



Safe Policy and Performance Board

**Tuesday, 21 September 2010 6.30 p.m.
Council Chamber, Runcorn Town Hall**



Chief Executive

BOARD MEMBERSHIP

Councillor Shaun Osborne (Chairman)	Labour
Councillor Pamela Wallace (Vice- Chairman)	Labour
Councillor Marjorie Bradshaw	Conservative
Councillor Susan Edge	Labour
Councillor John Gerrard	Labour
Councillor Miriam Hodge	Liberal Democrat
Councillor Martha Lloyd Jones	Labour
Councillor Keith Morley	Labour
Councillor Margaret Ratcliffe	Liberal Democrat
Councillor Mike Shepherd	Independent
Councillor Dave Thompson	Labour
Mr B Hudson	Co-Optee

*Please contact Lynn Derbyshire on 0151 471 7389 or e-mail
lynn.derbyshire@halton.gov.uk for further information.
The next meeting of the Committee is on Tuesday, 16 November 2010*

**ITEMS TO BE DEALT WITH
IN THE PRESENCE OF THE PRESS AND PUBLIC**

Part I

Item No.	Page No.
1. MINUTES	
2. DECLARATION OF INTEREST (INCLUDING PARTY WHIP DECLARATIONS)	
Members are reminded of their responsibility to declare any personal or personal and prejudicial interest which they have in any item of business on the agenda, no later than when that item is reached and, with personal and prejudicial interests (subject to certain exceptions in the Code of Conduct for Members), to leave the meeting prior to discussion and voting on the item.	
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In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.

REPORT TO: Safer Policy & Performance Board

DATE: 21 September 2010

REPORTING OFFICER: Strategic Director, Resources

SUBJECT: Public Question Time

WARD(s): Borough-wide

1.0 PURPOSE OF REPORT

1.1 To consider any questions submitted by the Public in accordance with Standing Order 34(9).

1.2 Details of any questions received will be circulated at the meeting.

2.0 RECOMMENDED: That any questions received be dealt with.

3.0 SUPPORTING INFORMATION

3.1 Standing Order 34(9) states that Public Questions shall be dealt with as follows:-

- (i) A total of 30 minutes will be allocated for dealing with questions from members of the public who are residents of the Borough, to ask questions at meetings of the Policy and Performance Boards.
- (ii) Members of the public can ask questions on any matter relating to the agenda.
- (iii) Members of the public can ask questions. Written notice of questions must be given by 4.00 pm on the working day prior to the date of the meeting to the Committee Services Manager. At any one meeting no person/organisation may submit more than one question.
- (iv) One supplementary question (relating to the original question) may be asked by the questioner, which may or may not be answered at the meeting.
- (v) The Chair or proper officer may reject a question if it:-
 - Is not about a matter for which the local authority has a responsibility or which affects the Borough;
 - Is defamatory, frivolous, offensive, abusive or racist;
 - Is substantially the same as a question which has been put at a meeting of the Council in the past six months; or
 - Requires the disclosure of confidential or exempt information.

- (vi) In the interests of natural justice, public questions cannot relate to a planning or licensing application or to any matter which is not dealt with in the public part of a meeting.
- (vii) The Chairperson will ask for people to indicate that they wish to ask a question.
- (viii) **PLEASE NOTE** that the maximum amount of time each questioner will be allowed is 3 minutes.
- (ix) If you do not receive a response at the meeting, a Council Officer will ask for your name and address and make sure that you receive a written response.

Please bear in mind that public question time lasts for a maximum of 30 minutes. To help in making the most of this opportunity to speak:-

- Please keep your questions as concise as possible.
- Please do not repeat or make statements on earlier questions as this reduces the time available for other issues to be raised.
- Please note public question time is not intended for debate – issues raised will be responded to either at the meeting or in writing at a later date.

4.0 POLICY IMPLICATIONS

None.

5.0 OTHER IMPLICATIONS

None.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 **Children and Young People in Halton** - none.

6.2 **Employment, Learning and Skills in Halton** - none.

6.3 **A Healthy Halton** – none.

6.4 **A Safer Halton** – none.

6.5 **Halton's Urban Renewal** – none.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 None.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE
LOCAL GOVERNMENT ACT 1972**

8.1 There are no background papers under the meaning of the Act.

REPORT TO: Safer Policy and Performance Board
DATE: 21 September 2010
REPORTING OFFICER: Chief Executive
SUBJECT: Specialist Strategic Partnership minutes
WARD(s): Boroughwide

1.0 PURPOSE OF REPORT

1.1 The Minutes of the Safer Halton Partnership since the last meeting of the Board are attached at Appendix 1 for information.

2.0 RECOMMENDATION: That the Minutes be noted.

3.0 POLICY IMPLICATIONS

3.1 None.

4.0 OTHER IMPLICATIONS

4.1 None.

5.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

5.1 Children and Young People in Halton

None

5.2 Employment, Learning and Skills in Halton

None

5.3 A Healthy Halton

None

5.4 A Safer Halton

None

5.5 Halton's Urban Renewal

None

6.0 RISK ANALYSIS

6.1 None.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 None.

**8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE
LOCAL GOVERNMENT ACT 1972**

8.1 There are no background papers under the meaning of the Act.

SAFER HALTON PARTNERSHIP

At a meeting of the Safer Halton Partnership Tuesday, 11 May 2010 Civic Suite, Town Hall, Runcorn

Present	M. Andrews	
	S. Blackwell	Cheshire Police
	S. Boycott	Cheshire Police
	D. Cargill	
	A. Collins	Police Authority
	S. Eastwood	HBC Health and Community
	N. Goodwin	
	A. Graham	HBC Marketing and Communications
	D. Houghton	HBC Policy and Partnerships
	G. Jones	Youth Offending Team
	Osborne	
	N. Sharpe	Halton Housing Trust
	M. Simpson	
	K. Thornden	Cheshire Probation
	C. Walsh	Halton & ST Helens PCT
	L. Weston	Cheshire Immigration Team - UK Border Agency
	Wright	

Action

SHP1	WELCOME	
	Supt Sarah Boycott welcomed everybody to the meeting and introductions were made.	
SHP2	APOLOGIES	
	Apologies had been received from David Parr, Dwayne Johnson, Rose Lyden, Nigel Moorhouse, Norman Oldham, Hitesh Patel and Richard Gorst.	
SHP3	MATTERS ARISING FROM MINUTES 230210	
	The minutes of the meeting held on 23 rd February 2010 were agreed subject to amendments in relation to SHP 25 which should have read that a six week intervention scheme and the initiative mentioned in paragraph 3 was yet to be implemented.	
SHP4	LOCALITY WORKING	
	The Partnership was advised that the new arrangements with regard to locality working would entail	

pre-agenda meetings with partners and organisations to discuss items for agenda, there would be three a year plus two strategic meetings per year.

There would be an annual review each year and assessments with key working objectives. Community Development staff had been allocated to each Locality Area Forum.

The Board discussed whether PCSOs would be in attendance, duplication issues in addition to the normal tasking and co-ordination process and that the correct people were invited to attend the pre meetings in relation to working at the partnership in individual areas. In order to meet the needs of each area there would be different approaches and external partners involved in the process.

RESOLVED: That the report be noted and participation be provided where possible.

SHP5 BYE-LAW ON MINIMUM PRICE OF ALCOHOL

The Partnership was updated on the proposal for a Bye-law on minimum price of alcohol as part of a wider campaign to impose a minimum unit price of .50p per unit for the sale of alcohol. It was noted that it had been to the Executive Board and an update would be provided at a future Partnership meeting.

RESOLVED: That the information be noted.

SHP6 SAFE AND CONFIDENT NEIGHBOURHOODS

The Partnership was informed of the Safe and Confident Neighbourhoods Strategy which set out the roles of partnership working groups under the safer community remit. It was noted that the Partnership would still be known as the "Safer Halton Partnership".

SHP7 SAFEGUARDING VULNERABLE ADULTS

The Partnership considered a report regarding safeguarding vulnerable adults which provided an update on the key issues and progression of the agenda for Safeguarding Vulnerable Adults in Halton.

It was noted that there was a Care Quality Inspection scheduled for September,

Key issues regarding the inspection were outlined in

the report for information. The Partnership was advised that 26 Members had attended a course in Basic Awareness training, web links, text alerts and various communication methods had been established.

Appended to the report was a Safeguarding Adults Board flowchart which set out the structures within the Safeguarding Adults Board.

RESOLVED: That the report be noted.

SHP8 SAFER HALTON JOINT STRATEGIC NEEDS ASSESSMENT

The Partnership received an update regarding the Safer Halton Partnership Joint Strategic Needs Assessment. A steering group had been set up to consider and analyse statistical data from various sources. Arising from the work of the steering group five priorities had been identified as follows:

- Anti-social behaviour;
- Alcohol miss-use and its impact on crime and communities;
- Tackling drug use;
- Safeguarding vulnerable adults and children; and
- Communication and community engagement.

It was noted that each section of the Partnership would look at their respective areas to identify information in order to make a positive impact on the priorities listed above.

Partners were asked to forward any comments regarding the priorities and structure to Debbie Houghton within 10 days.

Arising from the discussion it was noted that domestic violence had not been identified as a single priority, and the importance of this must remain high on the agenda. It was agreed that this should now be added as an additional priority within the JSNA.

The Partnership noted the report.

SHP9 TASK GROUP UPDATES

The Partnership considered the 4th quarter updates, in particular it was noted that:

- In relation to performance management the main priorities had been drafted. The emerging priorities set out the information and were used to inform the JSNA process and identify the key priorities for the work of the Partnership.
- In relation to drugs it was noted that performance was improving across the board and positive feedback had been received regarding treatment and planning. It was reported that 85% of the people were in treatment which supported the evidence including people from the Custody Suite. However, due to the success of the people in treatment the target would not be hit. However this was a good news story. It was further noted that, in relation to funding there would be some allocated for planned exits and as performance was positive, there may well be funds allocated;
- In relation to engagement cohesion and liveability it was noted that an exercise was being carried out in partnership regarding mini motorcycles where a crushing exercise took place involving 60 – 80 bikes. It was reported that there was some work being carried out linked closely with the use of the Council's CCTV cameras and more funding was required. The Halton Strategic Partnership Board had recently agreed to provide a small amount of funding to this need as CCTV played a big part in preventing, deterring and detecting crime;
- In relation to prolific and other offending teams it was reported that there were rehabilitation meetings and offenders were now in detox. The victims had met with groups and the scheme was on track; and
- With regard to reducing re-offending, the Partnership was informed that there were linkages for renewed strategy and a new duty to reduce re-offending and the integrated Offender Management System built upon PPO schemes within the overall framework in the LGA. It was further noted that there were two key focus points being identification of the cohort and targeting SO offenders. The

Partnership was informed that the top crime for re-offenders was shoplifting, criminal damage and then common assault. The Partnership was advised of the next steps in terms of combining probation and Police intelligence firstly would be infrastructure then co-ordination, administration and monitoring processes. Various models would be investigated and a mapping exercise of what would be required in terms of resources would be explored to take forward to future meetings.

RESOLVED: That the Task Group updates be noted.

SHP10 HATE CRIMES

The Partnership was informed that the final quarter of 2009/10 period had shown a further 21% reduction in the number of race/hate incidents reported to the Police.

It was further noted that a total of 9 race hate and 2 homophobic incidents reported. Of the 11 reported 8 were found to meet the Hate Crime criteria and the figures were broken down and detailed in the report for information. The Partnership raised concerns that although the reduction in the race hate incidents had reduced this could be due to victims not reporting offences. Victims could be encouraged and educated in order to report hate race crimes. The Partnership also discussed educating young people in terms of accepting other cultures and other people's ways of life.

RESOLVED: That the report be noted.

SHP11 ITEMS FOR INFORMATION

The Partnership considered under items for information the Anti-Social Behaviour Executive Summary.

Meeting ended at 4.00 p.m.

REPORT TO: Safe Halton Policy & Performance Board

DATE: 21st September 2010

REPORTING OFFICER: Chief Executive

SUBJECT: Performance Management Reports for Quarter 1 of 2010/11

WARDS: Boroughwide

1.0 PURPOSE OF REPORT

1.1 To consider and raise any questions or points of clarification in respect of the first quarter (April to June 2010) performance management reports detailing progress against service objectives/ milestones and performance targets, and factors affecting the services etc for:

- Community Services
- Environment & Regulatory Services (Environmental Health)

2.0 RECOMMENDED: That the Policy and Performance Board

- 1) Receive the first quarter performance management reports;**
- 2) Consider the progress and performance information and raise any questions or points for clarification; and**
- 3) Highlight any areas of interest and/or concern where further information is to be reported at a future meeting of the Policy and Performance Board.**

3.0 SUPPORTING INFORMATION

3.1 Directorate Overview reports and associated individual Departmental Quarterly Monitoring reports have been previously circulated via a link on the Members Information Bulletin to allow Members access to the reports as soon as they become available. These reports will also provide Members with an opportunity to give advance notice of any questions, points raised or requests for further information, to ensure the appropriate Officers are available at the Board meeting.

3.2 Where a Department presents information to more than one Policy & Performance Board some reconfiguration of the reports has been actioned to reflect Board responsibilities as shown in the following papers.

3.3 The departmental objectives provide a clear statement on what the services are planning to achieve and to show how they contribute to the Council's strategic priorities. Such information is central to the Council's performance management arrangements and the Policy and Performance Board has a key role in monitoring performance and strengthening accountability.

3.4 Appendix 1 explains how Red, Amber and Green (RAG) symbols have been used reflect progress for both objectives and performance indicators. For 2010/11 direction of travel indicators have also been added where possible,

to reflect progress for performance measures compared to the same period last year.

4.0 POLICY IMPLICATIONS

4.1 There are no policy implications associated with this report.

5.0 OTHER IMPLICATIONS

5.1 There are no other implications associated with this report.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Departmental service objectives and performance measures, both local and national are linked to the delivery of the Council's priorities. The introduction of a Directorate Overview report and the identification of business critical objectives/ milestones and performance indicators will further support organisational improvement.

6.2 Although some objectives link specifically to one priority area, the nature of the cross - cutting activities being reported, means that to a greater or lesser extent a contribution is made to one or more of the Council priorities.

7.0 RISK ANALYSIS

7.1 Not applicable.

8.0 EQUALITY AND DIVERSITY ISSUES




8.1 Not applicable.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTIONS 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
Not applicable		




Appendix 1 – Explanation of Symbols

Symbols are used in the following manner:

Progress	<u>Objective</u>	<u>Performance Indicator</u>
Green	 Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber	 Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage</u> whether the annual target is on course to be achieved.</i>
Red	 Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved</u> unless there is an <u>intervention or remedial action</u> taken.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green	 Indicates that performance is better as compared to the same period last year.
Amber	 Indicates that performance is the same as compared to the same period last year.
Red	 Indicates that performance is worse as compared to the same period last year.
N/A	Indicates that the measure cannot be compared to the same period last year.

Departmental Quarterly Monitoring Report

Directorate: ADULT & COMMUNITY
Department: COMMUNITY SERVICES
Period: 1st April to 30th June 2010

1.0 Introduction

This monitoring report covers the Community Services first quarter period up to period end 30th June 2010. It describes key developments and progress against all objectives and performance indicators for the service.

The way in which traffic light symbols have been used to reflect progress is explained within Appendix 8

2.0 Key Developments

The HDL at Ditton has been successfully re-located into the library. Business has increased since the move.

A series of 'Respect' weeks are being held to highlight issues around community safety and anti-social behaviour.

Sport England's Active People Survey showed that Adult Participation in (Sport 3 x 30 minutes) is the second highest in the country.

There has been a recent inspection by the General Register Officer of the Registration Service in Halton. The report, which will go to the Safer Halton PPB shows the service to be very good.

3.0 Emerging Issues


Early talks have been held with the Police to consider a joint approach to some services via HDL. A report will be going to senior management team detailing options to be considered.

Negotiations are advanced to replace the library management/circulation system. An innovative approach is being taken that should improve service and increase efficiencies.

The micro-brewery and the hair dresses shop, as part of Adult Day – care development should be operative by the autumn.

4.0 Service Objectives / milestones

4.1 Progress against objectives / milestones

Total	0		0		0		0
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There are no objectives / milestones to be reported for the service.

5.0 Performance indicators

5.1 Progress Against 'key' performance indicators

Total	1		-		-		-
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There is presently no information available concerning the perceptions of anti social behaviour as this information has previously been derived from the national places survey derived from an annual survey, which as of this year this survey is no longer required. Consideration is being given to conducting it on a local basis and an update will be given later in the year.

5.2 Progress Against 'other' performance indicators

Total	7		6		1		0
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A number of 'other' indicators for the service have also previously been derived

from the national place survey as described above.

Of those measures that can be reported this quarter there is some concern regarding adult Re-offending rates for those under probation supervision and additional details are provided within Appendix 1.

6.0 Risk Control Measures

During the development of the 2010 -11 service activity, the service was required to undertake a risk assessment of all Key Service Objectives.

No 'high' risk, treatment measures were identified.

7.0 Progress against high priority equality actions

As a result of undertaking a departmental Equality Impact Assessment no high priority actions were identified for the service for the period 2010 – 2011

8.0 Data quality statement

The author provides assurance that the information contained within this report is accurate and valid and that every effort has been made to avoid the omission of data. Where data has been estimated, sourced externally, or where there are any concerns regarding the limitations of its use this has been clearly annotated.

9.0 Appendices

Appendix 1 Progress against 'other' performance indicators

Appendix 2 Financial Statement



Appendix 3 Explanation of use of symbols

Appendix 1: Progress Against 'key' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
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Area Partner National Indicators:

The indicators below form part of the new National Indicator Set introduced on 1st April 2008. Responsibility for setting the target, and reporting performance data will sit with one or more local partners.

NI 18	Adult re-offending rates for those under probation supervision	Qtr 4 09/10 Data- Not yet available 8.57% at Qtr 3 09/10	6.77% by end Qtr 4 10/11	Qtr 1 10/11 data-not available till November 2010			<p>There is a built-in 6 month time lag in the publication and availability of NI 18 data from the Ministry of Justice.</p> <p>Qtr 4 09/10 out-turn data will not be available till later this month after 17/8/10.</p> <p>The Qtr 3 09/10 result of 8.57% actual re-offending is a marginal increase on the 8.5% at Qtr 2 09/10 and relates to 6 more re-offenders than predicted. Small numbers of increased re-offenders can influence the results substantially.</p>
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Appendix 2 Financial Statement

COMMUNITY DEPARTMENT**Revenue Budget as at 30th June 2010**

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (Overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	8,325	2,069	2,077	(8)	2,114
Premises Support	353	72	71	1	71
Other Premises	888	394	361	33	792
Book fund	272	45	34	11	34
Hired & Contracted	589	171	178	(7)	254
Promotions	290	72	83	(11)	118
Supplies & Services	650	146	155	(9)	242
Transport	95	24	20	4	21
Central Support Services	42	42	45	(3)	45
Leisure Mgt.Contract	1,843	307	303	4	1,353
Grants	623	306	301	5	301
Other Agency	81	4	4	0	8
Asset Charges	2,134	0	0	0	0
Total Expenditure	16,185	3,652	3,632	20	5,353
Income					
Sales	-224	-52	-75	23	-75
Fees & Charges	-1,609	-374	-416	42	-416
Rents	-14	-6	-9	3	-9
Support Services	-613	0	0	0	0
Recharges					
Grant funding	-230	-204	-174	(30)	-174
Reimbursements	-890	-178	-155	(23)	-155
Total Income	-3,580	-814	-829	15	-829
Net Expenditure	12,605	2,838	2,803	35	4,524

Comments on the above figures:

Gross expenditure is £20,000 below budget profile for the first quarter of the financial year. This is primarily a result of spend to date on utility costs being below profile. Whilst budgets are profiled to take account of seasonal factors, the total budget for this area is £476,000, and some variations are inevitable. It is not assumed at this stage in the financial year that this underspend will remain at the year-end.

Appendix 2 Financial Statement

Income is showing an over-achievement against budget profile to date of £15,000. Sales and Fees and Charges income are currently overachieved by £65,000, this relates principally to The Brindley Arts Centre. However, this additional income is partially offset by increased expenditure, particularly in the Employees, Hired and Contracted and Promotions budget headings. The income below target for Grants and Reimbursements is not expected to be under-achieved at the year-end.

At this stage, net Divisional expenditure is anticipated to be to budget at the year-end.

Capital Projects as at 30th June 2010

	2010/11 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Skate Park	100	25	0	100
Churchill Hall	2	0	0	2
Access & Security Measures	50	0	0	50
Norton Priory Health & Safety	22	0	0	22
Increased Employment Opportunities	10	0	0	10
Total Spending	184	25	0	184

Appendix 2 Financial Statement

Local Strategic Partnership Funded Schemes as at 30th June 2010

	Annual Revised Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance To Date (overspend) £'000	Actual Including Committed Items £'000
<u>Priority 1: Healthy Halton</u>					
Sports Partnership	66	16	14	2	14
Health & Physical Activity	43	11	-4	15	-4
Alcohol Harm Reduction	430	108	50	58	50
Enhanced Sports	78	20	1	19	1
Sub Total	617	155	61	94	61
<u>Priority 4: Employment Learning & Skills</u>					
Budgeting Skills Project	33	8	0	8	0
Citizen's Advice Bureau	86	22	-30	52	-30
Sub Total	119	30	-30	60	-30
<u>Priority 5: Safer Halton</u>					
Youth Splash	114	28	14	14	14
Blue Lamp	518	129	0	129	0
Domestic Violence	95	24	-9	33	-9
Prolific & Persistent Offenders	46	12	0	12	0
Sub Total	773	193	5	188	5
Overall Total	1,509	378	36	342	36




Comments on the above figures:

Regular monitoring reports are sent to the Local Strategic Partnership (LSP)

in respect of all LSP projects and any areas of concern are dealt with throughout the year by the LSP support team and individual project managers. Some variances against the budget to date are expected, as the LSP have deliberately over-programmed in order to ensure that the full allocation of Working Neighbourhood Fund grant is spent during the year.




Appendix 3 Explanation of Symbols

Symbols are used in the following manner:

Progress	<u>Objective</u>	<u>Performance Indicator</u>
Green	 Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber	 Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage whether the annual target is on course to be achieved</u>.</i>
Red	 Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved unless there is an intervention or remedial action taken</u>.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green	 Indicates that performance is better as compared to the same period last year.
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Departmental Quarterly Monitoring Report

<u>Directorate:</u>	Environment & Economy
<u>Department:</u>	Environmental & Regulatory Services
<u>Period:</u>	Quarter 1 - 1 st April – 30 th June 2010

1.0 Introduction

This quarterly monitoring report covers the Environmental & Regulatory Department first quarter period up to 30th June 2010. It describes key developments and progress against 'key' milestones and performance indicators for the service.

The way in which the traffic lights symbols and direction of travel indicators have been used to reflect progress to date is explained within Appendix 8.

2.0 Key Developments

Open Spaces Division

In the first quarter of 2010/11 a number of key 'Playbuilder' funded Children's playgrounds were formally unveiled. New playgrounds included Town Park, Roehampton Drive and Spike Island. The Playbuilder programme has now been cancelled by Government, which will limit any further developments.

The Open Space Service has started to work towards the creation of a new cemetery for Widnes. The timescale is to have a new cemetery built and ready for burials by April 2012.

Waste & Environmental Improvement Division

The Multi-Material kerbside recycling service was extended to a further 9,000 properties in June, with;

- 5,000 households receiving blue wheeled bins,
- 3,000 households receiving blue boxes, and
- 1,000 multi-occupancy dwellings providing with large communal recycling bins.

An assessment of the provision of multi-material recycling services to all primary schools was completed in this quarter. As a result services will commence to 34 schools in September that currently are not receiving recycling collections.

During quarter 1, arrangements were being put into place for the extension of the RecycleBank 'rewards for recycling' scheme to a further 37,000 households. Residents at those properties will be able to earn reward points for recycling in their blue bins from August. The Council received national TV coverage in June for implementing the innovative scheme and remains only the second authority in the country to have done so.

The Council's efforts to tackle littering and other environmental nuisance are on-going and in June 12 individuals were issued with Fixed Penalty Notices for littering offences.

On 30th June, officer from the Council took part in a very successful 'Operation Rogue Trader' enforcement day. The joint operation was carried out with a number of partner agencies, including The Police, Trading Standards and Courts Officers. The combined efforts of all agencies resulted in a total of 210 stop checks, with the outcomes including;

- 2 Courts warrants executed (£500)
- 8 Arrests
- 7 Detected Road Traffic Offences
- 10 Registered Waste Carrier Applications issued
- 12 Rogue Trader guidance notices issued

During the quarter all primary schools were contacted and encouraged to take up the offer of free provision of "display energy meters" as a way of monitoring electricity use. Back up advice and support was provided by Waste and Environmental Improvement Division.

Regulatory Services

Development Control Management Summary Stats for Q1:

Applications Received – 140

Applications Decided – 125

Applications on hand (undecided) – 157

Pre-Applications – Received – 72

Pre-Applications – Closed - 46

Pre-Applications – On-Hand - 82

N.B. There are certain applications (such as tree preservation orders) that are not counted in the statutory CLG speed of processing statistics (N157). This accounts for the difference between the figures reported above and the figures given for N157.

Summary of major applications received (but not necessarily decided) over the last quarter:

10/00150/FUL - Proposed erection of 20 No. two and three bedroom houses together with associated landscaping on Land Off Rivenmill Close Widnes Cheshire.

10/00180/S73 - Proposed variation of condition Nos 2 & 3 of planning consent 98/00253/OUT to replace extant planning permission and extend time limit for implementation by a further 10 years on Land To North Of Red Brow Lane Daresbury Park Chester Road Runcorn Cheshire.

10/00181/S73 - Proposed variation of Condition Nos. 2 & 3 of planning consent 01/00356/OUT to replace extant planning permission and extend the time limit for implementation by a further 10 years on Land At Daresbury Park Daresbury Warrington Cheshire.

10/00182/S73 - Proposed variation of condition Nos. 2 & 3 of planning consent 02/00054/OUT to replace extant planning permission and extend the time limit for implementation by a further 10 years Land To North Of Red Brow Lane Daresbury Park Runcorn Cheshire.

10/00214/FUL - Proposed erection of mezzanine sales floor and associated internal and external works at ASDA Widnes Road Widnes Cheshire WA8 6AF

10/00222/REM - Application for approval of reserved matters (on 09/00101/FUL) for landscaping details at Ashley Retail Park Lugsdale Road Widnes Cheshire.

10/00254/FUL - Proposed redevelopment of site for the erection of an A1 foodstore (1710sq.m. GEA), 2 No. A1 non-food retail units (1784 sq.m. GEA) and an A4 family pub/restaurant (697 sq.m. GEA) with associated parking, reconfigured vehicular and pedestrian access and landscaping provision at Vestric House West Lane Runcorn Cheshire.

10/00279/FUL - Proposed development of 18 No. courtyard houses, detached garages, private access road and private open space at Former Dawsons Dance Centre Lunts Heath Road Widnes Cheshire.

10/00280/FUL - Proposed two storey office block and car park extension at Rushserve Ltd Waterloo Road Widnes Cheshire.

Changes in the Health & Safety risk rating set by the Health & Safety Executive (HSE) were introduced in April 2010. This rating system focuses less on the inherent risks associated with businesses but more on the history of compliance. It is estimated that this has the potential to raise the ratings of businesses in the Borough, which will then require more frequent inspection as a result.

3.0 Emerging Issues

Waste & Environmental Improvement Division

The Government has announced a major review of waste policy, which will begin early 2011.

The review will include:

- the effect of waste policies on local communities and individual households, and how local authorities can best work with people to make the best decisions;
- maximising the contribution of the waste and recycling industries to the UK economically and environmentally;
- how we work towards a “zero waste economy”, and drastically reduce the amount of waste created and valuable resources sent to landfill,; and
- new approaches to dealing with commercial waste and promoting ‘responsibility deals’, reducing the amount of waste generated by production and retail.

The UK has to bring in domestic legislation giving effect to the revised EU Waste Framework Directive (WFD) by 12 December 2010. Defra and the Welsh Assembly Government (WAG) are consulting on draft Regulations to bring the revised WFD into effect in England and Wales. The consultation will run from 8 July to 16 September 2010.

The main new features of the revised WFD are that it requires Member States:

- To apply the “waste hierarchy” as a priority order in waste prevention and management legislation and policy;
- To set up “separate collections” of waste for at least paper, metal, plastic, and glass by 2015 where technically, environmentally and economically practicable. (applies to both household and business waste);
- To recycle 50% of waste from households by 2020;
- To recover 70% of construction and demolition waste by 2020.

4.0 Service Objectives / milestones

4.1 Progress against ‘key’ objectives / milestones

Total	4		4		0		0
--------------	----------	---	----------	---	----------	---	----------

All key objective/ milestones for this service are progressing as planned and additional details are provided in Appendix 1.




4.2 Progress against 'other' objectives / milestones

Total	0		0		0		0
-------	---	---	---	---	---	---	---

There are presently no objectives/ milestones of this type identified for this service.



5.0 Performance indicators

5.1 Progress Against 'key' performance indicators

Total	0		0		0		0
-------	---	---	---	---	---	---	---

There are presently no indicators of this type identified for this service

5.2 Progress Against 'other' performance indicators

Total	2		0		0		0
-------	---	---	---	---	---	---	---

The are 2 other indicators for the service. Due to the absence of national data no information can be provided at this time.

6.0 Risk Control Measures

During the development of the 2010 -11 Service activity, the service was required to undertake a risk assessment of all Key Service Objectives. No 'high' risk, treatment measures were identified.

7.0 Progress against high priority equality actions

As a result of undertaking a departmental Equality Impact Assessment no high priority actions were identified for the service for the period 2010 – 2011.

8.0 Data quality statement

The author provides assurance that the information contained within this report is accurate and valid and that every effort has been made to avoid the omission of data. Where data has been estimated, has been sourced directly from partner or other agencies, or where there are any concerns regarding the limitations of its use this has been clearly annotated.

9.0 Appendices

Appendix 1 Progress Against 'key' objectives / milestones

Appendix 2 Financial Statement

Appendix 3 Explanation of use of symbols

Appendix 1: Progress Against 'key' objectives / milestones

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
-----	-------------	-------------------	-------------------	-----------	---------------------	------------------------	-----------------------




Ref	Objective
EAR 1	To address air quality in areas in Halton where ongoing assessments have exceeded national air quality standards set out under the Environment Act 1995, in consultation with all relevant stakeholders.

Milestones	Progress Q 1	Supporting Commentary
Formal/Public declaration of the Air Quality Management Areas (AQMA) March 2011.	<input checked="" type="checkbox"/>	All potential partners and participants in a working group have now been contacted and a meeting will be arranged in Autumn to initiate discussions.

Appendix 1: Progress Against 'key' objectives / milestones

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 1	Current Progress	Direction of Travel	Supporting Commentary
-----	-------------	-------------------	-------------------	-----------	---------------------	------------------------	-----------------------

Ref	Objective
EAR 5	To develop, publish and implement actions arising from an integrated Environmental Nuisance Prevention and Enforcement Strategy. This strategy will allow a co-ordinated response from the Service to reported nuisances and their remedy.

Milestones	Progress Q 1	Supporting Commentary
Develop a Strategy, in consultation with relevant HBC officers, external agencies and other stakeholders. Oct 2010		Work has commenced on the production of a draft Strategy.
Develop Action Plans, in conjunction with other Divisional Managers, for service areas within the Environmental and Regulatory Services Department. Mar 2011.		The action Plans will be completed by March 2011.
Implement actions to meet the commitments of the Strategy and Action Plans. Mar 2011.		Actions will be implemented in line with the target date.

Appendix 2 Financial Statement

ENVIRONMENT & ECONOMY DIRECTORATE

ENVIRONMENT & REGULATORY SERVICES

Revenue Budget as at 30th June 2010

	Annual Revised Budget	Budget To Date	Actual To Date	Variance To Date (overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	6753	1655	1717	(62)	1717
Premises Support	0	0	0	0	0
Other Premises	196	30	34	(4)	34
Landscape Maintenance	217	54	27	27	27
Supplies & Services	490	97	63	34	90
Hired & Contracted Services	442	83	79	4	83
Unitary Development Plan	30	0	0	0	0
Trade Waste Tipping	120	30	27	3	27
Use of Transport	2133	538	504	34	504
Grants To Voluntary Organisations	44	38	36	2	36
Recycling	524	150	120	30	120
Waste Disposal	5135	1137	1104	33	1104
Agency Related	19	19	18	1	18
Finance Charges	170	0	0	0	0
Asset Charges	8	0	0	0	0
Central Support Services	0	0	0	0	0
Departmental Support Services	0	0	0	0	0
Total Expenditure	16281	3831	3729	102	3760
Income					
Sales	-64	-5	-1	(4)	-1
Planning Fees	-577	-115	-107	(8)	-107
Building Control Fees	-252	-63	-18	(45)	-18
Pest Control	-69	-17	-19	2	-19
Trade Waste Charges	-346	-87	-78	(9)	-78
Other Fees & Charges	-561	-106	-54	(52)	-54
Rents	-18	-6	-1	(5)	-1
Support Service Income	-315	-16	-17	1	-17
Government Grants	-515	-71	-51	(20)	-51
Reimbursements & Other Grants	-18	0	0	0	0
Schools SLA	-250	-53	-53	0	-53
Non-Revenue	-101	-25	-33	8	-33
Total Income	-3086	-564	-432	(132)	-432
Net Expenditure	13195	3267	3297	(30)	3328

Appendix 2 Financial Statement

Comments on the above figures:

In overall terms revenue spending at the end of quarter 1 is ahead of the budget profile.

Staffing is above budget to date as anticipated savings from the efficiency review have not yet been met. This situation will be closely monitored through out the year.

With regard to landscape maintenance and recycling there have been delays in the start dates of some projects.

With regard to supplies & services, although expenditure appears to be below budget to date this is not the case when commitments are taken into account

With regard to income, Building Control fees are less than budget to date as a result increased competition from the private sector and the current economic climate. Planning fee income is also below budget to date. This is a result of a slow down in the development industry. Income from Open Spaces external works is also lower than anticipated. As a result these income budgets will be closely monitored throughout the year.

At this stage it is anticipated that the overall spend will be in line with the Departmental budget by the end of the financial year.

Appendix 2 Financial Statement

ENVIRONMENTAL & REGULATORY SERVICES DEPARTMENT**Capital Projects as at 30th June 2010**

	2010/11 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Screened Tip Area	25	0	0	25
Improvement To Allotments	85	1	1	84
Hale Park	447	25	25	422
Children's Playground Equipment	93	0	0	93
Milton Avenue	34	30	30	4
Victoria Park	8	4	4	4
Town Park	42	42	42	0
Hallwood/Roehampton	30	30	34	-4
Playground – Wellington Street	0	0	6	-6
Arley Drive	36	0	0	36
Playground – Runcorn Hill Park	0	0	2	-2
Landfill Tax Credit Schemes	340	0	0	340
Litter Bins	20	0	0	20
Recycling Bins	70	70	77	-7
Total Capital Expenditure	1230	202	221	1009

Comments on the above figures:

The programme is a little ahead of target, however, it is expected that the full capital allocation will be spent by the year-end

Appendix 2 Financial Statement

ENVIRONMENTAL & REGULATORY SERVICES DEPARTMENT**Local Strategic Partnership as at 30th June 2010**




	Annual Budget £'000	Budget To Date £'000	Actual Spend To Date £'000	Variance To Date (overspend) £'000
Area Forum				
Area Forum 1	110	27	-1	28
Area Forum 2	89	22	-3	25
Area Forum 3	87	22	6	16
Area Forum 4	127	32	14	18
Area Forum 5	114	29	6	23
Area Forum 6	53	13	0	13
Priority 5 Safer Halton				
Pride of Place Action Team	33	8	0	8
Area Forum Co-Ordinator	42	11	9	2
ASB Commissioned Services	543	136	1	135
Total Capital Expenditure	1218	305	29	276

Comments on the above figures:

Regular monitoring reports are sent to the local Strategic Partnership (LSP) in respect of all LSP projects and any areas of concern are dealt with throughout the year by the LSP support team and individual project managers. Some variances against the budget to date are expected, as the LSP have deliberately over-programmed in order to ensure that the full allocation of Neighbourhood Renewal Fund grant is spent during the year.




Appendix 3 Explanation of Symbols

Symbols are used in the following manner:

Progress	<u>Objective</u>	<u>Performance Indicator</u>
Green	 Indicates that the <u>objective is on course to be achieved</u> within the appropriate timeframe.	<i>Indicates that the annual target <u>is on course to be achieved</u>.</i>
Amber	 Indicates that it is <u>uncertain or too early to say at this stage</u> , whether the milestone/objective will be achieved within the appropriate timeframe.	<i>Indicates that it is <u>uncertain or too early to say at this stage whether the annual target is on course to be achieved</u>.</i>
Red	 Indicates that it is <u>highly likely or certain</u> that the objective will not be achieved within the appropriate timeframe.	<i>Indicates that the target <u>will not be achieved unless there is an intervention or remedial action taken</u>.</i>

Direction of Travel Indicator

Where possible performance measures will also identify a direction of travel using the following convention

Green	 Indicates that performance is better as compared to the same period last year.
Amber	 Indicates that performance is the same as compared to the same period last year.
Red	 Indicates that performance is worse as compared to the same period last year.
N/A	Indicates that the measure cannot be compared to the same period last year.

REPORT TO: Safer Policy & Performance Board

DATE: 21 September 2010

REPORTING OFFICER: Strategic Director, Adults and Community

SUBJECT: General Register Office review of the Halton Registration Service

WARDS: Boroughwide

1.0 PURPOSE OF THE REPORT

1.1 To inform the Board of the findings of the recent Inspection of the Halton Registration Service. See attached Report Appendix 1.

2.0 RECOMMENDATION:

That Members of the Board approves:

- i) the findings of the review;**
- ii) that the recommendations will be reviewed in accordance with the report;**

3.0 SUPPORTING INFORMATION

- 3.1 The delivery and administration of civil registration is a partnership between local government and the General Register Office (part of the Identity and Passport Service). In 2007 registration officers became local authority employees. This, together with the creation of a new governance framework, provided local authorities with greater responsibility and opportunities to develop the delivery of local registration services. To date some 93 local authorities, including Halton, have adopted the new governance arrangements, and committed to the national Code of Practice / Good Practice Guide.
- 3.2 The Local Government Delivery Partnership Unit works with local authorities to review and improve service standards and to progress the modernisation of civil registration. The unit also seeks to identify innovation and good practice within the service and to encourage its wider dissemination. For local authorities that have adopted the new governance arrangements, a system of self-reporting through the submission of an Annual Performance Report to the General Register Office is in place. To supplement this, the unit also undertakes Inspection of the service.
- 3.3 Halton adopted new governance arrangements in July 2007. The terms of reference for this review were agreed with the Proper Officer for

Registration and the Registration Service Manager / Superintendent Registrar on 29 April 2010 as follows:

- To examine the technical proficiency of staff in relation to marriage activity and service attainment against related Good Practice Guide standards.
- To examine the service's Key Performance Indicator monitoring systems and service attainment.
- To examine the customer journey whilst accessing the service and attainment against related Good Practice Guide standards.
- To identify existing strengths and offer recommendations for improvement.
- To report on any other noteworthy issues identified during the review.

3.4 The review noted the following:

- Observation of the Superintendent Registrar and other registration officers performing statutory duties revealed a very good standard of technical proficiency;
- The register office makes good use of electronic and manual recording systems which work well in monitoring service performance in respect of appointment availability, customer waiting times and certificate applications;
- The Registration Service's attainment against Key Service Performance Indicators is good, meeting or exceeding all but two standards (see Appendix B of the report);
- Customer access to the Registration Service is excellent across the district with additional service points providing convenient access;
- Initial customer contact via the Council's contact centre works very well, although there is scope to extend its role and responsibilities in relation to the registration service; and
- Staff display excellent customer care skills and a willingness to ensure that customers are fully informed and meet all their needs.

4.0 POLICY IMPLICATIONS

None.

5.0 OTHER IMPLICATIONS

- 5.1 In order to meet the key recommendations outlined in 2.1 above, support will be required from internal divisions / services, specifically the Contact Centre /Halton Direct Link, ICT Services and the Property Services / Asset Management Divisions.
- 5.2 The Inspection highlighted a number of areas for development that if implemented would have some resource implications.

6.0 RISK ANALYSIS

- 6.1 The review noted the following issues that need to be addressed:
- The register office strong room can only be accessed via the Superintendent Registrar's office, thus customer interviews are disrupted if a register is urgently required.
 - A waste pipe is located in the ceiling and that the strong room has reached its capacity for the storage of completed registers and unused security stock.
 - Due to shortage of space, it was also noted that stationery and stock was stored within the kitchen area.
 - The photocopying machine is situated in the corridor to the kitchen, which constitutes part of a fire exit route.

7.0 EQUALITY AND DIVERSITY ISSUES

None.

8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
Review Report on the Registration Service in Halton – June 2010	The Town Hall Heath Road Runcorn WA7 5TN	Howard Cockcroft



Home Office

**Identity &
Passport Service**

REVIEW REPORT ON THE REGISTRATION SERVICE IN HALTON

**Local Government Delivery Partnership Unit
General Register Office
June 2010**

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INTRODUCTION

1

Background

1.1 The delivery and administration of civil registration is a partnership between local government and the General Register Office (part of the Identity and Passport Service). The Registrar General for England and Wales is Chief Executive of IPS. In 2007 registration officers became local authority employees. This, together with the creation of a new governance framework, provided local authorities with greater responsibility and opportunities to develop the delivery of local registration services. To date some 93 local authorities, including Halton, have adopted the new governance arrangements, and committed to the national Code of Practice / Good Practice Guide (GPG).

1.2 The GRO Delivery Partnership Unit (DPU) works with local authorities to review and improve service standards and to progress the modernisation of civil registration. The unit also seeks to identify innovation and good practice within the service and to encourage its wider dissemination. For local authorities that have adopted the new governance arrangements, a system of self reporting through the submission of an Annual Performance Report to GRO is in place. To supplement this, the unit also undertakes bespoke reviews, the scope of which is agreed with individual local authorities.

1.3 Halton adopted new governance arrangements in July 2007 and is now due for a programmed New Governance Review of registration services.

Terms of Reference

1.4 The details of the review process for Halton were agreed with the local authority at a meeting on the 29th April 2010. The terms of reference were:

1. To examine the technical proficiency of staff in relation to marriage activity and service attainment against related Good Practice Guide standards.
2. To examine the service's Key Performance Indicator monitoring systems and service attainment them.
3. To examine the customer journey whilst accessing the service and attainment against related Good Practice Guide standards.
4. To identify existing strengths and proffer recommendations for improvement.
5. To report on any other noteworthy issue, which is identified during the review.

INTRODUCTION

1 *continued*

Methodology

1.5 The review was conducted between 15th and 18th June 2010. The following methods were used during the course of the review:

- observation of attestation of marriage notices and delivery of ceremonies by the Superintendent Registrar, the associated administrative procedures, and the examination of marriage registration records and documents
- conducting of a ‘mystery shopping exercise’
- examination of service appointment diaries, performance monitoring systems and information and service organisation
- general observation of customers’ experience
- meetings with registration managers and other officers (including Contact Centre manager)
- examination of reports and records via the RON system

Acknowledgement

1.6 The DPU would like to extend its thanks to all those who contributed to this review.

SUMMARY OF FINDINGS

2

2.1 Observation of the Superintendent Registrar and other registration officers performing statutory duties revealed a very good standard of technical proficiency. The register office makes good use of electronic and manual recording systems which work well in monitoring service performance in respect of appointment availability, customer waiting times and certificate applications. Its attainment against Key Service Performance Indicators is good, meeting or exceeding all but two standards. Customer access to the registration service is excellent across the district with appointments readily available and additional service points providing convenient access. Initial customer contact via the council's contact centre works very well, although there is scope to extend its role and responsibilities in relation to the registration service. Staff display excellent customer care skills and a willingness to ensure that customers are fully informed and that all their needs are met.

Key Strengths

2.3 A number of strengths and good practice were identified in the areas inspected:

- (i) Multi-skilled staff for service resilience (*see paragraph 3.3*).
- (ii) Technical proficiency of staff is very good and ancillary tasks completed to good standard (*see paragraph 3.2*).
- (iii) Robust procedures for Approved Premise approvals (*see paragraph 3.7*).
- (iv) Appointment availability and in-office waiting times exceed national standards (*see paragraph 4.3 and 4.4*).
- (v) Same or next day service for certificate applications and credit/debit card payment facility (*see paragraph 4.5*).
- (vi) 100% satisfaction rate from recent survey – 97% overall (*see paragraph 4.6*).
- (vii) Good access to the service via corporate contact centre, additional service points at Widnes and Halton Lea (*see paragraph 5.8*).
- (viii) Excellent range of literature and information available on plasma screen in waiting area (*see paragraph 5.11*).

Key Recommendations

2.4 A number of key areas where action and development is required were also identified:

- (i) The date of birth should be shown in full on the reverse of the appropriate marriage authority when the age differs on ceremony day. Widow(er)s/surviving civil partners' cards should be submitted on the first Wednesday of each month. (*see paragraph 3.6*).
- (ii) Superintendent Registrar will follow up issue with Stopford electronic diary reporting system for in office waiting times. (*see paragraph 4.4*).
- (iii) The local authority to review scope for the contact centre to deal with a wider range of registration matters (*see paragraph 5.7*).
- (iv) The local authority will wish to ensure information published on Registration Service web-site is relevant and up to date and consider scope for additional services on-line (*see paragraph 5.12*).
- (v) The local authority will wish to consider scope for improving storage space for deposited registers in the strong room and non secure stock in the kitchen area. The location of the photocopy machine should also be reviewed (*see paragraphs 3.9 and 6.1*).

TECHNICAL PROFICIENCY OF STAFF – MARRIAGE AND CIVIL PARTNERSHIP ACTIVITY

3

Technical proficiency of the Superintendent Registrar

3.1. A separate report in respect of the technical proficiency of the new Superintendent Registrar has been issued personally to him and copied to the Proper Officer for Registration Matters.

Statutory standards

3.2 The following table summarises performance against statutory standards contained within the Good Practice Guide. For marriage & civil partnership activity, Halton is currently achieving 100% and for records, returns & certificates, the service is achieving 80%. A full analysis is provided at Appendix A and achievement against these standards is further discussed within the following paragraphs.

TABLE 1

GOOD PRACTICE GUIDE SUMMARY TABLE				
Category	Number of Standards	Met	Not met	Attainment %
Marriage & civil partnership activity	8	8	0	100
Records, returns & certificates	5	4	1	80

General

3.3 There is an efficient team approach to working within the office. All registration officers are deputy superintendent registrars and deputies are regularly afforded the opportunity to undertake sufficient registration duties to maintain skill levels for their own development. This also provides added resilience for the service and contributes to a flexible, customer focussed ethos.

Marriage and Civil Partnership Notices

3.4 Halton is a small, compact service which offers marriage and civil partnership notice facilities at the register office in Runcorn and at Halton Direct Link in Widnes. Appointments for notices are transferred from the contact centre to the register office and are administered by registration staff via the 'Stopford' diary system. This provides performance information regarding notice appointment availability, which was found to be good.

3.5 Register office staff take great care around notice and ceremony administration and legality. A robust local numbering system is in place to assist with the administration of completed notices and details are recorded into a manual diary. We were informed that final checks of documents are carried out on a weekly basis, and at least one month in advance of the ceremonies, thus allowing sufficient time for a fresh notice to be taken in case of any issues arising. At the time of the review, current administrative paper-work was filed correctly and the RON task list was up-to-date, as were the number of notices on display.

Ceremonies

3.6 The superintendent registrar's office is the statutory ceremony room which is offered for the statutory fee of £40. The Boston Suite is also offered on Monday to Thursday for the same fee which rises to £80, £86 and £115 depending on the chosen ceremony day. We discussed how possible alterations to the ceremonies waiting area could provide enhanced interview facilities or a small additional ceremony suite. Provisional bookings are made up to two years in advance and the service provides pre-ceremony interviews for customers to finalise arrangements. Up to three teams are required to operate the ceremony programme during busy times of the year. Besides the team of six permanent staff, there are four casual officers who are called upon as necessary.

TECHNICAL PROFICIENCY OF STAFF – MARRIAGE AND CIVIL PARTNERSHIP ACTIVITY

3 (cont'd).

Registration of marriages and civil partnerships

3.7 DPU observations of four pre-marriage interviews and two marriage registrations revealed a very good standard of work for registration officers. Pre-marriage interviews are conducted according to requirements and registrations are not started until after couples exchange the 'Declaratory and Contracting' words. Examination of a sample of marriage register entries from July 2009 to June 2010 revealed that venues were correctly recorded and all Superintendent Registrars' Certificates (authorities for marriage to proceed) were in order. However, when the age on the ceremony date differs to that given at the time of notice, we noted that deputies do not record the date of birth in full on the reverse of the authority (Superintendent Registrar's Certificate) which was issued in respect of that party. Registration officers are also reminded of the requirement to prepare widow(er)s/surviving civil partners' cards on remarriage. Examination of civil partnership formations from January 2010 – June 2010 confirmed 100% entered onto RON within two working days.

Approved Premises

3.8 Responsibility for the approval of new venues for ceremonies falls to the Superintendent Registrar. Although he has not had the opportunity to process a new application, we were advised that a pre-inspection meeting is arranged to explain procedures and resolve any queries prior to carrying out a formal inspection. Providing there are no issues, the approval is signed off by the Proper Officer. The Superintendent Registrar maintains the register of approvals and checks expiry dates. Reminders for renewals are raised six months prior to expiry of approval.

Records, Returns and Certificates

3.9 The register office submits all returns to the Registrar General in accordance with statutory requirements. Inspection of records storage facilities in the strong room against plans submitted to GRO confirmed that registers are stored securely. However, minor alterations to the plans were required and GRO has been notified. Additional issues were identified in respect of access and future capacity. These are discussed further in Chapter 6 and will need to be addressed by the local authority..

Strengths and Innovations	Areas for Development
<ul style="list-style-type: none"> • Multi-skilled staff for service resilience. • All ancillary tasks completed to good standard. • Provisional ceremonies bookings taken up to two years in advance • Sessional ceremony staff appointed for busy periods • Robust procedures for Approved Premise approvals 	<ul style="list-style-type: none"> • Deputy marriage registrars are reminded that when the age on the ceremony date differs to that given at the time of notice, the date of birth should be shown in full on the reverse of the appropriate marriage authority. • Widow(er)s/surviving civil partners' cards should be submitted on the first Wednesday of each month. • The local authority will wish to address the issues of access and future capacity of the register office strong room

PERFORMANCE MONITORING SYSTEMS

4

4.1 It is a requirement of new governance that local authorities provide the Registrar General with details of its annual performance against five key indicators contained within the national Good Practice Guide. The table below shows Halton's level of attainment for the 2009/10 business year.

TABLE 2

KEY PERFORMANCE INDICATORS			
Key Indicators	Monitoring mechanisms in place	Standard attained	Performance rating
1. Events registered within statutory timeframe i) 98% of Births registered within 42 days ii) 98% of Still-births registered within 42 days iii) 95% of Deaths registered with 5 days.	Yes Data extracted from RON (GRO).	97% None registered 92%	Not met (1out of 34) None registered Not met
2. i) average waiting times for registration and notice taking. - Birth registration / declaration (3 days) - Still-birth registration / declaration (2 days) - Death registration / declaration (2 days) (all of above to standard of 95%). - Marriage / Civil Partnership Notice (to allow all ceremonies to proceed). ii) 90% of customers seen within 10 minutes of appointment time.	Yes Monthly customer surveys - manual diary maintained. Yes Manual recording at reception point.	100% 100% 100% 96% 99.7%	Met Appointments available and offered as required. Met
3. Certificate applications 95% of applications dealt with within 5 working days of receipt.	Yes Personal application forms dated. Other cases logged in and out.	100%	Met Certificates issued on same or next day.
4. 90% of customers satisfied (evidenced from response to customer satisfaction surveys and actual number of returned forms).	Yes Annual customer and stakeholder surveys.	97% customers satisfied (295 returns)	Met
5. Total number of formal complaints received (less than 0.5% as a % of all registrations).	Yes Corporate complaints system administered by LA.	Less than 0.1%.	Met One complaint received

KPI 1 Events registered within statutory timeframe

4.2 An analysis of registrations for 2009/10 shows that Halton narrowly missed the national standard with regard to the timely registration of births. Due to the small number of births registered in the district, this accounted for just one birth out of a total of 34. The standard achieved for deaths registered within the statutory period was 92% against the GPG national standard of 95%. RON data show that when incoming declarations and coroner's Part Bs are removed from the calculation, the attainment figure rises to 99%. The coroner's office either posts or faxes Part As and Bs to the register office and, at the same time, advises the next of kin to make an appointment to register the death. We were advised that the register office would make further contact with the next of kin if the death has not subsequently been registered within one day. We note that customers sometimes delay their attendance to register so that it is too late to effect a registration within 5 days, which is beyond the control of the registration service.

KPI 2 Average waiting times

4.3 The registration service utilises the Stopford electronic diary for performance data in respect of appointment availability. A registration officer is tasked with interrogating the system and analysing the data on a monthly basis. Reports generated from the electronic diary confirmed an excellent level of access to the service and the associated national standards are exceeded.

PERFORMANCE MONITORING SYSTEMS

4 (cont'd)

4.4 Halton has found a glitch in the Stopford performance reporting system in respect of in-office waiting times. A manual recording system is therefore currently maintained at the register office reception desk for monitoring this activity. Examination of daily records and monthly performance reports confirmed that 99.7% of customers are seen within 10 minutes, thus exceeding Good Practice Guide national standards. The issue of reporting in respect customers seen within 10 minutes, will be taken forward with the providers of Stopford by the Superintendent Registrar.

KPI 3 Certificate applications

4.5 Applications made by post, email (via contact centre), fax, in person or telephone are date-stamped with date of receipt. All personal application forms are similarly dated upon receipt and subsequently updated when issued. Payment for certificates may be made by cash, cheque, credit and debit card. Performance statistics in respect of certificate applications are collated by a registration officer and passed to the Superintendent Registrar on a monthly basis. The register office issues certificates in line with the local authority standard on the same or next day for current certificates and within 3 working days for family history. Figures show that the register office is providing an excellent service by achieving 100% against this target, thus exceeding the GPG standard of 90% issued within 5 working days.

KPI 4 Satisfied customers

4.6 A well established programme for the delivery of annual customer and stakeholder surveys is in place. The register office is assisted by the local authority's Research and Intelligence Group which analyses responses and produces outputs. The most recent survey was delivered in February 2010 resulting in 100% customers who responded being satisfied with the service. The overall customer satisfaction level for 2009/10 was 97%. Both sets of results exceed the GPG standard of 90%. Results are published in register office waiting area and are used to inform business planning.

Complaints

4.7 Corporate Comments, Compliments and Complaints procedures 'Any Comments or Complaints?' are in place on the local authority website and leaflets are available at the register office and all service points. Ongoing customer feedback is also encouraged with a 'post box' situated in the register office waiting area. The DPU was informed that only one formal complaint has been received in respect of the registration service during 2009/10.

Strengths and Innovations	Areas for Development
<ul style="list-style-type: none"> • Appointment availability and in-office waiting times exceed national standards. • Same or next day service for certificate applications and 3 days for 'family history'. • 100% customer satisfaction rate from recent survey – 97% overall. 	<ul style="list-style-type: none"> • Superintendent Registrar to follow up issue with Stopford electronic diary reporting system for in office waiting times.

CUSTOMER ACCESS TO THE SERVICE

5

General

5.1 This chapter provides information regarding the customer journey within Halton and Table 3 summarises service performance against the associated non-statutory Customer Service Standards contained within the Good Practice Guide. A full analysis is provided at Appendices B & C.

TABLE 3

GOOD PRACTICE GUIDE SUMMARY TABLE					
Category	Number of Standards	Fully Attained	Mostly Attained	Partly Attained	Not Attained
Customer service	8	6	1	1	0

Customer Care

5.2 Registration staff were found to be professional and knowledgeable and delivering the highest standard of customer care. Staff collected customers from the waiting area and returned them to the exit following business. They were courteous and polite throughout and meticulous in confirming customer understanding of the registration process.

Registration Service points

5.3 In addition to the register office at Runcorn, there is a facility for births, deaths and marriages at Halton Direct, Widnes and for birth registrations and declarations at Halton Lea.

Initial Contact – Contact Centre

5.4 Calls to the advertised telephone number for registration services are routed to the council's contact centre, Halton Direct Link. It is available for all local authority enquires, including registration, on a 24 hour basis, 7 days per week. Operators handle a basic range of calls which include taking certificate applications from customers who wish to apply by phone and providing appointments for the registration of births and for deaths which have not been referred to the coroner. All other enquiries are referred to the register office or other appropriate agencies. Operators at Halton Direct Link organise response to any emergency access requirement outside office open hours by offering one of two 'Emergency Out of Hours' mobile telephone numbers. The Registration Service website is also used by some customers to make initial enquiries by email via the website link.

5.5 Customer service operators have each received one day's training on the electronic 'procedural flows' for registration which are built into the local authority's Customer Relationship Management System 'Solidus'. Monthly quality control procedures are in place whereby team leaders review operators' call recordings. As part of this review, the DPU undertook a 'Mystery Shopping' exercise during which a number of registration scenarios were put to operators and register office staff. Results ranged between good and excellent, and beyond that, mystery callers were dealt with promptly and referred on to experienced registration staff as appropriate. Although no formal Service Level Agreement is in place, the Superintendent Registrar and the contact centre manager meet on a regular basis to discuss performance issues.

5.6 Customers calling the contact centre are answered by an operator, or placed in a queue if all operators are engaged. The 'Solidus' system provides a range of contact centre performance information. Latest reports for May 2010 show that the contact centre is meeting the corporate standard of 100% of calls answered within 30 seconds. Local authority customer survey results revealed that 97% of customers were satisfied with the service received when making an appointment via the contact centre.

CUSTOMER ACCESS TO THE SERVICE

5 (cont'd)

5.7 Overall, whilst the contact centre operates well enough, it could be utilised further to enhance the service to the customer and reduce the telephone contact with the Register Office which currently occurs. Some similar services across England and Wales administer most appointments; provide more information and deal with a broader range of registration enquiries. It is recommended that the local authority consider scope for the contact centre to deal with a wider range of registration matters (e.g. the allocation of all death appointments and basic marriage notice appointments), in keeping with similar practice throughout the service.

Opening hours

5.8 Appointments at the register office are offered between 09:30–13:00 and 14:00-16:30. Widnes appointments are offered on three mornings per week and Halton Lea Runcorn on one morning per week. Saturday morning appointments are offered 'By Appointment'. 100% of respondent customers who were surveyed in February 2010 agreed that this is an acceptable level of accessibility to Halton's registration services.

Accommodation, Access and Facilities

5.9 The register office is located in the Town Hall at Runcorn and we note that there is access for disabled or wheelchair-bound customers via the main entrance. There are disabled toilet facilities as well as baby-changing facilities. A hearing loop, to assist the hard of hearing, is installed within the ceremony room and a portable device is available for use in all private offices.

Appointments

5.10 Thirty minutes are allowed for each birth, death and notice appointment. Forty-five minutes are allowed for all ceremonies. Customers arriving without an appointment are accommodated as quickly as possible or offered an appointment at their convenience.

Customer Information and Literature

5.11 Staff provide sound advice and information to customers. A range of literature is displayed in the register office waiting room and appropriate literature is offered to customers when registering births and deaths and attesting notices. A plasma screen is situated in the main waiting area which displays legislative information and local advertisements. A second screen is planned for displaying marriage notices. There are leaflets promoting the Service's non statutory ceremonies, produced to the corporate standard and the marriage brochure 'Our Celebration' is currently being reviewed.

Registration Service website

5.12 The pages dedicated to the registration service on the local authority website provide a good range of information and contact details. However, some information needs updating and there is no facility to download certificate application forms or order certificates on-line. The local authority will wish to review the scope to utilise the website to offer customers remote access to services such as certificate ordering. The site has links to other useful sites such as 'GRO' and Cheshire BMD.

Strengths and Innovations	Areas for Development
<ul style="list-style-type: none"> • Good access to the service via contact centre, additional service points at Widnes and Halton Lea • Excellent range of informative literature available • Plasma screen to display additional information • Good responses in respect of mystery shopping 	<ul style="list-style-type: none"> • The local authority to review scope for the contact centre to deal with a wider range of registration matters • The local authority will wish to ensure information published on Registration Service web-site is relevant and up to date and consider scope for additional services on-line.

OTHER ISSUES

6

Register Office Strong room

6.1 The register office strong room can only be accessed via the Superintendent Registrar's office, thus customer interviews are disrupted if an original register is urgently required. We also note that a waste-pipe is located in the ceiling and that the strong room has reached its capacity for the storage of completed registers and unused security stock. These issues will need to be addressed. Due to shortage of space, we also note the necessity to store stationery and non-secure stock within the kitchen area of the premises, and that the photocopy machine is situated in the corridor to the kitchen. We were informed that this constitutes part of a fire exit route.

Areas for development

- The local authority will wish to consider scope for improving storage space for deposited registers in the strong room and for non-secure stock in the kitchen area. The location of the photocopy machine should also be reviewed.

APPENDIX

A GPG ASSESSMENT OF STATUTORY STANDARDS

Marriage and civil partnership activity		
Task & Statutory Requirement	National Standard	Findings
Taking notices of marriage or Civil Partnership to allow event to take place as planned.	Couples able to give notice in time to allow the marriage or civil partnership to take place as planned	Met
Accurate completion and processing of notices in accordance with legal requirements.	Preliminaries to Marriage and Civil Partnership completed in accordance with legal requirements.	Met
For ceremonies, the provision of a room within the register office to accommodate the couple and two guests for statutory fee.	Room identified on plan approved by the RG. Couples offered choice of words of declaration and contract provided for in legislation	Met
Marriages registered immediately following the event.	Marriages accurately recorded after immediately after event.	Met
Civil Partnerships recorded onto RON within 2 working days of formation.	Civil Partnerships recorded onto RON within 2 working days of the formation.	Met
Approved premises applications processed in accordance with Marriages and Civil Partnerships (AP) Regulations 2005	Procedures in place for approval process to be managed.	Met
Local authority maintains the Approved Premises register	Controls in place to manage the expiry and renewal of licences	Met
Suspected sham marriages or civil partnerships reported to Home Office	All returns made in accordance with statutory requirements and timescales	Met

Records, returns and certificates		
Task & Statutory Requirement	National Standard	Findings
Quarterly copies certified and submitted to RG within 28 days of the end of the relevant quarter.	All returns made in accordance with statutory requirements and timescales	Met
Occasional copies of corrected entries not on RON submitted within 7 days of correction	All returns made in accordance with statutory requirements and timescales	Met
Registers to be kept in repository approved by the Registrar General	Registers stored to prevent deterioration and in secure and accessible location.	Not met
Index to be prepared and made publicly available for deposited registration records	Provide public access to indexes on request.	Met
Certificates from entries in deposited registers issued in response to application (KPI 3)	95% of applications dealt with within 5 working days of application being received.	Met

APPENDIX

B GPG ASSESSMENT OF NON-STATUTORY STANDARDS

1. Customer service	
Key Activity & National Standards	Level of attainment and comments
Customer Satisfaction (KPI 4) 90% customer satisfaction level. Surveys undertaken to cover satisfaction with service access and availability; areas of service delivery dissatisfaction identified and acted upon; results published	Fully Met Recent customer survey results showed 97% customer satisfaction with service. Results published and displayed in register office waiting area.
Compliments and Complaints (KPI 5) Formal complaints received to be less than 0.5% of registration activities; clear, visual Compliments and Complaints policy in place; results published annually.	Fully Met Only one formal complaint received during 2009/10 (less than 0.1%). 'Any comments or complaints?' leaflets available at service points (also includes compliments).
Consultation Public views used to inform Service Delivery Plan; public/staff consultation strategy in place and reviewed.	Fully Met Annual consultation strategy in place which is used to inform SDP.
On arrival - waiting times (KPI 2b) <i>Those offices with appointment systems</i> 90% of customers seen within 10 minutes of appointment time. Seen on arrival, on time or earlier.	Fully Met 99.7% customers seen within 10 minutes of appointment time.
Waiting Times for Appointments for; Birth registration/declaration (3 days) Still-births registration/declaration (2 days) Death registration/declaration (2 days) Marriage and civil partnership notice (to allow ceremony to proceed) Customers without an appointment.	Fully Met Appointments available in line with GPG standards. Customers who turn up without an appointment are seen as quickly as possible or offered an appointment at their convenience.
Information about Services provided Available for statutory and non-statutory functions; in corporate format and obtainable at appropriate outlets; reviewed on a regular basis	Fully Met Full range of informative material on display. Corporate format for non-statutory services. Brochures and leaflets under regular review.
e-facilities Up to date and informative web site; credit/debit card payment facilities; e-appointment booking system in place	Partly Met Not all information displayed on website is up to date, no on-line facilities for certificate applications or appointments.
Engagement with customers and key partners External partners identified and engaged with; account taken of feedback/comments; Elected members involved	Mostly Met Regular surveys undertaken (latest February 2010) on full range of services - response rate was 43%. No elected member involvement.

APPENDIX

C CUSTOMER ACCESS TO THE SERVICE

As part of the inspection process an assessment was made on the “customer journey”.

1. How easy is it for the customer to make contact with the registration service?

Contact number accessed:	via website	<input checked="" type="checkbox"/>	
	other council offices	<input checked="" type="checkbox"/>	
	stakeholder establishments	<input checked="" type="checkbox"/>	
	local directories	<input checked="" type="checkbox"/>	
First point of contact	Direct to register office (registration office)	<input type="checkbox"/>	
(by telephone)	Direct to register office (reception point)	<input type="checkbox"/>	
	Direct to Contact Centre	<input checked="" type="checkbox"/>	
Emergency contact number in operation		<input checked="" type="checkbox"/>	Via contact centre

Comment: A mystery shopping exercise revealed that telephone calls were answered immediately. Emergency contact numbers are provided by contact centre operators.

2. How easy is it for the customer to access the registration service?

Convenient central location of register office	<input checked="" type="checkbox"/>
Additional service points within registration district	<input checked="" type="checkbox"/>
Good public transport links in place	<input checked="" type="checkbox"/>
Opening hours in line with other corporate services	<input checked="" type="checkbox"/>
Extended opening hours in operation	<input type="checkbox"/>
Lunchtime opening in operation	<input type="checkbox"/>

Comment: Service points at the Runcorn, Widnes and Halton Lea. Contact centre operating with 24/7 service. No extended opening hours in operation – recent customer survey 100% satisfaction with access.

3. How easy is it for the customer to locate and access the register office?

Good signage in place (street sign to RO <u>and</u> signs indicating location of RO)	<input checked="" type="checkbox"/>	Within Town Hall complex.
On-site car parking/cycle area/disabled bays	<input checked="" type="checkbox"/>	Car park on site at RO. Facility for disabled.
Drop-off points (for bridal cars)	<input checked="" type="checkbox"/>	
Direct access (office at street level with no steps or other barriers)	<input checked="" type="checkbox"/>	
At point of entry to building, access arrangements for disabled customers in place	<input checked="" type="checkbox"/>	
Reception point in place to greet/direct customers	<input checked="" type="checkbox"/>	

Comment: Disabled access at front of building – push-button access to gain entry.

4. How easy is it for customers to conduct their business quickly?

Waiting time for an appointment meets national standards (all events)	<input checked="" type="checkbox"/>
Waiting time from arrival to registration meets national standards	<input checked="" type="checkbox"/>
Walk-in provision available	<input checked="" type="checkbox"/>

Comment: GPG standards applied to appointment availability and customer waiting times. Walk-in customers are seen without delay or offered an appointment at their convenience.

APPENDIX

C *continued*

5. Is there good information about the registration service available to the customer?		
Wide selection of statutory notices, booklets and leaflets within public areas	<input checked="" type="checkbox"/>	
Wide selection of local information within public areas	<input checked="" type="checkbox"/>	
Use of IT to convey information (e.g. plasma screen) within public areas	<input checked="" type="checkbox"/>	
Easy access to registration services on website	<input checked="" type="checkbox"/>	
All information on website is up to date <u>and</u> relevant	<input type="checkbox"/>	Amendments required.
Promotional material in place (e.g. marriage brochure)	<input checked="" type="checkbox"/>	
Compliments and complaints policy in place <u>and</u> visible to customers	<input checked="" type="checkbox"/>	
Service standards/targets publicised	<input checked="" type="checkbox"/>	
<u>Comment:</u> Comprehensive Ceremony Guide and wide range of literature and information is available within the public waiting areas, including Comments, Complaints and Compliments procedures. Targets in respect of service standards are also published. Registration pages on website require updating and enhancing.		
6. What facilities and enhancements are available for customers at the register office?		
Garden area	<input checked="" type="checkbox"/>	3 gardens within grounds
Good backdrop for photo opportunities	<input checked="" type="checkbox"/>	
Statutory ceremony room (meeting national standard)	<input checked="" type="checkbox"/>	SR's office
Decommissioned rooms	<input checked="" type="checkbox"/>	
Waiting areas	<input checked="" type="checkbox"/>	
Separate waiting areas	<input checked="" type="checkbox"/>	
Quiet room available for distressed informants	<input type="checkbox"/>	
Baby changing facilities	<input checked="" type="checkbox"/>	
Public toilets	<input checked="" type="checkbox"/>	
Public telephone	<input type="checkbox"/>	
Children's play area	<input type="checkbox"/>	
Water dispenser/Drinks dispenser	<input type="checkbox"/>	
Mobility provisions for disabled customers (e.g. ramps, wide doors, lower counter)	<input checked="" type="checkbox"/>	
Visual provisions for disabled customers (e.g. Braille, large signs)	<input checked="" type="checkbox"/>	
Aural provisions for disabled customers (e.g. hearing loop, microphone)	<input checked="" type="checkbox"/>	
Disabled washroom facilities	<input checked="" type="checkbox"/>	
Rooms: clean and tidy/room for business to be conducted	<input checked="" type="checkbox"/>	
Wide range of choice with regard enhancements at ceremonies	<input checked="" type="checkbox"/>	
Payment by credit/debit card	<input checked="" type="checkbox"/>	
Special arrangements for still-birth/neo natal death arrangements	<input type="checkbox"/>	
Home registrations	<input type="checkbox"/>	
Partnership working with associated groups (e.g. bereavement)	<input checked="" type="checkbox"/>	
Wedding publication		
<u>Comment:</u> Well maintained gardens offer ideal photo opportunities for ceremonies. A hearing loop is installed within the ceremony room and a portable device is available for use at the reception area and in private offices. No provision for on-line payments for services.		

APPENDIX

C *continued*

7. Is there a good range of other services available to the public?	
Private citizenship ceremonies	<input checked="" type="checkbox"/>
Baby naming ceremonies	<input checked="" type="checkbox"/>
Re-affirmation of vows	<input checked="" type="checkbox"/>
Civil Funerals	<input checked="" type="checkbox"/>
Nationality Checking Service	<input checked="" type="checkbox"/>
<u>Comment:</u> Excellent choice of non-statutory ceremonies as well as NCS available.	
8. How did staff engage with the public?	
Confidentiality respected at all times	<input checked="" type="checkbox"/>
Understanding needs of customer	<input checked="" type="checkbox"/>
Clear and concise explanation of procedures etc	<input checked="" type="checkbox"/>
Good explanation of certificates and forms	<input checked="" type="checkbox"/>
Showed sympathy/empathy	<input checked="" type="checkbox"/>
Receptive to questions	<input checked="" type="checkbox"/>
Professional outlook	<input checked="" type="checkbox"/>
<u>Comment:</u> Staff offer a high standard of service throughout all points of contact and look to promote good customer care at all times.	

APPENDIX

D DISTRICT PROFILE**Demographic**

Governance	Unitary Council
Formation	1998 (Local Government Re-organisation)
Population	119,800 (mid 2008 estimates)
Size	79.09 square kilometres
Region	North West
Main hospitals	None

Access and facilities

Location of Register Office and Registration Service Points	Opening hours
Register Office Town Hall Heath Road Runcorn WA7 5TN	SR- Mon.-Fri.09:30-13:00 & 14:00-16:30 (except Wed. pm) SD/1- Mon-Fri. 09:30-13:00 & 14:00-16:30 (except Thurs.am)
Widnes Halton Direct Link 7, Brook Street, Widnes	S/D1- Mon, Wed. and Fri. 09:30-12:30.
Halton Direct Link Halton Lea, Runcorn	S/D1- Thurs. 09:30-12:30
Car parking	Register Office, Runcorn Town Hall
Gardens	Runcorn Town Hall
Ceremony Rooms	SR office. De-commissioned Ceremony Room at the Register Office.
Approved Premises	8
Designated RO	No

Business Volumes 2009/10

Births	34	Marriages	276
Deaths	517	Civil Partnerships	8
Birth Declarations	1178	Certificates issued	1,563
Death Declarations	-	New Citizens	71
Still-births	-	Citizenship Ceremonies	29
Marriage Notices	819		

Staffing profile (core staff)

Statutory post-holders	
SR (1)	
RBD/DSR (1)	
Additional staff	
Senior Registration Officer (1)	
Deputy Registrars of Births & Deaths (2)	
Registration Assistant (1)	
Sessional staff (4)	

REPORT TO: Safer Halton Policy and Performance Board

DATE: 21st September 2010

REPORTING OFFICER: Strategic Director, Adults and Community

SUBJECT: Alcohol Misuse

WARDS: Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To receive a presentation by the Head of Alcohol Harm Reduction (PCT) relating to harm linked to alcohol misuse, and a strategy to reduce the impact on services and to create capacity for our local population to understand and manage their own risks in relation to alcohol.

2.0 RECOMMENDATION: That

- (1) The PPB receive the presentation.
- (2) The PPB raise their own concerns in relation to alcohol misuse in Halton.
- (3) The PPB comment on the 12 point plan to improve the situation caused by the misuse of alcohol.

3.0 SUPPORTING INFORMATION

3.1 Alcohol Needs Assessment

An alcohol needs assessment has been carried out by the PCT (produced March 2010) to help inform our approach to tackling harm resulting from alcohol. This information, together with the Halton Community Safety Needs Assessment produced in April 2010, has given us a greater understanding of how this issue impacts on our local population. Some key findings from these needs assessments are detailed below.

3.2 Key Findings

3.2.1 General

- Here in Halton and St Helens the number of admissions to hospital for alcohol related harm is 36% higher than the national average and estimates are that that around 1 in 4 adults require support to reduce their alcohol intake to safe levels (this does not include dependent drinkers).
- Halton, in particular, has been identified as the sixth worst local authority area in England for alcohol related harm and the 22nd worst area for binge drinking. Reducing alcohol related harm is one of our key areas for investment and development in the next five years.
- The size of the challenge cannot be underestimated. Recent research into the attitudes and behaviours of local males aged 35-55 towards alcohol found despite significantly high levels of drinking; there was low acceptance of this as a problem. This was driven by low awareness of 'safe' levels and a perception that drinking at high levels is an enjoyable, normal part of life.

Less than 2 in 10 of those interviewed were concerned about their drinking and 70% said that they do not intend to cut down at all. 56% of those interviewed stated that they were not interested in hearing about ways to cut down drinking.

- Alcohol-specific admissions (100% related to alcohol) and alcohol related admission rates are rising above target.
- The PCT had higher levels of alcohol specific hospital admissions than England, North West and the ONS group average in 2008-9.
- Alcohol-related admissions rise with age and rates for men are significantly higher than for women.
- Hypertension, cardiac arrhythmias and mental and behavioural disorders due to the use of alcohol make up over 70% of all alcohol-related admissions.
- Of those conditions considered to significantly due to alcohol (i.e. 64% and above), the main reasons were mental disorders due to alcohol, ethanol poisoning and alcoholic liver disease. Males aged 35-44 and 45-55 had the highest rates of alcohol-related admissions when only those conditions which are 64% and above attributable to alcohol are considered.
- Using national research it is estimated 41% of the nearly 89,000 local Accident & Emergency contacts were due to alcohol during 2008-9. This total rose by over 3,000 compared to 2007-8. Applying the national tariff of £71 means this cost the PCT 2.59 million in 2008-9.

3.2.2 **Children & Young People**

- Over 70% of young people will have tasted an alcoholic drink by the age of 15.
- Rates of drinking amongst 14-17 year olds is high with 35% Halton young people surveyed and 28% St Helens respondents binge drinking at least once a week. The total units per week have increased.
- Halton is the 3rd worst Local Authority Area in England (out of 326) for under 18 Alcohol Specific Hospital admissions.
- St Helens is the 11th worst Local authority Area in England (out of 326) for under 18 Alcohol Specific Hospital admissions (Under 18s).
- Children in care are four times more likely to drink alcohol, smoke and take illegal drugs than those living in private households.
- In 20% of cases of pupils excluded from school alcohol is estimated to be a contributory factor in the reason for the exclusion. Halton had 20 temporary exclusions and St Helens 40, where alcohol and drugs was cited as the primary reason. There were a total of 1,340 exclusions in Halton and 2,160 in St Helens. Applying this 20% contributory finding means 268 Halton and 432 St Helens exclusions (including the numbers where alcohol and drugs were specifically cited) had alcohol as a factor. Check what year.
- Surveys suggest between 30% and 60% of child protection cases involve alcohol. Children on the Child Protection Register can be difficult to count as children can be taken or added to the register. Applying the national percentage to this local data (using a snapshot taken during March 2009 confirmed as accurate by previous year's data) suggests between 57-114 children on local child protection registers will be from families with alcohol disorders.

3.2.3 Community Safety

- Alcohol misuse is strongly linked to crime and anti-social behaviour. About half of all violent crimes, a third of all domestic violence and 37% of assaults are alcohol related.
- During 2009 43 % of all violent crime offences within Halton indicated that the offender or victim was under the influence of alcohol.
- During 2009 46 % of total alcohol related crimes committed within Halton occurred within the wards that make up the boroughs town centres / NTE (Widnes - Appleton, Kingsway and Riverside, Runcorn - Mersey). Such high percentages clearly justify the continued targeting of enforcement activity within these areas.
- During 2009 there were 817 arrests for alcohol related offences in public.
- Alcohol related violent crime in Halton has seen positive reductions, between 2007 and 2009 there has been a 45% reduction in this type of crime in Widnes and Runcorn town centres.

3.2.4 Mortality

- Halton & St Helens PCT has seen a steady decrease in the death rate for male alcohol attributable mortality since 2005.
- Halton & St Helens PCTs rate for female alcohol attributable mortality is the highest amongst its ONS cluster group and is significantly higher than the group average. This in itself is higher than the North West and England rates.

3.2.5 Service Response

- The lack of a consistent and across-the-board involvement of GPs in screening and brief interventions needs to be addressed.
- The level of detail available on services did not allow an assessment of service delivery mechanisms against evidence-based practice.
- Robust performance monitoring, in particular outcomes of interventions, needs to be addressed.

3.3 12 Point Alcohol Harm Reduction Plan

The action plan has been drafted by the multi-agency Alcohol Partnership Commissioning Group and is aligned with the PCT Commissioning Strategic Plan and the Community Safety Joint Strategic Needs Assessment for Halton.

	Action for 2010/11	Theme
1	Ensure that we reach people with regular and consistent messages regarding alcohol related harms and desired behaviour changes - via press, social marketing and outreach initiatives - including work place initiatives.	Prevention
2	Extend and enhance the identification of alcohol harm in primary care and community settings (includes GP surgeries and provide brief advice where appropriate; otherwise known as Identification and Brief Advice (IBA).	Prevention
3	Influence change through advocacy and proactively support campaigns such as minimum pricing of alcohol and the labelling of alcoholic drinks.	Prevention

4	Ensure that information and resources are available support available to those may benefit from self help.	Prevention
5	Tackle alcohol related crime and disorder with a particular focus on policing the night time economy.	Enforcement
6	Enforcing licensing laws and raising standards in relation to legislative compliance within all licensed premises within the borough including the 'on-trade' (pubs and clubs) and the 'off-trade' (corner shops and supermarkets) and implementing cumulative impact policies.	Enforcement
7	Explore the link between alcohol misuse and offender behaviour and reduce the negative impact on community safety by providing appropriate health interventions to people within the criminal justice system.	Enforcement
8	Design and implement an integrated alcohol treatment system for adults with a single point of access.	Treatment
9	Review and expand alcohol interventions in acute settings and appoint an alcohol health worker.	Treatment
10	Develop 'recovery based' treatment options throughout the boroughs which include abstinence based structured day care.	Treatment
11	Develop and implement a Substance Misuse Awareness Strategy (including alcohol awareness) for schools, colleges and youth clubs to ensure that messages to young people are coordinated, consistent and appropriate.	Children and Young Persons
12	Develop and implement an action plan to identify and support those children who are most at risk of alcohol/substance misuse related harm, via risks presenting from family members who are misusing alcohol or through their own behaviours and/or personal circumstances.	Children and Young Persons

4.0 POLICY IMPLICATIONS

4.1 The Actions for 2010/11 give a strategic approach to alcohol misuse in Halton.

5.0 FINANCIAL IMPLICATIONS

5.1 The Alcohol Harm Reduction Team is externally funded. However, given the current vulnerability of all external funding, it has to be accepted that the Actions for 2010/11 can only be implemented as long as the external funding remains in place.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

These are identified within the report and part of the presentation.

6.2 Employment, Learning and Skills in Halton

None identified.

6.3 A Healthy Halton

These are identified within the report and are part of the presentation.

6.4 A Safer Halton

These are identified within the report and are part of the presentation.

6.5 Halton's Urban Renewal

None identified.

7.0 RISK ANALYSIS

7.1 It is imperative that the Council and its partners address the issue of alcohol misuse to avoid major ill health and social problems.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 Alcohol abuse can lead to significant health and family problems and it is imperative that adequate support and advice is available to all members of the community.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None.

REPORT TO: Safer – Policy and Performance Board

DATE: 21st September 2010

REPORTING OFFICER: Strategic Director – Environment & Economy

SUBJECT: Regulation of Health and Safety at Work in Halton- Annual Plan

WARDS: Borough Wide

1.0 PURPOSE OF THE REPORT

- 1.1 To invite the Board to comment on Health and Safety Plan for the forthcoming year
- 1.2 To provide the Board with an update on the work of the Health and Safety Enforcement team in the Environment and Regulatory Services Department.

2.0 RECOMMENDATION: That

- (1) the report and attached plan be noted and that any comments the Board wish to make, be reported to the Councils Executive Board Sub Committee when they consider the Plan for endorsement.

3.0 SUPPORTING INFORMATION

3.1 Background

3.1.1 The Health and Safety service which sits within the Environment and Regulatory Services Department is responsible for enforcing health and safety law in approximately 1600 business premises in the Borough. This is a statutory function with enforcement responsibility shared between the authority and the Health and Safety Executive. Local authorities are responsible for catering, leisure, service sector, warehousing and distribution whilst the Health and Safety Executive are responsible for manufacturing, construction and specialist areas such as railways.

The overall objective of the service is to ensure compliance with Health and Safety law and thereby prevent deaths, accidents and ill health associated with workplaces.

Health and Safety law places a duty on employers to protect the health and safety of employees and members of the public who may be affected by their activities. In recent years the concept of “health and safety” has suffered from a poor public image due to a perception of disproportionate and overzealous application of health and safety rules. However, many of these health and safety “rules” are a product of civil claims for negligence which are often

settled by insurance companies out of court. It is often insurance companies who effectively impose rules by refusing to insure certain activities that could result in litigation. Criminal Health and Safety laws are all subject to the test of what is reasonably practicable in a given situation. Therefore when properly applied by enforcement officers, health and safety requirements should be reasonable and proportionate to the risk. Many of the so called health and safety "rules" that have become common place as a result of the claims industry do not reflect what is actually required by law.

3.1.2 The service uses a variety of interventions to secure compliance with Health and Safety law. The most common interventions are targeted inspections, accident investigations and advisory visits. Each year the health and safety service carries out approximately 270 interventions. Some higher risk businesses will receive more than one intervention.

3.2 Statutory service standard

Section 18 of the Health and Safety at Work etc Act places a duty on local authorities to provide "adequate arrangements for enforcement". The section 18 standard launched in 2008 sets out the arrangements local authorities and the HSE must put in place in order to fulfil this obligation. The Authority must be compliant with this standard by March 2011.

The standard contains the following key requirements for local authorities;

- set out their commitment, priorities and planned interventions.
- put into place the capacity, management infrastructure, performance management and information systems required to deliver an effective service and to comply with their statutory duties.
- operate systems to train, appoint, authorise, monitor, and maintain a competent inspectorate.
- use interventions, including enforcement action, in accordance with their enforcement policy and within the principles of proportionality, accountability, consistency, transparency and targeting.
- work within their own organisation, in partnership with other Enforcement Authorities and with other regulators and stakeholders to make best use of joint resources and to maximize their impact on local, regional and national priorities.
- actively contribute to liaison, policy and governance arrangements at a local, regional and national level.
- promote sensible risk management

During 2010-2011 the service will be reviewed against the standard. Policies and Procedures will be reviewed and drafted to ensure the service is compliant with the standard. The purpose of the attached plan is to set out how the authority will deliver its health and safety service in a manner that satisfies the requirements of the standard.

A key requirement of the standard is that senior managers and political / policy decision makers are committed to providing adequate protection for all members of the public who may be affected by inadequate management of risk by local businesses. The purpose of this report is to provide the Board with an opportunity to comment on this matter before the Plan is considered by the Councils Executive.

3.3 Priority planning of inspections

The Authority is responsible for health and safety enforcement in 1600+ premises. With finite resources we have to ensure inspections are targeted at those premises that create the highest risk. The health and safety service team therefore follow statutory priority planning guidance issued by the Health and Safety Executive. Following a routine inspection a premises will be risk rated by the enforcement officer. This rating will determine the frequency of future inspections. High risk premises are inspected every year.

In April 2010 there were fundamental changes to the priority planning guidance. Full details are contained in the attached service plan. Under the previous scheme, consideration was given to both the inherent risk of certain business types and the standard of compliance. However, under the new scheme the risk rating is based entirely on compliance. There are 4 components to this scheme; Health, Safety, Welfare and Management. The risk score is based on the highest score achieved for each of the 4 elements. Therefore a business now only needs to fail in one area to be considered High risk. It is anticipated that when the new scheme is applied it will significantly increase the number of high risk premises the authority will need to inspect.

It is not possible to predict at this stage the precise change in the risk profile of premises in the borough. Under the old scheme the authority had 42 high risk premises. However, the service team have already identified that many catering premises that were previously considered medium risk are now frequently being rated as high risk due to poor standards of gas and electrical safety.

3.4 Focus on local health concerns

The medium term strategic aim of the authority's health and safety team is to ensure its resources are focussed on some of the boroughs key health concerns e.g. early deaths from cancer and respiratory ill health. Although lifestyle factors such as smoking and diet will have a considerable impact on these illnesses, conditions in the workplace will also make a significant

contribution. However, responsibility for many of the businesses that pose the greatest risk of exposure to chemicals and pollutants would normally fall to the Health and Safety Executive. It is unlikely the Health and Safety Executive will be in a position to intervene in all these businesses. This is due to limited resources and the fact the structure of the HSE means priorities are set at a national and regional level. The service team have identified an opportunity to influence health conditions in these workplaces by working in collaboration with the Health and Safety Executive at a local level. This will involve the Council assuming enforcement responsibility for certain premises that would normally be the responsibility of the HSE. This can be achieved by a statutory transfer of the premises under the Health and Safety (Enforcing Authority) Regulations or by an informal transfer using flexible warrants to enable the team to act in these premises.

The Council have approached the HSE with a proposal for all motor vehicle repair and body shops to be transferred to the local authority. Following initial joint inspections where local authority officers will shadow HSE inspectors, the Council will eventually assume responsibility for carrying out these inspections.

The rationale for selecting these premises is as follows;

- The premises are small businesses without access to in house expertise
- Being a small businesses they are unlikely to be inspected by a HSE officer
- The premises will be using chemicals such as spray paints that can give rise to occupational diseases such as respiratory illness and cancers.
- There is a perception that within this sector controls are likely to be poor
- The Council is already responsible for some lower risk motor vehicle repair businesses such as tyre and exhaust premises. Officers therefore already have some expertise in this field

3.5 Advice and Guidance

The Council is committed to providing businesses, particularly small and medium sized enterprises with comprehensive advice and guidance to help them comply with their legal obligations. Whilst formal enforcement action will be considered for serious or persistent offences, the team aim to secure compliance through advice and education.

3.6 Complaints

The authority will respond to all complaints regarding health and safety standards in workplaces. Complaints provide useful intelligence and enable resources to be focussed on areas of highest risk. As discussed above

resources do not permit the authority to inspect all premises in the area. Therefore complaints highlight premises where standards may have deteriorated or the nature of risk changed.

3.7 Accident investigation and work related deaths

All employers are required by law to report certain injuries, diseases and dangerous occurrences that occur at work. It is acknowledged that some incidents will be genuinely unlucky or unfortunate events that the employer took all reasonable precautions to prevent. However, where an accident is due to a failure by the employer to implement the necessary safeguards, officers will issue advice or in serious cases consider enforcement action to prevent a recurrence.

Although rare, particularly in the local authority enforced sector, the health and safety team are responsible for investigating work related deaths. There have been two fatal incidents in Halton in the last 7 years. These both involved warehouse and distribution activities. There is a national protocol on work related deaths which require the local authority to liaise with the police to determine the most appropriate authority to investigate. In most cases this will be a dual investigation until such time as the police are satisfied that the case is not one of manslaughter. The local authority will then take control of the investigation. The authority has a dual responsibility to investigate criminal offences under the health and safety at work act and to provide a report to the coroner and evidence at the subsequent inquest.

3.8 Enforcement of the Smoke Free provisions of the Health Act 2006

The Council is responsible for enforcing the smoke free provisions of the Health Act 2006. These provisions prohibit smoking in public places. Originally the authority received funding from the department of health for this work which allowed for the employment of two dedicated smoke free enforcement officers. However, this funding is no longer available and the contracts for the dedicated posts have now ended. Smoke free enforcement has now been assimilated into other inspection work.

The enforcement of the smoke free provisions complements the initiatives of the PCT and Department of Health to discourage smoking and protect people from the health risks caused by passive smoking. The Council has a track record of supporting the PCT to discourage the take up of smoking by young people. This involves initiatives to de-normalise smoking by discouraging parents from smoking at home, in cars or around parks and playgrounds. These initiatives will also protect children from respiratory ill health caused by passive smoking. The Council also help refer the public to the PCT's smoking cessation services. These initiatives have seen some success in recent years with a significant increase in the number people quitting smoking. Last year over 1000 people per 100,000 of the population reported having quit smoking for over 4 weeks after attending smoking cessation sessions. This rate is in the top 20% of authorities nationwide.

3.9 Special projects 2010 – 2011

3.9.1 Tattooing and Body piercing

The Council is responsible for enforcing the by-laws relating to Tattooing and Body piercing and the Tattooing of minors act 1969. The by-laws require all businesses engaged in the practice of Tattooing and body piercing to be licensed by the authority and comply with hygiene standards. The purpose of these standards is to prevent the spread of bloodborne infections in particular Hepatitis and HIV.

There has been a considerable increase in the interest in tattooing and body art in recent years particularly amongst young people. In response to this demand the number of licensed Tattoo parlours has increased. Officers are also currently investigating the activities of unlicensed home tattooists. Last year equipment was seized from one individual. A further individual is under investigation following a number of complaints from the public. There is a considerable health risk associated with unlicensed tattooing as no inspection has been undertaken to ensure that the premises complies with hygiene standards.

The Authority is also responsible for enforcing the Tattooing of Minors act. The team are currently investigating two complaints from parents involving the tattooing of under age girls.

In addition to enforcement activity the team are to launch a health promotion campaign. This will have the following key objectives;

- Encourage young people to wait until they are 18 before considering a Tattoo
- Warn the public of the health risks associated with unlicensed operators
- Encourage the public to report illegal activity

3.9.2 Inspection of children's day nurseries.

During 2010-2011 the team intend to inspect all 100 of the boroughs children's day nurseries. Although other agencies such as Ofsted and the authority's Children and Young People Directorate oversee the welfare of children in these nurseries, these inspections will focus on the physical safety of the environment. The rationale for this project is;

- There has been a considerable increase in day nursery facilities in recent years and many of these premises have not previously been risk rated for health and safety
- Children are a vulnerable group
- There is an expectation amongst parents that these premises will have been inspected and are safe.

Officers have been working closely with the authority's Early Years team. Workshops have been held for nursery owners to advise them of the basic health and safety requirements. To increase efficiency the team are going to pilot the use of auto text reports. However, where necessary reports will be tailored to individual circumstances.

3.9.3 Preparation for the Sunbeds (Regulation) Act 2010

The Sunbeds (Regulation) Act 2010 places a duty on sunbed operators to prevent the use of the Sunbeds by Children (persons under 18). This act comes into force on the 8th April 2011. The Act also provides powers for regulations to be made setting out further duties relating to the sale and hire of equipment, provision of information and protective eyewear. Whilst Halton's levels of skin cancer are in keeping with the national and regional average, the national picture is one of rising incidents of skin cancer. Rates of melanoma have increased since the 1970's at a rate more than any other cancer. Melanoma is also the most frequently diagnosed cancer in young people aged 15-34. The main cause of skin cancer is excessive exposure to UV light either from the sun or from UV tanning equipment.

During 2010-2011 the team will identify all premises with tanning equipment. All operators will receive written information advising them of the key provisions of the act. This will be backed up with a health promotion campaign to advise the public of the new law and also the risk of excessive exposure to UV radiation.

3.10 Formal Enforcement Action

In accordance with established enforcement policy the team officers always endeavour to use informal means such as advice and education to secure compliance. However, where there are serious breaches of Health and Safety law or incidences of persistent non compliance the team will use a range of enforcement powers.

In 2009-2010 the team instigated the following actions;

Written Warnings	93
Improvement Notice	9
Prohibition Notice	5
Simple Caution	0
Prosecution	1

In addition since the 1st April 2010 the authority has prosecuted two further businesses for Health and Safety offences. In the first case a furniture warehouse was fined a total of £5,165 for failing to comply with an improvement notice to secure unsafe racking. In the second case a chain of Greeting Cards shops was fined a total of £17,515 for health and safety offences at both the Widnes and Runcorn branch. This followed an injury to

an employ and the service of two improvement notices. The company had previously been convicted for similar offences in other local authority areas.

Two further prosecutions pending. This does represent an increase in enforcement activity over recent years. Whilst it is not possible to draw any firm conclusions from this increase it may be that businesses are finding it difficult to trade both profitably and compliantly in the current economic climate.

4.0 POLICY IMPLICATIONS

4.1 The service is a statutory function, which the authority is required to provide. Guidance issued under section 18 of the Health and Safety at Work Act sets out a statutory standard which the authority must comply with by April 2011.

4.2 The revised health and safety risk rating scheme is likely to increase the number of premises that require an annual health and safety inspection. Therefore the service will need to be flexible in the way it employs its professional resource to ensure resources are deployed to the areas of highest risk.

4.3 It is intended to work in partnership with the HSE to ensure that those businesses that have the most potential to influence local health concerns are subject to inspection. However this will mean the statutory transfer of premises from the HSE to the Authority. Whilst this will mean the Authority assuming responsibility for additional premises it will provide the Authority with an opportunity to intervene in those premises that have greater potential to influence the boroughs health concerns. The Boards comments on this proposal would be welcome.

5 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

5.1 Children and Young People in Halton

The health and safety of children in the borough is protected through the enforcement of the taboing of minors act, the requirements of the Sunbed (Regulations) Act 2010 and the day nurseries inspection project.

5.2 Employment, Learning and Skills in Halton

The Service is committed to providing comprehensive advice and guidance to businesses to help them comply with their legal obligations.

5.3 A Healthy Halton

There is a considerable overlap between the contribution this service makes to both the Healthy and Safer Halton priorities. However, the collaborative working with the HSE to target high risk premises will impact on the boroughs

public health concerns including cancer and respiratory ill health. Public Health is also protected through the enforcement of the bylaws relating to tattooing and the new Sunbed Act.

The ongoing work to enforce the smokefree provisions of the Health Act complement the work of the local PCT by discouraging smoking and reducing the health effects of passive smoking.

5.4 A Safer Halton

The activities undertaken safeguards the public by ensuring workplaces comply with the requirements of Health and Safety law.

5.5 Halton's Urban Renewal

Advice to ensure that new developments considered protect health and safety during the buildings future use is provided.

6.0 RISK ANALYSIS

There is not considered to be any significant risk associated with the proposals in this report. However, it should be noted that the service is a statutory service that the authority is under an obligation to provide. This report has identified opportunities to address some of potential occupational factors influencing the boroughs health concerns through working in partnership with the HSE.

7.0 EQUALITY AND DIVERSITY ISSUES

7.1 The enforcement of Health and Safety legislation is not intended to have either a positive or negative impact upon equality and diversity The service invites and seeks feedback on its regulatory activities and would respond to any suggestion of differential impact. The regulatory service aims to be consistent and even handed in all regards and as such the service is not applied differently to any particular group. The enforcement policies have if applied correctly and monitored should not have nor are intended to have any differential effects.

7.2 Many proprietors of food businesses in the borough do not speak English as a first language. Where necessary the service employs interpreters and makes publications available in alternative languages to ensure the service communicates effectively with all ethnic groups.

8.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

There are no relevant papers within the meaning of the act.

Halton Borough Council

Environment and Economy Directorate

Environmental and Regulatory Services Department



Health and Safety Plan 2010-2011

1.0 Introduction

1.1 This plan details the way in which Halton Borough Council will meet its obligations and fulfil its regulatory role as a statutory enforcing authority for Health and Safety law. This plan will set out how the service will be managed to comply with the statutory service standard implemented by S18 of the Health and Safety at Work Act 1974.

1.2 This plan will also set out how the team will contribute to wider public health initiatives in particular smoking cessation and infection control associated with Tooting and body piercing.

1.3 The plan will set out how the regulatory, educational and promotional activities of the team will contribute towards Halton's corporate plan, The Environmental and Regulatory Services departmental service plan and National Indicators within the Government's comprehensive area assessment.

1.4 Enforcement responsibility for Health and Safety regulation falls to either the Health and Safety Executive (HSE) or to the Local authority in which a business is located. The Health and Safety (Enforcing Authority) Regulations 1998 set out which agency is responsible for which premises. This is defined by broad categories of business type. In summary, retail, wholesale and consumer service operations fall to the Local Authority whilst construction, manufacturing and other heavy industry falls to the HSE.

2.0 Service aims and objectives

2.1 The principal objective of the health and safety service is to ensure businesses and employers fulfil their duty to protect the health, safety and welfare of employees and members of the public. This is achieved through effective health promotion, education and enforcement of occupational Health and Safety legislation.

2.2 The medium to long term strategic aim of the team is to make a greater contribution to improvements in the boroughs priority health indicators, in particular incidents of respiratory ill health and early deaths due to cancer.

The local authority, along with local strategic partners, is responsible for improving the health, safety and wellbeing of the local community. Health improvements are monitored through the comprehensive area assessment and other local and national indicators.

Many of these incidents of ill health, including cancer and respiratory disease are influenced by the working environment. However, many of the higher risk workplaces that have the greatest potential influence on these illnesses are outside of local authority control and fall to the Health and Safety Executive for enforcement. Whilst the HSE is focussed on reducing incidents of occupational ill health at a national level, they are not as focussed or accountable for health indicators at a local level.

Whilst the current work of the service already prioritises high risk areas such as workplace transport and falls from height, the ability of the service to influence standards in relation to cancer and respiratory ill health is limited. Therefore collaborative working with the HSE is required at a local level to ensure the team can influence standards of health and safety in higher risk businesses. The service will seek extension of the flexible warrant scheme and statutory transfers of enforcement responsibility to enable action to be taken in HSE enforced premises. This plan sets out projects that the team wish to pursue in collaboration with the HSE to fulfil this objective.

2.3 The overall aims detailed above will be achieved through the following key objectives;

- Ensuring all businesses and employers comply with health and safety law. This will be achieved through a combination of risk based enforcement interventions, health promotion and comprehensive advice and guidance.
- Implement the Statutory S18 standard relating to health and safety regulatory services.
- Investigate complaints from members of the public concerning standards of workplace health and safety.
- Respond to requests for advice from both employers and employees. The service is committed to providing a comprehensive advice service to assist businesses comply with the law.
- In collaboration with key partners, develop and contribute to initiatives that improve public health, such as smoking cessation, home accident prevention and awareness of the risks posed by unlicensed tattooists.
- Investigate statutory notifications of accidents and take appropriate remedial action.
- Maintain the statutory register of cooling towers and evaporative condensers to assist with the management and control of Legionnaires disease.
- Promote and enforce the by laws in relation to Tattooing, body piercing and acupuncture.
- Assist and co-operate with other regulatory services both internal and external to ensure public protection through efficient and effective

enforcement of legislation relating to health, safety and the environment.

2.4 Links to corporate strategic priorities

The table below summarises how the activities of the health and safety service contribute to Halton council's corporate plan.

Corporate plan priority and area of focus	Health and Safety service activity
A Healthy Halton Area of focus 5 A Safer Halton	Targeted enforcement of Health and Safety law to manage factors in the working environment that are detrimental to health and safety.
A Healthy Halton Area of focus 3	In partnership with the Primary Care Trust actively contribute to initiatives that help people to quit smoking, reduce the incidents of young people taking up smoking and protect children from passive smoking.
A Healthy Halton Area of focus 5	Ensure the public are protected from the detrimental health effects of passive smoking through the effective targeted enforcement of the Smoke Free provisions in the Health Act 2006.
Children and young people in Halton Area of focus 19 A Healthy Halton Area of Focus 5 A Safer Halton	In partnership with the Police, effective enforcement of the law to ensure adults and young people are protected from the risk of injury and infection from unlicensed or sub-standard Tattooists.
Halton's urban renewal Safer Halton	Contribute to the maintenance of safe town centres and public spaces through the effective application of Health and Safety law in relation to business premises.
Employment, Learning and Skills in Halton	Provide comprehensive advice and guidance to new and existing businesses to help them operate a compliant and sustainable business. This includes signposting businesses to the services of other organisations such as Business Link.
Safer Halton	In partnership with Police, licensing

	and other HBC departments ensure public safety in relation to large scale public events in the borough including the Creamfields festival.
Urban Renewal A Safer Halton A Healthy Halton	In partnership with other internal council services and the Safety Executive ensure public health and safety is taken into consideration during the development of new and existing premises. In particular the provision of safe and sustainable infrastructure and preventing the release of asbestos fibres.
Employment learning and skills in Halton Area of focus 21	Provide informal training to college students and other audiences to provide awareness of the importance of health and safety to business success.

3.0 Background

3.1 Authority Profile

The borough of Halton is a largely urban area of approximately 119,000 people and is situated in the North West of Cheshire on either side of the River Mersey 10 miles upstream from Liverpool. It is made up of the towns of Runcorn and Widnes and the smaller surrounding parishes of Hale, Preston Brook, Moore and Daresbury.

Halton became a unitary authority in 1998 with responsibility for all local government services including those previously operated by Cheshire County Council. Although geographically within the county of Cheshire, Halton shares many of the social and economic challenges faced by its urban neighbours on Merseyside. Halton is a constituent authority of the Liverpool city region and is represented at all levels on Greater Merseyside strategic and liaison groups.

Halton is one of the more deprived districts in England. Using the Governments indicator of Multiple Deprivation, Halton is ranked the 30th most deprived district in England (out of 354), although this has improved from a position of 21st in 2004. Halton's community strategy states "Statistics show the health standards in Halton are amongst the worst in the country". Halton has a rate of early deaths from cancer significantly higher than the national average at 153.1 per 100,000. Halton also has high rates of deaths caused by smoking; these levels at 289.7 per 100,000 are significantly higher than the regional and national average. This is consistent with the higher than average incidences of Chronic Obstructive Pulmonary Disease in the borough – a generic term for conditions such as emphysema and bronchitis. Such conditions are usually caused by smoking but cases can also be caused by

polluted working conditions. A significantly higher number of women smoke in pregnancy than the national average.

Halton has 3,655 registered businesses across a variety of industrial sectors. A third of businesses fall into three industry groups; Construction 11.4%, Retail 11.2% and Professional, scientific and technical services 10.9%. However due to its location as a key crossing over the Mersey and its links with the North West's motorway network, Halton has an above average number of business in the Transport and Distribution sector. Due to the inherent risks associated with workplace transport these businesses have been considered high risk as part of the authority's inspection programme.

58% of businesses in Halton are considered small employing just 1-4 employees. These businesses are less likely to have access to technical knowledge and support. The health and safety team are committed to providing small and medium sized businesses with advice and support to help them comply with the law.

3.2 Organisational Structure

Table 1 Structure of Halton Borough Council expanded to show Environment and Economy Directorate.

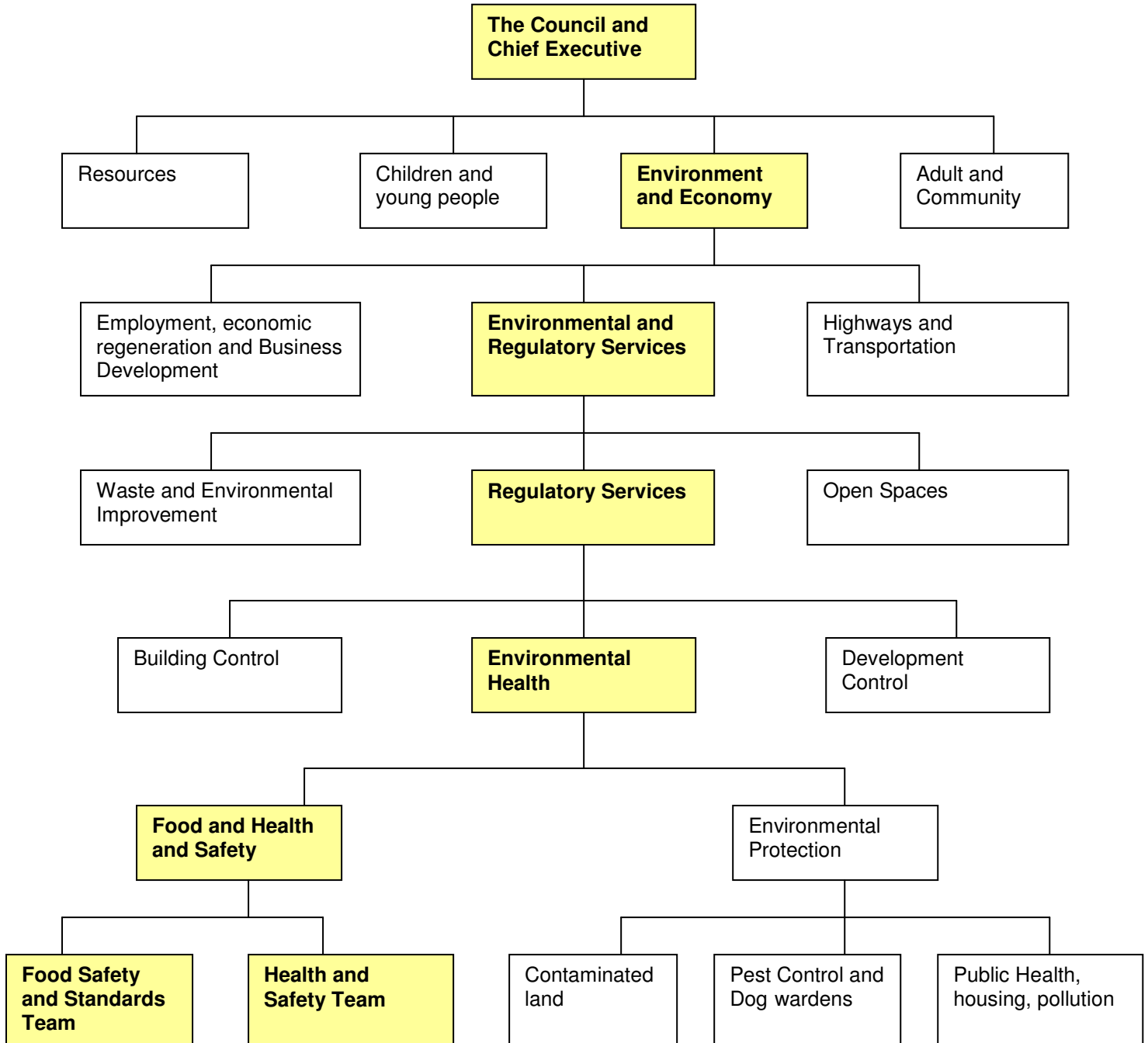
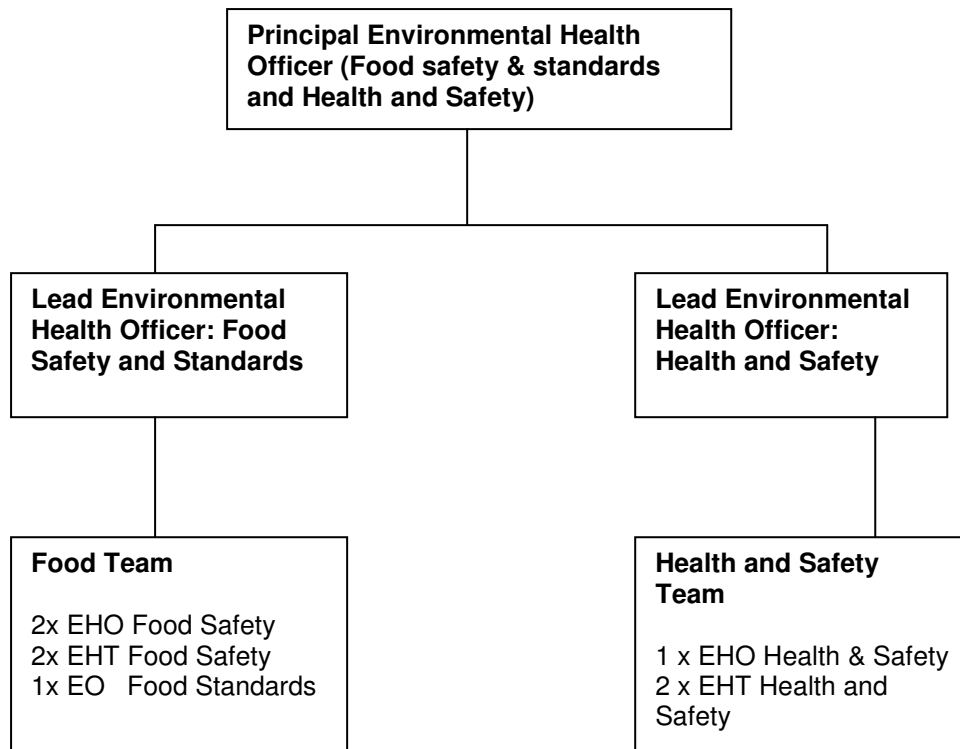


Table 2 Structure of Food and Health & Safety Team

3.3 Working arrangements and scope of service

Whilst the structures detailed in tables 1 and 2 suggest a rigid specialist structure, there is considerable functional flexibility both within the Food and Health & Safety team, and between the Food and Health & Safety Team and the Environmental Protection team to ensure the demands placed on the Environmental Health Division are met.

The Health and Safety team enforce and provide advice and guidance on the law relating to Health and Safety at work. As stated in the background above this function is shared with the Health and Safety Executive with each agency having responsibility for different categories of premises. Halton intends to collaborate with the HSE to ensure to ensure the team can focus on issues of local concern. Although the majority of health and safety enforcement work is undertaken by the health and safety team, the food safety team also act as “eyes and ears” to report any matters of concern encountered during routine food visits. Also suitably qualified environmental health officers in the food team are authorised to take appropriate action under Health and Safety Legislation when necessary.

4.0 Resources

This section will detail the resources required to deliver the service. These will include the specialist and statutory resources the authority is required to provide.

4.1 Managerial responsibility

4.1.1 Management

The Regulatory Services Division, which is managed by Yeemay Sung sits within the Environmental and Regulatory Services Department. The Operational Director of the Department has ultimate responsibility for the delivery of Regulatory Services in the Borough. The delivery of the Health and Safety function including compliance with the Section 18 standard and meeting operational objectives rests with the Principal Environmental Health Officer – Stephen Burrows. Jeanette Pope – Lead Environmental Health Officer – Health and Safety is responsible for day to day management of the health & safety team to ensure the key functions of the service are delivered.

4.1.2 Accountability

Cllr Nelson is the Executive Board portfolio holder for Environmental Sustainability, which includes this aspect of environmental health. The Executive Board is the Council's main decision making body. In addition the work of the Health and Safety team is scrutinised by the Safer Halton Policy and Performance Board chaired by Cllr Sean Osborne. To demonstrate the authority's commitment to the Health and Safety Regulatory Service and Compliance with the Section 18 standard the Annual Plan will be presented for comment to the Policy and Performance Board and subsequently to the Council's Executive for endorsement.

4.2 Specialist Services

4.2.1 Technical

In addition to the in-house expertise of the team, technical assistance can be obtained from within specialist units of the Health and Executive and the Health and Safety Laboratory Service.

The team subscribe to online technical indices to ensure up to date access to legislation and technical guidance.

4.2.2 Proper officers

The authority is required to appoint proper officers to act on behalf of the authority in relation to the Public Health (Control of Infectious Diseases) Act 1984 and associated regulations. Proper officers may be required to exercise powers in relation to equipment or premises that pose a risk of infection, for example in the event of a legionella outbreak or a sub standard Tattooist. The authority has a procedure to appoint officers from the Cheshire and Merseyside Health Protection Unit for this purpose.

4.2.3 Microbiological Examination

The authority has a formal agreement in place with the Health Protection Agency to provide microbiological examination services. The team utilise this service for the analysis of water for recreational or environmental hazards e.g. legionella sampling or swimming pool testing.

4.2.4 Shared consultancy arrangement

Through the Cheshire and Merseyside Liaison Group the authority has retained the services of an external consultant to provide advice and expertise in relation to the control of legionnaires disease including environmental sampling.

4.3 Staffing resource

Position	FTE
Principal Environmental Health Officer	0.5
Lead Environmental Health Officer	1
Environmental Health Officer	1
Environmental Health Technician (Health and Safety)	2

The staffing resource of the team has been reduced over the last 12 months. As a consequence the team will not be able to carry out the same volume of proactive inspection work during the forthcoming year. The team intends to focus resources on areas of highest risk and the boroughs key health priorities. However at present it is not possible to assess whether the staffing resource will be sufficient for the authority to fulfil its obligations with respect to programmed inspections. This is due to the implementation of a new national health and safety risk rating scheme. The implications of this scheme will be discussed in more detail in section 5.1.2, however, early indications are that considerably more premises are likely to become high risk and require a more frequent intervention once they have been rated under the new scheme.

4.4 Financial Resources

It is difficult to disaggregate the actual cost of the health and safety service from that of the other duties performed by the Food and Health and Safety team. The total budget for the Food and Health and Safety team is £496,030. The majority of this is accounted for by staffing costs and infrastructure such as buildings and IT. The detailed allocation of financial resources to the unit is contained in the overall departmental plan and the annual Environment and Economy Directorate budget.

The health and safety service has access to a designated “hired and contracted services” account to procure goods and services. In particular this covers the costs of equipment and specialist officer training. For financial year 2010-2011 the budget is £3,850.

4.5 IT Resources

The service utilises APP Authority software to record day to day activity, manage data and report activity. It is essential the service has access to such a system to record and retrieve information at the level of detail required and produce performance reports and work programmes. This software allows the authority to provide the required annual LAE1 Monitoring form to the Health and Safety Executive.

The services of the authorities IT department are required to carry out all upgrades.

Staff in the division require access to individual PC's in order to enter data on activities onto the Flare database and produce written reports. The department now relies on electronic based technical information; very little paper based information is kept. Therefore each team member requires access to the internet to access this information. All staff on the health and safety team receive all communications from the HSE and HELA and other relevant bodies by email. These are generally auto-forwarded by rules. Staff therefore require access to email.

The team currently has access to technical indices via the info 4 local gov subscription website. This is currently centrally funded. It is essential the team have access to technical information to ensure that advice and enforcement action is credible and based on up to date law and standards. Therefore the team may need to find funding within the existing budget to maintain this service.

5.0 Service Delivery

5.1 External Influences

The section details the latest external developments that will influence the Health and Safety service during the forthcoming year.

5.1.1 Section 18 Standard

Section 18 of the Health and Safety at Work etc Act places a duty on local authorities to provide "adequate arrangements for enforcement". The section 18 standard launched in 2008 sets out the arrangements local authorities and the HSE must put in place in order to fulfil this obligation. The authority is obliged to be compliant with this standard by March 2011.

The standard contains the following key requirements for local authorities;

- set out their commitment, priorities and planned interventions.
- put into place the capacity, management infrastructure, performance management and information systems required to deliver an effective service and to comply with their statutory duties.

- operate systems to train, appoint, authorise, monitor, and maintain a competent inspectorate.
- use interventions, including enforcement action, in accordance with their enforcement policy and within the principles of proportionality, accountability, consistency, transparency and targeting.
- work within their own organisation, in partnership with other Enforcement Authorities and with other regulators and stakeholders to make best use of joint resources and to maximize their impact on local, regional and national priorities.
- actively contribute to liaison, policy and governance arrangements at a local, regional and national level.
- promote sensible risk management

The process at this stage is principally a management task to review current working arrangements against the standard and implement or amend policy and procedures to ensure compliance. During the course of 2010-2011 staff will be briefed and trained on any new working arrangements to ensure the requirements of the standard are implemented during day to day operations.

5.1.2 Revised Priority Planning / Risk Rating Scheme

Under Section 18 of the Health and Safety at Work Act new guidance has been issued to local authorities which provides for a revised risk rating scheme. Local authorities are required to adopt this scheme to risk rate premises following inspections. This rating will be used as the basis for producing the annual proactive inspection programme. This scheme took effect on the 1st April 2010. However, 2010 -2011 is considered a transitional year to allow local authorities to make the required changes.

The main change is that the new risk scheme is based entirely on compliance over 4 key areas; confidence in management, safety performance, health performance and welfare. A score of between 1 to 6 is applied for each area based on descriptors set out in the guidance. The highest single score obtained across all 4 parameters is used to calculate the overall risk factor. Therefore a business that fails on one parameter would become a high risk business. Previously the scheme also considered inherent risk factors within a business and scores were accumulative across all the risk parameters. There is also a reduction in the number of risk bands. Table 1 shows the correlation between the old and new risk bands. Table 2 sets out the new inspection frequencies for each risk band.

Table 1

Old risk rating category	New Category	Description
A	A	Highest Risk
B1	B1	Medium Risk -1
B2 & B3	B2	Medium Risk -2
B4 & C	C	Lowest Risk

During the transition period all premises will be transferred directly from the old to the new category based on the conversion in table 1 above. These premises will then be subject to an intervention at a frequency based on this rating. However at this intervention the new scoring scheme will be used to provide a new up to date risk rating. It is envisaged many premises that were previously high risk by virtue of inherent risk factors will become lower risk under the new scheme. It is also envisaged that considerably more premises that were considered lower risk will now fall into a high risk category due to poor levels of compliance. It is considered likely that there will be a significant increase in the number of retail and catering type premises that become due for more frequent interventions due to concerns over electrics, gas safety or manual handling.

The team intends to use local knowledge to identify categories of business presently rated medium or low risk that should be considered a higher priority for inspection based on the likelihood of poor compliance. Service plans for subsequent years will set out which categories of premises have been targeted for intervention and the rationale behind this selection.

Table 2 – Frequency of Interventions

Description	New Category	Rating Score	Intervention Frequency
Highest Risk	A	Score of 5 or 6 on any risk	Inspection not less than once per year
	B1	Score of 4 on any risk	Premises for inspection once every 18 months.
	B2	Score of 3 on any risk	Unless included on inspection programme premises subject to intervention at recommended frequency of 3 years.
Lowest Risk	C	Score no greater than 2	Non inspection / intervention methods – suggested review no less than 20 years.

5.1.2.1 Implications for staffing resource

The current staffing resource of the team was adequate to fulfil the high risk inspection programme i.e. A and B1 premises based on the old scoring system. However the loss of one full time environmental health technician has reduced the capacity of the team to undertake proactive project work aimed at local and national priorities. It is envisaged that if more premises become due

for inspection using the new risk rating, the current staffing regime may no longer be adequate to carry out the required number of programmed inspections.

There is also an expectation within the new scheme that A rated premises will be subject to enforcement action to reduce the risk rating. This is likely to involve more intense action and repeated visits to individual businesses to bring about compliance.

It is highly unlikely given the economic circumstances facing local government that additional resources could be secured to fulfil this additional demand. Therefore the team will need to target resources at the areas of highest risk and local priorities. Consideration will also be given to making more flexible use of resources across the food and health and safety teams.

5.1.3 Flexible Warrant Scheme / Regulation 5 Transfers – a strategic opportunity.

During 2009-2010 The Health and Safety Executive and Local Authorities in Cheshire and Merseyside launched the Flexible Warrant initiative to enable officers in predetermined circumstances to exercise certain enforcement powers in premises that would otherwise be outside their jurisdiction. For example a local authority may be permitted to take action in premises that would normally fall to HSE for enforcement. At present the scheme is limited to regional projects put forward by the Health and Safety Executive's Partnership Unit. In 2009-2010 a project concentrated on aerial and satellite installation to coincide with the switchover to digital TV reception.

Regulation 5 of the Health and Safety (Enforcing Authority) Regulations 1998 provides a mechanism for enforcement responsibility to be legally transferred from the HSE to local authorities and vice versa. This would allow a local authority to legally intervene in premises that would normally be outside of their control.

The team have identified a strategic opportunity to use the flexible warrant scheme and regulation 5 transfers to intervene in premises that have a potential to influence the boroughs key health concerns. As discussed in the background to this plan, the borough has significant rates of early onset cancer and poor standards of respiratory health. There are many potential occupational and environmental influences on these health conditions. These include issues such as the disturbance of asbestos fibres during building work and occupational exposure to chemicals in the workplace.

Many of the workplaces concerned are the responsibility of the Health and Safety Executive; however, they are unlikely to be a priority for intervention. Therefore in 2010-2011 the team will propose 2 projects detailed in section 5.2 below to intervene in premises that fall to the HSE for enforcement but have a significant potential impact on local health concerns.

Regulation 5 transfer of activities is the preferred option as the authority will assume the full range of enforcement powers. Flexible warrants do not permit officers to take a full range of enforcement powers. Issues of concern would need to be referred to the HSE for enforcement.

5.1.4 North West Partnership plan and Regional work programme

The Health and Safety Executive's Partnership group have proposed a number of projects that local authorities and the HSE should jointly work on to tackle issues of regional and national concern. In addition the Cheshire and Merseyside health and safety liaison group have proposed a work programme to address local concerns. These initiatives are detailed below. The health and safety team will be unable to fully contribute to all projects due to the limited staff resource in the team. Priority will be given to those areas that the team can most effectively contribute to and that address local concerns.

- **Chemical use in small and medium sized enterprises**
- **Local exhaust ventilation**

The team intend to combine the two topics above proposed by the Health and Safety Executive to address the use of chemicals in motor vehicle repair businesses. This will also address potential occupational exposure to carcinogens that may contribute to the boroughs poor rates of cancer and respiratory ill health.

The details of the project are set out in section 5.8 below.

- **Safe use of balers and compactors**

The HSE are concerned about the safety standards of balers and compactors in the local authority enforced sector. The team intend to carry out enhanced surveillance of balers during routine inspections

- **Vehicle and Operator Services Agency notifications**

The Vehicle and Operator Services Agency are responsible for enforcing certain elements of road traffic law within the haulage industry. VOSA now have arrangements with the HSE to share information regarding unsafely loaded HGV trailers they identify during their inspections. Some of the businesses responsible for these trailers will be in the local authority enforced sector. This health and safety team will follow up any reports of unsafely loaded trailers. In 2004 the authority investigated a fatal accident involving a trailer that had been loaded unsafely. The team therefore is aware of the significant safety risk posed by poorly loaded trailers.

- **Hand Car Washes**

The Health and Safety Executive are concerned about potential poor safety standards within the hand car wash industry. In particular there are concerns about electrical safety, use of chemicals and poor welfare and toilet facilities.

There has been a considerable proliferation in these premises in the last 2 years. Whilst technically these premises fall to the HSE for enforcement it is unlikely they will routinely inspect these premises to address any concerns. The team intend to deal with these premises on a case by case basis. Where there are any local concerns regarding a particular premises we will liaise with the HSE and where necessary seek transfer of the premises to resolve local concerns.

5.1.5 Merseyside and Cheshire Liaison Group Business Plan

The Health and Safety Team is a member of the Merseyside and Cheshire Liaison Group. Each year the group set a business plan to address health and safety concerns on a regional basis. The business plan for 2010-2011 contains the following proposals;

Work Related violence – Robberies in the retail sector

The group intend to work in partnership with the police and crime prevention officers to reduce the risk of staff being harmed during robberies in the retail sector. The Health and Safety at work act will be used to improve procedures and infrastructure to ensure as far as reasonably practicable staff is protected from harm – particularly when working alone or in a sector at higher risk of robbery. Halton already has a good working relationship with the police and crime prevention service. Therefore this year we do not propose any special initiative. This work is now included as part of routine business and the team will respond as necessary to any referrals from the police and crime prevention officers.

Work related noise in the entertainment sector

The liaison group proposed to address the risk to employees in the entertainment sector e.g. bars and nightclubs where employees may be exposed to damaging levels of noise. With respect to this issue the team do not perceive there to be a particular concern in Halton. We also have concerns regarding the practicality of monitoring noise levels to establish the personal noise exposure of employees. Halton do not propose to take part in this project unless a specific complaint is received.

5.1.6 Sunbeds (Regulation) Act 2010

The sunbeds (Regulation) Act 2010 places a duty on sunbed operators to prevent the use of the sunbeds by Children (persons under 18). This act comes into force on the 8th April 2011. The Act also provides powers for regulations to be made setting out further duties relating to the sale and hire of equipment, provision of information and protective eyewear. Whilst Halton's levels of skin cancer are in keeping with the national and regional average, the national picture is one of rising incidents of skin cancer. Rates of melanoma have increased since the 1970's at a rate more than any other cancer. Melanoma is also the most frequently diagnosed cancer in young

people aged 15-34. The main cause of skin cancer is excessive exposure to UV light either from the sun or from UV tanning equipment.

5.2 Service delivery 2010-2011

Taking into account the external influences and additional local concerns the team propose to undertake the following key projects during 2010-2011. Some of these projects are dependent on securing the transfer of enforcement responsibility from the HSE. This is a process that is largely in the hands of the HSE's partnership unit. Therefore if this transfer is not forthcoming in a timely manner the team will have to consider alternative proposals. These alternative proposals are also detailed below.

5.2.1 High risk inspection programme

In accordance with the revised priority planning guidance the team intend to undertake all A and B1 inspections due during the forthcoming year. This will involve the following inspection numbers;

A	32
B1	12

The remaining premises profile is as follows

B2	459
C	925

Unrated	161
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It is not intended that premises in the B2 and C categories will receive a routine inspection during 2010-2011. However as discussed above these ratings are based on the previous rating scheme. If rated in accordance with the new rating scheme these premises may become high risk. Therefore during 2010-2011 this list of premises will be reviewed to identify premises that have the potential to be high risk for inclusion on the 2011-2012 work programme. In addition unrated premises have already been reviewed to identify premises that have the potential to be high risk – 9 such premises have been included on the high risk inspection programme for 2009-2010.

Premises in the B2, C and unrated category will receive an intervention if a complaint or accident notification is received concerning the company.

5.2.2 Accident notifications

The Reporting of Injuries Diseases and Dangerous Occurrences Regulations 1995 place a duty on employers to report certain injuries, diseases and dangerous occurrences that occur as a result of a work activity. These notifications are received via the national incident contact centre. The authority will observe the Incident Selection Criteria issued by the HSE Local Authority Circular 22/13. The following incidents will be investigated in all cases;

- Fatal accidents
- Major injuries
- Occupational diseases
- Where the incident is due to serious non-compliance
- Incidents likely to give rise to concern e.g. incidents involving vulnerable people or “near misses” where the potential consequences could have been a fatality or major injury.

Investigation or otherwise of all other accidents / incidents will be determined by the Lead Environmental Health Officer. In deciding not to investigate an incident a record will be made on the Flare database detailing the reasons behind this decision.

5.2.3 Investigation of complaints

The team will investigate all legitimate complaints received from members of the public / employees concerning standards of health and safety associated with workplaces.

Last year the team received and investigated 45 complaints from members of the public.

5.2.4 Advice and Guidance

The team are committed to providing a free comprehensive advice and guidance service for Small and Medium sized businesses. Guidance will be issued during routine inspections and following complaints and accident investigations. The team will also respond to requests for advice received direct from employers and businesses. Last year the team dealt with 88 requests for advice.

5.2.5 Register of Cooling Towers and Evaporative Condensers

The authority is required by law to maintain a record of all cooling towers and evaporative condensers in the borough. This record is maintained by the Health and Safety team. Cooling towers and evaporative condensers can, if not properly maintained, give rise to the conditions required for the spread of legionella bacteria the cause of Legionnaires disease. The register enables the authority to monitor such equipment in premises under its control and to quickly identify potential sources in the event of an outbreak.

5.2.6 Enforcement of laws relating to cosmetic piercing and tattooing.

The authority has adopted bylaws under the Local Government (Miscellaneous Provisions) Act 1982 to control cosmetic piercing and tattooists. All premises offering such services and each individual operative must be licensed. The purpose of the by law is to control the risk of blood borne infections such as hepatitis and HIV associated with such practices.

In total the authority has 22 licensed premises and 77 licensed individuals.

In addition the team now have responsibility for enforcing the Tattooing of Minors Act 1969. It is unlawful to tattoo a young person under 18. The authority has recently received complaints from parents of underage Tattooing and an investigation is proceeding.

5.2.7 Enforcement of smoke free legislation

The health and safety team are responsible for enforcing the smokefree provisions of the health act. The team no longer have a dedicated smoke free enforcement officer. Enforcement of smokefree will now be integrated into other regulatory visits to workplaces e.g. food and health & safety inspections. Enforcement will also be intelligence led and the team will respond to complaints and referrals from the public and other agencies such as the police and licensing officers.

5.2.8. Special Projects 2010-2011

5.2.8.1 Investigation into the activities of illegal tattooists

The popularity of tattooing as increased in recent years across all sectors of society but in particular young people. In addition to the work to control legally licensed tattooists, the team will actively pursue illegal activities. These tattooists pose a significant risk of infecting the public with blood borne infections such as HIV and Hepatitis. The team have investigated complaints regarding the activities of illegal home tattooists. Last year the team, with the assistance of the police, seized equipment from one illegal tattooist following complaints made by social workers. The team are actively investigating a further suspected illegal tattooist operating from home. The team are also investigating complaints from parents regarding the illegal tattooing of minors. In addition to these enforcement and intelligence gathering operations the team will run a high profile health promotion campaign. In partnership with the communications and marketing team the campaign will have two key aims; the first to discourage young people from having a tattoo until they reach the age of 18, the second element will be to warn all age groups of the dangers of using illegal and unlicensed tattooists.

5.2.8.2 Control of Asbestos

Although asbestos is no longer used in construction, it remains a significant risk to members of the public. Asbestos fibres can be released during renovation, demolition and construction works. Those in control of work places and commercial buildings have a legal duty to manage asbestos and must produce an asbestos risk assessment highlighting the presence of asbestos in their building and how they intend to deal with it. The team are working with Development Control and Building Control to bring the requirement to the attention of duty holders at the initial planning or building control application stage.

The team have also submitted a proposal to the Health and Safety Executive to secure the transfer of certain premises to local authority control to enable the health and safety team to take action in relation to work that contravenes the Control of Asbestos Regulations 2006. Although the authority will be the enforcing authority for many of the premises concerned, the HSE becomes the enforcing authority if the main activity at the premises is construction. Therefore although the authority may have started the process of ensuring the premises owner complies with their responsibilities they may not be able to pursue necessary enforcement action once the premises becomes a construction site. The team hope the transfer of enforcement responsibility will remove this anomaly and allow it to more effectively control the risk from asbestos. The Health and Safety Executive have indicated their approval for this product and are finalising the necessary transfer documentation.

5.2.8.3 Motor Vehicle Repair and body shops

The team have submitted a proposal to the HSE to transfer certain motor vehicle repair and body shops to the authority for enforcement. This will enable the team to address potential causes of respiratory ill health and occupational cancers which as discussed in section 3.1 are a particular health concern in the borough. The team are awaiting a response from the HSE.

5.2.8.4 Inspection of Children's nurseries and day care facilities.

The team intend to inspect all 120 Children's nurseries and day care facilities in Halton. Although other agencies such as Ofsted and the authority's children and young people team oversee this sector, the health and safety team's inspections will focus on the safety of the environment. The rationale behind this project is the significant increase in the last 5-10 years in child care facilities. This reflects the fact that many families have two working parents and the support given by Government in the form of nursery vouchers. Many of the premises have never previously been inspected to determine compliance with Health and Safety law. Also the age of the children places them in a particularly vulnerable group and there is high expectation from parents that such premises will have been inspected and are safe.

The team will hold a number of advice workshops to make nursery manager's aware of key health and safety requirements prior to the visit. All nursery operators will be invited to these workshops. This will be followed up by an inspection visit. To ensure consistency a standard aide memoir will be used by all officers. Also to increase efficiency the team are piloting the use of "auto text" inspection reports. However, where necessary advice and guidance will be tailored to the needs of each nursery.

5.2.8.5 Gas and Electrical Safety in takeaway food premises

As a result of observations made during routine food inspections the team have become aware that the standards of gas and electrical safety in takeaway food premises are poor particularly in the kebab and pizza sector. In 2010-2011 the team intend to target these premises for inspections and

where necessary take the appropriate enforcement action. However prior to these visits the team will write to all kebab and pizza takeaway businesses to advise them of their responsibilities with respect to gas and electrical safety and the particular areas of concern the team have identified in other establishments.

5.2.8.6 Preparation for the Sunbed (Regulation) Act 2010

As discussed in 5.1.6 the Sunbed (Regulation) Act 2010 comes into force in April 2011. During the course of 2010-2011 the health and safety team will need to identify all premises that operate UV tanning equipment. Each business that will be affected by the act will require written guidance on the new regulation. A health promotion campaign will also be launched to advise young people of the new legislation and the risks of excessive exposure to UV radiation.

5.3 Home Authority / Primary Authority

The home authority principle was established by LACORS to facilitate communication between local authorities and businesses that operate on a regional and national basis. A home authority provides advice and guidance to the business and acts as a point of liaison between that business and other local authorities. The purpose of the home / originating authority principle is to ensure the consistency of advice and enforcement. Halton does not have any formal home authority arrangements.

The Primary Authority Principle was introduced by the Department of Business Enterprise and Regulatory Reform. This new scheme will invite businesses to form formal partnerships with individual local authorities to act as a point of liaison between other regulatory bodies. The authority is committed to the Primary authority scheme and is prepared to act as Primary Authority for any relevant business in the borough. However where a business considers the home authority scheme to be more appropriate the team will also facilitate the less formal home authority arrangement.

5.4 Formal Enforcement Action

The health and safety team is committed to adopting a graduated approach to enforcement to ensure legal compliance and will utilise the full range of enforcement actions provided for by law. The health and safety team will ensure all its enforcement actions comply with the Environment and Regulatory Service Division's Enforcement Policy.

In the year 2009 – 2010 the authority exercised the following enforcement actions,

Written Warnings	93
Improvement Notice	9
Prohibition Notice	5
Simple Caution	0

Prosecution

1

5.5 Liaison with other agencies.

To ensure consistency of enforcement and the exchange of best practice amongst enforcement authorities the authority is committed to membership of the Environmental Health Cheshire and Merseyside Health and Safety sub group. The team is also a member of the Safer Halton Partnership comprising the police, licensing and crime prevention officers.

5.6 Key task Summary and performance indicators

Key Task	Corporate Priority	Indicator Reference	Milestone
High risk Health and Safety inspections achieved	A Healthy Halton Area of focus 5 A Safer Halton	H/1 (Health and Safety Team indicator)	100%
Targeted inspections of Children's day care settings and nurseries	A Healthy Halton Area of Focus 5 A Safer Halton	H/2	At least 50 premises inspected and risk rated.
Targeted inspections of Kebab and Pizza Takeaways focusing on gas and electrical safety	A Healthy Halton Area of Focus 5 A Safer Halton	H/3	All kebab and pizza type premises to receive advisory letter pending targeted inspections in 2011.
Number of premises rated "A" risk that has reduced in risk rating.*	A Healthy Halton Area of Focus 5 A Safer Halton	H/4	This is a pilot indicator to attempt to monitor the effectiveness of the team in improving standards in high risk premises
Targeted inspection of motor vehicle repair shops to address occupational cancers and respiratory ill health	A Healthy Halton Area of Focus 5 A Safer Halton	H/5	Secure formal agreement with HSE for transfer of premises to LA control
Enforcement of duty to control asbestos in premises undergoing renovation, construction or demolition	A Healthy Halton Area of Focus 5 A Safer Halton	H/6	Secure formal agreement with HSE on enforcement protocol to allow the local authority to take action in relation to control of asbestos.
Assessment of premises that have the potential to be category A in the new	A Healthy Halton Area of Focus 5	H/7	Review of all premises – Identify 50

scheme.	A Safer Halton		potential category A premises for inclusion in next years work programme.
Preparation for Sunbed (Regulation) Act 2010	A safer Halton A Healthy Halton Children and Young People in Halton	H/8	Identify all sunbed operators in the borough. 100% of premises to receive advice and guidance by letter informing them of the new regulation.

6.0 Quality and Monitoring

6.1 Staff development

The key to the quality of the service delivered is the qualification, training and experience of its staff.

The service is committed to staff development and implements the authority's Employment Development Review process. Following the annual EDR the Principal EHO and Lead EHO will review the teams training needs in order to plan an annual training programme.

In 2009 the Health and Safety Executive launched the Regulators Development Needs Analysis Tool, known as RDNA. This can be used by health and safety enforcement officers to assess their competency across a range of disciplines and is used to highlight and prioritise training needs. As part of the staff development process each staff member with a responsibility for health and safety will review their technical development needs using the RDNA toolkit. This review will take place on an annual basis.

The RDNA toolkit recognises the benefit of "on the job" training by shadowing and learning from colleagues with more experience. The Merseyside and Cheshire liaison group is compiling a list of "experts" within particular fields who may be able to assist Merseyside and Cheshire officers with development needs. This may represent a more cost-effective means of ensuing staff competency in place of more costly formal training courses.

Personal development and training files are held for all members of staff. These provide a record of qualifications, experience, training and officer authorisations.

6.2 Monitoring

During 2010 – 2011 a new procedure for monitoring the quantity and quality of work undertaken by the food and health & safety teams will be developed by the Principal EHO. This will be implemented with the support of the lead environmental health officer.

This procedure will ensure that all work undertaken by the team is consistent with the section 18 standard and the authority's enforcement policy.

REPORT TO: Safer Policy & Performance Board

DATE: 21 September 2010

REPORTING OFFICER: Strategic Director, Adult & Community

SUBJECT: Halton's Safeguarding Adults Board Annual Report 2009-10

WARDS: All

1.0 **PURPOSE OF REPORT**

1.1 To present the Annual Report of Halton's Safeguarding Adults Board, for the year 2009/10, and to brief members of the Policy & Performance Board (PPB) on key issues and progression of the agenda for Safeguarding Vulnerable Adults.

2.0 **RECOMMENDATION:**

- i) **That members of the PPB note and comment on the content of the Annual Report of the Safeguarding Adults Board 2009/10 and recent/current key issues.**

3.0 **SUPPORTING INFORMATION**

3.1 **Annual Report of the Safeguarding Adults Board (SAB)**

The Annual Report outlines the strategic framework and operation of the multi-agency arrangements for safeguarding adults in Halton who are vulnerable to abuse. The report provides details of work undertaken from April 2009 to March 2010 and summarises priorities and planned activity for the year April 2010 to March 2011.

The report is made available on Halton Borough Council's website and is sent to lead officers and senior managers in partner agencies in all sectors.

3.2 **Update**

Since April 2010, key issues to report are:

3.1.2 The Safeguarding Adults Board has published its Annual Report covering the period 1 April 2009-31 March 2010. It is available as Appendix 1 of this report and on the website:

www.halton.gov.uk/safeguardingadults

An Easy Read version is being prepared.

The report will be presented to a number of forums, including Policy & Performance Boards (Safer Halton and Healthy Halton), the People's Cabinet and Learning Disabilities Partnership Board.

The Board recommends that partner agencies present it to their respective Boards.

3.2.2 The Board's Work Plan has been updated in line with agreed Priorities, as detailed in the Annual Report.

3.2.3 Services that have an impact on Safeguarding report to the Board. The following developments have been reported recently:

- Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (DoLS):
 - Training and other awareness raising activities provided
 - Access to Independent Mental Capacity Advocacy services
 - Policies and Procedures 'refreshed'
- Dignity in Care:
 - Halton Speak Out has been commissioned to produce easy read information regarding Dignity
 - A Dignity Issues Log has been set up.
- Personalisation:
 - Multi-disciplinary Risk Management arrangements are being set up
 - Positive Risk Taking Policy being developed
 - Commissioning training for Personal Assistants (PAs)
 - Risk Assessment training being provided
- Domestic Abuse:
 - 77 local staff with a safeguarding role recently attended a dedicated training session

3.2.4 Briefings have been provided for Halton Direct Link Advisors and Supervisors, to clarify referral procedures and ensure effective arrangements in place at the interface between callers and lead safeguarding staff.

3.2.5 NHS Trusts are arranging to report Serious Untoward Incidents (that involve Safeguarding Adults elements) to the Board's Quality and Performance sub-group, in recognition of the key learning opportunities they can afford.

3.2.6 An action plan arising from last year's appraisal of learning opportunities for Halton from the Hounslow Housing judgment was brought to the

Quality & Performance Sub-group in May 2010 and will be tracked for progress.

- 3.2.7 The Quality and Performance sub-group terms of reference have been revised to incorporate serious case reviews and dignity matters.
- 3.2.8 Safeguarding Adults Case audits are being undertaken on a regular basis.
- 3.2.9 A Serious Case Review is still in progress, working to a planned timescale.
- 3.2.10 Publicity & Communications sub-group have taken responsibility within their terms of reference for strategy for the Board's response to media enquiries.
- 3.2.11 Carers Week and Disability Awareness (DAD) Day used as a conduit for distributing publicity materials.
- 3.2.12 A dedicated awareness raising event was held on 28 July, for the Safeguarding Adults Board, providers and partner agency staff.
- 3.2.13 All marketing materials have been reviewed, updated and re-branded with a common branding.
- 3.2.14 A marketing campaign has recently been undertaken during July 2010 and will be refreshed. Includes a wide distribution of written materials (including easy read versions), banner stands in public facilities, and taxi and bus adverts.
- 3.2.15 A number of GP surgeries have agreed to provide safeguarding adults details on plasma screens placed in patient waiting rooms.

Halton Hospital has agreed to put a display screen in place.
- 3.2.16 A multi-agency Safeguarding Adults Training Strategy has been developed.
- 3.2.17 A new evaluation tool and attendee personal action plan is being piloted (for completion during the course being attended), to strengthen the likelihood and provide a potential measure of the difference that training makes, to practice.
- 3.2.18 A MARAC briefing has been provided for Halton Borough Council (HBC) Assessment team managers, to raise awareness of processes and services, and strengthen procedures in adult social care.
- 3.2.19 HBC's Adult Social Care Workforce Grant currently funds all of the learning interventions. However, the grant funding is set to finish in March 2011 and no alternative/replacement has been announced at the

time of writing the report. The Council is seeking to move towards a more coordinated and multi-agency response to the future learning and development needs of the partner agencies, initially through a multi – agency plan which can begin to inform long term needs and required resources.

3.2.20 Extra training dates have been arranged for Basic Awareness & Referrers Training, due to increased demand. An additional date for Train the Trainer course might be needed.

3.2.21 Safeguarding Adults has been incorporated into the Prevention & Early Intervention Strategy.

3.2.22 The revised version of the document ‘Safeguarding Adults in Halton - Inter-agency Policy, Procedures & Guidance’ document has been distributed to over 400 agencies and groups operating in Halton. It is available on the website:

www.halton.gov.uk/safeguardingadults

3.2.23 An Audit Tool has been developed and recommended to related services, to be used to evaluate Safeguarding specific and Safeguarding related policies, procedures and service specifications, evaluate agencies’ arrangements for checking their impact on safeguarding adults and the standards they contain. The document was piloted against HBC’s Confidential Reporting Policy, which was revised as a result.

3.2.24 The Care Quality Commission (CQC) are in the process of conducting an inspection of Adult Social Care, with fieldwork taking place between 7th and 16th September 2010. The process is focusing on:

- Older people as a service user group
- Safeguarding, across all adult groups
- Improved Health and Wellbeing
- Increased Choice and Control
- Maintaining Personal Dignity and Respect
- Commissioning and Leadership, including use of resources

4.0 **POLICY, LEGAL AND FINANCIAL IMPLICATIONS**

4.1 A key issue is sustainability of the Training and Development activity once current funding is no longer available. If the key issues are not addressed the level of knowledge and skills that colleagues require to undertake their duties, may not be achieved and therefore impact negatively on vulnerable adults.

4.1 There are no policy, legal or financial implications in noting and commenting on this report.

4.2 All agencies retain their separate statutory responsibilities in respect of safeguarding adults, whilst Halton Borough Council’s Adult and

Community Directorate has responsibility for coordination of the arrangements, in accordance with 'No Secrets' (DH 2000) national policy guidance and Local Authority Circular (2000) 7/Health Service Circular 2000/007.

5.0 **IMPLICATIONS FOR THE COUNCIL'S PRIORITIES**

5.1 **Children & Young People in Halton**

Safeguarding Adults Board membership includes:

- The Chair of the Local Safeguarding Children Board and
- Divisional Manager for the Children's Safeguarding Unit in the Children and Young People's Directorate.

Safeguarding Children Board membership includes adult social care representatives.

Joint protocols exist between Council services for adults and children.

The SAB chair, sub-group chairs and lead officers for related services will meet regularly and will ensure a strong interface between, for example, Safeguarding Adults, Safeguarding Children, Domestic Abuse, Hate Crime, Community Safety, Personalisation, Mental capacity & Deprivation of Liberty Safeguards.

5.2 **Employment, Learning & Skills in Halton**

None identified.

5.3 **A Healthy Halton**

The safeguarding of adults whose circumstances make them vulnerable to abuse is fundamental to their health and well-being. People are likely to be more vulnerable when they experience ill-health.

5.4 **A Safer Halton**

The effectiveness of Safeguarding Adults arrangements is fundamental to making Halton a safe place of residence for vulnerable adults.

5.5 **Halton's Urban Renewal**

None identified.

6.0 **RISK ANALYSIS**

6.1 Failure to address a range of safeguarding adults issues could expose individuals to abuse and leave the Council vulnerable to complaint, criticism and potential litigation.

7.0 **EQUALITY AND DIVERSITY ISSUES**

7.1 It is essential that the Council addresses equality issues, in particular those regarding age, disability, gender, sexuality, race, culture and religious belief, when considering its safeguarding policies and plans.

Annual Report 2009-10

Halton's Safeguarding Adults Board





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A handwritten signature in blue ink that reads "Dwayne Johnson".

Dwayne Johnson
Chair of Halton's Safeguarding Adults Board
Strategic Director, Adults & Community,
Halton Borough Council

FOREWORD

As the Chair of Halton's multi-agency Safeguarding Adults Board, I am pleased to present this Annual Report, which describes how organizations and committed individuals in all sectors are working together to safeguard vulnerable adults.

This has been another productive year for Halton and the Safeguarding Adults Board and we have also seen a number of important and influential events nationally.

We have continued to provide a range of services to prevent abuse and set up systems to sign post people to services where they feel vulnerable or when carers feel they require more support.

Locally, partner agencies dealt with more than 350 referrals of alleged abuse throughout the year, investigating those concerns, putting safeguarding arrangements in place and supporting people who find themselves in abusive situations.

As well as reporting on its work over the past year, the Board's annual report explains the national context in which we all operate and lists our priorities for the coming year.

We continue to make important linkages to the Domestic Violence and Children's agenda and have maintained our communication and scrutiny of what we do through the Crime and Disorder and Health Partnership Boards and the Local Strategic Partnership.

I want to assure local people and partner agencies of our continuing commitment to this work, which is essential to the quality of life and experience of people whose circumstances make them vulnerable.

Safeguarding adults is a complex and challenging area of work and I would like to thank all those involved for their vital contribution to the partnership.

Please forward any comments on the contents of the plan to Julie Hunt, julie.hunt@halton.gov.uk.

HALTON SAFEGUARDING ADULT BOARD VISION

Safety from harm and exploitation is one of our most basic needs and everyone has a right to be safe.

As adults, we constantly weigh up the balance of risks and benefits in what we do and the choices we make.

'Safeguarding' is a range of activity aimed at upholding the fundamental right to be safe, at the same time as respecting people's right to make choices.

Safeguarding involves empowerment, protection and justice.

Local authority adult social care departments play a co-ordinating role in developing local arrangements for safeguarding adults. All partner agencies, however, play a vital role in ensuring the best possible outcomes for those people in our community who are vulnerable to abuse and those who have experienced abuse and many of them are represented on the Safeguarding Adults Board.

As a Board, our vision for adults whose circumstances render them vulnerable to abuse is encompassed in the following statements:

- "A Halton where vulnerable people are safe from abuse/harm; empowered to make their own choices and to choose risks; where people are supported and developed to deliver this."
- "The Safeguarding Adults Board will lead and co-ordinate multi-agency strategy and direction, with energy and commitment, to achieve our shared vision."
- "By working together with top-level commitment from all agencies, the Board will raise awareness and inspire positive changes in people's lives."



NATIONAL CONTEXT

This has been an eventful year, which has seen a number of key drivers and developments in the context of safeguarding adults:

The Vetting & Barring Scheme went fully 'live' on 12 October 2009. Since this date, anyone entering or changing jobs in 'regulated activity' is required to register with the Independent Safeguarding Authority (ISA). Members of the workforce already in regulated activity will have their registrations phased in over a period of five years. The ISA was created as part of the Government's Vetting and Barring Scheme (VBS) to help prevent unsuitable people from working with children and vulnerable adults. It is a Non Departmental Public Body, sponsored by the Home Office and works in partnership with the Criminal Records Bureau (CRB) to help ensure that there is 'no known reason' why individuals who work or wish to work or volunteer with children or vulnerable adults shouldn't do so. The scheme has been the subject of considerable controversy, particularly in relation to frequency of contact with vulnerable people and the vetting of volunteers. Aiming to strike a balance between the need to protect vulnerable people on the one hand, and the importance of having a proportionate scheme, consistently applied, on the other, the Government commissioned a review and consultation and accepted the resulting recommendations made by Sir Roger Singleton, which it has said will be the next phase of the scheme's implementation.

The effectiveness of adult protection/safeguarding adults arrangements has been under scrutiny since Government Minister Ivan Lewis announced the review of 'No Secrets' (DH 2000) in June 2007. The review was launched by Care Services Minister Phil Hope in October 2008 and the report of the consultation was finally published in July 2009. Key messages were:

- a. Safeguarding requires empowerment/the 'victim's' voice needs to be heard.
- b. Empowerment is everybody's business, but safeguarding decisions are not.
- c. Safeguarding Adults is not like Child Protection.
- d. The participation/representation of people who lack capacity is also important.

The Government response to the report from the 'No Secrets' review was announced in January 2010 by Minister Phil Hope, who asserted that "the most vulnerable people in society will be better protected by local agencies such as Councils, the Police and the NHS". He went on to say that:

- New legislation will be introduced to enshrine, in law, the need for every local area to have in place a Safeguarding Adults Board.
- The Government, working with stakeholders, will set in train a programme of work to lead and support all agencies involved in safeguarding adults. It will ensure that everyone involved in the care of vulnerable adults has the skills to protect them.
- There will also be a new cross Government Ministerial group which will oversee the safeguarding of vulnerable adults, set priorities, work up new policy and provide national leadership.

The Health & Social Care Act 2008 created the Care Quality Commission, which became the independent regulator of health and social care in England from 1 April 2009, taking over responsibilities for the regulation and inspection of services from the Healthcare Commission, Commission for Social Care Inspection (CSCI) and with a remit to protect the rights of people detained under the Mental Health Act, in place of the Mental Health Act Commission.

Over the last year or so, the Law Commission has reviewed all law related to Adult Social Care, including safeguarding. In its Adult Social Care Consultation Paper in February 2010, the Commission has published a set of proposals for consultation in relation to potential changes in the law, on adult safeguarding.

The proposals include:

- A duty to make enquiries and take action in adult abuse cases
- The use of adults at risk to describe those in vulnerable situations
- Defining harm in statute
- A duty for each local authority to form an adult safeguarding board with clarity of function and membership
- A duty to co-operate in adult safeguarding cases

The Care Quality Commission (CQC) is carrying out a programme of themed inspections of Local Authority Adult Social Care, to help the inspectorate assess how well the Council is delivering services. Each inspection incorporates a significant scrutiny of safeguarding adults arrangements, including prevention of abuse and the multi-agency response to concerns. Officers from Halton have been in touch with other Councils that have been inspected and considered their inspection reports, to see what we can learn from them to benefit the service we provide to people locally. Halton's Adult Social Care service will be inspected in September 2010.

Adult Social Services continue to meet the challenge of implementing the Putting People First agenda in their service cultures and operational arrangements. A significant aspect of this is addressing the tension between facilitating self-directed support and safeguarding those whose circumstances make them vulnerable.

The Department of Health's Adult Social Care Workforce Strategy, published in April 2009, announced that the General Social Care Council (GSCC) will extend registration to home care workers. Initially registration will be on a voluntary basis and the expectation is that it will become compulsory thereafter.

Clinical Governance and Adult Safeguarding was published by the Department of Health in February 2010. Prior to this, there was no specific guidance outlining any NHS responsibilities around safeguarding adults and statute applicable to the NHS has contained no explicit duty to engage with safeguarding adults/ adult protection arrangements.

From 1st April 2009, new regulations and guidance come into operation about how Adult Social Care and NHS Health Services respond to complaints, some of which will contain elements of safeguarding and dignity. By both sectors operating to these, it is intended to encourage a more seamless response where complaints cross over both.

National standards for data collection on Safeguarding Adults have now been approved and the collection becomes mandatory for local authority Adult Social Services from April 2010, whilst publication of the data reports is voluntary until 2010. It has been reported that the return will be revisited following conclusion of the 'No Secrets' review.'

Despite all of these positive moves towards a more robust framework in which we operate, throughout the year a number of vulnerable people will have suffered abuse at the hands of others and in some cases tragically died. Whether concerning adults or children, all of these events provide us with opportunities to consider our local safeguarding arrangements, to learn from the events that have led to abuse and how they might inform the way we work together and individually.

Internet links to further information on the following developments are provided in the Useful Information section of this annual report.

STRUCTURE AND REPORTING ARRANGEMENTS

Halton's framework for safeguarding adults has been set up and developed in accordance with the government guidance 'No Secrets' (Department of Health 2000) and 'Safeguarding Adults' (Association of Directors of Social Services 2005).

At the centre of local developments are:

- The multi-agency strategic decision-making body, the Safeguarding Adults Board
- Sub-groups of the Board
- Links with related services
- Individual partner agency developments

The Board, its sub-groups and reporting arrangements have developed over recent years, reflecting a growing understanding of safeguarding, including a stronger focus on the prevention of abuse, the establishment of better strategic links between partners to ensure effective response to concerns, and the need to engage more effectively with the wider community.

The Board reports formally to the Safer Halton Partnership, which forms part of the Halton Strategic Partnership <http://www.haltonpartnership.net> with an overall aim:

- To ensure pleasant, safe and secure neighbourhood environments, with attractive, safe surroundings, good quality local amenities and the ability of people to enjoy life where they live.

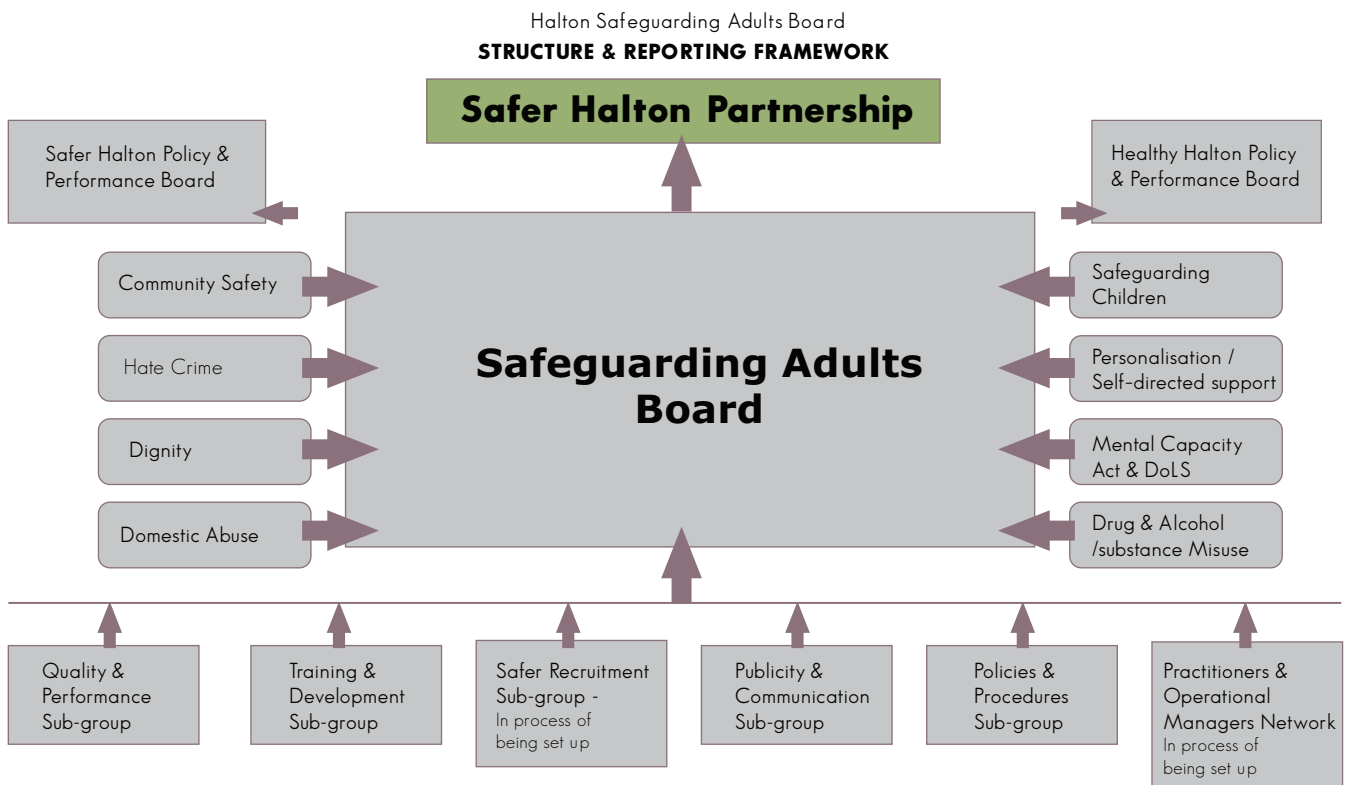
Additionally, public sector agencies report Safeguarding Adults developments through their internal governance arrangements, for example Halton Borough Council's Policy and Performance Boards (Safer Halton and Healthy Halton)

In 2009 the Board reviewed its operation and decided to rationalise the groups to make them re efficient, effective and more outcome focused. These are described later in the plan:

Sub-groups are multi-agency. Their membership, terms of reference and work plans are available, on request, from the Safeguarding Adults Coordinator:
Julie.hunt@halton.gov.uk
Tel: 01928 704523

Links with related services and priorities are strengthened through representative membership on the Board and through reporting arrangements regarding, for example:

- Dignity
- Safeguarding Children
- Community Safety
- Domestic Abuse
- Self-directed Support/'Personalisation'
- Mental Capacity and Deprivation of Liberty Safeguards (DoLS)



OUTCOMES FOR SERVICE USERS AND CARERS

The following are some of the outcomes we aim to ensure for people who use services and for their carers:

- People are able to live in safe and secure surroundings where harassment, abuse and neglect are prevented
- Partner agencies and the general community know what to do to try and prevent abuse, and to respond when it happens
- People experience a good response when they raise concerns about abuse, including:

- A timely and appropriate response
- Robust protections and support for people at risk
- Information that they have a right to receive and where appropriate
- The ability to make decisions about their living circumstances, which might include risk and is managed under the least restrictive regime
- The opportunity to have their situation reviewed on a regular basis

- Support is provided at home or in other settings by a skilled, informed, confident workforce
- People can maintain involvement in local activities, policy development and decision-making
- People experience dignity and respect throughout the safeguarding and support processes



SAFEGUARDING ADULTS BOARD PRIORITIES 2010-11

The following focused priorities were determined in 2010 and include:



PRIORITY 1 ▶ To safeguard and promote the welfare and dignity of vulnerable adults

This is an overarching priority for the SAB as all other priorities and actions flow from it. The importance of including 'dignity' in this priority emphasises that vulnerable adults should experience the right to be treated at all times as individuals. The Board will establish an engagement programme with the aim of increasing the contribution from service users and carers in informing its work and service developments, particularly in its prevention strategy. The Board has already agreed that advocacy services will be strengthened to ensure the needs of people with limited or no capacity are particularly addressed.

PRIORITY 2 ▶ To promote awareness of vulnerable adults and their right to be safe in local communities

Recent focus group work has demonstrated that more needs to be done to raise awareness of the rights of vulnerable people, the potential risks they may experience and also what individuals should do if they suspect abuse against an individual in their communities. The Board will be seeking to address this through its publicity campaign and to appropriately respond to continued feedback from communities, service users and their carers.

PRIORITY 3 ▶ To ensure there is a strong multi-agency response to the safety, wellbeing and dignity of vulnerable adults

The Board will strengthen multi-agency work through continuing to develop robust processes and procedures within a performance framework. This will embed good governance arrangements and strengthen clear lines of accountability.

PRIORITY 4 ▶ To equip staff and partner agencies with the necessary tools to both safeguard vulnerable adults and ensure their dignity is respected

The Board has a strong record of promoting and providing training on a multi-agency basis to ensure that everyone involved in the care of vulnerable adults has the skills to protect them. The Multi-Agency Training and Development Plan is currently being developed to take this to the next stage.

ADULT SAFEGUARDING DATA 2009/2010

DATA AND PERFORMANCE REPORTS

The Board recognises that quantitative data does not reveal the human experience of the people to whom it relates, but reliable data recording, analysis and reporting systems can provide a useful picture which can inform the Board and partner agencies of how well the service is operating and what needs to change and develop. It can tell us what abuse is being reported, how it is being dealt with and what the outcomes are for people who experience and perpetrate abuse, whether intentional or not.

Achievements and developments 2009/10:

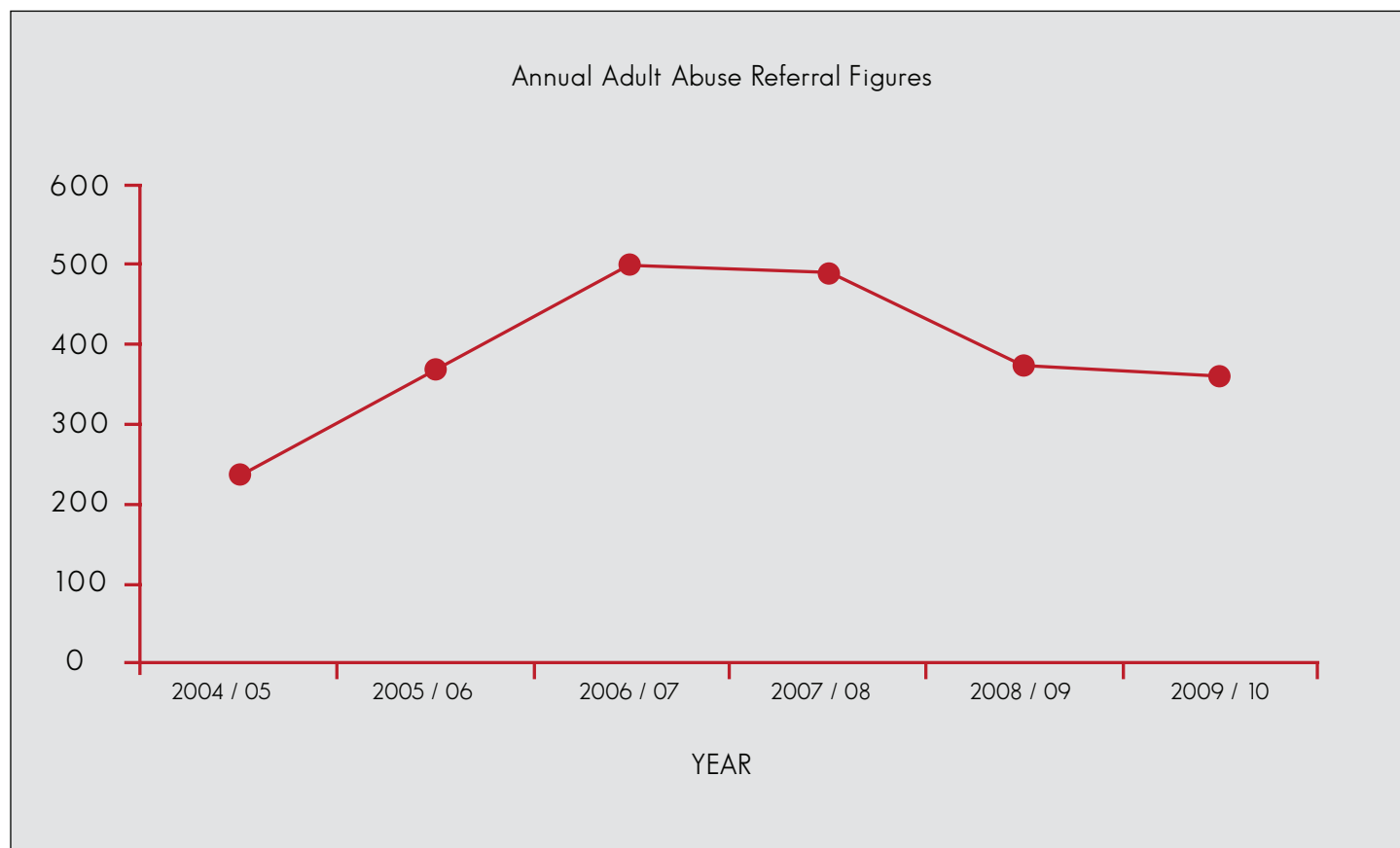
- Public sector partner agencies have individually worked to improve their systems and processes, with the aim of informing their internal developments and contributing improved standard of data reporting to the Board and Quality & Performance sub-group.
- Halton Borough Council has developed an electronic recording form, which will be implemented in 2011
- Halton Borough Council (HBC) has collected data about referrals received during the year and this has informed the graphs and commentary provided below

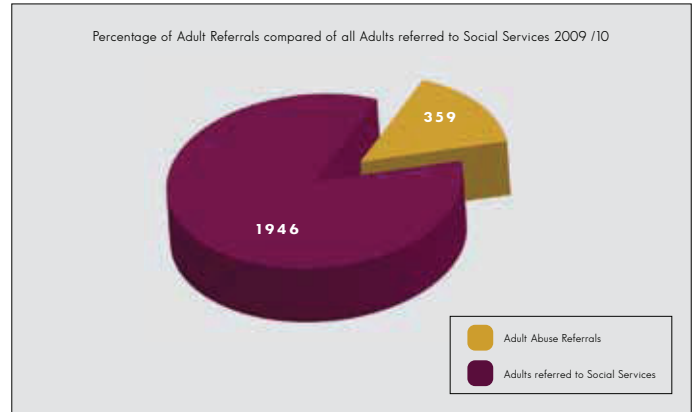
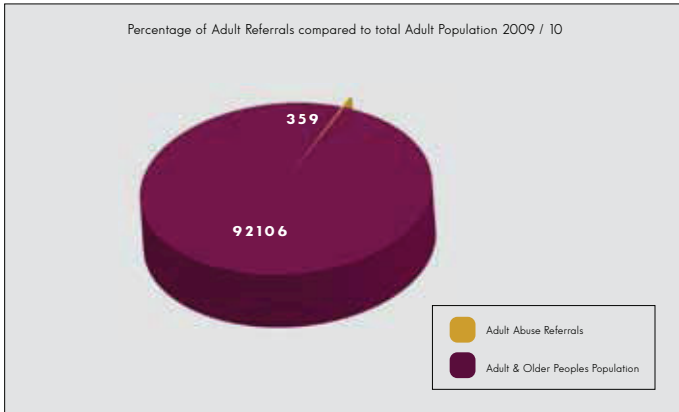
- Presentation of Local Data and Commentary
- Table 1, below, shows the total number of referrals in Halton:
- Rose by a total of 110% over a 3-year period 2004-05 to 2006-07
- Fell by just over 2% in the year 2007-08
- Fell a by further 24% in the year 2008-09
- Fell by a further 3.7% this year 2009-10

Further work has been done with the assessment and care management teams, on screening possible safeguarding referrals to better enable managers and staff to distinguish safeguarding allegations from other concerns, providing guidance on options of approach depending on circumstances. The further small decrease in referrals could be ascribed to this process. Marketing and training strategies continue to raise awareness of safeguarding and Dignity in Care, which should help to ensure that referrals continue to occur where abuse is suspected or occurs.

Halton's referral numbers by service user group during 2009-10 reflects the same pattern as occurred in 2008-09, showing the greatest number of alleged victims to be older people, followed by people with learning disabilities and those with mental health issues, followed by those with physical & sensory disabilities, with a small number of those who misuse substances:

Table 1





The above two charts show the percentage of alleged adult abuse referrals compared with:

- The total adult population in Halton and
- The total number of adults referred to Halton Adult Social Services.

The data provided in table 2 relates only to Public Protection Unit investigations and does not reflect investigations across other policing departments that will at various times deal with vulnerable adult victims. It should also be seen in the context of the reduction in referrals shown in Table 1.

Police colleagues have explained that the above data supplied from their records cannot be guaranteed totally accurate, but if anything is likely to be an under-estimate rather than an over-estimate. More reliable data is anticipated next year.

The method of collection and analysis of data provided by the Police is being reviewed and steps taken, where possible within the constraints of IT systems, to provide a more detailed picture of all Police involvement in cases of alleged vulnerable adult abuse.

* Police involvement means specialist Police Officer has given advice only and not physically left the office).

* Police Investigation means specialist Police Officer attended strategy meetings or case conference or the alleged perpetrator voluntarily attending the Police station for an interview under caution).

Table 2

	Referrals (Number not known for 2007-08)			Police Involvement			Police Investigation			Crown Prosecution Service (CPS) Advice			Alleged Perpetrator Charged		
	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10	2007-08	2008-09	2009-10
Runcorn	-	33	19	12	7	4	21	8	14	3	1	1	0	1	1
Widnes	-	29	10	6	15	0	11	4	9	3	1	1	1	1	1
TOTAL	-	62	29	18	22	4	32	12	23	6	2	2	1	2	2

KEY DEVELOPMENTS & LOCAL ACTIVITY 2009-10

WORKING TOGETHER

Safeguarding Adults Board and sub-group members' meeting attendance, contributions and commitment continue to be invaluable. Meetings provide the arena for:

- The consultation and decision-making involved in moving forward our challenging agenda to combat and respond to abuse
- Developing strong links with services that relate to safeguarding adults - for example: dignity, safeguarding children, community safety, domestic abuse, hate crime, mental capacity and deprivation of liberty safeguards.

Achievements and developments 2009/10:

STRATEGIC FRAMEWORK AND LEADERSHIP

- In 2009, Halton Borough Council's Strategic Director (Adults and Community Directorate) became the Safeguarding Adults Board Chair, to increase the level of leadership, link in more firmly with related forums and take forward the portfolio.
- Safeguarding Adults Board membership extended, with the aim of improving engagement, cooperation and better responses for

people vulnerable to abuse and their carers. New membership included:

- Halton Borough Council's Elected Member Portfolio Holder for Adult Social Care
- Halton Borough Council's Children and Young People's Directorate Divisional Manager for Safeguarding, Quality & Review and Halton Safeguarding Board Children Board member
- NHS Halton and St Helens (PCT) Senior Commissioning Manager
- NHS Halton and St Helens (PCT) Operational Director of Partnership Commissioning
- Cheshire Fire and Rescue Service
- Halton Voluntary Action Third Sector Lead Engagement Officer
- Dignity in Care Coordinator

- Board meetings attendance saw an overall increase of 13% through the year
- Reviewed & updated the Board's and sub-groups' structure, terms of reference and work plans
- Two sub-group remits were incorporated into the Quality and Performance sub-group remit, in the interests of efficiency and effectiveness
- Two new sub-groups were set up and terms of reference and a work plan developed, to take responsibility for improving arrangements for:
 - Publicity & Communications
 - Policies & Procedures
- The Board identified that a Safer Recruitment sub-group needed to be set up and approached the Local Safeguarding Children Board with a proposal for a joint arrangement



- Sub-group chairs' responsibilities were clarified and contingency arrangements put in place
- Meetings have been set up between the Board chair and people with lead responsibilities in related services, to strengthen and sustain the interface
- Dignity and Personalisation leads report regularly to the Board, as part of this strategy
- The Board submitted a joint response to consultation on the Review of 'No Secrets'

LINKS WITH RELATED SERVICES

Dignity in Care

- A Dignity Champions' Network has been established. The Network held its first meeting in June 2009 and was attended by local representatives from the health, voluntary, independent and statutory sectors. The Network is chaired by the Older People's Champion.

Mental Capacity Act 2005 and Deprivation of Liberty Safeguards (MCA and DoLS)

- The local multi-agency Steering Group has been reviewing its framework including governance arrangements (e.g. analysis of outcomes for service users, number of Best Interest and Mental Capacity Assessments), training arrangements (clear target groups, targeting particular groups/specialist interest topic courses, facilitator appropriateness, distribution, training attendance & venues, what is available, what is needed), understanding, policies, procedures & guidance (their fitness for purpose).
- Guidance on implementing the Mental Capacity Act 2005 was provided for the Police
- Reviewing usage of and access to the Independent Mental Capacity Advocate (IMCA) service.
- Steps taken to raise awareness of the IMCA service, including audit of people's understanding and confidence even after training, newsletter and articles distributed, promoting training and awareness.
- Department of Health booklet was sent directly to all care homes by the Department of Health, along with the Code of Practice and a DVD which has all the required documentation on it
- Two dedicated DoLS briefing events were held for all residential care providers
- Halton Borough Council's DoLS policy and procedure sent directly to all residential care homes
- Contracts amended to include compliance with MCA and DoLS (where appropriate)
- Contract Monitoring Officers put forward for training in this so that they can gauge the level of compliance



Hate Crime

- Colleagues across Halton Strategic Partnership have been working together to improve reporting mechanisms and data quality for Hate Crime
- All of the Hate incidents reported in Halton over a given period related specifically to Race or Sexuality and none of those reported related to Disability. Work has therefore been in progress to make contact with groups associated with disability within Halton, to encourage the reporting of any such incidents and to outline the extent of Race/ Hate legislation and of Police Powers
- Cheshire Police raised some concerns about low levels of reporting and arranged to deliver a programme of refresher training.
- There are currently ten reporting centres in Halton, where nominated staff have received training and support from Cheshire Police.
- The reporting centres are on the Council's website, and Partners have been asked to do the same with their own sites. Facilities have been identified as possible reporting centres for the future, and work is currently being undertaken to have staff within these premises trained for third party reporting
- A web link has been set up from the Safeguarding Adults webpage to the Hate Crime page

Domestic Abuse

- A new Domestic Abuse Coordinator was appointed, joined the Safeguarding Adults Board and links with the Safeguarding Adults Coordinator, to inform both service strategies and participate in specific developments
- Links between Safeguarding Adults and Domestic Abuse services strengthened e.g. through a review of Adult Social Care procedures regarding the Multi-Agency Risk Assessment Conference (MARAC) forum

INDIVIDUAL AGENCY DEVELOPMENTS

NHS Trusts

- The four NHS Trusts that participate in Halton's safeguarding arrangements appointed additional, operational leads for Safeguarding Adults, with a remit to direct and oversee practice in safeguarding adults

Warrington & Halton Hospitals NHS Foundation Trust

- Executive Director of Operations is the Safeguarding Adults executive lead.
- The Trust appointed a whole time equivalent Safeguarding Adults Matron post
- The Trust developed a Safeguarding Training Strategy.
- A Dignity Forum was provided in 2009, for all ward staff to attend, to promote the issues around Dignity
- Wards display Dignity Boards
- Arrangements are in place to ensure that any issues around dignity are fed back into meetings with a remit to ensure they are addressed

St Helens & Knowsley NHS Teaching Hospitals Trust

- Appointed to a new post of Safeguarding Adults Coordinator.

5 Boroughs Partnership NHS Trust

- Appointed to a new post of Senior Safeguarding Adult Practitioner

NHS Halton & St Helens (PCT)

- Appointed both a Safeguarding Adults Lead Manager and Safeguarding Adults Coordinator (latter is also the DoLS Coordinator)
- Consultants commissioned to review the PCTs safeguarding policies.
- Increased Board membership - see above
- Reviewed processes for recording incidents, including a means of alerting in cases that are safeguarding concerns
- Developed a safeguarding recording and referral form.
- Developing training attendance recording system to allow training needs and attendance to be fully and analysed. Developing target groups for each course and considering induction.
- Basic Awareness training given Essential Training status for PCT staff.

Halton Borough Council

- Further work undertaken with managers of care management teams on policies and procedures.
- Self Directed Support:
 - Safeguarding and Personalisation specific task group established to address this emerging agenda. The Safeguarding Adults Coordinator and Dignity Coordinator are part of the group, which is benchmarking existing safeguards and developing an action plan to take forward further developments. The group provides regular reports to the Safeguarding Adults Board

- The Council is considering piloting conversion of existing Direct Payments (DP's) into Personal Budgets and consulted service users about how to modernise the existing DP service at a consultation event in April and May 2010.
- Consultants provided a workforce training and development plan, which commenced in April 2009.
- Comprehensive guidance booklets containing safeguarding specific and related (e.g. employment checks) information have been developed and provided for recipients employing personal assistants and one is being developed for those who use other sources of self-directed support
- The Council highly recommends Criminal Record Bureau (CRB) checks to recipients and undertakes to fund them if required. Analysis of low take-up of CRB checks indicates this is frequently in the case of family members providing the support to the recipient.
- Halton Adult Learning & Skills (HALS) Service was inspected for the first time by Ofsted (June 2009) and was awarded an overall Good standard (Grade 2). Item 23 of the inspection report said 'Procedures for safeguarding learners meet current government requirements. Tutors have received training. Halton Adult Learning Service (HALS) requires all tutors to have appropriate background checks, and the council's personnel department monitor these. HALS has identified the need to plan for the implementation of the most recent legislation.
- The contract specification for mainstream Advocacy and Service User Involvement service was reviewed and made more robust. Further work is in progress to build on developments.

Cheshire Constabulary

- An additional Detective Inspector post has been created in the Northern Public Protection Unit (PPU) of Cheshire Constabulary, thereby providing a dedicated DI for Halton instead of covering the Halton & Warrington area. A dedicated Vulnerable Adults Officer has also been appointed at Detective Constable level. This increase in resources provides further resilience in the service and improves the Constabulary's capacity to respond to reported crimes.
- The PPU formally responded to recommendations of Halton Borough Council's 2008 Scrutiny Review of the S/G service

Riverside College

- Safeguarding Adults Policy & Procedure reviewed and updated [completed January 2010], in consultation with Adult Protection Coordinator
- The College's Safeguarding Lead attended the Train the Trainer and Referrers training courses to enable him to ensure the safeguarding training he delivers to college staff is current.



Halton and St Helens

RAISING AWARENESS

TRAINING AND DEVELOPMENT

Our training and development plans aim to provide for a skilled, informed workforce (of both staff and volunteers) and community that recognises abuse and its signs, is enabled to prevent abuse where possible, knows what to do when abuse happens or concerns arise, and are supported and enabled to fulfil their responsibilities. Training and development provides a basis for ensuring that vulnerable people are effectively safeguarded, whilst facilitating independence and ensuring a timely and appropriate response when allegations or concerns are raised.

Achievements and developments 2009/10:

- Delivered, developed and evaluated a suite of courses, which are in-line with National Minimum Standards and Skills for Care. Courses continued to be commissioned by Halton Borough Council in consultation with partner agencies and included the following courses:
 - Multi-agency courses for all agencies and sectors:
 - Basic Awareness - half-day courses
 - Referrers - one day courses
 - Train the trainer - 2-day courses
 - Multi-agency for those participating in investigations:
 - Investigators training - 2 day for courses Council managers, social work practitioners and identified NHS Trust staff

TRAINING & DEVELOPMENT CASE STUDY

Mr S is a 55-year-old gentleman with a severe disability. Mr S's communication, mobility and cognition had deteriorated drastically, Mr S also started to present with challenging aggressive behaviour towards his wife. A VAA was triggered as Mrs S was giving Mr S solid foods against clinical advice. The VAA meeting had a range of agencies involved. The input from professionals working with Mr and Mrs S ensured that all relevant training, support, advice and guidance was provided, a package of care was implemented, the conclusion and recommendations has improved the quality of Mr S's life and enable Mrs S to feel more supported by a wider range of professionals.



- * Single agency course for managers with lead responsibility for planning, chairing and follow up of Safeguarding Adults meetings:
 - Chairing Skills training - 1 day course for HBC Adults and Community Managers
- Customized 'in house' Basic Awareness training has been provided for Volunteer Drivers, as part of a SAFER Training course that was delivered to a total of 189 delegates (including volunteer drivers) over 12 full day courses (up to 6/10/09), covering a number of topics including safeguarding adults. Further training dates were planned for 2009. Those delivering the training undertook the two day Train the Trainer course.
- Voluntary sector training needs were considered (with Halton Voluntary Action (HVA) Training and Voluntary Sector Counselling Partnership Lead who confirmed that courses available would meet training needs and no dedicated sessions appeared to be need at that time. A Third Sector Safeguarding Event is however being planned for May 2010.
- Consideration was given to whether customised training is needed for the Local Involvement Network (LINKs) Board.
- Extended the Investigators course target group to incorporate (4) NHS Trusts' staff who participate in investigations. Reviewed learning outcomes & course content in consultation with the Trusts. Subsequently reviewed the experience of participants after attending courses in October 2009 and February 2010.
- Training Manager and Safeguarding Coordinator met with newly appointed PCT Safeguarding Coordinator to go through training course framework, course content, target groups, information available, training providers, induction, the Council offered to provide dedicated training for PCT staff if necessary to meet initial demand.
- Increased number of Basic Awareness courses provided throughout the year, to meet growth in demand
- Train the Trainer course launched to provide full and comprehensive grounding and ongoing support for people with responsibility to cascade basic awareness training
- Reviewed course outline and objectives for courses related to Challenging Behaviours and revised/updated/generic Restrictive Physical Interventions Policy, Procedure and Guidance.
- Improved attendance data to use as a basis for analysis follow up where required
- Followed up non-attendance e.g. with schools, college and housing providers
- Elected Members continue to be invited to Basic Awareness training through the Members' Bulletin (from April 2010)
- Police committed to providing input on our increased number of Referrers and Investigators courses.
- Content and format of Referrers and Investigators courses reviewed with regard to Police input
- Training course details and other information sent to a children's home provider as part of an action plan resulting from a breach of conditions of registration in providing for a young person aged over 18 years
- Mental Capacity Act 2005 residential training set: two courses provided specifically for the residential sector, aimed at key staff and area/senior managers within the organisations. Identified the need for the courses to demonstrate links to Safeguarding and Dignity in Care
- Approximately 24 awareness raising sessions have been held on an ongoing basis with staff across service areas and partner agencies.

Basic Awareness training attendance and overall attendance has increased year on year since 2007, as follows:

Basic Awareness **training attendance** and overall attendance has **increased year on year since 2007**, as follows:

	2007-08 Number attended	2008-09 Number attended	2009-10 Number attended
Basic Awareness course attendance	97	480	613
TOTAL training course attendance	305	663	884

PUBLICITY & COMMUNICATIONS

Communicating important messages about abuse, safeguarding and dignity continues to be one of the most important aspects of our work. It can:

- Raise awareness of what constitutes abusive behaviour and what is and is not acceptable
- Help people to know what they can do to prevent abuse from happening and what to do if they believe someone is being abused
- Support and empower vulnerable people to keep safe and to seek help when abuse happens
- Assist other people, including paid and unpaid carers, in fulfilling their responsibilities

Achievements and developments 2009/10:

- Leaflets updated, re-branded and created:
 - * Easy read version of public/service user information leaflet revised, in consultation with people
 - * Easy read Hate Crime leaflet produced
 - * Public information leaflet updated and re-branded in consultation with Halton OPEN (Older People's Empowerment Network)
 - * Staff/Volunteer leaflet updated and re-branded

- Distribution list expanded and Community Development Officers distribute training adverts and publicity materials to community groups and organizations
- Safeguarding leaflet added to demonstration/information packs taken to prospective clients of the Community Alarm (Lifeline) service and their carers/families
- Safeguarding embedded in booklets intended for Direct Payments/ Individual Budget recipients
- Safeguarding and Dignity in Care information placed in (Halton Borough Council Elected Members' Bulletin)
- Articles published in Health 'e' Times published by (Halton Voluntary Action) and Halton Borough Council staff magazines
- Carers' Week - displays of publicity and information sited at a number of venues throughout the week
- Disability Awareness Day - displays of publicity and information
- Internet webpage content revised links reviewed and refreshed to make it more user friendly and helpful, especially for the general public. Information about the Safeguarding Adults Board added and accessibility improved including new short web address and search engine options.

PUBLICITY & COMMUNICATIONS CASE STUDY

A referral was made to Older People's Team after Mrs K had received a bank statement at the residential home where she was residing (at that time was on a temporary basis). The bank statement identified a discrepancy as a payment was being made to SKY TV something that the service user didn't have in her home. A safeguarding investigation followed and identified that the granddaughter had been using her grandmother's address to obtain credit cards, B.T. phone, SKY T.V. etc. The social worker undertook a number of joint visits with the police, and Mrs K was supported to give video evidence, which resulted in the police being able to take the case forward for prosecution. It went to court and Mrs K's granddaughter pleaded guilty, sentenced to 9 months imprisonment suspended for 2 years but has to do 240 hours community service.



QUALITY AND PERFORMANCE

The Safeguarding Adults Board reports into the Safer Halton Partnership (<http://www.haltonpartnership.net/site/>), where support for safeguarding activities has continued to be demonstrated.

The Annual Report of the Safeguarding Adults Board is also presented to and scrutinised by the Safer Halton and Healthy Halton Policy and Performance Boards of Elected Members, and to the Domestic Abuse Forum and Learning Disabilities Partnership Board.

One of the main mechanisms for checking standards of safeguarding/ adult protection work in operation is individual agency line management and supervision.

The multi-agency Quality and Performance sub-group also has a remit to consider the quality of the service, make recommendations for improvement and monitor action plans, including those arising from cases that have given rise to concern either locally or in other areas.

Achievements and developments 2009/10:

- Halton Borough Council agreed a local Safeguarding Performance Indicator (PI) within the Service Plan (2010-11). The final outturn figure for all assessments in alleged abuse cases within 28 days is 69% and this constitutes the baseline for 2009/10. Targets have been agreed as follows:
 - 2010/11 - 75%
 - 2011/12 - 80%
 - 2012/13 - 85%
- More frequent, regular reports will be taken to the Safer Halton and Healthy Halton PPBs from early 2010
- Partner agencies are encouraged to report regularly to appropriate Boards/Committees/
- Sub-group:
 - * Membership reviewed Feb 2010
 - * Dignity in Care Coordinator & PCT Senior Commissioning Manager joined
 - * Group terms of reference reviewed subsequently incorporated the remits of two other sub-groups

- Case audit tool developed and implemented, using peer audit approach
- Agency audit tool being developed and implementation discussed
- Focus groups set up for potential and existing service users and carers, to review safeguarding arrangements, Dignity in Care and Telecare
- In 2009, an external audit of safeguarding within Halton Borough Council Adult Social Care services was commissioned. The audit looked at a small sample of cases in detail, and focused both on Safeguarding Vulnerable Adults and, where there were child protection concerns, the interface issues between Children's Services and Adults' Services

The purpose of the audit of the Safeguarding Adults Service was to improve safeguarding arrangements for vulnerable adults by reviewing current practice and making recommendations for change. All recommendations were progressed through an action plan and will be monitored through the Council Safeguarding Performance Group.

- The National Charity Coordinated Action Against Domestic Abuse (CAADA) undertook a Quality Assurance review of the local MARAC performance and procedures as the national monitoring body of these procedures. Subsequently, the MARAC Operating and Information Sharing Protocol have been reviewed to address the key areas for action contained within the audit.
- Devised templates - meeting minutes and investigating officer report, to provide quality standards and good practice guidance
- Commissioning - Contractual agreements and service specifications applied to substance misuse services and advocacy services have recently been reviewed and now incorporate further standards and measurable indicators relating specifically to safeguarding vulnerable adults. Service standards include protection from abuse, compliance with legislation, training, staff recruitment and selection, and supervision. Providers are specifically required to ensure that staff are trained to recognise safeguarding issues. All contracts now include Dignity in Care and register at least two Dignity Champions
- Learning from inquiries - Halton responded to the recommendation made in the joint Health Service and Local Government Ombudsmen report regarding complaints made by Mencap on behalf of the families of six people with learning disabilities who died between 2003-5 whilst in NHS or Local Authority care. An action plan was developed, which responded to each of the Ombudsmen's decisions.

QUALITY AND PERFORMANCE CASE STUDY

A is a 20 year old man with a severe learning disability, and behaviours that challenge services. He lives with two other tenants in a supported tenancy out of area. The allegation was of drinks being withheld as a punishment from A and that he was shouted at inappropriately by a staff member. This was not reported to LA until after the disciplinary had taken place and the staff member had been dismissed. Working closely with CQC inspector to monitor the home, and undertake spot visits has increased the quality of the recording processes, and resulted in improvements to care planning, and the overall ethos of the staff towards this young man, and resulted in a better working partnership with the home manager. A's Person Centred Plan and Health Action Plan are being reviewed as an agreed outcome along with a resolution to an outstanding financial matter following the improved relationship with the manager.



POLICIES, PROCEDURES & GUIDANCE

Policies, procedures and guidance provide a sound value base, consistent and considered approach, facilitate compliance with statutory requirements and good practice standards, support practice, line management and supervision and provide an operational framework. They should contribute to effective service provision to vulnerable people and carers, preventing abuse from occurring and supporting us in dealing with it effectively when it occurs.

Safeguarding adults who might be vulnerable to abuse is everyone's business and all organisations should take steps to prevent abuse from happening and ensure an appropriate response when abuse happens or is suspected. It is therefore important to recognise not only the place of safeguarding specific policies, procedures and guidance, but also those that are safeguarding related i.e. potentially impact on the organisation's ability to safeguard, for example restrictive physical interventions, exclusion from services, recruitment and selection, supervision, training, 'whistle-blowing'.

Both types should be commensurate with the overarching document 'Safeguarding Adults in Halton - Inter-agency Policy, Procedures and Guidance'.

All Halton's inter-agency and public Safeguarding Adults documents are available on the Internet webpage:
www.halton.gov.uk/safeguardingadults

Achievements and developments 2009/10:

- New sub-group set up, focusing on Safeguarding specific and related policies and procedures. Terms of reference and work plan devised
- Audit tool developed for assessing the quality of safeguarding specific and safeguarding related policies and procedures and the organisation's overarching framework for linking policies and procedures to safeguarding arrangements
- 'Adult Protection in Halton - Inter-agency Policy, Procedures and Guidance' reviewed and updated, taking into account learning, comments and recent changes to statute and good practice guidance. Reviewed distribution.
- Halton Borough Council (HBC) Policy 'Sexual Health and Intimate Relationships' reviewed & updated.
- Anti-Bullying Policy & Procedure reviewed and updated.
- Professional Boundaries document - distributed in the Council directorates
- Halton's Dignity in Care Action Plan and Dignity Charter implemented multi-agency via Board and Halton's Dignity Champions Network



POLICIES, PROCEDURES & GUIDANCE
CASE STUDY

Carers raised concerns with regard to Mrs H's front door being left open throughout the day. Mrs H's sons suspected money had been going missing from the property. Whilst paid carers were at the property, an unknown woman entered the property claiming to be looking for the alley gate key. Mrs H had been reluctant to lock the door but all felt that she was vulnerable and placing carers in compromising position if monies were going missing. Mrs H left her front door open as she was not mobile and enjoyed watching people pass by and there were suspicions that passers-by were coming in to her home uninvited. In order to ensure Mrs H's wishes of keeping her door open, a door sensor mat was put in situ as a deterrent and the local community officer agreed to check on the property more regularly and she and her son agreed that she should not have as much money in her purse. There were no more reports of money going missing, and Mr H also put a lock on the middle door in order that it could still be left slightly ajar and distributed keys to relevant people.



LOOKING FORWARD 2010-11

Appendix 2 identifies the key actions to tackle in 2010-11, however a number are a priority including:

- Developing and implementing our Communications Plan so that members of the Public have an increased awareness of safeguarding adults and seek help to prevent abuse or where abuse is occurring and know how and where to report it.
- Ensure that all our reviewed Policies and Procedures are firmly embedded into practice.
- The Board continues to provide a leadership role, challenges and exposes poor practice.
- Promote and encourage partnership working and publicise models of good practice.
- Review our outcomes and priorities set in 2009-10

APPENDIX 1

HALTON SAFEGUARDING ADULTS BOARD TERMS OF REFERENCE

1.0 PURPOSE

The purpose of Halton's Safeguarding Adults Board (SAB) is to:

- 1.1 Act as a multi-agency partnership board of lead officers and key representatives, which takes strategic decisions aimed at safeguarding vulnerable adults in Halton.
- 1.2 Determine and implement policy, co-ordinate activity between agencies, facilitate training and monitor, review and evaluate the safeguarding adults/adult protection service.
- 1.3 Promote inter-agency cooperation, to encourage and help develop effective working relationships between different services and agencies, based on mutual understanding and trust
- 1.4 Develop and sustain a high level of commitment to the protection of vulnerable adults.
- 1.5 Ensure the development of services to support people from hard to reach groups
* The terms "vulnerable" and "adult" are as defined in "Adult Protection in Halton - Inter-agency Policy, Procedures & Guidance" available at www.halton.gov.uk/adultprotection or www.halton.gov.uk/safeguardingadults.

2.0 RESPONSIBILITY, ACCOUNTABILITY and REPORTING

- 2.1 Local agencies should work together within the overall framework of Department of Health guidance on joint working. The lead agency with responsibility for the establishment and effective working of the SAB is Halton Borough Council's Adult and Community Directorate.
- 2.2 All agencies should designate a lead officer and, if necessary, a nominated other representative.
- 2.3 All main constituent agencies are responsible for contributing fully and effectively to the work of the SAB.
- 2.4 The SAB reports to the Community Safety Partnership through the Safer Halton Partnership, which is chaired by the Chief Executive of Halton Borough Council and the Superintendent of Halton Police.
- 2.5 A formal report of the SAB will be compiled annually and presented to the Safer Halton Partnership, and other forums by agreement.

3.0 FUNCTIONS

The functions of the SAB are to:

- 3.1 Ensure that there is a level of agreement and understanding across agencies, about operational definitions and thresholds for intervention.
- 3.2 Develop, monitor, review and evaluate the implementation and effectiveness of Halton's SAB's work plan and sub-groups' work plans for the implementation of strategic decisions and policy.

- 3.3 Develop and keep under review, local policies, procedures, systems and protocols for inter-agency work to safeguard vulnerable adults.
- 3.4 Audit and evaluate the implementation and effectiveness of the safeguarding adults service and associated policies, procedures, systems and protocols.
- 3.5 Promote agreed policies, procedures and protocols to managers, staff, volunteers, service users and the public.
- 3.6 Arrange for information to be gathered and used in the evaluation of the safeguarding adults/adult protection service, through performance assessment and monitoring systems and through consultation with stakeholders.
- 3.7 Develop a training and development strategy, incorporating joint training where appropriate.
- 3.8 Facilitate training and ensure its delivery and evaluation, to help improve the quality of adult protection and inter-agency working.
- 3.9 Ensure that service developments take into account the needs of all vulnerable adults, regardless of their age, gender, race, sexuality, disability, religion or belief, who may experience discrimination and disadvantage.
- 3.10 Ensure that service developments take into account all relevant current legislation, including the Human Rights Act 1998.
- 3.11 Review national guidance and research information as it is issued, consider the implications and make recommendations for local implementation. Action and monitor such implementation.
- 3.12 Respond to consultation exercises where appropriate.
- 3.13 Commission serious case reviews where a vulnerable adult has died or, in certain circumstances, is seriously harmed, and abuse or neglect are confirmed or suspected, acting in accordance with Halton's Serious Case Review Procedure.
- 13.14 Improve local ways of working in the light of knowledge gained through national and local experience, research, Serious Case Reviews, internal and external inquiries, investigations and case studies. Ensure that practitioners benefit from learning and development attained through the SAB and that lessons learnt are shared, understood and acted upon.
- 3.15 Link with other agencies, sectors and forums that have a responsibility for protecting those at risk, such as Halton's Safeguarding Children Board, Domestic Abuse Forum and the Safer Halton Partnership, to ensure that both adult and child protection arrangements benefit from the learning, developments and work undertaken by the other, where appropriate.
- 3.16 Raise awareness within the wider community, of the need to safeguard vulnerable adults, explain how the community can contribute to this process, and facilitate such involvement.
- 3.17 Support and ensure the implementation of the development of quality standards for vulnerable adults, both locally and nationally.

3.18 Carry out an annual audit of alleged adult abuse and adult protection in Halton, through analysis of data and outcomes; report these and forecast developments, through the Annual Report of the Safeguarding Adults Board.

4.0 MEETINGS

4.1 The SAB will meet on a bi-monthly basis, with the schedule of meetings published in advance for a year. Meetings can be called more frequently as circumstances dictate.

4.2 The agenda will be prepared by the Adult Protection Coordinator, in consultation with the Chair of the SAB, and will be issued to all members at least one week before the meeting takes place.

4.3 Meeting agendas will progress the work plan.

4.4 All SAB members will be able to bring appropriate items to the agenda, through the Chairperson or Adult Protection Coordinator. Standing items on the agenda will be by agreement of SAB members.

4.5 The chairperson will arrange for minutes of meetings to be taken and a copy of the minutes sent to each SAB member and other people by agreement, including the Chairs of the Safer Halton Partnership, Practitioners Group and senior managers of public sector partner agencies.

4.6 The accuracy of minutes will be checked at the subsequent meeting.

5.0 SUB GROUPS

5.1 Sub-groups are currently as follows:

- Publicity & Communication
- Training and Development
- Performance & Quality
- Policy & Procedures
- Practitioners Network - in process of being set up
- Safer Recruitment - in process of being set up•

5.2 Other sub-groups may be set up for particular purposes on a short term or standing basis, by agreement of the SAB, to support the work of the SAB, for example:

- Carry out specific tasks;
- Provide specialist advice;
- Represent a defined geographical area within Halton's boundaries.

5.3 All groups working under the auspices of the SAB will be established by the SAB, report to the SAB, and work to agreed terms of reference and work plans or a specific, stated purpose and lines of reporting to the SAB.

6.0 CHAIRING

6.1 The SAB will be chaired by a senior manager of Halton Borough Council's Adults and Community Directorate, as the agency with lead responsibility for coordinating the arrangements for safeguarding vulnerable adults/adult protection in Halton.

7.0 ATTENDANCE CODE OF CONDUCT

Members of the SAB make the following undertakings:

- 7.1 To demonstrate a commitment to attend the meetings.
- 7.2 To submit apologies if they cannot attend.
- 7.3 To seek to arrange for an agreed representative to attend if the SAB member is unable to do so.
- 7.4 To send any agenda items to the chairperson at least two weeks before the meeting. Urgent items that arise outside this timescale can be raised through any other business on the agenda or as agreed by SAB members.
- 7.5 To feed back to their department/organisation/agency/sector and canvas views to bring to meetings where appropriate.
- 7.6 To act as a conduit between the SAB and the department/organization/agency/sector they represent or whose views they reflect, to further the adoption of policies, procedures, guidance, protocols and other items endorsed by the SAB.
- 7.7 To listen to SAB members and other attendees and address comments to all attending.
- 7.8 Comments made by anyone attending the SAB, that contribute to any form of discrimination in respect of the age, gender, race, sexuality, disability, religion or belief of others, or the bullying or victimisation of others, are not acceptable and will be challenged by the chairperson and other SAB members.

8.0 MEMBERSHIP

- 8.1 In order to carry out its responsibilities effectively, the SAB will seek to have members from each of the main agencies in the public, private and voluntary sectors responsible for working together to safeguard vulnerable adults.
- 8.2 Members' roles and seniority will enable them to contribute to developing and maintaining strong and effective systems, policies, procedures and protocols.
- 8.3 The SAB will arrange to involve others in its work as needed, where they have a relevant interest.
- 8.4 Membership is detailed in a separate table that reflects changes and is routinely updated.

9.0 REFERENCES

- 9.1
 - No Secrets - Department of Health - 2000
 - Adult Protection in Halton - Inter-Agency Policy, Procedures and Guidance
 - Working Together to Safeguard Children - Department of Health, Home Office, DfES 1999

DATE TERMS OF REFERENCE REVIEWED: March 2010
 TERMS OF REFERENCE REVIEW DATE: March 2011

APPENDIX 2

HALTON SAFEGUARDING ADULTS BOARD WORKPLAN 2010-11

Key to RAG (Red, Amber, Green) Ratings



Progress is good. On target to deliver objective.



Progress not as expected. May affect delivery of objectives.



Significant issues affecting progress. Not on target and/or objective unlikely to be delivered

Halton's Safeguarding Adults Board contributes to the objectives of the Halton Strategic Partnership's Sustainable Community Strategy. The Board will do this during 2010-11 by focussing on the following key priorities:

Priority 1: To safeguard and promote the welfare and dignity of vulnerable adults

Priority 2: To promote the awareness of vulnerable adults and their right to be safe in local communities

Priority 3: To ensure there is a strong multi-agency response to the safety, wellbeing and dignity of vulnerable adults

Priority 4: To equip staff and partner agencies with the necessary tools to both safeguard vulnerable adults and ensure their dignity is respected

Relevant Priority	KEY AIMS	ACTIONS	RESPONSIBLE BODY/LEAD		
1, 3	1. Ensure that an effective partnership structure is in place to safeguard and promote the dignity of vulnerable adults in Halton	Review the Safeguarding Adults Board (SAB) and sub-group structure, reporting mechanisms, membership, terms of reference and evaluation of work plans annually. Ensure they are relevant to meeting the Board's responsibilities and objectives	Safeguarding Adults Board (SAB)	Completed Jan-Apr 2010 Feb 2011	★
		Provide a dedicated training event for the Safeguarding Adults Board	Training & Development Sub-group	Sept 2010	★
		Ensure access to E-learning for the Safer Halton Partnership	Training & Development Sub-group	Sept 2010	★
		Review existing reporting mechanisms to ensure clear lines of accountability of the Board, its member partners and sub-groups	Safeguarding Adults Board	Completed Jan-Apr 2010 Feb 2011	★
1, 3	2. Formalise closer alignment with related services, including domestic abuse, dignity, mental capacity, personalisation/self-directed support, safeguarding children, customer care, community safety and hate crime.	Establish a meetings structure and agenda to strengthen working relationships and agree actions arising from shared priorities	Safeguarding Adults Board	July 2010	★
		Arrange a joint safeguarding/dignity awareness raising event	Publicity & Communications sub-group	Jan 2011	★

Relevant Priority	KEY AIMS	ACTIONS	RESPONSIBLE BODY/LEAD			
2	3.	Strengthen the contribution from service users, carers and other members of the public in informing the Board's work in an effective and meaningful way.	Establish an engagement programme, incorporating the Board's sub-groups in accordance with their respective terms of reference.	Safeguarding Adults Board	December 2010	N/A - new objective not yet started - build into sub-group work plans
			Strengthen mainstream Advocacy Services to ensure the needs of people with limited or no capacity for representation are particularly addressed	Joint Commissioning Manager for older People	Sept 2010	★
			Consider how performance of advocacy services in relation to capacity can be reported	Quality & Performance Sub-group	August 2010	★
			Review use and provision of the Independent Mental Capacity Advocate (IMCA) service within Halton	Mental Capacity Act Subgroup (Lindsay Smith report to SAB)	December 2010	N/A - new objective not yet started - build into sub-group work plan
			Improve the way in which we ensure that available learning is recorded, shared, informs and drives service developments: <ul style="list-style-type: none"> From the experiences of and outcomes for people who use safeguarding services From the experiences of carers From events occurring both locally, and in other localities, including Serious Case Reviews and Serious untoward Incidents 	Quality & Performance Sub-group	December 2010	★
			Report to the Board on implementation of Halton's Prevention and Early Intervention Strategy 2010-15, which aims to support people to remain active, develop improved social networks and maintain their own health, safety and well-being.	Sue Wallace-Bonner	August 2010	★
			Ensure that learning gathered from awareness raising events provided to date is reported and acted upon	Publicity & Communications Sub-group	August 2010	★
1, 3, 4	4.	Ensure clear responsibilities and governance arrangements to promote safeguarding which is person centred and integral to operational practice	Develop and review safeguarding adults specific policies, procedures and protocols, ensuring they are fit for purpose.	Policies & Procedures Sub-group	August 2010 and ongoing Frequency as stated in documents	★
			Make provision for safeguarding adults related policies, procedures and protocols and Dignity Charter to be impact assessed and audited	Policies & Procedures Sub-group	August 2010	★
			Provide a robust quality and performance framework, which can audit and report on service quality and monitor action plans arising	Quality & Performance Sub-group	December 2010	★
			Establish a process that scrutinises commissioning arrangements, aimed at ensuring robust standards for the provision of safeguarding and dignity	Quality & Performance Sub-group	End December 2010	N/A - new objective not yet started- build into sub-group work plan
			Build into the Board's performance framework arrangements to ensure that individuals who use safeguarding services are fully involved in decision making and in affecting outcomes	Quality & Performance Sub-group	December 2010	N/A - new objective not yet started- build into sub-group work plan

Relevant Priority	KEY AIMS	ACTIONS	RESPONSIBLE BODY/LEAD		
4	5. Ensure a properly vetted and trained workforce of staff and volunteers to ensure that everyone involved in the care of vulnerable adults has the knowledge and skills to protect them	Set up a joint Safer Recruitment sub-group with Safeguarding Children's services	Safer Recruitment sub-group Chair & Safeguarding Adults Coordinator	Sept 2010	★
		Implement a multi-agency training and development plan, to ensure the delivery of training that is fit for purpose, to meet the training needs of both the general population of staff and volunteers and groups with specific responsibilities	Training & Development Sub-group	Ongoing	★
		Evaluate the standard of training delivery	Quality & Performance Sub-group	September 2010 & Ongoing	★
		Monitor training attendance and non-attendance and take follow up action where attendance level is unsatisfactory	Training & Development Sub-group	Sept 2010 and half yearly	★
		Promote training courses to appropriate target groups, included dedicated sessions/courses where indicated appropriate	Training & Development Sub-group	Ongoing	★
1, 4	6. Embed safeguarding arrangements in the development of self-directed support	Map out local work already undertaken and safeguards in place.	SDS & S/G Task Group	Completed	★
		Develop an Action Plan that addresses gaps and further developments needed	SDS & S/G Task Group	Completed	★
		Ensure options for accredited services to be accessed by people who want to use individual budgets or direct payments to secure personal assistants	SDS & S/G Task Group	Completed & Ongoing	★
2, 4	7. Increase awareness of abuse among all stakeholders	Review, develop and implement the publicity and communications plan. To include: <ul style="list-style-type: none"> Raising awareness of the rights of vulnerable people Raising awareness of the potential risks they might experience Preventative measures, What individuals should do if they suspect abuse against an individual in their communities, and Support mechanisms available to those who experience abuse. 	Publicity & Communications Sub-group	July 2010 & ongoing	★
3, 4	8. Engage with practitioners and operational managers, to develop and sustain a high level of commitment and good practice in: <ul style="list-style-type: none"> Safeguarding vulnerable adults Maintaining personal dignity and respect 	Provide and develop a practitioners/ operational managers network and forums, with a remit to: <ul style="list-style-type: none"> Promote and support inter-agency cooperation, understanding and learning, based on mutual understanding and trust Develop effective working relationships between different services and agencies Provide a conduit for practitioners' and operational managers' experience, knowledge and learning to inform local service developments, quality standards and work plans Facilitate reflective practice Strengthen links with services related to Safeguarding Adults e.g. Dignity, Mental Capacity & DoLS, Domestic Abuse, Community Safety, Consumer Protection 	Practitioners Network Set-up Group	Oct 2010	●

APPENDIX 3

HALTON SAFEGUARDING ADULTS BOARD MEMBERSHIP 31 MARCH 2010

The Board's membership includes strategic level representatives from the following agencies and forums:

- Halton Borough Council
- Halton Safeguarding Children Board
- Domestic Abuse Forum
- Learning Disability Partnership Board
- Halton Community Safety
- Warrington & Halton Hospitals NHS Trust
- St Helens and Knowsley Hospitals NHS Trust
- NHS Halton & St Helens Primary Care NHS Trust
 - Safeguarding Adults
 - Commissioning
- 5 Boroughs Partnership NHS Trust
- Cheshire Constabulary:
 - Headquarters
 - Northern Public Protection Unit
- Cheshire Fire & Rescue Service
- Riverside College
- Probation Service and MAPPA (Multi-Agency Public Protection Arrangements)
- Consumer Protection / Trading Standards
- Housing Trusts/Residential Social Landlords
- Halton Voluntary Action
- Age Concern
- Care Home Services
- Community Day Services
- Domiciliary Care Services
- Dignity in Care
- Care Quality Commission (Regulator/Inspectorate)
- Advocacy services
- A Carer is also a Board member

APPENDIX 4

USEFUL INFORMATION

- 'Safeguarding Adults in Halton - Inter-agency Policy, Procedures and Guidance' Version 7 Revised 2010
- Other policies, procedures, protocols, practice guidance, leaflets, training course details and useful links, etc:

Available on the Halton Borough Council website:

Internet: www.halton.gov.uk/safeguardingadults

- "No Secrets: Guidance on developing and implementing multi-agency policies and procedures to protect vulnerable adults from abuse" Home Office and Department of Health 2000:

Available on the Department of Health website: www.dh.gov.uk

- "Safeguarding Adults: A National Framework of Standards for good practice and outcomes in adult protection work" Association of Directors of Social Services (ADSS) Safeguarding Adults Network 2005:

Available on the Association of Directors of Adult Social Services (ADASS) website at: www.adss.org.uk

- Information on the Vetting & Barring Scheme:

Available on the Independent Safeguarding Authority website:

<http://www.isa-gov.org.uk/Default.aspx?page=414>

Reports of Inspections of Adult Social Care, including Safeguarding Adults services can be found on the Care Quality Commission (CQC) website:

<http://www.cqc.org.uk/publications>

Contact Details:

Julie Hunt
Safeguarding Adult's Co-ordinator
Runcorn Town Hall
Heath Road, Runcorn WA7 5TD
Email: julie.hunt@halton.gov.uk



This information can be obtained in Braille, audio, British Sign Language (BSL), large print formats and in other languages upon request - please contact us 0303 333 4300

REPORT TO: Safer Policy & Performance Board
DATE: 21 September 2010
REPORTING OFFICER: Strategic Director, Adults & Community
SUBJECT: Joint Trading Standards Service
WARDS: All

1.0 PURPOSE OF REPORT

- 1.1 To inform and update the Board of the performance and activities of the joint Trading Standards Service between Warrington and Halton Borough Council.

2.0 RECOMMENDATION: That the Policy and Performance Board

- 2.1
- 1) **Receive the report**
 - 2) **Consider the progress and performance information and raise any questions or points for clarification**
 - 3) **Highlight any areas of interest and/or concern where further information is to be reported at a future meeting of the Policy and Performance Board**

3.0 SUPPORTING INFORMATION

3.1 Background

- 3.1.1 This is the second report giving an outline of the performance of the joint Warrington and Halton Trading Standards Service. Joint arrangements commenced on 1st December 2008 and the first report was presented to the Board on 21 September 2009. This report covers the following 12 months to date and the performance detailed below is referenced primarily against the objectives contained in the Service Specification.

- 3.1.2 In the past 12 months, against a background of a recession that has brought fresh challenges our key objective is still to prioritise our activities to those which have the greatest impact on health, wellbeing, community safety and economic prosperity. This requires us to balance the longer term goals of tackling childhood obesity and alcohol harm against more reactive, short term demands of, for example, rogue traders preying on vulnerable residents.

- 3.1.3 In the previous report reference was made to the internal restructuring of the joint service in order to create a single joint service able to meet these challenges. Since then Warrington BC

has embarked upon a Council wide reorganisation that has led to very significant further restructuring of the joint service. This restructure has led to the appointment of the former head of the joint TS service, Peter Astley, to the post of Public Protection Manager covering not just the joint service but environmental health and licensing functions as well. Three service managers report directly to the Public Protection Manager. The Consumer & Business Protection Manager (Roger Mapleson) is responsible for most of the functions delivered by the joint service but the Community Safety and Licensing Manager (Dave Watson) is responsible for Under Age Sales and Doorstep Crime.

3.1.4 This restructuring process is now largely complete with new teams substantially in place since the end of May 2010. This will strengthen our ability to deliver key community objectives.

3.2 **Consumer Engagement**

3.2.1 **Consumer Advice**

In the first 6 months of this year **1640** Halton cases have been dealt with in partnership with Consumer Direct. This is an increase of **17%** over the same period in 2009. Last year a rise of **2.7%** was reported indicating that public awareness of the service is rising and access improving. User surveys show that satisfaction with the service is high for 2009/10 with **92%** of users indicating that they are either very or fairly satisfied with the service. First quarter results for this measure for 2010/11 are **100%**.

3.2.2 **Community Events**

Staff from the joint service supported the Halton BC stand at 2010 Disability Awareness Day at Walton in early July. The stand was shared with CAB and the Welfare team. This year's event was attended by over 28,000 people. Joint service staff were able to give out consumer advice and take the opportunity to promote iCAN (see below). In addition a variety of events have been attended in Halton to engage with the community specifically to promote iCAN (see below) but also the service in general.

3.2.3 **Consumer Education**

The joint service supported Cavendish School, Runcorn in this year's consumer challenge quiz. This is a national competition run by Trading Standards for children with moderate learning difficulties to raise awareness of consumer issues. Cavendish school won their local heats to earn them a place at the finals in Edinburgh in June where they were supported by a member of the joint service staff. This was reported on the Runcorn and Widnes Weekly News website on 9/8/2010.

<http://www.runcornandwidnesweeklynews.co.uk/runcorn-widnes-news/runcorn-widnes-local-news/2010/08/09/quiz-team-from-cavendish-school-on-lincoln-road-runcorn-in-national-quiz-final-55368-27027772/>

3.2.4 ICAN

iCAN is the Warrington & Halton Consumer Alert Network and is an extremely powerful communications tool that can telephone, e-mail and text it's members providing targeted, relevant information to residents on a wide variety issues relating to doorstep crime, phone, e-mail and postal scams, rogue traders and other issues. iCAN also provides information and advice on more general consumer issues with the objective of empowering consumers. iCAN members are able to disseminate information within their communities and are also encouraged to feedback information and intelligence on untoward activity witnessed in their area.

iCAN serves 2 key purposes, one to provide information swiftly, direct to the community to warn and protect, the second to facilitate communication from members of intelligence that has on a number of occasions led to direct intervention by Trading Standards and/or Police and the apprehension of perpetrators. iCAN members are the eyes and ears of Trading Standards in the Community.

There are **499** Halton members (as at 11th August 2010). This is an **84%** increase on the figure reported this time last year. This is primarily due to significant work by the iCAN coordinator who has attended a wide variety of events in Halton in recent months. These include:

- Community Safety Respect Weeks in Riverside, Kingsway and Mersey
- Neighbourhood engagement team meeting
- Carers forum event

A strong relationship has been formed with the Safer Halton's Partnership. The Partnership has been instrumental in facilitating our attendance at events in Halton and PCSOs have been actively recruiting members.

A survey of Halton iCAN members was completed in February this year which showed that:

- **74%** of members (versus **67%** of non members) feel very or fairly well informed about their rights as a consumer.
- **71%** of members (v **59%** of non members feel very or fairly well protected from unfair trading practices

All Halton councillors are members of iCAN so that they will receive,

by e-mail, all the broadcasts that go out to constituents. There is also a standing invitation to contact the service if they have information or wish to raise any issues.

iCAN case study

Down's Syndrome charity clothing collection scam

There has been a recent upsurge in the number of doorstep clothing collections taking place up and down the country. The collection of unused/unwanted clothing and other textiles and household goods as a way for charities to raise money has been around for a long time. A recent increase in the value of scrap textile products has meant that charities that traditionally sought these goods now have to compete with many other charities and also with non charitable, commercial operators. Leaflets requesting unwanted clothing are dropping through doors with increasing frequency and inevitably some are not what they seem.

Recently leaflets requesting clothing were delivered to homes in Halton claiming that the money raised would go to a charity supporting Down's Syndrome. One leaflet was delivered to the home of an iCAN member who was suspicious and checked with the charity in question. It transpired that this charity did not engage in clothing collections and that the claims were bogus. A report to Trading Standards resulted in Police and an officer from the joint service investigating and arresting an individual on suspicion of collecting clothing under the false pretence of using the collected clothing to raise money to the benefit of the charity. This is just one example of how iCAN can work to protect the Community and greatly assist us in our work.

3.3 Publicity

Promoting the existence and benefits of the service to the community and all stakeholders is a fundamental objective of the joint service as it contributes significantly to raising awareness and educating consumers. A meeting was held with Halton's Marketing and Communications section in July 2010. This has resulted in access to Halton press officers and account officers so that newsworthy items can be more effectively publicised in Halton. It has also given us access to Halton BC internal and external publications and will ensure that the joint service will be highlighted on the Halton BC website. Key officers in Halton's Marketing and Communications section are on iCAN and this is proving to be a practical prompt to press officers which has already inspired a number of releases.

3.4 **Financial Inclusion**

3.4.1 The service has developed a Financial Inclusion Strategy which is currently in draft form. Consultation responses have been received from relevant stakeholders and a final version of the strategy and an action plan will be available later this year. The strategy contains substantial evidence regarding the impacts of poverty and financial exclusion and identifies those that are most at risk. The action plan will identify a number of key practical issues that can be addressed with a view to making a real difference. Delivery of the plan will be dependant upon all stakeholders taking an active role.

3.4.2 Key elements of the Financial Inclusion Strategy focus on:

- **Loan sharking**

Action has been targeted in the most deprived wards in Halton to raise awareness to the problem of loan sharking by distributing promotional material publicising the Illegal Money Lending Team and the work they do pursuing loan sharks.

The illegal Money Lending Team has already had a major positive impact on illegal money lending in Halton with the conviction and long term imprisonment of loan shark Paul Nicholson for a number of violent crimes, including rape and assault, all connected with his illegal moneylending business. There is regular dialogue between the Illegal Money Lending Team and the joint service where intelligence is shared.

- **Halton Credit Union**

An officer from the joint service manages the Budgeting Skills Project that is delivered in partnership with Halton Credit Union, In the last financial year the project saved Halton residents at least **£750,000** pounds in total through advice and the provision of loans through the credit union. In the first quarter of the current financial year over 300 individuals have been assisted through one to one sessions and 300 loans approved

- **Other activities**

- Christmas wallets with consumer advice tips and information regarding sources of help were provided to various groups in December 2009.
- Delivery of a drama project through schools exploring the theme of money with performances being put on for fellow pupils and parents. Two schools were involved both with significant numbers of pupils living in poverty.
- The service developed a leaflet promoting local advice

agencies in associations with Halton Information and Advice Partnership and 4,500 leaflets have been produced for distribution to Windmill Hill residents funded by Trading Standards and Neighbourhood Management.

- We have organised and delivered an event for Windmill Hill called "How to Look Good on a Budget" in April 2010. This was a fun event but one which allowed us to promote the Halton Credit Union and raise awareness of loan sharks.

3.5 Improving Health & Wellbeing

3.5.1 Alcohol – underage sales

81 test purchase attempts have been made since the last report (target was 60) which break down as follows:

18 on licences (pubs and clubs) **4** sales (**78%** not selling)
63 off licenses, **10** sales (**84%** not selling)

All sales resulted in the issue of fixed penalty notices.

Overall **83%** of premises refused to sell.

This is a small reduction over the figure reported last year but this is not uncommon due to the turnover of staff in the trade. To remedy this and to drill down on the sale and availability of alcohol to young people we have now recruited a dedicated Under Age Sales Alcohol officer for Halton who commenced work in May 2010. This post is funded by the Halton Alcohol Working Group (PCT monies). This will allow us to implement a comprehensive training programme for licensees across Halton that will help them to recognise the issues and dangers of underage access to alcohol. It will also equip them with the skills to recognise potential underage purchase attempts and to deal with the potential confrontational situations that may arise following a refusal to sell.

We have continued with the compliance rating system for premises that sell alcohol reported last year. This assesses premises on a number of criteria; sales made in test purchase operations, intelligence received about underage sales, staff training, systems in place and confidence in management. The maximum possible score is 20. Last year we reported an overall compliance rating of **14.37**, this year the rating has improved slightly to **14.41** and there are fewer premises scoring below average (**6** premises scored less than 10 this year compared to **15** reported last year).

Starting in August this year, with the Safer Halton Partnership, we will be visiting 27 targeted premises with a view to assessing training needs and any other support required.

3.5.2 **Tobacco – underage sales**

60 test purchase attempts in Halton in the period resulted in 15 sales. 1 seller was prosecuted and fined £400 with £400 costs. The remainder were warned.

3.5.3 **Illicit tobacco**

Recruitment is currently ongoing to employ an Illicit Tobacco officer to cover Halton.

Illicit tobacco is either “smuggled” foreign brands, “duty frees” brought in from other countries with lower taxation and resold illegally or “counterfeit” copies of premium brands. The cheap price at which they are available and the unregulated manner of distribution seriously undermines efforts to reduce smoking prevalence and to restrict access to children. The results of the most recent survey of young people across the North West on young people and access to tobacco and alcohol show that slightly fewer young people in Halton claim to smoke in 2009 compared to 2007 but that the demand for tobacco by young people is met more by illicit tobacco, with increases in supply of cigarettes with foreign language health warnings, fake cigarettes, single cigarettes and cigarettes from sellers other than legitimate high street outlets.

The new post will allow us to look more closely at the increasing problem of illicit tobacco and to catch those responsible.

3.5.4 **Regional Illicit tobacco team**

Illicit tobacco work in Halton will be supported by the North West regional illicit tobacco team. This team, which is a resource for the whole North West Region is hosted by the joint service and will bring clear benefits in our fight against the availability of illegal tobacco.

3.6 **Community Safety**

3.6.1 **Doorstep Crime**

Since 1 September 2009 there have been **40** reported doorstep crime incidents relating to residents who live in Halton. The nature of these varies considerably in terms of the type of work being offered and the degree of detriment or potential detriment being suffered. Typically though, those that fall victim to doorstep crime suffer financial loss and emotional abuse. This abuse can have a severe impact on self esteem and self confidence. It can raise fears of loss of independence and make victims feel that they must have been naïve and stupid to have been conned. For these reasons under reporting of these incidents is high. The number of reported

incidents for the previous period is just 9. This increase is interpreted as a positive sign and we believe reflects increasing awareness and confidence in residents to report incidents that previously would not have been reported. This is one of the key objectives of iCAN, to increase confidence and facilitate the reporting of incidents and it is significant that membership of iCAN has nearly doubled over the last 12 months. See 3.2 above. It is vital that in the aftermath of any incident that the victim is properly supported in order to reduce the likelihood of them falling victim to similar fraud in the future. The joint service is now represented on the Halton Safeguarding Adults Board and we are currently working to ensure that the vulnerable adults we deal with through doorstep crime are appropriately referred.

3.6.2

Doorstep crime case study

In July 2010 officers from the joint service intervened in the case of Mr & Mrs Brown (not their real name), an 80 year old couple living in Widnes. Mr Brown suffers from Parkinson's disease and so day to day domestic business is all conducted by Mrs Brown, who is also her husband's carer.

They had their driveway power washed by a man who cold called offering to do the work. He charged £250 and struck a positive relationship with Mrs Brown and gained a good deal of trust from her. As a result she agreed to pay £10,000 for some flagging she wanted to get done in the back garden. Mrs Brown gave him a cheque there and then. No cancellation rights (as required by law) were given.

The alarm was raised by bank staff when the cheque was presented at the traders own bank.

Trading Standards were involved following contact from Mrs Brown's bank and following intervention the cheque was stopped, the work did not go ahead and a substantial amount of the traders tools and equipment have been retained by Trading Standards. The investigation is ongoing.

Through prompt action the service has saved the consumer £10,000 and importantly through support helped them to maintain their independence and self esteem.

3.6.3

Proceeds of Crime

The service runs a Proceeds of Crime unit with highly specialised officers able to pursue convicted criminals for confiscation orders under the Proceeds of Crime Act. This legislation allows for the recovery of money and other assets that have been acquired through criminal activity and is a powerful tool that has the potential

to remove all the benefit of criminal activity.

The work of the team has continued to expand with case referrals from Trading Standards Teams, Environmental Health Services and Benefit Fraud Teams across the Northwest Region and beyond. The team has continued to deliver bespoke training courses to managers, solicitors and practitioners in local authority regulatory services to improve understanding of the Act and increase its use. Income generated by the team has allowed for investment in bank statement analysis software, increased officer capacity and training while maintaining the strict Home Office requirements over how these monies are utilised. The Team have dealt with 20 new case referrals in the last 12 months, obtained 6 confiscation orders with 4 cases due to conclude shortly and a further 11 cases still at the active investigation stage. The work of the team has been recognised in the IP Crime Group Strategic Report for 2010 as an example of best practice and team members have spoken at national and regional conference on the work of the team.

3.7 **Fair Trading**

3.7.1 **Rogue Traders**

Last year we reported on two cases involving Halton traders subject to scrutiny by Trading Standards.

Case 1 was a business generating complaints regarding the servicing and maintenance of satellite TV services. Using relatively new powers we were able to obtain recordings from the business of their sales calls which allowed us to clearly identify a variety of breaches of consumer protection legislation where customers were being misled either directly or by inference or by omission. This resulted in highly constructive dialogue with the trader who has subsequently revised their procedures leading to a significant reduction in complaints.

Case 2 referred to an investigation into a group of businesses and individuals doing glazing and guttering on residential property which was generating a number of complaints. All the businesses involved have now ceased trading and complaints have largely ceased. Monitoring continues to ensure we can take action promptly should any of the individuals concerned begin to generate complaints again.

We have a regular review process in place where we examine complaint data quarterly and look at those traders based in the Borough who generate the most complaints. Currently there are a number of traders subject to ongoing monitoring of complaint levels. We will intervene with these as appropriate and will prioritise on the basis of potential risk to the consumer taking into account the

number of complaints, size of business, vulnerability of customers, typical transaction values and the extent of the detriment being caused to consumers.

One trader is being actively investigated in relation to taking payment without supplying goods, supplying poor quality goods and failing to provide adequate redress.

We are maintaining an inspection service with a planned inspection programme visiting high risk traders and those traders generating complaints to the service to ensure trading standards are maintained. This includes weights and measures and product safety issues.

We are also maintaining a business advice service to businesses based in Halton providing advice on compliance with consumer law. Primary Authority agreements have already been entered into with a number of Warrington based businesses and it is planned to expand this programme into Halton in the near future. Primary Authority status provides a good deal of reassurance for businesses who trade across local authority boundaries knowing that they can seek and follow advice from their Primary Authority safe in the knowledge that it cannot be challenged by other authorities where they trade.

3.8 Conclusions

The joint service has delivered some real successes over the past 12 months with some very positive results. We need to work together in future to better publicise this work.

4.0 POLICY IMPLICATIONS

4.1 None identified.

5.0 OTHER IMPLICATIONS

5.1 The joint service is within agreed budget

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

The joint service supports better outcomes through reducing underage drinking.

6.2 Employment, Learning and Skills in Halton

None identified.

6.3 A Healthy Halton

The impact of the service is outlined in paragraph 3.4

6.4 A Safer Halton

The joint service makes a major contribution to safeguarding vulnerable people

6.5 Halton's Urban Renewal

None identified.

7.0 RISK ANALYSIS

7.1 None identified.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 All consultation includes equality and diversity questions under Warrington BC policy

REPORT TO: Safer Policy and Performance Board

DATE: 21st September 2010

REPORTING OFFICER: Strategic Director - Resources

SUBJECT: Sustainable Community Strategy 2011–2026

WARDS: All

1.0 PURPOSE OF THE REPORT

- 1.1 This report seeks to update Members on the progress of the new Sustainable Community Strategy (SCS) 2011-2026 and present the emerging vision, key objectives and long term priorities that the plan seeks to deliver upon. The content of this report serves as an introduction to a presentation to be given during the meeting that covers the detail of the content within the emerging draft SCS.
- 1.2 The drafting of a new SCS offers the opportunity to revisit the high level objectives under each of the current five key priorities and reflect the current public priorities and needs. There are a multitude of changes proposed for the public sector and uncertainty over financing mechanisms, but these factors will not change the long term challenges the borough faces. It is important the overarching priorities for the borough are scrutinised so that decisions about the allocation of resources can be made when organisational architectures and funding mechanisms become clearer.

2.0 RECOMMENDATION: That

- (1) Members consider and comment upon the five overarching priorities for the emerging Sustainable Community Strategy 2011-2026.
- (2) Members consider the suggested vision, strategic objectives and challenges contained in Section 6.0 and their alignment with their knowledge of local needs.

3.0 SUPPORTING INFORMATION

- 3.1 The purpose of the Sustainable Community Strategy is to look at what life in Halton is like now, set out how we would like it to change and identify the key things (objectives) required to make this change happen. It is a statutory requirement.
- 3.2 The targets in Halton's existing strategy run to 31 March 2011, Halton Strategic Partnership must therefore produce a new Sustainable Community Strategy for adoption by the Council by April 2011.

- 3.3 The Sustainable Community Strategy will not be delivered in isolation but will dovetail with the wide framework of statutory plans the Council and partners produce to steer corporate direction and inform the community. Examples include the Children and Young People's Plan, Local Development Framework, and Local Transport Plan. The new Sustainable Community Strategy (SCS) will cover the period from 2011 to 2026. This is the time scale as other major plans, such as the Core Strategy and Local Transport Plan 3, allowing coordinated delivery.
- 3.4 The available evidence, such as the State of the Borough Report, Places Survey, and Joint Strategic Needs Assessments for Health and Community Safety has been reviewed. This information was the subject of a presentation to Full Council on 21 July 2010. From this evidence, it is apparent that the high level vision and five strategic priorities of Halton's current SCS continue to reflect the long term and intransigent nature of Halton's challenges and therefore it is proposed that they remain largely unchanged.
- 3.5 The current phase of work is to seek endorsement of the proposed emerging issues / themes and long term challenges that Halton needs to tackle. Once these have been agreed, detailed policy options can be worked up to provide a range of potential interventions to deal with the challenges that Halton faces. The most effective and realistic of these alternatives will be chosen by the Council and its partners later this year for the five year delivery plan.
- 3.6 The five year delivery plan will contain the detail of the planned intervention and prevention activities that will be undertaken to bring about positive change upon Halton priority areas. The inclusion of a five year delivery plan will allow for a regular review of the selected intervention and prevention measures on a shorter timescale to enable changing circumstances throughout the lifetime of the full SCS to be reflected.
- 3.7 Timescales and Approval Process
- 3.8 The key dates in the drafting process are as follows:

Date	Stage
September PPBs	Consultation report on emerging themes and challenges at Policy and Performance Boards.
September SSPs	Consultation report on emerging themes and challenges at Special Strategic Partnership (SSP) meetings.
29 September	Approval of draft SCS for public consultation by Halton Strategic Partnership Board (HSPB).
14 October	Approval of draft SCS for public consultation by Executive Board.
29 October	My Halton event. Publicise public consultations.
November	Public consultation on Core Strategy Development

	Plan Document and draft Sustainable Community Strategy.
December	Final draft SCS issued to elected members and Partners for consultation.
27 January 2011	Executive Board to ratify strategy and sign off final document
11 February	Halton Strategic Partnership Board (HSPB) to ratify strategy and sign off final document
20 April 2011	Adoption at Full Council meeting.
April 2011	Implementation begins.

4.0 POLICY IMPLICATIONS

4.1 The SCS will impact upon many policy areas and have wide ranging impacts on, but not exclusively, social inclusion, poverty, equality and diversity, physical development, environmental quality and health care.

4.2 SCS Vision

4.3 The overall vision contained in the last SCS would still appear to be relevant and it is not recommended that this be changed:

Halton will be a thriving and vibrant borough where people can learn and develop their skills, enjoy a good quality life with good health; a high quality, modern urban environment; the opportunity for all to fulfil their potential; greater wealth and equality; sustained by a thriving business community; and within safer, stronger and more attractive neighbourhoods.

4.4 SCS Priorities

4.5 A summary of the priorities suggested for the SCS are covered in section 6.0 of this report.

4.6 The selection of remedies to tackle the long term challenges under each of the five SCS Priorities will reflect a focus on a united multi-agency response, the holistic understanding of the total public sector investment within an area, and activities that provide early intervention and prevention rather than reactive measures and cures for avoidable situations.

5.0 OTHER IMPLICATIONS

5.1 The draft Development Plan at Annexe A takes into account statutory guidance on the development of Sustainable Community Strategies and the duty to inform, consult and involve local people. It is imperative that partners continue to play an integral role in the development of the Strategy through the Halton Strategic Partnership structure.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 For each of the Council's priorities the SCS drafting process allows the review of the baseline information and evidence that underpins this current priority and associated Key Objectives. The new SCS will ensure that the most pressing priorities are identified and addressed.

6.2 A Healthy Halton

6.3 There are no proposed changes to the title of this strategic priority. The vision for this priority will be:

6.4 *To create a healthier community and work to promote well being and a positive experience of life with good health, not simply an absence of disease, and offer opportunities for people to take responsibility for their health with the necessary support available.*

6.5 The strategic objectives of this priority are as follows:

- To understand fully the causes of ill health in Halton and act together to improve the overall health and well-being of local people
- To lay firm foundations for a healthy start in life and support those most in need in the community
- To reduce the burden of disease and preventable causes of death in Halton
- To respond to the needs of an ageing population improving their quality of life and thus enabling them to lead longer, active and more fulfilled lives.
- To remove barriers that disable people and contribute to poor health

6.6 The long term policy priorities for this priority will include:

- Reducing death rates from some of the major causes of death in Halton by reducing smoking levels, increasing exercise and physical activity, improving diet and improving the early detection and treatment of disease.
- Reducing health inequalities by addressing the wider determinants of health such as poverty, unemployment, education, housing and crime.
- "Building" healthy individuals from the earliest stages of life.
- Addressing the needs of older people, enabling them to lead longer, active and healthier lives.
- Increasing community participation and engagement in health issues at an appropriate level based on the health needs of individual communities.
- Developing planned health services (such as planned operations and routine appointments for existing health problems).
- Early detection and screening for depression.

- Developing urgent care services (health services you need in an emergency or when your GP practice is closed).
- Optimising organisational and partnership working arrangements to ensure effective delivery of public health and health improvement.

6.7 Employment, Learning and Skills in Halton

6.8 There are no proposed changes to the title of this strategic priority. The vision for this priority will be:

6.9 To create an economically prosperous borough that encourages investment, enterprise and business growth, and improves the opportunities for learning and development together with the skills and employment prospects of both residents and workforce so that they are able to feel included socially and financially.

6.10 The strategic objectives of this priority are as follows:

- To develop a strong, diverse, competitive and sustainable knowledge-based local economy.
- To foster a culture of enterprise and entrepreneurship and make Halton an ideal place to start and grow economic activity
- To develop a culture where learning is valued and raise skill levels throughout the adult population and in the local workforce
- To promote and increase the employability of local people and remove any barriers to employment to get more people into work
- To maximise an individual's potential to increase and manage their income, including access to appropriate, supportive advice services.

6.11 Research indicates that the long term challenges for this priority include:

- Narrow the gap between deprived and non-deprived areas within the borough
- Development and investment
- Enterprise and business support
- Promotion and marketing
- Targeted investment in skills, a vibrant employment market and creating a strong culture of entrepreneurship.
- Ensure that no area of Halton has unemployment at more than 20% above the borough average
- To reduce the number of adults of working age claiming out of work benefits in the worst performing neighbourhoods
- Encourage digital inclusion and digital life skills
- Tackle worklessness, focussing on reducing the number of Job Seeker Allowance claimants
- Tackle the low wage economy
- Encourage the growth of new businesses and improve business survival
- Improve the skill base within the borough including vocational qualifications.

6.12 Children and Young People in Halton

6.13 There are no proposed changes to the title of this strategic priority. The vision for this priority is:

6.14 *Halton's ambition is to build stronger, safer communities which are able to support the development and learning of children and young people so they grow up feeling safe, secure, happy and healthy, and are ready to be Halton's present and Halton's future.*

6.15 There are three options for the strategic objectives contained in the SCS for this priority. The option chosen for the SCS will also be the basis for the new Children & Young People's Plan that will also be written and published by April 2011. The three policy options are to:

- 1) Continue to frame all work within the existing four overarching priorities for children and young people. These are:
 - Children and young people are physically, emotionally and sexually healthy
 - Every young person is successful when they leave school
 - Children and young people do well wherever they live and whatever their needs
 - Children and young people feel safe at home , in school and in their communities
- 2) Amend the priorities in line with the five Every Child Matters outcomes.
- 3) Develop new priorities that reflect both the development of additional areas of focus within Halton's Children's Trust since the current priorities were implemented, and also the new policy framework for children's services being developed by the government.

6.16 Research indicates that the long term challenges for this priority include:

- Emotional health of children and young people
- Positive activities for young people
- Supporting the teenage pregnancy strategy
- Supporting the childhood obesity strategy
- Support for young people to achieve through education, employment or training (reducing NEET)
- Remove socio-economic barriers to early development
- Continue to improve educational attainment
- Reduce child poverty
- Encourage a healthy weight for children
- Creating opportunities / facilities / amenities for children and young people

- Ensure that low cost transport options are available to allow children and young people to access the activities that matter to them.

6.17 A Safer Halton

6.18 There are no proposed changes to the title of this strategic priority. The vision for this priority will be:

6.19 To ensure pleasant, safe and secure neighbourhood environments, with attractive, safe surroundings, good quality local amenities, and the ability of people to enjoy life where they live in strong and resilient communities.

6.20 The strategic objectives of this priority are as follows:

- To investigate and tackle the underlying causes of crime and disorder and respond effectively to public concern by reducing crime levels
- To reduce fear of crime and increase public confidence in the police, council and other agencies to respond to reports of crime and anti social behaviour
- To tackle alcohol and drug/substance misuse problems, and the resulting harm that is caused to communities, families and individuals
- To create and sustain better neighbourhoods that are well designed, well built, well maintained, safe and valued by the people who live in them, reflecting the priorities of residents
- To tackle the problem of domestic abuse in all its forms, supporting the victims and their families and taking enforcement action against perpetrators.
- To reduce the levels of crime that disproportionately affects some of the more deprived areas
- Safeguarding adults who are more vulnerable within the community to physical, financial, sexual and emotional abuse.
- Safeguarding vulnerable children, who are often part of families where there are drug and alcohol problems or where relationships are abusive or violent
- To consult and engage with communities to identify problems and put in place effective measures to address them.
- To monitor and work together to tackle any potential tensions within communities, in particular those that may lead to extremist activity.
- To promote community cohesion and adopt a zero tolerance to all forms of hate crime within Halton, so that no-one is unfairly victimised

6.21 Research indicates that the long term challenges for this priority include:

- To address public perceptions of crime and drug abuse, through more effective communication of information and of positive news stories and locality working/ community engagement.

- To tackle alcohol related crime and anti social behaviour through greater enforcement activity, focused on the night time economy and in other problem areas
- To tackle drug abuse and drug related crime, through provision of effective treatment services and interventions for users and taking appropriate enforcement action. Collaborative working through Ashley House is central to success
- To deliver a wider integrated offender management programme to repeat offenders. This will involve a partnership approach to offer support to perpetrators, such as access to drug and alcohol treatment services to help them to change their behaviour. Where this approach fails we will take appropriate enforcement action.
- To reduce the number of fatal and serious road accidents through enforcement activities, bike safety, driver engagement days and community speed watch projects. Particular attention will be given to educating young people on the risks and causation factors e.g. alcohol.
- To tackle serious acquisitive crime, including burglary, personal and business robbery and vehicle crime with a focus on bringing offenders to justice, targeting prolific offenders, providing accessible crime prevention advice, responding to victims, promoting 'Crimestoppers', disrupting the stolen goods market and delivering 'Smartwarter' property marking neighbourhoods within those high risk communities.
- Tackling public perceptions of drug dealing in the borough through undertaking a Mapping exercise to show where drug perceptions are out of line with actual drug-related activity and making the public aware of police activity to tackle drugs. Use of the New Places Survey data 2010
- Tackle anti social behaviour within neighbourhoods, through a 'whole family' approach.
- Providing activities, advice and support for young people within Halton, particularly for older children and teenagers.
- Tackling domestic abuse within Halton, supporting the victim and their families and taking appropriate action to deal with offenders. In particular we need to identify interventions that work to address repeat offenders where current approaches are not working.
- Safeguarding adults, identifying abuse early and working together to put in place effective measures to address these. Raise awareness of domestic abuse issues to vulnerable people, such as LGBT, disabled, elderly, those with long term illnesses and BME who for whatever reason are not reporting domestic abuse. As part of improving the levels of reporting in response to these groups, train and develop the skills of the workforce dealing with families, so that all staff have basic awareness of the domestic abuse issues so identification and the response is improved. Domestic abuse and alcohol are often underlying factors in child neglect and abuse and resulting behavioural problems in young people
- Safeguarding vulnerable children, in particular those that come from families where there is a history of domestic abuse or drug and alcohol

problems. Adopt a 'think family' approach, to ensure that we tackle the underlying causes and not just address the problem.

- To promote understanding and recognition that DA is a crime not a relationship issue to be tolerated. We need to target the whole community not just the victims to address the general trend of people reporting domestic abuse mainly to friends and family and not the police. This trend has been highlighted in a recent data analysis of the BCS and some local data indicating that 60% told friends and family in 2008/9 vs 16% telling the police.
- Improving local conditions and encouraging people to get involved to help shape what happens in their local area via the continued provision of Locality Area Forums, Police Community Action Meetings (CAMs), Homewatch Schemes and 'Face the People' Sessions.
- Support our diverse community where all residents are able to live without fear of abuse or hate crime
- Improving safety and security for transport users
- Designing out crime and managing spaces to maximise natural surveillance etc, so that people feel safer
- To provide a counter terrorism response that is appropriate to the risks presented to Halton, in particular that from right wing extremism

6.22 Halton's Urban Renewal

6.23 It is proposed to change the title of this strategic priority to 'Halton's Environmental Quality and Urban Regeneration'. The vision for this priority will be:

6.24 To transform the urban fabric and infrastructure, to develop exciting places and spaces and to create a vibrant and accessible borough that makes Halton a place where people are proud to live and see a promising future for themselves and their families.

6.25 The strategic objectives of this priority are as follows:

- Ensure that development achieves high standards of design, safety and sustainability including in regard to its contribution to, and effects of, climate change and provides a positive contribution to its locality.
- To create and sustain a twenty first century business environment with the required variety and quality of sites and premises. Improving digital, road, rail, freight and green infrastructure that will support high levels of investment and economic growth and increase Halton's competitiveness
- To promote the Borough's major employment sites
- Realise the potential of the Mersey Gateway Bridge and the Silver Jubilee Bridge in Halton in order to fully achieve economic growth and environmental benefits, fully deliver sustainable travel options and reduce congestion.

- To revitalise the town centres into dynamic, well-designed high quality commercial, social and cultural areas that can continue to meet the needs of local people, investors, businesses and visitors;
- Ensure Halton's residents enjoy access to a network of community services and facilities providing opportunities to pursue active and healthy lifestyles and allowing them to participate fully in their local community
- Manage the multifunctional value of the Borough's Green infrastructure resource, whilst protecting and seeking enhancements to important local habitats, geology and landscapes, aquatic environments and species
- To ensure Halton designs in and maintains high levels of accessibility to places and spaces, so that opportunity and need are matched, and provide excellent connectivity to the wider world through transport and ICT links;
- Minimise waste generation and maximise reuse, recycling, composting and energy recovery within the Halton waste stream to support sustainable and effective waste management.
- Provide good quality, affordable accommodation to meet the needs of all sections of society
- To enhance, promote and celebrate the quality of the built and natural environment in Halton including tackling the legacy of contamination and dereliction, to further improve the borough's image and boost the confidence and aspirations of local people and business.

6.26 Research indicates that the long term challenges for this priority include:

- Long term commitments for new development:
 - Widnes Waterfront including Venture Fields
 - Windmill Hill
 - Castlefields
 - Canal Quarter
 - West Bank
 - 3MG
 - Sandymoor
 - Daresbury
- Work with partners and the local community to support The Mersey Gateway Bridge to fully realise its social, economic and environmental benefits.
- Fully utilise the borough's rail, road, commercial waterways and digital and other infrastructure in order to maximise the potential for economic development and sustained economic growth, whilst reducing congestion and air pollution.
- Adapt to climate change and pursue low carbon management and low carbon economy.
- Improve municipal and household recycling rates to bring it in line with regional and national rates

- Improve and maintain the Borough's transport and highway network to promote greater accessibility and connectivity and resilience whilst contributing to improved air quality and sustainable development.
- Continue to reduce CO₂ emissions within the Borough (including industry and road transport).
- Provide high quality, reliable and accessible low carbon public transport to ensure people can reach work/education/training/health services and social activities. Improve public transport information and local bus services and promote cycling and walking
- Increase the provision of decent homes at a price that people can afford including a focus on the need for extra care housing
- Continue to maintain a hierarchy of Parks and open spaces
- Conserve and manage the historic and natural environment in order to maximise the social, cultural and environmental benefits through its contribution to improving the Borough's image.
- Work with partners, private sector organisations and the local community to achieve Borough wide digital connectivity.
- Continue to pursue casualty reduction rates and targets on our roads focusing more particularly on high risk groups including young people and motorcyclists.

6.27 Cross Cutting Issues

The following issues require a comprehensive and integrated approach to tackle them and therefore the issues are too broad to be encompassed by a single theme:

- Providing for the ageing population
- Narrowing the gap between deprived and non-deprived areas within the borough addressing health and socio-economic inequality.
- Improving educational attainment and increasing access to training opportunities for those living in deprived areas
- Improving access to services such as social and leisure facilities, supermarkets, health services and transport.
- Understanding how knowledge and perceptions of health related issues can affect the local population
- Reducing social isolation
- Maximising community resources and facilitating effective community engagement and participation in public sector activities in Halton.
- Integrated delivery of services
- Increase community satisfaction with Halton as a place to live.
- Running services effectively and efficiently to meet customer needs and increase public satisfaction with all public services in Halton.
- Promoting equality in service provision, working to ensure there is no discrimination and actively promoting good relations between different sections of the community
- Ensuring socio-economic factors are taken into account at all stages of the strategic decision taking and policy making processes

7.0 RISK ANALYSIS

- 7.1 It is vital that rapid progress is made on the Sustainable Community Strategy to ensure that Halton Strategic Partnership continues to be clear about its priorities for service delivery, setting out the steps needed to bring about improvements to those areas of greatest concern to the people of Halton.
- 7.2 Delay to the SCS will:
- Reduce the Partnership's ability to take account of the local community's aspirations, needs and priorities;
 - Have serious implications for Partnership co-ordination between all the public, private, voluntary and community organisations that operate locally.
 - Potentially reduce the effectiveness of the Partnership through fragmentation of strategies.
- 7.3 These risks are mitigated by a monthly review of all significant risk factors highlighted by the project's risk assessment.
- 7.4 The availability of funding will impact upon the range of options and activities that can be put forward in the delivery plan component of the final SCS. Until a clearer financial picture emerges following the Comprehensive Spending Review in October no decision on the range of measure can be made.

8.0 EQUALITY AND DIVERSITY ISSUES

Building stronger communities through community engagement must continue to be a key outcome for the strategy. The Halton Strategic Partnership is already committed to equality regardless of age, sex, caring responsibility, race, religion, marital status, maternity issues, gender reassignment, socio economic need, sexuality or disability.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

Document	Place of Inspection	Contact Officer
A Community Strategy for a Sustainable Halton 2006-2011	Municipal Building, Widnes	Tim Gibbs
Refresh SCS 2006-2011 (published September 2009)	Municipal Building, Widnes	Tim Gibbs

REPORT TO: Safer Policy & Performance Board.

DATE: 21st September 2010.

REPORTING OFFICER: Strategic Director, Environment and Economy

SUBJECT: Anti-social Behaviour, Montgomery Road.

WARDS: Riverside.

1.0 PURPOSE OF THE REPORT

1.1 To consider anti-social behaviour to the rear of Montgomery Road, Widnes.

2.0 RECOMMENDATION: That

- (1) The Policy & Performance Board considers the action plan for addressing anti-social behaviour to the rear of Montgomery Road, Widnes.

3.0 SUPPORTING INFORMATION

3.1 Between Montgomery Road/Cunningham Road and Chilton Avenue/Netherfield Road, there is a linear greenway. Over the last 12 months there has been a lot of anti-social behaviour with 27 incidents being recorded by the police. St Georges Court (operated by Riverside RSL) and 23 Montgomery Road have been particularly affected. There is a non adopted alley to the greenway by these properties and local councillors have identified this as a key access point for the people who are causing the anti-social behaviour. This alley also provides access to council allotments and is well used by the public as a route to the town centre, schools and places of work.

3.2 There have been a number of meetings regarding the issues in this area and the Tasking and Coordination Group has considered this location on a number of occasions. An action plan has now been put in place that is summarised below.

- Investigate the deployment of CCTV to try and identify who is throwing stones at the rear of St Georges Court
- Police Tasking Vehicle to be used in the area.
- The turning area of the access road to the allotments will be resurfaced (This is breaking up and loose stones are used for throwing)
- The Vroom vehicle was in the area on Friday the 16th and Saturday 17th July 2010 – assess what impact this had.
- Contact Addaction in relation to the mobile Muga and see if we are able to get this resource into the area.
- Contact Ashley House in relation to supporting local drug users and encourage access to services.
- PCSO's increased foot patrol.
- To continue to provide support to victims of ASB within the area.

- Contact the Community Centre – targeting information about the effect that stone throwing has on others
- Contact Cheshire Fire and Rescue and see if they are operating in the area and establish whether or not they are able to assist in terms of engaging with the local youths.
- Community Development is currently in the process of supporting the local residents in developing plans for a community house, Muga and a play builder scheme to be situated in Tedder Square.

3.3 These actions are now in the process of implementation and the impact will be monitored and assessed. There is local support to close the alley adjacent to 23 Montgomery Road. Whilst the alley is not adopted it is established as a right of way and a gating order would be required. Consultation would be undertaken, particularly with the allotment holders as part of the gating order process. It has to be noted that this will restrict access to the greenway (though there are a number of other accesses in the vicinity) and the police and community safety are not convinced this will materially reduce the anti-social behaviour in the area.

4.0 POLICY IMPLICATIONS

4.1 The restriction of access to the greenway could be viewed as counter to the greenway policy.

5.0 OTHER IMPLICATIONS

5.1 The cost of the gate could be met from the Riverside, Appleton and Kingsway Locality Area Forum budget subject to local councillor's approval.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES.

6.1 Children and Young People in Halton.
Anti-social behaviour has as much an impact on young people as it does the rest of the community. In this instance it could put off young people from using this greenway, whilst alley gating may require young people to detour around the closure and thereby walking along busy roads.

6.2 Employment Learning and Skills in Halton
No implications identified at this time.

6.3 A Healthy Halton.
No implications identified at this time.

6.4 A Safer Halton
A key objective of the Community Strategy is - To investigate and tackle the underlying causes of crime and disorder and respond effectively to public concern by reducing crime levels. The action plan as exists clearly seeks to achieve this in this area. However, the gating of the alley may further strengthen the plan.

6.5 Halton's Urban Renewal
No implications identified at this time.

7.0 RISK ANALYSIS

- 7.1 The main risk associated with this situation is that the anti-social behaviour in the area continues. However, the action plan has been developed specifically to reduce the anti-social behaviour and as such the residual risk is likely to be reduced. Risks associated with erecting a gate on the alley include the impact it will have on the use of the greenway and possibly restricting access to the area by the police. Also, it may be extremely difficult to control the access where there are multiple key holders present i.e. allotment holders and residents.

8.0 EQUALITY AND DIVERSITY ISSUES

- 8.1 Much of the anti-social behaviour seems to be targeted at St Georges court which has a lower age limit of 55. The residents of this facility as well as the surrounding area are keen to see the anti-social behaviour reduced so that they can enjoy the same quality of life as residents in 'quieter' areas of the borough.

9. LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT

- 9.1 None under the meaning of the Act.