

Cheltenham

Needs Analysis



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Thriving Economy and Workforce

The economy of an area is integral to the health and wellbeing of the local population. A thriving economy will provide a basis for the improvement in the quality of life of Cheltenham residents, while a declining economy and high levels of unemployment can increase levels of poverty and have a detrimental impact on the physical and mental health of some residents.

1. The economy of Cheltenham

1.1 Gross Value Added

The total output of the Cheltenham economy was approximately £2.97 billion in 2017, representing 18% of the value of output in Gloucestershire¹. This was less than Gloucester and Tewkesbury which contributed 22% and 21% of the value of output in Gloucestershire respectively.

Figure 1 shows the industrial sectors in terms of their size, growth and local concentration. The sectors contributing most to the district's GVA² are those represented by the largest bubbles. Those in the top-left quadrant are more concentrated in Cheltenham than in Gloucestershire as a whole, but crucially have experienced falling levels of GVA in recent years. The upper-right quadrant of the diagram shows sectors which are growing and in which Cheltenham has a structural advantage in terms of local concentration of GVA. Real estate activities and Human health and social work activities make the greatest contribution to Cheltenham's GVA. Finance and insurance activities, Manufacturing, Public administration and defence, Agriculture, mining and utilities and Transport and storage make less of a contribution to Cheltenham's total GVA than the county as a whole. This could be because these sectors are smaller in Cheltenham than elsewhere or they are less productive in Cheltenham than elsewhere. Over the last five years the output generated by Public administration and defence, Human health and social work activities and Arts, entertainment and recreation to Cheltenham's GVA has declined.

¹ Regional gross value added (balanced) local authority by NUTS 1 region: UKK South West, ONS

² GVA is used to measure the economic value of the goods and services produced in an area

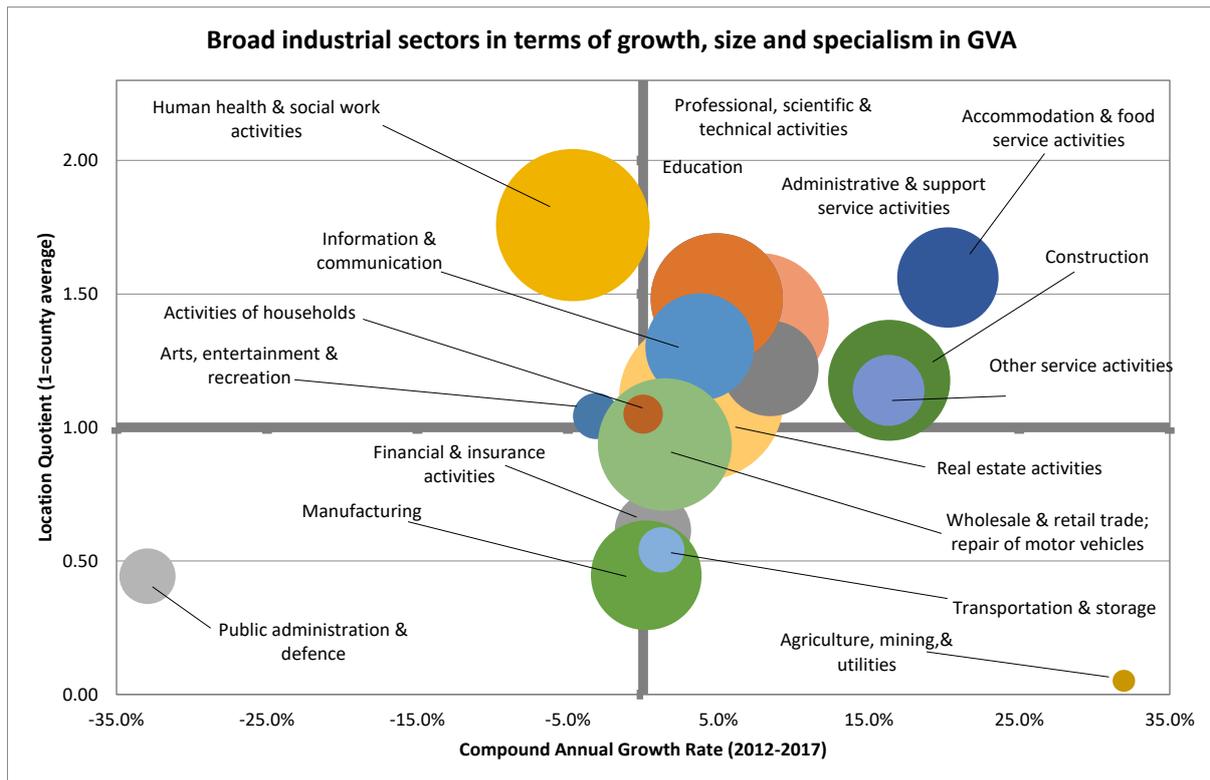


Figure 1: Broad industrial sectors in terms of growth, size and specialism in GVA³

When compared to other districts in the county, Cheltenham’s economy appears diverse, its output is not dominated by a single sector but instead there are several significant sectors that make fairly equal contributions. When compared to Gloucester and Tewkesbury which have higher overall levels of GVA there are some differences, Cheltenham has a higher proportion of GVA generated by Real estate and Human health and social work activities, conversely Finance and insurance activities are under-represented in Cheltenham when compared to Gloucester and Tewkesbury.

³ Regional gross value added (balanced) local authority by NUTS 1 region: UKK South West, ONS

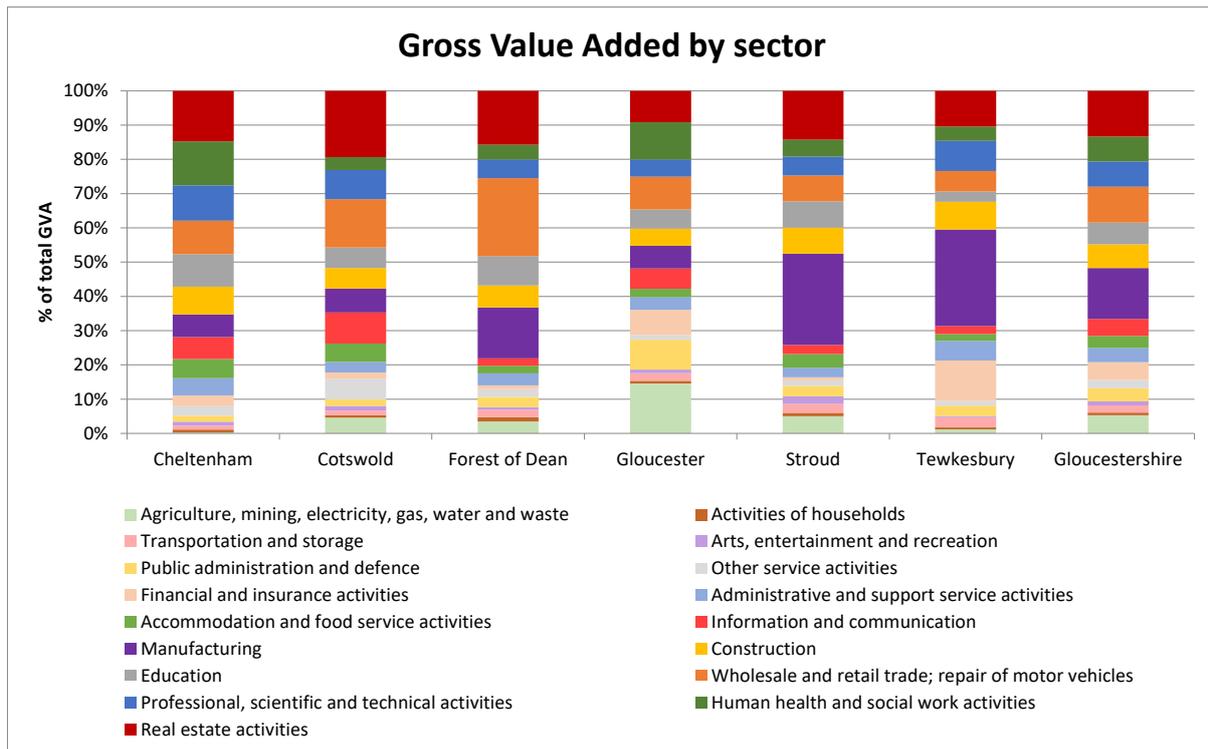


Figure 2: Gross Value Added by sector, 2017⁴

1.2 Jobs and workplace based employment

The total number of jobs in Cheltenham amounted to 75,000 in 2017^{5, 6}, this represented 22.2% of jobs in the county, higher than any other district. This clearly differs from the picture seen when looking at GVA and shows that although Cheltenham is the biggest employer in Gloucestershire, its economy is not as productive as other areas with a lower output per job.

Figure 3 shows the industrial sectors in terms of their size, growth and local concentration. The sectors contributing most to the district's employment are those represented by the largest bubbles. Those in the top-left quadrant are more concentrated in Cheltenham than in Gloucestershire a whole, but crucially have experienced falling levels of employment in recent years. The upper-right quadrant of the diagram shows sectors which are growing and in which Cheltenham has a structural advantage in terms of local concentration of employment. Wholesale and retail trade and Human health and social work activities make the greatest contribution to Cheltenham's employment. Agriculture, mining and utilities, Public administration and defence, Transportation and storage, Manufacturing and Construction make less of a contribution to Cheltenham's total employment than the county as a whole. Over the last two years employment in Public administration and defence,

⁴ *Ibid.*

⁵ This figure is a workplace measure and includes employees, self employed, government supported trainees and HM Forces.

⁶ Job Density, ONS

Transportation and Storage, Administrative and support service activities and Wholesale and Retail trade has declined. However it is worth noting that the apparent decline in employment in Public administration and defence may be due to changes in the way in which employment is recorded rather than an actual decline in the numbers employed.

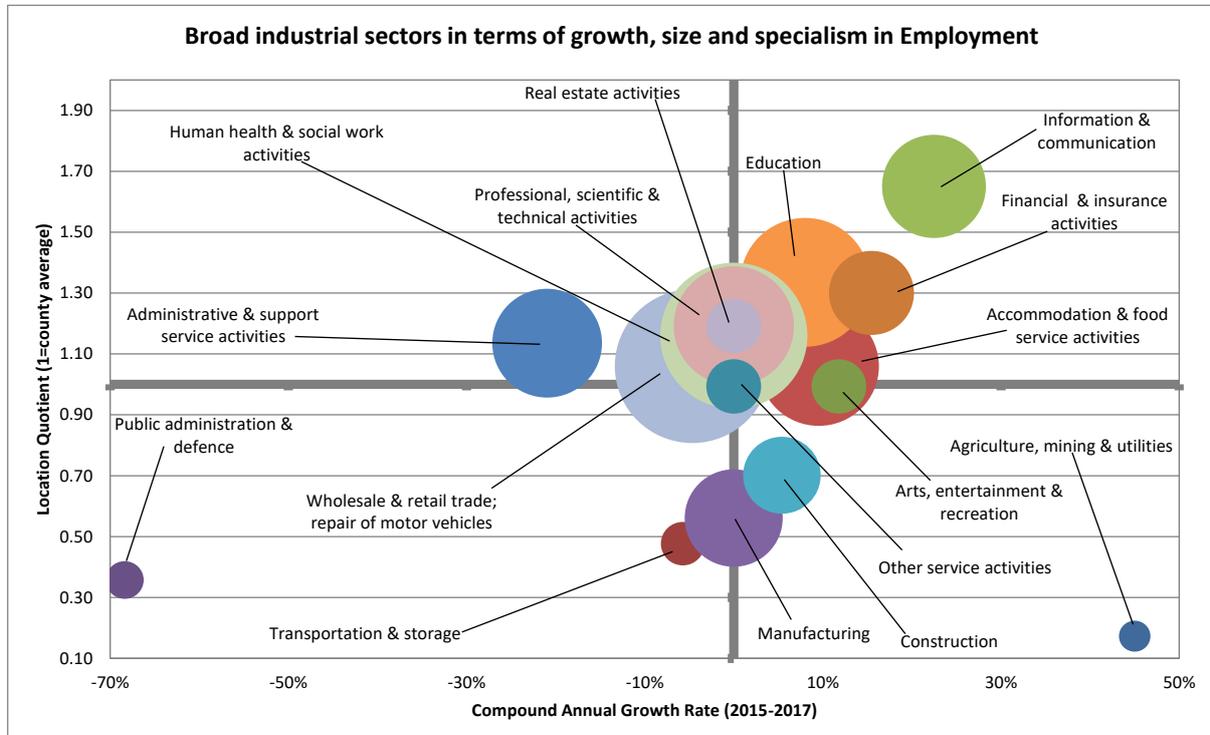


Figure 3: Broad industrial sectors in terms of growth, size and specialism in employment⁷

Cheltenham's employment structure is fairly similar to other districts, as shown in Figure 4. The most noticeable difference is in terms of Information and communication which accounts for a greater proportion of employment in Cheltenham than elsewhere. Interestingly the differences observed between Cheltenham, Gloucester and Tewkesbury in terms of GVA are not reflected in terms of employment. Cheltenham has a similar proportion of employment in Finance and insurance activities as Tewkesbury and Gloucester despite the sector accounting for a lower proportion of GVA, which could suggest the type of Finance and insurance jobs in Cheltenham are less productive than those in Gloucester and Tewkesbury. Conversely the Real estate sector accounts for a similar proportion of employment in Gloucester, Tewkesbury and Cheltenham but a much higher proportion of Cheltenham's GVA suggesting jobs in this sector may be more productive in Cheltenham than elsewhere in the county, this may be due to the higher property prices in Cheltenham.

⁷ Business Register and Employment Survey, ONS

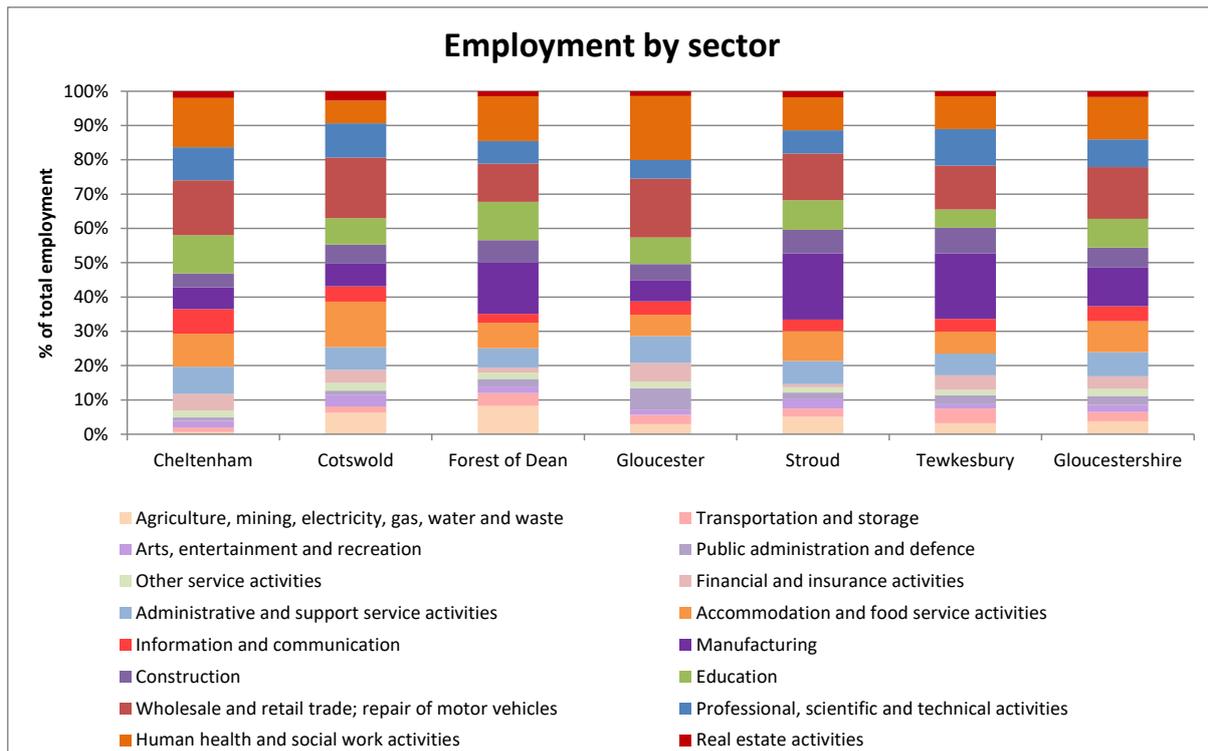


Figure 4: Employment by sector, 2017⁸

2. Cheltenham’s business base and entrepreneurial growth

A strong business base and entrepreneurial growth are said to be some of the necessary requisites for the maintenance of a healthy and competitive economy

2.1 Active enterprises

In 2017 there were 5,960 active enterprises⁹ in Cheltenham, representing 19.9% of enterprises within Gloucestershire¹⁰, higher than any other district except Stroud. This equates to 80.3 enterprises per 1,000 working age population, which was higher than the national average but lower than the county average. When compared to the other districts the rate of active enterprises was higher than Gloucester and the Forest of Dean, in line with Tewkesbury and lower than Cotswold and Stroud.

⁸ *Ibid.*

⁹ An enterprise is essentially a business. It is generally located at the main operating site or the head office. It differs from local units which includes individual branches that make up an enterprise.

¹⁰ Business Demography, ONS

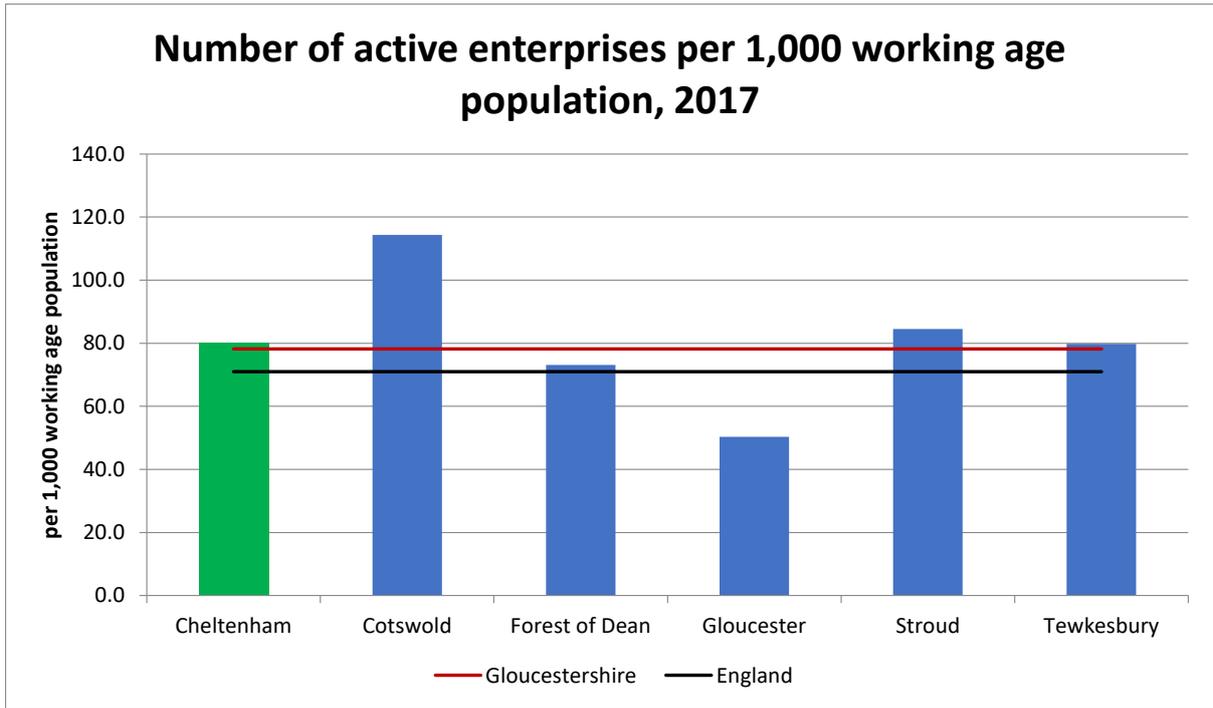


Figure 5: Number of active enterprises per 1,000 working age population, 2017¹¹

Over the last five years the number of enterprises in Cheltenham has increased by 14.9% from 5,185 in 2012 to 5,960 in 2017. Figure 6 shows the rate of growth in Cheltenham was greater than the county average, but below the rate for England.

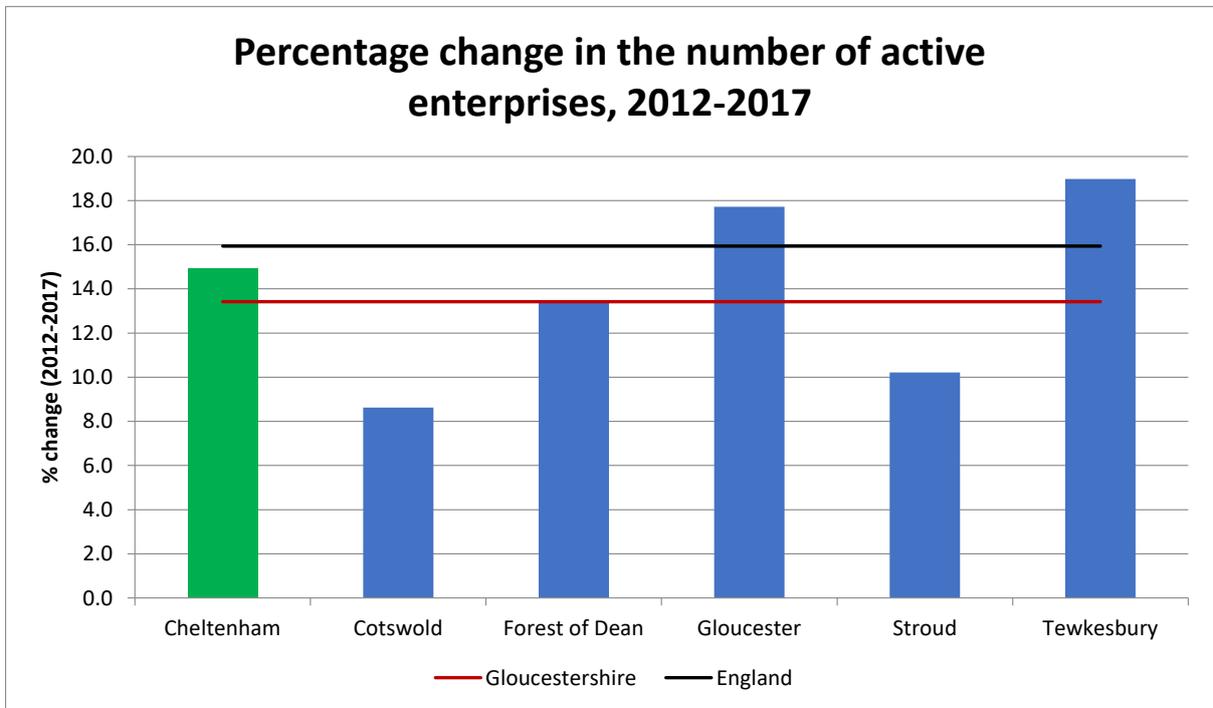


Figure 6: Percentage change in the number of active enterprises, 2012-2017¹²

¹¹ *Ibid.*

2.2 Business start-ups

Growth in business stock, is a result of the creation of new businesses and the death of existing businesses. The birth of new enterprises is often seen as an indication of the dynamism of an economy as enterprises are considered as drivers of job creation and economic growth. In 2017 there were 615 new businesses in Cheltenham, this represents 10.3% of total businesses. This was in line with the county average of 9.8% but lower than the national average of 13.2%¹³.

The number of new businesses per 1,000 working age population is a good measure of entrepreneurship, in Cheltenham there were 8.3 new businesses per 1,000 working age population, this was higher than the county average and all districts except Cotswold, but lower than the national average. This suggests entrepreneurialism may be stronger in Cheltenham than elsewhere in the county.

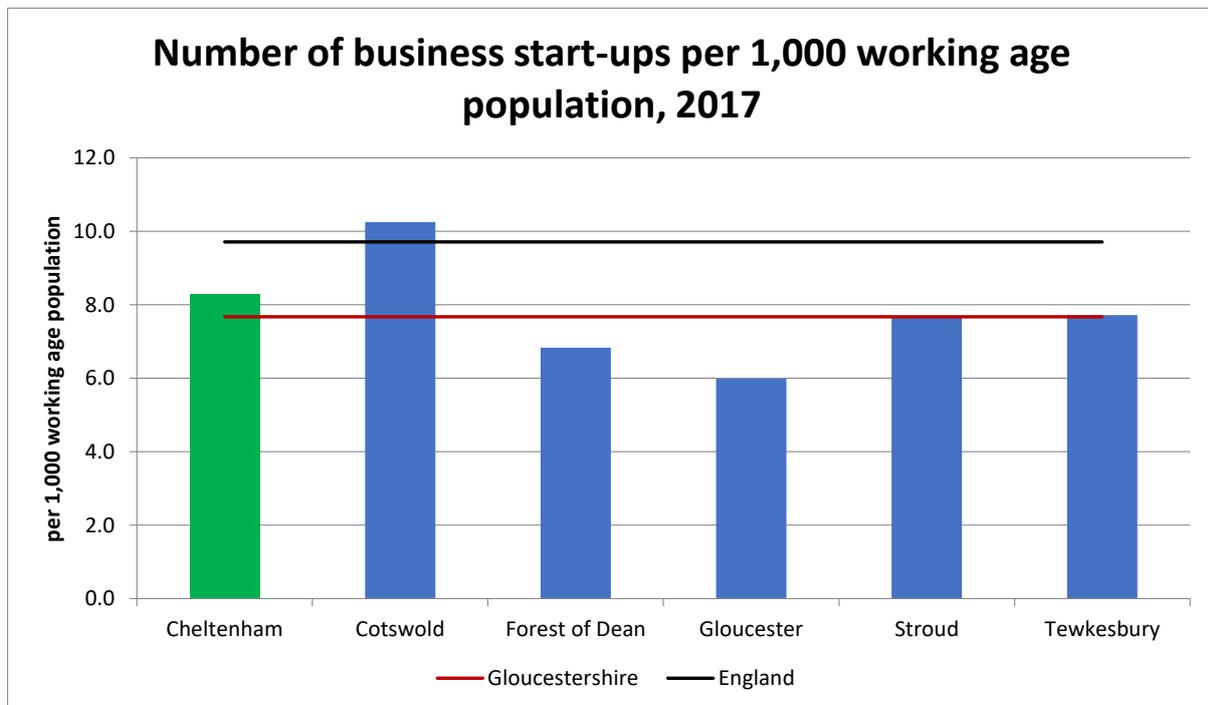


Figure 7: Number of business start-ups per 1,000 working age population, 2017¹⁴

The number of start ups per 1,000 working age population has declined since 2013, this reflects a trend observed across the county and in most of the districts. Nationally the number of start-ups increased between 2012 and 2016, but has fallen since 2016. The Office for National Statistics suggests potential uncertainty

¹² *Ibid.*

¹³ *Ibid.*

¹⁴ *Ibid.*

related to the UK's future relationship with the UK could have been the cause for this decline in business births¹⁵.

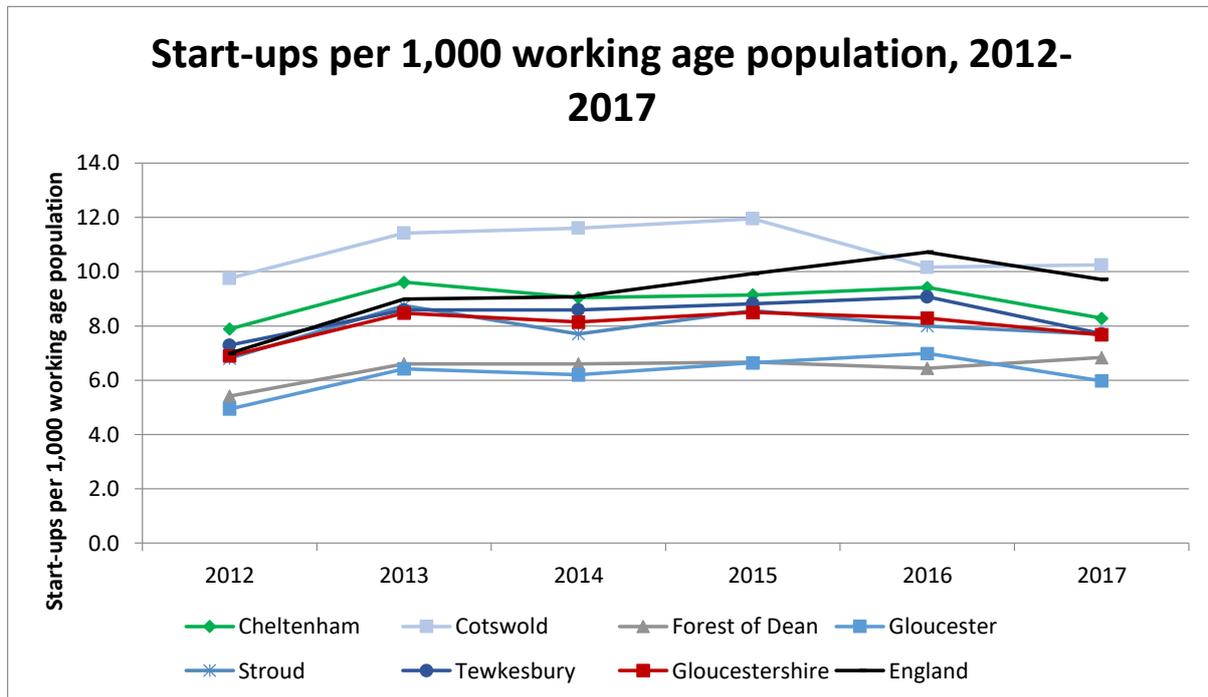


Figure 8: Number of business start-ups per 1,000 working age population 2012-2017

2.3 Business deaths

Deaths of enterprises are generally caused by an enterprises lack of economic success or structural problems within the economy that make it impossible for the business to survive. In 2017 there were 735 business deaths in Cheltenham, this represents 12.3% of total businesses. This was higher than the county average of 9.8% and in line with the national average of 12.4%¹⁶. Figure 9 shows the business death rate in Cheltenham has been consistently high when compared to other areas. Between 2016 and 2017 the business death rate increased in all geographies, the greatest increase was nationally which saw the England rate come into line with the Cheltenham rate. The ONS has suggested this increase may have been due to the depreciation of sterling following the EU referendum result, feeding into higher raw materials and import prices¹⁷.

¹⁵ Business Demography, ONS

¹⁶ *Ibid.*

¹⁷ *Ibid.*

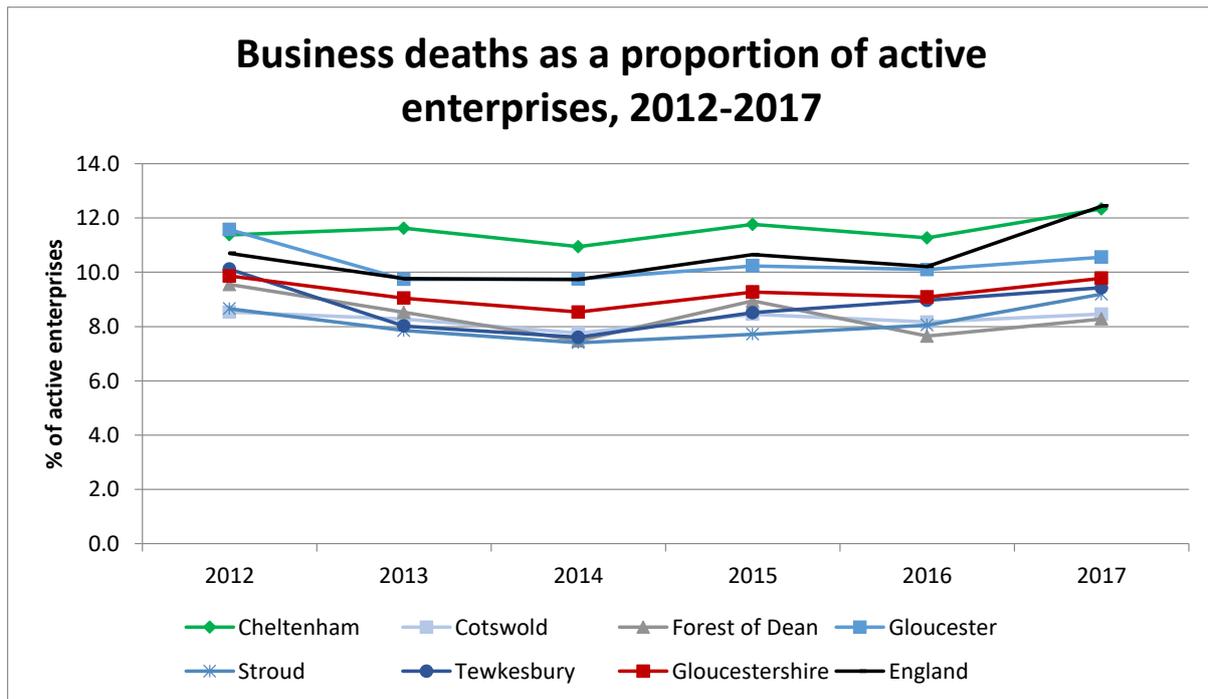


Figure 9: Business deaths as a proportion of active enterprises, 2012-2017¹⁸

2.4 Survival rates

In 2017 91.5% of businesses in Cheltenham had survived for one year, this was in line with the national average of 91.6% and the county average of 91.0%¹⁹. Given the recent increase in business deaths it is unsurprising the 1 year survival rate of businesses has fallen in recent years, the greatest fall was of businesses born in 2015 which was particularly pronounced in Cheltenham. The survival rates of businesses born in 2016 was slightly higher than the previous year but still much lower than for businesses born in 2013 and 2014.

¹⁸ *Ibid.*

¹⁹ *Ibid.*

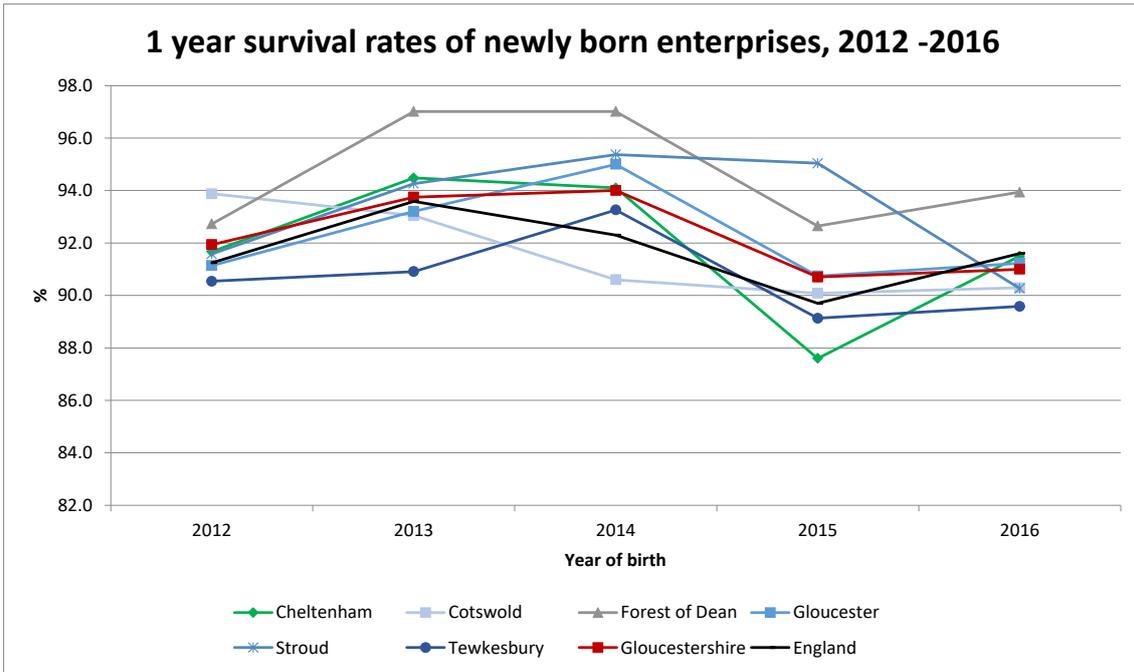


Figure 10: 1 year survival rates of newly born enterprises²⁰

Figure 11 shows 64.7% of businesses born in 2014 survived for three years, this was higher than the national average of 61.4% and inline with the county average of 65.0%. Cheltenham has seen an improvement in its three year survival rate, only 60% of businesses born in 2012 survived three years which was lower than the county average and in line with the national average.

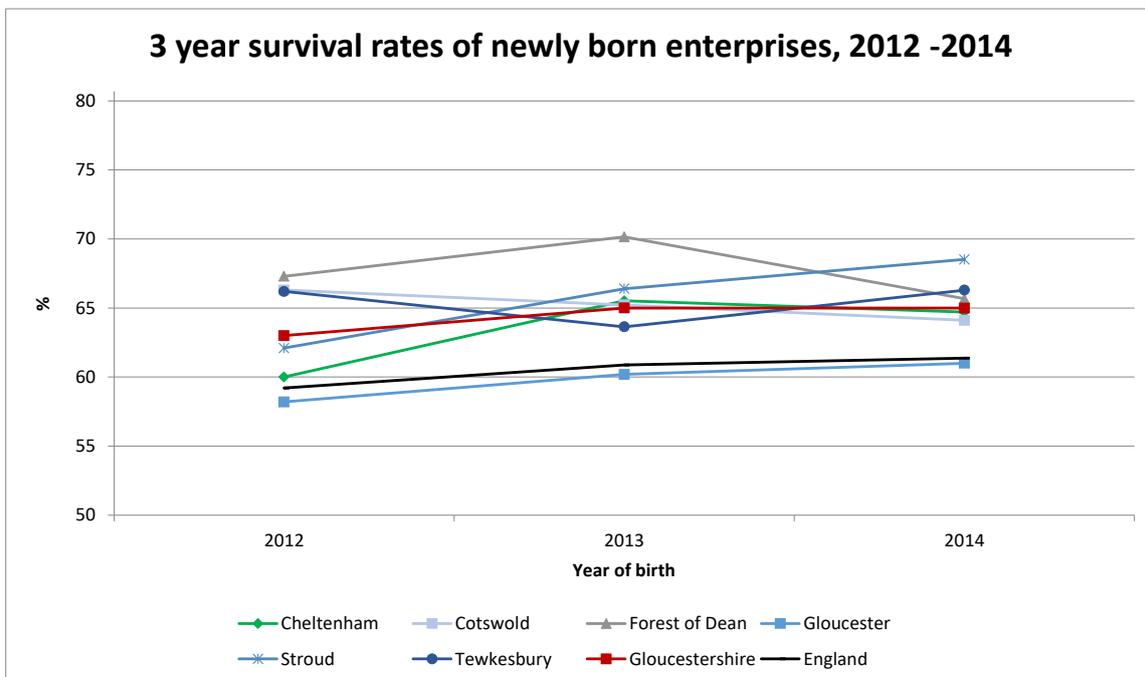


Figure 11: 3 year survival rates of newly born enterprises, 2012-2014²¹

²⁰ Ibid.

The proportion of businesses born in 2015 surviving for 5 years stood at 45.8% in Cheltenham, this was higher than the national average but lower than the county average. When compared to the other districts Cheltenham has a higher survival rate than Gloucester but a lower rate than the other districts.

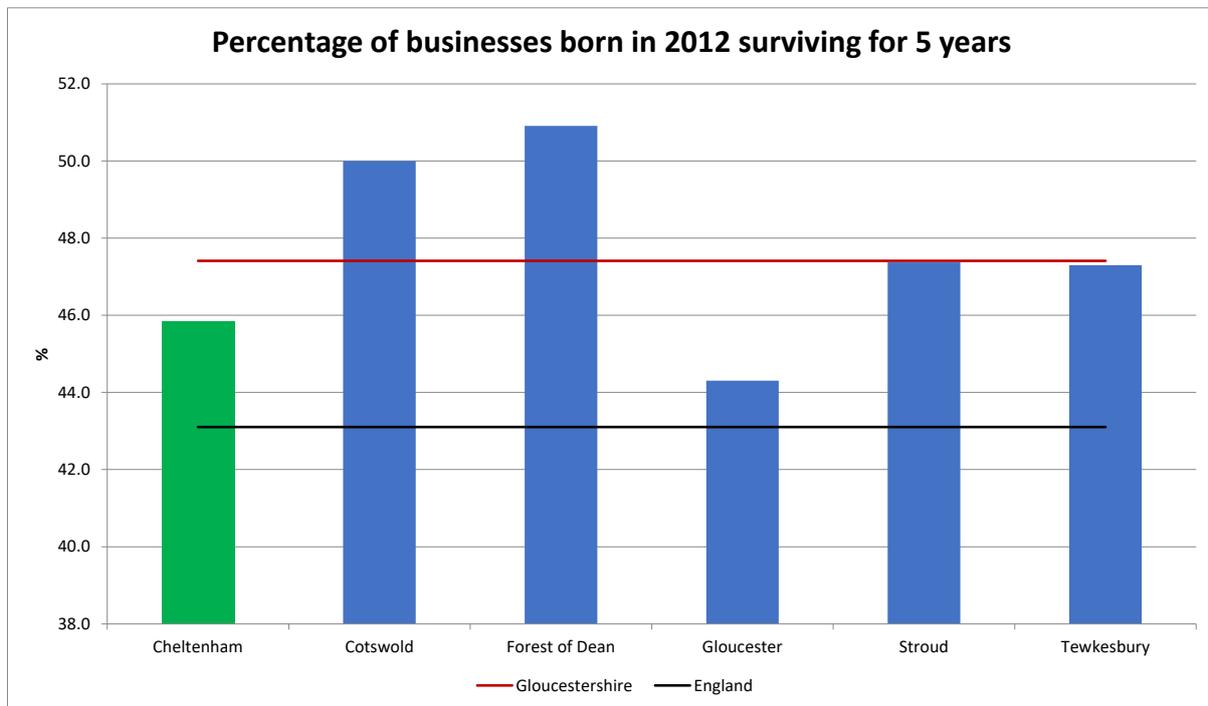


Figure 12: Percentage of businesses born in 2012 surviving for 5 years²²

2.5 Business size and turnover

Micro and small enterprises account for a large proportion of total enterprises, Figure 13 shows enterprises employing 0-4 employees account for almost 89% of total businesses in Cheltenham, which was in line with the county and national average. Conversely large enterprises (those that employ more than 250 people) account for 0.4% of total businesses which represents 20 businesses. Gloucester and Tewkesbury have a higher proportion of medium and large enterprises than Cheltenham, which is unsurprising given that these districts make a greater contribution to Gloucestershire's GVA than Cheltenham.

²¹ *Ibid.*

²² *Ibid.*

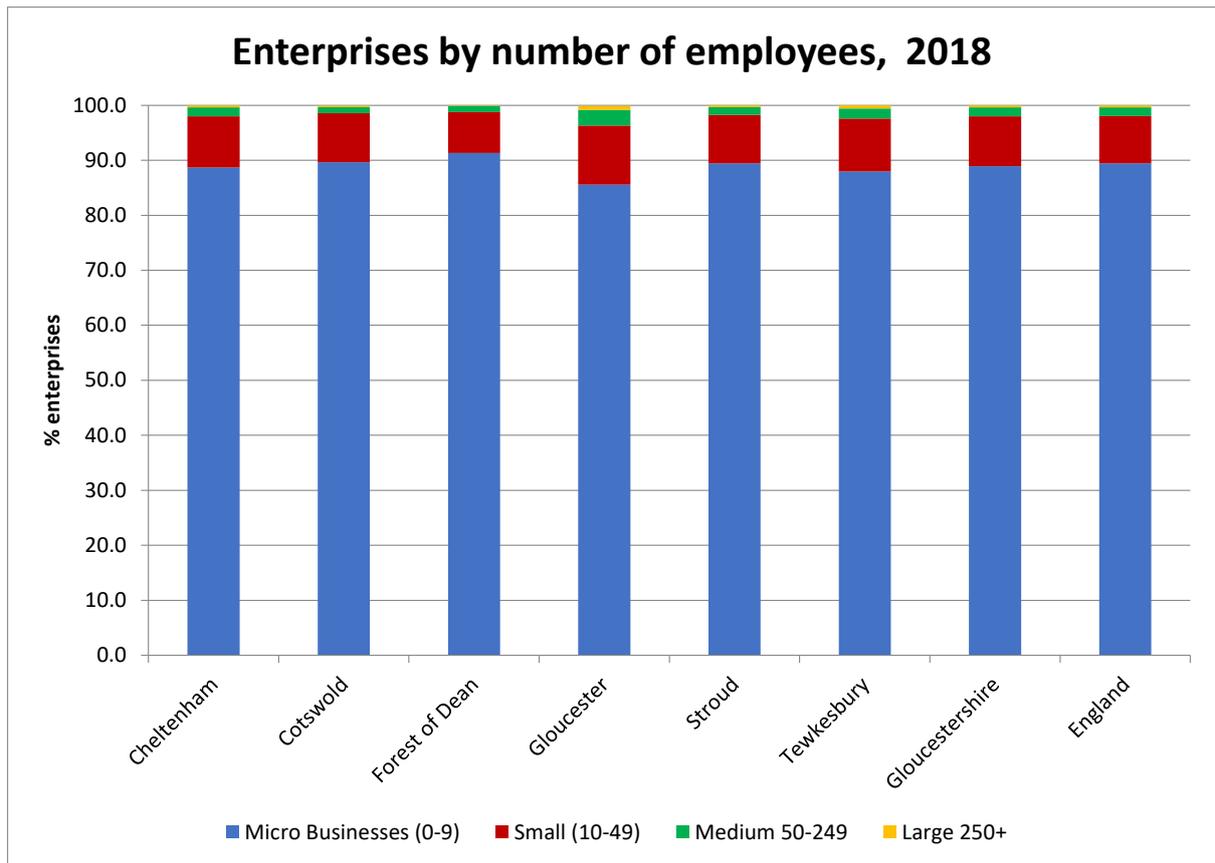


Figure 13: Enterprises by number of employees, 2018²³

Figure 14 shows the breakdown of businesses by turnover. The majority (72.2%) of businesses in Cheltenham have a turnover of less than £200,000 which is in line with the county and national average. Gloucester and Tewkesbury have a higher proportion of enterprises with a turnover of over £200,000, which is unsurprising given that these districts make a greater contribution to Gloucestershire’s GVA than Cheltenham and have a higher proportion of large businesses.

²³ UK Business Counts, ONS

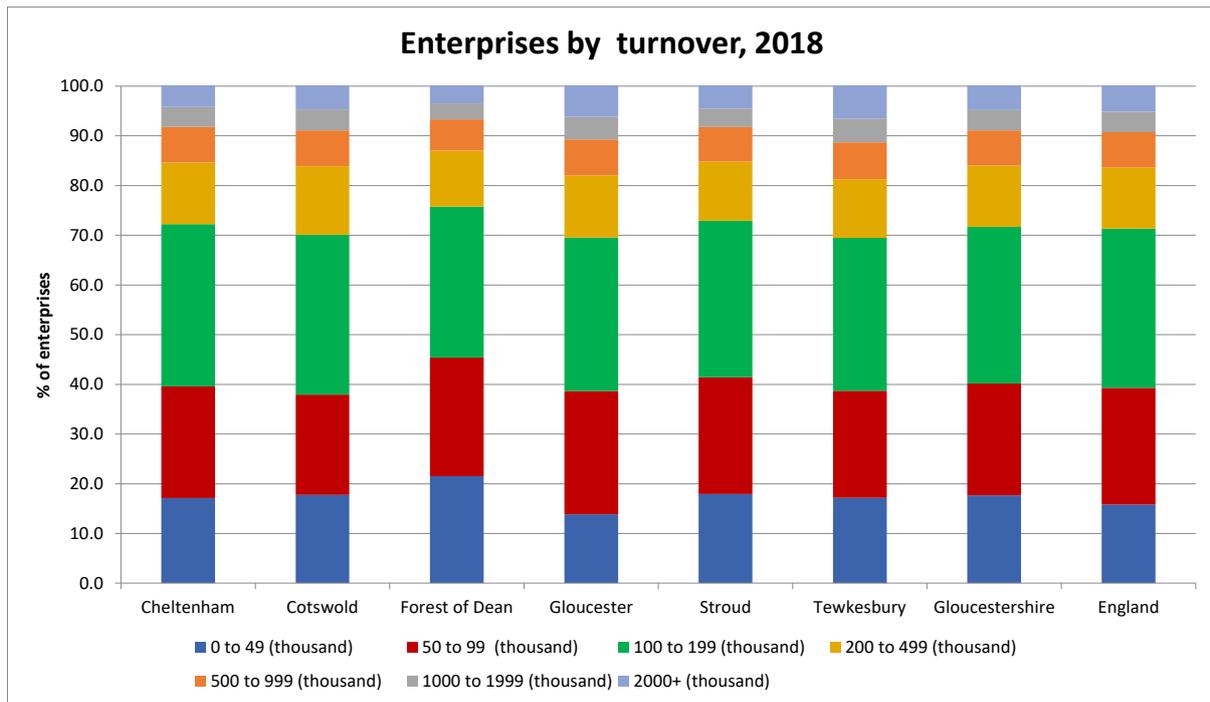


Figure 14: Enterprises by turnover, 2018²⁴

High-growth firms are important contributors to job and wealth creation, with research suggesting this small set of high-growth enterprises drive a disproportionately large amount of employment creation²⁵. High growth firms are defined as any business with average annualised growth in employees of 20 per cent or more over a three year period and with 10 or more employees in the starting period. In 2016 there were estimated to be 40 high growth firms in Cheltenham, this represents 23.5% of the high growth firms in the county. Figure 15 shows this was in line with Tewkesbury and higher than the other districts in the county.

²⁴ *Ibid.*

²⁵ Enterprise growth and employment creation, OECD.

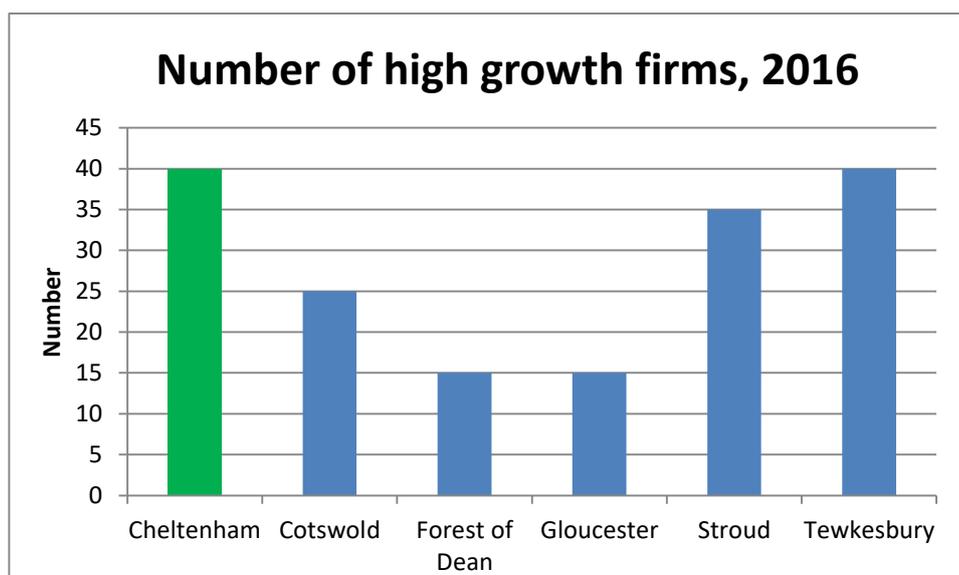


Figure 15: Number of high growth firms, 2016²⁶

2.6 Self employment

Self-employment, on its own, is not a definitive indicator of a high degree of entrepreneurship in the area. However, alongside a high rate of business births and strong survival rates of start-ups it suggests a strong entrepreneurial spirit within an area. During the period January –December 2018 there were around²⁷ 8,600 self-employed people living in Cheltenham, representing 13.8% of people in employment²⁸. Figure 16 shows this was lower than the county and national rate, but in line with the rate for Gloucester City. Levels of self-employment may be lower in Cheltenham than Gloucestershire as a whole, because of the urban nature of the district. National research suggests levels of self-employment are substantially higher in rural areas than in urban areas²⁹.

²⁶ Count of 'high growth' enterprises for the period 2010 to 2016 by district, counties, unitary authorities and standard industrial classification (SIC 2007), ONS

²⁷ Information about self employment is based on a survey, meaning it is an only an approximate measure.

²⁸ Annual Population Survey, ONS

²⁹ Rural quality of life can rely on links with urban areas

http://www.google.co.uk/url?url=http://www.ons.gov.uk/ons/rel/regional-trends/regional-trends/no--43--2011-edition/rural-and-urban-areas--comparing-lives-using-rural-urban-classifications---news-release.pdf&rct=j&frm=1&q=&esrc=s&sa=U&ei=_nT4VMbzNMa57gb7tYCwCQ&ved=0CCcQFjAD&usg=AFQjCNHaEv-LiquTUG_w92xLDSJ6kYkCzA

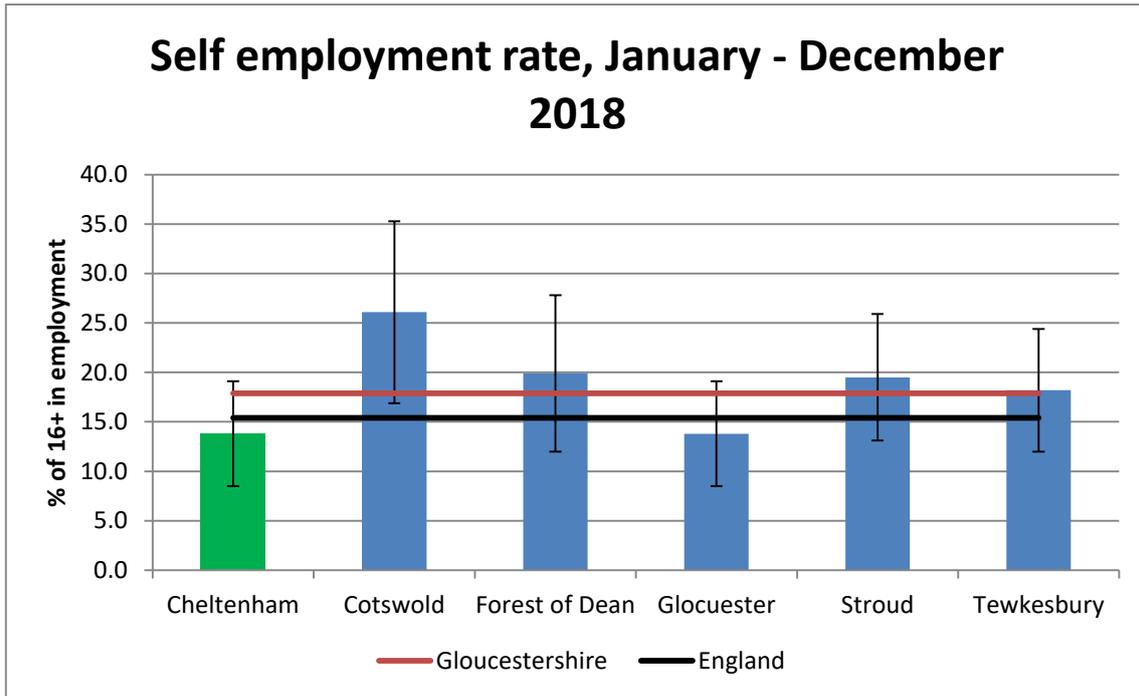


Figure 16: Self employment rate, January – December 2018³⁰³¹

Levels of self-employment have fluctuated over the past 5 years as shown in Figure 17. In the last year, levels of self employment appear to have fallen in Cheltenham, although the fall is not statistically significant. The decline observed in Cheltenham was not reflected at a county or national level or in any of the other districts in the county.

³⁰ Annual Population Survey, January 2018 –December 2018, ONS

³¹ For information about interpreting error bars please see Appendix 1.

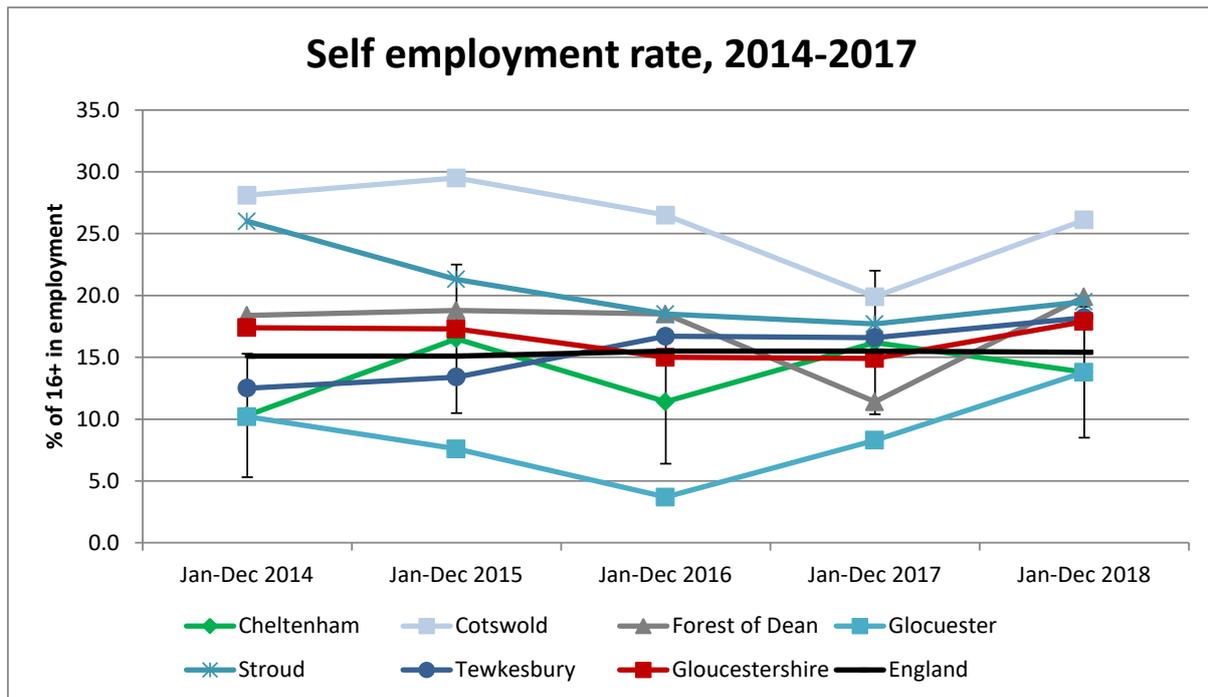


Figure 17: Self employment rate, 2014-2017^{32, 33}

3. The workforce

3.1 Employment

A high level of employment increases local spending power, resulting in a more vibrant local economy which can help regenerate town centres and their surrounding communities. During the period January-December 2018, 81.2% of Cheltenham's working age residents were employed, Figure 18 shows this was higher than the national average of 75.4%, but lower than the county average and the average for the Forest of Dean, Stroud and Tewkesbury.

³² Annual Population Survey, ONS

³³ For information about interpreting error bars please see Appendix 1.

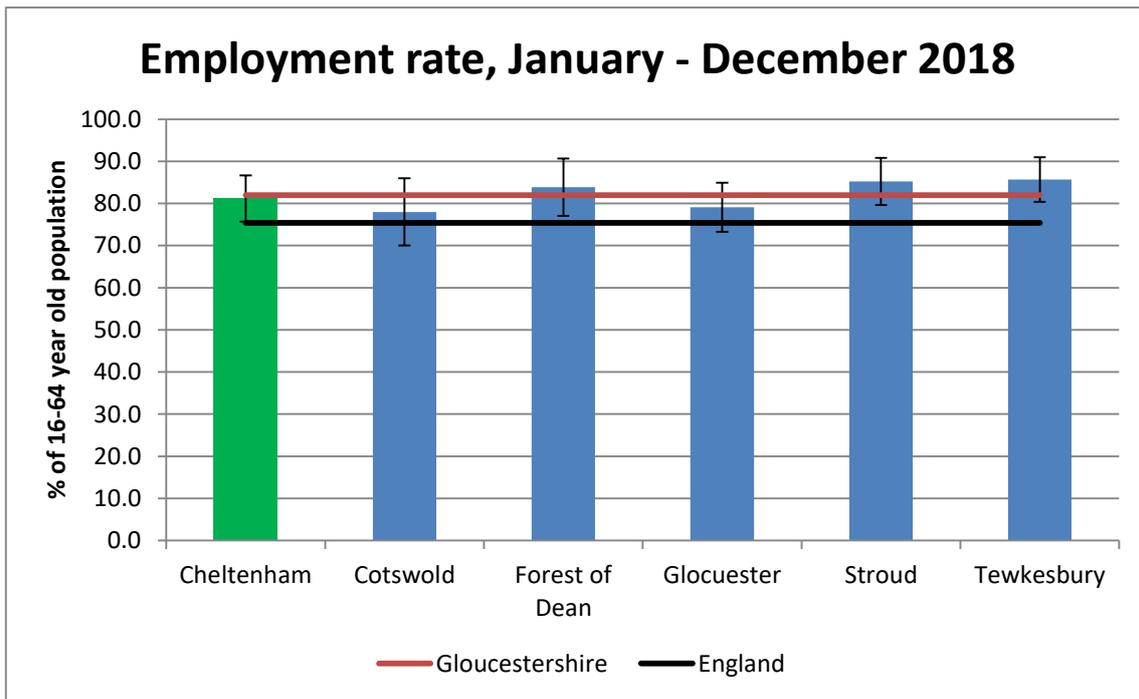


Figure 18: Employment rate, January – December 2018^{34 35}

Between 2015 and 2017 the percentage of working age residents who were employed increased in Cheltenham, reaching its peak at 84.6%, the employment rate then fell in 2018. Figure 19 shows this differs slightly from the picture seen nationally and for the county as a whole, with the areas seeing some growth between 2017 and 2018. Cotswold is the only other district in the county that saw falling employment rate between 2017 and 2018.

³⁴ Annual Population Survey, ONS

³⁵ For information about interpreting error bars please see Appendix 1.

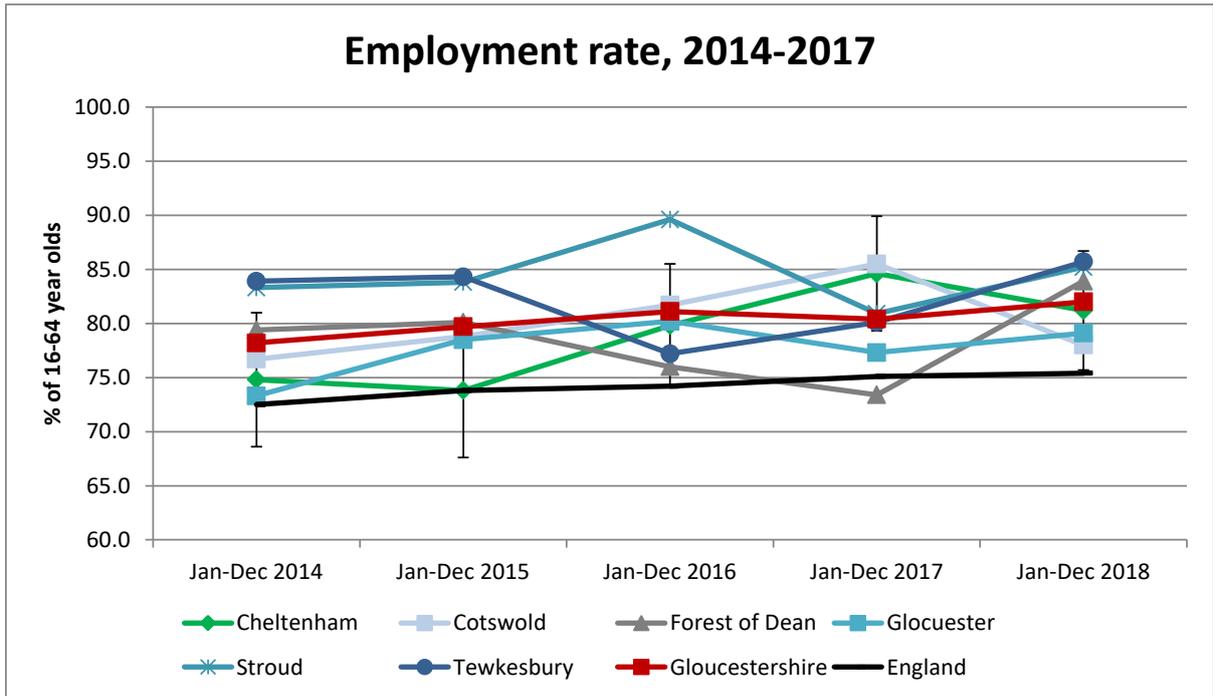


Figure 19: Employment rate, 2014-2017^{36 37}

Figure 20 shows the employment rate by age, Cheltenham has a higher proportion of 16-24 year olds in employment than Gloucestershire and England. Conversely the employment rate of residents aged 50-64 is lower in Cheltenham than Gloucestershire, England and all of the other districts in the county.

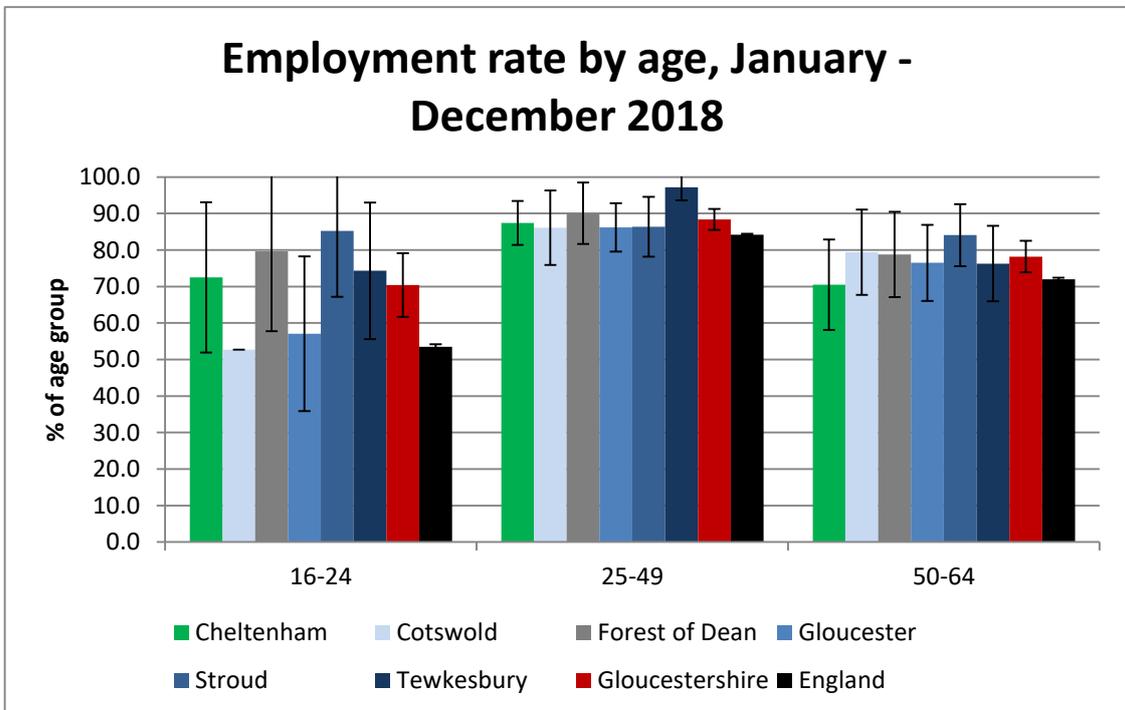


Figure 20: Employment rate by age, January – December 2018^{38 39}

³⁶ Annual Population Survey, ONS

³⁷ For information about interpreting error bars please see Appendix 1.

3.2 Occupations

In order to realise the benefits of economic growth, local economies need a good match between labour demand and labour supply – the right skill levels and the right sort of skills⁴⁰. Cheltenham has a higher proportion of residents who are employed in managerial or professional occupations than Gloucestershire, England and all districts except Cotswold. These occupations generally require higher skill levels and are associated with higher wages, which goes some way to explain the low levels of deprivation present in some parts of the district.

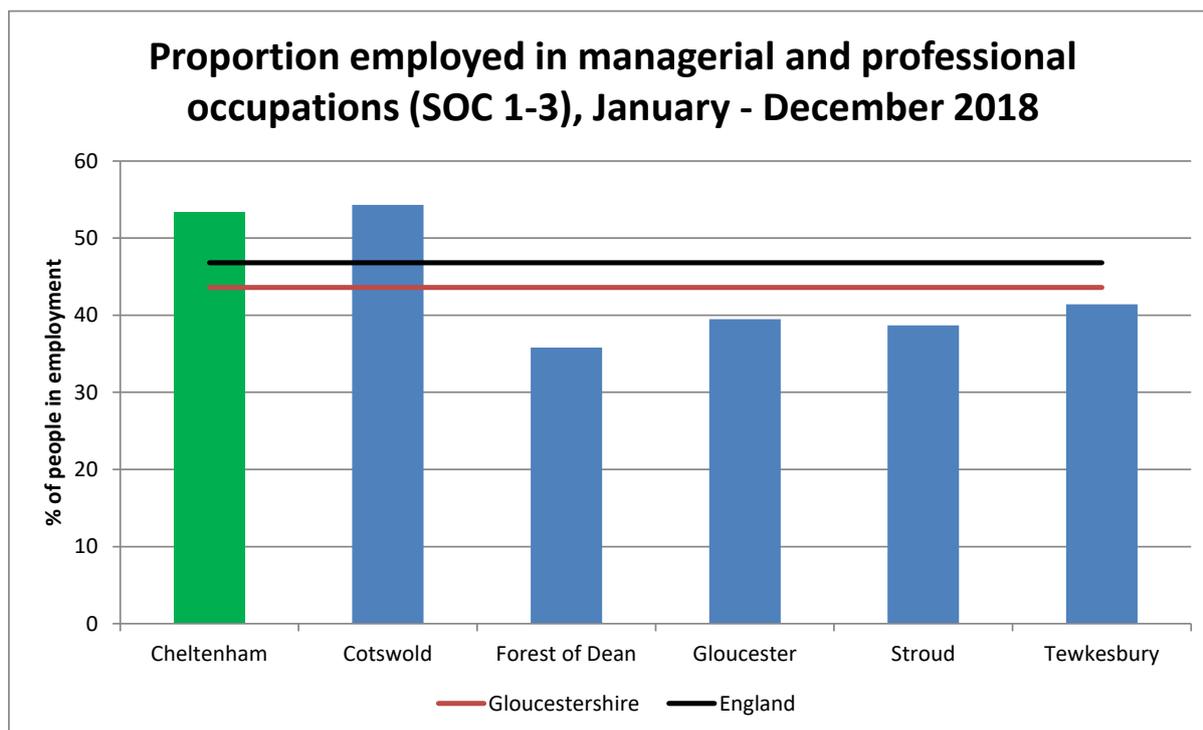


Figure 21: Proportion of residents employed in managerial and professional occupations (SOC 1-3), January – December 2018⁴¹

3.3 Unemployment

There are two commonly used measures of unemployment. The first is the International Labour Organisation (ILO) measure which is based on national survey data of a sample of the total population. The measure counts all people aged 16 and over without a job who are available to and able to start work. This is classed as the 'official' measure of unemployment. According to the International Labour Organisation measure there were 1,100 16-64 year old's unemployed in Cheltenham during the period January to December 2018. This equates to an unemployment rate of 1.9% which was lower than the county average of 2.1% and the national average of 4.2%. Over the last five years the

³⁸ Annual Population Survey, ONS

³⁹ For information about interpreting error bars please see Appendix 1.

⁴⁰ Realising Talent: employment and skills for the future, Local Gov

⁴¹ Annual Population Survey, ONS

unemployment rate in Cheltenham has fallen, from a peak of 8.2% during the period January-December 2018, this reflects the trend seen at county and national level⁴².

The second measure of unemployment is the number of people claiming unemployment related benefits, known as the claimant count. This measure is a narrower measure because it only counts those residents who are out of work and qualify for benefits meaning that it can underestimate the true extent of unemployment, however, it can be broken down to smaller geographies that allows us to gain a better understanding of the local economy. In April 2019 the claimant rate in Cheltenham stood at 1.8% of the working age population, in line with the county average and below the national average of 2.7%⁴³, however although unemployment is generally low Figure 22 shows there are some areas where it is more of an issue. There were 8 Lower Super Output Areas in Cheltenham that had a claimant rate that exceeded the national average. Of these 8 Lower Super Output Areas, six were amongst the 20% most deprived in the country illustrating the is a link between deprivation and unemployment.

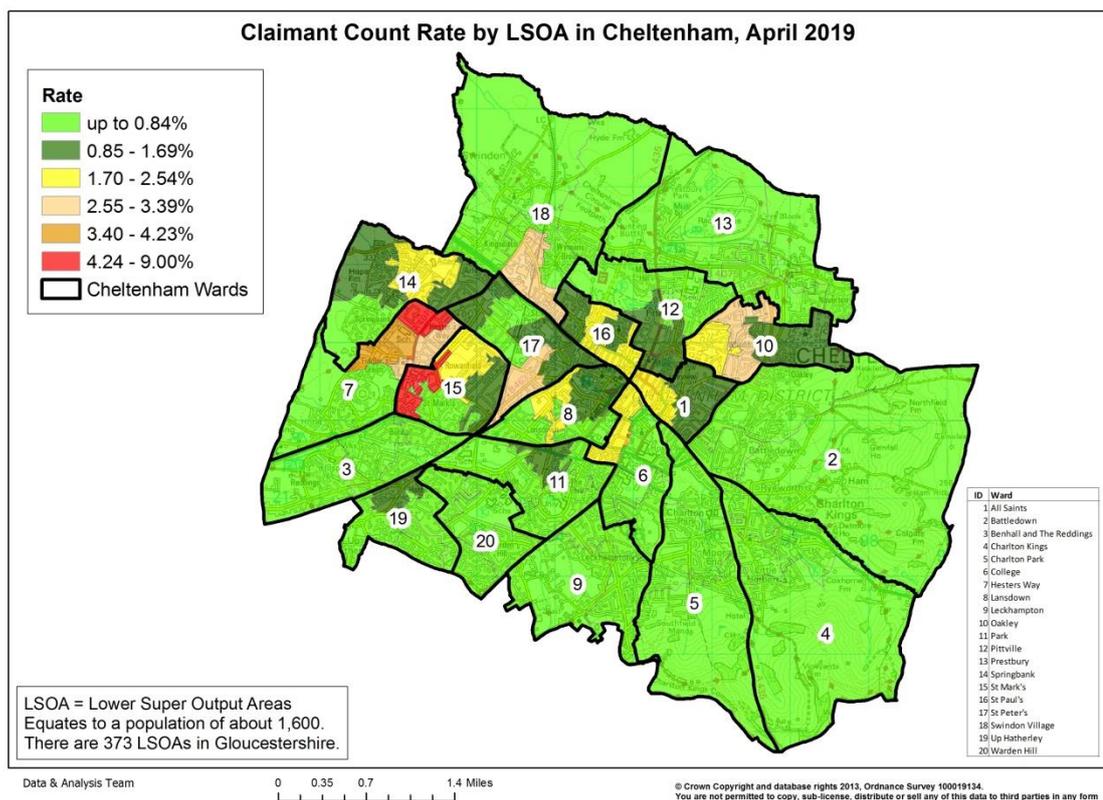


Figure 22: Claimant rate by LSOA in Cheltenham, April 2019⁴⁴

⁴² *Ibid.*

⁴³ Claimant Count, ONS

⁴⁴ Claimant Count, ONS

3.4 Economic inactivity

People that are in employment and unemployed⁴⁵ are described as economically active, while people who are not in employment or unemployed are described as economically inactive, this group may include people who are looking after a home or are retired. The proportion of the working age population who are economically active stood at 82.7% during the period January-December 2018 which was slightly lower than the county as whole (83.8%)⁴⁶ but higher than the national average (78.7%). Conversely the proportion of the working age population who are economically inactive is higher in Cheltenham than Gloucestershire, with Figure 23 showing 17.3% of Cheltenham's working age population is economically inactive compared to 16.2% of Gloucestershire's working age population.

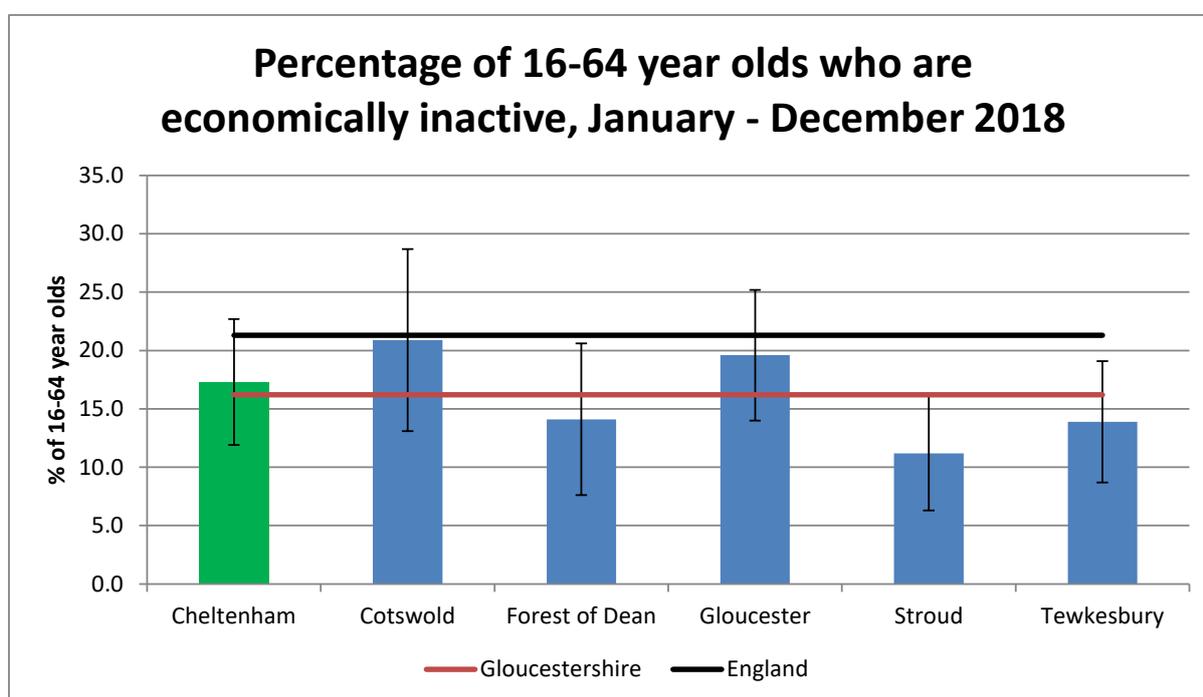


Figure 23: Percentage of 16-64 year olds who are economically inactive, January – December 2018^{47 48}

Due to a small sample size it is not possible to provide a full breakdown of economic inactivity by reason. However, the most common reason for economic inactivity in Cheltenham was looking after a family or home, with 31.2% of economically inactive reporting this as the reason, this was much higher than the county and national averages of 21.2% and 24.4% respectively.

⁴⁵ People who were without a job who were available to start work

⁴⁶ Annual Population Survey, ONS

⁴⁷ Annual Population Survey, ONS

⁴⁸ For information about interpreting error bars please see Appendix 1.

3.5 Not in Education, Employment or Training

Reducing the proportion of 16 to 17 year-olds Not in Education, Employment or Training (NEET) is a priority for the Government. Non participation in education, employment or training between the ages of 16 - 17 is a major predictor of later unemployment, low income, teenage motherhood, depression and poor physical health⁴⁹. A large NEET population also has a negative impact on society as a whole and is often seen as an indicator of a declining economy.

At the end of March 2019 there were 64 young people aged 16-17 not in education, employment or training in Cheltenham⁵⁰. Figure 24 shows this equates to a rate of 3.01% of the 16-17 year old population which was above the county average.

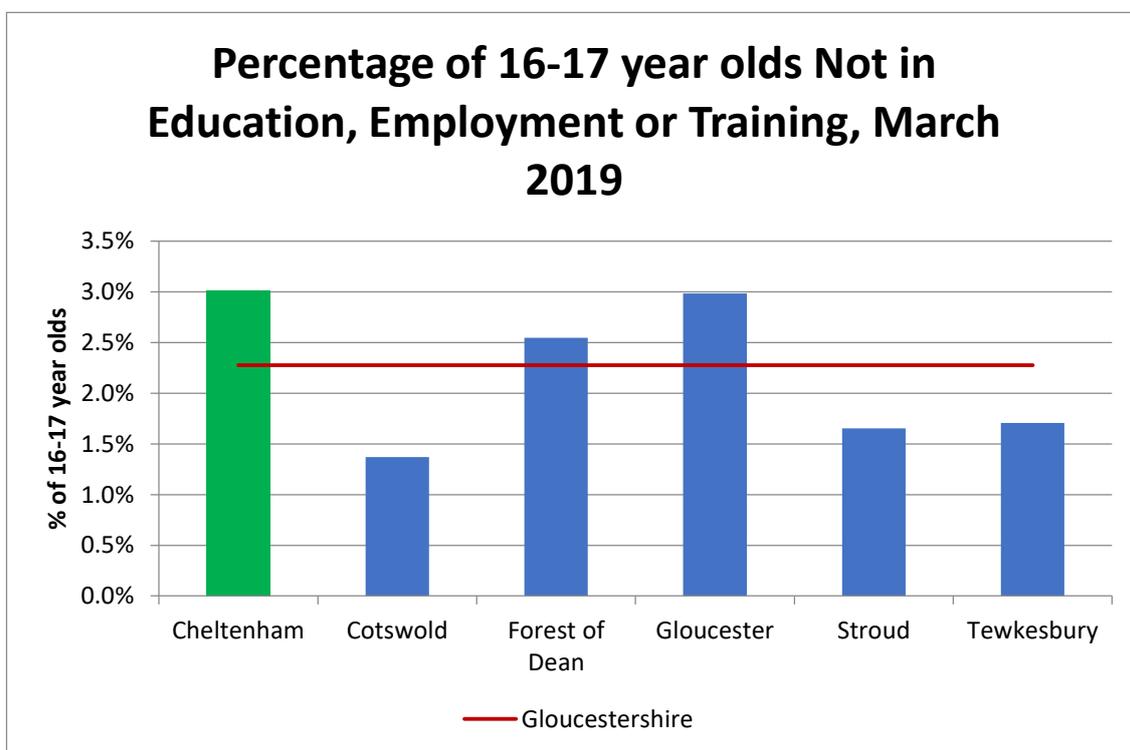


Figure 24: Percentage of 16-17 year olds Not in Education, Employment or Training⁵¹

Figure 25 shows the trend in NEET's over the last 12 months, generally Cheltenham has followed a similar trend to Gloucestershire and the national average. However it is noticeable, that prior to November 2018 the NEET rate in Cheltenham was in line with the county average, since November Cheltenham has seen a greater increase in the NEET rate than the county leading to a gap appearing between the two areas.

⁴⁹ Young People not in education employment or training
<http://webarchive.nationalarchives.gov.uk/20100217094128/http://dcsf.gov.uk/everychildmatters/youth/ypnieet/neet/>

⁵⁰ Youth Support Team, Gloucestershire County Council.

⁵¹ *Ibid.*

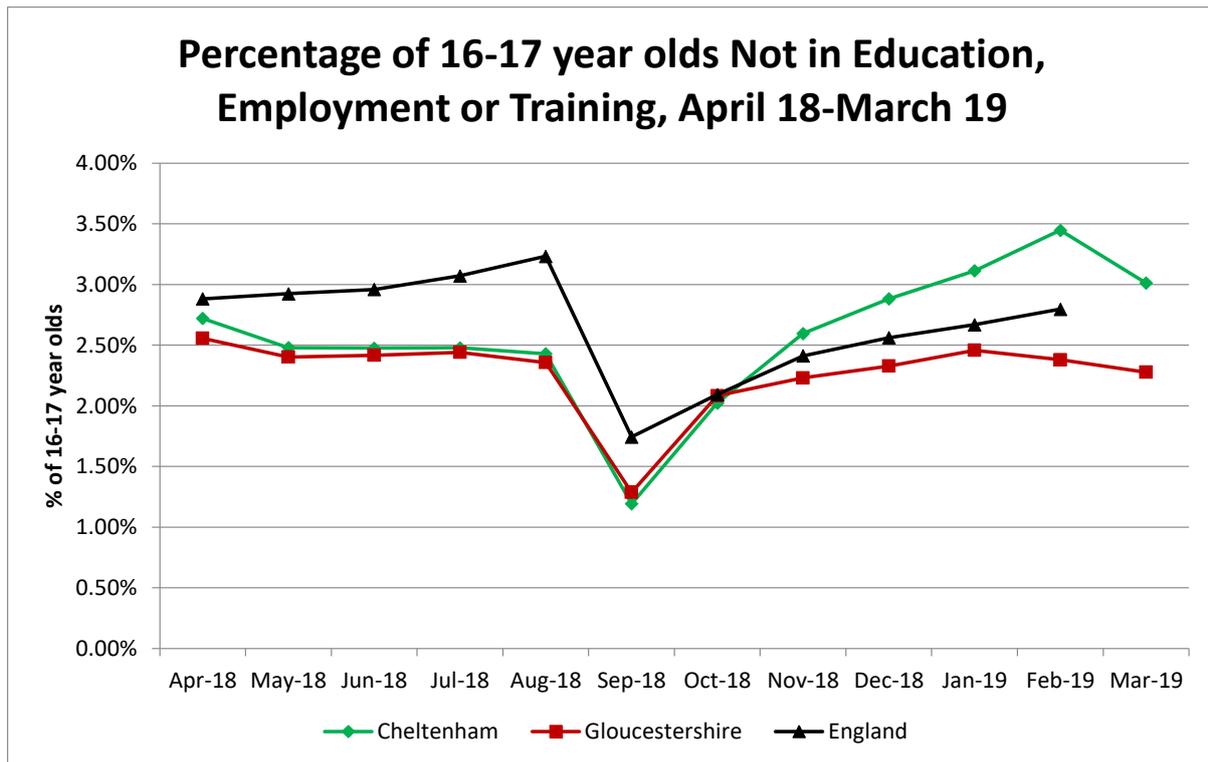


Figure 25: Percentage of 16-17 year olds Not in Education, Employment or Training, April 2018-March 2019⁵²

When information about NEETs is broken down below district level, numbers get very small, making it difficult to draw firm conclusions. However it is clear, that there is considerable variation in the NEET rate across Cheltenham, with 22 Lower Super Output Areas (out of 75) having a rate that exceeds the district average. Of those, 5 Lower Super Output Areas have more than 10% of 16-17 year olds Not in Education, Employment and Training⁵³.

There are groups of young people who are more likely to be NEETs than others, they include; young people with learning difficulties or disabilities, teenage mothers, persistent truants, young people involved in offending and care leavers. In March 2019 approximately 30 of the NEETs in Cheltenham were from vulnerable groups, with people caring with Special Educational Needs and Disabilities and those with substance misuse issues accounting for the largest proportion of the total, reflecting the picture seen at county level. It should be noted that one NEET client could be part of multiple vulnerable groups, so the total figures will over represent the total from vulnerable groups⁵⁴.

⁵² *Ibid.*

⁵³ *Ibid.*

⁵⁴ *Ibid.*

Thriving Cultural Offer

Culture is widely understood to be much more than a “visitor offer”; it helps to build vibrant and connected communities.

4. Tourism

Tourism and the visitor economy make an essential and often undervalued contribution to the economic and social wellbeing of local people, businesses, and the environment. It is an integral part of creating and maintaining a sense of place.

One of the reasons tourism is often undervalued is because there is little local information available about it, which makes it difficult to measure the impact of tourism on a local area.

Data was shared by Marketing Cheltenham who wrote a comprehensive tourism analysis and strategy for Cheltenham which was published in 2017. Marketing Cheltenham is partnered with Cheltenham Borough Council, University of Gloucestershire, Cheltenham Racecourse, Cheltenham BID, Cheltenham Festivals, Cheltenham Hospitality Association, The Cheltenham Trust and Cheltenham Chamber of Commerce. Given the vast connections and focus afforded by a dedicated tourism organisation this report will touch on highlights as detailed analysis has been covered in The Cheltenham Tourism Strategy and the website continues to post regular updates.⁵⁵

Cheltenham district has the highest number of tourist trips in the county but the trips are shorter than in all other districts but Tewkesbury. In contrast, over 2017 The Cotswolds had a total of 8,333 (2%) fewer visitors than Cheltenham but those same visitors spent 38% (289,667 nights) more time in The Cotswolds. Visitors to The Cotswolds also spend more; an average of £137 was spent per trip in Cheltenham compared to £225 in The Cotswolds. This is partially driven by the purpose of trips made; Cheltenham has more business and visiting friends or relatives trips whereas The Cotswolds has almost double the amount of holiday trips which have a higher spend per night. In 2017 Cheltenham had 130,000 holiday trips and The Cotswolds had 240,333.⁵⁶

In 2017 Cheltenham had the most business trips in the county by a margin higher than 7,000. However, Gloucester, which has the second highest number of business trips, saw the highest spend by visitors. Tourists are staying for fewer nights in Gloucester and spending roughly twice the amount per night. The

⁵⁵ The Cheltenham Tourism Strategy, <https://marketingcheltenham.co.uk/about/cheltenhams-tourism-strategy/>

⁵⁶ Great British Tourism Survey, Visit Britain, <https://www.visitbritain.org/great-britain-tourism-survey-latest-monthly-overnight-data>

Cheltenham tourism strategy suggests this could be due to the lack of hotels and conference rooms that cater for large scale businesses in the district.

Cheltenham has the most visitors for the purpose of visiting family and friends but the spend does not reflect the high number of trips or visitors. This is due to short stays and minimal spending in comparison to other areas in the county.

In 2016 research was commissioned by the Marketing Cheltenham and Cheltenham BID to establish current use and opinions of Cheltenham. Surveys of tourists and town-centre users revealed ambivalence towards Cheltenham, it did not rank as a preferred first place to visit and was ranked 73rd on a list of second place to visit. The Cheltenham Tourism Strategy and work carried out by Marketing Cheltenham has a rebranding strategy in place to address findings of this research.⁵⁷

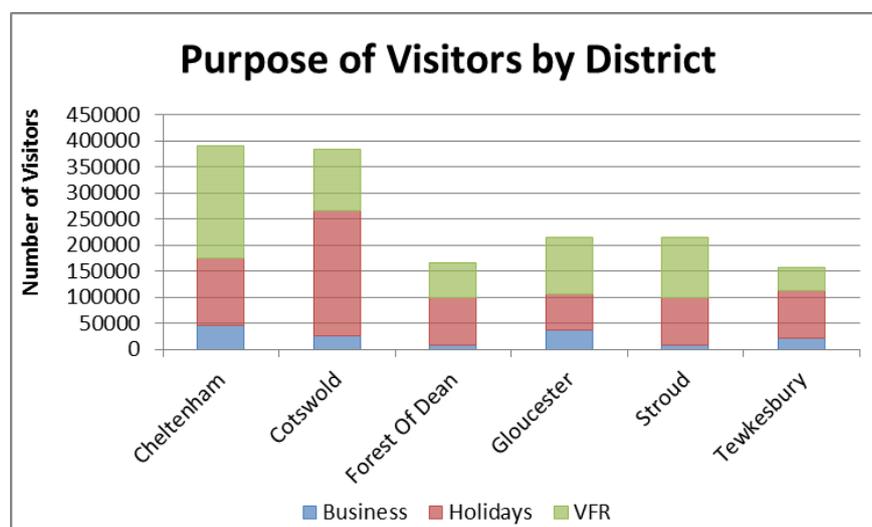


Figure 26: Purpose of visitors by district⁵⁸

5. Environmental Quality and Heritage

Research shows there is a clear link between our proximity to quality green spaces and our mental and physical wellbeing, even in urban areas. Everybody, no matter where they live, deserves to have an attractive park or green place nearby.

5.1 The Natural Environment

The landscape plays a role in the identity of the people who live there and different landscape types are often used to differentiate one region from another. Cheltenham is made up of 4 different landscape types;

⁵⁷ Marketing Cheltenham, <https://marketingcheltenham.co.uk/about/rebranding-visit-cheltenham-as-the-festival-town/>

⁵⁸ Great British Tourism Survey, Visit Britain, <https://www.visitbritain.org/great-britain-tourism-survey-latest-monthly-overnight-data>

- The Urban landscape which covers the majority of the district.
- The Escarpment landscape, found to the east of the district. The combination of its elevation, and the steep slopes rising from the lowlands, make it a highly distinctive feature.
- The High Wold landscape accounts for a small part of Battledown ward to the east of the district. The landscape comprises a broad, elevated, gently undulating plateau dissected by a network of dry valleys with distinctive convex profiles
- The Settled Unwooded Vale landscape is found to the west of the district and is characterised by mixed arable and pasture land

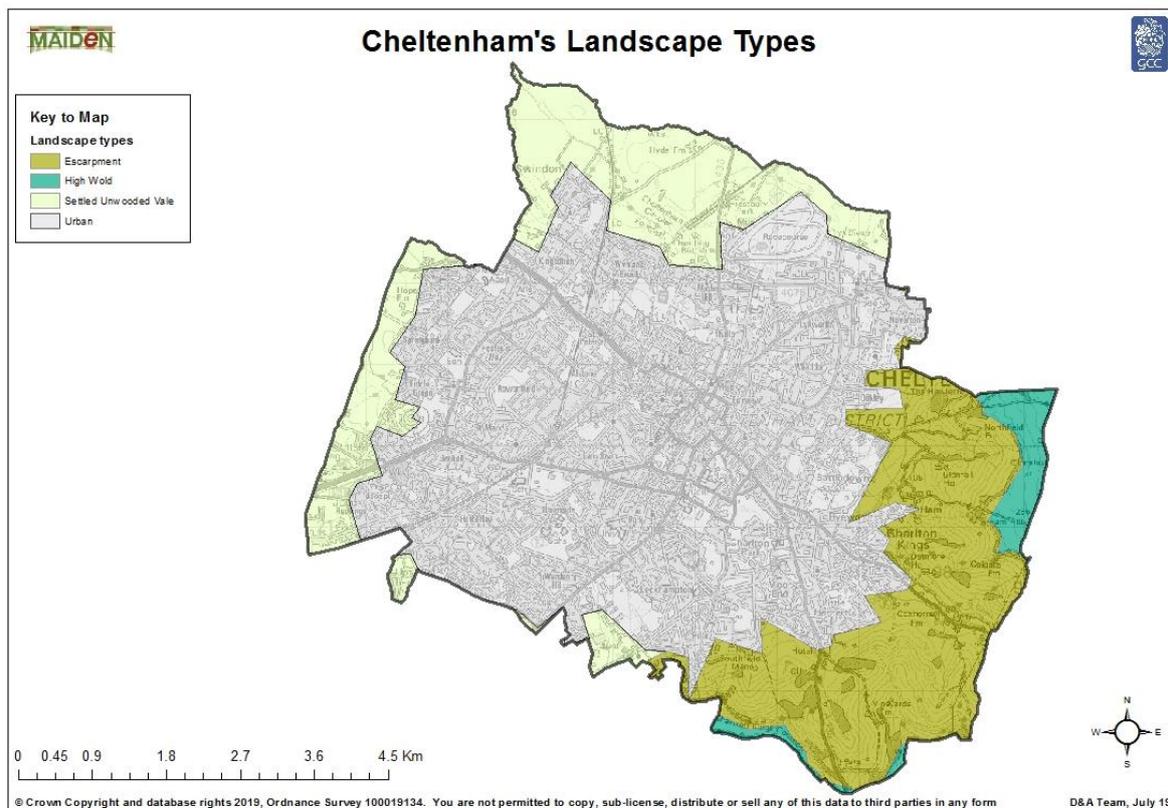


Figure 27: Cheltenham's Landscape Types⁵⁹

Cheltenham is home to a number of recognised and protected areas that add to the fabric, character and quality of the landscapes and provide valuable spaces for all ages to enjoy the natural environment, these include:

- 1 Local Nature Reserve
- 6 Key Wildlife Sites
- 1 Regionally Important Geology and Geomorphology Sites (RIGS)

⁵⁹ Landscape Character Assessment, Gloucestershire County Council

- 1 AONB that falls at least partly within its boundaries
- 2 Registered Parks and Gardens
- 3 Sites of Special Scientific Interest just outside the district boundary.

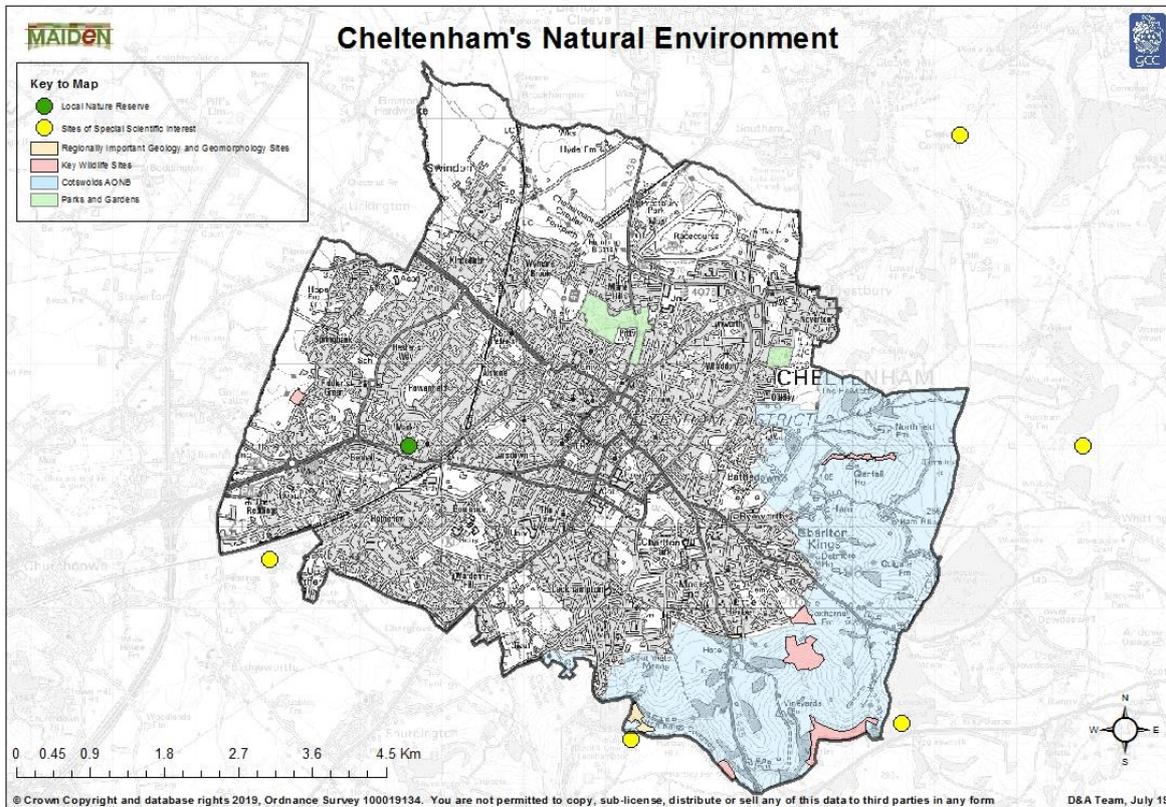


Figure 28: Cheltenham's Natural Environment

5.2 Areas with Green Flag Award status

The Green Flag Award recognises and rewards the best green places. Through this award, Keep Britain Tidy strives to ensure that everyone has access to a safe, clean and pleasant space where they can relax, meet, play or exercise.

A Green Flag Award is the benchmark of a quality park or green space. Not only does a Green Flag flying overhead guarantee a public space is welcoming, clean, well-maintained, safe and secure, it also ensures it is managed sustainably and pays attention to the conservation of the natural and built environment. Involving the community is also key to a park or green space being awarded a flag as it must meet their needs and demands and be a great place for people to spend time.

Cheltenham has been awarded Green Flag Award status at the following five sites:

- Springfields Park
- Hatherley Park

- Montpellier Gardens
- Winston Church Memorial Gardens, which won the award for the first time in 2018
- Naunton Park

In addition Pittville Park has been awarded Green Heritage Site status, which recognises the treatment of the site's historic features and the standard of conservation.

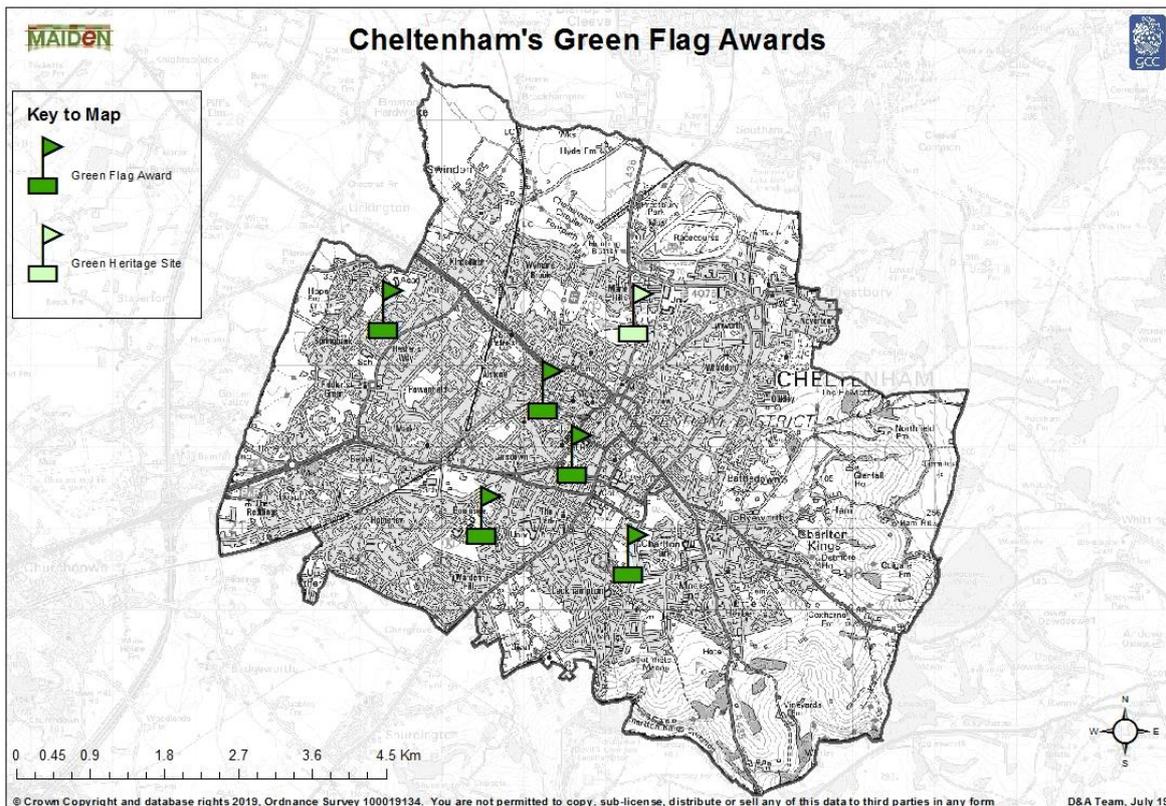


Figure 29: Cheltenham's Green Flag Awards⁶⁰

5.3 Heritage

Historic places and assets, and interventions associated with them, can have a wide range of beneficial impacts on the physical, mental and social wellbeing of individuals and communities⁶¹.

The presence of listed buildings bring economic and environmental benefits making places more attractive to businesses and giving local people a sense of pride about their area, however the listing also brings with it special planning considerations which may cause problems if owners want to adapt or extend a building. Listed Buildings are those that have been identified as being of special

⁶⁰ Green Flag Awards

⁶¹ Heritage and Wellbeing, What Works Wellbeing

architectural or historic interest. They are included on a national register of such buildings, compiled by English Heritage. Buildings on the list are given one of three grades which denote their level of importance, Grade I being the highest and Grade II the lowest:

- Grade I (one) - of exceptional interest
- Grade II* (two star) - particularly important
- Grade II (two) - of special interest

Structures that might not be classified as 'buildings' - such as railings, gate piers, walls, war memorials, gravestones, post boxes and telephone boxes - can all be Listed Buildings

There are 1,133 listed buildings in Cheltenham, the majority of which are located in the town centre. Of these 6 are Grade I listed, these include the Church of All Saints; Thirlestaine house, Cheltenham Minster (St Mary's), Montpellier Rotunda and Pittville Pump Rooms.

The district is also home to 6 scheduled monuments including Battledown Camp, these are historic buildings and archaeological sites of national importance which are given legal protection by being placed on a 'Schedule' of monuments.

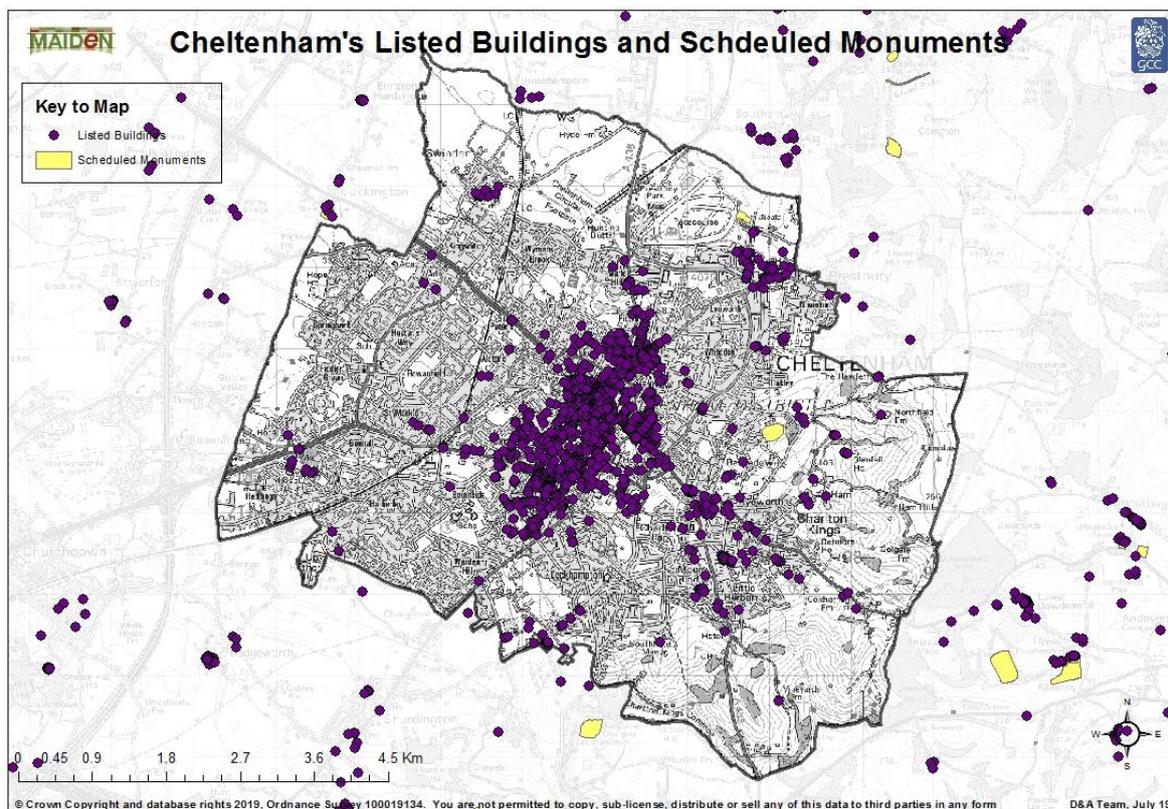


Figure 30: Cheltenham's Listed Buildings and Scheduled Monuments⁶²

⁶² Historic England

5.4 Environmental issues

5.4.1 Waste

The disposal of waste is an important economic and environmental issue due to the environmental pressures created by the use of transport and landfill sites and the increasing costs associated with disposing of waste.

In 2017/18 approximately 51,000 tonnes of waste was collected in Cheltenham, this comprised household and non household waste. The amount of household waste collected in Cheltenham averaged 405kg per person, this was lower than the county and national average, but higher than all districts expect Cotswold.

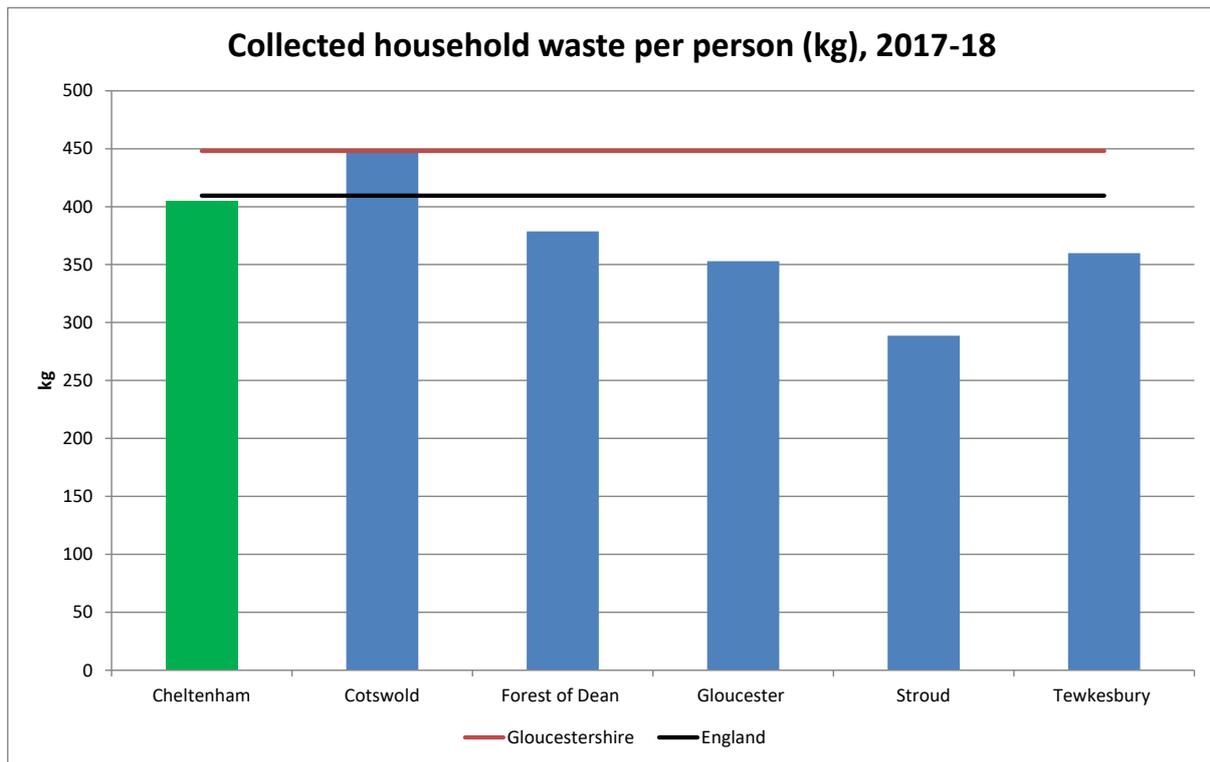


Figure 31: Collected household waste per person (kg), 2017/18⁶³

In 2017/18, 48% of household waste collected in Cheltenham was sent for reuse, recycling or composting. Figure 32 shows this was higher than the national average but lower than the county average and all districts except Gloucester.

⁶³ Waste and recycling statistics, Department for Environment, Food & Rural Affairs

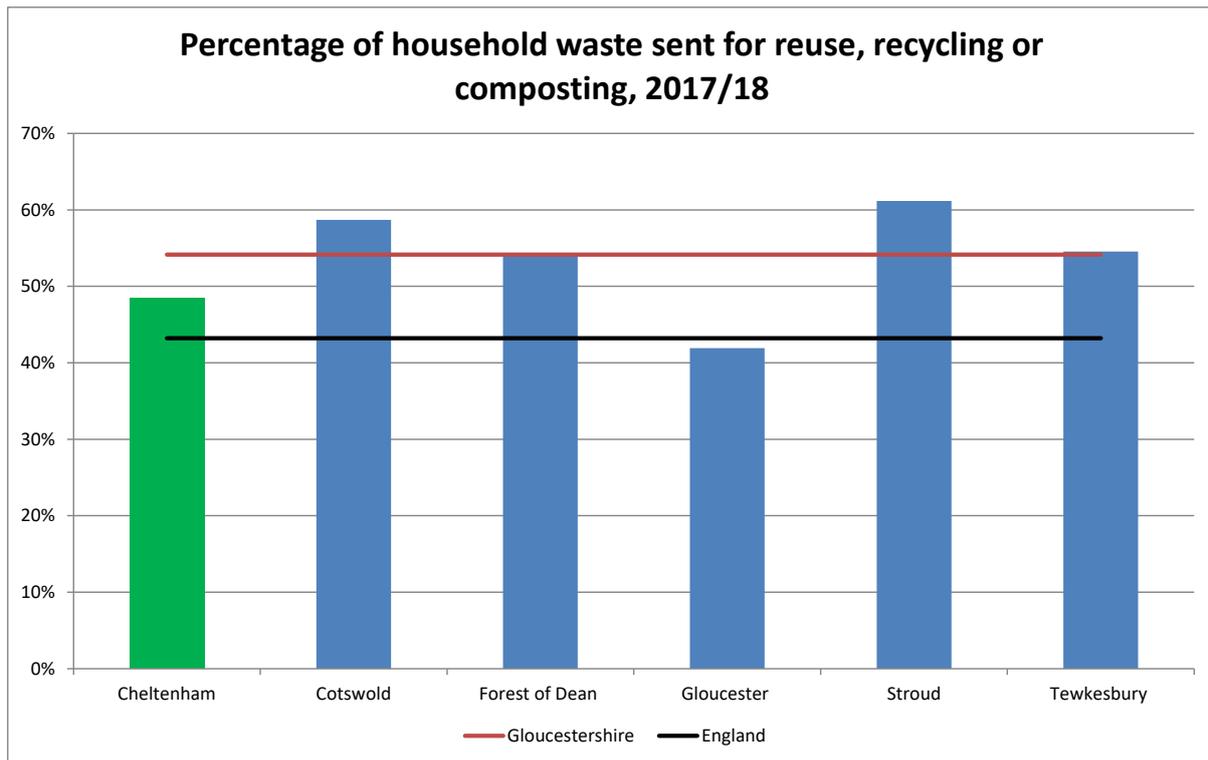


Figure 32: Percentage of household waste sent for reuse, recycling or composting⁶⁴

5.4.2 Air Quality

Air pollution is the top environmental risk to health in the UK. The two principle and most researched pollutants, are particulate matter (PM) and nitrogen dioxide (NO₂). This research has shown that air pollution, both inside and outside the home, causes around 40,000 deaths per year in the UK. The health and social care costs associated with this are expected to reach £18.4 billion by 2035⁶⁵. Air pollution exacerbates many chronic conditions and can cause both short and life long health effects particularly for children, people with heart or lung conditions and those with breathing problems. Air pollution is expected to cause 2.4 million new cases of disease in England by 2035, with PM 2.5 alone predicted to be responsible for around 350,000 cases of coronary heart disease and 44,000 cases of lung cancer. Even small changes in our air quality can make a big difference. A reduction of 1µg/m³ reduction in PM 2.5 concentrations in a year could prevent 50,000 new cases of coronary heart disease and 9,000 new cases of asthma by 2035. Cleaner air leads to increased productivity through improvements in public health, leading to reduced workplace absence. For example, particulate matter, nitrogen dioxide and ozone were estimated to be responsible for total productivity losses of up to £2.7 billion in 2012. The

⁶⁴ *Ibid.*

⁶⁵ Clean Air Strategy 2019

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/770715/clean-air-strategy-2019.pdf

Government has set out plans to tackle air quality in the Clear Air Strategy 2019⁶⁶.

DEFRA assesses air quality in the UK through a combination of monitoring and modelling. DEFRA has no monitoring sites in Gloucestershire so relies on modelling data which uses information about local sources of pollution and infrastructure to estimate levels of pollution.

Current WHO Air Quality Guidelines levels for PM_{2.5} are set at 10 $\mu\text{g m}^{-3}$ ⁶⁷. DEFRA estimates that in 2017 the total annual mean PM_{2.5} concentration in Cheltenham was below this level at 9.4 $\mu\text{g m}^{-3}$. Figure 33 shows the PM_{2.5} level in Cheltenham was in line with the national average but higher than the county average and all districts, with the exception of Gloucester, reflecting the urban nature of the district.

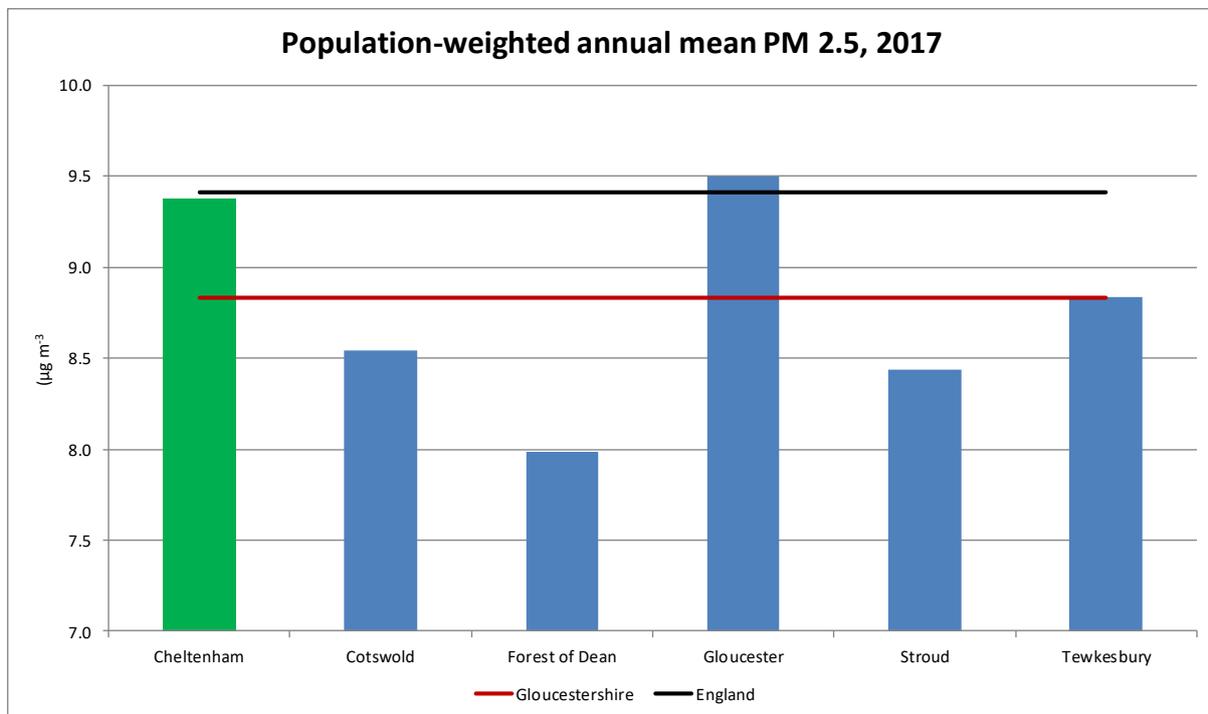


Figure 33: Population-weighted annual mean PM_{2.5}, 2017⁶⁸

DEFRA also produces estimates of anthropogenic (originating from human activity) PM_{2.5}, this is because estimates based on total PM_{2.5} might give a misleading impression of the scale of the potential influence of policy interventions. The estimates of anthropogenic PM_{2.5} suggest that once again PM_{2.5} levels in Cheltenham are broadly in line with the national average and higher than the county average.

⁶⁶ *Ibid.*

⁶⁷ WHO Air quality guidelines for particulate matter, ozone, nitrogen dioxide and sulfur dioxide, World Health Organisation

⁶⁸ Modelled Background Pollution Data, Defra

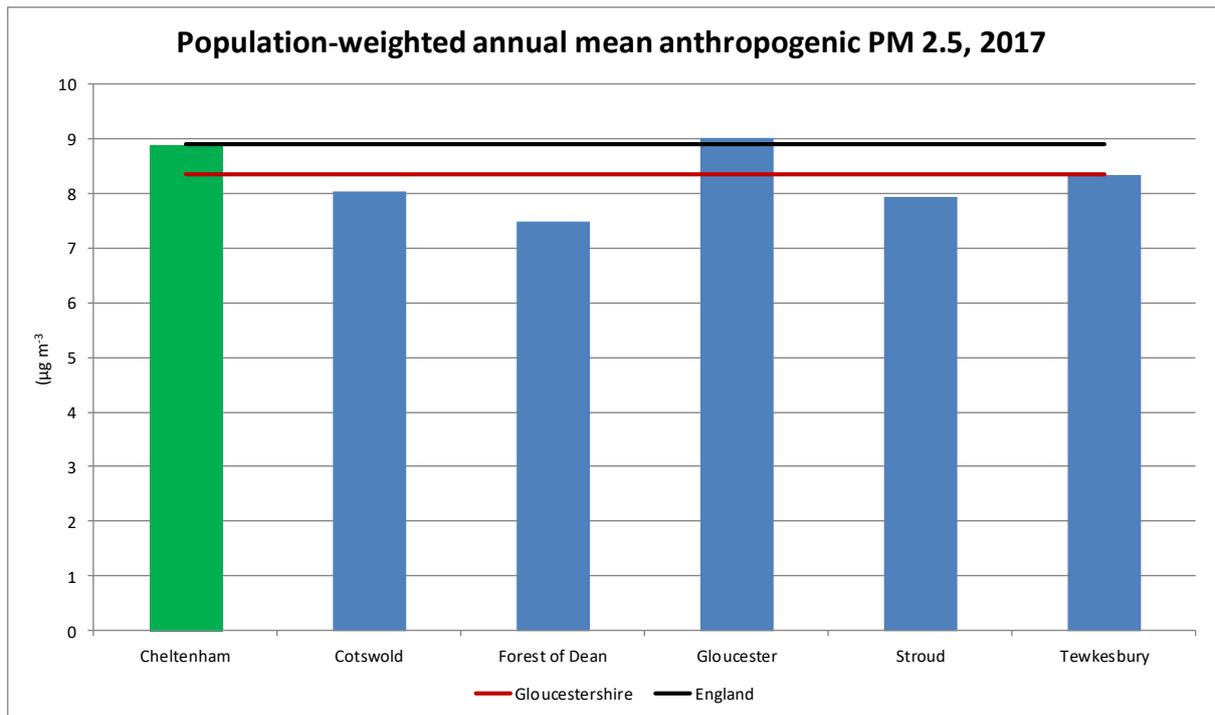


Figure 34: Population-weighted annual mean anthropogenic PM 2.5, 2017⁶⁹

Figure 35 shows the trend in PM 2.5 levels since 2011, Cheltenham has generally followed the trend observed at county and national level, with levels falling between 2013 and 2015, peaking in 2016 before experiencing a decline in 2017.

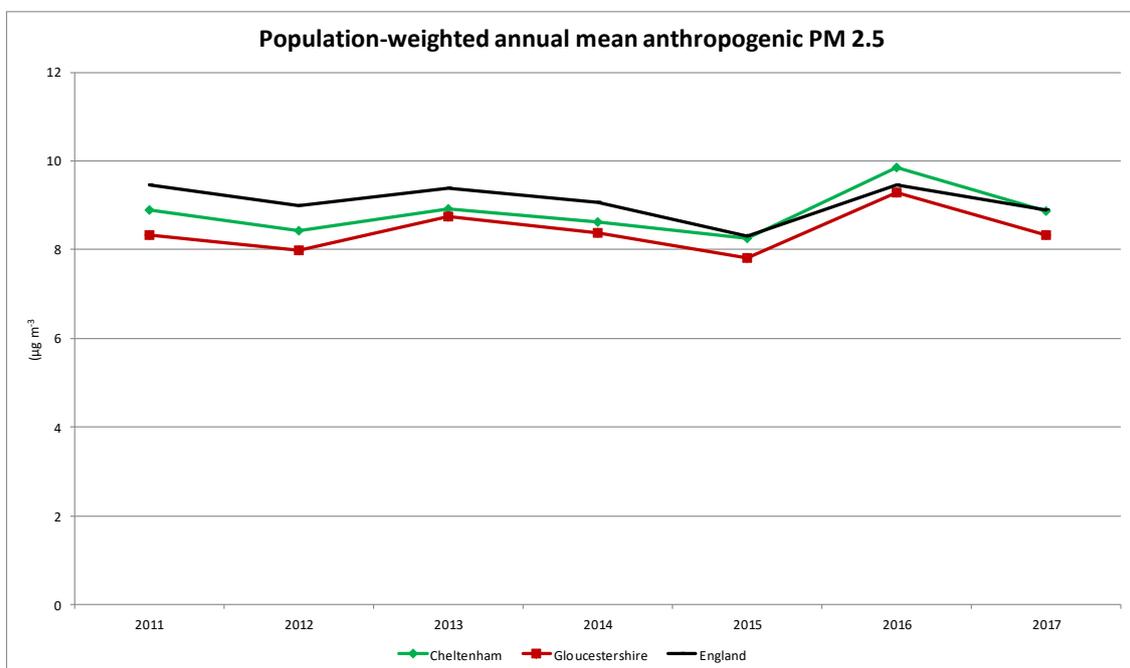


Figure 35: Population weighted annual mean anthropogenic PM 2.5

⁶⁹ Ibid.

These modelled estimates of background air pollution are combined with nationally modeled data based on mortality risk to estimate the fraction of mortality attributable to particulate air pollution. The data suggests in 2017 around 5.0% of deaths in Cheltenham were attributable to particulate air pollution, this was higher than the county average and broadly in line with the national average, reflecting the pattern seen in the modelled estimates of PM 2.5.

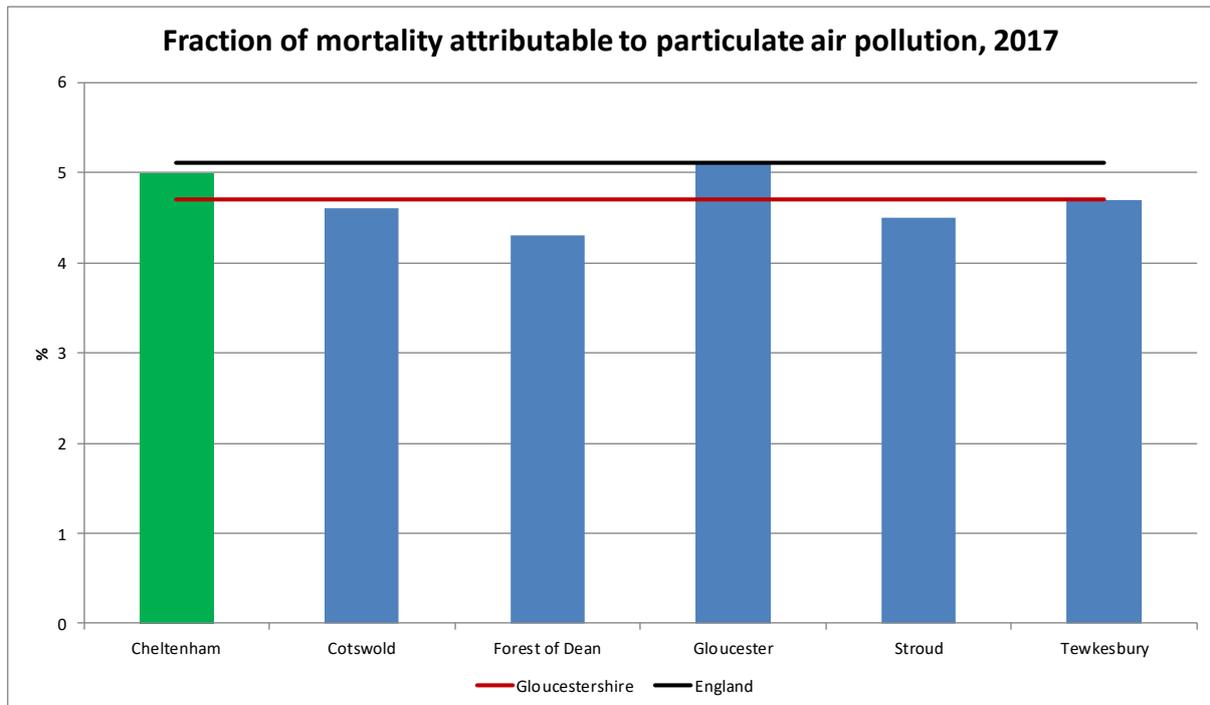


Figure 36: Fraction of mortality attributable to particulate air pollution, 2017⁷⁰

Table 1 presents a comparison of deaths attributable to some other key risk factors in Cheltenham. It is important to note that unlike the other indicators that are based on recorded mortality data for specific causes of death, the figures for air pollution are estimates of mortality attributable to a risk factor. Deaths are not individually attributed to air pollution, rather, air pollution is considered to be a contributory factor in many deaths. The data suggests that air pollution may contribute to more deaths in Cheltenham than suicide or communicable diseases.

⁷⁰ PHOF, PHE

Table 1: Ranking of PHOF mortality indicator for Cheltenham, 2015-17 and 2017 for indicator 3.01⁷¹

	Mortality Rate per 100,000 population
Preventable Mortality (4.03)	141.3
Preventable Cancer <75 (4.05 ii)	79.7
Preventable CVD <75 (4.04 ii)	38.3
Preventable Respiratory disease <75 (4.07 ii)	17.6
Preventable Liver disease <75 (4.06 ii)	17.9
Mortality attributable to PM2.5 <75 (3.01)	15.6
Suicide rate Persons (4.10)	10.9
Communicable diseases (4.08)	10.1

In addition to modelled air quality data all Districts and Borough councils measure background Nitrogen Dioxide level, which provides a general indicator of pollution levels at particular sites. Cheltenham measures air quality at a number of sites, data from 2017 showed that there were three locations which exceeded the EU limit values for Nitrogen Dioxide (40 ug/m³) These are; at the lower High Street, at the High Street junction with Gloucester Road and at one location on Swindon Road.

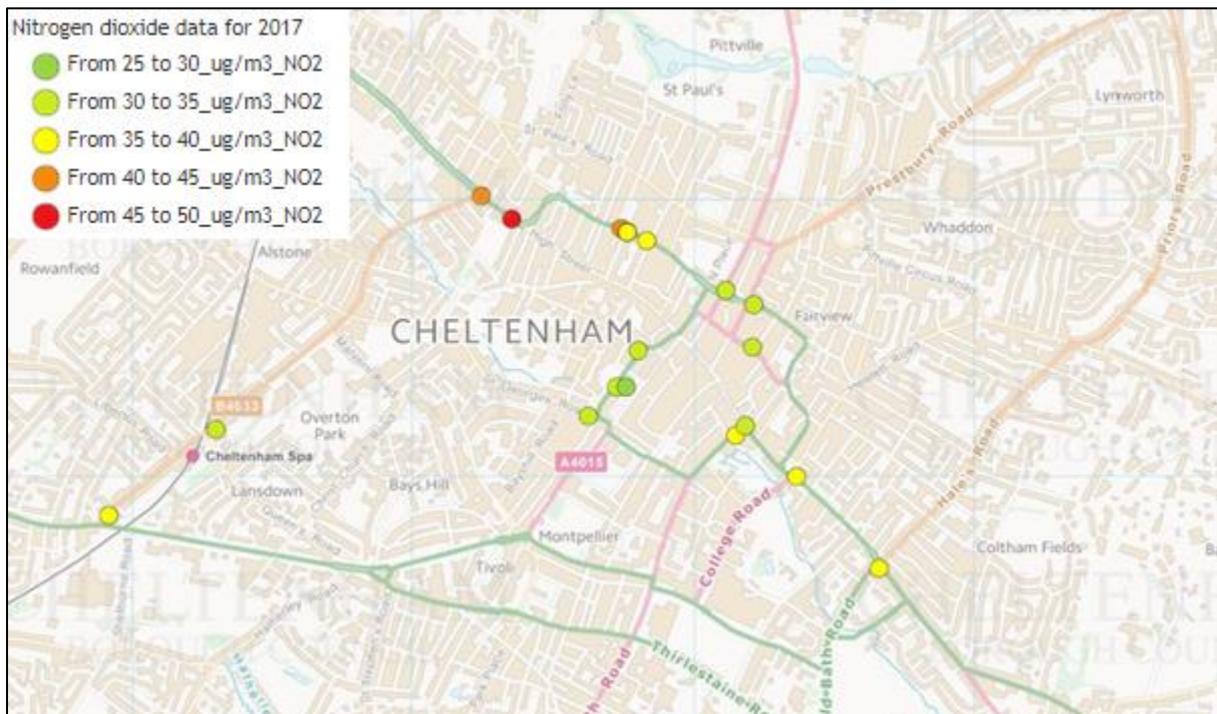


Figure 37: Nitrogen Dioxide levels at air quality monitoring sites in Cheltenham⁷²

⁷¹ PHOF and <http://www.adph.org.uk/2017/03/air-quality-a-briefing-for-directors-of-public-health/>

⁷² Annual/Monthly Mean Nitrogen Dioxide Levels in Cheltenham, Cheltenham Borough Council

The aim of air quality monitoring is ensure that national air quality targets are achieved. When a local authority finds areas where the objectives are not likely to be achieved, it must declare an Air Quality Management Area (AQMA) there. In 2011 Cheltenham declared an Air Quality Management Area that covered the entire Borough. This AQMA is still in place, however having looked at year-on-year results (which are consistently below the limit values for almost the whole of the Borough), the Borough Council was due to consider revoking the current borough-wide AQMA in favour of a much smaller linear AQMA across the north of the town centre, which has consistently given poor air quality results. Unfortunately, due to resourcing issues and other factors, this planned reconsideration of the AQMA has not taken place, but may do so in the future⁷³.

The locally collected data shows effects of air pollution are distributed unequally across the population. The more urban and congested areas have higher levels of pollution, as do areas near arterial and trunk roads. This, therefore, impacts on the health of those that live and work next to these areas. This is something that is replicated at national and international level, with studies showing the groups most at risk of poor air quality include:

- those living in the most deprived areas, the most deprived areas bear a disproportionate share of poor air quality
- communities that have access to fewest cars tend to suffer from the highest levels of air pollution, whereas those in which car ownership is greatest enjoy the cleanest air and those communities that are most polluted and which also emit the least pollution tend to be amongst the poorest in Britain
- children tend to be more likely to live in areas where air pollution is high, and also suffer some of the worst consequences⁷⁴

5.4.3 Water Quality

A safe, reliable, affordable, and easily accessible water supply is essential for good health. Virtually all types of water pollution are harmful to the health of humans and animals. Pollution from salts makes fresh water unusable for drinking and irrigation purposes⁷⁵. Nutrient and thermal pollutants (from farming and power production) can also lead to an increase in aerobic algae which depletes oxygen levels, suspended particle pollution will not only reduce the quality of the water but could lead to sunlight being less able to penetrate to aquatic plants.

⁷³ 2018 Air Quality Annual Status Report ,Cheltenham Brough Council

⁷⁴ Fecht, D. et al Associations between air pollution and socioeconomic characteristics, ethnicity and age profile of neighbourhoods in England and the Netherlands. Environmental Pollution, 2015; 198: 201

⁷⁵ Water pollution guide <http://water-pollution.org.uk>

The district is covered by nitrate vulnerable zones (NVZ, these are areas designated as being at risk from agricultural nitrate pollution, caused by excess nitrogen running off into water sources and groundwater source protection zones (SPZ), contaminating sources of drinking water⁷⁶. The designation of a zone means there are a set of rules farmers and landowners must follow.

Severn Trent supplies water to residents living within Cheltenham. They divide the district into two supply zones Cheltenham North and Cheltenham South, these areas do not follow Cheltenham District boundaries. Information about water quality is published for these two areas, rather than the district as a whole. During 2018 water quality in Cheltenham North met legal thresholds across all measures. In contrast some testing sites in Cheltenham South exceeded recommended levels for Coliform Bacteria and E.coli⁷⁷. E.coli is a form of Coliform Bacteria so it is unsurprising the two results were observed together, their presence is a result of fecal contamination of water.

5.4.4 Noise Pollution

For many people, a sense of tranquillity contributes to their satisfaction of living conditions and their enjoyment of the natural environment. Noise pollution can give rise to significant adverse impacts on health and quality of life. Complaints about noise pollution are used as an indicator of the effect of this on the population. Cheltenham had a rate of 3.1 complaints per 1000 population in 2015/16; this is significantly below both the national rate of 6.3 respectively but above the county rate of 2.6⁷⁸.

5.4.5 Density of Fast food outlets

Restaurants, cafés and fast food outlets are closely identified with the choice, variety and attraction of the urban environment and can contribute to the vitality and viability of town and city centres. In addition, restaurants, cafés and fast food outlets can provide important economic development and employment opportunities for significant numbers of people, and provide a service to shoppers, office workers and tourists alike. However, the rate of fast food outlets per 100,000 populations has been linked to higher obesity rates.

Figure 38 shows there were 89.6 fast food outlets per 100,000 population in Cheltenham which was higher than the county average and the rate in all other districts within Gloucestershire. Although the density of fast food was relatively high in Cheltenham, obesity levels were relatively low when compared to other districts, this illustrates that many variables that affect obesity

⁷⁶ DEFRA <https://environment.data.gov.uk/farmers/>

⁷⁷ Check my water quality, Severn Trent.

⁷⁸ Public Health England, Public health outcomes tool <http://www.phoutcomes.info/public-health-outcomes-framework#page/3/qid/1000041/pat/6/par/E12000009/ati/102/are/E10000013/iid/11401/age/1/sex/4>

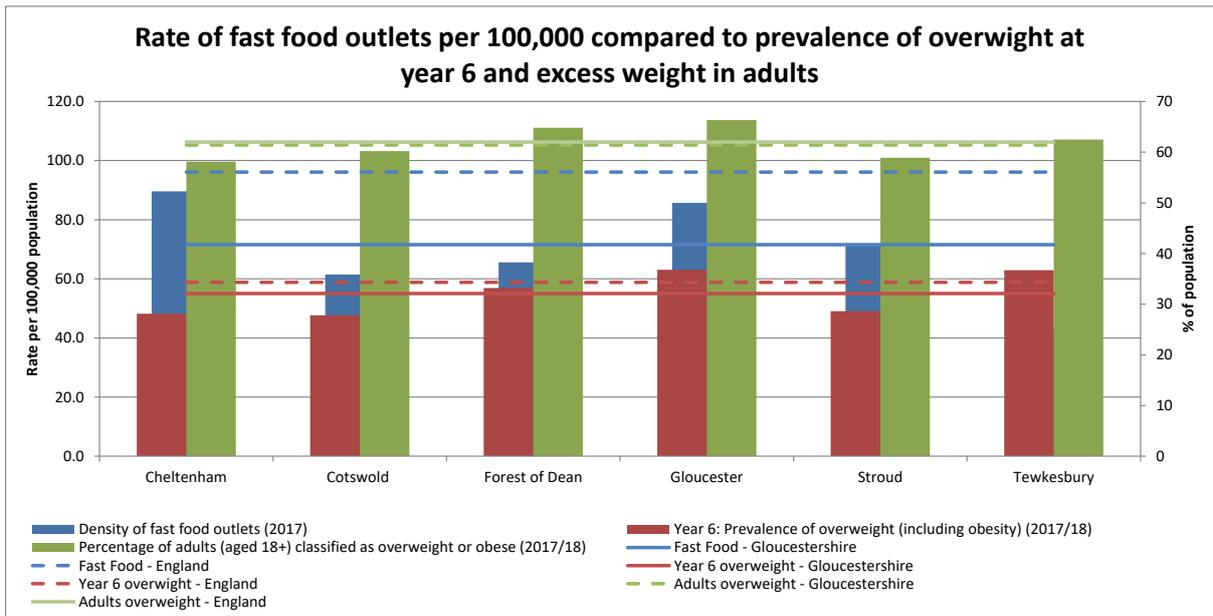


Figure 38: Rate of fast food outlets per 100,000 compared to prevalence of overweight at year 6 and excess weight in adults⁷⁹

Figure 39 shows there is considerable variation in the density of fast food outlets across Cheltenham, College ward has the highest density of outlets with 282 outlets per 100,000 population, while 4 wards have no outlets. Unsurprisingly those areas with the greatest density of fast food outlets are predominantly located in and around the town centre, while those wards with no outlets are located on the outskirts.

⁷⁹ PHOF, PHE and Density of Fast Food Outlets in England, PHE

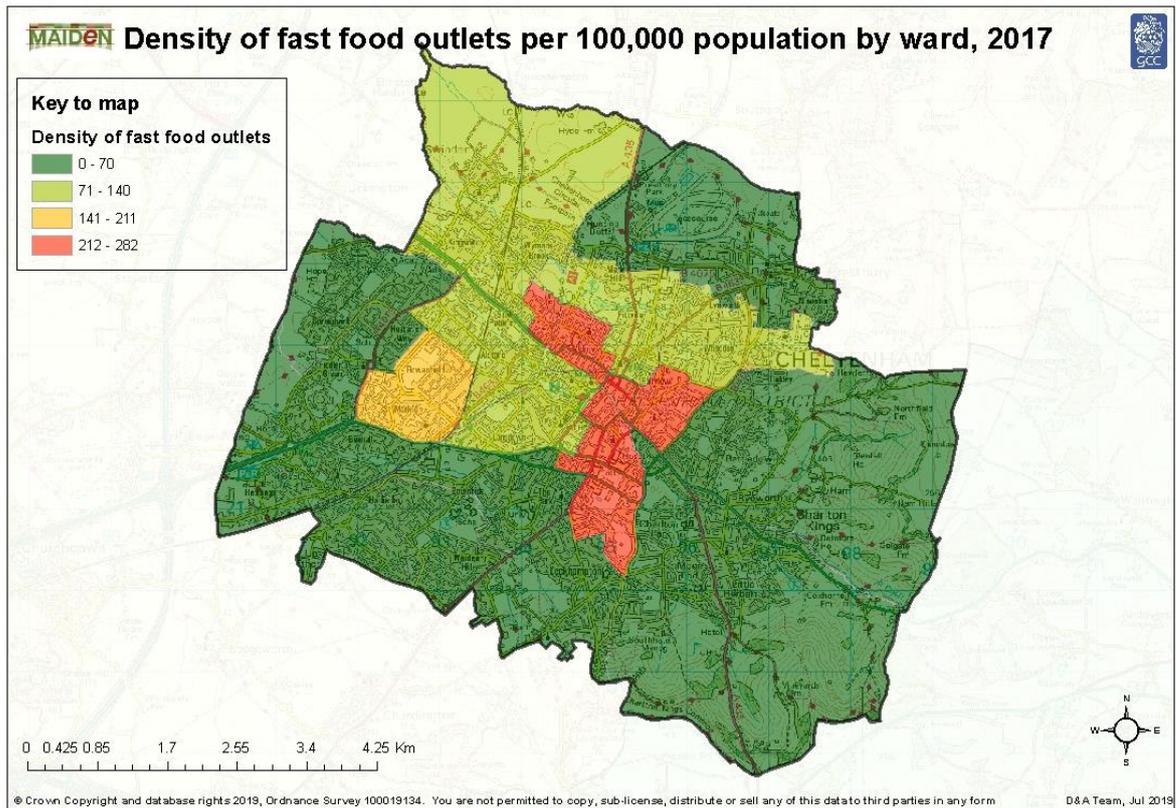


Figure 39: Density of fast food outlets per 100,000 population by ward, 2017⁸⁰

5.4.6 Fly tipping

Fly tipping has been described as an antisocial environmental crime that poses risks to human health and animal welfare, spoil relationships between neighbours and their wider community, and affect the way people feel about the place that they call home⁸¹.

In 2017/18 there were 368 fly tipping incidents reported in Cheltenham, Figure 40 shows this was lower than Gloucester, Stroud and the Forest of Dean and in line with Cotswold and Tewkesbury.

⁸⁰ Density of Fast Food Outlets in England, PHE

⁸¹ HC Deb 15 February 2016: Column 187WH

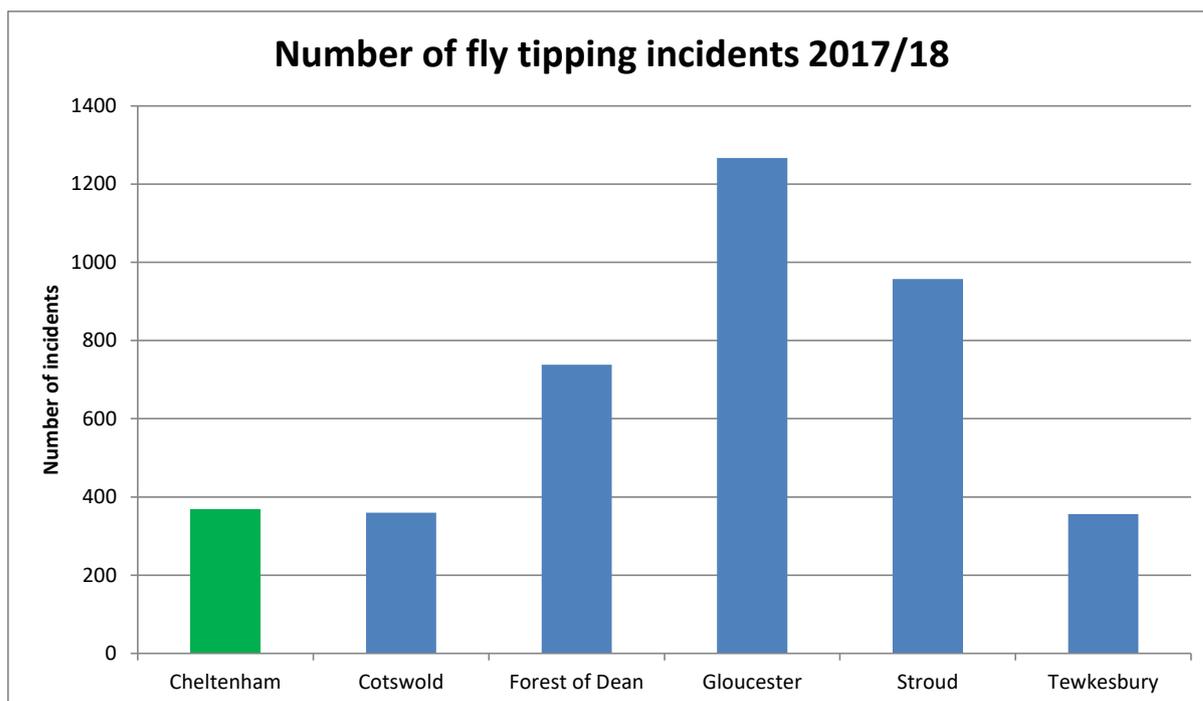


Figure 40: Number of fly tipping incidents 2017/18⁸²

5.4.7 Access to health assets and hazards

The Access to Healthy Assets and Hazards (AHAH) index is designed to allow policy/decision makers to understand which areas have poor environments for health, and to help move away from treating features of the environment in isolation.

The AHAH index is comprised of three domains:

- access to retail services (fast food outlets, gambling outlets, pubs/bars/nightclubs, off licences, tobacconists),
- access to health services (GP surgeries, A&E hospitals, pharmacies, dentists and leisure centres),
- physical environment (access to green spaces, and three air pollutants: NO2 level, PM10 level, SO2 level).

The AHAH index provides a summary of an area's relative performance on these indicators (the second and third domains conceptualised as health promoting and the first (access to retail) as health demoting). It therefore provides information on how conducive to good health an area is relative to other areas, for the specific indicators. The AHAH index is originally produced at LSOA level, however by using the percentage of the population living in LSOAs in the worst quintile it is possible to compare larger areas.

⁸² ENV24 - Fly tipping incidents and actions taken in England, DEFRA

In 2016 around 1.6% of Cheltenham’s population lived in LSOAs which were in the worst quintile in the country in terms of the AHAA index. This was considerably below the county average and all districts except Tewkesbury, suggesting that overall the residents in Cheltenham are not exposed to the most health demoting environments.

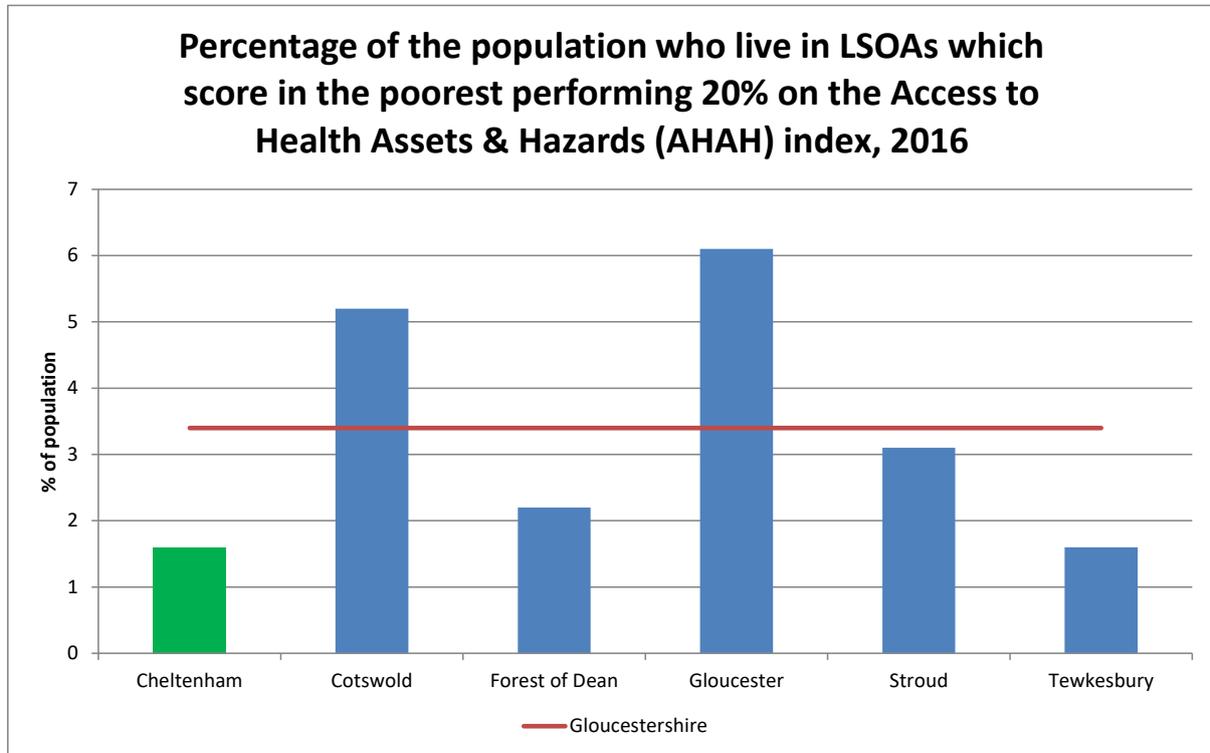


Figure 41: Percentage of the population who live in LSOAs which score in the poorest performing 20% on the Access to Health Assets & Hazards (AHAA) index, 2016⁸³

Figure 42 shows the Access to Health Assets & Hazards index at LSOA level across Cheltenham, two LSOAs (All Saints 3 and St Paul’s 3) are amongst the poorest performing 20% in the country. At the other end of the spectrum 31 LSOAs in Cheltenham fall into the best performing 20% in the country.

⁸³ Wider Determinants of Health, Public Health England

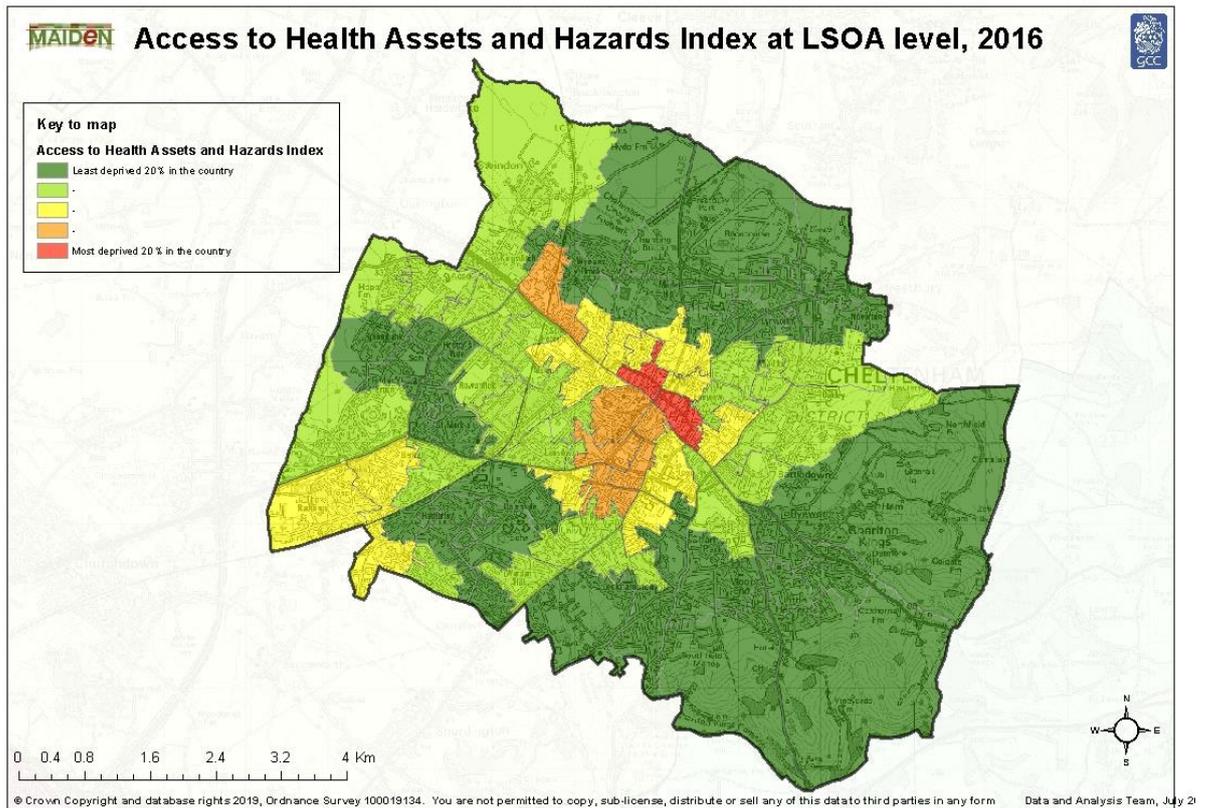


Figure 42: Access to Health Assets and Hazards Index at LSOA level, 2016⁸⁴

Figure 43 shows the domains that make up the AHAH as well as the overall index. The district's worst domain is Access to Retail Services, with 25% of LSOAs in Cheltenham falling into the most deprived 20% in the country. In contrast Cheltenham compares well in the Physical Environment domain with no LSOAs falling into the top 40% most deprived LSOAs in the country.

⁸⁴ AHAH Index, CDRC

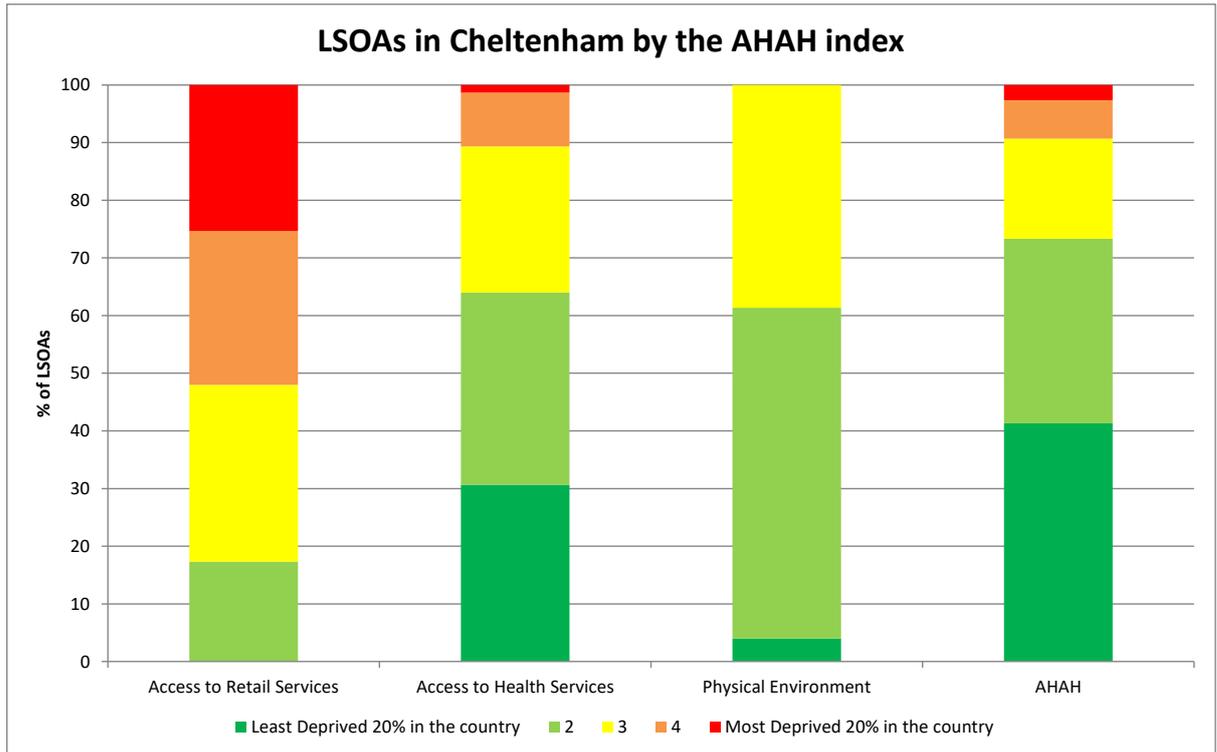


Figure 43: LSOAs in Cheltenham by the AHAH index⁸⁵

⁸⁵ *Ibid.*

Thriving People and Communities

6. Community Safety

Being a victim of crime can have very different effects on people. It causes many to feel low, helpless and taken advantage of while others become fearful of what used to be a regular activity such as going out or using public transport. This impact is most evident in the older population who may lose their confidence and become isolated. Fear of crime impacts all generations and becomes unhealthy when it diminishes their sense of freedom and personal safety. Certain crimes can also harm and divide whole communities and neighbourhoods, and this includes anti-social behaviour.

6.1 Crime and anti-social behaviour

Police recorded crime statistics provide a good measure of trends in well-reported crimes and are an important indicator of police workload. They do not, however, include crimes that have not been reported to the police or that the police decide not to record. Police recording practice is governed by the Home Office - Police Recorded Crime in England and Wales Counting Rules and the National Crime Recording Standard (NCRS). Local figures (Wards) are provided by Gloucestershire Constabulary. Regional and national figures are provided by the Office for National Statistics (ONS).

Over the past 5 years, one in every four crimes recorded by Gloucestershire Constabulary occur in Cheltenham (25%) with a similar proportion of total anti-social behaviour incidents (ASB) (23%) also occurring in Cheltenham. Compare this with Gloucestershire's other main urban local authority Gloucester which accounts for 31% of total crime and 31% of total ASB in the county.

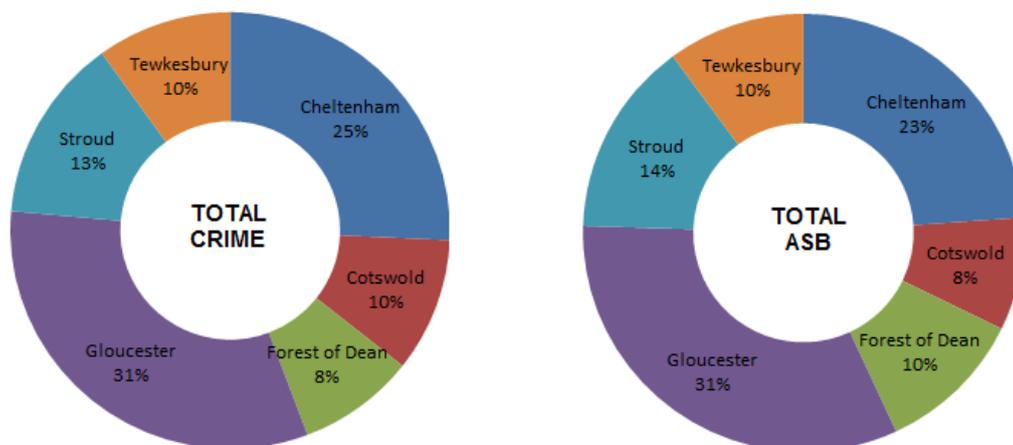


Figure 44: Recorded Crime/Incidents by Local Authority 2014 to 2019⁸⁶

⁸⁶ Gloucestershire Constabulary

Recorded numbers of crimes, victims and (ASB) in Cheltenham have decreased when comparing the last two full financial years' worth of data. (Table 2) This is in contrast to an increase in crime at a county/police force level of 3.2%. ASB incidents have decreased substantially in Cheltenham and Gloucestershire also with the police recording 16.9% and 12% fewer ASB incidents respectively when compared to the previous year.

Residential Burglary has experience a large increase in Cheltenham (25% increase) greater than the increase in Gloucestershire (11%) but less than the increase experienced in Gloucester City where residential burglary has increased by 32%. The counting of residential burglary as a crime changed from the 1st April 2017 and it may be that this change is reflected in the large increase from one year to the next (17/18 totals during the first year of the new counting method). In England and Wales, residential burglary has decreased by 4.4% when comparing 2017/18 and 2018/19 totals and the South West Region has experienced a decrease of 13% which is in stark contrast to local residential burglary figures. According to figures released by the Office for National Statistics, the greatest percentage increase of residential burglary by police force area in the country is Gloucestershire (11% increase)⁸⁷.

⁸⁷ ONS Crime in England and Wales Police Force Area Tables
(<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/datasets/policeforceareadatable>)

Table 2: Police Recorded Crime by Type⁸⁸

Cheltenham Totals	2017/18	2018/19	Diff	%age Change	
All CRIME	8619	8286	-333	-3.9	●
All Victims	6662	6546	-116	-1.7	●
All ASB	5454	4534	-920	-16.9	●
Crimes of Local Concern	3196	2992	-204	-6.4	●
Serious Acquisitive Crime	1876	1885	9	0.5	●
Assault with less serious injury	1074	1033	-41	-3.8	●
All Criminal Damage	1073	1026	-47	-4.4	●
Burglary Residential	789	988	199	25.2	●
Shoplifting	995	832	-163	-16.4	●
Vehicle Crime	995	819	-176	-17.7	●
All Victims 19 And Under	630	716	86	13.7	●
Theft from vehicle	861	701	-160	-18.6	●
Criminal Damage Vehicles	513	460	-53	-10.3	●
Pedal Theft	320	371	51	15.9	●
Sexual Offences	208	228	20	9.6	●
Criminal Damage Other	192	227	35	18.2	●
All Victims 75 And Over	239	227	-12	-5.0	●
Criminal Damage Dwelling	223	215	-8	-3.6	●
Harassment	134	205	71	53.0	●
Burglary - Business and Community	169	179	10	5.9	●
Theft OF Motor Vehicle	134	118	-16	-11.9	●
Criminal Damage Non Dwelling	115	93	-22	-19.1	●
Serious Violent Crime	96	87	-9	-9.4	●
All Robbery	92	78	-14	-15.2	●
Racially or Religiously Aggravated Crime	82	51	-31	-37.8	●
Class A Supply	54	44	-10	-18.5	●
Robbery Business Property	15	11	-4	-26.7	●

Numbers of young victims of crime have increased by almost 14% in Cheltenham and have also increased by 9% in Gloucestershire. Recorded pedal theft has also increased in Cheltenham but (proportionally) not at as great an increase when compared to Gloucester City (48%), Cotswolds (32%) and Gloucestershire (29%). Cheltenham accounts for 37% of all pedal thefts in Gloucestershire when looking at the past five years' worth of crime totals.

With the exception of last year compared to the year before, Figure 45 shows that local crime rates over the past 6 financial years have been steadily increasing. The rate rise experienced locally is not as stark a rise as the national rate which, in 2013/14 England and Wales experienced a similar crime rate to Cheltenham but five years later it is considerably higher.

⁸⁸ Gloucestershire Constabulary

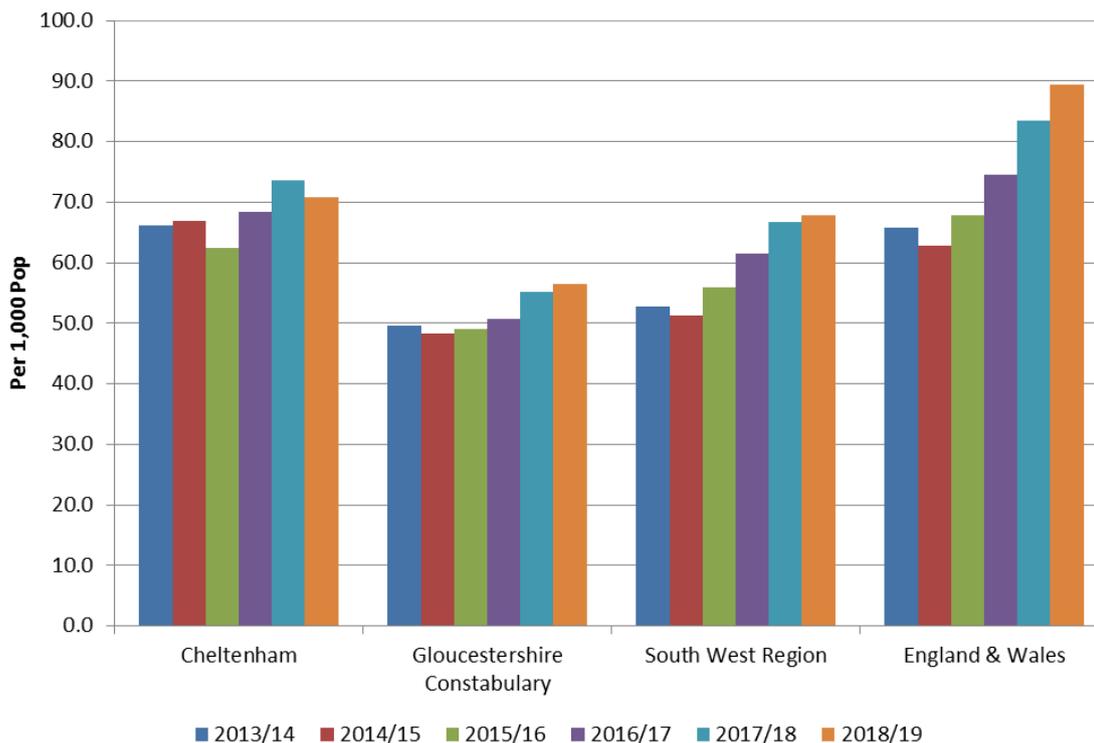


Figure 45: Total Recorded Crime Rates⁸⁹

Unfortunately we cannot review residential burglary in the same way as Figure 45 does with total crimes rates due to a change in definition and recording practice between residential and business burglary from 1st April 2017. It is possible to look at *all* burglary trends for the previous six financial years and the following analysis is based on total burglary (all burglary includes residential and business burglary – distraction burglary is classed as residential burglary).

⁸⁹ Gloucestershire Constabulary and ONS

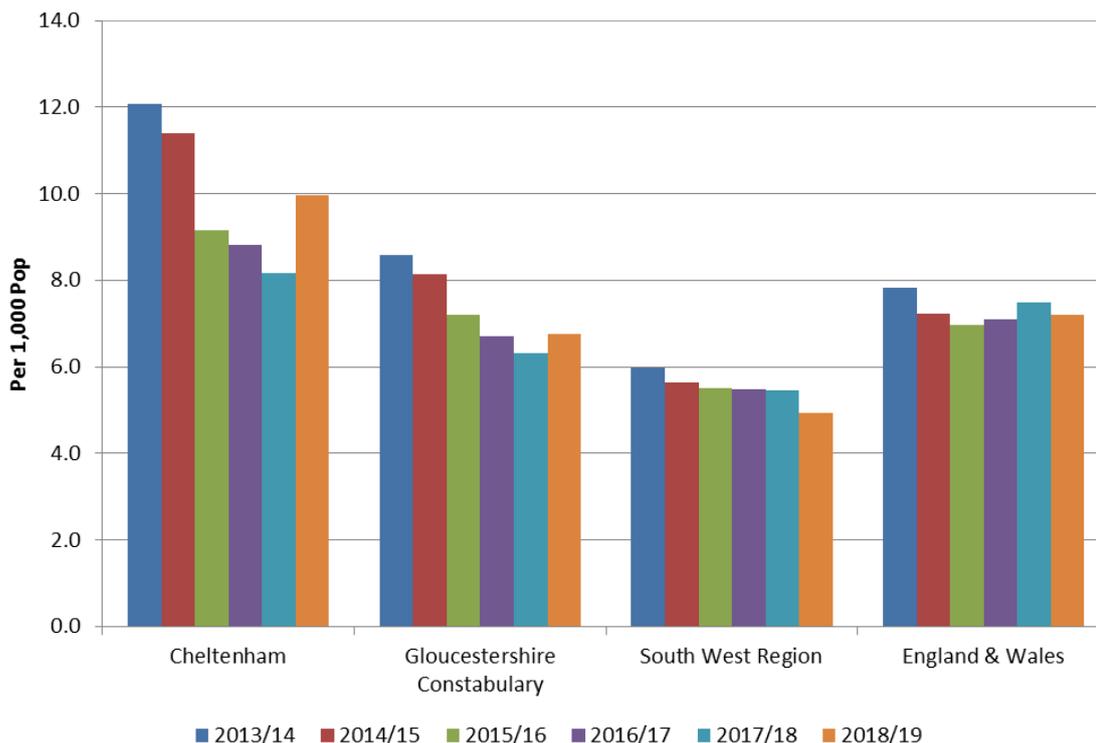


Figure 46: Total Recorded Burglary Rates⁹⁰

Rates of burglary have been decreasing locally year on year until the increase in 2018/19. These local increases in the borough and county are in contrast to the decreases experienced regionally and nationally. Over the past financial year, the highest burglary rates in Cheltenham are in the following wards:

- St. Mark's Ward
- Lansdown Ward
- St. Peter's Ward
- College Ward

Table 3 shows the burglary rankings for each year (from 1 to 20, 20 being the lowest ranked with the lowest burglary rate). The highest ranked burglary area has moved over the years. St. Pauls was one of the highest ranked wards for burglary in the borough between 2007/08 to 2010/11 but is now one of the lowest ranked. Swindon Village experienced a three year period (2014/15 to 2016/17) of being the highest ranked ward in Cheltenham for all burglary. For the past two financial years, four wards have occupied the top four highest burglary ranks based on burglary rate and are the four wards listed earlier.

⁹⁰ *Ibid*

Table 3: Burglary Rankings Over Time (top 4 highlighted each year)⁹¹

Ward Name / Financial Year	Total Burglary Rankings for Cheltenham Wards Based on Rate Per 1,000 Pop (1 = Highest Rate)											
	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19
St. Mark's Ward	4	11	13	7	8	6	6	7	6	9	2	1
Lansdown Ward	6	5	3	3	2	1	5	5	2	3	3	2
St. Peter's Ward	5	3	4	2	1	2	1	2	5	6	1	3
College Ward	10	7	11	6	6	5	8	3	3	8	4	4
Pittville Ward	7	4	1	4	3	7	3	6	4	2	8	5
All Saints Ward	3	8	8	9	7	10	13	11	7	4	6	6
Swindon Village Ward	8	6	6	5	5	4	2	1	1	1	5	7
Park Ward	12	16	9	8	9	8	12	10	9	10	10	8
Benhall and the Reddings Ward	17	17	14	17	18	16	17	18	14	19	20	9
Charlton Park Ward	11	13	15	14	15	15	10	19	16	15	7	10
Warden Hill Ward	19	20	20	19	19	20	16	15	15	14	19	11
Springbank Ward	9	2	10	15	10	9	9	12	12	20	9	12
Leckhampton Ward	15	15	16	18	20	17	15	20	11	13	15	13
St. Paul's Ward	1	1	2	1	4	3	4	4	8	12	11	14
Battledown Ward	13	12	5	11	12	14	19	13	17	11	13	15
Oakley Ward	16	19	19	16	16	12	14	9	19	16	16	16
Prestbury Ward	14	14	12	13	14	13	11	8	18	7	14	17
Hesters Way Ward	2	9	7	10	11	11	7	14	13	17	12	18
Charlton Kings Ward	18	10	17	12	17	19	18	17	20	5	18	19
Up Hatherley Ward	20	18	18	20	13	18	20	16	10	18	17	20

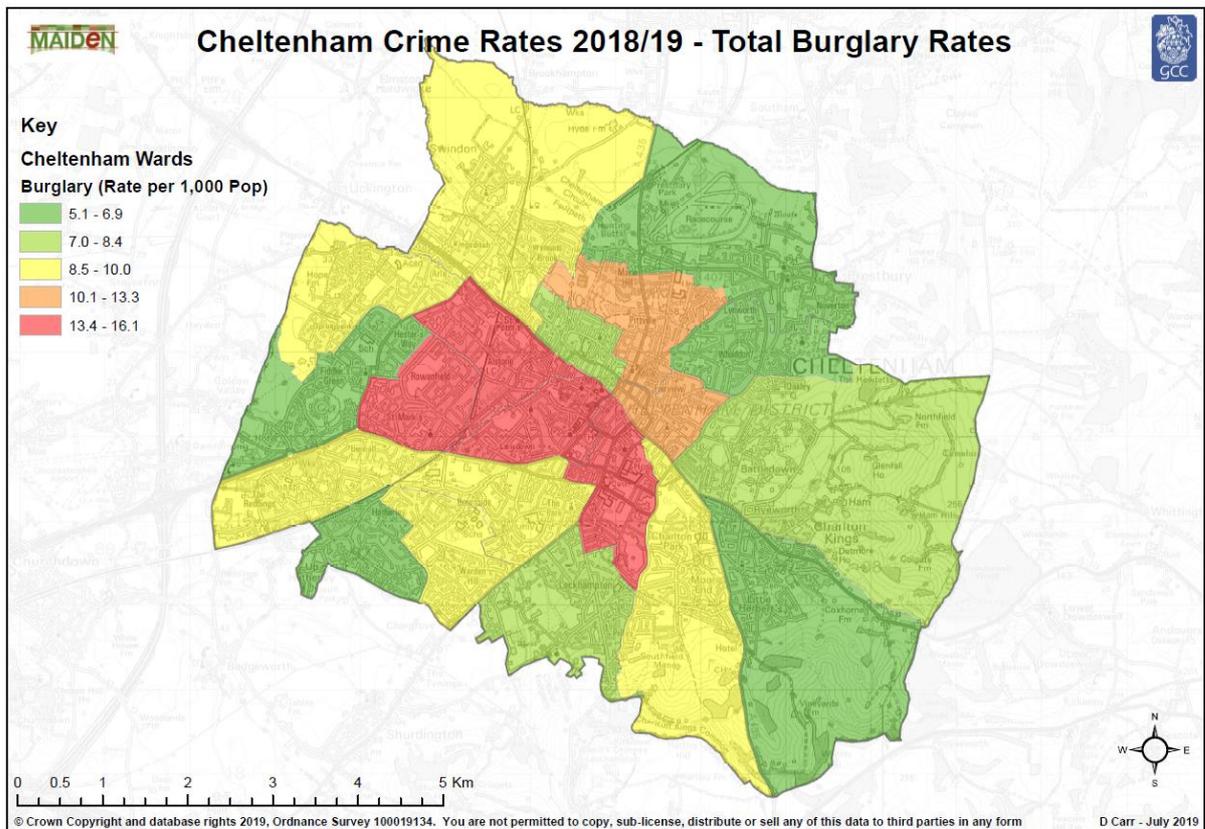


Figure 47: Burglary Rates by Ward in Cheltenham 2018/19

⁹¹ Gloucestershire Constabulary

Prevalence of hate crime (where the perpetrator is motivated by hostility or demonstrates hostility towards the victim's disability, race, religion, sexual orientation or transgender identity) over the last four years where data is available (2014/15 to 2017/18) has been increasing locally and nationally. Nationally published data for 2018/19 rates will not be released by the ONS until mid-October 2019 but it was important to display the decreasing rate in Cheltenham in 2018/19 based on Gloucestershire Constabulary figures. Despite the decrease in Cheltenham from 2017/18 to 2018/19 the prevalence here is still higher than the 2017/18 rates for the South West region and for Gloucestershire. For the other five local authorities in Gloucestershire, the hate crime rate from 2017/18 to 2018/19 has either stayed level or has increased⁹².

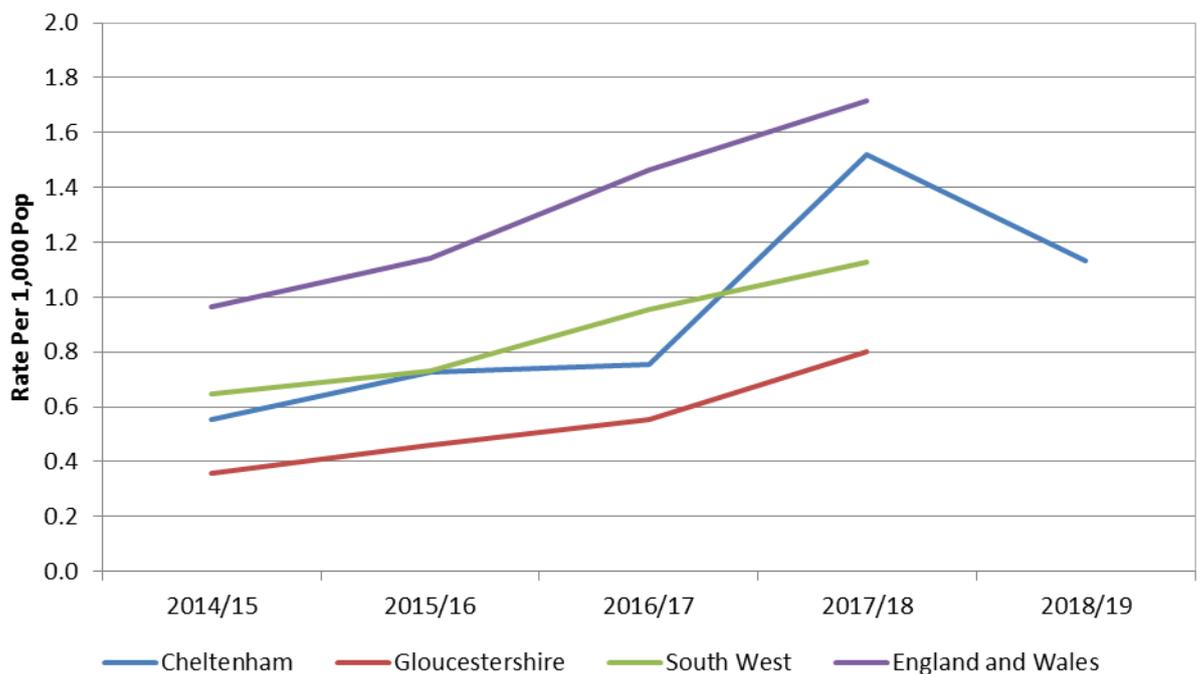


Figure 48: Hate Crime Rates⁹³

For the past three financial years, knife crime rates in Cheltenham have reduced slightly. This is in stark contrast to knife crime rates increasing nationally. Cheltenham's knife crime rate has been below the national rate for the past five years but has been higher than the knife crime rate for the South West Region and, until 2018/19, has been higher than the Gloucestershire rate. During 2018/19 Cheltenham has experienced a similar knife crime rate similar to Forest of Dean and Tewkesbury local authorities. Prevalence in Gloucester City was three times greater than that of Cheltenham during 2018/19.

⁹² *Ibid*

⁹³ Gloucestershire Constabulary and ONS

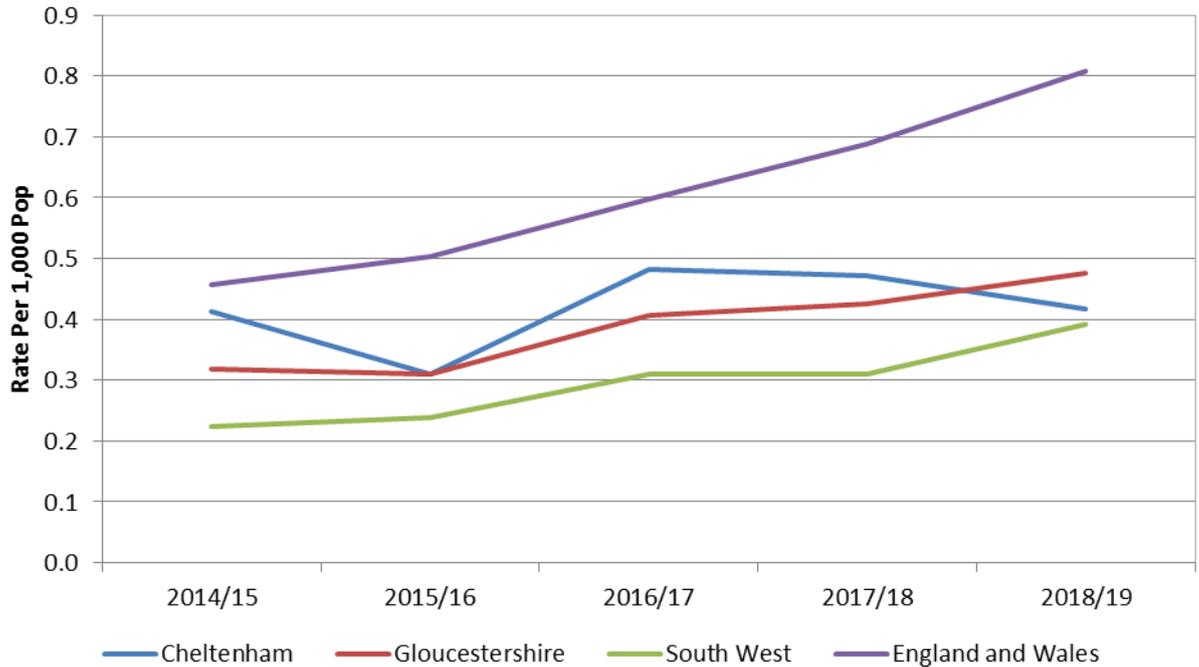


Figure 49: Knife Crime Rates⁹⁴

6.2 Domestic Abuse

Domestic Abuse and its prevalence in society is difficult to ascertain due to the number of incidents of abuse and/or violence that go unreported to the relevant agencies but studies show that:

- One woman in four experiences domestic violence in her lifetime⁹⁵
- Two women are killed each week by a current or former partner in England and Wales⁹⁶
- In the year ending March 2016, 1.2 million women reported experiences of domestic abuse in England and Wales⁹⁷

A Multi Agency Risk Assessment Conference (MARAC) is a victim focused information sharing and risk management meeting attended by all key agencies where **high risk domestic abuse cases** are discussed. The role of the MARAC is to facilitate, monitor and evaluate effective information sharing to enable appropriate actions to be taken to increase public safety. In a single meeting, MARAC combines up to date risk information with a timely assessment of a victim's needs and links those directly to the provision of appropriate services for all those involved in a domestic abuse case: victim, children and perpetrator. The following analysis uses statistics taken from MARAC. One of the main aims

⁹⁴ *Ibid*

⁹⁵ Office for National Statistics (2016) Focus on Violent Crime and Sexual Offences, 2014/15

⁹⁶ Office for National Statistics (2016) Compendium – Homicide

⁹⁷ Office for National Statistics (2016) Domestic Abuse in England and Wales: year ending March 2016

of MARAC is reduce repeat victimisation. Figure 50 shows the percentage of MARAC cases discussed each month that are repeat cases. Overt the 12 month period 2018/19, MARAC cases in Cheltenham Local Policing Area have, on average, a 40% repeat rate compared against Gloucestershire's 35% repeat rate. During 2016/17 and 2017/18, the repeat rate of MARAC in Cheltenham was 35%.

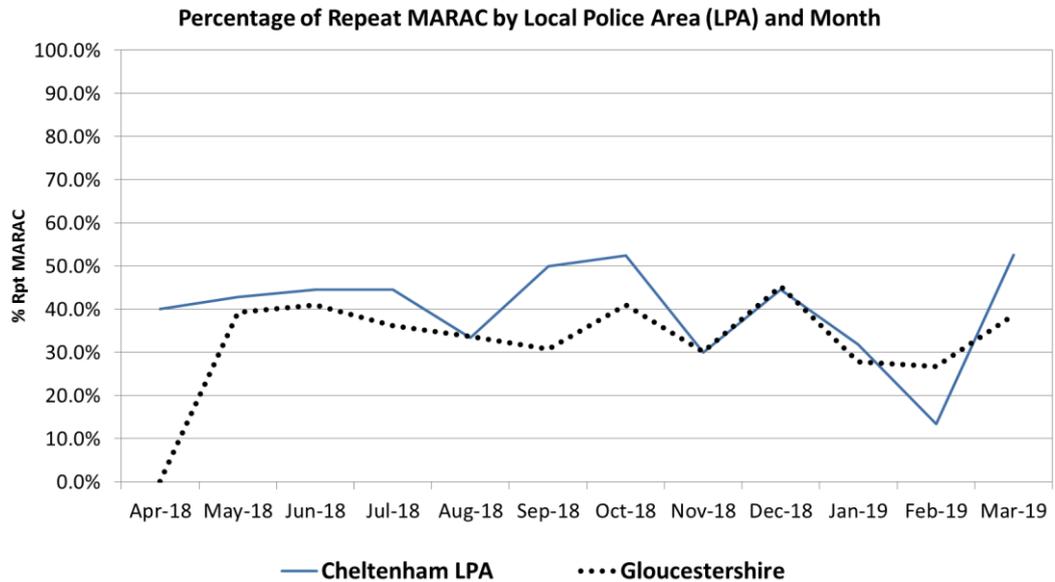


Figure 50: MARAC Repeat Cases

Numbers of children involved in a MARAC case are recorded and monitored and Figure 51 shows the percentage of all children affected by MARAC Domestic Abuse and which local policing area they are based in. Approximately one in four children in Gloucestershire during the last financial year came from Cheltenham LPA.

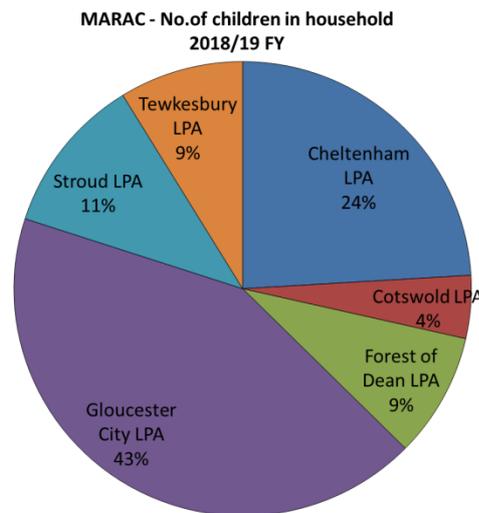


Figure 51: MARAC, where affected children live 2018/19

6.3 Offending

Managing reoffending rates and effective integrated offender management is an essential tool to help reduce crime in society. Anecdotal evidence suggests that only a small percentage of criminals perpetrate a large proportion of overall crimes and that sound management of these perpetrators will reduce crime and the damaging effect it has on society. On the last official count (2016/17), Cheltenham had 73 of the county's 307 young offenders (24% of county total) – 26 of those individuals are proven reoffenders (23% of county total)⁹⁸. More up to date figures from Gloucestershire's Youth Offending Team indicate there are now 43 young offenders in Cheltenham (2018 calendar year) with 18 of those offenders in St. Peter's Ward. Figure 52 shows the proportions of young offenders and reoffenders in Gloucestershire according to the most recent published figures by the Ministry of Justice (MoJ).

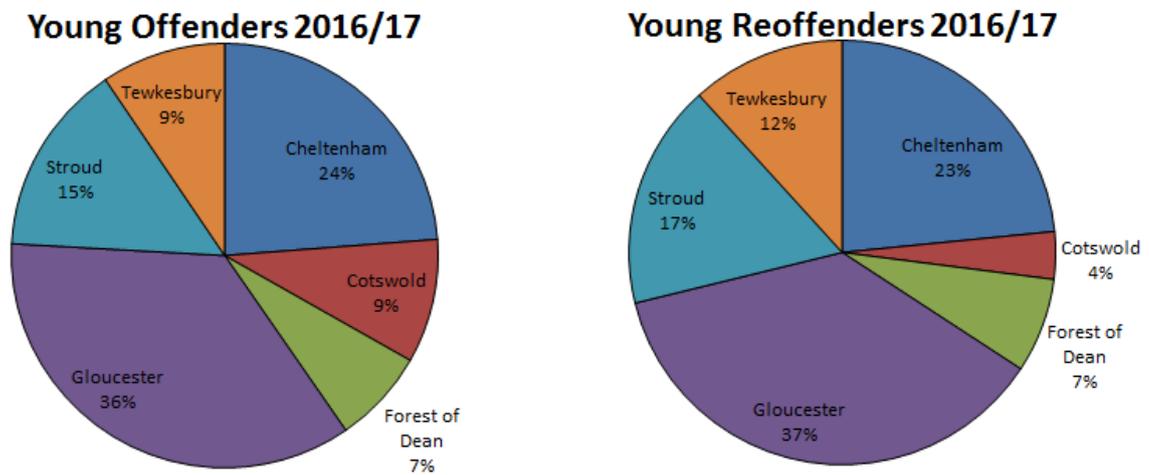


Figure 52: Proportion of Young Offenders and Reoffenders in Gloucestershire in 2016/17

According to adult reoffending data from the MoJ, 48.5% of offenders living in Gloucestershire who have committed theft crimes go on to reoffend. Also a third of offenders who possess weapons go on to reoffend⁹⁹. On the last official count (2016/17), Cheltenham had 711 of the county's 3,397 adult offenders (21% of county total) – 195 of those individuals are proven reoffenders (23% of county total)¹⁰⁰. Figure 53 shows the proportions of adult offenders and reoffenders in Gloucestershire according to the most recent published figures by the Ministry of Justice (MoJ).

⁹⁸ Proven reoffending geographical data tool, April 2005 to March 2017, England and Wales, Ministry of Justice

⁹⁹ *Ibid*

¹⁰⁰ *Ibid*

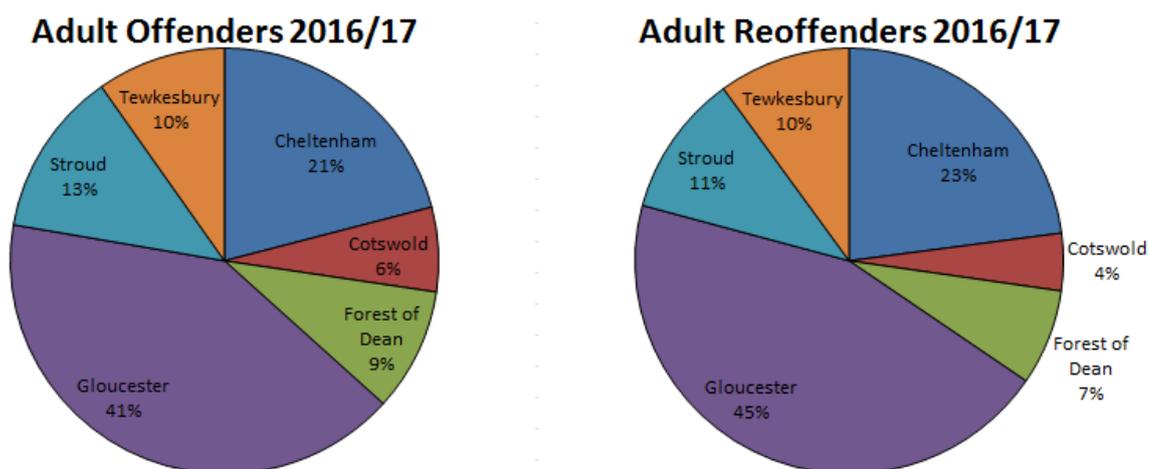


Figure 53: Proportion of Adult Offenders and Reoffenders in Gloucestershire in 2016/17

7. Healthy Lifestyles

Lifestyle is an important driver of health outcomes. A healthy diet, being active, not smoking, stopping smoking, not drinking too much alcohol and maintaining a healthy body weight are all proven ways to stay healthy and avoid many health problems. Increasing the numbers of people who have healthier lifestyles would have major impacts on the health and wellbeing of people living in Cheltenham.

7.1 Obesity

The UK is experiencing an epidemic of obesity affecting both adults and children.

7.1.1 National Childhood Measurement Programme

There is concern about the rise of childhood obesity and the implications of such obesity persisting into adulthood. The risk of obesity in adulthood and risk of future obesity-related ill health are greater as children get older. Studies tracking child obesity into adulthood have found that the probability of overweight and obese children becoming overweight or obese adults increases with age. The health consequences of childhood obesity include: increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.

In 2017/18 the prevalence of obesity in Reception age children in Cheltenham was the lowest in the county at 8.9% (105) compared to a county percentage of 9.9% (653). Despite being low in the county this may be an area to focus on as the prevalence has increased year on year from 2012/13 onwards as shown in Figure 54. Following the national trend, the prevalence of obesity of children when they reach Year 6 is much higher than in reception. In 2017/18

Cheltenham had the second lowest prevalence rate of obesity in Year 6 children at 15.2% (161) and the lowest prevalence was in the Cotswolds at 13.1% (105). As can be seen in Figure 55 Cheltenham is consistently lower than the county prevalence which was 17.8% (1,102) in 2017/18. There appears to be some link between deprivation and obesity; Figure 56 shows areas) high rates of Year 6 Five of Cheltenham’s eight most deprived neighbourhoods have recorded higher than national rates of obesity in Year 6 children over the last 5 years, but the areas with the highest prevalence of obesity in Y6 children were in Quintile 2.

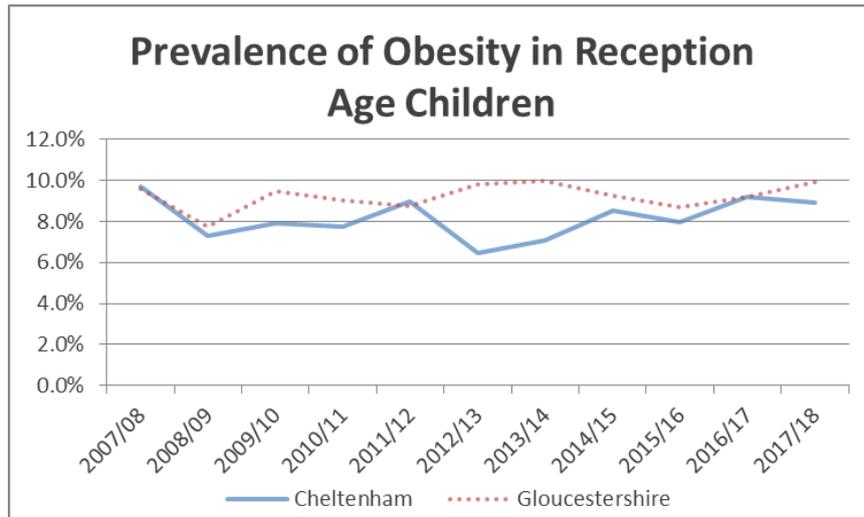


Figure 54: Prevalence of obesity in reception age children¹⁰¹

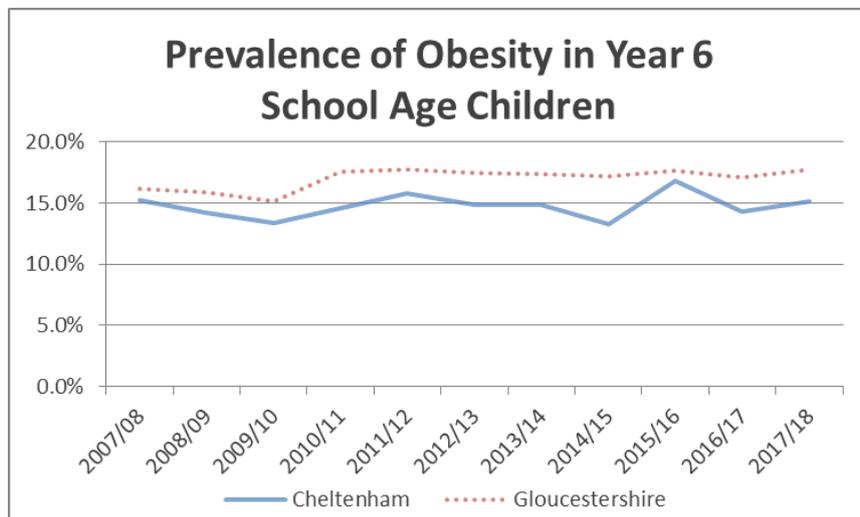


Figure 55: Prevalence of obesity in year 6 school age children¹⁰²

¹⁰¹ National Child Measurement Programme, Gloucestershire County Council

¹⁰² Ibid

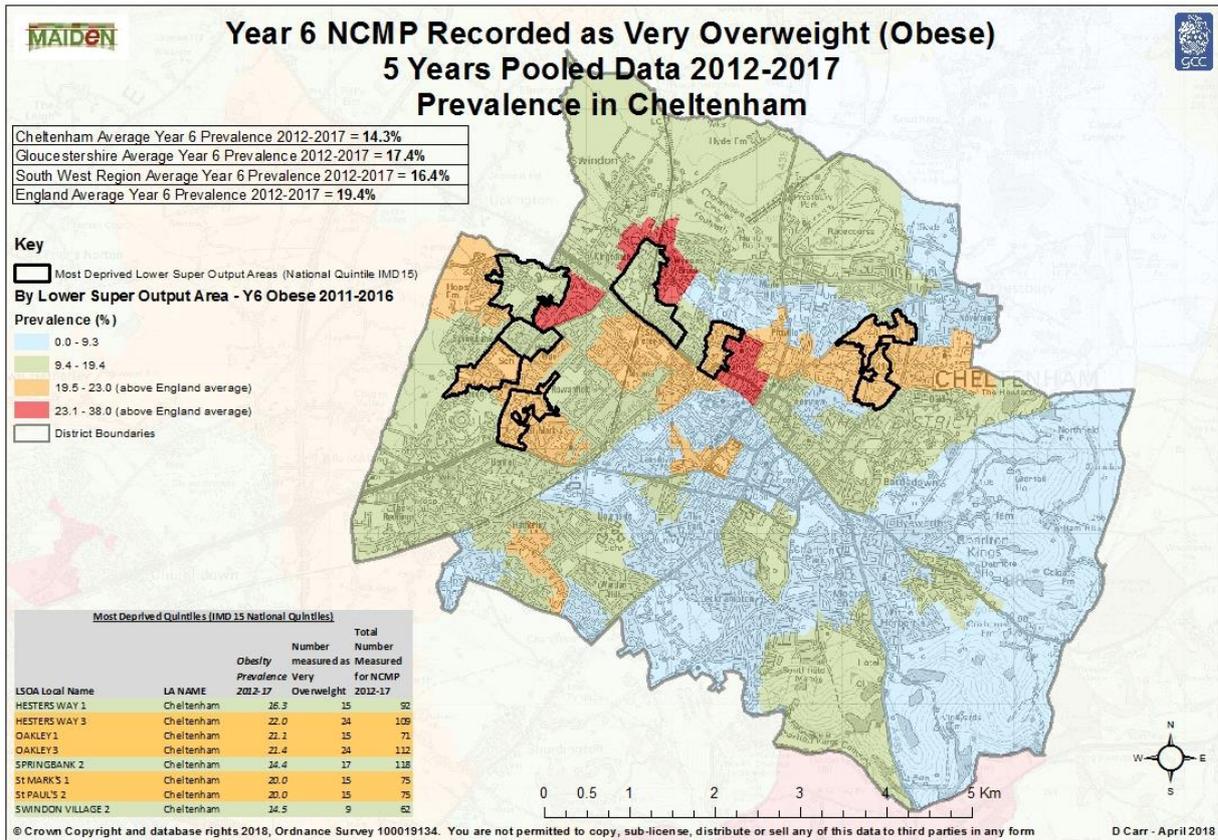


Figure 56: Year 6 prevalence of obesity 2012-2017¹⁰³

7.1.2 Obesity in adults

Obesity is a priority area for Government. The Government's "Call to Action" on obesity (published Oct 2011) included national ambitions relating to excess weight in adults, which is recognised as a major determinant of premature mortality and avoidable ill health.

In 2017/18 58% of adults in Cheltenham were classified as overweight or obese. This is lower than the county (61%), England (62%) and other districts as can be seen in Figure 57. As seen in children above, despite being the lowest area the percentage has been gradually increasing year-on-year in line with the national trend.

¹⁰³ *Ibid.*

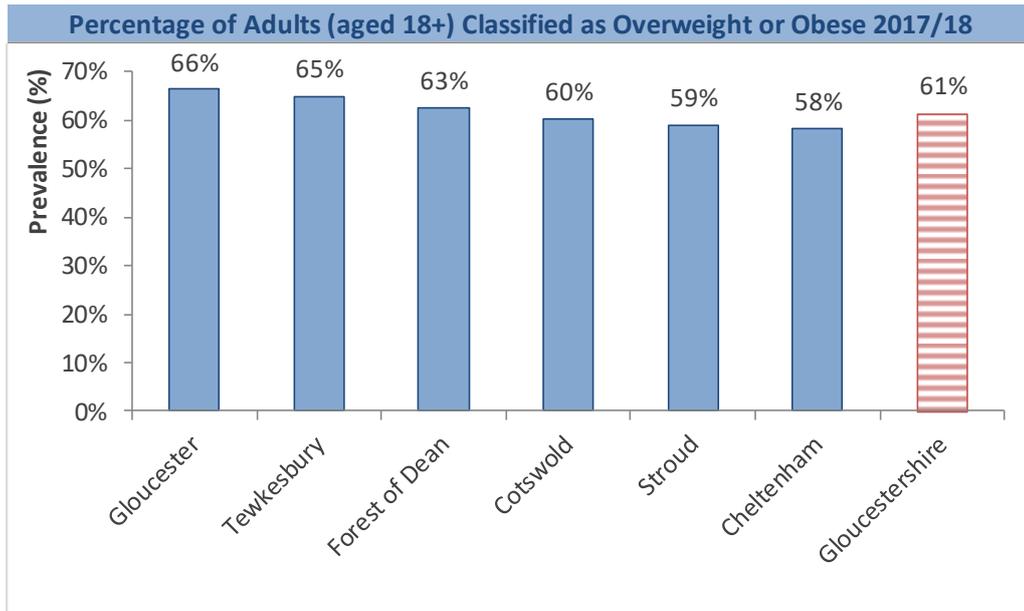


Figure 57: Percentage of adults (aged 18+) classified as overweight or obese 2017/18¹⁰⁴

Many indicators available on the Public Health Outcomes Framework Fingertips tool relate to obesity levels and although they show small changes over time it's likely they are part of the reason obesity rose from 55% to 58% between 2015/16 and 2017/18. The percentage of physically active adults in Cheltenham fell from 74% to 72% and the proportion of adults meeting the recommended '5-a-day' on a 'usual day' fell from 60% to 58% over the same time period. The percentage of physically active adults in all districts can be seen in Figure 58 which shows Cheltenham is just higher than the county. There does not appear to be a relationship between physically active adults and the availability of fitness facilities per 100,000 population.

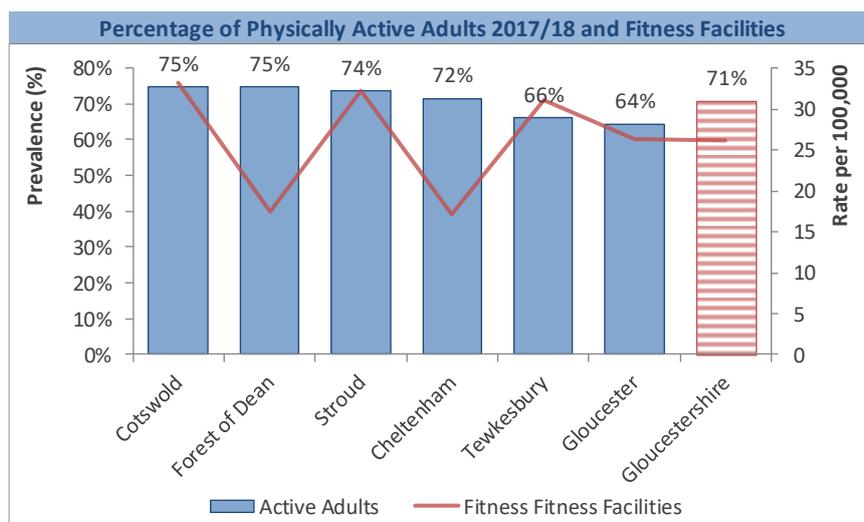


Figure 58: Percentage of physically active adults 2017/18 and fitness facilities¹⁰⁵

¹⁰⁴ Ibid.

7.2 Childhood wellbeing

Emotional health and wellbeing of young people can influence their cognitive development and learning, as well as their physical and social health

The Gloucestershire Online Pupil Survey (OPS) was first carried out in 2006, and has been repeated every two years, with the latest survey conducted in the Spring Term of 2018. The OPS is commissioned by Gloucestershire County Council (GCC) and run by an independent research company. The purpose of the OPS is to provide information on the health and wellbeing of children and young people attending schools and colleges in Gloucestershire, with the aim of informing work, both in and outside of school, to improve the lives and outcomes of the county's young people. The OPS uses age appropriate questions and is carried out in specific year groups in primary (Years 4, 5 and 6), secondary (Years 8 and 10), and post 16 (Year 12/Further Education) settings. There is also a version of the survey for children and young people with learning difficulties. The survey covers a range of areas, including young people's lifestyle choices and behaviours, emotional wellbeing, relationships, school experience, and safety. The survey has grown over time and participation by schools and individual pupils remains voluntary. Gloucestershire's Further Education colleges (FE) took part for the first time in 2012 and independent schools joined in 2014.

Students were asked to score their wellbeing by indicating how far they agreed or disagreed with a series of statements. The wellbeing of year 10 students is similar across the county, each district falling within the range of 46 and 48 out of a maximum of 70. Cheltenham has the highest average wellbeing score at 48 as can be seen in Figure 59 and Table 4.

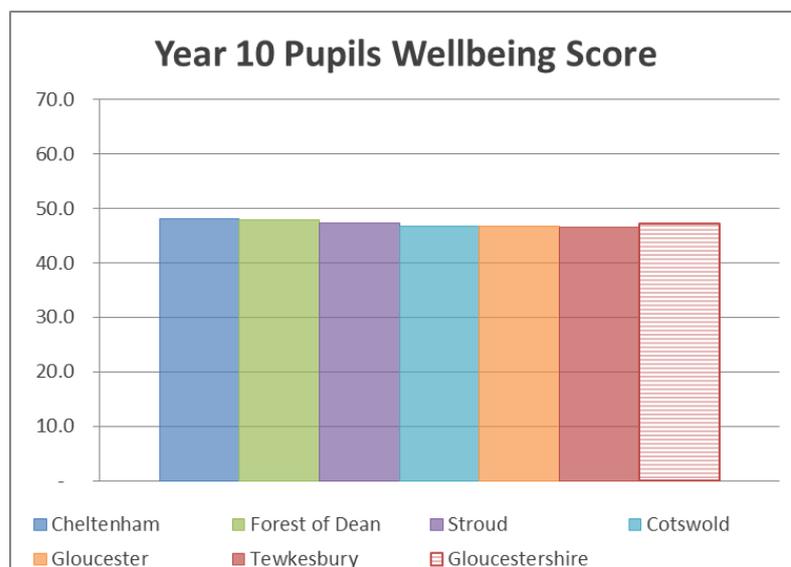


Figure 59: Year 10 pupils wellbeing score¹⁰⁶

¹⁰⁵ *Ibid*

¹⁰⁶ Online Pupil Survey, Gloucestershire County Council

Table 4: Year 10 pupils wellbeing score¹⁰⁷

Year 10 Pupil Wellbeing Score							
Year	Cheltenham	Forest of Dean	Stroud	Cotswold	Gloucester	Tewkesbury	Gloucestershire
2016	49.0	48.4	48.1	48.0	48.3	48.0	48.3
2018	48.0	47.8	47.3	46.8	46.7	46.6	47.2

7.3 Alcohol

Alcohol consumption is a contributing factor to hospital admissions and deaths from a diverse range of conditions. Alcohol misuse is estimated to cost the NHS about £3.5 billion per year and society as a whole £21 billion annually.

7.3.1 Alcohol and young people

Previous research has highlighted the fact that young people who start drinking alcohol at an early age tend to drink more frequently and more in total than those who start drinking later in their life; as a result, they are more likely to develop alcohol problems in adolescence and adulthood. As a result, in 2009 The Chief Medical Officer for England issued guidance that young people under 15 should not drink alcohol at all.

The percentage of Year 10 pupils self-disclosing that they drink at least monthly in the Online Pupil Survey has decreased year on year in Gloucestershire from 52.4% in 2010 to 34.8% in 2018. Figure 60 shows in 2018 the percentage of pupils drinking in Cheltenham was 34.1%, the second lowest district in the county, the lowest being Gloucester at 27.0%.

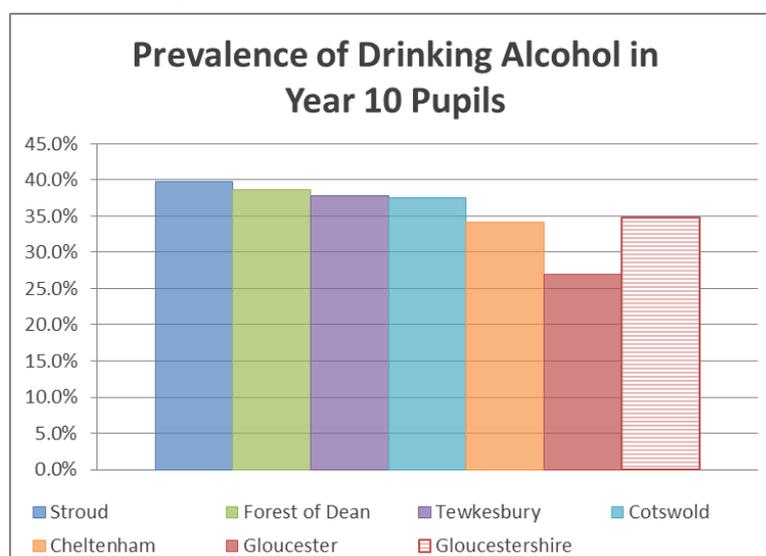


Figure 60: Prevalence of drinking alcohol in year 10 pupils¹⁰⁸

¹⁰⁷ *Ibid.*

¹⁰⁸ *Ibid.*

7.3.2 Alcohol in adults

Although drinking alcohol is lower than the county average for children the picture is very different for adults. Cheltenham has the highest rate per 100,000 of adults admitted to hospital for alcohol-related conditions of 694 which is significantly higher than the county rate at 590. The rate decreased slowly in line with the rest of the county between 2011/12 (885) and 2017/18 (694).

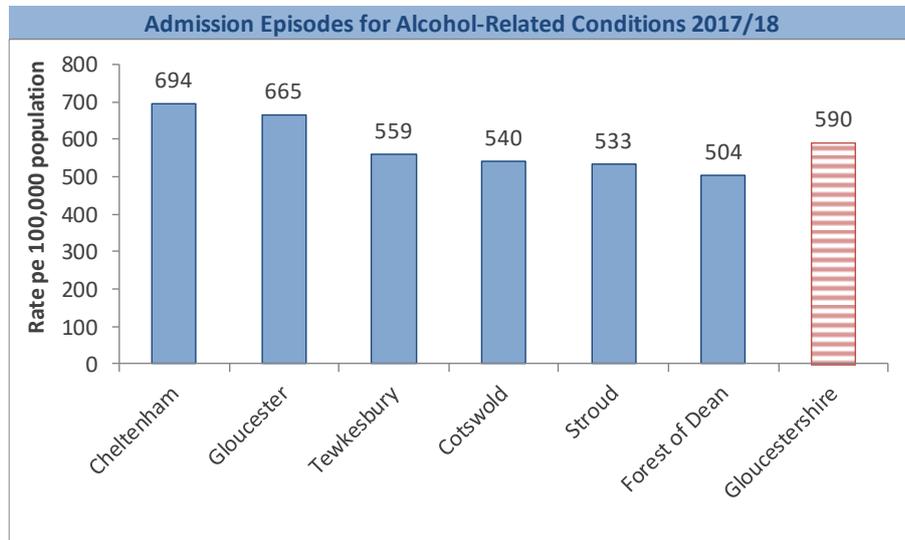


Figure 61: Admission episodes for alcohol-related conditions 2017/18¹⁰⁹

7.4 Smoking

Smoking is the most important cause of preventable ill health and premature mortality in the UK. Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease (COPD) and heart disease. It is also associated with cancers in other organs, including lip, mouth, throat, bladder, kidney, stomach, liver and cervix.

7.4.1 Smoking and young people

The Tobacco Control Plan (July 2017) highlights the importance of reducing the number of young people taking up smoking, as it is "an addiction largely taken up in childhood". One of the national ambitions set out in the document was to reduce rates of 15 year old regular smokers to 3% by 2022.

The percentage of Year 10 pupils who self-disclose that they smoke in the Online Pupil Survey has decreased year on year between 2010 and 2018 in Gloucestershire and all districts but Cotswolds and Forest of Dean. In 2018 the percentage of pupils smoking in Cheltenham was 8.4%, the second lowest district in the county, the lowest being Gloucester at 5.3%. All districts can be seen in Figure 62.

¹⁰⁹ Public Health Outcomes Framework, Public Health

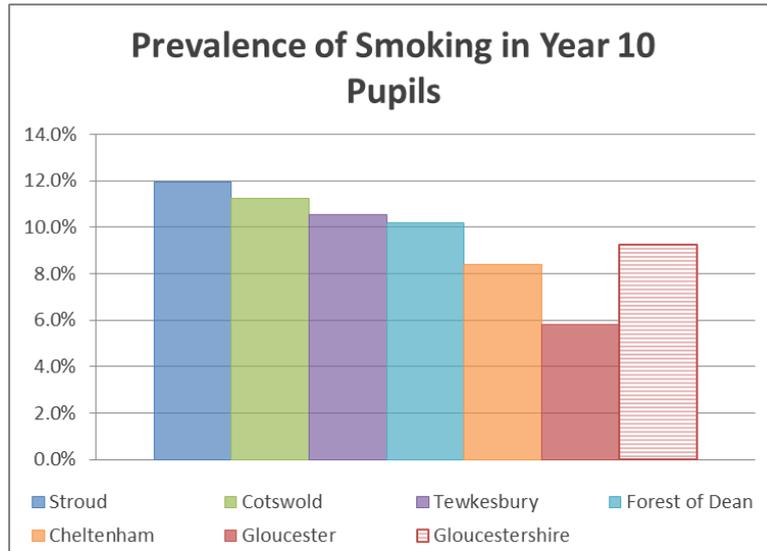


Figure 62: Prevalence of smoking in year 10 pupils¹¹⁰

7.4.2 Smoking in adults

Smoking remains low for Cheltenham adults. Figure 63 shows Cheltenham has the lowest percentage of female smokers (10.1%) and the second lowest percentage of male smokers (11.0%) compared to the county and other districts. The proportion of females in Cheltenham that smoke had been decreasing year on year from 17.1% in 2013 to 8.5% in 2016 where it increased to 10.1% in 2017. This may be an area to observe to ensure it does not continue to increase. All other districts with the exception of The Forest of Dean also saw an increase in female smokers in 2017.

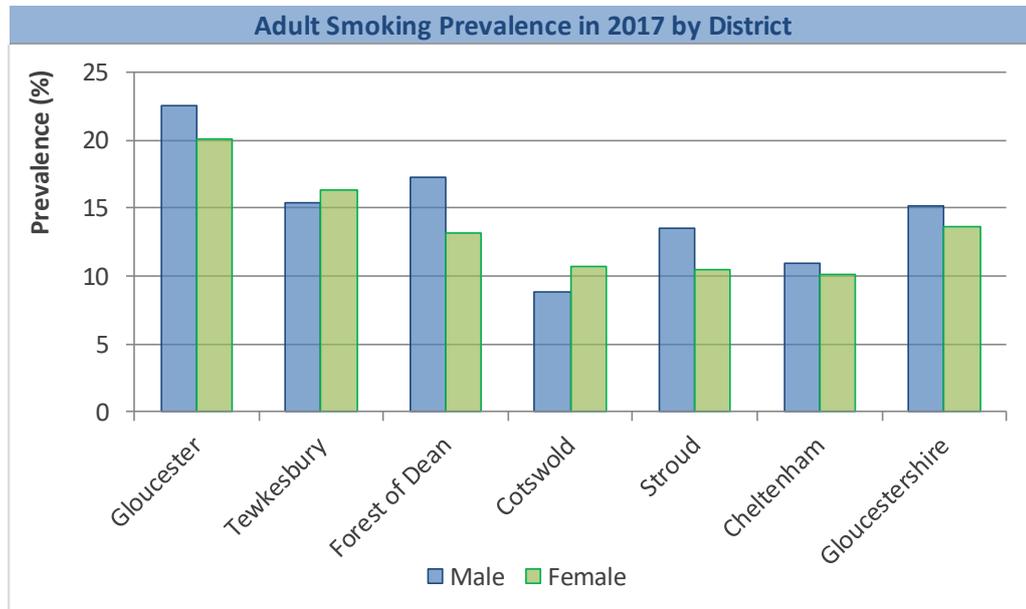


Figure 63: Adult smoking prevalence in 2017 by district¹¹¹

¹¹⁰ *Ibid.*

¹¹¹ Public Health Outcomes Framework, Public Health England

7.5 Self harm

Mental health and physical health are intrinsically linked but mental health is generally harder to measure. A common way to measure mental health and its impact is through the physical manifestation i.e. self-harm. PHOF publishes a measure of self-harm incidents severe enough to result in a hospital admission.

Self-harm results in approximately 110,000 inpatient admissions to hospital each year in England, 99% are emergency admissions. Self-harm is an expression of personal distress and there are varied reasons for a person to harm themselves irrespective of the purpose of the act. There is a significant and persistent risk of future suicide following an episode of self-harm. These hospital admissions are being used as a proxy of the prevalence of severe self-harm, these are only the tip of the iceberg in relation to the health and well-being burden of self-harm.¹¹²

Age standardised rates in Figure 64 show that Cheltenham and Tewkesbury have the second highest rate in the county of 191 admissions per 100,000 population but are below the county rate. When split by gender there is a clear difference as the rate of female admissions in Cheltenham is 270 and the rate of male admissions is 109. The rate of male admissions have been decreasing steadily from 2012/13 (197) to 2017/18 (109) whereas female admissions rose year-on-year and only began decreasing from 2015/17 (384) to 2017/18 (270).

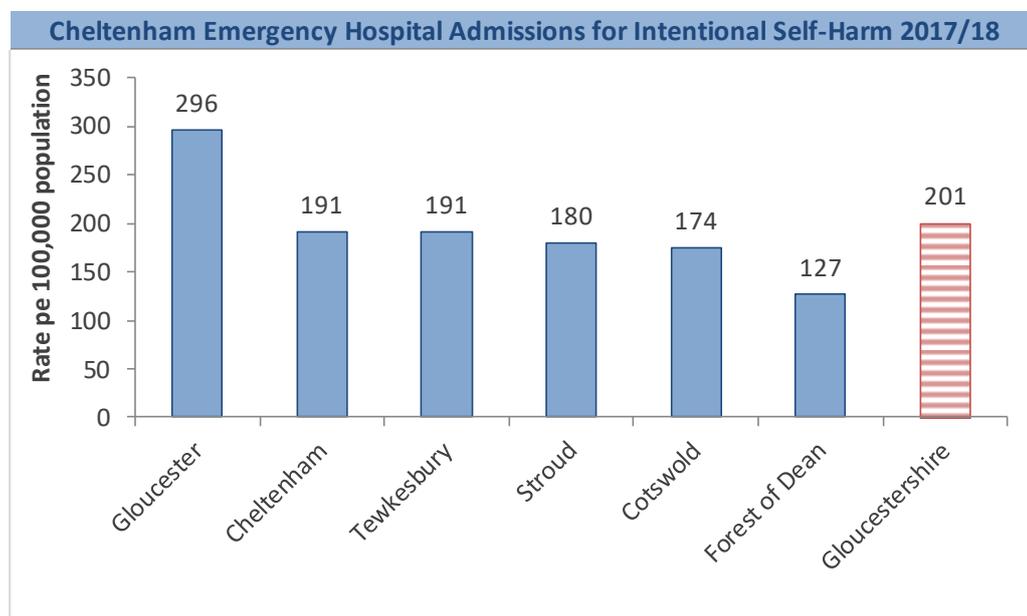


Figure 64: Cheltenham emergency hospital admissions for intentional self-harm 2017/18

¹¹² *Ibid*

8. Vulnerable Groups

Vulnerability as a concept raises such terms as ‘disadvantaged’, ‘poor’, ‘deprived’, ‘troubled’, ‘marginalised’ or ‘socially excluded’ and being vulnerable defines the relationship between individuals and society overall. A person or family may be described as vulnerable if they lack necessary resources to enable them to thrive. There are many risk factors involved falling into three categories: economic, social and/or emotional. Some specific examples being: living in poor housing; long-term unemployment; having a special educational need or disability and being a carer.

Any of these examples can make individuals feel vulnerable whilst characteristics such as poor levels of resilience can also increase levels of vulnerability. As a result, any one of these factors may result in poor outcomes for individuals which may in turn increase their vulnerability. Therefore it is important to understand the nature and scale of these factors in order to break the cycle of vulnerability.

8.1 Deprivation

8.1.1 Index of Multiple Deprivation (IMD)

Growing up in areas affected by deprivation is shown to damage children’s health, wellbeing and future life chances.

The Index of Multiple Deprivation 2015 (IMD 2015) is the official measure of relative deprivation for small areas (Lower Super Output Areas – LSOA’s¹¹³) in England, and ranks every LSOA in England¹¹⁴ from most deprived to least deprived.

The IMD is made up of 7 domains

- Income Deprivation
- Employment Deprivation
- Health Deprivation and Disability
- Education, Skills and Training Deprivation
- Barriers to Housing and Services
- Crime
- Living Environment Deprivation

In addition there are two supplementary indices

- Income Deprivation Affecting Children Index (IDACI)

¹¹³ These are small areas based on Census 2011, and contain an average of 1,600 people.

¹¹⁴ There are 32,844 LSOA’s in England.

- Income Deprivation Affecting Older People Index (IDAOP)

Based on IMD Cheltenham is the 3rd most deprived district in Gloucestershire after Gloucester and the Forest of Dean It ranks as the 228th most deprived of the 326 districts in England; however this masks pockets of deprivation.

Approximately 4,262 (12.3%) children and young people in Cheltenham were living in areas defined as Indices of Multiple Deprivation (IMD) Quintile 1 (most deprived); this rises to 13.5% when looking only at children under 18 years. Approximately 7,483 (10.5%) of the working age (18-64) population live in the most deprived quintile. In contrast only 1,569 (7.1%) of the Cheltenham “65 and over” age group were living in the most deprived quintile. This suggests children aged under 18 are more likely to live in more deprived areas than adults. Poverty creates long-term disadvantages for children. The consequences of poverty - emotional issues, delayed development and lower academic achievement, among others - put a child behind peers who do not struggle with poverty.

Figure 65 shows the IMD by national quintile as it affects the LSOA’s in Cheltenham. The most deprived areas (8 LSOA’s) are shown in red

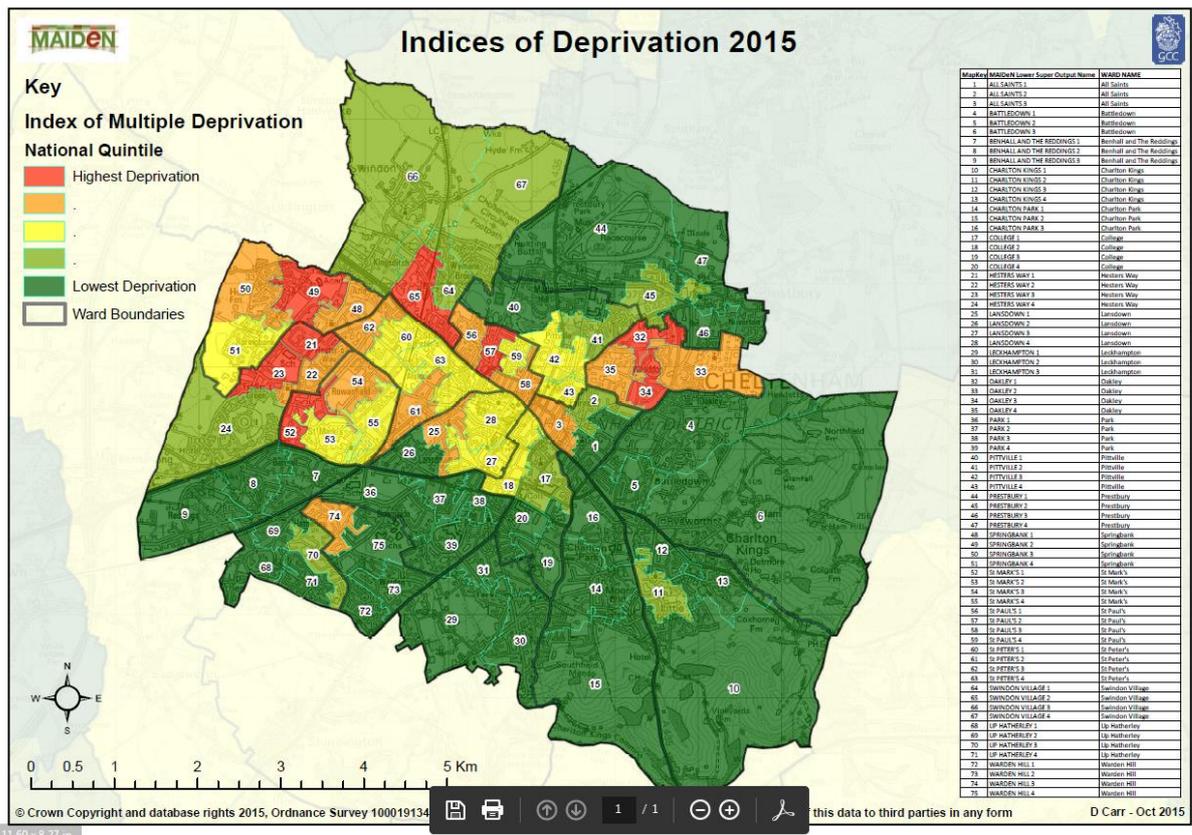


Figure 65: Index of Multiple Deprivation by national quintile¹¹⁵

The map below (Figure 66) shows Income Deprivation Affecting Children Index by national quintile as it affects the LSOA's in Cheltenham. The most deprived areas (13 LSOA's) are shown in red. Hesters Way 3 in Cheltenham is the most deprived LSOA in the county for Income Deprivation Affecting Children Index (IDACI)

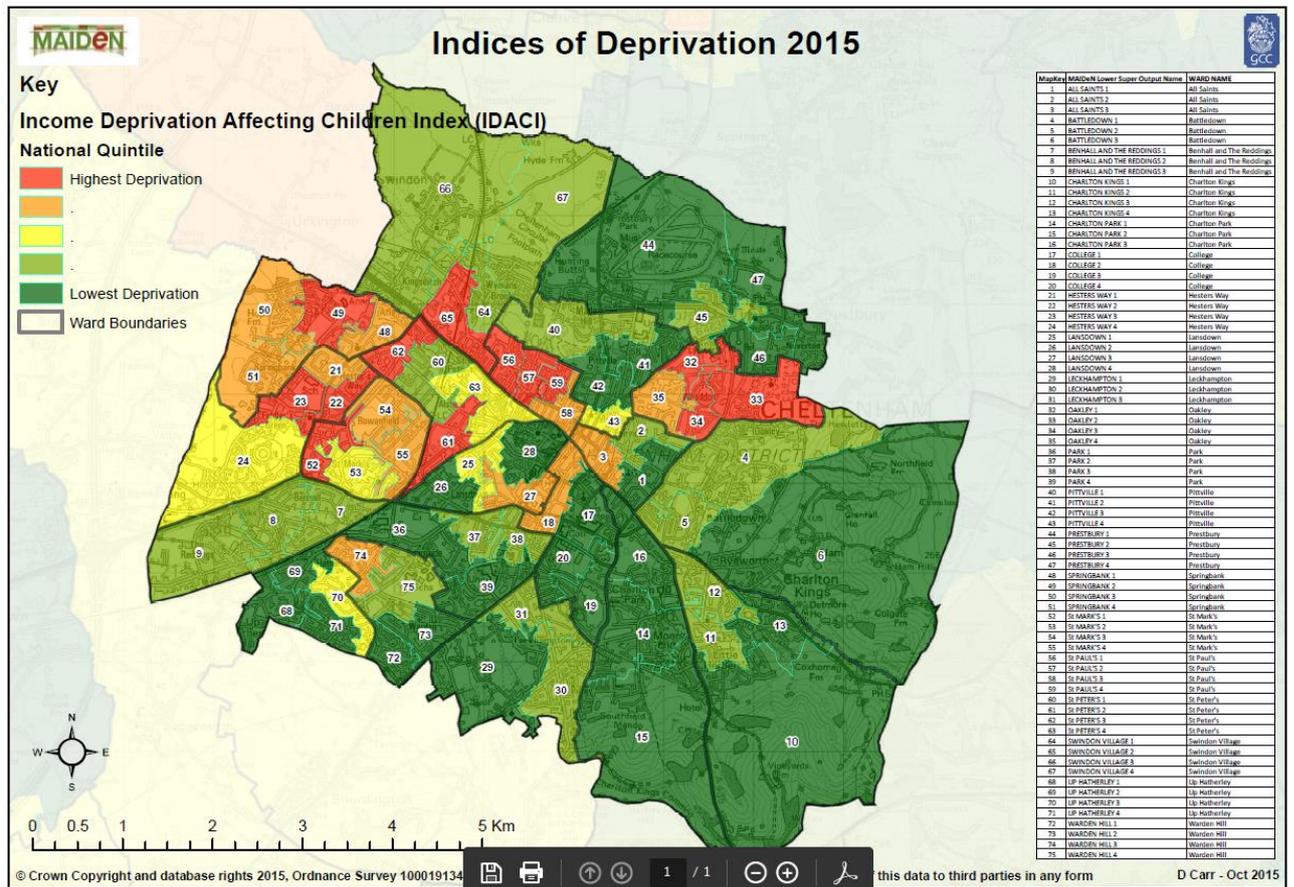


Figure 66: Income Deprivation Affecting Children Index by national quintile¹¹⁶

¹¹⁵ Index of Multiple Deprivation 2015, Department for Communities and Local Government

¹¹⁶ Income Deprivation Affecting Children Index, 2015, Department for Communities and Local Government

Figure 67 shows the Income Deprivation Affecting Older People Index by national quintile as it affects the LSOA's in Cheltenham. The most deprived areas (7 LSOA's) are shown in red. St Pauls 2 in Cheltenham is the most deprived LSOA in the county in terms of the Income Deprivation Affecting Older People Index.

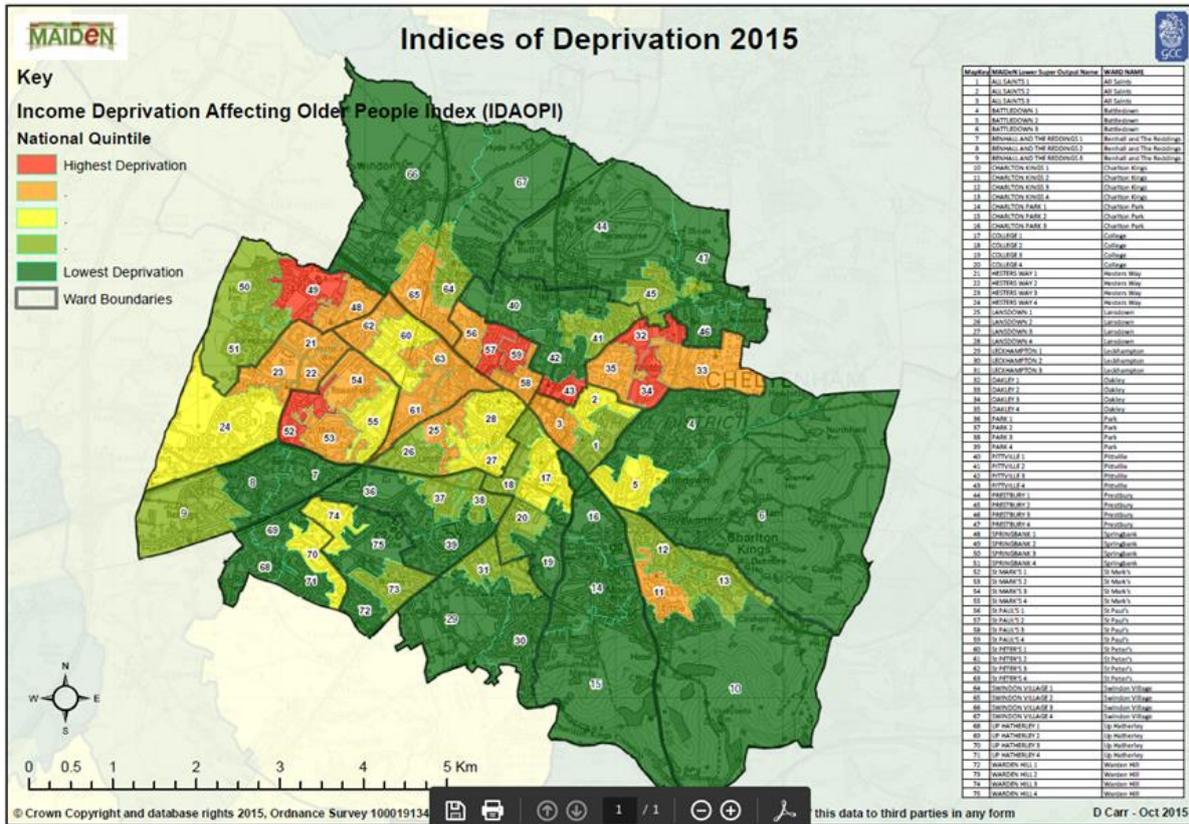


Figure 67: Income Deprivation Affecting Older People Index by national quintile¹¹⁷

Maps in similar formats for each of the separate domains can be found here <https://inform.gloucestershire.gov.uk/deprivation/maps/>

The Income domain map, Employment domain map and Health Deprivation and Disability highlight very similar areas to Index of Multiple Deprivation (IMD), the Health map brings in a LSOA from the Lansdown ward.

The Education, Skills and Training domain map more readily reflects the IDACI map, this suggests that input to the education and training of adults in these areas might help household incomes and prevent intergenerational poverty.

The Crime and Disorder domain map affects 19 SOA's generally geographically located in the central belt.

¹¹⁷ Income Deprivation Affecting Older People Index, 2015, Department for Communities and Local Government

8.2 Child Poverty

Poverty has severe and wide ranging implications on the outcomes for children, adults and families. For children, poverty can affect outcomes in education, mental and physical health and future life chances.

The Centre for Research in Social Policy makes annual estimates for the End Child Poverty Coalition of the number of children in poverty in each ward, local authority, and parliamentary constituency in the UK. These estimates are not accurate counts of how many children are in poverty in each area. Rather, they use the best local data available to give an indication of where child poverty is particularly high, and therefore where there need to be the strongest efforts to tackle it.

A household in poverty is one which has an income 60% below the average income of £28,400

Child poverty in the UK is rising. After a long period in which it fell, between the late 1990s and around 2010, the child poverty rate fluctuated in the first half of the present decade, but the trend is now upwards on all indicators.

The national figures are shown in Figure 68. This shows that both “relative” and “absolute” poverty are now higher than in 2010, whether measured before or after housing costs. Relative poverty, based on whether households have less than 60% of the current median household income (of £28,400), did not immediately rise during the economic downturn a decade ago. Even though family incomes were falling, they fell across the board, so relative to the median, the incidence of low income did not increase. However, general incomes have since seen a modest to rise, but the income of less well-off families has been hit by severe real-terms cuts in benefit levels and by higher housing costs, while being constrained by limited opportunities to improve earnings from work. At least half a million more children are in relative poverty as a result, with two thirds of child poverty occurring in working families. Even on the “absolute” measures – based on a fixed income threshold set at 60% of 2010 income (inflation-uprated) - more children are in poverty than at the start of the decade, despite incomes having risen overall.

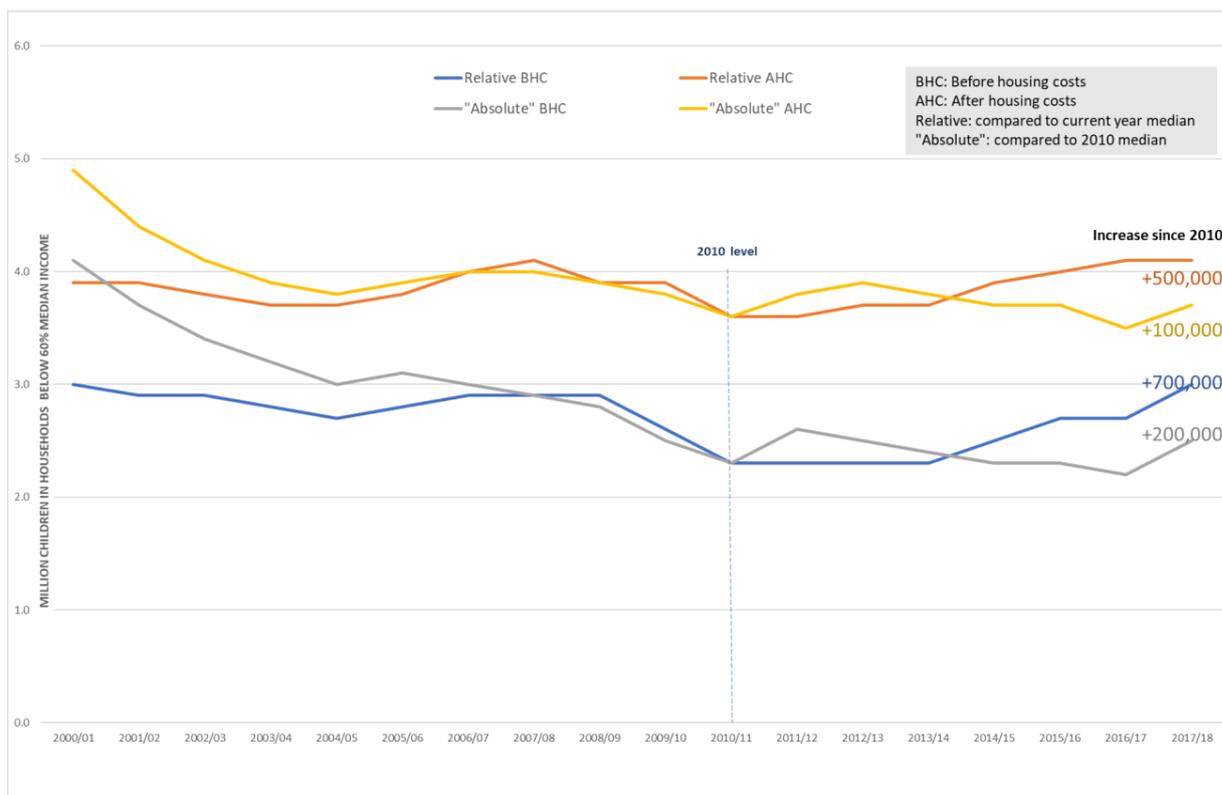


Figure 68: On four main measures, child poverty fell in the 2000s and has risen in the 2010s¹¹⁸

In Gloucestershire nearly a quarter of children (23.6%) are estimated to live in poverty; this is below the UK estimated proportion of children living in poverty (30.0%) however the polarity of deprivation in the county means this masks more local areas of significant poverty. All districts are below the national estimate with Gloucester (28.3%) the highest, Cheltenham with 22.3% whereas Stroud (20.9%) has the lowest percentage of children living in poverty after housing costs. The 22.3% in Cheltenham equates to 5,882 children. Table 5 shows the overall percentage of children living in poverty¹¹⁹ (after housing costs) in the wards in Cheltenham Borough. St. Paul's ward has the highest percentage of children living in poverty after housing costs have been taken into account.

¹¹⁸ End Child Poverty Coalition

¹¹⁹ Households are living in poverty if their household income (adjusted to account for household size,) is less than 60% of the average.

Table 5: Percentage of children living in poverty by ward¹²⁰

Ward	% of children in poverty before housing costs	% of children in poverty after housing costs
St Paul's	25.8%	41.1%
Springbank	26.5%	39.6%
Oakley	21.7%	33.1%
Hesters Way	23.2%	32.3%
St Mark's	20.7%	29.8%
St Peter's	20.2%	29.3%
Swindon Village	15.7%	23.8%
Pittville	13.4%	22.1%
Lansdown	8.6%	18.2%
Benhall and The Reddings	11.9%	17.3%
College	8.8%	17.0%
Up Hatherley	10.5%	15.9%
All Saints	9.4%	15.9%
Battledown	10.3%	15.8%
Charlton Kings	10.3%	15.8%
Warden Hill	9.6%	15.3%
Leckhampton	8.0%	13.5%
Park	7.1%	13.3%
Charlton Park	9.5%	12.9%
Prestbury	8.8%	12.4%

¹²⁰ End Child Poverty Coalition

8.3 Fuel Poverty

A household is considered to be fuel poor if they have required fuel costs that are above average (the national median level) and, were they to spend that amount, they would be left with a residual income below the official poverty line. Fuel poverty is distinct from general poverty: not all poor households are fuel poor, and some households would not normally be considered poor but could be pushed into fuel poverty if they have high energy costs.

There is compelling evidence that the drivers of fuel poverty (low income, poor energy efficiency, and energy prices) are strongly linked to cold homes. Evidence shows that living in cold homes is associated with poor health outcomes and an increased risk of morbidity and mortality for all age groups; furthermore, studies have shown that more than one in five (21.5%) excess winter deaths in England and Wales are attributable to the coldest quarter of housing¹²¹.

In 2017 10.4% of households in Cheltenham were considered to be in fuel poverty, this was higher than the county average of 10.1% but lower than the national average of 10.9%¹²². When compared to the previous year the percentage of households living in poverty has increased from 9.6%.

There is considerable variation in levels of fuel poverty across the district. Figure 69 shows there were 23 LSOA's that exceeded the national average in terms of fuel poverty, of those St Paul's 3 and St Paul's 4 had more than 1 in 5 households classed as in fuel poverty.

¹²¹ UCL Institute of Health Equity (2011). The Health Impacts of Cold Homes and Fuel Poverty.

¹²² Sub regional fuel poverty data, BEIS

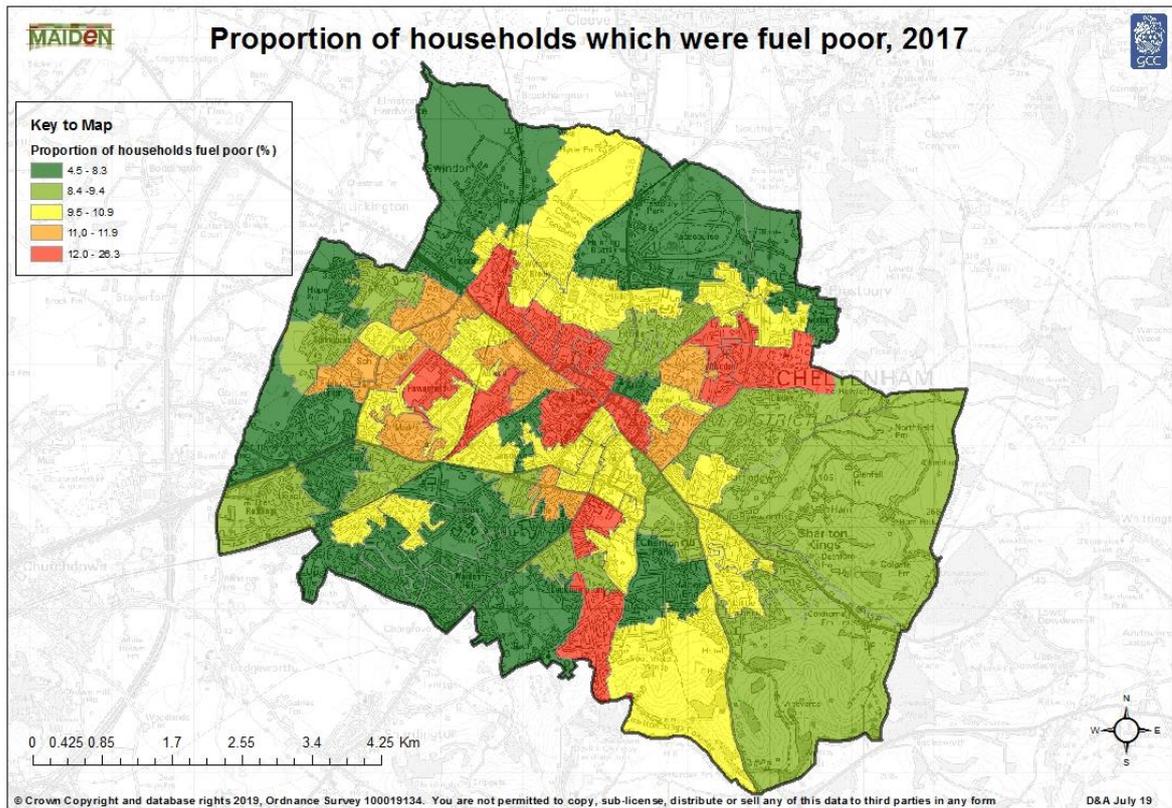


Figure 69: Proportion of households which were fuel poor, 2017¹²³

9. Homelessness

Homelessness is associated with severe poverty and is a social determinant of health. Homelessness is associated with adverse health, education and social outcomes, particularly for children. Homelessness is difficult to see and it can be challenging to measure absolute numbers

The most visible form of homelessness is rough sleeping. However homelessness can take many forms, it can be hidden from view in the form of sofa surfing or squatting and there are also those who are homeless living in hostels, night shelters and temporary accommodation. Most publicly available data relates to a subset of homeless people, those who are statutorily homeless (those meeting specific legislative criteria for whom the local authority accepts a homeless duty), this means it is likely to under-estimate the extent of homelessness. Despite this limitation it does give some indication of the extent of homelessness within an area, particularly in terms of trends.

National data from official and administrative statistics shows that there has been an expansion in most forms of recorded homelessness since 2012/13, with the exception of statutory homeless applications and rough sleepers. This increase is not unique to Gloucestershire and is reflected at a national level.

¹²³ *Ibid.*

Throughout this section totals for Gloucestershire have been derived by aggregating data from the six districts that make up the county.

Table 6: Summary of Homelessness Statistics in Gloucestershire¹²⁴

	2012/13	2017/18	% change (2012/13 - 2017/18)
Statutory homelessness applications	1,145	975	-14.8
Acceptances of statutory homelessness	351	468	33
Homelessness prevention and relief	1,740	1,761	1.2
	2012	2018	% change (2012-2018)
Rough Sleeping Snapshot	29	19	-34.5
	2012	2017	% change (2012-2017)
Households in temporary accommodation	129	163	26.4

Across all measures of homelessness the rate in Gloucestershire is significantly lower than the national rate. The picture at district level is mixed, with Gloucester and Cheltenham exceeding the national average in terms of statutory homeless applications and acceptances, Gloucester and Stroud exceed the national average in terms of homeless prevention and relief.

9.1 Statutory Homelessness

Under the Housing and Homelessness Acts all households that are homeless or threatened with homelessness can approach local authorities for assistance. The local authority will then carry out an assessment and make a decision, the decision made will fall into one of four categories, as set out below:

1. Statutorily homeless (acceptances). To be accepted as statutorily homeless, the household must be eligible for assistance, unintentionally homeless and fall within a priority need group. People in priority need include: families with dependent children, pregnant women, certain people aged 16-17, care leavers, vulnerable people, people with ill health, disabled people, victims of domestic violence and those homeless in an emergency. The authority must ensure that suitable accommodation is available for this group
2. Eligible, homeless and in a priority need group but intentionally homeless. Someone is judged as intentionally homeless if they have lost their home because of something they deliberately did or something they failed to do.

¹²⁴ Live tables on homelessness, DCLG

This can include: leaving a home when they could have reasonably stayed, rent or mortgage arrears, eviction for anti social behaviour, or refusing an offer of housing. In this case the authority must make an assessment of the households housing needs and provide advice and assistance to help them find accommodation for themselves.

3. Eligible homeless but not in priority need. In this case the authority must make an assessment of the household's housing needs and provide advice and assistance to help them find accommodation for themselves.
4. Eligible but not homeless. This system means the way local authorities are asked to record data on homelessness does not give an absolute reflection of homelessness in the area because the data is focused on statutory homelessness. These figures exclude those who are homeless but who do not approach a local authority, they do not capture the hidden homeless those sofa surfing or moving between multiple temporary arrangements or those that do not meet the statutory criteria for assistance.

In 2017/18, 263 households applied for assistance from Cheltenham District Council. This equates to a rate of 5.0 decisions per 1,000 households which was higher than the county and national average and all districts except Gloucester.

Over the last five years the number and rate of applications in Cheltenham has decreased reflecting the national trend.

Table 7: Number and rate of applications¹²⁵

	2012/13		2017/18		% change in number of applications (2012/13 - 2017/18)
	Number	Rate per 1,000 households	Number	Rate per 1,000 households	
Cheltenham	291	5.7	263	5.0	-9.6%
Cotswold	136	3.7	119	3.1	-12.5%
Forest of Dean	44	1.3	73	2.0	65.9%
Gloucester	499	9.8	337	6.2	-32.5%
Stroud	54	1.1	76	1.5	40.7%
Tewkesbury	121	3.4	107	2.8	-11.6%
Gloucestershire	1,145	4.4	975	3.6	-14.8%
England	113,520	5.1	109,410	4.7	-3.6%

¹²⁵ ¹²⁵ Live tables on homelessness, DCLG

Of the homeless applications taken in Cheltenham in 2017-18 37.1% were accepted. Of those that are not accepted, the most common reason was Eligible but not homeless, this broadly reflects the picture seen at national level

Information is recorded about the characteristics of those who are statutory homeless; this includes their age, ethnicity, reason for homelessness, household size and their priority need. The small numbers of statutory homeless at district level means that in some instances numbers are suppressed to prevent identification of individuals. Compared with the Gloucestershire and national average Cheltenham has a higher proportion of homeless households with head of household age 16 to 24 and that are made up of couples with dependent children.

9.2 Rough Sleeping

For the purpose of data collection rough sleepers are defined as People sleeping, about to bed down (sitting on/in or standing next to their bedding) or actually bedded down in the open air (such as on the streets, in tents, doorways, parks, bus shelters or encampments), and People in buildings or other places not designed for habitation (such as stairwells, barns, sheds, car parks, cars, derelict boats, stations, or “bashes” which are makeshift shelters, often comprised of cardboard boxes). The definition does not include people in hostels or shelters, people in campsites or other sites used for recreational purposes or organised protest, squatters or travellers.

Rough sleeping figures are collected through local authority street counts and estimates, and provide a snapshot of the number of rough sleepers on a single night between 1st October and 30th November. Local authorities can decide whether to carry out a count or an estimate. In 2018, Gloucester and Cheltenham carried out a physical count while other local authorities provided estimates. These are intelligence-based assessments of people sleeping rough. In order to obtain the estimates, local authorities consult local agencies such as outreach workers, the police, the voluntary sector and faith groups who have regular contact with rough sleepers on the street and help with gathering intelligence. There has been considerable criticism of the way in which rough sleeping figures are compiled with the UK Statistics Authority stating that they did not meet the required standards of trustworthiness, quality and value to be designated as ‘National Statistics’. Other organisations have criticised the count as resulting in an under-estimation of the true extent of the issue. However, despite the limitations of the data it provides a useful insight into the extent of homelessness in Gloucestershire.

In 2018 there were an estimated 2 rough sleepers in Cheltenham, this equates to a rate of 0.4 rough sleepers per 1,000 households which is lower than the national average. Over the last five years the number of rough sleepers recorded in Cheltenham has fallen by 66.7%, the rate has also fallen. It is unclear whether

this fall is due to changes in the number of rough sleepers or changes in recording practices

Table 8: Number and rate of rough sleepers

	2012		2018		% change in number of rough sleepers (2012 - 2017)
	Number	Rate per 10,000 households	Number	Rate per 10,000 households	
Cheltenham	6	1.2	2	0.4	-66.7%
Cotswold	4	1.1	5	1.3	-75.0%
Forest of Dean	1	0.3	1	0.3	0.0%
Gloucester	11	2.1	6	1.1	-45.5%
Stroud	5	1.0	4	0.8	-20.0%
Tewkesbury	2	0.6	1	0.3	-500%
Gloucestershire	29	1.1	19	0.7	-34.5%
England	2,309	1.0	4,677	2.0	102.6%

9.3 Prevention and Relief

Under the Homelessness Act 2002, local housing authorities must have a strategy for preventing homelessness in their district. The strategy must apply to everyone at risk of homelessness, including cases where someone is found to be homeless but not in priority need or where someone is found to be intentionally homeless. Under the strategy local housing authorities must provide:

- homelessness prevention involves providing people with the ways and means to address their housing and other needs to avoid homelessness. This is done by either assisting them to obtain alternative accommodation or enabling them to remain in their existing home.
- homelessness relief occurs when an authority has been unable to prevent homelessness but helps someone to secure accommodation, even though the authority is under no statutory obligation to do so.

In 2017/18 there were 145 cases of homelessness prevention and relief in Cheltenham, this equates to rates of 2.7 cases per 1,000 households, which was lower than the national average of 9.2 per 1,000. It is not possible to say whether these differences are due to differences in demand or differences in the way in which districts address homelessness. Over the last five years the number of cases of homeless prevention and relief has fallen in Cheltenham, this is in contrast with the national average which has seen numbers grow by 6%.

Table 9: Number and rate of homelessness prevention and relief¹²⁶

	2012/13		2017/18		% change in number of applications (2012/13 - 2017/18)
	Number	Rate per 1,000 households	Number	Rate per 1,000 households	
Cheltenham	297	5.8	145	2.7	-51%
Cotswold	85	2.3	25	0.7	-71%
Forest of Dean	137	4.0	288	8.0	110%
Gloucester	674	13.2	384	7.1	-43%
Stroud	431	8.9	692	13.6	61%
Tewkesbury	116	3.2	227	5.9	96%
Gloucestershire	1,740	6.8	1,761	6.5	1%
England	202,900	9.1	214,970	9.2	6%

In 2017/18, 66% of all prevention and relief cases resulted in people being assisted to find alternative accommodation, which was higher than the national average.

10. Citizens Advice Bureau

The Citizens Advice Bureau is a universal service that provides support to everyone who contacts them about a huge range of problems, from managing debts to making complaints about faulty consumer goods, from employment issues to housing problems.

In 2018 17,480 clients used the Citizens Advice Bureau (CAB) in Gloucestershire. The district with most clients was Gloucester with 5,032 (29%) and the least was Tewkesbury with 1,593 (9%). Clients from Cheltenham accounted for 2,476 (14%). 58% of the clients in Gloucestershire were female, 42% were male and the majority were between 25 and 64 (12,563, 77%). Approximately 84% of clients are working age, 43.5% are in paid employment and 5% are self-employed. Those who stated they were Carers totalled 6.5% and 12.5% describe themselves as retired. Of the remaining 38%, 22% are unemployed and 16% permanently sick.

90% of clients declared a monthly income of less than £2,000 with 54% having an income of less than £1,000 per month. Over 46% of clients describe themselves as being disabled and/or suffering from a long term illness, with 12% of clients (i.e. 25% of those being disabled and/or suffering from a long term illness) having a mental health issue.

¹²⁶ Live tables on homelessness, DCLG

There are a disproportionate number of BAME clients given that 5.1% of the Gloucestershire population is BAME and 11.5% of clients using the CAB are BAME.¹²⁷

Countywide there is a preference from clients for verbal contact (84.6%), with "face to face" preferred to telephone on a ratio of approximately 2.4:1. The demographic of the Client base lends itself towards digital exclusion; particularly as in rural areas computers advertised as being for public use are not always available (e.g. rural libraries aren't always open) and mobile phone coverage often leaves much to be desired.

Intelligence from the Citizens Advice Bureau (CAB) reports the below in terms of issues clients come to them for.

"In line with the recent past, matters surrounding benefits and debt were the largest groups which, including UC accounted for 57% of all matters raised. Delays in the completion of medical assessments in respect of PIP and ESA being a major contributor. Other significant benefit issues being influenced by debt is the increasing demand on Foodbanks with 1,322 Food Vouchers being issued in the year.

It is also worth noting again that the number of relationship issues being referred to the Bureau is a direct result of the curtailment of legal aid to couples needing help following relationship breakdown. As previously noted there is real concern that the lack of support in this area will, in the longer term, manifest itself in adverse health issues of those being "trapped" in unfavourable situations, to say nothing of the potential impact on any children within those family groups."

Cheltenham has the second lowest number of clients per 1000 population over 2018/19 of 21.14 which can be seen by quarter in Figure 70. Cheltenham has seen the highest increase in clients between 2017/18 and 2018/19 of 12% (271) closely followed by Cotswolds with an increase of 8% (196); other districts range from -3% and 5% growth. Unfortunately this rise in clients cannot be traced to a specific ward as clients with no ward recorded account for 376 clients in 2018/19 where there were none in 2017/18.

¹²⁷ Mid-Year Population Estimates, ONS

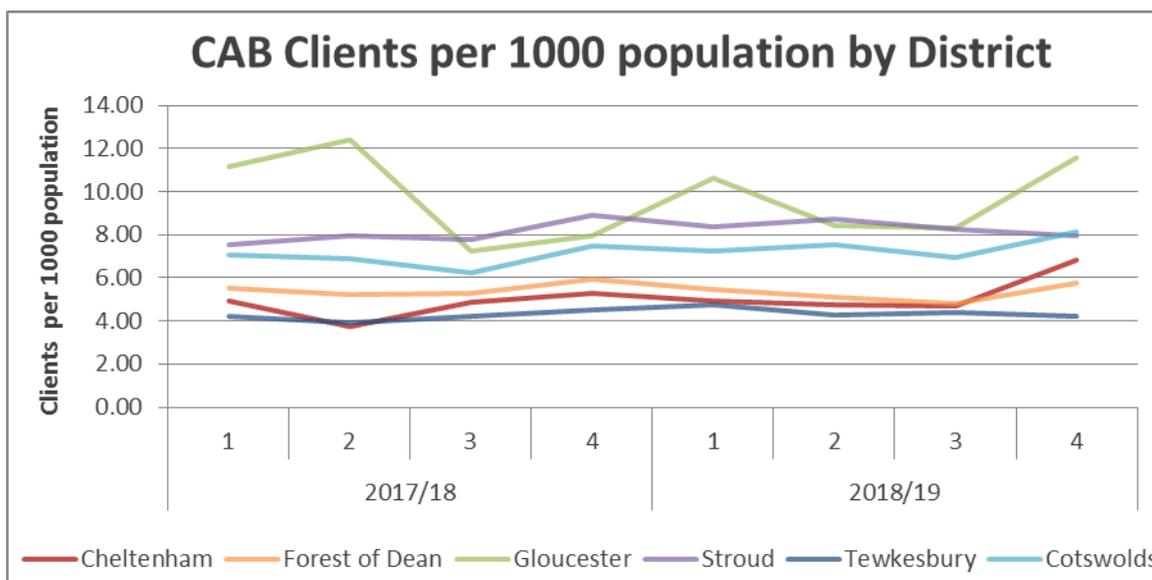


Figure 70: CAB clients per 1000 population by district¹²⁸

County usage by issues reported (there maybe more than one issue per client) has increased by 2% (925) whereas Cheltenham usage has increased by 10% (455); the issues driving the increase differ significantly from the county. Increased issues reported to the CAB in Gloucestershire are driven by a large increase in food bank and benefits issues whereas Cheltenham is driven by an increase in financial and legal issues; both of which have decreased countywide. Stroud district also has a financial increase and Tewkesbury district a legal increase.

Cheltenham district has the lowest instance of benefit and debt related issues in the county. The rate of clients using the CAB for food bank matters was the highest in the county in 2017/18 and while there was an increase in 2018/19, this increase was larger in other districts meaning Cheltenham is no longer the worst.

Within Cheltenham, there are pockets of high use in some wards, namely in deprived wards across Cheltenham. As can be seen in Figure 71 St Pauls has the highest number of clients per 1000 population. In 2018/19 the most prominent issues for help to be sought for in this area was benefits (26%), employment (14%), housing (12%), financial (10%) and debt (9%).

Hesters Way has the second highest rate of clients who sought support for two main issues; benefits (25%) and debt (24%).

Perhaps surprisingly clients from Charlton Park, the ward with the lowest client rate, report the same types of issues. Benefits (31%) and employment (17%) are the issues most frequently sought help for.

¹²⁸ Citizens Advice Bureau

Leckhampton ward has the second lowest rate of clients and has low deprivation much like Charlton Park; debt (21%) and relationships (21%) are the most frequent issues reported.

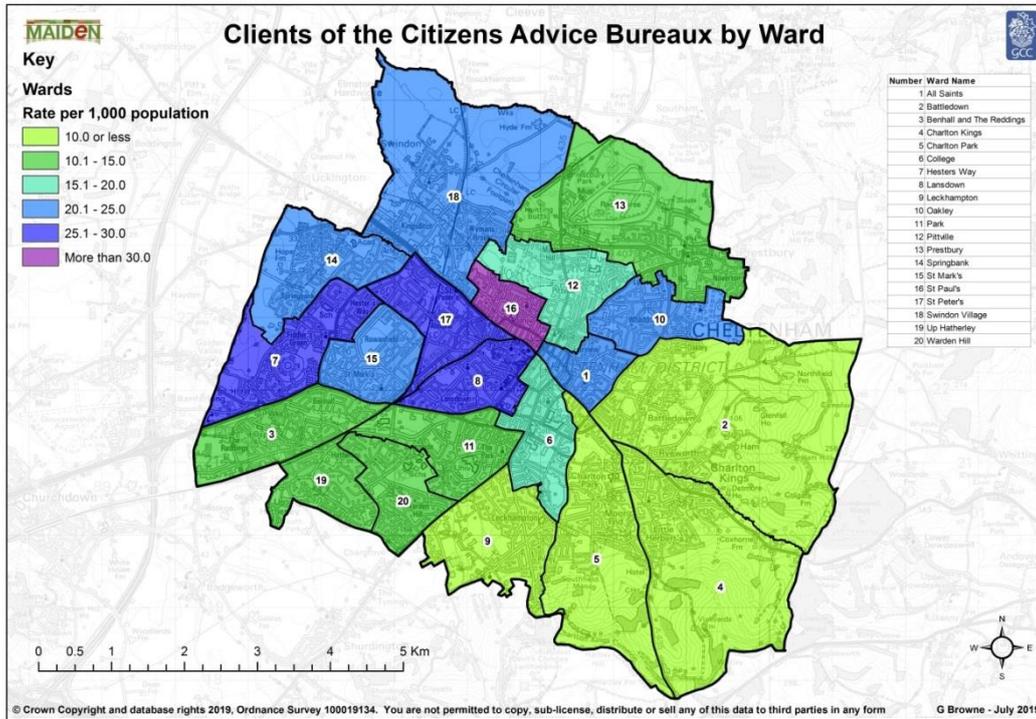


Figure 71: Clients of the citizens advice bureaux by ward¹²⁹

Table 10 shows the large range in ward rates across the district, Oakley appears to be the ward that has the highest rates across the most issues, suggesting it is the most vulnerable ward.

¹²⁹ *Ibid.*

Table 10: Rate of issues per 1000 population by ward¹³⁰

Rate of issues per 1000 population by Ward							
Ward	Benefits	Debt	Food Bank	Financial	Legal	Relationships	Employment
All Saints	12.72	8.61	2.06	1.87	4.68	2.43	8.05
Battledown	3.49	2.96	0.52	0.35	1.39	1.92	1.74
Benhall and The Reddings	5.80	3.20	0.60	0.20	1.00	2.40	2.20
Charlton Kings	4.25	1.77	0.71	0.18	0.89	1.95	1.77
Charlton Park	3.63	0.40	0.20	0.81	0.40	0.81	2.02
College	4.56	2.12	0.65	3.91	0.98	1.95	2.44
Hesters Way	12.79	12.06	2.03	3.05	1.31	4.36	4.65
Lansdown	8.66	12.90	0.88	4.95	2.30	1.94	7.95
Leckhampton	1.78	3.21	0.18	0.53	0.18	3.21	1.96
Oakley	17.69	4.81	2.23	1.55	10.65	8.59	10.99
Park	9.37	4.61	1.08	1.84	6.30	5.38	6.45
Pittville	7.45	2.60	1.04	2.25	2.08	2.95	3.47
Prestbury	4.24	3.85	0.39	0.58	2.12	2.89	1.73
Springbank	11.71	5.71	1.02	1.76	1.76	2.64	4.25
St Mark's	11.33	9.10	1.12	4.95	2.07	2.71	4.95
St Paul's	14.52	5.15	1.72	5.47	2.97	4.22	7.81
St Peter's	9.37	9.93	1.54	3.64	2.24	2.66	6.29
Swindon Village	9.67	8.24	0.72	4.48	3.22	3.22	6.45
Up Hatherley	3.78	4.35	0.76	0.57	1.32	4.35	4.91
Warden Hill	7.31	4.50	0.37	0.56	1.12	2.06	3.93

11. Vulnerable Children

"Every child deserves to grow up free from harm and in a stable and nurturing home environment, with the same opportunities to succeed as every other child. However, our most vulnerable and disadvantaged children need more intensive support to have the stable foundation that others take for granted.

Austerity, rising poverty and reductions in services for vulnerable children in recent years has seen increasing numbers of children and young people who only begin to have their needs met when their families reach crisis or they are put at risk of harm. This increasing demand is not only negatively impacting our most vulnerable children but is also impacting the professionals who work to make a difference in the lives of these children and families."¹³¹

Children can be vulnerable for a many reasons, some of which are listed below:

- Physical health issues (11.1)
- Mental health issues (11.2)
- Vulnerable childhoods (11.3)
- Poverty (11.4)
- Special educational needs (11.5)

¹³⁰ *Ibid.*

¹³¹ <https://www.ncb.org.uk/what-we-do/our-priorities/vulnerable-children>

- Exclusion (11.6)
- Poor attendance (11.7)
- Social care needs (11.8)
- Poor access to education (11.9)

11.1 Physical health

11.1.1 Pre-natal/natal

Getting the right start in life for children in Cheltenham should mean that they have the best chance of a healthy and happy adulthood with an active and rewarding old age.

Smoking in pregnancy has detrimental effects on both the health of the mother and the growth and development of the baby. Smoking during pregnancy is associated with serious pregnancy-related health problems. These include complications during labour and an increased risk of miscarriage, premature birth, stillbirth, low birth-weight and sudden unexpected death in infancy.

In 2017/18 10.9% of new mothers smoked at the time of delivery, this is in line with national and county average, although it has improved in recent years with the rate standing at 14.9% in 2010/11¹³².

Infant mortality is an indicator of the general health of an entire population. It reflects the relationship between causes of infant mortality and upstream determinants of population health such as economic, social and environmental conditions. Deaths occurring during the first 28 days of life (the neonatal period) in particular, are considered to reflect the health and care of both mother and newborn. During the period 2015/17 the infant mortality rate in Cheltenham stood at 3.1 deaths per 1,000 live births, this was in-line with the national and county average of 3.3¹³³.

Low birth weight increases the risk of childhood mortality and of developmental problems for the child and is associated with poorer health in later life. At a population level there are inequalities in low birth weight and a high proportion of low birth weight births could indicate lifestyle issues of the mothers and/or issues with the maternity services. Cheltenham has a higher percentage of low birth weight babies than any other district, the county, region and nationally, however due to small numbers these differences are not considered to be statistically significant.

¹³² PHOF, PHE

¹³³ *Ibid.*

Table 11: Percentage of low birth weight term babies¹³⁴

	Low birth weight of term babies (%)	Lower confidence interval	Upper confidence interval
Cheltenham	2.89	2.07	4.01
Cotswold	2.36	1.46	3.80
Forest of Dean	2.41	1.49	3.88
Gloucester	2.65	1.95	3.59
Stroud	1.82	1.15	2.86
Tewkesbury	1.77	1.11	2.81
Gloucestershire average	2.36	2.00	2.78
South West region	2.62	2.49	2.77
<i>England</i>	2.82	2.78	2.86

11.1.2 Childhood obesity

For information about childhood obesity please see section 7.11.

11.2 Mental health

Mental health illnesses are a leading cause of health-related disabilities in Children and Young People and can have adverse and long-lasting effects on their physical health, educational attainment, employment prospects and social relationships.

Data from PHE dated 2015 shows prevalence of Mental Health Disorders in Cheltenham at a lower level than in Gloucester and Forest of Dean districts, the county, region and England.

¹³⁴ *Ibid.*

Table 12: Prevalence of mental health disorders in CYP¹³⁵

	Estimated prevalence of mental health disorders in children and young people: % population aged 5-16
Cheltenham	8.6
Cotswold	8.0
Forest of Dean	9.0
Gloucester	9.4
Stroud	8.3
Tewkesbury	8.3
Gloucestershire average	8.7
South West region	8.9
<i>England</i>	9.2

11.3 Vulnerable childhoods

This section summarises the findings of the Cheltenham Children’s Needs Assessment, an in depth study carried out by The Data and Analysis Team in April 2018, further information can be found:

https://www.cheltenham.gov.uk/site_search/results/?q=needs+analysis&sa=search

The list below shows how Cheltenham’s ranks out of the 6 districts in Gloucestershire for a number of measures included in this assessment (where 1 is worst and 6 is the best)

- Vulnerable Children claiming EY funding - Cheltenham ranks 1/6
- Vulnerable 2 year old places – Cheltenham ranks 6/6
- % of open social care cases known where parental mental health is a concerning factor – Cheltenham ranks 3/6
- % of open social care cases known where parental alcohol abuse is a concerning factor- Cheltenham ranks 6/6
- % of open social care cases known where parental drug abuse is a concerning factor- Cheltenham ranks 1/6
- Rate of children in contact with Social Care per 10,000 (3yr pooled 2016-2018) – Cheltenham ranks 4/6¹³⁶. Rates vary at ward level with Hesters Way, Oakley, St. Paul’s, St. Mark’s and St. Peter’s being the highest

¹³⁵ Mental Health and Wellbeing JSNA, PHE

- Rate per 10,000 of children known to social care experiencing the toxic trio – Cheltenham ranks 4/6¹³⁷. Three areas of Cheltenham have particularly high
- Secondary age pupils reporting being a young carer (On-line Pupil Survey 2016) – Cheltenham ranks 2/6.
- Secondary age feeling unsafe or very unsafe at home (On-line Pupil Survey 2016) – Cheltenham ranks 2/6.
- Recorded victims of crime aged 0-17 years 2015/16 – Cheltenham ranks 2/6 – overwhelmingly the highest ward rate was St. Mark's.

11.4 Poverty

Geographic factors relating to child poverty are discussed in the Poverty – Child Poverty section of this document.

11.4.1 Free School Meals (FSM)

Free School Meals (FSM) are allocated to children if they or their family receive certain benefits and have an income below £16,190 per annum. FSM eligibility is used as a proxy measure of children living in poverty. In Gloucestershire in January 2019 12.5% of Primary phase and 8.6% of Secondary phase children are eligible for FSM. In Cheltenham the overall eligibility at Primary phase 13.0% is in-line with the Gloucestershire figure; however the difference in eligibility is marked across Cheltenham primary schools. Hester's Way Primary school had the highest percentage of eligible children, 45.1%, and Charlton Kings Junior Academy had the lowest percentage of eligible children, 2.7%.

¹³⁶ The term "Toxic Trio" is used to describe the issues of domestic abuse, mental ill-health and substance misuse

¹³⁷ *Ibid.*

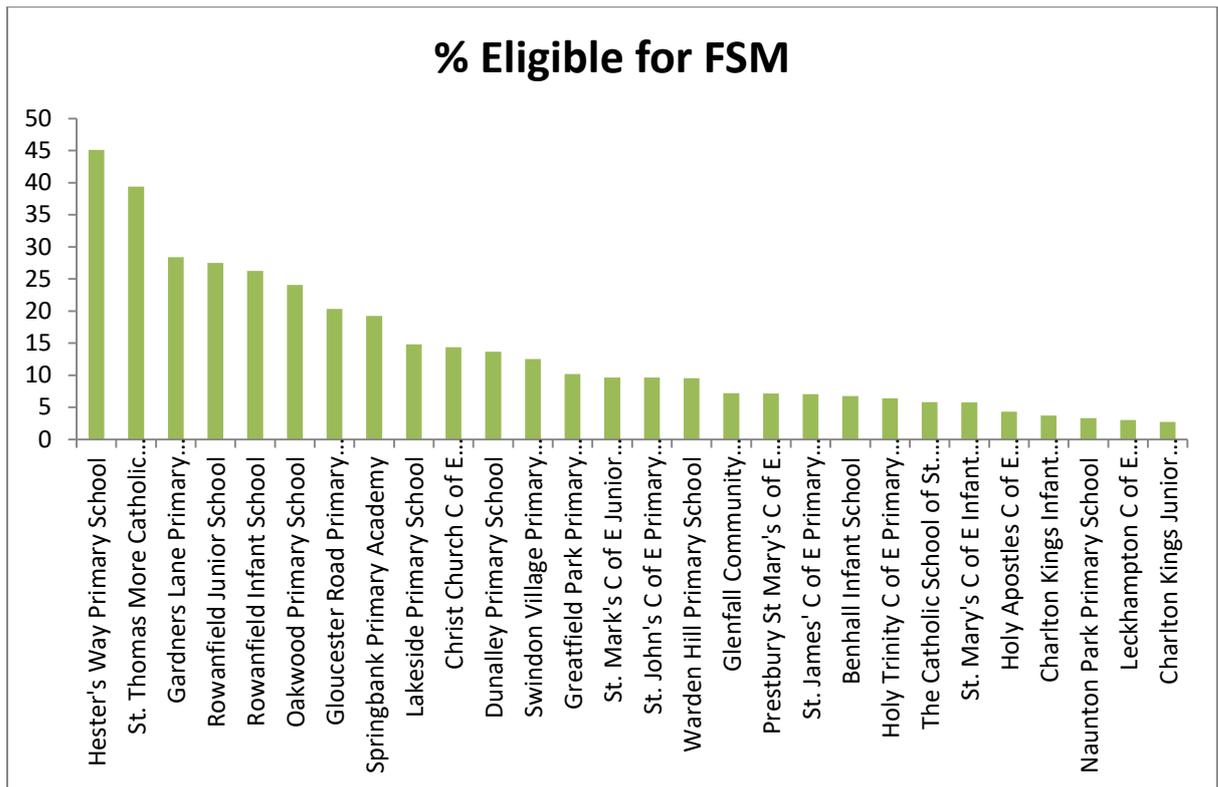


Figure 72: Percentage of primary school pupils eligible for Free School Meals by school¹³⁸

At Secondary phase a similar picture emerges, overall the percentage of children eligible for FSM across all Cheltenham secondary schools (8.6%) is the same as the Gloucestershire rate (8.6%) but there are big disparities. All Saint's Academy and Pittville School have much higher percentages of pupils eligible for FSM (21.7% and 20.1% respectively) in comparison to Pate's Grammar School which has only 1.2% eligible.

¹³⁸ School Census, January 2019

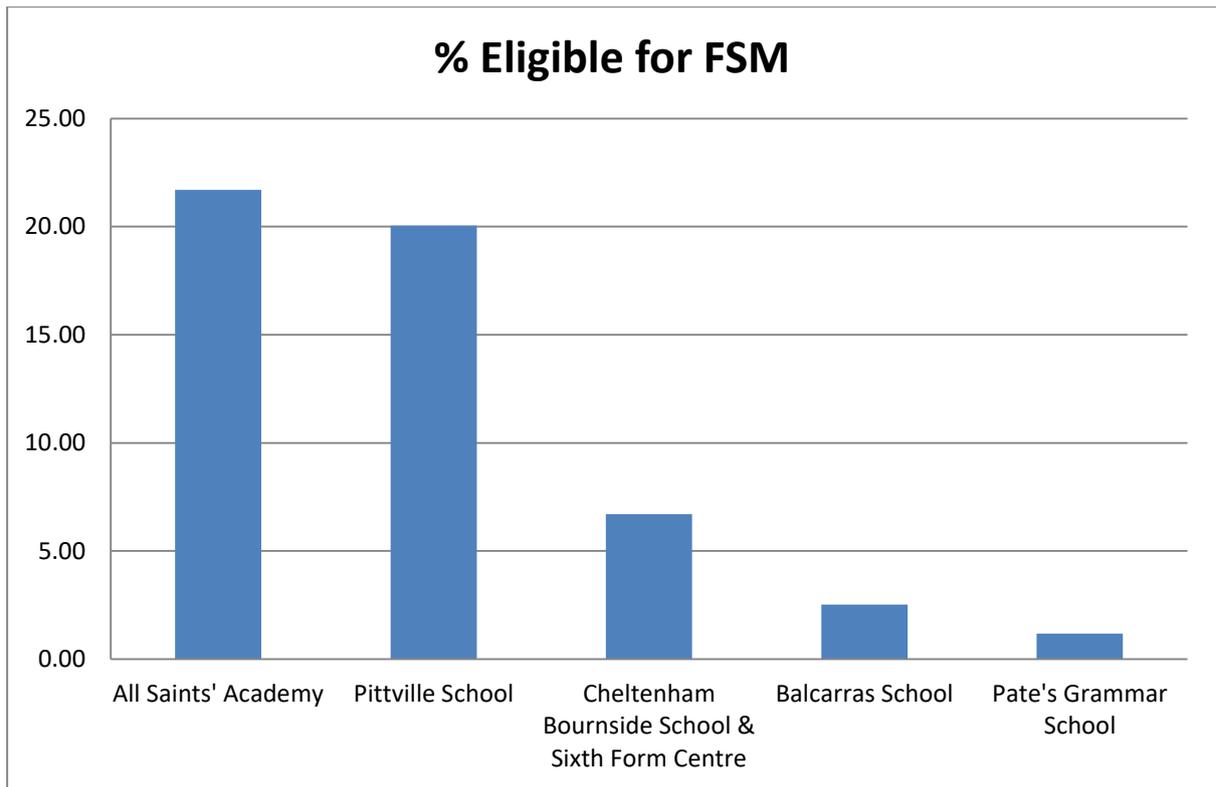


Figure 73: Percentage of secondary school pupils eligible for Free School Meals by school¹³⁹

The marked disparities amongst the schools mean that it is clear where to offer additional support e.g. at Hester's Way Primary where 9/20 pupils will be FSM eligible and at All Saints' and Pittville secondaries where 1/5 will be.

11.5 Special educational needs or disability (SEND)

11.5.1 Education, Health & Care Plan (EHCP)

An education, health and care plan is for children and young people aged up to 25 who need more support than is available through special educational needs support. EHC plans identify educational, health and social needs and set out the additional support to meet those needs. The local authority has a duty to facilitate the provision of additional support to children and young people with an EHCP.

In January 2019, 474 children living in Cheltenham had an EHCP and 1806 had formal SEN support. The following table shows the percentage of children with different levels of SEN support by their district of residence. Cheltenham has a lower proportion of pupils with EHCP or SEN Support than the county as a whole.

¹³⁹ *Ibid.*

Table 13: Percentage pupils with and without SEND by district¹⁴⁰

	EHCP (%)	SEN Support (%)	No special needs (%)
Cheltenham	3.2	12.3	84.4
Cotswold	2.5	12.2	85.3
Forest of Dean	3.6	16.3	80.1
Gloucester	3.6	13.9	82.5
Stroud	2.9	12.8	84.4
Tewkesbury	3.1	12.2	84.7
County pupil average	3.2	13.2	83.6

The table below shows the same measures at LSOA level. The LSOA with the highest percentage of aggregate needs is at the top. More deprived wards feature near the top with the more advantaged areas generally near the bottom (table continued on next page).

Table 14: Percentage pupils with and without SEND by LSOA¹⁴¹

LSOA	EHCP (%)	SEN Support (%)	No special needs (%)
St PAUL'S 2	5.7	27.1	67.2
St PAUL'S 3	5.8	26.2	68.0
HESTERS WAY 2	6.1	25.1	68.8
St PETER'S 3	4.2	26.7	69.2
HESTERS WAY 3	2.7	25.8	71.6
SWINDON VILLAGE 2	2.2	24.8	73.0
St MARK'S 3	11.0	15.9	73.1
OAKLEY 2	3.9	22.8	73.2
HESTERS WAY 1	5.4	19.6	75.0
St PAUL'S 4	4.1	20.3	75.6
SPRINGBANK 2	5.0	19.1	76.0
St MARK'S 1	4.6	18.8	76.6
SPRINGBANK 1	4.8	18.1	77.1
OAKLEY 3	4.9	17.5	77.5
OAKLEY 4	4.1	18.1	77.7
SPRINGBANK 4	5.7	14.9	79.4
SWINDON VILLAGE 4	4.6	15.2	80.1

¹⁴⁰ *Ibid.*

¹⁴¹ *Ibid.*

LSOA	EHCP (%)	SEN Support (%)	No special needs (%)
OAKLEY 1	3.0	16.8	80.2
St MARK'S 4	4.1	15.5	80.4
St PETER'S 2	3.6	15.6	80.8
St PETER'S 1	3.6	14.2	82.2
SWINDON VILLAGE 1	2.9	14.4	82.7
PITTVILLE 2	5.0	12.2	82.7
SPRINGBANK 3	3.8	13.3	82.9
WARDEN HILL 3	7.1	9.6	83.2
LANSDOWN 1	2.4	14.3	83.3
LANSDOWN 4	0.0	16.7	83.3
St PAUL'S 1	2.5	13.6	83.9
BATTLEDOWN 1	2.1	13.9	84.0
BATTLEDOWN 2	4.3	11.6	84.1
LANSDOWN 3	2.5	12.5	85.0
St PETER'S 4	2.0	12.8	85.2
PRESTBURY 3	2.1	12.2	85.6
HESTERS WAY 4	4.1	10.2	85.7
PITTVILLE 1	3.7	10.1	86.2
UP HATHERLEY 2	4.0	9.6	86.4
UP HATHERLEY 3	1.8	11.7	86.5
COLLEGE 2	5.3	7.9	86.8
St MARK'S 2	2.6	10.5	86.8
PITTVILLE 3	3.6	9.1	87.3
ALL SAINTS 2	3.0	9.6	87.4
ALL SAINTS 1	3.5	9.0	87.5
SWINDON VILLAGE 3	3.8	8.5	87.7
BENHALL AND THE REDDINGS 2	2.3	9.4	88.3
PRESTBURY 1	3.3	8.7	88.0
WARDEN HILL 4	3.4	8.3	88.3
BENHALL AND THE REDDINGS 3	3.7	7.8	88.5
COLLEGE 4	1.3	9.3	89.4
CHARLTON PARK 3	2.1	8.5	89.4
UP HATHERLEY 1	2.5	8.0	89.5
PARK 3	2.5	7.4	90.1
PRESTBURY 2	1.5	8.2	90.3
LECKHAMPTON 1	0.8	8.5	90.7
BENHALL AND THE REDDINGS 1	3.2	6.1	90.7
LANSDOWN 2	1.5	7.7	90.8
CHARLTON KINGS 1	2.0	6.6	91.4
COLLEGE 3	2.4	6.2	91.4
PITTVILLE 4	1.1	7.5	91.4
PARK 1	2.1	6.3	91.5
ALL SAINTS 3	0.0	8.3	91.7

LSOA	EHCP (%)	SEN Support (%)	No special needs (%)
CHARLTON KINGS 2	1.0	7.0	92.0
PARK 4	3.9	3.9	92.1
LECKHAMPTON 3	3.4	4.4	92.2
CHARLTON KINGS 3	2.4	5.2	92.3
WARDEN HILL 1	1.9	5.7	92.4
UP HATHERLEY 4	1.5	5.5	93.0
CHARLTON KINGS 4	0.3	6.5	93.2
CHARLTON PARK 2	1.5	4.9	93.6
CHARLTON PARK 1	0.4	5.0	94.5
BATTLEDOWN 3	1.0	4.2	94.8
LECKHAMPTON 2	1.7	3.4	94.8
PRESTBURY 4	1.0	4.0	94.9
WARDEN HILL 2	0.6	4.3	95.1
COLLEGE 1	2.3	2.3	95.5
PARK 2	0.0	1.5	98.5

11.6 Exclusion

Pupils can only be excluded from school for disciplinary reasons. Schools must have a behaviour policy setting out what the school rules are, so that parents and the child are aware of the school's expectations about discipline. Reasons for exclusion can include behaviour outside school, such as school trips or on the way to and from school, provided it is in line with the behaviour policy. Exclusions can either be for a specified time called "Fixed period" or "Fixed term" exclusions; or a child may be indefinitely excluded called a "Permanent" exclusion. Fixed and permanent exclusions are higher in Cheltenham than the county as a whole.

Table 15: Fixed Term Exclusions by district, 2016/17¹⁴²

	Primary rate	Secondary rate	Special rate	Overall rate
Cheltenham	1.86	12.27	4.84	6.06
Cotswold	1.05	5.76	0	3.35
Forest of Dean	0.91	6.78	0	3.30
Gloucester	1.90	10.73	0.96	5.69
Stroud	1.23	5.04	0	2.81
Tewkesbury	0.85	7.91	0	4.44
Gloucestershire	1.39	8.25	1.61	4.42

¹⁴² <https://www.gov.uk/government/collections/statistics-exclusions>

Table 16: Permanent Exclusions by district, 2016/17¹⁴³

	Primary rate	Secondary rate	Special rate	Overall rate
Cheltenham	0.07	0.41	0	0.20
Cotswold	0.05	0.21	0	0.13
Forest of Dean	0.05	0.19	0	0.11
Gloucester	0.04	0.36	suppressed	0.18
Stroud	0.03	0.26	0	0.13
Tewkesbury	0.07	0.21	0	0.14
Gloucestershire	0.05	0.28	suppressed	0.15

11.7 Poor Attendance

Research has shown that children who are not in school are most vulnerable and are easily drawn into crime. Those children who “play truant” are more likely to offend than those that do not. Rates of absence in Cheltenham are lower than in Gloucester, the county and national in primary schools.

Table 17: State-funded primary schools - absence¹⁴⁴

	Overall absence	Authorised absence	Unauthorised absence		Percentage of persistent absentees
Cheltenham	3.8	3.0	0.8		7.9
Gloucester	4.6	3.3	1.3		10.9
Gloucestershire	4.1	3.2	0.9		8.3
<i>England</i>	<i>4.2</i>	<i>3.0</i>	<i>1.1</i>		<i>8.7</i>

At secondary school rates are again lower in Cheltenham when looking at overall absence. However authorised absence is higher than the national in Cheltenham; unauthorised absence in Cheltenham is lower than Gloucester and nationally.

¹⁴³ *Ibid.*

¹⁴⁴ *Ibid.*

Table 18: State-funded secondary schools - absence¹⁴⁵

	Overall absence	Authorised absence	Unauthorised absence		Percentage of persistent absentees
Cheltenham	5.4	4.1	1.3		13.7
Gloucester	5.9	4.2	1.9		15.0
Gloucestershire	5.5	4.3	1.2		13.9
<i>England</i>	5.5	3.9	1.6		13.9

Special school unauthorised rates are higher in Cheltenham than Gloucester and the county, special schools tend to be concentrated in Cheltenham and Gloucester. The percentage of persistent absentees is similarly higher.

Table 19: State-funded special schools - absence¹⁴⁶

	Overall absence	Authorised absence	Unauthorised absence		Percentage of persistent absentees
Cheltenham	8.1	6.8	1.3		26.6
Gloucester	7.5	7.1	0.4		20.9
Gloucestershire	8.1	6.9	1.1		25.2
<i>England</i>	10.2	8.0	2.2		29.6

Looking at all types of school together Cheltenham absence rates are lower than rates in Gloucester, the county and nationally.

Table 20: State-funded all schools - absence¹⁴⁷

	Overall absence	Authorised absence	Unauthorised absence		Percentage of persistent absentees
Cheltenham	4.5	3.5	1.0		10.5
Gloucester	5.2	3.8	1.4		12.8
Gloucestershire	4.8	3.7	1.0		10.9
<i>England</i>	4.8	3.5	1.4		11.2

¹⁴⁵ Ibid.

¹⁴⁶ Ibid.

¹⁴⁷ Ibid.

In the academic year 2017/18 the following Cheltenham schools had overall absence rates greater than 5%:

- Gardners Lane, Hesters Way, Oakwood, Rowanfield Infant - primary schools
- All Saints', Bournside, Pittville - secondary schools
- Battledown, Belmont, Bettridge, The Ridge - special schools

11.8 Social Care Needs

Children and young people in care are among the most socially excluded in children in England. There are significant inequalities in health and social outcomes compared with all children and these contribute to poor health and social exclusion of care leavers later in life.

The table below shows the numbers and overall percentage of children known to social care by district. Gloucester has the highest number in each individual category. Cheltenham has the 2nd highest number for Children in Care and Children in Need and the 3rd highest for Children on a Child Protection Plan.

However when taking population into account Gloucester has the highest percentage overall known to social care, followed by Forest of Dean and Cheltenham.

Table 21: CYP known to social care - by district as at 31/03/2019¹⁴⁸

	Children in Care (CiC)	Child Protection(CP)	Children in Need (CIN)	Total children known to Social Care	% of 0-17 population
Cheltenham	119	109	442	670	2.9
Cotswold	43	47	277	367	2.3
Forest of Dean	94	100	382	576	3.5
Gloucester	243	274	791	1308	4.5
Stroud	81	84	387	552	2.3
Tewkesbury	72	136	312	520	2.8
					18.3

Looking at the distribution by ward Hester's Way has the most CYP known to social care followed by Oakley and Springbank. Based on the population Hester's Way has the highest percentage and, under this measure, followed by St. Paul's and then Oakley

¹⁴⁸ Data and Analysis Team, Gloucestershire County Council

Table 24: CYP known to social care - by ward as at 31/03/2019¹⁴⁹

Ward	Total number of CYP known to social care	% of CYP aged 0-17 known to social care
Hesters Way	137	8.1
Oakley	80	5.8
Springbank	77	4.6
St. Mark's	72	5.6
St. Paul's	70	7.2
St. Peter's	65	4.7
Swindon Village	38	3.4
Warden Hill	23	2.3
Battledown	19	1.4
Lansdown	16	1.7
All Saints	11	1.5
Charlton Kings	10	0.7
Prestbury	8	1.0
Benhall and the Reddings	8	0.8
College	8	0.7
Park	6	0.5
Up Hatherley	6	0.5
Leckhampton	6	0.5
Pittville	6	0.7
Charlton Park	<5	suppressed

11.9 Poor Access to Education

11.9.1 Accessing Early Years Education

Accessing Early Years Education is important for all children. However it is particularly important for vulnerable children. It has already been mentioned that Cheltenham Borough has the best take up of the 6 districts for vulnerable 2 year old places. However it is the worst for parents/carers claiming Early Years funding for pre-schoolers.

All 3 and 4 years olds are entitled to Funded Early Education and can use childminders, pre-school playgroup, nurseries or Children's Centres who are registered with Gloucester County Council to deliver nursery education. Full eligibility and entitlement details and childcare provider details can be found on the [Glos Families directory](#).

¹⁴⁹ *Ibid.*

11.9.2 Pupils with English as an additional language (EAL)

Another reason why children may find it hard to access the education provided to them maybe that they have poor language skills. Children may have poor language skills because they were exposed to another language in their first few years. Although it should be pointed out that some pupils who have English as an Additional Language may speak and write perfect English e.g. bilingual pupils.

In Cheltenham 13.4% of primary aged pupils have English as an Additional Language, this is higher than the county average and all districts except Gloucester.

Table 22: Primary aged pupils – percentage with English as an Additional Language¹⁵⁰

	% of pupils with English as an Additional Language
Cheltenham	13.4
Cotswold	4.0
Forest of Dean	2.6
Gloucester	15.2
Stroud	3.4
Tewkesbury	6.6
Gloucestershire	8.5

Rates of English as an Additional Language varies considerably across primary schools in Cheltenham with 47.1% of pupils in The Catholic School of St Gregory the Great having English as an additional language compared to 2.7% at Leckhampton C of E Primary School.

¹⁵⁰ School Census, January 2019

Table 23: Cheltenham Primary Schools – percentage with English as an Additional Language¹⁵¹

School	% with English as an Additional Language
The Catholic School of St. Gregory The Great	47.1%
St. John's C of E Primary School (Chelt)	31.6%
Gardners Lane Primary School	31.4%
Gloucester Road Primary School	29.9%
St. Thomas More Catholic Primary School	26.5%
Rowanfield Infant School	19.8%
Christ Church C of E Primary School (Chelt)	16.9%
Springbank Primary Academy	16.1%
Rowanfield Junior School	15.9%
Hester's Way Primary School	15.6%
Dunalley Primary School	14.8%
Oakwood Primary School	12.5%
Holy Trinity C of E Primary School	12.1%
Naunton Park Primary School	9.4%
Glenfall Community Primary School	9.2%
Greatfield Park Primary School	9.0%
Charlton Kings Infant Academy	8.6%
Charlton Kings Junior Academy	8.4%
Swindon Village Primary School	7.2%
Warden Hill Primary School	7.2%
St. James' C of E Primary School	6.1%
Lakeside Primary School	6.0%
Holy Apostles C of E Primary School	5.8%
St. Mark's C of E Junior School	5.4%
Benhall Infant School	3.4%
Prestbury St Mary's C of E Junior School	2.9%
St. Mary's C of E Infant School	2.9%
Leckhampton C of E Primary School	2.7%

The picture at secondary schools is very similar to that at primary school with 8.7% of pupils secondary aged pupils in Cheltenham having English as an additional language which is higher than the county average and all districts except Gloucester.

¹⁵¹ *Ibid.*

Table 24: Secondary aged pupils – percentage with English as an Additional Language¹⁵²

	% with English as an Additional Language
Cheltenham	8.7
Cotswold	2.1
Forest of Dean	2.3
Gloucester	13.3
Stroud	2.8
Tewkesbury	5.1
Gloucestershire	6.4

At School All Saints Academy has the highest proportion of pupils with English as an Additional Language at 18.0% while Balcaras has the lowest at 4.6%.

Table 25: Cheltenham Secondary Schools – percentage with English as an Additional Language¹⁵³

School	% with English as an Additional Language
All Saints' Academy	18.0%
Pittville	9.4%
Cheltenham Bournside	7.9%
Pate's Grammar	7.0%
Balcarras	4.6%

12. Vulnerable Families

12.1 Families First

In Gloucestershire, we believe that families are best supported by those who are already working with them, with additional support from local partners arranged as needed. Children and families are entitled to early help if and when they need it. It may also be provided through an increase in the levels of universal services, or services provided or commissioned in localities.

When children and families need additional support, a coordinated multi-disciplinary approach led by a Lead Practitioner is usually best.

¹⁵² *Ibid.*

¹⁵³ *Ibid.*

When families -and professionals who are helping them - need more support, this can be requested from Families First teams in each District. These are made up of representatives of services who decide the help that's needed and offer advice, guidance and support to Practitioners.

In Cheltenham 2,864 families have been referred to the “Families First Team” during the period 2012-2019. In Cheltenham the most common reason for referral was other reasons, of the specified reasons the most common reason was Child in need of help, this reflects the picture seen across the county.

Please note this data includes families with more than one referral and can include cases which are still open.

Table 26: “reasons for involvement” for referrals to Families First¹⁵⁴

	Cheltenham	Cotswold	Forest of Dean	Gloucester	Stroud	Tewkesbury	Grand Total
Child in need of help	16.7%	20.1%	20.3%	15.0%	20.7%	17.4%	17.7%
Out of work benefits	9.9%	12.2%	11.6%	10.1%	10.4%	9.8%	10.4%
Mental Health support received	7.7%	11.3%	8.0%	7.1%	9.7%	9.9%	8.5%
Health equivalent concern	7.7%	7.7%	11.1%	6.2%	10.5%	8.8%	8.3%
other reasons	58.1%	48.7%	49.1%	61.6%	48.6%	54.1%	55.0%

Table 27 shows where the 2,864 Cheltenham cases lived. The “ranking” is similar even if you take population figures into account. Wards producing the most cases for Families First referrals tend to be the more deprived.

¹⁵⁴ Families First Team data 2012 to 2019

Table 27: Spread of Cheltenham referrals to Families First¹⁵⁵

Ward	Number of cases
Hesters Way	479
Springbank	310
St Mark's	307
Oakley	305
St Paul's	268
St Peter's	264
Swindon Village	143
Warden Hill	94
Battledown	92
Charlton Kings	86
Up Hatherley	86
Pittville	65

13. Vulnerable Adults

13.1 Adult Social Care Service Users

Adults can be at risk for a variety of reasons such as being elderly and frail, having a learning or physical disability, or having mental health needs including dementia. The role of adult social care at the county council is to make sure adults (aged 18 or over) and their carers (including young carers) who need care or support in their daily lives can get the help and advice they need to live as independently as possible. Care and support can be a mixture of practical, financial and emotional support for people who need extra help to manage their lives and be independent.

Data taken from a snapshot of open adult social care services at 31st March 2019 shows that of 8562 service users in Gloucestershire 1645 (19%) of them are residents in Cheltenham. Service users are not evenly spread across the district. Wards such as St Mark's (10%, 165), Leckhampton (8.8%, 144), and Lansdown (7.9%, 130) have a high number of service users whereas All Saints (2.4%, 40) and Battledown (2.9%, 48) have low numbers. The highest and lowest wards shift when service users are split into age groups 18-64 and 65+ as seen below.

It is important to note that the data held by Gloucestershire County Council only accounts for Council funded care. Privately funded care will not be represented in the figures.

¹⁵⁵ *Ibid.*

Table 28: Service Users by Ward 65+¹⁵⁶

Ward	No. Service Users	% Service Users
St Mark's	113	9.95%
Leckhampton	110	9.68%
Lansdown	107	9.42%
Charlton Kings	82	7.22%
Springbank	72	6.34%
Warden Hill	65	5.72%
Park	62	5.46%
Pittville	60	5.28%
Hesters Way	60	5.28%
Charlton Park	54	4.75%
St Peter's	53	4.67%
Prestbury	51	4.49%
College	43	3.79%
Benhall and The Reddings	42	3.70%
Oakley	37	3.26%
Up Hatherley	33	2.90%
Swindon Village	27	2.38%
Battledown	25	2.20%
St Paul's	20	1.76%
All Saints	20	1.76%
Grand Total	1136	100.00%

Table 29: Service Users by Ward 18-64¹⁵⁷

Ward	No. Service Users	% Service Users
St Mark's	52	10.22%
Hesters Way	43	8.45%
St Paul's	42	8.25%
Park	37	7.27%
Warden Hill	36	7.07%
Leckhampton	34	6.68%
St Peter's	33	6.48%
Oakley	32	6.29%
Springbank	28	5.50%
Battledown	23	4.52%
Lansdown	23	4.52%
Swindon Village	23	4.52%
All Saints	20	3.93%
Pittville	17	3.34%
Up Hatherley	16	3.14%
Charlton Kings	12	2.36%
Prestbury	11	2.16%
Benhall and The Reddings	10	1.96%
Charlton Park	9	1.77%
College	8	1.57%
Grand Total	509	100.00%

When compared to Gloucestershire's other districts Cheltenham has the third lowest rate per 1000 population of service users 18-64 and the second highest rate of adult social care service users aged 65+. The high rate of older service users is likely due to the equally high rate of care home beds available in the district as demonstrated in Figure 74. The rate of service users aged 65+ has a strong positive correlation with the rate of care home beds in the area ($r=0.86$).

¹⁵⁶ Data and Analysis Team, Gloucestershire County Council

¹⁵⁷ *Ibid.*

Although the high rate of service users is a likely explanation this highlights a large group of vulnerable adults in Cheltenham that may require targeted support.

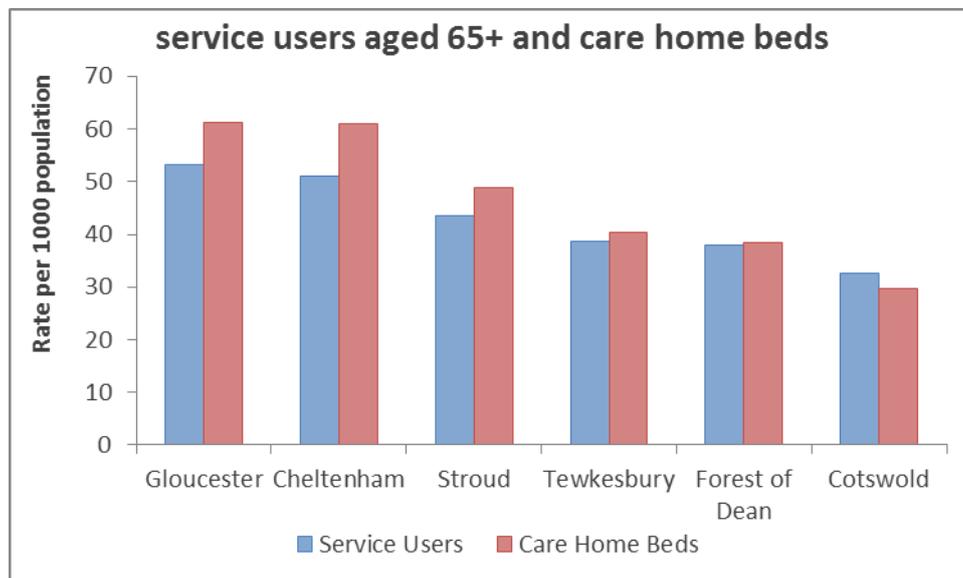


Figure 74: Service users aged 65+ and Care Home Beds per 1000 population¹⁵⁸

Service users can have more than one service open at a time depending on their needs; services vary between short and long term and high level and low level support. The two most prominent primary support reasons cited for service use across the county and in Cheltenham are Physical Support and Learning Disability Support; the proportions of these change significantly depending on the age group which can be seen clearly in Figure 75, Figure 76, and Figure 77.

For service users in Cheltenham aged 65+ 74.7% of services have physical support cited as the primary support reason (849 service users, 983 services) and only 5.6% as learning disability support; both of which are lower than the county percentages. Learning disability support increases to 46.0% when looking at the age group 18-64 (181 service users, 354 services), again lower than the county percentage of 57.5%. Learning disability service users between 18-64 have an average of 2 services open per user where there is an average of one service per service user for the 65+ physical support group. More than half of all services for the learning disability group are categorised as long term supported living or accommodation in Gloucestershire.

¹⁵⁸ Ibid.

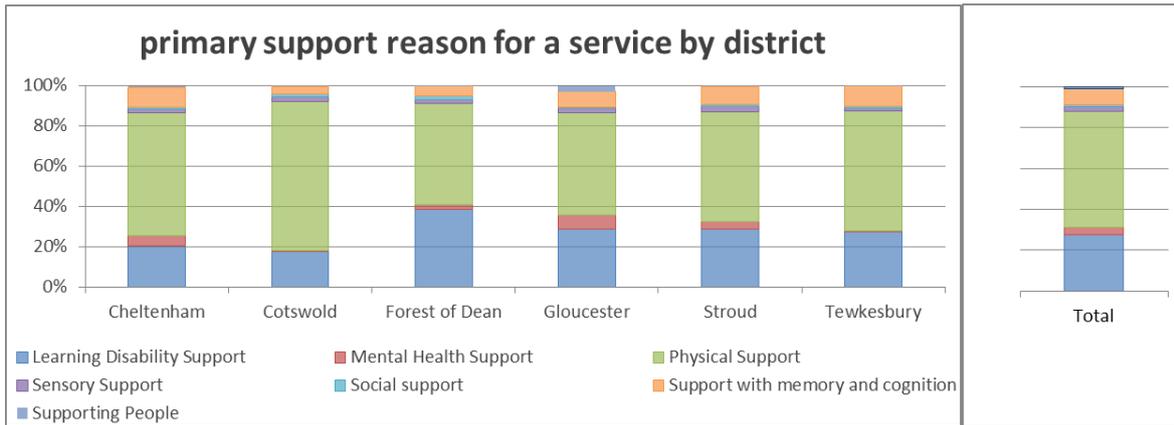


Figure 75: Primary support reason for a service by district (all ages)¹⁵⁹

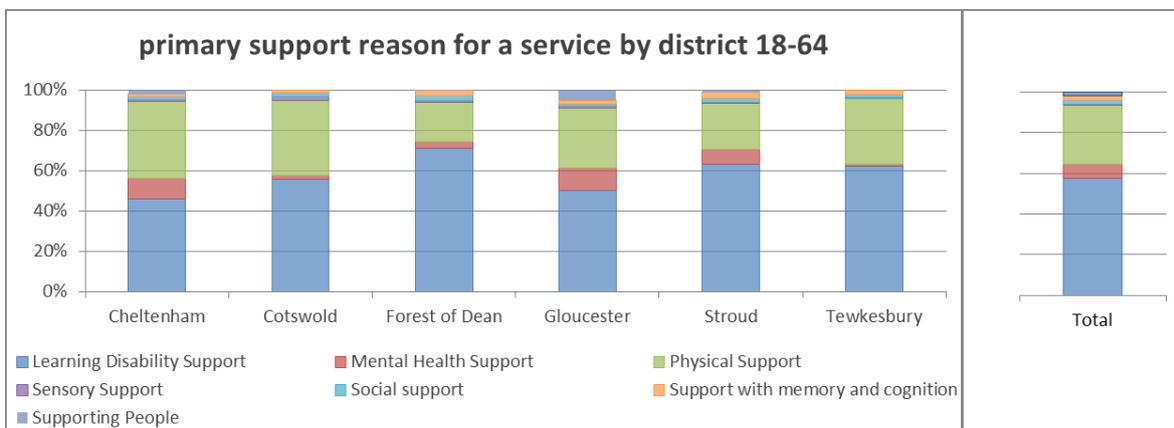


Figure 76: Primary support reason for a service by district (18-64)¹⁶⁰

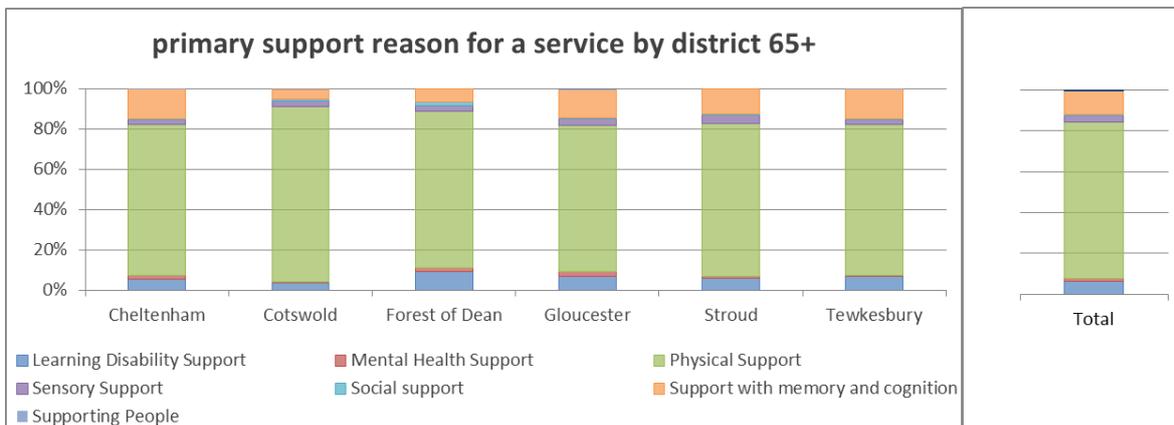


Figure 77: Primary support reason for a service by district (65+)¹⁶¹

¹⁵⁹ Ibid.

¹⁶⁰ Ibid.

¹⁶¹ Ibid.

Inequalities emerge at ward level for service users 65+ requiring physical support. On average support is required 6 years earlier in Oakley and Springbank than College and Lansdown wards. The full range of ages can be seen in Table 30.

When service users are assessed for a service health conditions can be noted on the assessment. These health conditions are often self-reported, may only be noted if considered pertinent to the care and therefore may not reflect the true extent of health issues for each service user. However, they are an indication of the overall health of a service user. Pittville and St. Mark's wards have the most health conditions noted on average per service user as seen in Table 31.

average age of service user 65+ requiring physical support	
Ward	Average Age
College	87
Lansdown	86
Charlton Kings	85
All Saints	85
Prestbury	84
St Mark's	84
St Peter's	84
Pittville	84
Charlton Park	84
Park	84
St Paul's	83
Leckhampton	82
Battledown	82
Benhall and The Reddings	82
Hesters Way	82
Swindon Village	82
Warden Hill	81
Up Hatherley	81
Springbank	80
Oakley	80

Table 30: Average age of service user aged 65+ requiring physical support by ward¹⁶²

average number of health conditions in service users 65+ requiring physical support	
Ward	Average number of health conditions
Park	0.6
Battledown	0.8
Charlton Park	0.9
Up Hatherley	0.9
College	1.0
St Paul's	1.0
Benhall and The Reddings	1.1
All Saints	1.4
Swindon Village	1.4
Prestbury	1.4
Charlton Kings	1.4
Warden Hill	1.5
Lansdown	1.6
St Peter's	1.7
Oakley	1.8
Leckhampton	1.8
Hesters Way	1.8
Springbank	1.8
St Mark's	1.9
Pittville	2.0

Table 31 Average number of health conditions in service users 65+ requiring physical support¹⁶³

¹⁶² Ibid.

¹⁶³ Ibid.

Age inequalities by ward appear more pronounced for learning disability support service users. The average age of those accessing services is 26 in Pittville and 58 in Lansdown, a difference of 32 years. Given that more than half of all learning disability services are residential or supported living it's possible these ages indicate types of housing services available in the wards rather than a true inequality of service access. The number of learning disability service users is small in each ward which means the average age can be affected by extreme values so care should be taken when interpreting these results. The ONS published median age of each ward highlights the potential significance of the age disparity as it does not reflect the age of service users.

As stated above when service users are assessed health conditions can be noted on the assessment. The average number of health conditions noted for service users in Hesters Way (3.4) is much higher than Prestbury (1.3).

average age of service users requiring learning disability support			average number of health conditions in service users requiring learning disability support	
Ward	Average Age	Median Age 2016	Ward	Average number of health conditions
Lansdown	58	35.4	Prestbury	1.3
Benhall and The Reddings	55	46.3	Up Hatherley	1.6
St Mark's	55	38.1	Swindon Village	1.8
Leckhampton	52	46.2	Leckhampton	1.9
Up Hatherley	52	44.7	Springbank	1.9
Park	51	43.2	St Peter's	2.0
Charlton Kings	50	45	Benhall and The Reddings	2.0
Warden Hill	48	46.1	Lansdown	2.1
College	48	36	College	2.3
Springbank	44	36.5	St Paul's	2.3
Prestbury	40	53.2	Battledown	2.3
Hesters Way	38	33.8	St Mark's	2.4
Oakley	38	37.2	All Saints	2.5
St Paul's	36	26.4	Pittville	2.5
St Peter's	36	33.2	Charlton Park	2.5
Charlton Park	36	50.6	Charlton Kings	2.8
Swindon Village	30	40.5	Park	2.9
All Saints	30	35.6	Warden Hill	3.0
Battledown	28	39.7	Oakley	3.1
Pittville	26	40.4	Hesters Way	3.4

Table 32 Average age of service users requiring learning disability support¹⁶⁴¹⁶⁵

Table 33 Average number of health conditions recorded for service users requiring learning disability support¹⁶⁶

¹⁶⁴ *Ibid.*

¹⁶⁵ MYE6: Median age of population for wards in England and Wales, mid-2016, ONS

¹⁶⁶ Data and Analysis Team, Gloucestershire County Council

Carer data is presented at a county level due to low numbers but valuable insights can still be gained. This data reflects any new carer assessments made in the 2018/19 financial year and gives an indication of the number of carers in relation to other districts rather than providing a full picture of all carers. It is also important to note that this only reflect carers that are registered with the council.

There were 622 recorded care assessments in the financial year 2018/19, 14% (87) of which were for residents of Cheltenham. Cheltenham had the second lowest rate of carer assessments per 1000 population, the lowest being Tewkesbury. However the age of carers at assessment is one of the lowest in Cheltenham at 74 compared to the highest of 77 in The Forest of Dean. Cheltenham has fewer carers per population than other districts but they typically become carers several years younger than those in other districts. This could be viewed positively; it could mean people are registering as carers when they begin to take on responsibility rather than caring without support. However it could mean that people are becoming carers earlier than in other districts. More investigation is required in this area.

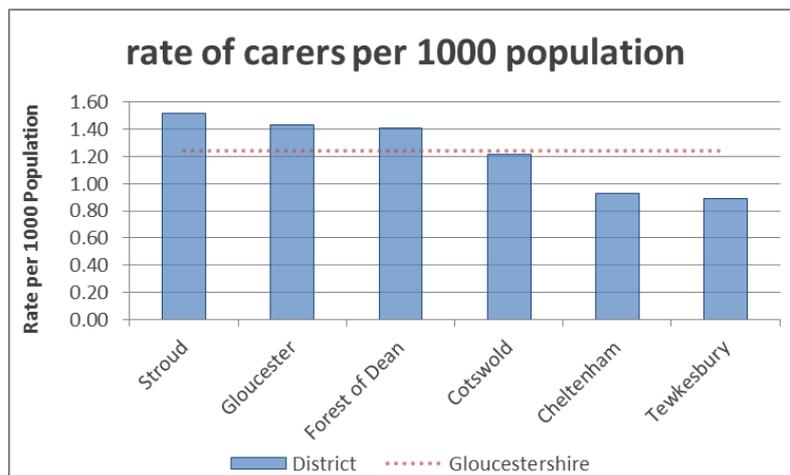


Figure 78: Rate of carers per 1000 population¹⁶⁷

¹⁶⁷ *ibid.*

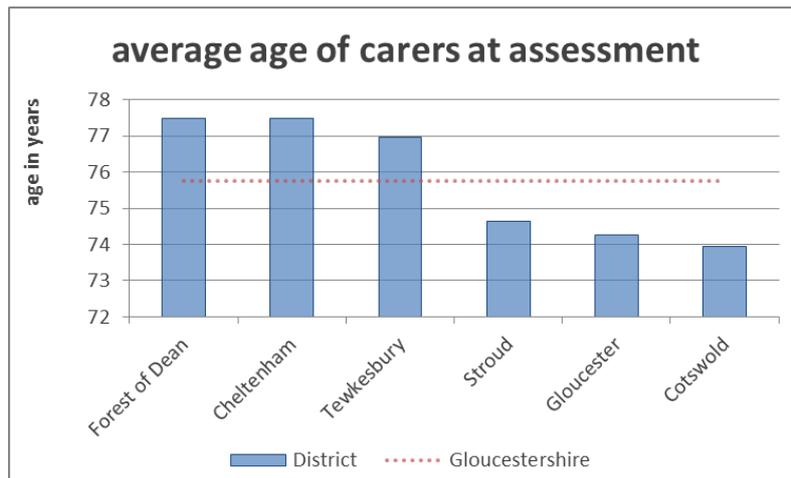


Figure 79: Average age of carers at assessment¹⁶⁸

Appendix 1: Error Bars

The Annual Population Survey is a sample survey, it provides estimates of population characteristics rather than exact measures. In principle, many random samples could be drawn and each would give different results, due to the fact that each sample would be made up of different people, who would give different answers to the questions asked. The spread of these results is the sampling variability. The error bars indicate the level of confidence for each value on the graph. Longer/wider intervals mean more uncertainty. When two intervals do not overlap it is reasonably certain that the two groups are truly different.

¹⁶⁸ *Ibid.*