

A SINGLE INTEGRATED PLAN FOR
MERTHYR TYDFIL

2013 – 2017

FOREWORD

On behalf of the Merthyr Tydfil Local Service Board, welcome to the Single Integrated Plan for Merthyr Tydfil.

This Plan is a new approach to partnership working in Merthyr Tydfil. It replaces the four previous plans that we had to produce in partnership:

- The Community Plan
- The Health, Social Care and Well Being Strategy
- The Children and Young People's Plan
- The Community Safety Plan.

The Local Service Board brings together our public service leaders and is at the heart of multi-agency working. It is responsible for leading and overseeing the delivery of the new Single Integrated Plan. The Plan identifies clear outcomes we want to achieve that will have a positive impact for people.

The Local Service Board is committed to delivering the vision for Merthyr Tydfil to:

Strengthen Merthyr Tydfil's position as the regional centre for the Heads of the Valleys, and be a place to be proud of where:

- **People learn and develop skills to fulfil their ambitions**
- **People live, work, have a safe, healthy and fulfilled life**
- **People visit, enjoy and return**

In the past, planning for public services has often been too attentive to demand rather than need. This has resulted in the provision of services which treat problems after they have arisen, rather than preventing their occurrence in the first place.

The LSB must focus its efforts on prevention and early intervention and in order to break cycles of dependency and prevent the persistence of poor outcomes from one generation to the next. As a Local Service Board, we appreciate and embrace the importance of this and the need to work differently.

At a time of reducing budgets and rising expectations services need to be sustainable in the longer-term and based on an analysis of need not demand. The foundation for moving forward is a well-evidenced, single integrated plan for the area that clearly reflects the needs of the local population.

We also recognise that when problems do occur and people find themselves in difficult circumstances, there will always be a need to provide help as soon as possible to prevent problems from becoming far worse.

The Single Integrated Plan covers the needs of the whole population in the County Borough and has a specific focus on groups who are disadvantaged, vulnerable or at risk of becoming vulnerable.

The current financial pressures and the impact of welfare reforms pose many challenges for the area, its people and communities, and the organisations that serve them. Working together has never been as important and is essential if we are to make our vision to reality. No one organisation can tackle the challenges alone and no organisation can do this without the involvement of the communities we serve.

Delivering the Single Integrated Plan will be a challenge for us as partners of the Merthyr Tydfil Local Service Board. We are all are committed to making a real difference to people's lives by providing joined-up services that are both effective and efficient.

Delivering the Single Integrated Plan will be an opportunity for the partners of the Merthyr Tydfil Local Service Board to help break the cycles of deprivation by delivering sustainable improvements through prevention and early intervention and creating effective services to ensure positive outcomes for our communities.

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WHAT IS THE LOCAL SERVICE BOARD?

The Local Service Board is where the Leaders of local public sector organisations and voluntary organisations work together as partners to improve the delivery of services to you.

The Local Service Board is chaired by a community representative and consists of the Leaders from the organisations that deliver services to you.

Our Local Service Board Members:

- A Community Representative who chairs the Board
- The Leader and the Chief Executive of Merthyr Tydfil County Borough Council
- The Chair and the Chief Executive of Cwm Taf Health Board
- The Chief Superintendent, Northern Division, South Wales Police
- The Chair and the Chief Officer, Voluntary Action Merthyr Tydfil
- A senior official from the Welsh Government (WG)

All the Local Service Board Members have signed the opening section of this Plan; their signatures are evidence of a clear commitment to work effectively together to deliver the Single Integrated Plan.

HOW HAS THE SINGLE INTEGRATED PLAN BEEN DEVELOPED?

The Plan has been developed based on a robust evidence base in the form of a Unified Needs Assessment. A series of engagement events have also been held with our key partners and stakeholders, including individual events with the Third Sector, children and young people and Councillors.

The Welsh Government has identified the outcomes Wales should work towards and the priority areas for action in the Programme for Government. These high level outcomes provide the framework for the needs assessment, and are closely linked to our priority outcomes identified later on in this Plan.

The following Programme for Government outcomes are of particular significance for local multi-agency delivery:

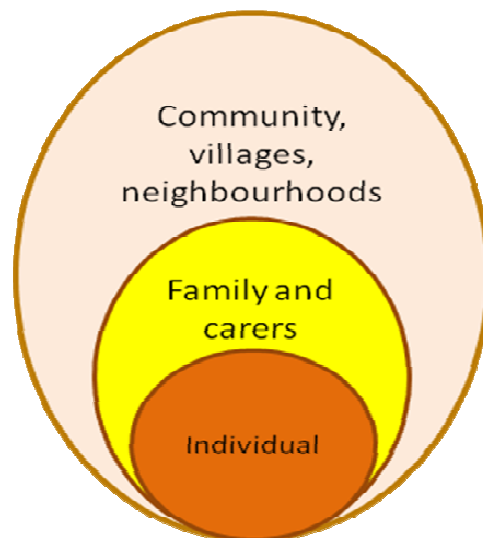
- Improving early years' experience
- Improving educational outcomes for children, young people and families living in poverty/Improving the skills of young people and families
- More inclusive and cohesive communities
- Improving health outcomes of children, young people and families living in poverty/Preventing poor health and reducing health inequalities
- Ensuring people receive the help they need to live fulfilled lives
- Creating sustainable places for people

WORKING DIFFERENTLY – PREVENTION AND EARLY INTERVENTION

A huge amount of work has been done over many years with notable successes, although we have often continued to provide services which treat problems after they have arisen, rather than preventing their occurrence in the first place.

This has started to change in recent years; however, we have not focused sufficient efforts and resources on prevention and early intervention. As a result we have not broken the cycles of dependency and the persistence of poor outcomes from one generation to the next.

Every person in Merthyr Tydfil is surrounded by a network of family, friends and neighbours that influences their quality of life. They in turn contribute to the community in which they live. There is a need to complement these networks by supporting people to live fulfilled lives, and when they need it to tackle life problems. This is important not only for the individuals concerned but for the resilience, well being and development of our community as a whole. To do this we need to make the right services available at the right time, and ensure they are efficient and well co-ordinated. This is about managing the needs of our community.



The Programme for Government emphasises the importance of all parts of Wales providing multi-agency support for families who need it, tailored to the particular issues they face, bringing together help from social services, health services, education, justice and voluntary services.

By improving our ability to respond quickly through prevention and early intervention, we will aim to help more people to live fulfilled lives in the community, reducing the need for specialist services in the future.

OUR NEEDS

A detailed needs assessment of Merthyr Tydfil has been undertaken showing us what it is like to live in Merthyr Tydfil¹. The identified needs are shown in more detail under each of the plan's priority areas.

It is the role of the LSB to use the local needs analysis to determine what will be the highest priorities for local action.

Living in Merthyr Tydfil: Key Headlines

Between the 2001 and 2011 Census, the population of Merthyr Tydfil grew by 4.6% (an increase of 2593 people) to 58,802. There were 24,300 households, and increase of 4.5% since 2001.

Although in recent years there has been an increase in the number of births, Merthyr Tydfil, like the rest of the country, has an ageing population. People are living longer. There has been considerable growth in the number of people in their 60's, as well as those in their 80's and 90's.

The 2011 Census shows the percentage of the population in Merthyr Tydfil aged 65 and over is 16.7%. This is an increase of 741 people in this age category since 2001, which represents an increase of 8.2%. There were 15,800 residents aged 45-64 in 2011 (26.8% of the population), compared with 13,713 in 2001. This is an increase of 15.2%.

The population of those aged 65 years and older is projected to rise from 9,800 in 2011 to 13,800 by 2033. The percentage of people aged 75 and over is projected to increase from just under 8% at local authority level to around 12.5% by 2033. The percentage of people aged 85 and over is projected to double from around 2% to around 4% by 2033.

Merthyr Tydfil has a minority ethnic population of 3,167 individuals (2011 Census). This represents 5.4% of the total population, up from less than 1% in the 2001 Census.

Quality of life and health related risk behaviours are worse in Merthyr Tydfil than the Wales average, which has a detrimental effect on our population.

Limiting long term illness is a measure of long term illness, health problems or disability that limits a person's daily activities or the work they do. Census 2011 shows that 26.9% of the population in Merthyr Tydfil have activity limitation

Welsh Health Survey 2011 indicated that 20% of adults reported being '**limited a lot**' by either a health problem or disability, this compares to the Wales average of 16%.

¹ A Summary of the Needs Assessment along with a "key issues" document will be available from the Merthyr Tydfil Partnership Team on 01685 724689 and on website.- www.merthyr.gov.uk

Life expectancy in Merthyr Tydfil, as in Wales is generally improving. However this improvement is not experienced equally, with large differences in life expectancy rates between the least and most deprived areas. Vaynor has a life expectancy of 79.4 years while just a few miles away in Merthyr Vale life expectancy is 72.2 years.

Merthyr Tydfil has the lowest healthy life expectancy in Wales. Healthy life expectancy ranges from 56.6 years in the Gurnos to 66.3 years in Vaynor.

Between 2001 and 2009, the all cause mortality rate in people aged 75 and under in the most deprived areas of Cwm Taf was up to double that in the least deprived areas, for women and men (and was consistently higher than the Welsh average).

Findings from the Welsh Index of Multiple Deprivation (WIMD) 2011 show that Merthyr Tydfil is ranked the most deprived local authority in Wales. The three most deprived areas² in Merthyr Tydfil are:

- Penydarren¹, ranked 4 out of 1896
- Gurnos², ranked 13 out of 1896
- Merthyr Vale², ranked 17 out of 1896.

In 2010 Child poverty in Merthyr Tydfil was 28.2% (the second highest rate in Wales), down from the 2009 figure of 29.1%. The Wales average was 22.2%.

In 2010 there were 718 live births in Merthyr Tydfil and 558 deaths. In 2001 there were 602 live births and 655 deaths.

School pupils enter Key Stage 4 at age 14 and are assessed at 16 years of age. Performance in 2012 saw a sharp drop at Key Stage 4 from 39.3% to 31.9% on the Level 2 threshold including English/Welsh and Maths and in relation to the Core Subject Indicator from 38.1% to 31.1%. Merthyr Tydfil had the lowest performance in Wales for both indicators.

In 2011, there were 39 year 11 pupils known not to be in education, employment or training, 5.6% of that cohort, compared to 4.4% nationally. This is the 4th highest rate of all local authorities.

The NEETs (not in education employment or training) figure for year 11 has reduced over the 5-year period from 7.8% in 2008 to 6.2% in 2012, representing a fall of 16 from 60 in 2008 to 44 in 2012. National figures for 2012 not yet published.

The five year trend for year 13 NEETs shows a steady decline from 8.3% in 2008 to 4.3% in 2012. The national average for 2012 is not yet available.

In 2011, there were 7,100 adults aged 16-64 years with no recognised qualification, 20.1% of that cohort. The lowest performing Local Authority.

² (Lower Super Output Area- LSOAs)

The National Survey of Adults Skills 2010 estimated the basic skills need in Wales as 25% for literacy and 53% for numeracy. Using the percentages identified in the national survey we can estimate the number of adults living in Merthyr Tydfil with literacy and numeracy skills need; 9,655 for literacy and 20,468 for numeracy.

Labour Force Survey estimates at local authority level are available for the period October 2011 to September 2012. Merthyr Tydfil had an unemployment rate of 12.1%, the second highest in Wales after Blaenau Gwent. (International Labour Organisation unemployment rate).

In January 2013, there were 2,395 adults aged 16 to 64 claiming Job Seekers Allowance (JSA), 6.3% of that cohort, compared to Wales rate of 4.2% and the GB rate of 3.8 (claimant count).

Welfare reforms could cost recipients £7million in Merthyr Tydfil.

Gross Value Added (GVA) is a measure of the size of the economy of an area, GVA per head in 2007 (most up to date data available) stood at £11,604 in Merthyr Tydfil. This was below the Welsh average of £14,853 and the fifth lowest amongst the 22 Welsh local authorities. Between 1999 and 2007 GVA per head in Merthyr Tydfil has been below that for Wales as a whole.

In 2012 average gross weekly earnings in Merthyr Tydfil were £406, compared to the Wales average of £452, and the UK average of £507.

Merthyr Tydfil has a significantly higher proportion of older housing stock than elsewhere in Wales. According to the 2001 Census there are currently 24,596 houses in Merthyr Tydfil; 52% are terraced houses with 45.4% of all dwellings built pre 1919.

The most significant hazards in private sector dwellings in Merthyr Tydfil were those associated with the threat of excess cold, falls on stairs, and falls on level surfaces. 39.1% of private stock is considered to contain a Category 1 hazard (about 4 in 10, approximately 7,900 dwellings).

Falls are already a significant burden upon health and health services in Wales and this will become a greater burden in the future as the size of our older population increases. Many individuals can lose their independence and quality of life as a result of a fall. By 2030 the number of people in Cwm Taf aged 65 and over predicted to attend A&E because of a fall is 1,583.

It is estimated that 22% of most serious violent offences are domestic violence. The Merthyr Tydfil MARAC (multi agency risk assessment conference) has the highest rate of high risk domestic abuse referrals of all MARACs in the Wales, and the 3rd highest in the UK.

Overall there were a total of 4,141 police recorded offences in Merthyr Tydfil between 1st April 2011 and 31st March 2012. This is a 17% reduction (860 offences) on the same period for 2010/2011.

The Police Strategic Assessment 2011 identified Anti Social Behaviour in Merthyr Tydfil town centre during the day as an issue.

36% of respondents to the 2012 Police Community Satisfaction Survey in Merthyr Tydfil said that drug use / drug dealing was a very big / fairly big problem in their area.

Merthyr Tydfil was ranked the 2nd highest of the 22 local authority areas for incidence of drug misuse and highest for alcohol misuse in 2011/12.

The 2011 Children in Need census showed that there were 530 Children in Need in Merthyr Tydfil, a rate of 435 per 10,000 people aged 0-17 years. This is the 2nd highest rate of all local authorities in Wales.

Children in need have a far lower attainment levels than their peers at each of the Key Stages. Children in need who are “looked after” by the Council have slightly better attainment than those not “looked” after, but both groups are well below the national rate of attainment for all pupils.

The number of children on the Child Protection Register as at 31st March 2012 was 105 (62 in 2010/11). There had been a steady decline in the numbers registered over the last three years, dropping to the lowest point since March 2007. However 2011/12 has seen a significant increase (69%).

Numbers of Looked after Children in Merthyr Tydfil have reduced slightly from 175 in 2007 to 165 in 2011. However as of the 25th of October 2012 the authority was the corporate parent to 183 looked after children.

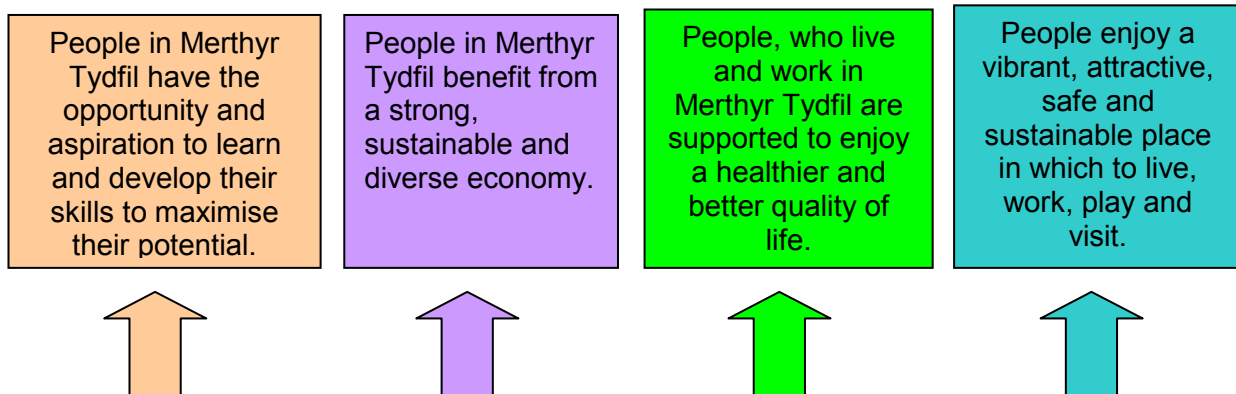
The needs assessment has led us to identify the following priorities:

OUR VISION FOR MERTHYR TYDFIL

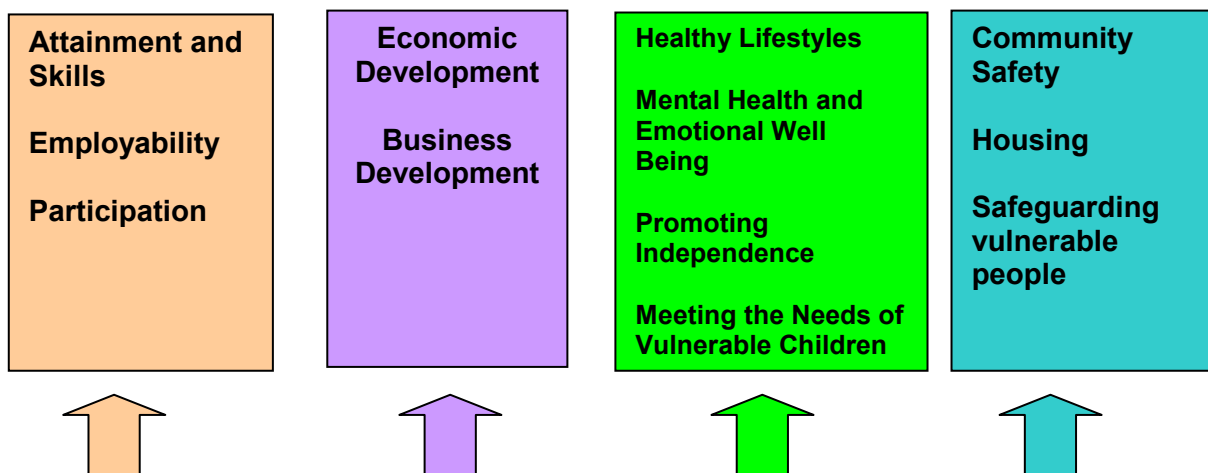
To strengthen Merthyr Tydfil's position as the regional centre for the Heads of the Valleys, and be a place to be proud of where:

- People learn and develop skills to fulfil their ambitions
- People live, work, have a safe, healthy and fulfilled life
- People visit, enjoy and return

OUR PRIORITY OUTCOMES



OUR PRIORITY AREAS



UNDERPINNING PRIORITY FOR THE SINGLE INTEGRATED PLAN
LEARNING FOR LIFE

It is important to point out that each priority outcome and each priority area are interlinked and support each other. We can no longer deal with the issues facing the County Borough in isolation from each other.

Learning for Life underpins all our efforts to address our Vision and Priority Outcomes.

UNDERPINNING PRIORITY FOR THE SINGLE INTEGRATED PLAN LEARNING FOR LIFE

Why Learning for Life?

The LSB sees Learning for Life as the key underpinning priority for the SIP because it will help us deliver the Vision for Merthyr Tydfil and the priority outcomes. Our ambition is that all, children, young people and adults maximise their potential, are resilient to changing circumstances and remain independent for as long as possible.

The benefits of a good education and effective learning are far reaching and long lasting and research shows that this :

- provides the skills and qualifications required to secure high quality employment,
- is the catalyst for local economic prosperity
- is at the heart of low cost quality healthcare
- helps combat social isolation, promote inclusion, and contributes to community cohesion
- is instrumental in helping reverse decline in disadvantaged communities, helping to foster a strong sense of a safer community

The first 1000 days of life from conception to age two significantly influences the outcomes for children, parents and families throughout the life course and from generation to generation. Brain and biological development during the first years of life depends on the quality of stimulation in the infant's environment—at the level of family, community, and society. Early child development, in turn is a lifelong determinant of health, well-being, and learning skills. Taken together, these facts make early child development a social determinant of health. If we are to make a difference, we need to ensure that parents are informed how their health and lifestyles have a major influence on their unborn babies.

Addressing early childhood development means creating the conditions for children, from prenatal to 8 years of age, to thrive equally in their physical, social/emotional, and language/cognitive development. Safe, cohesive, child-centred neighbourhoods, communities, and villages matter for early child development. All the research evidence shows that when we give a child the best start in life, the child is more likely to reach his or her potential and be successful. Over time this benefits the wider community, the economy and the general wellbeing of society. To achieve this we have to reduce inequalities in the early development of physical and emotional health, and cognitive, linguistic, and social skills, to ensure high quality maternity services, parenting programmes, childcare and early years education to meet need across the social gradient and to build the resilience and well-being of young children in proportion to need. We also need to continuously improve the conditions for families to nurture their children by addressing economic security, flexible work, information and support.

We already know from our own needs assessment and from research that prevention and early intervention with families and within communities helps us achieve positive outcomes especially when quality learning is at the heart of what we do.

The adoption of the preventative agenda will not only provide positive results during the formative years but throughout a person's life. Enabling interventions that promote and maximise independence and build resilience delivered at key stages have been shown to deliver positive outcomes in later lives for adults.

We need to enable all children, young people and adults to maximise their capabilities and have control over their lives. This means improving skills and qualifications for all. Research shows that individuals who fail to gain qualifications are clearly disadvantaged in many aspects of later life - from the jobs they obtain and the wages they earn to their sense of physical and emotional health and well-being, their experience of crime & how safe they feel, and the quality of their environment including their homes. Improving the access and use of quality lifelong learning across the social gradient coupled with access to other supportive services such as parenting and good healthcare, is critical to the success of Merthyr Tydfil.

Literacy and numeracy are fundamental skills required to function and progress in society, both professionally and socially. The 1999 Moser Report identified the numerous impacts that poor basic skills can have upon personal earnings and families, upon communities and society, and for the economy. Alongside other factors such as a special educational need, poor attendance in school, exclusions, several movements of school and being looked after, there are a series of determinants that can lead to some children and young people becoming disengaged from school, the home and the wider community. Ensuring that schools, families and communities work in partnership with key agencies such as the local authority, health, the police and the voluntary sector, helps to reduce the differences in health and well-being and builds resilience of children and young people.

There has been much debate about social mobility in the UK with concerns that there remains too strong a link between social background and educational achievement. A recent study from the Organisation for Economic Co-operation and Development (OECD) looks at whether there is an inevitable link between disadvantaged backgrounds and a cycle of poor school results and limited job prospects. The study says that this is not the case for many pupils from poor homes - with an international average of 31% of secondary school pupils succeeding even though the 'odds are stacked against them'. Other research shows that the impact of poverty on schools can be significantly reduced when there is an ethos in the school based on rights and responsibilities, a good and supportive learning environment, high quality teaching and learning, effective analysis and use of data and strong distributed leadership. Poverty therefore doesn't equal destiny in education.

The highly respected Effective Pre-School, Primary and Secondary Education (EPPSE) 3-16 project, analysed by the Institute of Education, finds that the combined effect of a quality home learning environment, quality pre-school, and quality primary school helps disadvantaged children get ahead, and 'succeed against the odds'.

The EPPSE researchers concludes "Although parents' social class and levels of education were related to child outcomes, the quality of the home learning environment was more important. The home learning environment is only moderately related to social class. What parents do is therefore more important than who they are'.

Children also require stimulating, supportive and nurturing care when their parents are not available. Research shows that high quality childcare and early childhood education from the age of 2 years can significantly improve children's chances for success in later life.

Effective engagement and support strategies for parents will help create strong healthy families, which invariably improve the home learning environment. Positive parenting can protect children against risk factors such as material deprivation and poor parental education. Effective parenting also helps prevent problems such as poor wellbeing and mental health, domestic abuse, substance misuse, household poverty and worklessness each of which impact on the family.

Currently a significant range of services are provided across Merthyr Tydfil by a number of different providers that support the Learning for Life priority and the wrap around aspects such as parenting and childcare that support opportunities for learning. These include, as examples:

- Think Family Programme Multi Intervention Assistance (MIA) funded by Welsh Governments Families First Programme.
- Integrated Family Support Services and Teams
- Youth Services and Youth Support Services
- Communities First Programme
- Early Years Services
- Heads of the Valleys Education Programme(HOVED)
- Library Service
- Pre- School Education
- Nurseries and Crèches
- Play
- Education Services, Schools – Nursery, Primary, Secondary
- Flying Start Programme
- Parenting and Families Programmes
- Carers
- Adult Community Learning
- The College at Merthyr Tydfil
- Healthy Schools Initiatives
- Get Merthyr Active
- Community Safety Prevention Work

Our current services are, however, a mixture of universal and targeted services and some are provided in specific geographic areas. The services as a whole are not always co-ordinated, funding comes from a variety of sources including core funding as well as grants, there is no guarantee of sustainability and it is not yet clear what is currently adding value and making a difference for the community of Merthyr Tydfil.

In order to address the combination of economic disadvantage, low educational attainment and poor health status in Merthyr Tydfil, it will be necessary to adopt a coherent multi-agency prevention and early intervention approach linking with families and communities.

Working with our new Community First Clusters and the development of the new Cluster Plans will be key to this work.

This will help to break cycles of dependency and prevent the persistence of poor outcomes from one generation to the next.

Our ambition is therefore to:

- Improve attainment and achievement for all children, young people and adults and help each to reach their potential
- Improve the learning environment
- Make the best use of physical, financial and human resources

Among all the social determinants of health, early childhood development is the easiest for us to understand because improved early childhood development not only means better health, but a more productive labour force, reduced criminal justice costs, and reductions in other strains on the social safety net. Spending on early child development is an investment and we need to incorporate it into Merthyr Tydfil's policy and plans accordingly.

The focus has to be on the early years but with action across the life course which is proportionate action across the social gradient at key points of intervention – proportionate universalism. A focus on the social determinants is key - families, education, income, gender, race, community, housing, environment, work, ability to participate. A people and places focus helps to increase social cohesion and social capital to help empower individuals and communities. Partner organisations have a key role in being exemplar employers helping to provide a wider focus on healthy sustainable communities and enabling better access to green space, active travel, reducing crime and the fear of crime and improving the environment. Synergy from partnership

To help do this we need to devise a programme that initially identifies the outcomes and benefits we want to achieve (eg readiness for school, functional literacy levels at 11 years, transferable skills, a good home environment, fewer NEETs at 16 years, increased levels of employment etc) and then helps to identify :

- current service provision & providers
- funding arrangements
- potential duplication
- what is working and making a difference and what is not working
- what research shows is successful and best practice
- opportunities for expanding appropriate provision including funding opportunities

and we realign these to meet our desired outcomes and benefits.

This work will need to be carried as a matter of priority and led by the Local Service Board in order to inform the action required to address the issues highlighted in the needs assessment and in this Plan.

OUR PRIORITY OUTCOMES

People in Merthyr Tydfil have the opportunity and aspiration to learn and develop their skills to maximise their potential.

KEY PRIORITY AREAS FOR ACTION

- Attainment and Skills
- Employability
- Participation

Links to the Welsh Government's Programme for Government

- Improving early years' experience
- Improving educational outcomes for children, young people and families living in poverty/Improving the skills of young people and families
- More inclusive and cohesive communities
- Ensuring people receive the help they need to live fulfilled lives

Attainment and Skills

What do we want to achieve?

Children, young people and adults in Merthyr Tydfil reach their academic potential and have the necessary skills to contribute as responsible citizens to their own development and that of the wider community.

What do we know?

In 2012 Merthyr Tydfil was the lowest performing local education authority in Wales for the Foundation Phase (ages 3 to 7, Key Stage 2 (ages 7 to 11) and Key Stage 4 (ages 14 to 16). In Key Stage 3 (ages 11 to 14), performance improved slightly with the Authority ranking 21st out of 22 Councils in Wales. However the Authority continues to perform below the level expected taking into consideration the number of children entitled to Free School Meals.

In 2012 the gap in performance between children eligible for free school meals (FSM) and those not eligible increased. This is against the improving trend of the previous two years. At the same time the average gap in performance between children eligible for free school meals and those not eligible across Wales continued to improve.

Performance at Key Stage 4 on the Level 2 threshold (pupils obtaining 5 A* - C GCSE's including English or Welsh and Mathematics) has declined overall by 1.8% over the last 5 years.

In 2011/12, 0.3% of pupils (2 pupils) left school without any qualifications which places Merthyr Tydfil in joint 12th compared to other local authorities in Wales and is below the Welsh average of 0.4%.

There was an improvement in the absenteeism rate from primary school, down from 7.6% in 2010/11 to 7.1% in 2011/12. This compares to the Wales average of 6.2%. Currently Merthyr Tydfil is the lowest performing local authority.

2011/12 saw further improvements in secondary school attendance rates, moving from 11th to 10th out of the 22 local authorities. The overall rate of absenteeism from secondary schools is 7.6%, 0.2% below the Wales average.

The NEETs (not in education employment or training) figure for year 11 has reduced over the 5-year period from 7.8% in 2008 to 6.2% in 2012, representing a fall of 16 from 60 in 2008 to 44 in 2012.. National figures for 2012 not yet published.

The five year trend for year 13 NEETs shows a steady decline from 8.3% in 2008 to 4.3% in 2012. The national average for 2012 is not yet available.

Progression to higher education in Merthyr Tydfil has fallen from 57.1 % in 2008 to 49.6 % in 2012, although the latter is an improvement on 2011.

In 2011 the proportion of working age adults who held a Level 2 and above qualification was 63% compared to 74% nationally. There has been a positive improvement of 11% over a ten year period. However Merthyr Tydfil is positioned as the lowest performing authority in Wales.

In 2011, there were 7,100 adults aged 16-64 years with no recognised qualification, 20.1% of that cohort. The lowest performing Local Authority.

Of the most vulnerable families known in Merthyr Tydfil 54% had no parent with an academic qualification.

The National Survey of Adults Skills 2010 estimated the basic skills need in Wales as 25% for literacy and 53% for numeracy. Using the percentages identified in the national survey we can estimate the number of adults living in Merthyr Tydfil with literacy and numeracy skills need; 9,655 for literacy and 20,468 for numeracy.

Story behind the data

Increasingly economies are being transformed into high skill economies. Welsh government data shows the change in employment rates between 2001 and 2011 is smaller for higher qualification levels, suggesting the impact of the recession on employment rates has affected those with no or low qualifications most.

There is a wide body of research on the social and economic outcomes associated with educational attainment. A review of these studies reveals that individuals who fail to gain qualifications are clearly disadvantaged in many aspects of life—from the jobs they obtain and the wages they earn to their sense of physical and emotional well-being. Society is also disadvantaged when students drop out, since studies show that dropouts are less likely than graduates to contribute to the social and economic well-being of the country.

Literacy and numeracy are fundamental skills required to function and progress in society, both professionally and socially. The 1999 Moser Report identified the numerous impacts that poor basic skills can have upon personal earnings and families, upon communities and society, and for the economy.

There is a body of evidence to illustrate the importance of family programmes and the positive impact of improving adult literacy and numeracy skills to aid prevention of the intergenerational transfer of poor literacy, language and numeracy skills. It has been found that family learning has a wider positive impact by enhancing confidence and greater self esteem for children and their families within schools and the wider community.

Educational attainment is strongly linked with deprivation. Intelligent children from the most deprived families, in general, have lower educational attainment than less able children from the more affluent families. However recent studies from the OECD and the well respected EPPSE study have shown that the link between poverty and educational attainment is not inevitable.

The EPPSE research provides new evidence concerning the **combined** effects of Home Learning Experience, preschool and primary school in shaping educational outcomes. The three key findings from the study are:

1. **Home learning:** The quality of the home learning environment (HLE) is more important for intellectual and social development than parental occupation, education or income. What parents do with their children is more important than who parents are.
2. **Pre-school.** The effects of pre-school have a powerful long term impact on children right up to the age of 11-14. However it is the quality and effectiveness of the pre-school attended that predicts better outcomes (intellectual/cognitive and social/behavioural development).
3. **Primary school:** The academic effectiveness of primary school can continue to influence students' longer term academic outcomes at secondary school. A primary school with high academic effectiveness had significant effects for English, Science and Maths, but the positive benefits were stronger for maths and science.

In order to help reduce the achievement gap for multi disadvantaged groups, actions to improve the Home Learning Environment, pre-school and primary school experiences will be needed, since improvements to any one in isolation would be insufficient to boost outcomes on its own.

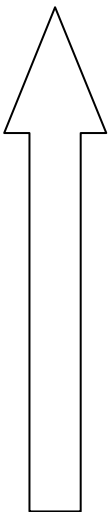
An evaluation of Family Support Services (FSS) in Merthyr Tydfil showed that children in areas receiving additional family support services under the Flying Start Programme tended to be better prepared for school, demonstrated higher levels of social development and had many more experiences than they otherwise would not have had, than other children.

What will we do?

- Ensure a comprehensive programme is implemented to support child development in the first three years and through the transition from pre-school to primary school.
- Agree and adopt an education plan to address low standards of attainment, attendance and achievement across all key stages, for 3-16 year olds
- Agree a prevention and early intervention plan to support the mental health and emotional health of those young people experiencing difficulties preventing escalation into statutory services.
- Introduce a NEETs strategy as a coordinated approach to reducing the number of children and young people not in education, training or employment.

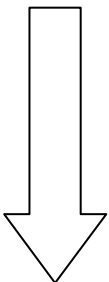
How will we measure success?

“Going Up”



- Foundation Phase Indicator, Key Stage 2 and 3, Core Subject Indicator, Key Stage 4 Level 2 including English/Welsh and Mathematics.
- % of pupil attendance in primary and secondary schools.
- % of pupils eligible for free school meals who achieve the Foundation Phase Indicator (in teacher assessments) compared to pupils who are not eligible for free school meals.
- % of pupils eligible for free school meals who achieve the Core Subject Indicator at KS2, compared to pupils who are not eligible for free school meals.
- % of pupils eligible for free school meals who achieve the Level 2 threshold including a GCSE A*-C in English/Welsh and Maths, at the end of KS4 compared to pupils who are not eligible for free school meals.

“Coming Down”



- % of pupils who leave education (school) without a formal qualification.
- % of school days lost to fixed term exclusions.
- % of 16-18 year olds not in education, training or employment

Employability

What do we want to achieve?

Working age people in Merthyr Tydfil, particularly those in low income families gain, and progress within, employment

What do we know?

In 2011, 20.1% (7,100) of working aged adults 16-64 years of age had no recognised qualification. While this was the highest level across all Welsh Local authorities, this has substantially improved from 26.5% since 2004.

Vulnerable Family research indicated 54% of the 300 most vulnerable Families in Merthyr Tydfil do not hold an academic qualification.

In 2011 the proportion of working age adults who held a Level 2 and above qualification was 63% compared to 74% nationally. There has been a positive improvement of 11% over a ten year period. However Merthyr Tydfil is positioned as the lowest performing authority in Wales.

In 2011 the proportion of working age adults holding level 4 qualifications or above was 24%, nationally it was 32%.

The recession has hit young people in Wales hard. The most recent data from the ONS shows that 54,000 people aged 16-24 were unemployed (November 2012 to January 2013) this is an unemployment rate of 23.9 per cent, up 0.5 percentage points from August to October 2012.

A third (33.1 per cent) of 16-24 year olds living in the borough are out of work (Sept 2012). The most recent trends show that since 2005 the unemployment rate for young people across Merthyr Tydfil has been consistently higher than the rates for Wales and the UK. (ILO unemployment rate).

Jobseeker's Allowance (JSA) is paid to people under pensionable age who are available for, and actively seeking, work of at least 40 hours a week. In January 2013, there were 765 young people aged 16-24 years claiming JSA in Merthyr Tydfil, 10.9 % of that population. This rate is nearly twice the national rate (6.5 per cent) and is the second highest of all local authorities.

The number of adults economically inactive because of long term sickness has historically always been very high in Merthyr Tydfil. Between October 2011 and September 2012 there were 3,700 adults aged 16-64 years in the borough not working due to long term sickness. This equates to a rate of 39.5%. For the same period the rate of adults economically inactive because of long term sickness was 26.6% in Wales.

According to HM Revenue and Customs, the most recent data (August 2010) indicates that 28.2% of all children living in Merthyr Tydfil live in families deemed to be in poverty. These levels of families with children deemed to be living in poverty is far greater than the Welsh average of 22.2%.

The NEETs (not in education employment or training) figure for year 11 has reduced over the 5-year period from 7.8% in 2008 to 6.2% in 2012, representing a fall of 16 from 60 in 2008 to 44 in 2012.. National figures for 2012 not yet published. The five year trend for year 13 NEETs shows a steady decline from 8.3% in 2008 to 4.3% in 2012. The national average for 2012 is not yet available.

Welfare reforms could cost recipients £7million in Merthyr Tydfil. The abolition of Council Tax benefit in March 2013 will equate to at least an additional £500,000 Council Tax to be collected from the lowest income households in the (affecting almost one third of households).

Story behind the data

The UK Governments welfare reform is and will continue to have a significant negative impact for those living in poverty in Merthyr Tydfil. For instance the removal of Future Jobs Fund has started to have an impact on economic activity figures for young people.

The Welfare to Work agenda is marked by major changes in levels of benefit payment made and assessment regimes for particular benefits; whilst this is applicable to the UK its most extensive impacts are likely to be experienced in areas like Merthyr Tydfil, which have the highest levels of existing benefit claiming. Certain household types are also more likely to be disproportionately affected by the tax and benefit reforms, families with children, particularly the poorest families with children, non-working lone parents and workless couples with children, those with children under five and families with more than two children are most likely to be affected by the tax and benefit changes.

An analysis of the job vacancy figures (Nomis 2012) for Merthyr Tydfil and surrounding areas of Blaenau Gwent and Rhondda Cynon Taff show a significant shortfall in the jobs available through jobcentres in comparison with the numbers of people claiming JSA. Increased pressure for 19-24 year olds (particularly those with low level qualifications and skills) for 'entry-level' employment as the ratio of job seekers to job vacancies rises.

There is clear recognition of the direct link between education and skills training and the ambition for full and sustained employment. The Wavehill (2011) research into the impact of the Welfare reform on Vulnerable Families in Merthyr Tydfil suggests that having weak skills in literacy, numeracy and language is a barrier to gaining employment and improving individual's socio economic status.

There is a clear relationship between geographic location and worklessness, as the report on the Working Neighbourhood describes "many of the most disadvantaged people in the labour market also live in the most disadvantaged places.

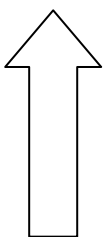
Disadvantaged areas often lack some of the social and economic infrastructure able to support people on their path into employment. Examples of this infrastructure include education, weak skills in literacy and numeracy, public transport, and childcare facilities. All of these factors have been identified as serious issues in the needs analysis for Merthyr Tydfil.

There is extensive literature on the links between worklessness, the incidence and continued experience of child poverty, and the opportunity that tackling worklessness can have upon reducing child poverty levels. Platt (2010) shows that the potential transmission of all forms of economic disadvantage between generations and the long term impacts of this disadvantage increase significantly for children living in workless households.

What will we do?

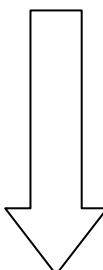
- Develop and Improve Skills for Work for adults (16 plus) and utilise performance management data to improve provision.
- Support people to both gain and sustain employment for adults and young people (16 plus) through up-skilling.
- Develop and implement a new funding plan for the Bridges into Work/Genesis programme.
- Improve adult basic skills levels and achieve the targets as set out in the communication and numbers plan.
- Develop a regional approach to collaborating on unemployment related issues.
- Production of a comprehensive partnership self assessment review and impact analysis for Adult Community Learning and hence identify gaps and areas for improvement.

How will we measure success?



“Going Up”

- % of working age adult who are economically active.
- Increase working age population with qualifications.



“Coming Down”

- % of children under 16 living in working age households with no-one in employment.
- % of Year 11 leavers not in education, employment, or training.
- % of Year 13 leavers not in education, employment, or training.
- % of 16 – 24 year olds who are claiming Job Seekers Allowance (JSA).
- % workless households across Merthyr Tydfil.

Participation

What do we want to achieve?

Children, young people, their parents and carers in Merthyr Tydfil are empowered to participate fully in influencing decision making relating to the services they receive and all aspects of their lives - Having a voice, having a choice.

What do we know?

Projected figures for the number of young people aged 0-25yrs in MT are as follows:

- 2012 – 17,418
- 2013 – 17,371
- 2014 – 17,297

Merthyr Tydfil recently inaugurated its fourth Youth Mayor and Deputy Youth Mayor.

In 2012 the Merthyr Tydfil Borough Wide Youth Forum (MTBWYF) had 68 of its 74 members actively involved in Forum activities. In 2011, 25 out of our 27 schools were involved with MTBWYF and the participation agenda. The participation agenda was also supported by 16 of our Youth Clubs.

2500 young people have been trained regarding their rights.

Children and young people were involved in 5000 volunteer hours during 2011.

MTBWYF members have supported 15 strategic and working groups including for example:

- The Junior Local Safeguarding Children's Board.
- The Looked After Children working group – The Rainbow Group
- The Merthyr Noise Web-site and Editorial Group
- Environmental Group
- Corporate Parenting Board
- Merthyr Tydfil Partnership Board Kitemark
- Merthyr Learning Quarter Programme Board and Communications Board

Story behind the data

Children have a legal right to be consulted about decisions which affect them. In Merthyr Tydfil we are committed to the principle of empowerment of Children, young people and their parents in how we deliver all our children's services. This supports the three pillars of the United Nation Conventions of the Rights of the Child – Protection, Participation and Provision.

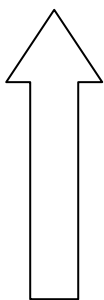
There is evidence that services in which children, young people and their families are fully involved will be better designed and more effective in meeting the needs identified.

Empowering children and young people to participate fully in decision making and all aspects of community life also helps develop skills, increases confidence and aspirations and assists young people to achieve at a higher level in adult life, and helps them become aware of their role as local and global citizens. We have some excellent examples of participation in both the voluntary and statutory sectors in Merthyr Tydfil but we now want to ensure that participation and the Participation Strategy is systematically embedded in every organisation and service supporting young people.

What will we do?

- Ensure a participation approach is adopted by all strategic and operational services delivered for children and young people in Merthyr Tydfil. are aware of and involved in participation.
- Provide opportunities for children and young people to be involved in the Merthyr Tydfil Borough Wide Youth Forum and to raise awareness of the United Nations Convention on the Rights of the Child (UNCRC) and the value of participation.
- Co-ordinate and implement training for individuals and young people to maximise the impact of the Participation Kite Mark Ward/ Young People Say Training.
- Promote the Youth Mayor Initiative ensuring transparent democratic processes are in place for the selection of the Youth Mayor.
- Provide opportunities for the Merthyr Tydfil Borough Wide Youth Forum to connect with the wider national participation agenda, Families First initiative. Youth Assembly for Wales, Childrens Commissioner's Office and the Participation Consortium.

How will we measure success?



“Going Up”

- Number of schools /organisations that have agreed and signed up to the Participation Promise.
- % of young people engaging in the Merthyr Tydfil Borough Wide Youth Forum (MTBWTF).
- Number of panels, boards and initiatives with young people representation.
- Number of organisations achieving/accessing the Participation Kitemark Award/ Young People Say Training.
- Number of young people sitting on the Youth Assembly for Wales.

OUR PRIORITY OUTCOMES

People in Merthyr Tydfil benefit from a strong, sustainable and diverse economy.

KEY PRIORITY AREAS FOR ACTION

- Economic Development
- Business Development

Links to the Welsh Government's Programme for Government:

- Improving educational outcomes for children, young people and families living in poverty
- Improving the skills of young people and families
- More inclusive and cohesive communities
- Creating sustainable places for people

Economic/ Business Development

What do we want to achieve?

A growing and sustainable economy for Merthyr Tydfil, delivering a diverse range of quality job opportunities.

What do we know?

In 2011, there were 1,360 VAT and/or PAYE based enterprises in Merthyr Tydfil. 87% of these employed less than 20 people. This highlights the importance of small companies to the local economy. There were 95 enterprise births in Merthyr Tydfil and 145 enterprise closures. The rate of business births and closures in Merthyr Tydfil as a proportion of working age population is the same as the rates for Wales.

The Service Sector is the largest employer in Merthyr Tydfil. In 2008, the Service Industry provided 79.9% of jobs, the Manufacturing Sector was the second largest with 16.7% and Construction and other provided 2.8%. Within the service sector public administration is the largest employer with 39.3% of jobs which is above the Welsh average of 32.9%.

The breakdown of employment by sector shows that there is a lower proportion of jobs in professional occupations in Merthyr Tydfil than in Wales.

The main occupational areas in Merthyr Tydfil are the Elementary Occupations (17.1%) which are those jobs that consist of simple and routine tasks which mainly require the use of hand tools and often some physical effort, with the Associate Professional and Technical Occupations, Administrative and Secretarial Occupations and Skilled Trades & Occupations, each of which account for 12% each of the population working in these sectors.

Labour Force Survey estimates at local authority level are available for the period October 2011 to September 2012. Merthyr Tydfil had an unemployment rate of 12.1%, the second highest in Wales after Blaenau Gwent. (International Labour Organisation unemployment rate). In January 2013, there were 2,395 adults aged 16 to 64 claiming Job Seekers Allowance (JSA), 6.3% of that cohort, compared to Wales rate of 4.2% and the GB rate of 3.8 (claimant count)

Gross Value Added (GVA) is a measure of the size of the economy of an area, GVA per head in 2007 stood at £11,604 in Merthyr Tydfil. This was below the Welsh average of £14,853 and the fifth lowest amongst the 22 Welsh local authorities. Between 1999 and 2007 GVA per head in Merthyr Tydfil has been below that for Wales as a whole.

In 2012, the average gross earnings in Merthyr Tydfil were £432.70 per week, this compares to the Wales average of £503.10

The local economy is not providing enough employment opportunities for all age groups through the economy as a whole. The ratio of vacancies to those looking for work (JSA claimants) is 1 for every 17 people looking for work in Merthyr Tydfil, compared with 1 to 6 in Wales. This level is before more claimants are identified from reassessments of capability across a range of working benefits.

Story behind the data

The Government's austerity measures, aimed at getting the public sector deficit into order over the next four years, have yet to fully impact on the economy. However, coming at a time when the prospects for economic growth in 2012 are particularly weak, it looks likely that the private sector will not make up for the negative impact of these austerity measures given the lack of an export led recovery due to the downturn in our major trading partner – the EU.

The housing market, a gauge of consumer confidence, remains weak and the outlook is for house prices to be little changed for a prolonged period.

The Consumer Prices Index (CPI) annual inflation stands at 2.2% in September 2012, down from 2.5% in August. This is the slowest rate of inflation since November 2009, when it was 1.9%. The Monetary Policy Committee (MPC) still remains of the view that the CPI rate will fall back to, or below, the 2% target level within a two year horizon.

Merthyr Tydfil has experienced a prolonged process of economic decline that began in the 20th Century with the demise of heavy industry based on steel and coal.

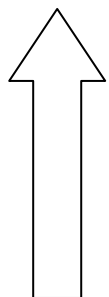
The structure of the local economy has the same characteristics as other similar past industrial areas in Britain:

- Disproportionate dependence of Public Sector employment
- Remaining dependence on manufacturing industries
- Low levels of inward investment
- High levels of worklessness and benefit dependence
- Low business birth rate
- Low levels of business dependence

What will we do?

- Deliver the Merthyr Tydfil Regeneration Programme over the next 3 years from 2012/13
- We will continue to maximise the social benefits associated with public sector procurement to ensure that local SME's are incorporated into the supply chain of all large capital contracts. This will also include the provision of local labour clauses, especially in relation to the Town Centre redevelopments.
- Social Clauses to create local employment opportunities and evidence of community benefit will be reported on yearly.
- Refurbishment of the Old Town Hall to provide a centre for art and creative industry development.
- The Cyfarthfa Park Heritage Lottery Funding Programme will be delivered with an investment of £3m to reinstate the heritage features of the civic amenity.
- Develop the Pontmorlais Heritage Quarter which will provide businesses in the area with funding to restore building frontages to their original appearance.
- Develop a business plan for the reuse of Cyfarthfa Castle and Cyfarthfa Heritage. The development will provide a major employment opportunity for Merthyr Tydfil and further develop the tourism sector within the County Borough.
- In partnership, deliver the "Destination Merthyr Tydfil" – Tourism Management Plan to make Merthyr Tydfil a more attractive destination to visit, but also to create jobs and take advantage of the financial benefits which being a first class visitor destination brings.
- Continue to support the private sector through the on-going development of the Merthyr Tydfil Business Club.
- Develop a skills and employment match database.

How will we measure success?



"Going Up"

- Number of small to medium employers (SME's) and larger companies.
- Sustained business growth and inward investment.
- Number of jobs created.
- Gross Value Added
- Percentage of working age population engaged in economic activity
- Income levels

OUR PRIORITY OUTCOMES

People, who live and work in Merthyr Tydfil are supported to enjoy a healthier and better quality of life.

KEY PRIORITY AREAS FOR ACTION

- Promoting Healthy Lifestyles and in particular reducing the harm caused by smoking, a reduction in obesity, physical activity and promoting good sexual health.
- Mental Health and Emotional Well Being
- Promoting Independence
- Meeting the Needs of Vulnerable Children

Links to the Welsh Government's Programme for Government:

- Improving early years' experience
- Improving health outcomes of children, young people and families living in poverty
- Preventing poor health and reducing health inequalities
- Ensuring people receive the help they need to live fulfilled lives

Healthy Lifestyles – Smoking

What do we want to achieve?

To reduce the harm from smoking in Merthyr Tydfil

What do we know?

The Welsh Health Survey is a source of information about the health and health related lifestyle of people living in Wales, and survey data produced annually includes smoking rates at local authority and health board level.

Smoking rates in Merthyr have dropped from 31% in 2007/8 to 24% in current 2010/11 Welsh Health Survey and are now only 1% above the Wales average. The national target is to achieve 16% prevalence by 2020.

The Health Behaviour in School aged Children Survey (HBSC) indicated that for respondents aged 11-16 in Cwm Taf : 10% had smoked in the last 30 days compared to a Welsh average of 12 and 6% had smoked at least once a week, the same as the Welsh average .

According to the Infant Feeding Survey 2010, smoking during pregnancy is far more common among younger mothers.

Pregnant women under the age of 20 were three times more likely to smoke throughout pregnancy than mothers aged 35 or over (10% compared to 32%).

This point is particularly important given the age profile of women giving birth in Merthyr Tydfil, and the increased health issues for births to younger mothers.

Story behind the data

Smoking is the primary reason for the gap in life expectancy between the rich and poor. Smoking continues to be the largest single cause of avoidable ill health and early death in Wales, and a leading cause of inequity. Deprivation is a key component of social inequality and Merthyr Tydfil area is one of the most deprived areas of Wales.

The four principle risk behaviours of non-communicable diseases (NCDs) are harmful use of alcohol, tobacco, unhealthy diets and physical inactivity. According to the Chief Medical Officer, the rise in NCDs is without doubt the largest challenge facing the health system in Wales and the ongoing sustainability and affordability of the Welsh NHS. Quality of life and health related risk behaviours are worse in Merthyr Tydfil than the Wales average, which has a detrimental effect on our population.

For a smoker, a typical pack of cigarettes costs £7.47 for 20 a day and £2,727 for 1 year. In a typical 16 years of childhood with one parent who smoked 20 cigarettes, this would amount to £43,632 out of the household income.

Smoking substantially increases the risk of poor outcomes after surgery, and smokers are more likely to suffer heart, lung and infectious complications, have impaired wound healing, and have a longer hospital stay.

The risks of smoking in pregnancy include substantially higher risk of miscarriage, and complications in pregnancy and labour. Smoking in pregnancy increases risk of preterm and low birth weight babies. Babies are born on average 200-250g lighter, and the more cigarettes smoked the greater the reduction in birth weight. Smoking during pregnancy increases the risk of infant mortality by an estimated 40%. Babies born to mothers who smoke are more likely to develop middle ear infections, respiratory infections and asthma.

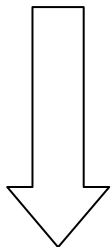
Young people are also susceptible to the serious health risks of exposure to second hand smoke, such as respiratory disease, cot death, middle ear infection, and asthma attacks in children. Adolescent lifestyle choices in key areas of smoking, alcohol use, diet, exercise, and sexual activity will not only impact upon the health and well being of children and young people, but will have longer term effects on healthy life expectancy.

The Welsh Government has set an all Wales target of a reduction in smoking to at least 16% by 2020. A Smoke Free Strategic Action Plan for Cwm Taf (includes Merthyr Tydfil and Rhondda Cynon Taff) for the period 2011-15 has been developed and shows the multi-agency commitment of those who have a part to play in the eradication of tobacco harm across Cwm Taf.

What will we do?

- Work in partnership to implement the Smoke Free Cwm Taf Action Plan to:
 - Continue multi agency work to reduce prevalence
 - Prevent people starting smoking by delivering effective education on the harm from smoking at all levels from pre-school to further education.
 - Help people to stop smoking by training front line health and community workers to motivate smokers to quit and refer to effective support service.
 - Reduce environmental exposure by promoting smoke free environments.
- Help to lower the effects of second hand smoke by encouraging smoke free places - A Smoke Free Homes steering group has been established to take forward a project in conjunction with Communities First and Registered Social Landlords along with encouraging children's playgrounds and sports grounds to be smoke free.

How will we measure success?



“Coming Down”

- Adult smoking prevalence rates.
- % of 15 year olds smoking weekly.
- % of women smoking during pregnancy.

Healthy Lifestyles – Obesity and Physical Activity

What do we want to achieve?

People in Merthyr Tydfil are active and maintain a healthy weight

What do we know?

The Welsh Health Survey is a source of information about the health and health related lifestyle of people living in Wales.

The Welsh Health Survey (2010/11) indicated that for adults in Merthyr Tydfil:

64% of adults in Merthyr Tydfil are overweight or obese compared to Wales's average of 56%, including 28% who are obese, the highest of any local authority in Wales. In addition the rates of obesity are increasing quicker than national rates

- 29% of adults reported meeting the physical activity guidelines in the last week with the Welsh average being 30%.
- 31% eat 5 portions of fruit and vegetables a day, below the Welsh average of 34%.

The Health Behaviour in School-aged Children Survey (HBSC) 2010 indicated that for respondents aged 11 – 16 in Cwm Taf:

- 41% are physically active at least 5 days a week (Welsh average: 44%).
- 28% ate fruit daily (Welsh average: 31%).
- 23% ate fresh vegetables daily (Welsh average: 31%).
- 56% ate breakfast daily during weekdays (Welsh average: 56%).
- 30% consume sugary drinks daily (Welsh average: 26%).

In Wales, a feasibility study was undertaken to measure the height and weight of children in schools. This found that the rate of overweight or obese children:

- Reception Year (4-5 years old)- 22%;
- Year 4 – 27.45%;
- Children living in the most deprived areas of Wales had statistically significantly higher rates overweight and of obesity than children living in the least deprived areas.

Children who are obese are much more likely to be obese in adulthood. Current national trends suggest that around 8% of obese 1–2-year-old children will be obese when they become adults, while 80% of children who are obese at age 10–14 will become obese adults, particularly if one of their parents is also obese.

Foresight 2007 report that was commissioned by the UK Government highlighted that taking into account current trends by 2050 60% of men, 50% of women and 25% of children will be obese.

Story behind the data

Deprivation is a key component of social inequality and Cwm Taf Health Board area is the most deprived area of Wales. The Welsh Health Survey findings consistently show that levels of ill-health increase with levels of deprivation. In general, those in the most deprived areas reported the worst health.

Our population have the poorest health in Wales, with a greater proportion of our population reported as suffering from chronic conditions than the average for Wales. The healthy life expectancy for both males and females in the Cwm Taf area is the lowest of any of the new Local Health Boards in Wales. Healthy life expectancy (HLE) is an estimate of how long people can be expected to live in 'good' or 'fairly good' health. Despite the benefits many see their health as a barrier to physical activity.

The greatest consequences of obesity relate to the health of affected individuals. There is good evidence that obesity is a risk factor for many chronic diseases and is overtaking smoking as a preventable cause of disease and premature death. These include: Type II diabetes, high blood pressure, breathlessness, restricted breathing during sleep (sleep apnoea), gall bladder disease, coronary heart disease or heart failure, osteoarthritis of the knees, gout, complications of pregnancy, cancer, impaired fertility, lower back pain, increased risk during anaesthesia and foetal defects arising from maternal obesity.

The above mentioned diseases are mainly of adults, but conditions such as Type II diabetes, coronary heart disease, cancers, osteoarthritis and back pain also affect children. There are also social and psychological consequences of obesity such as stigmatisation, discrimination, prejudice, poor self image, low self confidence and depression.

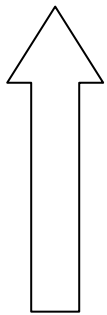
Evidence from National Institute for Health and Clinical Excellence (NICE) advocates for partnership working and clear leadership to tackle the obesity epidemic. 2-5 years is a key age at which to establish good nutritional habits, especially with parents involved. The importance of consultation with and the active involvement of children and young people is also advocated.

What will we do?

- Through the Get Merthyr Active Plan, Merthyr Tydfil will aspire to be the most physically active Local Authority in Wales by 2020. This is a whole population programme encouraging adults and children to participate in physical activity so that they will improve their longer term health and well being.

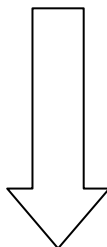
- Multi agency partnerships will drive the Cwm Taf Healthy Weight, Healthy Valleys Strategic Action Plan Key actions will be developed under the following themes:
 - clear leadership and co-ordination of action,
 - improving healthy eating and physical activity levels,
 - supporting overweight people to reduce weight and increase physical activity and
 - improving the wider environment to encourage healthy eating and an increase in physical activity.
- Protect, improve, promote and provide sufficient use of safe, accessible open and green spaces to meet the socio-economic, health and learning needs of residents and communities of Merthyr Tydfil.

How will we measure success?



“Going Up”

- % of adults reported meeting the physical activity guidelines of 5 x 30 minutes in the past week.
- % of adults reported eating five/more portions fruit/vegetables the previous day.
- % of children and young people meeting weekly physical activity recommendation of 60 minutes of moderate intensity.
- Physical activity on 5 or more days of the week



“Coming Down”

- % of adults reported as being overweight or obese in Merthyr Tydfil.
- % of children aged 4-5 who are overweight or obese.

Healthy Lifestyles – Sexual Health

What do we want to achieve?

People in Merthyr Tydfil have good sexual health, a good knowledge of sexual health and relationship behaviour, and are fully aware of the potential outcomes of risky behaviours.

What do we know?

All Wales data from the Health Behaviour in School Aged Children 2010 indicate that 28 % of boys and 38 % of girls aged 15 years in Wales reported having had sexual intercourse. These proportions are in line with those reported in 2006. There is no association between experience of sexual activity and socio-economic background, though the link to teenage pregnancy is well correlated.

Teenage conception rates have reduced nationally since 2001 at a slow, but steady rate. In contrast, the rate in Merthyr Tydfil has gone down five times and increased five times. Such fluctuations are consistent with small sample sizes. The rate has nearly halved in the past two years, but remains similar to the rate experienced in 2003. It remains well above the national average and is still the third highest rate of all local authority areas in Wales. The highest rate is now in Rhondda Cynon Taf, and Cwm Taf LHB has the highest rate of all LHBs in Wales, and has done so for the past three years.

Recently released data from the Public Health Wales Observatory shows that, within Merthyr Tydfil, there is a huge variation across wards. Amalgamating data for 2007-09, the rate varies between 29.7 and 139.2 conceptions per 1,000 girls aged 15-17yrs. This higher figure is the fourth highest rate for any ward in Wales for this period.

The profile of maternal age in Merthyr Tydfil is young compared to the rest of Wales, with 35% of all births to mothers aged under 24 years, the 2nd highest percentage of all local authorities.

8.4% of all live births in Merthyr Tydfil in 2010 were below 2,500g, classified as low birth weight. This rate is the fourth highest of all local authority areas in Wales. Cwm Taf LHB has the highest rate of all LHBs in Wales. As with teenage conception rates, whilst nationally the rate has reduced slightly, the rate in Merthyr Tydfil has decreased four times and increased three times in the past seven years.

The rate of Chlamydia in Wales has increased for all ages; however the most marked increase has been in those aged 16-24 years. Between 1995 and 2008, the national rate for women aged 16 to 24 years rose from 192 to 758 per 100,000 population.

Research shows that young people are a high risk group for STIs as they are more likely to have higher numbers of sexual partners, use barrier contraception inconsistently, and are more likely to become re-infected after initial diagnosis and treatment for a STI.

80% of clients accessing emergency hormonal contraception (EHC) through pharmacies in Merthyr Tydfil are aged 25yrs or under.

One of the barriers facing women in Merthyr Tydfil who need emergency contraception is the availability of the EHC service during out of hours and on Sundays. During these times the EHC service is only available at the A&E department in Prince Charles Hospital. This location has limited transport access on a Sunday and this has an impact on the number of women who can access the service.

Story behind the data

“The first 1000 days” (Cwm Taf Public Health Report) identifies that the period from conception to age two significantly influences the outcomes for children, parents, and families, throughout the life course, and from generation to generation.

The outcomes for teenage parents are poor. Young parents are more likely to disengage from their education, have low-skilled and low paid employment (if they are employed) and live in poverty. They are also more likely to have further pregnancies at a young age – 20% of all teenage conceptions are repeat conceptions.

Rates of teenage conceptions correlate with areas of poor socio-economic background. They result from poor or risky sexual behaviour by young people, often through a lack of knowledge or a decrease in inhibitions brought on by alcohol consumption, or due to a conscious, lifestyle decision to start a family at a young age. Mapping of teenage conception rates by ward shows the gaps in the Condom Card scheme which coincide with some of the highest rates of conceptions.

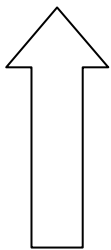
Children born to young mothers are more likely to suffer from short and long-term health conditions (often occurring immediately after birth, and which may require intensive and expensive paediatric care), have developmental delay, grow up in poverty and become a teenage parent themselves, a fact which repeats the cycle of social and health deprivation for this cohort. Action needs to be targeted to break this cycle.

What will we do?

- Cwm Taf Sexual Health Advisory Board to complete and deliver a Sexual Health and Teenage Pregnancy Strategy to include:
 - Targeting and promoting the provision of Long Acting and Reversible Contraception (LARC) in the areas with the highest rates of teenage conceptions.

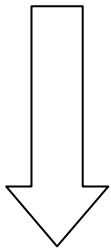
- Targeting and promoting the provision of Long Acting and Reversible Contraception (LARC) to teenage parents.
- Increasing access to the condom card scheme in all schools and in youth and community settings in the areas with the highest rates of teenage conceptions.
- Working with multi agency partners to support consistent and high quality personal and social education in schools. In particular, the link between alcohol and risk taking behaviour which contributes to teenage conceptions and sexually transmitted infections.
- Supporting the provision of youth specific family planning services, recognising the barriers to young people accessing open community services.

How will we measure success?



“Going up”

- Prescribing of Long Acting and Reversible Contraception (LARC).
- Uptake of condoms through the Condom Card Scheme.



“Coming Down”

- Teenage conception rates.
- Sexually Transmitted Infections.
- Rate of low birth weight babies.
- Rate of pre-term births.

Mental Health and Emotional Well Being

What do we want to achieve?

Children, young people and adults in Merthyr Tydfil enjoy good mental health and wellbeing

What do we know?

Merthyr Tydfil has always had particularly high rates for claiming out of work benefits, higher than the Wales average. Currently the commonest claim for benefits is for stress related and mental health conditions. The most recent data shows that in August 2012, there were 9,440 people claiming at least one working age benefit, this is a quarter (24.8%) of the resident population in Merthyr Tydfil.

Worklessness has repercussions which go far beyond the financial. It is proven that being in work boosts self-esteem, health and well-being. People who have been out of work for a long time, or who have never worked, are up to three times more likely to have poor health than those in work.

In 2011, there were 7,100 adults aged 16-64 years with no recognised qualification, 20.1% of that cohort. The lowest performing Local Authority.

Using the percentages from the National Adult Basic Skills Survey Wales 2010, we can estimated numbers of adults living in Merthyr Tydfil with basic skills needs for Literacy are 9,655 and for numeracy 20,468.

Vulnerable Family research indicated that 54% of the 300 most vulnerable families in Merthyr Tydfil do not hold an academic qualification.

Welsh Health Survey data suggests that over 18,000 people in Cwm Taf may be receiving treatment for depression or anxiety at any one time.

The Welsh Health Survey shows an improvement in the mental health component summary score for Merthyr Tydfil moving from the lowest level of self reported mental health to 18th out of the 22 local authority areas.

The Welsh Health Survey also shows that 12% of residents in Merthyr Tydfil are being treated for a mental illness. The Wales average is 11%. Males have a lower proportion being treated than females, suggesting that they may not be as proactive when seeking help to cope with mental illness

The supply of antidepressants by prescription across Cwm Taf has increased significantly. In 2008/09 Cwm Taf residents received 342,627 anti depressant prescriptions, this increased to 452,225 in 2011/12 which represents an almost 30% increase.

In Cwm Taf hospitals in 2010, there were 6,605 admissions where a mental health problem was recorded by a clinician as a secondary diagnosis. 37 children were admitted to hospital in Cwm Taf in 2010, for any mental health problem. 35% of these were for anorexia.

Dementia is a major public health issue in Wales. Approximately 42,000 people in Wales have dementia. It is most common among older people - dementia affects one in twenty over the age of 65 and one in five over the age of 80. Most older people will continue to live in the community with the support of spouses and other family members, but many will be vulnerable to needing alternative care and support as their dementia progresses, especially if living alone.

As life expectancy increases, there will be more older people and so more people with dementia. It is anticipated by 2030 there will be a large increase (almost double) in the number of people with dementia in the 80-84 and 85+ age groups in Merthyr Tydfil.

In a survey of 356 young people in the Cwm Taf area, (219 from Merthyr Tydfil), found that one in 10 young people felt that their life is not going well, and close to one in three young people indicated that they wished they had a different kind of life.

The Health Behaviour in School aged Children Survey (HBSC) 2009/10 questioned children aged 11-16 on their self rated life satisfaction. The greatest majority rated themselves as satisfied with a score of 6 or more out of ten. 83% of students in Cwm Taf fell into this category, which was the same as the Welsh average.

Story behind the data

As stated in the Cwm Taf Health Board Annual Report “*Mental illness is consistently associated with deprivation, low income, unemployment, poor education poorer physical health and increased health-risk behaviour*”. Merthyr Tydfil scores particularly highly on a range of these indicators. All of these risk factors are present in the local area and so not surprisingly the population of Merthyr Tydfil rates lower than the Welsh average for self perceived mental wellbeing and higher than the Welsh average for self reported treatment for mental illness.

The evaluation of Skills for Life in England noted “There is a clear association between poor basic skills and learning disabilities, and poor basic skills and poor health” The Moser report also noted that there is a link to both physical and mental illness' from poor literacy and numeracy.

The most significant general priority in relation to emotional wellbeing and mental health for children and young people relate to addressing issues that are ‘family related’. There is a significant research base on the effective engagement and support strategies for parents in helping to improve the emotional wellbeing and mental health for children and young people. Invariably parenting programmes and support for effective parenting also links to wider issues of addressing specific challenges such as domestic abuse, parental mental health needs, substance misuse, household poverty and worklessness each of which impact on the family.

A significant proportion of resources are currently dedicated to the more complex spectrum of mental health and people do not receive support soon enough or close enough to home. When people become ill, recovery needs to take place in the most appropriate setting, help them to address their difficulties and enable people wherever possible to regain their wellbeing and independence. Good mental health and personal resilience are fundamental to our physical health, our relationships, our education, our work and to achieving our potential.

People of any age who have more complex health needs will require more specialist help, often but not always outside of their family or home setting. Admission to hospital should become the exception rather than the rule as the shift from inpatient to community based care gathers momentum. To prevent and respond to acute crisis requires a coordinated multi agency response, particularly where the service user is displaying challenging antisocial behaviour, is misusing substances and/or is perceived as a threat to themselves or others.

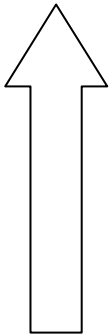
A wide range of community, universal and prevention services provided by a range of statutory and Third sector partners can support people to live fulfilled lives and when they need it, provide help to tackle the life problems which can often lead to mental health problems.

As the all Wales strategy “Together for Mental Health” states, mental health is everyone’s business and we need to help people notice the signs and act early where mental health problems arise and provide the best care and treatment at the right time and in the right place to help people better get better and reduce the impact on mental illness.

What will we do?

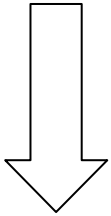
- We will work together in partnership to deliver the key actions in the All Wales Together for Mental Health Delivery Plan.
- We will encourage and support organisations to achieve the Corporate Health Standard and Small Workplace scheme awards which promote Wellbeing through Work initiatives and a healthy workforce.
- Through the implementation of the Mental Health Measure 2012 , we will work together locally and with our partners to ensure that:
 - Individuals are able to receive quicker assessments of their mental health needs.
 - Supporting individuals to access a range of services, in their local community and through investment in community services and local rehabilitation.
 - Providing advice and information to service users and carers groups.
 - Ensuring individuals are involved in developing their own care plans for their individual treatment.

How will we measure success?



“Going up”

- % of young people scoring 6 or higher in terms of life satisfaction in the Health Behaviour in School-aged Children survey (HBSC).
- % of adults (age 16+) self reported mental health and wellbeing.
- % of young people who respond to the Viewpoint survey, reporting they feel happy and hopeful.
- Number of General Practitioner practices that are able to provide specialist assessment and a stepped range of interventions to support patients experiencing “mild to moderate” mental illness.
- % of adults involved in developing their care and treatment plan.



“Coming Down”

- % of adults (age 16+) reporting being treated for a mental illness.

Promoting Independence

What do we want to achieve?

People in Merthyr Tydfil are able to lead independent and fulfilled lives.

What do we know?

The percentage of the population in Merthyr Tydfil aged 65 and over is 16.7%. This is an increase of 741 people in this age category since 2001.

Older people in particular are heavy users of health and social care services and our elderly population is increasing. If current trends continue, the number of people aged 65+ living in Cwm Taf will increase by 50% between 2008 and 2033. This is likely to cause a rise in chronic conditions such as circulatory and respiratory diseases and cancers.

Within the Cwm Taf LHB area, there is a predicted increase (54%) in both the number of older people attending A&E and the number of hospital admissions up to 2030, as a result of a fall. Many individuals can lose their independence and quality of life as a result.

Estimates suggest that one in three people aged 65 years and over experience a fall at least once a year – rising to one in two among 80 year-olds and older. Although most falls result in no serious injury, approximately 5 % of older people in community who fall in any year sustain a fracture or require hospitalisation.

The number of people aged 65 years and over with dementia is predicted to increase by 55% in the next 20 years in Merthyr Tydfil.

Self reported physical health scores are worse in Merthyr Tydfil than in many parts of Wales, with the summary score of 47.5 here compared with 48.8 for Wales. This is a reflection of the deprivation and health inequalities faced by many of the residents.

According to the Welsh Health Survey, the Cwm Taff Local Health Board area has the highest percentage of people (25%) who reported their general health to be 'poor or fair'. Within Cwm Taf the results at local authority level were 27% for Merthyr Tydfil and 25% for RCT, both of which are significantly above the Welsh average (20%).

The Census 2011 shows that 13% (401,000) of usual residents in households in Wales lived alone. Of the usually resident population who lived alone 5.9 % (178,000) were aged 65 and over. At local authority level figures vary from 7.8 % in Conwy to 4.6 % in Cardiff. Merthyr Tydfil is ranked 20th out of the 22 local authorities, with 3026 (5.2 per cent) residents aged 65 and over living alone. In Merthyr Tydfil 116.5 per 1000 population of adult service users aged 65+ continue to live independently at home which is above the Welsh average of 78.6 per 1000 (2011/12).

During 2011/12, we have supported 2172 adults through the Local Authority's Social Services. Of these, 1966 were supported in the community, which represents 90.5% of clients, this compares favourably to the Welsh average and the Council is currently one of the best performers in this area.

A delayed transfer of care – also known as “bed blocking” – arises when a person who no longer needs hospital treatment is unable to leave hospital and return to their own home or to a social care setting such as a residential home.

In the first nine months of 2011/12 the rate of delayed transfer of care for social care reasons per 1000 population age 75+ was 2.7 (12 people) compared to the Welsh average of 5.76.

Expenditure on the Council's Statutory Disabled Facilities Grant service is now over £1,000,000 per annum. In 2011/12 the service was the most efficient service in Wales taking 175 days to provide an adaptation.

The 2011 Census shows that in Merthyr Tydfil 12.6% (7,427) of the usual residents provide unpaid care, this represents an absolute increase of 1, but the proportion of the population has remained the same as the 2001 Census.

There are 300 people living in Merthyr Tydfil with some kind of visual impairment, 220 people have some kind of hearing impairment and 135 people are registered as having a learning disability. It is estimated that there are approximately 8,600 people between 18 and 65 with a physical disability.

Story behind the data

Evidence suggests that basic support to maintain and improve general wellbeing together with practical help in the home and opportunities to meet with other people and prevent loneliness avoids deterioration and the need for more intensive services. The development of a strong community infrastructure is essential to support people maintain their health, social networks and financial stability. This approach can prevent the premature escalation of people's needs and a requirement for intervention by statutory services.

Analysis of the 2001 census shows that carers who provide over 50 hours care per week are statistically twice as likely to suffer from poor health as other people. ONS statistics found that carers who do not get a break are twice as likely to suffer from mental health problems as those that do.

Historically services have tended to do things “for” and “to” service users, reacting to crises rather than being proactive and able to intervene early. It is recognised there is a need for a much greater alignment and more effective collaboration between health and social care in a whole systems approach that delivers more responsive care focused around the needs of the individual. Reablement services are part of this approach by helping people to remain as independent as possible in their own homes.

Services help with activities of daily living and other practical tasks in such a way as to enable people to develop both the confidence and practical skills to carry out these activities for themselves.

Increasingly frail people with several long term health problems and more complex needs run the risk of unplanned admissions to hospital as opposed to managing exacerbations of chronic disease in the community. Any disruption to the usual living and support arrangements can have a major impact on the need for care and support on a longer term basis.

Many emergency admissions could be managed differently and effective hospital avoidance services could prevent unnecessary hospital admissions.

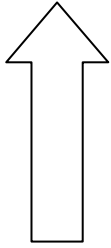
Where admission to hospital is necessary, the aim should be to enable people to return to their usual place of residence as soon as possible.

Services must be about promoting wellbeing and supporting individuals, families and communities to independence rather than creating dependency. The emphasis is on enabling services, early intervention, prevention and short term services which avoid admission to hospital and facilitates discharge.

What will we do?

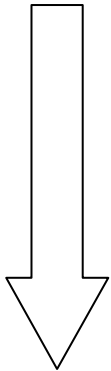
- Develop coordinated approaches to support vulnerable families and adults to resolve difficulties and live fulfilled lives.
- To develop a range of services that will meet future demand and expectations of the people of Merthyr Tydfil through the Homes for Life Strategy.
- Promotion of the Direct Payment schemes. Direct Payments provides the means for individuals to purchase and personally manage support services by employing the people or organisations that they choose. It means they can design the support to best suit them.
- Implementation of Merthyr Tydfil Carers Strategy 2012-17 and meeting the requirements of the new Carers Measure.
- We will introduce a new 'Initial Support Service' and 'Specialist Support Service' model. It will be implemented around a new culture based on Person Centred Planning, Citizen Directed Support and Outcome Focused Care Planning and Service Delivery.
- Expand the @Home service which is a range of services to:
 - Help people live healthy and independent lives in their own homes
 - Help prevent people being admitted to hospital
 - Help patients in hospital get home as soon as they can

How will we measure success?



“Going up”

- Number of people supported to remain in their own home.
- Number of people offered/taking up Direct Payments.
- The rate of older people (aged 65 or over) supported in the community per 1,000 population aged 65 or over.
- The % of clients aged 18-64 supported in the community during the year.



“Coming down”

- %people reporting limiting long term illness - all ages and 65+.
- Number of readmissions to hospital for those aged 65+.
- Reduction in the number of admissions directly from hospital to nursing and residential care.
- Reduction in the number of admissions to residential/nursing care.
- The rate of delayed transfers of care for social care reasons per 1,000 population.

Meeting the needs of vulnerable children

What do we want to achieve?

Children and young people in need of support receive services to meet their needs

What do we know?

The Welsh Government conducts a census of all Children in Need (CIN) on an annual basis, as of March 31st on every year. They define CIN as those who receive social services from their local authority and whose case had been open on March 31st for at least three months continuously. CIN include looked after children, children on the Child Protection Register as well as other children in need, including disabled children.

The latest statistics from the Children in Need (CIN) census in Wales produced by the Welsh Government were released in February 2012. Statistics on children in need include data for Wales for the period up to the end of March 2011.

The key points from **Wales** are:

- There were 19,655 children in need included in the CIN census at 31 March 2011, which was a rate of 315 per 10,000 children aged under 18 years, and 55 who were unborn.
- More than a third (36 per cent) of referrals were from local authority departments and a further 28 % from the police and primary or community health services.
- A quarter (25 per cent) of children in need had a disability.
- Parental substance or alcohol misuse and domestic abuse were the most frequently recorded parenting capacity factors.
- The attainment of children in need at each Key Stage assessment was much lower than the average for all pupils.

The 2011 CiN census showed that there were 530 Children in Need in Merthyr Tydfil, a rate of 435 per 10,000 people aged 0-17 years. This was the 2nd highest rate of all local authorities in Wales. 57% were male and 43% are female, proportions which were in line with the rates across Wales.

At the end of March 2011, of the total number of children in need being supported by children's services, 220 i.e. 41% were either on the Child Protection Register (10%) or looked after by a local authority (31%).

Numbers of Looked after Children in Merthyr Tydfil reduced between 2007 and 2011. However since 2009 Merthyr Tydfil has seen an increase of 18% in the numbers of children it looks after and on the 25th of October 2012 the authority was the corporate parent to **183** looked after children. This is however in the context of significant increases across the UK and an average increase of 22% across Wales.

At any one time 70 – 75% of looked after children will be of compulsory school age or in receipt of post 16 education.

Additionally 2011/12 has also seen a significant increase (69%) in the numbers of children in need of protection whose names are on the child protection register. At 31st March 2012 there were 105 children in Merthyr's Child Protection register.

More children (per 1000 head of child population) are receiving a service from social services in Merthyr Tydfil than comparator authorities and the Welsh average (68:1000 in Merthyr, 44:1000 comparator LA's, 41:1000 Wales average [2010/11 data]) and this has been the trend for a number of years. The profile of children worked with by children's services in Merthyr Tydfil is however different to its comparator authorities and the Welsh average; with a smaller proportion of children worked with as children 'in need' and a higher proportion as looked after children. For example, when compared to a neighbouring authority with a similar demographic profile, Merthyr Tydfil works with less children as children in need and children on the Child Protection Register (5% and 4% respectively) and more as looked after children (9%). This is also a trend over a number of years.

Story behind the data

For many families living in Merthyr, bringing up children so as to achieve the best possible outcomes for them involves dealing with a number of challenges. The area suffers the highest levels of deprivation in Wales impacting on most of the essential needs of families – income, housing, employment being the most obvious. Linked to these deprivations, Merthyr has one of the highest rates of teenage pregnancy and the levels of substance misuse, domestic violence and crime are also relatively high. Under such circumstances, many children in Merthyr have additional needs that have to be met if they are to make use successfully of the universally available provision.

Consequently, relatively more children tend to be referred to children's services. The system for handling referrals was changed towards the end of 2011 and has improved the timeliness and overall efficiency in managing demand. Child safeguarding concerns are identified and dealt with appropriately. In addition, developments funded by the Welsh Government's Families First initiative have strengthened the early multi agency response to the needs of families. However, there remains a need to further strengthen the specialist assessment and family support services required to respond to families and children in need. A more intensive range of multi-agency preventative services is now required in order to prevent some children being pushed upwards in terms of level of need to the point where only by placing their names on the child protection register or looking after such children will their needs be met.

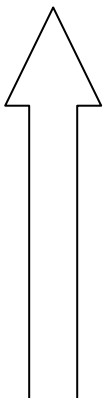
Looking after children is a very resource-intensive way of meeting needs although, for some, it is the only way of meeting need. However, looking after a child is always a very serious step to take and should only be taken with a clear view of what a good outcome for that child would involve given the circumstance. There are unintended consequences that sometimes result for these children which can be costly for the child, his or her family and community.

The overarching aim for all partners is to identify those children for whom permanence is compromised and to provide services and interventions that will support them in establishing stable, supportive and protective care. If the key aim is to support children in achieving permanence within their own families whilst ensuring that they are protected from harm (including the cumulative impact of chronic neglect) then services need to be in place that enables and empower parents whilst ensuring necessary protective interventions. A fundamental shift in emphasis to effective prevention needs to be promoted, based on considering the need for permanence for all vulnerable children whether permanence involves adoption or an intensive programme of intervention and change to maintain a child at home.

What will we do?

- Keep under review the effectiveness of preventative services and resource streams (across partners - statutory and third sector) in supporting the most vulnerable children and families and diverting them from statutory intervention.
- Ensure timely, responsive and effective assessment and intervention for children in need.
- Develop a greater range of services known to be effective for children in need and their families, including developing a more comprehensive Intensive Family Support Service (IFSS).
- Continue to ensure that there are alternatives to children becoming looked after but that the authority also does look after those children whose needs cannot be met in other ways.
- With key partners implement a Family Support Pathway model of providing services to disabled children and their families.
- Identify in full the direction and changes that will be required when the Social Services and Wellbeing Bill is enacted and plan accordingly.

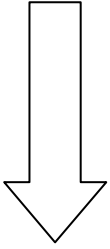
How will we measure success?



“Going Up”

- The proportion of contacts to children’s services progressing to referral.
- The proportion of children receiving children’s social services as “children in need”
- Numbers of referrals to the Intensive Family Support Team.
- Numbers of families reporting positive outcomes from the Families First Programme and children in need services.
- Numbers of children in need reviews completed within guidelines.

“Coming Down”



- The percentage of referrals to children’s services that are re-referrals within 12 months.
- The number and percentage of repeat child protections registrations within 2 years.
- Overall number of contacts to children's services.

OUR PRIORITY OUTCOMES

People enjoy a vibrant, attractive, safe and sustainable place in which to live, work, play and visit.

KEY PRIORITY AREAS FOR ACTION

- Community Safety - Anti Social Behaviour and Crime and Disorder , Domestic Abuse and Sexual Violence, Substance Misuse, Offender Management and Community Cohesion
- Housing
- Safeguarding Vulnerable People

Links to the Welsh Government's Programme for Government:

- More inclusive and cohesive communities
- Creating sustainable places for people.

Anti Social Behaviour and Crime and Disorder

What do we want to achieve?

People living in and visiting Merthyr Tydfil are safe and feel safe in our local communities.

What do we know?

Home Office figures reveal that overall crime in Merthyr Tydfil continues to fall. Between April and March 2011/12 there was a 17% reduction in overall crime, compared to the same time last year. This is the equivalent of 860 fewer victims of crime, and is the biggest double digit reduction across South Wales. Despite these reductions there is a perception that crime levels have not changed. 65.5% of respondents to the 2012 Police Community Satisfaction Survey in Merthyr Tydfil believe that crime levels had remained unchanged in the last 12 months.

Police recorded crime is at a very low level compared with historical trends and is predicted to continue to decrease. It is relevant to compare data on the number of offences with how safe people feel in the borough.

The Community Cohesion and Safety Survey 2011 asked how safe respondents felt in a variety of situations during the day or at night

The survey found that in relation to feeling safe:

- 96.7% of respondents felt safe in their home in the daylight, but this reduced to 79% after dark
- 94.2% of respondents felt safe walking in their local area in daylight, but this reduced to 53.7% after dark
- 93% of respondents felt safe walking in their nearest town centre in daylight, but this reduced to 30.3% after dark
- 85.2% of respondents felt safe when travelling by public transport

Between April and March 2011/12 there have been significant reductions in the number of Theft from Motor Vehicle (down 33%, 193 fewer offences) and Theft of Motor Vehicle (down 40%, 103 fewer offences) offences, despite these reductions Merthyr Tydfil remains a hotspot area for vehicle crime.

The Police Strategic Assessment 2011 identified Anti Social Behaviour (ASB) related to the town centre and the daytime economy as an issue in Merthyr Tydfil.

Police recorded ASB has reduced by 16% between January and December 2011. The number of ASB occurrences was 4,689. During the period April 2010 to March 2011 there were 5,250 ASB occurrences recorded by the police.

These numbers still highlight the impact ASB continues to have on communities, with ASB appearing as a frequent priority for most Police and Communities Together (PACTs) throughout all Wards in the County Borough.

Police analysis of most serious violence against the person (MSVAP) data shows that 45% (127) of offences are occurring in private dwellings. Offences occurring on licensed premises have seen a decrease on last year of 11% (31). Knife crime continues to remain low with 11% (31), those used in a public place account for 26% (8). The use of weapons remains static at 42% (117) of all offences (data is for Merthyr Tydfil. Rhondda Cynon Taf combined).

South Wales Fire and Rescue Service estimate an annual cost in their service area of around £7 million due solely to wildfires. Around 98% of all wild fires are started deliberately. In total there were 214 deliberate grass fires in Merthyr Tydfil during 2011/12 which was a 41.85% reduction on the previous year.

Story behind the data

According to the British Crime Survey (BCS), the risk of being a victim of crime is lower for households in least deprived areas compared to most deprived areas. This would suggest that the areas identified in the Welsh Index of Multiple Deprivation (WIMD) 2011 as being most deprived in Merthyr Tydfil would have a higher degree of likelihood for crime and disorder to occur.

By tackling the particular areas of deprivation that have been identified as above average, there should be a knock on effect of reducing crime and disorder in the long term. This is a perfect example of how other non-enforcement partner agencies can contribute to crime and disorder reduction.

Although overall crime has reduced significantly in recent years, Home Office data has identified that other theft and handling, car crime, shoplifting and burglary remained within the top ten crimes for the County Borough (May 2010 –June 2011). Other theft and handling consistently displayed the highest crime figures, followed by theft from a car, whilst vehicle crime remained a historic issue within Merthyr, accounting for 16% of all recorded crime.

Consequently, a reduction in acquisitive crime remains a key priority, with partners focussing their efforts on tackling car crime, burglary and other theft and handling (which includes theft of personal items, metal theft etc).

Violent crime is one which causes greatest distress to victims and a negative impact to communities, strongly impinging upon public perception and contributing directly to the feeling of safety within communities and town centres in particular. As partners we need to start to accurately collect and analyse accident and emergency data in order to provide a better understanding of alcohol related violent crime.

In recent years, there has been a significant shift in the way that key agencies deal with ASB. Focus has changed from solely targeting perpetrators to also supporting victims requiring new approaches to be adopted.

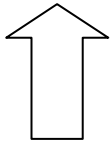
Visibility has a large part to play in peoples perceptions of safety and feelings of reassurance that police and local authorities are tackling the issues that are of concern. The Police Strategic Assessment 2011 identified that individuals involved in drugs, alcohol, and retail crime hang around the Merthyr town centre which members of the public find intimidating, lowering perception levels. The image of the town centre is very crucially entwined with the regeneration plans for Merthyr Tydfil.

Despite significant reductions in the level of crime and disorder locally, findings from the Police Community Satisfaction Survey 2012 show there is a need to communicate this message more effectively with people living in the County Borough.

What will we do?

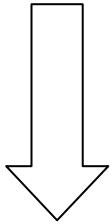
- Undertake multi-agency operations to target ASB, under age drinking, vehicle crime and metal theft.
- Undertake road shows and street briefings to raise community awareness and provide advice on how to reduce the risk of becoming a victim of crime.
- Continue our victim and perpetrator ASB programmes.
- Pilot a Neighbourhood Management approach in identified communities.

How will we measure success?



“Going up”

- Number of people who feel safe living in Merthyr Tydfil



“Coming Down”

- Anti Social Behaviour rates.
- Overall crime rates.
- Acquisitive crime rates.
- Violence rates.

Domestic Abuse and Sexual Violence

What do we want to achieve?

Fewer households within Merthyr Tydfil are affected by domestic abuse and sexual violence

What do we know?

In 2011, Merthyr had the highest rate per 10,000 adult population for domestic abuse reporting to South Wales Police out of the 6 South Wales Police force areas.

It is estimated that 22% of most serious violent offences are domestic violence.

Merthyr Tydfil Multi Agency Risk Assessment Conference (MARAC) has the highest rate of high risk domestic abuse referrals of all MARACs in the Wales, and the 3rd highest in the UK.

Between April 2012 and March 2013 there were 1021 domestic abuse referrals into the Teulu Multi Agency Centre. This is a decrease of 24% on the same time as last year. However, it must be stressed these referrals only relate to incidents which have been reported to community safety partner agencies.

For the year ending December 2012, 63% of domestic abuse referrals into Teulu Multi Agency Centre (MAC), involve families that disclosed they have children. This represents a decrease of 9% on 2011 figures, but is still lower than expected. It is likely that a lot of victims do not disclose they have children due to fear of children services becoming involved.

In 2012 28% of referrals to Teulu MAC involved alcohol misuse (where indicated).

In 2012 there were 32% reported repeat incidents of domestic abuse to Teulu MAC- a reduction of 19% on the 2011 figure and 16% repeat cases were received at MARAC – a reduction of 18% on 2011.

The 2012 referrals to the Teulu Multi Agency Centre (MAC) shows a decrease, which indicates delivery of effective, holistic family support together with partnership working. This may also be partly attributed to the commencement of the Domestic Violence Perpetrator Programme. MARAC indicator - cases per 10,000 of the adult female population – stand at 69% for Merthyr, the level is higher than the South Wales area (47%) and significantly higher than the national figure (27%).

Story behind the data

This type of crime is believed to be significantly under-reported and according to the British Crime Survey has high levels of repeat victimisation. It is also the only type of violent crime where the risk for females significantly surpasses the risk for men.

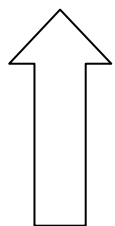
Statistics show that the risk of domestic abuse rises by around a third during pregnancy; however local figures involving a pregnant victim were still lower than expected, however has increased on the 2011 figure -102 in 2012 (28%) compared to 41 in 2011. Once again fear maybe the reason victims do not disclose this information to police, also it is possible for a victim to conceal an early pregnancy. However, the increase in referrals involving a pregnant victim has increased in 2012 and could be attributed to more effective partnership working with midwives and wider health professionals

In 2006 an evaluation of domestic violence cases found that alcohol had been consumed prior to the offence in nearly three-quarters (73%) of cases and was a 'feature' in almost two-thirds (62%). Furthermore almost half (48%) of these convicted domestic violence offenders were alcohol dependent. Analysis of the 2011 data from Teulu MAC shows that 58.1% of referrals involved alcohol misuse. This breaks down into 20.2% of victims and 37.9% of perpetrators.

What will we do?

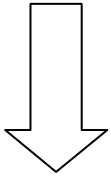
- Performance for the Specialist Domestic Violence Court (SDVC) and partnership referrals is currently demonstrating a positive curve, so maintain existing approaches in these areas.
- Understand why repeat referrals to both Teulu and MARAC are so high, and are further increasing.
- Support the new Voluntary Perpetrator Project delivered by Safer Merthyr Tydfil
- Implement the Think Family processes developed under Multiple Intervention Assistance Service (MIA) focusing on early intervention for families and support for children & young people to reduce baseline for children on the child protection register where domestic abuse is a factor.

How will we measure success?



“Going Up”

- Number of successful outcomes at Merthyr Tydfil Specialist Domestic Violence Court (SDVC).
- Number of Perpetrators accessing and receiving effective services.
- Number of Teulu and MARAC referrals.



“Coming Down”

- Number of Children at risk of domestic abuse.
- Number of repeat incidents of domestic abuse.
- Number of families accepted as homeless due to domestic abuse.

Substance Misuse

What do we want to achieve?

A community where the harm caused by the misuse of drugs and alcohol is minimised

What do we know?

The Welsh Health Survey (2010 and 2011 combined) indicated that 43% of adults in Merthyr Tydfil drink above recommended daily guidelines and 29% binge drink. Both these are above the Welsh average.

36% of respondents in Merthyr Tydfil in the 2012 Police Community Satisfaction Survey said that drug use / drug dealing was a very big /fairly big problem in their area. 30% of respondents said that drunkenness was a very big / fairly big problem in their area.

Merthyr Tydfil is ranked the 2nd highest of the 22 local authority areas for incidence of drug misuse and highest for alcohol misuse.

Hospital admission rates due to alcohol are higher in Cwm Taf than for Wales as a whole. Between 2003 and 2007 an average of around 5,500 hospital admissions and 110 deaths (70 men and 40 women) per year in Cwm Taf were caused by alcohol. Average weekly alcohol consumption as well as the more publicised binge drinking are both implicated.

Between 2007 and 2009, Merthyr Tydfil had the highest rate of alcohol attributable admissions to hospital for males, and the second highest rate for females.

Health Behaviour in School aged Children Survey (HBSC) 2010. Results are for the Cwm Taf Health Board:-

- 18 % of young people aged between 11-15 in Cwm Taf, reported drinking one or more alcoholic drinks at least weekly compared to Welsh average of 16per cent. Within this Health Board area % of boys and girls were equal.
- 10 % of respondents (7 % boys, 13 % girls) reported being drunk at least 4 times compared to a Welsh average of 12 per cent.
- 8 % of all respondents in Cwm Taf aged between 11 and 16 have used drugs in the last 12 months compared to a Welsh average of 9 per cent.

Based on data from the Welsh Substance Misuse database for the last two financial years, the typical person with substance misuse problems presenting for treatment in Merthyr Tydfil is British, male, aged between 30-39, and predominantly has problems with alcohol.

However, the statistics provided do not take into account the increased use of new and emerging drugs in the area, as very few service users are presenting at treatment with new and emerging drugs (such as Methadone) as their primary substance.

Mephedrone, also known as “meow meow” or MCAT, has become more popular in Wales than anywhere else in Britain, since it was made illegal two years ago. Between April and June of 2012, the number of offences which involved the drug in Wales increased by 165% compared to the same period in 2011. This contrasts with the rest of the UK where mephedrone and other 'party' drugs' popularity have decreased since 2011.

In 2011, Police data showed that 48% of all violence with injury offences in Merthyr Tydfil were alcohol related. In the eight months up to March 2012, 31% of all ASB referrals in Merthyr Tydfil were alcohol related. 58% of all referrals to Teulu MAC (support for domestic abuse victims) involved alcohol misuse.

Story behind the data

Substance misuse is associated with someone becoming intoxicated, regularly consuming too much of a substance and / or being dependent on a substance. The most commonly misused substance in Merthyr Tydfil is alcohol.

The influence of alcohol, illegal drugs and new and emerging drugs (what we currently know of them) is a factor that cuts across a number of different areas that include domestic abuse, violent crime, anti-social behaviour, health (including unwanted pregnancies), stranger violence and impacting on the night-time economy but to name a few.

Alcohol related liver disease, alcohol related deaths and other alcohol attributable illnesses are increasing (Public Health data) and there is often also a direct correlation between individuals and families presenting with other issues of vulnerability.

Harm reduction is important to reduce the spread of blood borne viruses, alcohol related chronic health conditions, related hospital admissions and drug related deaths within our communities.

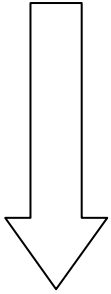
The estimated cost of alcohol and Class A drug misuse to the Welsh economy is £2 billion a year.

What will we do?

- Launch The Primary Care Drug and Alcohol Service.
- Undertake a review of Secondary Care drug and alcohol services.
- Introduce Designated Public Protection Orders where appropriate.
- Manage and police the Night Time Economy to target alcohol-related issues in the town centre.

- Review and improve community prescribing provision.
- Explore and develop housing solutions for individuals with substance misuse issues.

How will we measure success?



“Coming Down”

- % of adults who drink above recommended guidelines.
- % of adults who report as binge drinking in preceding week.
- % of alcohol / drug attributable deaths.
- % of alcohol / drug related hospital admissions.

Community Cohesion

What do we want to achieve?

A community where people live alongside each other with mutual understanding and respect, where everyone values differences.

What do we know?

Since the 2001 census the population of Merthyr Tydfil has gone through a period of substantial decline and then growth, which is likely to be linked to the arrival of new residents from other regions of the UK and from outside the UK. On the night of the Census 2011 the population was 58,800, 2593 more than in 2001, which represents a 4.5 % increase.

The number of Welsh speakers in Merthyr Tydfil is much lower than for Wales as a whole. In Merthyr Tydfil 8.9 % of the resident population aged three years and over are identified as being able to speak Welsh compared with 19 % in Wales as a whole. More young people are able to speak Welsh. Those aged 5-9 and 10-14 show the highest levels of Welsh speaking with 21.4 % and 27.1 % % of these groups being identified as Welsh speaking.

The 2011 Census shows that there are 62 individuals who identify their ethnicity as While Gypsy or Irish Traveller. Two thirds of these individuals (41) are residents of Plymouth (the location of the Glynmill site), Town and Gurnos wards.

The minority ethnic (ME) population now numbers approximately 3,167 (5.4per cent) individuals out of a total population of 58,800. This represents an increase of more than 5% since the 2001 Census. In 2010 approximately 5% of school aged children were from ME communities, and nearly 4 in 5 of these pupils had English as an additional language.

Using the percentages from the National Adult Basic Skills Survey Wales 2010, we can estimate numbers of adults living in Merthyr Tydfil with basic skills needs in literacy was 9,655 and in numeracy 20,468.

Findings from the Merthyr Tydfil Community Cohesion and Safety survey 2011 commissioned through Community Safety and the Multi Agency Diversity Forum (MADF) indicate that:

- 68.3% respondents agreed that their local area is a place where people from different backgrounds get on well together. The 2009-10 pilot of the National Survey for Wales found that 87% of respondents agreed with this statement.
- 69.1% of respondents felt that they belonged to their local area. The 2009-10 pilot of the National Survey for Wales found that 87% of respondents agreed with this statement.

- 55.1% of respondents agreed that they liked to get involved in community activities in their local area. Women (59.07%) were significantly more likely to agree, compared with men (50.9%).
- 76.2% of respondents felt satisfied (30.7% very satisfied and 45.5% fairly satisfied) with their local area as a place to live.

In 2010 approximately 5% of school aged children were from minority ethnic (ME) communities, and nearly 4 in 5 of these pupils had English as an additional language.

The minority ethnic population in Merthyr Tydfil is growing, but is sparse and dispersed. Analysis shows that no ward contains more than 70 ME households. ME households tend to be predominantly located in the Town of Merthyr Tydfil itself, Dowlais, Penydarren and the Treharris area in the South of the Borough.

Approximately 820 people in Merthyr Tydfil will be either gay or lesbian or bisexual.

Story behind the data

The 2009 Community Cohesion Strategy for Wales identified a clear association between basic skills and cohesion and the need to break down the circle of inter-generational disadvantage of people with poor literacy and numeracy.

'Early intervention to provide a better start in life remains the best lever for tackling long term social inequality' (Social Exclusion Unit (2004) *Breaking the Cycle of Social Exclusion*, ODPM).

Findings from the Effective Provision of Preschool (EPPE) project indicate that pre-school whilst not eliminating differences in social backgrounds, can help to promote better development and can thus help to combat social exclusion.

The findings of the Merthyr Tydfil Community Cohesion and Safety survey suggest that there is a need to strengthen community resilience and integration between people from different backgrounds. The growth in the local population is mainly driven by migration, from within the UK and internationally. There are also certain 'risk' factors present which may put pressure on community cohesion such as economic decline and deprivation, competition for low skilled jobs, and pressure on the local housing stock.

Findings from the Merthyr Tydfil Community Cohesion and Safety survey also highlight some of the issues faced by different communities in the County Borough. For example:

- People with physical disabilities commented that many buildings were not accessible, and in organisations which had invested in equipment, staff were often unaware of how to use the equipment, or equipment was not always serviced or kept in working order.
- Young people talked about the lack of employment opportunities, being unable to afford to use the new facilities at the Merthyr Leisure village, lack of public transport in the evenings.

- The lesbian gay, bi-sexual and transgender (LGBT) community talked about the lack of access to support networks and the absence of symbols being displayed locally to evidence safe places that would be welcoming of them.

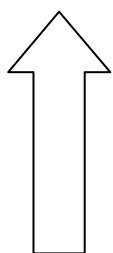
Findings from the South Wales Police Community Satisfaction Survey 2012 show that it is necessary to continue to improve public confidence to report hate crime. Of the respondents (110) who indicated they had been a victim of hate crime over 70% had not reported it.

Changes to the national cohesion programme will inevitably impact on our ability to deliver specific actions; the Cohesion action plan is currently being revised in light of this.

What will we do?

- The findings of the Community Cohesion and Safety survey will be built upon as part of the development of a new Citizens Panel for Merthyr Tydfil, the undertaking of the Viewpoint Survey for Young People and the development of a Consultation Hub through the Cwm Taf Regional Collaboration Board European Social Fund (ESF) funded project.
- Increase reporting of hate crime by establishing third party reporting centres and raising awareness on hate crime.
- Identify and support key organisations to develop appropriate cohesion and equalities training programmes.
- Support the Community Voice application to provide additional support for the local LGBT and gypsy traveller communities.

How will we measure success?



“Going up”

- Amount of reported hate crime occurrences.
- Number of people receiving equalities training.
- Number of schools engaged annually in “Show Racism the Red Card”.
- Number of individuals attending cohesion events.

Offender Management

What do we want to achieve?

People in Merthyr Tydfil are protected from the actions of repeat offenders

What do we know?

Currently there are 37 offenders managed by the Merthyr Tydfil Integrated Offender Management Team (IOM), 20 are Prolific and Priority Offenders (PPO) and 17 are Integrated Offender (IO). The average age of a PPO is 24 and the average age of an IO is 28.

In the nine months to December 2012 16 PPO's were arrested for a total of 49 offences.

The crimes included 1 Assault, 5 dwelling burglaries, 2 shed burglaries, 1 damage, 7 damage to motor vehicles, 2 drugs offences, 7 public orders, 23 theft from motor vehicles, 1 Aggravated Theft of a vehicle.

The offences were dealt with as follows: 4 community sentences, 2 conditional discharges, 4 with no further action, 18 offences were taken into consideration, 18 custodial sentence and 3 are still awaiting court.

In the nine months to December 2012, 15 Integrated Offenders were arrested for a total of 25 offences. The crimes included 1 Assault, 6 Dwelling burglaries, 3 damages, 3 drugs, 4 public order, 3 shoplifting, 2 vehicle and 3 other offences.

The offences were dealt with as follows: 7 community sentences, 11 custodial sentences, 2 fines, 3 NFAs and 1 tic, one is still awaiting court.

This equates to the PPO's being convicted of 2% of crimes and IOs being convicted of 1% of crimes recorded in the Merthyr Tydfil area.

PPOs were linked to 49 crimes in 2012, a 29% reduction on 2011 where they were linked to 68 crimes.

Story behind the data

Adults

The majority of crimes are committed by a minority of offenders. Reducing reoffending by targeting offenders who cause greatest harm to their communities can have a significant impact on reducing crime and on public confidence.

Whilst offender management has always been a core duty of the Community Safety Partnership, the introduction of the Home Office's and Ministry of Justice's new approach to 'Integrated Offender Management' (IOM), has resulted in recent improvements in the way in which offenders are managed at a local level.

Over the last year, local community safety partners have been working to develop a local Integrated Offender Management Unit (IOMU). The Unit, which aims to effectively target those offenders who cause most disruption and damage, brings together key partners, such as Probation, South Wales Police, Department of Work and Pensions (DWP) etc to ensure better coordination of support programmes and necessary interventions to minimise the chances of re-offending.

Unlike previous models of offender management, IOM goes much further, by also targeting those offenders who may not be under statutory probation supervision, but who are known to be actively offending or at high risk of doing so, particularly non-statutory offenders – those released from prison after a sentence of less than 12 months who are not subject to probation supervision on release. Baseline data now needs to be formally captured and agreed by the Steering Group.

Youths

Progress has been made against first time entrants and custodial sentences, but reoffending rates remain stubbornly high.

The introduction of the youth bureau in April 2011 has produced a significant reduction in first time entrants. A study of the most prolific re-offenders is underway in Wales, led by the regional Youth Justice Board (YJB). A local study showed high correlation with domestic abuse in the home, whilst chaotic use of drugs and alcohol and high breach rates for non compliance with high intensity community programmes is also prevalent.

Non engagement with education, training and employment (ETE) continues to be a contributing factor to reoffending rates, and the Youth Offending Service (YOS) are working alongside partner agencies in order to provide more opportunities for young people who offend, including those who are identified as 'prolific'.

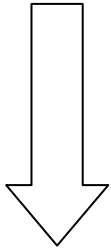
YOS management also contribute to the IOM agenda and is central to a local 'migration' group which focuses on young people who are assessed as 'high risk', and to implement and enhance a more coordinated approach to transitional processes between youth and adult criminal justice services.

What will we do?

- Continue to improve links between the IOM and relevant partner agencies in order to deal more effectively with those young people who present a significant risk, both to the community and themselves.

- Introduce a coordinated and regional approach to tackle anti social behaviour (ASB) within the wider prevention and early intervention agenda, in order to intervene earlier to address presenting risk factors, such as disengagement from school, poor parenting or the onset of substance misuse/alcohol abuse.
- Increase opportunities for individual programmes of work experience/training consistent with young people's skills and confidence levels.

How will we measure success?



“Coming down”

- Re - offending rates (adults).
- Re - offending rates (youths).

Housing

What do we want to achieve?

A community where residents live in good quality, suitable and affordable housing

What do we know?

It is estimated by the Office of National Statistics (ONS) that we spend up to 70 % of our daily time at home. That proportion of time increases for younger and particularly older people with one estimate suggesting people aged over 70 spend 95 % of their time at home.

Merthyr Tydfil has a significantly higher proportion of older housing stock than elsewhere in Wales. According to the 2011 Census there are currently 24,264 houses in Merthyr Tydfil; 49.6 % are terraced houses with 45.4 % of all dwellings built pre 1919. Nationally this figure is about 30 per cent, while in England only 21 % of houses are of that vintage. The dominant type of tenure in Merthyr Tydfil is owner occupier, accounting for 65.3 % of the market. Private renting accounts for 11.6 % of the total market, and social housing for 21.1 %.

As of April 2011 725 private sector dwellings had been vacant for 6 months or more, of these 2.1% (15) were returned to occupation through direct action by the local authority

The Local Housing Market Assessment, 2010 identified an overall shortfall of up to 62 affordable houses a year, although this figure indicates the scale of the affordability problem rather than the solution to it. Moreover, this figure masks local need; at a neighborhood level some low demand areas have a surplus of affordable housing and some high demand areas have a substantial deficit.

According to available data sources, house prices and earnings vary between local Electoral Divisions, with some having a higher number of owner occupied properties, whilst others have a higher concentration of social housing. These variances, together with differing access to amenities and transport links, also impact upon the local housing market.

Over the past decade, the price of buying a home in Merthyr has increased by far more than the national average, but more recently, house prices in the area have also fallen more than other parts of Wales. Buying a house is, however, becoming increasingly difficult for many people, particularly younger people. In the past decade, there has been a 99.74% increase in the price of average houses; compared to an all Wales average increase of 71.95%.

In 2010, mortgage possession claims leading to orders in Merthyr Tydfil were 4.58 per 1,000 households. This was the fourth highest rate of all local authorities in England and Wales and the highest in Wales. It has dropped from its peak in 2008, but remains well above the 2000 rate.

In 2008 Michael Howard Associates, commissioned by the Local Authority carried out the Private Sector House Condition and Energy Audit Survey. The most significant hazards in private sector dwellings in Merthyr Tydfil identified during the survey were those associated with the threat of excess cold, falls on stairs, and falls on level surfaces. 39.1 % of private stock is considered to contain a Category 1 hazard (about 4 in 10, approximately 7,900 dwellings).

Based on the incidence of falls at home in older people, it is estimated that the annual number of falls in older people in Wales is between 230,000 and 460,000. Across Wales between 115,000 and 230,000 fall more than once and 11,500 to 45,900 suffer a fracture, head injury or serious laceration, this equates to between 32 and 126 injury falls per day in Wales

The population aged 65 and over is predicted to increase by 50% by 2033. This will result in a reduction of available homes, as more people are supported to stay in their homes for longer. It also raised questions about the suitability of terraced properties, often with steep steps stairs, for an ageing population.

Due to the nature of the housing in Merthyr Tydfil, and across Wales, people living here can find themselves spending a significant proportion of their income on fuel. A household is described as being in fuel poverty if it spends more than ten % of its income on energy to heat the house adequately. The most recent fuel poverty figures on Stats Wales show that fuel poverty for Wales has more than doubled, increasing from 11 % in 2004 to 26 % in 2008. In Merthyr Tydfil the 2009 House Condition and Energy Survey revealed that 39 % of private sector households were at risk of fuel poverty.

Having enough space to live healthily is an important issue in Welsh homes. Houses should provide sufficient space to allow for social interaction, but also have some privacy away from other household members. Children also need space for recreation and doing homework. A lack of space has been linked to a number of health outcomes, including psychological and mental disorders. Such conditions are also linked to increased hygiene risks, an increased risk of accidents and spread of contagious disease. Those more likely to be affected are the elderly, the very young and their carers, and those with impaired mobility.

The 2008 Living in Wales survey showed that 26,100 households (2.1% of all households) failed this standard. Although the data is not available locally, a similar rate in Merthyr Tydfil would equate to 500 households failing the standard. Nationally, 8.1 % of 0-15 year olds and 7.1 % of 16 and 17 year olds live in these households. Again, assuming the national rate applied in Merthyr Tydfil, that would equate to 992 young people in Merthyr Tydfil living in overcrowded conditions.

While some aspects of housing stand alone and are reflected in this chapter, housing related services such as the Supporting People Programme and Care and Repair services provide essential help to people to live independently and help to reduce demands on the NHS and on social services. These are reflected in earlier sections of this Plan.

Story behind the data

Over the past 30 years there has been an emergent idea in public health that health can be improved and protected by focusing on the place and environment. This has become known as the settings approach to health. It was first enshrined in public health policy as a result of a conference in Ottawa in 1986 and a subsequent document the Ottawa Charter

When considering the home as a setting for health we must look at the risk factors in homes that inhibit good health and the elements of a home environment that can be used to promote health. This can include physical factors such as the age of the house, the environmental threat presented by building materials used like asbestos, energy efficiency and the layout of houses that may lead to increased likelihood of life-threatening falls.

Other factors that impact on health in houses are the relationships of people living together, levels of poverty and the impact of domestic abuse. The Chief Medical Officer for Wales describes violence in the home as a 'hidden epidemic', where houses can become prisons where health is threatened and damaged

A home should help people be independent and give them the security to be active members of their communities. Many older, some young, vulnerable or disadvantaged people experience crises that affect their health or wellbeing; they need housing support to help them lead full and active lives. Evidence suggests that basic support to maintain and improve general well-being, together with practical help in the home and opportunities to meet with other people and prevent loneliness, avoids deterioration and the need for more intensive services

Increasing house prices accompanied by increasing costs of living are putting more and more pressure on people and their ability to afford a home. At the same time, homes are in short supply. Changes in the property market over the last few years have significantly increased the level of housing need within the County Borough; the supply of social housing is likely to become increasingly oversubscribed in the short to medium term. More new homes are needed not only for those who can afford to buy a home but for those who can't; more affordable homes need to be built in the area. At the same time, it is important to make better use of existing homes, which means reducing the number of long term empty properties.

Since 2009, all social housing stock in Merthyr Tydfil is now owned by four housing associations - Merthyr Valleys Homes, Wales and West, Merthyr Tydfil and Hafod.

The Supporting People (SP) programme funds housing related support services that contribute to addressing need in our communities.

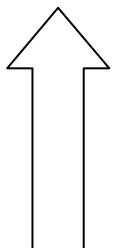
SP services assist vulnerable people to live independently in the community, support the prevention of homelessness and contribute to community safety (WLGA Housing Policy Statement, 2007). The key stated aim for the Supporting People Partnership is *“To ensure that SP service provision for each client group is proportionate to current levels of registered supported housing need”*. Using the Managing Access to Adapted and Supported Housing (MAASH) system, the SP partnership has identified and recorded supported housing need to ensure appropriate services are received by those in greatest need.

Whilst the incidence of ‘homelessness acceptance’ has gradually fallen over the last few years, the number of applications has remained approximately the same. Targeted prevention in certain areas is vital if homelessness is to be prevented. Preventing homelessness by providing early assistance to people who are at risk of homelessness is particularly important for partners and action under each of the above headings contribute to it. However, ongoing welfare reform, which is resulting in benefit reductions, will place greater strain on some households. It is envisaged that we are likely to see an increase in homelessness over the next few years and in turn increased pressures on the availability of suitable affordable housing.

What will we do?

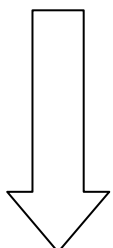
- Increase the number of good quality, affordable homes.
- Work with our local Housing Association partners to improve the standard of social housing, ensuring economic and employment opportunities are maximised.
- Provide effective housing advice services and housing solutions to reduce and prevent homelessness.
- Provide support to help owner occupiers to improve their properties.
- Increasing the range of adapted and supported housing, adaptations and support services for people to live independently in their own homes for as long as possible.

How will we measure success?



“Going up”

- Number of housing and affordable housing completions per annum.
- Households being prevented from becoming homeless for at least 6 months.



“Coming down”

- Waiting times for housing related support services.
- Number of households accepted as homeless.
- Empty properties as a % of total housing stock.

Safeguarding Vulnerable People

What do we want to achieve?

Greater public awareness of the need to protect vulnerable adults and children from harm

What do we know?

During the year 2011/12 we received 116 adult protection referrals, this is a decrease of 8% on the 2010/11 figure of 126 adult protection referrals.

During 2011/12, 97% of strategy discussions were held within 2 working days and the percentage of Adult Protection Referrals completed where the risk has been managed was 94.03% with the Welsh average in 2011/12 being at 88.02%.

In terms of adult protection referrals, the main source of referral is still the provider agencies (non SSD) and there are still very low referrals from the person themselves, relatives and friends and through our housing partners.

The highest service user group is Mental Health followed by Learning Disability. There is a reducing trend of referrals about vulnerable adults who have a learning disability, and who are elderly and experiencing mental health, that whilst there is an increasing trend of referrals about adults who experience mental illness.

The number of children whose names were on the Merthyr Tydfil Child Protection Register was 105 on 31st March 2012. There is no 'right' number, it can change monthly and in previous years it has varied from 65 to 120.

There was however an increase of 69% between this figure and the figure at the same date in 2011. There are a number of factors which will have influenced this including an increase in larger families, the effect of the 'baby Peter' case and the realignment of thresholds in order to strike an appropriate balance between intervention / prevention and protection. 74% of the children on the Merthyr Tydfil Child Protection Register at this time were under 9 years of age (a higher percentage than 2010/11 with 42% and 2009/10 with 60%). The increase in registration for this age group largely accounts for the overall increase. An increase in child protection registrations is also a trend mirrored across Wales.

Story behind the data

Most instances of alleged abuse of adults occurred in the Client's own home. The next highest group is within residential Care Homes, although it needs to be acknowledged that the abuse reported from these homes can be service users on service user, or even a relative or friend and not the care staff.

The Independent Sector Staff group were the highest group of persons alleged to be responsible for abuse, thus highlighting the continuing need for collaboration with the Independent sector in terms of safe recruitment, robust quality assurance systems and sound training delivery. It is evident that high quality contracts and contract monitoring with providers lies at the heart of this alongside an effective process for evaluating and continuously improving provider performance. The highest category of abuse is Financial/ Material, closely followed by Physical abuse.

Merthyr Tydfil and Rhondda Cynon Taf local authority, along with our key partners in the Cwm Taf Local Health Board and the South Wales Police have established a joint Local Safeguarding Adults Board (LSAB) which has replaced the two existing Adult Area Protection Committees (AAPC's) in Merthyr Tydfil and Rhondda Cynon Taf.

The purpose of the new arrangements is to provide strategic leadership for Adult Safeguarding, to develop and promote inter-agency joint working and effective working relationships between different services and across different authorities.

This is to ensure that we avoid the potential of failing to support adults at risk because of a breakdown in communication between us and partner organisations. Keeping people safe means we will strive to find better ways of working together.

Children's names may be placed on the Child Protection Register because of concerns about either neglect, physical, sexual or emotional abuse or a combination of two or more. The vast majority of children on the register are under the category of neglect or emotional abuse which is closely linked to rises in domestic abuse. A similar profile exists in neighbouring authorities. All registered children have multiagency child protection plans which are regularly monitored at meetings involving the parents and professionals.

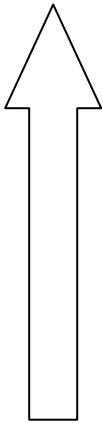
All authorities are required to have a Local Safeguarding Children Board (LSCB) and in 2011/12 work began to create a joint board across Merthyr and Rhondda Cynon Taff. This joint board became operational during 2012. The Board is well supported by key local agencies, including Health, the Police, all local authority departments and representatives of the voluntary sector. It provides leadership and critical oversight of local safeguarding responsibilities. The Board supports all organizations that provide services for children in ensuring that they have child protection policies that staff know and are appropriately trained to implement. It also monitors the safe recruitment of staff in all agencies.

What will we do?

- Develop multi-media information to inform the community of the role they can play in safeguarding children / young people and vulnerable adults together with the Safeguarding Children and Adult Boards.
- Work in partnership with Safeguarding Board partners to develop and deliver a Training Strategy and produce Adult and Child Protection Policies, which are fit for purpose and can be adapted to fit a variety of settings.

- Improve multi agency safeguarding practice to ensure that adults and children at risk are protected and kept safe from significant harm and repeat significant harm.

How will we measure success?



“Going Up”

- % of initial conferences held within 15 working days of the strategy discussion increases
- % of Child Protection Reviews carried out within statutory timescales increases
- % of looked after children reviews carried out within statutory timescales during the year increases
- % of Adult Protection referrals completed where the risk has been managed increases
- Number of frontline staff trained in safeguarding awareness

Supporting Principles of the Single Integrated Plan

Prevention and Early Intervention

The LSB must focus its efforts on prevention and early intervention, in order to break cycles of dependency and prevent the persistence of poor outcomes from one generation to the next. As a Local Service Board, we appreciate and embrace the importance of this and the need to work differently.

Sustainable Development

The Local Service Board will take into account Sustainable Development principles when making decisions in relation to priorities.

Sustainable Development is about enhancing the economic, social and environmental wellbeing of people and communities, achieving a better quality of life for our own and future generations. This is done:

- In ways which promote social justice and equality of opportunity;
- In ways which enhance the natural and cultural environment and respect its limits – using only our fair share of the earth's resources and sustaining out cultural legacy.

The overarching principles are:

- Living within environmental limits
- Ensuring a strong, healthy and just society
- Achieving a sustainable economy
- Promoting good governance
- Using sound science responsibly

Financial Sustainability of Public Services

At a time of reducing budgets and rising expectations services need to be sustainable in the longer-term. The current financial pressures and the impact of welfare reforms pose many challenges for the area, its people and communities, and the organisations that serve them. We need to ensure that we deliver efficient, effective and sustainable public services that are continuously improving within the given financial constraints. Decisions relating to service provision will need to give careful consideration to this principle.

Poverty

Poverty is a significant issue for the people of Merthyr Tydfil. The UK Government's Welfare Reforms will have a significant and adverse impact on communities, families and individuals resulting in pressures on public services and partners in the community. These changes are likely to increase demand for many public services and have an adverse impact on their finances.

The Welsh Government's Tackling Poverty Action Plan 2012-16 has 3 main objectives:

- Preventing Poverty
- Helping People out of poverty
- Mitigating the impact of poverty.

Collaboration and joint working between partners is crucial to tackling poverty so that efforts can be combined, prioritising the needs of the poorest and protecting those most at risk from poverty and exclusion.

Decisions relating to service provision will need to give careful consideration to these principles in order to mainstream the tackling of poverty through the work and decision making of public service partners.

Working with Communities

The Local Service Board embraces the role of communities working in partnership to help deliver the Single Integrated Plan. The Welsh Government's Communities First Programme and the new Communities First clusters established in Merthyr Tydfil will play a key role in helping to deliver the Vision and Priority outcomes for Merthyr Tydfil.

United Nations Convention on the Rights of the Child

Children and young people have the right to say what they think should happen, when adults are making decisions that affect them, and to have their opinions taken into account - Article 12: The United Nations Convention on the Rights of the Child.

For Merthyr Tydfil this means increasing children's, young people's and their parents' and carers' involvement in the services they receive, and over the services which are designed for them-Supporting the three pillars of the UNCRC: Protection, Participation and Provision "having a voice having a choice".

The Local Service Board is committed to the UNCRC and to its implementation via the Participation Agenda ensuring overall coordination of the UNCRC across the County Borough. We have identified this as a priority area within our Single Integrated Plan and it also supports the Welsh Government's core aims for children and young people, in particular:

Core Aim 5 - Children and young people are listened to, treated with respect and are able to have their race and cultural identity recognised.

Child Poverty Strategic Objective 3 - to reduce the inequalities that exist in health, education and economic outcomes for children living in poverty, by improving the outcomes of the poorest.

Equal Opportunities

We will promote equality throughout all aspects of the Plan. This is about ending discrimination, ensuring equality of opportunity and that all parts of our population can live together alongside each other with mutual understanding and respect, where every person has an equal chance to participate and has equal access to services.

Social Inclusion

Our plans will seek to ensure that no-one is disadvantaged because of poverty, geography or access to services.

The Welsh Language

We shall promote the Welsh language across the county and ensure that the Welsh and English language are treated equally.

Our Enabling Strategies to support the Single Integrated Plan

Engagement Strategy

The Local Service Board recognise there is a strong tradition of involving service users, third sector, carers and young people in the strategic development of services within the County Borough of Merthyr Tydfil. For example, it is one of only two Boroughs in Wales to have a Youth Mayor and was the pioneer for bringing forward the voice of community members into scrutiny. In addition there are a range of individual groups and organisations that regularly consult or engage with their respective service users as a means of informing service improvement. For example, tenant participation undertaken by local Housing Associations, Cwm Taf Health Board Public Forum and Stakeholder Reference Group and the Police and Communities Together (PACT) meetings.

However it is recognised that there are gaps and that there needs to be a better co-ordinated and joined up approach towards consultation and engagement in the Borough. It is also increasingly accepted that making citizen consultation and engagement integral to service delivery is needed in order to improve people's experience of using services and ensure that services delivered are of the highest quality.

The approach taken in Merthyr Tydfil to developing the Single Integrated Plan and the Citizen Engagement Strategy will build on the excellent partnership working that has been achieved in the last few years through the key strategic partnerships and the Local Service Board. To avoid duplication, optimise use of resources and ensure sustainability this Strategy will encourage partners to work together to make a measurable difference to their citizens and communities.

The full Engagement Strategy to support not only our Single Integrated Plan, but also on- going engagement and consultation with our citizens is included in Appendix 1 of this Plan.

Performance Management- Monitoring the progress of our Single Integrated Plan

Progress on our Single Integrated Plan will be monitored on a regular basis via the Local Service Board.

We have developed templates for each of our priority areas, adopting a Results Based Accountability (RBA) approach. These templates will now be updated and will identify the actions /projects that will be delivered and more importantly the impact the projects are actually having. Within each of our priority areas we have identified a number of key measures and we will regular monitor our measures to see if our actions are making a difference.

The Local Service Board will rely on performance management support through Merthyr Tydfil County Borough Council's Partnership Team, using the appropriate performance management system.

A full review of the Single Integrated Plan will take place on an annual basis, along with the publication of an Annual Report on progress and we will identify any changes that are needed to the Plan in order to reflect changing need.

Information Strategy

We have already worked with our partners to identify and understand the level of need in Merthyr Tydfil through our Unified Needs Assessment.

This is not just about looking at our data and performance, as identified above, but includes listening to our citizens, our service users and front line staff, understanding how organisations are working together, how we commission our future services and direction to address need and the changes in workforce planning and resource allocation required to move to a more preventative approach.

We will also need to identify the needs of our communities at a more local level, within smaller geographical areas within the County Borough.

As LSB partners, we will need to agree to work together to share with each other, the information that we hold as individual organisations and the information we hold with each other. In order to do this it is important that we develop appropriate systems in order to identify, collect and analyse information on a regular basis

This will be addressed as a priority for the Merthyr Tydfil LSB in the first year of the implementation of the Single Integrated Plan. We will identify key individuals within LSB partner organisations to take this forward.

Local Development Plan

The Merthyr Tydfil Local Development Plan (LDP) sets out the Council's priorities for the development and use of land in the County Borough and its policies to implement them over the fifteen-year plan period between 2006 and 2021. All policies and proposals contained within the LDP are designed to interact and it is therefore important that the Plan is read as a whole. Whilst the LDP is a free standing document that aims to give clarity on a variety of issues pertaining to Merthyr's future development, its proposals invariably cascade from, and are inextricably linked to wider national, regional and sub-regional policies together with the plans and strategies of neighbouring local authority areas. Integrating the policy stance of the Plan is therefore paramount in ensuring that local development helps fulfil broader economic, social and environmental objectives whilst ensuring the effective delivery of local services and facilities that meet the needs of a 21st Century society.

Certain elements of the Single Integrated Plan have development and land use implications that will need to be facilitated through the Merthyr Tydfil Local Development Plan (2006-2021). It is therefore important to have an integrated approach between both plans and compatibility between objectives.

A number of the LDP's strategic objectives reflect the supporting principles and priority outcomes of the SIP, particularly sustainable development; early intervention and prevention; those relating to the economy and jobs, affordable housing and improvements to the wider environment to benefit healthy lifestyles and community safety.

Scrutiny

The Local Government (Wales) Measure 2011 places a new requirement on local authority scrutiny committees to scrutinise designated public service providers.

Wider public service scrutiny will provide the necessary 'teeth' for elected members to hold both their own Council and the LSB partners to account for their contribution towards the delivery of the Single Integrated Plan. It is important to point out that scrutiny will focus on the LSB's performance as a whole rather than concentrating on individual member organisations of the LSB.

It will need to focus on the added value brought about by collaborative working and how this translates to partnership performance and population outcomes. Scrutiny should be used as a means to improve performance through evidence-based challenge.

Future scrutiny arrangements are currently being developed as part of the implementation of the Single Integrated Plan.

**Engagement Strategy
to support
MERTHYR TYDFIL SINGLE INTEGRATED PLAN
(2013 – 2017)**

CONTENTS

- 1 Background**
- 2 Aim**
- 3 Approach**
- 4 Framework**
- 5 Accountability**

Appendix 1 Key Drivers and Influences

Appendix 2 Steps and Timescales

Bibliography

1. BACKGROUND

The Local Service Board recognise there is a strong tradition of involving service users, third sector, carers and young people in the strategic development of services within the County Borough of Merthyr Tydfil. For example, it is one of only two Boroughs in Wales to have a Youth Mayor and was the pioneer for bringing forward the voice of community members into scrutiny. In addition there are a range of individual groups and organisations that regularly consult or engage with their respective service users as a means of informing service improvement. For example, tenant participation undertaken by local Housing Associations, Cwm Taf Health Board Public Forum and Stakeholder Reference Group and the Police and Communities Together (PACT) meetings.

However it is recognised that there are gaps and that there needs to be a better co-ordinated and joined up approach towards consultation and engagement in the Borough. It is also increasingly accepted that making citizen consultation and engagement integral to service delivery is needed in order to improve people's experience of using services and ensure that services delivered are of the highest quality.

This view is reflected in the recent Welsh Government guidance for Local Authorities, "Shared Purpose, Shared Delivery", which states that the "Citizen Voice can be a powerful tool for understanding where system failings are occurring, where lack of co-ordination between service providers is wasting resources without improving outcomes, for redesigning services around peoples needs, and for scrutinizing service effectiveness".

At the same time, the Welsh Government requires each Local Authority area in Wales to produce a new Single Integrated Plan, by March 2013. This will replace the previous Health, Social Care & Wellbeing Strategy, Children & Young People's Single Plan, Community Safety Plan and Community Strategy. The Single Integrated Plan guidance underlines its commitment to listening to citizens by stating that the plan must have a sharper focus on citizen consultation and engagement.

The approach taken in Merthyr Tydfil to developing the Single Integrated Plan and the Citizen Engagement Strategy will build on the excellent partnership working that has been achieved in the last few years through the key strategic partnerships and the Local Service Board. To avoid duplication, optimise use of resources and ensure sustainability this Strategy will encourage partners to work together to make a measurable difference to their citizens and communities. It is clear "that no one programme or agency can do it alone"³¹. As well as encouraging statutory organisations to work more closely together in order to engage with citizens, the Strategy also recognises that the third sector is key to supporting and bringing forward the voice of citizens. This is reflected by the Welsh Government where it states:

³ Friedman, M, 2005, Trying Hard is Not Good Enough

“We recognise that the Third Sector is...a powerful manifestation of people’s active engagement and participation in society as citizens”⁴ We are all Citizens of this County Borough and throughout this strategy “Citizen” may refer to individuals, families, front-line staff, communities and/or communities of interest.

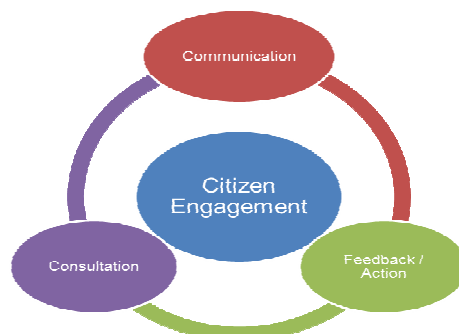
2 AIM – *Doing it differently for the right reason*

The aims of the Merthyr Tydfil engagement strategy are:

- To align and combine public services organisations’ current citizen engagement objectives and practices as a cohesive framework, in order to prevent duplication, maximise resources and enhance sustainability.
- To ensure that the citizen voice is the driver of service improvement so that everyone has the opportunity to be involved in shaping and influencing the services they receive, i.e., “Having a Voice, Having a Choice”⁵.
- To ensure consultation opinions and results are widely disseminated.

3 APPROACH

All aspects of this Strategy and framework will be a means of achieving meaningful citizen engagement, which is linked by three strands that all work together.



This citizen engagement model is underpinned by the National Principles for Public Engagement in Wales and the Children & Young People’s Participation Standards for Wales.

Adopting the above approach, will enhance service planning and delivery but at the same time will prove to be a rewarding experience for citizens. This new way of working will not be achieved overnight, and will be introduced as a stepped change approach.

The Strategy and framework will ensure that targeted citizen engagement informs the process of service improvement and development and will strive to expand and learn from local and regional best practice models. For example, the Kafka Model, used to improve services by engaging with victims of domestic abuse in Merthyr Tydfil and Rhondda Cynon Taf, is considered to be an exemplar of effective practice.

⁴ The Third Dimension: Empowering Active Citizens to Contribute to Wales (Welsh Assembly Government 2007).

⁵ Children & Young People’s Participation Standards for Wales

The following steps will be taken in order to develop and implement the Merthyr Tydfil Citizen Engagement Strategy and framework (see Appendix 2 for details of steps and timescales):

Step 1: Adoption and sign up of Engagement Strategy by March 2013

Step 2: Framework and Hub Development

Step 3: Implementation

Step 4: Sustainability (post January 2015)

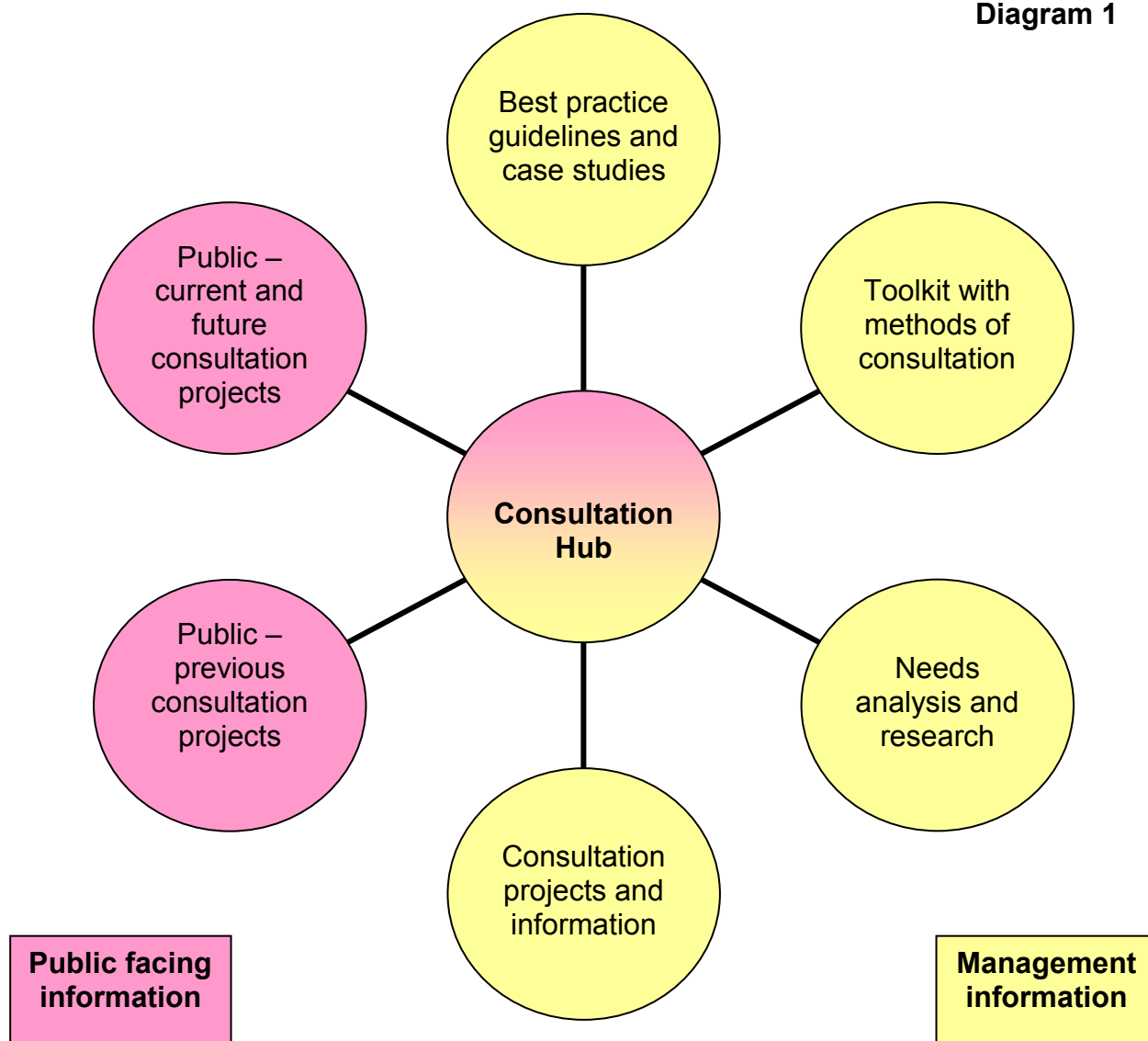
4 FRAMEWORK

A key component of this strategy is a Merthyr Tydfil Borough-wide framework to support consultation and engagement, which comprises of:

- 4.1 A consultation hub – which will hold information which will be available to partners as a shared local resource for ongoing needs analysis, (data observatory), intervention design and impact evaluation across the whole strategic partnership planning arena, as outlined in diagram1 below.

The hub will ensure a more effective, centralised, consistent and supported method of citizen consultation and engagement, both formal and informal, and provide a route map for individuals wishing to engage in the process of service improvement.

Diagram 1



4.2 A supporting toolkit – a resource of tools and methods available to partners for consultation and engagement and evaluation which will be based on best practice examples

4.3 Training – a range of learning and networking opportunities for partners and citizens to encourage sharing of knowledge, skills and expertise.

5 ACCOUNTABILITY

5.1 Monitoring and Reporting

An outcomes based approach (Results Based Accountability) for monitoring and reporting will be introduced in support of this strategy, to measure its effectiveness in terms of better engagement and efficiency savings.

Reporting via the submission of report cards to the Local Service Board will be required to ensure that we incrementally improve on our citizen engagement activities.

The Local Service Board will determine the structure and management of reporting, and will ensure feedback to citizens on the outcomes of consultation and engagement activity.

5.2 Evaluation and Review

The Local Service Board will evaluate progress to ensure greater community involvement, engagement and influence in decision-making to effect positive change.

Through the stepped change approach (section 4), a continued learning cycle will be embedded to ensure that all engagement and consultation activity is purposeful.

“The only way to get people to adopt constant improvement as a way of life in doing daily business is to empower them”⁶ and we feel that this strategy, with supportive framework and toolkit will help us meet the challenge set out in ‘Shared Purpose – Shared Delivery’.

⁶ The Lightning of **EMPOWERMENT** by William C **Byham**, Ph.D. with Jeff **Cox** (1991)

KEY DRIVERS AND INFLUENCES

This strategy and framework recognises significant activity, both nationally and locally, undertaken to improve citizen voice and engagement. Some of this is featured below:

1 Main drivers

- Shared Purpose - Shared Delivery, Welsh Government, (10 January 2012)
<http://wales.gov.uk/docs/dpsp/consultation/100110sharedpurposeen.pdf>
- Programme for Government (2011) Shared Outcomes
<http://wales.gov.uk/docs/strategies/110929fullen.pdf>

2 Influences (Local)

- Final Report from Participation Cymru to Merthyr Tydfil Local Service Board on the Merthyr Tydfil Consultation, Engagement and Communications Project, 18.03.10
- Rhondda Cynon Taff & Merthyr Tydfil Joint LSB Consultation & Engagement Project, October 2012 – December 2014
- Communities First Community Engagement Plans, which are required by the Welsh Government to be completed by 29 June 2012
- Merthyr Tydfil Compact Code of Practice on Consultation & Engagement
- Children & Young People's Participation Toolkit and Kitemark (Merthyr Tydfil)
- Making the Connections Project, April 2012 – March 2015 (as part of the Welsh Government / LSB service development to enable better citizen focussed public services)

3 Influences (National)

- National Principles for Public Engagement in Wales (Participation Cymru)
<http://www.participationcymru.org.uk/principles>
- Children & Young People's Participation Standards for Wales (Having a Voice, Having a Choice)

STEPS AND TIMESCALES

Step 1: Adoption and sign up of engagement strategy

- 1.1 the agreement and promotion of a Borough-wide vision to realise a unified approach to citizen engagement, i.e., to ensure that the voice of citizens and communities is used as a force for improvement
- 1.2 seeking active buy-in from partners
- 1.3 the harnessing of intelligence to develop the bigger picture, for example of the opportunities available for communities and communities of interest to have their voices heard
- 1.4 continued monitoring and reporting to the LSB of the framework as it develops
- 1.5 formally consult on and seek approval for the engagement strategy as outlined in “Shared Purpose - Shared Delivery” (Welsh Government guidance for the Single Integrated Plan)
- 1.6 submitting the Engagement Strategy to Welsh Government alongside the Merthyr Tydfil Single Integrated Plan

Step 2: Framework and Hub Development

- 2.1 the employment of a Consultation and Engagement Project Officer and Assistant under the Merthyr Tydfil & RCT joint LSB’s proposal
- 2.2 the development of a borough-wide engagement map to support the hub and inform the toolkit
- 2.3 continued active promotion and engagement of citizens in the development of the engagement strategy to ensure their engagement is meaningful for them and public service organisations
- 2.4 development of the hub and toolkit

Step 3: Implementation

- 3.1 formal monitoring and reporting on the effectiveness of consultation and engagement using an outcomes based approach

Step 4: Sustainability

- 4.1 LSB partners to support continued funding and on-going development of the consultation hub
- 4.2 LSB partners to monitor continued usage to update versions of the supporting toolkit/best practice guide
- 4.3 a buy-in to continued collaborated consultation and engagement from all partners