



Date of issue: Monday, 25 November 2013

MEETING OVERVIEW & SCRUTINY COMMITTEE

(Councillors O'Connor (Chair), Bal, Davis, Hussain,

Malik, M S Mann, Minhas, Nazir and Smith)

DATE AND TIME:

TUESDAY, 3RD DECEMBER, 2013 AT 6.30 PM

**VENUE:** 

LANGLEY PAVILION COMMUNITY CENTRE,

LANGLEY ROAD, SLOUGH, SL3 8BS

**DEMOCRATIC SERVICES** 

**GREG O'BRIEN** 

**OFFICER:** 

(for all enquiries)

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### NOTICE OF MEETING

You are requested to attend the above Meeting at the time and date indicated to deal with the business set out in the following agenda.

**RUTH BAGLEY** 

055-

Chief Executive

**AGENDA** 

PART 1

AGENDA REPORT TITLE PAGE WARD

Apologies for absence.

**CONSTITUTIONAL MATTERS** 

1. Declaration of Interest



All Members who believe they have a Disclosable Pecuniary or other Pecuniary or non pecuniary Interest in any matter to be considered at the meeting must declare that interest and, having regard to the circumstances described in Section 3 paragraphs 3.25 – 3.27 of the Councillors' Code of Conduct, leave the meeting while the matter is discussed, save for exercising any right to speak in accordance with Paragraph 3.28 of the Code.

The Chair will ask Members to confirm that they do not have a declarable interest.

All Members making a declaration will be required to complete a Declaration of Interests at Meetings form detailing the nature of their interest.

2. Minutes of the Last Meeting held on 12th November 1 - 6 2013

### **SCRUTINY ISSUES**

Member Questions

(An opportunity for Committee Members to ask questions of the relevant Director/ Assistant Director, relating to pertinent, topical issues affecting their Directorate – maximum of 10 minutes allocated).

- 4. Childhood Obesity Meeting 4: "What is the role of 7 12 GPs and Primary Care"
- 5. Joint Strategic Needs Assessment (JSNA) Progress 13 70
- 6. Forward Work Programme 71 74
- 7. Attendance Record 75 76
- 8. Date of Next Meeting

14<sup>th</sup> January 2014

### Press and Public

You are welcome to attend this meeting which is open to the press and public, as an observer. You will however be asked to leave before the Committee considers any items in the Part II agenda. Special facilities may be made available for disabled or non-English speaking persons. Please contact the Democratic Services Officer shown above for furthers details.



Overview & Scrutiny Committee – Meeting held on Tuesday, 12th November, 2013.

Present:- Councillors O'Connor (Chair), Davis, Hussain, M S Mann and Smith

(Vice-Chair)

**Apologies for Absence:-** Councillor Malik and Nazir

### **PART I**

### 35. Declaration of Interest

None.

36. Minutes of the Last Meeting held on 7th October 2013

**Resolved -** That the minutes of the last meeting held on 7<sup>th</sup> October 2013 be approved as a correct record.

### 37. Member Questions

There were no questions received from Members.

38. Childhood Obesity - Meeting 3: "What is the role of schools and how can we support them? How can we encourage greater physical activity amongst children and young people?"

The Committee considered the third report in connection with the childhood obesity review, containing information relating to the work going on in schools and through the Council on improving nutritional understanding and increasing physical activity amongst children and their families.

Schools had a delegated budget to cover school catering for which individual governing bodies had responsibility. In the Borough there was currently a mix of catering services including packed lunch only schools, dining centres where food was transported from one site to another, and those who have full production kitchens. A major provision was through the central contract (running until 2015) between Cambridge Education and ISS Education, providing the meals for 16 primary schools (1 packed lunch only). The report gave details of the typical meal make-up under the central contract requirement, which cost £1.75 to £2.00. In addition to school lunch provision, there were 18 breakfast clubs and 10 after school clubs in Slough Primary Schools. Census data and figures from the annual school food survey showed that 2389 (20%) of pupils were entitled to free school meals but only 75% took up the offer. There were a number of projects linked to the school food survey aimed at improving school food and now the School Food Plan, supported by the Government, had been published setting out action points for headteachers on how to transform what children eat at school and how they learn about food.

Arising from discussion and answers to questions given by Joanne Ricketts, the Council's Nutritional Adviser, the following points were made:

- The Council was rolling out to schools (all but one had signed up) a software package which enabled parents to enter basic identification data and check the eligibility of their children for free school meals, usually with a same day result. The reasons why some families did not take up the offer of free school meals offered were not really known
- There was lots of advice and information available for caterers, parents and schools on healthy packed lunches. Packed Lunch workshops were organised, leaflets were available and lunchtime controllers were also engaged in getting the message across. The concern about packed lunches was generally about balance and ensuring a content of protein, a starchy item and fruit or vegetable.
- The government plans to introduce universal school meals for all Key Stage 1 children would be difficult to manage, as while many of Slough's primary schools have increased classroom capacity, there has been no corresponding increase in kitchen or dining area facilities. It was hoped that by clever timetabling and enlisting the assistance of the central contractor, workable arrangements could be achieved.
- The central contract had been very successful in terms of providing good quality, nourishing meals at a stable price for the schools involved. It was hoped that more schools would join when the contract came due for renewal in 2015 but the approach of the Academies and Free Schools was unknown at this stage.

The report went on to outline the role of the Slough School Sport Network (SSSN) to increase the number of PE and Sport opportunities for young people in Slough, to help schools to provide and ethos of physical education and healthy lifestyles, and engage all young people in physical activity. The SSSN provides the School Games programme (Government agenda) offering opportunities for all students to take part in competitive school sport, at a variety of levels. Last year, the School Games for primary, secondary and special schools in Slough provided 35 competitive events and offered 20 different sports across Years 1 to 13. Slough won 39% of the Level 3 county competitions.

The Committee heard from Mary Sparrow, Head of Wexham School Specialist Sports College and Chair of the SSSN, and Laura Brookstein, Network Manager, on detailed aspects of the programmes provided and answered questions from members. While the School Games were important, there were many other benefits provided by the SSSN, including:

- high quality, market leading, continual professional development for teachers
- National Governing Bodies of Sport specialist coaching programmes
- Healthy Lifestyles and advice on Change4Life national initiatives
- the facility for schools to share good practice and network

 assistance to schools on external funding bids eg. Olympic Legacy funding, Sportivate etc.

The Committee noted that SSSN played an important role in broadening the range of sports schools could offer, with particular help for smaller schools on making the best use of the space and funding available to them. Girls were getting more involved with sports now there was a wider range on offer, dance being particularly popular. Schools generally maintained the two hours of PE per week recommended for the curriculum, supplemented by pre-school, lunchtime and after school activities. Most schools with pitches or court facilities made these available for community use when not required by the school.

The Committee turned to consider Council programmes to improve the uptake of physical activity, what was on offer outside of school and how the different, relevant services within the Council linked together. There were a number barriers affecting children and young people's choice and opportunity to engage in sport and physical activity, including gender and cultural issues, social and family influences, cost and dislike of team sports. However, the wide range of programmes and opportunities available was aimed at catering for all interests. Alison Hibbert, the Council's Head of Culture and Sport, expanded on matters in the report and answered questions from members. It was noted that:

- While there were over 90 active sports clubs in the area catering for children and junior members, the clubs (mostly run by volunteers) needed to be supported to continue, particularly in the light of more onerous measures that now had to be in place when working with children and young people.
- Some programmes offered were very popular, for instance, the Swim Skool programme was oversubscribed. The free swimming programme was now only available to over 60s.
- An area where there was felt to be scope for a lot more work was around encouraging many more children to walk or cycle to school to increase physical activity. This included work with parents to allow this to happen, the children themselves, and physical measures to ensure safe walking and cycling was possible. Having the right emphasis in School Transport Plans could assist in this and it was noted that the Neighbourhoods and Community Services Scrutiny Panel had considered the issue in early 2013, and a working group had been set up to consider programmes of work which could increase the use of sustainable transport during the school run.
- The Slough Physical Activity and Sport Strategy 2013-15 was about to be published, which placed emphasis on the collaborative approach required between organisations in the public, private and voluntary sectors to meet the needs of Slough for physical activity and sport in order to make Slough a healthier and more active place to live. Members requested they be sent copies of the Strategy when it had been finalised.

### Resolved -

- (a) That thanks be extended to all who had contributed and participated in the debate, noting the excellent work taking place in schools in the Borough and through Council programmes to improve nutritional understanding and increase physical activity levels.
- (b) That the information provided in the Committee report and arising from the discussion at the meeting be drawn on to compile the final report for the obesity review.

### 39. Finance and Performance Report: Quarter 2 2013-14

The Committee considered a report setting out the Council's overall performance from delivery of service to financial management covering the period up to and including September 2013.

The Council was forecasting an overspend of £0.7m as at month 6, a reduction from the £1.1m reported after month 3, and action was continuing to ensure this position is mitigated in full or in part by the end of the financial year. The main area showing an overspend is the children and families service area, forecast to exceed budget by £1.7m, but offset by savings in other areas as detailed in an appendix to the report. Of the £9.4m savings for 2013-14, the majority (66%) were showing as green with just £1.5m (16%) rated red at this point in the year. The capital programme was currently showing a 16% spend to date but this was forecast to rise to 70% by the year end, a considerable improvement on previous years.

On Council performance, 32 performance indicators had been RAG rated, with the majority (21 or 66%) at green and (6 or 19%) at amber. The Committee reviewed the 5 (16%) measures that were rated red, in particular the percentage of initial assessments completed and authorised within 10 working days. While this remained of concern, an audit of cases had shown a slow but gradual improvement taking place, with emphasis being placed on the quality of the assessment made rather than speed with which it was carried out.

A request was made that the performance report due for Quarter 3 should detail the progress of works/spending on the Housing Revenue Account Capital Programme in 2013-14. In relation to the Council's Gold Projects, members questioned the officers on a number of detailed matters. The revised end date for the Learning Disabilities Change Programme of March 2016 was noted, as was the expected commencement of an Ofsted inspection of the Safeguarding Improvement Board. The Committee recognised the School Places in Slough Expansion Programme April 2013 – March 2014 was a significant challenge for the Council, given the finite supply of land for development in the Borough. A new Gold Project was to be launched for the expansion of School Places in the longer term (over the next eight years). The Committee was referred to a report to the Education and Children's Services Panel for detailed figures but noted that while approximately 24% of places in Slough Secondary Schools were taken by pupils form outside the town, a similar number from Slough attended schools

in neighbouring areas. Further information was requested regarding the future of the shops affected by the Britwell Regeneration, the total number of children looked after (and specifically those in residential placements), and progress with the Housing Department re-organisation.

### Resolved -

- (a) That the proposed sale of Parlaunt Road, approved by the Cabinet in November 2012, be noted along with the utilisation of the anticipated capital receipt to support the Housing Revenue Account.
- (b) That the latest forecast financial information for the 2013-14 financial year; the Council's performance against the balanced scorecard indicators; and the Council's performance on 'Gold' projects during 2013-14 be noted.

### 40. Economic Development Strategic Plan for Growth 2013-18

Consideration was given to a report presenting the Economic Development Strategic Plan for Growth 2013-18. This Strategic Plan was due to be published by the Council and comments were invited on the activities illustrated in the Plan and the proposals for the Council, its partners and key stakeholders to build resilience and grow the local economy. The priorities for achieving growth were:

- a competitive workforce
- Business generation, retention and inward investment
- Physical and transport infrastructure

Arising from answers to questions, it was noted that the Council would be continuing to work with Aspire, the employer led public-private partnership to engage business with schools and the wider community, concentrating particularly on the element of the scheme supporting local residents into employment and skills development. On apprenticeships, the East Berkshire College worked with employers in the town to increase the number of apprenticeship opportunities and promote them to young people as a viable alternative to more academic routes to further education. The Council (with Arvato) had its own apprenticeship programme leading to a level 2 or 3 NVQ in business administration.

From the data in Appendix 1 to the Strategy, the high proportion of economically inactive females was noted and a piece of work was to be undertaken on this. Generally, services and programmes were aimed at being available for and reaching all sections of the community, for example the provision of job clubs in community centres across the Borough. A strand of the Aspire programme focused on business support and ran start-up sessions for small businesses. Use of the small business units provided on the Plymouth Road estate was continuing at a high level with virtually all units currently let.

The Committee supported the Strategic Plan as set out and looked forward to reports on progress in the future.

### Resolved -

- (a) That the direction the Economic Development Strategic Plan for Growth is taking on supporting the local economy to grow and prosper be endorsed.
- (b) That the Slough Wellbeing Board and the Cabinet be recommended to approve the Plan.

### 41. Forward Work Programme

The Committee considered the current work programme for the Committee for 2013/14. It was noted that an item "Bus Station: Lessons Learned" had been added to the agenda for the January 2014 meeting.

**Resolved -** That the work programme be noted.

### 42. Attendance Record

**Resolved** - That the Members' attendance record be noted.

### 43. Date of Next Meeting

The date of the next meeting was confirmed as 3<sup>rd</sup> December 2013, and in accordance with wishes to use alternative venues, would be held at Langley Pavilion Community Centre, Langley Road, Slough.

Chair

(Note: The Meeting opened at 6.30 pm and closed at 9.05 pm)

### **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Overview & Scrutiny Committee **DATE:** 3 December 2013

**CONTRIBUTORS:** Dr Shaik (Slough Clinical Commissioning Group)

Jean Cameron (Development Manager, Children's Centres) Sarah Parsons (Locality Manager Slough, Children and Families Services, Berkshire Healthcare NHS Foundation

Trust)

Dr Reddy (Programme Manager, Public Health)

(For all enquiries) (01753) 875657

WARD(S): All

**PORTFOLIO:** Councillor James Walsh (Commissioner for Health and

Wellbeing)

Councillor Pavitar Mann (Commissioner for Education and

Children)

### PART I CONSIDERATION & COMMENT

### <u>CHILDHOOD OBESITY REVIEW (MEETING 4): What is the role of GPs and Primary Care?</u>

### 1 Purpose of Report

To provide the Committee with information relating to the role played by GPs, dietitians, health visitors, school nurses and children's centres play in tackling childhood obesity.

### 2 Recommendation(s)/Proposed Action

That the Committee consider the information provided and garnered through questioning at the committee meeting in order to form conclusions on the work currently going on around primary healthcare and in children's centres to tackle childhood obesity.

### 3 Slough Wellbeing Strategy Priorities

### Priorities:

 Health and Wellbeing – enhancing positive health and wellbeing throughout life, encouraging healthy eating and increased physical activity, improving the emotional and physical health of children of all ages from 0 to 19 years.

### 4 <u>Joint Strategic Needs Assessment (JSNA)</u>

The JSNA for Slough in 2009, 2010 and 2011/12 all noted the issue of childhood obesity as a priority.

### 5 Other Implications

### (a) Financial

There are no financial implications of proposed action.

### (b) Risk Management

Risk	Mitigating action	Opportunities
Legal	None	None
Property	None	None
Human Rights	None	None
Health and Safety	None	None
Employment Issues	None	None
Equalities Issues	None	None
Community Support	None	None
Communications	None	None
Community Safety	None	None
Financial	None	None
Timetable for delivery	None	None
Project Capacity	None	None
Other	None	None

### (c) <u>Human Rights Act and Other Legal Implications</u>

There are no Human Rights Act Implications relating to this report.

### (d) Equalities Impact Assessment

There is no identified need for the completion of an EIA related to the content of this report.

### 6 The role of Slough Clinical Commissioning Group (CCG) in tackling childhood obesity in the borough

- 6.1 A January 2013 report from the Royal College of Physicians called on the medical profession to lead from the front in delivering a solution to the issue of obesity (both childhood and adult), with GPs playing 'a pivotal role not just in obesity prevention, but also in management'. Whilst there has been discussion around the need for GPs with a special interest in weight management, the underlying principle of GPs leading on this issue is around making every contact count. But this is a challenging issue to raise with children and families and needs to be handled in a sensitive and appropriate way.
- 6.2 At present the Slough CCG is not involved in any specific programmes of work, with childhood obesity recognised as an important, but somewhat neglected area in primary care.
- 6.3 The current pathways followed by GPs refer patients presenting with high BMI levels to paediatric dietitians following an initial assessment including blood tests. If needed patients are referred to Community Paediatricians.

- 6.4 There are number of areas where the CCG would be looking to strengthen its working practices, for example:
  - following a referral from the GP to a paediatric dietitian or community paediatrician, a robust system of monitoring and following up on progress needs to be introduced;
  - that all GPs surgeries introduce a system of regularly having health checks for children up to 16 years of age. A similar programme of work is done in schools, but GPs have limited knowledge of the results of this or how issues are followed up. A GP surgery-based programme would make it easier to address the problem in its initial stages, with nurses providing advice on health diets and lifestyles. Such a system would also enable closer monitoring of children at a high risk of obesity such as those with obese parents;
  - the need to have closer liaison with public health, health visitors and school nurses.
     The strengthening of this relationship would ensure children and families at risk of obesity were identified earlier and the issue addressed jointly, including the education of parents on the benefits for the whole family of healthy eating and exercise.
- 6.5 The Slough CCG has launched a website for parents in Slough:

  www.childhealthslough.com. This website can be used to introduce information on childhood obesity for parents. In addition, leaflets on the issue could be made available in GP surgery waiting rooms, and the CCG could organise events and children's centres to engage with parents on the issue. Effective publicity of the issue, educational events, and information points would be key to the success of these programmes of work.

### 7 The role of health visitors and school nurses in tackling childhood obesity

- 7.1 The primary role of school nurses and health visitors in dealing with issues of childhood obesity is around prevention and health promotion to children and their families and individual support and signposting on. Starting antenatally with advice about breastfeeding and then onto healthy weaning and the importance of a balanced diet as per start 4 life, promoting the healthy start programme to those eligible and Vit D to all who would benefit. The health visiting staff are trained to baby friendly standard to offer support to breastfeeding mums; and both Health Visitors and School Nurses are trained to effect behaviour change and positive parenting whilst delivering the healthy child programme to support obesity prevention.
- 7.2 Both school nurses and health visitors refer those identified with a need directly to community dieticians or to GPs, CAMHS, or to community paediatricians if the case involves complex development issues in addition to obesity.
- 7.3 The school nurse team undertakes the childhood measuring programme at Year 1 and Year 6, and informs parents of the outcome of the Year 1 screening, offering support if required. We do not have a specific programme to follow up in supporting children and families, but offer regular weighing, dietary advice and general health promotion linking with the change4life programme.
- 7.4 In terms of multi-agency working, School Nurses and Health Visitors support the Food Awareness week when possible and refer children and families to specific weight management programmes when available.

### 8 The role of children's centres in tackling childhood obesity

- 8.1 The 10 children's centres across Slough provide a 'one-stop shop' in a local neighbourhood for services for families with young children.
- 8.2 Within the borough there are 2 types of Centre:
  - Full Service Centre offering a full range of services plus full day care (8am to 6pm childcare for under 5s, crèches, pre-nursery groups and out of school clubs)
  - Graduated Centre offering a full range of services plus sessional childcare (crèches and pre-nursery groups)
- 8.3 The Centres offer a comprehensive portfolio of services in partnership with a wide range of other agencies:
  - health services, ante-natal and post natal support, speech and language therapy, Healthy Start vitamins, Food Bank vouchers
  - Stay and Play groups, music and story times, Play & Learn groups and targeted Family Learning
  - flexible childcare with education for children from 3 months upwards
  - support for children with learning difficulties and disabilities and their families
  - free Bookstart packs and lending services for library books and toys
  - help and advice on a wide range of family matters
  - healthy eating workshops and cookery tips for feeding the family
  - adult education and training, plus advice and guidance for adults seeking employment, and lots more.
- 8.4 The children's centres' provide the facilities within which health visitors and other programmes of work to tackle obesity are run. This support is essential to the early identification of risks, and the establishment of good habits which can help prevent obesity as a child develops.
- 8.5 The broad nature of the children's centres means that the bigger issues that have an impact on the risk of obesity can be identified, such as self esteem of the parents, adult skills, budget management, or cooking facilities available at home. This work begins during pregnancy and the importance of breastfeeding and weaning programmes are extremely important life practices for the future health of the child.
- 8.6 Alongside facilitating the work of others such as health visitors, the children's centres are also involved in directly providing services such as the provision of meals for children within their care throughout the day, as well as providing role model practice to assist parents in caring for their children such as cooking schools.
- 8.7 All the children's centres in the borough have signed up to the Smiling for Life initiative which promotes healthy snacks, as well as the Catering for Health Award that covers the provision of healthier food choices. The centres follow the national Early Years Foundation Stage framework, which supports children from birth to 5

across all areas of development. Through this, children are taught about healthy eating choices and about the importance of physical exercise. In 2014 the children's centres will be involved in the borough-wide Slough Walks and Talks initiative aimed at getting young children to be more active in everyday life.

- 8.8 The Children's Centres and other early years providers in Slough, including some schools, are also involved in providing 15 hours free nursery education provision for the most disadvantaged 2-year-olds in the borough. The eligibility criteria are the same as those that apply to Free School Meals, and so the Children's Centres are providing free meals to the 2-year-olds who attend for their free nursery education hours at meal times. The Centres also use the 2-year-old programme to provide bespoke family learning through engagement with low income families. The family learning programmes address a number of specific issues relating to parenting capacity and other family and environmental issues that may be affecting the children's wellbeing and development, including factors that may lead to unhealthy eating habits in adulthood.
- 8.9 A key aspect of ensuring children's centres can play an effective role in the development of the borough's children through supporting parents is establishing the process of registering with a children's centre as a matter of course, similar to GPs. This will ensure that the facilities and advice are available to those who need it most.

### 9 **Public Health Programmes**

- 9.1 Community dietitians are commissioned by Public Health to provide early years and school-based interventions around prevention and treatment for childhood obesity. The Committee discussed many of these programmes of work when they looked at the role of schools in tackling childhood obesity, for example:
  - Let's Get Going provided through Berkshire Youth a programme which is
    due to start in a number of primary schools in the borough. This programme
    is a 10 week, holistic programme looking at nutrition, physical activity,
    behavioural change and after-school healthy lifestyles club aimed at children
    in years four to six. These sessions are also available to parents of children
    with behavioural or weight issues, as well as children with normal weight who
    can use the programme to enhance their fitness and activity.
  - Mission Healthy Eating a programme of work specifically aimed at improving the nutritional quality of packed lunches and promoting school meal uptake.

### 10 **Conclusion**

10.1 This report provides information on the work going on across the primary healthcare sector and in children's centres to tackle the issue of childhood obesity in Slough, in order to inform the Committee's discussions on the issue.

### 11 **Background Papers**

1 - Royal College of Physicians – Action on obesity: Comprehensive care for all (Report of a working party, January 2013)

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### SLOUGH BOROUGH COUNCIL

**REPORT TO:** Overview and Scrutiny Committee.

**DATE:** 3<sup>rd</sup> December 2013.

**CONTACT OFFICER:** Angela Snowling Consultant in Public Health.

(For all Enquiries) (01344) 352741

WARD(s): All

PART I

### **INFORMATION**

### Joint Strategic Needs Assessment (JSNA) Redesign Process 2013 - 2014

### 1. Purpose of Report

To provide an update on the progress made to date on the redesign process to deliver the web based Joint Strategic Needs Assessment (JSNA).

### 2. Recommendation(s)/Proposed Action

- 2.1 The Overview and Scrutiny Committee is requested to:
  - a. note the report; and
  - b. consider how Councillors can be engaged in the process of using the JSNA ward profiles to inform their case work.

### 3. Slough Wellbeing Strategy Priorities:

- 3.1 The JSNA redesign process supports the delivery of:
- 3.2 The requirement to conduct a JSNA to inform the Slough Joint Wellbeing Strategy and subsequent commissioning plans as set out in the Health and Social Care Act (2012).

### 4. Other Implications

- (a) Financial Further details on the financial implications of costs are listed in the table at appendix A.
- (b) Risk Management Current risks identified are delayed implementation of the JSNA due to staffing i.e. delay in recruitment of information posts and transition of staff. Further risk assessment and management will be carried out for specific actions and will be included in a formal risk register.
- (c) Human Rights Act and Other Legal Implications The JSNA supports the requirement to conduct a JSNA to inform the Slough Joint Wellbeing Strategy and subsequent commissioning plans as set out in the Health and Social Care Act (2012).
- (d) Equalities Impact the SWB must meet the Public Sector Equality Duty under the Equality Act 2010 and consideration will be given to this throughout the JSNA refresh process.

### 5. **Background**

- 5.1 The Health and Social Act (2012) states that there is a requirement for all Health & Wellbeing Board's working through local authorities and the Clinical Commissioning Group's to produce a Joint Strategic Needs Assessment (JSNA) of the health and wellbeing of their local community.
- 5.2 The successful transfer of Public Health into the six Unitary Authorities (UA's) across the Berkshire region has presented a new opportunity to create a redesigned JSNA. The Berkshire Public Health Shared Team has been formed to support each UA, which included scoping the vision for the redesigned JSNA and providing the essential data to support each unique UA's focus on health inequalities.
- 5.3 The vision was to redesign the JSNA to ensure that it has the ability to:
  - Be accessible and web based
  - Provide relevant, easy to disseminate data
  - Tell the local story
  - Use Ward data as a tool to plan for localised services
  - Provide key stakeholders with data for commissioning intentions.
- 5.4 To take forward this approach the Director of Public Health and the Programme Manager presented the vision to the Slough Wellbeing Board to seek views and agreement to proceed. The Slough Wellbeing Board unanimously agreed to progress with the first phase of transforming a paper based JSNA document into a distinct web based JSNA with updated, relevant data and the inclusion of ward profiles and links to the Clinical Commissioning Group Profiles.
- 5.5 It is anticipated that phases 2 & 3 will be natural progression as the web based JSNA develops during 2014/15 to ensure effective updating and review on its fitness for purpose. Phase 4 will be planned to conduct a complete refresh for 2015/16.
- **5.6** Phases for JSNA Development

Phase 1	Develop a web based JSNA which tells the local story with updated data and newly created ward profiles
Phase 2	Further develop the web based JSNA to link to key strategies across the Council
Phase 3	Build on other local information/data to provide details of health and wellbeing inequalities including assets
Phase 4	Review and update

**5.7** Progress Update - Phase 1

The JSNA Programme is underway and is on target to deliver Phase one of the redesigned JSNA, including a full refresh of data and new ward profiles within agreed timescales. The over arching JSNA programme plan is in

- place, with accompanying documentation and guidance for the six Unitary Authorities. JSNA project groups have been initiated and have been supported by the shared team.
- 5.8 The shared team delivered within the time frame the JSNA Data Inventory, which included 5,000 data lines, bespoke to Slough. Initially the shared team were going to update the data lines; however, all of the data has been comprehensively reviewed, revised and refreshed against national and local data. This has provided an updated platform for robust analysis and local summaries.
- 5.9 The Data Inventory was analysed by the shared team to provide in the region of 500 tables of 'fact, figures and trends' to accompany the six major headings within Slough JSNA.
- 6.0 The Slough Borough Council JSNA Project Group was established with representatives from directorates across the council. The terms of reference were drafted and agreed, along with chapter headings for the web pages. Key staff were identified to review the existing JSNA text and populate the text into the new chapter heading template with respective data.
- 6.1 The development of the 14 ward profiles specifically for SBC have been completed by the shared team and form part of the overarching set of 126 ward profiles across Berkshire. These were completed ahead of schedule and are ready to be up loaded as PDF documents on SBC web site. They provide 2011 Census ward level data and give a snapshot of localised relevant information which includes demography, deprivation and community safety. A full suite of Ward Profiles are available from Dr Angela Snowling.
- 6.2 The Slough JSNA Project Team is in the process of sending the final cohort of completed templates to the shared team for the review process and sign off. These are expected by 1<sup>st</sup> Nov. Once signed off the shared team will deliver the templates back to Slough to the member of staff to work on the Web upload.
- 6.3 To support the Web member of staff the shared team have developed the web processes maps, which has provided a detailed map for the construction of the web architecture. Uploading is due to commence on Friday 1<sup>st</sup>
  November and will take approximately 4 weeks to complete.
- 6.4 The shared team's timeframe for deliverables is 1<sup>st</sup> December for complete hand over and it is envisaged that Slough Borough Council will launch the Slough JSNA after following due process of sign off.

### 7 Comments of Other Committees / Priority Delivery Groups (PDGs)

There are no comments from the Priority Delivery Groups.

### 8 Conclusion

8.1 The redesigned JSNA will be a usable web based assessment of the current and future health and social care needs of the local community. It will be owned by the SWB with the intention to further develop to take into consideration emerging wider factors that impact on health and wellbeing. Provide information for Council wide Directorates and the CCG for strategic

commissioning processes to deliver operational and service outcomes to meet the needs of residents of Slough. It will also provide a platform for developing opportunities to identify local assets, which will over time contribute to improving outcomes and reduce inequalities.

8.2 The JSNA will provide an up to date way of presenting information and data that is more accessible to a wider audience. It will have the ability to be used as a tool for planning local services and the ability to provide data to key stakeholders for commissioning intentions.

### 9 Appendices Attached

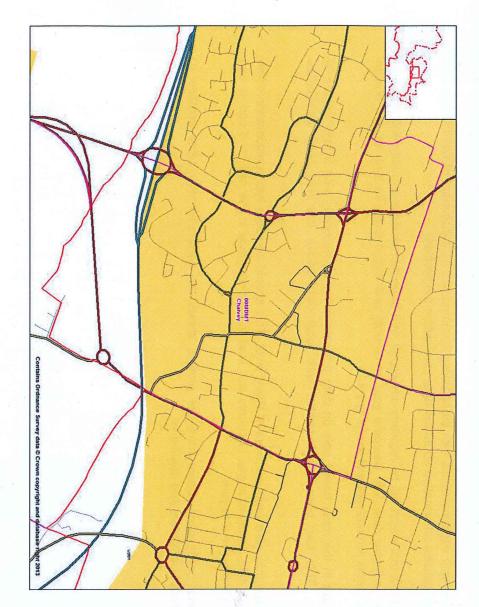
9.1 Three Ward Profiles

### 10 Background Papers

10.1 Statutory guidance on Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies.

## Borough Council

### Slough Chalvey









### CONTENTS

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SOURCES OF DATA	ENVIRONMENT	COMMUNITY SAFETY	HOUSING	HEALTH	EDUCATION	ECONOMY AND ENTERPRISE 8	ACCESS TO SERVICES	DEPRIVATION, POVERTY AND	DEMOGRAPHICS	SUMMARY
15	14	13	12	10 to 1	.9	00	7		4 to 6	2 to 3

Assessment of Slough. Profiles have been created for each of the Electoral Wards within Slough. This is a profile of Chalvey Ward. It is intended to accompany the wider Joint Strategic Needs

supported by metadata (information about the data used within the profiles). The profiles are split into nine topics with these being accompanied by a summary of key findings and

and refreshed indicator data. We welcome your comments and suggestions so that we can ensure future developments are relevant and useful to you. The profiles are a tool which will be regularly developed with both improved functionality and also new

appropriate. completeness. This has been supplemented with local data where this has been considered The profiles are in the main based only on data that are collected nationally with a high degree of

Some indicators may give small numbers at Ward level. This should be taken into consideration when interpreting the data. Small changes in counts can lead to wide variance in the rate, and counts can vary significantly from year to year.

Any provisional conclusions drawn from the profiles should be compared with other sources of information, both quantitative and qualitative.

## 1. SUMMARY

British population accounts for 84.15% of the total poulation. 45% of the Chalvey population were born in the UK. This is fewer than the average of There are 12,117 people living in Chalvey 11.11% of these are children aged 0 to 15 and 3.77% are older people aged 65 and over. The non-white

across Slough Chalvey is the 1st most deprived ward in Slough (out of 14 Wards). 27% of children in Chalvey are at risk of living in poverty, compared with 22.2%

employed in Manual occupations. 21% of workers were employed in Elementary occupations. 20.7% of working age people in Chalvey have no formal qualifications 74 years are in employment. This is lower than the average in Slough. In Chalvey, the majority of people in employment (40% of workers) were In Chalvey 14.5% of the working age population claim benefits compared with 12.6% in Slough 59% of the population of Chalvey who are aged 16 to

58.72% of children living in Slough achieved 5 GCSEs at grade A\* to C. 54.8% of children living in Chalvey achieved 5 GCSEs at grade A\* to C. 66.83% of children living in Slough achieved the expected level of attainment at Key Stage 2. 67% of children living in Chalvey achieved the expected level of attainment at Key Stage 2.

than expected\* years. Death rates from all causes in people aged less than 75 are Higher than expected. Emergency hospital admissions for all causes are Higher The average life expectancy at birth for males living in Chalvey is 74.5 years. The average life expectancy at birth for females in Chalvey is 77.9

Page 19

An estimated 23% of adults in Chalvey are obese. An estimated 10.3% of adults in Chalvey binge drink. An estimated 28.2% of adults in Chalvey eat

There are a total of 4401 dwellings in Chalvey. The most common housing type in Chalvey is Purpose-built block of flats or tenement. This accounts more bedrooms more than it has in order to be adequately sized for the number of people living there for 52.78% of all housing. The average household size in Chalvey is 2.8 people and 19.08% of housing in Chalvey is classifed as needing one or

than the average across Slough. There were 981 crimes recorded in Chalvey during 2012/13. This equates to 80.96 crimes per 1,000 people living in Chalvey - a rate that is lower

In Chalvey 100% of the population live in areas classified as urban city and town.

2

<sup>\*</sup> Given the age and gender structure of the population and national death/admission rates

Category	Indicator	Chalvey	Slough Average	Ward Range Worst	Local Authority Average Worst	Average Best	Ward Range Best
Deprivation &	Indices of Multiple Deprivation - IMD (2010)	35.0	24.1	35.0	•		16.3
access	% children in Poverty (2010)	27.0	22.2	28.5	-		15.5
	Access to Services - IMD domain (2010)	28.6	29.3	34.4			23.9
Economy &	% JSA Claimants (November 2012)	4.8	3.5	4.8	•		2.0
Enterprise	Post-16 Qualifications - % Level 3 or higher (2011)	36.6	36.0	25.9			46.3
Education	% key Stage 2 Level 4+ (2012)	67.0	78.4	67.0	•		88.0
	% 5+ GCSEs A*-C (inc Maths and English) (2012)	54.8	59.4	47.2	<b>•</b>		72.9
Health	All Cause Mortality <75 (2008-10)	150.2	111.4	150			83
	Life Expectancy - males (2008-10)	74.5	79	73.7	•		83.2
	Life Expectancy - females (2008-10)	77.9	83.1	77.9			85.4
	Emergency hospital admissions for all causes (2010/11)	133.8	108.0	133.8	<b>*</b>		86.8
	% low Birthweights <2500g (2008-10)	9.4	8.5	11.0			6.7
Housing	% occupancy rating - bedrooms -1 or less (2011)	19.1	12.7	21.1	<b>*</b>		7.2
	% no Central Heating (2011)	3.3	2.8	6.2	<b>*</b>		1.7
	% socially Rented (2011)	18.6	20.5	41.1			10.7
Community	Crime rate per 1,000 (2011/12)	81.0	72.7	127.7			44.6
Safety	Anti-social Behaviour rate per 1,000 (2011/12)	43.7	24.8	43.7	<b>•</b>		14.7
	Theft and handling stolen goods rate per 1,000 (2011/12)	19.6	20.9	67.0			6.8
	Criminal Damage rate per 1,000 (2011/12)	9.5	9.1	14.5			6.1

## How to read the spine chart:

shows values that are worse. that indicator, or where most values typically lie. The black triangles 🛦 represent values that are better than the average, whilst the blue diamond between the 'best' and 'worst' wards in the local authority. The yellow circles 🔾 represent values that are within the 75th and 25th percentile for lower values, e.g. high GCSE attainment is 'better', whereas a high crime rate is 'worse'. The light grey rectangle 🔤 represents the range line this suggests the ward is performing 'better' in a particular indicator, to the left suggests it is 'worse'. This does not necessarily mean higher or The shapes on the graph represent the value of the ward compared against the Local Authority average. If positioned to the right of the average

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# 2. DEMOGRAPHICS

- Chalvey has a population of 12,117. This figure has increased at a greater rate than it has on average across Slough since 2001.
- The working age population is relatively small in comparison to Slough.
- Related to this, the ward has a proportionately larger young population (11%) and a smaller older population (4%).

Males

Total Po

- The 2011 Census indicates that 84% of Chalvey are BME, higher than the Slough average.
- The largest single BME population is the Asian/Asian British: Pakistani group. This group represents 31.9% of BME people and 26.87% of the total population of the ward.

BME Pop

Older Pe

Working

Females Children

Population Population

## Population Summary 2011

	C <sub>F</sub>	Chalvey	Slough
pulation	12,117		
	6,366	52.5%	50.0%
	5,751	47.5%	50.0%
(0-15)	1,346	11.1%	11.1%
Age (16-64)	3,883	32.0%	33.2%
eople (65+)	457	3.8%	5.1%
pulation	10,197	84.2%	65.5%
on (2001)	8,859	31	1
on Change (2001-2011)	3,258	36.8%	16.3%

## Population structure 2011

	8.0	0-4	5-9	15-19 10-14	20-24	25-29	30-34	35-39	A 40-44	e 45-49	Ba 50-54	nd 55-59	60-64	65-69	70-74	75-79	80-84	85+	
	6.0																		
	4.0		要	_															
Serilania	2.0								No. Security									*	Females
reitellage by Age Gloup	0.0																		■ Males
duor	2.0	-																	
Source:	4.0																	**************************************	□ LA Total
Source: Census 2011	6.0	-																	
2011	8.0				e.	I I					,	- A. (1986)	-					**************************************	

### Religion 2011

720	1,038	27	704	4,510	ω	829	72	4,214	20
5.9%	8.6%	0.2%	5.8%	37.2%	0%	6.8%	0.6%	34.8%	Chalvey
5.7%	12.1%	0.3%	10.6%	23.3%	0.1%	6.2%	0.5%	41.2%	Slough

# 2. DEMOGRAPHICS

ETHNICITY							
	Chalvey		Slough		Chalvey	y	Slough
Total BME Population	10,197	84.2%	65.5%				
White		21		Asian or Asian British			
British	1,920	15.8%	34.5%	Indian	1,597	13.2%	15.6%
Irish	79	0.7%	1.1%	Pakistani	3,256	26.9%	17.7%
Gypsy or Irish Traveller	17	0.1%	0.2%	Bangladeshi	75	0.6%	0.4%
Other White	1,918	15.8%	9.9%	Chinese	95	0.8%	0.6%
Mixed				Other Asian	773	6.4%	5.4%
White and Black Caribbean	107	0.9%	1.2%	Black or Black British			
White and Black African	59	0.5%	0.4%	Black Caribbean	1,081	8.9%	5.4%
White and Asian	86	0.7%	1.0%	Black African	378	3.1%	2.2%
Other Mixed	101	0.8%	0.8%	Other Black	245	2.0%	1.0%
Other Ethnic Group							
Other Ethnic Group	330	2.7%	2.6%				
HOUSEHOLD COMPOSITION						100	
	Chalvey		Slough		Chalvey	Ų	Slough
All Households:	4241		50,766	Lone Parent	548	12.9%	12.8%
One Person Household	1242	29 3%	28 x%	Non dependent children	133	3.0%	3 0%
One Family Household:	2201	51.9%	57.8%	Other household types	798	18.8%	13.8%
All aged over 65	92	2.2%	3.6%	With dependent children	379	8.9%	7.0%
Married or same-sex civil partnership couple	1271	30.0%	33.9%	All full-time students	21	0.5%	0.2%
No children	341	8.0%	8.3%	All aged 65 and over	ယ	0.1%	0.2%
Dependent children	791	18.7%	20.0%	Other	395	30.0%	33.9%
Non dependent children	139	3.3%	5.6%				
Cohabiting couple	290	6.8%	7.5%				
No children	141	3.3%	3.8%				
Dependent children	140	3.3%	3.3%				
Non dependent children	9	0.2%	0.4%				

### MIGRATION

- 45% of the Chalvey population were born in the UK. This is fewer than the average of Slough.
- the UK have been resident in the UK for 10 years or more. The majority of people living in Chalvey who were not born in
- the UK moved to the UK when they were aged between 20 to The majority of people living in Chalvey who were not born in

Other Countries

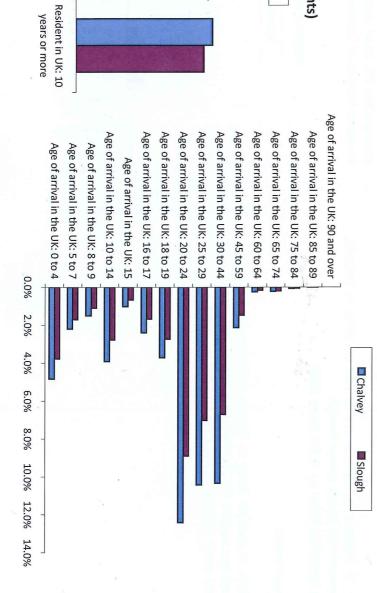
39.4%

28.7%

## Country of birth 2011

	Cha	Chalvey	Slough
United Kingdom	5,394	44.5%	61.0%
Ireland	73	0.6%	1.0%
Other EU	1,873	15.5%	9.3%

## Age of arrival in UK (non-UK born residents)



20.0%

15.0%

10.0%

5.0%

Resident in UK: Less Resident in UK: 2

than 2 years

years or more but less than 5 years

years or more but less than 10 years

Resident in UK: 5

25.0%

Length of time in UK (non-UK born residents)

Chalvey

■ Slough

0

- Chalvey is the 1st most deprived ward in Slough (out of 14 Wards).
- 31% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, according to the latest Indices of Deprivation.
- 31% of people in the ward are living in areas classed amongst the 5% most deprived in Slough, according to the latest Indices of Deprivation.

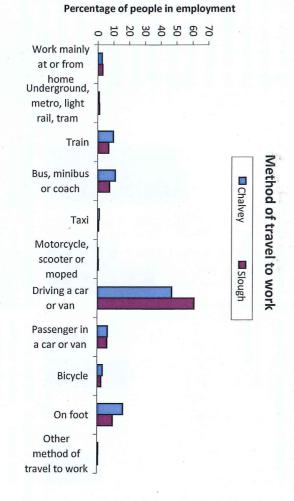
### **Child Poverty**

- 27% of children in Chalvey are at risk of living in poverty, compared with 22.2% across Slough.
- This figure has fallen by -9.9% since 2006.

## Free school meals

 14.63% of children living in Slough and attending schools in Slough are eligible for and receiving free school meals. Free school meals data is not available for Chalvey Ward.

- There are 1509 households in Chalvey who do not own a car or van. This is 35.58% of all households in the Ward which is more than the Slough average.
- The indices of multiple deprivation includes a measure of barriers to housing and services. On this measure Chalvey is the 9th most deprived ward in Slough (out of 14 Wards).
- 24% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, on this measure according to the latest Indices of Deprivation.
- There are no people in the Ward who are living in areas classed amongst the 5% most deprived in Slough on this measure according to the latest Indices of Deprivation.



In Chalvey 14.5% of the working age population claim benefits compared with 12.6% in Slough. Broken down:

Statistical Group	Chalvey	У	Slough	gh	
Job Seekers	400	4.8%	3,330	3.5%	
ESA and Incapacity					
Benefits	470	5.7%	4,810	5.1%	
Lone parents	135	1.6%	1,400	1.5%	
Carers	80	1.0%	990	1.1%	
Other income benefits	55	0.7%	360	0.4%	
Disabled	55	0.7%	765	0.8%	
Bereaved	10	0.1%	185	0.2%	
<b>Total Claimants</b>	1,205	14.5%	11,840	12.6%	

### Qualifications

Recent statistics on qualifications are available at ward level using data collected as part of the 2011 Census. This showed that:

- 20.7% of working age people in Chalvey have no formal qualifications.
- 36.6% were qualified to NVQ Level 3 or higher compared with 36% in Slough as a whole.

Percentage of people in employment

30%

60%

50%

80%

70%

Please see the 'Education' section of these Ward Profiles for information on school attainment.

### **Employment**

- In Chalvey, the majority of people in employment (40% of workers) were employed in Manual occupations. 21% of workers were employed in Elementary occupations.
- In Slough as a whole the majority of people in employment (35% of workers) were employed in Manual occupations. 16% of workers were employed in Professional occupations.
- 59% of the population of Chalvey who are aged 16 to 74 years are in employment. This is lower than the average in Slough.
- 7.14% of the population of Chalvey who are aged 16 to 74 years are unemployed. This is higher than the average in Slough.

# Hours worked Males Females Part-time: 15 hours Part-time: 16 to 30 Full-time: 31 to 48 Full-time: 49 or less worked hours worked hours worked more hours worked

 $\infty$ 

## 5. EDUCATION

attend school within, the local authority. between areas will be largely due to random effects occurring within the data. Data is only available at a Ward level for children who both live in, and We have to treat the following data with some caution due to the small numbers that are involved in the calculations. It is likely that differences

## Pupil characteristics

- 77.4% of children living in Slough come from non-White British backgrounds. Pupil ethnicity data is not available for Chalvey.
- 49.7% of children living in Slough have English as a second language. Spoken language data is not available for Chalvey.

### GCSE attainment

58.72% of children living in Slough acheived 5 GCSEs at grades A\* to C which included English and Maths. 54.8% of children living in Chalvey acheived 5 GCSEs at grades A\* to C which included English and Maths.

## **Unauthorised absences**

0.8% of school sessions were missed through unauthorised absences by children living in Slough. School absence data is not available for Chalvey.

## Key Stage 2 attainment

66.83% of children living in Slough acheived the expected level of attainment in Key Stage 2. 67% of children living in Chalvey acheived the expected level of attainment in Key Stage 2.

9

area such as how many people of a particular age group live there. at these low levels. This is particularly true of information about peoples lifestyles (for example, how many people smoke or drink alcohol) small we are not legally able to share them as the individual may be identifiable from the data. Secondly, it is difficult to come to any example, only a few people from each Ward may be admitted to hospital each year for a specific condition. When we are looking at used to estimate the likelihood of a certain characteristic appearing in other areas such as Wards depending on some key features of that One of the ways that this is overcome is to use 'modelled' data. This is data that has been taken from a much larger number of people and reliable conclusions from information which is based on these small numbers. It may also be the case that the information is not available numbers that are very small we have to consider two key points before they are used in profiles such as this. Firstly, when numbers are It is often difficult to use health data when looking at small areas such as Wards. This is because of the size of the numbers involved. For

- The percentage of live births to mothers living in Chalvey which were of a low birth weight is estimated to be 9.4%. The percentage on average across Slough is 8.8%. Any difference is not statistically significant.
- The number of people living in Chalvey who are diagnosed with cancer is as expected given the age and gender structure of the population.
- The average life expectancy at birth for males living in Chalvey is 74.5 years. The average life expectancy at birth for females in Chalvey is 77.9 years.

### Deaths

Deaths all ages	Death ages	Death	Death	Death	Death	Death	
s from re	s from cir	s from all					
spiratory	culatory	cancer,	Deaths from all cancer, all ages	causes,	causes,	Deaths from all causes, all ages	
Deaths from respiratory diseases, all ages	Deaths from circulatory disease, al ages	Deaths from all cancer, under 75	all ages	Deaths from all causes, under 75	Deaths from all causes, under 65	all ages	
Higher than expected	Higher than expected	As expected	As expected	Higher than expected	Higher than expected	Higher than expected*	
1	1				_	*	

<sup>\*</sup> Given the age and gender structure of the population and national death rate

## Hospital admissions

Emergency hospital admissions for all causes	Higher than expected*
Planned hospital admissions for all causes	Lower than expected
Emergency hospital admissions for all coronary heart disease	Higher than expected
Emergency hospital admissions for stroke	Higher than expected
Emergency hospital admissions for heart attack	Higher than expected
Emergency hospital admissions for chronic obstructive pulmonary As expected	As expected
disease	

<sup>\*</sup> Given the age and gender structure of the population and national admission rates

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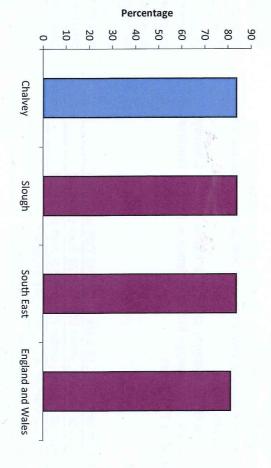
### Lifestyles

- The heights and weights of children in reception year and year 6 are measured annually as part of the National Child Measurement Programme. 10.56% of reception year children in Chalvey are obese. An average of 12.04% of reception year children in Slough are obese.
- 25% of year six children in Chalvey are obese. An average of 21.47% of year six children in Slough are obese. It is important to note that this data at Ward level involves small numbers and any differences between areas will be, in part, due to chance occurances in the data.
- An estimated 23% of adults in Chalvey are obese.
- An estimated 10.3% of adults in Chalvey binge drink.
- An estimated 28.2% of adults in Chalvey eat healthily.

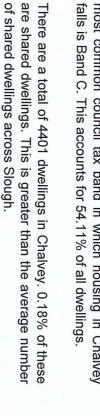
## Sense of health and wellbeing

- According to the 2011 Census 83.75% of adults in Chalvey feel that they are in either good or very good health.
- 6.33% of adults in Chalvey feel that their lives are limited a lot due to ill health or disability and 6.4% of adults in Chalvey feel that their lives are limited a little due to ill health or disability.

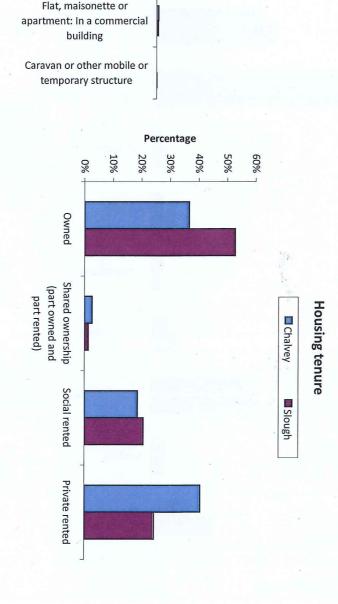
# People providing at least one hour of unpaid care per week



- falls is Band C. This accounts for 54.11% of all dwellings. most common council tax band in which housing in Chalvey falls is Band C. This accounts for 42.71% of all dwellings. The The most common council tax band in which housing in Slough
- of shared dwellings across Slough.
- block of flats or tenement. This accounts for 52.78% of all The most common housing type in Chalvey is Purpose-built



- than the average for Slough. The average number of rooms in houses in Chalvey is 4.2. Which is The average household size in Chalvey is 2.8 people. Which is larger
- fewer than the average for Slough.
- fewer than the average for Slough. The average number of bedrooms in houses in Chalvey is 2.3. Which is
- average number of people living there. This is more households than the Slough bedrooms more than it has in order to be adeqautely sized for the 19.08% of housing in Chalvey is classifed as needing one or more
- than the average for Slough. 3.3% of houses in Chalvey do not have central heating. Which is more



Percentage

10%

Detached

Terraced

Semi-detached

Purpose-built block of flats or tenement

> Part of a converted or shared house (including bed-sits)

30%

20%

50%

60%

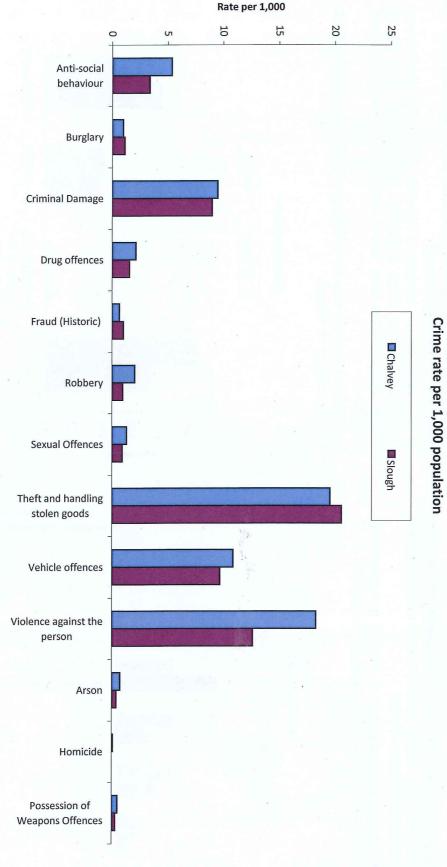
Chalvey

■ Slough

**Housing types** 

40%

there were 43.74 crimes per person living in Chalvey. The most commonly occuring crime was classified as ASB for which



## 9. ENVIRONMENT

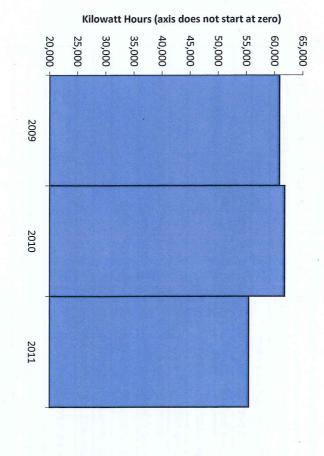
In Chalvey 100% of the population live in areas classified as urban city and town.

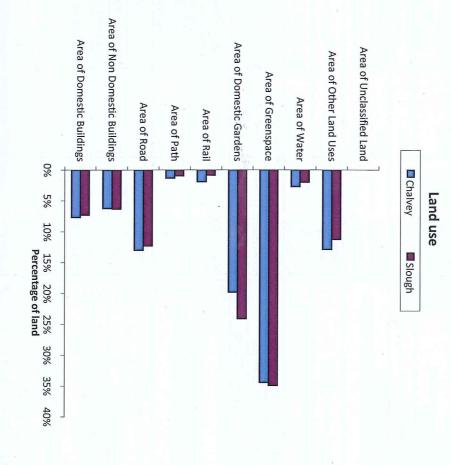
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Population density describes the average number of people living in each hectare of land in an area. There are an average of 57.16 people living in each hectare of Chalvey. This is more than are living on average in each hectare of Slough.

The most common land use in Chalvey is areas of Greenspace, this is followed by areas of Domestic Gardens and areas of Road.

## Total domestic energy consumption





# 10. SOURCES OF DATA

	Source	Date	Description
1. Sullillary illulcators			
Indices of Multiple Deprivation - IMD (2010)	Department for Communities and Local Government (DCLG)	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
	Department for Work	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60%
% CHIMICIA HI FOVEITY (ZOTO)	and Pensions (DWP)	,	or less of the median
Access to Services - IMD domain (2010)	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
% JSA Claimants (May 2012)	NOMIS	2012	DWP benefits data published by NOMIS
Post-16 Qualifications - % Level 3 or higher (2011)	2011 Census	2011	% of working age population with level 3 or higher
% key Stage 2 Level 4+ (2012)	DFE/Berkshire Local Authorities	2011/12	% of pupils achieving Level 4 or higher in both English and Maths
% 5+ GCSEs A*-C (inc Maths and English) (2012)	DFE/Berkshire Local Authorities	21/12	% of pupils achieving 5 or more GCSEs at grade A*-C including English and Maths
All Cause Mortality <75 (2008-10)	Public Health England	2006-2010	Age/sex standardised mortality rates
Life Expectancy - males (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Life Expectancy - females (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Emergency hospital admissions for all causes (2010/11)	Public Health England	2006-2010	Age/sex standardised hospital admission rates
% low Birthweights <2500g (2008-10)	Public Health England	2007-2011	Percentage of live births with weight <2,500g
% occupancy rating - bedrooms -1 or less (2011)	Public Health England	2011	A measure of under-occupancy and over-crowding. A value of -1 implies that there is one room too few and that there is overcrowding in the household.
% no Central Heating (2011)	2011 Census	2011	The percentage of housing which does not have central heating
% socially Rented (2011)	2011 Census	2011	The percentage of households that socially rent
Crime rate per 1,000 (2011/12)	2011 Census	2011	Total crime rate per 1,000 population
Anti-social Behaviour rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total ASB rate per 1,000 population
Theft and handling stolen goods rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total Theft and Handling of Stolen Goods rate per 1,000 population
Criminal Damage rate per 1,000 (2011/12)	Thames Valley Police	2012/14	Total Criminal Damage rate per 1,000 population
2. Demographics			
Population size	Office for National Statistics (ONS)	2011	Usual resident population on Census day 2011
Ethnicity	ONS	2011	Ethnic group of usual resident population on Census day 2011
Religion	SNO	1102	Religion or belief of usual resident population on Census day 2011

15

6

Household composition	ONS	2011	Members of each household on Census day 2011
Migration	ONS	2011	Usual residents who were not born in the UK recorded on Census day 2011
3. Deprivation			
Indices of Multiple Deprivation	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
Child Poverty	DWP	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60% or less of the median
Pupils eligible for free school meals	Department for Education (DFE) and Berkshire Local Authorities	2011/12	% of pupils eligible for free school meals
Car Ownership/Public Transport	SNO	2011	Car ownership per household as recorded on Census day 2011
Method of travel to work	ONS	2011	Method of travel to work (those in employment) as recorded on Census day 2011
4. Economy and enterprise	The second of th		
Benefits claimants	SIMON/AMD	2012	DWP benefits data published by NOMIS
Employment status	SNO	November 2011	Employment status as recorded on Census day 2011
Qualifications	SNO	2011	Highest level of qualification as recorded on Census day 2012
5. Education			
All education indicators	DFE/Berkshire Local Authorities	2012	The educational data provides 2012 year-end information on pupil residency-based small area pupil attainment. Pupils who reside and attend schools within the Local Authority
6. Health  Low hirth weight habies	Public Health England	2007-2011	Descentage of live highly weight 17 500g
Cancer diagnoses	Public Health England	2005-2009	Cancer incidence rates - age/sex standardised
Life expectancy '	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Mortality	Public Health England	2006-2010	Age/sex standardised mortality rates
Hospital admissions	Public Health England	2006/07- 2010/11	Age/sex standardised hospital admission rates
Childhood obesity	Public Health England	2009/10- 2011/12	Children classified as having a body mass index of 30 or more recorded during the National Child Measurement Programme (NCMP)
Lifestyle behaviours	Public Health England	2006-2008	Self-reported lifestyle behaviours as measured in the Health Survey for England
Sense of health and wellbeing	ONS	2011	Persons self-reported wellbeing on Census day 2011
Providing unpaid care	ONS	2011	Persons reporting themselves as providing unpaid care at least one hour per week on Census day 2011
7. Housing			
Council tax bands	Neighbourhood Statistics	2011	Council tax bands of dwelling stock
Number of dwellings	ONS	2011	Number of dwellings recorded on Census day 2011
Shared dwellings	ONS	2011	Dwellings containing members belonging to two or more different families
Household size	ONS	2011	The average number of people resident in a household
Room numbers	SNO	2011	The average number of rooms in a household

	Source	Date	Description
Household size	ONS	2011	The average number of people resident in a household
Central heating	ONS	2011	The percentage of housing which does not have central heating
8. Community Safety			
Crime rates	Thames Valley Police 2012/13		Number of recorded crimes per 1,000 population
9. Environment			
Urban/rural classification	ONS	2012	ONS urban/rural classification (lower super output area)
Population density	ONS	2011	Persons per hectare
Domestic energy consumption	Neighbourhood Statistics	2009-2011	Domestic energy consumption (kilowatt hours)
Land Use	Neighbourhood Statistics	2005	Land use statistics in square meters, from the Generalised Land use Database (GLUD)

### Acknowledgments

Ward Pictures - http://www.geograph.org.uk Sheffield City Council Ward Profiles - David Leather - https://www.sheffield.gov.uk/your-city-council/sheffield-profile/ward-profiles.html

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Picture 2

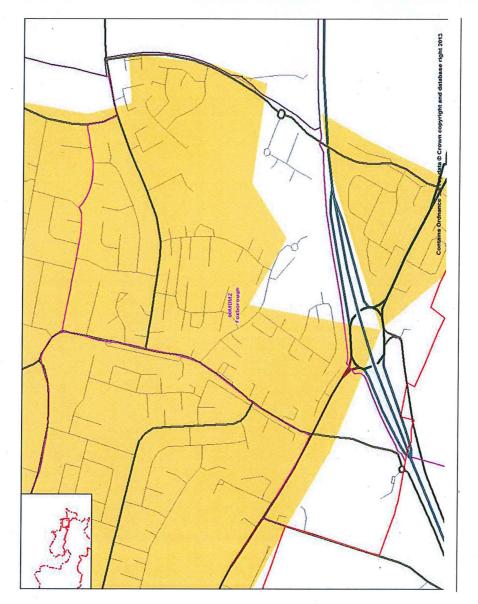












#### CONTENTS

<del>.</del>	SUMMARY2 to 3
5.	DEMOGRAPHICS4 to 6
3.	DEPRIVATION, POVERTY AND
	ACCESS TO SERVICES7
4.	ECONOMY AND ENTERPRISE8
2.	EDUCATION9
9.	HEALTH10 to 11
7.	HOUSING12
ω.	COMMUNITY SAFETY13
6	ENVIRONMENT14
10.	SOURCES OF DATA 15

This is a profile of Foxborough Ward. It is intended to accompany the wider Joint Strategic Needs Assessment of Slough. Profiles have been created for each of the Electoral Wards within Slough.

The profiles are split into nine topics with these being accompanied by a summary of key findings and supported by metadata (information about the data used within the profiles).

and refreshed indicator data. We welcome your comments and suggestions so that we can ensure The profiles are a tool which will be regularly developed with both improved functionality and also new future developments are relevant and useful to you. The profiles are in the main based only on data that are collected nationally with a high degree of completeness. This has been supplemented with local data where this has been considered appropriate.

interpreting the data. Small changes in counts can lead to wide variance in the rate, and counts can Some indicators may give small numbers at Ward level. This should be taken into consideration when vary significantly from year to year. Any provisional conclusions drawn from the profiles should be compared with other sources of information, both quantitative and qualitative.

## 1. SUMMARY

white British population accounts for 57.68% of the total poulation. 67% of the Foxborough population were born in the UK. This is more than the There are 8,501 people living in Foxborough 11.41% of these are children aged 0 to 15 and 5.82% are older people aged 65 and over. The nonaverage of Slough. Foxborough is the 5th most deprived ward in Slough (out of 14 Wards). 23.6% of children in Foxborough are at risk of living in poverty, compared with 22.2% across Slough.

workers) were employed in Managerial/professional/technical occupations. 17% of workers were employed in Professional occupations. 20.5% of In Foxborough 12.5% of the working age population claim benefits compared with 12.6% in Slough 63.96% of the population of Foxborough who are aged 16 to 74 years are in employment. This is lower than the average in Slough. In Foxborough, the majority of people in employment (37% of working age people in Foxborough have no formal qualifications.

58.72% of children living in Slough achieved 5 GCSEs at grade A\* to C. 60% of children living in Foxborough achieved 5 GCSEs at grade A\* to C. 66.83% of children living in Slough achieved the expected level of attainment at Key Stage 2. 82% of children living in Foxborough achieved the expected level of attainment at Key Stage 2.

The average life expectancy at birth for males living in Foxborough is 83.1 years. The average life expectancy at birth for females in Foxborough is 85.4 years. Death rates from all causes in people aged less than 75 are As expected. Emergency hospital admissions for all causes are Higher than expected\* An estimated 25.4% of adults in Foxborough are obese. An estimated 13.7% of adults in Foxborough binge drink. An estimated 25.3% of adults in Foxborough eat healthily. There are a total of 3326 dwellings in Foxborough. The most common housing type in Foxborough is Purpose-built block of flats or tenement. This accounts for 35.45% of all housing. The average household size in Foxborough is 2.6 people and 9.58% of housing in Foxborough is classifed as needing one or more bedrooms more than it has in order to be adeqautely sized for the number of people living there.

There were 506 crimes recorded in Foxborough during 2012/13. This equates to 59.52 crimes per 1,000 people living in Foxborough - a rate that is lower than the average across Slough.

In Foxborough 100% of the population live in areas classified as urban city and town.

<sup>\*</sup> Given the age and gender structure of the population and national death/admission rates

Cotomo						
category	Indicator	Foxborough	Slough Average	Ward Range Worst	Local Authority Average Worst	Ward Range Best
Deprivation &	Indices of Multiple Deprivation - IMD (2010)	25.8	24.1	35.0		16.3
access	% children in Poverty (2010)	23.6	22.2	28.5		15.5
	Access to Services - IMD domain (2010)	34.4	29.3	34.4	<b>*</b>	23.9
Economy &	% JSA Claimants (November 2012)	3.2	3.5	4.8		2.0
Enterprise	Post-16 Qualifications - % Level 3 or higher (2011)	36.6	36.0	25.9		46.3
Education	% key Stage 2 Level 4+ (2012)	82.0	78.4	67.0		88.0
	% 5+ GCSEs A*-C (inc Maths and English) (2012)	0.09	59.4	47.2		72.9
Health	All Cause Mortality <75 (2008-10)	108.6	111.4	150		83
	Life Expectancy - males (2008-10)	83.1	79	73.7	<b>\</b>	83.2
	Life Expectancy - females (2008-10)	85.4	83.1	6.77	<b>4</b>	85.4
	Emergency hospital admissions for all causes (2010/11)	113.6	108.0	133.8		86.8
	% low Birthweights <2500g (2008-10)	2.6	8.5	11.0	<b>*</b>	6.7
Housing	% occupancy rating - bedrooms -1 or less (2011)	9.6	12.7	21.1		7.2
	% no Central Heating (2011)	2.3	2.8	6.2		1.7
	% socially Rented (2011)	30.0	20.5	41.1	<b>*</b>	10.7
Community	Crime rate per 1,000 (2011/12)	59.5	72.7	127.7		44.6
Salety	Anti-social Behaviour rate per 1,000 (2011/12)	20.8	24.8	43.7		14.7
	Theft and handling stolen goods rate per 1,000 (2011/12)	15.6	20.9	67.0	0	6.8
	Criminal Damage rate per 1,000 (2011/12)	7.2	9.1	14.5	<b>\</b>	6.1

## How to read the spine chart:

that indicator, or where most values typically lie. The black triangles 🔺 represent values that are better than the average, whilst the blue diamond line this suggests the ward is performing 'better' in a particular indicator, to the left suggests it is 'worse'. This does not necessarily mean higher or between the 'best' and 'worst' wards in the local authority. The yellow circles 🔘 represent values that are within the 75th and 25th percentile for The shapes on the graph represent the value of the ward compared against the Local Authority average. If positioned to the right of the average represents the range lower values, e.g. high GCSE attainment is 'better', whereas a high crime rate is 'worse'. The light grey rectangle 📕 shows values that are worse.

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DEMOGNAFILO	Foxborough has a population of 8,501. This figure h	increased at a greater rate than it has on average acro
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Foxborough		has	Ø	0	population	ion	of	of 8,501.		This	is figure ha	e e	has	
increased at a greater	it o	g	reat		rate than it	than	:=	has	on	on average		across	SSO	
Slough since 20	9 2	00												

The working age population is relatively small in comparison to Related to this, the ward has a proportionately larger young Slough.

The 2011 Census indicates that 58% of Foxborough are BME, population (11%) and a larger older population (6%). lower than the Slough average.

Indian group. This group represents 30% of BME people and The largest single BME population is the Asian/Asian British: 17.33% of the total population of the ward.

# Population Summary 2011

Slough

Foxborough

	20.0%	20.0%	11.1%	33.2%	5.1%	65.5%	1	16.3%
	49.8%	50.2%	11.4%	32.4%	5.8%	57.7%	1	42.3%
8,501	4,232	4,269	970	2,758	495	4,903	5,976	2,525
Total Population	Males	Females	Children (0-15)	Working Age (16-64)	Older People (65+)	BME Population	Population (2001)	Population Change (2001-2011)

## Religion 2011

Population structure 2011

Males

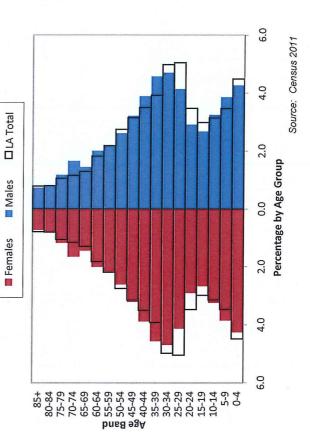
Females

Foxborough	4,048 47.6%		613 7.2%					8		
	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Any other religion	No Religion	Religion not stated	

0.5% 6.2% 0.1% 23.3% 10.6% 0.3%

12.1% 5.7%

41.2%



# 2. DEMOGRAPHICS

ETHNICITY			e se				
	Foxborough		Slough		Foxborough	hgu	Slough
Total BME Population	4,903	22.7%	65.5%				
White				Asian or Asian British			
British	3,598	42.3%	34.5%	Indian	1,473	17.3%	15.6%
Irish	103	1.2%	1.1%	Pakistani	709	8.3%	17.7%
Gypsy or Irish Traveller	19	0.2%	0.2%	Bangladeshi	37	0.4%	0.4%
Other White	585	%6.9	86.6	Chinese	95	1.1%	0.6%
Mixed				Other Asian	395	4.6%	5.4%
White and Black Caribbean	126	1.5%	1.2%	Black or Black British			
White and Black African	52	%9.0	0.4%	Black Caribbean	491	5.8%	5 4%
White and Asian	88	1.0%	1.0%	Black African	290	3.4%	% 6 6
Other Mixed	77	0.9%	0.8%	Other Black	120	1.4%	1 0%
Other Ethnic Group					}-		
Other Ethnic Group	242	2.8%	2.6%	,			
HOUSEHOLD COMPOSITION						0	
	Foxborough		Slough		Foxborough	hgu	Slough
All Households:	3276	144	50,766	Lone Parent	469	14.3%	12.8%
				Dependent children	318	%2.6	8.9%
One Person Household:	944	28.8%	28.5%	Non dependent children	151	4.6%	3.9%
One Family Household:	1971	60.2%	22.8%	Other household types	361	11.0%	13.8%
All aged over 65	165	2.0%	3.6%	With dependent children	173	5.3%	7.0%
Married or same-sex civil partnership couple	1101	33.6%	33.9%	All full-time students	က	0.1%	0.2%
No children	258	7.9%	8.3%	All aged 65 and over	9	0.3%	0.2%
Dependent children	692	21.1%	20.0%	Other	175	33.6%	33.9%
Non dependent children	151	4.6%	2.6%				
Cohabiting couple	236	7.2%	7.5%				
No children	109	3.3%	3.8%				
Dependent children	111	3.4%	3.3%				
Non dependent children	16	0.5%	. 0.4%				

# 2. DEMOGRAPHICS

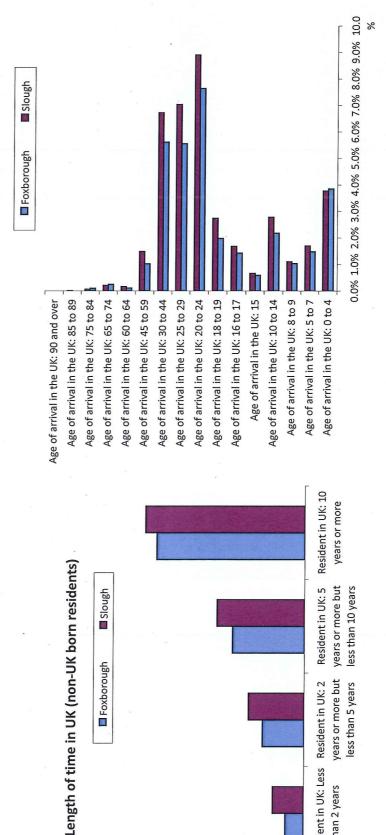
### MIGRATION

- 67% of the Foxborough population were born in the UK. This is more than the average of Slough.
- The majority of people living in Foxborough who were not born in the UK have been resident in the UK for 10 years or more.
- The majority of people living in Foxborough who were not born in the UK moved to the UK when they were aged between 20

## Country of birth 2011

Foxborough	5,713 67.2%	87 1.0%	516 6.1%	2,185 25.7%
	United Kingdom	Ireland	Other EU	Other Countries

# Age of arrival in UK (non-UK born residents)



Berkshire Public Health Shared Team

years or more but less than 10 years

years or more but less than 5 years

than 2 years

Resident in UK: Less Resident in UK: 2

4.0%

2.0% 0.0% 9

Slough

Foxborough

20.0% 18.0% 16.0% 14.0% 12.0% 10.0% 8.0% %0.9

# 3. DEPRIVATION, POVERTY AND ACCESS TO SERVICES

# Indices of Multiple Deprivation (IMD)

# Foxborough is the 5th most deprived ward in Slough (out of 14 Wards).

22% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, according to the latest Indices of Deprivation.

22% of people in the ward are living in areas classed amongst the 5% most deprived in Slough, according to the latest Indices of Deprivation.

## Child Poverty

23.6% of children in Foxborough are at risk of living in poverty, compared with 22.2% across Slough.

This figure has fallen by -3.7% since 2006.

## Free school meals

14.63% of children living in Slough and attending schools in Slough are eligible for and receiving free school meals. Free school meals data is not available for Foxborough Ward.

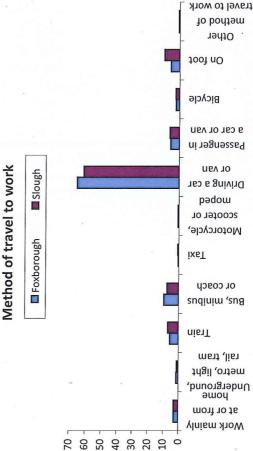
## Access to Services

There are 747 households in Foxborough who do not own a car or van. This is 22.8% of all households in the Ward which is fewer than the Slough average.

The indices of multiple deprivation includes a measure of barriers to housing and services. On this measure Foxborough is the 1st most deprived ward in Slough (out of 14 Wards).

44% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, on this measure according to the latest Indices of Deprivation.

22% of people in the ward are living in areas classed amongst the 5% most deprived in Slough on this measure according to the latest Indices of Deprivation.



Percentage of people in employment

# 4. ECONOMY AND ENTERPRISE

In Foxborough 12.5% of the working age population claim benefits compared with 12.6% in Slough. Broken down:

	gh	3.5%	5.1%	1.5%	1.1%	0.4%	%8.0	0.2%	12.6%
	Slough	3,330	4,810	1,400	066	360	765	185	11,840
down:	ıgh	3.2%	5.3%	1.7%	%6.0	0.4%	0.8%	0.2%	12.5%
ough. Broken	Foxborough	175	290	06	20	20	45	10	089
compared with 12.6% in Slough. Broken down:	Statistical Group	Job Seekers	ESA and incapacity Benefits	Lone parents	Carers	Other income benefits	Disabled	Bereaved	Total Claimants

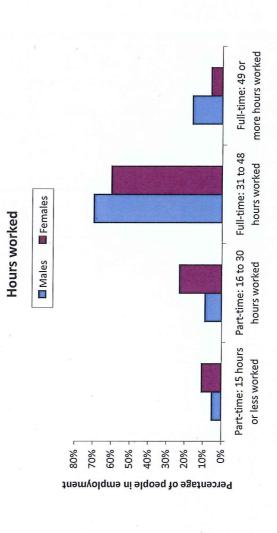
## Qualifications

Recent statistics on qualifications are available at ward level using data collected as part of the 2011 Census. This showed that:

- 20.5% of working age people in Foxborough have no formal qualifications.
- 36.6% were qualified to NVQ Level 3 or higher compared with 36% in Slough as a whole.
- Please see the 'Education' section of these Ward Profiles for information on school attainment.

## **Employment**

- In Foxborough, the majority of people in employment (37% of workers) were employed in Managerial/professional/technical occupations. 17% of workers were employed in Professional occupations.
- In Slough as a whole the majority of people in employment (35% of workers) were employed in Manual occupations. 16% of workers were employed in Professional occupations.
- 63.96% of the population of Foxborough who are aged 16 to 74 years are in employment. This is lower than the average in Slough.
- -4.83% of the population of Foxborough who are aged 16 to 74 years are unemployed. This is lower than the average in Slough.



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# 5. EDUCATION

We have to treat the following data with some caution due to the small numbers that are involved in the calculations. It is likely that differences between areas will be largely due to random effects occurring within the data. Data is only available at a Ward level for children who both live in, and attend school within, the local authority.

## Pupil characteristics

# GCSE attainment

58.72% of children living in Slough acheived 5 GCSEs at grades A\* to C which included English and Maths. 60% of children living in Foxborough acheived 5 GCSEs at grades A\* to C which included English and Maths.

- 77.4% of children living in Slough come from non-White British backgrounds. Pupil ethnicity data is not available for Foxborough.
- 49.7% of children living in Slough have English as a second language. Spoken language data is not available for Foxborough.

## Unauthorised absences

Page 44

0.8% of school sessions were missed through unauthorised absences by children living in Slough. School absence data is not available for Foxborough.

## Key Stage 2 attainment

66.83% of children living in Slough acheived the expected level of attainment in Key Stage 2. 82% of children living in Foxborough acheived the expected level of attainment in Key Stage 2.

numbers that are very small we have to consider two key points before they are used in profiles such as this. Firstly, when numbers are reliable conclusions from information which is based on these small numbers. It may also be the case that the information is not available One of the ways that this is overcome is to use 'modelled' data. This is data that has been taken from a much larger number of people and used to estimate the likelihood of a certain characteristic appearing in other areas such as Wards depending on some key features of that It is often difficult to use health data when looking at small areas such as Wards. This is because of the size of the numbers involved. For example, only a few people from each Ward may be admitted to hospital each year for a specific condition. When we are looking at small we are not legally able to share them as the individual may be identifiable from the data. Secondly, it is difficult to come to any at these low levels. This is particularly true of information about peoples lifestyles (for example, how many people smoke or drink alcohol). area such as how many people of a particular age group live there.

The percentage of live births to mothers living in Foxborough which were of a low birth weight is estimated to be 9.7%. The percentage on average across Slough is 8.8%. Any difference is not statistically significant.

The number of people living in Foxborough who are diagnosed with cancer is as expected given the age and gender structure of the population.

The average life expectancy at birth for males living in Foxborough is 83.1 years. The average life expectancy at birth for females in Foxborough is 85.4 years.

#### Deaths

Lower than expected*	As expected	expected	As expected	As expected		As expected		ower than expected
Deaths from all causes, all ages  Lc	Deaths from all causes, under 65 As	Deaths from all causes, under 75 As expected	Deaths from all cancer, all ages As	Deaths from all cancer, under 75 As	Deaths from circulatory disease, all	ages	Deaths from respiratory diseases,	all ages

<sup>\*</sup> Given the age and gender structure of the population and national death rate

## Hospital admissions

Higher than expected*	Higher than expected	Higher than expected	As expected	As expected	iry As expected
Emergency hospital admissions for all causes	Planned hospital admissions for all causes	Emergency hospital admissions for all coronary heart disease	Emergency hospital admissions for stroke	Emergency hospital admissions for heart attack	Emergency hospital admissions for chronic obstructive pulmonary As expected disease

 $<sup>^{</sup>st}$  Given the age and gender structure of the population and national admission rates

#### Lifestyles

# The heights and weights of children in reception year and year 6 are measured annually as part of the National Child Measurement Programme. 9.19% of reception year children in Foxborough are obese. An average of 12.04% of reception year children in Slough are obese.

20.35% of year six children in Foxborough are obese. An average of 21.47% of year six children in Slough are obese. It is important to note that this data at Ward level involves small numbers and any differences between areas will be, in part, due to chance occurances in the data.

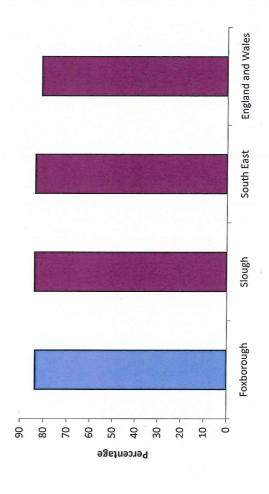
# An estimated 25.4% of adults in Foxborough are obese.

- An estimated 13.7% of adults in Foxborough binge drink.
- An estimated 25.3% of adults in Foxborough eat healthily.

# Sense of health and wellbeing

- According to the 2011 Census 83.61% of adults in Foxborough feel that they are in either good or very good health.
- 6.92% of adults in Foxborough feel that their lives are limited a lot due to ill health or disability and 7.35% of adults in Foxborough feel that their lives are limited a little due to ill health or disability.

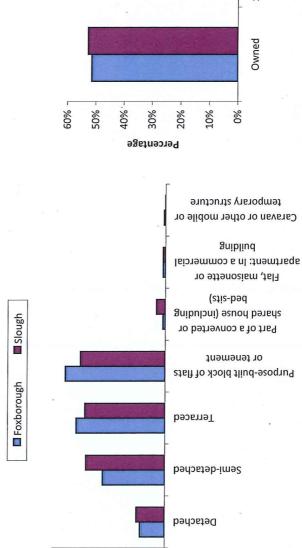




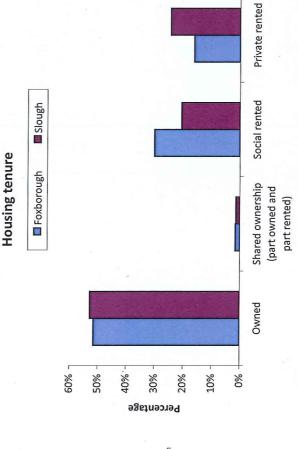
- The most common council tax band in which housing in Slough falls is Band C. This accounts for 42.71% of all dwellings. The most common council tax band in which housing in Foxborough falls is Band C. This accounts for 34.98% of all dwellings.
- There are a total of 3326 dwellings in Foxborough. 0.03% of these are shared dwellings. This is fewer than the average number of shared dwellings across Slough.
- The most common housing type in Foxborough is Purpose-built block of flats or tenement. This accounts for 35.45% of all

Housing types

- The average household size in Foxborough is 2.6 people. Which is smaller than the average for Slough.
- The average number of rooms in houses in Foxborough is 4.8. Which is more than the average for Slough.
- The average number of bedrooms in houses in Foxborough is 2.5. Which is more than the average for Slough.
- 9.58% of housing in Foxborough is classifed as needing one or more bedrooms more than it has in order to be adeqautely sized for the number of people living there. This is fewer households than the Slough average.
- 2.26% of houses in Foxborough do not have central heating. Which is fewer than the average for Slough.



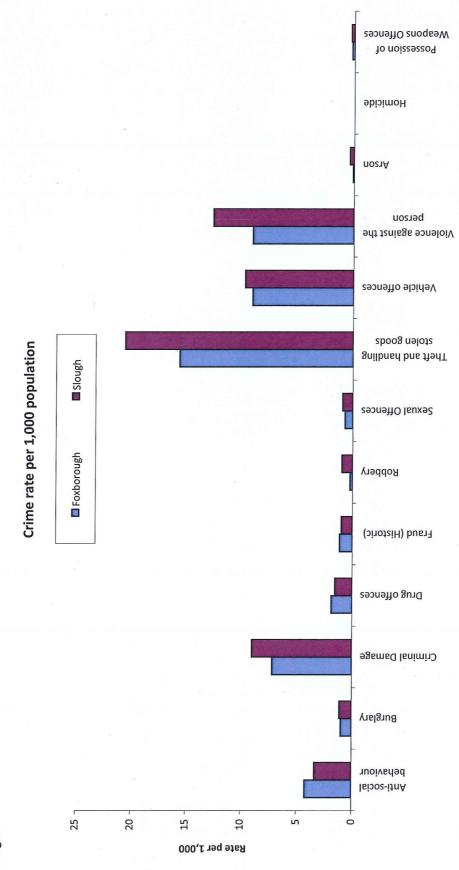
Percentage



Berkshire Public Health Shared Team

506 crimes recorded in Foxborough during 2012/13. This equates to 59.52 crimes per 1,000 people living in Foxborough - a rate that is lower than the average across There were Slough.

The most commonly occuring crime was classified as ASB for which there were 20.82 crimes per person living in Foxborough.

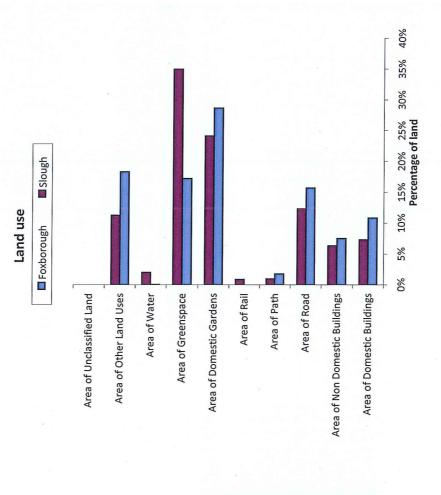


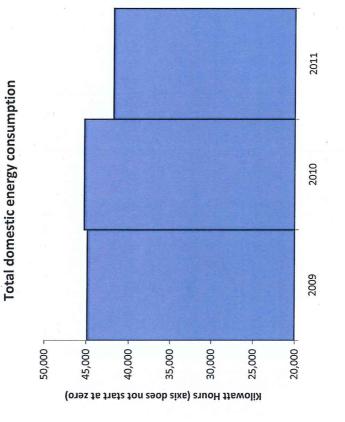
13

as urban city and town.

Population density describes the average number of people living in each hectare of land in an area. There are an average of 62.51 people living in each hectare of Foxborough. This is more than are living on average in each hectare of Slough.

The most common land use in Foxborough is areas of Domestic Gardens, this is followed by areas of Other Land Uses and areas of Greenspace.





# 10. SOURCES OF DATA

Item 1. Summary Indicators	Control	Date	
1. Summary Indicators	aning		Description
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Indices of Multiple Deprivation - IMD (2010)	Department for Communities and Local 2010 Government (DCLG)		A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
% children in Poverty (2010)	Department for Work and Pensions (DWP)	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60% or less of the median
Access to Services - IMD domain (2010)	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
% JSA Claimants (May 2012)	NOMIS	2012	DWP benefits data published by NOMIS
Post-16 Qualifications - % Level 3 or higher (2011)	2011 Census	2011	% of working age population with level 3 or higher
% key Stage 2 Level 4+ (2012)	DFE/Berkshire Local Authorities	2011/12	% of pupils achieving Level 4 or higher in both English and Maths
% 5+ GCSEs A*-C (inc Maths and English) (2012)	DFE/Berkshire Local Authorities	2011/12	% of pupils achieving 5 or more GCSEs at grade A*-C including English and Maths
All Cause Mortality <75 (2008-10)	Public Health England	2006-2010	Age/sex standardised mortality rates
Life Expectancy - males (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Life Expectancy - females (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Emergency hospital admissions for all causes (2010/11)	Public Health England	2006-2010	Age/sex standardised hospital admission rates
% low Birthweights <2500g (2008-10)	Public Health England	2007-2011	Percentage of live births with weight <2,500g
% occupancy rating - bedrooms -1 or less (2011)	Public Health England	2011	A measure of under-occupancy and over-crowding. A value of -1 implies that there is one room too few and that there is overcrowding in the household.
% no Central Heating (2011)	2011 Census	2011	The percentage of housing which does not have central heating
% socially Rented (2011)	2011 Census	2011	The percentage of households that socially rent
Crime rate per 1,000 (2011/12)	2011 Census	2011	Total crime rate per 1,000 population
Anti-social Behaviour rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total ASB rate per 1,000 population
Theft and handling stolen goods rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total Theft and Handling of Stolen Goods rate per 1,000 population
Criminal Damage rate per 1,000 (2011/12)	Thames Valley Police	2012/14	Total Criminal Damage rate per 1,000 population
2. Demographics	を とう はません に		
Population size	Office for National Statistics (ONS)	2011	Usual resident population on Census day 2011
Ethnicity	ONS	2011	Ethnic group of usual resident population on Census day 2011
Religion	ONS	2011	Religion or belief of usual resident population on Census day 2011

Item	Source	Date	Description
Household composition	SNO	2011	Members of each household on Census day 2011
Migration	SNO	2011	Usual residents who were not born in the UK recorded on Census day 2011
3. Deprivation			
Indices of Multiple Deprivation	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
Child Poverty	DWP	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60% or less of the median
Pupils eligible for free school meals	Department for Education (DFE) and Berkshire Local Authorities	2011/12	% of pupils eligible for free school meals
Car Ownership/Public Transport	ONS	2011	Car ownership per household as recorded on Census day 2011
Method of travel to work	ONS	2011	Method of travel to work (those in employment) as recorded on Census day 2011
4. Economy and enterprise			
Benefits claimants	DWP/NOMIS	2012	DWP benefits data published by NOMIS
Employment status	ONS	November 2011	Employment status as recorded on Census day 2011
Qualifications	ONS	2011	Highest level of qualification as recorded on Census day 2012
5. Education			
All education indicators	DFE/Berkshire Local	2012	The educational data provides 2012 year-end information on pupil residency-based small
6. Health			and publication in this wife lessue and attempts within the Edga Authority
Low birth weight babies	Public Health England	2007-2011	Percentage of live births with weight <2,500g
Cancer diagnoses	Public Health England	2005-2009	Cancer incidence rates - age/sex standardised
Life expectancy	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Mortality	Public Health England	2006-2010	Age/sex standardised mortality rates
Hospital admissions	Public Health England	2006/07- 2010/11	Age/sex standardised hospital admission rates
Childhood obesity	Public Health England	2009/10- 2011/12	Children classified as having a body mass index of 30 or more recorded during the National Child Measurement Programme (NCMP)
Lifestyle behaviours	Public Health England	2006-2008	Self-reported lifestyle behaviours as measured in the Health Survey for England
Sense of health and wellbeing	ONS	2011	Persons self-reported wellbeing on Census day 2011
Providing unpaid care	SNO	2011	Persons reporting themselves as providing unpaid care at least one hour per week on Census day 2011
7. Housing			
Council tax bands	Neighbourhood Statistics	2011	Council tax bands of dwelling stock
Number of dwellings	ONS	2011	Number of dwellings recorded on Census day 2011
Shared dwellings	ONS	2011	Dwellings containing members belonging to two or more different families
Household size	ONS	2011	The average number of people resident in a household
Room numbers	ONS	2011	The average number of rooms in a household

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17

Item	Source	Date	Description
Household size	ONS	2011	The average number of people resident in a household
Central heating	ONS	2011	The percentage of housing which does not have central heating
8. Community Safety			
Crime rates	Thames Valley Police	2012/13	Number of recorded crimes per 1,000 population
9. Environment			
Urban/rural classification	SNO	2012	ONS urban/rural classification (lower super output area)
Population density	ONS	2011	Persons per hectare
Domestic energy consumption	Neighbourhood Statistics	2009-2011	Domestic energy consumption (kilowatt hours)
Land Use	rhood	2005	Land use statistics in square meters, from the Generalised Land use Database (GLUD)

## cknowledgments

Sheffield City Council Ward Profiles - David Leather - https://www.sheffield.gov.uk/your-city-council/sheffield-profile/ward-profiles.html

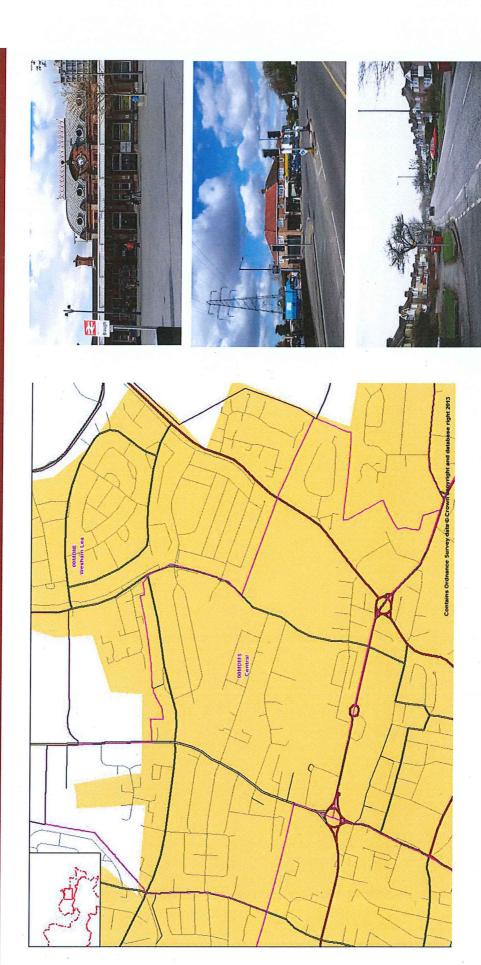
Ward Pictures - http://www.geograph.org.uk

Picture 2 Picture 3

Picture 1

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Slough Central

# NTRODUCTION

#### CONTENTS

۲.	SUMMARY2 to 3	
7	DEMOGRAPHICS4 to 6	
8	DEPRIVATION, POVERTY AND	
	ACCESS TO SERVICES7	
4.	ECONOMY AND ENTERPRISE8	
5.	EDUCATION9	
9	HEALTH10 to 11	
7.	HOUSING12	
∞i	COMMUNITY SAFETY13	
6	ENVIRONMENT14	
10.	SOURCES OF DATA 15	

This is a profile of Central Ward. It is intended to accompany the wider Joint Strategic Needs Assessment of Slough. Profiles have been created for each of the Electoral Wards within Slough.

The profiles are split into nine topics with these being accompanied by a summary of key findings and supported by metadata (information about the data used within the profiles).

and refreshed indicator data. We welcome your comments and suggestions so that we can ensure The profiles are a tool which will be regularly developed with both improved functionality and also new future developments are relevant and useful to you. The profiles are in the main based only on data that are collected nationally with a high degree of completeness. This has been supplemented with local data where this has been considered appropriate. Some indicators may give small numbers at Ward level. This should be taken into consideration when interpreting the data. Small changes in counts can lead to wide variance in the rate, and counts can vary significantly from year to year. Any provisional conclusions drawn from the profiles should be compared with other sources of information, both quantitative and qualitative.

## 1. SUMMARY

There are 12,364 people living in Central 11.44% of these are children aged 0 to 15 and 4% are older people aged 65 and over. The non-white British population accounts for 85.6% of the total poulation. 48% of the Central population were born in the UK. This is fewer than the average of Slough. Central is the 3rd most deprived ward in Slough (out of 14 Wards). 24.4% of children in Central are at risk of living in poverty, compared with 22.2% across Slough. In Central 13.4% of the working age population claim benefits compared with 12.6% in Slough 59.03% of the population of Central who are aged 16 to 74 years are in employment. This is lower than the average in Slough. In Central, the majority of people in employment (40% of workers) were employed in Manual occupations. 19% of workers were employed in Elementary occupations. 20% of working age people in Central have no formal qualifications.

66.83% of children living in Slough achieved the expected level of attainment at Key Stage 2. 68% of children living in Central achieved the expected 58.72% of children living in Slough achieved 5 GCSEs at grade A\* to C. 58.8% of children living in Central achieved 5 GCSEs at grade A\* to C. level of attainment at Key Stage 2. The average life expectancy at birth for males living in Central is 78.3 years. The average life expectancy at birth for females in Central is 81 years. Death rates from all causes in people aged less than 75 are As expected. Emergency hospital admissions for all causes are Higher than expected\*. An estimated 21.5% of adults in Central are obese. An estimated 7.4% of adults in Central binge drink. An estimated 28.4% of adults in Central eat

The average household size in Central is 3.2 people and 21.08% of housing in Central is classifed as needing one or more bedrooms more than it There are a total of 4038 dwellings in Central. The most common housing type in Central is Semi-detached. This accounts for 33.23% of all housing. has in order to be adeqautely sized for the number of people living there.

There were 1179 crimes recorded in Central during 2012/13. This equates to 95.36 crimes per 1,000 people living in Central - a rate that is lower than the average across Slough.

In Central 100% of the population live in areas classified as urban city and town.

<sup>\*</sup> Given the age and gender structure of the population and national death/admission rates

Category						
	Indicator	Central	Slough Average	Ward Range Worst	Local Authority Average Worst Best ←	Ward Range Best
Deprivation &	Indices of Multiple Deprivation - IMD (2010)	28.2	24.1	35.0	•	16.3
access	% children in Poverty (2010)	24.4	22.2	28.5	•	15.5
	Access to Services - IMD domain (2010)	33.7	29.3	34.4	<b>•</b>	23.9
Economy &	% JSA. Claimants (November 2012)	4.2	3.5	4.8	<b>→</b>	2.0
Ellerprise	Post-16 Qualifications - % Level 3 or higher (2011)	34.6	36.0	25.9		46.3
Education	% key Stage 2 Level 4+ (2012)	0.89	78.4	67.0	<b>*</b>	88.0
	% 5+ GCSEs A*-C (inc Maths and English) (2012)	58.8	59.4	47.2		72.9
Health	All Cause Mortality <75 (2008-10)	109.6	111.4	150	_	83
	Life Expectancy - males (2008-10)	78.3	79	73.7		83.2
	Life Expectancy - females (2008-10)	81.0	83.1	77.9		85.4
	Emergency hospital admissions for all causes (2010/11)	115.0	108.0	133.8	•	86.8
	% low Birthweights <2500g (2008-10)	10.1	8.5	11.0	<b>*</b>	6.7
Housing	% occupancy rating - bedrooms -1 or less (2011)	21.1	12.7	21.1	<b>◆</b>	7.2
	% no Central Heating (2011)	2.5	2.8	6.2		1.7
	% socially Rented (2011)	16.8	20.5	41.1		10.7
Community	Crime rate per 1,000 (2011/12)	95.4	72.7	127.7	<b>*</b>	44.6
Salety	Anti-social Behaviour rate per 1,000 (2011/12)	21.8	24.8	43.7		14.7
	Theft and handling stolen goods rate per 1,000 (2011/12)	41.6	20.9	0.79	<b>*</b>	6.8
,	Criminal Damage rate per 1,000 (2011/12)	8.1	9.1	14.5		6.1

## How to read the spine chart:

that indicator, or where most values typically lie. The black triangles 🔺 represent values that are better than the average, whilst the blue diamond line this suggests the ward is performing 'better' in a particular indicator, to the left suggests it is 'worse'. This does not necessarily mean higher or between the 'best' and 'worst' wards in the local authority. The yellow circles 🔘 represent values that are within the 75th and 25th percentile for The shapes on the graph represent the value of the ward compared against the Local Authority average. If positioned to the right of the average represents the range lower values, e.g. high GCSE attainment is 'better', whereas a high crime rate is 'worse'. The light grey rectangle shows values that are worse.

# 2. DEMOGRAPHICS

Central has a population of 12,364. This figure has increased at a slower rate than it has on average across Slough since 2001.

The working age population is relatively large in comparison to Slough.

Related to this, the ward has a proportionately larger young The 2011 Census indicates that 86% of Central are BME, population (11%) and a smaller older population (4%). higher than the Slough average.

The largest single BME population is the Asian/Asian British: Pakistani group. This group represents 40.1% of BME people and 34.29% of the total population of the ward.

# Population Summary 2011

Central

	ర	Central	Slough
Total Population	12,364	· · ·	ı
Males	6,261	%9.09	20.0%
Females	6,103	49.4%	20.0%
Children (0-15)	1,415	11.4%	11.1%
Working Age (16-64)	4,112	33.3%	33.2%
Older People (65+)	495	4.0%	5.1%
BME Population	10,584	85.6%	65.5%
Population (2001)	10,818	i	
Population Change (2001-2011)	1,546	14.3%	16.3%

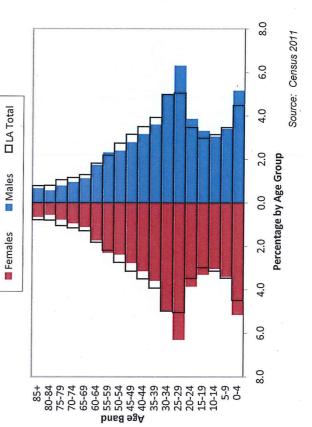
## Religion 2011

Population structure 2011

Males

Females

Slough	41.2%	0.5%	6.2%	0.1%	23.3%	10.6%	0.3%	12.1%	2.7%
Central	29.8%	0.7%	2.9%	%0	40.6%	10.9%	0.4%	6.7%	5.1%
o	3,683	82	729	2	5,014	1,344	49	827	634
	Christian	Buddhist	Hindu	Jewish	Muslim	Sikh	Any other religion	No Religion	Religion not stated



Berkshire Public Health Shared Team

	10,584	02.020	02.2%				
	1,780	14.4%	34.5%		1,989	16.1%	15.6%
	82	0.7%	1.1%		4,239	34.3%	17.7%
	56	0.2%	0.2%		89	0.5%	0.4%
	1,505	12.2%	86.6		65	0.5%	%9.0
***					828	6.7%	5.4%
	113	0.9%	1.2%				
	49	0.4%	0.4%		688	2.6%	5.4%
	111	0.9%	1.0%		295	2.4%	2.2%
	09	0.5%	%8.0		124	1.0%	1.0%
and the second s	342	2.8%	2.6%				
All Households:	3880		50,766	Lone Parent	470	12.1%	12.8%
				Dependent children	328	8.5%	8.9%
One Person Household:	913	23.5%	28.5%	Non dependent children	142	3.7%	3.9%
One Family Household:	2076	53.5%	27.8%	Other household types	891	23.0%	13.8%
All aged over 65	107	2.8%	3.6%	With dependent children	449	11.6%	7.0%
Married or same-sex civil partnership couple	1286	33.1%	33.9%	All full-time students	24	%9.0	0.2%
No children	283	7.3%	8.3%	All aged 65 and over	9	0.2%	0.2%
Dependent children	776	20.0%	20.0%	Other	412	33.1%	33.9%
Non dependent children	227	2.9%	2.6%				
Cohabiting couple	213	5.5%	7.5%				
No children	115	3.0%	3.8%				
Dependent children	06	2.3%	3.3%				
Non dependent children	œ	%00	0.4%				

# 2. DEMOGRAPHICS

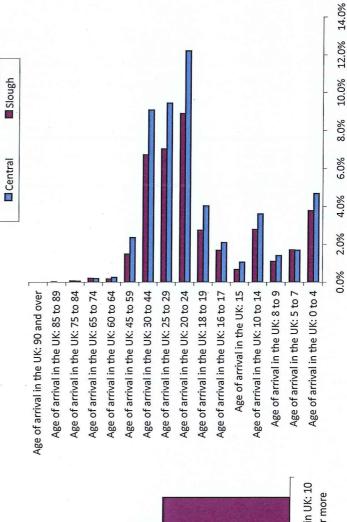
### MIGRATION

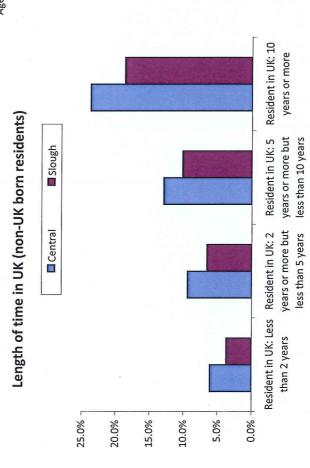
- 48% of the Central population were born in the UK. This is fewer than the average of Slough.
- The majority of people living in Central who were not born in the UK have been resident in the UK for 10 years or more.
- The majority of people living in Central who were not born in the UK moved to the UK when they were aged between 20 to 24.

## Country of birth 2011

Central	5,925 47.9%	85 0.7%		4,851 39.2%
	United Kingdom	Ireland	Other EU	Other Countries

# Age of arrival in UK (non-UK born residents)





# DEPRIVATION, POVERTY AND ACCESS TO SERVICES

# Indices of Multiple Deprivation (IMD)

# Central is the 3rd most deprived ward in Slough (out of 14 Wards).

31% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, according to the latest Indices of Deprivation.

There are no people in the ward who are living in areas classed amongst the 5% most deprived in Slough, according to the latest Indices of Deprivation.

## Child Poverty

24.4% of children in Central are at risk of living in poverty, compared with 22.2% across Slough.

This figure has fallen by -7.3% since 2006.

## Free school meals

14.63% of children living in Slough and attending schools in Slough are eligible for and receiving free school meals. Free school meals data is not available for Central Ward.

## Access to Services

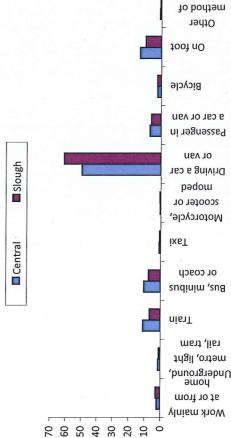
There are 1105 households in Central who do not own a car or van. This is 28.48% of all households in the Ward which is more than the Slough average.

The indices of multiple deprivation includes a measure of barriers to housing and services. On this measure Central is the 2nd most deprived ward in Slough (out of 14 Wards).

30% of people in the ward are living in areas classed amongst the 5% most deprived in Berkshire, on this measure according to the latest Indices of Deprivation.

15% of people in the ward are living in areas classed amongst the 5% most deprived in Slough on this measure according to the latest Indices of Deprivation.





Percentage of people in employment

travel to work

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# ECONOMY AND ENTERPRISE

In Central 13.4% of the working age population claim benefits compared with 12.6% in Slough. Broken down:

Statistical Group	Central	2	Slough	db
Job Seekers ESA and Incapacity	360	4.2%	3,330	3.5%
Benefits	420	2.0%	4,810	5.1%
Lone parents	125	1.5%	1,400	1.5%
Carers	100	1.2%	066	1.1%
Other income benefits	20	%9.0	360	0.4%
Disabled	65	0.8%	765	0.8%
Bereaved	20	0.2%	185	0.2%
Total Claimants	1,140	13.4%	11,840	12.6%

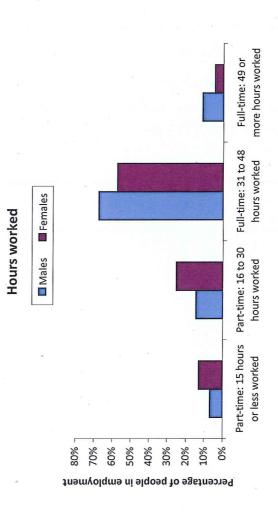
## Qualifications

Recent statistics on qualifications are available at ward level using data collected as part of the 2011 Census. This showed that:

- 20% of working age people in Central have no formal qualifications.
- 34.6% were qualified to NVQ Level 3 or higher compared with 36% in Slough as a whole.
- Please see the 'Education' section of these Ward Profiles for information on school attainment.

## **Employment**

- In Central, the majority of people in employment (40% of workers) were employed in Manual occupations. 19% of workers were employed in Elementary occupations.
- In Slough as a whole the majority of people in employment (35% of workers) were employed in Manual occupations. 16% of workers were employed in Professional occupations.
- 59.03% of the population of Central who are aged 16 to 74 years are in employment. This is lower than the average in Slough.
- 6.21% of the population of Central who are aged 16 to 74 years are unemployed. This is higher than the average in Slough.



 $\infty$ 

# 5. EDUCATION

We have to treat the following data with some caution due to the small numbers that are involved in the calculations. It is likely that differences between areas will be largely due to random effects occurring within the data. Data is only available at a Ward level for children who both live in, and attend school within, the local authority.

## Pupil characteristics

# 77.4% of children living in Slough come from non-White British backgrounds. Pupil ethnicity data is not available for Central.

## **GCSE attainment**

 58.72% of children living in Slough acheived 5 GCSEs at grades A\* to C which included English and Maths. 58.8% of children living in Central acheived 5 GCSEs at grades A\* to C which included English and Maths.

## Unauthorised absences

49.7% of children living in Slough have English as a second language. Spoken language data is not available for Central.

0.8% of school sessions were missed through unauthorised absences by children living in Slough. School absence data is not available for Central.

## Key Stage 2 attainment

66.83% of children living in Slough acheived the expected level of attainment in Key Stage 2. 68% of children living in Central acheived the expected level of attainment in Key Stage 2.

numbers that are very small we have to consider two key points before they are used in profiles such as this. Firstly, when numbers are reliable conclusions from information which is based on these small numbers. It may also be the case that the information is not available One of the ways that this is overcome is to use 'modelled' data. This is data that has been taken from a much larger number of people and used to estimate the likelihood of a certain characteristic appearing in other areas such as Wards depending on some key features of that It is often difficult to use health data when looking at small areas such as Wards. This is because of the size of the numbers involved. For example, only a few people from each Ward may be admitted to hospital each year for a specific condition. When we are looking at small we are not legally able to share them as the individual may be identifiable from the data. Secondly, it is difficult to come to any at these low levels. This is particularly true of information about peoples lifestyles (for example, how many people smoke or drink alcohol). area such as how many people of a particular age group live there.

The percentage of live births to mothers living in Central which were of a low birth weight is estimated to be 10.1%. The percentage on average across Slough is 8.8%. Any difference is not statistically significant.

The number of people living in Central who are diagnosed with cancer is lower than expected given the age and gender structure of the population.

The average life expectancy at birth for males living in Central is 78.3 years. The average life expectancy at birth for females in Central is 81 years.

Deaths from all causes, all ages	As expected*
Deaths from all causes, under 65 As expected	As expected
Deaths from all causes, under 75 As expected	As expected
Deaths from all cancer, all ages	As expected
Deaths from all cancer, under 75 As expected	As expected
Deaths from circulatory disease, all	1
ages	nigner than expected
Deaths from respiratory diseases,	
all ages	As expected

<sup>\*</sup> Given the age and gender structure of the population and national death rate

## Hospital admissions

Higher than expected*	Lower than expected	Higher than expected	As expected	Higher than expected	Higher than expected
Emergency hospital admissions for all causes	Planned hospital admissions for all causes	Emergency hospital admissions for all coronary heart disease	Emergency hospital admissions for stroke	Emergency hospital admissions for heart attack	Emergency hospital admissions for chronic obstructive pulmonary Higher than expected disease

<sup>\*</sup> Given the age and gender structure of the population and national admission rates

## 6. HEALTH

#### Lifestyles

# The heights and weights of children in reception year and year 6 are measured annually as part of the National Child Measurement Programme. 12.42% of reception year children in Central are obese. An average of 12.04% of reception year children in Slough are obese.

- 23.99% of year six children in Central are obese. An average of 21.47% of year six children in Slough are obese. It is important to note that this data at Ward level involves small numbers and any differences between areas will be, in part, due to chance occurances in the data.
- An estimated 21.5% of adults in Central are obese.
- An estimated 7.4% of adults in Central binge drink.

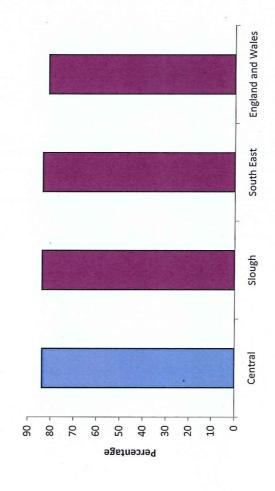
Page 64

An estimated 28.4% of adults in Central eat healthily.

# Sense of health and wellbeing

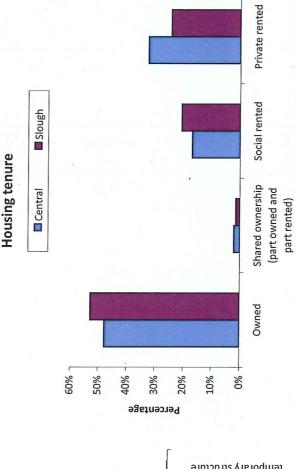
- According to the 2011 Census 83.79% of adults in Central feel that they are in either good or very good health.
- 5.6% of adults in Central feel that their lives are limited a lot due to ill health or disability and 7.36% of adults in Central feel that their lives are limited a little due to ill health or disability.

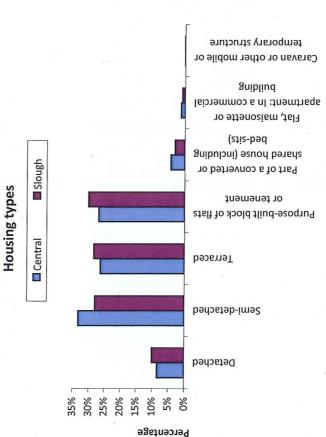
# People providing at least one hour of unpaid care per week



- The most common council tax band in which housing in Slough falls is Band C. This accounts for 42.71% of all dwellings. The most common council tax band in which housing in Central falls is Band C. This accounts for 47.12% of all dwellings.
- There are a total of 4038 dwellings in Central. 0.1% of these are shared dwellings. This is greater than the average number of shared dwellings across Slough.
- The most common housing type in Central is Semi-detached. This accounts for 33.23% of all housing.

- The average household size in Central is 3.2 people. Which is larger han the average for Slough.
- The average number of rooms in houses in Central is 4.7. Which is more han the average for Slough.
- The average number of bedrooms in houses in Central is 2.5. Which is more than the average for Slough.
- bedrooms more than it has in order to be adeqautely sized for the 21.08% of housing in Central is classifed as needing one or more number of people living there. This is more households than the Slough average.
- 2.5% of houses in Central do not have central heating. Which is fewer than the average for Slough.

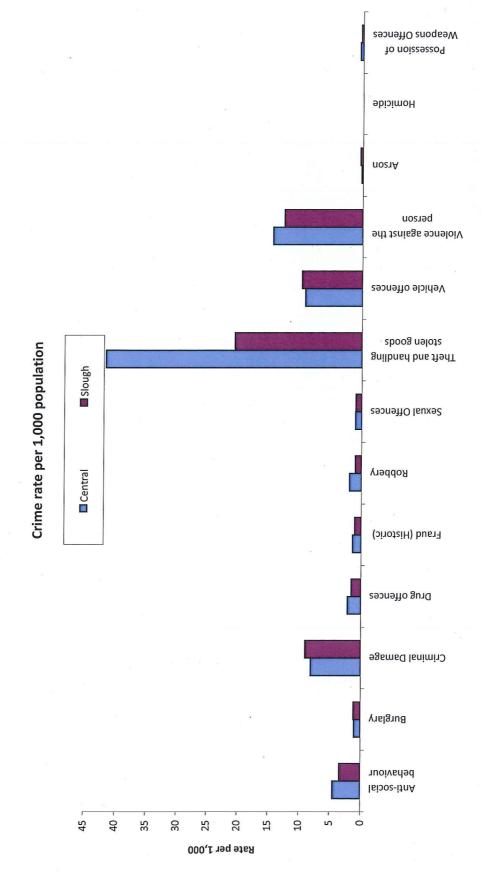




There were 1179 crimes recorded in Central during 2012/13. This equates to 95.36 crimes per 1,000 people living in Central

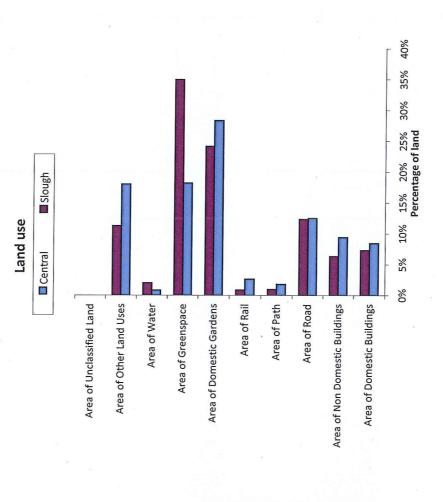
a rate that is lower than the average across Slough.

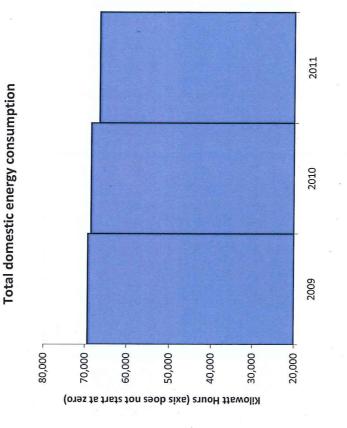
stolen goods for which there were 41.57 crimes per person living in The most commonly occuring crime was classified as Theft and handling Central.



- In Central 100% of the population live in areas classified as
  - urban city and town.
- Population density describes the average number of people living in each hectare of land in an area. There are an average of 59.44 people living in each hectare of Central. This is more than are living on average in each hectare of Slough.

The most common land use in Central is areas of Domestic Gardens, this is followed by areas of Greenspace and areas of Other Land Uses.





# 10. SOURCES OF DATA

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Item	Source	Date	Description
1. Summary Indicators			を できる
Indices of Multiple Deprivation - IMD (2010)	Department for Communities and Local 2010 Government (DCLG)	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
% children in Poverty (2010)	Department for Work and Pensions (DWP)	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60% or less of the median
Access to Services - IMD domain (2010)	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
% JSA Claimants (May 2012)	NOMIS	2012	DWP benefits data published by NOMIS
Post-16 Qualifications - % Level 3 or higher (2011)	2011 Census	2011	% of working age population with level 3 or higher
% key Stage 2 Level 4+ (2012)	DFE/Berkshire Local Authorities	2011/12	% of pupils achieving Level 4 or higher in both English and Maths
% 5+ GCSEs A*-C (inc Maths and English) (2012)	DFE/Berkshire Local Authorities	2011/12	% of pupils achieving 5 or more GCSEs at grade A*-C including English and Maths
All Cause Mortality <75 (2008-10)	Public Health England	2006-2010	Age/sex standardised mortality rates
Life Expectancy - males (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Life Expectancy - females (2008-10)	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Emergency hospital admissions for all causes (2010/11)	Public Health England	2006-2010	Age/sex standardised hospital admission rates
% low Birthweights <2500g (2008-10)	Public Health England	2007-2011	Percentage of live births with weight <2,500g
% occupancy rating - bedrooms -1 or less (2011)	Public Health England	2011	A measure of under-occupancy and over-crowding. A value of -1 implies that there is one room too few and that there is overcrowding in the household.
% no Central Heating (2011)	2011 Census	2011	The percentage of housing which does not have central heating
% socially Rented (2011)	2011 Census	2011	The percentage of households that socially rent
Crime rate per 1,000 (2011/12)	2011 Census	2011	Total crime rate per 1,000 population
Anti-social Behaviour rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total ASB rate per 1,000 population
Theft and handling stolen goods rate per 1,000 (2011/12)	Thames Valley Police	2012/13	Total Theft and Handling of Stolen Goods rate per 1,000 population
Criminal Damage rate per 1,000 (2011/12)	Thames Valley Police	2012/14	Total Criminal Damage rate per 1,000 population
2. Demographics			
Population size	Office for National Statistics (ONS)	2011	Usual resident population on Census day 2011
Ethnicity	ONS	2011	Ethnic group of usual resident population on Census day 2011
Religion	ONS	2011	Religion or belief of usual resident population on Census day 2011

Item	Source	Date	Description
Household composition	SNO	2011	Members of each household on Census day 2011
Migration	ONS	2011	Usual residents who were not born in the UK recorded on Census day 2011
3. Deprivation			
Indices of Multiple Deprivation	DCLG	2010	A national index of deprivation, where 32,480 Lower Super Output Areas are ranked in order of relative deprivation
Child Poverty	DWP	2010	Measures the % of children in households receiving Child Tax Credits and with incomes 60% or less of the median
Pupils eligible for free school meals	Department for Education (DFE) and Berkshire Local Authorities	2011/12	% of pupils eligible for free school meals
Car Ownership/Public Transport	ONS	2011	Car ownership per household as recorded on Census day 2011
Method of travel to work	ONS	2011	Method of travel to work (those in employment) as recorded on Census day 2011
4. Economy and enterprise			
Benefits claimants	DWP/NOMIS	2012	DWP benefits data published by NOMIS
Employment status	ONS	November 2011	Employment status as recorded on Census day 2011
Qualifications	ONS	2011	Highest level of qualification as recorded on Census day 2012
5. Education			
All education indicators	DFE/Berkshire Local	2012	The educational data provides 2012 year-end information on pupil residency-based small
6. Health	Addiones		area pupil attaiiilleilt. Pupils Wild reside and attend schools Within the Local Authority
Low birth weight babies	Public Health England	2007-2011	Percentage of live births with weight <2,500g
Cancer diagnoses	Public Health England	2005-2009	Cancer incidence rates - age/sex standardised
Life expectancy	Public Health England	2006-2010	Life expectancy at birth calculated from all cause, all age mortality
Mortality	Public Health England	2006-2010	Age/sex standardised mortality rates
Hospital admissions	Public Health England	2006/07- 2010/11	Age/sex standardised hospital admission rates
Childhood obesity	Public Health England	2009/10- 2011/12	Children classified as having a body mass index of 30 or more recorded during the National Child Measurement Programme (NCMP)
Lifestyle behaviours	Public Health England	2006-2008	Self-reported lifestyle behaviours as measured in the Health Survey for England
Sense of health and wellbeing	ONS	2011	Persons self-reported wellbeing on Census day 2011
Providing unpaid care	SNO	2011	Persons reporting themselves as providing unpaid care at least one hour per week on Census day 2011
7. Housing			
Council tax bands	Neighbourhood Statistics	2011	Council tax bands of dwelling stock
Number of dwellings	ONS	2011	Number of dwellings recorded on Census day 2011
Shared dwellings	ONS	2011	Dwellings containing members belonging to two or more different families
Household size	ONS	2011	The average number of people resident in a household
Room numbers	ONS	2011	The average number of rooms in a household

Berkshire Public Health Shared Team

17

Item	Source	Date	Description
Household size	ONS	2011	The average number of people resident in a household
Central heating	ONS	2011	The percentage of housing which does not have central heating
8. Community Safety			
Crime rates	Thames Valley Police	2012/13	Number of recorded crimes per 1,000 population
9. Environment			
Urban/rural classification	ONS	2012	ONS urban/rural classification (lower super output area)
Population density	ONS	2011	Persons per hectare
Domestic energy consumption	Neighbourhood Statiction	2009-2011	Domestic energy consumption (kilowatt hours)
Land Use	Neighbourhood Statistics	2005	Land use statistics in square meters, from the Generalised Land use Database (GLUD)

## Acknowledgments

Sheffield City Council Ward Profiles - David Leather - https://www.sheffield.gov.uk/your-city-council/sheffield-profile/ward-profiles.html

Ward Pictures - http://www.geograph.org.uk

Picture 1

Picture 2 Picture 3

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#### **SLOUGH BOROUGH COUNCIL**

**REPORT TO:** Overview & Scrutiny **DATE:** 3 December 2013

Committee

**CONTACT OFFICER:** Sarah Forsyth – Scrutiny Officer

(For all Enquiries) (01753) 875657

WARDS: All

PART I

#### TO NOTE

#### **OVERVIEW AND SCRUTINY COMMITTEE - 2013/14 WORK PROGRAMME**

#### 1. Purpose of Report

1.1 For the Overview and Scrutiny Committee to review the current work programme for the Committee.

#### 2. Recommendations/Proposed Action

2.1 That the Committee note the current work programme for the 2013/14 municipal year.

#### 3. Joint Slough Wellbeing Strategy Priorities

- Economy and Skills
- · Health and Wellbeing
- Housing
- Regeneration and Environment
- Safer Communities
- 3.1 The Council's decision-making and the effective scrutiny of it underpins the delivery of all the Joint Slough Wellbeing Strategy priorities. The Overview and Scrutiny Committee leads the Council's statutory requirement to provide public transparency and accountability, ensuring the best outcomes for the residents of Slough.

#### 4. Supporting Information

#### Work Programme

4.1 The current work programme is based on the discussions of the Committee at its previous meetings, looking at requests for consideration of issues from officers and issues that have been brought to the attention of Members outside of the Committee's meetings.

4.2 The work programme is a flexible document which will be continually open to review throughout the municipal year.

#### 5. **Conclusion**

- 5.1 The Overview and Scrutiny Committee plays a key role in ensuring the transparency and accountability of the Council's financial and performance management, and strategic direction.
- 5.2 This report is intended to provide the Committee with the opportunity to review its upcoming work programme and make any amendments it feels are required.

#### 6. **Appendices Attached**

A - Work Programme for 2013/14 Municipal Year

#### 7. **Background Papers**

None.

# OVERVIEW AND SCRUTINY COMMITTEE WORK PROGRAMME 2013/14

Meeting Date	14 January 2014			6 February 2014		4 March 2014	
	14	Scrutiny Items      Preparations for individual electoral registration     Bus Station: Lessons Learned	For Agreement • Childhood Obesity – Meeting 5: Sign off report	9	<ul> <li>Scrutiny Items</li> <li>Q3 Performance and Finance Report</li> <li>Budget Papers: <ul> <li>Revenue Budget 2014/15</li> <li>Medium Term Financial Strategy 2014-2018</li> <li>Treasury Management Strategy</li> <li>Capital Strategy 2014-2019</li> </ul> </li> </ul>		<ul><li>Scrutiny Items</li><li>Chief Constable</li><li>Social Care Bill incl. Dilnot Recommendations</li></ul>

# 8 April 2014 Leaseholder Services – Update on Improvements Review of Job Clubs Administrative Items • Scrutiny Annual Report Scrutiny Items

Currently Un-programmed:
• Loanshark Service

- Apprenticeships, work experience and Aspire Impact of Benefits Changes

# MEMBERS' ATTENDANCE RECORD 2013/2014

# **OVERVIEW AND SCRUTINY COMMITTEE**

04/06 08/07 10/09 07/10
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P = Present for whole meeting Ap = Apologies given

P\* = Present for part of meetingAb = Absent, no apologies given

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