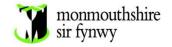
### **Public Document Pack**



County Hall Rhadyr Usk NP15 1GA

Tuesday, 17 April 2018

### **Notice of meeting**

### **Lower Wye Area Committee**

### Wednesday, 25th April, 2018 at 10.00 am, Chepstow Leisure Centre, Welsh Street, Chepstow

### **AGENDA**

Item No	Item	Pages
1.	Apologies for Absence	
2.	Declarations of Interest	
3.	Public Open Forum	
4.	To receive the notes of the previous meeting held on 20th September 2017.	1 - 8
5.	Community Partnership Team Update: Community & Partnership Development Lead, Judith Langdon.	
6.	Social Justice Report: Chief Officer, Social Care, Health and Safeguarding - Claire Marchant	9 - 32
7.	Aneurin Bevan University Hospital board: Chepstow Hospital - dementia ward (Claire Marchant)	
8.	Updates on Roads: Group Engineer (Highway & Flood Management), Paul Keeble and Head of Operations, Roger Hoggins	
8.1.	Progress with Gloucestershire/Forest of Dean (Chepstow traffic and bypass)	
8.2.	M48 Slip Road	
8.3.	A466 St Arvans to Tintern: The present and the future	
9.	Planning update: Head of Planning, Housing and Place-Shaping, Mark Hand	

10.	To nominate a representative to sit on the Strategic Transport Group.	
11.	Impact of removal of Severn Bridge tolls: Business Insights Manager, Monmouthshire Business & Enterprise, James Woodcock	33 - 38
12.	To note the position regarding Chepstow Station Footbridge	
13.	Future Direction of Area Committee	
14.	To confirm the date and time of the next meeting as Wednesday 18th July 2018 at 10.00 (venue to be arranged).	

### **Paul Matthews**

**Chief Executive / Prif Weithredwr** 

# MONMOUTHSHIRE COUNTY COUNCIL CYNGOR SIR FYNWY

### THE CONSTITUTION OF THE COMMITTEE IS AS FOLLOWS:

County Councillors: D. Dovey

A. Webb L.Brown J.Becker D. Batrouni

R.J.W. Greenland

P. Murphy P.Pavia A. Watts

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### Welsh Language

The Council welcomes contributions from members of the public through the medium of Welsh or English. We respectfully ask that you provide us with adequate notice to accommodate your needs.

### **Aims and Values of Monmouthshire County Council**

### Our purpose

Building Sustainable and Resilient Communities

### Objectives we are working towards

- Giving people the best possible start in life
- A thriving and connected county
- Maximise the Potential of the natural and built environment
- Lifelong well-being
- A future focused council

### **Our Values**

**Openness**. We are open and honest. People have the chance to get involved in decisions that affect them, tell us what matters and do things for themselves/their communities. If we cannot do something to help, we'll say so; if it will take a while to get the answer we'll explain why; if we can't answer immediately we'll try to connect you to the people who can help – building trust and engagement is a key foundation.

**Fairness**. We provide fair chances, to help people and communities thrive. If something does not seem fair, we will listen and help explain why. We will always try to treat everyone fairly and consistently. We cannot always make everyone happy, but will commit to listening and explaining why we did what we did.

**Flexibility**. We will continue to change and be flexible to enable delivery of the most effective and efficient services. This means a genuine commitment to working with everyone to embrace new ways of working.

**Teamwork**. We will work with you and our partners to support and inspire everyone to get involved so we can achieve great things together. We don't see ourselves as the 'fixers' or problem-solvers, but we will make the best of the ideas, assets and resources available to make sure we do the things that most positively impact our people and places.



# Public Document Pack Agenda Item 4 MONMOUTHSHIRE COUNTY COUNCIL

Minutes of the meeting of Lower Wye Area Committee held at St Arvans Memorial Hall - St Arvans on Wednesday, 20th September, 2017 at 10.00 am

PRESENT: County Councillor D. Dovey (Chair)

County Councillors: L.Brown and J.Becker

### Also Present:

Councillor G. Down – Mathern Community Council Councillor S. Dovey – Chepstow Town Council Mr.A. Braund - Member Of The Public

### **OFFICERS IN ATTENDANCE:**

Wendy Barnard Democratic Services Officer

Nick Wood Chief Operating Officer, Aneurin Bevan University Health

Board

### **APOLOGIES:**

County Councillors A. Webb, D. Batrouni, R.J.W. Greenland, P. Murphy and P.Pavia, Councillor I. Martin and Mr. M. Brady.

### 1. Declarations of Interest

No declarations of interest were made.

### 2. Public Open Forum

Members of the public Mr. A. Braund and Cllr. S. Dovey were present at the meeting.

### 3. To receive the minutes of the meeting held on 14th June 2017

The minutes of the meeting held on the 14th June 2017 were confirmed as a true record.

 Area Grant Applications: The Clerk had made some enquiries about the area grant application forms that queried at the last meeting in respect of Shirenewton Recreation Hall and Mathern Athletic Club and reported that there are no records of application forms being received, unfortunately.

By way of an update for future applicants, it was advised that arrangements for making an application for area funds are currently held in abeyance whilst the outcome of the Community and Partnership Development restructure is decided and consequently, it is likely to be several months before a new application process, with new criteria, is available.

The response was noted.

• Traffic issues: It was agreed to invite a member of the Highways team to the next meeting.

- 4. <u>Aneurin Bevan University Health Board: Health Services in Chepstow and surrounding area.</u>
- 4.1 The Area Committee welcomed Mr. N. Wood, Chief Operating Officer, Aneurin Bevan University Health Board (ABUHB). Some questions were submitted prior to the meeting.
- 4.2 It was explained that the Clinical Futures Strategy sets out to develop health services in the Gwent region by delivering most care close to home, by creating a network of local hospitals providing routine diagnostic and treatment services and by centralising specialist and critical care services in a purpose built Specialist and Critical Care Centre (SCCC). Building the 447 bed SCCC has commenced and will open in 2021 and a series of local district local hospitals will then provide a clear model regarding management of ill health.
- 4.3 Progress so far has seen the building of Ysbytty Aneurin Bevan (Ebbw Vale) and Ysbytty Ystrad Fawr which consolidates the former North Gwent Community Hospitals. It is now necessary to plan how best to use Nevill Hall Hospital, Abergavenny and Royal Gwent Hospital, Newport as local general hospitals.
- 4.4 In terms of Primary Care (Care closer to home), it was explained that there are 12 Neighbourhood Care Networks (NCN) in the Gwent area with one in North Monmouthshire and one in South Monmouthshire. The NCNs develop local plans to deliver local care, including at local hospitals e.g. Chepstow and Monnow Vale hospitals; an arrangement that will allow local GPs a greater say in developments to deliver models of care closer to home. It is hoped to all elements operational by the time the SCCC opens in 2021.
- 4.5 It was questioned how these plans have been communicated to residents and responded that the strategic plan was partially driven through the Welsh Government Primary Care Plan in Wales explaining that the Clinical Futures Strategy was consulted upon in 2009 and scrutinised by the Community Health Council. Since that time it was stated that plans are regularly communicated and consulted upon. The example was provided of the local consultation undertaken regarding the move to specialise in breast services in Ysbytty Ystrad Fawr. The Area Committee was reminded of the work of the Public Service Board which considers health policy, the Wellbeing of Future Generations (Wales) Act 2015 and the Social Services and Wellbeing Act 2014.
- 4.6 The Committee were advised that there is a workforce crisis and lack of GPs in Gwent (common to the rest of Wales) and this is placing pressure on primary care services. A task force has been set up to address this issue which is particularly challenging in North Caerphilly, Blaenau Gwent and Torfaen. It was commented that South Monmouthshire is not too bad in comparison and recruitment has been mainly successful with only one vacancy currently.
- 4.7 More information was provided that in the region there are 200 nurse, and 40 Junior and Middle Tier hospital doctor vacancies. In Monmouthshire, there is a significant shortfall of domiciliary care with an outcome that some care packages are not available with a consequence that some patients have to stay in nursing homes or hospitals longer than necessary.

# Minutes of the meeting of Lower Wye Area Committee held at St Arvans Memorial Hall - St Arvans on Wednesday, 20th September, 2017 at 10.00 am

- 4.8 It was explained that the financial situation is the same as rest of wales. The Health Board had a forecast deficit budget of £10m and with savings of 3% this would be mitigated.
- 4.9 It was confirmed that primary care in a locality is generally delivered by contracted staff at independently contracted GP surgeries. GP practices receive income based on size of population and relative deprivation.
- 4.10 Staffing at Chepstow GP surgeries as of 01.07.17 was advised as:

### **Towngate (9162 Patients)**

- 4 GP Partners 2.67 WTE
- 1 Salaried GP
- 1 Advanced Nurse Practitioner
- 2 Nurses
- 3 HCA
- 1 Phlebotomist

### **Mount Pleasant Practice – (8,299 Patients)**

- 4 GP Partners (1 resigning 30.09.2017) 2.89 WTE
- 3 Salaried GPs
- 5 Nurses
- 2 HCA

### **Vauxhall Practice – (7,388 Patients)**

- 4 GP Partners 2.89 WTE
- 2 Salaried GPs
- 1 Advanced Nurse Practitioner
- 3 Nurses
- 1 HCA
- 2 Phlebotomists
- 4.11 It was noted that not all of the other staff are full time workers and also that the above numbers of GPs meets the aim of 1 per 2000 patients which is a relative guide.
- 4.12 Information was provided regarding national standards around access to provisions and the principles of 5 As for Access:
  - Morning Opening Time 8.00am/Consultation Start Time 8.30am
  - Doors to remain open during lunch
  - Last Routine Appointment at 17.50pm
  - Telephone assess to "Live Person" from 8.00am 18.30pm
  - "Sort it in one call" (ability to make an appointment to be seen in one call and/or my health On-Line (internet booking)
- 4.13 Further it was explained that, in terms of reasonable access, expectations were:
  - Urgent Offer of a consultation same day (not emergency) –acute presentations that can't wait for up to 48 hours. This would be dependent on clinical need. The consultation could be face to face, telephone or house visit.
  - Soon Offer of a consultation, within 48 hours, of request.

- Planned Offer of a consultation, within 2 weeks, of request (unless patient chooses not to).
- 4.14 It was explained that the above standards are part of a GP surgery delivery plan and they are assessed on their ability to deliver the 5As. It was noted that only one surgery did not achieve the 5As but that the Health Board were not aware of any major risks identified as a consequence.
- 4.15 It was added that both Vauxhall and Towngate surgeries are considering extended opening hours to 8pm and Saturday morning. A question was asked about the location of the 5As on the Health Board website.
- 4.16 Anecdotal evidence was provided that it can take 4-6 weeks to obtain a routine appointment at Mount Pleasant Surgery and 3 weeks at Towngate surgery. It was commented that Vauxhall Surgery allows phone consultations in some circumstances.
- 4.17 A question was asked about FTE staff levels and it was responded that GP practices buy in staff to provide the necessary access requirements. It was added that the Senior GP Lead for Primary Care in the Neighbourhood Care Network (NCN) can address access issues if being compromised.
- 4.18 It was confirmed that funding for GP surgeries is by Welsh Government formula and is not equated to patient demand. It was commented that an aging population should be taken into account and that repeat appointments should be monitored. It was explained that the General Medical Services Contract sets out the formula and the Health Board has no influence over that. NCNs bid for funding to deal with specific issues in areas. It was added that integrated social care is provided in Monnow Vale Hospital mainly concerning re-ablement of the elderly and those requiring longer term provision. All provision is based on the needs in region and the example was provided of using resources to provide a district nurse and community nursing who can provide care at home rather than requiring a visit to a local practice.
- 4.19 A question was asked by a member of the public regarding interaction between town GP practices and whether or not they can share resources. It was responded that locum doctors are often shared and added that all GP practices in this area are members of the South Monmouthshire Neighbourhood Care Network and share best practice and intelligence. In response to a question, it was explained that complaints (e.g. unacceptable delay in obtaining an appointment at a surgery) should be reported to the practice itself.
- 4.20 The long term issue of the closure of the Minor Injuries hospital in Chepstow was raised and it was queried if there was no demand, noting that patients are directed to the Royal Gwent Hospital where there is no parking and the expectation of a long wait. It was responded that there had been Minor Injuries provision in Chepstow that was seeing less than a dozen people a day which was economically unviable. Members argued that it was not advertised at the time.
- 4.21 It was explained that emergency care provision was changing across the UK and Wales, and Minor Injury units need to be a certain size for safety, adequate and senior staff. It was explained that the Specialist Critical Care Centre is the best way forward plus Nevill Hall Hospital, Ysbytty Ystrad Fawr and the Royal Gwent Hospital as minor injury units.

- 4.22 It was also explained that the availability of suitable staff is a problem in the whole UK and a doctor trains for 7 years and a nurse practitioner for 5 years.
- 4.23 In response to a question, it was explained that residents of Chepstow can attend Lydney & District Hospital for the Minor Injuries Unit. It was noted that there is currently consultation in progress on community hospital facilities in the Forest of Dean. In response to a request for new provision in Chepstow, it was confirmed that this would not be possible.
- 4.24 A member of the public expressed the opinion that Chepstow is losing out because it has lost the major burns unit, recuperation facilities at Mount Pleasant and that the dementia wards and cardiac rehabilitation that was proposed has gone. It was questioned what the current and future purpose of the hospital is. It was added that the White Paper currently under consultation seeks to silence patients' opinions on service by proposing the abolishment of Community Health Councils (CHC). Concern was expressed that the Health Board will have no challenge, and also about the arrangements for emergency care until the SCCC opens in 2021.
- 4.25 It was responded that the White Paper is proposed by the Welsh Government not the Health Board, adding that the Health Board works very closely with the CHC; holding regular meetings and receiving all Health Board consultations to allow it to hold the Health Board to account.
- 4.26 It was recalled that the plan for the SCCC was put to Welsh Government (WG) in 2008. The delay was to do with WG capital allocation and the business plan was only approved last year with costs rising by an inflationary measure. It was stated that the money was fixed and the Health Board will have to make choices based on the funds available. The priority is to safe services.
- 4.27 It was agreed that there is a need to establish a plan for Chepstow Hospital such as diagnostics, outpatients, medical assessment unit for elderly (instead of travelling to the Royal Gwent Hospital). This would require access to a named doctor. It was confirmed that the Health Board is working towards this approach for Monnow Vale and also the County Hospital and that there was uncertainty where those hospitals currently sit in the strategy.
- 4.27 It was confirmed that the Clinical Future Strategy document was on the website <a href="http://www.wales.nhs.uk/sitesplus/866/home">http://www.wales.nhs.uk/sitesplus/866/home</a>.
- 4.28 It was reported that residents believe that services are not being delivered. It was questioned if they have complained to their GP practice or to the Health Board. It was queried how the Health Board monitors the length of appointment delays and responded that practices are independent contractors that provide a service to the local population and that if the Health Board started to see a large number of complaints, it would step in and carry out a review. Access and sustainability is measured for practices and this has not highlighted any issues in South Monmouthshire this was carried out last winter by an external agency. It was commented that generally patients want to maintain a good relationship with their GP practice therefore won't complain. It was questioned what the basis of the comments were i.e. seeking routine appointments, what clinical urgency, a general review of health or new condition? It was suggested that the Health Board should consider moving patients away from only seeing a GP and to multi-disciplinary centres with co-located services.

- 4.29 In terms of Minor Injuries provision, it was commented that levels of staffing were run down before the Unit was closed and then patient safety was then reason to close. It was suggested that the closure puts pressure on primary care in the area.
- 4.30 Concerns were expressed that there was longer waiting time for operations at the Royal Gwent Hospital and Nevill Hall Hospital than at Ysbytty Aneurin Bevan (Ebbw Vale) Hospital and Ysbytty Ystrad Fawr. It is also a long journey of up to an hour each way for patients from Chepstow to travel to the Royal Gwent Hospital get treatment results with limited parking availability. The parking situation is set to worsen due to the current temporary parking area being the site for the future development of 575 houses in Newport. It was commented that these issues are all due to lack of hospital service provision in Chepstow.
- 4.31 It was commented that the geographical spread of hospitals is totally uneven and there is less provision compared to England noting that the removal of the Severn Bridge tolls will worsen the situation.
- 4.32 It was questioned if the Health Board tracks Local Development Plans and planning applications noting the potential for an additional 2500 houses in the area.
- 4.33 It was explained that the consulted upon plan lays out provision of emergency services at Royal Gwent and Nevill Hall Hospitals, Ysbytty Aneurin Bevan, Ysbytty Ystrad Fawr and the SCCC and this is the approach that is being implemented.
- 4.34 It was questioned if there was progress in establishing a Medical Assessment Unit for the provision of urgent care Chepstow Hospital utilising GPs in Caldicot and Chepstow.
- 4.35 It was explained that the minor injury unit at Ysbytty Ystrad Fawr sees 130 patients a day and Ysbytty Aneurin Bevan, approximately 40-60 patients a day. The representative was unable to comment on the comment that staff had been run down in Chepstow Hospital but directed Members to the consultation papers at the time of the closure.
- 4.36 Regarding Access to GPs in the local area, a number of residents have commented that the 5As have not been met. It was suggested that no proper analysis was undertaken when Chepstow Minor Injury Unit closed. It was responded that the Health Board published a clear plan that was consulted upon, signed off and implemented. There was a review in 2011 of MI units that was consulted upon and the situation is now being moved forward. There is a need for a clear plan for Chepstow Hospital and discussions are in progress to provide a medical assessment unit.
- 4.37 It was contested that the geographical spread of hospitals was acceptable if the hospitals at Lydney, Gloucester and Bristol are taken into account and was based on population. It was observed that patients don't think they can access services in England and responded that the National Health Service Act 2006 makes provision that UK citizens can access services anywhere.
- 4.38 Members stated that they wanted a district hospital in Chepstow and highlighted the demand for men's health services. It was explained that Public Health Services are looking to improve men's health services providing the example of promoting early diagnosis of more men's cancers, to extend life. Consequently, there will be a programme of health screening rolled out over 2 years of a full health check at a specific age; currently being piloted in Blaenau Gwent and North Caerphilly where life expectancy is much lower.

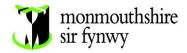
- 4.39 It was commented that the health of the population in this area is markedly better than other regions in Gwent.
- 4.40 It was advised that some consultants visit Chepstow Hospital for outpatient appointments and it is planned to develop that service. Ultrasound, X-Ray and some diagnostic services are also provided at Chepstow Hospital. The Health Board is considering what services can be moved to Nevill Hall Hospital as there is more space.
- 4.41 It was suggested that leaflets and information should be made available to patients/public in the area to explain access to services across the border, complaints and the 5As.
- 4.42 The Committee was informed that the Royal Gwent Hospital has a new minor injuries building and 96% of patients seen there have been treated and discharged within 4 hours. Additionally, it was explained that Nevill Hall Hospital if the best performing A and E service in Wales. It was added that 90% of patients in this area have a first appointment within 26 weeks as per Welsh Government standards.
- 4.43 It was questioned if patients requesting appointments are asked if the request is urgent and queried what standards should be delivered. It was responded that there is no legislation but there is guidance on principles of access as to what is urgent. There is a ranked traffic light system used by Chepstow practices based on self-assessment and Health Board assessment. Most recent results indicate "green" based on what has been seen and test calls. The Committee were reminded that GP surgeries are independent contractors, and residents who are dissatisfied need to complain to the practice directly in the first instance.
- 4.44 It was queried what the Health Board use as a basis when planning for future and responded that the Planning Department would be better informed to answer but that the main basis would be population. It was added that it is part of the remit of the Public Service Board to compile a local plan.
- 4.45 In response to a question, it was confirmed that provision in a medical assessment unit would be the minor assessment of clinical illness led by a nurse possibly from the local GP practices.
- 4.46 The Committee requested involvement in what will be delivered in Chepstow Hospital e.g. post-operative recovery. It was explained that local leaders will be deploy for of the five local authorities to develop local plan; engagement will take place in Spring 2018. The Committee were cautioned that there had to be realistic expectations. The representative agreed to contact the NCN and local leader for S. Monmouthshire about topics for consultation.
- 4.47 A question was asked about mental health services for under 25s and it was confirmed that Claire Marchant and Chris O Connor jointly chair the Mental Health Partnership and this matter is within their remit.
- 4.48 It was queried by a member of the public, what happened to dementia patients noting that there is a dementia ward in Chepstow Hospital. It was stated that there were no plans to remove dementia services from Monmouthshire at the time of the meeting.
- 4.49 It was explained that there is no Cardiac rehabilitation but that there is a rehabilitation ward for general recuperation purposes.

# Minutes of the meeting of Lower Wye Area Committee held at St Arvans Memorial Hall - St Arvans on Wednesday, 20th September, 2017 at 10.00 am

- 4.50 A request was made for a list of the current services provided in Chepstow Hospital for residents' information. It was confirmed that there will be additions to services provided and they will be communicated in due course.
- 4.51 Noting the ratio of 2000 patients: 1 GP, it was enquired what the health Board will do to ensure the ration is not exceeded as area and population develops. It was stated that the Health Board would seek to provide an expansion of primary care services. Where or if provision becomes disparate, it would intervene. It was added that when details of new developments are known, the Health Board will actively look at primary care resource centres, with a pharmacy and other locally provided services. This will be reviewed annually. The Health Board will also monitor access in the area and funding can be given to practices to expand or improve but only when there is a crisis.
- 4.52 In response to a question, it was confirmed that the Health Board employ doctors from all over the world to counter shortages.
- 4.53 In response to a query, it was explained that analysis of the waiting lists at different hospitals is undertaken on a bi-weekly basis. Currently, no waiting list issues are evident in Monmouthshire. It was queried if can you obtain an appointment quicker in some hospitals than others and explained that admission is under the control of named consultants and is not connected with location.
- 4.54 It was confirmed that the Clinical Futures strategy has superseded the promised review of the Minor Injuries Unit at Ysbytty Aneurin Bevan so there is no information from that.
- 4.55 The Chair questioned the use of hospitals and asked if Chepstow Hospital and Monnow Vale could have simple operating facilities. It was explained that Nevill Hall Hospital and Ysbytty Ystrad Fawr have day care theatres and that there are 38 such facilities across Gwent which provides plenty of provision but it is not all local.
- 4.56 The Chair commented that problems with staffing could possibly be related to learning Welsh compulsorily in schools. It was commented that there is no requirement for Welsh language speakers, however English Language (spoken and written) is a requirement. It was reported that some staff have left or not taken up posts over Brexit concerns.
- 4.57 The Chief Operating Officer was thanked for his attendance at the meeting and for answering the questions.
- 5. <u>To note the date</u>, time and venue of the next meeting as Wednesday 17th January 2018 at 10.00am

The meeting ended at 12.50 pm

### Agenda Item 6



SUBJECT: SOCIAL JUSTICE STRATEGY

MEETING: Lower Wye Area Committee

DATE: 25<sup>th</sup> April 2018 DIVISION/WARDS AFFECTED: ALL

### 1. PURPOSE

1.1 To ensure the Committee are aware of the Social Justice Strategy and have the opportunity to consider it ahead of discussion at Cabinet.

### 2. RECOMMENDATIONS:

- 2.1 That the Committee consider the extent to which the priorities identified in the strategy are focused on the issues that are most prevalent in the Lower Wye area.
- 2.2 That the committee provide comments to inform the development of the strategy.

### 3. KEY ISSUES

- 3.1 During 2016, two significant pieces of legislation came into force, the Wellbeing of Future Generations Act and the Social Services and Wellbeing (Wales) Act. Both Acts are underpinned by duties to collaborate with other public bodies, to involve people in the issues that affect them and to concentrate on developing preventative approaches rather than waiting for problems to arise.
- 3.2 In March 2017, the council endorsed two major pieces of work looking at well-being across the county, the Well-being Assessment and the Population Needs Assessment. Both highlighted the strengths and opportunities within our communities and used an extensive evidence base to draw out some of the challenges individuals and communities will face in the future. These were used as the evidence base to develop a Corporate Plan that was approved by Council in February and described five well-being objectives and 22 priority areas of activity including delivering social justice and reducing inequality.

3.3 The draft Social Justice Strategy provides more of the detail about how we will do this and demonstrates our commitment as a Council to address inequality in

our county in order to make our society function better. Using the Community

and Partnership team as an enabling body, it provides an approach that will help turn lives around by removing barriers and facilitating practical support and

solutions to enable all our citizens to realise their full potential.

3.4 This is the first phase of an evolving policy and demonstrates our intention to

work as a Council, and in partnership at national, regional and community level, to implement the policy interventions, approaches, support and methods to

improve outcomes for people and communities.

3.5 This draft Social Justice Strategy sets out our purpose, our intentions and

activities for the next four years and the targets by which we will measure our success to ensure that we achieve our goal – to put social justice at the heart

of what we do in Monmouthshire.

3.6 The Committee has a remit to influence at the interface between strategic and

local decision-making ensuring that resources are directed to local priorities.

Early consideration on this strategy offers an opportunity to do that.

4. REASONS:

4.1 To ensure that the Area Committee are able to influence the development of

the Social Justice Strategy.

5. BACKGROUND PAPERS:

Corporate Business Plan

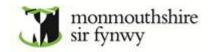
6. AUTHOR:

Cath Fallon, Head of Enterprise and Community Development

7. CONTACT DETAILS:

**Tel**: 07557 190969

E-mail: cathfallon@monmouthshire.gov.uk



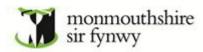


# People Place Prosperity

A Policy for Social Justice

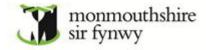
2017 - Draft





# **Contents**

Version Control	3
Alternative Formats	4
Introduction: Putting Social Justice at the Heart of All we do in Monmouthshire	5
The Case for Change	6
The Vision for our County	8
Our Purpose: To Put Social Justice at the Heart of All we do in Monmouthshire	9
Our Priorities: Putting Social Justice at the Heart of All we do	10
Putting Social Justice for Children at the Heart of all we do	11
Putting Social Justice and Equitable Economic Prosperity at the Heart of all we do	12
Putting Social Justice and Social Inclusion at the Heart of All we do to tackle loneliness and	isolation 14
How We Will Measure Success	15
National Policy Context and Further Information	17
Appendices	21



## **Version Control**

Title Social Justice

Purpose

Owner Chief Officer Social Care, Health and Safeguarding

Approved by Not yet approved

Date 20 December 2018

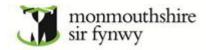
**Version Number** 0.3

**Status** Draft

**Review Frequency** Annual

Next review date January 2019

Consultation



### **Alternative Formats**

We can also provide this document in Braille, large print, on tape or in electronic form. If you would like a copy in a different format please contact our Equality and Welsh Language Officer:

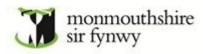
2 01633 644010 or 07793798920

Fax: 01633 644666

equality@monmouthshire.gov.uk

If you want to comment on the issues in this report, please get in touch:

- diremarchant@monmouthshire.gov.uk
- Claire Marchant, Chief Officer Social Care, Health and Safeguarding, Monmouthshire County Council, County Hall, Rhadyr, Usk, Monmouthshire, NP15 1GA
- **1** 01633 644401
- MonmouthshireCC



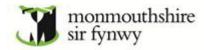


# Putting Social Justice.....at the of all we do in Monmouthshire

Monmouthshire County Council is committed to building sustainable and resilient communities. Central to this are the principles of social justice. This social justice policy demonstrates our commitment as a Council to address inequalities in our county in order to make our society function better. It provides an approach that will help turn lives around by removing barriers and facilitating practical support and solutions to enable ALL our citizens to realise their full potential.

This is an evolving policy and in this first phase we wish to demonstrate our commitment to work as a Council, and in partnership at national, regional and community level, to implement the policy interventions, approaches, support and methods to improve outcomes for people and communities - further phases will include the development of an Anti-poverty Strategy in association with the Public Service Board.

This Social Justice policy sets out our purpose, our intentions and activities for the next four years and the targets by which we will measure our success to ensure that we achieve our goal – to put social justice at the heart of all we do in Monmouthshire.



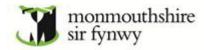
## The Case for Change

Monmouthshire is often perceived to be leafy and affluent and in many aspects it is. However some of the differences within and between communities are stark, especially when they exist side-by-side. There are wide variations in exam results between people from different social backgrounds who attend the same schools. There are many high earners living in our County but wages available locally are lower than other parts of Wales. Many people experience in-work poverty and the wage differential between men and women is currently the highest in Wales. Many of our citizens are getting older, suffering ill health and at risk of becoming lonely and isolated. The costs of living in our rural county and accessing very basic services, such as transport and health provision, are greater than the costs for people living in urban conurbations.

### **Evidence of Inequality**

The Well-being Assessment and the Population Needs Assessment undertaken by the Council in March 2017 both highlighted the strengths and opportunities within our communities and used an extensive evidence base to draw out some of the challenges individuals and communities will face in the future. Some of the issues identified are detailed below:

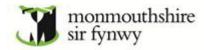
- One in five reception age children in Monmouthshire are overweight or obese;
- There is a gap in the educational attainment between children who are in receipt of free school meals and children who are not. Despite rising standards across the board this gap is not narrowing;
- 14.2% children in Monmouthshire live in low income households;
- There are not enough opportunities for children with disabilities, e.g. sufficiency of play provision, needing to travel to access education and multi-agency support;
- Whilst the average salary for people living in Monmouthshire is above the UK average, wages for jobs in-county are 10% below the UK average – 34% of the working population commute out of county;
- For those people who live and work in the County it is even more difficult, as local earnings are much lower than the average for Wales. In 2014, the median earnings for Monmouthshire residents were £623 per week, compared to the Wales median of £498 per week. However, the median earnings by workplace presents a different picture with people working in the County earning only £466 per week, much lower than the £498 per week figure for Wales as a whole (NOMIS 23/01/15);
- There are limited employment opportunities for young people to remain in the county;
- Significant inequality between female and male wage levels women earn on average £149 less than men;
- Despite low wages in the county there is a high cost of living Average house price for Wales are £183,000 and the house price to earnings ratio is 6.2:1. For comparison, in Monmouthshire the average house price in October 2017 is £281,800 and the house price to earnings ratio is 8.2:1. (Source: Hometrack 20/10/2017). This illustrates how difficult it is for local people to purchase



- their first homes or move into larger homes in the County when their family circumstances change;
- Evidence is well developed that the cost of living a good life in rural areas is higher than in areas where there is easy access to low cost food and transport;
- Low levels of access to the labour market for people with disabilities

   for example, recent engagement exercise by a user led organisation for people with
   learning disabilities evidenced that 85% people want to work, but only 4% do work:
- Loneliness and social isolation is a barrier across the age range but can particularly impact on older people who may be experiencing a deterioration in their physical and/ or mental well-being alongside a loss of family, friends, connection and occupation;
- By 2039, the population aged 65 is projected to increase by 61% and the number of people aged over 85 will more than double;
- Rural isolation and a paucity of transport and services into rural communities is a critical barrier for some in getting the help they need;
- Significant numbers of older people are digitally excluded; and
- Just one-in-three carers feel they are able to do what matters to them.

We know these issues are symptoms of complex problems and we also know they cannot be solved by one organisation alone. Public services must work collaboratively. Public, third and private sector must work together. And, most importantly, we must support people and communities in developing their own solutions that are sustainable and which can deliver both immediate and long-term benefits.



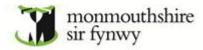
## The Vision for our County

The *vision* for our county is described in the Well-being Plan (to be published in 2018). This Plan is based on the findings of, and will address the issues raised in the Well-being Assessment and the Population Needs Assessment.

Monmouthshire County Council's *purpose* is "*Building Sustainable and Resilient Communities*". This is about improving our place and maximising the contribution and well-being of the people in our communities.

The well-being objectives that will help us deliver this are:





# Our Purpose – to put Social Justice



Quite simply the purpose of this policy is to put social justice at the heart of all we do:

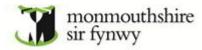
- At the heart of our renewed ambitions and policy making decisions;
- At the heart of the resource allocation decisions;
- At the heart of how we support our communities and our people; and
- At the heart of our place based activities;

Monmouthshire County Council is committed to aligning evidence based policy, programmes of work and resources with the aim of supporting people and communities to fulfil their potential and live the lives they want to live.

We have extensive learning from a two year pilot of community co-ordination and small local enterprise which was successful in reducing the demand for more formal services and also helping us to understand the importance that place and community plays in helping people stay strong and well. At a community level, we are developing integrated place based wellbeing teams to develop creative ways of working, which overcome departmental or agency boundaries in order to make best use of the resources available within the area in question.

We have also created a re-purposed Community and Partnership Development Team who will be the 'engine room' and enablers, effectively linking the work of strategic and community partnerships with communities to help them understand the strengths and capabilities of the people who live there and the groups that exist. Using place and evidence based activity, the team will facilitate the creation of effective and powerful community partnerships to build healthier, safer and more resilient neighbourhoods and communities which in turn will enable our citizens to feel connected, resilient with a sense of 'belonging'.

Page 19



### **Our Priorities**

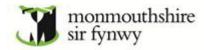


We will keep the community at the heart of what we do by taking a 'place based approach', working with communities to identify their own strengths and areas for development and well-being. We will bring together public services, community leaders, business, schools and residents to address the issues that matter to that community. By working together around a place, we can achieve so much than individual partners community groups working in isolation. Bringing together support networks, aligning resources and assets, funding, development opportunities and people with a common sense of purpose, will really help to build sustainable and communities. Bv collaboratively with the people who live and work locally, we will seek to highlight the strengths, capacity and knowledge of those involved for the greater good.

This policy sets out a broad programme of work we will carry out in partnership to turn our vision into a reality that will make a real difference to the lives of local people. It will be underpinned by clear, specific and measurable actions and outcomes that will be reviewed and updated on a regular basis to ensure that it can evolve and respond to new opportunities and ideas. It is important that measurement of impact is undertaken with people and communities alongside consideration of national and local indicators.

Our well-being assessment tells us there are priority areas we need to progress in delivering social justice in Monmouthshire. The exact priorities will differ in different communities, but across the County there is a commitment to:

- Giving children the best possible start in life;
- Economic inclusion: overcoming inequalities in access to economic prosperity economic inclusion; and,
- Social inclusion: tackling the scourge of loneliness and isolation

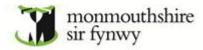


# Putting social justice for children at



In Order To Give Children The Best Start In Life, Overcoming Barriers To Attainment And Opportunity We Will:

- Map the current service offer; identify any gaps and work with partners to develop clear pathways which are based on evidence of impact and ensure resources are targeted in the right place;
- Develop an integrated early intervention and prevention pathway to support children and families at the earliest opportunity and reduce the need for statutory intervention to keep people safe;
- Work with all partners to implement an approach to policy and practice which is based on children's rights; explicitly committing as a Council to a rights based approach in all policy commitments;
- Develop an effective 0 25 Partnership for Children and Young People;
- Focus in on four key areas which are clearly measurable to ensure there is demonstrable prioritisation:
  - Emotional wellbeing and mental health for children and young people;
  - Child friendly communities;
  - o Vulnerable children and families; and
  - o Building resilience and promoting wellbeing with links to education



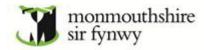
# Putting social justice and equitable

# economic prosperity at the we do

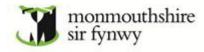


In Order To Overcome Inequalities In Access To Economic Prosperity We Will:

- Work to increase the availability and take-up of broadband across the county to address digital exclusion;
- Work as part of the Cardiff Capital Region to attract high skill, high wage jobs to ensure that people have the opportunity to raise their household income;
- Work with partners to develop an anti-poverty strategy for the county which will take account of both worklessness and in-work poverty;
- Provide learning, training and employability opportunities for 11 to 24 year olds to reduce the number of young people who are not in employment, education or training;
- Provide access to the labour market for people with disabilities and care leavers;
- Align resources of the specific funding streams available to the Council to make a difference to the anti-poverty agenda to maximise the impact of investments;
- Act upon the findings of a Rural Development Programme Study to take an integrated approach to addressing and improving rural transport options in the county to increase access to job opportunities in other areas;
- Develop, and act upon, options to improve access to job opportunities in the county and other areas to include providing work placements, traineeship and apprenticeship opportunities whilst taking positive action as a Council to encourage other public partners and businesses to do so;
- Address the issue of high house prices through the provision of additional affordable housing in the County in both urban and rural areas. The Council will ensure that developers and local people have clear guidance on how its development plan policies and decisions on planning applications will operate and thereby contribute to one of the desired outcomes of the Council's Single Integrated Plan, namely 'We want people to live in homes that are affordable, appropriate and where people want to live'.



- Focus on three key areas which are clearly measurable to ensure there is demonstrable prioritisation:
  - The gender pay gap;
  - o An integrated approach to addressing barriers to transport in rural areas; and
  - o Access to the labour market for people with disabilities

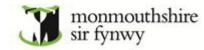


# Putting social justice and social

# inclusion at the of all we do to tackle loneliness and isolation

### In Order To Tackle The Scourge Of Loneliness And Isolation We Will:

- Develop a collaborative approach to wellbeing to ensure direction setting and oversight
  of wellbeing in Monmouthshire is informed by those closest to delivery. The Integrated
  Wellbeing Network (appendix one) provides a basis for this collaboration;
- Work with partners who can provide evaluative support to ensuring that the impact of approaches and interventions can be effectively measured overtime (recognising some change will be generational) as well as understanding short term effectiveness;
- Launch the Community and Partnership Development team with a clear focus, effective methods and measurable outcomes:
- Map the current service offer, identify any gaps and work with partners to develop clear pathways which are based on evidence of impact and to ensure resources are targeted in the right place;
- Develop an Asset Based Community Development approach with communities to fully realise the benefits from the physical assets (community hubs, social care and health resource centres, primary care centres and community hospitals, RSL buildings, village halls) across the county;
- Continue to develop opportunities for contribution and involvement;
- Focus on key areas which are clearly measurable to ensure there is demonstrable prioritisation:
  - Community development priorities identified in each of the 5 areas (it is recognised priorities will differ from area to area depending on needs, gaps and opportunities);
  - o Digital inclusion for people who are not currently connecting online; and
  - Dementia friendly Monmouthshire encourage public organisations and private business across Monmouthshire to become 'dementia friends'.



### How We Will Measure Success

It is important we have a clear set of measures to evaluate the progress made to determine the success of specific work programs in achieving the overall purpose – *Putting Social Justice at the heart of all we do.* 

There is growing evidence to suggest that we learn and develop most effectively through the sharing of stories. At a qualitative level of evaluation, we are committed to working with partners who can provide evaluative support to ensure that the impact of approaches and interventions can be effectively measured overtime (recognising some change will be generational) as well as understanding short term effectiveness. To aid this, a cross party advisory committee will be established which will help monitor, evaluate and provide steer to the evolving social justice brief.

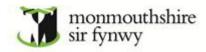
To aid evaluation the following set of questions will be used as a guide:

- What changes (good and bad) have come about as a result of the group?
- What does good collaboration look like and have we achieved it?
- What are the enablers and inhibitors to effective collaborative working around well-being across Monmouthshire?

The reasons for using this particular methodology are:

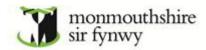
- It fits with the 'spirit' of the group with a strong focus on participation and stories;
- The use of stories and facilitated conversations will support the development of relationships between participants and a common understanding and purpose regarding the concept of well-being;
- The answers to the questions are difficult to predict and will emerge with many unanticipated findings and outcomes;
- The main focus is on learning and development rather than accountability;
- This is a social change programme with a before, middle and after; and
- Members of the group can do this themselves and be fully involved.

It is also important we have specific quantitative measures which we track to understand progress and which we will consider alongside the evidence from the qualitative piece. We have therefore worked with other partners in the region to commission the development of a set of measures and surveys that will enable us to track well-being at a community level over time. This work has been developed with a range of experts including Cambridge University and the New Economics Foundations. For specific pieces of work we have therefore identified the measures in Table One that follows that we will use to evaluate progress in the first instance.



### **Table One: Quantitative Measures**

Measure	Now	This should
The percentage of people who agree that there is a sense of community	53.4%	increase
The percentage of people who feel they can influence decisions about the area	21.3%	increase
The percentage of children living in low income households	14.2%	decrease
The average salary of people living and working in Monmouthshire	£tbc	increase
The average wage differential between men and women	£149	decrease
The gap in educational attainment at foundation phase (age 5)		decrease
The gap in educational attainment at key stage 4 (age 16)		decrease
The percentage of households with internet access	81.1%	increase
The percentage of carers who report they can do the things that matter to them		increase



# How will we know if we have achieved our purpose of 'Putting

# social justice at the do'?



Monmouthshire will be a place where all children have the best possible start in life, regardless of background.

Monmouthshire will be a place where all young people have equal access to a good education and new skills to enable them to maximise their opportunities.

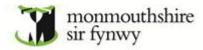
Monmouthshire will be a place where every family is able to support itself or call on support in times of need.

Monmouthshire will be a place where every person of working age has a good quality of life.

Monmouthshire will be a place that puts its own community needs at the very



of its decision making to ensure benefit for all.



## **National Policy Context**

During 2016, two significant pieces of legislation came into force, the Wellbeing of Future Generations Act and the Social Services and Wellbeing (Wales) Act. Both of these embed legislatively a commitment to improved well-being albeit with different focuses - one places greater emphasis on place and the other on people. Both Acts are underpinned by duties to collaborate with other public bodies, to involve people in the issues that affect them and to concentrate on developing preventative approaches rather than waiting for problems to arise.

Well-being of Future Generations Act The Well-being of Future Generations Act is about improving the social, economic, environmental and cultural well-being of our nation, our county and the communities that make it what it is.

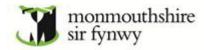
The Act sets out how public services in Wales need to think more about the long-term, work better with individuals and communities and each other, look to prevent problems and take a more joined-up approach. These are referred to as the five ways of working. By acting in this way we stand a much better change of creating a place that we all want to live in, now and in the future. To make sure that public services are all working towards the same vision, the Act puts in place seven well-being goals which are shown in the diagram to the right.



### **Social Services and Well-being Act**



This Act aims to transform the way care and support is delivered, placing responsibilities wider than social services departments. The Act requires a stronger voice and more control for people of all ages, leading to less dependence on institutional services. The Act sets out to engage with and empower citizens; promote independence and well-being and give people who receive support, and their carers, control over their lives and the care and support needed to do what matters to them. The aspiration of the Act, that through acting preventatively and intervening earlier



more people can be independent and well without intensive managed support as described in the image on the left.

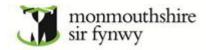
### **Prosperity for All – Wales Government**

In September 2017, Welsh Government published 'Prosperity for all' – the national strategy which sets the aims of the Welsh Government and provides clarity for partners about the changes they want to see progressed to achieve a more prosperous Wales.

The strategy acknowledges that how partners work together can be just as important as what is delivered. In order to make a real difference to people's lives, partners need to do things differently and to do different things.

The strategy details the Welsh Government's twelve objectives and the steps they propose to take to meet them. They place the Well-being of Future Generations Act at the heart of their decision making. The key themes are:

- prosperous and secure;
- healthy and active;
- ambitious and learning;
- united and connected.

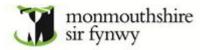


### **Further Information**

This strategy has been developed using the evidence base arising from other projects and programmes. These have informed our understanding about what works and where we should prioritise our collective energies over the short to medium term.

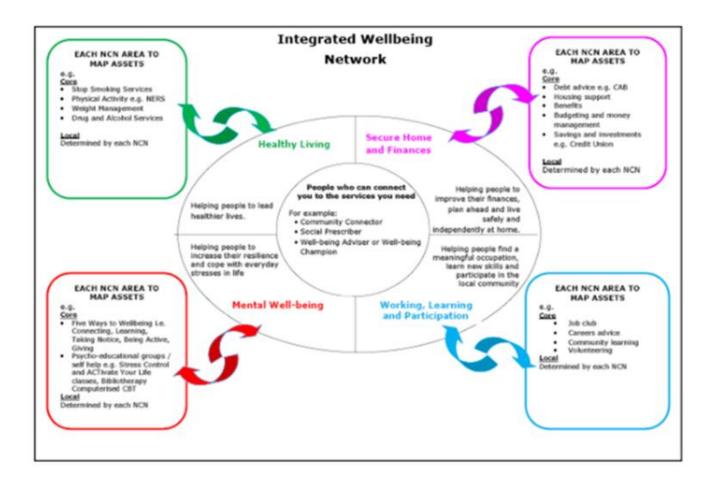
You can access some of the documents and information that have influenced the development of this strategy here. If you have examples of things that you have seen working well in other communities we would be really interested in hearing from you. Our contact details are in the front of this document. You can also pitch ideas on our community engagement platform Monmouthshire Made Open.

- Evaluation of Community Coordination Pilot
- Review of Strategic Direction of Community and Partnership Development Team



# **Appendices**

## The Integrated Care Network Appendix 1





# Impact of reduction or removal of Severn Bridge tolls on the towns of Monmouthshire.

### The Future of the Severn Bridges and Tolls

- Ownership of the Severn bridges reverted to the UK Government on 8<sup>th</sup> January 2018 and tolls are to be abolished at the end of 2018.
- Bridge tolls were reduced in January 2018 as a result of the removal of VAT.
- Vans previously paid a higher toll than cars. However, with effect from 8<sup>th</sup> January 2018, all vehicles with up to 9 seats pay a toll of £5.60.
- In July 2015, the UK Transport Minister ruled out giving the Welsh Government control of the crossings but indicated that he had every intention to work with them on future operation of the crossings.

### History

- The Severn Crossings are the primary gateway to South Wales. The first Severn Bridge was opened to traffic in 1966. The Second Severn Crossing was opened in 1996 and the two bridges now operate in tandem.
- Tolls have been in place for the entire history of the Severn Crossings and charges have been used to pay for their construction, maintenance and operation through a concession agreement with a private operator.

### **Severn Crossings Traffic and Travel Patterns**

- The M48 carries more local traffic with the majority of origins/destinations being Monmouthshire, Bristol and the South West of England, whilst the M4 is more strategic in nature serving a much wider market, with origins and destinations from across all areas of South Wales and across Southern England.
- There is a small directional imbalance, with slightly more traffic in the eastbound direction compared with the westbound direction. This is due to the fact that the toll is charged only in the westbound direction and therefore a small proportion of traffic crossing uses an alternative route to make the westbound trip (via Gloucester).
- Severn River Crossing plc collected a net revenue of £91.4m in 2014, of which £13.16m was operational expenditure including maintenance. £17m was paid in VAT.

### Research – Impact of the Severn Tolls on the Welsh Economy

- The most recent comprehensive research conducted into this subject was published in May 2012 by Arup on behalf of Welsh Government.
- This study was the first comprehensive attempt to consider the effects of alternative futures for the tolls on the Severn Crossings. The study has highlighted the many complex impacts and issues related to Severn tolls. The tolls impose a cost on users. It is clear that such impacts are not evenly distributed across individuals, sectors or geography.

- The proportion of trip costs accounted for by the toll varies greatly across different types of user. For a car journey (excluding commuters and business travel) the toll represents approximately 19% of trip costs for a journey between Cardiff and Bristol. For a business traveller, considering the value of lost productive time, toll costs fall to approximately 8% of trip costs. For goods vehicles making the equivalent journey, tolls represent 23% of total journey costs for a light goods vehicle and 21% for a heavy goods vehicle. The proportionate impact of the toll falls with distance travelled.
- The tolls represent a cost imposed on economic transactions between South Wales and the South and West of England and the report noted that there is a complex relationship between the Severn Crossings and the Welsh economy.
- There was no data available which allows an accurate assessment of how costs are split between vehicles and businesses based in Wales, or elsewhere.
- Because tolls have been in place since their opening, there is no reliable historical change in tolling regime on which to base an estimate of the effect of tolling on traffic demand.
- Modelling is therefore the most appropriate approach to analysing toll scenarios.

### Impacts on Business Performance and Location

- An analysis was undertaken of the impacts of the Severn Crossing on the performance, behaviour and competitiveness of business in South Wales.
- The proportion of businesses for which the tolls are 'significant' is a substantial minority, with 12% reporting the tolls to be significant and 8% reporting the tolls are highly significant.
- The importance placed on the tolls was closely related to the particular sector, location and operating structure of the firm in question. Not unexpectedly, businesses based in South Wales are more likely to place importance on the crossings and the tolls than businesses based in the South West of England.
- The significance of toll costs must be seen in the context of overall operating costs.
   For the vast majority of businesses direct toll costs represent a very small proportion of total costs.
- For the service sector and 'high value' manufacturing firms, transport costs typically make up a small proportion of overall costs and therefore toll charges are of diminishing importance.
- The exception is transport and logistics businesses predominantly engaged in trade between the South and West of England and South Wales. An illustrative analysis suggested that toll costs could, in the most extreme cases amount to between 5% and 10% of annual vehicle operating costs for freight vehicles. Given that profit margins tend to be relatively low in this sector, the implications for business performance and profitability can be significant where a firm is predominantly engaged in 'cross-Severn' goods transport.

### **Business Location and Markets**

- Businesses were more likely to report that tolls affected their cost base and
  profitability than they were to suggest that the tolls deter customers or place their
  business at a disadvantage, in comparison with businesses located in England, when
  competing in particular markets.
- Within the logistics sector, there is some evidence of businesses being encouraged by toll costs to locate vehicles at depots in England rather than in South Wales, although for the most part freight businesses are likely to be engaged in movements involving either a Welsh pick up or drop off for which any operator, whether based in England or South Wales, would be subject to the toll.
- Where toll costs are significant for businesses, tolls effectively increase the cost of doing business in South Wales, thereby making Monmouthshire and South Wales a less attractive location for investment. Location decisions are highly complex and businesses will consider access to markets, access to skills, wage costs, costs of land and property.
- The quality of existing transport links (quality of access to motorways, local road network, public transport, and parking) are seen as a key advantage of firms' current location. When asked about the main disadvantages of their location, transport related factors were also frequently identified by Welsh firms. The Severn tolls were specifically noted by one firm to be a disadvantage without being prompted (WG).
- Some businesses pay regard to toll costs when considering locations in South Wales but no instances could be identified where toll costs were pivotal in a decision not to locate in South Wales.
- In the specific case of Regional Distribution Centres (RDCs), when choosing a location it is typical to undertake a detailed cost-benefit assessment of potential locations which takes into account all operating costs including tolls. On this basis, it is possible to imagine a situation in which the tolls may have contributed to a decision to locate outside Monmouthshire. However, given the wage and fuel costs associated with journeys across the estuary notwithstanding the tolls, in most cases proximity (to the M5 corridor for example) is likely to be a more significant factor than the tolls themselves.
- At the end of September 2017, C M Downton announced that it had taken a four year lease on the former Tesco distribution centre at Newhouse Farm, Chepstow. This is one of the largest industrial buildings in Monmouthshire at nearly 300,000 sq ft and had been vacant for some time. CM Downton is a Gloucestershire based logistics company which operates a range of sites across England and Wales. These premises will be in addition to their existing site at Newhouse Farm, Chepstow, which was established in Autumn 2016. Lower property costs on the Welsh side of the Severn and the abolition of bridge tolls were amongst the factors that influenced their decision.

### Impacts on the retail, tourism and leisure sectors

 The study considered whether the toll deters visitors to Wales, thereby having a negative effect on the tourism or retail sectors.

- The significance of the tolls in determining visitor's travel decisions should be seen in the context of total trip costs. From this perspective, toll costs are likely to be significant mainly for trips of a short duration, such as day trips and shopping trips, and where the distances travelled are relatively short. For longer distance trips and overnight stays, the toll is likely to be a small proportion of the total costs of a visit. Therefore, 'higher value' tourism is less likely to be affected.
- When asked if they would expect to make more trips to Wales by car if the Severn tolls are removed, 22% of surveyed residents of South West England said they would expect to make more trips to Wales in the next twelve months if the Severn Tolls were removed.
- The proportion of respondents expressing this view falls with distance from the crossings, perhaps supporting the assertion above that tolls are more likely to influence trips of a shorter duration.
- The tolls might be expected to deter trips in either direction. Therefore, the net effect on the Monmouthshire economy could be positive or negative. Given the importance of the visitor economy in Monmouthshire it is considered likely that the net effect of the tolls is, on balance, negative.
- There is anecdotal evidence that the tolls discourage tourist coach traffic and day trippers.
- Tourism industry representatives have asked that consideration be given to whether
  toll negatively affects the way people perceive Wales as a visitor destination and
  whether this has an effect disproportionate to the financial cost of the toll. For
  example, the cost and inconvenience of the toll were highlighted as potential issues
  during the 2010 Ryder Cup when tourism bodies were seeking to encourage return
  visits. However, effects on perceptions are difficult to measure or to separate from
  other factors and there is no firm evidence of the link between tolls, perceptions and
  propensity to holiday in Wales.
- In 2016, tourism was worth £190 million to the economy of Monmouthshire. Day visits generated £57 million and this could be expected to increase when tolls are reduced or removed.

### **Sectors**

The following sectors are important to the economy of Monmouthshire:

- Wholesale & retail trade 20.0% of employee jobs (Wales 15.1%)
- Transportation & storage 3.6% of employee jobs (Wales 2.9%)
- Accommodation and food service activities 10.0% of employee jobs (Wales 8.9%)
- Arts, entertainment & recreation 2.6% of employee jobs (Wales- 2.5%)

The sectors are present across Monmouthshire, although the Wholesale & retail trade together with Transportation & storage are particularly well represented in areas close to the M48/M4, such as Chepstow, Caldicot & Magor.

They are likely to benefit from a reduction in the burden of Severn Bridge tolls which could be expected to lead to an increase in turnover/profitability. This may also increase the attractiveness of Monmouthshire as a business location.

### Impacts on the Labour Market

- The tolls represent a potentially significant deterrent to commuting between South Wales and the South West of England.
- Traffic analysis suggests that removing the tolls would result in an increase in commuting across the Severn Crossings of 11% (excluding reassignment of traffic).
- Changes in commuting patterns take time to play out and this should be considered a long term adjustment.
- Local labour markets are complex and individuals typically make their commuting
  decisions based on a range of factors. Mobility, recruitment and job search
  geographies vary by sector and by occupation. Individuals typically make their
  commuting decisions based on the balance of wage and job differentials between
  home and work locations, differences in the cost of living/quality of life and the costs
  of mobility.
- The existing directional imbalance in commuting and the differential in wage rates between 'English Severnside' and 'Welsh Severnside' might suggest that the greatest part of any increase in commuting would relate to residents of Wales travelling to jobs in England.
- This effect could be reinforced by patterns of migration with more affordable house prices in Wales and the rural amenity of an area such as Monmouthshire which currently has the highest number of commuters into England of the South Wales Local Authorities.
- Given the occupational profile of commuters and the fact that higher paid workers
  are typically more mobile than lower paid workers, it is likely that additional
  commuters will also be above average in terms of pay and skill levels. The inference
  from this is that the additional commuting is likely to primarily represent changing
  employment search areas or changing distribution of employment rather than any
  increase in participation rates.

James Woodcock First prepared: 13<sup>th</sup> December 2016

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