

# NON-CONFIDENTIAL



## **Borough of Tamworth**

14 March 2018

Dear Councillor

You are hereby summoned to attend a **meeting of the Council of this Borough** to be held on **THURSDAY, 22ND MARCH, 2018** at 6.00 pm in the **COUNCIL CHAMBER, MARMION HOUSE, LICHFIELD STREET, TAMWORTH, B79 7BZ**, for the transaction of the following business:-

### **AGENDA**

#### **NON CONFIDENTIAL**

- 1 Apologies for Absence**
- 2 To receive the Minutes of the previous meeting (Pages 1 - 6)**
- 3 Declarations of Interest**

*To receive any declarations of Members' interests (pecuniary and non-pecuniary) in any matters which are to be considered at this meeting.*

*When Members are declaring a pecuniary or non-pecuniary interest in respect of which they have dispensation, they should specify the nature of such interest. Members should leave the room if they have a pecuniary or non-pecuniary interest in respect of which they do not have a dispensation.*

- 4 To receive any announcements from the Mayor, Leader, Members of the Cabinet or the Chief Executive**
- 5 State of Tamworth Debate (Pages 7 - 70)**

(Report of the Leader of the Council)

The debate will be broken into three parts. Each topic will be 40 minutes and **each Councillor can speak once for 5 minutes maximum.**

The Leader of the Council will do a 2 minute introduction to each item. These are consistently the important issues to our residents.

- Living a Quality Life in Tamworth
- Growing Stronger Together in Tamworth
- Delivering Quality Services in Tamworth

This will leave roughly 25 minutes at the end of the meeting for any motions, agreement or further review of any topic.

Yours faithfully

A handwritten signature in black ink, consisting of a stylized 'A' followed by a long horizontal line that tapers to a point on the right.

**CHIEF OPERATING OFFICER**

*People who have a disability and who would like to attend the meeting should contact Democratic Services on 01827 709264 or e-mail [committees@tamworth.gov.uk](mailto:committees@tamworth.gov.uk) preferably 24 hours prior to the meeting. We can then endeavour to ensure that any particular requirements you may have are catered for.*

Marmion House  
Lichfield Street  
Tamworth



## **MINUTES OF A MEETING OF THE COUNCIL HELD ON 13th MARCH 2018**

**PRESENT:** Councillor J Chesworth (Chair), Councillors P Thurgood, R Bilcliff, S Claymore, T Clements, D Cook, C Cooke, S Doyle, J Faulkner, R Ford, S Goodall, M Greatorex, A James, R Kingstone, A Lunn, T Madge, K Norchi, J Oates, M Oates, Dr S Peuple, S Peuple, T Peuple, R Pritchard, R Rogers, P Standen, M Summers and M Thurgood

The following officers were present: Andrew Barratt (Chief Operating Officer), Jane Hackett (Solicitor to the Council and Monitoring Officer) and Tracey Pointon (Civic and Democratic Services Officer)

### **44 APOLOGIES FOR ABSENCE**

Apologies for absence were received from Councillor A Bishop, Councillor M Gant and Councillor J Goodall

### **45 TO RECEIVE THE MINUTES OF THE PREVIOUS MEETING**

The minutes of the meeting held on 27<sup>th</sup> February 2018 were approved and signed as a correct record.

*(Moved by Councillor D Cook and seconded by Councillor Dr. S Peuple)*

### **46 DECLARATIONS OF INTEREST**

There were no Declarations of Interest.

### **47 TO RECEIVE ANY ANNOUNCEMENTS FROM THE MAYOR, LEADER, MEMBERS OF THE CABINET OR THE CHIEF EXECUTIVE**

The following announcements were made:

The Mayor Councillor John Chesworth:- I have received the following from Cllr Tom Peuple which I will read out as it is written. 'I am very sorry I cannot be with

you tonight to round off my time as Councillor. Despite the political differences I have had with most of you I would like to think I can count you all as friends, I wish to thank you all for your kindness and support over the last four years and also to extend these thanks to the people I have served with who are no longer councillors in particular the sadly missed Peter Seekings. I particularly wish to thank Councillor Doyle for taking more of my questions than anyone else although I should point out he only pipped Councillor Cook by a single question.

Finally I wish Councillor Cook & Thurgood every happiness for their upcoming wedding and I hope when I come back I may see them in the Gate again.

Councillor M Oates: - Thank you Mr Mayor, can I suggest that you write a letter to thank Councillor People for his service over the last four years.

#### 48 QUESTION TIME:

##### QUESTIONS FROM MEMBERS OF THE COUNCIL NO. 1

**Under Procedure Rule No 11, Councillor Dr S People will ask the Leader of the Council, Councillor D Cook, the following question:-**

"At the recent WMCA Scrutiny meeting, the Metro Mayor was reluctant to agree to using the phrase "Regional Spatial Strategy" but assured me that the non-constituent authorities were included in his consultation over how to deliver the regional target of 215,000 new homes. Would the Leader of the Council update us on the discussions that Tamworth Borough Council has had with Mayor Street regarding delivery of the regional housing target?"

Thank you Mr Mayor.

To be fair Cllr People we speak to the WMCA as a whole in the main rather than direct with the Metro Mayor, but I understand your question.

There is no consultation on how to deliver the homes identified needed by the WMCA across the West Midlands to deliver the economic growth they aspire to. The WMCA have been keen to recognise the importance of local plans in planning for the growth required. Following the Land Commission report the WMCA have established a Housing and Land Delivery Board which agreed the Housing and Land Delivery Plan in September 2017, which was a key recommendation of the Land Commission. The Housing and Land Delivery Plan identified the need for a Spatial Investment and Delivery Plan as also recommended by the Land Commission. I will quote directly from a report to the Board on the 21st February:

This places the focus firmly on delivery and is specifically not a new statutory regional planning structure. There is a need for further coordinated and resourced delivery efforts to unlock housing supply in the region. The Spatial Investment and Delivery Plan (SIDP) will set out a spatial framework for growth including

priority sites and growth areas and associated infrastructure requirements and the actions participating authorities, including WMCA and its strategic partners, Homes England, TfWM, HS2, Network Rail and the Highways Agency, will take to support the delivery of new homes and employment opportunities in the region.

The Council through Cllr Claymore sits on the Land Delivery Board and we have officer representation at Steering Group and clearly we are represented by yourself on Scrutiny.

On the matter of Spatial Plans, you are aware we both agree it would be in the interests of the West Midlands and certainly Tamworth to have these discussions so infrastructure requirements across the region can be accordingly planned.

If you require a more technical discussion, I am sure Cllr Claymore can be of assistance.

Supplementary / Background: The Birmingham and Black Country Housing Market area have recently published a technical report on potential for delivering future housing. Cabinet will be receiving an update on this in due course.

**Councillor S Peale asked the following supplementary question:-**

Thank you Councillor Cook. I thought it was good that it's all out in the open. Firstly to note that the Mayor said his staff would be going round authorities, so I am expecting that he shall take a great interest and secondly, in the spatial and public plans that have been put together and published it refers to Strategic highways and to areas on the borders between two authorities. So could I ask that we make it a priority in approaching the West Midlands because obviously Scrutiny is a different thing to the Executive role that you have which is that we should be applying I believe for the sort of infrastructure investment to unlock the sites that appear to be going to be coming into our area, unless we're very careful that I would ask you to take that as a priority going forward to address that issues of strategic corridors and cross boundary developments because I think in recent weeks we've seen quite a few and one of them is going to be discussed tonight.

**Councillor D Cook gave the following reply:-**

Hard to disagree with anything Councillor Peale just said, absolutely correct, when we're talking cross border and the delivery of infrastructure on the wider West Midland Region we need as a council to approach every avenue of support and every avenue of funding to insure that infrastructure does arrive. Councillor Claymore does have it marked as a priority in his diary to continue those discussions and our Chief Operating Officer Mr Barratt also as it as a priority to continue more discussions. And I'm pleased to see this evening that Infrastructure, Safety & Growth Scrutiny will be making a motion, I believe to get all 30 Councillors to sign a letter to our neighbouring authority which follows up a letter I've sent on behalf of Cabinet for better and more detailed discussions and I am pleased to say it seems to be a cross party decision at the moment but not to

pre-empt discussions I fully support what Councillor People said and he has my assurance that it is a priority.

**Thank you Mr Mayor**

## **QUESTIONS FROM MEMBERS OF THE COUNCIL NO. 2**

**Under Procedure Rule No 11, Councillor Dr S People will ask the Portfolio Holder for Regeneration, Councillor S Claymore, the following question:-**

"In the projected budget for the Enterprise Centre, it is clear that high occupancy is not leading to a profit over three years. Given the continuing squeeze on Council resources, how does the Portfolio Holder plan to increase returns?"

Thank you Mr Mayor

It is important from the outset to highlight that the aim of the Enterprise Centre is to provide a hub for businesses to start, grow and develop in a supportive environment, and not as an income generator to the Council.

As detailed in the recent cabinet report the projected budget takes a cautious approach to future revenue and activity as the TEC, being open for less than 10 Months, is still working to establish itself and its reputation. Income from office figures are therefore not based on the current 100% occupancy levels but instead, builds in possible vacancies.

The focus of the team running the TEC is to maintain these occupancy levels and also to establish and increase income for our meeting rooms and virtual office space offer. Alongside, looking at minimising operating costs when fully known and where possible, but importantly, whilst maintaining the high quality offer that has attracted the tenants to date.

There is a full and detailed business plan in place, attached to the said Cabinet report that details how the Centre will move forward and develop.

The Centre also contributes towards significant benefits to the local economy, locating 15 businesses to the Town Centre that were not there previously and creating opportunities for employment, training, business creation and skills development.

## **49 AUDIT & GOVERNANCE ANNUAL REPORT**

The Report of the Chair of Audit and Governance Committee advising Members on the action taken by the Audit and Governance Committee for the municipal year 2017/18 was considered.

**RESOLVED:** That the contents of the report be endorsed

*(Moved by Councillor M Summers and seconded by Councillor R Ford)*

## 50 SCRUTINY CHAIRS REPORT

The annual report of the Chair of Corporate Scrutiny was received

**RESOLVED:** That Council

1. agreed to continue to work with the current scrutiny model.
2. consider the quarterly performance report and;
3. agreed to programming more meetings for Scrutiny Committees, with the ability to cancel as required.

*(Moved by Councillor J Oates and seconded by Councillor P Standen)*

The annual report of the Chair of Health & Wellbeing Scrutiny was received

**RESOLVED:** That the contents of the report be endorsed

*(Moved by Councillor Andrew James and seconded by Councillor S Goodall)*

The annual report of the Chair of Infrastructure, Safety & Growth Scrutiny was received

**RESOLVED:** That the contents of the report be endorsed.

*(Moved by Councillor S Goodall and seconded by Councillor P Standen)*

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The Mayor

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## COUNCIL

THURSDAY, 22 MARCH 2018

### REPORT OF THE LEADER OF THE COUNCIL

#### STATE OF TAMWORTH DEBATE

#### EXEMPT INFORMATION

Not applicable

#### PURPOSE

To inform Council of progress made towards the corporate priorities and the issues raised at the Tamworth Listens Question Time Event.

#### RECOMMENDATIONS

Council debate the contents and findings of the report.

#### EXECUTIVE SUMMARY

The report looks at progress against the themes of the Tamworth Listens Question Time event;

- Living a quality life in Tamworth,
- Growing stronger together in Tamworth,
- Delivering quality services in Tamworth.

It highlights achievements and issues backed up by performance information and public opinion gained through consultation activities including budget consultation, on-line questionnaires and the question time event.

#### RESOURCE IMPLICATIONS

There are none.

#### LEGAL/RISK IMPLICATIONS BACKGROUND

There are none.

#### SUSTAINABILITY IMPLICATIONS

There are none.

#### REPORT AUTHOR

John Day

#### APPENDICES

- Appendix 1 State of Tamworth Debate Report
- Appendix 2 Tamworth Locality Profile 2018
- Appendix 3 Tamworth Health Profile 2017.

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# **State of Tamworth Debate**

## **22nd March 2018**

## **Introduction**

The report look at progress made against the strategic priorities;

- Living a quality life in Tamworth,
- Growing stronger together in Tamworth,
- Delivering quality services in Tamworth.

It highlights achievements and issues backed up by performance information and public opinion gained through our consultation activities, where available.

This approach is intended to encourage debate in the Council Chamber on those things important in Tamworth.

Appendices are attached

Appendix 2	Tamworth Borough Locality Profile 2018
Appendix 3	Tamworth Health Profile 2017

## Living a quality life in Tamworth

To support this strategic priority, Tamworth Borough Council works towards these ambitions;

- More people will live longer, healthier lives,
- Fewer children will be obese and run the risk of heart disease and diabetes,
- People will feel safer and less fearful of crime and anti-social behaviour,
- The built and natural environments will be conserved to the highest possible standards,
- More people will be living independent lives with access to facilities,
- There will be fewer vulnerable people requiring specialist services.

### More people will live longer, healthier lives

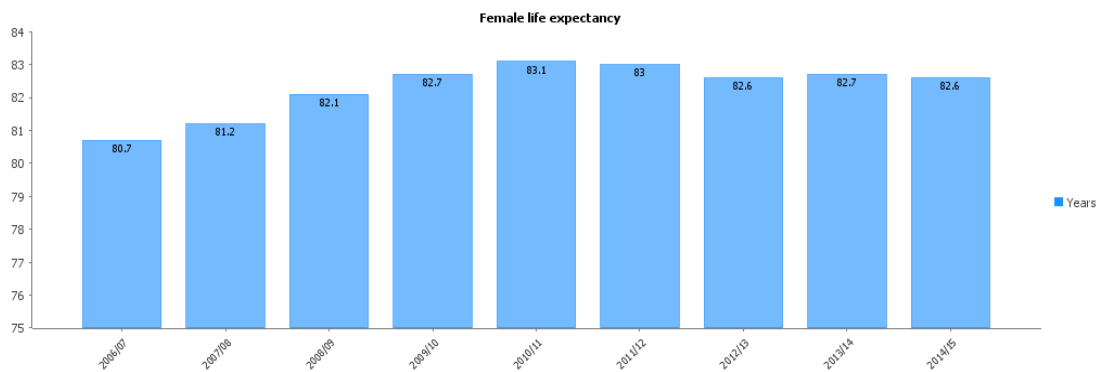
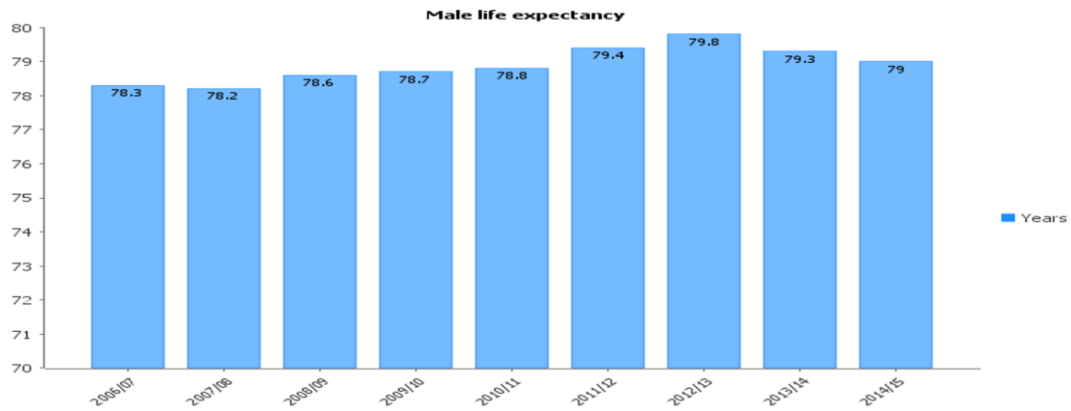
This ambition was seen as important by 73% of respondents in the 2018/19 budget consultation exercise; the second highest under this strategic priority.

When asked to select five things that make somewhere a good place to live, good health services was seen as important by 76% of respondents; the second most popular choice. With 70% of respondents believing the health service needed to improve to make Tamworth a better place to live.

Many comments received about this were around the provision of a hospital in Tamworth;

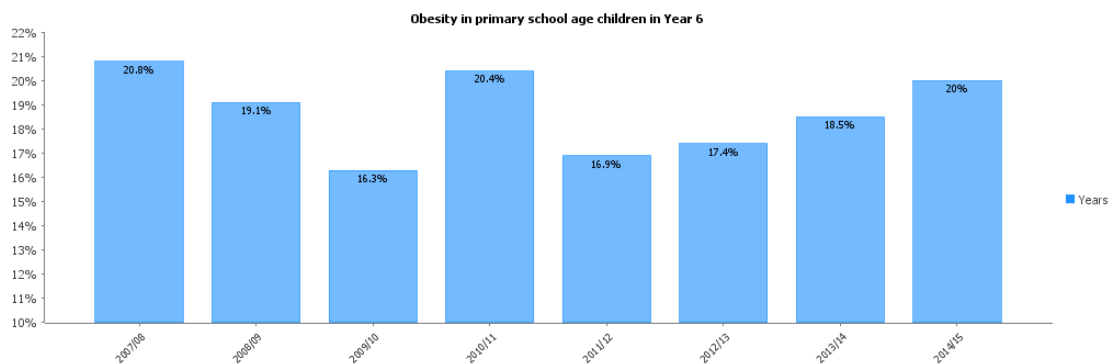
- *Tamworth should have its own A&E Department, the population is growing and we should not have to travel to Birmingham or Burton or Nuneaton to access this and other health services,*
- *A cottage hospital (The Peel) when we were supposed to have a main hospital is wrong and what happened to the money from the land that was sold on which St Editha's and Tamworth General stood. It should have gone to building a main hospital instead we still only have Good Hope and Burton,*
- *A fit for purpose new Hospital,*
- *A Hospital not befitting the size of Tamworth,*
- *Proper hospital- like we were promised,*
- *Provision of decent hospital,*
- *To have a major A & E hospital, expand at Robert Peel,*
- *We need a decent and fully functioning hospital etc. in this town. With all the new properties under construction our numbers will swell. When will some acknowledge this fact!!*
- *We really need a more local large hospital - Good Hope serves too many and is too far away,*
- *The vision and priorities and ambitions are very good especially focusing on longer lives, as a pensioner now it is important to look after all ages.*

The overall health of people has improved over the last few years; people's life expectancy is improving. Life expectancy for a female is 82.6 (compared to 83.1 nationally) and for a male is 79.0 (compared to 79.5 nationally).



### Fewer children will be obese and run the risk of heart disease and diabetes

This ambition was seen as important by 60% of respondents in the 2018/19 budget consultation exercise



Comments made in this area were around the provision of sporting activities in Tamworth:

- *better sports programmes for over 50s (do not know of any at present) to keep fitter...continuous improvement in the sports options for kids as I believe this helps them develop not just physically but mentally and also helps social interaction,*
- *Sports and leisure need to be affordable and the gyms are very expensive.*

However, only 11% of respondents cited good sports and leisure facilities as an important factor in making somewhere a good place to live and only 10% felt these needed to improve in Tamworth.

### **People will feel safer and less fearful of crime and anti-social behaviour**

This ambition was seen as important by 81% of respondents in the 2018/19 budget consultation exercise, the highest under this strategic priority.

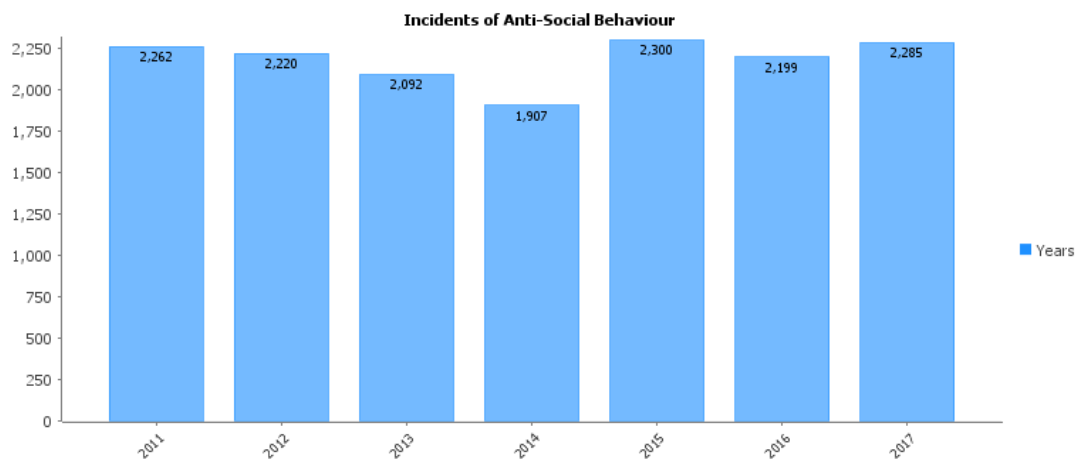
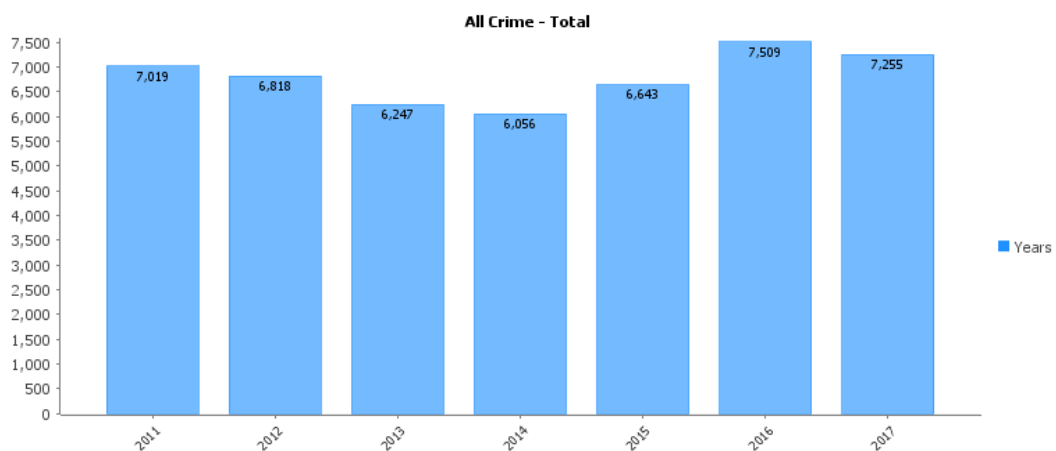
When asked to select five things that make somewhere a good place to live, low crime levels were cited as important by 90% of respondents; the highest. With 76% of respondents believing the crime levels needed to improve to make Tamworth a better place to live.

Many of the comments received concerned the presence of police and the street wardens in Tamworth

- *We could do with more community wardens. These guys had always provided a great service in Tamworth and now there's only a couple left,*
- *It was better when we saw the street wardens in their own areas,*
- *Make use of the Street Wardens etc. to keep cyclists on the road - not on the pavements - it has become the 'norm' to ride on pavements and is not acceptable,*
- *Clamp down on professional beggars. More police presence in the town centre. A 24 hour Police Station (not 9am-5pm),*
- *A higher and more police presence,*
- *Crime reduction and police on the beat should be number 1 priority, increase my council tax if needed to fund it,*
- *Every time we ring the Police about motorbikes on the open parks no one comes out, or it's 2 to 3 hours later when they have gone,*
- *Police more available. Someone needs to do something about all these motorbikes that drive you mad with the noise they make,*
- *More Police patrolling local areas,*
- *Lack of police presence,*
- *We need more policing in the centre of town - there are increasing numbers of youths in groups hanging in the centre and behaving in an unsociable manner. Zero tolerance,*
- *Improve the antisocial behaviour in the streets especially when Tamworth have put on events and large number exit at the same time,*
- *The Community Safety Partnership was the best in the County. You have allowed it to fail,*

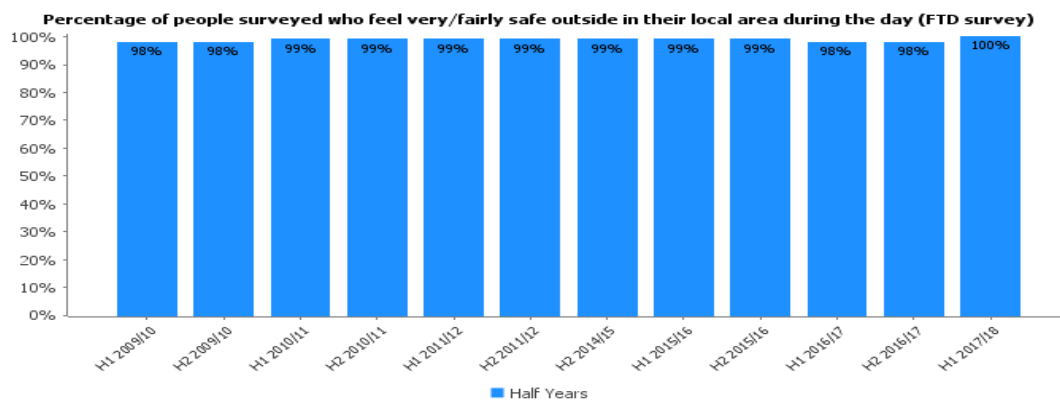
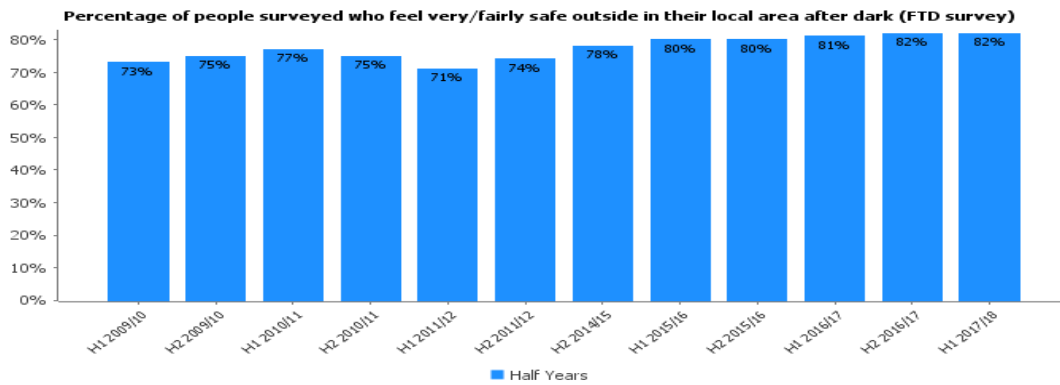
- *Enough is not done in estates to monitor tenant's behaviour, their living & so on. Multiple agencies need to do more to spot troublesome families & work with neighbours & the families to raise the standards of living for all. It's amazing how it effects everyone around them,*
- *Sort out the on-going problems with travellers costing us money year in year out. If other councils can get them moved on within 24 hours, why can't Tamworth? Is there an officer who can specialise in this line of work? A training course they could go on perhaps? To add insult to injury, these people park for free on Jolly sailor car-park each year,*
- *We need to improve the perceived levels of Crime.*

The number of all crimes recorded decreased slightly during 2017 but the number of anti-social behaviour cases has increased slightly.

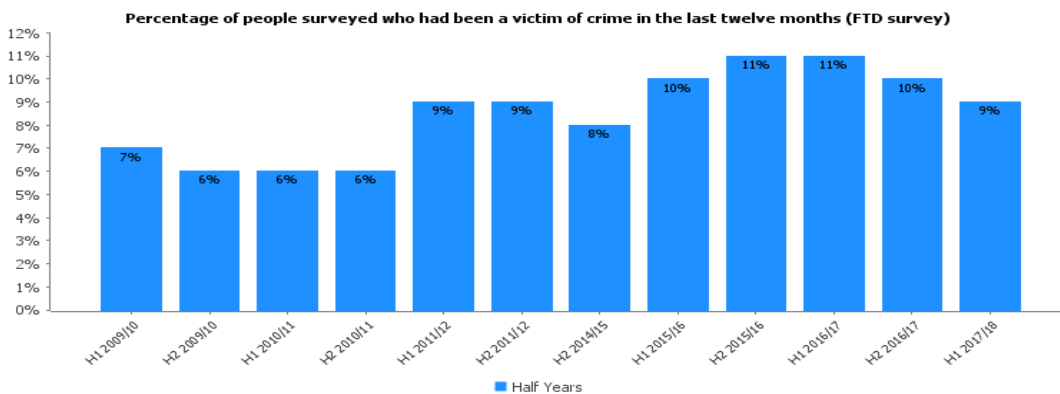


People's perception of crime in the Feeling the difference survey has remained largely the same over the same period.





The number of people surveyed who have actually been a victim of crime has also fallen.



**The built and natural environments will be conserved to the highest possible standards**

This ambition was seen as important by 71% of respondents in the 2018/19 budget consultation exercise and when asked to select five things that make somewhere a good place to live, clean streets were seen as important by 52% of respondents with 57% of respondents believing the cleanliness of streets needed to improve to make Tamworth a better place to live. Good parks and open spaces were deemed important by 57% of respondents with 40% feeling that they needed to improve.

There were mixed views on the cleanliness of Tamworth:

- *Clean streets more, look after the street trees, clean up the Magistrates Court - it is a disgrace, the litter and weeds spoils Tamworth and. repair pot holes in road,*
- *Street cleaning very poor,*
- *I live in Belgrave and I have to say I think we are forgotten as far as the council are concerned. It is dirty untidy nobody seems to care about rubbish or cleaning the environment and the trees are in desperate need of pruning. We as residents where I live do things ourselves, we shouldn't have to,*
- *Litter is a real issue for the perception of visitors and locals alike. There seems to be fewer bins available in the Castle grounds and the bins on the pedestrian walkway from the Castle grounds to Amington Road have been removed. Dog poo is also a problem. Perhaps if a few people are 'made an example of' it may result in more people taking responsibility for their actions,*
- *Although the Council do a good job in most areas in the town keeping grass cut cleaning up rubbish etc. I feel parts of the town could be improved e.g. the fountain island at the Comberford junction is full of weeds. The walk into town is always full of rubbish, I realise it is near schools and colleges but it is also an approach to our wonderful town. The majority of people throw their litter in bins but there are still an awful lot we discard fast food rubbish and drink bottles down this area. It is also a pity something could not be done to make the fountain island live up to its name,*
- *Employ litter wardens to generate revenue while reducing the million pounds you spend on cleaning,*
- *Encourage communities to keep their paths clean outside their home, clean up litter and dog mess,*
- *Standards, when street cleaning, grass cutting, hedge cutting is done to a poor standard, needs to be improved around people's walkways and front doors instead of rubbish left lying around,*
- *Stop dogs being taken in green spaces. Litter - this is not the Council's fault, it is the disgusting people who live all round town and outlying areas,*
- *Tamworth is in need of a deep clean, that is to be maintained to the highest standards,*
- *The state of the cleanliness and condition of some council housing areas are dreadful. The amount of weeds, nettles and brambles growing in some pathways are quite dangerous to young children,*
- *The streets need to be cleaned more often as a lot of litter is thrown onto the ground especially in the Fazeley area where I live. More litter bins and patrolling is needed to improve the situation. I have emailed twice regarding this matter and the situations remains the same,*
- *We need street cleaning more regularly, the grass cuttings should be taken away.*

The state of roads and path were also felt to be in need of attention in some parts of Tamworth

- *You do not mention the state of all the roads pavement precincts that are not being maintained drains not being cleaned,*
- *Improve surface and cleanliness of paths (Coton Green),*
- *Make sure you keep to your promise and carry out job that needs doing then Tamworth will be fit to live in again,*
- *Roads and pavements - for the first time this year I have noticed the high amount of weeds growing along the pavements i.e., Offa Drive.*
- *Walkways need to be cleaned more regularly especially behind houses,*
- *The state of most roads are appalling and lack of weeding along guttering, paths etc. Many of hedgerows are very overgrown as to be hazard.*

Comments recognised the importance of the maintenance of the green spaces in Tamworth:

- *Green space is very important needs protection,*
- *The park in the castle grounds needs some sort of water play area for the children in the summer months, and the roundabout needs replacing as it doesn't turn. The mess from the Canadian geese needs hosing down more often from the walkways,*
- *There are lots of open spaces that could do with some care. The Castle grounds are magnificent but I hope they are not used as an excuse for not looking after other areas. The cycle paths are often overgrown with trees that need cutting back,*
- *Wildflower patches along roads was a brilliant idea - bee and insect friendly and good 'feel good' factor - more please,*
- *We have beautiful flowers and parkland provided and tended by the council. We need to open the castle more to the town and provide more events to bring the community together.*

### **More people will be living independent lives with access to facilities**

This ambition was seen as important by 68% of respondents in the 2018/19 budget consultation exercise.

Comments made included:

- *Your vision is good but there is nothing in Tamworth for adults with Autism, they want a place to live with support and with other Autistic adults. It seems like they don't exist. My son's social worker is great but deals mainly with learning disabilities which he hasn't got. Help for him and others like him would be a priority for us.*

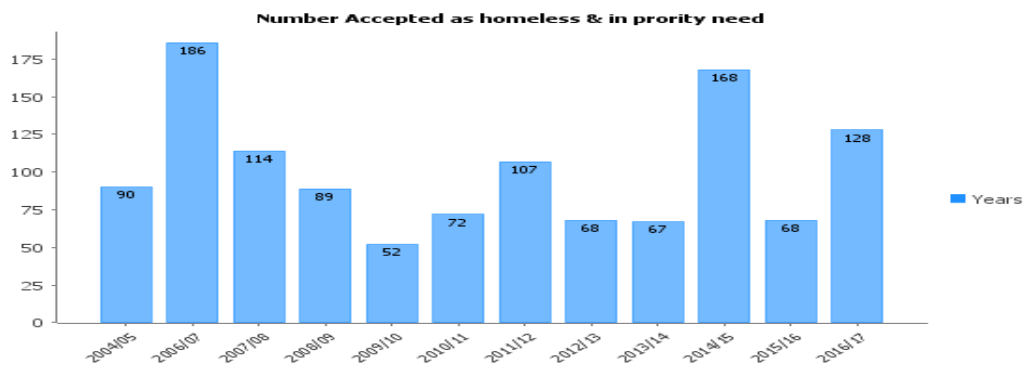
**There will be fewer vulnerable people requiring specialist services.**

This ambition was seen as important by 58% of respondents in the 2018/19 budget consultation exercise; the lowest under this strategic priority.

Comments received included:

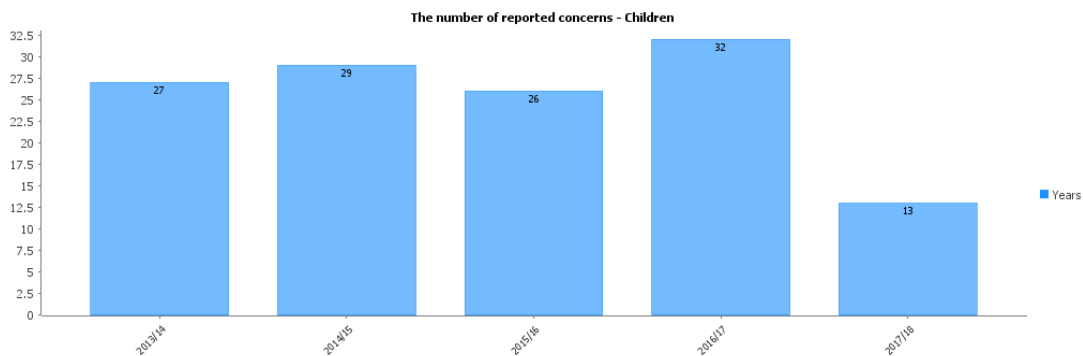
- *It appears your vision takes a priority towards business and not supporting the poor and those in need. More social housing is required and investment in social care. Stop wasting money on fireworks and use that money for the poor*

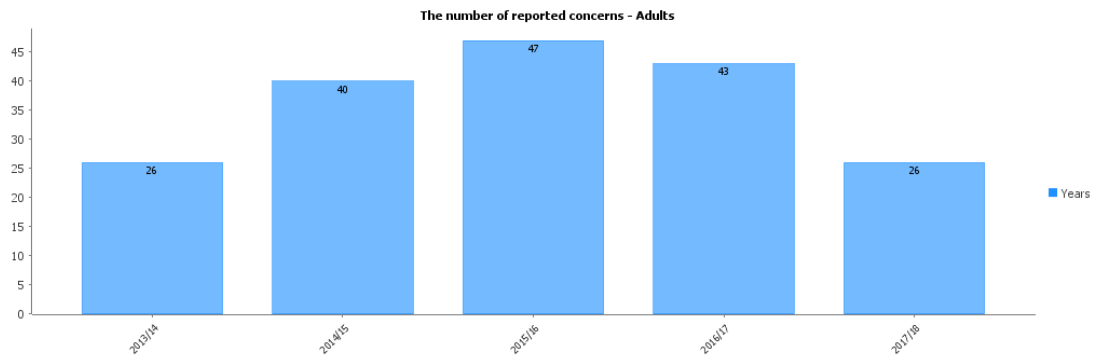
The number accepted as homeless and in priority need saw a rise in 2016/17. 25% of respondents felt that more should be spent on the area of housing advice, grants and homelessness.



As an organisation, Tamworth Borough Council has a statutory duty to safeguard and promote the welfare of children and adults at risk. The figures recorded provides evidence that staff understand this responsibility and recognise what neglect and abuse is and know how to appropriately respond to concerns they have.

The number of concerns raised in relation to children has remained consistent whilst the number of concerns raised in relation to adults at risk has increased steadily over the past four years evidencing the increased demand on the service over this period.



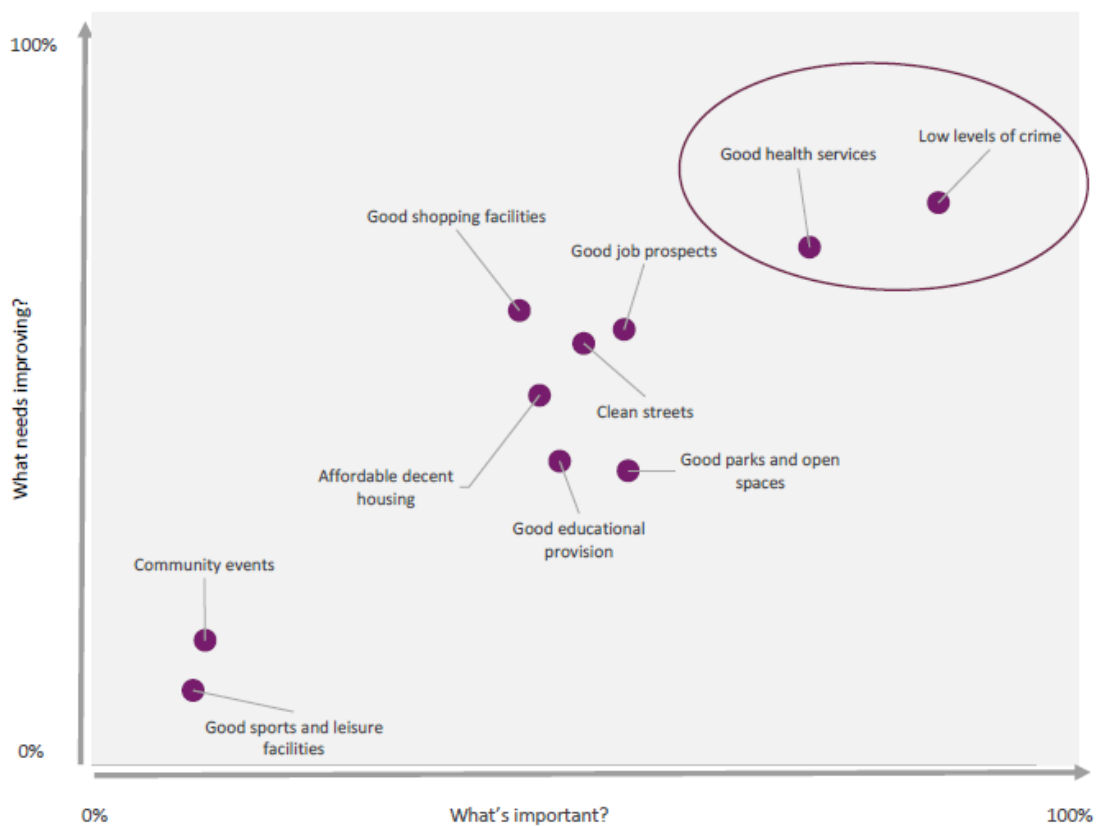


The number of adult social care users fell in 2016/17 to 1190 from 1220 the previous year.

### What makes somewhere a good place to live and what needs improving in Tamworth?

From the results of the Budget Consultation 2018/19, this graph shows both what respondents feel is important and what needs improving to make Tamworth a better place to live.

Low levels of crime and good health services were seen as both of higher importance in making somewhere a good place to live and also higher in needs of improvement in Tamworth.



At the Tamworth Listens Question Time Event in March 2018, the following questions were asked on living a quality life in Tamworth.

- *Should there be an increase in the number of community wardens? Currently I believe there are just five, I would like to see at least ten with each ward area having a named warden and contact details for them. This means for lesser crime such as littering, dog fouling and some anti-social behaviour residents know where to turn. I understand there will be an argument of cost but with more fines being given out for these behaviours more money would come in, hopefully these behaviours would reduce due to an increased deterrent meaning less money being spent cleaning up. Other ideas could be two councillors for each ward instead of three alongside the community warden or to decrease parking wardens for which I regularly see at least two patrolling the same area.*
- *What are the local police force doing to make the public feel secure when visiting the town, public parks and other family areas where there has been a number incidents involving teenage groups causing anti-social behaviour?*
- *What can be done about the issue of parking near schools at the 'drop off' and picking up times?*
- *What effect will the Police Response Hubs have on Tamworth Police Station and the level of service we receive from the Police?*
- *Is the size of Tamworth's Police force directly related to its size as a proportion of the area of the county of Staffordshire?*
- *Our CCTV system is becoming obsolete; does the Police and Crime Commissioner for Staffordshire have funds available to assist in its renewal?*

## Growing stronger together in Tamworth

To support this strategic priority, Tamworth Borough Council works towards these ambitions;

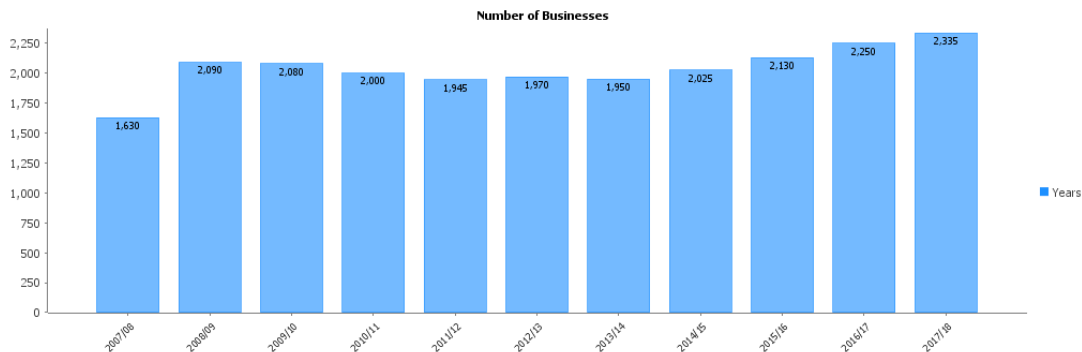
- More businesses will locate and succeed in Tamworth;
- People will have access to a full range of quality housing options;
- Local infrastructure and connectivity will support an active workforce and help grow the economy;
- The Council will be recognised as both business friendly and business like in the way it facilitates and operates;
- Tamworth Town Centre will be regenerated and complement the outstanding retail and leisure offer;
- Tamworth will mean 'a great place to live' not simply 'a place with more houses',
- The Council will have a Commercial Investment Strategy and an associated trading arm designed to invest in assets/other means of sustainable income generation.

### More businesses will locate and succeed in Tamworth

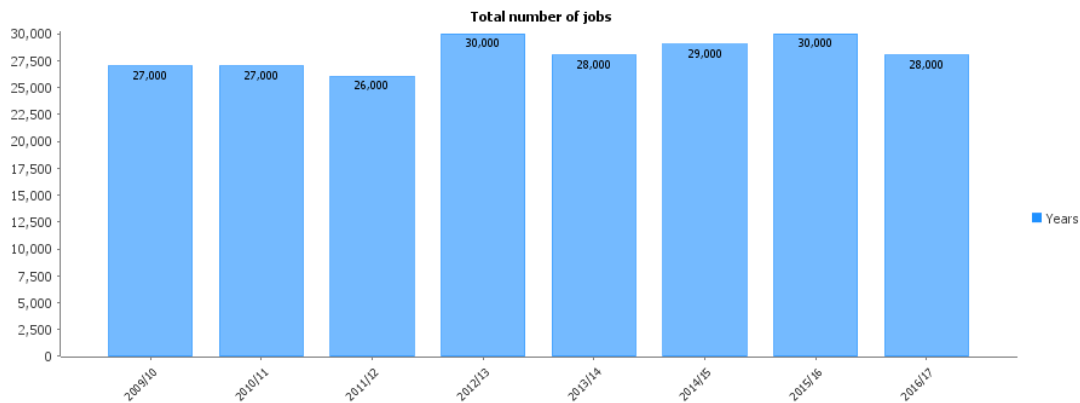
This ambition was seen as important by 63% of respondents in the 2018/19 budget consultation exercise. Good job prospects were considered important by 59% in making somewhere a good place to live and 59% feeling this needed to improve in Tamworth.

The Council is keen for local businesses to grow and therefore needs to be aware of what barriers need to be broken down in order for this to happen. Businesses were asked to identify what they felt were the main barriers to business expansion. The 'cost of business rates' were viewed as the main barrier to expansion, 'parking capacity' was the second most common barrier to expansion.

The numbers of businesses in Tamworth has increased in the last four years.



The total number of jobs figure fell in 2016/17.



Claimant count is a measure of unemployment and measures the out of work benefits of universal credit and job seeker's allowance. In December 2017, there were 520 claimants (1.1% of the working age population). This compares to 2.4% in the West Midlands and 1.0% in Staffordshire.

Comments made around job creation and encouraging business included:

- *Better quality jobs so that those on higher incomes can work in Tamworth. Right now, most higher earners commute out of town,*
- *Most work in Tamworth is low level of pay for unskilled workers,*
- *Bring in some big name companies for jobs also to reduce the business rates in Ankerside to fill the empty units,*
- *Lower the shop rents permanently to encourage business to stay and to encourage businesses in Tamworth. Surely it's better to have all shops trading than 50% closed,*
- *The quality of high end job opportunities in Tamworth is not available. No University provision in Tamworth, why can't we have satellite sites assigned to Birmingham Uni or Loughborough etc. This would encourage local take up and also the offering of Tamworth,*
- *I believe that the Council's aim will bring many of the business, social and leisure plans to success with a little help from prosperous business and local good will,*
- *Jobs, jobs, jobs, to create a vibrant town centre and content population,*
- *Tamworth needs a vision for employment. More than "Perfectly Placed", it needs to be the "Perfect Place". We need a pro jobs / business attitude.*

### **People will have access to a full range of quality housing options;**

This ambition was seen as important by 55%% of respondents in the 2017/18 budget consultation exercise. Having affordable decent housing was felt to be important by 48% of respondents with 50% being of the opinion that this needed to improve to make Tamworth a better place to live.

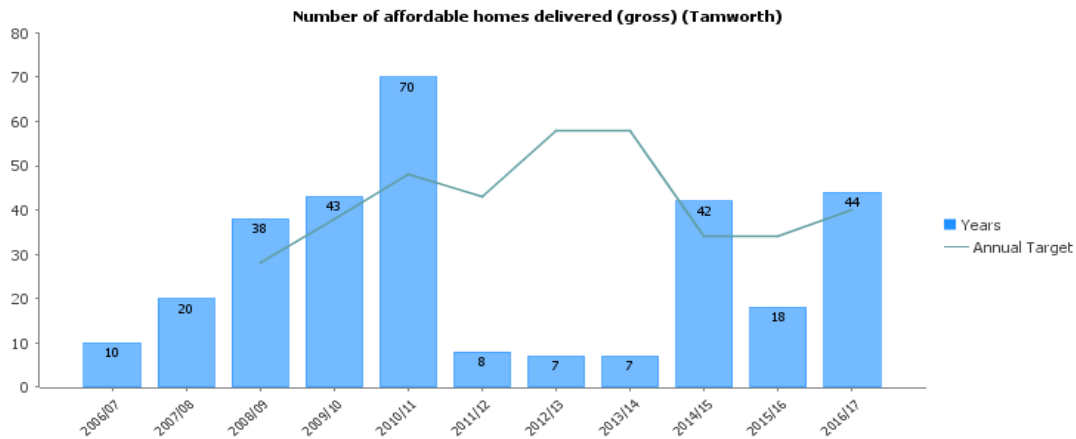
Comments made reinforced this:

- *Ensure affordable housing as first priorities. Enforce balanced friendly high quality low cost rented accommodation,*

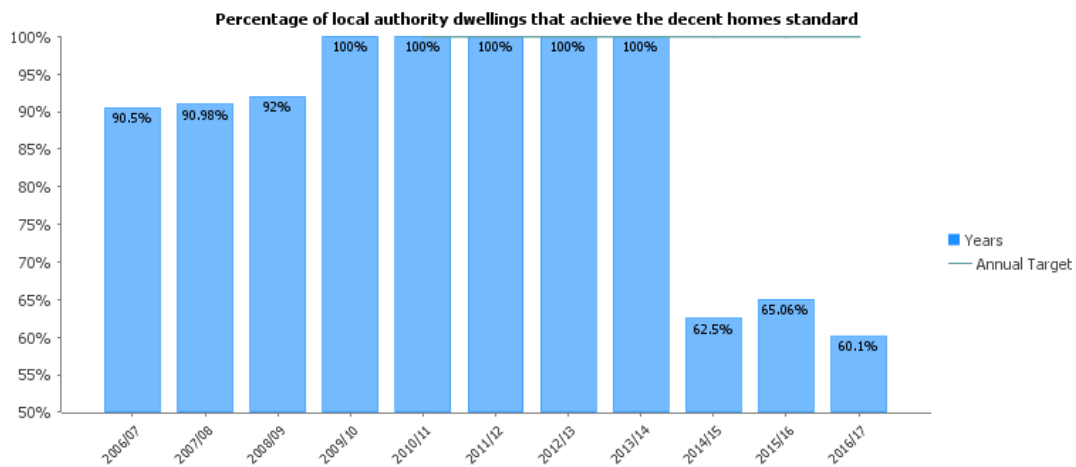


- *The need of 4/5 bedroom social housing accommodation to help larger families have the extra room(s) that they need,*
- *All new housing developments need to be biased towards affordable housing, i.e. At least 50% three bed or less and 25% two bed or less,*
- *A large number of houses are in the planning phase. How many will be 'affordable'?*
- *Most builders do not want to build low cost housing, so luxury housing are not affordable for the people who need housing,*
- *More public spaces, toilets are needed given the expanding population along with affordable housing and access to health care,*

The provisional return for affordable homes completions for the year 2016/17 was 44 units. The Council's role in providing new homes is setting the right environment for house building by producing an up to date and sound Local Plan and the approval of planning applications for sustainable development. Whilst the figure was above the target of 40 units, a number of schemes are currently under construction which should lead to higher surplus next year.



The low decent council homes standard figure is due to revised stock condition data and the start of a new five year cycle commencing 2015/16.



## **Local infrastructure and connectivity will support an active workforce and help grow the economy**

This ambition was seen as important by 59% of respondents in the 2018/19 budget consultation exercise. 43% felt that an improved road network was needed to assist business and the economy.

The state of Tamworth's roads generated many comments:

- *The state of the roads is appalling. Tamworth Council needs to petition the County Council to invest more money in our roads,*
- *The state of the roads is a disgrace,*
- *Roads need to improve, too many potholes,*
- *We need to spend some money on fixing potholes in residential areas - absolutely disgraceful – it's all very well spending money on the route from the railway station to town via Victoria Road to make it all look 'nice' to visitors but don't forget the residents who use these awful roads every day!,*

Respondents were also concerned on the building of additional housing and the infrastructure to support it:

- *Road networks are stretched at peak periods. The addition of new houses means better infrastructure is needed. This has not been catered for,*
- *Far too much housing going on without the infrastructure, recently I wanted a doctor's appointment, the wait was 5 weeks!!! I had to appeal for all 3 of my children to go to the school most local to us because houses being built within the changed catchment now get priority. Their school walk and crossing only 1 minor road would go from 15 mins to over 40 mins and having to navigate 3 of the most major junctions at 11 yrs old or having to take them by car. Forcing more parents on the school-run on already busy roads. Finally, new estates being built only have provision in the plans for primary schools...then what? The extra traffic congestion, doctors, dentists, school places, refuse etc. are not being discussed at all,*
- *Investment in infrastructure road/rail/tram & bus access to town and surrounding area investment in town and facilities will influence private investment in housing and commercial. Local residents will spend free cash locally not in other areas. Link together main station and town - shopping areas (Ventura park),*
- *Although it is accepted that we need more housing I feel the infrastructure is very lacking to accommodate this, the roads, doctors, surgeries, schools cannot cope,*
- *Invest in infrastructure for businesses, regenerate town centre and surrounding areas ensuring good access, drive out waste from Council spending, ensure adequate health, education, leisure and housing with investment,*

- *Successive elected members have only been interested in lining their pockets with attendance allowances, junkets & freebees rather than properly representing the interests of their electorate, resulting in Lichfield building right on the borough boundary where residents will be using Tamworth facilities while making no financial contributions to those services & facilities - totally ridiculous & outrageously unfair. Planning regulations are now pathetic & lining the pockets of developers & those who are probably getting rewards for supporting big businesses but beware the electorate are investigating in great detail these specific infringements. You will be brought to account for your ridiculous decisions. Why are Lichfield & Tamworth working hand in glove with refuse collection & planning services without the authorities being formally joined together. The situation is currently most unsatisfactory - if fact it stinks!*
- *Too much interference from Staffordshire County Council and other neighbours holding a gun to the head of Tamworth Borough Council to participate in schemes that will not benefit Tamworth,*
- *Traffic problems on Glascote Road must be improved to help your ambitions,*
- *Your 'vision' would appear to be empty retail units and every available green space built upon!*
- *More and more spaces been used to build on taking away many areas for children to play safely in area close to their homes.*

Transport links also drew comments

- *Travel link from Town centre to Ventura park,*
- *Transport links are still shocking. Taxis, buses and trains all cost much more than neighbouring towns. Our young people are hampered and end up seeing it as too hard or expensive to travel into Birmingham for work, education or leisure. Can this be looked at?*

### **The Council will be recognised as both business friendly and business like in the way it facilitates and operates**

This ambition was seen as important by 48% of respondents in the 2018/19 budget consultation exercise, the lowest under this priority.

- *Allow smaller new companies to prosper as most cannot afford business rates and rates*

### **Tamworth Town Centre will be regenerated and complement the outstanding retail and leisure offer**

This ambition was seen as important by 75% of respondents in the 2018/19 budget consultation exercise, the highest under this priority. Good shopping facilities were viewed by 46% as making somewhere a good place to live and 61% believing this needed to improve in Tamworth. However, good sports and leisure facilities were seen as far less important at 11%.

Numerous comments were received on this area and can be grouped into five themes: shops, housing, parking fees, public toilets and visitor attraction.

## **Shops**

- *I agree that the town centre needs regeneration but this will surely not happen until a 'quality' store moves in to the town centre, for example 'Debenhams'!! .....but of course this is unlikely to happen either because they all want to go to Ventura, not the town. The Castle and grounds are fantastic, (I often take people there) but there needs to be a better 'link' to make people go to the town as most just won't go because of the lack of quality shops. Also, I think the 'Co-op' building should be turned into a good quality department store, instead of a store that keeps changing its content and no-one can keep up with what's going on,*
- *The Tamworth community is built around the shared space of the town centre. Sadly there are a majority of empty shops and a dated shopping centre. Venture Park cannot offer those facilities such as market/banking/small businesses, however it is all Tamworth has to offer. The town centre clearly boasts some interesting architecture and could pull new businesses if footfall and investment were made. Don't let this town die completely,*
- *A decent shopping centre in Tamworth town with not so many charity shops, lowers the rents then you might get more traders come in,*
- *By improving shopping facilities I mean I feel that small businesses. We'd to be supported in ensuring they can survive in our town centre and allow the town to keep it's quirky charm rather than looking like any other high street full of large corporations,*
- *Drop rates then more different shops will be in Tamworth. Seems to be cafes, card shops, bookies. Sort buses out, Tamworth may as well be in the Gobi desert after 18.00hrs. The pubs are closing a danger sign. Less talk, more action before Tamworth becomes like a forsaken play out ghost town. Remember Lichfield/Burton/Brum will get the prospects if you don't,*
- *Independent retailers should be encouraged (look at Lichfield or Ashby de la Zouch - they have lovely interesting shops. No more building should be allowed on the fields and green spaces surrounding the area,*
- *Most people shop at Ventura as the shops in Tamworth seem to be Tattoo parlours, fast food outlets, nail tending shops, hairdressers. We do not have a decent shoe shop. The impression Tamworth gives is a scruffy town: this is a great shame as I am fond of Tamworth and like living here but the general little problem is very off putting. The car park in Gungate is filthy with litter, cigarette ends under benches not a few but lots. Flowers are gorgeous and the Castle Grounds lovely, apart from the litter,*
- *The town centre needs more shops. Lower rent so people can start up their own business. Cheaper parking, more toilets,*
- *Rent needs to be cheaper for shops to stay in Ankerside. Need more variety not just card and phone shops,*

- *Tamworth needs more shops within the town itself. Ventura Park excellent but road network and parking is not good,*
- *Tamworth town centre needs more variety of shops not just banks and charity shops. This could be achieved by reducing the rates for new businesses. If town centre car parks were free it could compete fairly with Ventura Park shops,*
- *Tamworth town centre needs to be saved by bringing more decent shops into the town like Primark; Dunelms etc. Not all of us shop in Ventura I for one hardly shop there at all. Also lately our market stalls are not as good as they used to be,*
- *The town centre is slowly dying through heavy rates on shops and too much spent on Ventura Park shopping complex, not everyone has the way to shop in outside shopping centres. Bring back our market town shops and amenities,*
- *There needs to be more variety of shops in the Town Centre. When I first moved here it was a lovely town but it is deteriorating and filling up with charity shops. It looks dull and uncared for which is sad as the Castle Grounds is something to be proud of and then you walk into the town itself,*
- *To make Tamworth town centre, more different shops,*
- *Town centre needs better shops, bars and restaurants*

### **Town centre housing**

- *Emphasis should now be placed on encouraging the building of more housing in the town centre rather than shop units. An ageing population and more shopping on line mean fewer shops are needed. Also having more people living in the town centre will ensure demand for services there,*
- *The town centre must shrink. We should not try keeping it as it is. We should let it shrink in on itself and use the next ring of the doughnut made vacant by empty shops for housing. This would in turn mean more people live in the town centre. We shouldn't think our excellent retail offer at Ventura is immune to change. This will in time also shrink as we move online, again freeing space for housing,*
- *Providing grants to encourage owners of shop/ commercial premises to convert them into usable housing units. Also grants to improve the outside look of buildings in the town centre which look tired. The council also need to spend more money in maintaining and improving the buildings they themselves own to make them more attractive to rent. Either that or if they cannot afford to do that sell them to the private sector,*
- *Tamworth has great potential, it could be a Lichfield. We need to be drawn back in to show locally before the town centre becomes a redundant space which gets bulldozed for housing,*

## **Parking fees**

- *Dropping parking fees would help regenerate the town centre. Tamworth Castle is a huge tourist attraction and should again be floodlit at night - pride in Tamworth!*
- *We need a town to be proud of its run down and is not worth the time to go into free parking for the first two hours in all the car parks that will help bring people back but we need a good variety of shops and good names it can be done look at Burton or Solihull,*
- *Reduce parking fees in town centre. Make Tamworth more attractive for retailers. There are too many empty shops due to, I suspect, rents/rates,*
- *Free parking for the first 2 hours would generate more business in the town,*
- *Keeping Tamworth Town Centre Alive. Free parking. Better evening transport,*
- *Make the town more accessible by free parking not overcharging,*
- *More people will visit the town centre if parking charges are reduced or preferably dropped,*
- *Stop charging visitors to park in Tamworth town centre - it is killing the town's shops! What message do you think "Parking Enforcement", on the back of traffic wardens, sends to visitors?,*
- *Small charge for parking to keep shops open i.e. park and ride*

## **Public toilets**

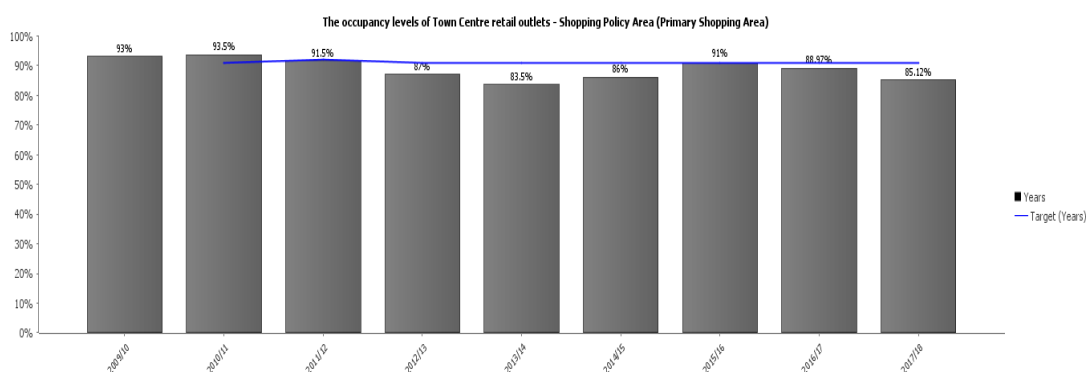
- *How can you possibly aspire to all this in a town without public toilets, the Castle Grounds toilets are a disgrace on the few occasions that they are open,*
- *I don't know whose decision it was to get rid of all public conveniences except for those in Ankerside but it was a big mistake. I don't exclusively shop in Ankerside and several times have been extremely inconvenienced! You need at least one more, the one near the bus stops in corporation street for example,*
- *Too few toilet locations in the town and Castle Grounds,*
- *Town centre toilets, why were they closed, rubbish decision,*

## **Visitor attraction/Regeneration**

- *Town centre needs regeneration. We have an historic castle but the town centre looks run-down,*
- *The use of the rivers Anker and river Tame could be improved around the town and put to better use!*
- *To make sure that Tamworth town centre is remodelled. It needs a revamp and detail to 'old' Tamworth (that which is left) should be maintained. Independent shops should be encouraged. Try to get back the small 'town centre' that enhances our history so many think that 'Tamworth' is Ventura Park,*

- *Town centre needs regeneration, too many empty shops, less emphasis on Ventura Park - very poor roads around Ventura,*
- *Town centre needs urgent regeneration with more visitor friendly shops and streets,*
- *We need more shops in Tamworth to make it attractive for people to come and visit and make the most of the Castle Grounds. Why not have boat rides on the river open little cafes for visitors. Take a trip to Chester and see what they have done,*
- *We need to utilise the empty shops in Tamworth Centre in order to attract visitors to our town. Presently Town Centre very poor with the emphasis now being Ventura Retail Park. We need to give businesses/shops an incentive to stay in the centre,*
- *I feel very sad at the dilapidated look of the Town (Now mainly banks and charity shops) I would love to see a clean busy thriving town again. The bare bones are there do what you can to improve it,*
- *Make it a decent town for people to come and visit - for several years now it has been a really off putting place for anyone to want to visit,*
- *People should be encouraged to shop in town centre not only on market days, Ankerside shops should be opened on Sundays not just a few shops. The days of Sunday being a day of rest have gone because unsociable working times,*
- *Tamworth centre needs to be developed. The number of closed units in Ankerside reflects badly on the city,*
- *Tamworth is currently a depressing place to be. The town centre is dying but parking charges are still excessively expensive, the streets are filled with obese smokers, many of whom almost run people over with their mobility scooters. We need more of a community feel to the town centre especially. Little independent retailers, community cafes, activities for all age groups. Learning opportunities would help people get involved with others. Low level vandalism and street crime is my other priority. I want to feel safe in the town I call home,*
- *Shops are closing down so most people go to Lichfield, Sutton and Birmingham. Empty shopping centre does not encourage tourists to shop,*

The occupancy level of town centre retail units is beginning to fall from the level seen in 2015/16.



## **Tamworth will mean ‘a great place to live’ not simply a place with more houses’**

This ambition was seen as important by 72% of respondents in the 2018/19 budget consultation exercise, the second highest under this strategic priority.

In the Feeling the Difference survey, 90% of respondents were very/fairly satisfied with their local area.

Comments received included:

- *All the houses that are being built but no infrastructure in place,*
- *Please put emphasis on persevering and enhancing our historic past in the planning department,*
- *We have an opportunity to build Tamworth in to a beautiful place use it*
- *Stop building on the last few green spaces in Tamworth and stop building on agricultural land,*
- *Stop house building keep the town centre rural not mini Birmingham,*
- *Tamworth does not currently have a single secondary school rated 1. children are our future,*
- *The balance between development and preserving our heritage needs to be given a high priority with these two aspects seen as complimentary rather than mutually exclusive,*
- *We need green space, the golf course sell off was one big mistake and now you are building in every available space. I do not believe you are looking at the full picture*

## **The Council will have a Commercial Investment Strategy and an associated trading arm designed to invest in assets/other means of sustainable income generation**

This ambition was seen as important by 47% of respondents in the 2018/19 budget consultation exercise, the lowest under this strategic priority.

At the Tamworth Listens Question Time Event in March 2018, the following questions were asked on growing stronger together in Tamworth

- *Tamworth is expanding greatly and this may impact on traffic routes and journey times around The Borough. To what degree is there a clear strategy in place which will provide an adequate road infrastructure for the current and future housing demands in Tamworth?*
- *When reporting potholes/road and pavement defects we get an email to say that the problem will be looked at within 14 days. As this is continually not happening what is being done to hold the company responsible to account? If service standards are not being met surely there should be some accountability?*



- Can you please confirm that the so called 'pot hole zapping machines' do exist in Staffordshire?*

*Is the announcement of an extra £5m true or just a smoke and mirrors exercise?*

*The roads in Tamworth are in a shocking condition due to potholes and wear and tear due to the amount of traffic on them.*

*What plans does Staffordshire County Council have to remedy the dire situation?*

*I don't believe Tamworth gets a fair share of the highway's budget that it deserves, what can we do as residents to try and improve the situation?*

*Is there anything that you and other Tamworth's County Councillors do to improve the situation?*
- As elected guardians of the town of Tamworth, what procedures do you have in place to monitor the appearance of the town, the state of the roads and also the standard of work carried out on behalf of the Council. For example, the Tamworth Gateway Project from the railway station to the town centre?*

*Our roads are a total disgrace with all the potholes and I don't believe Staffordshire County Council realise how busy and well used our town roads are. I think they still think Tamworth is a small market town and not a town with nearly 80,000 people. We need to let them know how busy and growing our town is. So, how can you improve this?*

*The Tamworth Gateway Project has only just recently been completed but already the block paving is uneven in the area around the bus stops in Victoria Road. Marmion Street has been dug up and replaced by a lump of Tarmac. I don't believe we have had value for money in this case, how can you improve this?*

*We need to make Tamworth an attractive town to shop and visit in the future.*

*What can be done to alleviate the traffic congestion at peak times in Tamworth and who is accountable for the plan to alleviate it?*

*Is the car park at Ventura going to be increased in size despite Lichfield District Council's objection to the proposal?*

## **Delivering quality services in Tamworth**

To support this strategic priority, Tamworth Borough Council works towards these ambitions;

- Customer Satisfaction levels will be maintained above 90%;
- Access to all Council Services will be improved;
- The Council will set and maintain service standards that will be consistent, accessible and delivered by skilled staff;
- We will save you time and money by doing business with you 'On-line';
- Fewer customers will have to visit the Council offices to resolve their issues.

### **Customer Satisfaction levels will be maintained above 90%**

This ambition was seen as important by 72% of respondents in the 2018/19 budget consultation exercise.

### **Access to all Council Services will be improved**

This ambition was seen as important by 80% of respondents in the 2018/19 budget consultation exercise, the highest under this strategic priority.

Comments received included:

- *Better communication between SCC and TBC, If I report a fallen tree to TBC it doesn't help by being told it is for SCC,*
- *I can never visit the offices as you are never open weekends or any night for out of normal hour queries,*
- *The approachability of the Council Officers has become less over the years and the out-sourcing has increased to no-ones benefit other than that of the Council even then at the cost of staff or slimmed down services,*
- *You have a mountain to climb with these ambitions. Access to TBC services are awful*

### **The Council will set and maintain service standards that will be consistent, accessible and delivered by skilled staff;**

This ambition was seen as important by 77% of respondents in the 2018/19 budget consultation exercise.

Comments received included:

- *It's one thing having a vision but you need a great team to help deliver it. I don't think you have a great team on board. Reasons are that to try to get in touch with a council official is nigh on impossible, the local*

*councillor takes weeks to respond And the council rarely delivers what it says it will. You say you want to make Tamworth a great place to live,*

- *Reception ladies most helpful, outstanding people,*
- *Too much red tape not enough action You talk a good job but don't deliver*

### **We will save you time and money by doing business with you 'On-line';**

This ambition was seen as important by 39% of respondents in the 2018/19 budget consultation exercise, the lowest under this strategic priority.

The feeling amongst respondents was that the Council should not do everything solely on-line and recognise that some sectors in society prefer to deal with a person and continue to cater for this.

Comments made have included:

- *A large amount of people do not have computers,*
- *Alternative options must remain available not everyone computer literate,*
- *Although I somewhat agree that it is good for a percentage of people to use on line, there are many people who do not have the means or capabilities to use this service,*
- *Assumes everyone has or wants to have on-line access. This is not necessarily the case. You cannot switch to on-line only,*
- *You have a lot of older generation that do not understand technology with this in mind technology should be introduced slowly,*
- *In my family, several members do not complete any business on-line whatsoever. They need phone access to staff to resolve any issues,*
- *Not all people online or can afford to,*
- *The Council seem to think everyone can use on-line, as do many more companies etc. to do their business. I happen to work with a company looking after the elderly and technology is a 'frightening' concept to them. You also need to have access to the necessary equipment,*
- *I think it's important, to be able to do things on line, however the older generation my not be savvy, enough to do this, it is important that people, can come in and resolve issues, as not all answers are providing by ticking a box. From what I have seen, particularly with claiming housing benefit and starting work, there is a gap, from providing information requested, such as wage slips to actually filling the forms in. You need to put something in place that, people struggling can come in and receive help, so this reduces the stress of sorting it out,*

However, the ability to offer on line services is important to others

- *It is important to offer online services. I live in Tamworth but work in Burton so I am unable to visit Council or even call when I'm at work.*

Respondents to the Customer Access Survey expressed a willingness to utilise self –serve options:

- 41% would use a customer portal/on-line account to use our services,
- 37% are happy to use on-line forms on the internet.

### **Fewer customers will have to visit the Council offices to resolve their issues.**

This ambition was seen as important by 41% of respondents in the 2018/19 budget consultation exercise. It was common for respondents to welcome the ability to see /speak to someone in person if the situation warranted it:

- *Being an OAP I don't have access to on-line activities so I need to phone or go in person to Council Offices, please remember this,*
- *Better to deal with elected members in person,*
- *Face to face better than over net,*
- *Fewer customers coming in - still the need for face to face interviews on occasion to address some customer needs. Some people unable to cope without this,*
- *I can understand about doing more business online, but there are still many people who don't have or don't know how to use a computer, also a lot of elderly citizens prefer to visit the Council Offices and speak to someone face to face,*
- *I don't agree with more people doing business with the Council on line. I like to talk to people face to face when I have an enquiry or have an issue solved,*
- *I feel it is important to be able to deal with the Council face to face rather than online all the time. The Council does not need to lose its personal face,*
- *I like to visit Council Offices talking face to face with personnel. Many people of elder status do not have computers. Perhaps free computer courses for the elderly citizens,*
- *I myself like to see and talk to Council staff (I for one am NOT on line),*
- *I think we need the Council offices as most elderly people cannot use the internet and prefer a face to face with Council staff. Try to think of elderly people more,*
- *Important to have face to face communication as not everyone has access to internet,*
- *Not all people have access to or use internet, so it is important to maintain a personal service,*
- *Not all people like to go on the computers. Want a good access and help from the Council verbally,*
- *People like to speak to a friendly person at the Council Offices. A lot of old people haven't got a computer so welcome talking to someone who knows what they're doing,*
- *People need to 'speak' to staff at the Council offices, rather than 'online', which is very impersonal and difficult to know if / when matters are being dealt with,*
- *Personal face to face service is more highly valued,*

- *Please remember that some elderly people will not have access to mobile phones, computers and will not be mobile,*
- *The need to have face to face contact with the Council. Tamworth has high rate of elderly residents and vulnerable adults who are unable to access or understand on line or e-mail access,*
- *Too much emphasis on being on line. Tamworth has many elderly people who do not have access to a computer or the knowledge or desire to use one. It is being constantly rammed down our throats that everything has to be online. I for one like to speak to a person,*
- *While I believe it is important to enhance what the future brings ,I still believe there is still a need for human 1 to 1 interaction and I would like it where we see and meet our council and not just when it is an election,*
- *With respect, the council should never lose the personal contact with the people of Tamworth; The Council should at all times make access to people who are making all the decisions, to take total responsibility for those decisions. All over the world people are being pushed along the path that will cause us to become numbers on forms and not people, who can ask as today of who is responsible.*

At the Tamworth Listens Question Time Event in March 2018, the following questions were asked on delivering quality services in Tamworth.

- *Should there be a set of standards, drawn up in agreement with the public that all councillors have to adhere to? This could include such things as providing residents surgeries, community engagement days with other agencies and regular resident updates. At the moment these are provided on some wards, but not all which means some residents are getting a better standard of service than others. The resident updates could include a six monthly newsletter to all residents from their three councillors. This could include who they are, what they can help with, any updates for the town/ward agreed by all three and signposting to other agencies such as local police; it could be based on the three main aims of TBC which we are discussing here today. This would have the advantage of better engagement between the council and us and would hopefully give people a better insight of the workings meaning people understand better what the council are responsible for.*
- *Apart from implementing the green bin charge, what other steps is the council taking to secure financial independence when they stop receiving central government funding in the year 2020?*
- *Like a lot of councils, Tamworth has always loved its vanity projects at taxpayer's expense. Given the council tax hikes we are seeing, will the Council please publish the cost of its support, both direct & indirect, to the community radio station? I for one don't feel the Council need or should support it. Why should hard pressed taxpayers be paying for the likes of TCRFM radio Tamworth?*

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# Tamworth

District

This profile was published on 4th July 2017

## Health Profile 2017

### Health in summary

The health of people in Tamworth is varied compared with the England average. About 18% (2,800) of children live in low income families. Life expectancy for both men and women is similar to the England average.

### Health inequalities

Life expectancy is 5.9 years lower for men and 9.0 years lower for women in the most deprived areas of Tamworth than in the least deprived areas.

### Child health

In Year 6, 20.0% (156) of children are classified as obese. The rate of alcohol-specific hospital stays among those under 18 is 60\*, worse than the average for England. This represents 10 stays per year. Levels of teenage pregnancy, GCSE attainment and breastfeeding initiation are worse than the England average.

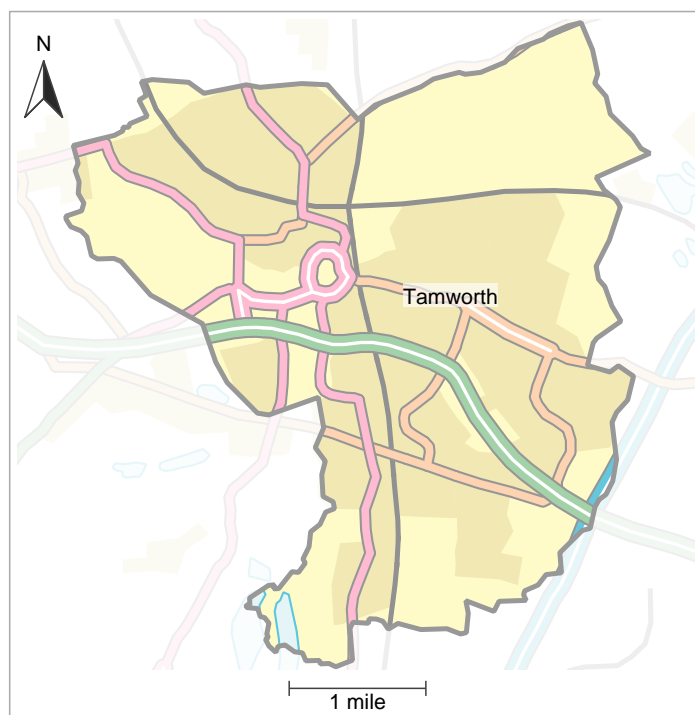
### Adult health

The rate of alcohol-related harm hospital stays is 640\*. This represents 467 stays per year. The rate of self-harm hospital stays is 169\*. This represents 131 stays per year. Estimated levels of adult excess weight are worse than the England average. Rates of sexually transmitted infections, people killed and seriously injured on roads and TB are better than average. The rate of violent crime is worse than average. Rates of statutory homelessness and long term unemployment are better than average.

### Local priorities

Priorities for Tamworth include childhood obesity, smoking in pregnancy, drug misuse and aging well. For more information see

<https://www.staffordshire.gov.uk/health/PublicHealth/PublicHealthandWellbeing.aspx>



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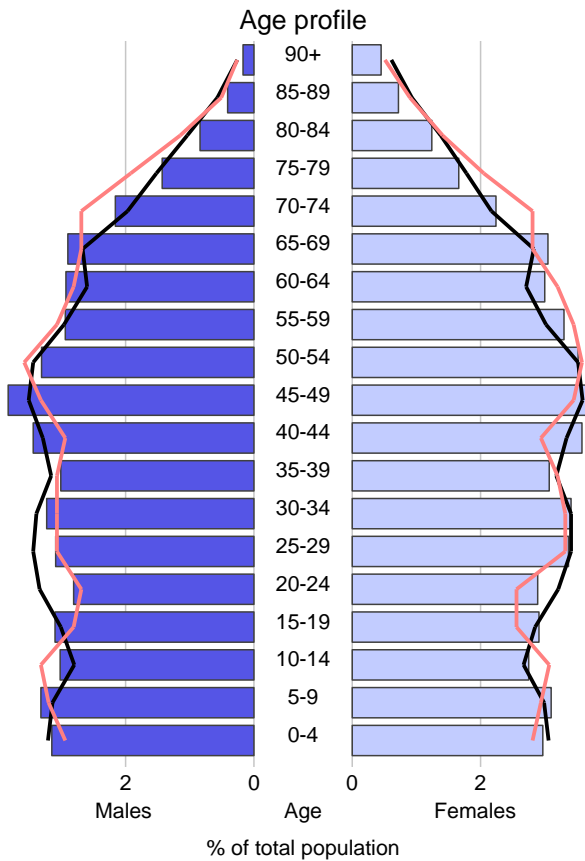
This profile gives a picture of people's health in Tamworth. It is designed to help local government and health services understand their community's needs, so that they can work together to improve people's health and reduce health inequalities.

Visit [www.healthprofiles.info](http://www.healthprofiles.info) for more profiles, more information and interactive maps and tools.

Follow [@PHE\\_uk](https://twitter.com/PHE_uk) on Twitter

\* rate per 100,000 population

# Population: summary characteristics



	Males	Females	Persons
<b>Tamworth</b> (population in thousands)			
Population (2015):	38	39	77
Projected population (2020):	38	40	78
% people from an ethnic minority group:	*	*	2.2%
Dependency ratio (dependants / working population) x 100			61.1%

	Males	Females	Persons
<b>England</b> (population in thousands)			
Population (2015):	27,029	27,757	54,786
Projected population (2020):	28,157	28,706	56,862
% people from an ethnic minority group:	13.1%	13.4%	13.2%
Dependency ratio (dependants / working population) x 100			60.7%

\* - value suppressed due to small numbers

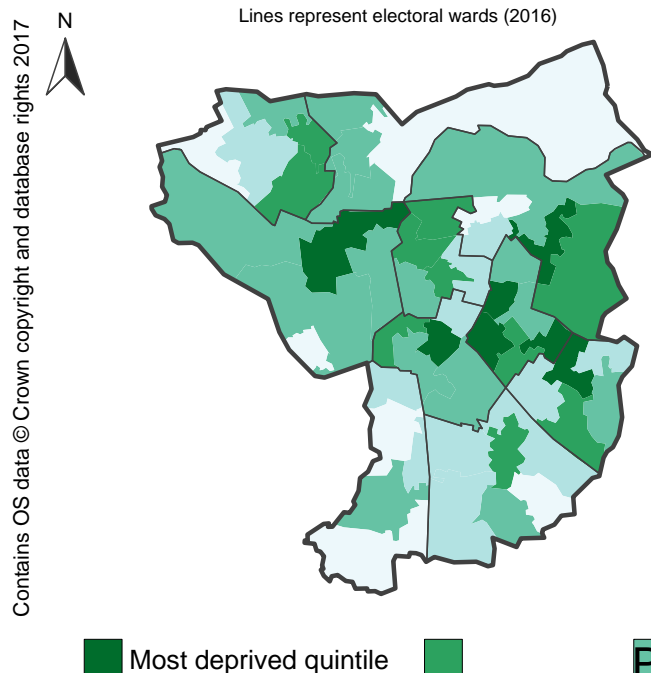
The age profile and table present demographic information for the residents of the area and England. They include a 2014-based population projection (to 2020), the percentage of people from an ethnic minority group (Annual Population Survey, October 2014 to September 2015) and the dependency ratio.

The dependency ratio estimates the number of dependants in an area by comparing the number of people considered less likely to be working (children aged under 16 and those of state pension age or above) with the working age population. A high ratio suggests the area might want to commission a greater level of services for older or younger people than those areas with a low ratio.

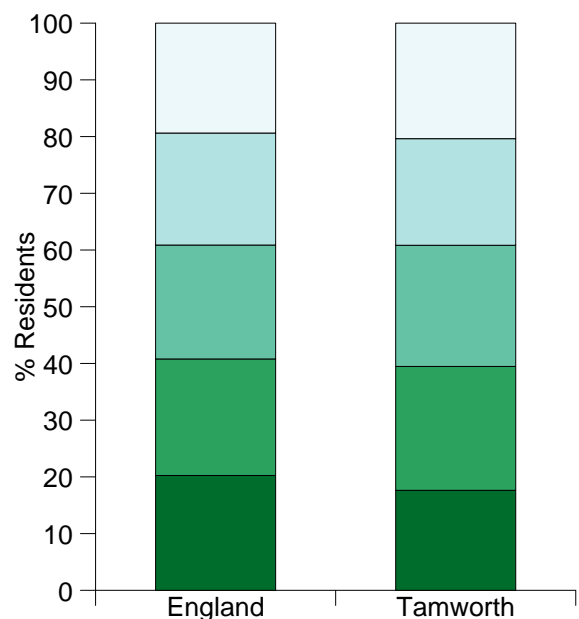
- Tamworth 2015 (Male)
- Tamworth 2015 (Female)
- England 2015
- Tamworth 2020 estimate

# Deprivation: a national view

The map shows differences in deprivation in this area based on national comparisons, using national quintiles (fifths) of the Index of Multiple Deprivation 2015 (IMD 2015), shown by lower super output area. The darkest coloured areas are some of the most deprived neighbourhoods in England.



This chart shows the percentage of the population who live in areas at each level of deprivation.

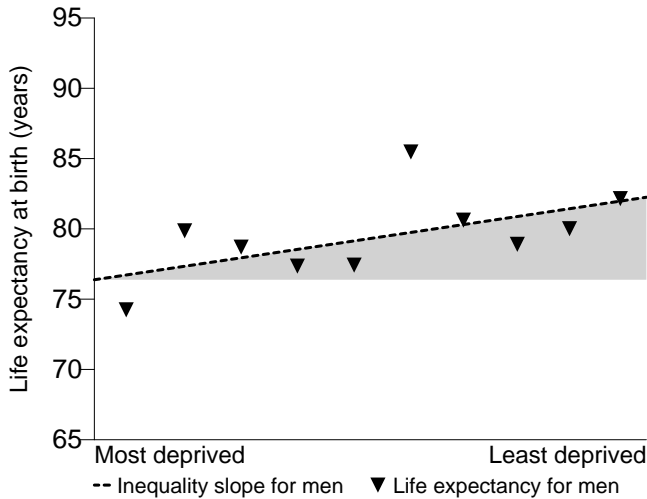




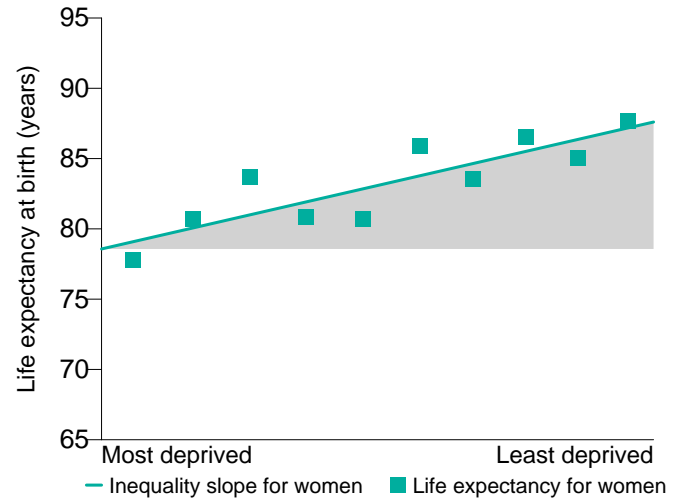
# Life expectancy: inequalities in this local authority

The charts show life expectancy for men and women in this local authority for 2013-15. The local authority is divided into local deciles (tenths) by deprivation (IMD 2015), from the most deprived decile on the left of the chart to the least deprived decile on the right. The steepness of the slope represents the inequality in life expectancy that is related to deprivation in this local area. If there was no inequality in life expectancy the line would be horizontal.

Life expectancy gap for men: 5.9 years



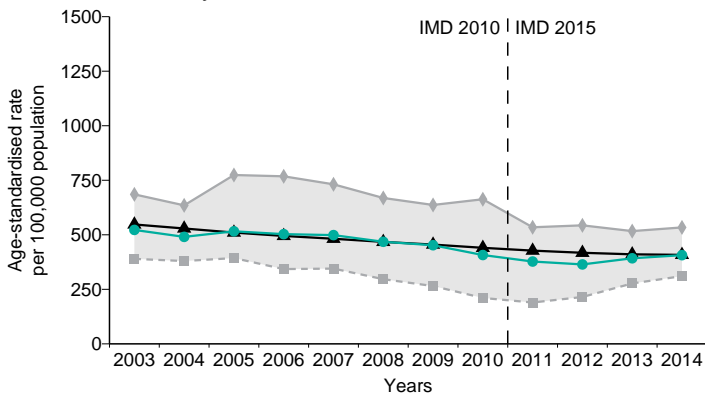
Life expectancy gap for women: 9.0 years



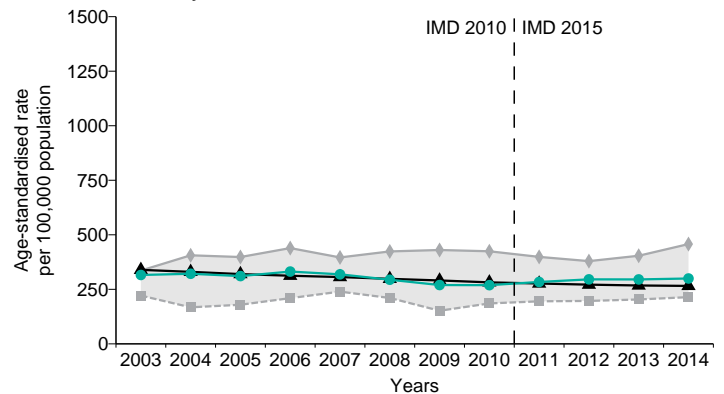
# Health inequalities: changes over time

These charts provide a comparison of the changes in death rates in people under 75 (early deaths) between this area and England. Early deaths from all causes also show the differences between the most and least deprived local quintile in this area. Data from 2010-12 onwards have been revised to use IMD 2015 to define local deprivation quintiles (fifths), all prior time points use IMD 2010. In doing this, areas are grouped into deprivation quintiles using the Index of Multiple Deprivation which most closely aligns with time period of the data. This provides a more accurate way of discriminating changes between similarly deprived areas over time.

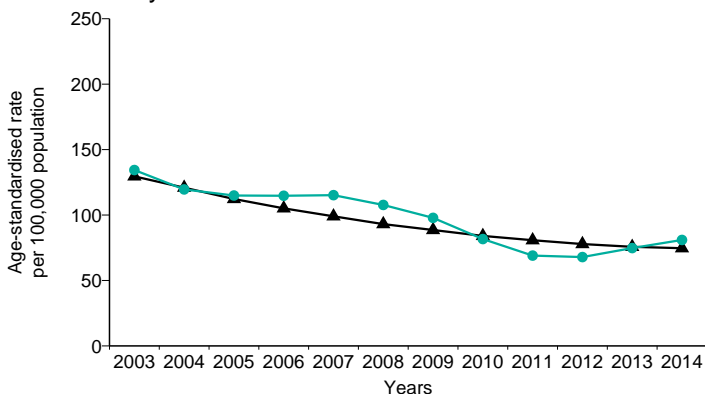
Early deaths from all causes: men



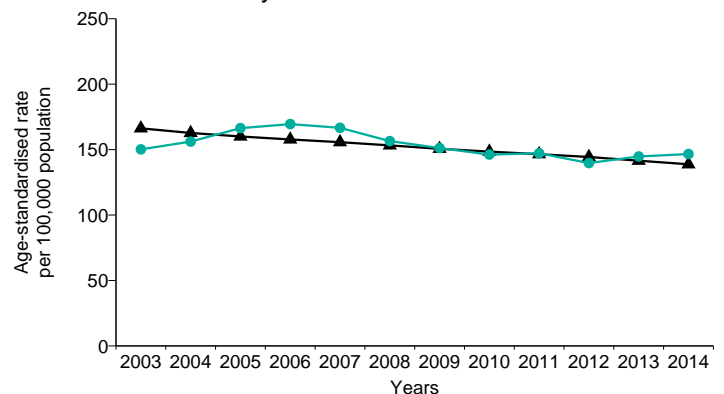
Early deaths from all causes: women



Early deaths from heart disease and stroke



Early deaths from cancer



Data points are the midpoints of three year averages of annual rates, for example 2005 represents the period 2004 to 2006. Where data are missing for local least or most deprived, the value could not be calculated as the number of cases is too small.

# Health summary for Tamworth

The chart below shows how the health of people in this area compares with the rest of England. This area's result for each indicator is shown as a circle. The average rate for England is shown by the black line, which is always at the centre of the chart. The range of results for all local areas in England is shown as a grey bar. A red circle means that this area is significantly worse than England for that indicator; however, a green circle may still indicate an important public health problem.

- Significantly worse than England average
- Not significantly different from England average
- Significantly better than England average
- Not compared

Domain	Indicator	Period	Local count	Local value	Eng value	Eng worst	England range		Eng best
							England worst	England best	
Our communities	1 Deprivation score (IMD 2015)	2015	n/a	20.3	21.8	42.0			5.0
	2 Children in low income families (under 16s)	2014	2,760	18.4	20.1	39.2			6.6
	3 Statutory homelessness	2015/16	9	0.3	0.9				
	4 GCSEs achieved	2015/16	425	49.4	57.8	44.8			78.7
	5 Violent crime (violence offences)	2015/16	1,617	21.0	17.2	36.7			4.5
	6 Long term unemployment	2016	40	0.8 <sup>Λ20</sup>	3.7 <sup>Λ20</sup>	13.8			0.4
Children's and young people's health	7 Smoking status at time of delivery	2015/16	x <sup>1</sup>	x <sup>1</sup>	10.6 <sup>\$1</sup>	26.0			1.8
	8 Breastfeeding initiation	2014/15	654	67.7	74.3	47.2			92.9
	9 Obese children (Year 6)	2015/16	156	20.0	19.8	28.5			9.4
	10 Admission episodes for alcohol-specific conditions (under 18s)†	2013/14 - 15/16	31	60.4	37.4	121.3			10.5
	11 Under 18 conceptions	2015	45	32.8	20.8	43.8			5.4
Adults' health and lifestyle	12 Smoking prevalence in adults	2016	n/a	16.7	15.5	25.7			4.9
	13 Percentage of physically active adults	2015	n/a	57.2	57.0	44.8			69.8
	14 Excess weight in adults	2013 - 15	n/a	71.8	64.8	76.2			46.5
	15 Cancer diagnosed at early stage	2015	155	50.8	52.4	39.0			63.1
Disease and poor health	16 Hospital stays for self-harm†	2015/16	131	169.3	196.5	635.3			55.7
	17 Hospital stays for alcohol-related harm†	2015/16	467	639.5	647	1,163			374
	18 Recorded diabetes	2014/15	4,737	6.7	6.4	9.2			3.3
	19 Incidence of TB	2013 - 15	2	0.9	12.0	85.6			0.0
	20 New sexually transmitted infections (STI)	2016	278	559.5	795	3,288			223
	21 Hip fractures in people aged 65 and over†	2015/16	76	673.3	589	820			312
Life expectancy and causes of death	22 Life expectancy at birth (Male)	2013 - 15	n/a	79.0	79.5	74.3			83.4
	23 Life expectancy at birth (Female)	2013 - 15	n/a	82.6	83.1	79.4			86.7
	24 Infant mortality	2013 - 15	13	4.7	3.9	8.2			0.8
	25 Killed and seriously injured on roads	2013 - 15	24	10.4	38.5	103.7			10.4
	26 Suicide rate	2013 - 15	22	x <sup>2</sup>	10.1	17.4			5.6
	27 Smoking related deaths	2013 - 15	n/a	n/a	283.5				
	28 Under 75 mortality rate: cardiovascular	2013 - 15	164	81.0	74.6	137.6			43.1
	29 Under 75 mortality rate: cancer	2013 - 15	296	146.6	138.8	194.8			98.6
	30 Excess winter deaths	Aug 2012 - Jul 2015	56	9.6	19.6	36.0			6.9

## Indicator notes

1 Index of Multiple Deprivation (IMD) 2015 2 % children (under 16) in low income families 3 Eligible homeless people not in priority need, crude rate per 1,000 households 4 5 A\*-C including English & Maths, % pupils at end of key stage 4 resident in local authority 5 Recorded violence against the person crimes, crude rate per 1,000 population 6 Crude rate per 1,000 population aged 16-64 7 % of women who smoke at time of delivery 8 % of all mothers who breastfed their babies in the first 48hrs after delivery 9 % school children in Year 6 (age 10-11) 10 Persons under 18 admitted to hospital due to alcohol-specific conditions, crude rate per 100,000 population 11 Under-18 conception rate per 1,000 females aged 15 to 17 (crude rate) 12 Current smokers (aged 18 and over), Annual Population Survey 13 % adults (aged 16 and over) achieving at least 150 mins physical activity per week, Active People Survey 14 % adults (aged 16 and over) classified as overweight or obese, Active People Survey 15 Experimental statistics - % of cancers diagnosed at stage 1 or 2 16 Directly age sex standardised rate per 100,000 population 17 Admissions involving an alcohol-related primary diagnosis or an alcohol-related external cause (narrow definition), directly age standardised rate per 100,000 population 18 % people (aged 17 and over) on GP registers with a recorded diagnosis of diabetes 19 Crude rate per 100,000 population 20 All new diagnoses (excluding chlamydia under age 25), crude rate per 100,000 population aged 15 to 64 21 Directly age-sex standardised rate of emergency admissions, per 100,000 population aged 65 and over 22, 23 The average number of years a person would expect to live based on contemporary mortality rates 24 Rate of deaths in infants aged under 1 year per 1,000 live births 25 Rate per 100,000 population 26 Directly age standardised mortality rate from suicide and injury of undetermined intent per 100,000 population (aged 10 and over) 27 Directly age standardised rate per 100,000 population aged 35 and over 28 Directly age standardised rate per 100,000 population aged under 75 29 Directly age standardised rate per 100,000 population aged under 75 30 Ratio of excess winter deaths (observed winter deaths minus expected deaths based on non-winter deaths) to average non-winter deaths (three years)

† Indicator has had methodological changes so is not directly comparable with previously released values. € "Regional" refers to the former government regions.

<sup>Λ20</sup> Value based on an average of monthly counts x<sup>1</sup> Value not published for data quality reasons x<sup>2</sup> Value cannot be calculated as number of cases is too small \$<sup>1</sup> There is a data quality issue with this value

If 25% or more of areas have no data then the England range is not displayed.

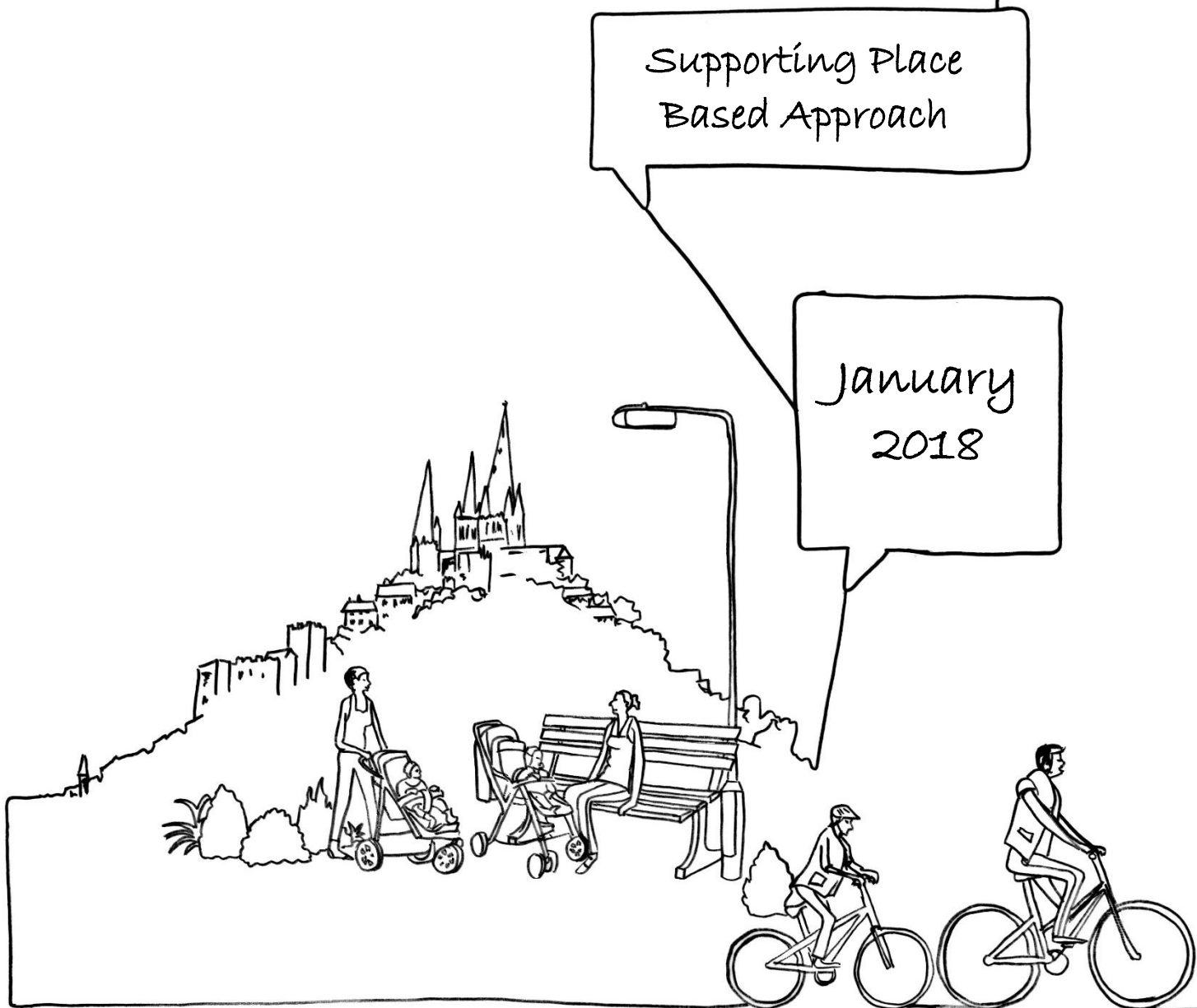
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# Tamworth: Locality Profile

The Strategy Team



## Document Details

<b>Title</b>	Tamworth: Locality Profile
<b>Date created</b>	January 2018
<b>Description</b>	The purpose of the profile is to provide commissioners and practitioners with an evidence base to help understand residents' needs at a local level. It links with the Community Safety Assessments and contributes to the Joint Strategic Needs Assessment.
<b>Produced by</b>	The Strategy Team Staffordshire County Council
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<b>Geographical coverage</b>	Tamworth
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## 1 Introduction

Welcome to the **2018 Locality Profile for Tamworth**. This annually updated profile identifies priorities at district and ward level to support the effective targeting of resources and place-based working. The profile is a robust intelligence base across a wide range of indicators which cover the three Staffordshire Partnership outcomes:

- Access more good jobs and feel the benefits of economic growth
- Be healthier and more independent
- Feel safer, happier and more supported in and by their community

All outcomes for our residents, families and communities are affected by a wide range of demographic, socio-economic and environmental factors which are inextricably linked. To make a real difference and to reduce inequalities, particularly within the current financial climate, we need to target our efforts towards those who experience the greatest levels of inequality and who demonstrate the highest levels of vulnerability.

It is often the same families and communities that experience multiple needs and have a range of poor outcomes. This profile helps to identify those communities and provides evidence to support a necessarily holistic approach to enable them to improve their outcomes and thrive. It also allows us to support the new Strategic Delivery Managers in their roles to develop and implement smaller and more focussed district or place based strategies.

This Locality Profile should be used alongside other resources produced by the Strategy Team, such as the Community Safety Assessments and Joint Strategic Needs Assessments along with local intelligence and knowledge. Used together, these will create an enriched picture of residents, their families and their communities to underpin more effective evidence-based commissioning and support.



## Layout of this profile

The profile presents the key messages about Tamworth from the indicator matrices. There is then a section on priorities at a district level before presenting information about the wards with the highest needs. The final sections comprise of indicator matrices at district level and finally the ward-level indicator matrix.

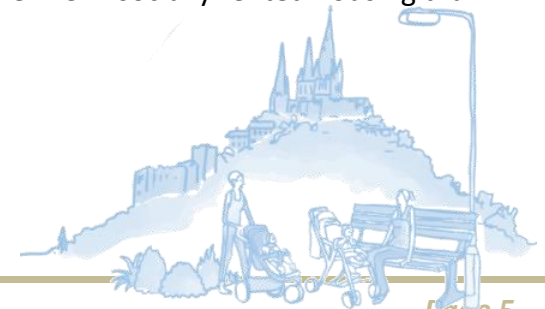
## Feedback

As always we would welcome your feedback on these profiles so please contact:

- Phil Steventon: [phillip.steventon@staffordshire.gov.uk](mailto:phillip.steventon@staffordshire.gov.uk) or
- Insight Team: [insight.team@staffordshire.gov.uk](mailto:insight.team@staffordshire.gov.uk)

## 2 Key messages

- **Population:** Around 77,000 people live in Tamworth. There are relatively more children aged under 16 compared to England and less people aged 85 and over, many of whom are income deprived. The overall population is projected to have a small increase by 2026, but a much larger growth in people aged 65 and over. There are also more single-parent households than average.
- **Community resilience:** The demand on public sector funded services has increased considerably over the last decade and a higher than average proportion of adults in Tamworth use health and social care services. An ageing population means that these demands are likely to increase further and services in their present forms are set to become unsustainable. In addition, there is a high number of people providing unpaid care who are often older, in poor health and isolated themselves. Therefore we need to continue to think differently about the community and partnership relationship.
- **Reducing inequalities:** There are a number of wards in Tamworth where families and communities face multiple issues such as unemployment or low incomes, low qualifications, poor housing, social isolation, ill-health (physical and/or mental) and poor quality of life. These wards are: Belgrave, Bolehall, Castle, Glascote, Mercian and Stonydelph. These areas require particular focus and an integrated partnership response.
- **Be able to access more good jobs and feel the benefits of economic growth:** Education and employment rates have improved in Tamworth but this has not been universal - especially amongst some of our most vulnerable communities. There are also gaps in levels of adult skills and qualifications with a high proportion of adults in Tamworth having no qualifications, more households with children where there are no adults in employment and high levels of financial stress.
- **Be healthier and more independent:** Life expectancy has increased but the number of years spent in good health has not. Older people than average have a limiting long term illness and therefore the number of years people spend in poor health towards the end of life in Tamworth is high. Men and women spend 17 and 20 years in poor health respectively. In addition, teenage pregnancy rates are high in Tamworth and too many residents have excess weight, eat unhealthily and are inactive - we need to turn this around to improve quality of life and reduce demand for services.
- **Feel safer, happier and more supported:** Most Tamworth residents are satisfied with the area they live in. Tamworth has lower than average rates of crime. However, levels of anti-social behaviour and violent crime are high in Castle ward. Perception of crime is also high. Housing affordability is an issue for low earners in Tamworth and more people live in socially rented housing than national average.





### 3 Key considerations for commissioning

#### 3.1 The population of Tamworth

- Tamworth is resident to 77,000 people. The population has a higher proportion of children aged under 16 compared to England. There are fewer people aged 85 and over in Tamworth compared to the national average.
- At ward level, Belgrave, Bolehall, Glascote, Stonydelph and Wilnecote wards have high proportions of children under 16 compared with England whilst Castle, Mercian, Spital and Trinity have high proportions of older people aged 65 and over.
- The overall population for Tamworth is projected to increase between 2016 and 2026 by 2% with significant growth in people aged 65 and over (26%) and aged 85 and over (58%). The rate of increase in the number of older people aged 85 and over in Tamworth is faster than the England average, equating to 800 additional residents aged 85 and over by 2026.
- There are nine lower super output areas (LSOAs) that fall within the most deprived national quintile in Tamworth, making up around 18% of the total population (13,500 people). These areas fall within Amington, Belgrave, Castle, Glascote and Stonydelph wards.
- The dependency ratio for older people in Tamworth is 28 older people for every 100 people of working age which is similar to England. Of the 10 wards in Tamworth, four have a higher than average dependency ratio for older people.
- Aspiring homemakers is the most common Mosaic<sup>1</sup> group across Tamworth and makes up 23% (17,900) of the population. Some wards have high proportions of their populations in a single segmentation group, for example, nearly one in two residents who live in Glascote are in the “Family Basics” group.

#### 3.2 Be able to access more good jobs and feel the benefits of economic growth

- The proportion of children in Tamworth who achieved a good level of development at the age of five (74%) is better than the national average (71%).
- GCSE attainment<sup>2</sup> for Tamworth pupils is significantly worse than the England average. There are however inequalities within the district with attainment ranging from 47% in Castle ward to 61% in Mercian ward.
- The percentage of adults aged 16-64 with NVQ level 3<sup>3</sup> or above is lower than the national average. Tamworth also has a high number of adults with no qualifications. This may hinder economic growth in Tamworth.

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<sup>1</sup> [Mosaic Public Sector](#) by Experian classifies all households by allocating them to one of 15 summary groups and 66 detailed types. These paint a rich picture of residents in terms of their socio-economic and socio-cultural behaviour.

<sup>2</sup> This indicator refers to English and Maths grades A\*-C.

<sup>3</sup> NVQ 3 = two or more A levels, BTEC Ordinary National Diploma (OND), City & Guilds Advanced Craft.

- Unemployment and youth unemployment rates in Tamworth (as at October 2017) were lower than the national average. The proportion of people claiming out-of-work benefits is similar to the national average (7.9% compared to 8.1%).
- The gap in the employment rate between those with a long term health condition and the general population is 29%, similar to the national average (29%). Other vulnerable groups (for example those with mental health conditions or who have a learning disability) also have relatively low employment rates.
- There is a high proportion of households with children where there are no adults in employment (4.7%) compared with England (4.2%).
- Using the Mosaic variable “Financial Stress”, 30% (23,200) of the population in Tamworth find it difficult or very difficult to cope on current income. This is higher than the national average (28%). There is variation across the district with financial stress ranging from 22% in Trinity ward to 39% in Glascote ward. Six of the 10 wards in Tamworth are higher than the national average.
- The proportion of Tamworth residents aged 60 and over living in income deprived households is significantly worse than the national average.

### **3.3 Be healthier and more independent**

- Overall life expectancy at birth in Tamworth is 79 years for men and 83 years for women, both similar to the national averages. However both men and women living in the most deprived areas of Tamworth live six and nine years less than those living in less deprived areas respectively.
- Healthy life expectancy in Tamworth is 63 years for both men and women which is shorter than average. Women in Tamworth spend more of their lives in poor health than men (20 years compared to 17). In addition, healthy life expectancy remains below retirement age which has significant long-term implications, for example, while people are expected to work later into their 60s many will not be healthy enough to do so.
- The number of Tamworth residents who die from causes considered preventable is higher than national average.
- Breastfeeding initiation rates in Tamworth are lower than the England rate.
- Around 27% of children aged four to five in Tamworth have excess weight (overweight or obese) with rates being higher than average. There are no wards where the prevalence of children who are either overweight or obese in Reception is higher than average. This increases to 37% of children aged 10-11 (Year 6) who have excess weight with rates being similar to average. No wards have a prevalence that is significantly higher than the national average.
- Teenage pregnancy rates in Tamworth are high compared to the national average. Rates are particularly high in Amington, Belgrave, Glascote, Stonydelph and Wilnecote wards.

- Between 2013/14 and 2015/16 around 30 children under 18 were admitted for alcohol specific conditions, with rates higher than England.
- Smoking prevalence for adults in Tamworth is similar to the national average whilst smoking-attributable mortality is also similar to the average.
- More than seven in ten adults have excess weight (either obese or overweight) which is higher than the national average. The proportion of people who are obese in Tamworth is higher than the England average.
- Just over half of Tamworth adults meet the recommended levels of physical activity; this is similar to the national average. Around one in four Tamworth adults are physically inactive, lower than the England average (equating to around 15,100 people).
- There is a higher proportion of residents in Tamworth aged 65 and over with a limiting long-term illness compared to the national average.
- The number of people on depression and diabetes registers in Tamworth is higher than the national average.
- The proportion of older people in Tamworth who take up their offer of a seasonal flu vaccine is similar to the national average; for the pneumococcal vaccine it is lower than average.

### **3.4 Feel safer, happier and more supported**

- ‘Feeling the Difference’ is a long-standing, bi-annual, public opinion survey giving our local residents an opportunity to give their views on their area as a place to live, their safety and wellbeing and local public services. The latest round of results reveals that 90% of Tamworth respondents were satisfied with the area as a place to live.
- Tamworth has a lower proportion of lone pensioner households compared to the national average. Three wards have higher proportions of households with lone pensioners; Castle, Mercian and Spital.
- Based on data from the 2011 Census, overall more residents in Tamworth provide unpaid care compared to the England average. This equates to around 8,100 people. Around 15% (1,600 people) of residents aged 65 and over provide unpaid care which is also higher than the England average of 14%.
- Around one in ten Tamworth households are living in fuel poverty, similar to the national average.
- A higher proportion of households in Tamworth live in socially rented houses compared to the national average.

- Housing affordability is an issue for low earners in Tamworth: The lowest quartile house price in Tamworth was 7.0 times the lowest quartile income and similar to the England average of 7.2.
- Based on Feeling the Difference Survey, almost twice as many people are fearful of being a victim of crime (17%) compared with the proportion who have actually experienced crime (10%) in Tamworth.
- Actual rates of crime in Tamworth are lower than the national average. However Castle ward has a significantly high rate of crime. Levels of anti-social behaviour and violent crime are also higher than the national averages in Castle ward.

## 4 Supporting Place Based Approach (PBA)

“Engaging and mobilising the whole community to work together to improve physical, social and cultural environments at a neighbourhood level to improve outcomes for people” (*Staffordshire County Council and PBA partners*)

All of our outcomes for our residents, families and communities are affected by a wide range of social, demographic, environmental and economic factors which are inextricably linked and those who face multiple challenges often live in the same communities. To improve outcomes, reduce health inequalities and improve community safety we need to target our efforts in a holistic way towards those who experience the greatest levels of inequality and who demonstrate the highest levels of vulnerability - this is most effective when done in a co-ordinated way with our partners.

Figure 1: An emerging model of Place Based Approach



Source: *Staffordshire PBA partners*

There is no single definition of what is meant by a place-based approach and there have been many different iterations of it– the main features are captured as follows:

- Public services working in partnership with each other, the voluntary and business sectors and communities to plan, design, resource, build and deliver services around people, families and communities in the most disadvantaged communities to support them to improve their life opportunities and outcomes.
- Targeting an entire community (or sometimes families or smaller communities within a place) to address issues that exist at neighbourhood level, such as poor or fragmented service provision that leads to gaps or duplication of effort, limited economic opportunities, social isolation etc., with a view to reducing inequalities in life outcomes.
- Making the most of assets / capabilities already available in local communities and continuing to develop the capacity of people, families and communities to support self-help and independence<sup>4</sup>.

<sup>4</sup> *Place-based Approaches to Joint Planning, Resourcing and Delivery, An overview of current practice in Scotland, .April 2016, IS Improvement Service. Accessed 20/10/17 <http://www.improvementservice.org.uk/documents/research/place-based-approaches-report.pdf>*

The aim of PBA in Staffordshire is to make best use of public sector and community assets to:

- Reduce demand to higher tier services,
- Improve outcomes for children, young people, families by providing support as early as possible,
- Build resilience and encourage independence within communities, and provide high quality statutory services when required.

Throughout the report we have highlighted examples of the inequalities across Tamworth, with those in more deprived areas consistently experiencing poorer outcomes. For us to achieve our vision for Tamworth, particularly within the current financial climate, we need to target our efforts towards those who experience the greatest levels of inequality and who demonstrate the highest levels of vulnerability.

The Strategy Team have developed a series of ward and Lower Layer Super Output Area (LSOA) 'risk' indices to identify areas of greatest need to support effective targeting of resources. Three examples are included here: The first is an overall risk index which identifies need based on a range of indicators, the second is the index developed to support the current Children's Transformation PBA across all areas in Staffordshire and the third shows the risk of needing adult social care services.

#### 4.1 Overall risk of needs index

A number of indicators have been selected across a range of themes to identify wards with higher levels of need so that resources can be targeted more effectively. The indicators used are:

- Income deprivation affecting older people index, 2015
- Eligibility for Free School Meals, 2017
- GCSE attainment (A\*-C in English and Maths), 2015/16
- Economic stress (Prevalence) [MOSAIC], 2016
- Out of work benefits, 2016
- Child excess weight (Reception age), 2013/14-2015/16
- Long-term adult social care users, 2016/17
- Emergency admissions (all ages), 2016/17
- Long term limiting illness (all ages), 2011
- Preventable mortality, 2011-2015
- Lone parent households, 2011
- Lone pensioners, 2011
- Households affected by fuel poverty, 2015
- Rate of total recorded crime, 2016/17
- Anti-social behaviour, 2016/17

Wards were assessed based on how they compared with England for each of the indicators. Wards that **performed worse than the England average:**

- **for none of the indicators (low need)**
- **for one to three of the indicators (medium need)**
- **for four or more indicators (high need)**

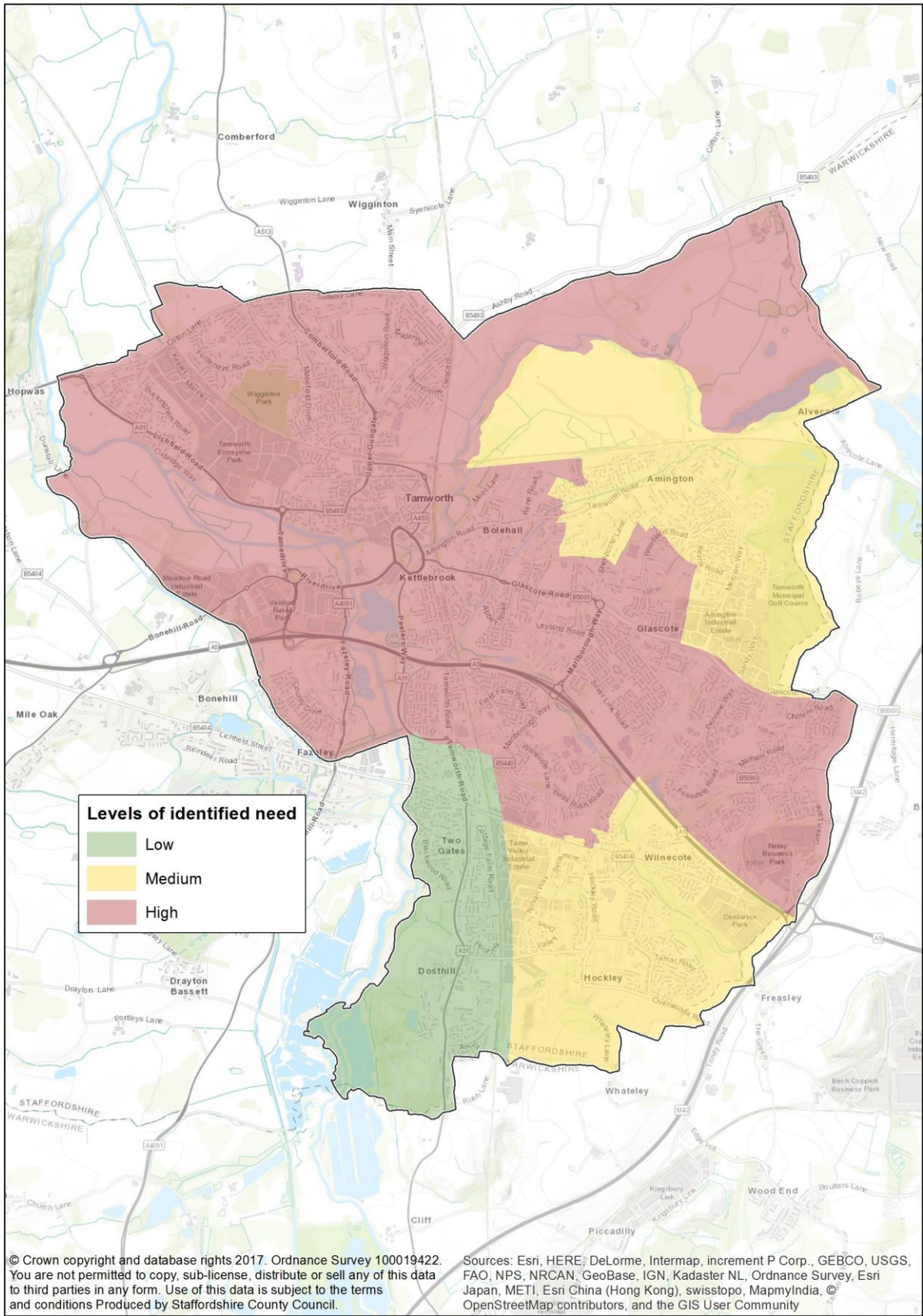
The results are shown in Table 1 and Map 1 shows the location of wards on a map.

**Table 1: Ward level 'risk' index for Tamworth**

Ward name	Older people in poverty	Free school meals	GCSE attainment	Economic stress	Out of work benefits	Excess weight (Reception)	Long-term adult social care users	Emergency admissions	Long term limiting illness	Preventable mortality	Lone parent households	Lone pensioners	Fuel poverty	All crime	Anti-social behaviour	Total indicators performing worse than England	Index
Glascote	✓	✓		✓	✓			✓	✓	✓	✓		✓			9	High
Castle	✓		✓	✓				✓	✓	✓		✓		✓	✓	9	High
Belgrave	✓			✓			✓	✓			✓		✓			6	High
Mercian	✓						✓	✓	✓		✓	✓				6	High
Stonydelph	✓	✓		✓				✓		✓	✓					6	High
Bolehall	✓			✓				✓	✓		✓					5	High
Spital							✓	✓	✓			✓	✓			5	High
Amington		✓	✓					✓								3	Medium
Wilnecote								✓								1	Medium
Trinity																0	Low

Compiled by The Strategy Team, Staffordshire County Council

Map 1: Ward level 'risk' index for Tamworth





## 4.2 Risk of children experiencing poorer outcomes needs index

Both national and local research highlights a number of common risk factors that increase the risk of a child experiencing poorer outcomes, in relation to their educational, health or welfare. The evidence also indicates that it is often the same families and communities that suffer a range of inequalities. So, whilst we can look at ways in which we reduce these risk factors that are affecting these children, families and communities in isolation, we need to consider the issues in a more holistic way and look to address the underlying root causes as well as the symptoms.

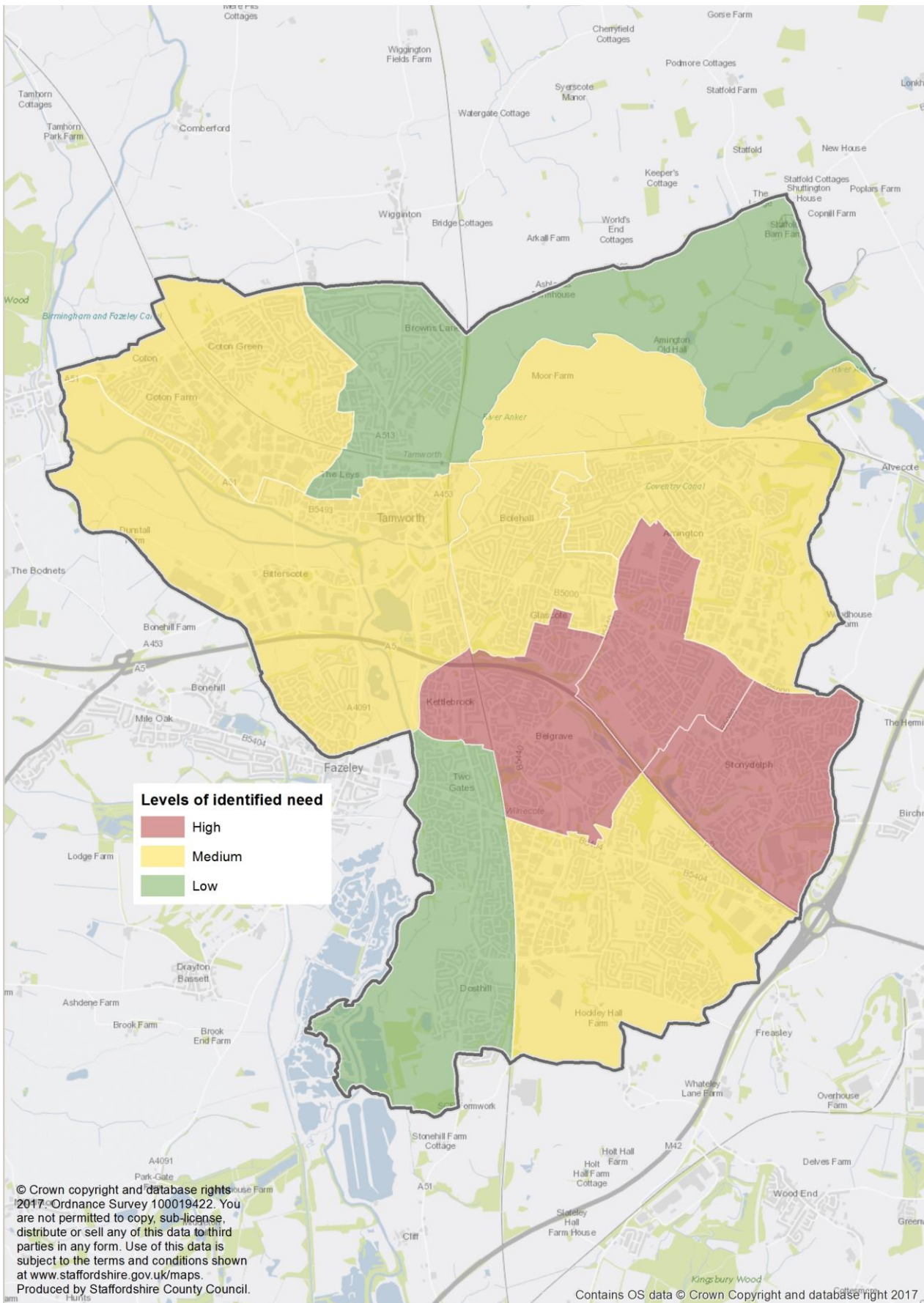
To support this at a small area we have combined a number of key indicators that assess how children and young people are progressing across a number of key areas of their life to develop a children's needs ward level index:

- Out-of-work benefits, May 2016
- Financial stress, 2016 modelled data
- Children in low-income households, 2014
- Free school meals, January 2016
- Overcrowded housing, 2011
- Lone parent households, 2011
- Anti-social behaviour, 2015/16
- GCSE attainment, 2014/15
- Youth unemployment, aged 16-24, 2016
- Excess weight (Reception), 2013/14 to 2015/16
- Emergency admissions aged under 20, 2015/16
- Young carers aged under 16, 2011
- Children in need aged under 18, 2015/16
- Child protection plans aged under 18, 2015/16
- Looked after children aged under 18, 2015/16
- Preventable mortality, 2011-2015

This highlights areas which experience poorer health and wellbeing outcomes to support the more effective targeting of resources.

Tamworth wards were assessed based on how they compared with England for each of the indicators (Map 2). Wards that performed worse than the England average:

**Map 2: Children's need ward level index for Tamworth, 2017**



### 4.3 Risk of adult social care needs index

Preventable risk factors such as smoking, excess alcohol consumption and physical inactivity account for 40% of ill health and are one of the largest pressures on health and care resources. Staffordshire County Council have developed an adult social care needs risk index to support the development of a Healthy Communities Service by identifying areas which have the poorest health and are at higher risk of needing more expensive adult social care.

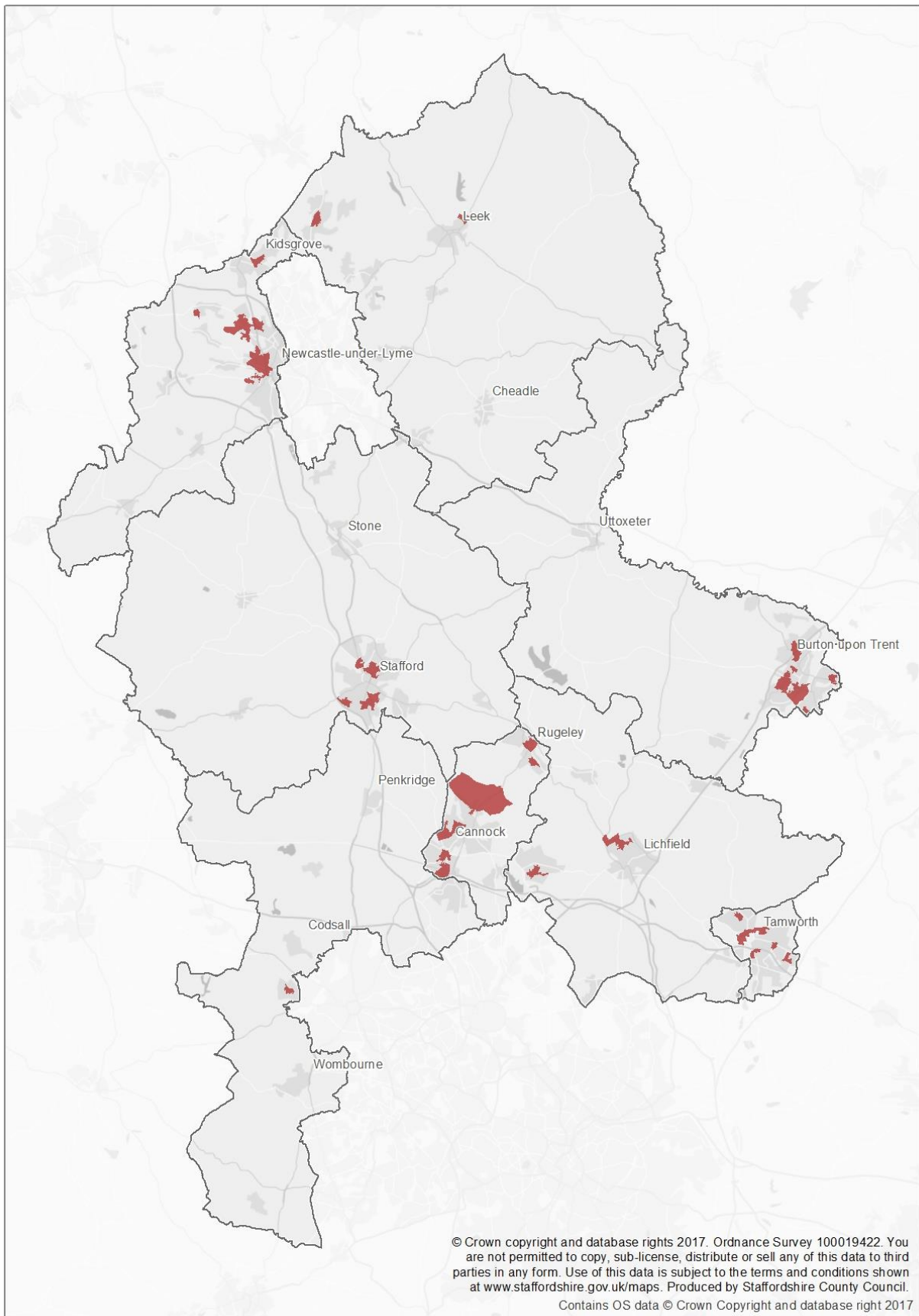
A number of indicators were identified through literature and stakeholders as being triggers for entry into adult social care. A number of these indicators, based on data availability, were tested for their relationship with local adult social care usage. Eight indicators which showed a relatively good statistical relationship with long-term social care users were combined to develop a weighted index:

- Income Deprivation Affecting Older People Index (IDAOPI), 2015
- People aged 50 and over with no cars or vans in household, 2011
- Emergency (unplanned) admissions, 2015/16
- Risk of loneliness index (Office for National Statistics modelled data)
- People aged 65 and over with a limiting long-term illness, 2011
- People who feel a bit unsafe or very unsafe walking alone after dark (Mosaic modelled data)
- People who visit their GP more than once a month (Mosaic modelled data)
- People who do not exercise (Mosaic modelled data)

The index has been used to identify the target cohort for the Healthy Communities Service which will offer behavioural and practical support to adults aged 50 and over.

Map 3 displays the 52 LSOAs which are at increased risk of entry into adult social care

**Map 3: LSOAs falling within the highest risk of entering adult social care**



## 5 Tamworth district level indicator matrix

The information in the following matrix is mainly benchmarked against England and colour coded using a similar approach to that used in the [Public Health Outcomes Framework tool](#). It is important to remember that even if an indicator is categorised as being 'better than England' it may still indicate an important problem, for example rates of childhood obesity are already high across England so even if an area does not have a significantly high rate it could still mean that it is an important issue locally and should be considered alongside local knowledge.

Compared to England:	Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
<b>Demographics</b>												
Mid-year population estimate	2016	98,500	116,700	103,100	128,500	111,200	134,200	98,100	77,000	867,100	5,800,700	55,268,100
Percentage under five	2016	5.5% (5,500)	6.3% (7,400)	4.9% (5,100)	4.9% (6,300)	4.5% (5,000)	5.0% (6,700)	4.4% (4,300)	6.1% (4,700)	5.2% (45,000)	6.3% (365,300)	6.2% (3,429,000)
Percentage under 16	2016	18.0% (17,700)	19.4% (22,700)	17.0% (17,500)	16.3% (20,900)	15.5% (17,200)	16.8% (22,500)	16.1% (15,800)	19.4% (15,000)	17.2% (149,300)	19.5% (1,134,000)	19.1% (10,529,100)
Percentage aged 16-64	2016	63.4% (62,500)	61.8% (72,200)	59.8% (61,600)	63.8% (81,900)	60.7% (67,500)	61.5% (82,500)	59.6% (58,400)	62.8% (48,300)	61.7% (535,000)	62.2% (3,605,600)	63.1% (34,856,100)
Percentage aged 65 and over	2016	18.6% (18,300)	18.7% (21,900)	23.3% (24,000)	20.0% (25,700)	23.8% (26,500)	21.7% (29,100)	24.3% (23,800)	17.8% (13,700)	21.1% (182,900)	18.3% (1,061,200)	17.9% (9,882,800)
Percentage aged 85 and over	2016	2.2% (2,200)	2.3% (2,700)	2.6% (2,700)	2.5% (3,200)	2.9% (3,200)	2.7% (3,600)	2.8% (2,800)	1.8% (1,400)	2.5% (21,700)	2.4% (140,000)	2.4% (1,328,100)
Dependency ratio per 100 working age population	2016	57.6	61.7	67.3	56.8	64.8	62.6	67.8	59.3	62.1	60.9	58.6
Dependency ratio of children per 100 working age population	2016	28.3	31.4	28.4	25.5	25.5	27.3	27.1	31.0	27.9	31.5	30.2
Dependency ratio of older people per 100 working age population	2016	29.3	30.3	38.9	31.3	39.2	35.3	40.7	28.3	34.2	29.4	28.4
Population change between 2016 and 2026	2016-2026	3.0% (3,000)	5.4% (6,400)	3.9% (4,000)	4.1% (5,200)	3.1% (3,400)	3.9% (5,200)	1.6% (1,600)	1.7% (1,300)	3.5% (30,000)	5.7% (331,600)	7.1% (3,916,500)
Population change between 2016 and 2026 - under five	2016-2026	-2.9% (-200)	-1.3% (-100)	0.5% (0)	3.0% (200)	3.9% (200)	1.8% (100)	0.0% (0)	-5.4% (-300)	0.0% (0)	2.5% (9,000)	2.3% (79,900)
Population change between 2016 and 2026 - under 16s	2016-2026	-1.2% (-200)	3.5% (800)	0.5% (100)	4.5% (900)	5.2% (900)	0.4% (100)	-0.8% (-100)	-2.8% (-400)	1.4% (2,000)	6.1% (68,800)	7.3% (764,500)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Population change between 2016 and 2026 - ages 16-64	2016-2026	-1.7% (-1,100)	0.6% (400)	-1.3% (-800)	-0.1% (0)	-4.0% (-2,700)	-0.5% (-400)	-4.0% (-2,300)	-3.8% (-1,800)	-1.7% (-8,800)	2.0% (71,300)	3.0% (1,049,300)
Population change between 2016 and 2026 - 65 and over	2016-2026	23.1% (4,300)	23.2% (5,100)	19.4% (4,700)	16.9% (4,300)	19.9% (5,300)	19.0% (5,500)	17.0% (4,100)	25.9% (3,600)	20.0% (36,800)	18.0% (191,600)	21.3% (2,102,800)
Population change between 2016 and 2026 - 85 and over	2016-2026	50.0% (1,100)	40.8% (1,100)	63.0% (1,800)	36.1% (1,100)	58.7% (1,900)	46.0% (1,700)	45.6% (1,300)	58.4% (800)	49.1% (10,800)	36.2% (51,000)	34.8% (463,800)
Proportion of population living in rural areas	2014	9.1% (9,000)	21.8% (25,200)	29.5% (30,200)	20.4% (25,700)	39.8% (44,000)	32.0% (42,300)	30.4% (29,800)	0.0% (0)	24.0% (206,300)	14.7% (841,800)	17.0% (9,260,900)
Proportion of population from minority ethnic groups	2011	3.5% (3,400)	13.8% (15,700)	5.4% (5,400)	6.7% (8,400)	5.4% (5,800)	7.4% (9,700)	2.5% (2,400)	5.0% (3,800)	6.4% (54,700)	20.8% (1,167,500)	20.2% (10,733,200)
Index of multiple deprivation (IMD) 2015 weighted score	2015	20.9	18.8	12.7	18.5	12.5	13.5	15.2	20.3	16.4	25.2	21.8
Percentage in most deprived IMD 2015 quintile	2015	13.7% (13,500)	17.7% (20,400)	3.9% (4,000)	11.2% (14,100)	1.3% (1,500)	5.4% (7,100)	4.6% (4,500)	17.5% (13,500)	9.1% (78,600)	29.3% (1,675,800)	20.2% (10,950,600)
Percentage in second most deprived IMD 2015 quintile	2015	29.8% (29,300)	16.6% (19,200)	10.7% (10,900)	29.1% (36,700)	9.7% (10,800)	12.4% (16,400)	18.1% (17,700)	21.9% (16,900)	18.4% (157,900)	18.6% (1,061,500)	20.5% (11,133,400)
Mosaic profile - most common geodemographic group	2016	H Aspiring Homemakers	L Transient Renters	B Prestige Positions	F Senior Security	E Suburban Stability	A Country Living	A Country Living	H Aspiring Homemakers	H Aspiring Homemakers	H Aspiring Homemakers	H Aspiring Homemakers
Mosaic profile - percentage of population in the most common group	2016	20.7% (20,400)	13.4% (15,500)	16.8% (17,200)	13.0% (16,500)	15.5% (17,200)	15.3% (20,300)	15.8% (15,500)	23.3% (17,900)	12.9% (111,000)	n/a	n/a
Mosaic profile - financial stress	2016	28.7% (28,300)	28.4% (32,700)	22.5% (23,000)	27.5% (34,000)	21.6% (23,600)	24.4% (31,900)	24.5% (23,900)	29.9% (23,200)	25.8% (220,600)	n/a	28.0%
<b>Be able to access more good jobs and feel benefits of economic growth</b>												
Child poverty: Children living in income deprived families, 0-15 (IDACI)	2015	19.0% (3,400)	16.0% (3,700)	12.6% (2,200)	16.6% (3,600)	11.5% (2,000)	11.4% (2,500)	11.4% (1,800)	19.7% (2,900)	14.7% (22,200)	22.5% (252,900)	19.9% (2,070,800)
Child poverty: Children living in income deprived families, 0-15 (PHOF)	2014	18.7% (3,300)	16.3% (3,600)	12.6% (2,100)	16.7% (3,400)	12.9% (2,100)	12.0% (2,500)	12.8% (1,900)	18.4% (2,800)	15.1% (21,500)	23.5% (256,000)	20.1% (2,003,100)
Households with children where there are no adults in employment	2011	4.1% (1,700)	3.4% (1,600)	2.6% (1,100)	3.2% (1,700)	2.3% (1,000)	2.4% (1,300)	2.3% (1,000)	4.7% (1,500)	3.1% (10,900)	4.8% (111,200)	4.2% (922,200)
School readiness (Early Years Foundation Stage)	2016/17	73.3% (780)	71.1% (1,020)	76.3% (870)	75.3% (1,000)	77.9% (920)	76.8% (1,070)	77.1% (790)	74.1% (650)	74.5% (7,130)	68.6% (50,800)	70.7% (473,630)

Compared to England: Better Similar Worse Lower Similar Higher Suppressed / not tested / not available

Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Pupil absence	Jan-17	4.6%	4.0%	3.8%	4.2%	4.2%	3.9%	4.0%	4.4%	4.1%	4.3%	4.3%
Children with special educational needs	Jan-17	14.2%	12.3%	12.1%	13.1%	11.1%	11.3%	9.9%	13.3%	12.1%	15.2%	14.3%
Children who claim free school meals	Jan-17	12.6% (1,670)	8.9% (1,740)	7.8% (1,120)	11.8% (1,880)	7.6% (1,130)	8.3% (1,380)	8.0% (1,220)	13.1% (1,460)	9.6% (11,600)	16.2%	13.8% (1,113,090)
GCSE attainment (English and Maths A*-C)	2016	47.3% (450)	64.1% (930)	71.9% (620)	57.8% (710)	60.1% (650)	66.8% (660)	64.6% (760)	55.2% (450)	59.7% (5,230)	60.3% (36,310)	59.3% (356,050)
Adults with NVQ level 3 or above (16-64)	Jan 2016 - Dec 2016	47.2% (28,600)	49.2% (35,300)	55.9% (34,100)	59.9% (47,200)	50.4% (34,000)	63.3% (50,900)	52.1% (30,500)	44.4% (21,100)	53.6% (281,700)	49.7% (1,765,600)	56.8% (19,545,800)
Adults with no qualifications (16-64)	Jan 2016 - Dec 2016	3.1% (1,900)	9.9% (7,100)	4.9% (3,000)	10.5% (8,300)	7.7% (5,200)	6.7% (5,400)	7.2% (4,200)	11.6% (5,500)	7.7% (40,500)	11.8% (418,700)	7.8% (2,680,600)
People in employment (aged 16-64)	Jan 2016 - Dec 2016	79.2% (48,100)	80.6% (57,800)	76.6% (46,800)	79.5% (63,200)	79.2% (53,700)	74.6% (60,300)	81.2% (47,500)	75.5% (35,800)	78.3% (413,200)	71.1% (2,533,900)	74.2% (25,631,600)
Out-of-work benefits	Nov-2016	8.2% (5,170)	7.0% (5,080)	5.7% (3,500)	8.0% (6,450)	5.4% (3,630)	6.0% (4,910)	6.6% (3,850)	7.9% (3,850)	6.8% (36,430)	9.4% (335,320)	8.1% (2,807,340)
Unemployment (16-64 year olds claiming jobseekers allowance)	Oct-2017	1.2% (750)	0.9% (660)	0.8% (470)	1.3% (1,040)	1.2% (780)	0.8% (700)	0.8% (480)	1.1% (510)	1.0% (5,380)	2.3% (84,620)	1.9% (645,890)
Youth unemployment (16-24 year olds claiming jobseekers allowance)	Oct-2017	3.8% (200)	2.3% (130)	2.8% (140)	3.0% (260)	3.1% (170)	2.4% (160)	2.4% (110)	3.2% (130)	2.9% (1,280)	5.4% (18,290)	4.3% (131,800)
Gap in the employment rate between those with a long-term health condition and the overall employment rate	2016/17	43.9%	33.6%	43.7%	29.2%	37.7%	37.4%	26.6%	29.2%	35.0%	28.7%	29.4%
Older people aged 60 and over living in income-deprived households	2015	17.9% (4,010)	13.2% (3,520)	11.1% (3,170)	14.0% (4,400)	12.5% (3,910)	10.0% (3,500)	11.6% (3,360)	18.1% (3,020)	13.1% (28,890)	18.2% (237,020)	16.2% (1,954,600)
<b>Be healthier and more independent</b>												
General fertility rates per 1,000 women aged 15-44	2015	57.6 (1,060)	70.8 (1,450)	54.4 (910)	52.0 (1,240)	52.6 (920)	55.8 (1,230)	52.2 (800)	61.2 (910)	57.1 (8,510)	63.9 (69,810)	62.5 (664,400)
Infant mortality rate per 1,000 live births	2014-2016	6.2 (20)	6.0 (26)	5.2 (15)	5.4 (20)	3.2 (9)	3.8 (14)	5.6 (14)	5.9 (16)	5.2 (134)	6.0 (1,256)	3.9 (7,710)
Low birthweight babies - full term babies (under 2,500 grams)	2013-2015	7.5% (250)	8.0% (340)	6.9% (200)	7.1% (260)	5.6% (150)	6.8% (250)	7.8% (190)	7.6% (210)	7.2% (1,850)	8.6% (18,120)	7.2% (145,380)
Breastfeeding initiation rates	2016/17	58.8% (600)	73.8% (820)	72.4% (480)	64.7% (750)	65.6% (550)	72.0% (700)	70.7% (550)	64.2% (580)	67.6% (5,030)	68.9% (47,180)	74.5% (463,150)
Unplanned hospital admissions due to alcohol-specific conditions (under 18) (rate per 100,000)	2013/14-2015/16	63.8 (40)	20.0 (20)	31.9 (20)	23.7 (20)	33.4 (20)	42.4 (30)	34.8 (20)	60.4 (30)	37.7 (190)	32.6 (1,230)	37.4 (13,000)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Excess weight (children aged four to five)	2016/17	27.6% (300)	23.8% (330)	23.9% (240)	26.7% (330)	24.7% (250)	21.7% (280)	24.4% (220)	26.7% (250)	24.9% (2,200)	24.2% (15,640)	22.6% (125,730)
Excess weight (children aged 10-11)	2016/17	36.0% (340)	33.6% (420)	34.0% (330)	33.6% (370)	34.7% (320)	30.7% (370)	30.0% (250)	37.3% (290)	33.6% (2,680)	37.1% (23,110)	34.2% (190,570)
Obesity (children aged four to five)	2016/17	11.4% (120)	10.2% (140)	8.9% (90)	11.9% (150)	11.2% (110)	8.4% (110)	9.8% (90)	11.0% (100)	10.3% (910)	10.7% (7,520)	9.6% (60,500)
Obesity (children aged 10-11)	2016/17	22.4% (210)	18.6% (230)	19.1% (190)	18.4% (200)	20.2% (190)	16.6% (200)	16.7% (140)	23.4% (180)	19.2% (1,530)	22.4% (13,930)	20.0% (111,170)
Under-18 conception rates per 1,000 girls aged 15-17	2015	23.3 (40)	26.4 (50)	11.2 (20)	34.7 (70)	14.4 (30)	15.8 (30)	21.5 (40)	32.8 (50)	22.3 (320)	23.7 (2,380)	20.8 (19,080)
Chlamydia diagnosis (15-24 years) (rate per 100,000)	2016	1,872 (220)	1,767 (230)	1,555 (170)	1,464 (270)	1,304 (160)	1,473 (220)	1,444 (150)	2,281 (210)	1,614 (1,620)	1,714 (12,790)	1,882 (128,100)
Hospital admissions caused by unintentional and deliberate injuries in children under 15 (rate per 10,000)	2015/16	87 (150)	91 (190)	116 (190)	90 (180)	84 (140)	110 (230)	83 (120)	104 (150)	96 (1,330)	110 (11,650)	104 (102,040)
Depression prevalence (ages 18+)	2016/17	11.2% (9,630)	7.8% (8,540)	7.4% (5,530)	11.3% (12,040)	7.4% (5,950)	8.9% (9,270)	10.0% (7,190)	11.1% (7,590)	9.4% (65,730)	9.4% (514,200)	9.1% (4,187,800)
Suicides and injuries undetermined (ages 15+) (ASR per 100,000)	2014-2016	8.9 (20)	9.0 (30)	9.6 (30)	9.3 (30)	8.3 (30)	14.1 (50)	7.3 (20)	13.8 (30)	10.1 (230)	10.0 (1,490)	9.9 (14,280)
Self-harm admissions (ASR per 100,000)	2015/16	206 (200)	230 (260)	174 (170)	234 (310)	170 (180)	211 (270)	233 (200)	169 (130)	205 (1,730)	209 (12,190)	197 (109,750)
Learning disabilities prevalence	2016/17	0.6% (690)	0.5% (670)	0.3% (310)	0.4% (540)	0.3% (330)	0.4% (470)	0.5% (410)	0.6% (540)	0.5% (3,950)	0.5% (36,160)	0.5% (274,210)
Limiting long-term illness	2011	20.7% (20,200)	17.7% (20,110)	18.1% (18,270)	20.8% (25,820)	18.7% (20,210)	18.2% (23,830)	21.1% (20,460)	17.9% (13,750)	19.2% (162,650)	19.0% (1,062,060)	17.6% (9,352,590)
Disability Living Allowance claimants (%)	May-17	5.0% (4,970)	2.7% (3,200)	3.4% (3,470)	3.7% (4,700)	3.3% (3,650)	2.7% (3,630)	3.4% (3,340)	3.8% (2,900)	3.4% (29,860)	3.7% (212,830)	3.4% (1,900,460)
Smoking prevalence (18+)	2016	20.1% (15,800)	20.2% (18,500)	10.8% (9,000)	20.2% (21,200)	10.7% (9,800)	15.3% (16,600)	9.0% (7,200)	16.7% (10,000)	15.4% (107,500)	15.4% (697,600)	15.5% (6,739,800)
Smoking attributable mortality (ASR per 100,000)	2012-2014	329	283	230	297	238	236	254	258	263	273	275
Alcohol-related admissions (narrow definition) (ASR per 100,000)	2015/16	870 (840)	780 (880)	656 (700)	881 (1,100)	795 (950)	785 (1,070)	654 (660)	640 (470)	763 (6,680)	728 (39,820)	647 (339,280)
Alcohol-specific mortality - men (ASR per 100,000)	2014-2016	17.1 (30)	17.7 (30)	9.0 (20)	21.5 (40)	9.0 (20)	8.8 (20)	10.5 (20)	12.0 (10)	13.2 (170)	17.8 (1,410)	14.2 (10,780)
Alcohol-specific mortality - women (ASR per 100,000)	2014-2016	9.8 (20)	8.6 (20)	10.9 (20)	9.5 (20)	6.8 (10)	6.0 (10)	14.1 (20)	12.5 (20)	9.4 (130)	8.2 (680)	6.8 (5,420)



Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Deaths from drug misuse	2014-2016	4.3 (10)	5.2 (20)	S	5.6 (20)	S	4.1 (20)	4.3 (10)	S	3.7 (90)	4.3 (710)	4.2 (6,800)
Adults who are overweight or obese (excess weight)	2015/16	67.6%	61.1%	62.9%	64.3%	63.4%	68.3%	68.9%	71.3%	65.6%	63.9%	61.3%
Adults who are obese	2015/16	31.2%	23.8%	26.2%	27.8%	22.1%	30.5%	28.5%	31.7%	27.5%	24.9%	22.9%
Healthy eating - 5-a-Day (synthetic estimates)	2015/16	52.8% (42,590)	53.2% (49,750)	56.3% (47,690)	56.5% (59,400)	59.1% (55,210)	58.6% (64,540)	57.5% (47,070)	51.7% (32,040)	56.1% (398,700)	56.1% (2,578,760)	56.8% (25,009,910)
Physical activity in adults	2015/16	59.7%	64.5%	60.8%	60.3%	62.7%	67.7%	60.7%	59.7%	62.3%	62.5%	64.9%
Physical inactivity in adults	2015/16	26.0%	21.9%	25.3%	22.7%	21.6%	21.1%	29.2%	25.5%	23.9%	24.1%	22.3%
Acute sexually transmitted infections (rate per 100,000)	2016	689 (680)	682 (790)	455 (470)	488 (620)	434 (480)	571 (760)	346 (340)	635 (490)	536 (4,620)	663 (38,130)	750 (410,720)
Seasonal flu - people aged 65 and over	2016/17	68.4% (13,900)	68.1% (13,290)	69.1% (11,640)	70.6% (18,130)	69.3% (15,920)	70.2% (19,340)	67.2% (14,270)	70.8% (10,910)	69.3% (115,820)	70.1% (759,470)	70.5% (7,014,440)
Pneumococcal vaccine in people aged 65 and over	2016/17	62.2% (11,620)	64.4% (15,600)	68.5% (12,310)	65.9% (14,880)	63.5% (14,080)	64.4% (16,770)	69.7% (14,080)	68.6% (8,220)	65.6% (105,900)	68.5% (678,020)	69.8% (6,581,210)
Limiting long-term illness in people aged 65 and over	2011	60.9% (9,230)	51.4% (9,470)	48.2% (9,370)	57.4% (12,500)	49.4% (10,650)	48.5% (11,740)	53.3% (10,450)	55.8% (6,060)	52.6% (79,470)	54.1% (494,380)	51.5% (4,297,930)
Diabetes prevalence (ages 17+)	2016/17	7.7% (6,760)	6.9% (7,700)	6.4% (4,810)	7.3% (7,930)	7.1% (5,770)	6.5% (6,830)	7.6% (5,520)	7.1% (4,890)	7.1% (50,210)	7.5% (414,200)	6.7% (3,116,400)
Hypertension prevalence	2016/17	16.4% (17,660)	13.6% (18,870)	13.7% (12,630)	16.0% (20,820)	17.3% (16,960)	15.8% (20,150)	18.6% (16,310)	14.1% (12,090)	15.6% (135,480)	14.7% (1,015,380)	13.8% (8,028,080)
Stroke or transient ischaemic attacks prevalence	2016/17	2.0% (2,140)	1.7% (2,300)	1.8% (1,650)	2.4% (3,060)	2.2% (2,140)	2.2% (2,810)	2.6% (2,240)	1.8% (1,580)	2.1% (17,920)	1.9% (128,440)	1.7% (1,013,460)
Dementia prevalence	2016/17	0.8% (860)	0.7% (1,040)	0.7% (660)	1.0% (1,350)	1.0% (1,010)	0.9% (1,150)	1.0% (830)	0.7% (620)	0.9% (7,530)	0.8% (53,960)	0.8% (443,840)
Estimated dementia diagnosis rate (recorded / expected)	2016/17	69.0%	64.3%	59.1%	81.6%	67.2%	65.7%	63.6%	69.1%	67.7%	64.4%	66.4%
Emergency (unplanned) admissions (ASR per 1,000)	2016/17	100 (9,550)	119 (13,770)	104 (11,180)	131 (16,760)	96 (11,390)	101 (13,940)	106 (10,990)	128 (9,360)	110 (96,930)	116 (663,050)	107 (5,762,680)
Long-term adult social care users (ASR per 1,000)	2016/17	20.2 (1,540)	19.3 (1,780)	15.7 (1,420)	24.2 (2,550)	15.2 (1,540)	18.2 (2,090)	24.2 (2,050)	21.9 (1,190)	19.6 (14,140)	19.4 (87,680)	20.1 (872,510)
Permanent admissions to residential and nursing care homes for people aged 65 and over (rate per 100,000)	2016/17	628 (120)	627 (140)	463 (110)	522 (130)	661 (180)	704 (210)	559 (130)	731 (100)	634 (1,160)	632 (6,700)	611 (60,350)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Falls admissions in people aged 65 and over (ASR per 100,000)	2015/16	2,159 (360)	2,297 (480)	2,132 (460)	2,682 (660)	2,001 (490)	2,041 (560)	2,271 (490)	2,411 (280)	2,239 (3,780)	2,185 (22,800)	2,169 (211,930)
Hip fractures in people aged 65 and over (ASR per 100,000)	2015/16	694 (120)	690 (140)	570 (130)	673 (160)	520 (130)	500 (140)	644 (140)	673 (80)	609 (1,030)	619 (6,450)	589 (57,660)
Excess winter mortality	Aug 2013 to Jul 2016	24.5% (200)	20.5% (210)	22.8% (220)	18.1% (220)	17.7% (190)	21.4% (260)	25.3% (250)	12.8% (80)	20.6% (1,610)	18.3% (9,070)	17.9% (80,700)
Life expectancy at birth - males (years)	2013-2015	78.9	79.2	80.2	78.4	80.3	80.4	80.1	79.0	79.6	78.7	79.5
Life expectancy at birth - females (years)	2013-2015	82.5	82.3	83.2	82.7	84.0	83.4	82.8	82.6	83.0	82.7	83.1
Healthy life expectancy at birth - males (years)	2009-2013	61.1	63.5	65.4	62.2	65.6	65.5	64.1	62.6	63.9	62.2	63.5
Healthy life expectancy at birth - females (years)	2009-2013	62.1	65.3	66.6	63.5	66.3	66.6	65.3	63.0	65.0	63.2	64.8
Inequalities in life expectancy - males (slope index of inequality) (years)	2013-2015	8.9	8.3	7.8	8.9	4.6	4.3	3.2	5.9	7.1	9.4	9.2
Inequalities in life expectancy - females (slope index of inequality) (years)	2013-2015	5.1	6.6	7.3	9.6	3.9	5.7	4.1	9.0	6.6	7.3	7.1
Mortality from causes considered preventable (various ages) (ASR per 100,000)	2014-2016	201 (580)	206 (690)	157 (540)	210 (800)	155 (590)	164 (700)	164 (560)	204 (450)	180 (4,900)	196 (31,560)	183 (277,330)
End of life: proportion dying at home or usual place of residence	2016/17	40.4% (350)	43.2% (460)	44.3% (460)	41.6% (530)	43.2% (510)	40.7% (500)	45.3% (500)	40.2% (250)	42.5% (3,550)	43.8% (22,960)	46.1% (221,300)
<b>Feel safer, happier and more supported</b>												
Lone parent households	2011	10.1% (4,100)	9.7% (4,600)	8.2% (3,400)	9.6% (5,000)	8.3% (3,700)	8.4% (4,700)	8.4% (3,500)	11.6% (3,700)	9.2% (32,600)	11.3% (258,700)	10.6% (2,339,800)
Owner occupied households	2011	69.7% (28,350)	70.1% (33,140)	76.2% (31,400)	69.5% (36,560)	76.3% (33,920)	72.1% (40,160)	80.0% (33,420)	68.7% (21,730)	72.8% (258,670)	65.6% (1,504,320)	64.1% (14,148,780)
Privately rented households	2011	12.1% (4,940)	15.1% (7,150)	9.5% (3,930)	10.5% (5,510)	8.5% (3,770)	12.9% (7,210)	9.8% (4,100)	11.0% (3,480)	11.3% (40,090)	14.0% (321,670)	16.8% (3,715,920)
Socially rented households	2011	16.9% (6,880)	13.5% (6,370)	13.2% (5,450)	18.7% (9,840)	13.9% (6,190)	13.7% (7,620)	8.9% (3,700)	19.3% (6,110)	14.7% (52,150)	19.0% (435,170)	17.7% (3,903,550)
Households with no central heating	2011	1.6% (650)	3.9% (1,860)	1.6% (670)	1.8% (960)	1.9% (820)	1.9% (1,060)	2.4% (990)	1.9% (590)	2.1% (7,600)	2.9% (67,170)	2.7% (594,560)
Overcrowded households	2011	3.0% (1,220)	3.1% (1,480)	2.4% (980)	2.7% (1,390)	2.2% (960)	1.9% (1,080)	1.9% (800)	2.7% (850)	2.5% (8,750)	4.5% (102,550)	4.6% (1,024,470)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Fuel poverty	2015	10.5% (4,350)	13.8% (6,630)	11.0% (4,600)	12.8% (6,840)	10.7% (4,860)	12.5% (7,090)	12.9% (5,510)	10.8% (3,460)	12.0% (43,330)	13.5% (315,990)	11.0% (2,502,220)
Housing affordability ratio (ratio of lower quartile house price to lower quartile earnings)	2016	5.8	6.4	6.7	5.2	7.1	7.8	6.1	7.0	6.3	6.5	7.2
Statutory homelessness - homelessness acceptances per 1,000 households	2016/17	0.5 (20)	0.8 (40)	S	S	S	0.1 (10)	S	0.5 (20)	0.2 (90)	1.1 (2,710)	0.8 (19,460)
Access to private transport - households with no cars or vans	2011	20.2% (8,210)	21.4% (10,120)	13.6% (5,590)	22.1% (11,630)	13.2% (5,880)	17.5% (9,740)	14.8% (6,200)	20.6% (6,510)	18.0% (63,890)	24.7% (566,620)	25.8% (5,691,250)
Satisfied with area as a place to live (compared to Staffordshire)	Sep 2015 - Mar 2017	89.0%	88.9%	92.7%	90.0%	93.3%	93.7%	95.9%	90.2%	91.7%	n/a	n/a
Residents who felt fearful of being a victim of crime (compared to Staffordshire)	Sep 2015 - Mar 2017	13.2%	15.2%	12.0%	14.3%	8.2%	12.8%	8.8%	17.2%	12.7%	n/a	n/a
People who have experienced crime (compared to Staffordshire)	Sep 2015 - Mar 2017	6.8%	5.8%	8.8%	7.5%	3.8%	5.3%	4.1%	10.2%	6.6%	n/a	n/a
Total recorded crime (rate per 1,000)	2016/17	65.8 (6,484)	67.8 (7,914)	49.1 (5,056)	68.3 (8,780)	45.7 (5,086)	55.0 (7,372)	49.3 (4,831)	76.9 (5,914)	59.3 (51,437)	70.0 (402,366)	74.1 (4,059,406)
Violent crime (rate per 1,000)	2016/17	20.9 (2,055)	21.2 (2,479)	13.9 (1,437)	23.2 (2,979)	14.3 (1,591)	16.7 (2,239)	19.0 (1,859)	23.2 (1,787)	18.9 (16,426)	19.7 (113,017)	20.0 (1,096,125)
Anti-social behaviour (rate per 1,000)	2016/17	30.6 (3,016)	29.9 (3,492)	22.3 (2,294)	33.2 (4,266)	17.1 (1,903)	27.1 (3,639)	21.0 (2,058)	29.1 (2,237)	26.4 (22,905)	27.5 (159,276)	30.7 (1,698,992)
Alcohol-related crime (compared to Staffordshire) (rate per 1,000)	2016/17	5.5 (542)	6.5 (764)	3.9 (397)	5.9 (763)	2.9 (320)	4.8 (645)	5.6 (547)	5.7 (439)	5.1 (4,417)	n/a	n/a
Domestic abuse (rate per 1,000)	2016/17	8.4 (830)	8.3 (965)	5.4 (555)	10.0 (1,283)	5.1 (568)	6.7 (899)	6.8 (671)	9.8 (753)	7.5 (6,524)	6.8 (39,604)	6.4 (354,156)
Sexual offences (rate per 1,000 population)	2016/17	2.4 (233)	2.5 (290)	1.9 (197)	3.1 (393)	1.3 (149)	1.8 (246)	2.5 (241)	2.5 (193)	2.2 (1,942)	2.1 (12,226)	2.1 (113,153)
Re-offending levels (adults)	Oct 2014 - Sep 2015	24.0% (150)	20.6% (150)	18.3% (80)	20.6% (140)	21.6% (90)	17.9% (110)	17.0% (80)	22.5% (110)	20.4% (1,810)	24.6% (15,310)	23.6% (94,700)
Re-offending levels (juveniles)	Oct 2014 - Sep 2015	31.4% (10)	42.4% (10)	42.1% (10)	47.4% (20)	35.1% (10)	42.0% (20)	70.4% (20)	37.5% (10)	43.0% (340)	35.1% (1,920)	37.4% (11,830)
Lone pensioner households	2011	11.4% (4,640)	12.4% (5,860)	12.2% (5,030)	13.5% (7,120)	13.3% (5,930)	12.8% (7,120)	13.5% (5,640)	10.9% (3,430)	12.6% (44,770)	12.6% (289,570)	12.4% (2,725,600)
Older people feeling safe at night (people aged 65 and over) (compared to Staffordshire)	Sep 2015 - Mar 2017	74.6%	71.3%	81.4%	83.2%	74.2%	77.8%	77.1%	82.5%	77.9%	n/a	n/a

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Time period	Cannock Chase	East Staffordshire	Lichfield	Newcastle-under-Lyme	South Staffordshire	Stafford	Staffordshire Moorlands	Tamworth	Staffordshire	West Midlands	England
Provision of unpaid care	2011	12.1% (11,820)	10.1% (11,470)	11.5% (11,570)	11.9% (14,730)	12.5% (13,540)	11.5% (15,040)	12.9% (12,550)	10.6% (8,120)	11.6% (98,830)	11.0% (614,890)	10.2% (5,430,020)
Provision of unpaid care by people aged 65 and over	2011	16.1% (2,510)	13.3% (2,540)	15.4% (3,110)	15.0% (3,380)	15.3% (3,440)	14.7% (3,710)	15.3% (3,120)	14.8% (1,650)	15.0% (23,450)	14.5% (136,870)	13.8% (1,192,610)

## 6 Tamworth ward level indicator matrix

The information in the following matrix is mainly benchmarked against England and colour coded using a similar approach to that used in the [Public Health Outcomes Framework tool](#). It is important to remember that even if an indicator is categorised as being 'better than England' it may still indicate an important problem, for example rates of childhood obesity are already high across England so even if an area does not have a significantly high rate it could still mean that it is an important issue locally and should be considered alongside local knowledge.

Compared to England: Better Similar Worse Lower Similar Higher Suppressed / not tested / not available

Indicator	Amington	Belgrave	Bolehall	Castle	Glascote	Mercian	Spital	Stonydelph	Trinity	Willnecote	Tamworth	Staffordshire	West Midlands	England
<b>Demographics</b>														
Mid-year population estimate (000s), 2015	7.8	7.8	7.8	7.5	8.0	6.7	7.1	7.7	7.3	9.4	77.0	867.1	5,800.7	55,268.1
% under five, 2015	5.5% (430)	7.1% (560)	6.6% (510)	5.2% (390)	7.0% (570)	4.9% (330)	5.1% (360)	6.9% (530)	5.6% (410)	6.8% (640)	6.1% (4,680)	5.2% (44,980)	6.3% (365,270)	6.2% (3,429,050)
% under 16, 2015	18.8% (1,470)	22.0% (1,730)	19.9% (1,550)	15.9% (1,200)	23.9% (1,920)	17.7% (1,190)	17.0% (1,210)	20.5% (1,580)	17.6% (1,290)	20.4% (1,910)	19.4% (14,960)	17.2% (149,270)	19.5% (1,133,960)	19.1% (10,529,100)
% aged 16-64, 2015	64.2% (5,010)	62.8% (4,930)	61.9% (4,810)	64.7% (4,860)	61.2% (4,910)	59.7% (4,010)	58.7% (4,160)	68.2% (5,250)	62.5% (4,580)	66.9% (6,260)	62.8% (48,320)	61.7% (534,950)	62.2% (3,605,570)	63.1% (34,856,130)
% aged 65 and over, 2015	16.9% (1,320)	15.2% (1,190)	18.2% (1,410)	19.3% (1,450)	14.9% (1,200)	22.6% (1,520)	24.3% (1,720)	11.2% (870)	19.9% (1,460)	12.7% (1,190)	17.8% (13,680)	21.1% (182,900)	18.3% (1,061,200)	17.9% (9,882,840)
% aged 85 and over, 2015	1.0% (80)	1.1% (80)	1.8% (140)	3.1% (230)	1.1% (90)	2.3% (160)	3.6% (260)	1.0% (80)	1.7% (120)	1.3% (120)	1.8% (1,420)	2.5% (21,690)	2.4% (139,970)	2.4% (1,328,090)
Dependency ratio per 100 working age population, 2015	55.7	59.1	61.5	54.5	63.5	67.6	70.3	46.6	60.0	49.5	59.3	62.1	60.9	58.6
Dependency ratio of children per 100 working age population, 2015	29.3	35.0	32.2	24.6	39.1	29.7	29.0	30.1	28.2	30.5	31.0	27.9	31.5	30.2
Dependency ratio of older people per 100 working age population, 2015	26.4	24.1	29.4	29.9	24.4	37.9	41.3	16.5	31.9	19.0	28.3	34.2	29.4	28.4
Population density (people per square km), 2015	1,658	4,088	4,913	1,440	5,247	2,605	1,489	3,851	2,493	2,584	2,501	329	442	421
Minority ethnic groups, 2011 (%)	5.3% (420)	4.1% (310)	4.0% (300)	6.2% (450)	5.4% (430)	4.4% (290)	5.9% (420)	5.3% (410)	4.0% (290)	5.3% (490)	5.0% (3,830)	6.4% (54,680)	20.8% (1,167,510)	20.2% (10,733,220)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Armington	Belgrave	Bolehall	Castle	Glascote	Mercian	Spital	Stonydelph	Trinity	Wilnecote	Tamworth	Staffordshire	West Midlands	England
Index of multiple deprivation (IMD) 2015 weighted score, 2015	20.1	26.0	20.0	23.6	34.7	17.8	17.9	20.7	8.5	13.3	20.3	16.4	25.2	21.8
% in most deprived IMD 2015 national quintile, 2014	23.3% (1,840)	35.4% (2,780)	0.0% (0)	23.2% (1,730)	67.1% (5,360)	0.0% (0)	0.0% (0)	23.0% (1,790)	0.0% (0)	0.0% (0)	17.5% (13,500)	9.1% (78,630)	29.3% (1,675,770)	20.2% (10,950,610)
% in second most deprived IMD 2015 national quintile, 2014	19.5% (1,540)	0.0% (0)	55.6% (4,280)	39.4% (2,950)	0.0% (0)	43.7% (2,910)	30.4% (2,160)	18.5% (1,440)	0.0% (0)	17.4% (1,630)	21.9% (16,900)	18.4% (157,950)	18.6% (1,061,460)	20.5% (11,133,400)
Mosaic profile - most common group, 2016	M Family Basics	H Aspiring Homemakers	H Aspiring Homemakers	D Domestic Success	M Family Basics	E Suburban Stability	E Suburban Stability	M Family Basics	E Suburban Stability	H Aspiring Homemakers	H Aspiring Homemakers	H Aspiring Homemakers	H Aspiring Homemakers	H Aspiring Homemakers
Mosaic profile - % in the most common group, 2016	23.0% (1,810)	37.4% (2,940)	29.0% (2,230)	24.2% (1,810)	45.3% (3,620)	20.5% (1,360)	16.5% (1,170)	36.1% (2,810)	27.5% (2,010)	40.2% (3,760)	23.3% (17,940)	12.9% (111,030)	11% (n/a)	n/a
Mosaic profile - % in financial stress, 2015	27.3% (2,180)	33.6% (2,630)	29.0% (2,210)	32.9% (2,440)	39.3% (3,140)	26.4% (1,810)	24.9% (1,790)	34.7% (2,710)	22.1% (1,670)	27.9% (2,600)	29.9% (23,190)	25.8% (220,590)	n/a	28.0% (n/a)
<b>Be able to access more good jobs and feel benefits of economic growth</b>														
Children living in income deprived families, 2015 (%)	23.4% (340)	21.8% (370)	19.7% (310)	15.5% (190)	30.5% (580)	17.7% (210)	18.4% (220)	21.5% (340)	8.0% (110)	14.5% (270)	19.7% (2,930)	14.7% (22,200)	22.5% (252,930)	19.9% (2,070,840)
School readiness (Early Years Foundation Stage), 2016/17 (%)	44.9% (40)	43.4% (50)	52.0% (50)	53.2% (30)	32.8% (40)	56.3% (40)	60.5% (50)	44.6% (40)	56.6% (50)	56.3% (70)	74.1% (650)	74.5% (7,130)	68.6% (50,800)	70.7% (473,630)
Pupil absence, 2017 (%)	4.6%	4.8%	3.7%	3.8%	5.1%	3.6%	3.8%	4.5%	3.0%	3.9%	4.4%	4.1%	4.3%	4.3%
Children with special educational needs, 2017 (%)	14.6% (160)	16.9% (230)	11.0% (120)	11.0% (90)	15.4% (220)	9.8% (100)	11.4% (110)	11.2% (110)	11.9% (110)	12.7% (160)	13.3% (1,480)	12.1% (14,630)	15.2% (137,060)	14.3% (1,144,900)
Children who claim free school meals, 2017 (%)	16.8% (180)	15.4% (210)	11.3% (130)	7.3% (60)	26.2% (370)	8.7% (90)	9.4% (90)	17.0% (170)	5.4% (50)	7.7% (100)	13.1% (1,460)	9.6% (11,600)	16.2% (146,480)	13.8% (1,113,090)
GCSE attainment (English and Maths A*-C)	47.1% (40)	56.9% (60)	57.5% (50)	46.9% (40)	51.9% (60)	61.3% (50)	58.1% (40)	50.0% (20)	54.0% (30)	54.5% (40)	55.2% (450)	59.7% (5,230)	60.3% (36,310)	59.3% (356,050)
Out-of-work benefits (%)	8.7% (440)	8.3% (410)	8.2% (400)	7.9% (390)	12.5% (620)	7.9% (320)	8.0% (340)	8.8% (460)	3.4% (160)	5.2% (330)	7.9% (3,850)	6.8% (36,430)	9.4% (335,320)	8.1% (2,807,340)
Unemployment (claimant counts), October 2017 (%)	1.2% (60)	1.3% (70)	1.1% (60)	1.0% (50)	1.7% (90)	1.0% (40)	1.1% (50)	1.1% (60)	0.3% (20)	0.4% (30)	1.1% (510)	1.0% (5,380)	2.3% (84,620)	1.9% (645,890)
Older people aged 60 and over living in income-deprived households, 2015 (%)	14.9% (240)	18.6% (280)	20.4% (350)	24.4% (430)	25.4% (380)	18.0% (340)	14.4% (310)	22.5% (260)	11.9% (220)	13.6% (210)	18.1% (3,020)	13.1% (28,890)	18.2% (237,020)	16.2% (1,954,600)

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Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Amington	Belgrave	Bolehall	Castle	Glascote	Mercian	Spital	Stonydelph	Trinity	Wilnecote	Tamworth	Staffordshire	West Midlands	England
<b>Be healthier and more independent</b>														
General fertility rate per 1,000 women aged 15-44, 2013-2015	59 (90)	67 (110)	59 (90)	63 (90)	61 (100)	61 (70)	52 (70)	67 (110)	66 (80)	55 (110)	61 (920)	57 (8,590)	64 (70,370)	62 (663,470)
Low birthweight babies (under 2,500 grams), 2013-2015 (%)	8.8% (20)	6.3% (20)	5.9% (20)	8.4% (20)	8.6% (30)	10.0% (20)	6.0% (10)	8.6% (30)	4.9% (10)	8.0% (30)	7.6% (210)	7.2% (1,850)	8.6% (18,120)	7.2% (145,380)
Excess weight (children aged four to five), 2013/14 to 2015/16 (%)	25.9% (70)	22.2% (80)	21.2% (70)	23.2% (50)	25.8% (90)	25.0% (50)	23.3% (50)	22.5% (70)	22.5% (70)	22.2% (80)	23.3% (670)	23.2% (5,930)	23.3% (46,550)	22.2% (404,470)
Excess weight (children aged 10-11), 2013/14 to 2015/16 (%)	38.3% (100)	39.1% (110)	34.3% (70)	30.1% (60)	31.8% (100)	31.6% (60)	31.1% (60)	32.1% (80)	33.9% (80)	35.2% (100)	33.9% (820)	33.4% (7,760)	36.1% (64,350)	33.6% (535,060)
Obesity (children aged four to five), 2013/14 to 2015/16 (%)	8.8% (20)	10.5% (40)	9.7% (30)	11.9% (20)	12.3% (40)	12.6% (30)	10.6% (20)	10.5% (30)	7.5% (20)	9.6% (30)	10.3% (300)	9.3% (2,390)	10.4% (20,710)	9.3% (169,360)
Obesity (children aged 10-11), 2013/14 to 2015/16 (%)	21.8% (50)	20.7% (60)	21.0% (40)	17.6% (40)	20.0% (60)	17.0% (30)	16.4% (30)	17.2% (40)	15.5% (40)	16.3% (50)	18.5% (450)	18.7% (4,360)	21.5% (38,270)	19.3% (307,540)
Under-18 conception rates per 1,000 girls aged 15-17, 2012-2014											43 (190)	28 (1,260)	29 (9,090)	25 (70,270)
Unpaid care (under 16), 2011 (%)	1.1% (20)	1.3% (20)	0.5% (10)	1.1% (10)	1.3% (30)	1.3% (20)	1.6% (20)	0.7% (10)	0.9% (10)	1.5% (30)	1.1% (180)	1.1% (1,700)	1.1% (12,530)	1.1% (111,420)
Unpaid care (16-24), 2011 (%)	5.5% (50)	4.4% (40)	4.2% (40)	2.9% (20)	4.7% (40)	4.1% (30)	4.4% (30)	3.5% (30)	3.9% (30)	5.0% (60)	4.3% (370)	4.7% (4,380)	5.2% (35,280)	4.8% (302,360)
Disability Living Allowance claimants, May 2017 (%)	4.4% (340)	4.4% (350)	3.9% (310)	3.8% (290)	4.7% (380)	4.2% (280)	3.5% (250)	3.6% (280)	2.7% (200)	2.9% (280)	3.8% (2,900)	3.4% (29,860)	3.7% (212,830)	3.4% (1,900,460)
Limiting long-term illness, 2011 (%)	17.6% (1,390)	17.5% (1,340)	18.9% (1,420)	19.5% (1,430)	19.0% (1,520)	21.6% (1,430)	22.1% (1,570)	14.8% (1,160)	15.6% (1,150)	14.1% (1,320)	17.9% (13,750)	19.2% (162,650)	19.0% (1,062,060)	17.6% (9,352,590)
Fuel poverty, 2015 (%)	10.2% (330)	12.6% (380)	11.4% (380)	10.6% (380)	13.1% (420)	10.7% (310)	12.5% (390)	8.9% (280)	8.5% (260)	9.4% (350)	10.8% (3,460)	12.0% (43,330)	13.5% (315,990)	11.0% (2,502,220)
Limiting long-term illness in people aged 65 and over, 2011 (%)	51.9% (540)	56.2% (490)	55.8% (690)	61.7% (780)	55.0% (480)	57.0% (750)	53.2% (800)	58.9% (370)	51.6% (610)	57.9% (550)	55.8% (6,060)	52.6% (79,470)	54.1% (494,380)	51.5% (4,297,930)
Excess winter mortality, Aug 2010-July 2015 (%)	7.6% (10)	0% (0)	0% (0)	0% (0)	8.8% (10)	3.6% (<5)	10.1% (20)	39.5% (20)	23.5% (20)	33.8% (20)	6.7% (60)	18.7% (2,380)	18.7% (15,010)	18.3% (134,350)
Life expectancy at birth - males (years), 2011-2015	80.0	79.3	78.8	78.3	79.4	80.3	78.4	79.3	80.8	81.1	79.4	79.7	78.8	79.5
Life expectancy at birth - females (years), 2011-2015	82.7	79.9	84.9	83.8	87.0	83.1	78.8	82.7	87.4	84.5	82.8	83.1	82.8	83.2
Mortality from causes considered preventable (various ages) (ASR per 100,000), 2011-2015	191 (70)	178 (60)	212 (80)	242 (80)	265 (90)	183 (70)	211 (80)	255 (70)	147 (60)	157 (60)	200 (700)	178 (7,840)	197 (31,250)	184 (274,530)

Compared to England:

Better	Similar	Worse	Lower	Similar	Higher	Suppressed / not tested / not available
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Indicator	Amington	Belgrave	Bolehall	Castle	Glascote	Mercian	Spital	Stonydelph	Trinity	Wilnecote	Tamworth	Staffordshire	West Midlands	England
Emergency (unplanned) admissions (ASR per 1,000), 2016/17	132 (910)	142 (960)	124 (910)	130 (1,000)	139 (990)	131 (900)	128 (1,010)	150 (940)	113 (790)	117 (960)	128 (9,360)	110 (96,930)	116 (663,050)	107 (5,762,680)
Adult social care - long term care (ASR per 1,000), 2016/17	18 (90)	39 (150)	21 (120)	23 (150)	20 (100)	25 (140)	28 (200)	23 (90)	16 (80)	15 (70)	22 (1,190)	20 (14,140)	19 (87,680)	20 (872,510)
End of life: proportion dying at home or usual place of residence, (2013-2015)	32.6% (50)	51.9% (110)	33.9% (60)	34.4% (70)	31.0% (40)	38.2% (80)	48.8% (160)	40.8% (50)	34.8% (60)	36.4% (50)	39.5% (720)	42.4% (10,700)	42.1% (66,670)	44.6% (640,870)
<b>Feel safer, happier and more supported</b>														
Lone parent households, 2011 (%)	11.6% (360)	13.3% (390)	11.9% (390)	8.4% (290)	15.7% (490)	11.9% (340)	10.8% (330)	13.8% (430)	7.6% (230)	11.2% (410)	11.6% (3,660)	9.2% (32,600)	11.3% (258,750)	10.6% (2,339,820)
Owner occupied households, 2011 (%)	71.9% (2,270)	69.3% (2,050)	67.3% (2,180)	54.1% (1,890)	54.6% (1,700)	72.2% (2,040)	68.8% (2,110)	68.7% (2,130)	85.2% (2,570)	76.4% (2,810)	68.7% (21,730)	72.8% (258,670)	65.6% (1,504,320)	64.1% (14,148,780)
Privately rented households, 2011 (%)	8.6% (270)	9.7% (290)	12.1% (390)	20.6% (720)	8.2% (250)	7.8% (220)	13.6% (420)	8.3% (260)	9.2% (280)	10.4% (380)	11.0% (3,480)	11.3% (40,090)	14.0% (321,670)	16.8% (3,715,920)
Socially rented households, 2011 (%)	18.6% (590)	20.4% (600)	19.4% (630)	23.7% (830)	36.4% (1,130)	19.0% (540)	16.4% (500)	22.3% (690)	4.9% (150)	12.4% (460)	19.3% (6,110)	14.7% (52,150)	19.0% (435,170)	17.7% (3,903,550)
Households with no central heating, 2011 (%)	1.3% (40)	3.1% (90)	1.7% (50)	2.2% (80)	1.4% (50)	1.8% (50)	1.5% (50)	1.9% (60)	1.7% (50)	2.0% (70)	1.9% (590)	2.1% (7,600)	2.9% (67,170)	2.7% (594,560)
Overcrowded households, 2011 (%)	2.9% (90)	3.0% (90)	2.6% (90)	2.6% (90)	4.8% (150)	2.5% (70)	2.2% (70)	3.2% (100)	0.7% (20)	2.3% (90)	2.7% (850)	2.5% (8,750)	4.5% (102,550)	4.6% (1,024,470)
Households with no cars or vans, 2011 (%)	19.2% (610)	19.2% (570)	23.2% (750)	29.3% (1,020)	25.2% (780)	25.5% (720)	23.4% (720)	18.0% (560)	10.6% (320)	12.8% (470)	20.6% (6,510)	18.0% (63,890)	24.7% (566,620)	25.8% (5,691,250)
Total recorded crime (rate per 1,000), 2016/17	46.6 (360)	61.8 (490)	56.0 (440)	193.9 (1,460)	68.5 (550)	61.0 (410)	64.2 (460)	65.7 (510)	36.3 (270)	43.4 (410)	76.9 (5,910)	59.3 (51,440)	70.0 (402,370)	74.1 (4,059,410)
Violent crime (rate per 1,000), 2016/17	16.1 (130)	19.2 (150)	19.5 (150)	53.7 (400)	22.0 (180)	22.8 (150)	18.2 (130)	20.1 (160)	10.9 (80)	13.0 (120)	23.2 (1,790)	18.9 (16,430)	19.7 (113,020)	20.0 (1,096,130)
Antisocial behaviour (rate per 1,000), 2016/17	23.4 (180)	31.1 (240)	30.4 (240)	63.0 (470)	33.1 (270)	28.4 (190)	17.6 (130)	21.6 (170)	13.2 (100)	27.4 (260)	29.1 (2,240)	26.4 (22,910)	27.5 (159,280)	30.7 (1,698,990)
Domestic abuse (rate per 1,000), 2016/17	7.2 (60)	7.3 (60)	10.6 (80)	15.9 (120)	9.0 (70)	10.7 (70)	9.2 (70)	11.2 (90)	6.6 (50)	5.7 (50)	9.8 (750)	7.5 (6,520)	6.8 (39,600)	6.4 (354,160)
Lone pensioner households, 2011 (%)	9.1% (290)	8.4% (250)	13.0% (420)	15.9% (550)	8.8% (270)	14.0% (400)	16.2% (500)	6.2% (190)	10.2% (310)	7.0% (260)	10.9% (3,430)	12.6% (44,770)	12.6% (289,570)	12.4% (2,725,600)
Unpaid care, 2011 (%)	11.2% (890)	10.0% (770)	10.5% (800)	9.2% (670)	10.8% (860)	11.7% (770)	11.3% (810)	10.1% (790)	11.2% (830)	10.0% (940)	10.6% (8,120)	11.6% (98,830)	11.0% (614,890)	10.2% (5,430,020)
Unpaid care by people aged 65 and over, 2011 (%)	16.0% (170)	13.3% (120)	14.2% (180)	12.7% (160)	16.3% (140)	14.8% (200)	14.0% (230)	15.8% (100)	16.6% (200)	15.4% (150)	14.8% (1,650)	15.0% (23,450)	14.5% (136,870)	13.8% (1,192,610)