance) of your usual journey to work

- |   |  |
|---|--|
| <input type="checkbox"/> N/A - I do not work          | <input type="checkbox"/> Driving a car or van - on your own      |
| <input type="checkbox"/> Work mainly at or from home  | <input type="checkbox"/> Driving a car or van - with a passenger |
| <input type="checkbox"/> Train                        | <input type="checkbox"/> Passenger in a car or van               |
| <input type="checkbox"/> Bus, minibus or coach        | <input type="checkbox"/> Taxi                                    |
| <input type="checkbox"/> Motorcycle, scooter or moped | <input type="checkbox"/> On foot                                 |
| <input type="checkbox"/> Bicycle                      | <input type="checkbox"/> Other ( ✓ and write in below)           |

Q52 Approximately how far do you travel to work for your main job (one way)?

Please tick ✓ one box only

- |   |                                       |  |  |
|---|---------------------------------------|--|--|
| <input type="checkbox"/> Less than 1 mile | <input type="checkbox"/> 2 - 5 miles  | <input type="checkbox"/> 11 - 25 miles | <input type="checkbox"/> Over 50 miles |
| <input type="checkbox"/> 1 up to 2 miles  | <input type="checkbox"/> 6 - 10 miles | <input type="checkbox"/> 26 - 50 miles | <input type="checkbox"/> N/A           |

Q53 Is there anything else you would like to add?

Please write in below

---

Herefordshire Partnership, of which Herefordshire Council is a member organisation, has a citizens' panel, known as "Herefordshire Voice". Herefordshire Voice panellists are sent about three postal questionnaires a year, asking for more detailed views about services provided by the Council and its partners, and other important local issues. Recent survey topics have included access to services, cultural and recreational facilities, public transport and volunteering.

**If you are not already a member, would you be interested in joining Herefordshire Voice?**

- Yes I am interested in joining, please send me some more information

---

**Thank you very much for taking part in this survey.**

Please return your questionnaire in the pre-paid envelope provided, or if this has been misplaced, to the following FREEPOST address:

Herefordshire Council Research Team,  
FREEPOST SWC4816,  
PO Box 4,  
Hereford,  
HR4 0BR

**Please return your questionnaire by Friday 12th October.**



# PLANNING OBLIGATIONS SUPPLEMENTARY PLANNING DOCUMENT

## PORTFOLIO RESPONSIBILITY: ENVIRONMENT AND STRATEGIC HOUSING

CABINET

24 JANUARY 2008

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### Wards Affected

Countywide.

### Purpose

To receive and adopt a Supplementary Planning Document (SPD) setting out the Council's policy on the use of planning obligations, following statutory public consultation.

### Key Decision

This is not a key decision.

### Recommendations

#### THAT

- (a) the Planning Obligations Supplementary Planning Document and associated Sustainability Appraisal be agreed and adopted; and
- (b) appropriate amendments be made to the Planning Committee Scheme of Delegation to Officers and that a Section 106 Monitoring Officer be recruited, following which the Supplementary Planning Document be brought into effect.

### Reasons

The SPD forms part of the Council's emerging Local Development Framework. The statutory preparation process has incorporated two periods of consultation and final approval is now required. Amendments are required to delegation arrangements prior to the SPD being brought into effect.

### Considerations

1. Within the Local Development Framework, Supplementary Planning Documents (SPD) are produced to expand on and provide additional information and guidance in support of Development Plan Documents. The Herefordshire Unitary Development Plan (UDP) has the status of a Development Plan Document and its policies have been "saved" as part of the Council's new Local Development Framework for a minimum three-year period. Policies S1 and DR5 of the UDP refer to planning obligations.
2. The aims of the SPD are to:

---

Further information on the subject of this report is available from  
David Nicholson, Forward Planning Manager on 01432 261952

- Provide as much certainty as possible to landowners, prospective developers and other interested parties;
  - Ensure a uniform application of policy;
  - Ensure the process is fair and transparent;
  - Enable developers to have a 'one stop shop' approach to establishing likely contributions expected; and
  - Facilitate a speedier response from the authority to development proposals.
3. The SPD has been drawn up taking into account an initial consultation and information gathering exercise, including selected Parish Councils and a number of interested organisations and stakeholders. Formal consultation on the draft document was undertaken in March/April.
4. The comments received in relation to the specific questions raised in the formal consultation are summarised in general terms in the table below, with an explanation as to how they have been addressed in the final SPD. All written comments have been summarised, recorded and responded to in a full Consultation Statement. The Consultation Statement (copy available on request from the Committee Manager (Executive)) will be published with the adopted SPD and accompanying Sustainability Appraisal.

<b>Council's Consultation Question</b>	<b>General response</b>	<b>How addressed in SPD</b>
1. Is our policy of publicising the types of contributions that will be sought and quantifying them as far as possible the right approach?	Support.	No change.
2. Does the SPD provide sufficiently clear guidance on what developer contributions we will seek?	Agreement. Some concern that summary table was confusing. "Scheme of Works" referred to needs explaining.	Summary Table 2 revised. "Scheme of Works" explained further in Para 1.7.4. "Developer Guide" to be prepared once SPD adopted.
3. Are all the areas for which we are seeking developer contributions appropriate?	Appropriate, although concern expressed that contributions for education, waste and community services do not relate to policy DR5 of the UDP and therefore contrary to PPS12 Para 2.43.	Provision of community services, education, recycling etc. constitute "community benefits" referred to in Policy DR5. No changes to these. However changes made to delete contributions to Training and Employment.

<b>Council's Consultation Question</b>	<b>General response</b>	<b>How addressed in SPD</b>
4. Are there other areas for which we should seek contributions?	Other topics raised such as renewable energy, sewerage/water disposal and cemeteries/allotments.	No change to SPD regarding the issue of renewable energy. It was considered but determined that this issue would be best covered by a new overarching policy in the forthcoming Core Strategy rather than in an SPD based on the existing UDP. Further text has been added regarding the issues of water/sewerage disposal, cemeteries and allotments.
5. Are the thresholds for contributions set at the right level?	<p>Varying response that threshold levels could detrimentally affect viability of smaller scale housing and employment proposals and detrimentally affect the economy.</p> <p>Objections received that new provision of affordable housing either solely or as part of larger schemes (as opposed to rural exception sites) should not have to contribute to other community facilities i.e. open space, education, community services etc</p> <p>Threshold for housing is too low – too onerous and will lead to delay in determining planning applications and significant impact on Council resources.</p>	Contributions towards training and development for business removed. Contributions from employment generating uses scaled down with more use specific thresholds introduced. Housing thresholds for contributions remain unchanged, but amendments made to calculations for transport, open space and education – see relevant sections. With regard to requiring further contributions from affordable housing, given commitment to providing additional affordable housing in the County and fact that those in local need occupy affordable housing, requirement for further contributions have been waived. However, most new market housing will impact on the community in some way and should therefore contribute towards making that development sustainable.
6. Are the formulae for determining contributions appropriate, fair and reasonable? (General – for specific areas, see below)	Varying response – some concern raised that formulae too rigid. A number of objections to the 2% monitoring fee were received.	No change to fees but ceiling introduced. It is relevant and appropriate to charge in relation to complying with the requirements of Circular 5/05 for accurate monitoring and review of the processing, spending and reporting of planning obligations in Herefordshire, for which a new member of staff will need to be appointed.
Transport	Objections that methodology used does not reflect rural nature of shire county.	Transport section revised significantly to take on board rural-urban differences.

<b>Council's Consultation Question</b>	<b>General response</b>	<b>How addressed in SPD</b>
Affordable Housing	Various specific objections to wording.	Addressed in Affordable Housing Section of the SPD.
Community Services	Objections that requirements for contributions towards community services e.g. libraries is not specifically referred to in UDP policy and therefore does not comply with PPS12.	Provision of library services, community halls, health and emergency services etc are considered to constitute community benefits, which directly relate to Policy DR5 of the UDP. No change.
Education	Objections that education section not transparent in assessing need for contributions. Should be reference in SPD to school capacity as basis for assessing need.	Education contributions reviewed to take on board Herefordshire-specific research. Reference to capacity of existing schools now made.
Employment and Training	Objections that asking for contributions from new proposals for employment generating uses will deter economic development in the County.	Employment -generating use contributions scaled down to reduce any possible detrimental impact on economic performance and to encourage urban/rural regeneration.
Open Space	Objections to methodology in using land acquisition and provision costs in off-site open space contributions calculations where enhancement only of existing open space is proposed. Objections to 20-year cost of maintenance.	Methodology for calculation revised to refer to contributions per dwelling size using average persons per dwelling statistics. Maintenance costs reduced to 15 years in line with other local authorities.
Town Centres	Objections to 1% for Art. Need to recognise that some major ESG developments will already be providing significant infrastructure. Objections to commercial developments making contributions to community/recreational facilities. Objections to all housing making contributions to public realm improvements in town centre.	No change to SPD in respect of contributions to Art as this is an example of policy DR5 requirement. Agree clarification of requirements to major ESG proposals. Amendments to make clear that only certain commercial developments are to make contributions to open space. Contributions from housing to public realm will need to satisfy tests of reasonableness.
Waste Reduction	Objections that requirements for contributions towards recycling and waste are not specifically referred to in UDP policy and therefore do not comply with PPS12.	Provision of recycling and waste facilities is considered to constitute community benefit, which directly relate to Policy DR5 of the UDP. No change.

<b>Council's Consultation Question</b>	<b>General response</b>	<b>How addressed in SPD</b>
7. Can we simplify and improve the presentation of this SPD, to make it more accessible to people not directly involved in the planning system?	Some concern that SPD too complicated and difficult for members of the public to interpret.	Executive summary redrafted. A separate developer/householder friendly leaflet is to be produced for distribution to applicants.

5. Copies of the final SPD and Sustainability Appraisal are appended as Appendix 1 and 2 respectively. The SPD has been drafted in three parts and includes an executive summary.
  - Part 1: Context – covering obligation types, priorities, policy context and community involvement.
  - Part 2: Code of Practice – defining the Council's approach and procedure for negotiating, preparing and completing obligations, including monitoring and management.
  - Part 3: Community Infrastructure – sets out the obligation areas, thresholds and tariffs where appropriate and justified.
  
6. All statutory procedures set out in the relevant regulations regarding the preparation and consultation arrangements for an SPD have been complied with. The comments received from both the initial consultation and the draft version have been fully considered in making the SPD a more informed and inclusive document.
  
7. The main changes, summarised in the table above, reflect the Council's commitment to the provision of affordable housing; urban and rural regeneration proposals, particularly employment generating proposals from B1 (Business), B2 (General industrial) and B8 (Storage or distribution) uses; and recognition of the commitment to sustainable development. Once adopted, the document will make clear the subject areas for planning obligations required from current UDP policies and in particular policy DR5 Development Requirements. The document will need to be kept under review and is expected to need future change to reflect new and emerging planning documents arising from the Local Development Framework. Where formulae have been used to determine standard charges, the costs applied will need regular review to ensure that the cost price index is maintained.
  
8. Reference is made in the table to the requirement arising for a Section 106 Monitoring Officer not only to ensure transparency of documentation and to help audit the Council's arrangements for planning obligations, but also to ensure demonstrable tracking of obligations so that they are secured with monies and benefits accrued, spent and delivered. A further role for the Officer will be to co-ordinate the Programme of Works - programmes and schemes over a five year rolling period for which developer contributions will be sought. It is envisaged that the Officer will most appropriately be based in Planning Services, reflecting the role of that Service in negotiating and co-ordinating service requirements in respect of individual development proposals. The post will need to work effectively across the Council and to that end should report direct to the Head of Service and have the ability to link in to corporate asset management and capital monitoring groups.

9. The Council will need to review its current procedures for agreeing obligations through the planning application process. The Planning Committee scheme of delegation to officers restricts the extent to which planning applications with an associated obligation are delegated. The numbers of applications subject to an obligation is expected to increase as a result of the thresholds in the SPD. Under the current scheme, this would lead to relatively modest proposals being brought to Committee which would otherwise be determined by officers. To avoid adverse impacts on application handling times, it is suggested that the scheme of delegation be amended to incorporate reference to the SPD. Planning applications with an obligation which in the opinion of the relevant officer accorded with the provisions of the SPD could then be determined under delegated powers in the ordinary way. There would be no other change to the provisions under which applications are reported to Committee. The SPD would not be brought into effect until these amendments had been made, being applied to planning applications received from that point.
10. Where applications subject to Section 106 agreements are dealt with under delegated powers it may be appropriate to include periodic reports for information to the Planning Committee or Area Sub-Committees in much the same way as is done with planning appeals.
11. The SPD will assist in pre-application discussions and will provide a transparent and accountable procedure by which planning obligations are negotiated and secured for development within the Council. When introduced, it will be a material consideration in the determination of planning applications where contributions are sought.

## **Financial implications**

Adoption of the SPD is expected to enhance the ability of the Council to secure appropriate benefits through planning obligations by setting a clear framework for the circumstances in which such benefits will be sought and thereby offer a clear and consistent approach to maximise the benefits of planning obligations for local communities. Appointment of a monitoring officer with a corporate role will help to ensure that planning obligation agreements are implemented effectively and that the resources generated are allocated in accordance with corporate priorities, thereby improving value for money. It is anticipated that the 2% monitoring fee will generate enough income to pay for this post.

## **Risk Management**

It is important that the relevant statutory procedures are followed in preparing the SPD. The Council's intention to prepare and adopt the SPD is set out in the Local Development Scheme, with earlier stages having been completed. There is a reputational risk if the SPD is not adopted to fulfil the Scheme programme.

## **Alternative Options**

Not to prepare the SPD.

## **Consultees**

Pre-draft consultation as detailed in the Consultation Statement.

Member Seminar November 2006

Planning Committee January 2007 and January 2008.

The six-week formal consultation process on the draft SPD took place between 1 March 2007 and 12 April 2007.





## Planning Obligations



January 2008

	<b>Contents</b>	<b>Page</b>
	<b>Summary for Applicants/Developers</b>	<b>2</b>
<b>Part 1</b>	<b>Context</b>	<b>6</b>
1.1	Purpose of Supplementary Planning Document	6
1.2	Consultation	6
1.3	Definitions and Purpose of Planning Obligations	7
1.4	Types and Use of Planning Obligations	7
1.5	Grampian Conditions	8
1.6	Planning Policy Context	8
1.7	Council Priorities	9
1.8	Community Involvement	10
1.9	Sustainability Appraisal	10
<b>Part 2</b>	<b>Code Of Practice</b>	<b>11</b>
2.1	The Council's Approach	11
2.2	Procedure for Negotiating Planning Obligations	11
2.3	Monitoring	13
2.4	Development Viability	13
2.5	Management	13
<b>Part 3</b>	<b>Community Infrastructure</b>	<b>15</b>
3.1	Accessibility, Transport and Movement	15
3.2	Affordable Housing	20
3.3	Biodiversity	24
3.4	Community Services	26
3.5	Education Facilities	29
3.6	Flood Risk Management, Water Services and Pollution Control	32
3.7	Heritage and Archaeology	33
3.8	Landscape	34
3.9	Open Space, Sports and Recreation Facilities	35
3.10	Town Centres, Community Safety and Public Realm	40
3.11	Waste Reduction and Recycling	43
	<b>Appendices</b>	<b>44</b>
1	UDP Policies	44
2	Average Occupancy per dwelling	45
3	Employee/Floorspace Ratios	46
4	Costs of Providing CCTV	47
	<b>Figures</b>	
S1	Thresholds for Planning Obligations	2
S2	Summary Table of Planning Obligations	5
1	Procedure for Negotiating, Preparing and Completing a Planning Obligation	14
2	Transport Contributions	18
3	Transport Accessibility Zones	19
4	Off-site Provision for Affordable Housing	23
5	Library Services Contributions	28
6	Education Contributions per House Type	31
7	Calculation for Contribution towards Sports Facilities	35
8	Current Thresholds for Contributions towards Open space	36
9	Calculation for residential contributions towards off-site open space provision/improvement	38
10	Contributions towards Open Space per dwelling	38
11	Calculation for Contributions towards Open Space from Business Development	39
12	Calculation for Provision of Recycling Facilities	43

# Summary

## 1 Introduction

The Supplementary Planning Document (SPD) on planning obligations provides advice to developers and applicants for planning permission on the use of planning obligations in the planning application process in Herefordshire. It specifically provides guidance on how the Council will implement Herefordshire Unitary Development Plan (UDP) Policy DR5 on Planning Obligations and identifies the types of community infrastructure where developer contributions will be sought as part of a proposed development. Appendix 1 of the document contains a list of other specific UDP policies, which also relate to planning obligations. The SPD will form the basis for pre-application discussions and negotiation when determining planning applications.

## 2 Planning Obligations

Planning obligations, sometimes called “Section 106 Agreements” are legally binding agreements entered into between a local authority and a developer and are an established and valuable way of bringing development in line with the objectives of sustainable development as articulated through relevant local, regional and national planning policies. Planning conditions may also be used to help deliver sustainable developments, for instance, which embrace enhanced energy and environmental standards. Part 1 of the SPD sets out the policy context of planning obligations and explains what they are and the purpose of this document. Part 2 explains the Council’s overall approach to dealing with planning obligations and securing developer contributions. Part 3 of this document sets out the different types of community infrastructure or policy areas that provide further clarity for negotiations on planning obligations, or in the preparation of development briefs and area action plans.

3 Any new development may require mitigation to make it acceptable. Such mitigation could be the subject of an obligation involving a contribution. The Council have deemed it necessary for contributions to be sought from all additional new residential units (unless exceptions apply) and industrial / commercial developments (including retail) above certain size thresholds and where a need is identified. Figure S1 below lists the types of development most commonly expected to make a contribution and the types of community infrastructure and facilities affected. The provision of affordable housing either through UDP Policy H9 or Policy H10 (rural exception sites) is excluded from developer contributions in this policy document.

**Figure S1 - Contributions for different types of development**

Development Type	Transport	Affordable Housing	Community Services	Education Facilities	Open Space/Sport	Town centres	Waste	Bio-diversity	Landscape
Residential (1 or more dwellings including flats)	√	√ <sup>2</sup>	√	√	√	√	√	√	√
Retail (A1)	√				√	√		√	√
Financial and professional Services (A2)	√				√	√		√	√
Offices (B1)	√				√	√		√	√
Industrial (B1, B2)	√							√	√
Warehousing/Storage (B8)	√							√	√

1.Note: this table is not comprehensive and other contributions may apply.

2.Applies to residential schemes of 6 or more dwellings in Kington and Main Villages and 15 or more units in Hereford & Market Towns (except Kington) as per UDP policy H9.

- 4 On site affordable housing, open space, community facilities and some transport infrastructure should normally be provided as part of any new, particularly larger, development and will be made a condition (or agreement) of any planning permission. In some cases, however, off-site provision or a financial contribution towards these facilities/infrastructure may be more appropriate and will form an agreement of the permission. However, for smaller developments, which will have a cumulative impact, it will be more cost effective to make a single improvement after a number of such developments have been carried out. Therefore, where appropriate, a fund will be created for the pooling of financial contributions. They will be ring-fenced to the programmes and schemes identified in the relevant planning agreements. In the unlikely event that financial contributions secured from developers cannot be spent within the timescale provided for in the agreement, the money will be refunded.
- 5 The Council will seek to ensure that where off-site provision of a facility is required there is a functional or geographical relationship with the development proposed. To assist in this process it is proposed to prepare a list of programmes and schemes – a “Programme of Works” for the County covering a five-year period for which developer contributions will be sought. The document will relate to the objectives set out in the Community Strategy and be reviewed annually to ensure it remains up to date.
- 6 Circular 05/2005 states that ‘local authorities are encouraged to employ formulae and standard charges where appropriate, as part of their framework for negotiating and securing planning obligations.’ The Circular recommends that the levels for such charges be published ‘in advance in a public document’. Figure S2 at the end of this summary provides a quick reference tool for applicants and developers of the contributions expected from particular types of development and the formulae and/or standard charges, which will apply to assess a contribution. More information on the policy justification, thresholds and, where appropriate, the formulae used to calculate the appropriate level of contribution for the various types of community infrastructure, are set out in Part 3 of the SPD. Not all types of contribution are included in this summary; others may apply on a site-by-site basis e.g. contributions towards biodiversity or landscaping. Where formulae have been used to determine standard charges, the costs applied in each formula will be kept under review and periodically adjusted to ensure that the cost price index is maintained.
- 7 The contributions described are those the Council would expect to seek from typical forms of development. Applicants are advised to discuss the potential for planning obligations with Council officers at the earliest possible stage in preparing their development proposals. Negotiations for the purchase of land should be undertaken on the basis that any developer contributions which may be sought can only be finally determined through the planning application process.
- 8 **Negotiating Planning Obligations**

In determining planning applications, the Council will have regard to government guidance as well as to local planning policies. It will consider whether a planning obligation is necessary or whether the use of planning conditions, attached to the planning permission, are more appropriate. It will also consider, in accordance with Circular 5/05, whether a planning obligation is:

  - relevant to planning;
  - necessary to make the proposed development acceptable in planning terms;
  - directly related to the proposed development;
  - fairly and reasonably related in scale and kind to the proposed development; and
  - reasonable in all other respects.
- 9 The Council’s approach to seeking developer contributions is set out in a clear process, in Figure 1 in the main document below, which ensures that the negotiation of contributions is transparent and efficient for both the applicant, the authority and any other interested parties.
- 10 Drafting of planning obligations will be undertaken by the Council’s solicitors. In order to ensure that agreements are dealt with quickly and efficiently, the developer should provide, at the same time as the planning application is submitted, evidence of title to the land, a draft heads of terms for the agreement and a solicitor’s undertaking to pay the Council’s reasonable legal costs whether or not the matter proceeds to completion. Developers should also inform the Council immediately of any

change in ownership of the application site, as failure to do so can lead to delays in determining the application.

- 11 Later in the process, agreed heads of terms for the agreements (including when they will be triggered and a time frame for completion of the agreement) will be set out in the Planning Committee report and placed on Part 1 of the Statutory Register. This process helps to ensure a speedy completion of the agreement or undertaking following the Committee resolution.
- 12 If a developer considers that the level of obligations would render their proposal unviable, the Council will expect the detailed finances of the proposal to be shared with the Council in a financial appraisal. For the Council to consider such an argument, it will be essential that the developer shares information substantiating this on an “open book” basis. Any deviation from the standard obligations will need to be an unusual exception and the developer will be required to demonstrate the exceptional circumstances that give rise to the case made. If the Council agrees that a scheme cannot reasonably afford to meet all the normal requirements, these may be prioritised through negotiation with the developer and consultation with other parties, subject to the scheme being acceptable in all other respects. In determining the priority of contributions, the Council will have specific regard to the objectives of the Community Strategy and the various schemes/programmes to implement those objectives (see Para 5 above).
- 13 **Monitoring Planning Obligations**  
The Council (through the appointment of a monitoring officer) will track compliance with each provision contained in a legal agreement as a development proceeds to ensure that all service departments are spending financial contributions and completing non-financial obligations in accordance with the terms of agreements. In order to provide this service, the Council will levy an administration charge on each legal agreement equivalent to 2% of the value of the contribution, unless agreed otherwise with the applicant in circumstances where the level of financial contribution exceeds £100,000. This will be in addition to the normal costs and any external specialist advice costs required for processing and completing the legal agreement.

**Figure S2 – Summary of Developer Contributions for Residential (1 or more dwellings) and Business Development**

	<b>Community Infrastructure</b>	<b>Contribution (£)</b>	<b>Total Contribution</b>
<b>Dwellings</b>			
<b>1 bed dwelling</b>	Transport *	1465-2092	<b>£2,776 – 3,403</b>
	Affordable Housing**	Up to 35% on site	
	Education (where there is no capacity in local school)	-	
	Open space***	1071	
	Library Facilities	120	
	Recycling and Refuse	120	
<b>2 bed flat</b>	Transport *	1,465 – 2,092	<b>£6,677- 7,304</b>
	Affordable Housing**	Up to 35% on site	
	Education (where there is no capacity in local school)	2,005	
	Open space***	2,941	
	Library facilities	146	
	Recycling and Refuse	120	
<b>2/3 bed dwelling</b>	Transport*	1,750 – 3,686	<b>£9,578 – 11,566</b>
	Affordable Housing**	Up to 35% on site	
	Education (where there is no capacity in local school)	3,584	
	Open space***	3,978	
	Library Facilities	146-198	
	Recycling and Refuse	120	
<b>4+ bed dwelling</b>	Transport*	3,440 – 4,915	<b>£15,130 – 16,605</b>
	Affordable Housing**	Up to 35% on site	
	Education (where there is no capacity in local school)	6,485	
	Open space***	4,844	
	Library Facilities	241	
	Recycling and Refuse	120	
<b>Businesses</b>			
<b>Retail (A1-5) per 100sqm (except discount supermarkets)</b>	Transport >500sqm threshold*	5,052-39,671	<b>£6,582 – 41,201</b>
	Open space***	1,530	
	Town Centres/Public Realm	Direct improvements	
<b>Offices (B1) per 100sqm</b>	Transport*	6,087-11,178	<b>£7,362 – 12,453</b>
	Open space***(> 500sqm threshold)	1,275	
	Town Centres/Public Realm	Direct improvements	
<b>Industrial (B1/B2) per 100sqm</b>	Transport*	2,369-3,385	<b>£2,369- 3,385</b>
<b>Warehousing/Storage (B8) per 100sqm</b>	Transport*	1,310-1,871	<b>£1,310- 1,871</b>

**Notes**

\* Transport contributions vary according to accessibility zones - see section 3.1

\*\* Where 15 or more dwellings are proposed in Hereford and the Market Towns (except Kington) or 6 or more dwellings are proposed in the Main Villages (including Kington)

\*\*\* Open space contributions exclude any contribution towards sports facilities using the Sport England calculator

It should also be noted that the Council's actual legal costs of preparing agreements along with a cost for processing and monitoring them (2% of the total value of the contributions required) will also be expected.

Floor areas and numbers of dwellings are based on net additional amount created.

## Part 1 – Context

### 1.1 Purpose of Supplementary Planning Document

1.1.1 Supplementary Planning Documents (SPD) provide more detailed planning guidance to supplement the policies of the development plan and are a material consideration in the determination of planning applications.

1.1.2 The aim of this SPD is to:

- Provide as much certainty as possible to landowners, prospective developers and other interested parties;
- Ensure a uniform application of policy;
- Ensure the process is fair and transparent;
- Enable developers to have a ‘one stop shop’ approach to establishing likely contributions expected; and
- Facilitate a speedier response from the authority to development proposals.

1.1.3 The purpose of this document is to make clear to all interested parties the Council’s policy on planning obligations – it supports and amplifies Policies S1 and DR5 of the UDP. This part of the document sets out what planning obligations are and their policy context. Part 2 details the Council’s approach in using planning obligations and outlines the process for their negotiation, monitoring and review.

1.1.4 Part 3 of the document sets out different types of community infrastructure or policy areas that provide further clarity for negotiations on planning obligations, or in the preparation of development briefs and area action plans. “Community Infrastructure” is the term used for the purpose of this SPD to cover all the physical, environmental and social aspects required to support a community on a daily and long-term basis. Planning obligations are used when a proposal that would have an unacceptable impact on community infrastructure could be overcome by the use of a financial contribution or “in-kind” benefit. The types of community infrastructure include:

<b>Community Infrastructure</b>
Accessibility, Transport and Movement
Affordable Housing
Biodiversity
Community Services
Education Facilities
Flood Risk Management, Water Services and Pollution Control
Heritage and Archaeology
Landscape
Open Space, Sports and Recreation Facilities
Town Centres, Community Safety and Public Realm
Waste Reduction and Recycling

1.1.5 This document will therefore assist in pre-application discussions and will provide a transparent and accountable procedure by which planning obligations are negotiated and secured for development.

### 1.2 Consultation

1.2.1 This SPD has been the subject of extensive consultation in compliance with the Town and Country Planning (Local Development) (England) Regulations 2004. The processes undertaken and responses to this consultation are described in a separate “Consultation Statement” which can be found on the Council’s website. The responses received to the consultation have shaped the final version of this document, specifically a greater focus on the priority of facilitating more affordable, local need housing provision in the County and the need to promote Herefordshire’s business economy (with a consequent relaxation in contributions in both instances).

## 1.3 Definitions and Purpose of Planning Obligations

### 1.3.1 Definition

A planning obligation is a legally binding agreement between the local planning authority and a developer (and the landowner where the developer does not own the land) to use land in a specified way, or to restrict the development or use of the land, or to meet costs in connection with the development to enable it to become acceptable in planning terms. Planning obligations can be provided by developers “in kind” (where the developer builds or provides directly the matters necessary to fulfil the obligations), by means of a financial payment, or in some cases a combination of both. Planning obligations are enforceable by the local planning authority and are registered as local land charges.

1.3.2 Planning obligations are normally entered into under Section 106 of the Town and Country Planning Act 1990 (as amended by the Planning and Compensation Act 1991) and Section 299A of the Act where planning obligations relate to Crown or Duchy Land. Financial contributions towards the carrying out of highway improvements may also be secured under Section 278 of the Highways Act 1980.

### 1.3.3 Purpose

Planning obligations are the means by which a local planning authority can secure contributions, improvements or mitigation works to offset any adverse impact of new development. Whilst most new development is necessary and provides direct benefits for the communities to which they relate i.e. new and improved housing, shops or employment provision, it can sometimes place additional burdens on existing services and infrastructure as well as have adverse impacts on the local natural environment. For example, residential development can increase demand for new school places and community facilities and add to the number of people using open space and recreation facilities. New commercial development will increase the number of people travelling in and around an area such as Hereford and will therefore add to congestion and pressure on public transport, car parking, air quality and public safety.

1.3.4 Therefore, it is the overriding objective of this SPD that, in the interests of sustainable development, it is reasonable to expect developers to contribute towards the financing of new or improved infrastructure directly related to new development proposals. These may include new build development as well as changes of use where planning permission is required. Each change of use case will be considered on its merits and against the Council’s priority of promoting regeneration. Contributions can often be secured on site by means of planning conditions attached to the planning permission, but where conditions cannot be used, improvements can be secured through planning obligations. In this way, the provision of new or additional infrastructure that is necessary to serve new development can be secured, so that planning permission can be granted for new development proposals which accord with the development plan.

## 1.4 Types and Use of Planning Obligations

1.4.1 Planning obligations comprise planning agreements and unilateral undertakings. A **planning agreement** is a legal agreement entered into by the planning authority and the applicant that sets out the form a planning obligation will take. For example, a planning agreement under s106 could set out in detail payments of a financial contribution towards local schools impacted by the development. Planning obligations run with the land and so bind successive landowners. If the applicant (developer) does not own the land then the landowner must also be involved in the planning agreement. Other parties with an interest in the land such as mortgagees must also join in the planning agreement. A standard form of planning agreement has been produced by the Department of Communities and Local Government (DCLG) in conjunction with the Law Society which can be found on their website at [www.communities.gov.uk](http://www.communities.gov.uk). This will also be made available on the Council’s web site.

1.4.2 A **unilateral undertaking** is an undertaking by the applicant offered to the authority to try to overcome obstacles to the grant of planning permission and may be offered at any point in the planning application process. They do not require any agreement by the authority, which therefore may have no involvement in the drafting of the planning obligations. However, local authorities do not have to accept unilateral undertakings offered by the developers if they do not feel they overcome the objections to the granting of planning permission. At appeal against refusal they may



be offered by applicants to overcome the local authority's objections, when it is up to the Planning Inspector to decide its suitability or otherwise. Such obligations may require payment of financial sums for a specific purpose either in a single sum or periodically for an indefinite or specified period. A standard form of a unilateral undertaking is available from the Council's Legal and Democratic Services.

- 1.4.3 Planning obligations can either be negative (preventing or restricting development or the use of land) or positive (requiring specified operations or activities to be carried out on the land). Obligations can be used to **prescribe** the nature of a development (e.g. indicating that a proportion of housing is affordable); or to secure a contribution from a developer to **compensate** for a loss or damage created by a development's impact (e.g. loss of open space); or to **mitigate** a development's impact (e.g. through increased public transport provision). The outcome of all of these uses of planning obligations should be that the proposed development concerned is made to accord with local, regional or national planning policies.

## 1.5 Grampian Conditions

- 1.5.1 Herefordshire Council makes full use of Grampian style conditions in lieu of planning obligations where these are relevant and can speed up decision-making. A Grampian condition is usually applied to link on-site development to actions that lead to delivery of off-site infrastructure. Examples of Grampian conditions include the submission of schemes detailing how school places, transport improvements or health facilities necessitated by the development shall be secured.

## 1.6 Planning Policy Context

### 1.6.1 National context

Government guidance on planning obligations is provided in Circular 05/2005. The Circular gives guidance on the types of obligations that may be acceptable. Local planning authorities are also recommended to publish guidance themselves for potential developers in order that the Council's approach is clear and easy to understand. This information is provided in this document with the aim of providing a fast, predictable, transparent and accountable system. Central government encourages the use of formulae and standard charges where appropriate and the publishing of standard heads of terms, agreements/undertakings or model agreements wherever possible.

- 1.6.2 Circular 05/05 emphasises the need for contributions that are required from a development to meet five stringent tests set. They must be:

- relevant to planning;
- necessary to make the proposed development acceptable in planning terms i.e. required to bring a development in line with the objectives of sustainable development as set out in the UDP. These are the matters which, following consultation with potential developers, the public and other bodies, are agreed to be essential in order for the development to go ahead;
- directly related to the proposed development (there should be a functional or geographical link between the development and the item being provided as part of the developer's contribution);
- fairly and reasonably related in scale and kind to the proposed development (planning obligations should not be used solely to resolve existing deficiencies in infrastructure provision or to secure contributions to the achievement of wider planning objectives that are not necessary to allow consent to be given for a particular development); and
- reasonable in all other respects (unreasonable requirements may be open to awards of costs).

- 1.6.3 These tests are to prevent developers being over-burdened by requests from local authorities as well as preventing a perception that developers may be "buying" planning permissions.

1.6.4 Additionally, there is further guidance on the issue of planning obligations in national policy statements (PPG's and PPS's). These set the context for including appropriate policies in development plans and for negotiating on planning applications. The Department for Communities and Local Government (DCLG) issued Planning Obligations Practice Guidance in July 2006 which can be viewed on their website [www.communities.gov.uk](http://www.communities.gov.uk).

1.6.5 At the time of writing, the government is considering the introduction of a **Community Infrastructure Levy** whereby a proportion of the increase in the land values of a particular site is used to manage the impact of growth in local communities and fund improvements in local infrastructure. If the Community Infrastructure Levy approach is implemented, then this SPD will need to be reviewed.

### 1.6.6 Regional Context

The Regional Spatial Strategy for the West Midlands (RSS) was adopted in 2004 and has Development Plan status. It sets the land use policy direction for the County up to 2021. Policy UR4 (Social Infrastructure) stresses the importance of the role of local authorities in facilitating the co-ordination of land use and investment decisions with improved service delivery. The RSS is currently being reviewed and can be viewed on the website ([www.wmra.gov.uk](http://www.wmra.gov.uk)).

### 1.6.7 Local Context

The Herefordshire Unitary Development Plan strategic policy S2 (Development Requirements) and development criteria policy DR5 (Planning Obligations) set out the circumstances where obligations will be used and the benefits that will be sought in furtherance of the Plan's strategy.

#### ***DR5 Planning obligations***

***To further the strategy of the Plan planning obligations will be sought to achieve community, transport and environmental benefits where these benefits are reasonable, necessary, relevant, and directly, fairly and reasonably related to the proposed development. The circumstances in which such benefits will be sought will be identified in relevant Plan policies and may be further detailed in supplementary planning guidance.***

1.6.8 A number of other UDP policies refer specifically to the use of planning obligations in considering development proposals. These are listed in Appendix 1. The UDP was formally adopted in March 2007. Following changes to the planning system, the Council is now preparing a new spatial plan called a Local Development Framework comprising a Core Strategy document as well as other development plan documents. This SPD will be reviewed accordingly, when the Core Strategy is finalised.

## 1.7 Council Priorities

1.7.1 The government suggests a transparent process for developer contributions based on achieving the policy priorities for a particular area. The Herefordshire Community Strategy (June 2006) is the result of extensive consultation with local communities, local businesses, the cultural community, public sector providers and the voluntary and community sector. The strategy sets out how a range of partnerships can work together to help ensure the overall economic, social and environmental well being of the County.

1.7.2 The Council's Corporate Plan (2006 to 2009) translates the outcomes contained in the Community Strategy into Council "priorities" with targets, indicators and actions. Together, these documents articulate the needs of the community and consideration of the weight to be given to the provision of infrastructure or use of contributions should be linked closely to the Council's top priorities. The Corporate Plan can be seen on the Council's web-site at [www.herefordshire.gov.uk](http://www.herefordshire.gov.uk) and the Community Strategy can be seen on the Herefordshire Partnership web-site at [www.herefordshirepartnership.com](http://www.herefordshirepartnership.com).

1.7.3 The top priorities that specifically relate to land-use planning issues link to the following outcomes in the Herefordshire Community Strategy. Those that are most relevant to this SPD on Planning Obligations are:

- more and better paid employment;
- more adaptable and higher skilled workforce;
- reduced traffic congestion through access to better integrated transport provision;
- reduced health inequalities and promotion of healthy lifestyles;
- children and young people have healthy lifestyles and engage in positive behaviour;
- reduced levels of, and fear of, crime, drugs and anti-social behaviour;
- fewer accidents;
- cleaner, greener communities; and
- people are active in their communities and fewer are disadvantaged.

1.7.4 Although developments will have a wide-ranging impact on a local community, the Council will need to consider whether the degree of impact is so great that permission would not be granted. The Council will identify those matters, which will require prioritisation in a particular location, given the extent and context of a development proposal and the needs of the local community. This will be balanced against the benefits of a proposal e.g. environmental enhancement, conservation or provision of facilities with an overall view taken on the merits of the proposal. A “Programme of Works “ highlighting priority needs in specific areas will be prepared and updated annually by the Council. This will establish the context for the negotiation of benefits. However, contributions towards education, transport, employment, community facilities and affordable housing are almost always necessary in Herefordshire at present.

## 1.8 **Community Involvement in Pre-Application Consultation**

1.8.1 The aim of the Herefordshire Statement of Community Involvement (SCI) (March 2007), is to set out details for greater community involvement in the plan making and development control process. It states that if development proposals fall within certain definitions of significant development and are therefore more likely to require developer contributions, the Council will expect applicants and developers to have engaged the local community at an early stage.

1.8.2 These consultations should include details of prospective developer contributions. This reflects national advice which states that the process of negotiating planning obligations should be conducted as openly as possible and members of the public should be given every reasonable assistance in locating and examining planning obligations which are of interest to them. The SCI can be viewed at [www.herefordshire.gov.uk](http://www.herefordshire.gov.uk).

1.8.3 Where Parish Plans or Village Design Statements are adopted by the Council as further Planning Guidance, they can also be used to inform the Council’s position regarding developer contributions associated with development proposals within the area. This would make contributions in line with the European Union Landscape Convention i.e. “an area, as perceived by people, whose character is the result of the action and interaction of natural and/or human factors”.

## 1.9 **Sustainability Appraisal**

1.9.1 In accordance with government guidance, this SPD has been subject to a Sustainability Appraisal, which can be found at [www.herefordshire.gov.uk](http://www.herefordshire.gov.uk). The Sustainability Appraisal tests the performance of this SPD against a series of environmental, social and economic objectives. These were devised as part of the General Scoping Report of the Sustainability Appraisal of the Herefordshire Local Development Framework which can also be found on the Council’s website.

## Part 2 – A Code of Practice

### 2.1 The Council's Approach

2.2.1 In the context of legislation, government guidance and the UDP, the Council's approach to the negotiation of planning obligations is based on the following **key principles**:

- i. The procedures will be operated in accordance with the fundamental principle that planning permission may not be bought or sold.
- ii. A planning obligation will only be sought when it is material to the planning decision on a proposal and, where a particular planning obligation is required to make a development proposal acceptable, planning permission will not be granted without it.
- iii. A planning obligation will not be sought when a planning condition may be more appropriately used. It is likely that each application will have to be considered on an individual basis. In the following cases however, conditions are generally insufficient and a planning obligation may be used:
  - 1 Where action is required beyond the normal scope of a condition;
  - 2 Where there is a need to facilitate the transfer of land through the use of appropriately worded negative covenants;
  - 3 Where the obligation relates to off-site works and a Grampian style condition is not appropriate; and
  - 4 Where there is a requirement to pay financial contributions.
- iv. A planning obligation will not be sought to redress existing deficiencies or lack of capacity in existing facilities, services or infrastructures (except in respect of open space deficiencies in accordance with Para 33 of PPG17).
- v. The nature of a planning obligation likely to be required will be made known as early as possible in the planning process.
- vi. The overall extent of the planning obligation sought will have regard to what is reasonable in terms of the scale of the development and its impact.
- vii. The acceptability of the development proposal will be decided on the balance of its planning merits, taking into account the planning application and whether the planning obligation, which has been negotiated as a whole, is sufficient to overcome and satisfactorily address any impact arising from that proposal.
- viii. As referred to above, a vital test of proposed planning obligations is that they must be necessary to make a proposal acceptable in land-use planning terms. They should not be sought where the connection does not exist or is too remote.

### 2.2 Procedure for Negotiating a Planning Obligation (See Figure 1)

#### 2.2.1 Pre Application Stage

The planning case officer assigned to the application will direct the applicant during any pre-application discussions to the UDP policies relevant to the proposal and to any relevant supplementary planning guidance/documents, including this SPD on Planning Obligations. Having regard to the guidance contained in this SPD, applicants will also be encouraged to come forward with proposals for planning obligations (agreements/undertakings or conditions) that are relevant and related to their development proposals before submitting a formal proposal in order to speed up the application process.

2.2.2 From 1<sup>st</sup> April 2008 developers will be required to submit draft Heads of Terms of any necessary agreement with their planning application when they first submit it in order for it to be validated. Heads of Terms will include:

- The sums of money, where required for off-site expenditure to meet planning policy objectives;
- A period (usually 10 years) within which the expenditure must take place and/or the essential infrastructure is provided;
- Provisions for repayment of any sums not used within the set time periods;
- Details for the provision of affordable housing (where relevant) including phasing requirements (see Affordable Housing section in Part 3 of this document);
- A commitment to cover the Council's reasonable legal and planning costs in preparing the agreement; and
- The timetable for completing the agreement (which must be done before the permission can be issued).

### 2.2.3 **Application Appraisal Stage**

Once an application is submitted, the negotiation on any potentially appropriate obligations will proceed at the same time as consideration of the planning application, and will include an assessment of whether or not planning conditions will suffice instead of an obligation. This process is without prejudice to the determination of the application. Where there have been no pre-application discussions, the case officer will also direct the applicant to the UDP policies and supplementary planning documents, including this SPD on planning obligations.

2.2.4 Where the need for an agreement or undertaking has been identified, the Heads of Terms must be agreed before the application can be reported to Committee. (Where the Council's constitution allows for agreements to be varied or entered into under delegated powers then the agreements must be finalized before the permission can be issued). Where applications are reported to Committee for determination the Heads of Terms will be included as an appendix to the Committee report. Any negotiations over the Heads of Terms are without prejudice to the final determination of the application by the relevant committee. The key element of the negotiation will be to confirm that the applicant agrees with the matters to be included in the obligation. The case officer will ensure that the nature and scale of matters for inclusion as obligations are identified and will notify Members, Parish Councils and other interested consultees after validation.

### 2.2.5 **Committee**

By the time the proposal is considered by the relevant Committee, the Heads of Terms must be agreed. This process helps ensure a speedy completion of the agreement or undertaking following the Committee resolution. Any recommendation to grant planning permission will be made subject to the completion of a satisfactory legal agreement or undertaking within a specified time period, and will authorise Legal Services to complete the legal agreement or accept the undertaking. The relevant Committee will decide whether to approve the application as set out in the report and whether the proposed obligations are appropriate. If an agreement is required in order to meet planning policy objectives, and or other material planning considerations, but is not signed within the agreed timetable, then the planning application will be regarded as "Deemed Refused" and no further action will be taken on it.

### 2.2.6 **Completing the Legal Agreement or Undertaking**

A legal agreement or undertaking may be drafted prior to the relevant Committee resolution in the above circumstances or following the Committee resolution. The draft obligation will be sent to the applicant's solicitor for comment and any negotiations will be progressed through each party's legal team. The agreement or undertaking will have a unique planning application reference number that will be used on all correspondence and monitoring arrangements for the planning obligations.

2.2.7 Prior to completion of the obligation, the Council's legal team will ensure that all financial and title and other matters are in order. The legal agreement or undertaking will need to be signed by all parties with an interest in the land – as well as the owner this will include mortgagees, tenants and developers with options to purchase, conditional contracts etc. When the legal agreement is completed, the planning case officer will issue the planning permission.

## 2.2.8 **Post Completion**

The Council will register the agreement or undertaking and consents as a local land charge and the applicant may be required to register the agreement or undertaking as a charge against the title to the property at HM Land Registry through his/her solicitor in accordance with the terms of the agreement or undertaking. The Council will also update the statutory registers.

## 2.3 **Monitoring of Planning Obligations**

2.3.1 The S106 monitoring officer, case officer and the legal officer will hold a copy of the completed obligation. The monitoring officer will be the first point of contact for an applicant when making payments or serving notices as required by an agreement. The monitoring officer will then ensure that payments are allocated to the appropriate funds or supplied to the service provider as appropriate and will issue receipts and acknowledgements of compliance where necessary.

2.3.2 The monitoring officer will track compliance with each obligation in the agreement as the development proceeds. All agreements/undertakings will be monitored through the use of a Planning Obligations database.

2.3.3 An Annual Report on planning obligations will be produced detailing the status and use of planning agreements, monies received and spent, works carried out and future priorities. This will form part of the Corporate Plan process within the Council and the Scrutiny Committee will also consider the Report.

2.3.4 The planning obligation database will also refer to the UDP policies used in determining the application. This can then be used for monitoring the policies of the UDP in appraising their effectiveness in working towards sustainable development and referred to in the Annual Monitoring Report.

## 2.4 **Development Viability**

The Council recognises that the impacts of a development that may need to be accompanied by a planning obligation must be weighed together with all other material considerations including any positive benefits of the development, in determining whether planning permission should be granted. Therefore, in exceptional circumstances, the Council may consider that the benefits from a development outweigh the need for mitigation and may waive or reduce contributions. However, it will be for the developer to provide robust evidence, possibly in the form of a financial appraisal, to support their case.

## 2.5 **Management**

### 2.5.1 **Pooled Benefits**

Where appropriate and particularly on small residential schemes, contributions from several developers will be pooled to enable the necessary benefits to be secured. The pooled benefits will still relate to the development from which they were raised. This is consistent with Circular 5/05 paragraph B22. The pooled benefits approach facilitates the realisation of benefits from smaller, cumulative developments as well as being able to effectively manage larger developments on a case-by-case basis. This approach will be particularly relevant to the regeneration of the Edgar Street Grid area in Hereford, Green Infrastructure Strategy and rural communities.

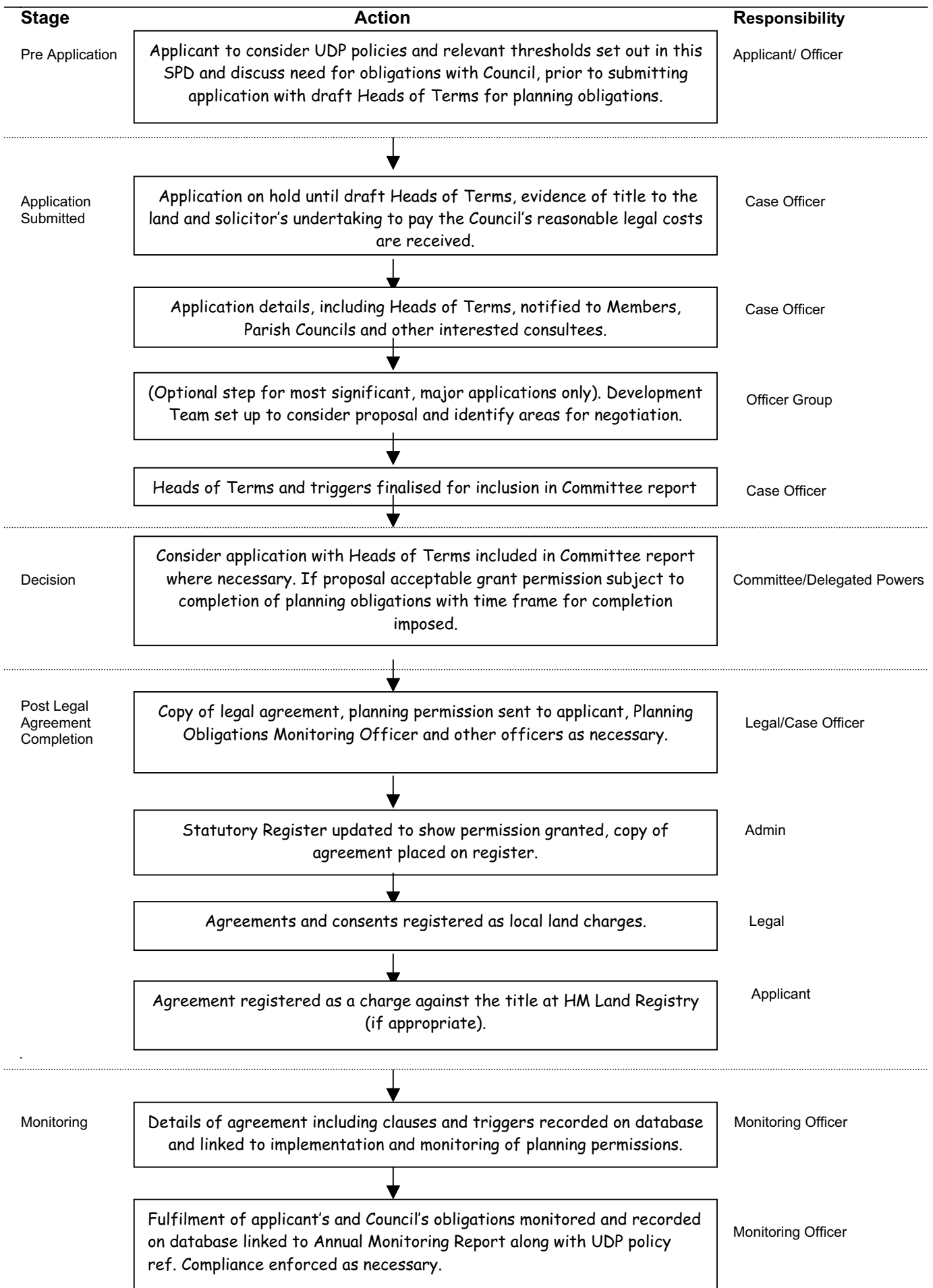
### 2.5.2 **Ring Fenced Funds**

For smaller schemes and where a cash sum is required as part of an obligation, this will be placed in a fund controlled by the organisation responsible for the provision of the service or facility, and reserved for that purpose. This will ensure transparency in the planning obligations process.

### 2.5.3 **Unspent Funds**

In the unlikely event that financial contributions secured from developers cannot be spent within 10 years of the completion of the development or as negotiated to suit the circumstances of the development, the contributions or such unexpended parts will be refunded. Developer's financial contributions will be adjusted for inflation in accordance with Building Costs Information Service (RICS) all in tender price index or such other indices as the Council consider appropriate, calculated from the date of the planning agreement or unilateral undertaking, to the date of payment.

**Figure 1 – Procedure for Negotiating, Preparing and Completing a Planning Obligation**



## Part 3 – Community Infrastructure

### 3.1 Accessibility, Transport and Movement

#### Introduction

3.1.1 On-site provision of sustainable transport infrastructure and appropriate provision for disabled access should be incorporated into overall scheme design for most new development proposals. The quality and effectiveness of this provision will be a consideration in the determination of the planning application. Typically, sustainable transport infrastructure will include provision for cycle parking, pedestrian and cycle routes through the site and public transport waiting facilities. Dependent on the development, specific parking provision may be required for disabled users or residents.

3.1.2 Specific off-site works and contributions to sustainable transport services may also be required to mitigate the direct impact of the development scheme on the transport network. Contributions might be required for:

- Improvements to public transport services;
- passenger waiting facilities;
- improvements to junctions and the provision of traffic lights;
- road widening/passing bays;
- pedestrian and cyclists facilities;
- pedestrian crossings;
- pedestrian and cycle routes and links to existing routes;
- traffic calming schemes; and
- the introduction of street parking restrictions.

Where a travel plan is required, the Council will seek contributions to cover the provision of sustainable travel information to site users and to support the ongoing development of the plan.

3.1.3 In addition to the above, new developments may also have cumulative impacts on the transport infrastructure of the County. This is particularly the case for developments that generate trips into and within Hereford City area, where traffic congestion, severance and poor air quality are significant issues. Where development impacts on these types of issue, the Council will seek contributions towards schemes such as park and ride, general traffic management improvements, public car park improvements and also towards sustainable travel infrastructure, promotional campaigns and literature. Contributions from development towards these schemes will be pooled to secure the future provision of the scheme or promotion activity, in accordance with Circular 05/2005.

#### Policy Justification

3.1.4 Planning Policy Guidance 13 (Transport, March 2001) states that “planning obligations may be used to achieve improvements to public transport, walking and cycling, where such measures would likely influence travel patterns to the site involved, either on their own or as part of a package of measures...” New development should therefore contribute to the improvement and development of a more sustainable and integrated transport system. This may include support for travel plans required as a result of a development proposal, or contributions to conventional public transport services.

3.1.5 Within the Regional Spatial Strategy, Hereford is identified as the key location in the County for future housing and employment growth. Outside of the city, almost the entire County is identified as a Rural Regeneration Zone where sustaining rural communities, tackling rural problems and addressing local needs are the main priorities.

3.1.6 The Council, as Highway Authority, seeks financial contributions where appropriate to promote specific schemes and types of schemes identified in the Local Transport Plan 2 (LTP2). The LTP2, which covers the period up to 2011, sets out as its objectives - delivering accessibility, tackling congestion, making roads safer, and improving air quality. Delivery is by implementation of a



number of measures set out in investment strategies. LTP2 can be viewed on the Council's website. The Herefordshire UDP has been prepared alongside LTP2 and wherever appropriate, obligations will be sought to bring forward proposals and to implement policies in these plans. The UDP policies considered particularly relevant to the development of a S.106 Strategy on transport are detailed in Appendix 1.

### **Assessment of need**

3.1.7 The LTP2 provides a comprehensive assessment of the transport needs of the County over the period 2006/7 to 2010/11 and sets out a longer term strategy for Hereford City and its immediate surrounding rural hinterland. The LTP sets out the following transport strategies to help address the needs of:

- Countywide accessibility strategy;
- Integrated transport strategies for Hereford and for the market towns and rural areas;
- Road safety strategy; and
- Asset management strategy for maintaining the transport network.

3.1.8 Whilst Herefordshire is a mainly rural area and is sparsely populated, it has significant transport issues. These range from severe congestion within Hereford City itself to access to transport for remoter rural communities. Accessibility planning software (Accession) has been used to identify specific areas of need particularly in respect of rural access.

### Transport Issues in Hereford

3.1.9 Transport limitations in Hereford have restricted its growth. Key issues include:

- Regular congestion through the central area and poor air quality;
- Traffic intrusion in residential areas;
- Poor reliability and quality of public transport;
- Poor pedestrian facilities and a limited cycle network reducing the attractiveness of sustainable modes of transport; and
- Impact of the school run.

3.1.10 The LTP2 sets out a package of measures required to release travel capacity needed to accommodate development and regeneration and to allow Hereford to fulfil its role as a sub-regional centre. However, substantial additional funding is required to support these measures and bring forward key initiatives, which will help address these issues.

3.1.11 A further set of major development proposals with significant implications for transport, focus on the Edgar Street Grid in Hereford. The master plan scheme for this area includes improved facilities for walking, cycling and public transport. This is in addition to new road infrastructure and the downgrading of existing roads to reduce severance between the city centre and the grid area.

### Rural Transport Issues

3.1.12 The key transport issues affecting the rural area and market towns focus on providing for access to services, maintaining an extensive road network, reducing road traffic accidents and provision of sustainable transport infrastructure in the market towns. Support for public and community transport is an important element of helping address these needs and reducing the impact of longer distance traffic movements within the County. Consistent cost increases associated with supported public transport services (which cover the majority of services outside Hereford City) have been experienced during recent years and are anticipated to continue to put pressure on the Council's ability to maintain the extent and frequency of the public transport network over the LTP2 period. A greater reliance on community transport may help with more specific provision that addresses social exclusion but will not help address modal shift (i.e. moving away from the use of the private car to more sustainable forms of transport e.g. cycling and walking). Planning contributions will be sought to support the public transport network and community transport and also to provide sustainable transport infrastructure in the market towns. Where appropriate, contributions will also be sought to achieve road safety improvements.

### Transport Assessment

3.1.13 In 2007 the Department for Transport published its updated Guidance on Transport Assessments (TA). The Guidance along with other planning documents such as PPS1 and PPG13 emphasise the value of early discussions between developers and the local authority in relation to TA's. This ensures all parties have a better understanding of, and reach consensus on, the key issues to be addressed in respect of a particular development including the likely range and scale of any mitigation measures required. The Council will require TAs (or Transport Statements) to be provided, in accordance with the guidance, and it is likely that the TA will further inform the level of contributions required for transport measures.

#### **Developments for which Contributions will be sought**

3.1.14 All developments that cause increased trips and have a wider transport impact can be expected to be the subject of an obligation. The main sources of development funding towards transport will come from housing and retail developments whilst employment and other developments will also need to contribute at a level commensurate with the level of movements generated by the development. However, affordable housing provided as part of larger market housing schemes and rural exception sites will be exempt from contributions towards transport. In addition, to assist and promote the rural economy, contributions from developments in accordance with UDP policies E11, E12 and E13 will be excluded.

3.1.15 Many planning applications will be accompanied by a transport assessment, which will be used to assess the application and decide if specific on-site and off-site measures are required to make it acceptable. Where the impacts of a proposed development are not so easily identifiable by on-site or off-site mitigation measures but clearly impact upon the wider transport network, contributions to identified LTP measures and/or UDP policies will be required. The Council will judge each development site on its merits and will seek contributions from any development proposals where transport impacts would require mitigation through the provision of off-site transport infrastructure.

3.1.16 For significant developments sufficient contributions will be required to fully fund complete transport-related schemes. For smaller developments, contributions will generally be pooled in ring-fenced accounts until such time as they can be spent on agreed measures in the LTP2 or other local transport strategies. In accordance with Circular 05/2005, contributions will be spent on schemes that support the contributing development.

#### **Contributions**

##### Formula and Standard Charges

3.1.17 Circular 05/2005 states that 'local authorities are encouraged to employ formulae and standard charges where appropriate, as part of their framework for negotiating and securing planning obligations.' The Circular recommends that the levels for such charges be published 'in advance in a public document'. Figure 2 below provides an example of standard charges for certain types of development including residential, retail and employment. The table is provided as an illustration of the formula, which could be applied to any land use proposed in the County.

3.1.18 The standard charges have been based on a formula which takes into account:

- future development set out in the Unitary Development Plan (equating to around an additional 26,500 daily trips derived from TRICS – Trip Rate Information Computer System);
- shortfall in funding for transport improvements outlined in the LTP2 (amounting to around £12.3M);
- typical trip generation for specific land uses with a weighting to focus on trips generated in the peak hour (derived from TRICS); and
- a weighting to take into account the accessibility of a site (derived from the Accession model for the County). Sites with a better accessibility rating will pay a reduced contribution.

### Location and Accessibility

3.2.19 The Transport Contribution table incorporates an accessibility factor, which reduces the level of contributions sought from developments located in more accessible locations, acknowledging the increased likelihood that these developments have greater potential to encourage sustainable transport. The assessment was carried out using the Council's Accession model for the County. The model maps accessibility in terms of journey times via sustainable modes of walking, cycling and public transport to destinations, which sustain a basic level of services. Three accessibility zones have been identified ranging from high to low accessibility. These are shown on Figure 3 at the end of this section and this will form the basis for applying the standard charges. The public transport factors influencing the level of accessibility experience throughout the County will be reviewed on a regular basis to take into account public transport timetable updates.

#### Worked example

The following worked example helps illustrate how the standard charges have been developed and how they will be applied based on the development of 50x 3-bedroom houses in central Hereford.

Cost/trip (LTP2 shortfall/UDP development trip generation) x 24hr trip generation for 3-bedroom house x peak hour weighting x accessibility weighting (for highly accessible site) x number of units

$$£468 \times 7.73 \times 1.02 \times 0.7 \times 50 = £129,000$$

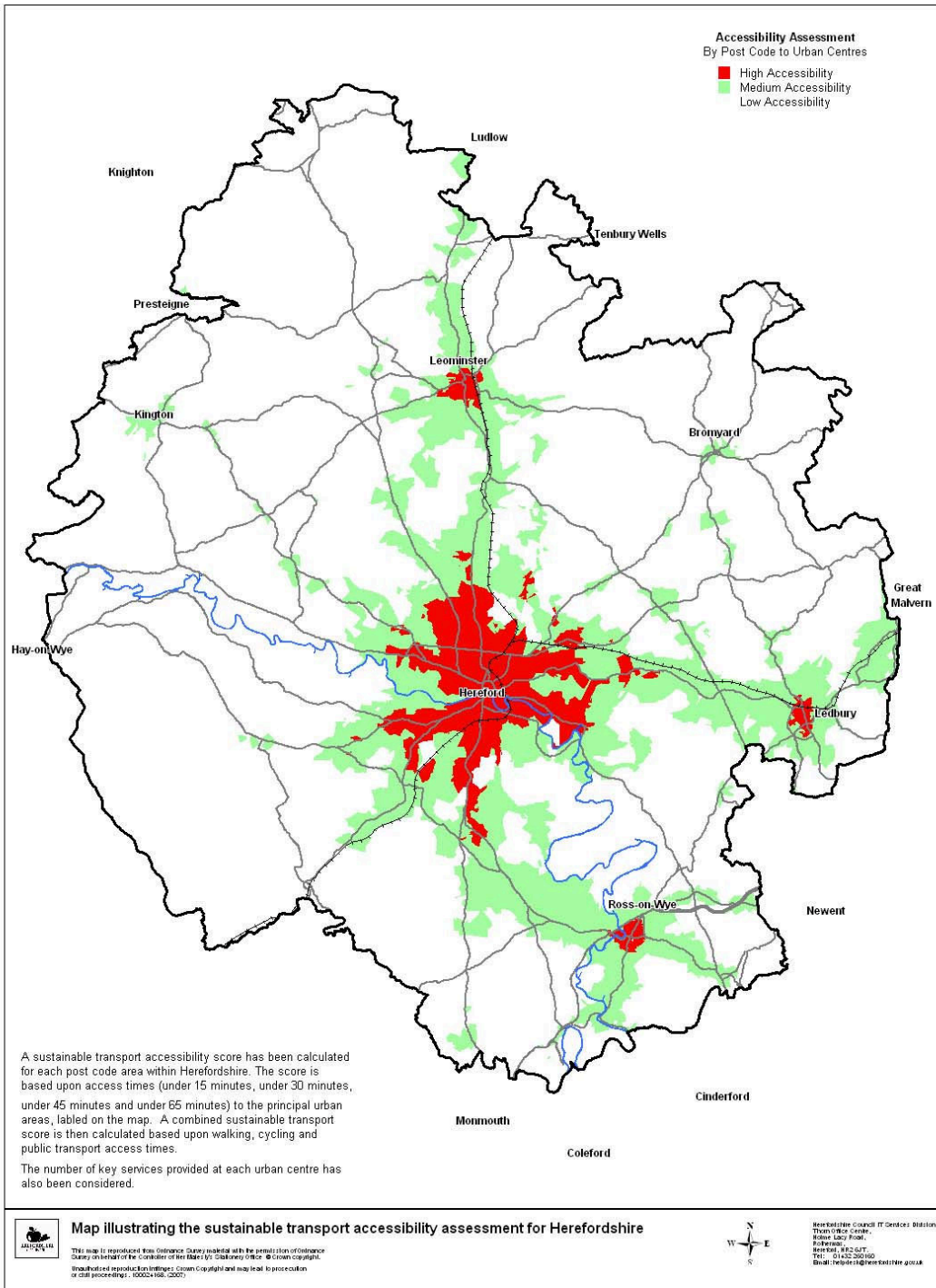
#### Negotiation on Standard Charges

3.2.20 In line with Government guidance, the charges indicated in the Table will not be applied rigidly in all circumstances without regard to the context of an individual application and site. Unique aspects of each application will help form further consideration of these charges. Matters which may influence the use of the standard charges include:

- A travel plan which sets clear targets for reducing car trips with associated contributions if targets are not achieved
- The amount of parking to be provided with a development having regard to the maximum standards set out in the Council's Highways Design Guide for New Developments
- The level of trip generation with the development ascertained through a Transport Assessment

**Figure 2 – Transport Contributions**

Development Type	24-hour weekday total vehicle trip	Accessibility		
		High	Medium	Low
Residential - 4 bed house	10.30	£3,440	£3,932	£4,915
Residential - 3 bed house	7.73	£2,580	£2,949	£3,686
Residential - 2 bed house	5.15	£1,720	£1,966	£2,457
Flat	3.01	£1,465	£1,674	£2,092
B1 (office) per 100m <sup>2</sup>	14.09	£7,825	£8,943	£11,178
B1 (Business Park) per 100m <sup>2</sup>	10.56	£6,087	£6,956	£8,695
B2 per 100m <sup>2</sup>	6.73	£2,369	£2,708	£3,385
B8 per 100m <sup>2</sup>	3.54	£1,310	£1,497	£1,871
Retail >500sqm - Non food superstore per 100m <sup>2</sup>	40.86	£5,052	£5,774	£7,217
Retail >500sqm - Food superstore per 100m <sup>2</sup>	138.15	£27,770	£31,737	£39,671
Retail - Discount Supermarket per 100m <sup>2</sup>	102.33	£8,561	£9,784	£12,229



**Figure 3 – Transport Accessibility Zones**

## **3.2 Affordable Housing**

3.2.1 The Council is strongly committed to the delivery of affordable housing within Herefordshire and will make effective use of its planning powers to secure affordable housing to satisfy local housing requirements.

### **3.2.2 Policy justification**

National government advice on affordable housing has been issued in the form of Planning Policy Statement 3 on Housing (PPS3) and its sister document "Delivering Affordable Housing" (November 2006).

3.2.3 In regional policy terms, Herefordshire falls within the Rural Regeneration Zone identified in Policy RR2 of the West Midlands Regional Spatial Strategy, June 2004, where emphasis will be given ... *"to providing affordable housing to meet local needs, in existing settlements, wherever possible, and making full use of the existing housing stock."* (Policy RR2, part C (iv)).

3.2.4 Locally, policy guidance is set out in the Council's adopted UDP policies H2, H5, H6, H9 and H10, although the whole issue of the provision of affordable housing will be reviewed as part of the preparation of the new Local Development Framework.

### **3.2.5 Assessment of need**

In addition to regional research to support the provision of affordable housing throughout Herefordshire, Planning Services and Strategic Housing Services within the council have worked together to establish need for affordable housing and identify opportunities for provision. The Herefordshire Housing Needs Assessment 2005 and a rolling programme of local research supports the view that there is a significant need to provide affordable housing throughout the County and that the main tenure of housing that appreciably meets housing needs in Herefordshire is the social rented sector delivered through a Registered Social Landlord (RSL). This local need is generated through the situation that average wages in the County are significantly below both the regional and national averages, but average house prices are high compared with elsewhere in the region. Many households will therefore find it difficult to purchase on the open market in Herefordshire.

3.2.6 Supply and demand data, collated by Home Point, a choice based lettings scheme for across Herefordshire, will also be taken into account when determining the types, sizes and tenure mixes for each individual proposed development. Key housing issues and priorities for Herefordshire (set out in the Herefordshire Housing Strategy 2005-2008 which is regularly reviewed and updated) will be reflected in the mix of types, sizes and tenures being requested.

### **3.2.7 Thresholds for contributions**

The proportion of affordable housing will be based on the net developable site area and the total number of units. The net developable site area includes access roads, within the site, private garden space, car parking areas, incidental open space and landscaping and children's play areas. It excludes any major distributor roads, primary schools, open spaces serving a wider area and significant landscape buffer strips.

3.2.8 Policy H9 of the UDP requires affordable housing at an indicative target of 35% of new housing proposals. As this is an indicative target and in view of the evidence outlined in the Housing Needs Assessment 2005, requests for a percentage affordable housing provision of more than 35% may be made in particular situations. The 35% target figure will be reviewed as part of the preparation of the Local Development Framework (LDF) and in the light of Planning Policy Statement 3. Currently, however, UDP Policy H9 and this guidance will apply:

- Where 15 or more houses are proposed in Hereford and the market towns (except Kington) or 6 or more houses are proposed in the main villages (including Kington); or
- To all sites of more than 0.5 hectare in Hereford and the market towns and of more than 0.2 hectare in the main villages and also where the Council reasonably considers that development of a site has been phased, or a site sub-divided or parcelled in order to avoid the application of the affordable housing policy, whether in terms of number of units or site size. In these circumstances the whole site will be assessed; or

- Where the Council reasonably considers that a development scheme has been specifically designed to fall under the threshold or a site's potential is not being fully realised; or
- If having had a scheme approved, a subsequent proposal for additional housing units brings the cumulative total over the threshold.

3.2.9 With outline planning permission, it is appreciated that full details on units etc. may not be known. The Council will, in these cases, seek to secure the percentage of affordable housing as outlined in the appropriate policy with detailed negotiations to be contained in a S106 Agreement and Heads of Terms.

### **3.2.10 Tenure and dwelling type/size/mix**

The Council requires affordable housing to be provided on sites that are large enough to accommodate a reasonable mix of types, sizes and tenure of housing. Discussion with Strategic Housing Services is essential from the earliest stage of pre-application negotiations. The size, type and tenure of affordable units that are provided should reflect the mix that is necessary to support the Council in meeting its highest priority housing needs and provide a balanced variety of housing. In general this means a demand for primarily two and three bedroom units as well as one and four bedroom units. However, site location and scheme design may indicate that a different mix may be appropriate e.g. a town centre site may be more appropriate for predominantly one or two bedroom flats. The local authority will ultimately determine this.

3.2.11 Where an alternative form of tenure other than rented is to be provided the developer must prove to the local authority that such housing will meet the needs of those who cannot afford market housing prevailing in the locality. The properties must be made available to local people in housing need in perpetuity in line with occupancy criteria as used for rural exception sites. The Council will also need to be satisfied that a legal mechanism is in place to ensure an objective assessment has been undertaken justifying that the prospective purchaser is in local need.

### **3.2.12 Involving a Registered Social Landlord (RSL)**

The Council will seek to ensure that any affordable housing produced through the implementation of policy H9 or H10 be offered for ownership and management to registered social landlords that are the Council's preferred partners. This will ensure that the properties will be managed effectively due to a local presence. Nomination rights to the Council will be sought in any negotiations between the developers and the RSL by asking that all affordable housing secured will need to be advertised through the local lettings agency, "Home Point."

3.2.13 The Council would wish to satisfy itself before granting planning permission, that secure arrangements are made to ensure that the benefit of affordable housing for local people will be enjoyed by successive as well as initial occupiers of the property i.e. in perpetuity. This will normally be secured through a planning obligation. Planning obligations will be used to set out a cascade mechanism to ensure that occupiers are always found for affordable housing. An appropriate planning obligation will also normally require that a specified proportion of market housing on a site cannot be occupied until the affordable element has been built, transferred to an RSL on the specified terms and is suitable for occupation.

### **3.2.14 Affordability**

This SPD uses the definition of affordable housing as set out in Planning Policy Statement 3, which excludes low cost market housing. To assess affordability relevant to Herefordshire, both house prices and incomes have been taken into account and certain assumptions, following research with mortgage lenders, have been used to ensure that local households have the ability to access the properties being delivered. House Price data is taken from the Quarterly Economic Report published by the Herefordshire Partnership in conjunction with the Council and this data is derived from statistics received from HM Land Registry, which relates to the term 'market price' as being the average house prices. Figures on Herefordshire earnings are given by ASHE, (Annual Survey of Hours and Earnings), published by the Office of National Statistics annually in November. This provides information on the median gross annual earnings of a full time worker on adult rates in Herefordshire. The assumption is that first-time buyers will obtain a 95% mortgage – this is the assumption used in the report "Affordability and the Intermediate Housing Market" by Steve Wilcox, published by the Joseph Rowntree Foundation in October 2005.

3.2.15 Multipliers for borrowing purposes are taken from the same, above-mentioned report, which reflect current practice. Other assumptions are that:

- For dual earners, the second earner will work part time, earning  $\frac{1}{2}$  full time amount. Census figures for Herefordshire show that for Herefordshire families with dependant children where there are 2 earners, in nearly  $\frac{3}{4}$  of cases the second earner works part time; and
- through natural progression applicants are better able to secure a larger deposit (10%). Also occupancy conditions are assumed as follows:
  - 1 bed dwelling occupancy = single earner with 5% deposit
  - 2 bed dwelling occupancy = dual earner with 5% deposit
  - 3 bed dwelling occupancy = dual earner with 10% deposit

3.2.16 Therefore based on the above assumptions, an affordable purchase price would be calculated as follows:

- 1 bed dwelling = single earner with 5% deposit: median earnings x 3.75/0.95
- 2 bed dwelling = dual earner with 5% deposit: 1.5 x median earnings x 3.25/0.95
- 3 bed dwelling = dual earner with 10% deposit: 1.5 x median earnings x 3.25/0.9

3.2.17 Where properties are provided for rent by an RSL, these rents should not exceed the Housing Corporation Target rents. Where properties are provided for Shared Ownership or New Build Homebuy (to which S/O is now referred), housing costs should not exceed 30% of the gross earnings using the above assumptions. This assumption has derived from research in practices used by other authorities and reference to the Family Expenditure Survey 2000 – 2001 from the Office of National Statistics. Should this figure be exceeded or information is not provided, then housing for rent will be requested. Where house prices continue to rise, the Council will be seeking confirmation of housing costs prior to accepting this form of tenure. "Intermediate housing for rent" is a subject currently being researched by the Council and up to date information should be sought from Strategic Housing Services.

### 3.2.18 **Design considerations**

The design of developments that incorporate affordable housing should be tenure neutral and well integrated with the market housing. This may involve the distribution of small groups of affordable housing across a site, rather than it all being concentrated in one location. The marginalisation of the affordable housing from the remainder of the development should be avoided. All affordable rented, shared ownership and home buy units are to be built to the current Housing Corporation Scheme Development Standards (SDS) and the code of sustainability that apply at the time of the full planning application. In addition, it is expected that the units be developed to Lifetime Homes standards unless there are constraints upon the overall proposed development. Developers will be required to provide full information as to these constraints and each application will be considered on its own merit prior to the discharge of this requirement.

### 3.2.19 **Off-Site Provision and Commuted Payments**

The Council will always seek the provision of affordable housing on site except in very exceptional circumstances. This assists in providing affordable housing on sites in line with national and local policies. In **exceptional** cases, however, the Council may be prepared to enter into agreements to accept affordable housing on alternative sites provided by the developer or through contributions of commuted payments towards provision of land and affordable units elsewhere. This will be where both parties agree that on-site provision of affordable housing will not be viable or practical and it will be difficult to meet the requirements for affordable housing because of special market or site considerations.

- 3.2.20 Where, in exceptional circumstances, the affordable housing units are to be provided by the developer on an alternative identified site, the local planning authority will require details of the scheme as part of the application for the proposal site in the same way as if it were provided on site. Alternative sites should generally be within the vicinity of the development site and equally well located in terms of amenities and facilities. The number of units to be provided off site should equate to the number to be provided had the site been suitable on the application site. It should not be provided on an alternative site that would also require the provision of affordable housing under planning policy.
- 3.2.21 The payment in lieu calculated for off-site provision of affordable housing covers the basic costs associated with construction of the commensurate number of units. In addition the associated costs of site acquisition, servicing project management and professional and legal fees involved in delivering the affordable housing elsewhere will have to be taken into account in calculating the appropriate level of contribution. This is justified as the need to incur these costs has arisen directly through a failure to provide affordable housing on site in the first instance. Applicants will also have to bear the costs of any financial evaluation and development appraisal work required to ascertain the veracity of submitted material in support of payments in lieu. See Figure 3 below.
- 3.2.22 Any commuted sums will normally be required prior to the occupation of the first dwelling on the site and will be ring-fenced to ensure that they are used to provide affordable housing within the County. If the sums have not been used within a period of 10 years, then they will be repaid.

**Figure 4: Commuted Payments for Off-site Provision of Affordable Housing**

**From residential development**

Cost of constructing affordable element of proposed scheme \* + cost of serviced land in the area of the application site + professional/legal fees

\* to SDS and Lifetime Homes standards

**3.2.23 General Information for Applicants**

Applicants for planning permission should be aware that the provision of affordable housing will have an impact on the value of land, as well as implications for housing mix and layout. It is therefore essential that an approach be made to the local authority to establish the affordable housing policies and requirements pertaining to the development; a development brief will be provided by the Strategic Housing Services department outlining the need, requirements and other considerations for each individual proposal.

- 3.2.24 Applicants should also be aware that affordable housing schemes brought forward through planning policies will not be supported by grant funding. Therefore, land that is likely to be subject to such affordable housing should be valued accordingly, as the land upon which the affordable housing is to be sited will effectively reduce the overall value. Only in exceptional circumstances will grant funding be considered and this will be in negotiation with the developer and the council, for e.g. where above level 3 of the code of sustainable homes is exceeded and can be demonstrated prior to approval.



### 3.3 Biodiversity

#### 3.3.1 Policy Justification

The justification for requiring obligations in respect of the natural environment is set out in Circular 05/2005 (Para B16). Planning Policy Statement 9 (PPS9) "Biodiversity and Geological Conservation" sets out the government's objectives for biodiversity conservation.

#### 3.3.2 The key principles established in PPS9 include:

- Enhancing existing features of biodiversity importance;
- Protecting and restoring existing features of value to biodiversity;
- Identifying and delivering an expansion of range of existing habitats and species; and
- Ensuring connectivity of habitats to provide for migration, dispersal and genetic exchange of species.

3.3.3 Policies in the UDP relating to biodiversity are listed in Appendix 1. The Councils Biodiversity SPD provides further in-depth guidance to these policies (see Chapter 6 "Creating new wildlife habitats and enhancing biodiversity on development sites"). The Herefordshire Biodiversity Action Plan (published by the Herefordshire Biodiversity Partnership) is a proven mechanism for focusing resources by means of local partnerships to conserve and enhance national and local biodiversity. The functions of Local BAPs are:-

- To translate national targets for species and habitats into effective action at the local level
- To identify targets for species and habitats important to the local area and reflecting the values of local people
- To stimulate effective local partnerships to ensure programmes for biodiversity conservation are developed and maintained in the long term
- To raise awareness of the need for biodiversity conservation and enhancement in the local context
- To ensure opportunities for conservation and enhancement of biodiversity are promoted, understood and rooted in policies and decisions at the local level
- To provide a basis for monitoring and evaluating local action for biodiversity priorities, at both national and local levels.

3.3.4 Development proposals provide many opportunities for building-in beneficial biodiversity or geological features as part of good design. PPS9 states that when considering proposals, local planning authorities should maximise such opportunities in and around developments using planning obligations where appropriate. The type of measures introduced may be guided by priorities established in the local Herefordshire BAP or the regional biodiversity strategy – "Restoring the Region's Wildlife" 2005.

#### 3.3.5 Thresholds for contributions:

Planning obligations may be required for any development, which would affect a site, area or feature of biodiversity interest and where required works cannot be secured as part of the application or via planning condition. Obligations will also be sought to help create or restore habitat networks. On larger developments, the provision of additional habitat protection works beyond the application site may be secured via a Section 106 Agreement.

### 3.3.6 **How contributions will be calculated and used:**

Each case will be unique and it is therefore inappropriate to provide standard formula for contributions towards biodiversity. However, the Council will ring fence any sums received and ensure that contributions are used to enhance existing sites, create new ones or to offset any adverse impacts of development on biodiversity. Possible contributions may be required for:

- Implementing conservation agreements with management plans to secure the appropriate management of sites of importance for biodiversity;
- Implementing and/or maintaining landscaping schemes beyond the application site area; and/or
- Enhancing existing or creating new sites to benefit amenity.

3.3.7 Herefordshire Biodiversity Partnership and parties other than the Council, such as the Herefordshire Nature Trust or Parish Councils, may carry out the spending of developer contributions arising from planning obligations on biodiversity, landscaping or enhancement schemes.

### **3.4 Community Services**

#### **3.4.1 Policy justification**

The provision of community services such as healthcare, libraries, community centres, halls and youth centres, heritage facilities, and facilities for emergency services contributes to quality of life and is a vital part of a sustainable community. The justification for seeking obligations in respect of community services is set out in Circular 05/2005 (Para B15). In addition, it is a guiding principle of the Community Strategy for Herefordshire (June 2006) that people and businesses in all areas of the County should have access to services and opportunities. Additional population arising from new developments, even from small residential schemes, may increase demand on existing community services in the County. This increase in demand may require refurbishment, redevelopment or even the provision of new facilities to support and extend existing services and, therefore, new developments will be expected to contribute to any necessary facilities or services. Finally, the Council has adopted a number of Parish Plans, which have examined the particular needs of their areas. Where identified, the community needs/requirements will be used to inform any necessary contributions.

#### **3.4.2 Assessment of need**

Community services are provided by a wide variety of organisations and it is inevitable that no single methodology is applicable to identifying the needs generated by new development. However, the following assessment can be made:

- are any community services being lost as a result of a development?
- are any adequate compensatory community services being (re) provided within the development proposal?
- are adequate alternative services available in the vicinity of the site to compensate for any loss?
- are any deficiencies in specific community services in the area compounded by the new development?
- are existing services adequate to cope with increased usage or demand e.g. do local doctor surgeries have spare capacity to take on extra patients?
- are existing services conveniently located and accessible to additional users e.g. new residents, employees or shoppers?
- are there any specific identified community needs in the local area that will be exacerbated by a new development?
- does the scale and nature of development justify the need for completely new or additional services?
- is existing funding inadequate to provide the requisite services generated by increased demands?
- has any community facility been identified within any Parish Plan?

3.4.3 Planning permission will only be granted for development involving the loss of community services if it can be shown that there is no longer a need for the site or building in any form of community use, or that there is an acceptable alternative means of meeting the need. A planning condition or obligation may be sought where replacement services are to be provided to ensure that the new services are completed and made available prior to the occupation of the rest of the development. In addition, provision or improvement of community services should be on site in the case of large-scale development or where there is already a community use on site, unless an alternative off-site location relates better to other services in the area and is easily accessible using sustainable methods of transport.

3.4.4 As a Public Library Authority, Herefordshire Council has a statutory duty to provide a comprehensive, efficient and modern library service to those who live, work or study within its boundaries. The nature of public libraries and their services has evolved substantially in recent years and modern libraries now provide not only traditional book stock but also multimedia and the space and technology for public access to computers, the Internet and associated training. The Disability Discrimination Act has set new standards for physical access and adaptive technology has become a standard requirement. The Department of Culture, Media and Sport sets Public Library Standards, which all authorities are required to meet. The Council currently fails to meet a

number of the standards, and the development of new housing within the County increases the resource strain on the Council's Library Services.

#### 3.4.5 **Thresholds for contributions**

A form of needs assessment on the basis outlined above should normally be undertaken for any proposal that results in the loss of a community service and/or involves a proposal of additional residential units. Contributions will be sought from private residential all development as well as residential homes, student accommodation and sheltered housing, the residents of which may also make use of community services. Affordable housing and rural exception sites will normally be exempt from S106 contributions for community services on the basis that the provision of such housing is a priority for the Council.

3.4.6 In cases (particularly small residential schemes) where developments are too small to provide part or all of the facility/service required, contributions will be pooled with others in a specific ring-fenced community services fund until such time as the required works can be carried out. If the sums have not been used within a period of 10 years, then they will be repaid.

#### 3.4.7 **How contributions will be calculated and used**

The level of contributions sought for local community services will be based on need as well as on the costs of providing such buildings, including equipment and initial maintenance, in accordance with the guidance set out below.

#### 3.4.8 **Community centres, youth centres, halls**

New residential development may be required to contribute towards the provision, enlargement or improvement of community centres, youth centres and halls. However, without a countywide assessment of existing community facilities or evidence of a committed/progressing project, it is difficult to formulate a standard charge for provision. Therefore, until such time as an assessment of need is available, developer contributions towards community halls etc will be made on a case-by-case basis in consultation with Cultural Services.

3.4.9 Where new provision or improvements to local community services are required, particularly for development proposals of more than 200 dwellings, the Council will generally encourage multi-purpose buildings which can provide accommodation for many different community groups and locations for learning (with crèche and computer facilities on site). In certain circumstances, contributions may be channelled to partner organisations in the voluntary or community sectors that have the capacity and capability to manage such resources.

#### 3.4.10 **Calculation for contributions to *Library Services***

The calculation for library contributions will be based on the following information:

- Average number of persons per dwelling (taken from the 2001 Census) –2.32.
- The Herefordshire requirement for net library floorspace per 1000 population is currently 30 sq.m, whilst the International Federation of Library Associations recommends a standard of 42 sq.m.
- The provision cost per m2 of library floor space taken from comparative costs from other local authorities and weighted for Herefordshire.

3.4.11 Any contributions would be subject to index linking as set out elsewhere in this guidance. Contributions secured through planning agreements will be spent on the provision of new library books and/or improvement works to the nearest public library to the development.

#### **Library Services**

For residential development, provision is based on 30sq.m of library space per 1,000 population. Where a financial contribution is made, it is calculated on the basis of construction and equipment cost of £2880 per sq.m. The contribution required is therefore:

Number of persons generated x £86 per person (£2880 x 30/1000)

3.4.12 Using the average occupancy information derived from the 2001 Census detailed in Appendix 2, the above calculation equates to the following contributions in Figure 5 per dwelling size:

**Figure 5: Calculation for Provision of Library Services**

Contribution by Dwelling Size (bedrooms)	Average Occupancy	Total (£)
1	1.4	120
2	1.7	146
2 bed flat	1.7	146
3	2.3	198
4+ beds	2.8	241
All dwellings	2.3	198

**3.4.13 Health and emergency services**

The Council recognises the social benefits of the provision of excellent medical and health facilities to the community. There is a logical link between increases in the population and a corresponding increase in health demands. Where there is an identified need for further medical and health facilities, the Council will seek to ensure that planning permission for new housing is granted only where such services can be provided. In considering whether contributions will be sought towards the provision of health services, the Council will liaise with their NHS Primary Care Trust and other relevant agencies; they will give consideration to relevant health documents such as the Local Delivery Plan.

3.4.14 The needs of children and their carers should be catered for in publicly accessible facilities such as shopping or leisure centres. Crèches, baby changing facilities and feeding places, and supervised play areas can assist carers' access to jobs, training and other facilities. The Council will therefore encourage the provision of childcare facilities in all significant development schemes that are likely to be visited by children and their carers. If facilities cannot be incorporated within a scheme the Council may require contributions to fund alternative facilities elsewhere.

## **3.5 Education Facilities**

### **3.5.1 Policy justification**

The advice in Circular 05/05 is clear that developer contributions should only be sought where the need for additional facilities arises as a consequence of the new development. Moreover, they should be fairly and reasonably related in scale to the proposed development. Therefore developers would be expected to make an appropriate contribution towards enhancing existing education facilities or new provision where there is insufficient school places to support the development.

3.5.2 The UDP seeks to retain existing educational land and buildings unless there is no longer a requirement for the facilities and that alternative, locally based school provision within reasonable walking distance, is available (Policy CF5).

### **3.5.3 Assessment of need**

Herefordshire has an unusually high number of schools (103) in relation to the overall size of the school population (23,000). There are a significant number of small schools, both primary (ages 4-10) and secondary (ages 11-15), many of which are affected by rural isolation and long journey times for pupils attending school. Thirty-five primary schools have fewer than 100 pupils, and five high schools have numbers below 600. The cost of school transport amounts to more than 6% of the education budget. The issue of small schools is a significant factor in the determination of local authority policy and strategy.

3.5.4 It is also the Council's responsibility to develop and support provision of early years education (pre-school) and nursery places. There is a continuing need for additional capacity arising from demographic changes as well as continuing changes in education. Where development falls within an area identified by the Children and Young People's Directorate as being full in terms of early years provision, a contribution towards provision will be sought.

### **3.5.5 Thresholds for contributions**

Education contributions will only be sought from residential developments providing additional units and where the implementation of the development will result in the generation of additional numbers of children in excess of that which local educational facilities on permanent buildings can accommodate in terms of capacity or when measured against qualitative standards set out in the Education Building Bulletins.

### **3.5.6 School capacity**

The threshold for contributions will depend on the size of the development and the number of surplus places at schools serving the development. The Council will refer to data in its School Organisation Plan, which is updated annually. This will indicate the extent to which additional capacity will be required to cater for the additional demand. The size of the development is determined by the net gain in dwellings.

3.5.7 Developments have been divided into bands based on the size of the development. A contribution will be requested if the number of spare places meets the trigger point for that band in at least one-year group at each of the catchment schools.

- For a development of 30 or fewer dwellings, contributions will be sought for schools that have no spare places in at least 1-year group.
- For a development of 31-60 dwellings, contributions will be sought for schools that have 1 or no spare places in at least 1-year group.
- For a development of 61-99 dwellings, contributions will be sought for schools which have 2 or fewer spare places in at least 1-year group
- For developments of 100 or more dwellings, the Council will seek to negotiate with the developer.

### 3.5.8 Pre-school capacity

Section 11 of the Childcare Act 2006 places a duty on Local Authorities to carry out a *Childcare Sufficiency Assessment* leading towards the duty to secure sufficient childcare from April 2008. This puts the onus on Local Authorities to take into account any planned residential development, which may increase population in an area annually. Should this capacity be affected by any proposed developments then the developer would be expected to make Pre-school contributions.

### 3.5.9 Exemptions from educational contributions

Not all residential developments will create a need for school places. Therefore, the following types of residential accommodation will not be subject to education contributions: sheltered housing, rest homes, nursing homes, hostels, student accommodation, holiday homes, one bedroom units or from other specialist housing where it can be demonstrated that the nature of the accommodation will not lead it to being occupied by children. Rural exception sites and affordable housing generally will normally be exempt from S106 contributions for contributions on the basis that they are fulfilling a need for housing for people already in the local community.

### 3.5.10 How contributions will be calculated and used

The additional pressure new developments will place on educational facilities is assessed on a case-by-case basis. Where developer contributions are required, they will be calculated from the number of children likely to be generated by the development and the costs of providing additional facilities/services needed. These components are now explained in turn.

### 3.5.11 Pupil Yield

Where developer contributions are required, they will be calculated from the number of children likely to be generated by the development – the pupil yield. From an analysis of 2001 Census for Herefordshire, the following is an estimate of the pupil yield for each dwelling size:

Size of dwelling>	2+bed flat/maisonette/apartment	2/3 bed house/bungalow	4+ bedroom house/bungalow
Pupil yield per school			
Pre-school	0.011	0.023	0.034
Primary pupil yield	0.093	0.163	0.267
Secondary pupil yield	0.059	0.111	0.228
Post 16 pupil yield	0.005	0.005	0.005

These pupil yield estimates will be calculated alongside the building cost multiplier (see below).

### 3.5.12 Size of dwelling

The contribution will vary according to the number, size and type of dwellings proposed. An analysis based on 2001 Census figures shows that actual number of pupils living in 2+bedroom flats/apartments for example is lower than that in a standard 2+bedroom house. Therefore, the contribution from flats/apartments will be lower. Similarly, a 4+bedroom dwelling is assumed to have a higher number of child occupants and the contribution will be higher.

### 3.5.13 Building Cost Multiplier

This is essentially a cost per pupil for building new accommodation. It is set annually by the Department for Education and Skills (DfES) in August/September, ahead of the financial year and can be found on the DfES website<sup>1</sup>. The figures are based on the weighted average of two separate multipliers, one for totally new schools and one for extensions to existing schools. The figure includes an area adjustment to reflect the actual costs involved in the local area. According to the DfES Building Bulletin 99 (Briefing Framework for Primary School Projects 2<sup>nd</sup> Edition) the overall total net area recommended for nursery places is the same as that for primary school places and hence the reason the same building cost multiplier is applied. In the case of Herefordshire, the

<sup>1</sup> can be found at:

<http://www.teachernet.gov.uk/management/resourcesfinanceandbuilding/schoolbuildings/designguidance/costinformation/>

cost multipliers for the 2006/07 financial year has an area adjustment factor of 0.95 and works out currently as follows\*

DfES Basic building cost multiplier	Herefordshire 2006/7
Primary/nursery £ 10, 372	£ 9,853
Secondary £ 15, 848	£15, 055
Post 16 £ 17, 013	£16,162

\*The figures above will be reviewed and amended according to DfES building cost multiplier rates on an annual basis.

3.5.14 Developer contributions for education will normally be sought for:

- Pre-school places/nursery places
- 5 – 11 years (primary schools)
- 11 - 16 years (compulsory secondary school age)
- 16 + (post statutory school-age, in schools)
- Children with special educational needs beyond the capacity of existing schools in the area. These children have been included in the population figures and represent 1% of the population. The Children’s and Young People’s Directorate will decide what proportion of the final calculated contribution should be dedicated to this category.

3.5.15 For larger developments of 100 or more dwellings, the Council will negotiate a contribution either in cash or land, or both. More detailed analysis will be undertaken on the current and future availability of school places based on the timing and size of the development and other knowledge about education provision in the area e.g. school reviews.

### 3.5.16 Calculation for Provision of Education Services

$\text{Cost per dwelling} = \text{Pupil Yield per school category} \times \text{Building Cost Multiplier}$
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**Figure 6 - Education contributions per house type 2006/7\***

Contribution by No of bedrooms	Pre - school	Primary	Secondary	Post 16	Total
2+bedroom flat/apartment	£113	£919	£892	£81	£2,005
2/3 bedroom house/bungalow	£228	£1,610	£1,665	£81	£3,584
4+bedroom	£333	£2,633	£3,438	£81	£6,485

\*The figures above will need to be reviewed and amended according to the DfES latest calculations.



## **3.6 Flood Risk Management, Water Services and Pollution Control**

### **3.6.1 Policy Justification**

Planning Policy Statement 25 'Development and Flood Risk' (2006) sets out the Government's policy on the role of land use planning in reducing the risk of flooding. Planning obligations may be used to restrict the use of sites, or to ensure that developers carry out the necessary works and any future maintenance requirements in relation to flood risk. Guidance on pollution issues can be found in Planning Policy Statement 23 'Planning and Pollution Control (2004)' which states that any consideration of the quality of land, air or water and potential impacts arising from development, possibly leading to impacts on health, is capable of being a material planning consideration, in so far as it arises or may arise from or may affect any land use. The Environment Agency promotes the use of obligations to promote justifiable environmental outcomes, where the scope of improvement lies outside the scope of planning conditions.

### **3.6.2 Thresholds for Contributions**

For any development where conditions are inadequate, the Council will seek to negotiate a s.106 obligation in relation to development affecting flood risk or air quality.

### **3.6.3 How contributions will be calculated and used**

#### ***Flood Risk Management***

Where a flood risk assessment has been undertaken which identifies the mitigation measures necessary for a development to proceed, developers will be expected to enter into an obligation to deliver these measures and secure a proper maintenance regime. It is considered appropriate in certain circumstances in the management of residual risk to seek a developer contribution for major applications proportionate to the increased burden on the flood warning system and emergency services for the lifetime of the development. Financial contributions will be calculated on a site-by-site basis.

### **3.6.4 Water Services**

In addition, where developments increase demand for water services developers may be required to support off-site infrastructure costs including the facilitation of new sewer capacity. Equally, the disposal of surface water is a material planning consideration in the determination of planning applications, and in some circumstances, is properly the subject of a planning obligation, for example, in the use of sustainable drainage systems (SUDS). Applicants may be required to enter into a planning obligation to secure the adoption and maintenance of any proposed systems.

### **3.6.5 Air Quality, Groundwater and Contaminated Land**

The Council will expect appropriate air quality amelioration measures to accompany any major planning application and this matter should be discussed with the Council at an early stage of the planning process. In certain instances a contribution from the developer towards additional monitoring, especially in town centre locations, may be appropriate. This may follow the pattern of the provision of additional diffusion tubes, a real-time survey before the submission of proposals, or an ongoing programme of either type. The purchase, installation, operation and maintenance of air quality monitoring equipment or provision of other assistance or support to enable the implementation or monitoring of actions in pursuit of an Air Quality Action Plan can legitimately be sought as a planning obligation, in accordance with Planning Policy Statement 23. There will be a special interest in the impact on air quality arising from developments within or adjacent to an Air Quality Management Area (AQMA), of which there are two existing (Hereford and Leominster) and one proposed (A40 Ross) in Herefordshire.

3.6.6 In certain circumstances there will be a need for the developer to provide continued groundwater and surface water monitoring and any further remediation measures required after planning conditions have been discharged as part of a planning obligation.

### **3.7 Heritage and Archaeology**

3.7.1 PPG's 15 (Planning and the Historic Environment) and 16 (Archaeology) provide advice on controls for the protection of historic buildings, conservation areas and archaeological remains. Herefordshire contains a wealth of listed buildings, numerous conservation areas and a variety of archaeological remains, including scheduled ancient monuments and sites of archaeological importance. These sites and buildings constitute unique resources that require protection and enhancement.

#### **3.7.2 Thresholds for contributions:**

Where conditions are inadequate, the Council will seek to negotiate a s.106 obligation in relation to development within or affecting conservation areas, listed buildings, archaeological and other heritage features or historic parks and gardens.

#### **3.7.3 How contributions will be calculated and used**

The type of agreements and level of contribution will be assessed on a case-by-case basis. Examples of types of development where planning agreements may be negotiated include:

- Enhancing conservation areas - development where works outside the application site are required to offset the impact of the development, for example tree planting within a conservation area;
- Cases where permission would not usually be granted, but enabling works (for example residential development) are required to secure the restoration of a listed building or building in a conservation area. In such cases the developer will be required to ensure the restoration works are completed prior to the completion or occupation of the enabling works;
- In some cases undertaking excavation and recording of important archaeological remains and other archaeological work may be necessary prior to new development. Normally, required investigations and necessary works will be secured via planning condition, however in certain circumstances it may be necessary to secure these works via a planning obligation; or
- In exceptional circumstances, to control the timing of demolition of a listed building or building in a conservation area. In cases where the demolition of a listed building is required to facilitate a new development a s.106 obligation may be required to control the timing of the demolition works, so that demolition cannot take place prior to the contract being let for the new development.

### **3.8 Landscape**

#### **3.8.1 Policy Justification**

The justification for requiring obligations in respect of the natural environment is set out in Circular 05/2005 (Para B16). Planning Policy Statement 7 (PPS7) "Sustainable Development in Rural Areas" sets out the government's objectives for the rural environment. The key principles established in PPS9 are:

- To promote good quality, sustainable development that respects, and where possible, enhances local distinctiveness and the intrinsic qualities of the countryside; and
- Continued protection of the open countryside for the benefit of all, with the highest level of protection for our most valued landscapes and environmental resources.

3.8.2 UDP policies LA5, LA6 and NC9 relate to landscape issues and planning obligations and are listed in Appendix 1. The Council has also produced Supplementary Planning Guidance on "Landscape Character Assessment" to complement and provide further detail for policy LA2. The assessment itself provides a detailed account of the natural, cultural and visual dimensions of landscape, classifying, describing and evaluating its character as well as promoting opportunities for conservation, restoration, enhancement and mitigation.

#### **3.8.3 Thresholds for contributions:**

This will be assessed on a site-by-site basis where development affects a landscape, element in the landscape or feature in the landscape that could not be protected, enhanced or mitigated through the use of planning conditions or secured as part of a planning application. This may include additional landscape works beyond the application site.

#### **3.8.4 How contributions will be calculate and used:**

Contributions will be calculated on a site-by-site basis and relate directly to the conservation and enhancement measures recommended in the Landscape Character Assessment SPG and may include:

- Hedge planting;
- Tree and orchard planting;
- Re-instating features that would restore the scale and pattern of enclosure and settlement;
- Reinforcing distinctive elements in the landscape through appropriate management; and/or
- Restoration of elements within Historic Parks and Gardens and cultural landscapes.

3.8.5 In Areas of Outstanding Natural Beauty (AONB's), contributions from development may be pooled to enable delivery of AONB Management Plans.

### **3.9 Open Space, Sports and Recreation Facilities**

#### **3.9.1 Policy justification**

The justification for requiring obligations in respect of open space and sports facilities is set out in Circular 05/2005 (Para B15). Planning Policy Guidance Note 17 (PPG17) states in Para 33 that 'planning obligations should be used as a means to remedy local deficiencies in the quantity or quality of open space, sports and recreation provision' and that 'local authorities will be justified in seeking planning obligations where the quantity or quality of provision is inadequate or under threat, or where new development increases local need'. It goes on to say, this will be justified where local authorities have undertaken detailed assessments of needs and facilities and set local standards. The Herefordshire Unitary Development Plan also contains policies concerning the provision, protection and enhancement of open space, sports and recreation facilities across the County. These are listed in Appendix 1. Planning obligations will, therefore, be sought to improve the quality and/or quantity of open space provision in a local area; this is in addition to private amenity space provided as part of a scheme (UDP Policy H19).

#### **3.9.2 Assessment of need**

In line with PPG17, an audit of open space has been carried out in Herefordshire, and this takes the form of an assessment of not only the existing levels, standards and quality of open space in the County, but also future needs as well as under and over supply at the local level. This audit is currently in draft form, but when finalised, the information will be used to update UDP policy requirements, which are based on the existing National Playing Fields Association (NPFA) standards. Although the audit of open space took place after the drafting of the UDP, provision was made within the plan for the findings of the audit to inform the requirements placed upon developers with regards to open space and sports provision. The UDP Inquiry Inspector supported this approach – see Para 10.5.3. When approved, the audit will be made available on the Council's web-site and will be used not only to update existing UDP policies but also to develop new policies for the forthcoming Local Development Framework.

#### **3.9.3 A preliminary report of the audit indicates that:**

- there are issues of quality and quantity in the existing open spaces and deficiencies in these areas need to be redressed; and
- there are also issues concerning accessibility of existing open space and recreation provision by local residents.

#### **3.9.4 Sports contribution for Sport and Leisure Facilities (Public and Private)**

Sport England has provided guidance through their Good Practice Guide "Providing for Sport and Recreation Through New Housing Development" 2001, for securing sport and recreation at the local level. Therefore, in addition to seeking planning obligations towards open space provision/enhancement, Herefordshire Council use the "facilities calculator model" developed by **Sport England** to determine contributions resulting from increased demand for community sports facilities created by new development and any increased population. Currently, the model focuses on indoor facilities but once research has been completed this will be rolled out to include outdoor sports as well. For outdoor facilities the assessment of need will be carried out using the PPG17 audit of open space – see 3.9.2.

**3.9.5** This contribution is required on all new residential developments and commercial developments above the thresholds in Figure 8 in order to meet the government's national strategy for improving sport and physical activity. (In cases where they are too small to provide part or all of the facility required, they will be pooled with other contributions until such time as the required works can be carried out). For developments of over 60 dwellings which are required through UDP policy H19 to provide either on site and/or off site contributions towards outdoor formal sports facilities, the Sport England requirement will be used for determining the value of the contribution and where necessary form the basis for negotiations around the total on/off site package of facilities to be provided. In some instances a contribution for both indoor and outdoor facilities may be required. This will be done on a case-by-case basis. For commercial developments (Fig 8) the Sports contribution will be assessed for both indoor and outdoor facilities using the Sports Facilities Calculator model and PPG17 open space audit methodology. Off site contributions will normally be directed to the key facilities within the locality in which the development is proposed. See [www.sportengland.org.uk](http://www.sportengland.org.uk)

and UDP Para 10.5.3. The calculation for the contributions towards sports facilities is based on the following: -

**Figure 7 – Calculation for contribution towards Sports Facilities**

**Average occupancy per dwelling or Number of employees/3 x cost of provision of facilities/County population**

### 3.9.6 Open space and Outdoor Recreation

#### Thresholds for contributions towards open space

The Council will generally seek contributions for off-site open space provision or enhancement in respect of all residential developments where the required amount of open space to meet our standards (in accordance with current UDP policies H19 and RST3) cannot practically or desirably be provided on site. However, the emerging open spaces assessment recommends that the provision of LAPs on all new development sites should be minimised, particularly on larger developments. (A LAP is a small area of open space specifically designed and laid out for young children to play, close to where they live). LAP's are now considered to offer little in terms of play value but are very costly to maintain. Therefore, unless specifically agreed, and until such time as new local standards are developed in accordance with PPG17, LAPs will not be sought on all new developments but rather, a financial contribution may be sought instead.

3.9.7 For many developments, the financial contributions arising from the scheme are unlikely in themselves to be sufficient to provide new recreation space or carry out necessary improvements to recreation space in the locality. In these cases the Council will hold the money in a ring-fenced account until such time as sufficient funding can be secured to provide new recreation space or carry out improvements to recreation space conveniently located for occupiers of the development. Exceptions relating to contributions towards open space will be made for affordable housing, sheltered housing, rest homes and nursing homes.

3.9.8 Certain commercial sites will be expected to provide areas of landscaped amenity open space of an appropriate size, scale and character within or adjacent to the development. In most instances, the Council is unlikely to adopt these areas. Therefore, if it is not feasible or desirable to make on-site provision, developers may be required to contribute to the improvement of conveniently located green spaces or recreation facilities likely to be used by their staff.

**Figure 8 - Thresholds for contributions towards open space for residential and commercial developments**

Contributions towards on-site or off-site provision/enhancement, equivalent to:	Dwellings	Retail (A1)	Financial and professional Services (A2)	Office (B1)
Appropriate levels of open space on a pro rata basis	1-10	-	-	-
Small children's play area (LAP)	10 – 30	-	-	-
+ Informal play space for older children. (LEAP)	30-60	-	-	-
+ Outdoor play space for youth and adult and POS to at least the min standard (NEAP and outdoor sports facilities)	60+	Above 300 sq m (Off site contribution)	Above 100sq m (Off site contribution)	Above 500sq m (Off site contribution)
Sports Facilities Contribution for Sport and Leisure facilities (public and private)	All dwellings	Above 300 sq m (Off site contribution)	Above 100sq m (Off site contribution)	Above 500sq m (Off site contribution)

### 3.9.9 How contributions for open space will be calculated and used

#### **On-site provision**

In areas identified in the open space audit as having quantity deficiencies, open space provision will normally be required to be made on site as described in Figure 8 and in UDP policies H19, RST3 and E8. **This will offset the need for off-site provision.** However, a maintenance payment will be required if the site is being offered for Council adoption – see Para 3.9.21 below. The provision should always relate to the development it serves in scale and nature and should be capable of use for a range of uses across a range of ages. Until the open space audit's assessment of open space standards is approved, the Council will use the National Playing Fields Association (NPFA) standards for calculating the open space provision i.e. a minimum amount of open space of 2.4 hectares of outdoor playing space per 1000 population to be provided. In addition, the Council require 0.4 hectares of public amenity open space per 1000 population – these requirements are set out in UDP Policy RST3.

Provision for children and young people	0.8 ha
Outdoor formal sports space	1.6 ha
Public open space	0.4 ha
<b>Total</b>	<b>2.8ha per 1000 population</b>

3.9.10 The population arising from new residential development will be assessed by assuming average persons per dwelling from the 2001 Census, currently an average of 2.3 persons per dwelling. From this, the area of open space that a particular development (according to the thresholds in Figure 8) should provide according to NPFA standards will be calculated (in cases involving redevelopment or conversion of existing residential properties, the population from dwellings lost will be discounted).

3.9.11 Guidance and requirements concerning the location and layout of on-site provision and types of equipment expected can be obtained from the Council's Parks, Countryside and Leisure Development Services. On-site playing fields may be sought on sites of 60 dwellings and over and the developer will be required to lay out the pitches and where appropriate provide pavilions with changing rooms, parking and all appropriate support infrastructure. In certain circumstances developers may be required to make provision of open space above that required by the adopted standards to provide for structural or shelter planting in order to reduce noise, to incorporate measures to control ground water, prevent flooding or promote sustainable urban drainage or to include measures to protect biodiversity and/or promote nature conservation. These areas will not count towards open space requirements unless a compelling case can be made.

#### 3.9.12 **Off-site provision for residential schemes**

In some circumstances, (especially for small developments where it is not practical for open space or recreation facilities to be provided on site, since it would be too small to be of any practical use) it is likely to be more appropriate to seek financial contributions towards off-site provision of open space or recreation facilities. For residential development this will be based on the size of development proposed and the cost of acquiring and laying out a typical public park, sports area, children's play area or informal/natural green space, which would meet the requirements of NPFA standards. These contributions will be used for the enhancement of existing open space provision within the locality of the development to bring them up to standard and/or the enhancement/upgrading of key strategic facilities in the locality. Once the audit of open spaces is approved it will help determine key priorities for improvements based on local deficiencies, quality and thresholds. The emerging open space audit points to a need for substantial qualitative improvements to many open space areas to meet the needs of both the existing population and those occupying new developments. The Council will have regard to the findings of this audit in seeking contributions to off-site provision. Finally, there may be other forms of recreational provision, often in the form of projects such as skate parks or allotment gardens which may arise in response to a specific need where the contribution will be negotiated on a case by case basis.

3.9.13 The calculation for residential development will be based on the following information:

**Figure 9 – Calculation for residential contributions towards off-site open space provision/enhancement**

- Average number of persons per dwelling – based on Appendix 3
- The NPFA standard for the provision of outdoor playing space of 28m<sup>2</sup> per person
- The provision cost and maintenance per m<sup>2</sup> of a typical public open space

3.9.14 The composition of the NPFA standard and the cost of provision and maintenance per dwelling are set out in the following table – the annual costs of provision will be index-linked.

**Figure 10 – Contributions per dwelling size**

Recreation Type	Provision cost and maintenance cost per person	1 bed	2bed	3bed	4 bed
Provision for children and young people	£965	-	£1640	£2219	£2702
Outdoor formal sports space	£627	£878	£1066	£1442	£1756
Public open space	£138	£193	£235	£317	£386
<b>Total</b>		<b>£1071</b>	<b>£2941</b>	<b>£3978</b>	<b>£4844</b>

3.9.15 The above recreation types are defined as follows: -

- Provision for children and young people (LAPs (where appropriate)/ LEAPs, NEAPs)
- Outdoor formal sports provision including pitches
- Public Open Space (including Parks and Gardens, amenity green spaces, natural and semi natural green space and recreational rights of way).

3.9.16 The land acquisition costs (see 3.9.12) are based on the cost of land purchase in Herefordshire (Herefordshire Council’s Property Services). If the development does not provide any open space on site, an equivalent should be sought off site, which would require the purchase of land. If land cannot be found and the contribution is going to be more beneficially used to improve the quality of an existing site, the land acquisition cost is still required as there is no net increase in supply. This is supported by Sport England. Most developments will increase local population, thereby increasing the amount of space required under NPFA standards. In exceptional circumstances where a surplus of facilities can be proven this element would not be required.

3.9.17 The provision costs are based on comparable costs from recently developed facilities in Herefordshire, which are compatible with estimates published by NPFA and Sport England and other local authorities. Such contributions will be put towards the extension or enhancement of existing open space in the locality. If any public open space is provided on site, the amount of the contribution will be correspondingly reduced in accordance with the proportion of open space provided. The maintenance costs are based on 15 years.

**3.9.18 Off-site provision for business schemes**

For retail and business development, the Council consider it appropriate to base the level of contribution in line with that established for residential development, however, it is recognised that the demand will be less than that of residents and therefore the NPFA standards should be met for

every 1 in 3 employees. Likewise, the use of open space by employees and visitors to commercial developments will be unlikely to involve the use of equipped play space and this will therefore be excluded from the calculation.

3.9.19 The calculation for contributions to open space for the types of business development detailed in Figure 8 will be based on the following:

**Figure 11: Calculation for contributions towards open space provision/enhancement from business development**

The number of employees expected to be working in the proposed development divided by 3 x the provision cost and maintenance per person of outdoor open space less provision cost for young people (Figure 9).

N.B Employee/Floorspace Ratios explaining typical amounts of floorspaces per employee for different types of development are set out in Appendix 3.

**3.9.20 Maintenance**

In addition to the actual provision of open space where it is required on-site, a payment by the developer of a commuted sum to cover a 15-year cost of maintenance is also required. This would cover the life of the facility and is supported by RoSPA (Royal Society for the Prevention of Accidents). The tariff for calculation of commuted sums is index linked, and can be obtained from the Council's Parks, Countryside and Leisure Development Services. On payment of the commuted sum and when all liabilities for construction, equipment and maintenance have been met to the satisfaction of the Council, the open space will be transferred to the Council. If developers do not intend to offer these areas for adoption, the Council will need to be satisfied that alternative arrangements have been made for their long-term maintenance, usually through some form of private management agreement.

**3.9.21 Public Rights of Way**

Public rights of way are:

- used by local communities to gain access to the countryside;
- provide facilities for car free transportation around the local area;
- a vital component of the transportation network and have been incorporated into the Local Transport Plan; and
- used extensively for recreation activities such as dog walking, rambling, cycling, horse riding and running.

3.9.22 Key routes such as the Wye Valley Walk and the Mortimer Trail contribute towards the income generated by tourism every year. Contributions by developers where the use of public rights of way is likely to increase as a result of the development, may be required towards:

- the replacement of old footbridges, which are often too narrow for modern usage,
- replacement of stiles with gates to improve accessibility by all members of the public;
- the provision of surfaces that enable paths to be used all year round, rather than seasonally;
- upgrading the status of rights of way (e.g. footpath to bridleway); and
- future maintenance.

3.9.23 Contribution requests will include an assessment of needs created by the development; the Rights of Way Improvement Plan and Local Transport Plan should be consulted. There may be a degree of overlap with regards contributions towards transportation improvements, particularly in urban areas, see Transport section. The status, location and priority of public rights of way can be identified by contacting the Public Rights of Way team who will be able to advise on matters such as diversions and temporary closures. Path diversion to enable a development to be carried out would need to be paid for by the developer and would be separate to any contributions sought under s.106.



### 3.10 Town Centres, Community Safety and Public Realm

#### 3.10.1 Policy Justification

The justification for requiring obligations in respect of town centres, community safety and the provision of areas of public realm, is set out in Circular 05/2005 (Para's B15- B19). Government Guidance (PPS6 Planning for Town Centres) states that 'it is essential that town centres provide a high-quality and safe environment if they are to remain attractive and competitive.' Well-designed public spaces and buildings, which are fit for purpose, comfortable, safe, attractive, accessible and durable, are all key elements which can improve the health, vitality and economic potential of a town centre. Circular 5/94 "Planning Out Crime", states that crime prevention can be a material consideration when planning applications are considered. Financial contributions from developers are highlighted in the Circular as a potential way that businesses can support town centre schemes to increase the feeling of community safety and benefit those businesses in the process.

3.10.2 The Council expects, in accordance with UDP policy DR1, that public art should be incorporated as an integral part of development, in order to offset the loss of, or impact on, any amenity and to contribute to the quality of the development and of the public space in the surrounding area. In appropriate circumstances a planning obligation may be required to achieve the above benefits.

#### 3.10.3 Assessment of Need

Policy TCR2 of the UDP states that: 'the vitality and viability of Hereford city centre and the market towns will be maintained and enhanced by the following means.... (5). Seeking planning obligations to secure improvements to the public realm including public art, contributions to traffic management and environmental enhancement schemes, helping to make town centres more attractive places to visit.' Section 7.7.1R – 7.7.49R of the Herefordshire UDP sets out the background and objectives for the Council's approach to the regeneration of Hereford City - on the area of land known as the Edgar Street Grid (ESG). The Council are producing a separate Supplementary Planning Document (SPD) setting out an urban design framework for the regeneration of the ESG area. UDP policies TCR20R, 21R, 22R and 23R specifically refer to developer contributions: 'A financial contribution to the planning obligations identified will be sought, ensuring the overall aims of the Edgar Street Grid proposals are met.'

#### 3.10.4 Thresholds for Contributions

All residential developments and other schemes in Hereford or the Market Towns fulfilling the following thresholds will be expected to contribute to art in the public realm, community safety or town centre regeneration. The thresholds are:

<b>Residential</b>	<b>Retail (A1, A3,A4,A5)</b>	<b>Financial and professional Services (A2)</b>	<b>Office (B1)</b>	<b>D2 Leisure</b>
All new dwellings	Above 300 sq m (Off site contribution)	Above 100sq m (Off site contribution)	Above 500sq m (Off site contribution)	Above 100sq m (Off site contribution)

3.10.5 For major developments, regarded as those where the gross floor space to be created is 1000 square metres or above, or the site area covers 1 hectare or more, it is preferable for developers to make direct improvements to the public realm (subject to agreement as to the specific nature of the works), to a standard satisfactory to the Council, in lieu of making contributions. Contributions may also be required from developments below the above thresholds where they affect regeneration projects in prominent town or village locations or abut public open space.

#### 3.10.6 How contributions will be calculated and used

##### **General Town Centre Improvements and Community Safety Measures**

Development requirements and contributions will be directly related in scale and kind, and the type and level of contribution will ultimately be based on the location, nature and scale of the proposal. It will also depend upon a scheme's potential impact and the estimated cost of providing the requisite measure(s) identified in connection with the development to be implemented.

3.10.7 Depending on the scheme, the type of enhancement projects and measures will generally fall within the following broad areas:

- Landscape works including the provision and maintenance of public space
- Street furniture and lighting
- Litter management and recycling
- Crime prevention and safety e.g. CCTV
- Improved public transport
- Accessibility measures and/or associated highway works
- Signage
- Public facilities i.e. toilets and crèches
- Promotion and marketing
- Car parking improvements/park and ride facilities and management

3.10.8 In-terms of community safety, measures may include the design and layout of the scheme, lighting, CCTV cameras and works to existing pathways or other routes. In most cases, safety and security measures will be provided as an integral part of the development, or will be required by planning condition. In exceptional cases, a planning obligation may be sought towards strategic safety and security measures in order to create a safer environment within the area of the proposed development. In particular, contributions towards strategic safety and security measures will be sought from the following developments:

- All new major development proposals for leisure, entertainment and hotel developments, which are likely to attract clientele beyond 8.00pm at night;
- All late night cafes/restaurants, public houses and nightclubs which seek to attract clientele beyond 8.00pm at night; or
- Major town centre developments that will generate significant visitor numbers and trip movements, assessed on a case-by-case basis.

3.10.9 The costs of providing the necessary safety and security measures will be negotiated on a case-by-case basis pursuant to the location, nature and scale of the development and the type of safety and security measures which are identified as being necessary. In the case of CCTV schemes, where it is considered necessary to improve or provide a public CCTV scheme (which will be limited to town, district or local centres, public space and industrial estates), the Council may seek contributions towards the full or partial costs of a CCTV scheme and its running costs. The cost of providing a CCTV camera, linked to the central control room, is in the vicinity of £25,000 - £30,000. A full breakdown of the costs of providing a CCTV scheme in Herefordshire is outlined in Appendix 4. A contribution from developments towards the cost of provision would need to be commensurate with the location, scale and nature of the proposal.

#### 3.10.10 ***Edgar Street Grid***

Regarding the ESG proposals, paragraph 7.7.15R of the UDP stipulates that the Plan policies for the grid area include a number of requirements to support regeneration. Developers will be expected to make financial contributions to these in compliance with policy DR5 of the Plan. Contributions may be expected from schemes outside of the Grid where appropriate, including those arising elsewhere in the city centre. The main requirements are:

- Provision of new and improved pedestrian/cycle routes to ensure good linkages through the site connecting the Grid developments to the existing fabric of the city, including the Courtyard theatre and the railway station;
- Contribution to the provision of park and ride facilities to serve Hereford and improve access to the area;
- Public realm improvements including enhancements to the railway station providing improved access for pedestrians, cyclists and drop-off facilities, and to the historic area around the Coningsby Hospital and the Blackfriars Friary;

- Provision of enhanced public transport facilities;
- The road link between Edgar Street and Commercial Road and extension of Canal Road;
- Provision of canal basin, wharfage, and visitor centre;
- A surface water and drainage management scheme utilising the Widemarsh Brook and the Canal where appropriate, in conjunction with other strategic flood mitigation measures undertaken elsewhere upstream;
- Relocation of the Hereford Livestock Market; and
- Provision of public offices and library.

3.10.11 It is recognised that the proposals for comprehensive regeneration of the Edgar Street Grid are likely to involve significant elements of “inherent self mitigation” in the form of major infrastructure provision. The Council will thus have due regard to this in the extent and level of any planning obligations and contributions sought by the Council in connection with such development proposals. The cost and provision of major infrastructure works as part of the Edgar Street Grid development proposals (for example highways improvements and contributions to flood alleviation schemes) may thus be off-set against obligations and contributions which may otherwise have been sought pursuant to this SPD. Where ESG development proposals provide off-site works which have an enabling benefit to non-ESG development sites, the Council shall seek a planning obligation from developers of such sites to contribute a fair and reasonable amount proportionate to the enabling benefit such off-site works have given to the relevant non-ESG development site.

### 3.10.12 **Public Art**

Public art comprises permanent or temporary works of art visible to the general public, whether part of the building or free-standing, and can include sculpture, fine art, water features, lighting effects, street furniture, new paving schemes, clocks, murals and signage, live art (exhibitions and performances), stained glass windows, textiles such as tapestries and flags, and metalwork such as gates and fences. In whatever form, public art has one consistent quality – it is site-specific and relates to the context of a particular site or location. Public art can improve the quality of the public realm and add to the process of local regeneration. Installing works of art in public places is a permanent means of improving the quality of the environment, which can contribute to the creation of a sense of place and local identity in public buildings, commercial developments, streets and parks. In improving the quality of a public space, public art can contribute to the overall value of a new development and hence increase its marketability. A successful scheme can make good commercial sense in that it helps set a building or development apart.

3.10.13 The Council will seek to ensure that the cost of public art provided in association with new developments equates to approximately 1% of gross development cost (excluding land values) of a development project. This approach follows the “Percent for Art” campaign sponsored by the Arts Council, which aims to improve the built environment by employing the talents of artists and craftspeople. The Council prefers that the artwork be incorporated into the development, or that the developer commission’s specific work to be part of the public space surrounding the building. Where it is shown that the artwork cannot be incorporated within the development, the Council will expect a financial contribution equivalent to 1% of the gross development cost. The financial contribution will be utilised to provide public art within the vicinity of the development, and may be pooled with other contributions. The Council will require an estimate of the building costs in order to assess the “percent for art” contributions. Developers will be encouraged to consult with artists, craftspeople, as well as the local community, at an early stage in the design process (preferably prior to the submission of a planning application) to promote social cohesion and the proper integration of the public art feature. The obligation should clarify the procurement and management process, location of the works, timetable for works, ownership, insurance and maintenance issues.

### **3.11 Waste Reduction and Recycling**

#### **3.11.1 Policy Justification**

Planning Policy Guidance Note 10 'Planning and Waste Management' (1999) sets a policy framework for sustainable waste management. The Council is promoting a strategy of waste minimization through the development of recycling services and the reduction and reuse of materials currently going to landfill. The Council has made recycling one of its top priorities in its Corporate Plan 2006-9. In addition the Joint Municipal Waste Management Strategy for Herefordshire and Worcestershire 2004-2034 sets out the strategic context for waste management and disposal across the County as well as laying down recycling targets. The Council is looking to achieve a recycling rate of 30% by 2010.

#### **3.11.2 Thresholds for Contributions**

Developer contributions will be required from all residential developments towards recycling initiatives depending on the development and particular site characteristics.

3.11.3 As part of the objective to encourage the recycling of waste and to ensure that all development is of a high standard of design and layout, the Council will normally expect all development to:

- ensure adequate facilities for storage and collection of waste/recyclable materials are provided per dwelling (for developments involving flats, a recycling storage area with drop fronted bins will need to be provided on site); and
- kitchen sink waste disposal units are provided per dwelling/unit where home composting is unsuitable e.g. flats; and
- depending on the scale of development, either require the provision of a local, public recycling facility within a development site or secure a financial contribution towards the provision of, or improvements to, such a facility off-site, but in the locality.

#### **3.11.4 How contributions will be calculated and used**

On all new dwelling sites the Council will normally expect a financial contribution towards the cost/improvement of a local recycling facility. On residential developments of 50 or more dwellings the Council will normally require the provision of a local recycling facility on site. Where this cannot genuinely be provided, a financial contribution equivalent to the cost of providing and equipping a local recycling facility shall be paid to the Council. The inclusion of a neighbourhood recycling centre may be justified in larger developments (i.e. more than 200 units).

3.11.5 Recycling facilities provided as part of a new development shall be provided at an early stage in the development and shall normally be open for public use prior to any of the dwellings for that part of the estate having been completed and occupied. Prospective developers are encouraged to ensure that the occupants of new dwellings are able to minimise the amount of waste they produce. A storage space should always be provided for recoverable materials and, wherever practicable, facilities should be provided for home composting.

3.11.6 The day-to-day revenue costs of collection and recycling will be covered through householder's Council Tax.

#### **3.11.7 Figure 12: Calculation for Off-site Provision of Recycling and Refuse Facilities<sup>1</sup>**

Contributions towards recycling and household waste facilities will be sought in accordance with the guidelines outlined above. The financial contribution, in lieu of on-site provision, is £120 per dwelling.

<sup>1</sup> This amount will be index-linked.

## Appendix 1 – UDP Policies

Topic	UDP Policy	Associated Obligations
Strategic Policies	S1 S2	Sustainable Development Development Requirements
Development Requirements	DR1 DR3 DR4 DR5 DR7 DR10 DR13	Design and Public art Sustainable transport Environmental improvements Planning Obligations - general Flood Risk Contaminated Land Noise
Housing	H1/H2/H4/H5 H7/8 H9/10 H19	Housing land allocations/Affordable housing Occupancy Limitations/Agricultural dwellings Affordable Housing Open Space
Employment	E7 E16	Intensification of Use /Landscaping/Residential Amenity/ Intensive livestock units
Town Centre and Retail	TCR2 TCR19 to TCR23	Improvements to the public realm ESG - Traffic management contributions/Environmental enhancement scheme/Pedestrian and cycle links/Community safety/CCTV/Affordable housing/Infrastructure
Transport	T11 T12 T14	Parking provision Existing parking areas Safer routes to school
Natural and Historic Heritage	LA1 - LA5 LA6 NC5 NC7 NC9 HBA12 ARCH8	Protection of Trees and Woodland Landscape schemes including enhancement European and nationally protected species Compensation for loss of biodiversity Management of features of landscape importance Re-use of Rural Buildings Management strategies including access
Recreation, Sport and Tourism	RST1 RST4 RST5	Establishment of new facilities Safeguarding existing facilities New open space
Waste	W11	Waste implications of development

**Appendix 2 – Average occupancy per dwelling**

<b>Dwelling Size (bedrooms)</b>	<b>Average Occupancy</b>
1	1.4
2	1.7
2 bed flat	1.7
3	2.3
4+ beds	2.8
All dwellings	2.3

Source: Average Occupancy per Dwelling Source: Census 2001

### Appendix 3 - Employee/Floorspace ratios

Description	Use Class	Net Floorspace per Employee (sqm)*	Gross Floorspace per Employee (sqm)**
Offices	B1 (a)	18.3	20.3
R&D/High Tech	B1 (b)	27.2	30.2
Financial and Professional Services	A2	19.9	22.1
Industrial	B1 (c)/B2	38.2	42.4
Warehousing	B8	78.2	86.9
Retail	A1	15.9	17.7

Source: Derived from Table 4.2, Use of Business Space and Changing Working Practices in the South East, DTZ/SEERA, 2004

\* Net floorspace is the internal area including entrance halls, kitchens and built-in units but excluding toilets, stairways, lifts, corridors and common areas.

\*\*Gross floorspace is calculated from the external dimensions of the building. The ratio is based on an assumption that net floorspace = 90% of gross.

## Appendix 4: Costs of Providing CCTV

### HEREFORDSHIRE CCTV

#### BUDGETARY COSTS FOR THE INSTALLATION OF CCTV

Please note the following price information is for guidance only and is subject to detail site survey and clarification of individual requirements. Additional camera sites may or may not involve additional monitors, display devices and recording systems, dependant on usage of spare capacity of the existing system or requirement to maintain spare capacity. Prices exclude additional control protocol driver equipment or data distribution equipment, as this will depend on system size at time of camera addition.

		£
1	20" Colour Photo-Scanner Camera on Building	3,840
2	20" Colour Photo-Scanner on 6m TC Pole	6,105
3	20" Colour Photo-Scanner on 8m TC Pole*	6,860
4	20" Colour Photo-Scanner on 10m TC Pole*	7,208
5	Adjustment for "Heritage" style top cowl on dome	+170
6	Adjustment for pole base by other	-700
7	General Control Room works and Project Management	1,620
8	Additional Quad Display Unit	694
9	8 x Channel Multiscope III System DVR	13,750
10	16 x Channel Multiscope III System DVR	16,290

\*Combination camera / lamp poles

In addition to the above one off capital costs a contribution towards annual running costs would be levied. As a budgetary guide this figure would be in the region of £3,000 per annum.

#### Pricing Notes

1. Pricing within the above schedule has been provided as BUDGETARY GUIDANCE ONLY, SUBJECT TO CONFIRMATION OF DETAIL AND DOES NOT FORM A FORMAL QUOTATION.
2. Please note that Fibre Optic links are supplied under direct contract with BT RedCare Vision and are excluded from the above prices.
3. It is assumed that all wayleaves, permissions and searches would be undertaken by others, where necessary.
4. Price excludes any costs for Street Licences, if applicable
5. Prices exclude new electricity supplies, where required.



## Planning Obligations SPD - Sustainability Appraisal Report



December 2007

## Contents

<b>Section</b>	<b>Page</b>
Non-Technical Summary	2
Consultation Undertaken	4
Summary of Appraisal Process	4
Background	4
Purpose of the Report	5
Sustainability Objectives, Baseline and Context	6
UDP Policy Appraisal	6
Links to other strategies, plans and programmes and sustainability objectives	6
The social, environmental and economic baseline	7
Key sustainability Issues	7
SA Framework	7
Outcome of the SA process	8
Appraisal of Options	8
The Appraisal of the Objective of the SPD	8
Significant social, environmental and economic effects of the SPD	9
Uncertainty and Risks	9
Mitigation	9
Further Work	9
Monitoring	9
Appendix 1 - Compliance with the requirements for the environmental report under the SEA Directive	10
Appendix 2 – Comparison of Options	11
Appendix 3 –Testing Plan Objectives against SA Objectives	
Appendix 4 – Predicting and evaluating the impacts of the whole SPD	

## Non-Technical Summary

- A.1. As the role of a Supplementary Planning Document, or SPD, is to expand on the provisions of existing policies, the Sustainability Appraisal (SA) of the Planning Obligations SPD has focussed on assessing the sustainability effects of that SPD over and above the Herefordshire Unitary Development Plan (March 07) policies to which it relates.
- A.2. Planning obligations are a valuable way of bringing development in line with the objectives of sustainable development. The SPD is therefore expected to have a very positive impact on those matters that obligations would seek to address, such as the supply of affordable housing and sustainable transport.
- A.3. A Scoping Report for the Sustainability Appraisal was prepared in October 2006. This was based on the General Scoping Report prepared for the Sustainability Appraisal of the Local Development Framework (LDF). The Planning Obligations Sustainability Appraisal Scoping Report provides a review of a range of national, regional and local strategies and baseline data and was used to identify key sustainability issues for the SPD. The Scoping Report was consulted upon in November 2006; comments received were incorporated into the draft SA, which accompanied the draft SPD on Planning Obligations published for public consultation in March 07.
- A.4. The draft SA and SPD were consulted upon in accordance with statutory regulations for 6 weeks. The results of that consultation were used to inform the final versions of both the SPD on Planning Obligations and its associated SA. The results of those consultations are contained in the Consultation Statement accompanying the final SPD.
- A.5. The main changes to the SA relate to revisions made following from amendments to the final SPD which included deletions with respect to employment contributions and changes made to facilitate affordable housing provision, linking to social and economic priorities for the county.
- A.6. All the documents referred to above can be found on the Council's website in the forward planning pages.
- A.7. Figure A1 on the next page summarizes the appraisal of the whole SPD on Planning Obligations against the SA objectives set out in the LDF General Scoping Report referred to above. See also Appendix 4 to this document.

**Figure A1 – Appraisal of likely significant effects of the Planning Obligations SPD**

<b>SA Objective</b>	<b>Cumulative Effect</b>
To support, maintain or enhance the provision of high quality, local or easily accessible employment opportunities	☺
Secure a more adaptable and higher skilled workforce	☹
Maintain or enhance conditions that enable sustainable economy and continued investment	☺
Reduce road traffic and congestion, pollution and accidents and improve health through physical activity by increasing the proportion of journeys made by public transport, cycling and walking	☺☺
Improve the health of the people of Herefordshire, reduce disparities in health geographically and demographically and encourage healthy living for all	☺
Improve equality of access to and engagement in quality cultural, educational, leisure, sporting, recreational and community activities for all	☺☺
Sustainable regeneration	☺
Raise educational achievement levels across the County	☺☺
Reduce and prevent crime/fear of crime and antisocial behaviour in the County	☺
Reduce poverty and promote equality, social inclusion by closing the gap between the most deprived areas in the county and the rest of the county	☺
Provide everyone with the opportunity to live in good quality, affordable housing of the type and tenure, in clean, safe and pleasant local environments	☺☺
Reduce the amount of waste requiring disposal and minimise the use of non-reusable materials and encouraging recycling	☺☺
Value, maintain, restore and expand county biodiversity	☺
Use natural resources and energy more efficiency	☹
Value, protect, enhance and restore the landscape quality of Herefordshire, including its rural areas and open spaces	☺
Reduce Herefordshire's vulnerability to the impacts of climate change as well as its contribution to the problem	☺
Reduce the risk of flooding and the resulting detriment to public well-being, the economy and the environment	☺
Minimise local and global pollution and protect or enhance environmental resources	☺
Ensure integrated, efficient and balanced land use	☺
Value, protect and enhance the character and built quality of settlements and neighbourhoods and the county's historic environment and cultural heritage	☺

## Consultation Undertaken

The consultation of this document was undertaken in accordance with the SEA Directive, (2001/42/EC) to ensure the views of stakeholders helped to shape a more informed and inclusive Supplementary Planning Document (SPD) on Planning Obligations.

Consultation took place over a six-week period, from 1<sup>st</sup> March 2007 to 12<sup>th</sup> April 2007. The comments received were logged and have shaped the final version of the Planning Obligations SPD, specifically with greater focus on the priority of facilitating more affordable, local need housing provision in the County and the need to promote Herefordshire's business economy (with a consequent relaxation in contributions in both instances).

## 1. Summary of Appraisal Process

1.1 A Scoping Report for the SA of the Planning Obligations SPD was prepared in October 2006. This was based on the General Scoping Report prepared for the Sustainability Appraisal of the Local Development Framework (September 2006). It included a proposed framework of objectives and indicators to be used to assess the sustainability impacts of the SPD and discussed the options as to how the SPD could be approached. Other sections of the SPD Scoping Report provided further information on how the objectives and indicators had been chosen, and how the sustainability appraisal would be carried out, including:

- other relevant plans and policies considered;
- baseline information about the main characteristics of the County and what some of the main sustainability issues are;
- the broad options being considered for the SPD at this early stage; and
- the proposed structure and level of detail to be included in the final SA report

1.2 The Scoping Report for the SA was released for consultation in November 2006, to the four main environmental bodies in accordance with government guidance<sup>1</sup>. Comments received were considered and incorporated into the Draft Sustainability Appraisal and used to extend the key issues section.

1.3 The Draft SPD and associated SA were developed following from the Scoping Report SA and initial consultation with stakeholders. The alternative options were considered against the SA objectives as set out in the General Scoping Report for the LDF, the analysis of which is reproduced in Appendix 2 of this report. In addition, the objectives of the SPD were analysed, this is reproduced in Appendix 3. Finally, the cumulative sustainability effects of the whole SPD were considered against the SA objectives and this analysis is reproduced in Appendix 4. The Draft SPD and SA were published for a further consultation period of 6 weeks in March 2007, the results of this consultation have been analysed and help to inform both the final version of the SPD and ultimately the SA has been reviewed against the changes made to the SPD and amended accordingly.

## 2. Background

2.1 In accordance with the Planning and Compulsory Purchase Act 2004, all planning documents that make up a Council's Local Development Framework must undergo a Sustainability Appraisal (SA).

2.2 The main purpose of sustainability appraisal is to promote sustainable development through the better integration of sustainability considerations into the preparation and adoption of plans. This is done through appraising the social, environmental and economic effects from the outset of the preparation process so that decisions can be made which accord with the

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<sup>1</sup> Sustainability Appraisal of Regional Spatial Strategies and Local Development Frameworks (November 2005)

objectives of sustainable development. Sustainability Appraisal offers a systematic way of checking and improving plans as they are developed.

- 2.3 There is also a EU Directive, which requires a 'Strategic Environmental Assessment' (SEA) of plans and programmes, including development plans. The aim of this Directive is to ensure the compatibility of all land use plans with the environmental and conservation aims identified at a European level. (Appendix 1 details how this report complies with the SEA Directive). The government has issued guidance on how to incorporate the two processes as referred to above. The scope of the process has been extended to include social and economic issues and has been designed so that by carrying out one appraisal process, local authorities can satisfy the requirements of both SA and the European SEA Directive. In this report, SA should be taken to mean SA incorporating SEA.

### 3.0 Purpose of the report

This report represents the SA of the final version of the Planning Obligations SPD. Its aim is to assess the SPD against social, environmental and economic objectives, and to set out the information on which the appraisal is based. Readers should refer back to the General Scoping Report published in September 2006 in order to gain a fuller understanding of the approach to SA the Council is taking for all of the documents in the LDF. The General Scoping Report contains much of the background work that has informed the appraisal of the Planning Obligations SPD and some of the requirements of the SEA have been met in that work. All documents are available on the Local Development Framework pages of the Herefordshire website.

- 3.1 The Planning Obligations SPD provides advice to developers and applicants for planning permission on the use of planning obligations particularly when implementing UDP policies. It provides the further guidance to policies, particularly Policy S2 (Development Requirements) and Policy DR5 (Planning Obligations).

**UDP Adopted March 2006**  
**S2 – Development Requirements**

The contribution that developments can make to a sustainable pattern of land use and development which respects the County's environmental resources will be secured by:

9. making use of planning conditions and planning obligations to further the strategy of the plan.

**DR5 – Planning Obligations**

To further the strategy of the Plan planning obligations will be sought to achieve community, transport and environmental benefits where these benefits are reasonable, necessary, relevant, and directly, fairly and reasonably related to the proposed development. The circumstances in which such benefits will be sought will be identified in relevant Plan policies and may be further detailed in supplementary planning documents.

- 3.2 Planning Obligations are a legal agreement between the planning authority and a developer and are entered into when granting planning applications. They are a method of securing contributions to address community and infrastructure needs associated with development, which would otherwise be deemed unacceptable in planning terms.

- 3.3 The overall objective of the SPD is: “that in the interests of sustainable development, it is reasonable to expect developers to contribute towards the financing of new or improved infrastructure directly related to new development proposals.”
- 3.4 The SPD clarifies when planning obligations would be negotiated and what benefits would be sought. It covers a range of topics including Affordable Housing, Accessibility, Transport and Movement, Community Facilities, Community Safety and Town Centres, Education Facilities, Leisure Facilities and Open Space, Biodiversity, Landscape, Waste and recycling.
- 3.5 The impact of the SPD will be monitored against the indicators as set out in Appendix 4. This will indicate to what extent the SPD is meeting its purpose and whether the policies need adjusting to more efficiently deliver its targets.

#### **4.0 Sustainability Objectives, Baseline and Context**

##### **4.1 UDP Policy Appraisal**

There is a requirement to appraise the base policy of an SPD to determine its sustainability impacts. The policies in the UDP underwent SA at the First, Revised Deposit and modification stages. It assessed the sustainability issues relating to the policies in a similar way, by setting out the effects of the policy on a number of sustainability objectives. Given the existence of this prior assessment and the fact that the policies cannot be altered at this stage of the plan making process, it was not deemed constructive to undertake a further assessment of these base policies. After a review of that appraisal, the SA of the Planning Obligations Supplementary Planning Document itself focused on assessing the effects of the SPD over and above the provisions of the policies, using the assessment criteria set out in the General Scoping Report for the LDF and the Subsidiary Scoping Report on Planning Obligations.

##### **4.2 Links to other strategies, plans and programmes and sustainability objectives**

The General Scoping Report contains a comprehensive review of all plans, strategies, guidance and legislation, which relate to sustainability. These documents range from international guidance and legislation at the highest level, through UK government policies and guidance, to corporate policies and strategies at the local level. They also include targets and objectives of regulatory and advisory organisations, e.g. Environment Agency. This information is set out in Appendix A1 of the General Scoping Report. Although all of the documents have implications for sustainability, not all of them are relevant to the preparation of the Planning Obligations SPD. Those plans and programmes, which are of particular relevance were extracted from the database and set out in the subsidiary Scoping Report for the SPD. A new document which has emerged since the Planning Obligations Scoping Report was published, is the Consultation report on Planning Gain Supplement (December 06), this document suggests further options for how planning gain supplement will be introduced, and mainly affects affordable housing and transport contributions. It is not considered to affect the draft Planning Obligations SPD. Another two documents which have recently been published are PPS3 and PPS 25, but neither of these documents are believed to have a significant impact on the sustainability appraisal of the draft Planning Obligations SPD.

##### **4.3 The social, environmental and economic baseline**

There are many sources of baseline information about the County covering a range of environmental, social and economic issues. As part of the preparation of the General Scoping Report, a wide variety of information relating to a number of different sustainability issues was collected. Most of this was presented at countywide level. This provided a broad overview of the key sustainability issues affecting the county as a whole in order to inform the preparation of the LDF. This information is set out in Appendix A2 of the General Scoping Report. As the SPD is of countywide relevance, it was not deemed necessary to collect any further baseline data relating to specific areas. This baseline information will be updated regularly.

#### 4.4 Key Sustainability Issues

The review of plans, policies and programmes (Task A1) and the collection of baseline data (Task A2) provides the basis for determining key sustainability issues which need to be considered as part of the production of the SPD. The SA provides a mechanism to assess the impact the SPD can have on addressing these issues. The review of plans and data outlined in the scoping report is not exhaustive but represents the Council's view on the information, which is most relevant to the SPD process. The identification of the key issues provides the basis for development of SA and SPD objectives to ensure that they are addressed as part of future policy making decisions.

**Figure 1: The key issues outlined within the Scoping Report include:**

Key Issue	Summary
Employment	Reduce and manage reliance on traditional employment sectors and ensure Herefordshire can attract business in technology and knowledge intensive sectors. Lower average wages than region or nation.
Skills	Lack of skilled workforce could affect investment potential and increase "commuting in" from other areas to bridge the skills gap.
Transport and Travel	High reliance on the private car Low usage of public transport Traffic Congestion
Ill-health	Ageing population Disparities in health geographically and demographically
Access to essential facilities	Many small rural settlements without access to health, education, employment, retail or recreational facilities and with little public transport availability Desire to get more public participation in decisions affecting community particularly by hard to reach groups such as young people and gypsy travellers.
Sustainable Regeneration	Strengthen vitality and viability Strengthen role they play as focus for community activity
Education	Improve educational attainment across all age groups Lack of university in district
Provision of Affordable Housing	High ratio of property price to household earnings Shortfall of provision of affordable dwellings / increase in number of people on Home Point register Decline in average household size Lifetime homes needed and greater range of size and mix of tenure. Provision of gypsy sites
Reduction in waste/increase in recycling	Recycling targets not being met Increase in the amount of waste to landfill over time Reduced capacity of current landfill sites
Biodiversity	Protect and enhance sites and species of national, regional and local importance and minimise loss of biodiversity
Energy Use	Promote zero carbon development through energy efficiency and renewable generation

Other key issues were subsequently considered of relevance as part of the appraisal and include: Built Environment, Crime / Fear of Crime, Water Usage, Climate Change and Flood Risk, Reducing Poverty and Social Inclusion. These also stem from the General Scoping Report (September 2006).

#### 4.5 SA Framework

This was identified in the Scoping Report of the Planning Obligations SPD. Subsequently, it was considered relevant to include all 20 objectives that were detailed in the General Scoping Report of the SA of the LDF (see Appendix A3 of that report).



## **5.0 Assessment of Significant Effects of the SPD**

### **5.1 Outcome of the SA process**

The Scoping Report stated that it was intended to appraise the options and then the SPD as a whole rather than appraising the individual elements of the guidance. The results of the appraisal, which assesses the expected outcomes of implementing the SPD against the other options and the impact of the whole plan against the SA framework sustainability objectives, are set out in the appendices to this report.

### **5.2 Appraisal Of Options**

The Council consulted on a number of policy options in preparing the SPD. In accordance with the ODPM's SA guidance, the options included the 'do nothing' option (Option 1), essentially resulting in a continuation of the existing UDP policies and related Supplementary Planning Guidance. Other Options were:

- extending the range of infrastructure for which planning obligations would be sought, but not quantifying the contributions (Option 2)
- quantifying the likely levels of contribution to be sought for particular types of infrastructure (Option 3); and
- applying a general tariff to all new developments (Option 4)

From an assessment of the Initial Consultation paper responses and emerging government guidance, it became apparent that the 'do nothing' approach was not a viable option. Option 2 was considered favourably but lacked transparency and consistency. Option 3 was viable and considered most suitable for Herefordshire in the light of existing development patterns and obligation procedures. In result a combination of options 2 and 3 has been favoured in the draft SPD.

Appraisal of Option 1 – 'do nothing' or continuation of existing policies, as set out in Appendix 2, identifies no true negative effects. However, positive effects are assessed against three of the sustainability objectives; the provision of affordable housing, access to essential facilities and transport and travel. In respect of the other objectives, the effect was assessed as 'neutral' or 'uncertain' in the absence of specific guidance on the role of planning obligations.

In contrast, the appraisal of Option 4 – the tariff approach is assessed as positive against all but a couple of the sustainability objectives.

It is apparent from the appraisal that both the preferred option (options 2 & 3) and Option 4 score significantly better than Option 1 – the "do nothing" approach. Option 4 scores marginally better than the preferred option in terms of the sustainability objectives, however, the risk factors inherent in Option 4 are considered to be significant factors to be weighed against the marginal benefits of the "roof tax" approach.

### **5.3 The Appraisal of the Objective of the SPD**

It is recognised that no development is 100% sustainable; however it is sometimes possible to remove or reduce any potentially negative impacts by certain mitigation measures. It is in fact the aim of the Planning Obligations SPD to address the impacts of development by securing the provision of community infrastructure. The specific objective of the preferred option is to secure contributions particularly (but not exclusively) for the topics listed in Part 3 of the SPD. Where relevant, planning obligations will also be required to provide appropriate compensation and/or mitigation wherever development would harm an environmental or community resource. The appraisal in Appendix 3 demonstrates that the objective of the SPD are compatible against the sustainability objectives as set out in the LDF SA Framework, with no negative effects being identified.

## **5.4 Significant social, environmental and economic effects of the SPD**

It is expected that the SPD will have an overall positive effect on matters such as open space, biodiversity, supply of affordable housing and sustainable transport as well as other matters the SPD seeks to address. It will do so by clarifying for applicants and developers what they can expect in terms of financial implications on planning obligations necessary for a particular development and thereby increasing the speed, transparency and efficiency of the planning process (see Appendix 4).

## **5.5 Uncertainty and Risks**

When assessing the SPD against most of the sustainability objectives there are obvious positive or negative effects and where there is such a precise effect this has been identified and explained in Appendix 4. However, the issue of uncertainty is a common theme in the SA process. The nature of the Planning Obligations SPD hopefully helps reduce uncertainty by providing specific guidance regarding the contributions that the Council would expect from typical forms of development. Since the need for planning obligations has to be considered on a case-by-case basis, not all development proposals may give rise to them; conversely, certain types of development may, perhaps because of size or complexity, create impacts that give rise to more extensive obligations than are set out in the guidance. It is therefore more difficult to predict the scale of the effects on the sustainability objectives and indicators.

## **5.6 Mitigation**

Although the appraisal has not demonstrated any significant negative effects on the sustainability objectives it should be noted that the SPD can only give general guidance and may not identify specific mitigation measures required to deal with the impacts of particular developments. Other measures may be sought through more detailed policies or proposals or through the consideration of individual planning applications.

## **6.0 Further Work**

6.1 This final SA report will be published to coincide with publication of the adopted SPD. The initial aim of the SA process is to ensure that the Planning Obligations SPD is sound in meeting social, environmental and economic sustainability objectives. The Planning Obligations SPD will form part of the Herefordshire Local Development Framework. It will be used in conjunction with the Unitary Development Plan in determining planning applications and the assessment of the impact of development. The use of the SPD will provide a clear, transparent approach, early in the development process ensuring that any adverse impacts of development are mitigated against and that development meets the sustainability objectives of the UDP and emerging LDF.

## **6.2 Monitoring**

It is anticipated that a monitoring officer will track compliance of each obligation in an agreement as the development proceeds. All agreements/undertakings will be monitored through the use of a Planning Obligations database. An Annual Report on planning obligations will be produced detailing the status and the use of planning agreements, monies received and spent, works carried out and future priorities. This will form part of the Corporate Plan process within the Council and the Scrutiny Committee will also consider the Report. The planning obligation database will also refer to the UDP policies used in determining the application. This can then be used for monitoring the policies of the UDP in appraising their effectiveness in working towards sustainable development and referred to in the UDP Annual Monitoring Report. The sustainability or otherwise of the SPD will be reviewed through an annual review of the objectives, indicators and targets detailed in Appendix 4.

**Appendix 1 – Compliance with the requirements for the environmental report under the SEA Directive**

<b>Information to be included in an Environmental Report under SEA Regulations</b>	<b>Relevant Sections in the SA Report</b>
An outline of the Contents, main objectives of the plan and its relationship with other relevant plans and programmes.	Section 3 and 4
The relevant aspects of the current state of the environment and the likely evolution thereof without implementation of the plan.	Appendix 2
The environmental characteristics of areas likely to be significantly affected.	4.3 and 4.4
Any existing environmental problems which are relevant to the plan, including in particular, those relating to any areas of a particular environmental importance, such as areas designated pursuant to Directives 79/409/EEC and 92/43/EEC.	4.4
The environmental protection objectives, established at International community or national level, which are relevant to the plan and the way those objectives and any environmental considerations have been taken into account during its preparation.	4.2 and 4.3
The likely significant effects on the environment, including on issues such as biodiversity, population, human health, fauna, flora, soil, water, air, climatic factors, material assets, cultural heritage, landscape and the interrelationship between the above factors.	4.4 and Appendix 4
The measures envisaged to prevent, reduce and as fully as possible offset any significant adverse effects on the environment of implementing the plan.	5.6 and Appendix 4
An outline of the reasons for selecting the alternatives dealt with and a description of how the assessment was undertaken including any difficulties.	5.1, 5.2 and 5.3
A description of monitoring measures.	6.2
A non-technical summary of the information in the SA 1.0	A1 – A7, Figure A1.

## Appendix 2 – Comparison of Options

SA Objective	Option 1	Option 2 and 3	Option 4
Employment	Would not address the need for small business/ starter units, training or business support.	Contributions could provide small business/ starter units and business support programmes.	Would encourage inward investment.
Skills	No specific requirements for training, college etc.	No specific requirements for training, college etc.	Requirements can be provided for training centres.
Sustainable Economy and Continued investment	No specific requirements currently	Low thresholds and high contributions could deter economic growth	Unsure as to the effect
Transport & Travel	Some contributions would be given to sustainable transport infrastructure, although only in specific areas.	Would result in contributions to sustainable transport infrastructures in all areas and improvements to road infrastructure.	Would provide contributions to sustainable transport infrastructure.
Ill-Health	Effects on health would be uncertain.	Formulae could be established.	Would provide contributions to health and well being.
Access to essential facilities	A degree of community facilities would be provided. However, it would not generally address community safety.	Community safety would increase and an increase in provision of community facilities, ie community buildings/ infrastructure.	A range of community facilities could be provided.
Sustainable Regeneration	Effects would be uncertain on the whole. However, limited provisions would be provided through current practice.	Provisions can be made where needed for enhancement and protection.	Unsure as to the effect.
Education	Current adhoc system would continue	Provide more certainty to the provision of school places and educational facilities.	Would encourage higher and further education provision.
Provision of affordable housing	There would be some provision of affordable housing, which would follow the 35% policy currently used.	Existing policy would continue to be used, however to ensure affordability no contributions will be sought from the affordable units on the site.	Affordable housing would be provided in tariff system.

Reduction in Waste / recycling	No particular criteria would be met due to no specific guidance available.	More provisions would be made to waste and recycling provisions.	Contribution would be made towards waste/recycling facilities.
Landscaping and Biodiversity	Effects would be dependable upon location and type of proposals coming forward.	Effects on biodiversity are dependant on the location and type of proposals coming forward. Additional benefits for AONB's.	Effects on biodiversity are dependant on the location and type of proposals coming forward.
Energy use	Uncertain as to the effect.	Formulae would be established	Uncertain Impact
Climate Change and Flood Risk	No provision currently allowed.	More provision could be provided depending on proposals coming forward.	More provision could be provided depending on proposals coming forward.
Social Inclusion and Reducing Poverty	Uncertain as to the effects	A more pro-active approach to community facilities would enhance community identity/reduce social deprivation.	Would reduce social deprivation and enhance community identity.
Heritage, Archaeology and Built Environment	Uncertain of the effects.	Contributions will be made towards public realm, landscaping and public art to improve and maintain our local heritage.	Better provision towards public art and landscaping to maintain local heritage and protect archaeological sites.
Crime and Fear of Crime	No provision currently provided	Would encourage contributions towards CCTV provision and other security measures	Would encourage contributions towards CCTV provision
Natural Resources	Effects would be dependable as to the location and type of proposals coming forward	Increase in development on existing brown field land	
Balanced Land Use	Density levels would be in accordance to current policies	Existing policy would continue to be used, with improvements to the Sustainable Transport infrastructure	Density level targets would be reached
Reduce the risk of flooding and the resulting detriment	Effects would be dependable upon location and type of proposals coming forward.	More provisions would be provided, especially in areas of greatest need.	Uncertain as to the full impact
Pollution	Uncertain as to the effects	Improvements to water quality and air quality	Uncertain as to the full impact

### Appendix 3 –Testing Plan Objectives against SA Objectives

Plan: Planning Obligations Supplementary Planning Document

Plan Objective: To expect development to contribute towards the financing of new or improved infrastructure, directly related to and necessary for new development proposals, in the interests of sustainable development.

SA Objective	Possible Effect (please tick)			Explanation – Contributions towards	Mitigation and Enhancement
	Positive	Negative	Neutral		
To support, maintain or enhance the provision of high quality, local or easily accessible employment opportunities, suited to the changing needs of the local workforce	✓			Better employment facilities may be provided, as well as transport links.	
Secure a more adaptable and higher skilled workforce		✓		No request for contributions to skills development	
Maintain or enhance conditions that enable a sustainable economy and continued investment	✓			More smaller businesses may be encouraged to the County, improvements to local infrastructure	
Reduce road traffic and congestion, pollution and accidents and improve health through physical activity by increasing the proportion of journeys made by public transport, cycling and walking	✓			Improvements in road infrastructure, public transport, pedestrian & cyclist facilities, pedestrian crossings, traffic calming schemes etc...	
Improve the health of the people of Herefordshire, reduce disparities in health geographically and demographically and encourage healthy living for all	✓			More health services may be provided. Encourage better links.	
Improve equality of access to and engagement in quality cultural, educational, leisure, sporting, recreational and community activities for all	✓			More services may be provided. Improve current services.	
Sustainable Regeneration	✓			Improvements to city centre and town.	
Raise educational achievement levels across the County	✓			Provision of required school places/improved facilities	
Reduce and prevent crime/fear of crime and antisocial behaviour in the County	✓			Improve security / CCTV	
Provide everyone with the opportunity to live in good quality, affordable housing of the right type and tenure, in clean, safe and pleasant local environments	✓			Provide affordable housing as part of new development.	
Reduce the amount of waste requiring disposal and minimise the use of non-reusable materials and encourage recycling	✓			Improve waste disposal, recycling centres.	
Value, maintain, restore and expand county biodiversity	✓			Biodiversity enhancement, enhance landscape surrounding development	
Use natural resources more efficiently	✓			Provide renewable sources of energy or restrict use through design techniques.	
Value, protect, enhance and restore the landscape quality of Herefordshire, including its rural areas and open spaces	✓			Protect and enhance open spaces. Provide new open spaces.	
Reduce Herefordshire's vulnerability to the impacts of climate change as well as its contribution to the problem	✓			More funding towards sustainable modes of transport, flood risk reduction.	
Minimise local and global pollution and protect or enhance environmental resources.	✓			Improve public transport, more sustainable modes of transport, better infrastructure.	
Ensure integrated, efficient and balanced land use	✓			New community facilities may be provided following development of housing.	

Value, protect and enhance the character and built quality of settlements and neighbourhoods and the County's historic environment and cultural heritage	✓					Better infrastructure, services provided and provide protection to historic heritage.	
Reduce the risk of flooding and the resulting detriment to public well-being, the economy and the environment	✓					Provide more adequate defences	
Reduce poverty and promote equality, social inclusion by closing the gap between the most deprived areas in the County and the rest of the County	✓					Affordable housing, community facilities	

## Appendix 4 – Predicting and evaluating the impacts of the whole SPD

**Key: - 2 = major negative, -1 = minor negative, 0 =neutral, 1 = minor positive, 2 = major positive, ? = unknown**

SA Objective and Appraisal Questions	Assessment of Effect (-2,-1,0,1,2,?)	Explanation of Assessment	Indicators	Target
<b>01 To support, maintain or enhance the provision of high quality, local or easily accessible employment opportunities, suited to the changing needs of the local workforce</b>				
1.1 Will it maintain or increase current employment rates in knowledge and technology intensive sectors?	+1	Contributions may support new employment opportunities.	Number employed in knowledge and technology intensive industries	Increase the number of people employed in intensive industries from 9339 to 10,286 by 2007/8
1.2 Will it provide flexible employment land near to the workforce or provide opportunities easily accessible by public transport?	+1	Possible impact in Edgar Street Grid.	Employment land developed by type	
1.3 Will it encourage fair and decent work conditions and increase median weekly earnings?	0		Average level of earnings compared to the West Midlands region	Close the gap between Herefordshire and the rest of the West Midlands and nationally
1.4 Will it help to increase diversity of job opportunities?	+1	Contributions would support the development of new employment.	Employment by sector	
<b>02 Secure a more adaptable and higher skilled workforce</b>				
2.1 Will it provide or facilitate through investment appropriate training and learning to help build, attract and retain a highly skilled workforce that meets existing and future needs?	0	Contributions to training deleted	Number of 16-19 year olds in education or training	
2.2 Will it reduce inequalities in skills across the county?	0	Contributions to training deleted	Percentage of adults without basic numeracy/literacy skills	By 2010 reduce the proportion of adults with low basic skills from 17% to 10%
<b>03 Maintain or enhance conditions that enable a sustainable economy and continued investment</b>				
3.1 Will it improve the resilience and/or diversity of business and the economy?	0	Contributions to training deleted	GVA per head	To raise GVA per head above the national average (RSS)



3.2 Will it provide or facilitate availability of appropriate sites and properties for new business opportunities or growth whilst using natural resources efficiently?	+1	Provide employment sites and new business opportunities on the Edgar Street Grid for example.	Amount/area of land available for development
3.3 Will it encourage and support a culture of enterprise and innovation, including social enterprise or the voluntary sector?	0		
3.4 Will it encourage corporate social and environmental responsibility, with county organisations leading by example?	0		
<b>04 Reduce road traffic and congestion, pollution and accidents and improve health through physical activity by increasing the proportion of journeys made by public transport, cycling and walking</b>			
4.1 Will it reduce the need to travel?	+1	Improved pedestrian/cycle links. Improved public transport / transport infrastructure	
4.2 Will it promote more sustainable transport patterns in areas suffering from congestion?	+2	Improved road network, transport technologies especially around new developments, e.g. Edgar Street Grid.	Change in annual average daily traffic volumes in Hereford and on the principle road network
4.3 Will it improve the quality and/or provision of integrated transport options in areas of need and that are accessible to all?	+1	Improvement to disabled access and routes to be used by disabled. Improve cycle routes and pedestrianisation.	Public transport patronage volumes
4.4 Will it increase the use of public transport, cycling and walking?	+2	Better provision of footpaths, cycle ways and public transport.	Percentage of resident population that travels to work by public transport, on foot or on cycle
4.5 Will it secure the implementation of green travel plans?	+1	Contributions will be made to go towards green travel plans.	Travel Plan coverage
4.6 Will it minimise risks associated with car travel?	+1	Improvements to road network and junction should improve safety.	No. of people killed or seriously injured on Herefordshire's roads
<b>05 Improve the health of the people of Herefordshire, reduce disparities in health geographically and demographically and encourage healthy living for all</b>			
5.1 Will it help to ensure there is adequate provision of healthcare services appropriate to local needs, which are accessible by sustainable modes of transport?	0	Contributions towards health need further development in future review infrastructures. Need to establish formulae.	Percentage of households in rural towns, villages and dispersed areas from key services
5.2 Will it help to reduce inequalities in health?	0	Contributions towards health need further development in future review.	Life expectancy in males and females

5.3 Will it encourage healthy lifestyles? E.g. reducing car use and maintaining or enhancing access to physical sports, green space, and recreation?	+2	Provision of open space facilities and sustainable transport infrastructure.	Measures of healthy lifestyles, e.g. physical activity, smoking rates, etc	Reduce smoking rate in 11-15yr olds by 50% from 1998 by 2010
<b>06 Improve equality of access to and engagement in quality cultural, educational, leisure, sporting, recreational and community activities for all</b>				
6.1 Will it maintain or increase the type or quality of facilities in areas where there is need, ensuring easy and equitable access by sustainable modes of transport?	+2	Open space facilities, community, education and leisure.	Quality of open spaces % of population within 20 mins travel time of a range of 3 sports facility types	
6.2 Will it promote Herefordshire's facilities to local people and tourists encouraging participation by all?	0		Percentage of residents using authority's cultural and leisure facilities	
6.3 Will it promote the use of inland waterways for leisure, recreation, telecommunication, freight transport and/or as a catalyst for urban and rural regeneration?	+1	Edgar Street Grid.	Number of regeneration projects	
<b>07 Sustainable Regeneration</b>				
7.1 Will it support viability or develop services and facilities appropriate to the community, function, character and scale of the centre and existing facilities using sustainable, resource- efficient designs?	+1	Edgar Street Grid.	Commercial yields	
7.2 Will it help create an appropriate range of independent, competitive and national retailers?	0			
7.3 Will it help reduce the number of vacant properties and support vitality?	0		Vacancy rate of Hereford and the Market Town premises	
7.4 Will it support or create high quality public realm and community/amenity space that is safe and encourages positive community interaction?	+2	Improvements to landscaping, public space, crime prevention etc.	Planning Obligations received towards improvements to town centres e.g. CCTV	
<b>08 Raise educational achievement levels across the County</b>				
8.1 Will it ensure that education infrastructure meets projected future demand and need?	+2	Contributions towards school places, including pre-school child care provision	Percentage of pupils achieving 5+ GCSE's or equivalent at grades A* - C	Increase from 93% to 95% by 2008
<b>09 Reduce and prevent crime/fear of crime and antisocial behaviour in the County</b>				
9.1 Will it enhance safety, security and reduce crime or fear of crime and anti-social behaviour?	+2	Increase in crime prevention through use of CCTV's. Designing out crime.	Violent crimes per 1000 population	Decrease from 2844 to 2533

9.2 Will it help improve quality of life and address the opportunity for crime or anti-social behaviour through design measures?	+1	Increase in crime prevention through use of CCTV's. Designing out crime.	Number of planning applications addressing "designing Out Crime" issues	
9.3 Will it encourage respect for people and property?	0	Unknown	Percentage of people satisfied with their community as a place to live	Increase proportion of adults satisfied with their community as a place to live
<b>10 Reduce poverty and promote equality and social inclusion</b>				
10.1 Will it ensure easy and equitable access to and provision of services and opportunities, including jobs and learning, and avoid negative impacts on different groups of people because of their ethnicity, gender, religion, disability, sexuality or age?	0		Percentage of Herefordshire households in rural towns, villages and dispersed areas from key services	
10.2 Will it enable the involvement of all affected parties, including hard to reach groups?	+1	Through consultation.	No. of applications involving Statements of Community Involvement	
10.3 Will it promote equality, fairness and respect for people and the environment?	+1	Town centre improvements.	Percentage of Herefordshire households in rural towns, villages and dispersed areas from key services	
10.4 Will it address poverty and disadvantage, taking into account the particular difficulties of those facing multiple disadvantages?	+1	Affordable housing provision	Percentage of population who live in areas that rank within the most deprived 20% of most deprived areas in the county	
<b>11 Provide everyone with the opportunity to live in good quality, affordable housing of the right type and tenure, in clean, safe and pleasant local environments</b>				
11.1 Will it increase access to good quality housing meeting people's needs? E.g. tenure, aspirations, location, affordability, size and type, accessible to disabled people?	+2	Direct impact in terms of policy already exists, but promoted in SPD	Average property price against median weekly earnings	
11.2 Will it increase the supply of affordable housing?	+1	Policy already exists but promoted in SPD.	Number of affordable housing provided in the County each year as a percentage of all new completions	2300 to be provided up to 2011 (UDP)
11.3 Will it reduce the percentage of unfit homes / empty homes?	0		Number of unfit and borderline unfit homes	

11.4	Will it improve the energy and resource efficiency of homes and reduce fuel poverty and ill health?	+1	Positively promoted in SPD.		Energy efficiency for Decent Homes	Raise to current Building Regulations
11.5	Will it increase the use of sustainable design techniques , improve the quality of housing and use sustainable building materials in construction?	0	To be addressed through Core Strategy DPD			
11.6	Will it improve the wider built environment and sense of place?	+1	Town centre improvements and provision of open space			
<b>12 Reduce the amount of waste requiring disposal and minimise the use of non-reusable materials and encourage recycling</b>						
12.1	Will it minimise the use of non re-usable materials?	+1	Waste and Recycling section			
12.2	Will it minimise waste from households, businesses etc including hazardous waste?	+2	Provides adequate facilities for storage and collection of waste/recycling at each dwelling and sink waste disposal units.		Amount of household waste collected per person per annum	Limit increase p.a. to 530.87kg per head
12.3	Will it promote re-use, recovery and recycling of waste?	+2	Actively encourages the recycling of waste.		Amount/percentage of all household waste that is recycled	
12.4	Will it deal with waste locally and/or through the best Practical Environmental Option?	0	Not covered in the SPD.		Number and location of recycling sites	
<b>13 Value, maintain, restore and expand county biodiversity</b>						
13.1	Will it protect or enhance habitats of international, national, regional or local importance – is an Appropriate Assessment required?	0	AA not required		No., area and condition of international, national, regional and locally designated sites	To halt the loss of biodiversity by 2010
13.2	Will it protect international, national, regional or locally important terrestrial or aquatic species?	0	Covered by UDP policies.		Changes in area and population of protected species	By 2010 achieve a sustained increase in the regional wild bird population
13.3	Will it maintain wildlife corridors and minimise fragmentation of ecological areas and green spaces?	+1	Covered by UDP policies, but promoted in SPD		No net change in length of hedgerows	
13.4	Will it manage sites in a way that protects or enhances their nature conservation value?	+1	Through contributions towards enhancements.		Percentage of Biodiversity Action Plan habitats restored and created	
13.5	Will it create new appropriate habitats?	+1	Promoted in SPD		No. of Planning Obligations entered into securing new wildlife areas	

<b>14 Use natural resources and energy more efficiently</b>					
14.1 Will it maximise energy efficiency and minimise the consumption of non-renewable energy i.e. from fossil fuels?	0	Will form basis of separate guidance in emerging LDF.	Energy consumption per capita	30% reduction in energy consumption by 2011	
14.2 Will it minimise the consumption of water, land, soil, minerals, aggregates and other raw materials by all? E.g. through integrated transport, sustainable design, local supply chains. ( <i>During the appraisal, each of these resources should be considered separately</i> )	Water 0 Land +1 Soil 0 Minerals etc 0	Land – covered under transport.	Percentage of homes built on previously developed land	68% of new dwellings to be built on previously developed land (RSS 2004)	
14.3 Will it encourage the re-use/enhancement of existing buildings and minimise the need for new build?	0	Not covered in the SPD.	No. of empty homes brought back into use		
<b>15 Value, protect and enhance the landscape quality of Herefordshire, including its rural areas and open spaces</b>					
15.1 Will it value, enhance and protect natural environmental assets? E.g. AONBs, parks and open spaces	+1	Contributions may be pooled to enable distribution towards AONB management plans	Number and area of designated landscapes		
15.2 Will it encourage local stewardship of local environments, e.g. by promoting best practices in agricultural management?	0				
15.3 Will it ensure that environmental impacts caused by mineral operations and the transport of minerals are minimised?	0		No. of applications for mineral operations requiring EIA		
15.4 Will it promote the use of rural areas and open space by all, encourage easy non-car based access and accommodate the needs of disabled users?	0		Percentage of Public rights of Way network that is easy to use and clearly signed		
<b>16 Reduce Herefordshire's vulnerability to the impacts of climate change as well as its contribution to the problem</b>					
16.1 Will it reduce the county's contribution to climate change by reducing greenhouse gas emissions from transport, domestic, commercial and industrial sources?	+1	Sustainable transport contributions	Co2 emissions per head per year	Reduce carbon emissions per head from baseline of 14.5 tonnes to 11.25 tonnes per head	
16.2 Will it increase the proportion of energy generated from renewable and low carbon sources including by micro-generation, Combined Heat and Power (CHP), district heating and in transportation?	0	Not directly covered in SPD	Renewable electricity and CHP generated as percentage of total electricity	Renewables should supply 10% of electricity by 2020	
<b>17 Reduce the risk of flooding and the resulting detriment to public well being, the economy and the environment</b>					
17.1 Will it reduce flood risk both presently and taking into account climate change?	+1	Flood defence schemes will be implemented through contributions			

17.2 Will it prevent inappropriate development of the floodplain and include flood protection systems?	+1	Off site infrastructure works will be required.	No. of planning permissions granted contrary to the advice of the Environment Agency on flood defence grounds	
17.3 Will it promote sustainable urban drainage systems where appropriate?	+1	The disposal of surface water will be a material consideration.	No. of additional developments granted planning permissions with SUDs incorporated	
<b>18 Minimise local and global pollution and protect or enhance environmental resources</b>				
18.1 Will it minimise water, air, soil, groundwater, noise and light pollution from current activities and the potential for such pollution?	+1	Contaminated land and flooding.	Annual levels of particles and ozone tranquility (CPRE)	
18.2 Will it protect and enhance the quality of watercourses?	+1	Through sustainable urban drainage and improvements to contaminated land.	Water Quality	All inland waters to reach good ecological and chemical status by 2015
18.3 Will it provide opportunities to improve soil quality or reduce contaminated land?	+1	Direct benefits.	No. of known sites affected by contamination	
18.4 Will it help achieve the objectives of Air Quality Management Plans?	+1	Through direct mitigation measures sustainable transport options.	No./percentage population living within Air Quality Management Areas	
18.5 Will it encourage the use of clean technologies and water minimisation ?	0		No. of businesses with Environmental Statement ISO 14001/EMAS accreditation	
<b>19 Ensure integrated, efficient and balanced land use</b>				
19.1 Will it ensure new developments are in appropriate locations, optimising the use of previously developed land and buildings and are accessible by walking, cycling or sustainable transport and/or will increase the share of these transport modes?	+2	Improvements to public transport, road networks, cycle paths and footpaths.	Access to key services	

<p>19.2 Will it encourage an appropriate density and mix of uses using sustainable resource efficient design?</p>	<p>0</p>		<p>Percentage of new dwellings completed at: less than 30 dwelling per hectare, Between 30 and 50 dwellings per hectare and over 50 dwellings per hectare</p>	<p>30-70 dwellings per hectare (PPG3, 2000)</p>
<p>19.3 Will it promote ways of meeting local needs locally by encouraging local sourcing of food, goods and materials?</p>	<p>0</p>			
<p><b>20 Value, protect and enhance the built quality of settlements and neighbourhoods and the County's historic environment and cultural heritage</b></p>				
<p>20.1 Will it preserve, protect and enhance Conservation Areas, Listed Buildings, archaeological remains and other sites and areas of historical heritage and cultural value?</p>	<p>+1</p>	<p>Mainly covered under UDP, but restoration works to listed buildings maybe affected, and the undertaking of archaeological work and recording of remains.</p>		
<p>20.2 Will it prevent development which is inappropriate in scale, form or design to its setting or to its function or local area?</p>	<p>0</p>		<p>No. of applications refused for scale, form or design reasons</p>	
<p>20.3 Will it encourage development that creates and sustains well-designed, high quality built environments that incorporate green space, encourage biodiversity and promote local distinctiveness and sense of place?</p>	<p>+1</p>	<p>Open spaces will be provided along with development.</p>		
<p>20.4 Will it encourage cleanliness and/or improve the general appearance of the area?</p>	<p>0</p>		<p>Public satisfaction surveys</p>	





# **ASSESSMENTS OF 18 – 64 YEAR-OLDS' FUTURE NEEDS AND SERVICES: MENTAL HEALTH AND PHYSICAL DISABILITIES**

## **PROGRAMME AREA RESPONSIBILITY: SOCIAL CARE ADULTS AND HEALTH**

**CABINET**

**24 JANUARY 2008**

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### **Wards Affected**

County-wide

### **Purpose**

To make proposals for the development of high-performing health and social care services by 2012 to meet the expected future needs of 18-64 year-olds in Herefordshire with mental health problems and physical disabilities.

### **Key Decision**

This is a Key Decision because it is likely to be significant in terms of its effect on communities living or working in Herefordshire in an area comprising one or more wards.

It was not included in the Forward Plan, however inclusion in the agenda gives the required notice in accordance with Section 15 of the Local Authorities (Executive Arrangements) (Access to Information) Regulations 2000.

### **Recommendation**

#### **THAT**

- (a) the proposed patterns of high-performing mental health and physical disability services be approved and put in place between April 2008 and March 2012;**
- (b) it be achieved by means of detailed joint commissioning plans of the Council and the Herefordshire Primary Care Trust; and**
- (c) it be taken into account in setting budgets for future years.**

### **Reasons**

Notwithstanding additional investment in recent years and some improvements, in important respects Herefordshire's services for mental health and physical disability are not performing as well or as efficiently as those in a number of comparable parts of the country; neither do they provide a sound or sustainable basis for meeting future needs.

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Further information on the subject of this report is available from  
Steve Martin, Corporate Policy and Research Manager on 01432 261877

## Considerations

1. To provide a sound basis for the continuous improvement of adult health and social care services in the county, a programme of assessments of future needs and the patterns of efficient and effective services required to meet them has been carried out with the Herefordshire Primary Care Trust (PCT) over the past two years. Last year Cabinet approved the recommendations of assessments in respect of older people and adults with learning disabilities, which are now being implemented.
2. The suite of assessments has now been completed with those in respect of 18-64 year-olds with mental health problems and physical disabilities. The completed assessments are attached at appendices 1 and 6. Each begins with a short summary.
3. In respect of **mental health**, no significant increase in demand is expected by 2012 from those with the most serious disorders, such as schizophrenia, or those with the most common disorders, such as depression. However, there may be a need for some more services for those with eating or personality disorders. The nature and extent of these cannot be determined until some time in 2008; in the case of eating disorders in the light of the findings from a piloting of local services in the County, which is currently taking place; and, in the case of personality disorders, until the Government publishes promised guidance.
4. Although no significant increase in the needs of those with either the most serious or most common mental disorders is expected over the medium-term, the pattern of services needs to change significantly. In particular, there is a need to rely much less on residential and nursing home placements, including out-of-county; to provide much more support for people in their own homes and communities; and to give users and carers considerably more clout in the planning and delivery of services.
5. In respect of **physical disabilities**, an increase of some 5% is expected by 2012 in the number of people needing services. This is largely because the prevalence of some physical disabilities increases with age and the number of people aged 55-64 will increase as that of younger age groups decreases.
6. Once again, the pattern of services needs to change significantly; and, again, the core changes are to make much less use of residential and out-of-county provision; to do a lot more to enable people to live as independently as possible in their own homes and communities; and to give users and carers a good deal more influence in the planning and delivery of services..
7. In respect of **both mental health and physical disability**, it will be important to:
  - (i) conduct a further review of needs and services by 2012 in light of better data and of actual demand for modernised services;
  - (ii) integrate the joint commissioning plans with the management of in-year overspending against budget;
  - (iii) maximise the contribution of GP commissioning;
  - (iv) be prepared to adjust the balance of social care and health funding within pooled budgets to achieve shared commissioning targets for users, with the balance of the respective funding contributions of the Council and the PCT to be negotiated as part of the development of the joint commissioning plans;
  - (v) work with the third sector to mobilise voluntary and community resources; and

- (vi) ensure, through an associated programme of organisational development, that those managing and providing care have the right skills, behaviours and shared systems to deliver the modernised services successfully.
- 8. The arrangements for funding and accounting for joint expenditure to deliver the changes by means of joint commissioning plans will be made under the powers in Section 75 of the National Health Service Act 2006. There are no other legal implications.
- 9. The Joint Health and Social Care Commissioning Board of the Council and PCT has considered the assessments and agreed that improved services should be developed along the recommended lines. We are advised that no further approval is required from the PCT until such time as the detailed commissioning plans to give effect to the assessments, together with associated proposals for expenditure, have been prepared.

## **Financial implications**

### ***Mental health***

Bearing in mind the apparently higher number of people with serious mental disorders in Herefordshire than would be expected on the basis of national prevalence, and with Herefordshire's combined health and social care unit costs higher than the comparator authorities but lower than those for England as a whole, the assessment recommends that the total PCT and Council spending in 2006-07, maintained in real terms, is the minimum necessary recurrent funding. This includes the £1.3 million overspending against budgets. It is important to note that the level of over-spend against the mental health budget will need to be managed in the context of the overall cash allocation agreed for adult social care for 2008/09 and beyond when Council approves the budget in March 2008. The draft financial strategy allocates additional cash resources to social care services compared to other services in line with corporate priorities. Financial capacity needs to be supplemented with increased external funding, for example where even greater use could be made within the eligibility criteria of the national *Supporting People* programme.

The assessment suggests that non-recurrent bridging finance, peaking at £300K a year, will be needed to help develop the new services before existing services that will not be required in the future can be de-commissioned.

It also suggests that, depending on their nature and extent, it *may* be possible to provide any additional services for those with personality disorders from within these totals. That will need to be determined during 2008, in the light of the additional information that should become available, which is described in paragraph 3 above.

### ***Physical disability***

The current gross cost of social care services to the Council is about 12% higher per head of population than the average of the comparator authorities, although the difference is small compared with Shropshire, which is the closest comparator in terms of its demographic and geographical characteristics. Where Herefordshire differs from Shropshire is in raising only about half as much income from external sources, such as the *Supporting people* programme.

Considering together the expected 5% growth in the need for services, the additional costs arising from Herefordshire's uniquely high proportion of people living in sparsely populated areas, inefficiencies in the current pattern of services, and on the basis that Herefordshire

should be capable of generating proportionately equivalent levels of external funding as those achieved by Shropshire, it would seem reasonable to conclude that the aggregate level of spending by the Council in 2006-07 will be needed recurrently until 2012.

The assessment suggests that non-recurrent bridging finance, peaking at £250K a year, will be needed to help develop the new social care services before existing services that will not be required in the future can be de-commissioned.

It goes on to suggest that annual social care savings of some £209K should be possible by 2012-13.

As a result of the way in which information about health care services and expenditure has been required to be collected up to now, there is no ready basis for establishing and comparing the current level of spending on physical disability services by the Herefordshire PCT. But there can be no doubt that it makes, and will need to continue to make, a major contribution, not least in helping people to manage long-term chronic conditions. More work will have to be done to establish the current position as part of the production of the joint commissioning plan to be developed together by the Council and the PCT to bring about the improved pattern of services. Pending that, the assessment assumes that at least the current level of PCT funding will be maintained, in real terms.

### ***Proposed financial provision***

The draft financial management strategy that Cabinet will be asked to consider in January 2008 includes an additional £275k modernisation funding for adult social care services in 2008/09 rising to £550k in 2009/10. If agreed, this figure would remain in the base budget for 2010/2011 but be reviewed during the course of future revisions of the financial strategy in the light of the negotiations with the PCT as the joint commissioning plans to implement the improvements are developed, the potential for future savings once the new patterns of services are established and progress with de-commissioning existing services.

## **Risk Management**

There are two principal risks: that the improvements will not be achieved because of inadequate capacity to plan and deliver them; and that the actual demand for services will exceed the levels of future need identified in the assessment.

There are three main capacity issues: money, people and systems.

The financial elements are addressed in the preceding part of this paper; only *non-recurrent* additional health and social care resources, peaking at some £550K a year, will be needed, although the situation as regards the costs of future services for people with eating or personality disorders will need to be reviewed in 2008.

Capacity to manage and deliver major changes has already been improved significantly in Adult Social Care, with the appointment of an additional interim head of service, a change manager and additional contracting and other staff. The development of joint commissioning structures and processes between the Council and the PCT will strengthen capacity further.

Linked and shared systems and procedures, enabled by ICT, in respect of service users and financial and other data are already proposed as part of the *Herefordshire Connects* programme. The health and social care aspects of this will continue to need high priority.

As regards levels of need, it will be important to keep these under review in the light of changing circumstances and the actual levels of demand for modernised services; hence the

proposal above that needs should be further reviewed by 2012.

## **Alternative Options**

The Council's current 1\* Commission for Social Care Inspectorate rating for Adult Social Care and the PCT's "Fair" services rating from the Health Care Commission constrain alternative options. In short, unless services are modernised and significantly improved, those ratings would be likely to deteriorate, with damaging consequences for the reputation of both bodies. This would be happening at the same time as the Council and the PCT would be seeking to make a success of closer joint working, under a single Chief Executive, in terms of better services and outcomes for users.

Making the changes over a longer time-span would be a false economy, since not only would costly, inefficient and ineffective elements of services continue for longer but also there would be a danger that a lengthier period of inadequately developed local services would result in even greater use of inappropriate residential and out-of-county care and, therefore, even greater spending pressure against budgets.

There are, therefore, no alternative options.

## **Consultees**

The assessments have been developed taking account of the views of users and carers expressed at specially organised events. These views are summarised in the assessments.

The steering group for the assessments included service managers and staff from the PCT and the Council, as well as two senior people from the third sector with considerable expertise in mental health and physical disabilities. The details are in the second appendix.

The steering group was advised, and the assessments quality-assured, by two distinguished national experts. Their details are in the third appendix.

## **Appendices**

*Appendix 1: Future needs and services for 18-64 year-olds in Herefordshire with mental health problems*

*Appendix 2: Membership of the Adult Care Assessment Steering Group 2007*

*Appendix 3: Adult Social Care Assessment Report – The Expert Advisers*

*Appendix 4: Needs Analysis: Adults with Mental Health Problems*

*Appendix 5: Current and Future Services for Adults with Mental Health Problems*

*Appendix 6: Future care needs and services for 18-64 year-olds in Herefordshire with physical disabilities*

*Appendix 7: Needs Analysis: Adults with Physical Disabilities*

*Appendix 8: Current and Future Services for Adults with Physical Disabilities*

## **Background Papers**

None identified



# **Future needs and services for 18 – 64 year-olds in Herefordshire with mental health problems**

November 2007

**Herefordshire Council Corporate Policy and Research Team**  
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**Contents**

	Page
Summary	3
Section 1 - Introduction	6
Section 2 - Assessment of future care needs	9
Section 3 - The pattern and levels of services to meet needs in 2012	12
Section 4 - The capacity needed to deliver the improvements	18
Section 5 - The costs	25
<b>Appendices</b>	
Appendix 1 – Membership of the Steering Committee	
Appendix 2 – Details about the expert consultants	
Appendix 3 – Needs analysis	
Appendix 4 – Present and future services	



***Final report: future care needs and services for 18-64 year-olds with mental health problems***

**Summary**

Working together and with their partners, Herefordshire Council and the Herefordshire Primary Care Trust are committed to maximising the independence, well-being and choice of people with mental health problems. In doing this, they face a major double challenge: despite additional investment and service improvements in recent years, in important respects they still lag behind what is achieved by high-performing authorities serving comparable areas; and the cost of services has continued to escalate.

Mental health disorders are one of the major causes of ill-health, suffering and social problems in the county. The 874 people between 18 and 64 with psychosis and the other most serious mental health disorders reported by services in Herefordshire is much higher than the 600 that would be expected on the basis of national prevalence rates. There is no present reason to believe that more people will require treatment in either 2012 or 2021.

An estimated 18,000 18 to 64 year-olds suffer from depression and other more common mental disorders. This number is not expected to change by 2012 but seems likely to increase slightly by 2021.

In addition, an estimated 4,650 18-64s have a personality disorder, a number that is expected to increase by 50 by 2012 and by 150 by 2021. However, only 60 of these people currently receive secondary mental health care and it is at present impossible to predict the long-term need for services.

About 50 people aged 30-64 suffer from dementia. This number is not expected to increase by either 2012 or 2021.

Over the past five years, an average of seven 14-17 year-olds a year were identified as having experienced a first psychotic episode. This number seems unlikely to change significantly. This is the only current measure of the numbers of young people with mental health problems who may be in transition to adult services.

Major gaps in current data need to be filled, which means that these estimates will need to be kept under review, in the light of actual demand for fully modernised services and through the new process of Joint Strategic Needs Assessment. Even so, it is possible to be reasonably confident about the needs estimated for 2012.

Users and carers say that services as a whole have improved but that many aspects leave a lot to be desired. They point to a need for much better communications between staff and users, and between services; 24/7 direct access to secondary services and information; refuge at times of crisis; more education, training, work and other day opportunities; and better services for young people, including those from Eastern Europe. The Government and the inspectorates have similar expectations.

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

Compared with high-performing Dorset, Somerset and West Berkshire, Herefordshire spends a lot more on secure and high-dependency residential and nursing home care, especially on out-of-county placements, but much less on supporting people at home and on supporting carers. Unlike the comparators, it has limited specific mental health primary care services and doesn't provide direct access for users and carers to advice and support 24/7. It does much less to involve users and carers. It does have a good level of psychology services.

Herefordshire lags behind the best practice in helping people with mental health problems to gain or retain employment and in preventative services, including the promotion of mental health.

Overall, Herefordshire spends more per head of population than the comparators but less than the all-England average. It raises significantly more income from users than the comparators but needs to increase external funding, including from the national *Supporting People* programme

To achieve high-performing, cost-effective services by 2012 Herefordshire needs to do much more to support people before they need specialist secondary services; to provide the great bulk of services in, or close to, people's own homes and communities; and to do more to help people recover and stay well after they have received secondary services. This will require the cost-effective, local replacement of much of the current out-of-county provision and, more generally, a significant reduction in the use of residential and nursing home care.

Considering together the demands for new forms of services, the additional costs of provision arising from Herefordshire's uniquely high number of people living in sparsely populated areas, inefficiencies in the current pattern of services and the small increases so far identified in expected demand, **overall it would seem reasonable to conclude that the aggregate level of spending by the Council and the PCT in 2006-07 (i.e including the over-spending against budget of £1.3 million) is the minimum necessary recurrent funding to meet the needs of those with the most serious and the most common mental health problems up to 2012.**

**This conclusion should be reviewed by 2012 in the light of better data, including the actual demand for fully modernised services.**

**Since it is not possible to stop current provision before more efficient and effective services have been put in place, non-recurrent bridging funding of £269K in 2008-09, £298K in 2009-10 and £158K in 2010-11 will be needed.**

To avoid a vicious circle of decline, the transformation plans to bring about the new pattern of services must be fully integrated with the steps taken to manage current in-year over-spending against budget.

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

Existing resources will not do the job without the full and quickest possible integration of all aspects of planning, commissioning, delivery and performance management of health and social care across the Council and PCT.

It will also require a substantial extension of direct payments and personal budgets; better support for carers; maximising the contribution and effectiveness of GP-based commissioning; adjusting the balance of PCT and Council funding to achieve a single, shared set of commissioning targets; attracting significant additional funding from external sources; and working closely with the third sector to mobilise voluntary and community resources behind the development of preventative services, access to generic local services and facilities, advocacy for individuals and help-lines.

The new services will only work if all those caring for and supporting people with mental health problems are developed to have the right skills and behaviours. This will need to be done as part and parcel of the introduction of the streamlined processes and ICT-based systems being put in place under the *Herefordshire Connects* programme, buttressed by strong, disciplined performance management at all levels.

The needs of those with personality or eating disorders and the services required to meet them will need to be determined during 2008; in the case of personality disorders, in the light of emerging government expectations; and, in the case of eating disorders, having regard to the results of a local pilot service. This report therefore makes no allowance for the costs of developing additional services for these groups, although it is not out of the question that they could be funded from within the current real terms level of spending in the light of the review in future years recommended above.

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

## **Section 1: Introduction**

Working together and with their partners, the Council and the Herefordshire Primary Care Trust (PCT) are committed to maximising the independence, well-being and choice of people with mental health problems.

Despite additional investment over previous years, and changes aimed to enable people to lead safe and fulfilled lives in their own homes and communities rather than in unnecessary residential or in-patient care, the Council's and PCT's current pattern and levels of services are not, in important respects, achieving as much and providing the same value for money as are the highest performing comparable areas.

This was confirmed in the results of the Health Care Commission's and Commission for Social Care Inspection (CSCI)'s joint review of community mental health services across England in 2006, *No voice, no choice*. Although it identified some areas of strength, it also found weaknesses, with the net effect that Herefordshire's services were amongst the 43% of areas rated "fair". This compares with 9% of areas being rated "excellent", 45% "good" and 3% "weak".

In addition, the costs of services in Herefordshire have risen substantially in recent years and continue to do so, to the extent that expenditure has significantly exceeded budgets.

This is taking place against the background of the ambitious developments in Government policy for health and social care set out in the White Paper of January 2006, *Our health, our care, our say: a new direction for community services*. This calls for a fundamental shift in services to local communities, to be developed by local partners in ways that better meet the needs of individual people. It sets four main goals:

- a. **better prevention and earlier intervention** – reducing the chances of people becoming ill or dependent in the first place;
- b. **more choice and a louder voice** – ensuring that people are in control of the services they receive, through involvement in the planning and development of services, and by means of self-directed care, including direct payments and budgets for individuals;
- c. **tackling inequalities and improving access to a wider range of community services** – ensuring that the areas, groups of people and individuals with greatest need get the services they deserve;
- d. **more support for people with long-term needs** – better integration of services and joint planning across health and social care for those who make the most intensive use of services.

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

These goals are developed in more detail for mental health services in other authoritative publications, including *No voice, no choice*, the Sainsbury Centre's *Vision for 2015* and the National Director for Mental Health's *Ten years on review*. They are expressed most concretely in the seven outcomes for people used by the CSCI in their assessments of care: *Improved health and emotional well-being; Improved quality of life; Making a positive contribution; Exercise of choice and control; Freedom from discrimination and harassment; Economic well-being; and Personal dignity and respect.*

The goals are underpinned by national consultation showing strong support for more community services. That is reflected in the consistent findings of public consultation in Herefordshire, including that carried out with users and carers specifically to inform this assessment (details are given in Section 3 below). The Council, the PCT and their partners in the Herefordshire Partnership have made *Healthier Communities and Older People* one of the *Herefordshire Community Strategy's* four priorities for better outcomes.

In the light of these considerations, the Council and the PCT are committed to working with their partners, service users themselves and their carers and representatives, to develop and deliver better, sustainable services for the future. They want, in particular, to strike the right balance between preventative services and the provision of more intensive support and care.

In doing this, the Council and PCT are particularly conscious not only of the inter-dependence of health and social care one upon the other in achieving the best outcomes for people, but also of the vital contribution that needs to be made by housing, employment services, education, welfare benefits, generic community-based opportunities (such as cultural and leisure services), the voluntary and community sector, and, not least, by users and carers themselves and by their advocates.

1.10 Crucial too are effective links to ensure smooth transition between the services provided for children and young people and those for adults; and between services for 18-64 year-olds and those for older people.

**The purpose of this report**

1.11 Having last year assessed future needs for older people and adults with learning disabilities, and agreed how services would be developed to meet them, the Council and the PCT decided to carry out, with the *Herefordshire Alliance*, a thorough assessment of future needs of 18-64 year-olds with mental health problems; of the services needed to meet those needs; and of the costs involved in doing so, taking into account the scope for greater efficiency in moving from the present services to a new, more effective pattern.

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- 1.12 This report has been prepared under the leadership of the Council's Corporate Policy and Research Team, working with staff in the PCT, in the Council's Adult Social Care Department and Resources Directorate, and with *The Herefordshire Alliance* and *Herefordshire MIND*. The membership of the Steering Group is at Appendix 1.
- 1.13 The Steering Group has been advised by distinguished experts in the field, Professor Gerald Wistow and Eileen Waddington. Further information about the expert advisers is at Appendix 2.
- 1.14 The first stage of the project was to estimate the need for care of 18-64 year-olds with mental health problems through to 2021. This was to provide the long-term context for the second stage: the assessment of what patterns and levels of cost-effective services would be needed to meet expected needs in 2012.
- 1.15 Rather than conduct a theoretical assessment of the services that will be needed, the best possible comparator areas were identified; that is those with high-performing services in areas with broadly similar settlement patterns and demographic characteristics to those found in Herefordshire. The selected areas were Dorset, Somerset and West Berkshire.
- 1.16 Through analysis of comparative data about services and costs, of inspection reports, and by visiting the authorities, we established what patterns and levels of services they provide; how they intend further to change and improve them to meet future challenges; and, crucially, how they manage and deliver them successfully. These findings were then applied, having regard to the distinctive needs and circumstances of Herefordshire and to wider relevant comparisons.
- 1.17 The final stage was to translate these findings into costed proposals for the development of high-performing services through to 2012.

**The structure of the report**

- 1.18 Section 2 of the report examines future needs to 2012 and 2021. Section 3 describes what pattern and levels of services will be needed to meet those needs in 2012. Section 4 looks at the capacity needed to develop and deliver these services successfully. Section 5 sets out the estimated costs of doing so.

*Final report: future care needs and services for 18-64 year-olds with mental health problems*

## Section 2: Assessment of future needs

2.1 The full assessment of future needs for 18-64 year-olds with mental health problems is at Appendix 3. It begins with a summary.

2.2 The crucial points are:

- mental health disorders are one of the major causes of ill-health, suffering and social problems in the county
- **the most serious and disabling mental health disorders** (psychosis, schizophrenia and bi-polar affective disorder) affected 874 people aged 18-64 known to GPs in Herefordshire in January 2007; this is significantly higher than the 600 people that national prevalence rates would suggest
- there is no present reason to assume that more people with these most serious conditions will require treatment in either 2012 or 2021
- **suicide rates** in Herefordshire have appeared in the past to be relatively high, but the 20% reduction target between 1995-97 and 2010 is expected to be met
- **more common mental health disorders** (anxiety, depression, neuroses, phobias, compulsions and stress) are estimated to affect over 18,000 adults aged 18-64 in a year, which is more than 17% of the total age group
- no notable change is expected in this number by 2012; however, an increase of 1% is expected by 2021, which might, on the basis of the proportions currently accessing secondary mental health services, equate to an extra 5 or 6 people needing to do so
- on the basis of national estimates, 4,650 18-64 year-olds in Herefordshire (over 4% of the total age group) may have a **personality disorder**, but only 60 receive secondary mental health care
- this total might be expected to increase by 50 people by 2012 and 150 by 2021; although, on the basis of the current level of access, this would lead to only marginal changes in the demand for care, this could increase more were the county to develop specialist provision for this group in response to changing national and statutory requirements; it is not at present possible to quantify this potential demand but it could be substantial

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- **early onset dementia** affects about 50 people aged 30-64 in Herefordshire; currently only 22 of these receive a secondary service, an estimated one-third of whom are suffering from preventable dementia as a result of substance mis-use
- the total number of sufferers is expected to remain at about this level in 2012 and 2021
- although nationally it is estimated that around one-third of patients with serious mental illness have a substance mis-use problem, and that about half of drug and alcohol service users have a mental health problem, it is not at present possible to estimate the extent of **dual diagnosis** in Herefordshire or what it might be in the future
- neither is it possible at present to estimate the numbers of people in **different ethnic groups** in the county experiencing mental health problems; nor to produce estimates of the numbers of people likely to suffer from such problems in **different parts of Herefordshire**
- over the past five years, an average of seven **14-17 year-olds** a year were identified as having experienced a first psychotic episode; on the basis of demographic trends, this number seems unlikely to change significantly; this is the only current measure of the numbers of young people with mental health problems who may be **in transition to adult services**
- an estimated 3,300 people in the county aged 18-64 (3%) are **carers** of someone with a mental disability, with about three-quarters of those cared for also having a physical disability; the number might be expected to increase slightly as a result of the modest increases described above in the expected numbers of people suffering from mental disorders
- a recent survey has identified at least 133 mental health service users living in unsuitable **accommodation**, two-thirds of whom require general needs rather than supported housing

2.3 In considering these estimates, it is important to bear in mind the paucity of reliable data currently available internationally, nationally, regionally and locally as regards both present and future levels of need.

2.4 Some of the international and national estimates suggest a growth in needs at odds with the conclusions in this report. For example, the World Health Organisation predicted in 2001 that there would be world-wide increase in depression that would make it the leading cause of disability by 2021; while, in its March 2007 study for the



***Final report: future care needs and services for 18-64 year-olds with mental health problems***

Disability Rights Commission, the Institute of Public Policy and Research (IPPR Trading Ltd) projected possible big increases by 2020 in impairments caused by mental health problems, including a doubling – to an enormous 38% - in the proportion of 20-29 year-olds experiencing them.

- 2.5 It plainly makes no sense to take a world-wide forecast and apply it to Herefordshire, while the IPPR's UK projection was based on self-reporting as part of a labour force survey and doesn't distinguish between the different types and severity of mental health problems. The IPPR report itself says, "*Given the limitations of the data....this report cannot offer a definitive account of the circumstances and experiences of disabled people in 2020.*"
- 2.6 Within Herefordshire difficulties with data arise either because it simply hasn't been collected or because the various separate data-bases maintained by the Council and the PCT about individuals mean that there is likely to be extensive double-counting or more. On the other hand, some things are probably not being counted at all. These deficiencies will need to be addressed to provide a sound basis for the future monitoring and planning of services, as well as to meet fully statutory requirements in respect of equalities and those to come requiring a Joint Strategic Needs Assessment for health and social care.
- 2.7 It is of great importance that we rectify these deficiencies as quickly as possible. Much of this will be made possible by the introduction of a single user data-base and other improvements under the *Herefordshire Connects* programme, including the development of shared systems between the Council and PCT within the Public Service Trust. The longer-term estimates of need in this report should be reviewed as these improvements bear fruit.
- 2.8 That said, the present estimates are the best possible current basis for planning and delivering improved services to 2012, in respect of which it is possible to be reasonably confident about the extent and nature of future needs.

## **Section 3 - The pattern and levels of services to meet needs in 2012**

3.1 Drawing on the views expressed by users and carers in Herefordshire, on Government and other authoritative national requirements and guidance regarding mental health services, together with the evidence about high-performing services gathered from the comparator areas – Dorset, Somerset and West Berkshire – this section describes what needs to be done, to what extent, to achieve services that will meet the needs identified in section 2.

### **The views of users and carers**

3.2 The views of users and carers on present and future services were sought at two forums in July 2007. Nearly 40 took part, expressing clearly and forcefully what they want from services.

3.3 Their main points were:

- although services as a whole have improved a lot over the past decade, many aspects of them still leave much to be desired
- the need for much improved two-way communications between staff and those receiving assessments and care, with all staff exhibiting a positive, respectful attitude to users and carers
- and for much better communications between professionals in respect of individuals receiving assessments and care, so as to ensure continuity and consistency
- in particular, the need to tackle a lack of co-ordination between mental health and acute hospital services, including as regards user records
- the need for all GPs, acute hospitals and accident and emergency departments to have an acceptable minimum level of understanding about mental health problems; for example, in respect of self-harm
- being able to access the crisis team whenever they feel the need to do so, rather than having to be referred by primary care, which was reported to be reluctant to do so, particularly at evenings and weekends; they believed that this would have the effect of avoiding at least some admissions to the Stonebow hospital unit
- the particular value of a designated 24/7 telephone helpline that would give users and carers immediate access to information and support

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- the need for a safe place in the community to go to in a crisis, particularly out-of-hours and at weekends
- the day centres provided by MIND were regarded as crucial by many, not least as somewhere they feel supported, safe and not judged
- others had mixed feelings about them, but it was noted that MIND is aiming to develop a wider range of provision to cater for diverse needs
- a general call for a wider, more flexible range of services, extending beyond specialist mental health services and those prescribed under the *National Service Framework*
- linked with this, the need for support to enable them to access generic community services and facilities, coupled with educating the public on mental health issues to break down barriers
- and more secure long-term funding for suitable educational opportunities, not least those that help people to gain qualifications in preparation for employment
- a need to improve the quality of services for young people (it was said they will not attend day centres), including Eastern Europeans who have mental health problems but are not known to services
- and to ensure a smooth transition for those moving between young people's services and those for adults

**Government and inspectorate requirements**

3.4 The things users and carers want to see reflect most of the national requirements and guidance on good practice. Other key elements expected by Government and the inspectorates are:

- the fullest possible participation in society being the touchstone, including meaningful employment
- the promotion of emotional health in schools
- all public services playing an active role in mental well-being
- access for all to psychological and other "talking" therapies
- the extension of direct payments and individualised budgets to as many people as want them, with all users and carers involved in the development of care packages
- and plans agreed between users and staff for personal recovery goals

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- advance planning with users and carers for crises, including anti-psychotic treatment
- attending to the needs of the whole person, with a particular emphasis on improving the physical health of those with mental health problems
- advocacy and other help for individuals to promote their social inclusion
- user and carer involvement in service planning and development
- choice about appointment times
- an effective partnership between primary and secondary care
- treatment in the community, wherever possible, rather than in hospital
- good, timely information for users and carers about medicines and their side-effects
- under the Department of Health *National Service Framework*, a prescribed minimum level of staffing for specified services, including carers' support, securing access to services for black and other ethnic minorities, and mental health promotion
- the provision of information, advice and, where appropriate, assessment to the whole population, including self-funders

**Comparing with high-performers**

3.5 In comparison with the relatively high-performing Dorset and Somerset (and, where indicated, West Berkshire, in respect of which there is incomplete comparative data), Herefordshire:

- commissions substantially more continuing residential and nursing home care (57 per 100,000 population aged 18-64, compared with an average of 20, spending proportionately about a third more); Herefordshire's lower costs per placement support the view that it has a lower threshold of needs before it resorts to these forms of care
- commissions a lot more secure and high-dependency provision, spending almost double per head of population more than Dorset; about half of this spending is on 21 out-of-county placements
- has the same trends in terms of falling hospital admissions (424 in 2002-03; 368 in 2006-07); fewer discharges (431 down to 371); and increased average lengths of stay (median up from 12 to 17 days), but these are magnified in the comparator areas

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- secures a tiny level of home support services (only ten people were receiving home care on 31 March 2007), spending at one-fortieth the average level of the comparators
- provides a good level of psychology services, at the level of the best of the three comparators
- has more people attending day care centres (over 100 per 100,000 aged 18-64, compared to an average of 54), with fewer accessing more flexible, community-based and generic opportunities
- unlike the comparator areas, doesn't have 24/7 direct access for users and carers to advice and support (although a crisis assessment and treatment service is available 24/7)
- has a low number of people receiving direct payments, similar to the comparators
- has a lower level of advocacy services, particularly for individuals
- has a similar level of social workers in community mental health and other specialist teams (18 per 100,000 of the 15-64 population, compared with an average of 17)
- like the comparators, provides no specialist services for people with personality disorders
- apart from practice counselling, has limited primary care services specifically for people with mental health needs, compared with the well-established arrangements in the comparators
- has a lower level of community eating disorder services
- has very much lower provision for carers, incurring expenditure about a tenth of Dorset's (but with a carers' support worker about to be appointed)
- does much less to involve users and carers in the planning and development of services
- spends a little below the average on housing
- provides less support to prepare people to gain or maintain employment

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- overall across health and social care, has gross spending above the average of the comparator areas (£135 per head of the 15-64 population, compared with an average of £114 in Dorset and Somerset) but less than the all-England average (£156)

(For detailed consideration of this comparison see paragraphs 4.2 to 4.10 in section 4 below.)

- social care expenditure is slightly above average (£26.71 per head of the 18-64 population, compared with an average of £25.55)
- generates significantly more income from client contributions (nearly ten times the level in the lowest, West Berkshire)
- has far less effective and efficient systems for data collection, analysis and performance management

3.6 In addition, Herefordshire lags behind best practice as regards preventative services, including the promotion of mental health. It also needs to do more to maximise external funding, including from the national *Supporting People* programme.

**The new pattern of services required**

3.7 This analysis leads to our recommending the following principal changes to achieve the more balanced, modern pattern of services that would meet Herefordshire's needs cost-effectively.

3.8 The fundamental strategic shifts needed are to do much more to support people before they need specialist secondary services; to provide the great bulk of secondary services in, or close to, people's own homes and communities; to do more to help people recover and stay well after they have received secondary services; and to place much more influence and control in the hands of users and carers.

3.9 The specific changes to achieve this should be:

- commissioning cost-effective services within the county to replace many of the current out-of-county placements and, wherever possible, avoid them in the future, including through the existing residential rehabilitation unit
- developing own-home and community-based services so as to reduce to the absolute minimum the use of residential and nursing home care
- improving crisis provision, ensuring direct access 24/7 for users and carers to information and advice; and, where necessary, home treatment

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- providing temporary refuge, integrated with day care
- enhancing recovery and rehabilitation services, including home support, housing, education, training and employment opportunities, and support, where necessary, to access general community facilities
- the maximum possible number of people securing their own care with direct payments or personal budgets
- securing effective, independent advocacy for individuals
- developing primary care mental health services, including therapies, closely linked to the work of the community mental health teams (members of which should operate at least partly within GP practices) and the enhanced domiciliary and community-based services, with the objective of there being a lead GP for mental health in each practice
- greatly enhancing preventative services, mobilising community resources and volunteers, including from amongst the ranks of service users and carers
- securing services to support carers to continue in their role and improve their own health and well-being, including, where necessary, help to retain or gain employment
- extending mental health promotion services
- all of the above enabling both a reduction in acute hospital bed provision and a greater capacity within the acute hospital to provide effective treatment for those with the most intensive needs
- systematic, continuous user and carer involvement in the planning and development of services, including financial assistance and capacity-building to make this possible
- developing a shared philosophy and approach across children's and adults' services, reflected in fresh protocols, to ensure a smooth and successful transition for young people moving between them
- taking equal care to achieve fair and effective transition for people to older people's services
- determining the nature and extent of services needed for people with personality disorders (the aim is to develop a service specification by March 2008)

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- evaluating the pilot community eating disorder service (scheduled to take place after twelve months, in July 2008) and determining the nature and extent of future services
- identifying the needs of ethnic minority groups, including the significant number of young people who have come from Eastern Europe in recent years, and tailoring services to meet them

3.10 A number of the necessary improvements are already beginning to happen or are planned. For example, over the past year there have been significant developments at the Stonebow Unit, including a suite to assess those arrested under Mental Health Act powers rather than the use of police cells; the piloting of a consultant working closely with the crisis team over admissions, which has reduced the occupancy rate by 15% and will be rolled out generally in January 2008; and funding secured to provide single-sex accommodation.

3.11 Other important recent developments include:

- tighter scrutiny of out-of-county and long-term care home placements, with reviews of existing placements that will be repeated regularly; already this has led to the repatriation from out-of-county placements of two service users, saving £200,000 a year
- strengthening staffing in the early intervention service to meet the target of supporting at least 20 people experiencing a first episode of psychosis
- a mental health services housing plan and a development officer to make sure it is implemented
- service users and carers sitting on the reference group for adult mental health services, and a regular programme of meetings between carers and senior managers
- getting an expert to develop urgently the detailed specification for improved rehabilitation and recovery services that will lead to the reduction of out –of –county placements and other long-term care, and generally create a more user-led service

3.12 The overall pattern and levels of high-performing services proposed are set out in Appendix 4, which also explains the underlying assumptions



## Section 4 - The capacity needed to deliver the improvements

4.1 Achieving successful change on the scale necessary to meet future needs cost-effectively requires not only careful, detailed planning across health and social care (and beyond) but also a firm, co-ordinated grip on all aspects of managing projects, finance, human resources and performance.

### Funding

4.2 Assessing the adequacy of Herefordshire's 2006-07 level of budget and spending (i.e. including the overspend against budget of £1.3 million) to meet future needs is complicated by there being two bases for comparing Herefordshire with our chosen comparator areas, and also with the wider group of statistical neighbours and England as a whole. One is to do this by comparing funding on the basis of the total actual populations; the other is to apply the weighted populations used by central government for the financial mapping of mental health services across England.

4.3 The results of these two methods are as follows (data on the numbers of people between 15-64 is the nearest available to the 18-64 population in question):

Area	Gross spend per head of <u>weighted</u> population		Gross spend per head of <u>un-weighted</u> population	
	15-64	(£)	15-64	(£)
Herefordshire		174		135
Dorset		144		102
Somerset		161		125
West Berkshire		162		Not available
Average of Dorset and Somerset		153		114
ONS statistical neighbours average		141		Not available
England		156		156

4.4 Compared with Somerset and Dorset, both methods show Herefordshire to be a high spending area.

4.5 On the other hand, on the basis of actual, un-weighted population,

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

Herefordshire is shown as a low spender compared with the all-England average.

- 4.6 Although it would be wrong wholly to disregard the weightings applied nationally (there is, for instance, a well-established link between relative deprivation and levels of mental disorder), there are good reasons neither to accept them as definitive nor to apply them mechanically.
- 4.7 The effect of the weightings is to reduce Herefordshire's actual 15-64 population figure of 15-64 year-olds from some 109,000 to about 84,000 – a reduction of nearly 22%. This is achieved by applying various indices about expected levels of mental illnesses derived from data going back, in some cases, to the early 1990s; and also factors from the national resource allocation formula that take no account of the current known level of mental illness in an area. Nor do the weightings take account of the recent work of the Council's Research Team that demonstrates the higher costs associated with delivering services in a county that has the highest proportion of people living in areas with fewer than 0.25 persons per hectare.
- 4.8 Crucially, as paragraph 2.2 in section 2 above shows, the number of 18-64 year-old people in Herefordshire identified by services to have serious mental illnesses (i.e the group which has the greatest need for services and in respect of which the lion's share of expenditure needs to be incurred) is nearly 46% higher than the 600 people that national prevalence rates would suggest. The reasons for this are not known but, even if the data were not wholly reliable (the level does seem improbably high), it would be both perverse and dangerous to base the appropriate level of funding on an assumed level of prevalence rather than the recorded number of people who need and will continue to need services. (It should be borne in mind that, even were the actual prevalence in Herefordshire to be as low as 600, the use of the un-weighted figures would be justified.)
- 4.9 Based on the comparisons with Dorset and Somerset alone and without regard to Herefordshire's distinctive circumstances, there could be no argument that our mental health services are relatively well-funded: taking the Somerset level of funding alone and applying it proportionately to Herefordshire, we would have spent £1.1 million less in 2006-07 (i.e about £200K above budget, as opposed to the £1.3 million actual over-spend).
- 4.10 On the other hand, the available figures suggest that we are having to cope with a level of serious mental illness that may be in excess of the national prevalence, which makes the wider comparison with the England average of more than academic interest. On that basis, Herefordshire's spend in 2006-07 might be considered to have been light to the tune of about £2.3 million, and its budget by £3.6 million.
- 4.11 There is the further, pragmatic consideration that a cost-effective

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

service cannot be achieved in Herefordshire until the recommended high-performing new pattern has been established. Thus, while it might be possible, over the long-term, to realise cash-releasing savings from the new pattern of services, reducing the level of spending before the new pattern is substantially in place and a more accurate understanding of demand for modernised services has been gained would not only have a damaging impact on current service users but also make it impossible to establish the new services.

- 4.12 Considering together the demands for new forms of services, the additional costs of provision arising from Herefordshire's uniquely high number of people living in sparsely populated areas, inefficiencies in the current pattern of services and the small increases so far identified in expected demand, **overall it would seem reasonable to conclude that the aggregate level of spending by the Council and the PCT in 2006-07 (i.e including the over- spending against budget of £1.3 million) is the minimum necessary recurrent funding to meet the needs of those with the most serious and the most common mental health problems up to 2012.**
- 4.13 For the reasons explained in paragraphs 2.3 to 2.7 in section 2 above and earlier in this section, **this conclusion should be reviewed by 2012 in the light of better data, including the actual demand for fully modernised services.**
- 4.14 **This assumption about the adequacy of the 2006-07 level of spending until 2012 would hold true only if it were to be maintained in real terms and if the efficiency savings that would be secured under the new pattern of services were retained for investment in those new services, at least until the position is reviewed in the circumstances pertaining by 2012.**
- 4.15 **Moreover, although the reduction in services no longer required, for example many of the expensive out-of-county residential placements, should be expected to pay the recurrent costs of the new pattern of services, this can only happen if there is targeted, time-limited, non-recurrent funding to develop the new services to the point where the current services can be discontinued.**
- 4.16 It remains to be seen, in the light of further, detailed work and piloting over the coming year, what will be needed to provide services in the future to meet the needs of those with personality or eating disorders.
- 4.17 The assumption that the 2006-07 real level of spending by the Council and the PCT combined should be an adequate minimum basis for emulating the achievements of the high-performing comparator areas rests on six crucial additional provisos:

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

- that the large-scale extension of direct payments and personal budgets will be managed in such a way that efficiency savings are generated for recycling in mental health services
- that support for carers will be strengthened (recent research by the University of Leeds estimates that the average carer saves the nation more than £15,000 a year)
- that the contribution and effectiveness of GP-based commissioning will be maximised
- that the balance between PCT and Council funding will, where necessary, be adjusted within the Public Service Trust to achieve a single, shared set of commissioning targets
- that we will attract significant additional funding from external sources (such as Government grants, including Supporting People, charities, private business and the National Lottery)
- that this and wider benefits will be achieved by working in close partnership with the third sector, so as to provide access to wider sources of external funding and, even more important, to mobilise voluntary and community resources behind the development of preventative services, access to generic local services and facilities, advocacy for individuals and help-lines; this may include the development of user-led organisations as service providers

4.18 Moreover, the plans for radical transformation that will produce sustainable, affordable and cost-effective services must be fully integrated with the steps taken in response to the current over-spending. Unless this is done, on the basis of establishing an agreed programme of change for the coming four years, underpinned by the necessary minimum recurrent and targeted non-recurrent funding, services will deteriorate in a vicious circle of ad hoc cuts and retrenchment that will render them incapable of meeting future needs

4.19 These considerations underpin the costings in section 5 below.

**Human resource, organisational and systems considerations**

4.20 Developing and delivering the new pattern of services will require considerable, sustained management effort and a systematic approach to workforce planning and performance management, so as to ensure that all those providing care and other support to people with mental health problems have the right skills and exhibit the right behaviours.

**Final report: future care needs and services for 18-64 year-olds with mental health problems**

- 4.21 Elements of a good basic infrastructure have now been created in the Council and the PCT which, together with an increasingly productive relationship with both the third and private sectors, has the potential to bring about the necessary changes. Notably, this includes an Interim Head of Adult Social Care, a dedicated Head of Learning Disability, a Change Manager, the strengthening of the PCT and Council joint Planning and Change Team, including a Mental Health Commissioning Manager, and additional appointments to the Council's contracts and adult safeguarding teams.
- 4.22 However, this strengthened capacity is already tackling a comprehensive transformation programme that includes the fundamental reshaping of older people's and learning disability services, and the development of wholesale new procedures and management systems; to which will now need to be added, as well as that in respect of mental health, a similar reshaping of physical disability services. These and other **existing resources will not be able to do the job without the full and quickest possible integration of all aspects of planning, commissioning, delivery and performance management of health and social care across the Council and PCT**. In turn, this will require the putting in place of single procedures, processes and ICT systems as part of the *Herefordshire Connects* programme.
- 4.23 **Additional operational capacity will be needed at the start of the programme** to meet Department of Health National Service Framework targets for key elements of the new services, as follows:
- 1.5 whole-time equivalent (wte) posts to develop support for carers
  - 1 wte post to ensure good access to services for members of black and other ethnic minorities
  - 1 wte post to further develop mental health promotion
- 4.24 These will need to be funded either from existing budgets or, if that is not possible, from the first tranche of non-recurrent investment in 2008-09, with the recurrent costs absorbed as the new pattern of services produces off-setting savings.
- 4.25 Underpinning all of this, there will need to be a cross-agency development programme for all those caring for or supporting people with mental health problems. A partnership workforce strategy for the whole of adult health and social care is already in the early stages of development. This will need to include a dedicated element to deliver the mental health improvements.
- 4.26 Similar considerations apply to the rolling out of the communications strategy and action plan for the comprehensive

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

transformation programme.

- 4.27 The adequacy of the new pattern of services should be subject to regular review and periodic formal evaluation, taking account of a progressively better understanding of the nature and level of need. This should include an external, independent element, if possible linked to national evaluation programmes.

**Final report: future care needs and services for 18-64 year-olds with mental health problems**

**Section 5 - The costs**

- 5.1 Appendix 4 contrasts the proposed high-performing services in 2012 with the services in place in 2006-07.
- 5.2 Unless services are fundamentally reshaped along the lines proposed in this report, they would fail to meet the needs and wishes of users and carers, and also the expectations of Government and the inspectorates. Worse still, this would take place in a context where the performance of other areas can be expected, on average, to continue to improve year-on-year and in which Government and the inspectors are likely to have ratcheted up the minimum acceptable standard for services and, therefore, the threshold for intervention.
- 5.3 Additionally, the maximum possible sustainable improvements in efficiency can be achieved only if services are modernised as proposed. This is illustrated by the growth, from 16 in 2005-06 to 21 in 2006-07, in the number of out-of-county placements, which cost nearly £1.7 million a year. There is a substantial danger that, in the absence of adequate local, community-based services, this trend will continue, with the effect of even higher levels of over-spending against budgets.
- 5.4 **The total expenditure of £16.65 million in 2006-07, maintained in real terms, will be required recurrently through to 2012. This should be reviewed by 2012 in the light of better data, including the actual demand for fully modernised services.**
- 5.5 **In addition to these recurrent costs, non-recurrent investment of the following order will be required to put in place the new pattern of services so that inefficient, poor value for money current services can be discontinued:**

Year	£
2008-09	269
2009-10	298
2010-11	158
2011-12	(-62)

- 5.6 The needs of those with personality or eating disorders and the services required to meet them will need to be determined during 2008; in the case of personality disorders, in the light of emerging government expectations; and, in the case of eating disorders, having regard to the results of a local pilot service. **This report therefore makes no allowance for the possible costs of developing additional specialist services for people with personality or eating disorders, but it is not out of the question that that they**

***Final report: future care needs and services for 18-64 year-olds with mental health problems***

could be funded from within the 2006-07 level of spending, maintained in real terms, in the light of the review recommended in paragraph 5.4 above.



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2007: 18-64 year-olds in Herefordshire with mental health  
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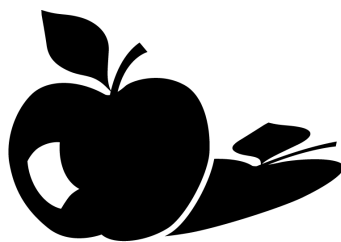
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- researching views of older people regarding long-term care services (Help the Aged)
- whole systems reviews of older people's services to re-shape care provision (City of Westminster, York, Rochdale, St. Helens and Knowsley)
- reviews of services for people with learning disabilities (Kensington, Chelsea, Westminster, Hartlepool)
- development of Royal College of Nursing Strategy for Nursing Older People
- developing strategies for an ageing population (Warrington and Salford)
- Authoring ADSS/LGA-commissioned paper on implementing the *Our health, our care, our say: a new direction for community services* White Paper (with Gerald Wistow)



HEREFORDSHIRE  
COUNCIL

**NEEDS ANALYSIS:**  
**ADULTS WITH MENTAL HEALTH PROBLEMS**

*Principal factors that will determine the need for services for  
people aged 18 to 64 with mental health problems*

**October 2007**

**Final Version (4.4)**

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<b>TABLE OF CONTENTS</b>
--------------------------

<b>EXECUTIVE SUMMARY .....</b>	<b>III</b>
<b>INTRODUCTION .....</b>	<b>1</b>
<b>DEMOGRAPHICS OF HEREFORDSHIRE.....</b>	<b>2</b>
THE COUNTY OF HEREFORDSHIRE .....	2
CURRENT POPULATION .....	2
RECENT TRENDS .....	3
MIGRATION.....	3
ETHNICITY.....	5
FUTURE POPULATION.....	6
COMMUNAL ESTABLISHMENT POPULATION .....	8
<b>GENERAL HEALTH IN HEREFORDSHIRE.....</b>	<b>9</b>
LIFE EXPECTANCY & GENERAL HEALTH .....	9
LIMITING LONG-TERM ILLNESS .....	10
<b>HEREFORDSHIRE'S OVERALL MENTAL HEALTH.....</b>	<b>10</b>
MEASURE OF MENTAL HEALTH .....	10
SUICIDE .....	11
<b>SOURCES OF INFORMATION ON ADULTS WITH MENTAL HEALTH PROBLEMS.....</b>	<b>11</b>
KNOWN SERVICE USERS.....	11
DISABILITY-RELATED BENEFIT CLAIMANTS .....	11
NATIONAL ESTIMATES OF PREVALENCE OF MENTAL HEALTH PROBLEMS.....	15
<b>MENTAL HEALTH PROBLEMS AMONGST ADULTS IN HEREFORDSHIRE .....</b>	<b>16</b>
COMMON MENTAL HEALTH PROBLEMS (NEUROTIC DISORDERS).....	16
PSYCHOTIC DISORDERS.....	20
PERSONALITY DISORDERS.....	23
EARLY ONSET DEMENTIA .....	24
EATING DISORDER.....	26
BEHAVIOURAL DIAGNOSES .....	26
DUAL DIAGNOSIS .....	26
<b>ETHNICITY OF PEOPLE WITH MENTAL HEALTH PROBLEMS.....</b>	<b>28</b>
<b>GEOGRAPHIC DISTRIBUTION OF PEOPLE WITH MENTAL HEALTH PROBLEMS .....</b>	<b>29</b>
<b>MENTAL HEALTH OF PRISONERS.....</b>	<b>30</b>
<b>CARERS.....</b>	<b>31</b>
NUMBERS OF CARERS.....	31
THE CARED FOR.....	32
CARERS' HEALTH .....	32
<b>ABILITY TO PAY.....</b>	<b>34</b>
EARNINGS .....	34
INCOME.....	35
EMPLOYMENT & FINANCIAL CHARACTERISTICS OF PEOPLE WITH MENTAL HEALTH PROBLEMS.....	35
<b>HOUSING.....</b>	<b>36</b>
HEREFORDSHIRE MENTAL HEALTH SERVICES HOUSING PLAN .....	36
<b>APPENDIX: ADULT MENTAL HEALTH SERVICE DATA .....</b>	<b>39</b>
ADULT MENTAL HEALTH SERVICE: CPA DATABASE .....	39
ADULT MENTAL HEALTH SERVICE CASELOAD AUDIT .....	39
RESIDENTS OF MANAGED ACCOMMODATION .....	40
<b>REFERENCES .....</b>	<b>41</b>

## EXECUTIVE SUMMARY

### Introduction

Looking forward to 2012 and 2021, this report is an assessment of the principal factors that will determine the need for social and health care for adults aged 16 to 64 years with mental health problems. According to the London Health Observatory<sup>1</sup>, “the term 'mental health problem' can be used to describe the full range of mental health issues, from common experiences such as 'feeling depressed' to more severe clinical symptoms such as 'clinical depression' and enduring problems such as schizophrenia”. This report considers the likely future mental health needs of Herefordshire’s adult population, in order that these needs can be anticipated and planned for by service providers.

### Demographics of Herefordshire

- Herefordshire’s current<sup>2</sup> estimated population of 18-64 year-olds is 105,600 – 59% of the total population. The county has an older overall age profile than both the West Midlands region and England and Wales.
- Office for National Statistics (ONS) projections suggest numbers of 18-64 year-olds may increase by 2.0% by 2012, although more conservative local forecasts which take in to account expected housing provision suggest this increase will only be 0.1% by 2011.
- Projections suggest the 18-64 year-old population could be 107,000 in 2021, an increase of just 1.3% from 2005.
- Recent years have seen a more rapid growth in numbers in older age-groups (55-64s) and a more rapid decline in the younger ones (18-34s) than nationally. This ageing of the age profile is expected to continue, with the 55-64 year-old age-group growing most rapidly (by 7% in the short-term and 21% by 2021).
- The county has a smaller proportion of people from ‘Black and Minority Ethnic’ (BME) backgrounds than England as a whole (3.5% compared to 14.7%), but this population grew by 40.9% between 2001 and 2004 – much more rapid than the overall population growth of 1.7%. It is likely that numbers have increased further since the expansion of the EU in May 2004: between 2,500 and 3,000 workers from new member states were cleared to work in Herefordshire in 2005, although it is not known how many remain in the county. The county also experiences an annual influx of around 3,000 temporary seasonal agricultural workers – mainly over the summer months.
- In 2004, 3.8% of 18-64 year-olds in Herefordshire were estimated to be from a BME background; just under half of these were non-white.

### General Health in Herefordshire

- Herefordshire’s population is expected to live longer, on average, than nationally.
- Similar proportions of 18-64 year-olds in Herefordshire were in ‘not good’ health and/or had a ‘limiting long-term illness’ as nationally and regionally, according to the 2001 Census.

### Sources of Information on Adults with Mental Health Problems

- It is not possible to obtain robust, comprehensive estimates of the number of people experiencing mental health problems who are in receipt of services. This is due to the potential for double-counting as a result of the independent databases used by the different service providers, and also to do with inconsistent recording and difficulties in extracting and obtaining information.
- It is estimated that around 780 people aged 18-64 in Herefordshire may be claiming Disability Living Allowance (i.e. may need some level of care) for a ‘mental health

<sup>1</sup> [http://www.lho.org.uk/HIL/Disease\\_Groups/MentalHealth\\_Prevalence.aspx](http://www.lho.org.uk/HIL/Disease_Groups/MentalHealth_Prevalence.aspx)

<sup>2</sup> ONS 2005 mid-year estimate. In August 2007, after this needs analysis work was completed, the ONS published revisions to the population estimates and projections. As a result, Herefordshire’s population was reduced, which has a minor impact on the estimated and projected numbers of people with mental health problems in Herefordshire. This does not change any of the conclusions drawn.

reason' in August 2006, and that at the same time around 2,175 are claiming Incapacity Benefit or Severe Disablement Allowance because of a 'mental disorder'.

- Estimates and future projections have been produced for the purpose of this report, mainly using the *Survey of Psychiatric Morbidity among Adults in Private Households*, carried out in 2000 by the Office for National Statistics on behalf of the Department for Health. These assume that prevalence rates in Herefordshire will remain at the same level as in Great Britain as a whole in 2000. This is despite some suggestions that prevalence may increase, for which no robust information exists, even at a national level.

### **Common Mental Health Problems**

- An estimated 18,250 adults aged 18-64 were experiencing common mental health problems in Herefordshire in 2005.
- Assuming that the national prevalence rates from 2000 remain appropriate, no notable change is expected in the number of adults experiencing common mental health problems in the county in the short-term (i.e. up to 2012).
- The same assumption yields an expected 1% increase in numbers by 2021: 100 extra people;
- Assuming that those who need to are currently accessing secondary services, this could be expected to equate to an extra 5 or 6 people requiring secondary mental health services in 2021.

### **Psychotic Disorders**

- There are an estimated 874 cases of 'psychosis, schizophrenia or bi-polar affective disorder' known to GPs in Herefordshire in January 2007.
- This figure is higher than national prevalence rates would suggest (600 household residents) - even after accounting for approximately 50 people in communal establishments, and it has not been possible to reconcile these figures.
- Despite this large discrepancy, there is no reason to assume that more people in Herefordshire will require treatment for a psychotic disorder either in 2012 or 2021, than do currently.

### **Personality Disorders**

- There were an estimated 4,650 household residents aged 18-64 in Herefordshire with a personality disorder in 2005.
- If prevalence were to continue at the same levels, forecast population changes would result in this number increasing by around 50 people (1%) in the short-term (up to 2012).
- In the longer term, in 2021, projections would suggest a 3% growth in the number, to 4,800 adults (an increase of around 150 people).
- It is estimated that currently around 60 adults receiving secondary specialist mental health care have a primary diagnosis of 'personality disorder' – just 1.3% of all estimated cases. It is not possible to determine how many people are diagnosed within primary care.
- This large discrepancy may be explained by considering that large numbers of people with a personality disorder do not require specialist services, or may be misdiagnosed with another mental health problem. There has also been a history of secondary services not taking them on because of a lack of treatments and associated statutory constraints, although national policy is starting to challenge this.

### **Early onset dementia**

- It is estimated that there are approximately 50 people aged 30-64 with dementia in Herefordshire; numbers are expected to remain at a similar level up to 2012 and in 2021.
- Currently, only two-fifths (22) of these people are receiving a secondary service, and an estimated one-third of these are suffering from preventable dementia related to substance misuse.



### **Dual Diagnosis**

- 'Dual diagnosis' refers to "the coexistence of mental health and substance misuse problems", and is important to consider in the context of service planning as it seems to result in high levels of service use, particularly expensive resources (e.g. emergency services and inpatient beds), compared to mental health problems alone.
- Little is known about the extent of dual diagnosis at a national level. It is estimated that around one third of psychiatric patients with serious mental illness have a substance misuse problem, and that around half of drug and alcohol service users have a mental health problem.
- It has not been possible to identify the extent of dual diagnosis in Herefordshire.

### **Ethnicity of People with Mental Health Problems**

- It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire experiencing mental health problems.
- Information on ethnic group of patients is not currently collected by GPs, so there is no way of knowing the ethnicity of people with mental health problems known to primary care in Herefordshire.
- In April 2007, 3.5% of Herefordshire mental health service users (aged 18+) are recorded as being from a 'Black and Minority Ethnic' population, almost equal to the proportion of over 18s in the population as a whole in 2004 (3.4%).
- Nothing is known about the general mental health of migrant and seasonal workers in Herefordshire.

### **Geographic Distribution of People with a Mental Health Problem**

- It is not possible to produce projections of the number of people in different parts of Herefordshire who will experience mental health problems.
- Further work would be required to assess whether current services are provided equitably across the county and that access to these services is equal, regardless of location.

### **Mental Health of Prisoners**

- The number of people from Herefordshire in prison is unknown; the only available relevant information is that the Herefordshire Forensic Assessment Community Team is currently working with 6 people.
- Prevalence of mental health problems is high amongst the prison population in general.

### **Carers**

- Assuming that the prevalence of caring in Herefordshire is as it was at the 2001 Census, 14,100 people aged 18-64 in Herefordshire are estimated to have been providing at least one hour of unpaid care a week in 2005, with 3,600 providing care for 20 hours or more per week.
- At the same time, 1.3% of 18-64 year-olds in the county (1,340 people) were entitled to Carers' Allowance, i.e. were not in employment or full-time education and were caring for a severely disabled person for at least 35 hours a week.
- Carers are more likely to be in 'not good' health than non-carers, and the disparity increases with the amount of time spent caring per week. People who provide care over a long period of time are particularly at risk of poor health. Carers' health is also more likely to deteriorate over time than that of non-carers, with many of the detrimental changes attributable to the caring role.
- Using national observations, an estimated 800 people aged 18-64 in Herefordshire are estimated to have been caring for someone with a 'mental disability' in 2005. A further 2,500 care for someone with both a 'physical and mental disability', and around 700 of this latter group could be expected to have a neurotic disorder.

## **Housing**

- National research points toward a higher likelihood of housing instability in people with mental health problems. People with neurotic disorders and people with probable psychotic disorders are both more likely than those without to be socially renting, and the former group are more likely to have moved three or more times in the last two years.
- Although it is not possible to estimate the extent of social renting amongst people with mental health problems in Herefordshire who are *not* accessing secondary mental health services, a housing assessment of 1,361 Adult Mental Health service users supports the national observation. Almost half of service users in private households were renting (either privately or socially), in comparison with less than a quarter of all household residents in the county.
- A survey of care co-ordinators for the *Herefordshire Mental Health Services Housing Plan* identified at least 133 service users living in unsuitable accommodation, with incomplete information provided for around 400 service users. A wide range of single-figure accommodation units were identified as needed to suitably house these people, with the majority (66%) requiring 'general needs housing'.

## INTRODUCTION

Looking forward to 2012 and 2021, this report is an assessment of the principal factors that will determine the need for social and health care for adults aged 16 to 64 years with mental health problems. These include demographic change, taking into account the expected levels and characteristics of in-migration; the implications of changing patterns of health, treatment, and the development of health care services in response to them; the extent to which people might be able to pay for their social care; and housing.

According to the London Health Observatory<sup>3</sup>, “the term 'mental health problem' can be used to describe the full range of mental health issues, from common experiences such as 'feeling depressed' to more severe clinical symptoms such as 'clinical depression' and enduring problems such as schizophrenia”.

The Mental Health Foundation<sup>4</sup> elaborates:

*“...a wide range of problems which affect someone's ability to get on with their daily life. Mental health problems can affect anyone, of any age and background, as well as having an impact on the people around them such as their family, friends and carers.*

*“Most people recover from their mental health problems. Long-term problems can lead to considerable disruption and difficulty in people's lives, but many of the people affected find ways of managing their problems and are able to lead active lives”.*

This report considers the likely future mental health needs of Herefordshire's adult population, in order that these needs can be anticipated and planned for by service providers.

Like the Herefordshire Primary Care Trust and Herefordshire Council's 'Joint Commissioning Plan for People with Mental Health Problems' (2006), this report only considers alcohol or drug use and dependence where they co-exist with other mental health problems.

### **Note on revisions to Office for National Statistics' population estimates**

In August 2007, after the needs analysis work was completed, but before the needs assessment was finalised, the ONS published estimates of population for mid-2006 using a new methodology for estimating international migration at the local level. At the same time, it revised the 2005 mid-year estimates – upon which the estimates and projections of the numbers of people with a physical disability in this needs analysis are based.

The local 2005-based forecasts for Herefordshire will not be revised, but the ONS 2004-based sub-national population projections have been revised to take account of the new methodology.

Herefordshire's estimated population of 18-64 year-olds in 2005 was revised down from 105,600 to 104,300; the estimate for mid-2006 is 104,800. The projection for 2012 is now 105,600 (down from 107,700), and that for 2021 is 103,800 (reduced from 107,000)

These changes have some minor impacts on the estimated and projected numbers of people with mental health problems in Herefordshire, but these are not significant enough to change any of the conclusions drawn.

<sup>3</sup> [http://www.lho.org.uk/HIL/Disease\\_Groups/MentalHealth\\_Prevalence.aspx](http://www.lho.org.uk/HIL/Disease_Groups/MentalHealth_Prevalence.aspx)

<sup>4</sup> <http://www.mentalhealth.org.uk>

## DEMOGRAPHICS OF HEREFORDSHIRE

### THE COUNTY OF HEREFORDSHIRE

Herefordshire is a predominantly rural county of 842 square miles situated in the south-western corner of the West Midlands region, bordering Wales. With a population of approximately 56,000, the city of Hereford is the major location in the county for employment, administration, health, education facilities and shopping. The five market towns of Leominster, Ross-on-Wye, Ledbury, Bromyard and Kington are the other principal centres, with populations ranging from 11,000 (Leominster) to 2,500 (Kington).

The county has beautiful unspoilt countryside, distinctive heritage, remote valleys and rivers, including the river Wye, which flows east through Hereford and the Wye Valley Area of Outstanding Natural Beauty. The south-west of the county includes the Black Mountains, and the Malvern Hills form part of the boundary with Worcestershire to the east.

Herefordshire has limited access to the motorway network via the M50, which starts near Ross-on-Wye and joins the M5 north of Tewkesbury in Gloucestershire. The other main road links, which all pass through Hereford, are the A49 (running from north to south), the A438 (east to west) and the A4103 to Worcester.

The nature of Herefordshire's rurality presents unique challenges to service providers, with a relatively small population of 178,800<sup>5</sup> scattered across the 2<sup>nd</sup> largest<sup>6</sup> unitary authority in England. Furthermore, although three English counties<sup>7</sup> have a lower population density than Herefordshire, no other top tier local authority has a greater proportion of its population living in "very sparse" areas<sup>8</sup>.

### CURRENT POPULATION

Herefordshire's current total population is 178,800<sup>5</sup>, of which 59% (105,600) are aged 18-64. Herefordshire has an older overall age profile than both the West Midlands Region and England and Wales, and this is apparent in the older groups within the population of interest in this report. Table 1 shows how Herefordshire has a larger proportion of 55-64 year-olds in its population than either the region or England and Wales as a whole, and a smaller proportion of 18-34 year-olds.

It should be noted that the mid-year estimates exclude around 2,700<sup>9</sup> Herefordshire students who live away from home during term-time, the majority of whom are likely to be aged 18-21. As the county has no universities, this group is not compensated for by students from other areas living within the county during term-time.

Table 1: Proportion of total population in adult age-groups, 2005

Area		18-34	35-54	55-64	18-64
Herefordshire	No.	29,400	51,000	25,200	105,600
	%	16.4%	28.5%	14.1%	59.1%
West Midlands Region	%	21.6%	27.6%	11.9%	58.4%
England & Wales	%	22.3%	28.1%	11.7%	62.0%

Source: 2005 mid-year estimates, ONS. Note: figures may not sum due to rounding.

Whilst gender distribution is an important issue when considering older people due to the longer life expectancy of females, it is less of one for adults aged 18-64; there is a roughly

<sup>5</sup> 2005 mid-year estimate, ONS

<sup>6</sup> Behind East Riding of Yorkshire

<sup>7</sup> Northumberland, North Yorkshire and Cumbria

<sup>8</sup> According to the sparsity measures used in the calculation of the Local Government Finance Settlement 2006/07, 29% of Herefordshire's population live in wards with a density of 0.5 persons per hectare or lower and 25% live in Output Areas with a density of 0.5 or lower.

<sup>9</sup> 2001 Census

50:50 split between males and females in the age groups of interest in Herefordshire, as nationally.

## **RECENT TRENDS**

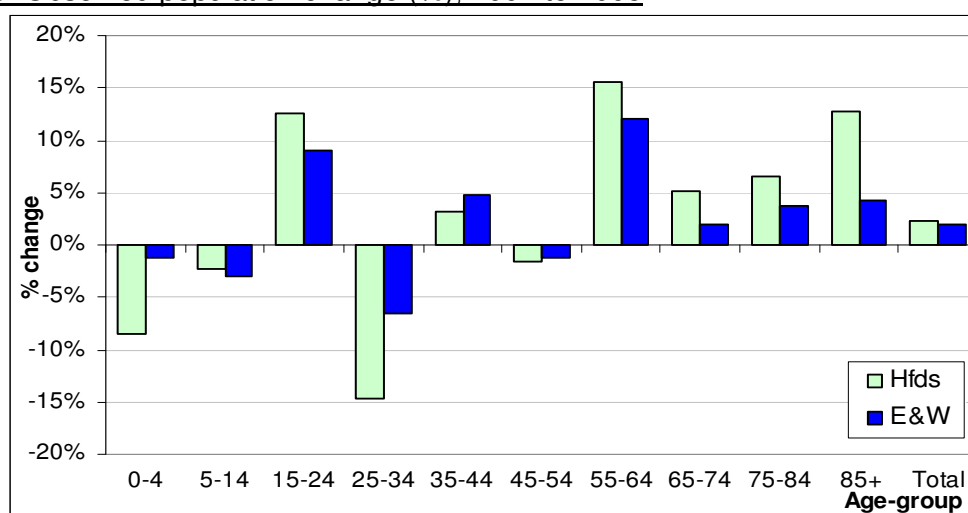
Herefordshire's population grew by 2.2% between 2001 and 2005, which is broadly similar to the national growth (2.0%), but change was not consistent across age-groups (Figure 3). The number of people aged 18-64 increased by 2,500 over this period – a growth similar to the total population growth but, as Table 2 shows, numbers of 18-34 year-olds fell by 4.5%, whilst the population aged 55-64 increased by 15.6%. These changes were in the same direction as national trends, but larger.

Table 2: Observed population change (%), 2001 to 2005

Age-group	Herefordshire	England & Wales
18-34	-4.5%	-0.5%
35-54	+1.0%	+2.0%
55-64	+15.6%	+12.1%
18-64	+2.4%	+2.8%

Source: mid-year population estimates, ONS

Figure 3: Observed population change (%), 2001 to 2005



Source: mid-year population estimates, ONS

## **MIGRATION**

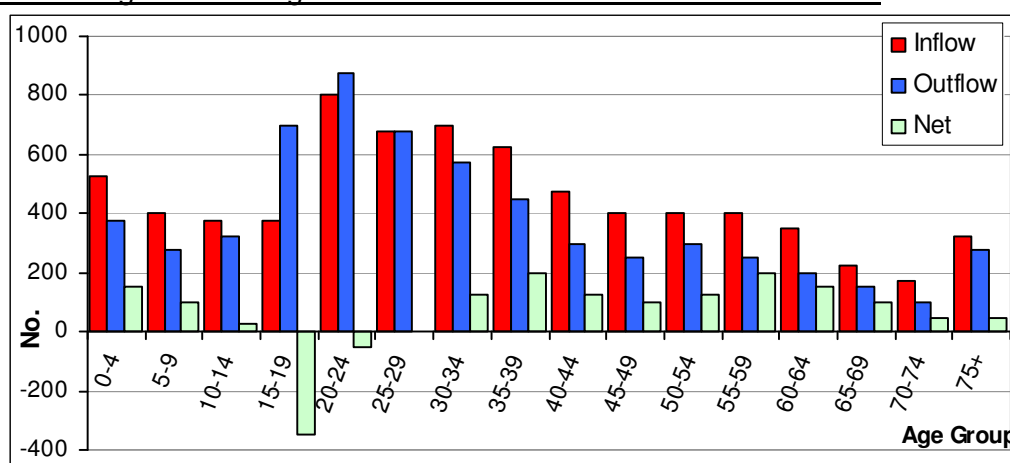
### **Within UK Migration**

Herefordshire experiences an average annual net gain of just over 1,000 residents from elsewhere in the UK. Analysis of migration within *England and Wales*<sup>10</sup> shows that about two-thirds (65%) of the net migrants into Herefordshire come from London and the South-East (including Bedfordshire, Hertfordshire and Essex); just under a quarter (24%) from neighbouring English counties (Gloucestershire, Worcestershire and Shropshire); 13% from non-neighbouring parts of the West Midlands region and the rest from other parts of England; on average more people move from Herefordshire to Wales than vice versa, giving a net loss.

The average numbers of people in each age group moving into and out of Herefordshire each year, along with the average net in-flow (people moving *in* minus people moving *out*), are shown in Figure 4. The largest flows, both into and out of Herefordshire, are in the 20-24 year-old age group. This is one of the age groups where people are most mobile generally, so the pattern is not necessarily unique to Herefordshire.

<sup>10</sup> Over the period mid-1998 to mid-2004  
V4.4 - Final

Figure 4: Average annual migration between Herefordshire and rest of UK



Source: derived from ONS Internal Migration Estimates; average over period mid-2000 to mid-2004

Notably, the only average net *out*-flows are in the 15-19 and 20-24 year-old age-groups, with the largest in the former: on average 350 more 15-19 year-olds leave the county each year than move into it. This may be explained by the fact that Herefordshire does not have a major centre of higher education, coupled with the fact that young people leaving home to start university are generally aged 18-19 and are counted at their term-time address.

However, it is worth noting that although there is an average annual net loss of 400 15-24 year-olds, this only represents around 2% of the county's population of these ages. To put this into perspective, Rutland UA in the East Midlands 'loses' around 7% of its population of this age-group each year, whilst Westminster 'gains' around 7%.

### International Migration

According to the ONS mid-year estimates of population, until 2004 Herefordshire had an average of zero net international migrants per year. In the 2005 estimates, the county had a net in-flow of 440.

The only detailed information available regarding permanent international migration is the number of people moving into Herefordshire from outside the UK in the year before the 2001 Census. This figure was 567, which represents just 0.3% of the total population of the county at the time, and the number moving in the other direction is unknown. 54% of these international in-migrants were aged under 30, which is much higher than the corresponding figure of 44% of in-migrants from within the UK; both figures are higher than the proportion of under 30s of Herefordshire's population (33%).

### Migrant workers

Between 2,500 and 3,000 workers from new European Union accession states<sup>11</sup> were cleared to work in Herefordshire in 2005. The ages of these migrants are unknown, but it is likely that most were young adults. However, there is currently no information on how long they remain in the county, or even the UK.

The county also experiences a significant influx of temporary seasonal agricultural workers each year (around 3,000<sup>12</sup>) – mainly over the summer months, with the majority from Ukraine and Russia. These are, by definition, students who are permitted to work on participating farms for up to 6 months.

<sup>11</sup> Source: Worker Registration Scheme; Work Permits (UK), Home Office. States are: Poland, Lithuania, Estonia, Latvia, Slovenia, Slovakia, Hungary and the Czech Republic.

<sup>12</sup> Source: Seasonal Agricultural Workers Scheme; Work Permits (UK), Home Office.

**ETHNICITY**

Experimental statistics<sup>13</sup> suggest that in 2004, 3.5% of Herefordshire's total resident population was from an ethnic minority (6,200 people). This proportion is still very low by national (14.7%) and regional (15.5%) comparisons, but reflects a growth of 40.9% in the BME population from 2001 compared to just 1.7% for the total county population. It is very likely that numbers have increased even more since the expansion of the EU in May 2004 given the migrant worker statistics discussed above.

This information is also available for Herefordshire's 18-64 year-old population, and indicates that younger age-groups have a slightly higher proportion of people from ethnic minorities: 3.8% of 18-64 year-olds are estimated to be from an ethnic group other than 'white British', in comparison with 3.5% of the total resident population (Table 5). This figure rises to 5.1% of 18-34 year-olds.

For all age-groups, 'White other' was the largest ethnic minority group (1.5% of total population aged 18-64). 'White Irish' was the second largest group for 50-64 year-olds (0.8% of all 50-64s), whilst 'Asian or Asian British' was the second largest for 18-34 year-olds (1.0% of all 18-34s). These two ethnic groups were equally sized for 35-50 year-olds (0.5% of all 35-50 year-olds each).

**Table 5: Percentage of Herefordshire residents in ethnic group, by age-group, 2004**

Age-group	'White British'	Ethnic group other than 'White British'
18 to 34	94.9%	5.1%
35 to 49	96.1%	3.9%
50 to 64	97.3%	2.7%
18 to 64	96.2%	3.8%
Total population	96.5%	3.5%

Source: ONS © Crown copyright.

The small numbers of people aged 18-64 from ethnic minority groups are shown in Table 6, as is the distribution amongst these groups: just under half of people from an ethnic minority are non-white.

**Table 6: Percentage of Herefordshire's 18-64 year-old non-'white British' residents in each ethnic group, 2004**

Ethnic Group	No. aged 18-64 in ethnic group	% of total 18-64 year-old non-'White British' in group
White British	100,800	-
White Irish	600	15.0%
White Other	1,600	40.0%
Mixed	400	10.0%
Asian or Asian British	600	15.0%
Black or Black British	300	7.5%
Chinese	200	5.0%
Other ethnic group	200	5.0%
Non-'White'	1,800	45.0%
Total non-'White British'	4,000	100.0%

Source: ONS © Crown copyright. Figures may not sum due to rounding (to the nearest 100).

## **FUTURE POPULATION**

The Office for National Statistics produces population **projections** for local authorities based on recent and nationally projected trends in births, deaths and migration – i.e. estimates of what could be reasonably expected to happen to the population *if recent trends were to continue*. The most recent set of sub-national projections are 2004-based and project forward to 2029.

Herefordshire Council's Research Team produces population **forecasts** for Herefordshire which are also based on recent and nationally projected trends in births, deaths and migration, but, unlike the projections, also take into account anticipated housing provision under the Unitary Development Plan – which has a constraining effect on in-migration. Until the Regional Spatial Strategy is decided it is not possible to anticipate what housing provision there may be after the UDP, so forecasts can only be produced up to 2011. 2005-based interim forecasts have been produced which take account of a higher than average net international in-migration between 2004 and 2005 (but do not make any attempt to forecast future trends in international migration)

As this needs analysis is interested in expected demand for services up to 2012, and longer term to 2021, the ONS projections are considered alongside the local forecasts; the latter is considered as an alternative scenario for the short-term assessment.

Both the forecast and projected figures for 2011 are presented in Table 7a, along with the projections for 2012 and 2021.

- The key point to note is that according to the ONS projections, the population aged 18-64 in Herefordshire will rise to a peak in 2011 (at 108,100) before falling slowly but steadily to 107,000 in 2021.
- The local forecasts predict less growth by 2011 (to 105,700 people), so that numbers would have to continue to increase to reach the level projected for 2021.
- In the long term (up to 2021), by far the biggest rate of change is expected to be in the population of 55-64 year-olds: an increase of 20.6% from 2005, which represents an extra 5,200 residents. The population aged 35-54 is expected to fall by 5,000 over the same period, although this only represents a fall of 9.8% due to the larger numbers in this group.
- Comparing the ONS projections for 18-64 year-olds in Herefordshire to the corresponding national ones shows that even the expected rise in numbers to 2011 would result in a slightly lower rate of growth than in England and Wales as a whole (2.4% to 3.7%). The subsequent projected fall in Herefordshire's population of 18-64 year-olds would result in a much lower overall rate of growth between 2005 and 2021 (1.3% compared to 5.5% in England and Wales).

All of the potential changes discussed here would result in an older age-structure of the 18-64 year-olds in Herefordshire, as illustrated in Table 7b. The proportion of this group aged 55-64 is expected to increase from 24% in 2005, to 25-26% in 2011/12, and to 28% by 2021. Conversely, the proportion aged 35-54 is expected to decrease from 48% in 2005 to 47% in 2011/12 and 43% in 2021. The proportion in the 18-34 age-group is expected to remain fairly constant, fluctuating between 27% and 29%.



Table 7a: Expected change in population aged 18-64, Herefordshire and England &amp; Wales

		Current	Short-term			Long-term
		2005	2011		2012	2021
		Estimate	Forecast	Projection	Projection	Projection
18-34	No.	29,400	28,700	29,700	30,100	30,500
	% change from 2005	-	-2.4%	+1.0%	+2.4%	+3.7%
35-54	No.	51,000	50,000	51,100	50,600	46,000
	% change from 2005	-	-2.0%	+0.2%	-0.8%	-9.8%
55-64	No.	25,200	27,000	27,300	27,000	30,400
	% change from 2005	-	+7.1%	+8.3%	+7.1%	+20.6%
18-64	No.	105,600	105,700	108,100	107,700	107,000
	% change from 2005	-	+0.1%	+2.4%	+2.0%	+1.3%
18-64: projected % change, England & Wales		-	-	+3.7%	+3.7%	+5.5%

Source: ONS 2005 mid-year estimates & 2004-based sub-national projections; HC Research Team 2005-based interim forecasts using ONS estimates and Gov't Actuary's Department projected trends; GAD 2004-based national population projections.

Table 7b: Expected proportion of 18-64 year-old population by age-group, Herefordshire

Age-group	Current	Short-term			Long-term
	2005	2011		2012	2021
	Estimate	Forecast	Projection	Projection	Projection
18-34	28%	27%	27%	28%	29%
35-54	48%	47%	47%	47%	43%
55-64	24%	26%	25%	25%	28%
18-64	100%	100%	100%	100%	100%

Source: ONS 2005 mid-year estimates & 2004-based sub-national projections; HC Research Team 2005-based interim forecasts using ONS estimates and Gov't Actuary's Department projected trends; GAD 2004-based national population projections.

As only projections are available for the years after 2011, the only long-term scenario considered is the 2021 ONS projection. Although the focus of the short-term needs analysis is 2012, since the projections suggest that the total population aged 18-64 will peak in 2011 it seems appropriate to consider the forecasts and projections concurrently. The combined factors of different age-groups being expected to peak at different points throughout the period and age-sex-specific prevalence rates mean that different mental health problems could peak at different times in the short-term. In terms of service planning it seems appropriate to consider the 'worst case scenario', i.e. take the population scenario that suggests the highest number of cases of each mental health problem. In fact, as will be discussed in subsequent sections, the differences in the numbers estimated to be experiencing mental health problems between the short-term forecast and projections are relatively minor.

It must be noted that the forecasts and projections presented here are only possible scenarios of what might happen to Herefordshire's population in the future – if trends change and/or fertility, mortality and migration assumptions are not met the population could be very different.

As mentioned above, the local forecasts take into account the higher than average international in-migration in 2004, without making any assumptions about the effect of any sustained increase. The international migration assumptions for the 2004-based projections are based on movements in the few years prior to the expansion of the European Union; little is known, even at a national level, about the impact of these changes on the population in the longer term.

## **COMMUNAL ESTABLISHMENT POPULATION**

A communal establishment is defined<sup>14</sup> as an establishment providing managed (i.e. supervised full or part-time) residential accommodation. This includes small hotels and guesthouses if they have capacity for 10+ guests (excluding the owner/manager and family), and sheltered housing unless half or more of the residents possess their own facilities for cooking (in which case the whole establishment is classified as separate households).

The only comprehensive information regarding the population living in communal establishments is from the 2001 Census. As Table 8 shows, the numbers and proportions within the age-groups of interest are small, but it is important to consider them, since prevalence rates tend to relate to the population living in private households. A further complication is that some Census information includes resident staff and their families whilst others exclude them.

Table 8: Household & communal establishment residents in Herefordshire, 2001 Census

	Age-group			
	18-34	35-49	50-64	18-64
Total population	30,992	37,193	34,902	103,087
Household residents	30,636	37,028	34,766	102,430
Communal establishment residents (inc. staff)	356	165	136	657
% of age-group living in a communal establishment (inc. staff)	1.2%	0.4%	0.4%	0.6%
Residents (non-staff) of medical & care establishments	112	83	68	263
Residents (non-staff) of education establishments (inc. halls of residence)	84	11	6	101
Residents (non-staff) of other communal establishments*	52	26	26	104
Communal establishment residents (non-staff)	248	120	100	468

Source: 2001 Census, tables S001 & S126 © Crown copyright.

\* Hotel; boarding house; guest house; hostel (including youth hostel, hostel for the homeless & people sleeping rough; or other. Residents of Hereford Garrison at Credenhill are not included in any of these figures. Note: the age-groups in this table are different to those used throughout the report due to constraints in published Census data.

The majority (56%) of residents were in 'medical & care establishments', although a third (34%) of 18-34 year-old residents were in 'education establishments' – likely the halls of residence of the Royal National College for the Blind. Of the 263 residents of medical & care establishments, 17 were in a psychiatric hospital or home.

In their sub-national household projections, which run to 2026, the Office for the Deputy Prime Minister<sup>15</sup> assume that the numbers of people living in communal establishments will remain constant for all ages below 75. In the absence of any other local information, this assumption will be adopted for the purposes of this report.

- In January 2007, there were 81 people aged 18-64 known to the Adult Mental Health Service living in communal establishments: 13 in secure unit placements, 10 in nursing homes, 36 in residential homes (including adult placements) and 22 in supported housing.<sup>16</sup> These would all fall under the classification of 'medical & care establishments' in Table 8.

<sup>14</sup> 2001 Census, Office for National Statistics

<sup>15</sup> ODP, now Department for Communities and Local Government (DCLG); 2003-based household projections released in 2006.

<sup>16</sup> Source: Adult Mental Health Service, Herefordshire Primary Care Trust.

### Summary: Demographics of Herefordshire

- Herefordshire's current estimated population of 18-64 year-olds is 105,600 – 59% of the total population. The county has an older overall age profile than both the West Midlands region and England and Wales.
- Office for National Statistics projections suggest numbers of 18-64 year-olds may increase by 2.0% by 2012, although more conservative local forecasts which take in to account expected housing provision suggest this increase will only be 0.1% by 2011.
- Projections suggest the 18-64 year-old population could be 107,000 in 2021, an increase of just 1.3% from 2005.
- Recent years have seen a more rapid growth in numbers in older age-groups (55-64s) and a more rapid decline in the younger ones (18-34s) than nationally. This ageing of the age profile is expected to continue, with the 55-64 year-old age-group growing most rapidly (by 7% in the short-term and 21% by 2021).
- The county has a smaller proportion of people from 'Black and Minority Ethnic' (BME) backgrounds than England as a whole (3.5% compared to 14.7%), but this population grew by 40.9% between 2001 and 2004 – much more rapid than the overall population growth of 1.7%. It is likely that numbers have increased further since the expansion of the EU in May 2004: between 2,500 and 3,000 workers from new member states were cleared to work in Herefordshire in 2005, although it is not known how many remain in the county. The county also experiences an annual influx of around 3,000 temporary seasonal agricultural workers – mainly over the summer months.
- In 2004, 3.8% of 18-64 year-olds in Herefordshire were estimated to be from a BME background; just under half of these were non-white.

## GENERAL HEALTH IN HEREFORDSHIRE

### LIFE EXPECTANCY & GENERAL HEALTH

Herefordshire's population is expected to live longer, on average, than the national population. Based on 2002-04 data, life expectancy at birth in Herefordshire is 77.5 years for males and 82.5 years for females, compared to 76.6 and 80.9 respectively for England. Increases in life expectancy over the last ten years have been broadly in line with national trends.

The 2001 Census asked residents to say how their health had been overall in the last year (from options: good, fair or not good). Overall, 69% of Herefordshire's household residents said they were in 'good' health and 8% were 'not good'.<sup>17</sup> This split is broadly similar to nationally (9% 'not good') and regionally (10%).

7% of Herefordshire residents aged 18-64 said that their health was 'not good', which is again broadly similar to England & Wales and the West Midlands Region (8% and 9% respectively). Propensity to state that health was 'not good' increased with age, from 3% of the county's residents aged 18-24 (2% of those aged 18-19) to 14% of those aged 60-64.

Unsurprisingly, across all ages, much higher proportions of residents of communal establishments stated that their health was 'not good' than in the population as a whole: 11% of 18-19 year-olds, increasing to 42% of 60-64 year-olds in communal establishments.<sup>18</sup> As noted in Table 8, Herefordshire's communal establishment population aged 18-64 was 468 in 2001 (0.5% of all 18-64 year-olds), and 56% of these were resident in medical and care establishments.

<sup>17</sup> 2001 Census, Table T07

<sup>18</sup> 2001 Census, Table T09

## **LIMITING LONG-TERM ILLNESS**

A 'limiting long-term illness' (LLI) is defined as an illness, health problem or disability, which limits daily activity or work. At the 2001 Census, 18% of Herefordshire's total population reported having an LLI – the same proportion as nationally and similar to regionally (19%). Of the county's 18-64 year-olds, 14% said they had an LLI, which is broadly equal to the national and regional figures (both 15%). Table 9 shows how the prevalence of limiting long-term illness increases with age.

Table 9: Percentage of Herefordshire residents\* that have an LLI by age group

Age-group	% with LLI	No. with LLI
18-24	7%	964
25-44	9%	4,183
45-59	18%	6,502
60-64	28%	2,818

\* All people, including those living in communal establishments.

Source: 2001 Census, ONS – Crown Copyright

There is no information from the Census regarding the nature of LLIs, and due to the self-reporting nature of the question, it could well be that what is 'limiting' for one person may not be for another. It should also be noted that an LLI is not necessarily a *physical* impairment.

### **Summary: General Health in Herefordshire**

- Herefordshire's population is expected to live longer, on average, than nationally.
- Similar proportions of 18-64 year-olds in Herefordshire were in 'not good' health and/or had a 'limiting long-term illness' as nationally and regionally, according to the 2001 Census.

## **HEREFORDSHIRE'S OVERALL MENTAL HEALTH**

### **MEASURE OF MENTAL HEALTH**

The Regional Lifestyle Survey (2005) examined mental health using a validated measure<sup>19</sup>, with raw scores transformed onto a scale of 0 to 100 (100 = best possible health state), and indicated that Herefordshire residents have very slightly better mental health than residents of the region overall. Men report slightly better mental health than women for both geographies (see Figure 10).

Figure 10: Mental health in 12 months prior to Regional Lifestyle Survey, 2005



Source: Regional Lifestyle Survey 2005, Herefordshire Report; HC Research Team

<sup>19</sup> Based on questions which asked people to rate how much they agreed with certain statements related to mental & physical health. The measure is subject to intellectual property rights & may not be reproduced without prior permission being sought from the publishers. Interested parties should either consult WMRO or WMPHO or consult the supplementary technical report.

## **SUICIDE**

Suicide rates in Herefordshire have appeared high in the past relative to England and Wales as a whole, although the difference is not statistically significant due to the small numbers (annual average of 15-16 deaths). Annual fluctuations can be expected because of the small numbers, but the Director of Public Health's Report (2006) recommends the rates should be closely monitored. Suicide prevention has had a high priority in Herefordshire, and the government target of a 20% reduction in the suicide rate between 1995-97 and 2010 is expected to be met.<sup>20</sup>

Consistently more men than women commit suicide, with the 25 to 44 year-old age group particularly vulnerable. This reflects the national situation, where suicide is the biggest single cause of death for men aged 18 to 35.

Table 11: Number of deaths from suicide of people aged 15 to 64, Herefordshire

Year	Male	Female	Total
2002	8	5	13
2003	10	0	10
2004	12	5	17
2005	8	5	13
2006	4	3	7

Source: Health in Herefordshire: Director of Public Health Annual Report, 2006

### **Summary: Herefordshire's Overall Mental Health**

- The Regional Lifestyle Survey indicated that Herefordshire residents have very slightly better mental health than those of the region overall.
- Suicide rates have appeared relatively high in the county in the past; prevention has had a high priority and the government target of a 20% reduction between 1995-97 and 2010 is expected to be met.

## **SOURCES OF INFORMATION ON ADULTS WITH MENTAL HEALTH PROBLEMS**

### **KNOWN SERVICE USERS**

Although information on users of mental health services does exist, it is not possible to obtain robust, comprehensive estimates of the current number of people experiencing mental health problems who are in receipt of services. This is due to the potential for double-counting as a result of the independent databases used by the different service providers, and also to do with inconsistent recording and difficulties in extracting and obtaining information. The available data is presented in subsequent sections, where appropriate. Many systems do not enable the extraction of historic data, so only a snapshot can be provided.

### **DISABILITY-RELATED BENEFIT CLAIMANTS**

People with a disability can claim specific benefits, and whilst there are no specific benefits for mental health disorders, if such a condition significantly interferes with a person's way of life they are eligible to claim. The two benefits that are available to adults aged 18-64<sup>21</sup> are

<sup>20</sup> Health in Herefordshire: The Annual Report of the Director of Public Health 2006, Herefordshire Primary Care Trust, p.9.

<sup>21</sup> People over 65 can claim Attendance Allowance.

Disability Living Allowance (DLA) and Incapacity Benefit (IB)/Severe Disablement Allowance (SDA).

Benefits data is presented here to give an indication of actual numbers of people in Herefordshire who meet the criteria for disability-related benefits, but this information is of limited value because:

- although the number aged 18-64 claiming each benefit in Herefordshire is available, it is not possible to obtain detailed information about this age-group at a county level, for example the reason for claim, or numbers who claim both benefits;
- it is not possible to calculate take-up rates as the total number eligible is unknown, so is therefore not possible to determine whether any increases in the numbers of claimants are due to increases in eligible numbers, or to improved take-up due to publicity of welfare rights.

### Disability Living Allowance (DLA)

DLA is not income-related, and is paid to people who have required help for three months and are likely to need that help for at least six more months. It comprises two components with different levels depending on the severity of the disability:

- Care component – for people who need help with their personal care (i.e. attention in connection with their bodily functions and/or continual supervision to avoid substantial danger to themselves or others), with three possible rates (higher, middle or lower)<sup>22</sup>;
- Mobility component – for people who have difficulty walking, with two possible rates (higher or lower).<sup>23</sup>

A person can only begin claiming DLA if they are under 65, but can continue to receive it after this age if they satisfy the criteria. As shown in Table 12, roughly two-thirds of Herefordshire claimants are aged 18-64. In 2005, 4.5% of the county's population aged 18-64 are claiming DLA: 4,700 people.

The number of claimants in Herefordshire increased by 7.1% between 2003 and 2005, whilst the population grew by just 1.2%. However, this rise could be related to improvements in take-up rates rather than an increase in prevalence.

Table 12: Claimants\* of either (or both) component(s) of Disability Living Allowance, Herefordshire

	2003	2004	2005	2006
All ages	6,560	6,890	7,200	7,430
Aged 18-64	4,390	4,550	4,700	4,860
% of all claimants aged 18-64	67%	66%	65%	65%
% of population aged 18-64 claiming	4.2%	4.3%	4.5%	-

Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.

\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

Information on the numbers of people claiming each rate of DLA is also published, but it is only possible to obtain exact counts at a county level for the population of working age<sup>24</sup> (see Tables 13 & 14).

<sup>22</sup> Higher rate paid to those who need help during the day *and* night; middle to those who need help during the day *or* night; lower rate to those who need help during some of the day or cannot prepare a cooked meal for themselves given the ingredients.

<sup>23</sup> Higher rate paid to those who are (virtually) unable to walk; lower to those who can walk but need help outside on unfamiliar routes.

<sup>24</sup> 16 to 59 for females; 16 to 64 for males.

Table 13: Claimants\* of Disability Living Allowance (DLA) Care Component (working age), Herefordshire

Rate	2003	2004	2005	2006
Higher	880	880	920	980
Middle	1,170	1,250	1,300	1,330
Lower	1,410	1,480	1,570	1,630
Nil (i.e. eligible for mobility comp. only)	560	530	530	510
All rates	4,020	4,150	4,320	4,450

Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.

\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

Table 14: Claimants\* of Disability Living Allowance (DLA) Mobility Component (working age), Herefordshire

Rate	2003	2004	2005	2006
Higher	2310	2350	2390	2420
Lower	1200	1300	1370	1470
Nil (i.e. eligible for care comp. only)	500	500	560	550
All rates	4020	4150	4320	4450

Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.

\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

People can claim DLA because of any disabling condition, but it is not possible to obtain information on the reason for claim at county level. As at August 2006 the main disabling condition of 19% of all DLA claimants aged 18-64 in Great Britain was 'mental health causes' – the largest single disabling condition. The equivalent figure for the West Midlands region was slightly lower, at 16%; only 'arthritis' was more common (18%).

- As the Regional Lifestyle Survey suggests that mental health in Herefordshire is slightly better than in the region as a whole, it seems most appropriate to take this lower percentage to estimate that around 780 people aged 18-64 in Herefordshire may be claiming DLA for this reason – i.e. may need some level of care because of a 'mental health reason'.

The number of people aged 18-64 claiming each level of each component of DLA for a 'mental health reason' is not available for any geography, and as rates may vary with age it is therefore not appropriate to attempt to estimate how many claimants of each type in Herefordshire are aged 18-64 and claiming for a 'mental health reason'.

### **Incapacity Benefit (IB) / Severe Disablement Allowance (SDA)**

IB is paid to those who cannot work because of an illness or disability and who meet certain National Insurance contribution requirements. Until 2001 SDA was paid to those who were unable to work but did not meet the contribution criteria; these people can still receive SDA but no new claims can be made.

Although these benefits are primarily for people of working age, some claimants are still able to receive them once they pass state retirement age.<sup>25</sup> However, as Table 15 shows, almost all claimants in Herefordshire have been aged 18-64 (98%) since 2003: around 5,900 each year. These figures indicate that 5.6% of the population aged 18-64 in Herefordshire are claiming IB/SDA each year.

Detailed data regarding the reason for a claim is only available for the population as a whole (i.e. all claimants aged 16 and above). Over a third of people claiming IB/SDA each year are unable to work because of a 'mental disorder' (Table 15). This is the single most

<sup>25</sup> Currently 60 for women; 65 for men. There is no upper limit for SDA once it has been claimed, and the short-term rate of IB can be paid for up to a year after retirement age.

common reason for claiming, and the proportion has increased slightly each year since 2002 (from 35% to 38%). These proportions are similar to regionally, and about two percentage points lower than the proportion in England as a whole each year.

**Table 15: Claimants of Incapacity Benefit (IB) or Severe Disablement Allowance (SDA), Herefordshire**

	2003	2004	2005	2006
Total IB/SDA claimants (all ages)	5,960	5,970	6,040	5,890
No. of people (all ages) claiming IB/SDA due to 'mental disorders'	2,090	2,150	2,190	2,220
% of all IB/SDA claimants (all ages) claiming due to 'mental disorders'	35%	36%	36%	38%
No. of IB/SDA claimants aged 18-64	5,850	5,850	5,920	5,800
% of all IB/SDA claimants aged 18-64	98%	98%	98%	98%
% of population aged 18-64 claiming IB/SDA	5.6%	5.6%	5.6%	-

*Source: Work and Pensions Longitudinal Study, Department for Works and Pensions. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.*

The increasing trend in claims due to mental disorders is further illustrated by considering the change in numbers: whilst the total number claiming IB/SDA has fluctuated annually, and *fell* by 70 people (1.2%) overall between 2003 and 2006, the number claiming due to mental disorders has increased each year up to a total of 130 people over the period (a growth of 6.2%).

- Although the exact number of people aged 18-64 claiming because of a mental disorder cannot be obtained, if it can be assumed that the distribution of reasons claiming are the same for 18-64 year-olds as for all people aged 16 and over<sup>26</sup> it could be estimated that, as at August 2006, around 2,175 18-64 year-olds in Herefordshire are claiming IB/SDA because of a 'mental disorder'.

## Discussion

The claimant figures suggest that more people aged 18-64 in Herefordshire are unable to work because of a disability (5,800) than require care because of a disability (4,860), although it is not possible to determine how many people are unable to work *and* require care. It is estimated that over 2,000 people aged 18-64 are unable to work because of a 'mental disorder'. These facts should be noted when considering ability to pay for services.

The reason for there being 940 more claimants of IB/SDA than DLA is unknown; there could be a real difference in the effects of disabilities on peoples' lives, or there may be differences in take-up. No estimates of the proportion of people who are eligible for a disability-related benefit exist, even at a national level, although the Department for Works and Pensions have commissioned a study into the feasibility of estimating DLA take-up.<sup>27</sup> However, 'best guesses' of take-up are said to be 'discouraging', particularly in relation to younger people's take-up of DLA (not least because half of applications fail). It is expected that a greater proportion of those who are eligible for IB are claiming it (i.e. take-up is higher), as it is accessed through long-term sick pay.<sup>28</sup>

<sup>26</sup> This is possibly an unrealistic assumption, particularly if considering older people. However, given that 98% of claimants are aged 18-64 it seems reasonable for this purpose.

<sup>27</sup> By the Policy Studies Institute: [www.psi.org.uk/research/project.asp?project\\_id=151](http://www.psi.org.uk/research/project.asp?project_id=151)

<sup>28</sup> Marsh, A (2006) *The trouble with take-up. The Monitor: Blue Skies*. Issue no. 143, Vol. 1 [http://www.epolitix.com/EN/Publications/Blue+Skies+Monitor/143\\_1/home.htm](http://www.epolitix.com/EN/Publications/Blue+Skies+Monitor/143_1/home.htm)



## **NATIONAL ESTIMATES OF PREVALENCE OF MENTAL HEALTH PROBLEMS**

There are several different ways of measuring mental health problems:

- 'prevalence' – number of cases of a particular diagnosis at one point in time;
- 'lifetime prevalence' – number of people who have experienced a particular problem at any time in their lives;
- 'incidence' – number of new cases arising over a particular time period.

To get a true understanding of the extent of mental health problems, it is best to consider these measures in conjunction with each other, although it is not always possible to obtain data on all of them.

The most reliable way of estimating rates is to undertake a survey of the general population. In Great Britain the largest survey of this kind was the *Survey of Psychiatric Morbidity among Adults in Private Households*, carried out in 2000 by the Office for National Statistics on behalf of the Department for Health.<sup>29</sup> The rates derived from this survey are the most widely quoted amongst the relevant literature so are used as much as possible in this Herefordshire Needs Analysis.

The ONS survey provides age-sex specific rates for the prevalence of neurotic disorders (common mental health problems), personality disorders and probable psychotic disorders.

Organic psychoses (such as dementia) are not covered by the ONS survey – and neither are eating or sexual disorders<sup>30</sup> [pp.13 & 14]

Other surveys relating to specific conditions have been published; a survey into the prevalence of early onset dementia has been utilised to estimate numbers with this condition.

The following sections are arranged by type of mental health problem, with estimated and projected numbers of people in Herefordshire according to national observations presented alongside any available information about known service users in the county.

Underlying the subsequent sections is the assumption that future prevalence will remain at current levels. It is impossible to be categoric about this, and it is important to bear in mind some suggestions that it could increase; as well as changes in incidence, it is possible that there could be changes in treatment and diagnosis. However, there is a lack of information – even at a national level – on likely future scenarios with regard to mental health problems.

In a recent Institute of Public Policy Research report for the Disability Rights Commission on "...the possible circumstances and experiences of disabled people by 2020"<sup>31</sup>, possible future trends are projected using observed changes in self-reporting of a long-term health problem or disability and type of impairment in the ONS Labour Force Survey between 2001 and 2004.

'Mental illness' is one of the impairment groups, and the work indicates that there could be "...a notable increase in the number of people with mental health impairments across all the younger age groups"<sup>32</sup> (i.e. all age groups below 50 years). The authors note that "[t]his is consistent with the World Health Organisation prediction that depression will be the leading cause of disability by 2020 (WHO 2001)."

However, they qualify all of their work with the caution that "...the fact that a pattern has occurred between 2001 and 2004 is not a guide to the pattern occurring over the next four

<sup>29</sup> [www.mind.org.uk/Information/Factsheets/Statistics/Statistics+1](http://www.mind.org.uk/Information/Factsheets/Statistics/Statistics+1)

<sup>30</sup> Singleton, N. et al (2001) *Psychiatric Morbidity among Adults living in Private Households, 2000*. The Stationery Office, London. pp.13 & 14.

<sup>31</sup> Pillai, R et al (March 2007) *Disability 2020: Opportunities for the full and equal citizenship of disabled people in Britain in 2020*. Disability Rights Commission; p.18.

<sup>32</sup> *Ibid*, p.49.

years, much less over the next 15 years. None the less, these extrapolations give at least some indication of one possible future scenario, although we cannot make any claims for its likely accuracy.<sup>33</sup> Their findings for the UK could be applied to Herefordshire's population, but the broad classification of 'mental illness' would not give any real insight with regard to likely future demand for services from adults with mental health problems.

#### **Summary: Sources of Information on Adults with Mental Health Problems**

- It is not possible to obtain robust, comprehensive estimates of the number of people experiencing mental health problems who are in receipt of services. This is due to the potential for double-counting as a result of the independent databases used by the different service providers, and also to do with inconsistent recording and difficulties in extracting and obtaining information.
- It is estimated that around 780 people aged 18-64 in Herefordshire may be claiming Disability Living Allowance (i.e. may need some level of care) for a 'mental health reason' in August 2006, and that at the same time around 2,175 are claiming Incapacity Benefit or Severe Disablement Allowance because of a 'mental disorder'.
- Estimates and future projections have been produced for the purpose of this report, mainly using the *Survey of Psychiatric Morbidity among Adults in Private Households*, carried out in 2000 by the Office for National Statistics on behalf of the Department for Health. These assume that prevalence rates in Herefordshire will remain at the same level as in Great Britain as a whole in 2000. This is despite some suggestions that prevalence may increase, for which no robust information exists, even at a national level.

## **MENTAL HEALTH PROBLEMS AMONGST ADULTS IN HEREFORDSHIRE**

### **COMMON MENTAL HEALTH PROBLEMS (NEUROTIC DISORDERS)**

#### **Definition**

Common mental health problems are conditions traditionally referred to as "neuroses", which exhibit symptoms that can be regarded as severe forms of 'normal' emotional experiences.<sup>34</sup> These symptoms include fatigue and sleep problems, forgetfulness and concentration difficulties, irritability, worry, panic, hopelessness, and obsessions and compulsions, but to such a degree that they cause distress and problems with daily activities.<sup>35</sup>

#### **Estimated Numbers**

The possible numbers of household residents aged 18-64 in Herefordshire with different types of neurotic disorders for the different years of interest are shown in Table 16. These estimates are derived from applying the age-sex-specific prevalence rates from the ONS survey of psychiatric morbidity. Interviewees in the survey were classified as having a neurotic disorder if they had experienced symptoms of the particular disorder<sup>36</sup> during the past week. Clearly 'mixed anxiety and depressive disorder' is much more prevalent than any other, but this "...is a 'catch-all' category which included people...who could not be coded into any of the other five neurotic disorders"<sup>37</sup> (ONS, 2000, p. 24).

<sup>33</sup> Ibid, p.46.

<sup>34</sup> Mental Health Foundation website: <http://www.mentalhealth.org.uk/information/mental-health-overview/mental-health-introduction>

<sup>35</sup> Singleton et al (2001), p.153

<sup>36</sup> By applying algorithms based on the ICD-10 diagnostic criteria for research (ibid, p.24)

<sup>37</sup> Ibid, p.24

Assuming that these rates are appropriate for Herefordshire's household population, both at the time of the survey and into the future, there is not expected to be a dramatic change in the number of people with any particular neurotic disorder, particularly in the longer term.

Table 16: Household residents aged 18-64 with neurotic disorder(s), Herefordshire

Disorder	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short- term*	2021 (projected pop'n)	% change in long- term
Mixed anxiety & depressive disorder	9,300	9,450	9,450	9,700	9,650	3%	9,500	1%
Generalised anxiety disorder	5,150	5,250	5,200	5,350	5,350	2%	5,250	0%
Depressive episode	3,000	3,050	3,050	3,100	3,100	2%	3,050	0%
All phobias	2,000	2,050	2,000	2,050	2,050	0%	2,000	-2%
Obsessive compulsive disorder (OCD)	1,250	1,300	1,300	1,350	1,350	4%	1,300	0%
Panic disorder	800	800	800	850	850	6%	850	6%
<b>ANY NEUROTIC DISORDER(S)</b>	<b>17,900</b>	<b>18,250</b>	<b>18,250</b>	<b>18,700</b>	<b>18,650</b>	<b>2%</b>	<b>18,350</b>	<b>1%</b>

Source: Herefordshire Council Research Team using ONS estimates, projections and rates.

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection.

Note: counts rounded to nearest 50; totals don't sum as people can have more than one disorder.

The rates suggest that 1 in 6 (17%) of Herefordshire's household residents aged 18-64 were suffering from a common mental health problem in 2005 (18,250 people). Assuming that these prevalence rates remain constant, this proportion is expected to be the same in 2021: this would represent a 1% growth in the number of people with common mental health problems (an extra 100 people).

According to these national rates, the largest number of adults with common mental health problems living in households would be expected in 2011 – if the ONS projection were realised (18,700 people; a growth of 2% from 2005). According to the more conservative local forecast, the overall number in 2011 would be expected to remain at similar levels to 2005.

As already mentioned (p.15), the Institute of Public Policy Research report that the World Health Organisation predict "...depression will be the leading cause of disability by 2020..."<sup>38</sup>, but it has not been possible to establish any quantifiable relationship between this suggestion and the incidence of common mental health problems in Herefordshire.

### Known service users & discussion

Although notably higher than the proportion of those without neurotic disorder, according to the ONS survey only two-fifths (39%) of those identified as having a neurotic disorder had spoken to their GP about a mental or emotional problem in the previous year (6% of those without).<sup>39</sup> Less than a quarter (24%) of those exhibiting significant neurotic symptoms were currently receiving treatment (either medication or therapy) for a mental or emotional problem.<sup>40</sup> For these reasons, it would be impossible to ascertain whether the national prevalence rates produce accurate estimates.

<sup>38</sup> <sup>38</sup> Pillai, R et al (March 2007) *Disability 2020: Opportunities for the full and equal citizenship of disabled people in Britain in 2020*. Disability Rights Commission; p.49.

<sup>39</sup> Singleton et al (2001), p.105.

<sup>40</sup> Ibid, p.103.

However, despite the above, many statistics point to mental health problems being very common in GP consultations. For instance, the Department of Health's *Choosing Health* consultation in March 2004 indicated that up to 1 in 4 GP consultations concern mental health issues<sup>41</sup>, and Mann (1992)<sup>42</sup> suggested that 90% of depression is managed in primary care – with this problem being the third most common reason for GP consultations.<sup>43</sup>

Whilst GPs have to supply a certain amount of information regarding patients to the Primary Care Trust<sup>44</sup>, much of the specific information is held in their local systems and it was not possible to access this for this report, although it may be possible in the future.

- The only statistic that is available is that 1,285 patients<sup>45</sup> of any age, of all 24 GP practices in Herefordshire, were newly diagnosed (i.e. incidence) as experiencing a single major depressive episode in 2006-07. It is not possible to estimate how many of these may be aged 18-64 as prevalence, and therefore incidence, varies according to age.<sup>46</sup>

The only more detailed information on adults experiencing common mental health problems is from the Adult Mental Health Service caseload audit in January 2007. This secondary service deals with cases that are too serious to be dealt with by a GP alone. There were 1,004 such cases, which are presented in Table 17. It must, however, be noted that a person may be counted more than once if they saw more than one care co-ordinator, although it is not possible to ascertain the extent of this. It would be expected that most of these people would also be known to GPs, so therefore some may be included in the *incidence* figure of 1,285 – although not all, as some cases would have occurred before April 2006.

Table 17: 18-64 year-olds identified by caseload audit as receiving care from Herefordshire Adult Mental Health Service for a common mental health disorder (primary diagnosis), January 2007

Diagnosis	Caseload	% of common mental health problem cases
Anxiety	197	19.6%
Depression	606	60.4%
Neuroses	75	7.5%
Obsessive compulsive disorder (OCD)	80	8.0%
Post traumatic stress disorder (PTSD)	46	4.6%
Total common mental health problem	1,004	100%

Source: Adult Mental Health Caseload Audit, Herefordshire PCT, January 2007

Due to differences in classifications, the only possible comparison is between known and estimated obsessive compulsive disorder (OCD). It is to be expected that prevalence rates would estimate many more cases than are being treated by secondary services – the rest

<sup>41</sup> Sainsbury Centre for Mental Health (2006) *Prevalence – how common are mental health problems?* [www.scmh.org.uk](http://www.scmh.org.uk)

<sup>42</sup> Cited in: NHS (2005) *Marginalised groups – people with mental health problems.* [www.library.nhs.uk/mentalhealth](http://www.library.nhs.uk/mentalhealth)

<sup>43</sup> Effective Health Care Bulletin (2002) *Improving the recognition and management of depression in primary care* Vol. 7. No. 5. NHS Centre for Reviews and Dissemination. The University of York. Cited in: *Fast Forwarding Primary Care Mental Health – Graduate primary care mental health workers: Best Practice Guidance (2003)*

<sup>44</sup> GPs are required to supply data on certain performance targets to the PCT under the Quality and Outcomes Framework (QOF) for GPs, as part of the new GP contract.

<sup>45</sup> Not necessarily residents of Herefordshire, as there is no restriction on registering with a GP outside county of residence. Conversely, Herefordshire residents with mental health problems may be registered with a GP outside the county.

<sup>46</sup> Singleton et al (2001), p.24.

would be expected to be either not be receiving treatment, or being treated in primary care – by their GP. However, the proportions are reasonably similar: 7.1% of the estimated number of people with any neurotic disorder have OCD, in comparison with 8.4% of all cases identified in the caseload audit. However, a significant caveat with this comparison is that it assumes no double-counting in the audit.

If these figures could be considered robust counts of adults receiving a service from the Adult Mental Health Service run by Herefordshire PCT because of a common mental health problem, it could be estimated that around 5% of people experiencing such a problem require secondary care. If this were the case, none of the population scenarios considered would result in a noticeable increase in potential service users: no more than 10 extra by 2011 if the ONS projection were realised, but only 5 or 6 more than in 2005 by 2021.

- There are (April 2007) 15 people aged 18-64 with common mental health problems living in managed accommodation in Herefordshire: one in a nursing home, three in residential homes and eleven in supported housing. These people are not included in any of the estimates using the prevalence rates, but would be expected to be included in the caseload audit, and in the GP figures if onset was in 2006-07.

**Summary: Common Mental Health Problems**

- An estimated 18,250 adults aged 18-64 were experiencing common mental health problems in Herefordshire in 2005.
- Assuming that the national prevalence rates from 2000 remain appropriate, no notable change is expected in the number of adults experiencing common mental health problems in the county in the short-term (i.e. up to 2012).
- The same assumption yields an expected 1% increase in numbers by 2021: 100 extra people;
- Assuming that those who need to are currently accessing secondary services, this could be expected to equate to an extra 5 or 6 people requiring secondary mental health services in 2021.

## **PSYCHOTIC DISORDERS**

### **Definition**

Psychotic symptoms are less common than 'neurotic' symptoms, and interfere with a person's perception of reality, possibly including hallucinations - i.e. seeing, hearing, smelling or feeling things that no-one else can.<sup>47</sup> In the ONS *Survey of Psychiatric Morbidity among Adults in Private Households* psychotic disorders were defined as "...one of a number of disorders under the ICD-10 categories of 'schizophrenia, schizotypal and delusional disorders' and affective disorder such as manic episodes and bipolar affective disorder." These disorders are known as 'severe and enduring mental health problems'<sup>48</sup>, and people with them would be expected to need higher levels of treatment and/or care than the majority experiencing 'common mental health problems'.

Due to the way that the survey was conducted, and as it is very difficult for a non-specialist interviewer to make assessments of psychotic disorders, ONS present prevalence of 'probable' psychotic disorder.<sup>49</sup> Respondents were diagnosed as having a 'probable' psychotic disorder if they were assessed as such at a clinical interview, or if they didn't have a clinical interview but had two or more indicators of psychosis in the initial interview.<sup>50</sup>

### **Estimated Numbers**

The national prevalence rates suggest that there has not been any noticeable change in the number of people in the county with these conditions between 2001 and 2005, and numbers are not expected to change either by 2012 or 2021 (see Table 18).

Table 18: Household residents aged 18-64 with probable psychotic disorder(s), Hfds

Disorder	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Probable psychotic disorder	600	600	600	600	600	0%	600	0%

Source: Herefordshire Council Research Team using ONS estimates, projections and rates.

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection.

Note: counts rounded to nearest 50.

### **Known service users**

#### **Primary Care**

- According to data provided to the Primary Care Trust by GPs under the 'Quality and Outcomes Framework' (QOF), there were 1,210 cases of psychosis, schizophrenia or bipolar affective disorder (i.e. psychotic disorders) known to GPs in Herefordshire<sup>51</sup> as at 31<sup>st</sup> March 2007. This equates to an overall prevalence (in the total population) of 0.7%<sup>52</sup> (678 per 100,000 population). This prevalence is based on the total number of patients, but it is extremely unlikely that any of these 1,210 cases would be under 16.

The overall prevalence of 0.7% is identical to the equivalent figure for England, which indicates that local prevalence is the same as national – although an overall figure such as this takes no account of differences in age structure. Having said this, although age-specific

<sup>47</sup> Mental Health Foundation:

<http://www.mentalhealth.org.uk/information/mental-health-overview/mental-health-introduction>

<sup>48</sup> London Health Observatory: [http://www.lho.org.uk/HIL/Disease\\_Groups/MentalHealth.aspx](http://www.lho.org.uk/HIL/Disease_Groups/MentalHealth.aspx)

<sup>49</sup> Singleton et al (2001), pp.16-17.

<sup>50</sup> Ibid, p.82.

<sup>51</sup> i.e. registered with a Herefordshire GP. Therefore could include some cases living out of county, and could exclude some cases in Herefordshire registered with a GP in another county.

<sup>52</sup> Based on 178,341 registered patients – of all ages.

prevalence rates were presented, the ONS survey found no significant differences in prevalence between age-groups amongst household residents aged 18 and over.<sup>53</sup>

- Making the major assumption that the age distribution of psychotic disorders known to GPs in Herefordshire in 2006-07 is equal to the age distribution of the population as a whole at mid-2005, it could be estimated that there were 874<sup>54</sup> cases of psychosis, schizophrenia or bi-polar affective disorder in patients aged 18-64 known to GPs in Herefordshire.

The equivalent count for 2005-06 was 943 (an estimated 681 aged 18-64 using the same assumptions as previously), but an additional 267 cases of psychotic disorder in one year seems unrealistic. It is expected that this 28% increase in known cases is related to changes in GP recording/reporting systems rather than a sudden jump in prevalence or registered patients (the number of people registered with a GP grew by less than 1% over the same period).

### Secondary care

- According to the Adult Mental Health Service caseload audit in January 2007, 832 people aged 18-64 were receiving a service because of a psychotic disorder (see Table 19). The audit suggests that over two-thirds of cases are diagnosed as 'schizophrenia'. However, there is significant doubt as to how accurate the counts are due to these large numbers. It is likely that some service users worked with more than one care co-ordinator, and would therefore be double counted in the audit.

Table 19: Caseload of 18-64 year-olds receiving care from Adult Mental Health Service for a psychotic disorder (primary diagnosis), Herefordshire, January 2007

Diagnosis	Caseload	% of psychotic disorder cases
Bipolar	156	18.8%
Psychosis	108	13.0%
Schizophrenia	568	68.3%
Total psychotic disorder	832	100%

Source: Adult Mental Health Caseload Audit, Herefordshire PCT, January 2007

It would be expected that most of the Adult Mental Health service users identified by the caseload audit would also be known to GPs; the estimated numbers aged 18-64 from both of these sources are reasonably similar.

### Discussion

Both the estimated number of cases known to GPs (874) and the (possible) number receiving a service from the Adult Mental Health service (832) seem markedly higher than the prevalence rates would suggest (600), but the following must be borne in mind:

- the GP estimate is based on a significant assumption regarding the age distribution of these disorders in Herefordshire;
- the caseload audit may include double counting where a person has seen more than one care co-ordinator;
- the 600 is an estimate of the number of *household* residents.

In early 2007, there were 49 people aged 18-64 diagnosed as having a 'psychosis' or 'psychopathic disorder' living in managed accommodation in Herefordshire.<sup>55</sup> It is expected that these are included in the counts of known service users, but they would not be included in the estimate from the rates.

<sup>53</sup> Singleton et al (2001), p.26.

<sup>54</sup> 2005 mid-year estimate: 72% of population aged 16+ is aged 18-64.

<sup>55</sup> Source: Adult Mental Health Service, Herefordshire Primary Care Trust; 33 in residential/ nursing homes; 7 in secure units; 9 in supported housing.

Nevertheless, even after adding an extra 50 people to the estimate of 600 using national prevalence rates, it would appear that there are 200 more adults with psychotic disorders currently accessing either primary or secondary care services in Herefordshire than the rates suggest. As this group of people are the most likely to require intensive services, this kind of discrepancy would have a significant impact on the cost of providing these services. Therefore, it is important to try and understand the large difference.

It is not possible to ascertain the extent of double counting in the Adult Mental Health caseload audit – therefore it is not appropriate to assume that the figure of 832 is an accurate count of the number of 18-64 year-olds with a psychotic disorder receiving secondary services.

It would be hoped that information from the GP Quality and Outcomes Framework would be more accurate, but it is still possible that there are definitional differences between what constitutes 'psychosis, schizophrenia or bi-polar affective disorder' according to a GP and what is a 'probable psychotic disorder' based on the national survey.

Indices produced by Durham University<sup>56</sup> suggest that, in view of its social characteristics, Herefordshire would be expected to have a lower prevalence of severe mental health problems (such as psychotic disorders) than nationally (by approximately 20%). Crudely<sup>57</sup> applying this to the 600 people estimated using the national rates would suggest that the county would be expected to have just under 500 household residents aged 18-64 with a probable psychotic disorder. This would further widen the gap between the estimated and 'known' figures.

However, as mentioned above, this is in direct conflict with the QOF data, which suggests (using a crude overall prevalence rate) that Herefordshire has a similar prevalence to England as a whole.

Therefore, it is not possible to reconcile the figures suggested by the national prevalence rates and the estimated number of adults known to GPs with psychosis, schizophrenia or bi-polar affective disorder.

Nonetheless, a useful conclusion can still be drawn from the fact that the estimated numbers of 18-64 year-old household residents with a probable psychotic disorder using the national prevalence rates do not change over the period 2001 to 2021. Therefore, despite the discrepancies discussed above, there is no reason to assume that more people in Herefordshire will require treatment for a psychotic disorder, either in 2012 or 2021, than do currently.

**Summary: Psychotic Disorders**

- There are an estimated 874 cases of 'psychosis, schizophrenia or bi-polar affective disorder' known to GPs in Herefordshire in January 2007.
- This figure is higher than national prevalence rates would suggest (600 household residents) - even after accounting for approximately 50 people in communal establishments, and it has not been possible to reconcile these figures.
- Despite this large discrepancy, there is no reason to assume that more people in Herefordshire will require treatment for a psychotic disorder either in 2012 or 2021, than do currently.

<sup>56</sup> On behalf of the Department of Health & the Care Services Improvement Partnership; Adult Mental Health Service Mapping website: [www.amhmapping.org.uk/reports/workbook.php](http://www.amhmapping.org.uk/reports/workbook.php)

<sup>57</sup> i.e. not taking age structure into account. However, although age-specific rates were presented and used to calculate the estimate, the national survey found no significant difference in prevalence by age.



## **PERSONALITY DISORDERS**

### **Definition**

The ONS *Survey of Psychiatric Morbidity among Adults in Private Households* uses the American Psychiatric Association's DSM-IV definition of a personality disorder, i.e. 'an enduring pattern of inner experience and behaviours that deviates markedly from the expectation of the individual's culture, is pervasive and inflexible, has an onset in adolescence or early adulthood, is stable over time and leads to distress or impairment.'<sup>58</sup>

### **Estimated Numbers**

Assuming that they are appropriate for Herefordshire's current and future population, the national prevalence rates suggest that there were 4,650 household residents with a personality disorder in mid-2005 – as shown in Table 20. Both short- and long-term projections could be expected to result in a 3% rise in this number: to 4,800. However, the more conservative local forecast would suggest only a 1% increase in the short-term (to 4,700).

Table 20: Household residents aged 18-64 with personality disorder(s), Herefordshire

Disorder	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Personality disorder <sup>59</sup>	4,500	4,650	4,700	4,800	4,800	3%	4,800	3%

*Source: Herefordshire Council Research Team using ONS estimates, projections and rates.*

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection.

*Note: counts rounded to nearest 50.*

### **Known service users**

Nothing is known about adults with a personality disorder in Herefordshire who are receiving treatment or care from a GP; the only information is from the Adult Mental Health Service caseload audit in January 2007, which suggests that care co-ordinators in the secondary service were working with 62 people with this diagnosis.

In early 2007, there were 4 people aged 18-64 diagnosed as having a 'personality disorder' living in managed accommodation in Herefordshire: one in a residential home, one in a medium secure unit, and two in supported housing.<sup>60</sup> It is expected that these are included in the caseload audit, but they would not be included in the estimate from the rates.

### **Discussion**

The known cases are tiny in comparison with the estimated number according to the prevalence rates (just 1.3% of this estimate), but it is to be expected that not all people with a personality disorder will come into contact with secondary mental health services<sup>61</sup> - probably even the majority. There is a history of these services not taking on people with personality disorder (not least because of a lack of treatments to offer them and associated statutory constraints), although recent national policy<sup>62</sup> is starting to challenge this. Some people may receive the treatment they need from their GP, or cases may not be known to service providers at all. It is also possible that personality disorders are misdiagnosed or co-exist with another mental health problem, so that the person is recorded as having

<sup>58</sup> Singleton et al (2001), p.17.

<sup>59</sup> Including the following types of personality disorder: obsessive-compulsive, avoidant, schizoid, paranoid, borderline, antisocial, dependent, schizotypal, histrionic and narcissistic.

<sup>60</sup> Source: Adult Mental Health Service, Herefordshire Primary Care Trust.

<sup>61</sup> Hawkings, C. and Gilbert, H. (2004) *Dual diagnosis toolkit; mental health and substance misuse: a practical guide for professionals and practitioners*. Rethink and Turning Point, p.19

<sup>62</sup> Such as *No longer a diagnosis of exclusion. Policy implementation guidance for the development of services for people with personality disorder*. National Institute for Mental Health in England (2003)

another mental health problem instead. This is a particular problem because the symptoms of personality disorders can be more general than those of other mental health problems.<sup>63</sup>

Therefore, it is not possible to determine whether the rates produce an accurate estimate of the actual numbers, but in the absence of any other information it must be assumed that they do.

#### **Summary: Personality Disorders**

- There were an estimated 4,650 household residents aged 18-64 in Herefordshire with a personality disorder in 2005.
- If prevalence were to continue at the same levels, forecast population changes would result in this number increasing by around 50 people (1%) in the short-term (i.e. up to 2012).
- In the longer term, in 2021, projections would suggest a 3% growth in the number, to 4,800 adults (an increase of around 150 people)
- It is estimated that currently around 60 adults receiving secondary specialist mental health care have a primary diagnosis of 'personality disorder' – just 1.3% of all estimated cases. It is not possible to determine how many people are diagnosed within primary care.
- This large discrepancy may be explained by considering that large numbers of people with a personality disorder do not require specialist services, or may be misdiagnosed with another mental health problem. There has also been a history of secondary services not taking them on because of a lack of treatments and associated statutory constraints, although national policy is starting to challenge this.

## **EARLY ONSET DEMENTIA**

### **Definition**

Early – or young – onset dementia is defined by the Alzheimer's Society<sup>64</sup> as a 'broad range of conditions that can cause dementia in [people under 65]'. As it is rare, no national population based surveys have been conducted to estimate prevalence rates – so the only sources are relatively small, local studies based on known cases. A recent report<sup>65</sup> for the Alzheimer's Society considered all such studies and used an 'expert consensus group' to produce more robust prevalence rates.<sup>66</sup>

### **Estimated Numbers**

Assuming that once age and gender are accounted for these rates are suitable estimates of prevalence for Herefordshire, the current and projected numbers of people with early onset dementia are shown in Table 21.<sup>67</sup> The projected growth in the population could be expected to result in a small increase in the number of cases of early onset dementia in the county, from an estimated 52 in 2005 to 55-56 in 2011/12, and 60 in 2021. For all years, around three-quarters of cases could be expected to be people aged 55-64.

<sup>63</sup> Hawkings and Gilbert (2004), p. 19

<sup>64</sup> *Younger people with dementia: an approach for the future* (2005), Alzheimer's Society, London.

<sup>65</sup> Knapp, Prof. M. et al (2007) *Dementia UK: The Full Report*. Alzheimer's Society, London

<sup>66</sup> Using the Expert Delphi Consensus methodology, whereby ten leading UK and European experts systematically reviewed currently available research data and "...reached a consensus to produce the best possible estimates" (Knapp et al, p.xii).

<sup>67</sup> The Alzheimer's Society will be publishing local authority estimates using these rates "...in due course" (Knapp et al, p.24).

Table 21: Estimated &amp; projected number of Herefordshire residents aged 30-64 with dementia

Age-group	Current	Short-term			Long-term
	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	2021 (projected pop'n)
30-54	15	15	16	16	15
55-64	37	40	40	40	45
Total	52	55	56	56	60

Source: Herefordshire Council Research Team. Note: unrounded figures presented due to very small numbers, but these cannot be assumed to be exact as the population figures upon which they are based are only estimates.

Even after assuming that these rates are appropriate for Herefordshire, it should be noted that the studies that these rates were based on would have had large confidence intervals given the small sample sizes. For instance, according to one study<sup>68</sup> the 95% confidence interval for prevalence amongst women aged 60-64 was between 75 and 207 cases per 100,000 population. Confidence intervals are not presented in the new report, but the estimates should still be considered with caution.

It is also likely that these rates under-estimate the true prevalence, as the studies depend on known cases where dementia is diagnosed in someone under 65, and therefore assume that all people seek help in the early stages of the disease<sup>69</sup> - and are correctly diagnosed.

Furthermore, the rates are based on studies that are at least 15 years old – no epidemiological studies of dementia have been carried out in the UK more recently. Current age- and sex-specific prevalence rates may be different if “[c]hanges in incidence (perhaps linked to improvements in diet and cardiovascular health) and[or] survival (improved medical and social care)...”<sup>70</sup> have occurred. The same caveat applies to projecting future numbers.

Prevalence rates for type of dementia have been produced, but given the small numbers it is not appropriate to attempt to estimate local numbers. However, points worth noting regarding potential causes are:

- Alzheimer’s disease was considered the dominant subtype among women of all ages;
- Fronto-temporal dementia<sup>71</sup> was considered the dominant subtype among younger men (30-54), whilst vascular dementia<sup>72</sup> was dominant amongst the older age-groups (55-64);
- Furthermore, the Harvey study (1998) found that 12.5% of cases of early onset dementia were attributable to alcohol-related brain impairment, which is preventable.

### Known service users

There are currently (March 2007) 22 people with dementia under the age of 65 known to Mental Health Services in Herefordshire, i.e. about two-fifths of the number suggested by the national prevalence rates. A study in Southampton found a similar pattern: one-third of estimated cases were known to service providers.<sup>73</sup>

<sup>68</sup> Harvey, Dr. R J (1998) *Young Onset Dementia: Epidemiology, clinical symptoms, family burden, support and outcome*. Dementia Research Group, Imperial College School of Medicine.

<sup>69</sup> Knapp et al (2007), p.15.

<sup>70</sup> Knapp et al (2007), p.20.

<sup>71</sup> A rare form of dementia (including Pick’s disease), that affects the front of the brain. Memory can remain intact in the early stages, although behaviour and personality change (Knapp et al p.xii).

<sup>72</sup> Caused by problems with the supply of oxygen to the brain, e.g. due to a stroke or small vessel disease, or conditions such as hypertension - which affect the heart, arteries or circulation of blood to the brain.

<sup>73</sup> Moore, P. & Buss, L. (2004) *A review of early onset dementia services in Southampton*. Hampshire Partnership NHS Trust.

The Older People's Mental Health Service (DMHOP) is providing a service to 15 of these 22, whilst 7 are receiving a service from the Adult Mental Health Service. It is very likely that this latter group are suffering from dementia related to substance misuse.

A further 8 adults are receiving a service from the Adult Mental Health Service for organic illnesses that are not early onset dementia. Nothing more is known about these people.

**Summary: Early onset dementia**

- It is estimated that there are approximately 50 people aged 30-64 with dementia in Herefordshire;
- This number is expected to remain at a similar level up to 2012 and in 2021;
- Currently, only two-fifths (22) of these people are receiving a secondary service, and an estimated one-third of these are suffering from preventable dementia related to substance misuse.

## **EATING DISORDER**

It has not been possible to identify any robust sources relating to the prevalence of eating disorders at a national level.

According to an audit of care co-ordinators' caseloads, in January 2007, 39 people aged 18-64 in Herefordshire were being treated for an eating disorder by the Adult Mental Health Service – although it is not possible to be certain that these figures do not include any double-counting.

According to the Transitions database, 14 young people under the age of 18 were referred to the Eating Disorder Service in 2005/06. No information relating to their ages is available at this point in time, so it is possible that some of these are now over 18 and counted in the 39 discussed above. Of these 14 young people, 5 being treated for anorexia nervosa had 'serious' mental health co-morbidity including self-harm and attempted suicide.

## **BEHAVIOURAL DIAGNOSES**

The Adult Mental Health Service caseload audit in January 2007 identified 6 cases of 'autistic spectrum' and 11 cases of 'adjustment disorder'. These are behavioural diagnoses which should be considered by both the mental health and learning disabilities services. It is not possible to combine them with any of the categories considered in this report, and no estimates of national prevalence have been identified.

## **DUAL DIAGNOSIS**

'Dual diagnosis' refers to "the co-existence of mental health and substance misuse problems" – although there is a danger that this label over simplifies people's problems by implying that there are only two, and there is also the possibility of it being used to refer to co-existence of other problems (e.g. mental health problem and learning disability).<sup>74</sup> It is also important to consider the differing likely treatment needs of people labelled as 'dual diagnosis' – for example a person with a bipolar disorder who is alcohol dependent in comparison with a person with schizophrenia who smokes cannabis a few times a week.<sup>75</sup>

<sup>74</sup> Hawkings, C. and Gilbert, H. (2004) *Dual diagnosis toolkit; mental health and substance misuse: a practical guide for professionals and practitioners*. Rethink and Turning Point, p. 2

<sup>75</sup> Banerjee, S. et al (eds.) (2002) *Co-existing problems of Mental Disorder and Substance Misuse (dual diagnosis): An Information Manual*. The Royal College of Psychiatrists' Research Unit, commissioned by the Department of Health. p. 2

Another complication with the term arises because “[i]n practice, people are usually only given a formal diagnosis of dual diagnosis if they have severe mental health problems (generally psychotic disorders) **and** severe substance misuse problems that meet the criteria for specialist services”. This may mean that a person who has, for instance, a serious substance misuse problem and a common mental health problem such as anxiety or depression may not receive the most appropriate care for all of their problems.<sup>76</sup>

People with dual diagnosis are an important group to consider in the context of service planning as they, in comparison with “...people with mental disorder alone, seem to have a worse prognosis, with high levels of service use and particularly heavy use of expensive resources such as emergency services and inpatient beds (where they typically spend twice as long). More effective ways of managing people with dual diagnosis therefore have the potential to reduce crises and to be more cost effective.”<sup>77</sup>

Little is known about the extent of dual diagnosis at a national level. It is estimated that around one third of psychiatric patients with serious mental illness have a substance misuse problem, and that around half of drug and alcohol service users have a mental health problem<sup>78</sup>. In a study by Marsden *et al* (2000)<sup>79</sup> 20% of people in substance misuse treatment reported recent psychiatric treatment.

The literature around dual diagnosis specifically mentions people with personality disorders; the Department of Health’s guide states that they “...are at high risk of substance misuse and are at greater risk of mental illness. They also have difficulty in forming trusting and supporting relationships. This makes working with them a particular challenge.”<sup>80</sup>

It has not been possible to identify the full extent of dual diagnosis in Herefordshire; what has been obtained follows:

- Two people aged 18-64 living in a residential home are classified as ‘dual diagnosis’;
- Twelve people aged 18-64 in the Adult Mental Health Service caseload audit in January 2007 who were receiving a mental health service were classified as ‘substance misuse’;
- As at 31<sup>st</sup> March 2007, ten people aged 18-64 were receiving a service from the Community Alcohol Service Team of the Adult Mental Health Service;
- A total of 429 people aged 16+ whose principal problem is drug misuse are currently (April 2007) receiving a service from DASH.<sup>81</sup> Although it is not possible to identify how many of these are diagnosed with mental health problems, the estimates mentioned above would suggest that approximately 215 of these would have some form of mental health problem and that around 85 may have received recent psychiatric treatment.

#### **Summary: Dual Diagnosis**

- ‘Dual diagnosis’ refers to “the coexistence of mental health and substance misuse problems”, and is important to consider in the context of service planning as it seems to result in high levels of service use, particularly expensive resources (e.g. emergency services and inpatient beds), compared to mental health problems alone.
- Little is known about the extent of dual diagnosis at a national level. It is estimated that around one third of psychiatric patients with serious mental illness have a substance misuse problem, and that around half of drug and alcohol service users have a mental health problem.
- It has not been possible to identify the extent of dual diagnosis in Herefordshire.

<sup>76</sup> Hawkings and Gilbert (2004), p. 2

<sup>77</sup> *Ibid*, p. 3

<sup>78</sup> *Ibid*, p. 4

<sup>79</sup> Marsden, J. *et al* (2000) Psychiatric symptoms among clients seeking treatment for drug dependence. Intake from the National Treatment Outcome Research Study. *British Journal of Psychiatry*. 176, 285-289. Cited in Hawkings and Gilbert (2004).

<sup>80</sup> Banerjee, S. *et al* (eds.) (2002) p. 2

<sup>81</sup> The largest provider of drugs services in Herefordshire.

## ETHNICITY OF PEOPLE WITH MENTAL HEALTH PROBLEMS

It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire experiencing mental health problems as, although the ONS *Survey of Psychiatric Morbidity among Adults in Private Households* considered prevalence by ethnic group and found some apparent differences, none of these differences were statistically significant due to the small numbers in minority ethnic groups with mental health problems in the sample.<sup>82</sup>

Information on ethnic group of patients is not currently collected by GPs, so there is no way of knowing the ethnicity of people with mental health problems known to primary care in Herefordshire.

The ethnicity of users of the secondary Adult and Older People's mental health services is collected in the Care Programme Approach (CPA) database, but it is not possible to obtain information regarding Adult Mental Health service users alone. Furthermore, whilst this is the most comprehensive count of the number of people accessing secondary mental health services in Herefordshire, there are known gaps in the database. For instance, some teams are more thorough than others in completing relevant documentation.

Therefore, the only possible comparison of people with mental health problems in Herefordshire with the population as a whole is of current secondary service users aged 18 and above with the general population at the time of the 2001 Census (see Table 22), although this has limited value given the change in the structure of the total population since then, and the gaps in the database. This data suggests that 3.5% of Herefordshire mental health service users aged 18 and over are non-'White British', which is similar to the 3.4% of all people of that age in the county in 2004.

**Table 22: Ethnicity of Herefordshire Mental Health Service Users (aged 18+) from CPA database, April 2007**

Ethnic Group	Mental Health Service Users (aged 18+)		% of population (aged 18+), 2001 Census
	Number	%	
White British	2,127	91.3%	96.6%
White Irish	7	0.3%	0.6%
White Other	38	1.6%	1.4%
Mixed	13	0.6%	0.4%
Asian or Asian British	9	0.4%	0.5%
Black or Black British	4	0.2%	0.3%
Chinese	1	0.0%	0.2%
Other ethnic group	9	0.4%	0.1%
Unknown ethnic group	121	5.2%	-
<b>Total non-'White British'</b>	<b>81</b>	<b>3.5%</b>	<b>3.4%</b>
<b>All People</b>	<b>2,329</b>	<b>100%</b>	<b>100%</b>

*Source: CPA database, Herefordshire PCT & ONS experimental population estimates by ethnic group © Crown copyright. Figures may not sum due to rounding.*

The Rethink and Turning Point *Dual Diagnosis Toolkit* explains that “[a]lthough there are some local studies, data on substance misuse among ethnic minorities in the UK is sparse, and there is danger of making estimations and broad generalisations”, but that “[t]he special issues relating to members [of] minority ethnic groups with mental health problems are well known.”<sup>83</sup>

It should be noted that nothing is known about the general mental health of the recent inflow of migrant workers to Herefordshire, or of any temporary seasonal workers working in the county.

<sup>82</sup> Singleton et al (2001), pp.24 & 27.

<sup>83</sup> Hawkings and Gilbert (2004), p. 50.

**Summary: Ethnicity of People with Mental Health Problems**

- It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire experiencing mental health problems.
- Information on ethnic group of patients is not currently collected by GPs, so there is no way of knowing the ethnicity of people with mental health problems known to primary care in Herefordshire.
- In April 2007, 3.5% of Herefordshire mental health service users (aged 18+) are recorded as being from a 'Black and Minority Ethnic' population, almost equal to the proportion of over 18s in the population as a whole in 2004 (3.4%).
- Nothing is known about the general mental health of migrant and seasonal workers in Herefordshire.

**GEOGRAPHIC DISTRIBUTION OF PEOPLE WITH MENTAL HEALTH PROBLEMS**

It is not possible to produce projections of the number of people in different parts of Herefordshire who will experience mental health problems, as there are no population forecasts or projections below county level.

Table 23 shows the number of people who are currently (March 2007) receiving a service from area-based community teams of the secondary Adult Mental Health Service run by Herefordshire PCT. People are allocated to community teams on the basis of the location of their GP, although if a person were registered with a GP outside their area of residence it would be usual for them to be allocated to their local community team.

This is the most comprehensive count of the number of people receiving an area-based service in Herefordshire, but there are known gaps in this data; for instance some teams are more thorough than others in completing relevant documentation.

Table 23: Distribution of area-based cases, Adult Mental Health Service Community Teams, Herefordshire, 31<sup>st</sup> March 2007

Community Team	Number	% of area-based cases
Hereford (City)	560	28.0%
Leominster (North Herefordshire)	289	14.5%
Ross (South Herefordshire)	300	15.0%
Ledbury / Bromyard (East Herefordshire)	49	2.6%
Total area-based cases	1,998	100.0%

*Source: CPA database, Herefordshire PCT*

Further work would be required to assess whether this represents mental health problems across the county, and whether current services are provided equitably across the county.

A further 108 people are receiving a service from a countywide team/service, but it is not possible to identify where in the county they reside.

**Summary: Geographic Distribution of People with a Mental Health Problem**

- It is not possible to produce projections of the number of people in different parts of Herefordshire who will experience mental health problems.
- Further work would be required to assess whether current services are provided equitably across the county and that access to these services is equal, regardless of location.

## MENTAL HEALTH OF PRISONERS

As at April 2007 the Herefordshire Forensic Assessment Community Team (FACT) was working with six people aged 18-64 in prisons (outside Herefordshire) who have been identified as having mental health problems.

The number of residents of Herefordshire aged 18-64 who are in prison is not known, so it is not possible to ascertain whether this figure is what would be expected. Prisoners are not included in any estimates based on national prevalence rates as they are not 'household residents'.

An ONS survey of *Psychiatric Morbidity Among Prisoners*<sup>84</sup> in 1997 found the following in respect of prisoners:

- About 20% of males (both sentenced or on remand) had received help or treatment for a mental or emotional problem in the year before entering prison. This is half the proportion of female prisoners (40%) [p.9];
- About 15% of male prisoners (both sentenced and on remand) had received help or treatment for a mental or emotional problem since entering prison, in comparison with 23% of female remand and 30% of female sentenced prisoners [p.9];
- Female prisoners were significantly more likely to have a neurotic disorder than male prisoners, as in the household population. 59% of males on remand and 40% of sentenced males were found to have a neurotic disorder, in comparison with 76% and 63% of females, respectively [p.16];
- Prevalence of personality disorder was 78% among sentenced males, 64% among males on remand, and 50% among females (either sentenced or on remand) [p.10];
- Prevalence of psychotic disorder, based on clinical interviews, was 7% for sentenced males, 10% for males on remand, and 14% for female prisoners (either sentenced or on remand) [p.11]. This was noted to be much higher than prevalence amongst the general household population in the 1993 survey of psychiatric morbidity (0.4%).

Also, a large proportion of prisoners had several mental disorders – no fewer than 70% of any of the sample groups mentioned above had at least two of the five disorders<sup>85</sup> considered.

### Summary: Mental Health of Prisoners

- The number of people from Herefordshire in prison is unknown; the only available relevant information is that the Herefordshire Forensic Assessment Community Team is currently working with 6 people.
- Prevalence of mental health problems is high amongst the prison population in general.

<sup>84</sup> Singleton, N. et al (1998) *Psychiatric morbidity among prisoners: summary report*. The Government Statistical Service.

<sup>85</sup> Personality disorder; psychosis; neurosis; alcohol misuse and drug dependence.



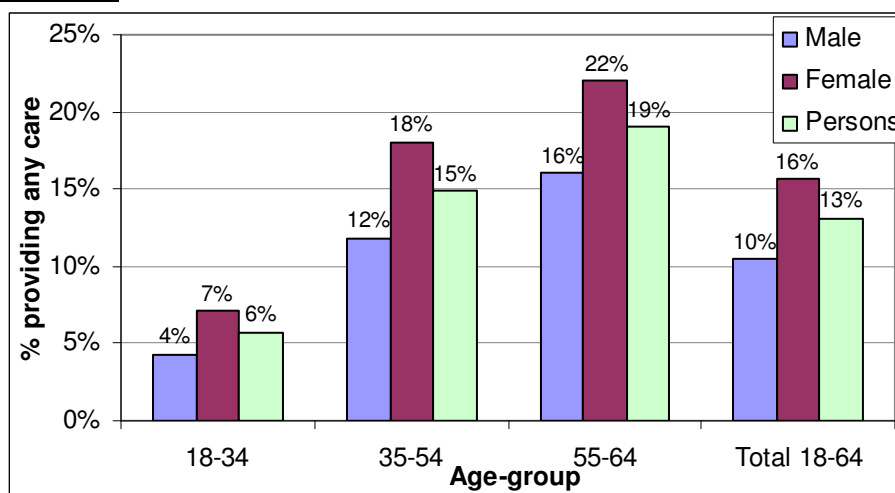
## CARERS

### NUMBERS OF CARERS

#### 2001 Census

According to the 2001 Census, 13% of 18-64 year-old residents of households in Herefordshire provide at least 1 hour of unpaid care<sup>86</sup> a week: a total of 13,373 people. However, the gender proportions aren't equal: only 10% of men (5,333 men) compared to 16% of women (8,040 women). Figure 24 illustrates that this disparity is evident across all ages, and also how the proportion providing unpaid care increases with age. This pattern is identical to that across England and Wales as a whole, although each of the Herefordshire figures is one percentage point below the national.

Figure 24: Proportion of household population providing at least one hour of unpaid care per week, Herefordshire



Source: 2001 Census, Table S025 © Crown copyright

- Assuming that prevalence of caring by age and gender has remained consistent since 2001, it could be estimated that 14,100 people aged 18-64 were providing at least one hour of unpaid care per week in 2005, with 60% of them female. Of these, 3,600 would be expected to be providing care for 20 hours or more per week (65% female).

However, it is also likely that snap-shot estimates of the number of carers at a point in time, like the Census provides, are an underestimate of the number of carers over time. Nationally, more than 40% of carers start or stop caring over the course of a year, and less than two-thirds of the actual number of people who provide care over a year are captured at one point within that time.<sup>87</sup>

#### Carer's Allowance Claimants

The only other information regarding carers in Herefordshire are numbers of people claiming Carer's Allowance. This is likely to be a very small subset of all carers as it is only available to people not in employment or full-time education who care for a severely disabled person<sup>88</sup> for at least 35 hours a week. Nevertheless, 1,370 people aged 18-64 were entitled<sup>89</sup> to Carer's Allowance in August 2006 – a similar number to the previous two years (see Table

<sup>86</sup> Any unpaid help; looking after or supporting family members; friends; neighbours or others because of long-term physical or mental ill-health or disability or problems related to old age.

<sup>87</sup> Hirst, M (2005) *Estimating the prevalence of unpaid adult care over time*; Research Policy and Planning vol. 23, no. 1.

<sup>88</sup> i.e. a person in receipt of the medium or higher level of the care component of Disability Living Allowance, Attendance Allowance or a Constant Attendance Allowance at the maximum rate under the War Pensions or Industrial Injuries Scheme (DWP).

<sup>89</sup> 'Entitled' includes some people who are entitled to receive Carer's Allowance, but do not because they are receipt of another benefit which exceeds their weekly rate; it does not necessarily include everyone in the population who is eligible to claim.

25). The number entitled in 2005 represents 1.3% of the population aged 18-64; the proportion entitled increases slightly with age, from 0.7% of 18-34 year-olds to 1.9% of 55-64 year-olds (in 2005).

Table 25: Numbers entitled<sup>89</sup> to Carer's Allowance in Herefordshire, by age.

Year (August snapshot)	18-34	35-54	55-64	18-64
2006	210	680	480	1,370
2005	220	650	470	1,340
2004	210	670	450	1,330
2003	220	650	380	1,250

Source: Work and Pensions Longitudinal Study (WPLS), Department for Works and Pensions.

## **THE CARED FOR**

The Census didn't ask for whom care is provided, so nothing can be deduced about people who *require* care from this source. However, a national survey of adults living in private households<sup>90</sup> (2000) identified carers and asked for more detail about their situation. 6% of carers cared for someone with only a 'mental disability' (as defined by the respondent) and a further 18% were looking after someone with both a physical and mental disability. It is not possible to estimate numbers of people aged 18-64 being cared for in each of these categories as there is no information regarding the ages of people being cared for.

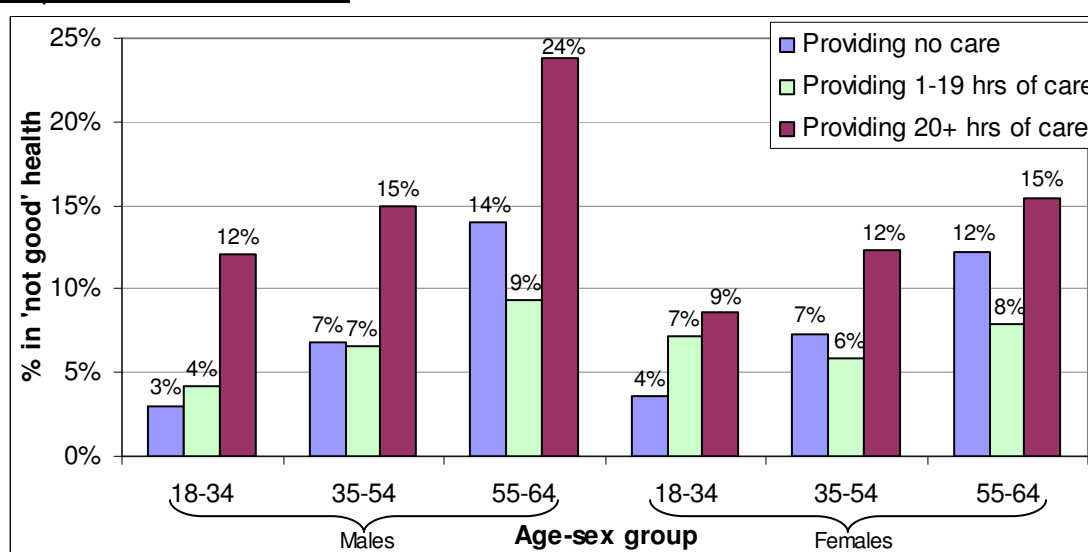
It has not been possible to identify any sources of information regarding children providing care for adults with mental health problems.

## **CARERS' HEALTH**

National analysis of the Census<sup>91</sup> has shown that carers are more likely to be in 'not good' health and/or have a limiting long-term illness themselves than non-carers.

- In Herefordshire, 14% of 18-64 year-olds who provide 20+ hours of care per week are in 'not good' health, compared with 7% of both those providing 1 to 19 hours and those providing no care. The difference is particularly marked in males of all ages, as illustrated by Figure 26.

Figure 26: Proportion of household population in 'not good' health by age, sex & amount of care provided, Herefordshire



Source: 2001 Census, Table S025 © Crown copyright

<sup>90</sup> Maher, J and Green, H (ONS) (2002) *Carers 2000*. London: The Stationery Office

<sup>91</sup> *Facts about carers* (2005), Carers UK: [www.carersuk.org](http://www.carersuk.org)

Furthermore, people who provide care over a long period are at particular risk of poor health, and carers' health is more likely to deteriorate over time than that of non-carers – with many of the detrimental changes attributable to the caring role.<sup>92</sup>

An ONS survey, *Mental Health of Carers*<sup>93</sup> in 2001 found the following key points:

- Female carers were found to be 23% more likely to have neurotic symptoms than women in general; no significant difference in male carers.
- Carers in rural or semi-rural areas were found to have a *lower* prevalence of neurotic symptoms than those in urban areas (12% to 21%), although a Carers UK members' survey (2002) found that over half of the respondents living in 'remote rural areas' experienced some form of social exclusion.<sup>94</sup>
- Strong association between carers' assessment of their own health and their mental health: over a third (37%) of carers who said they were in fair or poor health had neurotic symptoms, in comparison with only 7% who said they were in very good or excellent health. Similar associations were found between limiting and long-standing physical health conditions and mental health.
- The majority of carers (71%) said that their caring responsibilities caused them to be worried at least a little of the time, with 18% saying that it caused worry a lot of the time. A third said that caring made them depressed at least a little of the time. However, only 8% said that caring had a direct impact on their physical health.
- Overall 7% of carers said they smoked more, 7% drank more alcohol and 3% took more prescribed or non-prescribed drugs due to the strains of caring; those who had increased their use of these substances were more likely to display significant neurotic symptoms.

This survey included people of all ages over 16, and no analysis is available for different age groups. It was noted however [p.15], that there were no significant differences between the proportions displaying significant neurotic symptoms in different age-groups – although the data did suggest a decline with age.

The survey found that the carers with the following characteristics were more likely to exhibit significant neurotic symptoms:

- Those caring for people with both physical and mental health problems, compared to those caring for people with physical problems or old age (28% of the former to 14% of the latter);
- Carers providing both personal and physical care, compared to those providing practical and/or other types of help;
- Sole carers, in comparison with those who did not have the main responsibility for the person they cared for;
- Those who needed someone else to look after the person they cared for in order to take a break and had not been able to do this since becoming a carer, in comparison to those who had been able to get this alternative help and had taken a break (17% to 36%);
- Those who felt that caring had had a detrimental effect on their relationships with friends, social life and leisure activities (which was about a third), compared to those who did not (30% to 12%).

Also, research by Carers UK indicated that 70% of carers worried about their finances and 60% believed this had an effect on their health, and many report that lack of alternative care leads to the neglect of their own health – including some cases of carers discharging themselves from hospital because of this.<sup>95</sup>

- Assuming that people aged 18-64 care for the same 'type' of people as all people aged 16 and over; the caring situation in Herefordshire in 2005 was the same as in Britain as a whole in 2000; and prevalence of caring by age and sex has not changed locally since

<sup>92</sup> Hirst, M (2004) *Health inequalities and informal care*; quoted by Carers' UK in *Facts about carers*

<sup>93</sup> Singleton, N, et al (2002) *Mental Health of Carers*. London: The Stationery Office

<sup>94</sup> Carers UK (2003), Policy Briefing: *Rural Carers*. [www.carersuk.org](http://www.carersuk.org)

<sup>95</sup> *Back me up: supporting carers when they need it most* (2005) Carers UK

2001, it could be estimated that around 800 adults aged 18-64 in Herefordshire care for someone with a 'mental disability' (as defined by the respondent). An estimated further 2,500 care for someone with both a physical and mental disability. Using the results of the ONS survey, 28% of this latter group (around 700 people), could have a neurotic disorder.

These findings indicate that it is important to ensure proper support is available to carers in order to reduce their chances of suffering from mental health problems - particularly around the times when a heavy care role begins or ends, when adverse effects on psychological well-being are most pronounced.<sup>96</sup>

#### **Summary: Carers**

- Assuming that the prevalence of caring in Herefordshire is as it was at the 2001 Census, 14,100 people aged 18-64 in Herefordshire are estimated to have been providing at least one hour of unpaid care a week in 2005, with 3,600 providing care for 20 hours or more per week.
- At the same time, 1.3% of 18-64 year-olds in the county (1,340 people) were entitled to Carers' Allowance, i.e. were not in employment or full-time education and were caring for a severely disabled person for at least 35 hours a week.
- Carers are more likely to be in 'not good' health than non-carers, and the disparity increases with the amount of time spent caring per week. People who provide care over a long period of time are particularly at risk of poor health. Carers' health is also more likely to deteriorate over time than that of non-carers, with many of the detrimental changes attributable to the caring role.
- Using national observations, an estimated 800 people aged 18-64 in Herefordshire are estimated to have been caring for someone with a 'mental disability' in 2005. A further 2,500 care for someone with both a 'physical and mental disability', and around 700 of this latter group could be expected to have a neurotic disorder.

## **ABILITY TO PAY**

### **EARNINGS**

The only information on earnings is for the total population of the county as a whole; the only available relevant breakdown is by gender.

- In 2006, average (median) gross weekly earnings for full-time employees who work in Herefordshire were £390.60, compared to £415.50 for the West Midlands region and £453.30 for England.<sup>97</sup> Whilst Herefordshire's median earnings appear lower than regionally *and* nationally, the difference with the region is not statistically significant.
- Herefordshire's lower quartile earnings are also significantly lower than England's: 25% of people who work in the county earned less than £297.00 per week, whereas the equivalent national figure is £320.30.
- The top 25% of earners in Herefordshire earned more than £551.20. The equivalent figure for England as a whole was £642.0, but this is not significantly higher (due to the sample size).
- Herefordshire has one of the largest gender pay gaps of neighbouring English authorities, and of all authorities in the West Midlands region: on average, full-time female workers earn only 72% of the amount earned by their male counterparts. The national equivalent figure is 79%.

<sup>96</sup> Hirst, M (2004) *Hearts & Minds: The health effects of caring*. University of York, in association with Carers UK

<sup>97</sup> 2006 Annual Survey of Hours & Earnings, Office for National Statistics (ONS)

## **INCOME**

There are no data on levels of *income*<sup>98</sup> in Herefordshire, but the Indices of Deprivation 2004<sup>99</sup> included an 'income' domain based on the extent to which households in an area were dependent on income related benefits. Overall, Herefordshire is more 'income deprived' than two-thirds of English local authorities.<sup>100</sup>

In addition, income deprivation 'hotspots' exist within the county: ten areas<sup>101</sup> in Herefordshire were in the 25% most deprived areas in England. Six of the ten areas of the 'South Wye' part of Hereford city are amongst these; the remainder are north of the river in Hereford ('College Estate' and 'Courtyard') and in Leominster ('Ridgemoor') and Bromyard ('Central').

## **EMPLOYMENT & FINANCIAL CHARACTERISTICS OF PEOPLE WITH MENTAL HEALTH PROBLEMS**

- As already discussed (see p.14), an estimated 2,000 people aged 18-64 in Herefordshire each year are unable to work, and are therefore claiming Incapacity Benefit or Severe Disablement Allowance, because of a 'mental disorder'. Some of these people may also be claiming Disability Living Allowance to help with the cost of any care they may need because of their disability(ies), but it is not possible to determine how many.

According to the ONS *Survey of Psychiatric Morbidity among Adults in Private Households*<sup>102</sup> (i.e. those aged 16-74):

- People with neurotic disorders were more likely than those without to be economically inactive, i.e. not working or seeking employment (39% of those with neurotic disorder compared to 28% of those without); and less likely to be employed (58% to 69%). This was particularly found to be the case for people with phobias.
- People with probable psychotic disorders were more likely than those without to have qualifications no higher than GCSE level (84% to 64%) and to be economically inactive (70% to 30%), and were less likely to be employed (28% to 67%).

### **Summary: Ability to pay**

- There is little available information about earnings and income in Herefordshire, although median weekly earnings are lower than nationally (£390.60 compared to £453.30, in 2006);
- An estimated 2,000 people aged 18-64 in the county are unable to work, and are therefore claiming Incapacity Benefit or Severe Disablement Allowance because of a 'mental disorder';
- There is no specific information available about the levels of income of people with mental health problems in Herefordshire. If national trends apply, people with neurotic or psychotic disorders are significantly less likely to be in employment, and significantly more likely to be economically inactive (i.e. not working and not seeking employment), than people without. This would be expected to be reflected in lower average incomes of people with these disorders, limiting the extent to which they could be expected to pay for services.

<sup>98</sup> Earnings plus unearned income from investments, etc.

<sup>99</sup> Office for the Deputy Prime Minister (ODPM), now Department for Communities & Local Government (DCLG). Based on data from 2001.

<sup>100</sup> Herefordshire ranked 114<sup>th</sup> out of 354 English local authorities in terms of income deprivation.

<sup>101</sup> Lower Super Output Areas (LSOAs): statistical geographies of about 1,500 people that nest into wards. They were determined by ONS, but names were given by HC Research Team.

<sup>102</sup> Singleton et al (2001)

## HOUSING

It is not possible to identify housing issues relating to adults aged 18-64 specifically, so the facts and figures discussed in this section pertain to adults of all ages.

According to the ONS *Survey of Psychiatric Morbidity among Adults in Private Households*<sup>103</sup>:

- People with neurotic disorders were more likely than those without to be socially renting (26% of those with a disorder compared to 15% of those without) and more likely to have moved three or more times in the last two years (6% to 3%) [p.80].
- People with phobias and those who experience depressive episodes were particularly likely to be socially renting (37% & 36% to 15% of those without), whereas people with obsessive compulsive disorder were particularly likely to be private renting (22% to 10% of those without) [p.80].
- People with probable psychosis were more likely to be socially renting than those without (49% to 17%) [p.82].
- Analysis of people with personality disorders was not carried out for the report; a separate topic report on this group of people was planned [p.76] but has not been published.

These figures point towards a higher likelihood of housing instability in people with mental health problems, but it is not appropriate to attempt to estimate numbers in Herefordshire, as these percentages do not relate specifically to the population of interest (i.e. aged 18-64) and do not take into account any underlying factors that may affect tenure regardless of mental health status. Furthermore, according to the 2001 Census, household residents in Herefordshire aged 16-74 are generally less likely to be socially renting than those in England and Wales as a whole (12.8% to 15.6%).

### **HEREFORDSHIRE MENTAL HEALTH SERVICES HOUSING PLAN**

Herefordshire Mental Health Services are about to publish a Housing Plan<sup>104</sup>, covering the period 2007 to 2010, to “review the current accommodation needs for people with mental health problems with a view to developing a range of housing options to ensure people are able to live in the most appropriate environment”.

The Plan will mainly focus on the needs of those with severe and enduring mental health problems who require “...more intensive and sustained community treatment” than the majority of those with mental health problems who “will be supported within the community”.

Three surveys were carried out in the development of the plan, the largest being of care co-ordinators (in December 2006) about the people with whom they were working. Not all co-ordinators completed the survey, but of the 1,361 service users (of all ages but mostly 18+) in respect of whom information was provided, 133 (9.8%) were living in accommodation that was deemed unsuitable, and 74 (5.4%) were living in temporary accommodation, including eight who were homeless. However, the situation was deemed unsuitable for only 26 (35%) of those living in temporary accommodation.

Of the 133 service users identified as being in unsuitable accommodation, 65 (49%) cannot stay in their current accommodation for longer than two years, 40 (30%) have a forensic history and 49 (37%) have been detained under the Mental Health Act.

The Plan sets out future need on the basis of what type of accommodation would be required for the 133 service users identified as currently living in unsuitable accommodation; this is reproduced in Table 27. However, it was noted that information regarding accommodation for around 400 service users was incomplete, so these needs are likely to

<sup>103</sup> Singleton et al (2001)

<sup>104</sup> Roche, T (2007) *Mental Health Services in Herefordshire: Housing Plan – 2007 to 2010*

be an underestimate. Regular surveys to identify future need are recommended, with the acknowledgement that these would require the full co-operation of all care co-ordinators.

Table 27: Required accommodation identified by survey of care co-ordinators for Adult Mental Health service users in Herefordshire in currently in unsuitable accommodation

Type of Accommodation	Units Required	Location required
Sheltered Housing	4	2 in Hereford; 1 in Ledbury; 1 in Leominster
Warden Controlled Housing	6	5 in Hereford City; 1 in Kington
Accommodation unit for service users with medium to high support needs	10	10 in Hereford City
Supported Housing	9	1 in Bromyard; 5 in Hereford; 1 in Leominster; 1 in Ross; 1 in 'Herefordshire'
Young Persons Supported scheme	1	1 in Hereford City
Residential Care Home	9	4 in Hereford; 2 in 'Herefordshire'; 2 in Leominster; 1 out of county
Rehabilitation	1	1 in Hereford City
Dry House	1	1 in 'Herefordshire Rural'
Support whilst living at home	4	N/a
General Needs Housing	88	
<b>Total units required</b>	<b>133</b>	

*Source: Mental Health Services in Herefordshire, Housing Plan – 2007 to 2010*

1,170 service users were identified as living in permanent accommodation, with the majority (78.5%) in private households (see Table 28). Of those in private households, almost half (48.4%) were renting a house or flat – although it is not possible to identify which of these were socially renting. This supports the view that people with mental health problems are more likely to live in rented accommodation than those without: only 22.7% of all household residents in Herefordshire aged 18 and above live in rented accommodation.

Table 28: Current accommodation of mental health service users (surveyed via care co-ordinators in December 2006)

Type of accommodation		No. of identified service users	% of all identified service users
Permanent accommodation	Rented flat or house	517	38.0%
	Owner occupied house or flat	435	32.0%
	Living with family or friends	117	8.6%
	Residential home	54	4.0%
	Sheltered scheme	27	2.0%
	Warden scheme	12	0.9%
	Nursing home - in county	7	0.5%
	Out of county	1	0.1%
Temporary accommodation		74	5%
Unanswered		117	9%
<b>Total service users</b>		<b>1361</b>	<b>100%</b>

*Source: Herefordshire Mental Health Services Housing Plan*

It is not known whether there was any potential for double counting if more than one care co-ordinator responded for the same service user. However, this survey identified 61 people living in nursing or residential homes in December 2006, whereas Adult Mental Health Service figures indicate that only 46 people were living in these types of homes in January 2007.

Eight mental health accommodation providers<sup>105</sup> responded to a separate survey, which asked whether residents were suitably placed; all 33 residents (aged 34 to 69) assessed were judged to be so at the time, but five as requiring alternative accommodation within the next six months. The figure of 33 is clearly lower than even the 61 in residential or nursing homes identified in the survey of care co-ordinators (Table 28), let alone the 81 known to be living in communal establishments in January 2007 (p.8), so it is unclear how comprehensive these figures are.

**Summary: Housing**

- National research points toward a higher likelihood of housing instability in people with mental health problems. People with neurotic disorders and people with probable psychotic disorders are both more likely than those without to be socially renting, and the former group are more likely to have moved three or more times in the last two years.
- Although it is not possible to estimate the extent of social renting amongst people with mental health problems in Herefordshire who are *not* accessing secondary mental health services, a housing assessment of 1,361 Adult Mental Health service users supports the national observation. Almost half of service users in private households were renting (either privately or socially), in comparison with less than a quarter of all household residents in the county.
- A survey of care co-ordinators for the *Herefordshire Mental Health Services Housing Plan* identified at least 133 service users living in unsuitable accommodation, with incomplete information provided for around 400 service users. A wide range of single-figure accommodation units were identified as needed to suitably house these people, with the majority (66%) requiring 'general needs housing'.

<sup>105</sup> The Shires, Aston Lodge, Elm Lodge, Francis House, Merrivale Farm, Sands Care Home, The Chestnuts and Wykenhurst.



**APPENDIX: ADULT MENTAL HEALTH SERVICE DATA****ADULT MENTAL HEALTH SERVICE: CPA DATABASE**

Table A1 includes everyone who was receiving a service from the secondary Adult Mental Health Service run by Herefordshire PCT as at 31<sup>st</sup> March 2007, and which team they were receiving that service from.

This is the most comprehensive count of the number of people accessing secondary mental health services in Herefordshire. However, despite this, there are known gaps in this data; for instance some teams are more stringent than others in completing relevant documentation.

It would be expected that most of these cases are also known to GPs in Herefordshire.

Table A1: People receiving a service from the secondary Adult Mental Health Service run by Herefordshire PCT, 31st March 2007

Team		Service Users
Community Teams	Hereford City 1	254
	Hereford City 2	306
	Leominster	289
	Ross	300
	Ledbury / Bromyard	49
Countywide Services	Forensic Assessment Community Team (FACT)	34
	Community Alcohol Service (CAS)	10
	Assertive Outreach	32
	Early Intervention	22
	Crisis Assessment Home Treatment (CAHT)	1
	Oak House (residential rehabilitation centre)	9
Total		1,306

*Source: CPA database, Herefordshire PCT*

**ADULT MENTAL HEALTH SERVICE CASELOAD AUDIT**

Table A2 details the results of the caseload audit of care co-ordinators providing care to adults aged 18-64 in January 2007. No further detail is available, and it is not possible to be sure that cases are not double-counted if seen by more than one care co-ordinator – or to ascertain the extent of any double-counting.

Table A2: Herefordshire Adult Mental Health Service caseload audit, January 2007

Diagnosis (primary)	Caseload	Classification for needs analysis
Anxiety	197	Common mental health problem
Depression	606	
Neuroses	75	
Obsessive compulsive disorder (OCD)	80	
Post traumatic stress disorder (PTSD)	46	
Bipolar	156	Psychotic disorder
Psychosis	108	
Schizophrenia	568	
Personality disorder	62	Personality disorder
Organic	15	7 are young onset dementia; 8 are other organic illness
Eating disorder	39	Eating disorder
Autistic spectrum	6	Behavioural diagnoses
Adjustment disorder	11	Behavioural diagnoses
Substance misuse	12	-
Other	6	-
Total cases	1,987	

*Source: Adult Mental Health Service, Herefordshire PCT*

It is concerning that the caseload audit appears to identify 681 more people than the CPA database, particularly since they were only two months apart. This seems to indicate significant double-counting, but the fact that the CPA database is known to be incomplete for certain teams means that it is impossible to determine which is the more accurate.

### **RESIDENTS OF MANAGED ACCOMMODATION**

Tables A3 to A5 show the diagnoses of residents of managed accommodation in Herefordshire in the early part of 2007. It should be the case that they have been included in the figures in Tables A1 & A2, as care co-ordinators were asked for information on everyone on their caseload, but it is not possible to check that this is so.

Table A3: Diagnoses of adults aged 18-64 with mental health problems in residential or nursing homes in Herefordshire, 1<sup>st</sup> January 2007

<b>Diagnosis Type</b>	<b>Nursing Home</b>	<b>Residential Home</b>	<b>Total</b>
Common mental health problems	1	3	4
Dual diagnosis (substance misuse)	-	2	2
Learning disability and mental health problem	-	1	1
Organic	3	-	3
Personality disorder	-	1	1
Psychosis	6	27	33
Unknown	-	1	1
Autism	-	1	1
<b>Total</b>	<b>10</b>	<b>36</b>	<b>46</b>

*Source: Adult Mental Health Service, Herefordshire PCT*

Table A4: Diagnoses of adults aged 18-64 with mental health problems in secure unit placements in Herefordshire, 31<sup>st</sup> March 2007

<b>Diagnosis Type</b>	<b>High secure</b>	<b>Medium secure</b>	<b>Low secure</b>	<b>Total</b>
Psychopathic disorder	-	2	1	3
Psychosis	1	1	2	4
Personality Disorder	-	1	-	1
Unknown	-	3	2	5
<b>Total</b>	<b>1</b>	<b>7</b>	<b>5</b>	<b>13</b>

*Source: Adult Mental Health Service, Herefordshire PCT*

Table A5: Diagnoses of adults aged 18-64 with mental health problems in supported housing in Herefordshire, April 2007

<b>Diagnosis Type</b>	<b>Residents</b>
Common mental health problem	11
Psychosis	9
Personality disorder	2
<b>Total</b>	<b>22</b>

*Source: Adult Mental Health Service, Herefordshire PCT*

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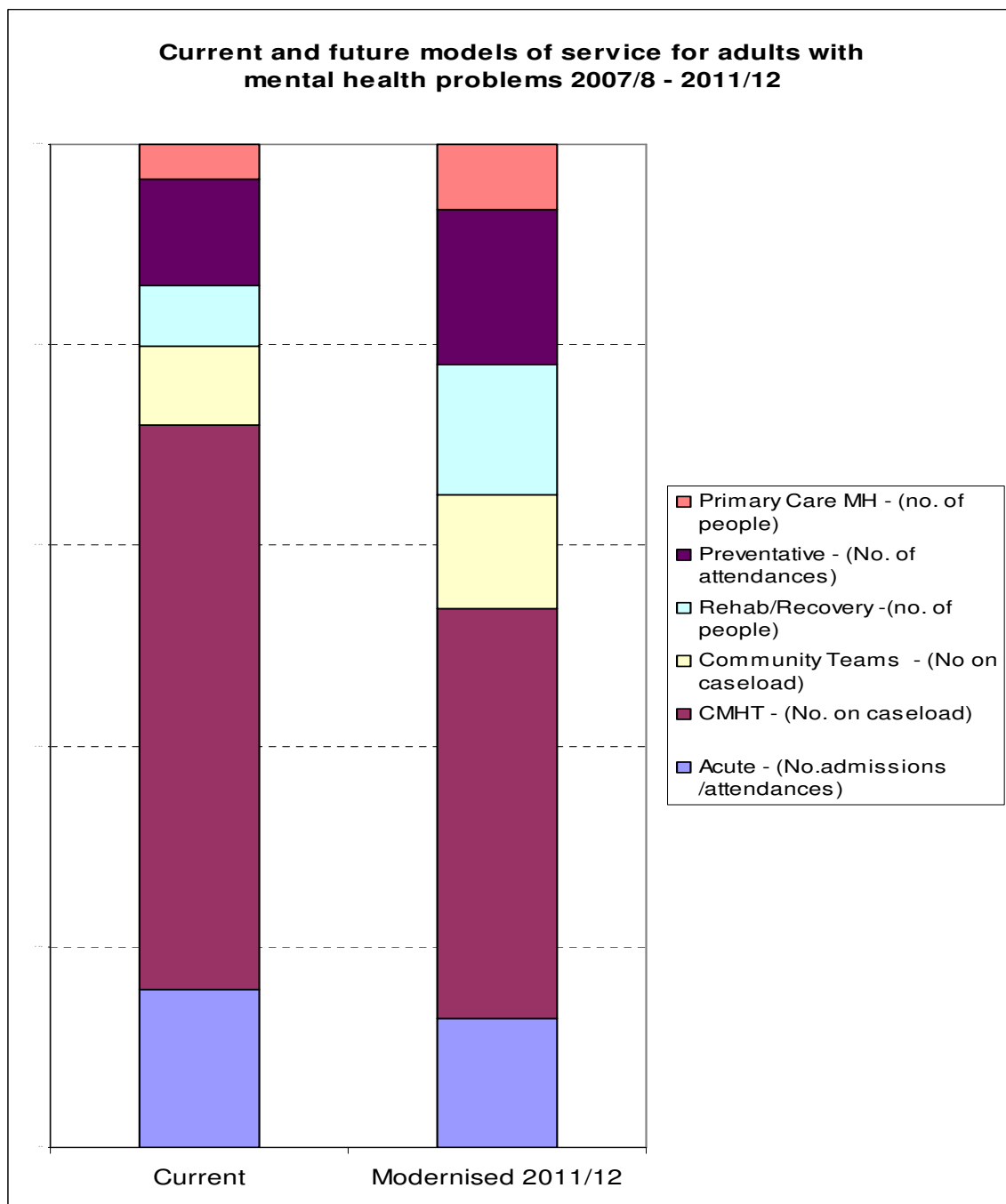
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## Current and future services for adults with mental health problems

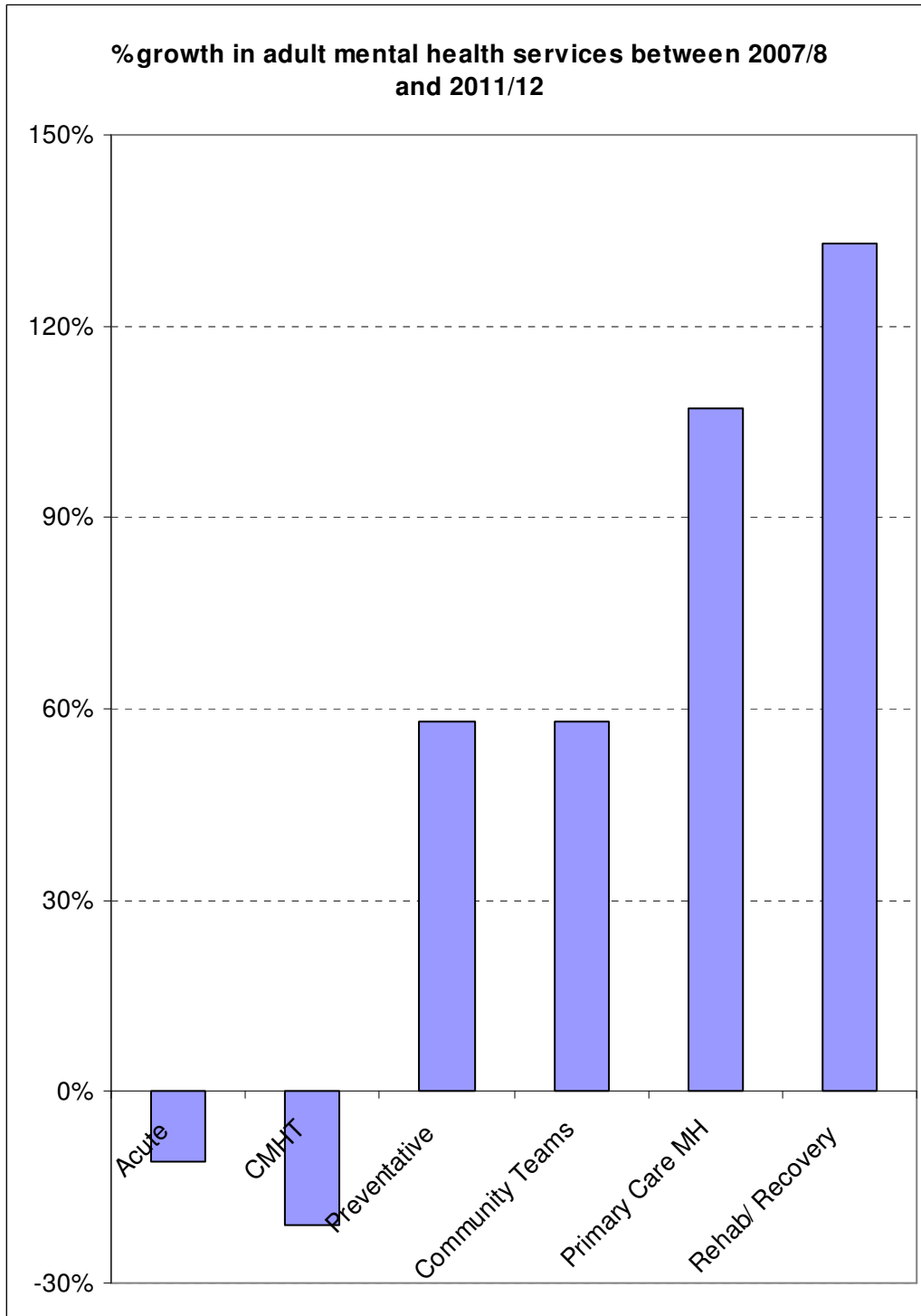
### Overview

The bar charts that follow compare the current pattern and levels of services for adults with mental health problems with the proposed future models of service by 2012.

**Diagram 1: the proportions of people with severe and enduring mental health problems receiving different types of service per annum.**



**Diagram 2: Percentage change required in adult mental health services to achieve higher performing services**



## ***Details of proposed service levels for proposed higher performing services***

### **Acute Services**

#### *In-patient services*

The trend over the last few years has been a 3.5% reduction in admissions per annum. With an increase in admission prevention services provided by the Crisis Assessment and Home Treatment Team, this is estimated to rise to 5% per annum. The target would be a reduction of 24 admissions per year to 276.

#### *Crisis Resolution and Home Treatment*

It is anticipated that the increase in early planned discharge work will result in a 10% increase over 4 years. In 2006/07 number of people receiving home treatment during the year was 154. It is expected that this number of people will increase to 180.

#### *Day Hospital*

It is anticipated that the number of people accessing the day hospital will be increased by 20%, to 43, in order to support the crisis team.

### **Community Mental Health Service**

#### *Community Mental Health Teams*

It is expected that CMHTs will see a reduced caseload due to the development of rehabilitation and recovery services, Primary care, and other specialist services (eg. Eating disorder and personality disorder services). A 25% reduction, to 1500 people on the caseload, is estimated over 4 years.

#### *Safe House*

The form of the safe house is still under discussion. However, assuming a safe house is provided with 2 beds, it is anticipated that there would be about 80 admissions per annum (assuming an average of 80% occupancy )

### **Community Teams**

#### *Early Intervention Service*

The Early Intervention Team reached full capacity in 2007/08. The caseload will increase to meet the national target of 20 new referrals each year and reach the target of 61 people on the overall caseload in 2010/11.

#### *Forensic Assessment Community Team*

It is assumed that FACT will continue to operate with the current caseload level over the next 4 years.

*Assertive Outreach Team*

It is anticipated that the caseload will increase by 21 over the next 4 years, which would meet the national target of 54 for the team.

*Psychology*

As stepped care is introduced more people will be seen in primary care and fewer by highly specialist services. Estimate a 10% reduction over 4 years, to 127. No change in level of staffing, as will be concentrating more on long-term, complex cases and supporting primary care.

*Eating Disorder Service*

A new community team of three workers was established in August 2007 as a pilot project. It is not possible to say how the service will develop until the pilot has been evaluated, therefore this service has not been included in the service increases.

*Personality Disorder Service*

In 2006/07 60 people were seen within the Community Mental Health Teams (caseload survey). National community pilots are currently being evaluated, as a result of which guidance on providing services for this group is expected in 2008. This service has therefore not been included in the costings.

**Rehabilitation and Recovery Service**

*Employment*

50 people are currently supported into employment each year. The target is to support an extra 80 people per year into employment.

*Adult Education*

MIND and Oak House currently support people to access adult education. The new Rehab. and Recovery Service will assist more people into adult education by accessing community services. The target is to increase the number of people accessing adult education by 20% per year, to 100 by 2011/12.

*Home Support Services*

In 2006/07 14 people received home care at any time during the year. It is anticipated that the new Rehabilitation and Recovery Service will support many more people in the community. The target is to support 100 per annum.

*Residential/Nursing Home placements*

Improved community support services developed by the Rehabilitation and Recovery service should result in a 30% reduction of residential/nursing placements over 4 years to 34.

*Supported Housing*

There are currently 21 supported housing placements. It is anticipated that, by working with Herefordshire Housing, this will increase to a minimum of 35 over four years.



*Out of county placements*

There are currently 13 people placed out of county and/or in specialist placements. It is anticipated that, with improved community services developed by the Rehabilitation and Recovery Service, this number will be reduced by 50% by 2011/12 to 7.

*Residential Rehabilitation*

This service will become an integral part of rehabilitation and recovery services and will work with the most complex group of people. It is anticipated that the current number of placements (10) will remain static.

*Direct Payments/Individualised budgets*

There will be a drive to encourage adults with mental health problems to access direct payments and individualised budgets. The target will be to encourage 20 people per annum to take up direct payments or individualised budgets. The target is relatively low because direct payments/individualised budgets are only possible, at present, in respect of people receiving social care and many people receive health, supporting people or preventative services rather than social care.

**Preventative Services**

*Leisure*

It is proposed that 300 more people should access community services. This is partially off-set by a decrease in the number of people accessing day centres for vocational purposes during the four years from 199 to 100.

*Advocacy*

Herefordshire MIND currently provides a limited individual advocacy service funded by external short term monies. This is helping 80 people per annum. However, due to limited resources this service has seen many people referred in a crisis and not been able to provide sufficient support to prevent crises occurring. Access to advocacy will therefore be expanded to ensure more people have access to independent individual advocacy services. It is anticipated that this would support all of the some 200 people per annum who are expected to need it.

**Primary Care Mental Health Services**

No major changes in demographics are anticipated, but with improved services more people will be supported in primary care and fewer will "graduate" to secondary services.



# **Future care needs and services for 18-64 year-olds in Herefordshire with physical disabilities**

November 2007

**Herefordshire Council Corporate Policy and Research Team**  
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**Contents**

	Page
Summary	3
Section 1 - Introduction	6
Section 2 - Assessment of future care needs	9
Section 3 - The pattern and levels of services to meet needs in 2012	12
Section 4 - The capacity needed to deliver the improvements	19
Section 5 - The costs	23
<b>Appendices</b>	
Appendix 1 – Membership of the Steering Committee	
Appendix 2 – Details about the expert consultants	
Appendix 3 – Needs assessment	
Appendix 4 – Present and future services	

***Final report: future care needs and services for 18-64s with physical disabilities*****Summary**

Working together and with their partners, Herefordshire Council and the Herefordshire Primary Care Trust are committed to maximising the independence, well-being and choice of people with physical disabilities. In doing this, they face a major double challenge: despite additional investment and service improvements in recent years, in important respects they still lag behind what is achieved by high-performing authorities serving comparable areas; and the costs of services have continued to escalate.

Currently there are an estimated 4,600 people aged 18-64 with moderate disabilities who are likely to require personal care at some time. This number is expected to increase by no more than 5% (250 people) by 2012, and 8% (350 people) by 2021.

An estimated further 950 people with serious disabilities currently are likely to require care at some time; a figure expected to increase by 5% (50 people) by 2012, but not further by 2021.

The principal driver of these increases in need is the projected rise in the number of people aged 55-64, of 7.1% by 2012 and 20.6% by 2021; this is because a number of the most common physical disabilities are more often found in this age-group than amongst younger adults.

The prevalence of physical disability is much higher than the number of people who need services: in March 2007 328 people were receiving core social care services, while a further 293 were being helped by means of information, advice and annually serviced equipment. During 2006-07 as whole, there were 650 users of core social care services.

Between five and seven young people with physical disabilities a year are likely to be in transition from children's to adults' services.

It would appear appropriate to plan to provide care and other support for 5% more people by 2012. This would equate to an additional 37 users of core social care over the year as a whole; and, at any one time, an additional 16 users of core social care and 15 additional users of less intensive services.

Major gaps in current data need to be filled, which means that these estimates will need to be kept under review. Even so, it is possible to be reasonably confident about the needs estimated for 2012.

Users and carers want much better communications with staff, and also between professionals; more consistent support from social workers and occupational therapists, with reduced waiting times for services; better, clearer information about services; more local, flexible day opportunities; more opportunities for self-assessment, housing and employment; the extension of direct payments and individual budgets; and better services for those with

***Final report: future care needs and services for 18-64s with physical disabilities***

acquired brain injury. The Government and the inspectorates have similar expectations.

Compared with generally high-performing North Somerset, Somerset and Shropshire, Herefordshire is slower to begin and complete assessments; much slower to deliver care packages; quicker to deliver equipment but much slower in carrying out major adaptations; provides less home care overall because of its low level of intensive home care, and does so at a relatively high unit cost; provides much more residential care; provides more of its day care in buildings-based settings rather than in local and generic facilities; does less to help people into employment; has fewer people in receipt of direct payments; doesn't provide a single point of access for users and carers; does less to support carers; and does less to enable users and carers to shape the planning and development of services. It incurs higher gross and net costs, attracting proportionately less than half the external income secured by Shropshire.

To achieve high-performing, cost-effective services by 2012 Herefordshire needs to do much more to support people, including those with intensive care needs, in their own homes and communities, placing much more influence and control in the hands of users and carers. This will require the cost-effective, local replacement of the current out-of-county provision and, more generally, a significant reduction in the use of residential care. There is an urgent need to emulate the high-performers by integrating the county's occupational therapists into single community teams under common line management.

Considering together the expected 5% increase in demand for services over the medium-term, the need for new forms of services to meet this cost-effectively, the additional costs of provision arising from Herefordshire's uniquely high number of people living in sparsely populated areas and the manifest inefficiencies in the current pattern of services, **overall it would seem reasonable to conclude that the aggregate level of spending by the Council in 2006-07 (i.e including the over-spending against budget of just over £1 million), maintained in real terms and with the proceeds of efficiency savings reinvested in the new services will be needed recurrently until 2012, but that annual savings of some £209K a year should be possible by 2012-13.**

**In addition, to establish the more efficient and effective new pattern of services, non-recurrent bridging funding for social care of between £200K and £250K a year will be required through to 2011-12.**

**Limitations of currently available information about PCT funding mean that there is no basis for comparisons with other areas in respect of health expenditure. The prudent assumption for now, pending the further work that will be done to develop the joint commissioning plan to deliver the improved pattern of services, is that at least the current level of expenditure, maintained in real terms, will be required.**

***Final report: future care needs and services for 18-64s with physical disabilities***

To avoid a vicious circle of decline, the transformation plans to bring about the new pattern of services must be fully integrated with the steps taken to manage current in-year over-spending against budget.

Moreover, these resources will not do the job without the full and quickest possible integration of all aspects of planning, commissioning, delivery and performance management of health and social care across the Council and PCT.

It will also require the large-scale extension of direct payments and individualised budgets; better support for carers; maximising the contribution and effectiveness of GP-based commissioning; adjusting the balance of PCT and Council funding to achieve a single, shared set of commissioning targets; attracting significant additional funding from external sources; and working closely with the third sector to mobilise voluntary and community resources behind the development of preventative services, access to generic local services and facilities, advocacy for individuals and help-lines.

The new services will only work if all those caring for and supporting people with physical disabilities are developed to have the right skills and behaviours. This will need to be done as part and parcel of the introduction of the streamlined processes and ICT-based systems being put in place under the *Herefordshire Connects* programme, buttressed by strong, disciplined performance management at all levels.

***Final report: future care needs and services for 18-64s with physical disabilities***

**Section 1: Introduction**

- 1.1 Working together and with their partners, the Council and the Herefordshire Primary Care Trust (PCT) are committed to maximising the independence, well-being and choice of people with physical, including sensory disabilities.
- 1.2 Despite additional investment over previous years, and changes aimed to enable people to lead safe and fulfilled lives in their own homes and communities rather than in unnecessary residential care, the Council's and PCT's current patterns and levels of services are not, in important respects, achieving as much and providing the same value for money as are the highest performing comparable areas.
- 1.3 In addition, the costs of services in Herefordshire have risen substantially in recent years and continue to do so, to the extent that expenditure has significantly exceeded budgets.
- 1.4 This is taking place against the background of the ambitious developments in Government policy for health and social care set out in the White Paper of January 2006, *Our health, our care, our say: a new direction for community services*. This calls for a fundamental shift in services to local communities, to be developed by local partners in ways that better meet the needs of individual people. It sets four main goals:
- a. **better prevention and earlier intervention** – reducing the chances of people becoming ill or dependent in the first place;
  - b. **more choice and a louder voice** – ensuring that people are in control of the services they receive, through involvement in the planning and development of services, and by means of self-directed care, including direct payments and budgets for individuals;
  - c. **tackling inequalities and improving access to a wider range of community services** – ensuring that the areas, groups of people and individuals with greatest need get the services they deserve;
  - d. **more support for people with long-term needs** – better integration of services and joint planning across health and social care for those who make the most intensive use of services.
- 1.5 These goals are developed in more detail for physical disability services in other authoritative publications, including *Improving Life Chances for Disabled People* (PM's Strategy Unit 2005); *Long-Term (Neurological) Conditions* (NSF, DH 2005); and *Supporting People with Long Term Conditions to Self Care* (DH 2006). They are expressed most concretely in the seven outcomes for people used by the CSCI in their assessments of care: *Improved health and emotional well-being*;



***Final report: future care needs and services for 18-64s with physical disabilities***

*Improved quality of life; Making a positive contribution; Exercise of choice and control; Freedom from discrimination and harassment; Economic well-being; and Personal dignity and respect.*

- 1.6 The goals are underpinned by national consultation showing strong support for more community services. That is reflected in the consistent findings of public consultation in Herefordshire, including that carried out with users and carers specifically to inform this assessment (details are given in section 3 below). The Council, the PCT and their partners in The Herefordshire Partnership have made *Healthier Communities and Older People* one of the *Herefordshire Community Strategy's* four priorities for better outcomes.
- 1.7 In the light of these considerations, the Council and the PCT are committed to work with their partners, service users themselves and their carers and representatives to develop and deliver better, sustainable services for the future. They want, in particular, to strike the right balance between preventative services and the provision of more intensive support and care.
- 1.8 In all of this, the Council and PCT are particularly conscious not only of the inter-dependence of health and social care one upon the other in achieving the best outcomes for people, but also of the vital contribution that needs to be made by housing, employment services, education, welfare benefits, generic community-based opportunities (such as cultural and leisure services), the voluntary and community sector, and, not least, by users and carers themselves and by their advocates.
- 1.9 Crucial too are effective links to ensure smooth transition between the services provided for children and young people and those for adults; and between services for 18-64 year-olds and those for older people.

**The purpose of this report**

- 1.10 Having last year assessed future needs for older people and adults with learning disabilities, and agreed how services would be developed to meet them, the Council and the PCT decided to carry out, with the *Herefordshire Alliance*, a thorough assessment of future needs of 18-64 year-olds with physical disabilities; of the services needed to meet those needs; and of the costs involved in doing so, taking into account the scope for greater efficiency in moving from the present services to a new, more effective pattern.
- 1.11 This report has been prepared under the leadership of the Council's Corporate Policy and Research Team, working with staff in the PCT, in the Council's Adult Social Care Department and Resources Directorate, and with *The Herefordshire Alliance* and *The Herefordshire Centre for Independent Living*. The membership of the Steering Group is at Appendix 1.

***Final report: future care needs and services for 18-64s with physical disabilities***

- 1.12 The Steering Group has been advised by distinguished experts in the field, Professor Gerald Wistow and Eileen Waddington. Further information about the expert advisers is at Appendix 2.
- 1.13 The first stage of the project was to estimate the need for care of 18-64 year-olds with physical disabilities through to 2021. This was to provide the long-term context for the second stage: the assessment of what patterns and levels of cost-effective services would be needed to meet expected needs in 2012.
- 1.14 Rather than conduct a theoretical assessment of the services that will be needed, the best possible comparator areas were identified; that is those with high-performing services in areas with broadly similar settlement patterns and demographic characteristics to those found in Herefordshire. The selected areas were North Somerset, Somerset and Shropshire.
- 1.15 Through analysis of comparative data about services and costs, of inspection reports, and by visiting the authorities, we established what patterns and levels of services they provide; how they intend further to change and improve them to meet future challenges; and, crucially, how they manage and deliver them successfully. These findings were then applied, having regard to the distinctive needs and circumstances of Herefordshire and to wider relevant comparisons.
- 1.16 The final stage was to translate these findings into costed proposals for the development of high-performing services through to 2012.

**The structure of the report**

- 1.17 Section 2 of the report examines future needs to 2012 and 2021. Section 3 describes what pattern and levels of services will be needed to meet those needs in 2012. Section 4 looks at the capacity needed to develop and deliver these services successfully. Section 5 sets out the estimated costs of doing so, comparing them with current costs.

***Final report: future care needs and services for 18-64s with physical disabilities***

## **Section 2: Assessment of future needs**

2.1 The full assessment of future care needs for 18-64 year-olds with physical disabilities is at Appendix 3. It begins with a summary.

2.2 The crucial points are:

- an estimated 13,200 people between the ages of 18 and 64 in Herefordshire have **some kind of physical disability**, meaning one that reduces the person's locomotion, sight, hearing, communication and/or ability to wash, dress, feed, go to the toilet, or get in or out of a bed or a chair
- of these, an estimated 3,200 have a **serious disability**
- by 2012 the numbers with moderate disabilities are expected to grow by 5%, as are the numbers with serious disabilities
- however, the current estimated number with **moderate disabilities who are likely to require personal care** at some time is much lower, at 4,600; a figure that is expected to increase by no more than 5% (250 people) by 2012 and 8% (350 people) by 2021
- the estimated current number with **serious disabilities likely to require personal care** at some time is fewer still, at 950; a figure that is expected to increase by a maximum of 5% by 2012 (50 people) but not further by 2021
- almost all people with a personal care disability are likely to have a **locomotor disability**
- within these totals, 1,450 are estimated to have a **sight disability**, which is serious for an estimated 250; these numbers are not expected to change by 2012, but they are expected to increase by 50 for people with serious disability by 2021
- an estimated 3,000 people have a **hearing disability**, but for only 100 people is this serious; that 100 is expected to increase to 150 by 2012, and to remain at this level in 2021
- an estimated 1,250 people have a **communication disability**, which in 300 cases is serious; the maximum expected change in the number with a moderate disability is an additional 50 by 2012, but no change is expected in the number with a serious disability
- the **principal driver of these increases** in need is the projected rise in the numbers of people aged 55-64, of 7.1% by 2012 and

**Final report: future care needs and services for 18-64s with physical disabilities**

20.6% by 2021 (compared with 3.7% and 5.5% for England and Wales as a whole); this is because a number of the most common physical disabilities are more often found in this age-group than amongst younger adults

- it is not possible at present to estimate the numbers of people in **different ethnic groups** in the county with physical disabilities; nor to produce estimates of the numbers of people likely to have these in **different parts of Herefordshire**
- it is estimated that between five and seven young people with physical disabilities a year are likely to be in **transition from children's to adults' services**
- the prevalence of physical disability is much higher than those who need – or probably want – social or most other forms of care and support; this underlies the huge disparity between some of the numbers above and the **number of people aged 18-64 known to services**. In March 2007, 328 were receiving core social care services, while a further 293 were being helped less intensively by means of information, advice and annually serviced equipment. During 2006-07 as a whole, there were over 650 users of core social care services; the large difference between this figure and the snapshot figure for March is accounted for by the turnover of people receiving short-term services, such as intermediate care and welfare benefits
- taking into account the estimated increases in physical disabilities in the population summarised above, **it would appear appropriate to plan to provide care and other support for an additional 5%. This would equate to an additional 37 users of core social care over the year as a whole; and, at any one time, an additional 16 users of core social care and 15 additional users of less intensive services**
- there were, in 2005, an estimated 14,100 people in the county aged 18-64 acting as unpaid **carers** for at least one hour a week, of whom 3,600 were providing care for 20 hours or more; we have no reliable basis on which to estimate the number of these caring for someone with a physical disability, but it would seem safe to assume that the number is substantial; and it would also seem safe to assume as likely a modest increase in this number to reflect the expected growth in the number of younger people with physical disabilities
- although we do not have detailed information about either the **incomes or accommodation** of people with physical disabilities, there is enough evidence nationally and locally to

**Final report: future care needs and services for 18-64s with physical disabilities**

assume that they are likely to have lower than average incomes and to be more likely to live in social rented accommodation

- 2.3 In considering these estimates, it is important to bear in mind the paucity of reliable data currently available nationally, regionally and locally as regards both present and future levels of need. A study for the Department of Work and Pensions concluded in 2004 that, “*there is no single ‘gold standard’ measure of disability. The multi-dimensional and dynamic nature of disability makes it inherently difficult to measure.*” And a 2007 study of possible future trends by the Institute of Public Policy Research for the Disability Rights Commission, based on self-reporting of long-term health problems and disability, qualified their finding that there could be substantial increases with the words, “*..the fact that a pattern has occurred between 2001 and 2004 is not a guide to the pattern over the next four years, much less over the next 15 years.*”
- 2.4 It has been suggested that the substantial rise in obesity will lead eventually to higher levels of a range of disabilities, for instance those associated with diabetes, stroke and coronary heart disease. On the other hand, intensifying health promotion together with legislation, such as the ban on smoking in public places, may result in improved diet and health. It is not possible at the present time to be clear about even the broad net effect of these and other factors that may give rise to either more or fewer physical disabilities in the future.
- 2.5 Within Herefordshire difficulties arise because data have not been collected and because the various separate data-bases maintained by the Council and the PCT about individuals mean that there is likely to be extensive double-counting or more. On the other hand, some things are probably not being counted at all. These deficiencies will need to be addressed to provide a sound basis for the future monitoring and planning of services, as well as to meet fully statutory requirements in respect of equalities and those to come requiring a Joint Strategic Needs Assessment for health and social care.
- 2.6 It is of great importance that we rectify these deficiencies as quickly as possible. Much of this will be made possible by the introduction of a single user data-base and other improvements under the *Herefordshire Connects* programme, including the development of shared systems between the Council and PCT within the Public Service Trust. The longer-term estimates in this report should be reviewed as these improvements bear fruit.
- 2.7 That said, the present estimates are the best possible current basis for planning and delivering improved services to 2012, in respect of which it is possible to be reasonably confident about the extent and nature of future needs.

**Section 3: The pattern and levels of services to meet needs in 2012**

3.1 Drawing on the views expressed by users and carers in Herefordshire, on Government and other authoritative national requirements and guidance regarding physical disability services, together with the evidence about high-performing services gathered from the comparator areas – North Somerset, Somerset and Shropshire – this section describes what needs to be done, to what extent, to achieve services that will meet the needs identified in section 2.

**The views of users and carers**

3.2 The views on present and future services of users and their carers and personal advocates were sought at a forum in July 2007. 26 took part, expressing clearly and forcefully what they want from services.

3.3 Their main points were:

- communications between staff and those receiving assessments and care need to improve a lot
- as do communications between professionals about individuals' care
- especial concern about the need for better, more consistent communications and support from social workers and occupational therapists, with a particular need to reduce waiting times for assessments and occupational therapy services
- the need for better, clearer information about services
- a need to increase opportunities for self-assessment
- the need to eliminate delays in the provision of equipment, in the carrying out repairs and, especially, in making major adaptations
- a need for improved housing opportunities
- the need to increase employment opportunities, including through avoidance of the benefits trap
- the majority wanting more community-based/generic day opportunities, but a minority concerned about the possible loss of valued current buildings-based services
- on the back of a perception that those in receipt of them are

**Final report: future care needs and services for 18-64s with physical disabilities**

living more independently than others, the importance of increasing the number of people receiving direct payments or individual budgets

- the need to improve services for those, often younger people, with acquired brain injury

**Government and inspectorate requirements**

3.4 The improvements users and carers want to see reflect key elements of the national requirements and guidance on good practice. Other key elements expected by Government and the inspectorates are:

- the fullest possible participation in society being the touchstone, including meaningful employment
- advocacy and other help for individuals to promote their social inclusion
- user and carer involvement in service planning and development
- the fullest possible integration of the commissioning and provision of services across health and social care
- a single point of contact and continuity for users and carers across agencies
- the systematic and effective management of the transition of young people from children and young people's services to those for adults
- the provision of information, advice and, where appropriate, assessment to the whole population, including self-funders

**Comparing with high-performers**

3.5 In comparison with the relatively high-performing North Somerset, Somerset and Shropshire, Herefordshire:

- is slower to begin assessments (88% of contact within 48 hours, compared with an average of over 96%, with Somerset achieving 99%)
- is slower to complete assessments (83.6% within 28 days, compared with an average of 89%, with Somerset achieving 94.9%)

***Final report: future care needs and services for 18-64s with physical disabilities***

- is much slower to deliver care packages (76% within 28 days, compared with an average of 92.5%, with Shropshire achieving 96%)
- the proportion of its total net social care expenditure classified as assessment and care management is the lowest (6%); substantially lower than the average (18%); and massively lower than Shropshire (26%)
- is much slower in carrying out major adaptations (average waiting time 39 weeks, compared with 33 in Shropshire and 16.5 in Somerset)
- is best at delivering equipment within seven working days (96%, compared with an average of 93%)
- helps a slightly higher proportion of 18-64 year olds with physical disabilities to live at home (6 per 1,000 population, compared with an average of 5.5)
- but provides less intensive home care for all adults (6.7 per 1,000 population, compared with an average of 9.4)
- despite this lower level of intensive home care, its unit costs for home social care as a whole are much higher than the average (£295 per person per week, compared with an average of £160)
- provides substantially more residential and nursing care than two of the three comparator areas (32 per 1,000 population, compared with an average of 24 in North Somerset and Shropshire, and 57 in Somerset); most dramatic is the comparison with Shropshire: whereas 32% of Herefordshire Council's total net expenditure is on these forms of care, Shropshire spends only 14%.
- most of its day care is buildings-based as opposed to being shaped around the needs of individuals, with an emphasis on community-based and generic facilities; this is reflected in a social care cost per user per week that is higher than the average for Shropshire and Somerset (£102, compared with £83; with Shropshire alone £69)
- does less to enable people to gain or retain employment
- all Herefordshire's occupational therapists are employed by the PCT and, unlike the comparator areas, are not integrated into single community teams under common line management; this is a principal cause of our relatively poor performance, including delays in assessments, the delivery of care packages and major adaptations



**Final report: future care needs and services for 18-64s with physical disabilities**

- doesn't provide a single point of access across health and social care for users and professionals
- does less to support carers (services provided to carers in respect of 10% of service users, compared with an average of over 12% and North Somerset's nearly 14%)
- does less to enable users and carers to make an influential contribution to the planning and development of services
- has improving, but still weak and inefficient, systems for the collection and analysis of data, on the basis of which the performance of services can be continuously monitored and improved
- overall, incurs higher social care gross costs (£47 per head of the 15-64 population per annum, compared with an average of £42; and with North Somerset's figure of only £34)
- attracts about the same level of income as the average of the comparators per head of the 15-64 population from charging service users for social care, but this will rise under the new fairer charging arrangements
- generates about the same level of other external income for social care per head of the 15-64 population, but under half of that secured by Shropshire (£1.46 compared with £3.16)
- limitations of currently available information about PCT funding mean there is no basis for comparisons with other areas in respect of health expenditure

**The new pattern of services required**

3.6 This analysis leads to our recommending the following principal changes to achieve the modern, cost-effective patterns of services that would meet future needs in Herefordshire.

3.7 The fundamental strategic shifts needed are to do much more to support people, including those with intensive care needs, in their own homes and communities; place much more influence and control in the hands of users and carers; and integrate fully the planning, commissioning and delivery of care and support across the Council and the PCT.

3.8 The specific changes to achieve this should be:

***Final report: future care needs and services for 18-64s with physical disabilities***

- commissioning cost-effective services within the county to replace current out-of-county placements and avoid them in the future, wherever this is in the interests of users
- developing own-home and community-based services so as to reduce to the absolute minimum the use of residential and nursing home care
- maximising the targeted use of telecare, so that people are able to live safely in their own homes
- moving away from traditional, buildings-based services by developing and enhancing access to community-based, often generic opportunities
- working closely with the third sector to mobilise voluntary and community resources behind the development of preventative services, access to generic local services and facilities, advocacy for individuals and help-lines.
- enhancing recovery and rehabilitation services, particularly for people with acquired brain injury; these improvements should include home support, housing, education, training and employment opportunities, and support, where necessary, to access general community facilities
- the maximum possible number of people securing their own care with direct payments or individual budgets
- securing effective, independent advocacy for individuals
- providing better, clearer information about services, tailored to meet the needs of different groups of users
- securing services to support carers to continue in their role and improve their own health and well-being, including, where necessary, help to retain or gain employment
- systematic, continuous user and care involvement in the planning and development of services, including financial assistance and capacity-building to make this possible; with regular surveys of users' and carers' views about services and the quality of their lives, and the systematic use of complaints to improve services
- developing a shared philosophy and approach across children's and adults' services, reflected in fresh protocols, to ensure a smooth and successful transition for young people moving between them

***Final report: future care needs and services for 18-64s with physical disabilities***

- identifying the needs of ethnic minority groups and then tailoring services to meet them
- as a pre-condition for the necessary service improvements, and therefore as a matter of urgency, putting in place a single set of arrangements across the Council and the PCT for the planning, commissioning, delivery and performance management of health and social care
- as an essential part of this, creating wholly integrated community-based teams including the occupational therapists, under single line-management
- establishing a single point of contact for users, carers and professionals, buttressed by shared business processes and information systems
- improved preventative and intermediate care services for people with chronic conditions by means of joint management of health and social care
- doing all this in partnership with GP practices to achieve effective integration between community teams, therapy services, GPs and practice and district nurses, and to maximise the effectiveness of GP-based commissioning

3.9 A number of the necessary improvements are already beginning to happen or are planned. These include:

- the expert patient programme, which helps people with long-term conditions to improve their quality of life, delivered by volunteers who themselves have long-term conditions
- chronic back-pain classes and insulin management groups for insulin-dependent patients and their carers
- two well-being co-ordinators promoting targeted preventative services with GP practices to avoid inappropriate hospital and care home admissions
- the initial roll-out of telecare, with over 97% of service users feeling that this has increased their independence
- the appointment of a Physical Disability Co-ordinator to identify opportunities for young people in residential care to live with support in the community
- intermediate care flats to enable people to undertake daily living activities and increase their independence

***Final report: future care needs and services for 18-64s with physical disabilities***

- working in partnership with voluntary bodies to maximise the take-up of direct payments and, through welfare rights information and advice, people's income
  
- the temporary appointment of an officer to draw up the joint commissioning strategy that will secure the improved pattern of services

3.10 The overall pattern and levels of high-performing services proposed are set out in Appendix 4, which also explains the underlying assumptions.

*Final report: future care needs and services for 18-64s with physical disabilities*

## Section 4: The capacity needed to deliver the Improvements

- 4.1 Achieving successful change on the scale necessary to meet future needs cost-effectively requires not only careful, detailed planning across health and social care (and beyond) but also a firm, co-ordinated grip on all aspects of managing projects, finance, human resources and performance.

### Funding

- 4.2 Overall and pro rata to the 15-64 population, the current level of social care **gross funding** is almost 12% above the average for the comparator areas. It is, however, only marginally above that for Shropshire, which provides the closest match to Herefordshire's circumstances.
- 4.3 However, the **net cost** to the Council is a significant 4% higher per head of population than Shropshire. Since Shropshire raises less per head of population from charges to users, this is entirely because Shropshire raises more than twice as much external income per head.
- 4.4 Considering together the expected 5% growth in the need for services, the additional costs of provision arising from Herefordshire's uniquely high number of people living in sparsely populated areas, inefficiencies in the current pattern of services, and on the basis that Herefordshire should be capable of generating proportionately equivalent levels of external income to those achieved by Shropshire, in addition to the additional income that would result from the proposed new fairer charging arrangements, **overall it would seem reasonable to conclude that the aggregate level of spending by the Council in 2006-07 (i.e including the over-spending against budget of just over £1 million), will be needed recurrently until 2012.**
- 4.5 **This would hold true only if this level of spending were to be maintained in real terms and if the efficiency savings that would be secured under the new pattern of services were retained for investment in those new services.**
- 4.6 **Moreover, although the reduction in services no longer required, for example expensive out-of-county residential placements, should be expected to pay the recurrent costs of the new pattern, this can only happen if there is targeted, time-limited, non-recurrent funding to develop the new services, such as for reablement, advocacy and carers.**
- 4.7 The PCT has not hitherto been required to collate expenditure figures in respect of care for particular age-groups. For the purposes of this assessment, it has estimated that its total costs of commissioning

***Final report: future care needs and services for 18-64s with physical disabilities***

services and directly providing physiotherapy and occupational therapy for 18-64 year-olds with physical disabilities were £1.16 million in 2006-07 and are likely to be some £1.22 million in 2007-08. Despite this initial estimate, **there is no basis currently for comparisons with other areas in respect of health expenditure. The prudent assumption for now, pending the further work that will be done to develop the joint commissioning plan to deliver the improved pattern of services, is that *at least* the current actual level of expenditure, when it has been determined, maintained in real terms, will be required.**

- 4.8 The assumption that the current real levels of recurrent funding should be an adequate basis for emulating the achievements of the high-performing comparator areas rests on six crucial additional provisos:
- that the large-scale extension of direct payments and individualised budgets will be managed in such a way that significant efficiency savings are generated for recycling in physical disability services
  - that support for carers will be strengthened (recent research by the University of Leeds estimates that the average carer saves the nation more than £15,000 a year)
  - that the contribution and effectiveness of GP-based commissioning will be maximised
  - that the balance between PCT and Council funding will be adjusted, where necessary, to achieve a single, shared set of commissioning targets
  - that we will attract significant additional funding from external sources (such as Government grants, including Supporting People, charities, private business and the National Lottery)
  - that this and wider benefits will be achieved by working in close partnership with the third sector, so as to provide access to wider sources of external funding and, even more important, to mobilise voluntary and community resources behind the development of preventative services, access to generic local services and facilities, advocacy for individuals and help-lines; this may include the development of user-led organisations as service providers
- 4.9 Moreover, the plans for radical transformation that will produce sustainable, affordable and cost-effective services must be fully integrated with the steps taken in response to the current over-spending. Unless this is done, on the basis of establishing an agreed programme of change for the coming four years, underpinned by the necessary minimum recurrent and targeted non-recurrent funding,

**Final report: future care needs and services for 18-64s with physical disabilities**

services will deteriorate in a vicious circle of ad hoc cuts and retrenchment that will render them incapable of meeting future needs .

4.10 These considerations underpin the costings in section 5 below.

**Human resource, organisational and systems considerations**

4.11 Developing and delivering the new pattern of services will require considerable, sustained management effort and a systematic approach to workforce planning and performance management, so as to ensure that all those providing care and other support to people with physical disabilities have the right skills and exhibit the right behaviours.

4.12 Elements of a good basic infrastructure have now been created in the Council and the PCT which, together with an increasingly productive relationship with both the third and private sectors, has the potential to bring about the necessary changes. Notably, this includes an Interim Head of Adult Social Care, a dedicated Head of Learning Disability, a Change Manager, the strengthening of the PCT and Council Planning and Change Team, including a Physical Disabilities Commissioning Manager, and additional appointments to the Council's contracts and adult safeguarding teams.

4.13 However, this strengthened capacity is already tackling a comprehensive transformation programme that includes the fundamental reshaping of older people's and learning disability services, and the development of wholesale new procedures and management systems; to which will now need to be added, as well as that in respect of physical disabilities, a similar reshaping of mental health services. These and other **existing resources will not be able to do the job without the full and quickest possible integration of all aspects of planning, commissioning, delivery and performance management of health and social care across the Council and PCT**. In turn, this will require the putting in place of single procedures, processes and ICT systems as part of the *Herefordshire Connects* programme.

4.14 Physical disabilities planning and commissioning capacity will be needed; the present Commissioning Manager post is temporary, filled by a secondment and due to end in April 2008.

4.15 This will need to be funded either from existing budgets or, if that is not possible, from the first tranche of non-recurrent investment in 2008-09, with the recurrent costs absorbed as the new pattern of services produces off-setting savings.

4.16 Underpinning all of this, there will need to be a cross-agency development programme for all those caring for or supporting people with physical disabilities. A partnership workforce strategy for

***Final report: future care needs and services for 18-64s with physical disabilities***

the whole of adult health and social care is already in the early stages of development. This will need to include a dedicated element to deliver the improvements in physical disability services.

4.17 Similar considerations apply to the rolling out of the communications strategy and action plan for the comprehensive transformation programme.

4.18 The new pattern of services should be subject to regular review and periodic formal evaluation, taking account of a progressively better understanding of the nature and level of need. This should include an external, independent element, if possible linked to national evaluation programmes.



**Final report: future care needs and services for 18-64s with physical disabilities**

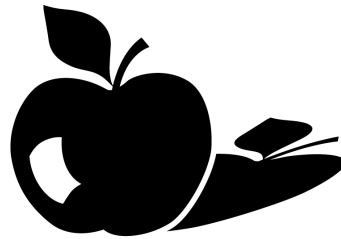
**Section 5: The costs**

- 5.1 Appendix 4 contrasts the proposed high-performing services in 2012 with the services in place in 2006-07.
- 5.2 Unless services are fundamentally reshaped along the lines proposed in this report, they would fail to meet the needs and wishes of users and carers, and also the expectations of Government and the inspectorates. Worse still, this would take place in a context where the performance of other areas can be expected, on average, to continue to improve year-on-year and in which Government and the inspectors are likely to have ratcheted up the minimum acceptable standard for services and, therefore, the threshold for intervention.
- 5.3 Additionally, the maximum possible sustainable improvements in efficiency can be achieved only if services are modernised as proposed. This is illustrated by the growth, from 16 in 2005-06 to 20 currently, in the use of residential care, with an increase to ten out-of-county placements, which are costing the Council over £500,000 a year. There is a substantial danger that, in the absence of adequate local, community-based services, this trend will continue, resulting in even greater spending pressure against budgets.
- 5.4 **The recurrent spending required annually on social care from 2008-09 through to 2011-12 is the 2006-07 expenditure of £4.826 million, maintained in real terms.**
- 5.5 **Pending the further work that will be done to develop the joint commissioning plan to deliver the improved pattern of services, the prudent assumption is that *at least* the current actual level of PCT expenditure, maintained in real terms, will be required recurrently.**
- 5.6 **In addition to these recurrent costs, non-recurrent investment of the following order will be required to put in place the new pattern of services :**

<b>Year</b>	<b>£000</b>
2008-09	200
2009-10	250
2010-11	250
2011-12	200

- 5.7 **Annual savings of some £209K a year in social care costs should be possible by 2012-13.**





HEREFORDSHIRE  
COUNCIL

**NEEDS ANALYSIS:**  
**ADULTS WITH PHYSICAL DISABILITIES**

*Principal factors that will determine the need for services for  
people aged 18 to 64 with physical disabilities*

**October 2007**

**Final Version (4.4)**

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<b>TABLE OF CONTENTS</b>
--------------------------

<b>EXECUTIVE SUMMARY .....</b>	<b>iii</b>
<b>INTRODUCTION .....</b>	<b>1</b>
<b>DEMOGRAPHICS OF HEREFORDSHIRE .....</b>	<b>2</b>
The County of Herefordshire .....	2
Current Population .....	2
Recent Trends .....	3
Migration .....	3
Ethnicity .....	5
Future Population .....	6
Communal Establishment Population .....	8
<b>GENERAL HEALTH IN HEREFORDSHIRE .....</b>	<b>9</b>
Life Expectancy & General Health .....	9
Limiting Long-term Illness .....	10
Physical Health Functioning .....	10
<b>KNOWN ADULTS WITH A PHYSICAL DISABILITY .....</b>	<b>11</b>
Service Users .....	11
Benefit Claimants .....	12
<b>ESTIMATING NUMBERS WITH A PHYSICAL DISABILITY (CURRENT &amp; FUTURE) .....</b>	<b>16</b>
National Prevalence of Disability .....	16
Any Type of Physical Disability .....	19
Personal Care Disability .....	19
Locomotor Disability .....	21
Sight Disability .....	21
Hearing Disability .....	22
Communication Disability .....	23
<b>ETHNICITY OF ADULTS WITH PHYSICAL DISABILITIES .....</b>	<b>25</b>
<b>GEOGRAPHIC DISTRIBUTION OF ADULTS WITH PHYSICAL DISABILITIES .....</b>	<b>26</b>
<b>CARERS .....</b>	<b>27</b>
Numbers of Carers .....	27
The Cared For .....	28
Carers' Health .....	28
<b>ABILITY TO PAY .....</b>	<b>30</b>
Earnings .....	30
Income .....	30
Employment and financial characteristics of people with a disability .....	30
<b>HOUSING .....</b>	<b>32</b>
Home Point register .....	32
Tenure of people with disability / limiting long-term illness .....	32
<b>REFERENCES .....</b>	<b>34</b>

## EXECUTIVE SUMMARY

### Introduction

Looking forward to 2012 and 2021, this report is an assessment of the principal factors that will determine the need for social and health care for adults aged 16 to 64 years with physical disabilities. A physical disability can be defined as a disability which reduces the individual's locomotion, seeing, hearing, communication and/or ability to carry out activities of daily living (ADLs).<sup>1</sup> Different levels of severity will present different issues to public authorities in terms of what, if any, services people with physical disabilities require.

### Demographics of Herefordshire

- Herefordshire's current<sup>2</sup> estimated population of 18-64 year-olds is 105,600 – 59% of the total population. The county has an older overall age profile than both the West Midlands region and England and Wales.
- Office for National Statistics projections suggest numbers of 18-64 year-olds may increase by 2.0% by 2012, although more conservative local forecasts which take in to account expected housing provision suggest this increase will only be 0.1% by 2011.
- Projections suggest the 18-64 year-old population could be 107,000 in 2021, an increase of just 1.3% from 2005.
- Recent years have seen a more rapid growth in numbers in older age-groups (55-64s) and a more rapid decline in the younger ones (18-34s) than nationally. This ageing of the age profile is expected to continue, with the 55-64 year-old age-group growing most rapidly (by 7% in the short-term and 21% by 2021).
- The county has a smaller proportion of people from 'Black and Minority Ethnic' (BME) backgrounds than England as a whole (3.5% compared to 14.7%), but this population grew by 40.9% between 2001 and 2004 – much more rapid than the overall population growth of 1.7%. It is likely that numbers have increased further since the expansion of the EU in May 2004: between 2,500 and 3,000 workers from new member states were cleared to work in Herefordshire in 2005, although it is not known how many remain in the county. The county also experiences an annual influx of around 3,000 temporary seasonal agricultural workers – mainly over the summer months.
- In 2004, 3.8% of 18-64 year-olds in Herefordshire were estimated to be from a BME background; just under half of these were non-white.

### Estimating numbers with a physical disability (current & future)

Numbers of household residents aged 18-64 in Herefordshire with disabilities were estimated (for 2005) and projected using national prevalence rates from 2000-01:

- Currently, an estimated 13,200 people have a disability of any type, 3,200 of whom have a 'serious' disability. The maximum expected increase would be 5%, in both 'serious' and 'moderate', by 2012; 7% in 'moderate' and 8% in 'serious' by 2021.
- There are an estimated 950 household residents with a 'serious' personal care disability, the type of disability most pertinent to social care service planning. This number is expected to increase by a maximum of 5% (50 people) by 2012. No further change is expected in the longer term. Therefore, if all who need such a service are receiving care, there can be expected to be no notable change in demand in either the short or long-term.
- The number of people with a 'moderate' personal care disability (4,600) is expected to increase by a maximum of 5% (250 people) in the short-term, and 8% (350) by 2021.
- Locomotor disabilities are the most common type of disability; the national survey found that almost all of the people with a personal care disability also had a locomotor disability.

<sup>1</sup> Being able to wash, dress, feed, toilet, get in/out of bed or a chair; Health Survey for England, 2001

<sup>2</sup> ONS 2005 mid-year estimate. In August 2007, after this needs analysis work was completed, the ONS published revisions to the population estimates and projections. As a result, Herefordshire's population was reduced. Analysis has shown that the revisions have no notable effect on the estimates or projections of the numbers of people with a physical disability.

- An estimated 9,200 people have a locomotor disability; 2,050 are classified as 'serious', a number which is expected to increase by a maximum 7% (150) in the short-term and 10% (200) by 2021.
- 1,450 household residents are estimated to have a sight disability, 250 of them 'serious'. This group is expected to remain at a similar level in the short-term, and increase by around 50 people by 2021 (no notable change in 'moderate' numbers).
- An estimated 3,000 people have a hearing disability, but only 100 of these are classified as 'serious'. The latter number would be expected to increase by 50 people by 2012, and remain at this level in 2021.
- It is estimated that there are 1,250 people with a communication disability, 300 of which are classified as 'serious'. The maximum expected change is an increase of 50 people with a 'moderate' communication disability by 2012, with no change in 'serious' in either the short or long-term.

### **Ethnicity of Adults with Physical Disabilities**

- It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire with physical disabilities.
- The proportion of Physical Disability service users of an ethnic origin other than 'White British' in 2006/07 was less than half the proportion in the total population of 18-64 year-olds in 2004 (which itself may have increased, given anecdotal changes in the ethnicity of the total population since the expansion of the European Union in May 2004).
- Nothing is known about the general health and social care needs of migrant and seasonal workers in Herefordshire.

### **Geographic Distribution of Adults with Physical Disabilities**

- It is not possible to produce projections of the number of people in different parts of Herefordshire who will have a physical disability.
- Further work would be required to determine the distribution of adults with physical disabilities across Herefordshire, and if current services are provided equitably regardless of location.

### **Carers**

- Assuming that the prevalence of caring in Herefordshire is as it was at the 2001 Census, 14,100 people aged 18-64 in Herefordshire are estimated to have been providing at least one hour of unpaid care a week in 2005, with 3,600 providing care for 20 hours or more per week.
- At the same time, 1.3% of 18-64 year-olds in the county (1,340 people) were entitled to Carers' Allowance, i.e. were not in employment or full-time education and were caring for a severely disabled person for at least 35 hours a week.
- Carers are more likely to be in 'not good' health than non-carers, and the disparity increases with the amount of time spent caring per week.
- People who provide care over a long period of time are particularly at risk of poor health. Carers' health is also more likely to deteriorate over time than that of non-carers, with many of the detrimental changes attributable to the caring role. However, these risks are more likely to be in relation to carers' mental health; in an ONS survey only 8% of carers reported that caring responsibilities had a direct impact on their physical health.

### **Ability to Pay**

- Average earnings in Herefordshire are significantly below those in England as a whole, but there is no information on *incomes* locally.
- There is no information about the financial situation of adults with disabilities in Herefordshire, but national evidence suggests that it is reasonable to assume that people with a disability are more likely to have a low income than those without. This will have implications for their ability to pay for the costs of services

### **Housing**

- Although little is known about the housing situation of adults with disabilities in Herefordshire, national and local information suggests that it seems reasonable to assume that people with physical disabilities are more likely to be living in socially rented accommodation than people without.
- In November 2006, 6.5% of 18-64 year-olds registered with Home Point were 'registered disabled', 'registered blind', were deaf or had partial hearing difficulties.

## INTRODUCTION

Looking forward to 2012 and 2021, this report is an assessment of the principal factors that will determine the need for social and health care for adults aged 16 to 64 years with physical disabilities. These include demographic change, taking into account the expected levels and characteristics of in-migration; the implications of changing patterns of health, treatment, and the development of health care services in response to them; the extent to which people might be able to pay all or part of the costs of their social care; and housing.

A physical disability can be defined as a disability which reduces the individual's locomotion, seeing, hearing, communication and/or ability to carry out activities of daily living (ADLs).<sup>3</sup> Different levels of severity will present different issues to public authorities in terms of what, if any, services people with physical disabilities require.

The Disability Discrimination Act covers people who would be considered to be disabled under this condition, but also includes people with mental impairments and people with cancer, HIV and multiple sclerosis from the point of diagnosis (before the condition has necessarily had an impact on their day-to-day living). It defines a disabled person as: "...someone who has a physical or mental impairment that has a substantial and long-term (i.e. 12 months or more) adverse effect on his or her ability to carry out normal day-to-day activities...like eating, washing, walking and going shopping", in relation to "...mobility, manual dexterity, speech, hearing, seeing and memory".<sup>4</sup>

There are differing views in defining disability: the traditional, medical definition which classifies people on the basis of the impairment from which they suffer, and the social model which defines people as being disabled not by their impairment but by the barriers that society creates for them. Due to the prevalence data that is available, the medical model is used in this report. But the findings will be applied in terms of future services having regard to the social model and therefore the removal of barriers to people's full participation in society.

### **Note on revisions to Office for National Statistics' population estimates**

In August 2007, after the needs analysis work was completed, but before the needs assessment was finalised, the ONS published estimates of population for mid-2006 using a new methodology for estimating international migration at the local level. At the same time, it revised the 2005 mid-year estimates – upon which the estimates and projections of the numbers of people with a physical disability in this needs analysis are based.

The local 2005-based forecasts for Herefordshire will not be revised, but the ONS 2004-based sub-national population projections have been revised to take account of the new methodology.

Herefordshire's estimated population of 18-64 year-olds in 2005 was revised down from 105,600 to 104,300; the estimate for mid-2006 is 104,800. The projection for 2012 is now 105,600 (down from 107,700), and that for 2021 is 103,800 (reduced from 107,000)

Analysis has shown that the revisions have no notable effect on the estimates or projections of the numbers of people with a physical disability. There are some minor changes in some of the categories, but the key figure of the number of people with a serious personal care disability is not affected at all.

<sup>3</sup> Health Survey for England 2001; ADLs are being able to wash, dress, feed, toilet, get in and out of bed or a chair.

<sup>4</sup> Definition of 'disability' under the Disability Discrimination Act (DDA). Directgov website: [http://www.direct.gov.uk/en/DisabledPeople/RightsAndObligations/DisabilityRights/DG\\_4001069](http://www.direct.gov.uk/en/DisabledPeople/RightsAndObligations/DisabilityRights/DG_4001069)



## DEMOGRAPHICS OF HEREFORDSHIRE

### THE COUNTY OF HEREFORDSHIRE

Herefordshire is a predominantly rural county of 842 square miles situated in the south-western corner of the West Midlands region, bordering Wales. With a population of approximately 56,000, the city of Hereford is the major location in the county for employment, administration, health, education facilities and shopping. The five market towns of Leominster, Ross-on-Wye, Ledbury, Bromyard and Kington are the other principal centres, with populations ranging from 11,000 (Leominster) to 2,500 (Kington).

The county has beautiful unspoilt countryside, distinctive heritage, remote valleys and rivers, including the river Wye which flows east through Hereford and the Wye Valley Area of Outstanding Natural Beauty. The south-west of the county includes the Black Mountains, and the Malvern Hills form part of the boundary with Worcestershire to the east.

Herefordshire has limited access to the motorway network via the M50, which starts near Ross-on-Wye and joins the M5 north of Tewkesbury in Gloucestershire. The other main road links, which all pass through Hereford, are the A49 (running from north to south), the A438 (east to west) and the A4103 to Worcester.

The nature of Herefordshire's rurality presents unique challenges to service providers, with a relatively small population of 178,800<sup>5</sup> scattered across the 2<sup>nd</sup> largest<sup>6</sup> unitary authority in England. Furthermore, although three English counties<sup>7</sup> have a lower population density than Herefordshire, no other top tier local authority has a greater proportion of its population living in "very sparse" areas.<sup>8</sup>

### CURRENT POPULATION

Herefordshire's current total population is 178,800<sup>5</sup>, of which 59% (105,600) are aged 18-64. Herefordshire has an older overall age profile than both the West Midlands Region and England and Wales, and this is apparent in the older groups within the population of interest in this report. Table 1 shows how Herefordshire has a larger proportion of 55-64 year-olds in its population than either the region or England and Wales as a whole, and a smaller proportion of 18-34 year-olds.

It should be noted that the mid-year estimates exclude around 2,700<sup>9</sup> Herefordshire students who live away from home during term-time, the majority of whom are likely to be aged 18-21. As the county has no universities, this group is not compensated for by students from other areas living within the county during term-time.

Table 1: Proportion of total population in adult age-groups, 2005

Area		18-34	35-54	55-64	18-64
Herefordshire	No.	29,400	51,000	25,200	105,600
	%	16.4%	28.5%	14.1%	59.1%
West Midlands Region	%	21.6%	27.6%	11.9%	58.4%
England & Wales	%	22.3%	28.1%	11.7%	62.0%

Source: 2005 mid-year estimates, ONS. Note: figures may not sum due to rounding.

<sup>5</sup> 2005 mid-year estimate, ONS

<sup>6</sup> Behind East Riding of Yorkshire

<sup>7</sup> Northumberland, North Yorkshire and Cumbria

<sup>8</sup> According to the sparsity measures used in the calculation of the Local Government Finance Settlement 2006/07, 29% of Herefordshire's population live in wards with a density of 0.5 persons per hectare or lower and 25% live in Output Areas with a density of 0.5 or lower.

<sup>9</sup> 2001 Census

Whilst gender distribution is an important issue when considering older people due to the longer life expectancy of females, it is less of one for adults aged 18-64; there is a roughly 50:50 split between males and females in the age groups of interest in Herefordshire, as nationally.

## **RECENT TRENDS**

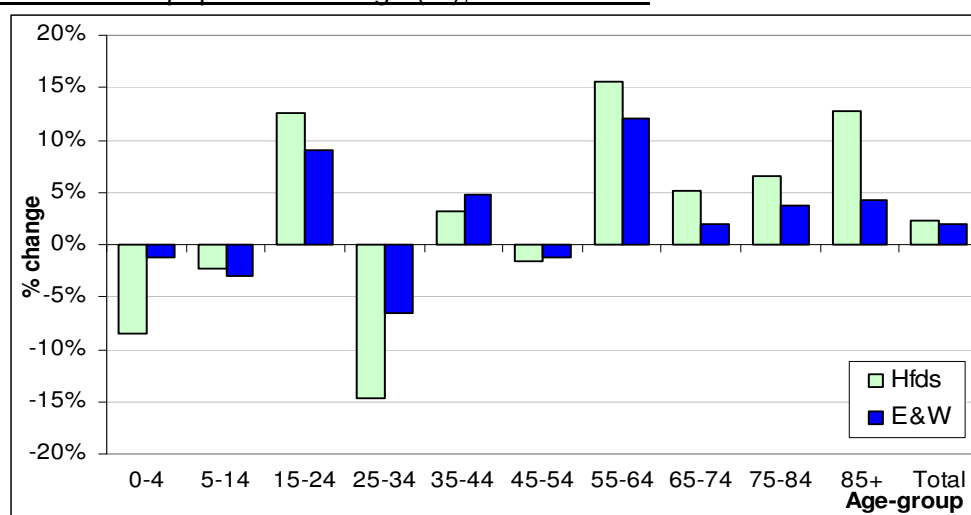
Herefordshire's population grew by 2.2% between 2001 and 2005, which is broadly similar to the national growth (2.0%), but change was not consistent across age-groups (Figure 3). The number of people aged 18-64 increased by 2,500 over this period – a growth similar to the total population growth but, as Table 2 shows, numbers of 18-34 year-olds fell by 4.5%, whilst the population aged 55-64 increased by 15.6%. These changes were in the same direction as national trends, but larger.

Table 2: Observed population change (%), 2001 to 2005

Age-group	Herefordshire	England & Wales
18-34	-4.5%	-0.5%
35-54	+1.0%	+2.0%
55-64	+15.6%	+12.1%
18-64	+2.4%	+2.8%

Source: mid-year population estimates, ONS

Figure 3: Observed population change (%), 2001 to 2005



Source: mid-year population estimates, ONS

## **MIGRATION**

### **Within UK Migration**

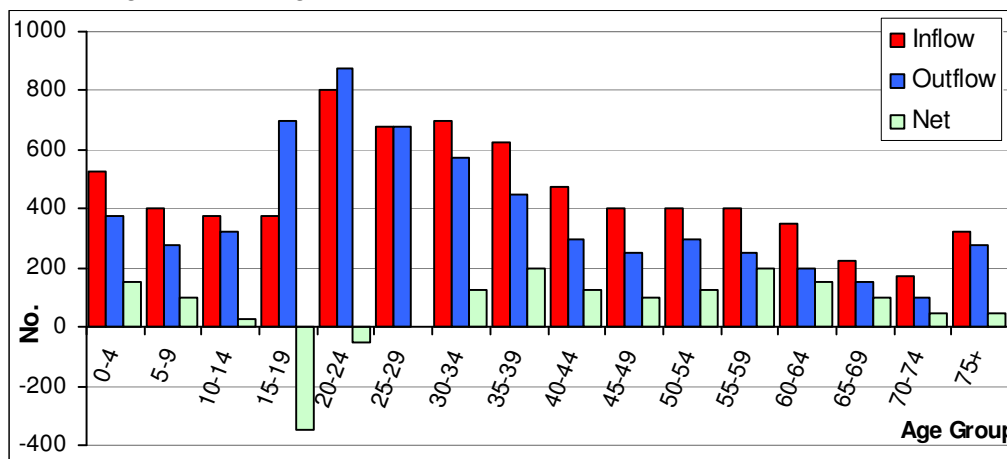
Herefordshire experiences an average annual net gain of just over 1,000 residents from elsewhere in the UK. Analysis of migration within *England and Wales*<sup>10</sup> shows that about two-thirds (65%) of the net migrants into Herefordshire come from London and the South-East (including Bedfordshire, Hertfordshire and Essex); just under a quarter (24%) from neighbouring English counties (Gloucestershire, Worcestershire and Shropshire); 13% from non-neighbouring parts of the West Midlands region and the rest from other parts of England; on average more people move from Herefordshire to Wales than vice versa, giving a net loss.

The average numbers of people in each age group moving into and out of Herefordshire each year, along with the average net in-flow (people moving *in* minus people moving *out*), are shown in Figure 4. The largest flows, both into and out of Herefordshire, are in the 20-

<sup>10</sup> Over the period mid-1998 to mid-2004

24 year-old age group. This is one of the age groups where people are most mobile generally, so the pattern is not necessarily unique to Herefordshire.

Figure 4: Average annual migration between Herefordshire and rest of UK



Source: derived from ONS Internal Migration Estimates; average over period mid-2000 to mid-2004

Notably, the only average net *out*-flows are in the 15-19 and 20-24 year-old age-groups, with the largest in the former: on average 350 more 15-19 year-olds leave the county each year than move into it. This may be explained by the fact that Herefordshire does not have a major centre of higher education, coupled with the fact that young people leaving home to start university are generally aged 18-19 and are counted at their term-time address.

However, it is worth noting that although there is an average annual net loss of 400 15-24 year-olds, this only represents around 2% of the county's population of these ages. To put this into perspective, Rutland UA in the East Midlands 'loses' around 7% of its population of this age-group each year, whilst Westminster 'gains' around 7%.

### International Migration

According to the ONS mid-year estimates of population, until 2004 Herefordshire had an average of zero net international migrants per year. In the 2005 estimates, the county had a net in-flow of 440.

The only detailed information available regarding permanent international migration is the number of people moving into Herefordshire from outside the UK in the year before the 2001 Census. This figure was 567, which represents just 0.3% of the total population of the county at the time, and the number moving in the other direction is unknown. 54% of these international in-migrants were aged under 30, which is much higher than the corresponding figure of 44% of in-migrants from within the UK; both figures are higher than the proportion of under 30s of Herefordshire's population (33%).

### Migrant workers

Between 2,500 and 3,000 workers from new European Union accession states<sup>11</sup> were cleared to work in Herefordshire in 2005. The ages of these migrants are unknown, but it is likely that most were young adults. However, there is currently no information on how long they remain in the county, or even the UK.

The county also experiences a significant influx of temporary seasonal agricultural workers each year (around 3,000<sup>12</sup>) – mainly over the summer months, with the majority from Ukraine and Russia. These are, by definition, students who are permitted to work on participating farms for up to 6 months.

<sup>11</sup> Source: Worker Registration Scheme; Work Permits (UK), Home Office. States are: Poland, Lithuania, Estonia, Latvia, Slovenia, Slovakia, Hungary and the Czech Republic.

<sup>12</sup> Source: Seasonal Agricultural Workers Scheme; Work Permits (UK), Home Office.

**ETHNICITY**

Experimental statistics<sup>13</sup> suggest that in 2004, 3.5% of Herefordshire's total resident population was from an ethnic minority (6,200 people). This proportion is still very low by national (14.7%) and regional (15.5%) comparisons, but reflects a growth of 40.9% in the BME population from 2001 compared to just 1.7% for the total county population. It is very likely that numbers have increased even more since the expansion of the EU in May 2004 given the migrant worker statistics discussed above.

This information is also available for Herefordshire's 18-64 year-old population, and indicates that younger age-groups have a slightly higher proportion of people from ethnic minorities: 3.8% of 18-64 year-olds are estimated to be from an ethnic group other than 'white British', in comparison with 3.5% of the total resident population (Table 5). This figure rises to 5.1% of 18-34 year-olds.

For all age-groups, 'White other' was the largest ethnic minority group (1.5% of total population aged 18-64). 'White Irish' was the second largest group for 50-64 year-olds (0.8% of all 50-64s), whilst 'Asian or Asian British' was the second largest for 18-34 year-olds (1.0% of all 18-34s). These two ethnic groups were equally sized for 35-50 year-olds (0.5% of all 35-50 year-olds each).

Table 5: Percentage of Herefordshire residents in ethnic group, by age-group, 2004

Age-group	'White British'	Ethnic group other than 'White British'
18 to 34	94.9%	5.1%
35 to 49	96.1%	3.9%
50 to 64	97.3%	2.7%
18 to 64	96.2%	3.8%
Total population	96.5%	3.5%

Source: ONS © Crown copyright.

The small numbers of people aged 18-64 from ethnic minority groups are shown in Table 6, as is the distribution amongst these groups: just under half of people from an ethnic minority are non-white.

Table 6: Percentage of Herefordshire's 18-64 year-old non-'white British' residents in each ethnic group, 2004

Ethnic Group	No. aged 18-64 in ethnic group	% of total 18-64 year-old non-'White British' in group
White British	100,800	-
White Irish	600	15.0%
White Other	1,600	40.0%
Mixed	400	10.0%
Asian or Asian British	600	15.0%
Black or Black British	300	7.5%
Chinese	200	5.0%
Other ethnic group	200	5.0%
Non-'White'	1,800	45.0%
Total non-'White British'	4,000	100.0%

Source: ONS © Crown copyright. Figures may not sum due to rounding (to the nearest 100).

<sup>13</sup> ONS experimental population estimates by ethnic group.

## **FUTURE POPULATION**

The Office for National Statistics produces population **projections** for local authorities based on recent and nationally projected trends in births, deaths and migration – i.e. estimates of what could be reasonably expected to happen to the population *if recent trends were to continue*. The most recent set of sub-national projections are 2004-based and project forward to 2029.

Herefordshire Council's Research Team produces population **forecasts** for Herefordshire which are also based on recent and nationally projected trends in births, deaths and migration, but, unlike the projections, also take into account anticipated housing provision under the Unitary Development Plan – which has a constraining effect on in-migration. Until the Regional Spatial Strategy is decided it is not possible to anticipate what housing provision there may be after the UDP, so forecasts can only be produced up to 2011. 2005-based interim forecasts have been produced which take account of a higher than average net international in-migration between 2004 and 2005 (but do not make any attempt to forecast future trends in international migration)

As this needs analysis is interested in expected demand for services up to 2012, and longer term to 2021, the ONS projections are considered alongside the local forecasts; the latter is considered as an alternative scenario for the short-term assessment.

Both the forecast and projected figures for 2011 are presented in Table 7a, along with the projections for 2012 and 2021.

Both the forecast and projected figures for 2011 are presented in Table 7, along with the projections for 2012 and 2021.

- The key point to note is that according to the ONS projections, the population aged 18-64 in Herefordshire will rise to a peak in 2011 (at 108,100) before falling slowly but steadily to 107,000 in 2021.
- The local forecasts predict less growth by 2011 (to 105,700 people), so that numbers would have to continue to increase to reach the level projected for 2021.
- In the long term (up to 2021), by far the biggest rate of change is expected to be in the population of 55-64 year-olds: an increase of 20.6% from 2005, which represents an extra 5,200 residents. The population aged 35-54 is expected to fall by 5,000 over the same period, although this only represents a fall of 9.8% due to the larger numbers in this group.
- Comparing the ONS projections for 18-64 year-olds in Herefordshire to the corresponding national ones shows that even the expected rise in numbers to 2011 would result in a slightly lower rate of growth than in England and Wales as a whole (2.4% to 3.7%). The subsequent projected fall in Herefordshire's population of 18-64 year-olds would result in a much lower overall rate of growth between 2005 and 2021 (1.3% compared to 5.5% in England and Wales).

All of the potential changes discussed here would result in an older age-structure of the 18-64 year-olds in Herefordshire, as illustrated in Table 7b. The proportion of this group aged 55-64 is expected to increase from 24% in 2005, to 25-26% in 2011/12, and to 28% by 2021. Conversely, the proportion aged 35-54 is expected to decrease from 48% in 2005 to 47% in 2011/12 and 43% in 2021. The proportion in the 18-34 age group is expected to remain fairly constant, fluctuating between 27% and 29%.

Table 7: Expected change in population aged 18-64, Herefordshire and England &amp; Wales

		Current	Short-term			Long-term
		2005	2011		2012	2021
		Estimate	Forecast	Projection	Projection	Projection
18-34	No.	29,400	28,700	29,700	30,100	30,500
	% change from 2005	-	-2.4%	+1.0%	+2.4%	+3.7%
35-54	No.	51,000	50,000	51,100	50,600	46,000
	% change from 2005	-	-2.0%	+0.2%	-0.8%	-9.8%
55-64	No.	25,200	27,000	27,300	27,000	30,400
	% change from 2005	-	+7.1%	+8.3%	+7.1%	+20.6%
18-64	No.	105,600	105,700	108,100	107,700	107,000
	% change from 2005	-	+0.1%	+2.4%	+2.0%	+1.3%
18-64: projected % change, England & Wales		-	-	+3.7%	+3.7%	+5.5%

Source: ONS 2005 mid-year estimates & 2004-based sub-national projections; HC Research Team 2005-based interim forecasts using ONS estimates and Gov't Actuary's Department projected trends; GAD 2004-based national population projections.

Table 7b: Expected proportion of 18-64 year-old population by age-group, Herefordshire

Age-group	Current	Short-term			Long-term
	2005	2011		2012	2021
	Estimate	Forecast	Projection	Projection	Projection
18-34	28%	27%	27%	28%	29%
35-54	48%	47%	47%	47%	43%
55-64	24%	26%	25%	25%	28%
18-64	100%	100%	100%	100%	100%

Source: ONS 2005 mid-year estimates & 2004-based sub-national projections; HC Research Team 2005-based interim forecasts using ONS estimates and Gov't Actuary's Department projected trends; GAD 2004-based national population projections.

As only projections are available for the years after 2011, the only long-term scenario considered is the 2021 ONS projection. Although the focus of the short-term needs analysis is 2012, since the projections suggest that the total population aged 18-64 will peak in 2011 it seems appropriate to consider the forecasts and projections concurrently. The combined factors of different age-groups being expected to peak at different points throughout the period and age-sex-specific prevalence rates mean that different mental health problems could peak at different times in the short-term. In terms of service planning it seems appropriate to consider the 'worst case scenario', i.e. take the population scenario that suggests the highest number of cases of each physical disability. In fact, as will be discussed in subsequent sections, the differences in the numbers estimated to have a physical disability between the short-term forecast and projections are relatively minor.

It must be noted that the forecasts and projections presented here are only possible scenarios of what might happen to Herefordshire's population in the future – if trends change and/or fertility, mortality and migration assumptions are not met the population could be very different.

As mentioned above, the local forecasts take into account the higher than average international in-migration in 2004, without making any assumptions about the effect of any sustained increase. The international migration assumptions for the 2004-based projections are based on movements in the few years prior to the expansion of the European Union; little is known, even at a national level, about the impact of these changes on the population in the longer term.

## **COMMUNAL ESTABLISHMENT POPULATION**

A communal establishment is defined<sup>14</sup> as an establishment providing managed (i.e. supervised full or part-time) residential accommodation. This includes small hotels and guesthouses if they have capacity for 10+ guests (excluding the owner/manager and family), and sheltered housing unless half or more of the residents possess their own facilities for cooking (in which case the whole establishment is classified as separate households).

The only information regarding the population living in communal establishments is from the 2001 Census. As Table 8 shows, the numbers and proportions within the age-groups of interest are both small, but it is important to consider them, since prevalence rates tend to relate to the population living in private households. A further complication is that some Census information includes resident staff and their families whilst others exclude them.

**Table 8: Household & communal establishment residents in Herefordshire, 2001 Census**

	Age-group			
	18 to 34	35 to 49	50 to 64	18 to 64
Total Population	30,992	37,193	34,902	103,087
Household residents	30,636	37,028	34,766	102,430
Communal establishment residents (inc. staff)	356	165	136	657
% of age-group living in a communal establishment (inc. staff)	1.2%	0.4%	0.4%	0.6%
Communal establishment residents (non-staff)	248	120	100	468
Residents (non-staff) of medical & care establishments	112	83	68	263
Residents (non-staff) of education establishments (inc. halls of residence)	84	11	6	101
Residents (non-staff) of other communal establishments*	52	26	26	104

*Source: 2001 Census, tables S001 & S126 © Crown copyright.*

*\* Hotel; boarding house; guest house; hostel (including youth hostel, hostel for the homeless & people sleeping rough; or other. Residents of Hereford Garrison at Credenhill are not included in any of these figures. Note: the age-groups in this table are different to those used throughout the report due to constraints in published Census data.*

The majority (56%) of residents were in 'medical & care establishments', although a third (34%) of 18-34 year-old residents were in 'education establishments' – likely the halls of residence of the Royal National College for the Blind in Hereford.

In their sub-national household projections, which run to 2026, the Office for the Deputy Prime Minister<sup>15</sup> assume that the numbers of people living in communal establishments will remain constant for all ages below 75. In the absence of any other local information, this assumption will be adopted for the purposes of this report.

- At the end of March 2006, Herefordshire Council's social services were funding 31 18-64 year-olds with physical disabilities to live permanently in communal establishments: 21 in residential homes and 10 in nursing homes. 7 of the former and 2 of the latter are living in homes outside the county.
- It has not been possible to obtain information about numbers of students at the Royal National College for the blind; in particular the numbers who settle in the county once they leave college would have been helpful.

<sup>14</sup> 2001 Census, Office for National Statistics

<sup>15</sup> ODPM, now Department for Communities and Local Government (DCLG); 2003-based household projections released in 2006.

**Summary: Demographics of Herefordshire**

- Herefordshire's current estimated population of 18-64 year-olds is 105,600 – 59% of the total population. The county has an older overall age profile than both the West Midlands region and England and Wales.
- Office for National Statistics projections suggest numbers of 18-64 year-olds may increase by 2.0% by 2012, although more conservative local forecasts which take in to account expected housing provision suggest this increase will only be 0.1% by 2011.
- Projections suggest the 18-64 year-old population could be 107,000 in 2021, an increase of just 1.3% from 2005.
- Recent years have seen a more rapid growth in numbers in older age-groups (55-64s) and a more rapid decline in the younger ones (18-34s) than nationally. This ageing of the age profile is expected to continue, with the 55-64 year-old age-group growing most rapidly (by 7% in the short-term and 21% by 2021).
- The county has a smaller proportion of people from 'Black and Minority Ethnic' (BME) backgrounds than England as a whole (3.5% compared to 14.7%), but this population grew by 40.9% between 2001 and 2004 – much more rapid than the overall population growth of 1.7%. It is likely that numbers have increased further since the expansion of the EU in May 2004: between 2,500 and 3,000 workers from new member states were cleared to work in Herefordshire in 2005, although it is not known how many remain in the county. The county also experiences an annual influx of around 3,000 temporary seasonal agricultural workers – mainly over the summer months.
- In 2004, 3.8% of 18-64 year-olds in Herefordshire were estimated to be from a BME background; just under half of these were non-white.

**GENERAL HEALTH IN HEREFORDSHIRE****LIFE EXPECTANCY & GENERAL HEALTH**

Herefordshire's population is expected to live longer, on average, than the national population in general. Based on 2002-04 data, life expectancy at birth in Herefordshire is 77.5 years for males and 82.5 years for females, compared to 76.6 and 80.9 respectively for England overall. Increases in life expectancy over the last ten years have been broadly in line with national trends.

The 2001 Census asked residents to say how their health had been overall in the last year (from options: good, fair or not good). Overall, 69% of Herefordshire's household residents said they were in 'good' health and 8% were 'not good'<sup>16</sup>. This split is broadly similar to nationally (9% 'not good') and regionally (10%).

7% of Herefordshire residents aged 18-64 said that their health was 'not good', which is again similar to England & Wales and the West Midlands Region (8% and 9% respectively). Propensity to state that health was 'not good' increased with age, from 3% of the county's residents aged 18-24 to 14% of those aged 60-64.

Unsurprisingly, across all ages, much higher proportions of residents of communal establishments stated that their health was 'not good' than in the population as a whole: 11% of 18-19 year-olds, increasing to 42% of 60-64 year-olds in communal establishments<sup>17</sup>. As noted in Table 8, Herefordshire's communal establishment population

<sup>16</sup> 2001 Census, Table T07

<sup>17</sup> 2001 Census, Table T09



aged 18-64 was 468 in 2001 (0.5% of all 18-64 year-olds), and 56% of these were resident in medical and care establishments.

### **LIMITING LONG-TERM ILLNESS**

A 'limiting long-term illness' (LLI) is defined as an illness, health problem or disability which limits daily activity or work. At the 2001 Census, 18% of Herefordshire's total population reported having an LLI – the same proportion as nationally and similar to regionally (19%). Of the county's 18-64 year-olds, 14% said they had an LLI, which is broadly equal to the national and regional figures (both 15%). Table 9 shows how the prevalence of limiting long-term illness increases with age.

**Table 9: Percentage of Herefordshire residents\* that have an LLI by age group**

Age-group	% with LLI	No. with LLI
18-24	7%	964
25-44	9%	4,183
45-59	18%	6,502
60-64	28%	2,818

\* All people, including those living in communal establishments.  
Source: 2001 Census, ONS – Crown Copyright

There is no information from the Census regarding the nature of LLIs, and due to the self-reporting nature of the question, it could well be that what is 'limiting' for one person may not be for another. It should also be noted that an LLI is not necessarily a *physical* impairment.

Research at a national level<sup>18</sup> indicates that the prevalence of LLI is higher than that of disability for all ages below 85, when disability becomes higher (probably due to older people considering activity limitation to be a normal consequence of ageing).

### **PHYSICAL HEALTH FUNCTIONING**

The Regional Lifestyle Survey (2005) examined physical health functioning using a validated measure<sup>19</sup>, with raw scores transformed onto a scale of 0 to 100 (100 = best possible health state), and indicated that Herefordshire residents have very slightly better physical health functioning than residents of the region overall. Men report slightly better physical health than women for both geographies (see Figure 10).

**Figure 10: Physical health functioning in 12 months prior to Regional Lifestyle Survey, 2005**



Source: Regional Lifestyle Survey 2005, Herefordshire Report; HC Research Team

<sup>18</sup> Bajekal, M. & Prescott, A. (2003) *Health Survey for England 2001: Disability*. London: The Stationery Office.

<sup>19</sup> Based on questions which asked people to rate how much they agreed with certain statements related to mental & physical health. The measure is subject to intellectual property rights and may not be reproduced without prior permission being sought from the publishers. Interested parties should either consult WMRO or WMPHO or consult the supplementary technical report.

### **Summary: General Health in Herefordshire**

- Herefordshire's population is expected to live longer, on average, than nationally.
- Similar proportions of 18-64 year-olds in Herefordshire were in 'not good' health and/or had a 'limiting long-term illness' as nationally and regionally, according to the 2001 Census.
- The Regional Lifestyle Survey indicated that Herefordshire residents have slightly better physical health functioning than those of the region overall.

## **KNOWN ADULTS WITH A PHYSICAL DISABILITY**

### **SERVICE USERS**

Prevalence of 'physical disability' is much wider than those who need – or indeed want – help from social services. Herefordshire Council currently uses the National Eligibility Framework FACS (Fairer Access to Care Services) definition of 'critical and substantial need' when determining a need for care.

A person is considered to have a 'critical or substantial need' when any of the following is true:

- Life is, or will be, threatened;
- Significant health problems have developed or will develop;
- There is, or will be, partial or no choice and control over the immediate environment;
- Abuse or neglect has occurred or will occur;
- There is, or will be, an inability to carry out *the majority of personal care or domestic routines*;
- Involvement in many aspects of work, education or learning cannot or will not be sustained;
- The majority of social support systems and relationships cannot or will not be sustained;
- The majority of family and other social roles and responsibilities cannot or will not be undertaken.

If a person is unable to carry out 'several' personal care or domestic routines and/or sustain involvement in 'several' aspects of work, education or learning; sustain 'several' social support systems and relationships; undertake 'several' family and other social roles and responsibilities, their need is classified as 'moderate'. If the word 'several' in these statements can be replaced by the words 'one or two', the need is classified as 'low'.

However, for many reasons, not least the fact that the government guidance specifically includes the qualifying statement that care should be given to people without a 'critical or substantial need' if they are at risk of developing such a need if care is not provided, it is likely that not *all* clients on the database have a 'critical and substantial need'. With current systems, it is impossible to know the extent of this. Having said this, everyone on the database as a physical disability service user has a physical disability and is in need of care from social services.

Information is recorded about people who receive a service from the Physical Disability Team. Table 11 shows the number of physical disability service users in each age group for the last two financial years: both snapshot figures on the last day of the year, and the total number of people who used the service during the year.

Table 11: Physical Disability service users aged 18-64, Herefordshire

Age-group	Service users at 31 <sup>st</sup> March				All service users during year					
	Physical Disability service users*		Other vulnerable people		Physical Disability service users*		Other vulnerable people		Signposting service**	
	2006	2007	2006	2007	2005/06	2006/07	2005/06	2006/07	2005/06	2006/07
18-34	38	36	4	6	57	72	19	34	2	17
35-54	150	153	36	29	246	296	97	135	20	21
55-64	131	139	23	20	240	284	92	116	43	53
18-64	319	328	63	55	543	652	208	285	65	91

Source: Herefordshire Council Adult and Community Services Directorate

\* Coded as either 'physical & sensory disability' or 'frail'; \*\* people who are referred by the council to other partner organisations, and are not coded.

Due to the way data is collected, and the complexities involved in trying to classify service users, there is limited information about the nature of these people's disabilities. Physical Disability service users are classified as either 'physical & sensory disability' or 'frail', neither of which provides much information.

'Other vulnerable people' fall under the remit of the Physical Disability Team, but may or may not have a physical disability; this group includes people who may have received welfare benefits advice from the council's Joint Working Team.

The people included in the annual count as 'signposting service' include those who contact the council for help but are subsequently referred to a partner organisation, for example someone who needs smoke alarms installed is added to the database, but then signposted to the Fire Service. Their contact may be by telephone, so it is not possible to assign them a FACS code, and it is therefore not possible to know whether or not they have a physical disability.

The large differences between the 'snapshot' counts on the 31<sup>st</sup> March and the count of all users over the course of a year are due to the turnover of people receiving short-term services such as welfare benefits and intermediate care.

- A wider group of adults with physical disabilities are counted as being 'helped to live at home'; as well as the 328 people receiving 'traditional' social care services in March 2007, a further 293 were helped by less intensive services – mainly the information service, Herefordshire ABLE<sup>20</sup> and Maintained Equipment.<sup>21</sup>

An average of five young people with physical disabilities make the transition from children's services to adult social care per year.

## **BENEFIT CLAIMANTS**

People with a disability can claim specific benefits; the two that are available to adults aged 18-64<sup>22</sup> are Disability Living Allowance (DLA) and Incapacity Benefit (IB) or Severe Disablement Allowance (SDA).

It should be noted that 'disability' in the context of claiming benefits could equally relate to a physical or mental problem.

<sup>20</sup> 'Access to Benefits, Leisure, Employment': "A free, impartial and confidential service of information, advice, and in some cases, practical help...for people connected with any aspect of disability" - [http://www.ablehereford.com/what\\_is.htm](http://www.ablehereford.com/what_is.htm)

<sup>21</sup> Equipment that requires servicing annually.

<sup>22</sup> People over 65 can claim Attendance Allowance.

Benefits data is presented here to give an indication of actual numbers of people in Herefordshire who meet the criteria for disability-related benefits, but this information is of limited value:

- although the number aged 18-64 claiming each benefit in Herefordshire is available, it is not possible to obtain detailed information about this age-group at a county level, for example the reason for claim, or numbers who claim both benefits;
- it is not possible to calculate take-up rates as the total number eligible is unknown, so is therefore not possible to determine whether any increases in the numbers of claimants are due to increases in eligible numbers, or to improved take-up due to publicity of welfare rights.

### Disability Living Allowance (DLA)

DLA is not income-related, and is paid to people who have required help for three months and are likely to need that help for at least six more months. It comprises two components with different levels depending on the severity of the disability:

- Care component – for people who need help with their personal care (i.e. attention in connection with their bodily functions and/or continual supervision to avoid substantial danger to themselves or others), with three possible rates (higher, middle or lower)<sup>23</sup>;
- Mobility component – for people who have difficulty walking, with two possible rates (higher or lower)<sup>24</sup>.

A person can only begin claiming DLA if they are under 65, but can continue to receive it after this age if they satisfy the criteria. As shown in Table 12, roughly two-thirds of Herefordshire claimants are aged 18-64. In 2005, 4.5% of the county's population aged 18-64 were claiming DLA: 4,700 people.

The number of claimants in Herefordshire increased by 7.1% between 2003 and 2005, whilst the population grew by just 1.2%. However, this rise could be related to improvements in take-up rates rather than an increase in prevalence.

**Table 12: Claimants\* of either (or both) component(s) of Disability Living Allowance, Herefordshire**

	2003	2004	2005	2006
All ages	6,560	6,890	7,200	7,430
Aged 18-64	4,390	4,550	4,700	4,860
<i>% of all claimants aged 18-64</i>	<i>67%</i>	<i>66%</i>	<i>65%</i>	<i>65%</i>
<i>% of population aged 18-64 claiming</i>	<i>4.2%</i>	<i>4.3%</i>	<i>4.5%</i>	<i>-</i>

*Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.*

*\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.*

Information on the numbers of people claiming each rate of DLA is also published, but it is only possible to obtain exact counts at a county level for the population of working age<sup>25</sup> (see Tables 13 & 14).

<sup>23</sup> Higher rate paid to those who need help during the day *and* night; middle to those who need help during the day *or* night; lower rate to those who need help during some of the day or cannot prepare a cooked meal for themselves given the ingredients. Source: Work & Pensions Longitudinal Study, DWP.

<sup>24</sup> Higher rate paid to those who are (virtually) unable to walk; lower to those who can walk but need help outside on unfamiliar routes. Source: Work & Pensions Longitudinal Study, DWP.

<sup>25</sup> 16 to 59 for females; 16 to 64 for males.

**Table 13: Claimants\* of Disability Living Allowance (DLA) Care Component (working age), Herefordshire**

Rate	2003	2004	2005	2006
Higher	880	880	920	980
Middle	1,170	1,250	1,300	1,330
Lower	1,410	1,480	1,570	1,630
Nil (i.e. eligible for mobility comp. only)	560	530	530	510
All rates	4,020	4,150	4,320	4,450

Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.

\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

**Table 14: Claimants\* of Disability Living Allowance (DLA) Mobility Component (working age), Herefordshire**

Rate	2003	2004	2005	2006
Higher	2,310	2,350	2,390	2,420
Lower	1,200	1,300	1,370	1,470
Nil (i.e. eligible for care comp. only)	500	500	560	550
All rates	4,020	4,150	4,320	4,450

Source: Work and Pensions Longitudinal Study, Department for Works and Pensions.

\* All entitled: those in receipt of payment and those whose payment has been suspended, e.g. if in hospital. Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

Assuming that the proportion claiming each level of each component in Herefordshire is the same for people aged 18-64 as for all people of working age, it could be estimated that, in August 2006:

- 4,300 people aged 18-64 were claiming the care component - 1,070 the higher rate, 1,450 the middle rate and 1,780 the lower rate (4,120; 1,000; 1,410 and 1,710, respectively in 2005);
- 560 people were only eligible to claim the care component (580 in 2005);
- 4,260 people aged 18-64 were claiming the mobility component - 2,650 the higher rate and 1,610 the lower rate (4,090; 2,600 and 1,490, respectively in 2005);
- 600 people were only eligible to claim the mobility component (610 in 2005).

People can claim DLA because of any disabling condition, although it is not possible to obtain information on the reason for claim at county level. As at August 2006 the largest single reason for claiming DLA, at both a national and regional level was 'mental health causes': 19% of 18-64 year-old claimants in Great Britain and 16% in the West Midlands. The reasons for claim presented tend to relate to the impairment that a person has rather than their disability<sup>26</sup>, so it is not possible to quantify the number of people claiming because of a 'physical disability'.

### **Incapacity Benefit (IB) / Severe Disablement Allowance (SDA)**

IB is paid to those who cannot work because of an illness or disability and who meet certain National Insurance contribution requirements. Until 2001 SDA was paid to those who were unable to work but did not meet the contribution criteria; these people can still receive SDA but no new claims can be made.

Although these benefits are primarily for people of working age, some claimants are still able to receive them once they pass state retirement age.<sup>27</sup> However, as Table 15 shows, almost all claimants in Herefordshire have been aged 18-64 (98%) since 2003: around 5,900 each year. These figures indicate that 5.6% of the population aged 18-64 in Herefordshire are claiming IB/SDA each year.

<sup>26</sup> For example: 'arthritis', 'epilepsy', 'stroke related', 'chest disease', 'renal disorders', 'AIDS'.

<sup>27</sup> Currently 60 for women; 65 for men. There is no upper limit for SDA once it has been claimed, and the short-term rate of IB can be paid for up to a year after retirement age.

Detailed data regarding the reason for a claim is only available for the population as a whole (i.e. all claimants aged 16 and above). It should be noted that the single most common reason for claiming IB/SDA each year is 'mental disorder' (over a third of claimants). This is similar to the regional proportion, and about two percentage points lower than the proportion in England as a whole each year (not presented here). 'Mental disorder' is also the only reason for which numbers claiming have increased notably between 2003 and 2006 – the numbers claiming for most other reasons fell slightly.

People with mental health problems are not specifically covered by this report, being the subject of a separate needs analysis. However, they are not excluded from the analysis if they are also physically disabled.

**Table 15: Claimants of Incapacity Benefit (IB) or Severe Disablement Allowance (SDA) by reason for claim (all people aged 16+), Herefordshire**

Medical reason for claiming		2003	2004	2005	2006	
Mental disorders	No.	2,090	2,150	2,190	2,220	
	%	35%	36%	36%	38%	
Diseases of the nervous system	No.	440	450	440	460	
	%	7%	8%	7%	8%	
Diseases of the respiratory or circulatory system	No.	480	450	470	450	
	%	8%	8%	8%	8%	
Musculoskeletal diseases	No.	1,160	1,120	1,110	1,060	
	%	19%	19%	18%	18%	
Injury or poisoning	No.	390	380	390	360	
	%	7%	6%	6%	6%	
Other	No.	1,390	1,420	1,430	1,340	
	%	23%	24%	24%	23%	
Total IB/SDA claimants		No.	5,960	5,970	6,040	5,890
No. of IB/SDA claimants aged 18-64		No.	5,850	5,850	5,920	5,800
% of all IB/SDA claimants aged 18-64		%	98%	98%	98%	98%
% of pop'n aged 18-64 claiming IB/SDA		%	5.6%	5.6%	5.6%	-

Source: *Work and Pensions Longitudinal Study, Department for Works and Pensions.*  
Count is snapshot as at 31<sup>st</sup> August each year; all figures rounded to nearest 10.

## Discussion

The claimant figures suggest that more people aged 18-64 in Herefordshire are unable to work because of a disability (5,800) than require care because of a disability (4,860), although it is not possible to determine how many people are unable to work *and* require care.

The reason for this difference between the numbers of DLA and IB/SDA claimants is unknown; there could be a real difference in the effects of disabilities on peoples' lives, or there may be differences in take-up. No estimates of the proportion of people who are eligible for a disability-related benefit exist, even at a national level, although the Department for Works and Pensions have commissioned a study into the feasibility of estimating DLA take-up.<sup>28</sup> However, 'best guesses' of take-up are said to be 'discouraging', particularly in relation to younger people's take-up of DLA (not least because half of applications fail). It is expected that a greater proportion of those who are eligible for IB are claiming it (i.e. take-up is higher), as it is accessed through long-term sick pay.<sup>29</sup>

<sup>28</sup> By the Policy Studies Institute: [www.psi.org.uk/research/project.asp?project\\_id=151](http://www.psi.org.uk/research/project.asp?project_id=151)

<sup>29</sup> Marsh, A (2006) *The trouble with take-up. The Monitor: Blue Skies.* Issue no. 143, Vol. 1  
[http://www.epolitix.com/EN/Publications/Blue+Skies+Monitor/143\\_1/home.htm](http://www.epolitix.com/EN/Publications/Blue+Skies+Monitor/143_1/home.htm)

### **Summary: Known Adults with a Physical Disability**

- There is limited information regarding current numbers of social care service users with a physical disability, but it is estimated that 'core' social care services are provided to just over 300 people, and that other services (particularly the information service, ABLE, & maintained equipment) are reaching a wider group of around 300 more adults with physical disabilities.
- Benefit claimant figures suggest that 5,800 people aged 18-64 in Herefordshire are unable to work because of a disability and 4,860 require care because of a disability, although it is not possible to determine how many people are unable to work *and* require care.
- National and regional figures would suggest that a significant proportion of both of these groups would be claiming primarily for a mental health problem rather than a physical disability (although the two may co-exist), so it is not possible to use these figures as a proxy for disability.

## **ESTIMATING NUMBERS WITH A PHYSICAL DISABILITY (CURRENT & FUTURE)**

### **NATIONAL PREVALENCE OF DISABILITY**

As the discussion of what is known locally in the previous section indicated, accurate information on the numbers of adults with disabilities is lacking, but this is also the case at a national level. A Department for Work and Pensions study<sup>30</sup> (2004) concluded that “[t]here is no single ‘gold standard’ measure of disability. The multi-dimensional and dynamic nature of disability makes it inherently difficult to measure.”

National estimates are calculated from surveys, and vary from source to source due to real changes over time and methodological differences, but particularly how disability is defined for the purpose of each particular survey, namely:

- Whether severity is taken into account;
- Whether aids are included in the definition (e.g. some surveys classify a person as deaf only if they cannot hear *with* a hearing aid);
- Whether people are asked to self-classify or are objectively assessed;
- Whether the survey is a dedicated survey of disability or a general survey attempting to capture a range of information.

As a result of these differences, estimates of the number of disabled adults in England range from 8.6 million (20%) according to the 1996/7 Disability Survey to 11 million (23%) according to more recent estimates of the number of adults covered by the Disability Discrimination Act. Whilst this is a dramatic difference at a national level, in an area such as Herefordshire with a population of 146,100<sup>31</sup> adults, the difference between 20% and 23% is not that great (around 4,500 people). However, it must be noted that these percentages relate to the whole adult population and are therefore not appropriate to apply to Herefordshire given the older age structure in the county compared to England overall.

Furthermore, the DWP study concluded that there are no marked differences in age-specific disability rates for the working age population between any of the surveys. The major sensitivity to definitional differences comes in older age-groups where people who are less likely to self-declare a disability, considering limiting illnesses to be a natural consequence of ageing.

<sup>30</sup> Bajekal, M. et al, on behalf of the Department for Work and Pensions (2004) *Review of Disability Estimates and Definitions*. Her Majesty's Stationery Office (HMSO).

<sup>31</sup> 2005 mid-year estimate of population aged 16+, ONS.

The most comprehensive prevalence rates for physical disability come from the Department of Health Report: *Health Survey for England 2001 (Disability)*, which had the specific aim of providing "...latest estimates of the prevalence of disability...and to assess changes in prevalence over time" by comparing rates from the 1995 Health Survey for England with those observed in the 2000 and 2001 surveys combined (for improved precision).<sup>32</sup>

The survey provides age-sex specific prevalence rates for moderate and serious disabilities of the following types:

- Locomotor: difficulty, or inability, in walking or bending;
- Personal care: inability to perform self-care tasks or activities of daily living (ADLs)<sup>33</sup> without help;
- Hearing;
- Sight;
- Communication.

Applying these age-sex specific rates to the most recent (i.e. mid-2005) estimate of Herefordshire's household population indicates that there were around 13,200 people with at least one disability, 3,200 of whom have at least one 'serious' disability (Table 16). Locomotor disabilities are most common, followed by personal care. The survey found that almost all of the people with a personal care disability also had a locomotor disability.<sup>34</sup>

It is likely that personal care disabilities are most relevant for consideration by social care service providers, as by definition people with this type of disability require some form of assistance – and 'personal care routines' are specifically mentioned in the National Eligibility Framework for social care provision. This is the approach taken by Wanless<sup>35</sup> in his report on the future demand for social care services among older people, and was adopted in the Herefordshire *Older People Needs Assessment Report*<sup>36</sup> in 2006.

People with the other types of physical disability would certainly fall under the protection of the Disability Discrimination Act (DDA), but it is not possible to estimate how many of these would need – or indeed want – services from social care. If they do have a need for assistance because of their disability they would also be classified as having a personal care disability.

Table 16: Estimated numbers of household residents with a physical disability in Herefordshire, 2005

Disability Type	Moderate	Serious	Total
Personal Care	4,600	950	5,550
Locomotor	7,150	2,050	9,200
Sight*	1,200	250	1,450
Hearing*	2,850	100	3,000
Communication	950	300	1,250
One or more physical disability(ies) of any type	10,000	3,200	13,200

Source: Herefordshire Council Research Team, using ONS estimates and rates.

Note: different types of disability cannot be summed as a person may have more than one type.

\* Hearing or visual problems remedied by hearing aids or glasses/corrective lenses are not classified as disabilities under the definition adopted here<sup>37</sup>

<sup>32</sup> Bajekal, M. & Prescott, A. (2003) *Health Survey for England 2001: Disability*. London: The Stationery Office, p.13.

<sup>33</sup> being able to wash, dress, feed, toilet, get in and out of bed or a chair.

<sup>34</sup> Bajekal & Prescott (2003), p.20.

<sup>35</sup> Wanless Review Team (2005) *Social Care Needs and Outcomes: A background paper for the Wanless Social Care Review*. Wanless Social Care King's Fund Report.

<sup>36</sup> HC Corporate Policy & Research Team (2006) *Future social care needs and services for older people and adults with learning disabilities in Herefordshire*.

<sup>37</sup> Bajekal & Prescott (2003), p.15.



It should be noted that participants were asked what the cause of their disability was, and of all people aged 16+, 2% cited a 'mental disorder' as (one of) the cause(s) of a moderate disability and 5% as (one of) the cause(s) of a serious disability. 3% of all people with any type or number of disabilities said that their disabilities were caused by a 'mental disorder'. This data is not available by age or for different types of disability.

However, these people may have also considered their disabilities to be caused by a physical disease. It is therefore not possible to exclude adults with disabilities caused by 'mental disorders' from the figures considered in this report, although people with mental health problems are also the sole focus of a separate needs analysis.

The overall pattern of diseases cited as the causes of disability were the same as in 1995; by far the most common causes were diseases of the musculoskeletal system and connective tissue such as arthritis, back and other joint problems (40%), although it would seem likely that a large proportion of this group would be aged 65 and over. The only other notable proportion was 'diseases of the circulatory system' (13%).

Accidents were a common cause of disability in under 65s – around 24% of males aged 16-64, and 16% of females. This was highest in males aged 35-44: 33% said their disability was as a result of an accident.

By applying the national prevalence rates to Herefordshire's forecast and projected population, it is possible to also estimate likely future numbers with each kind of disability; the different types are considered separately in subsequent sections.

These projections are based on the assumptions underlying the population forecasts/projections being satisfied, and also on the assumption that prevalence of disability within the household population aged 18-64 will remain constant up to 2021. The latter could be an unrealistic assumption, but in the absence of any national work on likely changes in prevalence there is no way of knowing.

The lack of information nationally is highlighted in a recent Institute of Public Policy Research report for the Disability Rights Commission.<sup>38</sup> The authors project possible future trends using observed changes in self-reporting of a long-term health problem or disability and type of impairment in the ONS Labour Force Survey between 2001 and 2004. However, they qualify their work with the caution that "...the fact that a pattern has occurred between 2001 and 2004 is not a guide to the pattern occurring over the next four years, much less over the next 15 years. None the less, these extrapolations give at least some indication of one possible future scenario, although we cannot make any claims for its likely accuracy."<sup>39</sup> Their findings for the UK could be applied to Herefordshire's population, but the lack of detail regarding type and severity of disability would not provide any insight with regard to likely future demand for services from adults with a physical disability.<sup>40</sup>

There are health factors that may affect the incidence of particular diseases and subsequently increase the future prevalence of physical disability. For example recent increases in rates of obesity may result in an increase in stroke, coronary heart disease and diabetes, which could affect demand for social care. Smoking rates, and incidence of cancer, may also have an impact. However, on the other hand, if national promotion of health awareness encourages people to improve their diets, stop smoking, etc., there may be a positive effect in terms of reducing prevalence.

These matters will need to be kept under review as and when more information becomes available on trends in the prevalence of chronic diseases, and the link between these diseases and physical disability. Nonetheless, any such changes are unlikely to have a

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<sup>38</sup> Pillai, R et al (March 2007) *Disability 2020: Opportunities for the full and equal citizenship of disabled people in Britain in 2020*. Disability Rights Commission.

<sup>39</sup> *ibid*, p. 46

<sup>40</sup> The categories of impairment are: joint/limb disorder; sensory disorder; organ disorder; mental illness; progressive illness; other illness.

significant impact on the extent of need for social and health care services in the short-term (i.e. up to 2012).

As the prevalence rates are age-specific they do take account of the particular age structure in Herefordshire, but it should be noted that as they are assumed to be constant over time any projected changes in numbers are only as a result of expected population changes, i.e. a small fall in the numbers of 35-54 year-olds and a large increase in the number of 55-64s (as discussed on p.7).

### **ANY TYPE OF PHYSICAL DISABILITY**

Table 17 shows the likely future numbers of people with at least one disability of any of the types mentioned on p.17. The following points should be noted in relation to these figures:

- the numbers in this table will be less than the sum of the corresponding numbers in each of the subsequent tables: a person can have more than one disability, but are only included once in the 'any type' estimates;
- a person is classified according to their most serious disability, e.g. if they have a serious locomotor disability and a moderate personal care disability, they are classified as having a serious disability.

Also, as mentioned in the footnote to Table 12, it should be noted that hearing or visual problems remedied by hearing aids or glasses or corrective lenses are not classified as disabilities under the definition adopted here.<sup>41</sup>

Assuming that the rates are suitable to apply to the current and future population of Herefordshire, there are an estimated 13,200 household residents aged 18-64 in 2005 with a disability of any type, 3,200 of whom have a 'serious' disability. The maximum expected increase by 2012 would be 5%, in both 'serious' and 'moderate' disability. There is expected to be a 7% increase in 'moderate' disability and 8% in 'serious' by 2021.

Table 17: Estimated and projected number of household residents aged 18-64 with any type of physical disability<sup>42</sup>, Herefordshire

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	9,450	10,000	10,300	10,500	10,450	5%	10,700	7%
Serious	2,950	3,200	3,300	3,350	3,350	5%	3,450	8%
<b>Total</b>	<b>12,400</b>	<b>13,200</b>	<b>13,600</b>	<b>13,850</b>	<b>13,800</b>	<b>5%</b>	<b>14,150</b>	<b>7%</b>

*Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.*

*\*Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.*

### **PERSONAL CARE DISABILITY**

A person is classified as having a 'moderate' personal care disability if they have any difficulty in performing any of the six 'Activities of Daily Living' (ADLs):

- Getting in and out of bed;
- Getting in and out of a chair;
- Dressing/undressing;
- Washing hands and face;
- Feeding themselves (including cutting up food);

<sup>41</sup> Bajekal & Prescott (2003), p.15.

<sup>42</sup> i.e. one or more of the following types of disability: locomotor, personal care, sight, hearing or communication.

- Getting to and using the toilet.

Their disability is classed as 'serious' if they are unable to perform any of the ADLs without the help of someone else.

As already discussed (p.17), in terms of service provision, it is anticipated that people with a personal care disability would be most likely to require involvement from social services. People with other types of disability that have difficulty performing any of the ADLs will be also be captured within these 'personal care' estimates.

An interesting point to note is that the Health Survey for England found that "almost all personal care disability can be attributed to problems with bed and chair transfer and dressing, for both sexes" and at all ages between 18 and 64. The rates suggest that the highest prevalence of problems with washing, feeding or toileting is amongst men aged 55-64 (3% have some problem getting to or using the toilet).

Table 18: Estimated and projected number of household residents aged 18-64 with a personal care disability, Herefordshire

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	4,300	4,600	4,750	4,850	4,800	5%	4,950	8%
Serious	900	950	950	1,000	1,000	5%	1,000	5%
Total	5,250	5,550	5,700	5,850	5,800	5%	5,950	7%

Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.

### Comparison with Physical Disability service users

According to the definition of 'critical and substantial need' used by Herefordshire Council to determine eligibility for social care, not even everyone classified as having a 'serious' personal care disability (i.e. someone who is unable to perform any one of the six ADLs without assistance) would be considered to have this level of need (see p.11). In other words, those household residents with a 'critical and substantial need' would be a subset of the estimated number with a 'serious' personal care disability.

This is reflected in the relatively small number of Physical Disability service users (319 in March 2006 and 328 March 2007 – presumably including those in communal establishments) in comparison with the estimated number of household residents with a serious personal care disability (950 in June 2005).

### Comparison with claimants of the care component of Disability Living Allowance

According to the Department for Works & Pensions definitions (p.13), it would be expected that all of the people claiming any level of the care component of DLA would be classed as having a 'serious' personal care disability, because they require some form of help with their personal care. It therefore seems odd that the numbers claiming DLA (4,300 in 2005) are so much larger than the estimated number of people with a personal care disability (950 in 2005), even given that the latter doesn't include those living in communal establishments.

However, whilst DLA is designed to provide some benefit related to increased living costs due to a disability, guidance<sup>43</sup> states that people are still entitled to claim it if they live alone with no-one providing care, and don't want anyone to provide care for them. This indicates that the classification is not a strict as in the *Health Survey for England: disability*, whereby

<sup>43</sup> Information about disability living allowance. East Bristol Advice Service: [www.bhas.org.uk/dla/index.shtml](http://www.bhas.org.uk/dla/index.shtml)

people are only classified as having a serious personal care disability if they are *unable* to perform tasks without help.

Having said this, and although it is not possible to be sure that the comparison is of like with like, the number of people claiming the higher rate of DLA care component (i.e. who need help throughout the day & during the night) (1,000 in 2005) is very close to the number of people estimated to have a 'serious' personal care disability (950 in 2005). Furthermore, the number of claimants of the two lower rates of the DLA care component (3,120 in 2005) is not that much lower than estimated number with a 'moderate' personal care disability (4,600 in 2005).

## **LOCOMOTOR DISABILITY**

A person is classified as having a 'serious' locomotor disability if they are unable to do one or more of the following:

- walk for more than a few steps on their own without stopping and without discomfort;
- walk up and down a flight of 12 stairs;
- bend from standing to pick up a shoe off the floor.

Their disability is classified as 'moderate' if they can bend, walk more than a few steps but not as far as 200 metres, and walk up and down a flight of stairs if they hold on and take rests.

Table 19: Estimated and projected number of household residents aged 18-64 with a locomotor disability, Herefordshire

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	6,700	7,150	7,400	7,550	7,500	6%	7,700	8%
Serious	1,950	2,050	2,150	2,200	2,150	7%	2,250	10%
<b>Total</b>	<b>8,650</b>	<b>9,200</b>	<b>9,550</b>	<b>9,700</b>	<b>9,650</b>	<b>5%</b>	<b>9,950</b>	<b>8%</b>

*Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.*

*\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.*

### **Comparison with claimants of the mobility component of Disability Living Allowance**

From the respective definitions (above & p.13), those people classified as having a 'serious' locomotor disability (2,050 household residents in 2005) should all be eligible for the higher rate of the mobility component (2,600 claimants in 2005), but it is not possible categorically to exclude those with a 'moderate' locomotor disability. It may be that someone who can walk for more than a few steps but not as far as 200m (and therefore has a 'moderate' locomotor disability) is also eligible for the higher rate.

Therefore, the 2,600 claimants of the higher rate of the mobility component may include *some* of the estimated 7,150 household residents with a 'moderate' locomotor disability, as well as those 2,050 with a 'serious' locomotor disability. However, given the issues regarding take-up at a national level (see p.15), it is likely that not all of this latter group would in fact be claiming DLA.

## **SIGHT DISABILITY**

A person is classified as having a serious sight disability if they cannot recognise a friend at arms length (1 metre), or a moderate disability if they can recognise a friend at arms length but not across a road (four metres) – both whilst wearing any corrective glasses or lenses that they require.

Assuming that the rates are suitable to apply to the current and future population of Herefordshire, Table 20 shows that there are approximately 1,450 household residents with a sight disability based on the estimated 2005 population; 250 of these are classed as 'serious'. Looking to the future, the only expected change is a 20% increase in the number of household residents aged 18-64 with a serious sight disability between 2005 and 2021, although the small numbers mean that this represents an increase of just 50 people.

**Table 20: Estimated and projected number of household residents aged 18-64 with a sight disability, Herefordshire**

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	1,150	1,200	1,200	1,200	1,200	0%	1,200	0%
Serious	200	250	250	250	250	0%	300	20%
<b>Total</b>	<b>1,350</b>	<b>1,450</b>	<b>1,450</b>	<b>1,500</b>	<b>1,500</b>	<b>3%</b>	<b>1,500</b>	<b>3%</b>

Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.

It should be noted again here that these figures do not include any students at the Royal National College of the Blind, as they are not residents of private households. However, if a significant number of students settle in Herefordshire after leaving the college, it may be that the county would have a higher prevalence of sight disability than in England as a whole. If this were the case, these numbers would be underestimates, but has not been possible to obtain information on how many students do actually settle in Herefordshire.

The students do not receive care from Herefordshire Council whilst they are at the college, but they would be entitled to if they were to remain in the county after leaving the college.

## **HEARING DISABILITY**

A person is classified as having a moderate hearing disability if they can only follow a TV programme whilst wearing their hearing aid (if they have one) with the volume turned up. If they cannot follow it even with the volume turned up they are classed as having a serious hearing disability.

**Table 21: Estimated and projected number of household residents aged 18-64 with a hearing disability, Herefordshire**

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	2,700	2,850	3,000	3,050	3,000	7%	3,100	9%
Serious	100	100	150	150	150	50%	150	50%
<b>Total</b>	<b>2,800</b>	<b>3,000</b>	<b>3,100</b>	<b>3,150</b>	<b>3,150</b>	<b>5%</b>	<b>3,250</b>	<b>8%</b>

Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.

\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.

It is estimated that approximately 3,000 of Herefordshire's household residents had a hearing disability in 2005, and that 100 of these would be classified as serious.

There is little variation in the numbers with a hearing disability according to the different short-term population scenarios. All suggest a 50% increase in the number with a serious hearing disability (an additional 50 people), and the number with a moderate hearing disability could increase by between 150 and 200 people (5-7%).

In the longer term, the number with a serious hearing disability is not expected to increase any further from 2011/12 levels by 2021; an additional 100 people are expected to have a moderate hearing disability by this time.

No data is available to enable comparison of the numbers suggested by national prevalence rates with the 'real' situation in Herefordshire.

## **COMMUNICATION DISABILITY**

A person is classified as having a communication disability if they are unable to speak without difficulty and/or have problems communicating with other people; the disability is classed as serious if they have difficulty in communicating with even close relatives.

Prevalence of communication disability amongst 18-64 year-olds is much lower than any other type of disability. According to the ONS report<sup>44</sup>, this could be the result of under-counting due to non-response bias (people with a communication disability may be less likely to participate in a survey), or it could be that people with a communication disability are more likely to live in communal establishments.

Applying the rates to the estimated household population of Herefordshire in 2005 suggests that there are approximately 1,300 people with a communication disability; 300 of these have a serious communication disability (Table 22).

**Table 22: Estimated and projected number of household residents aged 18-64 with a communication disability, Herefordshire**

Severity	Past Estimate	Current Estimate	Short-term Projection				Long-term Projection	
	2001	2005	2011 (forecast pop'n)	2011 (projected pop'n)	2012 (projected pop'n)	% change in short-term*	2021 (projected pop'n)	% change in long-term
Moderate	900	950	1,000	1,000	1,000	5%	950	0%
Serious	300	300	300	300	300	0%	300	0%
<b>Total</b>	<b>1,200</b>	<b>1,250</b>	<b>1,300</b>	<b>1,300</b>	<b>1,300</b>	<b>4%</b>	<b>1,250</b>	<b>0%</b>

*Source: Herefordshire Council Research Team, using ONS estimates, projections and rates.*

*\* Percentage change is presented as change between 2005 estimate and the highest number of cases suggested by the rates according to either the 2011 forecast; 2011 or 2012 projection. Counts rounded to nearest 50; figures may not sum due to rounding.*

Assuming that these rates are suitable estimates for the future prevalence, a slight (5%) increase in the number of people with a moderate communication disability can be expected by 2012 (50 people), but then numbers can be expected to return to a similar level as 2005 by 2021. The numbers with a serious communication disability are not expected to change over either period.

No data is available to enable comparison of the numbers suggested by national prevalence rates with the 'real' situation in Herefordshire.

<sup>44</sup> Bajekal and Prescott (2003), p.19

**Summary: Estimating numbers with a physical disability (current & future)**

Numbers of household residents aged 18-64 in Herefordshire with disabilities were estimated (for 2005) and projected using national prevalence rates from 2000-01:

- Currently, an estimated 13,200 people have a disability of any type, 3,200 of whom have a 'serious' disability. The maximum expected increase would be 5%, in both 'serious' and 'moderate', by 2012; 7% in 'moderate' and 8% in 'serious' by 2021.
- There are an estimated 950 household residents with a 'serious' personal care disability, the type of disability most pertinent to social care service planning. This number is expected to increase by a maximum of 5% (50 people) by 2012. No further change is expected in the longer term. Therefore, if all who need such a service are receiving care, there can be expected to be no notable change in demand in either the short or long-term.
- The number of people with a 'moderate' personal care disability (4,600) is expected to increase by a maximum of 5% (250 people) in the short-term, and 8% (350) by 2021.
- Locomotor disabilities are the most common type of disability; the national survey found that almost all of the people with a personal care disability also had a locomotor disability.
- An estimated 9,200 people have a locomotor disability; 2,050 are classified as 'serious', a number which is expected to increase by a maximum 7% (150) in the short-term and 10% (200) by 2021.
- 1,450 household residents are estimated to have a sight disability, 250 of them 'serious'. This group is expected to remain at a similar level in the short-term, and increase by around 50 people by 2021 (no notable change in 'moderate' numbers).
- An estimated 3,000 people have a hearing disability, but only 100 of these are classified as 'serious'. The latter number would be expected to increase by 50 people by 2012, and remain at this level in 2021.
- It is estimated that there are 1,250 people with a communication disability, 300 of which are classified as 'serious'. The maximum expected change is an increase of 50 people with a 'moderate' communication disability by 2012, with no change in 'serious' in either the short or long-term.

## ETHNICITY OF ADULTS WITH PHYSICAL DISABILITIES

It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire with physical disabilities as the *Health Survey for England 2001: Disability* did not analyse the prevalence of disability by ethnic group.

Table 23: Ethnicity of Herefordshire service users over year 2006-07 compared to general population in 2004

Ethnic Origin	% of Physical Disability Service users	% of 'other vulnerable adults'	% of pop'n aged 18-64 in ethnic group, 2004
White: British	97.6%	95.7%	96.1%
White: Irish	-	-	0.6%
White: Other	0.8%	1.0%	1.5%
Mixed	-	0.7%	0.4%
Black or Black British	-	-	0.3%
Asian or Asian British	0.6%	0.4%	0.6%
Chinese	-	-	0.2%
Other Ethnic Group	0.2%	0.4%	0.2%
Not Stated	0.9%	1.8%	-
<b>Total non 'White British'</b>	<b>1.5%</b>	<b>2.5%</b>	<b>3.8%</b>
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

Source: *Physical Disability Service, Herefordshire Council & ONS experimental population estimates by ethnic group* © Crown copyright. Figures may not sum due to rounding.

The distribution of service users across minority ethnic groups is different to the population as a whole, and the percentage of 'other vulnerable people' of an ethnic origin other than 'White British' is slightly lower than that of the population as a whole in 2004 (although this latter proportion may well have increased further – see discussion on p.5). The proportion of Physical Disability service users in 2006-07 of an ethnic origin other than 'White British' is less than half of proportion in the total population of 18-64 year-olds in 2004.

As discussed in an earlier section (p.12), 'other vulnerable adults' are included because they fall under the remit of the Physical Disability service, although they may not necessarily have a physical disability; the way information is currently collected means that it is not possible to know. This group includes people who, for example, have received welfare benefits advice from the council's Joint Working Team or other advice from Herefordshire ABLE.

It should be noted that nothing is known about the general health of the recent inflow of migrant workers to Herefordshire, or of any temporary seasonal workers working in the county.

### **Summary: Ethnicity of Adults with Physical Disabilities**

- It is not possible to produce estimates of the number of people in different ethnic groups in Herefordshire with physical disabilities.
- The proportion of Physical Disability service users of an ethnic origin other than 'White British' in 2006/07 was less than half the proportion in the total population of 18-64 year-olds in 2004 (which itself may well have increased, given anecdotal changes in the ethnicity of the total population since the expansion of the European Union in May 2004).
- Nothing is known about the general health and social care needs of migrant and seasonal workers in Herefordshire.



## GEOGRAPHIC DISTRIBUTION OF ADULTS WITH PHYSICAL DISABILITIES

It is not possible to produce projections of the number of people in different parts of Herefordshire who will have a physical disability, as there are no population forecasts or projections below county level.

Herefordshire Council's Physical Disability Service has locality teams that cover specific parts of the county. People are allocated to a team based on the location of their GP. These teams' referrals and caseloads are the only information that can be presented about where people with physical disabilities are in the county.

Table 24: Herefordshire Physical Disability Service locality teams' referrals & caseloads, 2006-07

Team	Referrals 2006/2007	Caseload*	Average monthly assessments/ reviews**	% of county population in area (all ages, 2004)
City (Hereford, plus Credenhill, Clehonger, Lower Bullingham, Lugwardine, Withington & Moreton-on-Lugg)	56 (37%)	236 (47%)	47	38%
West (incl. Leominster, Kington, Golden Valley & Much Birch)	38 (25%)	124 (25%)	21	32%
East (incl. Bromyard, Ledbury & Ross)	57 (38%)	144 (29%)	23	31%
Total	151 (100%)	504 (100%)	-	100%

*Source: Physical Disability Service, Herefordshire Council*

\* Open cases held by Social Services teams. (Generally cases are held open where active work (e.g. an assessment) is taking place, or a service is being provided.)

\*\* Average number of assessments, re-assessments or reviews per month during 2006/07

A comparison with the total population (of all ages) of the areas shows that the West team had fewer referrals than the population would suggest compared to the other areas, and the East team had more. The City team had almost half of the total caseload. However, this comparison takes no account of age structures or the numbers of patients registered with each GP, and how this relates to resident population.

Further work would be required to determine whether this represents the distribution of people with physical disabilities across the county, and whether current services are provided equitably regardless of location.

Work has been done in the past to map the locations of people receiving care in their homes, but this included people of all ages, and the vast majority were over 65.

### **Summary: Geographic Distribution of Adults with Physical Disabilities**

- It is not possible to produce projections of the number of people in different parts of Herefordshire who will have a physical disability.
- Further work would be required to determine the distribution of adults with physical disabilities across Herefordshire, and if current services are provided equitably regardless of location.

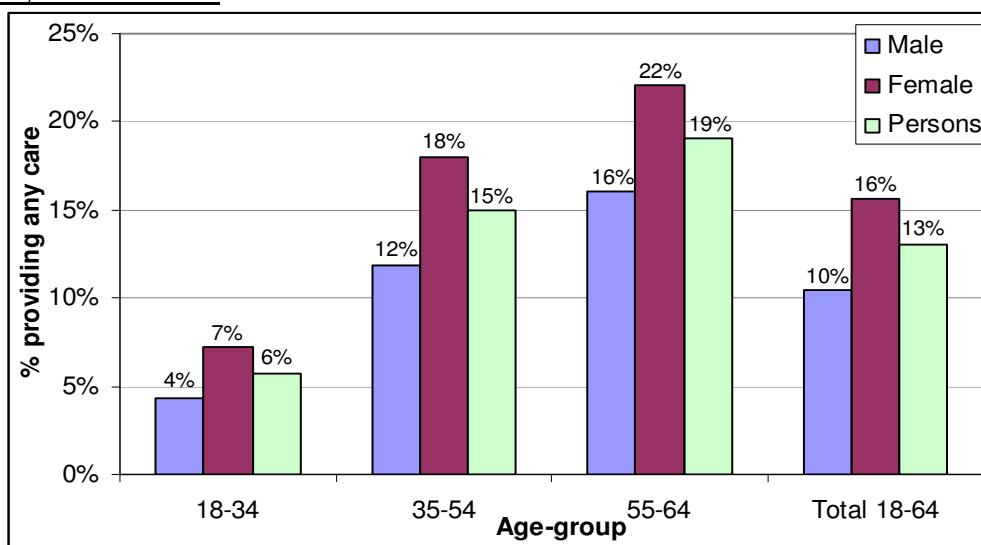
## CARERS

### NUMBERS OF CARERS

#### 2001 Census

According to the 2001 Census, 13% of 18-64 year-old residents of households in Herefordshire provide at least 1 hour of unpaid care<sup>45</sup> a week: a total of 13,373 people. However, the gender proportions aren't equal: only 10% of men (5,333 men) compared to 16% of women (8,040 women). Figure 25 illustrates that this disparity is evident across all ages, and also how the proportion providing unpaid care increases with age. This pattern is identical to that across England and Wales as a whole, although each of the Herefordshire figures is one percentage point below the national.

Figure 25: Proportion of household population providing at least one hour of unpaid care per week, Herefordshire



Source: 2001 Census, Table S025 © Crown copyright

- Assuming that prevalence of caring by age and gender has remained consistent since 2001, it could be estimated that 14,100 people aged 18-64 were providing at least one hour of unpaid care per week in 2005, with 60% of them female. Of these, 3,600 would be expected to be providing care for 20 hours or more per week (65% female).

However, it is also likely that snap-shot estimates of the number of carers at a point in time, like the Census provides, are an underestimate of the number of carers over time. Nationally, more than 40% of carers start or stop caring over the course of a year, and less than two-thirds of the actual number of people who provide care over a year are captured at one point within that time.<sup>46</sup>

#### Carer's Allowance Claimants

The only other information regarding carers in Herefordshire are numbers of people claiming Carer's Allowance. This is likely to be a very small subset of all carers as it is only available to people not in employment or full-time education who care for a severely disabled person<sup>47</sup> for at least 35 hours a week. Nevertheless, 1,370 people aged 18-64

<sup>45</sup> Any unpaid help; looking after or supporting family members; friends; neighbours or others because of long-term physical or mental ill-health or disability or problems related to old age.

<sup>46</sup> Hirst, M (2005) *Estimating the prevalence of unpaid adult care over time*; Research Policy and Planning vol. 23, no. 1.

<sup>47</sup> I.e. a person in receipt of the medium or higher level of the care component of Disability Living Allowance, Attendance Allowance or a Constant Attendance Allowance at the maximum rate under the War Pensions or Industrial Injuries Scheme (DWP).

were entitled<sup>48</sup> to Carer's Allowance in August 2006 – a similar number to the previous two years (see Table 26). The number entitled in 2005 represents 1.3% of the population aged 18-64; the proportion entitled increases slightly with age, from 0.7% of 18-34 year-olds to 1.9% of 55-64 year-olds (in 2005).

Table 26: Numbers entitled<sup>48</sup> to Carer's Allowance in Herefordshire, by age.

Year (August snapshot )	18-34	35-54	55-64	18-64
2006	210	680	480	1,370
2005	220	650	470	1,340
2004	210	670	450	1,330
2003	220	650	380	1,250

Source: *Work and Pensions Longitudinal Study (WPLS)*, Department for Works and Pensions.

### **Carers' Assessments**

Herefordshire Council carries out carers' assessments for people who are providing care; there is the facility to record information about these people and the care they are providing, but there are known to be significant gaps in the data.

### **THE CARED FOR**

The Census didn't ask for whom care is provided, so nothing can be deduced about people who *require* care from this source. However, a national survey of adults living in private households<sup>49</sup> (2000) identified carers and asked for more detail about their situation. 62% of carers cared for someone with only a 'physical disability' (as defined by the respondent) and a further 18% were looking after someone with both a physical and mental disability. It is not possible to estimate numbers of people aged 18-64 being cared for in each of these categories, as there is no information regarding the ages of people being cared for, although it would seem reasonable to expect that the majority of people being cared for have a physical disability.

### **CARERS' HEALTH**

National analysis of the Census<sup>50</sup> has shown that carers are more likely to be in 'not good' health and/or have a limiting long-term illness themselves than non-carers.

- In Herefordshire, 14% of 18-64 year-olds who provide 20+ hours of care per week are in 'not good' health, compared with 7% of both those providing 1 to 19 hours and those providing no care. The difference is particularly marked in males of all ages, as illustrated by Figure 27.

Furthermore, people who provide care over a long period are at particular risk of poor health, and carers' health is more likely to deteriorate over time than that of non-carers – with many of the detrimental changes attributable to the caring role.<sup>51</sup>

However, the risks to carers' health are more likely to be related to mental health than physical health: in a survey of carers' mental health<sup>52</sup> (2001), ONS found that only 8% said their caring responsibilities had a direct impact on their physical health.

<sup>48</sup> 'entitled' includes some people who are entitled to receive Carer's Allowance, but do not because they are receipt of another benefit which exceeds their weekly rate; it does not necessarily include everyone in the population who is eligible to claim.

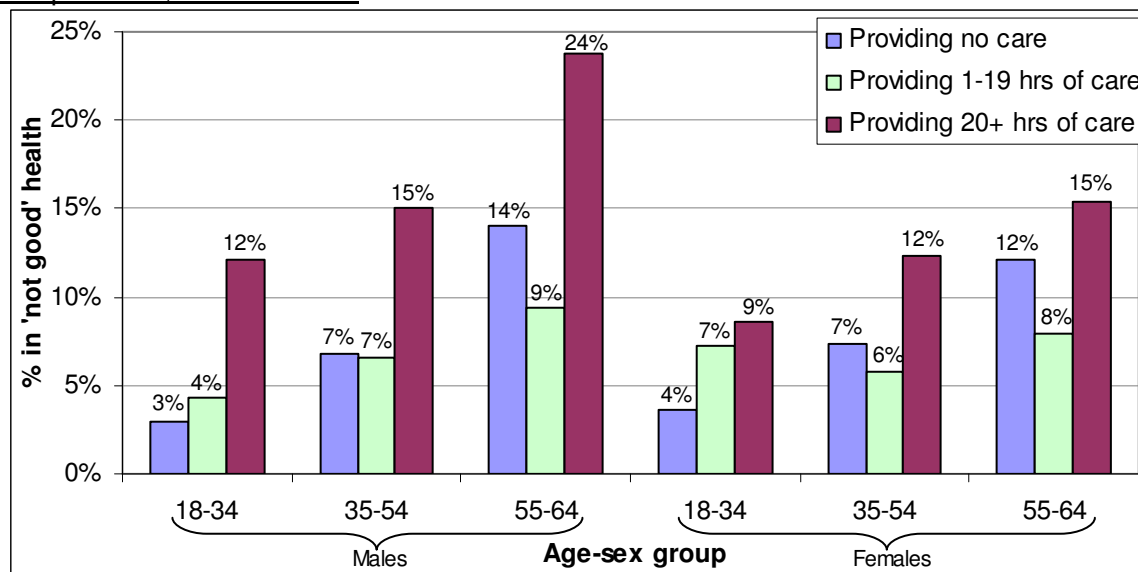
<sup>49</sup> Maher, J and Green, H (ONS) (2002) *Carers 2000*. London: The Stationery Office

<sup>50</sup> *Facts about carers* (2005), Carers' UK: [www.carersuk.org](http://www.carersuk.org)

<sup>51</sup> Hirst, M (2004) *Health inequalities and informal care*; quoted by Carers' UK in *Facts about carers*

<sup>52</sup> Singleton et al (2002) *Mental Health of Carers*. London: The Stationery Office

**Figure 27: Proportion of household population in 'not good' health by age, sex & amount of care provided, Herefordshire**



Source: 2001 Census, Table S025 © Crown copyright

- Assuming that people aged 18-64 care for the same 'type' of people as all people aged 16 and over; the caring situation in Herefordshire in 2005 was the same as in Britain as a whole in 2000; and prevalence of caring by age and sex has not changed locally since 2001, it could be estimated that around 8,800 adults aged 18-64 in Herefordshire care for someone with a 'physical disability' (as defined by the respondent). An estimated further 2,500 care for someone with both a physical and mental disability.

#### Summary: Carers

- Assuming that the prevalence of caring in Herefordshire is as it was at the 2001 Census, 14,100 people aged 18-64 in Herefordshire are estimated to have been providing at least one hour of unpaid care a week in 2005, with 3,600 providing care for 20 hours or more per week.
- At the same time, 1.3% of 18-64 year-olds in the county (1,340 people) were entitled to Carers' Allowance, i.e. were not in employment or full-time education and were caring for a severely disabled person for at least 35 hours a week.
- Carers are more likely to be in 'not good' health than non-carers, and the disparity increases with the amount of time spent caring per week.
- People who provide care over a long period of time are particularly at risk of poor health. Carers' health is also more likely to deteriorate over time than that of non-carers, with many of the detrimental changes attributable to the caring role. However, these risks are more likely to be in relation to carers' mental health; in an ONS survey only 8% of carers reported that caring responsibilities had a direct impact on their physical health.

## ABILITY TO PAY

### EARNINGS

The only information on earnings is for the total population of the county as a whole; the only available relevant breakdown is by gender.

- In 2006, average (median) gross weekly earnings for full-time employees who work in Herefordshire were £390.60, compared to £415.50 for the West Midlands region and £453.30 for England.<sup>53</sup> Whilst Herefordshire's median earnings appear lower than regionally *and* nationally, the difference with the region is not statistically significant.
- Herefordshire's lower quartile earnings are also significantly lower than England's: 25% of people who work in the county earned less than £297.00 per week, whereas the equivalent national figure is £320.30.
- The top 25% of earners in Herefordshire earned more than £551.20. The equivalent figure for England as a whole was £642.0, but this is not significantly higher (due to the sample size).
- Herefordshire has one of the largest gender pay gaps of neighbouring English authorities, and of all authorities in the West Midlands region: on average, full-time female workers earn only 72% of the amount earned by their male counterparts. The national equivalent figure is 79%.

### INCOME

There are no data on levels of *income*<sup>54</sup> in Herefordshire, but the Indices of Deprivation 2004<sup>55</sup> included an 'income' domain based on the extent to which households in an area were dependent on income related benefits. Overall, Herefordshire is more 'income deprived' than two-thirds of English local authorities.<sup>56</sup>

In addition, income deprivation 'hotspots' exist within the county: ten areas<sup>57</sup> in Herefordshire were in the 25% most deprived areas in England. Six of the ten areas of the 'South Wye' part of Hereford city are amongst these; the remainder are north of the river in Hereford ('College Estate' and 'Courtyard') and in Leominster ('Ridgemoor') and Bromyard ('Central').

### EMPLOYMENT AND FINANCIAL CHARACTERISTICS OF PEOPLE WITH A DISABILITY

The Family Resources Survey<sup>58</sup> defines 'disability, including limiting long-standing illness' as: "people with a long standing illness, disability or infirmity, and who have a significant difficulty with day-to-day activities. Everyone in this group would meet the definition of disability in the Disability Discrimination Act (DDA); however these estimates do not reflect the total number of people covered by the DDA as the FRS does not fully collect this information." It should be noted that this definition includes people with disabilities that are not physical.

<sup>53</sup> 2006 Annual Survey of Hours & Earnings, Office for National Statistics (ONS)

<sup>54</sup> Earnings plus unearned income from investments, etc.

<sup>55</sup> Office for the Deputy Prime Minister (ODPM), now Department for Communities & Local Government (DCLG). Based on data from 2001.

<sup>56</sup> Herefordshire ranked 114<sup>th</sup> out of 354 English local authorities in terms of income deprivation.

<sup>57</sup> Lower Super Output Areas (LSOAs): statistical geographies of about 1,500 people that nest into wards. They were determined by ONS, but names were given by HC Research Team.

<sup>58</sup> Family Resources Survey, Great Britain: 2005/06: [www.dwp.gov.uk/asd/frs](http://www.dwp.gov.uk/asd/frs)

The 2005/06 survey found that, when considering people *of all ages* living in households, those who said they had a disability were less likely to be employed or self-employed than in the sample as a whole: 27% of disabled males and 21% of disabled females were employed / self-employed compared to 66% of all males and 54% of all females. It is not appropriate to apply these percentages to estimates of Herefordshire's disabled population aged 18-64 as no account has been taken of age. Disability is more likely in the over 65s, whilst this age-group are also less likely to be in employment than younger people. If age-specific rates were considered the differences in these percentages may not be as great, but it is not possible to do this.

The increased prevalence of disability at older ages may well be linked to the finding from the same survey that the main source of household income was a pension for a greater proportion of disabled people than in the sample as a whole (36% of disabled males and 45% of disabled females compared to 15% and 19% respectively, overall).

A greater proportion of disabled people were reliant on social security benefits as their main source of household income than the sample as a whole, particularly males: 25% of disabled males compared to 12% of all males, and 18% of disabled females compared to 13% of all females. Again though, it is not possible to apply these percentages to the estimated 18-64 year-old disabled population in Herefordshire.

The *Health Survey for England: Disability* ranked the 'equivalised household income'<sup>59</sup> of all survey respondents, and found that over a third (34%) of people aged 16-64 with any disability were in the lowest income quintile (ie the 20% of households with the lowest equivalised income), with only 8% in the highest quintile. The comparative figures for those without a disability were 13% and 26%, respectively.

**Summary: Ability to Pay**

- Average earnings in Herefordshire are significantly below those in England as a whole, but there is no information on *incomes* locally.
- There is no information about the financial situation of adults with disabilities in Herefordshire, but national evidence suggests that it is reasonable to assume that people with a disability are more likely to have a low income than those without. This will have implications for their ability to pay for the costs of services

<sup>59</sup> a measure that adjusts the total household income to account for the number of people in the household

## HOUSING

It is recognised that Herefordshire needs to develop a range of housing options for younger adults and supported housing schemes are being explored in partnership with Housing Association, Strategic Housing and Care Providers.

### HOME POINT REGISTER

As at November 2006, 5,896 people aged 18-64 were registered with Home Point, the agency which implements choice-based lettings in Herefordshire. Of these, 339 (5.7%), said on their application form that they were 'registered disabled', 42 (0.7%) said they were 'registered blind', and 37 (0.6%) said they were deaf or had partial hearing difficulties.

Responses to these questions are subjective as there is no clear definition of 'registered disabled', and some people who are 'registered blind' may not consider themselves to be disabled. This is illustrated by the fact that the only person who was blind and had hearing difficulties said that they were *not* 'registered disabled'. In fact, only 36% of those who were 'registered blind' (15 people) also said that they were 'registered disabled'. The proportion for people with hearing difficulties was higher: 43% (16 people) were also 'registered disabled'.

- To clarify these figures: in total, 386 people aged 18-64 (6.5%) stated that they were either 'registered disabled', 'registered blind' or were deaf or had partial hearing difficulties on their Home Point application form.

It is worth noting that at least seven applications from the 42 people who were 'registered blind' were linked to the Royal National College for the Blind, either because of courses coming to an end and wanting to remain in the area or relationships to current students at the college.

### TENURE OF PEOPLE WITH DISABILITY / LIMITING LONG-TERM ILLNESS

According to the *Health Survey for England 2001*, the majority of people (aged 16 and over), both with and without a disability, were owner-occupiers, but the proportion was significantly higher for those without a disability. Approximately 25% of people aged under 65 with a disability were living in social housing, compared to 10% of those without a disability.<sup>60</sup>

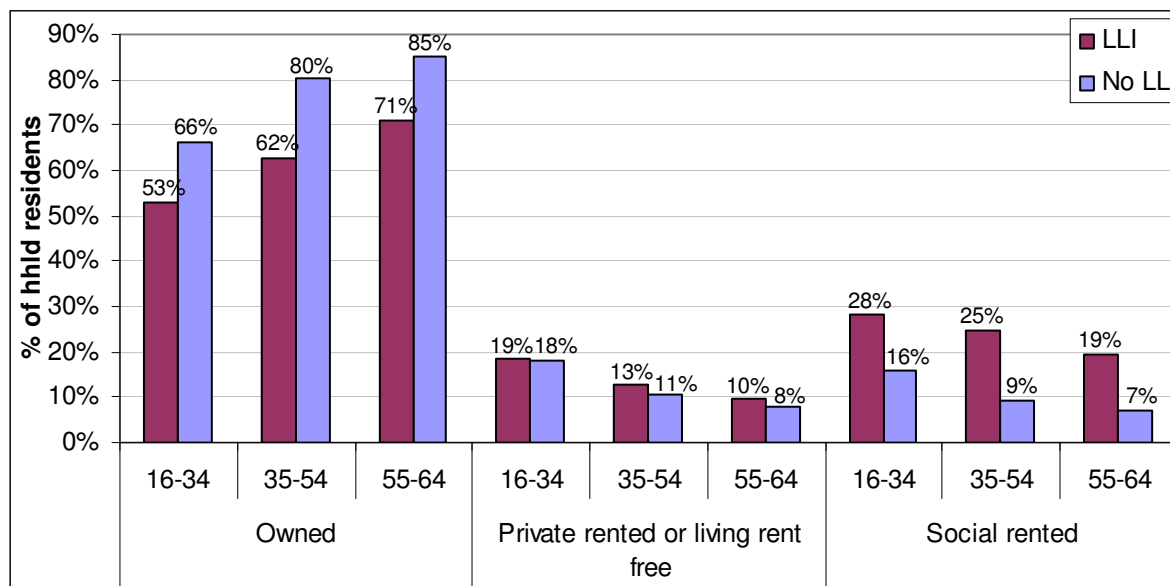
The likelihood of living in either socially or privately rented accommodation decreases with age, but even taking this into account, household residents aged 18-64 in Herefordshire with a limiting long-term illness (LLI) are considerably more likely to live in socially rented accommodation than those without an LLI – as Figure 28 illustrates. However, it should still be noted that, despite this, across all age-groups the majority of people with an LLI live in owner-occupied accommodation – as was the case with people with disabilities nationally.

- To put this in a different way, 25% of Herefordshire residents aged 18-64 living in socially rented accommodation have an LLI, in comparison with just 11% of those living in owner occupied accommodation and 13% in privately rented. These figures are remarkably similar to the proportions in the *Health Survey for England 2001*.

Therefore, although little is known about the housing situation of adults with disabilities in Herefordshire, it seems reasonable to assume that people with physical disabilities are more likely to be living in socially rented accommodation than people without.

<sup>60</sup> Bajekal and Prescott (2003)

Figure 28: Tenure of household residents, by age and presence of limiting long-term illness (LLI), Herefordshire



Source: 2001 Census, table S017 © Crown copyright

**Summary: Housing**

- Although little is known about the housing situation of adults with disabilities in Herefordshire, national and local information suggests that it seems reasonable to assume that people with physical disabilities are more likely to be living in socially rented accommodation than people without.
- In November 2006, 6.5% of 18-64 year-olds registered with Home Point were 'registered disabled', 'registered blind', were deaf or had partial hearing difficulties.



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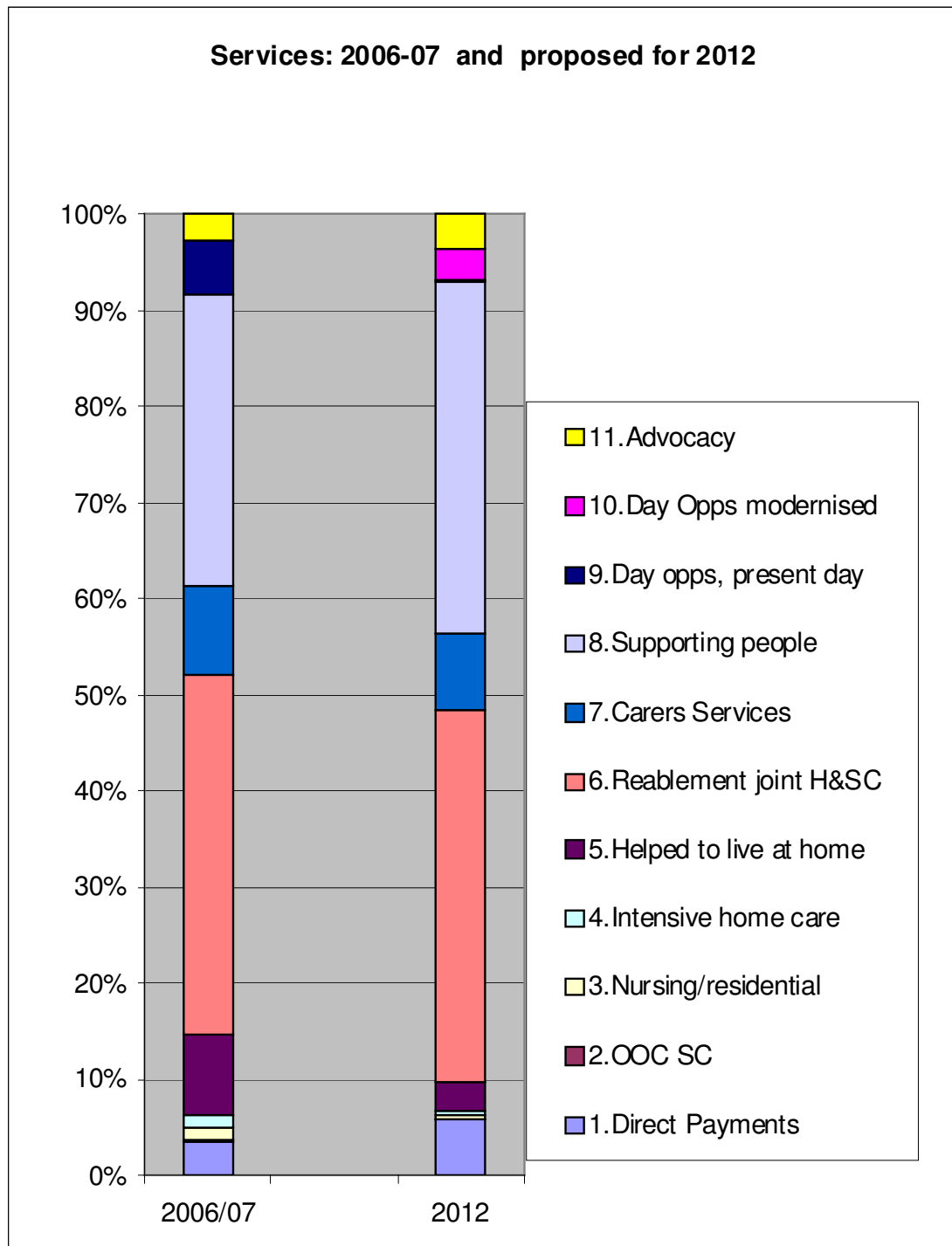
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## Current and future services for adults with physical disabilities

### Overview

The bar chart below compares the current pattern and levels of services for adults with physical disabilities with the proposed future models of service by 2012.



***Details of proposed service levels for proposed higher performing services***

**Direct payments**

Increasing the number of people receiving direct payments or personalised budgets by 28% a year – from 88 currently to 236 in 2011-12. This would match the proportionate level achieved by the highest performing comparator area.

**N.B.** This number includes those with direct payments or personalised budgets receiving intensive home care and those with less intensive needs who are helped to live at home. Only those **not** in receipt of direct payments or personalised budgets are included in the numbers in respect of intensive home care and help to live at home shown below.

**Out-of-county placements**

Through the development of specialist local services, the number of social care out-of-county placements should fall from the current 10 to 3 by March 2010.

**Nursing and residential care**

The comparator area achieving the lowest use of nursing and residential care secures 1.91 places per 10,000 population, compared with Herefordshire's 3.04. Community-based living options should eliminate the need for residential care, but the current level of nursing home placements will need to continue – resulting in an overall reduction from 32 places to 16.

**Intensive home care**

The number people receiving intensive home care packages not secured by means of direct payments or personalised budgets should fall from 34 to 18.

**Help to live at home**

The number of people receiving less intensive support to live at home not secured by means of direct payments or personalised budgets should fall from 216 to 124.

**Community-based reablement service**

All users should have access to a reablement programme. Taking into account the estimated 5% in need and the national target of a 5% reduction in hospital admissions, there should be an increase from 975 to 1,590 in the number of people assessed and receiving step down/step-up intermediate care.

### **Services for carers**

Based on national good practice and the increased number of assessments of users, services should be provided for 33% more carers – from 245 to 326.

### **Supporting People**

To emulate the best performance in comparator areas, meet cost-effectively in their own homes and communities the non-care needs of people with intensive care needs, and improve preventative capacity and low-level case management, the number of people supported by *Supporting People* funding should rise from 792 to 1,500.

### **Buildings-based day opportunities**

A much-reduced number of people, comprising some existing users with complex needs, should need buildings-based day opportunities – down from 144 to 11.

### **Community-based day opportunities**

Modern and flexible, community-based day opportunities, maximising the use of personalised budgets and invalidity benefit, should be provided for 141 people (there are none at present).

### **Advocacy**

To emulate performance in the high-performing authorities and meet the 5% estimated increase in need, double the number of people should receive personal advocacy - from 72 to 144.



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