

## Departmental Quarterly Monitoring Report

**Directorate:** Community Directorate

**Department:** **Relevant Departmental Extracts for:** Community Safety, Drug and Alcohol Action Team, Domestic Violence, Environmental Health and Prevention and Assessment Services.

**Period:** Quarter 3 - 1<sup>st</sup> October 2011 – 31<sup>st</sup> December 2011

### 1.0 Introduction

This monitoring report covers the Commissioning and Complex Care and the Prevention and Assessment Department extracts for the third quarter period up to 31st December 2011. It describes key developments and progress against key objectives and performance indicators.

This report will provide information concerning those indicators identified within the Community Directorate Plan falling within the remit of the Safer Policy and Performance Board. These are namely Community Safety, Drug and Alcohol Action Team and Domestic Violence Teams now part of the Commissioning and Complex Care Department and Environmental Health now part of the Prevention and Assessment Department. Area partner indicators from the Police, Fire and Probation Services are stated where available.

The way in which the Red, Amber and Green, (RAG), symbols and Direction of Travel symbols have been used to reflect progress is explained within Appendix 6.

### 2.0 Key Developments

#### **Commissioning**

Tenders have progressed for the floating support services and a report is to be taken to Executive Board Sub Committee on 12<sup>th</sup> January 2012 advising of the outcome and recommendation to award. The tender processes for the domestic abuse services and the CIC accommodation services were terminated due to lack of competition. Reports will be made for waivers for extensions to existing services while proposals for future service delivery are considered.

#### **Safeguarding**

A newly developed Safeguarding Adults Induction Workbook, intended for all staff and volunteers, has now been finalised. Plans are being made to disseminate it widely to local agencies, groups and individuals including to Elected Members.

### **Domestic Abuse and Sexual Violence**

The Halton Survivors of Domestic Abuse and Sexual Violence held a Conference in support of 'The White Ribbon Campaign', which was opened by Derek Twigg MP and closed by Councillor Shaun Osborne. The event, attended by approximately 125 delegates including survivors and specialist service providers, explored effective approaches to preventing violence against men, women and children whilst supporting survivors of Domestic Abuse and Sexual Violence.

## **3.0 Emerging Issues**

### **Substance Misuse**

There is a requirement by both the National Treatment Agency, and under the Crime & Disorder Act, for Partnerships to undertake regular needs assessments. The last needs assessment undertaken by the Drug Action Team was in 2009/10 to inform the 2010/11 adult treatment plan. With the publication of the Coalition Drug Strategy in December 2010 and a new Substance Misuse Provider in the Borough from January 2012, it would seem an appropriate time to undertake a needs assessment.

The aims of the needs assessment would be to;

- a) Identify the substance misuse related needs with people in Halton.
- b) Identify the patterns of substance misuse with the Borough.
- c) Provide the strategic direction to ensure that the Safer Halton partnership reduces the impact of substance misuse on people and communities in Halton.

### **Safe Around Town**

Discussions have begun, aimed at developing a pilot project in Halton based on the 'Safe Around Town' scheme which is currently running in St Helens. A steering group has been established and Halton Speak Out have agreed to lead on the project to be established at Halton Lea.

## **4.0 Service Objectives / milestones**

### **4.1 Progress against 'key' objectives / milestones**

<b>Total</b>	<b>3</b>		<b>3</b>		<b>0</b>		<b>0</b>
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All 'key' objectives / milestones are presently on track to achieve annual targets; additional information can be found within Appendix 1.

## 4.2 Progress against 'other' objectives / milestones

Total	0		0		0		0
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There are no 'other' objectives / milestones identified relating to Safer Halton.

## 5.0 Performance indicators

### 5.1 Progress Against 'key' performance indicators

Total	2		1		1		0
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One 'key' performance indicator is presently on track to achieve annual targets; however, there is some uncertainty whether the indicator for repeat incidents of domestic violence (PA28) will achieve the annual target. Additional information can be found within Appendix 2.

### 5.2 Progress Against 'other' performance indicators

Total	17		13		4		0
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There are ten indicators that cannot be reported at this time; four indicators are new this year and therefore have no comparable data and six indicators need a baseline target to be set for 2011/12 once first year data becomes available, therefore progress cannot be monitored accurately.

However, there is some uncertainty whether the indicator relating to primary fires and offenders under probation will achieve their annual target.

The remaining 'other' performance indicators are on track to achieve annual targets and are therefore reported by exception.

Further information can be found in Appendix 3.

## **6.0 Risk Control Measures**

During the development of the 2011 -12 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 2011 – 2012.

## **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 'key' objectives / milestones
- Appendix 2 Progress against 'key' performance indicators
- Appendix 3 Progress against 'other' performance indicators
- Appendix 4 Financial Statement
- Appendix 5 Explanation of use of symbols

**Appendix 1: Progress Against 'key' objectives / milestones**

Ref	Objective
CCC 1	Working in partnership with statutory and non statutory organisations, evaluate, plan, commission and redesign services to ensure that they meet the needs and improve outcomes for people with Complex Care needs

Milestones	Progress Q3	Supporting Commentary
Introduce specialist support provision for victims of a serious sexual offence <b>Mar 2012</b> (AOF6 & 7)		Safe Place Project has set up a Sexual Assault Referral Centre (SARC) for Cheshire, Halton and Warrington. SARCs are a national initiative and care for people who have suffered rape or serious sexual assault and provide forensic medical examination, care and aftercare. St Marys in Manchester was the first SARC in the country; they began offering a service for children 5 years ago. They now see 450+ children a year. The contract to provide SARC services across the four Cheshire LSCB areas began in April 2011. Activity and performance is reported to the Cheshire SARC Management Board. The service has received positive feedback from stakeholders and those accessing the service from across Cheshire.



**Appendix 1: Progress Against 'key' objectives / milestones**

Ref	Objective	
<b>Service Objective: PA 1</b>	Working in partnership with statutory and non statutory organisations, evaluate, plan, commission and redesign services to ensure that they meet the needs and improve outcomes for vulnerable people	
Milestones	Progress Q 3	Supporting Commentary
<i>Contribute to the safeguarding of vulnerable adults and children in need, by ensuring that staff are familiar with and follow safeguarding processes. Mar 2012 (AOF6)</i>		Newly developed E-learning opportunities are enhancing the robust training programme produced annually. The safeguarding induction booklet will further enhance this.
<i>Implement Action Plan to improve on the findings of Care Quality Commission Inspection. Mar 2012 (AOF 6)</i>		The action plan has been fully implemented and signed off at the Safeguarding Adults Board.



**Appendix 2: Progress Against 'key' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
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**Service Delivery**

<b>PA 8</b>	Percentage of Vulnerable Adult Abuse (VAA) Assessments completed within 28 days (Previously PCS 15)	78.12	80	91.44%			Out of 409 cases, 374 were completed within 28 days. Target exceeded.
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**Area Partner National Indicator**

<b>PA28</b>	Repeat incidents of domestic violence (Previously NI 32)	Q4 = 29% End of year average = 25%	27%	29%			Halton MARAC has a current rolling NI 32 performance level of 29%. 68 cases were discussed in Q3, with 21 repeats seen this quarter. The number of children involved - 65 this quarter is 12% higher than the 58 recorded in Q3 last year. Cheshire Police Strategic PPU and Halton Domestic Abuse Forum identified that a lower than anticipated number of cases were appearing at Halton MARAC and did not reflect the guidance provided by CAADA, as a consequence all high risk cases are now discussed at MARAC accounting for the significant increase in the number of cases being discussed at MARAC and the increase in repeats.
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**Appendix 3: Progress against 'other' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
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Service Delivery							
PA9	Percentage of VAA initial assessments commencing within 48 hours of referral	-	New Indicator Baseline to be set from this year (2012)	69.89%	Refer to comment	Refer to comment	To date 983 initial assessments have been received of which 687 were completed within 48 hours. As this is a new indicator for 2011/12, there is no comparative data.
PA11	Percentage of existing Halton BC staff that have received Adult Safeguarding Training, including e-learning, in the last 3-years.	-	New Indicator Baseline to be set from this year (2012)	51%	Refer to comment	Refer to comment	Communities Directorates staffing list was obtained from HR. Mapped names to training records and calculated percentage. As this is a new indicator for 2011/12 there is no comparable data.
PA12	Number of Halton BC staff that have received Adult Safeguarding Training, including e-learning, in 2011 – 2012.	-	New Indicator Baseline to be set from this year (2012)	27	Refer to comment	Refer to comment	Obtained 2011-12 training registers to date and produced e-learning report, identified HBC staff that have attended courses or completed the e-learning. As this is a new indicator for 2011/12 there is no comparable data.



**Appendix 3: Progress against 'other' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
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<b>Service Delivery (Continued)</b>							
PA13	Number of external staff that have received Adult Safeguarding Training, including e-learning, in 2011 – 2012.	-	New Indicator Baseline to be set from this year (2012)	273	Refer to comment	Refer to comment	Obtained 2011-12 training registers to date and produced e-learning report, identified external staff that have attended courses or completed the e-learning. As this is a new indicator for 2011/12 there is no comparable data.

**Appendix 3: Progress against 'other' performance indicators**

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**Area Partner National Indicators:**

The indicators below form part of the new National Indicator Set introduced on 1<sup>st</sup> April 2008. Responsibility for setting the target, and reporting performance data, will sit with one or more local partners. As data sharing protocols are developed, baseline information and targets will be added to this section.


CCC 17	Number of hate crime incidents recorded by the Authority per 100,000 population (Previously BVPI 174 & CL L12).	77.1	N/A	Q 1-3 =57	N/A	N/A	<p>During Q3 28 hate incident/crimes were finalised by the Police. This is an increase on Q2 of 19 reported crimes and Q1 of 10 hate crimes.</p> <p>These figures can be broken down as follows for Q3:</p> <p>Racial 17 Sexual orientation 7 Disability 3 Faith 1</p> <p>One incident was reported via Halton Housing.</p> <p>No incidents were reported via Halton Borough Council.</p>
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**Appendix 3: Progress against 'other' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
CCC 18	% Of hate crime incidents that resulted in further action.	51.1%	N/A	Refer to comment	N/A	N/A	Of these Hate Crime incidents that arose in Q3, two incidents were still in progress, two people were charged as a result and one person was given a caution.

**Area Partner Indicators:**

The indicators below form part of the old National Indicator Set introduced on 1<sup>st</sup> April 2008. Responsibility for setting the target, and reporting performance data, will now sit with one or more local partners. As data sharing protocols are developed, baseline information and targets will be added to this section.

CCC 26	Adult re-offending rates for those under probation supervision (Previously NI 18).	Q4 10/11 8.88 %	No target set by MOJ but baseline predicted rate is 8.71%	8.69%	?		Q1 11/12 is the latest data published. It shows reoffending rate of 8.69% against a predicted baseline re-offending rate of 8.71%. Halton is improving and now below the predicted rate.
CCC 27	Rate of proven re-offending by Young Offenders(Previously NI 19).  2011/12 Rate of proven re-offending by young offenders in IOM Cohort.	45.96  N/A	TBA  Baseline Year	Refer to comment	Refer to comment	Refer to comment	Actual for the 2010 cohort measured against the 2005 baseline was a 45.7% reduction in the rate of offences per offender, against a 5% target. From April 2011 all data relating to Reoffending will be reported from Police National Computer directly to the Ministry of Justice. However for local reporting the YOT Management Board agreed to the following proposal at its Board Meeting in December 2011. The YOT will track those young people who entered the Integrated Offender Management (IOM) Cohort

**Appendix 3: Progress against 'other' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
							<p>between 1<sup>st</sup> January to 31<sup>st</sup> March 2011 to measure re-offending rates, including frequency and seriousness 12 months prior to nomination and 12 months following nomination. The YOT will also build a separate cohort which will include all young people sentenced to Referral Orders, Youth Rehabilitation Order's or released on Custodial Licence during the same period using the same counting method.</p> <p>The YOT will not count cases that were transferred in or out during this period and will not include any offences of a stand alone breach unless it is attached to a further offence.</p> <p>At the end of each quarter the Management Board will receive a data report and commentary for the following:-</p> <ul style="list-style-type: none"> <li>○ IOM Reoffending Report</li> <li>○ Non-IOM Reoffending Report</li> <li>○ Combined Reoffending Report</li> </ul>
CCC 31	Re-offending rate of prolific and priority offenders (Previously NI 30).	Q3 4.62%	No target set by Probation services	Not available measure changing	Not available measure changing	Not available measure changing	Police Officers and the designated Probation staff continue to undertake regular prison visits to those offenders on the Navigate Scheme.
CCC 32	Drug-related (Class A) offending rate (Previously NI 38).	0.64	N/A	Refer to comment	Refer to comment	Refer to comment	Data no longer available from 'I quanta' - the national database.
CCC 35	Offenders under probation supervision living in settled and suitable	87%	80%	Qtr 1 11/12 90%	?	N/A	The cohort comprises of 47 offenders. During quarter two three offenders have gained employment,

**Appendix 3: Progress against 'other' performance indicators**

Ref	Description	Actual 2010/11	Target 2011/12	Quarter 3	Current Progress	Direction of Travel	Supporting Commentary
	accommodation at the end of their order or licence (Previously NI 143).						two have entered training, six have had CVs completed and three offenders have secured accommodation.
CCC 36	Offenders under probation supervision in employment at the end of their order or licence (Previously NI 144).	48%	40%	Qtr 1 11/12 is 52%	?	N/A	The cohort comprises of 47 offenders. During quarter two three offenders have gained employment, two have entered training, six have had CVs completed and three offenders have secured accommodation.
CCC 37	<p>Number of primary fires and related fatalities and non-fatal casualties, excluding precautionary checks (Previously NI 49).</p> <p>Number of primary fires (i)</p> <p>Number of fatalities in Primary Fires (ii)</p> <p>Number of non-fatal casualties, excluding precautionary checks in Primary Fires (iii)</p>	<p>201 actual</p> <p>0</p> <p>9</p>	<p>189 actual</p> <p>0</p> <p>7</p>	<p>153 actual</p> <p>0</p> <p>3</p>	<p>?</p> <p>✓</p> <p>✓</p>	<p>↓</p> <p>↔</p> <p>↓</p>	<p>As per the Cheshire Fire and Rescue Service vision of 'no deaths, injuries or damage from fires', Halton continues to see positive performance against fatality and injury indicators.</p> <p>Although slightly over target, Primary fires (those involving property, injuries or five or more fire appliances) have seen a positive downward trend.</p>

## Appendix 4: Financial Statement

### COMMUNITIES DIRECTORATE




Local Strategic Partnership Schemes as at 31<sup>st</sup> December 2011

WNF grant has ceased so these projects are now funded by the priorities funding or WNF grant carried forward from last year and so can be treated as part of each department's base budget.

Priority 5 A Safer Halton	Annual Budget	Budget to Date	Actual to Date	Variance to Date
	£000	£000	£000	£000
Vikings In the Community	35	26	17	9
Youth Splash	127	95	86	9
Blue Lamp	390	293	195	98
Pride of Place	33	25	33	-8
Area Forum Co-ordinator	42	32	28	4
Domestic Violence	117	88	61	27
Integrated Offender Management (POPO)	40	30	29	1
Alcohol Enforcement Task Group	130	98	4	94
Alcohol Harm Reduction	60	45	36	9
ASB Commissioned Services	155	116	3	113
<b>TOTAL</b>	<b>1,129</b>	<b>847</b>	<b>492</b>	<b>355</b>




## Appendix 5: 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</u> unless there is an <u>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 <b>performance is better</b> as compared to the same period last year.
Amber		Indicates that <b>performance is the same</b> as compared to the same period last year.
Red		Indicates that <b>performance is worse</b> as compared to the same period last year.
N/A		Indicates that the measure cannot be compared to the same period last year.