



Safer Policy and Performance Board

**Tuesday, 18 January 2011 at 6.30 p.m.
Council Chamber, Runcorn Town Hall**

A handwritten signature in black ink, appearing to read 'David W R', positioned above a faint rectangular stamp.

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 Martha Lloyd Jones	Labour
Councillor Keith Morley	Labour
Councillor Margaret Ratcliffe	Liberal Democrat
Councillor Mike Shepherd	Independent
Councillor Dave Thompson	Labour
Mr B Hodson	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 Board is on Tuesday, 15 March 2011*

**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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5. PERFORMANCE MONITORING	
(A) PRESENTATION: NORTH WEST AMBULANCE SERVICE	14 - 15
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The Board will receive a presentation from Colette Walsh, the Head of Alcohol Partnership Commissioning Halton and St Helens PCT on Drug and Alcohol Services.	
(C) SUSTAINABLE COMMUNITY STRATEGY MID YEAR PROGRESS REPORT 2010-11	16 - 37
(D) DRAFT BUSINESS PLAN 2011-14	38 - 60
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7. PART II

ITEMS CONTAINING “EXEMPT” INFORMATION FALLING WITHIN SCHEDULE 12A OF THE LOCAL GOVERNMENT ACT 1972 AND THE LOCAL GOVERNMENT (ACCESS TO INFORMATION) ACT 1985

In this case the Board has a discretion to exclude the press and public and, in view of the nature of the business to be transacted, it is RECOMMENDED that under Section 100A(4) of the Local Government Act 1972, having been satisfied that in all the circumstances of the case the public interest in maintaining the exemption outweighs the public interest in disclosing the information, the press and public be excluded from the meeting for the following item of business on the grounds that it involves the likely disclosure of exempt information as defined in paragraphs 2, 3 and 4 of Part 1 of Schedule 12A to the Act.

- | | |
|--|------------------|
| (A) SAFER HALTON FUNDING | 161 - 183 |
| (B) RECOVERY ORIENTATED, INTEGRATED SYSTEM FOR
SUBSTANCE MISUSE (DRUGS AND ALCOHOL) IN
HALTON | 184 - 189 |

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: 18 January 2011

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: 18 January 2011
REPORTING OFFICER: Chief Executive
SUBJECT: Specialist Strategic Partnership minutes
WARD(s): Boroughwide

1.0 PURPOSE OF REPORT

The **draft** Minutes from the last Safer Halton Partnership meeting, which are subject to approval at the next meeting of the Safer Halton Partnership, are attached for consideration.

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, 7 September 2010 Civic Suite, Town Hall, Runcorn

Present	M. Andrews	Community Safety
	S. Blackwell	Cheshire Police
	D. Cargill	Cheshire Police Authority
	A. Collins	Cheshire Police Authority
	S. Eastwood	HBC Health and Community
	C. Frazer	Riverside Housing
	D. Houghton	HBC Policy and Partnerships
	N. Sharpe	Halton Housing Trust
	R. Strachan	Cheshire Police
	J. Sutton	Resources
	K. Thornden	Cheshire Probation
	C. Walsh	Halton & ST Helens PCT

Action

SHP12 WELCOME & INTRODUCTIONS

Inspector Richard Strachan welcomed everyone to the meeting and introductions were made around the table.

SHP13 APOLOGIES

Apologies had been received from David Parr- HBC, Lorraine Crane – HBC, Dwayne Johnson – HBC, Rosie Lyden – HBC, Richard Gorst – Cheshire Fire & Rescue, Norman Oldham – Halton Magistrates, Liz Weston – UK Border Agency and Kim Thornden – Cheshire Probation.

SHP14 MATTERS ARISING FROM PREVIOUS MEETING MINUTES - 11.05.10

The minutes of the meeting held on 11 May 2010 were agreed as a correct record.

SHP15 THE SUSTAINABLE COMMUNITY STRATEGY

The Partnership received a report which updated Members of the progress of the new Sustainable Community Strategy (SCS) 2011-2026 and presented the emerging vision, key objectives and long term priorities that the plan sought to deliver upon.

The drafting of a new SCS offered the opportunity to

revisit the high level objectives under each of the current five key priorities and reflected the current public priorities and needs. There was a multitude of changes proposed for the public sector and uncertainty over financing mechanisms, but these factors would not change the long term challenges the Borough faced. It was important the overarching priorities for the Borough were scrutinised so that decisions about the allocation of resources could be made when organisational architectures and funding mechanisms became clearer.

Section 6.17 'A Safer Halton' was referred to and discussed. In conclusion, the members of the Partnership were asked to pass any comments they may have to Debbie Houghton within the next week, so that the approval process could progress.

RESOLVED: That

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

SHP16 HALTON STRATEGIC PARTNERSHIP BOARD WNF AND LPSA2 FUNDING CUTS

The Partnership received a report regarding Local Public Service Agreement (LPSA) and Working Neighbourhood Fund (WNF) Allocations Review, which provided an update on the reward grant allocations.

Since the recent change in Government, the HSPB were notified of cuts to the LPSA reward grant (LPSA2) and WNF funding that was currently being received. In order to manage this process, David Parr, on behalf of the HSPB, had asked each SSP to identify cuts to projects. Safer Halton project managers were asked to make the difficult decision of identifying cuts to put forward to the HSPB and the Council's Executive Board. These cuts had since been agreed by the Council's Executive Board on 15th July 2010.

RESOLVED: That the Safer Halton Partnership noted the revised allocations of WNF and LPSA2 funding to projects.

SHP17 SAFER HALTON PARTNERSHIP DRAFT TERMS OF REFERENCE

Due to the absence of an agreed Terms of Reference document for the Partnership presently, the group reviewed the Draft Terms of Reference which had since been proposed and were attached to the report for reference.

The group were asked to review the document and forward any comments to Debbie Houghton. They would then be sent out in final format with the minutes of this meeting.

RESOLVED: That subject to any comments or changes agreed by Partners, the Safer Halton Partnership adopt the Terms of Reference, as set out in the attached document.

SHP18 SAFER HALTON EVALUATION OF PROJECTS

The Partnership considered a report on the evaluation of the Safer Halton projects, since the WNF along with a number of other funding sources was due to end in March 2011.

The October Spending Review may announce extensions to these funding streams or indeed provide alternatives; however, it was commented that it would be sensible at this time to work on the basis that the funding would end. As partners were aware, the SHP had utilised this funding to support a number of projects including Blue Lamp, work on domestic abuse, alcohol and anti social behaviour. The HSPB had requested that all projects currently funded by WNF across all SSPs be evaluated and wrote to SSP chairs in this regard in July.

At the SHP Chairs' meeting on 22 July 2010, it was agreed that for Safer Halton, all projects in receipt of other funding sources, which are also due to end next year, should also be evaluated, not just the WNF projects. This included the Safer and Stronger Communities Fund, LPSA 2 Reward Grant etc.

As part of the evaluation process project managers were asked to complete a project evaluation form. These completed proformas would then be shared with members of each relevant SSP at the next meeting. A member from

another SSP would be invited to the SSP meeting as part of a 'Peer Review Process', with this person acting as a critical friend. Partners would be asked to review the evaluation proformas for each project to determine if the business case was robust and would stand up to scrutiny by Partners. Once the number of projects had been reduced to a manageable number, these would go forward to a special SSP chairs meeting on 15th September.

Project managers who were present gave a brief overview of their evaluation/s. Due to time restraints and the amount of time needed to dedicate to prioritising the projects, it was agreed that all would take the evaluation documents away and revert to Debbie Houghton with any comments and opinions. One member queried whether there was a prioritising framework system in place for this exercise. In response it was noted that the SSP and LSP chairs would be meeting to discuss the outcomes and would use a prioritising system when making their decisions.

RESOLVED: That the Partnership:

- 1) Reviews and challenges the completed evaluation proformas provided by project managers to determine if there was a robust business case for the project to continue; and
- 2) Prioritises the SHP projects, so that should funding be made available partners were agreed on which projects they would most want to see continue.

SHP19 HSPB RISK REGISTER

The group reviewed the Halton Strategic Partnership Local Area Agreement Risk Register which was attached as Appendix A. The register had been produced using a simple four-step approach to the risk assessment process (Identify, Evaluate, Treat and Monitor and Review), which was used by the Partnership's Accountable Body – Halton Borough Council.

It was noted that the main focus should be on the achievement of objectives rather than the assessment process itself. Too little awareness and control could damage the performance of any organisation, but an obsessive level of involvement in the fine details of risk could easily overwhelm the organisation. Between these two extremes was a turning point, a balanced area of high performance, which was the status to aim for.

The report covered the scoring system of Low, Medium and High and scored each risk accordingly. The register was split into 6 sections as follows:

- Section 1 : Strategic Risk 2009-11
- Section 2 : Children & Young People in Halton (SSP)
- Section 3 : Safer Halton Partnership (SSP)
- Section 4 : Employment Learning & Skills (SSP)
- Section 5 : Healthy Halton (SSP) – 2009-11
- Section 6 : Halton's Urban Renewal (SSP) 2009-11

RESOLVED: That the Partnership notes and comments on the Risk Register document.

SHP20 POLICING WHITE PAPER

The Partnership reviewed the consultative white paper '*Policing in the 21st Century: reconnecting police and the people*' which set the Government's vision for policing. Responses were relevant to the legislation in the Police Reform and Social Responsibility Bill to be considered before the bill's introduction in Autumn 2010 and for future policy development. It was noted that it was important that the group respond to this consultation and make views known. The consultation period will run from 26 July 2010 and end on 20 September 2010.

Public comments could be made online on the Home Office website. The Partnership should forward their comments to Debbie Houghton who would coordinate a reply on behalf of the SHP.

RESOLVED: That the Partnership notes and comments on the white paper.

SHP21 JOINT STRATEGIC NEEDS ASSESSMENT

Further to a report that was put to the last Safer Halton Partnership meeting on the statutory duty to produce a Joint Strategic Needs Assessment (JSNA) and guidance on what was to be included, it was agreed to set up a small steering group chaired by Dwayne Johnson, which would pull together the relevant data and intelligence from partners.

The steering group had since identified five draft priorities, which were brought to the May SHP meeting for comment, they were: anti social behaviour; alcohol misuse and its impact on crime and communities; tackling drug use; safeguarding vulnerable adults and children; communication

and community engagement, and domestic abuse.

The final draft of the JSNA was attached to the report for any final comments from the group.

RESOLVED: That the Safer Halton Partnership:

- 1) Approves the final draft of the JSNA summary, subject to any final comments from partners; and
- 2) Agrees that action/delivery plans be prepared by the relevant SHP task group, to deliver improvements to performance targets for the JSNA priorities once approved, with a timescale to be agreed.

SHP22 TASK GROUP UPDATES

The group received task group updates from the respective manager for the following areas:

- a) Alcohol Enforcement
- b) Domestic Abuse
- c) Drugs
- d) Partnership Tasking & Coordination
- e) Prolific & Other Offending
- f) Reducing reoffending

RESOLVED: That the task group updates be noted.

SHP23 HATE CRIMES

The Partnership received a paper on hate crimes in Halton which stated that during the period April to June 2010 there had been a total of 19 race hate and one disability hate incident reported to the Police, with no homophobic incidents.

Of these 20 incidents, 11 had been found to meet the 'hate crime' criteria. All crimes were being progressed satisfactorily and were monitored by the Diversity Team within the Safer Halton Partnership. It was noted that there was no evidence of a link between the crimes and the night time economy.

It was also reported that there had been an increase in the number of threats made to the traveller community within the Daresbury area, a site which does not have the appropriate planning permission. Although there was still no evidence of threats made, the Police and the HBC were in

dialog with both Daresbury residents and the traveller community.

RESOLVED: That the Partnership notes and comments on the report.

SHP24 HALTON'S SAFEGUARDING ADULTS BOARD ANNUAL REPORT 2009/10

The Partnership received Halton's Safeguarding Vulnerable Adults Annual Report for 2009/10 together with a report updating them on the key issues and progression of the agenda for safeguarding vulnerable adults in Halton.

It was noted that the Report would be presented to a number of forums, including the Safer Halton and Healthy Halton Policy and Performance Boards, the People's Cabinet and the Learning Disabilities Partnership Board. The Safeguarding Adults Board also recommended that partner agencies present this to their respective bodies.

Any comments regarding the Annual Report should be forwarded to Steve Eastwood, who offered to respond to queries on behalf of the SHP.

RESOLVED: That the Partnership notes and comments on the report's content.

SHP25 THE STIGMATISATION OF PROBLEM DRUG USERS

The Partnership received a report advising them of recently published research by the UK Drug Policy Commission into the stigmatisation of problem drug users. The full report could be found at www.ukdpc.org.uk.

The report stated that the coalition Government were signalling a significant shift in drug policy towards a more abstinence based approach to treatment. Proposals were being put forward to withdraw benefits from drug users who do not access treatment, so tackling the extreme prejudice about addiction in society would be essential if Partnerships were to succeed in getting people who were recovering from drug dependency off benefits, back into work and playing a full role in society.

It was commented that the research highlighted a number of possible areas for action, particularly with regards to service user and advocacy groups becoming more active and challenging the way drug addition is reported in the media which provides fuel for public perception. Additionally

the group agreed that some work would need to be done around helping people back into employment through voluntary work placements etc and speaking to the public, employers and service users for innovative ideas.

RESOLVED: That the Partnership notes and comments on the report.

SHP26 CONSULTATION ON THE NEW UK DRUG STRATEGY

The Partnership received a report advising them of the consultation currently being undertaken by the Coalition to inform the new UK Drug Strategy. The Consultation Paper was attached for information.

The Consultation would be aimed at a wide audience, from charities to enforcement partners, drug workers and voluntary and community sector organisations. This would provide an early opportunity for a range of partners to contribute to the development of this new strategy.

The group were requested to read and comment on the attached consultation paper away from the meeting. Any queries should be forwarded to Steve Eastwood by 21 September 2010 so that he could forward them to Government for response by 30 September 2010. It was anticipated that the new strategy would be produced by December 2010.

RESOLVED: That

- 1) The SHP notes and comments on the report by 21 September 2010; and
- 2) The SHP supports the process by which a coordinated response could be provided to the Coalition.

Meeting ended at 4.00 p.m.

REPORT TO: Safer Policy and Performance Board
DATE: 18 January 2011
REPORTING OFFICER: Strategic Director, Adults and Community
SUBJECT: Presentation – North West Ambulance Service
WARDS: Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To receive a presentation on the work of the North West Ambulance Service in Halton.

2.0 RECOMMENDATION: That

- (1) Members receive the presentation.
- (2) Members ask any questions about the Ambulance service as it operates in Halton.

3.0 SUPPORTING INFORMATION

3.1 The Safer Halton PPB has a overview and scrutiny role for the emergency services as they operate in Halton.

3.2 The North-West Ambulance Service recently identified a number of developing areas of work that they believe will be of interest. These include :-

- Foundation Trust application
- Their strategic vision
- Future Patient Transport Services Strategy

3.3 The Service will update on their performance in Halton.

4.0 POLICY IMPLICATIONS

4.1 None.

5.0 OTHER IMPLICATIONS

5.1 None.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

The Ambulance Service as a universal service impacts on the safety and well-being of young people.

6.2 Employment, Learning and Skills in Halton

None.

6.3 **A Healthy Halton**

Fundamental to ensuring those in need get appropriate and quick treatment.

6.4 **A Safer Halton**

Fundamental to the overall long-term safety of people.

6.5 **Halton's Urban Renewal**

None.

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

7.1 None under the meaning of the Act.

REPORT TO: Safer Policy and Performance Board

DATE: 18th January 2011

REPORTING OFFICER: Strategic Director -Resources

SUBJECT: Sustainable Community Strategy
2010 – 11 Mid-year progress report.

WARDS: Borough-wide

1.0 PURPOSE OF REPORT

1.1 To provide information on the progress in achieving targets contained within the Sustainable Community Strategy for Halton.

2.0 RECOMMENDED THAT:

- i. The report is noted
- ii. The Board considers whether it requires any further information concerning the actions being taken to achieve the performance targets contained within Halton's Sustainable Community Strategy.

3.0 SUPPORTING INFORMATION

3.1 The Sustainable Community Strategy is the central document for the Council and its partners, providing an evidenced based framework through which actions and shared performance targets can be developed and communicated. An updated Sustainable Community Strategy for Halton is presently at an advanced stage of preparation and will become live from April 2011.

3.2 The coalition government has set out its intention to create greater transparency. This is intended to include the publication of performance as well as financial transactions. It is the government's expectation that Whitehall departments, local authorities and other public bodies will be performance managed by the communities and citizens which they serve. To this end, the coalition has set out its performance measures in government departmental business plans. Many of these performance measures are already included in the Sustainable Community Strategy.

3.3 The current Sustainable Community Strategy included targets which were also in the Local Area Agreement (LAA). In October this year, the coalition government announced the ending of government performance management of local authorities through LAA's.

3.4 Nevertheless, we need to maintain some framework of performance management to:

- measure progress towards our own objectives for the improvement of the quality of life in Halton.
- meet the government's expectation that we will publish performance information.

3.5 Attached as Appendix 1 is a report on progress to the 2010 – 11 mid-year which includes information for those specific indicators and targets that fall within the remit of this Policy and Performance Board.

3.6 In considering this report Members should be aware that:-

- a) All of the measures within the National Indicator Set (NIS) are monitored through Quarterly Departmental Service Plan Monitoring Reports. The purpose of this report is to consolidate information on all measures and targets relevant to this PPB in order to provide a clear picture of progress.
- b) In some cases outturn data cannot be made available at the mid-year point. Additionally, all measures captured through the National Place Survey, which was due to be undertaken this year, have been deleted from the NIS by central government and therefore no further data will be made available in 2010/11. The future requirement for localised perception survey under the transparency agenda is presently subject to consideration.

4.0 CONCLUSION

4.1 The Sustainable Community Strategy for Halton, and the performance measures and targets contained within it will remain central to the delivery of community outcomes. It is therefore important that we monitor progress and that Members are satisfied that adequate plans are in place to ensure that the Council and its partners achieve the improvement targets that have been agreed.

5.0 POLICY IMPLICATIONS

5.1 The Sustainable Community Strategy for Halton is central to our policy framework. It provides the primary vehicle through which the Council and its partners develop and communicate collaborative actions that will positively impact upon the communities of Halton.

6.0 OTHER IMPLICATIONS

- 6.1 The publication by Local Authorities of performance information is central to the coalition government's transparency agenda. This is accompanied by a commitment to reduce top down performance management, with the existing National Indicator Data Set (NIS), replaced from April 2011 with a single comprehensive list of all data that Local Authorities are required to provide to Central Government.
- 6.2 Central Government target setting will be replaced by minimum standards in some areas.
- 6.3 Thus, it still remains to be seen whether the burdens placed on local government will be reduced or simply redefined.

7.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

- 7.1 This report deals directly with the delivery of the relevant strategic priority of the Council.

8.0 RISK ANALYSIS

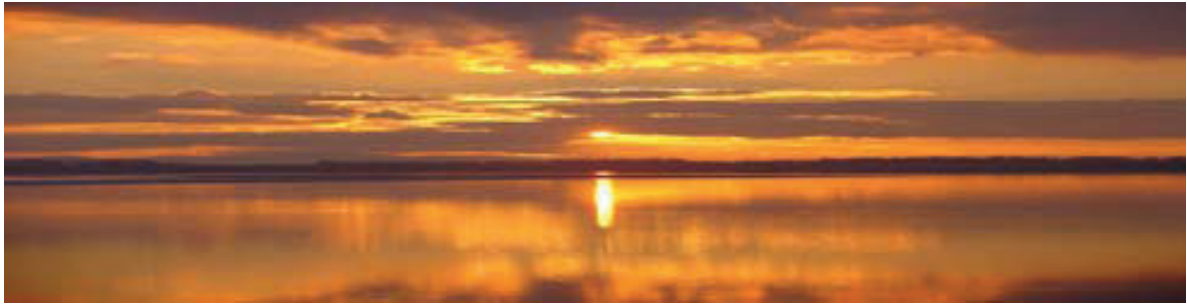
- 8.1 The key risk is a failure to improve the quality of life for Halton's residents in accordance with the objectives of the Sustainable Community Strategy. This risk can be mitigated thorough the regular reporting and review of progress and the development of appropriate actions where under-performance may occur.

9.0 EQUALITY AND DIVERSITY ISSUES

- 9.1 One of the guiding principles of the Sustainable Community Strategy is to reduce inequalities in Halton.

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

Document	Sustainable Community Strategy 2006 – 11
Place of Inspection	2 nd Floor, Municipal Building, Kingsway, Widnes
Contact Officer	Rob MacKenzie (0151 471 7416)



The Sustainable Community

Strategy for Halton

2006 - 2011

Mid-year Progress Report

1st April 2010 – 30th Sept 2010

Safer

Policy & Performance Board







**Document Contact
(Halton Borough
Council)**

Hazel Coen
(Divisional Manager Performance & Improvement)
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This report provides a summary of progress in relation to the achievement of targets within Halton's Sustainable Community Strategy 2006 - 2011.

It provides both a snapshot of performance for the period 1st April 2010 to 30th September 2010 and a projection of expected levels of performance to the year-end.







The following symbols have been used to illustrate current performance as against the annual targets and as against performance for the same period last year.

	Target is likely to be achieved or exceeded.		Current performance is better than this time last year
	The achievement of the target is uncertain at this stage		Current performance is the same as this time last year
	Target is highly unlikely to be / will not be achieved.		Current performance is worse than this time last year

SAFER HALTON

Page	NI	Descriptor	2009/10 Target	2010/11 Target	Direction of travel
7	5	Overall satisfaction with the area	n/a	n/a	n/a
8	7	Environment for a thriving third sector	n/a	n/a	n/a
9	16	Serious acquisitive crime rate			
11	17	Perceptions of anti-social behaviour	n/a	n/a	n/a
12	20	Assault with injury crime rate			
13	30	Re-offending rate of prolific and priority offenders			
14	32	Repeat incidents of domestic violence			
16	33	Arson incidents			
18	39	Alcohol related hospital admission rates			
20	40	Drug users in effective treatment			

Non Local Area Agreement Measures / Targets

Page	NI	Descriptor	2009/10 Target	2011 target	Direction of travel
21	47	<u>Reduce the number of people killed or seriously injured in road traffic accidents</u>			
22	SH1	<u>Reduce the number of incidents of ASB in the worst 5 Lower Super Output Areas compared with the rest of the borough</u>			

NI 5	Increase residents overall satisfaction with the area
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Baseline (2007-08)	09 – 10 Actual	2011 Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
			Q1	Q2	Q3	Q4		
70.4%	N/A	73.4%	Refer comment				n/a	n/a

Data Commentary

The baseline position for this indicator is the perception data that was captured as part of the 2008 National Place Survey. A further survey was planned for 2010 but was cancelled and so an update is not expected.

General Performance Commentary

As 2009 is the 'gap' year between the national Place surveys the Halton Strategic Partnership commissioned research from IPSOS-MORI to follow-up the key findings of the Place Survey in more detail.

Generally people are satisfied with Halton as a place to live including: people (neighbours, family and friends), parks, schools, shopping, health and transport, NMAs (local housing and shopping facilities) and have an affinity for the local area with a sense of community and a high proportion of longstanding residents.

The key areas residents felt needed to be improved were: – low level crime, ASB, drugs, lack of respect, job prospects, reduce pollution, influence in decision making (NMAs), clean streets and activities for teenagers.

Summary of key activities undertaken / planned during the year

The current format for the Cohesion, Engagement and Liveability Group disbanded in April 2010 and is in the process of the being reviewed.

NI 7	Increase voluntary and community sector satisfaction by creating a strong environment in which it can thrive
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Baseline (2007-08)	09 – 10 Actual	2011 Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
			Q1	Q2	Q3	Q4		
22.2%	n/a	29.7%	Refer comment				n/a	n/a

Data Commentary

The baseline position for this indicator is the perception data that was captured as part of the 2008 National Place Survey. A further survey was planned for 2010 but was cancelled by the Coalition Government and so an update is not expected.

Performance Commentary

Although data in relation to this measure would only have been collected on a biennial basis, a range of proxy indicators are being developed.



Examples include;

- Number of voluntary and community groups registered with HVA and HBC's Community Development Service.
- Number of community group's accessing grant funding.
- % occupancy at community centres.
- % of residents living in the three NMAs (3% most deprived LSOAs in 2004 IMD) participating in local activities.

Summary of key activities undertaken / planned during the year

The current format for the Cohesion, Engagement and Liveability Group disbanded in April 2010 and is in the process of the being reviewed.

NI 16	Serious Acquisitive Crime
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Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
1968	1727	1820	455	456	404	-	-		

Data Commentary

The data is complete and covers the full reporting period of Quarter 2 2010/11.

General Performance Commentary

Serious acquisitive crime has decreased by 11% (52 crimes) from Q1 to Q2 of 2010/11. There is also an increase of 13% (59 crimes) on the same quarter last year (Q2 9/10).

All areas of serious acquisitive crime have seen mixed performance when we compare **Q2 09/10 with Q2 10/11**. The most significant areas are:

Domestic Burglary is down 5% (8 less crimes)
 Theft of Motor Vehicle is down 48% (49 less crimes)
 Theft from Motor Vehicle is down 18% (18 more crimes)
 Robbery (personal and business) is up 80% (16 more crimes)

Summary of key activities undertaken / planned during the quarter

In support of the Safer Communities agenda, the Respect Halton Campaign was to develop and build a stronger and more coordinated approach to tackling ASB and crime along with the associated environmental problems within communities that are in most need of support. Using a combination of performance factors the top four problematic areas for Halton were identified in terms of crime and anti-social behaviour.

During quarter two the CAG developed and supported three weeks of action (Respect Mersey Week of action was delivered during quarter one of 2010). During each week of action a programme specific to the needs and requirements of each of the target area was developed bringing together a wide variety of agencies and organisations who, with the help of local residents, try to address the problems in each of the areas by bringing the community closer together with activities for young and old alike.

Throughout the weeks of action, we received considerable support from a number of departments within the local council, police, fire and other agencies. Although too many activities and interventions to mention, the following activities were delivered as standard for each of the Respect Weeks of Action:

High Visibility Police Patrols; Cheshire Fire and Rescue giving fire prevention advice; Neighbourhood Coordinators provided waste and environmental assistance; routine maintenance, mowing and cleansing of open spaces; inspection and maintenance and cleaning of playgrounds and play equipment; Community Payback assistance; Traffic enforcement operations; Fixed Penalty notices to offenders found to be littering or allowing dog fouling; Encouraging recycling; Neighbourhood Employment Engagement providing advice and support on any aspect of jobs and training for local people; support from Registered Social Landlords improving local neighbourhoods – greener, safer, cleaner. Licensing visits were undertaken ensuring that licensing conditions were being adhered to; the Partnership Problem Solving Patrol acted on concerns raised by local people and targeted specific issues either with individuals or taking place at a given location; Police surgeries took place within communities

Tackling Business Robbery

Throughout the weeks of action general advice was given about how businesses can manage risks associated with business robbery. After each premises visit the health and safety leaflet managing work related violence in retail premises was left with the business operator.

Throughout the four weeks of Respect Halton, the campaign received significant media coverage with nine separate articles being published in the local press.

Funding - Feeling Safe in Halton Applications

£60,000 was made available via the 4 Respect Weeks (Mersey, Riverside, Kingsway and Halton Lea) for community groups, schools, youth groups and business to suggest ideas that would address community safety issues in their local area.

Projects were reviewed by Safer Halton Partnership and all suitable projects were put forward to a public vote. The vote took place at public events during the relevant Respect Week and was also available on-line at www.halton.gov.uk/respecthalton

The most popular projects after the public vote were approved for funding although they were still subject to relevant policies and procedures ie. planning, consultation etc

- ❖ 17 applications were received.
- ❖ 15 projects were successful in getting funding
- ❖ 1297 votes were placed by the public
- ❖ £55,645 has been allocated to community projects

NI 17 | Reduce the perceptions of Anti Social Behaviour

Baseline (2007-08)	09 – 10 Actual	2011 Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
			Q1	Q2	Q3	Q4		
24.3%	N/A	21.2%	Refer comment				N/A	N/A

Data Commentary

The baseline position for this indicator is the perception data that was captured as part of the 2008 National Place Survey.

A further survey was planned for 2010 but was cancelled by the Coalition Government and so an update is not expected.

Performance Commentary

A proxy measure that could be used as an indication of current performance may be actual anti social behaviour numbers reported to Cheshire Police:

Halton	2010/11 Target	Q1	Q2	Q3	Q4	YTD	Progress
ASB Incidents	10,293	2484	2713			5197	<input checked="" type="checkbox"/>



There were a total of 2713 ASB incidents recorded in Halton in Q2 of 2010/11, this is a reduction of 21.5% (583 crimes) compared to the same period last year.

This is not an accepted proxy measure but one that could be used as a guide line for the general trend in the public's perception of ASB. Lower recorded ASB incidents may lead to lower levels of perceived ASB but there are many other factors to take into account.

Summary of key activities undertaken / planned during the year

Activities to reduce the perception of ASB in Halton are similar to those listed under SH LI 1 later in this document.

NI 20 Assault with Less Serious Injury

Baseline (2007/08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
1269	1060	1206	302	300	255	-	-		

Data Commentary

This report covers the period 1st July 2010 to 30th September 2010. The data is complete and comprises the actual number of crimes recorded during the period.

General Performance Commentary

Assault with less serious injury has decreased 15% between Q1 2010/11 and Q2 2010/11, 45 less crimes were recorded. When we compare this quarter with the same period last year there is a decrease of 4%, equal to 11 less crimes.



Summary of key activities undertaken / planned during the quarter

Quarter 2 Enforcement Performance Activity:



- 664 licensed premises visits by Police / Partners
- 198 Alcohol related public arrests (100 Widnes / 98 Runcorn).
- 45 Section 27s Direction to Leave Notices issued (24 Widnes / 21 Runcorn).
- 256 Instances of alcohol confiscation.
- 15 Premises have been subjected to improvement action plans / direct partnership activity (e.g. Meetings with Brewery Management, DPS changes, improvement actions at premises, CCTV upgrades etc).
- 4 S.19 Formal / Informal Premise Closure Orders. Formal closures included **The Wine Bar Runcorn** operating their new varied premises license in breach of their conditions and **Zenny's Store, Runcorn**, required to remove alcohol as PLH bankrupt.
- 26 Friday / Saturday (plus Bank Holidays) partnership licensing operations (Runcorn / Widnes). Including on occasion multi agency licensing visits and outreach teams.

NI 30 Re offending rate of prolific and priority offenders (PPO)

Official Home Office NI 30 stats (fig 1)

Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2009 – 10 Data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
82 offences	66	69 offences	19% reduction	12	8	21	25		

Locally produced re offending stats (proxy measure) (fig 2)

Baseline (2008-09)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
144 offences	63	117 Offences	29	16	34	-	-		

Data Commentary

Although this report covers July to September 2010, GONW NI30 stats are produced 3-6mths in arrears to allow for charges to be brought before the court and convictions finalised. Q1 2010/2011 figures are expected imminently.

General Performance Commentary

Q4 2009/2010 NI30 data shows that there were 25 convicted offences for that period. The final overall figure for 2009/2010 shows 66 convicted offences resulting in the year end target being reduced by 3 offences.

Q2 2010/2011 locally produced figures show 34 cumulative convicted offences.



Summary of key activities undertaken / planned during the quarter

During this last quarter, following the successful Restorative Justice conference, the PPO team have arranged for a DVD to be produced outlining the process. The footage consisted of police officer, probation officer, victim and offender all detailing the effects and results of the whole RJ process. The DVD will be used for future training and information processes.

Integrated Offender Management (IOM) is currently in the process of being implemented in the Halton area. The PPO team have been instrumental in the preparation and groundwork for the start date of December 2010.

This IOM project is modelled on the same principles as the PPO team processes.

NI 32	Repeat Incidents of Domestic Violence								
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Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
See Comment	22%	27%	27%	22%	23%	-	-		

Data Commentary

This data pertains to quarter 2 of 2010/11. It is final actual data for the second quarter of the financial year.

(Whilst we now have a full years data for NI 32 performance CAADA recommend that it is not used as true baseline due to reporting errors expected from the indicators first year of implementation. However 2009/10 data will offer a guide to the areas performance generally apart from quarter 4 where implementation of a new risk indicator checklist substantial skewed performance.)

General Performance Commentary

Halton Multi Agency Risk Assessment Conference (MARAC) has seen 29 cases in this quarter with 9 repeat cases. Within this cohort there were 27 children in the associated households. This places our current rolling performance on NI 32 at 23%.

In comparison to last years performance, there are 12% less cases presenting at the MARAC (33 Q2 2009) with a similar level of repeats seen (9 Q2 2009). There has also been a 34% decrease in the number of children involved (41 Q2 2009). This indicates a continuing trend from quarter one of decreasing cases. As is noted above 2009/10 is not considered to be a reliable base line. Nevertheless, it would appear from this data that the local MARAC is seeing a reduction in the number of cases presented this year. This may be a positive indicator of the impact of the work undertaken in this area. However, this can not be assumed from a diminishing level in this data alone.

When looked at in comparison to general repeat levels reported centrally in Cheshire it indicates that Halton has a disproportionately high level of High risk cases in comparison to other areas with larger populations (13% higher than Cheshire East).

These figures also indicate a 19% increase in the overall level of incidents for this period (April 2010 to August 2010) in the area in comparison to the previous years figures (406 compared to 483). Similarly, the other Cheshire Area MARACs are reporting between 25 and 30 cases on average per month. Therefore, this reduction in cases can not be seen to be indicative of a trend of reducing high risk incidents when examined against other data.

Strategic PPU data:

Area	Population (Approx.)	Domestic Abuse Incidents	High Risk	Medium Risk	Standard Risk	Repeat Cases
Halton	119,500	483	87	174	213	126
Warrington	194,000	512	113	179	206	152
Cheshire East	358,900	1022	77	221	712	260
Cheshire West	327,500	866	96	232	537	209

Summary of key activities undertaken / planned during the year







The Domestic Abuse Stalking & Honour Based Violence risk identification model (DASH) training was delivered on two separate occasions to staff leading to 78 individuals being trained to date. There are three more specific events planned for October to ensure that specialist groups, such as Ashley House and School staff, have access to the training.

The MARAC research project remains ongoing and as of yet not commenced beyond the initial scoping work. This relates to resource issues as researchers were unable to gain access to the required data. It has been agreed that the current coordinator can access the requested files. Thus, this project will resume when sufficient capacity is available to undertake the project.

Domestic Abuse Training was undertaken In July on a multi agency basis but with an adult services focus to ensure that sufficient awareness existed within such teams. Two half day events were run to train 77 staff in basic awareness of domestic abuse and the services available locally. This training was generally well received with the feedback identifying that the training had been well presented, helpful, professional, interesting and had good handouts.

A Government Office North West (GONW) grant has been successfully achieved to provide additional Independent Domestic Abuse Advisor (IDVA) capacity to the area. Whilst this is not a renewed source of funding the £16,000 allocated will enable the current service to recruit some part time short term assistance to the existing IDVA.

NI 33i	Deliberate Primary Fires
NI 33ii	Deliberate Secondary Fires
NI 33	Deliberate Fires (Total)

Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
234	115	177	44	26	22	-	-		
1,043	585	678	169	161	128	-	-		
1,277	700	855	213	187	150	-	-		

Data Commentary

Data presented above has been collated from the Cheshire Fire and Rescue Service Incident Recording System (IRS).

It relates to actual recorded incident volumes and represents the complete data set for each period.

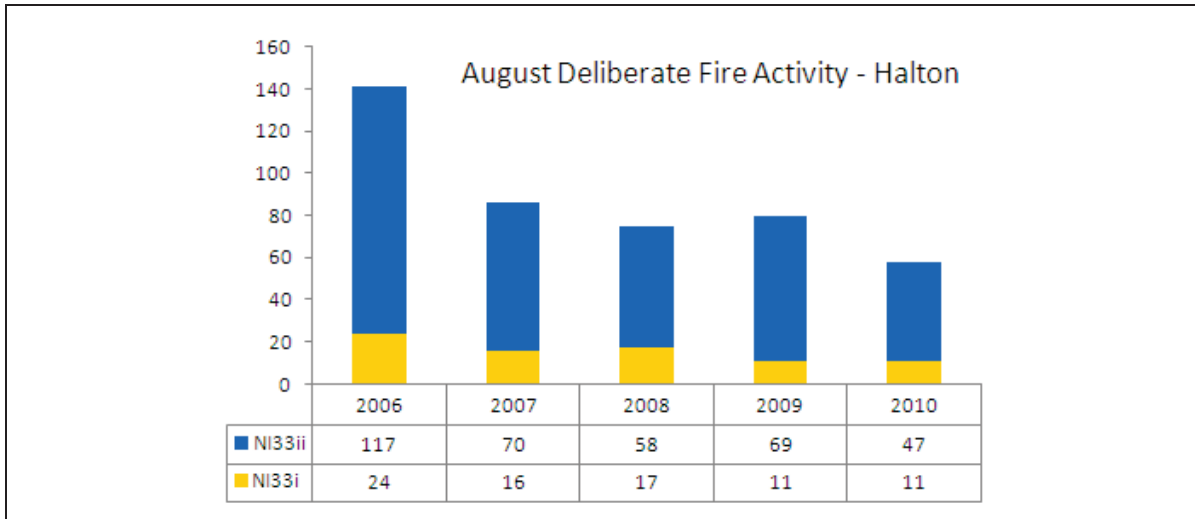
As IRS was introduced on 1 April 2009, baseline data and subsequent targets set were calculated using the previous data capture method.

IRS data is subject to further validation, thus figures recorded may alter slightly following further scrutiny.

General Performance Commentary

Both NI33i and ii have seen a positive downwards trend over the past three years and, if performance seen through the first two quarters of 2010/11 continues, the final target will be met.

Historically, August has generally seen an increase in incidents of small deliberate fire (NI33ii) specifically, due to the occurrence of the school holidays. The following graph illustrates the trend in these incidents. Overall deliberate fire activity in August has decreased by 59% over the five years, with Deliberate Primary and Deliberate Secondary Fire activity decreasing by 54% and 56% respectively.



Summary of key activities undertaken / planned during the quarter

Arson reduction activities in Halton are intelligence led; each of the stations in Halton (Runcorn and Widnes) produce a monthly arson report to identify trends and peaks in arson activity. Areas of high activity are reported the Halton 'Tasking and Coordination' Group in order to have a multi-agency approach to the problem; recent successes have been on Runcorn Hill and The Old Department of Employment Building in Runcorn plus Bechers in Widnes. Each of the stations has dedicated 'arson routes' which are reviewed monthly to encompass the areas of greatest anti-social fire activity; the crews patrol the areas in their fire appliances to act as a deterrent and provide reassurances to the community.



2010/11 action plans identify several areas of high activity with regards NI33, categorised by priority with regards the need for arson initiatives. By producing analysis at station level, fire fighters have an increased awareness and understanding of the issues surrounding deliberate fires and anti social behaviour and are therefore better equipped to deliver targeted initiatives.

The Service is heavily involved in a number of pro-active activities that will hopefully influence the behaviour and thoughts of the children towards fire and fire setting in the coming years including; The Phoenix Project, The Runcorn and Widnes Fire Station Community Bio-diversity Garden, Fire Cadets, Prince's Trust Programmes and the Respect Courses.

In Widnes specifically, Restorative Justice has recently been issued to 2 juveniles as a result of intelligence gained through partnership working and the PNR process.

One of our busiest periods is approaching in Quarter 3 and processes are already in place to deal with both Mischief and Bonfire Nights.

NI 39 | Reduce the number of alcohol related harm admissions

Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
2180	2548.6	2309	577	669	1381.5				

Data Commentary

Q1 data has been updated. Q2 figure has been calculated using a proxy figure for September data and will be updated in the Q3 report.

General Performance Commentary

Significant work has been undertaken to collate, analyse and understand local activity and implications of hospital admissions data for alcohol related harm. This enables us to build a picture of need across the borough down to ward level.

Summary of key activities undertaken / planned during the year



Initiatives which will impact on N1 39 target:

- Consultation continues in relation to a model for a redesigned, integrated alcohol misuse treatment system. The model will incorporate a single point of access and will be tendered for start up date of 1 September 2011. A business case will be presented to the Clinical commissioning Committee on 16 Dec 2010.
- All existing services have been subject to a review utilising 'lean' and QUIP principles. The review aimed to uncover waste and bottlenecks in the current system and assist in making the journey seamless for patients. The findings from the review will not only inform future service redesign but will inform short term service improvement programmes aimed in particular in increasing throughput in the current system.
- Work has begun in relation to exploring the role and maximising the potential of alcohol workers in hospital settings to ensure that we target known frequent attendees and reduce alcohol related admissions.
- Planned activity includes increasing Tier 3 service capacity in Halton to implement Alcohol Treatment Requirements and establish links with the Problem Solving Courts.
- A 12 Step abstinence based Recovery pilot for alcohol only clients in Halton and St Helens commenced on 1st October 2010. The pilot offers high intensity, structured day care for clients who are dependent on alcohol but who have opted for abstinence as a treatment goal. The programme is based upon the

world-renowned 12 step treatment model for alcoholism and addiction, pioneered by Alcoholics Anonymous. This pilot will not only increase treatment options for dependent clients and improve health outcomes, but will also contribute towards an improvement in alcohol-related social problems such as family and interpersonal relationships, ability to perform effectively at work, avoidance of criminal activity, enhanced parenting skills.

- The Tier 2 Alcohol Service in Halton (Arch) is now fully up and running and the contract has been extended until the end of the financial year. This service offers help and advice for anyone who is concerned about their own or someone else's drinking and offers evening and weekend appointments.
- Work continues in relation to refining a multi-agency 12 Point Plan for Alcohol Harm Reduction and consultation is currently underway in relation to the plan.
- Work has been undertaken at a Sub Regional Level (Cheshire East, Cheshire West & Chester, Warrington and Halton) through participating in an Alcohol Task Group which is pioneering a joint approach to alcohol harm reduction on behalf of the Community Safety and Justice Commission and the Health and Wellbeing Commission. The aim is to share best practice, improve effectiveness and reduce inefficiencies across the sub region.
- We are currently working in partnership with Cheshire Police who are developing an Integrated Offender Management Scheme which will explore how we can meet the health needs of people who are known or at risk of becoming known to the criminal justice system.

NI 40	Number of drug users recorded as being in effective treatment
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Baseline (2007-08)	09 – 10 Actual	2011 Target	Quarterly Target	2010 – 11 Cumulative outturn data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
500	486	529	428	421 (April – June)	N/A	-	-		

Data Commentary

NTA numbers in treatment data is available for month 3 (June) 2010/11. This shows Halton with 421 Problematic Drug Users (PDU) in effective treatment compared with 428 expected. This is -7 below target. NI 40 is reported 3 months in arrears to allow for full counting of numbers of people in treatment for more than 12 weeks.

General Performance Commentary



At the same stage last year, 405 PDU were in effective treatment compared with 415 expected. This was -10 below target.

As of October 2010, 37% of PDU (joint 6th highest in NW) and 47% of all drug users aged 18+ (10th in NW) treatment exits were planned YTD. Of all planned exits between April and October 2010, 34% (40/118) were 'treatment completed - drug free'. This is significantly above the national figure of 28%.

Summary of key activities undertaken / planned during the year

The evidence is still strongly suggesting that the vast majority of PDUs are either currently in treatment or have been in treatment, which is a success story for Halton. Emphasis is continuing to be placed on maintaining and improving the number of planned exits from treatment.

NI 47	Reduce the number of people killed or seriously injured in road traffic accidents
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Baseline (2006)	09 – 10 Actual	2011 Target	2010 – 11 Cumulative Data				Current Progress	Direction of Travel
			Q1	Q2	Q3	Q4		
10.7	5.9%	7.2%	14	33	-	-		

Data Commentary

The figures provided above are actual cumulative casualty numbers to the end of Q2 2010/11 provided by Cheshire Roads Partnership. Actual casualty numbers are given here, quarterly, as the official NI 47 figure is only produced at year end comparing the previous 3 year rolling average. Individual quarters can give rise to misleading indications of status due to the small numbers involved.

Performance Commentary

NI 47 measures the annual change in the 3 year rolling average of people killed or seriously injured in Road Traffic Collisions (RTC). Good performance is indicated by a positive % change indicating a reduction in the number of KSI casualties.



At the end of 2009/10 Halton recorded a positive 5.9% change in the 3 year rolling average, reflecting a reduction in the number of people killed or seriously injured in RTC's in calendar year 2009. The casualty levels can fluctuate a good deal year to year giving superficially odd results, but the data trend over recent years is definitely downwards.

Summary of key activities undertaken / planned during the year

Through a mixture of engineering works and road safety education, training and publicity, casualty figures continue to be driven down in Halton. 2009 was the most successful year for decades, and projects will continue to be undertaken to further reduce our casualty rate in the years ahead as funds allow.

For 2010 funding for safety work continues to be made available through Local Transport Plan sources and this will be utilised to further reduce casualty totals. For the future, everything will depend on the availability of finance to continue the successful work already undertaken.

SH LI 1 Reduce the number of incidents of ASB in the worst 5 Lower Super Output Areas compared with the rest of the borough

	Baseline 2007/ 2008	09 – 10 Actual	2011 Target	2010 – 11 Data				Current Progress	Direction of Travel
				Q1	Q2	Q3	Q4		
Percentage difference	24.5%	41.2%	9.5%	36%	38%	-	-		

Data Commentary

Baselines were set during 2007/08, using the Neighbourhood Management (NMA) areas: Castlefields, Windmill Hill, Halton Lea, Appleton, Kingsway. Data numbers have been taken from Police ward data covering the entire ward areas. It should be noted that these numbers will include a small element of non NMA data. Analysis to street level is not possible at this moment. By measuring complete wards the numbers should be used as an indicator only.

Performance Commentary

Targets were devised using 2007/08 figures as a baseline. This baseline was set following on from three years continued reduction in numbers, from 11214 in 2005/06, 10440 in 2006/07 to 9641 in 2007/08. The target chosen was therefore to ensure that the number of incidents recorded in each of the NMA's noted above were consistent with the rest of the borough and not to look for reductions in numbers as initially it was anticipated that numbers would rise in line with improved satisfaction.

Summary of key activities undertaken / planned during the year

The main activity that has had an impact on reducing the gap between reported ASB in the NMA wards and the rest of the Borough was the 'Respect Weeks of Action'. The week of action aims to tackle ASB and crime while trying to make the neighbourhood more appealing to the residents. These events are supported by youth out reach workers and the bus, Police, Fire along with other agencies. The continuing work of the various partnership projects help to reduce the gap, projects and teams include; Reparation project, Operation Staysafe, Diversion, Street based teams, FIP and YISP.

REPORT TO: Safer Policy & Performance Board

DATE: 18th January 2011

REPORTING OFFICER: Strategic Director Adults & Community

SUBJECT: Business Plans 2011-2014

WARDS: Borough wide

1. **PURPOSE OF THE REPORT**

- 1.1. To provide an update on Business Planning for the period 2011-14 and to consider the Directorate priorities, objectives and targets for services for this period that fall within the remit of this Policy and Performance Board.

2. **RECOMMENDED: that**

- i. The Board identifies any objectives and targets for the next three years that it wishes to see included in the Business Plans.
- ii. That Board Members pass any detailed comments that they may have on the attached information to the relevant Operational Director by 20th January 2011.

3. **SUPPORTING INFORMATION**

- 3.1 Each Directorate of the Council is required to develop a medium term business plan, in parallel with the budget, that is subject to annual review and refresh. Draft Service Objectives and Performance Indicators and targets have been developed by each Department and this information is included within Appendices to the Directorate Plan. These departmental objectives and measures will form the basis of the quarterly performance monitoring received by the Board during the future year.
- 3.2 Due to the proposed structural changes across the Council and the need to better integrate the Directorate's priorities as last year a combined plan will be published rather than individual Departmental Service Plans. This plan is still subject to reconfiguration of services between Directorates, subject to consultation.

3.3 PPB input to the business planning process and the setting of priorities for the Directorate is an important part of this process and the report outlines some options for consideration. Comments additional to those made following the PPB meeting should be made to the relevant Operational Director by 20th January 2011 to allow inclusion in the draft business plan.

3.4 The draft Directorate Business Plan will be revised given proposed reconfiguration of Directorates during January and will go to Executive Board for approval on 12th February 2011, at the same time as the draft budget. This will ensure that decisions on Business Planning are linked to resource allocation. All Directorate plans will be considered by full Council at the 2nd March meeting.

4.0 POLICY IMPLICATIONS

4.1 Business Plans form a key part of the Council's policy framework.

5.0 OTHER IMPLICATIONS

5.1 Directorate Plans will identify resource implications.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

All service objectives and performance indicators demonstrate how Directorate plans contribute to the delivery of Council's strategic priorities and key areas of focus.

7.0 RISK ANALYSIS

7.1 Risk assessment will continue to form an integral element of Directorate Plan developments. This report mitigates the risk of members not being involved in the setting of service delivery objectives.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 All Directorate Business Plans will be subject to an equality impact assessment and any high priority implications will be summarised within the plans.

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

9.1 There are no relevant background documents to this report.



Environment & Economy

DIRECTORATE PLAN

Environment & Regulatory Services (Extract)

April 2011 to March 2014

Contents

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Appendices

Service Objectives and performance Indicators

1.0 *Environment and Regulatory Services (Extract)*

1.0 FOREWORD AND INTRODUCTION

The Environment and Economy Directorate has a very varied remit covered by three Departments. It has an annual revenue budget in excess of £33 million and is responsible for significant annual capital expenditure.

The main purpose of the Directorate is to manage the built and natural environment in the Borough, to foster economic regeneration and to address the underlying causes of deprivation: problems of unemployment; worklessness; and lack of skills appropriate to the 21st century.

The Directorate Plan is designed to provide a strategic link with the Council's Corporate Plan. The Directorate is at the forefront of change within the Borough, as it helps drive forward both regeneration and waste management agendas. It will also be significantly affected by debate in the Liverpool City Region, particularly in respect of transport, regeneration and waste.

Of particular importance in the immediate future will be the need to manage the outcome of negotiations to secure a Joint Venture partner for the Daresbury Science and Innovation Campus; the translation of development at 3MG into good quality job opportunities for local residents; the further development of Widnes Town Centre; and the revitalisation of Halton Lea and Runcorn Town Centre. The anticipated outcome of the Public Inquiry into the Mersey Gateway Bridge will open up immense opportunities but will bring with it enormous demands to effectively manage a complex procurement process.



Dick Tregoe
Strategic Director
Economy and Environment Directorate

2.0 KEY MESSAGES

Environment and Regulatory Services

The Change in national government and the current economic climate will provide opportunities and challenges for local government regulatory services over the next three years.

The current economic uncertainty presents a challenging trading environment for business and there is perception amongst businesses that regulation can potentially create financial burdens. However a recent report published by LBRO entitled *From the Business End of the Telescope: Perspectives on Local Regulation and Enforcement* suggests businesses value the advice and guidance issued by local regulatory services. The report recognises that this advice & guidance can contribute to business success and sustainability. Halton has a strong record of supporting businesses with regulation. 81% of businesses in the Borough that have been subject to inspection, report that they are satisfied with regulatory services (National Indicator 182). This places Halton BC in the top 20% nationally in terms of satisfaction with local regulatory services.

To ensure businesses can trade both profitably and compliantly, Halton is committed to providing free comprehensive advice on regulation to all businesses, particularly small and medium sized enterprises. We will continue to focus resources on areas of highest risk and ensure that legitimate businesses that want to trade compliantly are protected from those who will not or can not comply with the law.

Key areas of work for environmental health will include the production and implementation of the following statutory documents:

- Food safety and standards inspection and enforcement plan
- A health and safety at work plan
- A pollution control enforcement and inspection plan
- A review and assessment of local air quality
- An animal welfare enforcement and inspection plan

In addition the following Key areas of work will also be undertaken 2010-2013

- Implement the new National Food Hygiene Rating Scheme operated by the Food Standards Agency (FSA). Hygiene scores of all food premises in the Borough will be published. The scheme will reward compliant businesses and provide a non-regulatory incentive to non-compliant businesses.
- The Food and Health & Safety teams will address recommendations in Lord Young's review of health & safety law (*Common Sense, Common Safety 2010*) and work towards greater integration of food and health & safety inspections.

- Following recent government support of the Mersey Gateway, the Contaminated Land team will need to work closely with the Environment Agency and associated agencies prior and during construction to carry out risk assessments, site investigations and any required remediation work arising from contaminated land in the region of the Gateway.
- Following the declaration of Air Quality Management Areas in Halton by Environmental Protection, the service will continue to monitor and consult with stakeholders in order to produce an Air Quality Management Plan to improve air quality in these areas.
- Recent government proposals to change the delivery of public health services have yet to be formalised. It is proposed that local authorities will assume responsibility for public health & well being from PCT. It is crucial that Regulatory Services play a substantial part of this role given our current close collaboration and partnership work with the PCT. Major public health concerns such as obesity and smoking are already being addressed by projects undertaken by both partners: Development Control and Environmental Health are developing a Special Planning Document to limit the number of takeaways around schools; Environmental Health are working with the PCT to improve the nutritional quality of takeaway food in the Borough. Regulatory Services have the potential to improve the public health of the Borough alongside its regulatory role.

A key cross cutting task for the department will be to utilise powers presented in the Clean Neighbourhoods and Environmental Act to improve the quality of the local environment, by deterring litter, fly-tipping, fly-posting, graffiti and dog fouling; to require managers of land used by the public to remove litter and abandoned vehicles; and to enable local authorities to use enforcement powers to tackle poor environmental quality and anti-social behaviour.

The Council has committed significant investment to deliver enhanced kerbside recycling services, however, regardless of the systems that are implemented, the Council will only be successful in increasing recycling if it has the cooperation of the residents of Halton. Essential to achieving increased cooperation and participation is a raised awareness of waste related issues.

The Council's current Waste Strategy highlights the need for effective communications and awareness raising and during the life of this plan the Department will continue to develop and deliver comprehensive and targeted education and communications programs. The need to divert waste from landfill and increase recycling is likely to result in the implementation of initiatives or services designed to encourage higher levels of participation with the Council's services. Incentives and rewards for recycling will also be maintained that, together with improved community engagement activities, will encourage positive environmental behaviour amongst Halton's residents.

Local environmental quality is important as it impacts on the whole community and is consistently rated as the most important issue for local people. Whilst the Department's approach to changing attitudes will focus upon increased education and community engagement the strengthening of enforcement measures will be required to underpin the Council's efforts to tackle environmental crime and nuisances. The Department now delivers a more coordinated approach to ensuring a cleaner, greener, safer environment and a continued emphasis will be the development and implementation of plans, strategies and policies to tackle, and deal effectively with the effects, of environmental crime and nuisance. During the life of this Plan, further coordination of departmental enforcement activities and joint working with key partners will be delivered.

There has been and continues to be a problem with recruiting staff across the professional regulatory domain which has the potential for affecting the Department's ability to deliver a challenging agenda. There is only a finite pool of available qualified labour to tap into and replacing staff members almost always involves poaching from neighbouring authorities.

Requirements to prepare sustainability appraisals and 'Appropriate Assessment' of the impact plans may have on the environment have increased project timescales for all planning documents. Similarly, tests of 'soundness' for the Local Development Framework (the replacement Unitary Development Plan) require considerably more public consultation and a wider and rigorous evidence base. Divisional resources have been switched to concentrate on the core strategy to meet government expectations, implement the Sustainable Communities Strategy and replace outdated UDP Policies. The Division will continue its commitment to the Growth Point for Halton, St. Helens and Warrington that aims to provide an additional 20% more housing in the Borough. These requirements put additional pressures on existing resources and again have the potential to impact upon service delivery.

The Council's success in securing 'Playbuilder' funding, of £1.121 million over a three year period, to develop play facilities in the Borough has placed extreme pressure on the Landscape Services Divisions Design and Development team who are charged with delivering the physical facilities aspect of the project. Revenue maintenance costs would have been an issue that may have derailed the 'Playbuilder' scheme but funding has been secured from the PCT for two additional Playground Maintenance Operatives. This funding is in place for a five-year period. The Council has made a commitment to the PCT to provide five new play facilities.

3.0 FACTORS AFFECTING THE DIRECTORATE

The work of the Directorate is influenced in large part by external factors. Changes in Government could see alterations to the legislative framework upon which much of the work of the Directorate is based. The present economic climate has had a severe impact on the rate of development with consequential effects on, for example, the fee income arising from planning and building regulation fees. A reduction in public sector spending will affect the pace of regeneration and will necessitate a review of priorities to take account of any changes. It will also mean that the need to respond to opportunities will become even more critical.

Environment and Regulatory Services

The Better Regulation Executive (part of the Business Innovation and Skills Department) is likely to be retained by the current administration as will some functions of the Local Better Regulation Office (LBRO). The purpose of both organisations is to reduce the regulatory burden on business and ensure regulations are applied in a transparent and proportionate manner.

The six national priorities for enforcement set out by the Rogers Review in 2007 are:

- Air Quality including regulation of pollution from factories & homes
- Alcohol & entertainment licensing enforcement
- Hygiene of food premises
- Improving health in the workplace
- Animal & Public Health
- Fair Trading

As this government has retained the bodies overseeing these areas, it is likely these areas will remain a regulatory priority in forthcoming years. This government appears to be committed to furthering the *Better Regulation* agenda to ensure regulation and enforcement is consistent with 5 key themes:

1. Transparency
2. Consistency
3. Accountability
4. Proportionality
5. Targeted

The waste management agenda continues to move at a great pace and there remain powerful economic, environmental, legislative and policy drivers for continued change. In order to meet the requirements of the EU Landfill Directive, implemented in England through the Landfill Allowance Trading Scheme (LATS), Waste Disposal Authorities were set diminishing limits on the levels of biodegradable waste permitted to be disposed of at landfill sites. This legislation, together with annual increases in landfill tax and disposal costs, continues to represent the most significant drivers for change, and the ones that have the greatest financial impact upon the authority. The Department

plans to increase the level of waste sent to landfill disposal, and minimise future cost increases, through a programme of waste reduction initiatives, delivering successful recycling services, implementing initiatives to encourage increased participation with the Council's recycling services and through the procurement of services for the long term treatment of residual waste.

In June 2010, the Secretary of State for the Department for Environment, Food and Rural Affairs (Defra) announced that the Government would undertake a full review of waste policy in England. The outcome could significantly affect Halton's policies for dealing with waste. The Council had intended to carry out a full review of its own Waste Management Strategy in 2010, however, following the announcement from the Secretary of State, the Council agreed to undertake a review of its own Strategy once the full details of the Government's review were known. Preliminary results from the Government's review will be available in spring 2011.

4.0 ORGANISATIONAL INITIATIVES

There are a number of initiatives that have been developed at an organisational level in order to ensure consistency and synergy between individual business units of the Council. As such these initiatives are relevant to the work of all Directorates of the Council and have implications for, and are supported by, the work of the individual departments that sit beneath them. Such initiatives include:-

Equality, Diversity and Community Cohesion

Halton Council is committed to ensuring equality of opportunity within all aspects of its service design and delivery, policy development and employment practices. This commitment is reflected in a range of policies, strategies and other framework documents and practices that underpin the work of the Council through its day to day operational activities.

The Council reviewed and refreshed its [Single Equality Scheme](#) in 2009. As a result of the introduction of the Equalities Act (2010) the scheme has recently been further reviewed and slightly refined to ensure that it remains current and fit for purpose.

The scheme sets out the Council's approach to promoting and securing equality of opportunity, valuing diversity and encouraging fairness and creating and promoting a social environment in which people can work, learn and live free from discrimination and victimisation in all of its forms. The Council will combat discrimination throughout the organisation throughout the organisation and will use its position of influence in the borough to help to identify and remove discriminatory barriers and practices where they are found to exist.

The Council has developed a systematic approach to examine and address the equality implications of its existing and future policies, procedures and

practices through the use of a Community Impact Review and Assessment process.

As a result of such assessments any actions considered to be of high priority will be monitored and reported through the Council's Quarterly Performance Reporting process.

At a partnership level issues of equality are overseen by the Halton Strategic partnership Equalities, Engagement and Cohesion sub-group and the Community Cohesion Officers Group, which has a more operational focus to any potential tension within communities.

Environmental Sustainability

The Council is committed to taking a lead and setting an example in tackling climate change. The Council has developed a Carbon Management Strategy that will support the Council in managing its carbon emissions and developing actions for realising carbon and financial savings and embedding carbon management into the authority's day to day business. The Plan will be reviewed and updated during 2011/12.

The Council has set a target to reduce its emissions by 20% from 2008 – 09 levels over 4 years by 2013/14. If this target is to be achieved individual services areas will need to develop service specific plans for their areas. The Council's total emission levels in 2009/10 were **(to be added)**

This breaks down as follows: -

- Corporate Buildings
- Schools
- Street Lighting
- Vehicle Fleet
- Business Miles

To improve the focus on achieving its targets the Directorate, through the Carbon Group, will develop specific plans and, where appropriate, specific reduction targets around buildings and vehicle fleet, business miles and street lighting.

The Council has also worked with the Energy Saving Trust to develop opportunities for reducing emissions in the wider community. The opportunities will form the basis of a Corporate Climate Change Strategy to be developed in 2011/12. Directorates will contribute to and support specific actions within the overall Strategy.

Arrangements for managing Data Quality

Good quality data provides the foundation for managing and improving services, determining and acting upon shared priorities, and accounting for performance to inspecting bodies and the local community.

In recognising this, the Council has developed a Corporate Data Quality Strategy that will provide a mechanism by which the authority can be assured that the quality of its data remains robust and fit for purpose. This strategy, which will remain subject to periodic review, identifies five Key Corporate Objectives and establishes the key dimensions of good quality data i.e. that data is:-

- Accurate:* For its intended purpose;
- Valid* By being consistently recorded and used in compliance with predetermined definitions and rules;
- Reliable* By reflecting stable and consistent data collection processes;
- Timely* By being made available as soon as possible after the activity or event and in line with organisational requirements;
- Relevant* For the purpose intended;
- Complete* In that the monitoring of incomplete, missing or invalid data is avoided as far as is possible.

In supporting the delivery of the corporate strategy the Directorate will ensure that appropriate systems and processes are in place to secure the quality of its data and that such systems are subject to periodic and risk-based review.

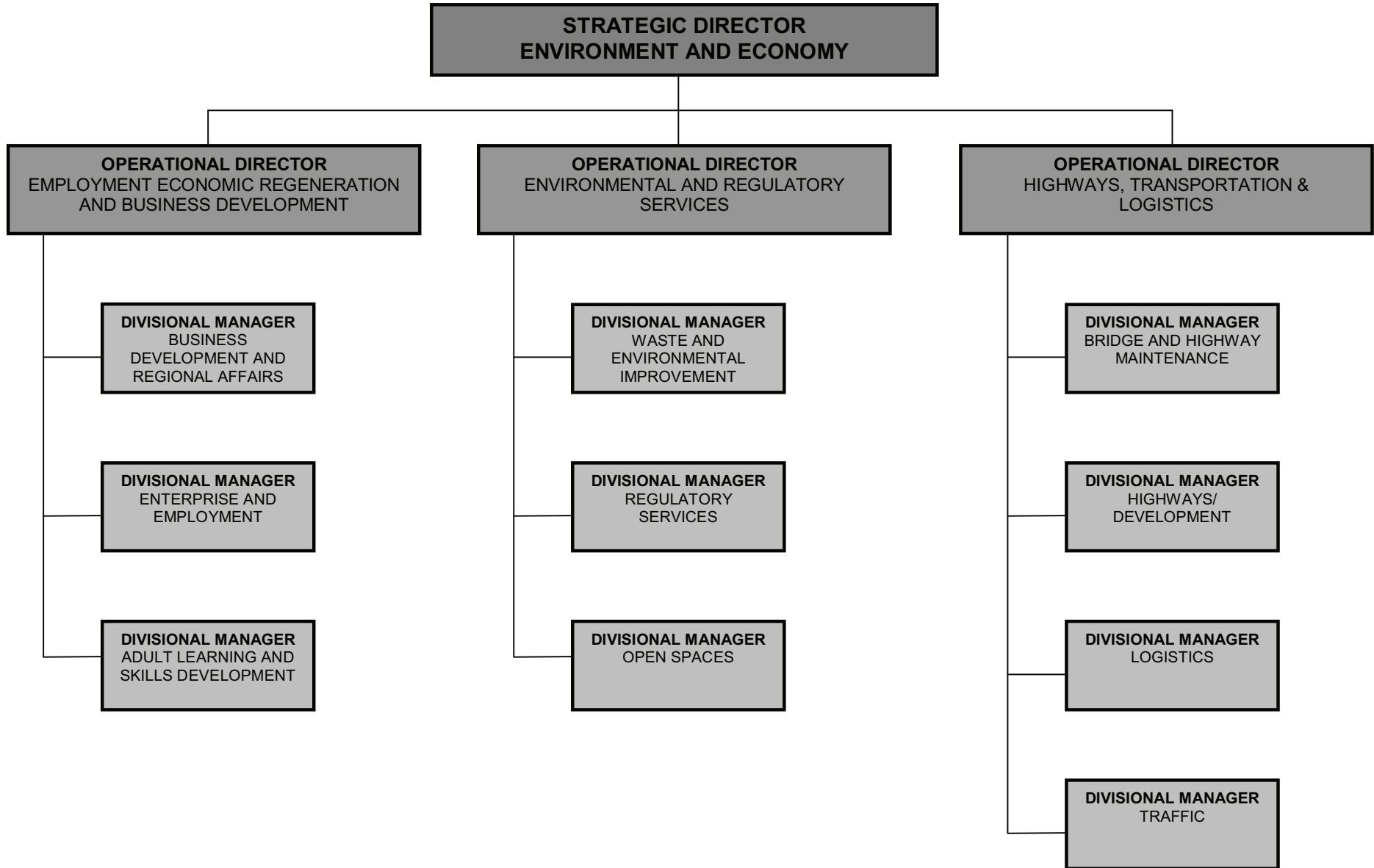
Risk Management

Risk Management, which forms a key element of the strategic and performance management processes of the Council, is a business discipline that is used to effectively manage potential opportunities and threats to the organisation in achieving its objectives.

Risk assessments are the process by which departments identify those issues that are, or may be, likely to impede the delivery of service objectives. Such risks are categorised and rated in terms of both their probability, i.e. the extent to which they are likely to happen, and their severity i.e. the potential extent of their impact should they occur.

Following such assessments a series of risk treatment measures are identified that will mitigate against such risks having an adverse impact upon the delivery of departmental / organisational activities. All high risks and the implementation of their associated mitigation measures will be monitored and reported through the Council's quarterly performance monitoring arrangements

5.0 DIRECTORATE STRUCTURE



6.0 RESOURCES

The reorganisation of the Directorate involving the reduction in Departments from four to three but with the incorporation of both Property Services and External Funding and Regional Affairs into the Business Development and Regional Affairs Division, a modest movement of staff to ensure effective operation will be necessary. The Directorate's employees will be mainly concentrated in Rutland House and the Municipal Building. The two depots at Lowerhouse Lane and Picow Farm Road will remain the main focus for operational activities, including amongst others, maintenance of open spaces, refuse collection and community transport.

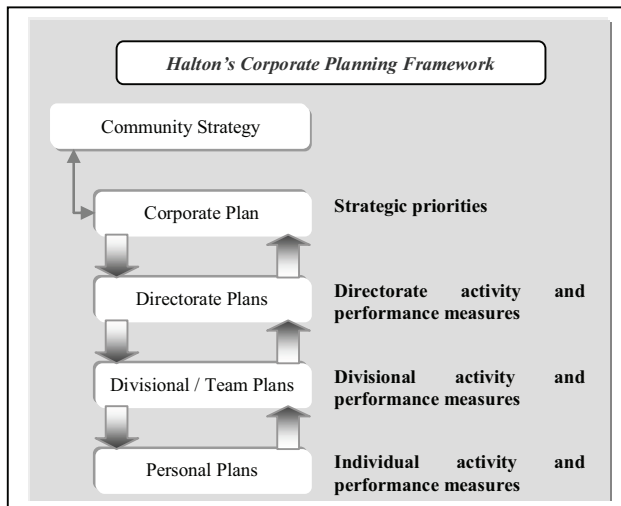
The Mersey Gateway Team will remain in its present location at Turnstone Park as it moves through the procurement phases of its work. Funding for the Mersey Gateway Team and the procurement of the Project will remain a significant resource issue during the duration of this plan. The other main financial issues remain the increasing costs of dealing with the Borough's waste through recycling and disposal. The effect of severe weather also has an impact on resources and in each of the last two winters, the cost of gritting and snow clearing has exceeded the budget allocation, whilst the longer term consequences of the adverse weather in terms of damage to the roads has also severely affected budget availability.

The way in which incidents of severe weather affects the operation and budget of the Directorate will be kept under close scrutiny.

7.0 BUSINESS PLANNING

Directorate Plans form an integral part of the authority's corporate planning framework, as illustrated within the diagram opposite.

This framework ensures that the Council's operational activities are complementary to the delivery of its community aspirations and legal and statutory responsibilities.



Such plans, and the Quarterly Service Plan Monitoring Reports that flow from them, are an essential tool in enabling the public, Elected Members, Senior Management, and staff how well Council departments are performing and what progress is being made in relation to improving the quality of life within the borough and service provision for local people, businesses and service users.

Performance Reporting

It is imperative that the Council and interested members of the public can keep track of how the Council and its Departments are progressing against objectives and targets, and that mechanisms are in place to enable councillors and managers to see whether the service is performing as planned.

As a result Departmental progress will be monitored through:

- The day to day monitoring by Strategic Directors through their regular interaction with Operational Directors;
- Provision of Quarterly progress reports to Corporate and Directorate Management Teams;
- The inclusion of Quarterly monitoring reports as a standard item on the agenda of all the Council's Policy and Performance Boards.
- Publication of Quarterly monitoring reports on the Council's intranet site.

In demonstrating its commitment to exploiting the potential of Information and Communications Technology to improve the accessibility of its services and related information an extensive range of documentation, including this plan and its associated quarterly monitoring reports, are available via the Council's website at

<http://www2.halton.gov.uk/content/councilanddemocracy/council/plansandstrategies>

Additionally information and assistance can be accessed through any of the Council's Halton Direct Link facilities (HDL) or the Council's libraries.

Environment & Regulatory Services Division

Extracts for Safer Halton PPB

Service Objectives/Milestones/Performance Indicators: 2011 – 2014

Draft

Corporate Priority	A Safer Halton					
Service Objective: EAR 5	To undertake actions to maintain a clean, safe and attractive borough.					
Key Milestone(s) (11 – 12)	<ul style="list-style-type: none"> • <i>Develop Action Plans and Protocols with External Agencies, to effectively prevent and tackle a range of waste and environmental offences March 2012.</i> • <i>Continue to review and assess the effectiveness of the Council's Environmental Enforcement Strategy March 2012.</i> 					
Key Milestone(s) (12 – 13)	<ul style="list-style-type: none"> • <i>Continue to review, and implement actions to meet, the commitments of the Council's Action Plans and Joint Protocols. March 2013.</i> • <i>Continue to review and assess the effectiveness of the Council's Environmental Enforcement Strategy March 2013.</i> 					
Key Milestone(s) (13 – 14)	<ul style="list-style-type: none"> • <i>Continue to review, and implement actions to meet, the commitments of the Council's Action Plans and Joint Protocols. March 2014.</i> • <i>Review and update as necessary the Council's Environmental Enforcement Strategy and policies March 2014.</i> 					
Risk Assessment	Initial	Medium	Responsible Officer	Divisional Manager Waste & Environmental Improvement	Linked Indicators	NI 195 & 196
	Residual	Medium				

Ref ¹	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14

Service Delivery

NI 184	Food establishments in the area which are broadly compliant with food hygiene law	84%	72%		75%	75%	75%
NI 190	Achievement in meeting standards for the control system for animal health	LEVEL 1	LEVEL 1		LEVEL2	LEVEL2	LEVEL2

Ref	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14

Quality

<i>NI 182</i>	Satisfaction of business with local authority regulation services	82%	80%		80%	80%	80%
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¹ Key Indicators are identified by an **underlined reference in bold type**.

Adults & Communities Directorate

Extracts for Safer Halton PPB

**Service Objectives/Milestones/Performance Indicators:
2011 – 2014**

DRAFT

Departmental Performance Indicators

Ref ¹	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14

Service Delivery

CS 3	Domestic burglaries per 1,000 households (Previously BVPI 126 & CL L11).	5.04	4.66		N/A	N/A	N/A
CS 4 ²	Number of racial incidents recorded by the Authority per 100,000 population (Previously BVPI 174 & CL L12).	N/A	N/A		N/A	N/A	N/A
CS 5 ³	% Of racial incidents that resulted in further action (Previously BVPI 175 & CL L13).	N/A	N/A		N/A	N/A	N/A
NI 21 ⁴	Dealing with local concerns about anti-social behaviour and crime by the local council and police	21.2 (2008/9)	25.2	See Footnote	N/A	–	N/A
NI 27 ⁴	Understanding of local concerns about anti-social behaviour and crime by the local council and police	21.1% (2008/9)	24.9	See Footnote	N/A	–	N/A

N/A – Not available

¹ Key Indicators are identified by an **underlined reference in bold type**.

² There are difficulties in collecting data for this indicator. Work is under way to resolve this.

³ There are difficulties in collecting data for this indicator. Work is under way to resolve this.

⁴ NI 21 and 27 are part of the Place Survey. There is no biennial Place Survey in October 2010 given a recent Ministerial Announcement. Due to this announcement we will not be reporting these measures for the rest of the year. Consideration will be given to whether there is need for a slimmer local survey in 2011 following clarification of the government's reporting requirements (April 2011) and our own performance management needs.

Ref ⁵	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14

Quality

NI 17 ⁶	Perception of anti-social behaviour	24.4% (2008/9)	21.2	See Footnote	N/A	–	N/A
NI 22 ⁷	Perceptions of parents taking responsibility for the behaviour of their children in the area	25.4% (2008/9)	29.6	See Footnote	N/A	–	N/A
NI 23 ⁷	Perceptions that people in the area treat one another with respect and dignity	37.2% (2008/9)	32.4	See Footnote	N/A	–	N/A
NI 41 ⁷	Perceptions of drunk or rowdy behaviour as a problem	32.2% (2008/9)	27.7	See Footnote	N/A	–	N/A
NI 42 ⁷	Perceptions of drug use or drug dealing as a problem	40.8% (2008/9)	35.7	See Footnote	N/A	–	N/A

⁵ Key Indicators are identified by an **underlined reference in bold type**.

⁶ This indicator is part of the Place Survey. There is no Place Survey in 2010 given a recent Ministerial Announcement. Due to this announcement we will not be reporting these measures for the rest of the year. Consideration will be given to whether there is need for a slimmer local survey in 2011 following clarification of the government's reporting requirements (April 2011) and our own performance management needs.

⁷ NI 22, NI 23, NI 41 and NI 42 are also part of the Place Survey (see above footnote)

Ref ⁸	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14

Area Partner National Indicators							
The indicators below form part of the new National Indicator Set introduced on 1 st 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.							
NI 15	Serious violent crime rate	0.17	0.70		N/A	N/A	N/A
NI 16	Serious acquisitive crime rate (per 1000 population)	14.42	15.65		15.23	N/A	N/A
NI 18	Adult re-offending rates for those under probation supervision	8.57	6.77		N/A	N/A	N/A
NI 19	Rate of proven re-offending by young offenders	15.6% (cf 2005 baseline)	N/A		N/A	N/A	N/A
NI 20	Assault with injury crime rate (per 1000 population)	8.89	10.09		9.82	N/A	N/A
NI 28	Serious knife crime rate	0.47	N/A		N/A	N/A	N/A
NI 29	Gun crime rate	0.13	N/A		N/A	N/A	N/A
<u>NI 30</u> ⁸	Re-offending rate of prolific and priority offenders	16.69	19		N/A	N/A	N/A
<u>NI 33</u> ⁸	Arson incidents	700	855		N/A	N/A	N/A
NI 34	Domestic violence – murder	0.001 Cheshire	N/A		N/A	N/A	N/A
NI 38	Drug-related (Class A) offending rate	0.65	N/A		N/A	N/A	N/A
NI 143	Offenders under probation supervision living in settled and suitable accommodations at the end of their order or licence	N/A	N/A		N/A	N/A	N/A
NI 144	Offenders under probation supervision in employment at the end of their order or licence	N/A	N/A		N/A	N/A	N/A

⁸ Key Indicators are identified by an **underlined reference in bold type**.

Ref ⁹	Description	Halton 09/ 10 Actual	Halton 10/11 Target	Halton 10/11 Actual	Halton Targets		
					11/12	12/13	13/14
NI 35	Building resilience to violent extremism	N/A	2.5		2.5	N/A	N/A
NI 36	Protection against terrorist attack	N/A	N/A		N/A	N/A	N/A
NI 32	Repeat Incidents of Domestic Violence	22%	27%		N/A	N/A	N/A
NI 39	Hospital Admissions for Alcohol Related Harm	2548.6E	2309		N/A	N/A	N/A
NI 40	Drug users in effective treatment	486	515		N/A	N/A	N/A
NI 49	Number of primary fires and related fatalities and non-fatal casualties, excluding precautionary checks	N/A	N/A		N/A	N/A	N/A

⁹ Key Indicators are identified by an **underlined reference in bold type**.

REPORT TO: Safer Policy & Performance Board

DATE: 18th January 2011

REPORTING OFFICER: Strategic Director Resources

SUBJECT: Performance Management Reports for Quarter 2 of 2010/11

WARDS: Boroughwide

1.0 PURPOSE OF REPORT

To consider and raise any questions or points of clarification in respect of performance management reports for the second quarter of 2010/11 (to September 2010). The report details progress against service objectives/ milestones and performance targets, and describes factors affecting the service for:

- Environment & Regulatory Services - Environmental Health
- Adults & Communities – Community Services & Prevention and Commissioning (Extracts)

2.0 RECOMMENDED: That the Policy and Performance Board

- 1) Receive the second quarter performance management report;**
- 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 advanced 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 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

9.1 There are no background papers relevant to this report

Departmental Quarterly Monitoring Report

<u>Directorate:</u>	Environment & Economy
<u>Department:</u>	Environmental & Regulatory Services (Extract)
<u>Period:</u>	Quarter 2 - 1 st July – 30 th September 2010

1.0 Introduction

This quarterly monitoring report covers the Environmental & Regulatory Services Department second quarter period up to 30th September 2010. It describes key developments and progress against 'key' milestones and performance indicators for the Environmental Health 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 & Emerging Issues

The Contaminated Land team has just completed the last phase of Halton Schools Radon monitoring programme required by the Health Protection Agency (HPA). Two schools have recorded levels just above the recommended levels set by the HPA and one school has levels above the statutory level set out in the Ionising Regulations.

Further monitoring will be recommended in the former two schools but action will need to be carried out with regards to the latter school: Weston Point Primary in Runcorn. Discussions are currently being carried out with school staff, parents and all appropriate directorate staff. Successful remedial works have already been carried out in Fairfield Junior School in relation to Phase 2 of the monitoring programme.

Dog Control Orders took effect from 1st October 2010 following the statutory obligation to publicise the orders in the local press which included articles in *Inside Halton*. Comments have been received which will be taken into consideration when the Orders are reviewed. The comments received were strongly supportive of the Council's action to promote responsible dog ownership.

3.0 Service Objectives / milestones

3.1 Progress against 'key' objectives / milestones

Total	4		4		0		0
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For further details please refer to Appendix 1.




3.2 Progress against 'other' objectives / milestones

Total	0		0		0		0
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There are presently no objectives/ milestones of this type identified for this service.



4.0 Performance indicators

4.1 Progress Against 'key' performance indicators

Total	0		0		0		0
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There are presently no objectives/ milestones of this type identified for this service to report to the Safer Halton PPB.

4.2 Progress Against 'other' performance indicators

Total	3		0		0		0
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For further details please refer to Appendix 4. Please note that the total also includes 3 indicators for which information is currently unavailable and will be reported at year end.

5.0 Risk Control Measures

There are no Risk Control Measures for this area.

6.0 Progress against high priority equality actions

There are no High Priority Equality Actions for this area.

7.0 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.

8.0 Appendices



- Appendix 1 Progress Against 'key' objectives / milestones
- Appendix 2 Progress against 'other' performance indicators
- Appendix 3 Financial Statement
- Appendix 4 Explanation of use of symbols

Appendix 1: Progress Against 'key' objectives / milestones

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 2	Supporting Commentary
Formal/Public declaration of the Air Quality Management Areas (AQMA) March 2011.		Date for declaration to be agreed in Q3. Declaration to be made in Early 2011.

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 2	Supporting Commentary
Develop a Strategy, in consultation with relevant HBC officers, external agencies and other stakeholders. Oct 2010		A draft Strategy has been produced and will be presented to Members for consideration at a future meeting.
Develop Action Plans, in conjunction with other Divisional Managers, for service areas within the Environmental and Regulatory Services Department. Mar 2011.		These Plans will be developed in line with the target timescale.

Appendix 1: Progress Against 'key' objectives / milestones

Implement actions to meet the commitments of the Strategy and Action Plans. **Mar 2011.**



This target will be met.

Appendix 2: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
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Quality

NI 182	Satisfaction of business with local authority regulation services	82%	80%	Refer to comment	N/A	N/A	Data collected & reported annually No indication/information that target cannot be reached at this stage.
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Service Delivery

NI 184	Food establishments in the area which are broadly compliant with food hygiene law	84%	72%	Refer to comment	N/A	N/A	Data collected & reported annually No indication/information that target cannot be reached at this stage.
NI 190	Achievement in meeting standards for the control system for animal health	LEVEL 1	LEVEL 1	Refer to comment	N/A	N/A	This is an annual figure. We are currently agreeing a contract with Oldham BC to complete the inspection programme. On target to achieve level 1.

Appendix 3 Financial Statement

ENVIRONMENT & ECONOMY DIRECTORATE

ENVIRONMENT & REGULATORY SERVICES

Revenue Budget as at 30th September 2010

	Annual Budget £'000	Budget To Date £'000	Actual To Date £'000	Variance To Date (overspend) £'000	Actual Including Committed Items £'000
Expenditure					
Employees	6717	3337	3476	(139)	3476
Landscape Maintenance	217	113	44	69	44
Other Premises	71	45	54	(9)	54
Supplies & Services	403	162	148	14	236
Hired & Contracted Services	352	177	179	(2)	267
Unitary Development Plan	30	0	0	0	0
Trade Waste Tipping	120	60	58	2	58
Other Transport	90	45	47	(2)	47
Grants To Voluntary Organisations	44	44	38	6	38
Recycling	524	280	340	(60)	340
Waste Disposal	5135	2140	2054	86	2054
Agency Related	19	19	18	1	18
Finance Charges	78	0	0	0	0
Total Expenditure	13800	6422	6456	(34)	6632

Appendix 3 Financial Statement

	Annual Budget	Budget To Date	Actual To Date	Variance To Date	Actual Including Committed Items
	£'000	£'000	£'000	(overspend) £'000	£'000
Income					
Sales	-64	-55	-31	(24)	-31
Planning Fees	-577	-231	-234	3	-234
Building Control Fees	-252	-126	-67	(59)	-67
Pest Control	-69	-53	-48	(5)	-48
Trade Waste Charges	-346	-173	-146	(27)	-146
Other Fees & Charges	-561	-280	-79	(201)	-79
Rents	-18	-7	0	(7)	0
Government Grants	-242	-127	-104	(23)	-226
Reimbursements & Other Grants	-11	0	-1	1	-1
Schools SLA	-250	-125	-123	-2	-123
Non-Revenue	-101	-51	-69	18	-69
Total Income	-2491	-1228	-902	(326)	-1024
Net Controllable Expenditure	11309	5194	5554	(360)	5608
Recharges					
Premises Support	125	8	7	1	7
Transport	2043	1026	1048	(22)	1048
Departmental Support Services	0	0	0	0	0
Asset Charges	100	0	0	0	0
Central Support Services	0	0	0	0	0
Support Service Income	-	-	-		-
	315	31	35	4	35
Net Total Recharges	1953	1003	1020	(17)	1020
Net Departmental Total	13262	6197	6574	(377)	6628

Appendix 3 Financial Statement**Comments on the above figures:**

In overall terms revenue spending at the end of quarter 2 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 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 recycling, the recycle bank scheme is progressing faster than anticipated

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 item under achieved its target by £200k last financial year and is forecast to underachieve again this financial year. This is a result of a slow down in the development industry. Income from Open Spaces external works and Trade Waste is also lower than anticipated. These income budgets are being closely monitored and all efforts are being made to maximise this income, but it is highly unlikely that year-end targets will be met.

Sales income relates to pollution prevention control. Investigations are underway to ensure that all possible income has been invoiced.

At this stage it is anticipated that the overall spend will be ahead of the Departmental budget by the end of the financial year. All efforts are being made to minimise the impact.

Appendix 3 Financial Statement

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

	2010/11 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Screened Tip Area	25	25	25	0
Improvement To Allotments	85	20	18	67
Hale Park	447	40	34	413
Children's Playground Equipment	93	10	7	86
Milton Avenue	34	34	48	-14
Victoria Park	8	4	4	4
Town Park	42	42	76	-34
Hallwood/Roehampton	30	30	38	-8
Playground – Wellington Street	0	0	6	-6
Arley Drive	36	2	2	34
Playground – Runcorn Hill Park	0	0	2	-2
Landfill Tax Credit Schemes	340	0	0	340
Growth Points Award	580	0	0	0
Litter Bins	20	0	0	20
Recycling Bins	70	70	77	-7
Total Capital Expenditure	1810	277	337	893

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 3 Financial Statement

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




	Annual Budget £'000	Budget To Date £'000	Actual Spend To Date £'000	Variance To Date (overspend) £'000
Area Forum				
Area Forum 1	110	55	8	47
Area Forum 2	89	45	7	38
Area Forum 3	87	44	14	30
Area Forum 4	127	64	43	21
Area Forum 5	114	57	20	37
Area Forum 6	53	26	4	22
Area Forum 7	20	10	1	9
Priority 5 Safer Halton				
Pride of Place Action Team	33	16	0	16
Area Forum Co- Ordinator	42	21	19	2
ASB Commissioned Services	543	271	-103	374
Total LSP Expenditure	1218	609	13	596

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

Departmental Quarterly Monitoring Report

Directorate: ADULT & COMMUNITY

Department: COMMUNITY SERVICES (Extracts)

Period: 1st July to 30th September 2010

1.0 Introduction

The purpose of this report is to provide information concerning those indicators identified within the Adults and Community Directorate Plan that relate to the Community; namely, the Community Safety, Drug and Alcohol Action and Domestic Violence Teams.

The way in which RAG symbols and Travel Indicator symbols have been used to reflect progress to date is explained in Appendix.

2.0 Key Developments

In Quarter 2 Serious Acquisitive Crime (NI16) and Assault with Less Serious Injury (NI20) have decreased between Q1 and Q2 2010 demonstrating an improvement in performance. During Q2 the CAG developed and supported three weeks of action. During each week of action a programme specific to the needs and requirements of each of the target areas was developed bringing together a wide variety of agencies and organisations who, with the help of local residents, try to address the problems in each of the areas by bringing the community closer together with activities for young and old alike.

NI33 relating to Deliberate Fires continues to see a decrease during Q1 and Q2. If performance continues in Q3 and Q4 the target will be met to continue to reduce deliberate fires.

Domestic Abuse Training was undertaken in July on a multi agency basis but with an adult services focus to ensure that sufficient awareness existed within such teams. Two half day events were run to train 77 staff in basic awareness of domestic abuse and the services available locally. This training was generally well received with very positive feedback from the course. There are three more specific events planned for October to ensure that specialist groups, such as Ashley House and School staff have access to the training.

A number of National Indicators were in the past derived from the Place Survey. There is no Place Survey in 2010 given a recent Ministerial Announcement. Due to this announcement we will not be reporting these measures for the rest of the year. For some Place Survey indicators consideration is being given to our own local performance management needs. For example, in relation to NI7 (Increase voluntary and community sector satisfaction by creating a strong environment in which it can thrive), a range of proxy indicators are being developed.

3.0 Emerging Issues

Following the successful Restorative Justice conference during Q1, the PPO team are arranging for a DVD to be produced outlining the process. The footage consisted of police officer, probation officer, victim and offender all detailing the effects and results of the whole RJ process. The DVD will be used for future training and information processes. Integrated Offender Management (IOM) is currently in the process of being implemented in the Halton area. The PPO team have been instrumental in the preparation and groundwork for the start date of December 2010. This IOM project is modelled on the same principles as the PPO team processes.




In relation to Domestic Violence, the MARAC research project remains ongoing and as of yet not commenced beyond the initial scoping work. This relates to resource issues as researchers were unable to gain access to the required data. It has been agreed that the current coordinator can access the requested files. Thus, this project will resume when sufficient capacity is available to undertake the project. A Government Office North West (GONW) grant has been successfully achieved to provide additional Independent Domestic Abuse Advisor (IDVA) capacity to the area. Whilst this is not a renewed source of funding the £16,000 allocated will enable the current service to recruit some part time short term assistance to the existing IDVA.

The Fire Service is heavily involved in a number of pro-active activities that will hopefully influence the behaviour and thoughts of the children towards fire and fire setting in the coming years including; The Phoenix Project, The Runcorn and Widnes Fire Station Community Bio-diversity Garden, Fire Cadets, Prince's Trust Programmes and the Respect Courses. One of our busiest periods is approaching in Quarter 3 and processes are already in place to deal with both Mischief and Bonfire Nights.

For 2010 funding for Road Safety work continues to be made available through Local Transport Plan sources and this will be utilised to further reduce casualty totals.




4.0 Performance indicators

4.1 Progress Against 'key' objectives / milestones

Total	1		0		0		0
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Additional information is provided within Appendix 1.

4.2 Progress Against ‘other’ objectives / milestones

Total	1		1		0		0
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Additional information is provided within Appendix 2.

4.3 Progress Against ‘key’ performance indicators

Total	2		1		0		0
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Data for one of these measures was captured as part of the Place Survey which has now been discontinued. Additional information is provided within Appendix 3.

4.4 Progress Against ‘other’ performance indicators

Total	26		10		1		1
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Of the non-key indicators that can be reported this period 10 are on or above target and additional details are provided within Appendix 4. Eight of these are obtained from the biennial Places Survey which has now been abolished by central government and therefore no further information can be reported for these measures.

5.0 Risk Control Measures

See Appendix 5. The Adult and Social Care safeguarding inspection was completed in September 2010 and the Council has been judged to be “Excellent” in Adult Safeguarding.

6.0 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.

7.0 Appendices

- Appendix 1 Progress Against 'key' objectives / milestones
- Appendix 2 Progress Against 'other' objectives / milestones
- Appendix 3 Progress against 'key' performance indicators
- Appendix 4 Progress against 'other' performance indicators
- Appendix 5 Financial Statement
- Appendix 6 Explanation of use of symbols

Appendix 1: Progress Against 'key' objectives / milestones

Ref	Objective
PCS 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 the community of Halton.


Milestones	Progress Q 2	Supporting Commentary
Contribute to the safeguarding of vulnerable adults and children in need, by ensuring that staff are familiar with and follow safeguarding processes Mar 2011 . (AOF6)		Multi agency training programme on vulnerable adults has been agreed by the Safeguarding Adults Board

Appendix 2: Progress Against 'other' objectives / milestones

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
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Ref	Objective
PCS 3	Ensure that there are effective business processes and services in place to enable the Directorate to manage, procure and deliver high quality, value for money services that meet people's needs

Milestones	Progress Q 2	Supporting Commentary
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<i>Review and deliver SP/Contracts procurement targets for 2010/11, to enhance service delivery and cost effectiveness Mar 2011. (AOF35)</i>		<i>SP targets to be reviewed in line with Comprehensive Spending review funding cuts to ensure good quality, cost effective services continue to be delivered.</i>
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Appendix 3: Progress Against 'key' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
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Quality							
NI 17	Perception of anti-social behaviour	24.4% (2008/9 Places Survey)	20.3%	N/A	See comment	N/A	<p>The Biennial Place Survey has now been abolished by central government and therefore no further information can be reported for these measures. Consideration will be given to whether there is need for a slimmer local survey in 2011 following clarification of the government's reporting requirements (April 2011) and our own performance management needs.</p> <p>A proxy measure is being considered which could be used as an indication of current performance. This counts actual anti social behaviour numbers reported to Cheshire Police:</p> <p>There were a total of 2713 ASB incidents recorded in Halton in Q2 of 2010/11, this is a reduction of 21.5% (583 crimes) compared to the same period last year.</p>

Appendix 3: Progress Against 'key' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
Service Delivery							
<u>PCS15</u>	% of VAA Assessments completed within 28 days	69%	75%	76.99%		N/A	Target achieved. 113 completed cases to date, 87 of which were completed within 28 days.


Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
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Quality							
NI 22	Perceptions of parents taking responsibility for the behaviour of their children in the area	25.4% (2008/9)	29.6	N/A	See comment	N/A	The Biennial Place Survey to take place in October 2010, has now been abolished by central government and therefore no further information can be reported for these measures. Consideration will be given to whether there is need for a slimmer local survey in 2011 following clarification of the government's reporting requirements (April 2011) and our own performance management needs.
NI 23	Perceptions that people in the area treat one another with respect and dignity	37.2% (2008/9)	32.4	N/A	See comment	N/A	
NI 41	Perceptions of drunk or rowdy behaviour as a problem	32.2% (2008/9)	27.7	N/A	See comment	N/A	
NI 42	Perceptions of drug use or drug dealing as a problem	40.8% (2008/9)	35.7	N/A	See comment	N/A	

Appendix 4: Progress Against 'other' performance indicators





Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
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Service Delivery							
CS 3	Domestic burglaries per 1,000 households (Previously BVPI 126 & CL L11)	5.0	N/A	1.3		N/A	Domestic Burglary is down 5% (8 less crimes)
CS 4	Number of racial incidents recorded by the Authority per 100,000 population (Previously BVPI 174 & CL L12)	N/A	N/A	N/A	N/A	N/A	There has been some difficulty in collecting data in relation to these measures. Consideration is currently being given as to how equality related measures can best be developed and relevant data captured. Additional information will be provided as and when this becomes available.
CS 5	% Of racial incidents that resulted in further action (Previously BVPI 175 & CL L13)	N/A	N/A	N/A	N/A	N/A	
NI 21	Dealing with local concerns about anti-social behaviour and crime by the local council and police	21.2% (2008/9)	25.2	N/A	See comment	N/A	
NI 27	Understanding of local concerns about anti-social behaviour and crime by the local council and police	21.1% (2008/9)	24.9	N/A	See comment	N/A	There is no Place Survey in 2010 given a recent Ministerial Announcement. Due to this announcement we will not be reporting these measures for the rest of the year. Consideration will be given to whether there is need for a slimmer local survey in 2011 following clarification of the government's reporting requirements (April 2011) and our own performance management needs.
NI 6	Participation in regular volunteering	20.2% (2008/9)	N/A	N/A	See comment	N/A	



Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
NI 7	Environment for a thriving third sector	24.4% (2008/9 survey)	N/A	N/A	See comment	N/A	<p>Please refer comment above. In the absence of the discontinued Place Survey a range of proxy indicators are being considered.</p> <p>Examples include;</p> <ul style="list-style-type: none"> • Number of voluntary and community groups registered with HVA and HBC's Community Development Service. • Number of community group's accessing grant funding. • % occupancy at community centres. • % of residents living in the three NMAs (3% most deprived LSOAs in 2004 IMD) participating in local activities. <p>The current format for the Cohesion, Engagement and Liveability Group (disbanded in April 2010), is in the process of the being reviewed.</p>

Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
PCS 8	No. of relevant staff in adult SC who have received training (as at 31 March) addressing work with adults whose circumstances make them vulnerable (Previously HP LI2)	475	475	476			Printed out relevant staff list from SSDS001 and obtained all Safeguarding Adults Training registers for 2005-06, 2006-07, 2007-08, 2008-09, 2009-10 & 2010-11 to date. Mapped signatures against staff list and calculated attendance. Working closely with the Safeguarding Vulnerable Adults Co-ordinator and operational services, staff will be allocated specific training dates to ensure meeting target.
PCS 9	% of relevant adult social care staff in post who have had training (as at 31 March) to identify and assess risks to adults whose circumstances make them vulnerable (Previously HP LI3)	84%	84%	84%			Printed out relevant staff list from SSDS001 and obtained all Risk Assessment Training Registers for 2005-06, 2006-07, 2007-08, 2008-09, 2009-10 & 2010-11 to date. Mapped signatures against staff list and calculated attendance. Working closely with operational services staff will be allocated specific training dates to ensure meeting target.

Appendix 4: Progress Against 'other' performance indicators





Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
PCS 10	Estimate % of relevant staff employed by independent sector registered care services that have had training on protection of adults whose circumstances make them vulnerable (Previously HP LI 4)	86%	86%	94%			<p>Obtained all Safeguarding Vulnerable Adults Registers, and then identified Independent Sector attendees that had attended the Facilitators, Train the Trainer, Basic Awareness and Referrers Training and obtained the Ind. Sector Staffing numbers from Contracts Section.</p> <p>809 Ind. Sector Staff attended training and 138 attended Facilitators/Train the Trainer Training, therefore, assuming that each facilitator trained 3 members of their team that gives a total of 1,223. Assuming a 20% turnover on the staff trained (978) the calculated percentage is 94% from a grand staffing total of 1035</p>

Appendix 4: Progress Against 'other' performance indicators




Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	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 15	Serious violent crime rate	0.70	0.70	0.2			Serious violent crime has remained the same when compared with the same quarter last year but has decreased by 7 crimes compared to Q1 2010/11.
NI 16	Serious acquisitive crime rate (per 1000 population)	14.7	15.4	3.4			<p>Serious Acquisitive Crime has decreased by 11% (52 crimes) from Q1 to Q2 of 2010/11 but there has been an increase of 13% (59 crimes) on the same quarter last year (Q2 9/10).</p> <p>All areas of serious acquisitive crime have seen mixed performance when we compare Q2 09/10 with Q2 10/11:</p> <ul style="list-style-type: none"> • Domestic Burglary is down 5% (8 less crimes). • Theft of Motor Vehicle is down 48% (49 less crimes) • Theft from Motor Vehicle is down 18% (18 less crimes) • Robbery (personal and business) is up 80% (16 more crimes)


Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
NI 19	Rate of proven re-offending by young offenders	15.6% (Compared to 2005 Baseline)	5%	39.5% (Compared to Q2 of 2005 Baseline)		N/A	<p>As this is only the first quarter of tracking the new cohort the progress at this stage is unclear.</p> <p>There were 84 young people in the 09/10 Cohort. Following the 12 month tracking process 37 young people reoffended and committed 123 offences in total. This equates to 146 offences per 100 young people in the cohort. When comparing this to the 2005 baseline it shows a reduction in the number of offences of 15.6%</p>
NI 20	Assault with injury crime rate (per 1000 population)	9.0	10.2	2.2			<p>Assault with less serious injury has decreased 15% between Q1 2010/11 and Q2 2010/11, 45 less crimes were recorded.</p> <p>When we compare this quarter with the same period last year there is a decrease of 4%, equal to 11 less crimes.</p>
NI 26	Specialist support to victims of a serious sexual offence	N/A	N/A	N/A	N/A	N/A	<p>National Indicator 26 has been an exception within the indicator set that has been delayed until 2010/11 in order for the government to develop the indicator further after consultation. Subsequently, the government has</p>

Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
							deferred implementation of this indicator until the issues are addressed. Whilst as an area we can report on the levels of individuals receiving support from the Independent Sexual Violence Adviser this does not correlate to the NI. For example, we do not currently differentiate between those supported and those who have reported to the police. We also need to establish a specific data set from the police in order to respond to this indicator when it is finalised.
NI 28	Serious knife crime rate	0.47	TBC	0.13	N/A	N/A	Data received from Cheshire Constabulary. No commentary available at present
NI 29	Gun crime rate	0.13	TBC	0.05	N/A	N/A	Data received from Cheshire Constabulary. No commentary available at present
NI 30	Re-offending rate of prolific and priority offenders	82 offences	117 offences	30 offences		N/A	Q4 2009/10 NI 30 data shows that there were 25 convicted offences for that period. The final overall figure for 2009/2010 shows 66 convicted offences resulting in the year end target being reduced by 3 offences and the target percentage reduction being increased from 19% to 22% reduction.




Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
							Q2 2010/2011 locally produced figures show 34 convicted offences, two below the quarterly guide of 36.
NI 31	Re-offending rate of registered sex offenders	N/A	N/A	N/A	N/A	N/A	Awaiting clarification of definition.
NI 32	Repeat incidents of domestic violence	22% (See Comments)	27%	23%	?		<p>Halton MARAC has seen 29 cases in this quarter with 9 repeat cases. Within this cohort there were 27 children in the associated households. This places our current rolling performance on NI 32 at 23%.</p> <p>In comparison to last years performance, there are 12% less cases presenting at the MARAC (33 Q2 2009) with a similar level of repeats seen (9 Q2 2009). There has also been a 34% decrease in the number of children involved (41 Q2 2009). This indicates a continuing trend from quarter one of decreasing cases.</p> <p>As is noted above 2009/10 is not considered to be a reliable base line. Nevertheless, it would appear from this data that the local MARAC is seeing a reduction in the number of cases</p>

Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
							<p>presented this year.</p> <p>This may be a positive indicator of the impact of the work undertaken in this area. However, this can not be assumed from a diminishing level in this data alone.</p> <p>When looked at in comparison to general repeat levels reported centrally in Cheshire it indicates that Halton has a disproportionately high level of High risk cases in comparison to other areas with larger populations (13% higher than Cheshire East).</p> <p>These figures also indicate a 19% increase in the overall level of incidents for this period (April 2010 to August 2010) in the area in comparison to the previous years figures (406 compared to 483).</p> <p>Similarly, the other Cheshire Area MARACs are reporting between 25 and 30 cases on average per month. Therefore, this reduction in cases can not be seen to be indicative of a trend of reducing high risk incidents when examined against other data.</p>

Appendix 4: Progress Against 'other' performance indicators

Ref	Description	Actual 2009/10	Target 2010/11	Quarter 2	Current Progress	Direction of Travel	Supporting Commentary
NI 33	Arson incidents	700	337	150 fires			As of 1 st April there is no longer a requirement to keep this statistic nationally but it has been decided to retain it at a local level.
NI 40	Drug users in effective treatment	486	529	421 (April To June 2010)			<p>NTA numbers in treatment data is available from month 3 (June) 2010/11. This shows Halton with 421 Problematic Drug Users (PDU) in effective treatment compared with 428 expected. This is -7 below target. NI 40 is reported <u>3</u> months in arrears to allow for full counting of numbers of people in treatment for more than 12 weeks.</p> <p>At the same stage last year, 405 PDU were in effective treatment compared with 415 expected. This was -10 below target.</p>

Data is presently unavailable for the following measures.

Ref	Indicator
NI 18	Adult re-offending rates for those under probation supervision
NI 34	Domestic violence – murder rate
NI 38	Drug related (Class A) offending rate
NI 143	Offenders under probation supervision living in settled suitable accommodation at the end of their order or licence
NI 144	Offenders under probation supervision in employment at the end of their order/licence
NI 35	Building resilience to violent extremism
NI 36	Protection against terrorist attack
NI 49	Number of primary fires and related fatalities and non-fatal casualties, excluding precautionary checks

Appendix 5: Financial Statement
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COMMUNITY DEPARTMENT**Revenue Budget as at 30th September 2010**

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend)	Actual Including Committed Items
	£'000	£'000	£'000	£'000	£'000
Expenditure					
Employees	8,316	4,118	4,097	21	4,146
Other Premises	888	398	391	7	750
Book Fund	272	90	84	6	86
Hired & Contracted	498	259	258	2	520
Promotions	290	101	96	4	258
Other Supplies & Services	592	258	257	1	366
Transport	95	47	60	(13)	61
Leisure Management Contract	1,412	589	583	6	1,633
Consumer Protection Contract	432	143	141	2	141
Grants	623	453	453	0	486
Other Agency	81	8	7	1	11
Total Expenditure	13,499	6,464	6,427	37	8,458
Income					
Sales	-327	-171	-214	42	-214
Fees & Charges	-1,505	-752	-695	(57)	-695
Rents	-14	-9	-10	1	-10
Grants & Reimbursements	-80	-110	-114	4	-114
Recharge to Capital	-788	-405	-407	2	-407
Total Income	-2,714	-1,447	-1,440	(7)	-1,440
Net Controllable Expenditure	10,785	5,017	4,987	30	7,018
Recharges					
Premises Support	353	122	124	(2)	124
Support Services Recharge	-616	0	0	0	0
Central Support Services	42	42	45	(3)	45
Asset Charges	2,134	0	0	0	-0
Net Total Recharges	1,913	164	169	(5)	169
Net Departmental Total	12,698	5,181	5,156	25	7,187

Appendix 5: Financial Statement
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Comments on the above figures:

Total Controllable Expenditure is £25,000 below budget profile for the second quarter of the financial year. This is primarily due to employee costs being below budget profile. This results from £21,000 savings achieved above target in respect of vacant posts. However, a number of front-line vacant posts have recently been filled, specifically within the libraries division, and it is not realistic to assume that this spend will remain below budget profile for the year. It should be noted that the savings target for staff vacancies within the Communities Department is £260,000 for the full financial year.

Income is showing an under-achievement against budget profile to date of £7,000. Sales and Fees and Charges income are currently showing a combined under-achievement of £15,000 to date. However, the annual combined income target is £1,832,000 for the full year, and it is not predicted at this stage in the financial year that there will be a significant variation from this target. One area of income which has had the propensity to fall short of the target in previous years is income from burials and cremations. Whilst the current income levels are running a little below target, the shortfall is being matched by additional income from memorial sales.

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

Capital Projects as at 30th September 2010

	2010/11 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Skate Park	100	50	0	100
Churchill Hall	2	1	0	2
Access & Security Measures	50	25	3	47
Norton Priory Health & Safety	22	11	0	22
Increased Employment Opportunities	10	5	0	10
Total Spending	184	92	3	181

Appendix 5: Financial Statement
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Local Strategic Partnership Funded Schemes as at 30th September 2010

	Annual 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	32	20	12	20
Health & Physical Activity	43	21	24	(3)	28
Alcohol Harm Reduction	430	215	162	53	187
Enhanced Sports	78	39	2	37	2
Sub Total	617	307	208	99	237
<u>Priority 4: Employment Learning & Skills</u>					
Budgeting Skills Project	33	16	8	8	8
Citizen's Advice Bureau	86	43	15	28	15
Sub Total	119	59	23	36	23
<u>Priority 5: Safer Halton</u>					
Youth Splash	114	57	53	4	58
Blue Lamp	518	259	130	129	130
Domestic Violence	95	47	39	8	71
Prolific & Persistent Offenders	46	23	0	23	0
Sub Total	773	386	222	164	259
Overall Total	1,509	752	453	299	519




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 6: Explanation of Use 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		<i>Indicates that performance is better as compared to the same period last year.</i>
Amber		<i>Indicates that performance is the same as compared to the same period last year.</i>
Red		<i>Indicates that performance is worse as compared to the same period last year.</i>
N/A	-	<i>Indicates that the measure cannot be compared to the same period last year.</i>

REPORT TO: Safer Policy and Performance Board

DATE: 18 January 2011

REPORTING OFFICER: Strategic Director, Adults & Community

SUBJECT: Safeguarding Adults and Service Inspection of Adult Social Care

WARDS: All

1.0 PURPOSE OF REPORT

- 1.1
- To present the Policy & Performance Board with details of the outcome of the Service Inspection of Adult Social Care recently carried out by the Care Quality Commission (CQC) and
 - To update the Board on key issues and progression of the agenda for Safeguarding Vulnerable Adults.

2.0 RECOMMENDATION: That the Board notes the contents of the report and associated appendices.

3.0 SUPPORTING INFORMATION

3.1 Service Inspection of Adult Social Care

Members are asked to refer to the following appendices, for information:

- Appendix 1: Report to the Executive Board by the Strategic Director, Adults & Community on 2nd December 2010 regarding the Service Inspection of Adult Social Care – September 2010
- Appendix 2: Report of Service Inspection of Adult Social Care
- Appendix 3: Improvement Plan

Halton Safeguarding Adults Board's (HSAB) will monitor actions detailed in the Improvement Plan to ensure that satisfactory progress is made.

The Safeguarding Adults Board leads and co-ordinates the multi-agency strategy and direction to ensure that all agencies work together to:

- (a) Minimize the risk of abuse to adults within the borough and
- (b) Respond effectively to allegations of abuse.

3.2 Safeguarding Adults update

Since the previous report to the PPB in September 2010, key issues to report are:

- 3.2.1 Trading Standards have secured strategic level membership of the Safeguarding Adults Board and undertake to engage in the Board's work.

A protocol is also being drawn up between Trading Standards and Halton Borough Council (HBC) Adults & Community Directorate.

The work of Trading Standards contributes significantly to the wellbeing of the community particularly in relation to Doorstep Crime and Consumer Advice, education and protection.

Trading Standards are holding a conference in Halton on 22nd February 2011 to raise awareness of the iCAN scheme. The purpose of iCAN is to broadcast warnings to Members to alert them to the latest consumer rip offs that have hit the town. The technology we have allows messages to be sent to iCAN members within hours, ensuring maximum impact. Messages can be received by telephone, text message or e-mail.

- 3.2.2 North West Ambulance Service (NWS) have been invited to join the Safeguarding Adults Board.

NWS provides in-house Safeguarding Adults training for its employees.

- 3.2.3 Station Managers from Cheshire Fire & Rescue Service in Runcorn & Widnes will be attending dedicated Basic Awareness and Train the Trainer courses along with one manager from each of the four watches, in order to further improve the knowledge and experience of local staff on 'Safeguarding adults' issues. The ten staff mentioned above will become 'Safeguarding Champions' on each watch at local fire stations.

- 3.2.4 A dedicated half-day course has been provided for HBC assessment team staff and managers [who have a lead role in leading and conducting Safeguarding Investigations] and partner agency leads, to strengthen links between Domestic Abuse and Safeguarding Adults procedures. A follow up course on Domestic Abuse, Stalking and Harassment (DASH) risk assessment and referral processes will take place in January.

- 3.2.5 A Safeguarding Adults and Children Event will be held in March 2011, with a focus on Bullying and Hate Crime.

- 3.2.6 The generic advocacy service has continued to deliver an improved service across the borough. The Care Quality Commission inspection made some recommendations that will need greater focus and targeted work and the HSAB will monitor progress.

Three recent reports on service deficiencies occurring in other localities are being considered for any learning that could benefit Halton services:

- Munro Report identifying the problems within child protection
- Little Ted's Nursery (Plymouth)
- Peter Connolly – second Serious Case Review

3.2.7 In NHS Halton & St Helens (PCT):

- A Safeguarding (Adults & Children) Review was carried out and an Action Plan compiled in response
- Strategic Health Authority North West's Safeguarding Policy was brought to the HSAB for comment
- A Sub-group of the Clinical Governance Committee is being set up, focusing on Safeguarding Adults and Children

3.2.8 St Helens & Knowsley Teaching Hospitals NHS Trust:

- Are currently focusing on Basic Awareness training daily with small groups of staff
- Have provided information packs every ward

3.2.9 In the 5 Boroughs Partnership NHS Trust:

- Serious Untoward Incidents are quality checked and reported through to the Risk Department and to the Policy and Performance Sub Group meeting.
- Safeguarding Adult Champions have been identified in each operational team. To raise the profile of this role and begin developing networks, a half day event was held within each borough, in conjunction with the Safeguarding Children Team at Hollins Park.

3.2.10 A focus group has been set up, involving managers and Safeguarding Adults leads from Halton and Knowsley Local Authorities, HNS Halton & St Helens (PCT), St Helens and Knowsley Hospital Trust and Warrington & Halton Hospitals NHS Trust, to consider a range of issues relating to safeguarding pathways for patients' journeys through hospital and on discharge from hospital.

3.2.11 A consultation is being undertaken, to look at Whistle-blowing in the NHS and what steps are needed to make it easier for staff to report concerns that they might have about safety or wrong doing and to emphasise their duty to do so.

Three key changes were proposed:

- highlighting existing legal rights of all staff to raise concerns about safety, malpractice or other wrongdoing without fear of dismissal or other ramifications
- introducing an NHS pledge that employers will support all staff in raising such concerns, responding to and where necessary

investigating concerns raised

- creating an expectation that NHS staff will raise concerns about safety, malpractice or wrongdoing at work which may affect patients, the public, other staff or the organisation itself as early as possible.

To take part in this consultation, members can go to www.dh.gov.uk and click on the Consultations tab, or access it via www.haltonlink.org.uk/consultations. The consultation closes on 11th January 2011.

- 3.2.12 A Code of Practice is being devised for people working in all transport services with both vulnerable adults and children, with cross-directorate representation on the task group.

HBC Transport Services deliver in-house training to staff and volunteers. The Safeguarding Adults element has been comprehensively reviewed, along with the Safeguarding Children element.

- 3.2.13 A Dignity Matters Halton event took place in September. A resulting action plan has been drawn up and will be monitored by the Dignity Network.

A Dignity Issues log has been compiled and is ongoing, forming the basis for trend analysis and actions.

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 staff and volunteers require to undertake their duties, may not be achieved and therefore impact negatively on vulnerable adults.

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

- 4.3 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.

Halton Safeguarding Children Board membership includes adult social care representatives.

Joint protocols exist between Council services for adults and children.

The HSAB chair, sub-group chairs and lead officers for related services 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.

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

8.1 None under the meaning of the Act.

REPORT TO: Executive Board

DATE: 2nd December 2010

REPORTING OFFICER: Strategic Director, Adults & Community

SUBJECT: Service Inspection of Adult Social Care –
September 2010

WARDS: All wards

1.0 PURPOSE OF THE REPORT

1.1 To present the Executive Board with details of the outcome of the Service Inspection of Adult Social Care recently carried out by the Care Quality Commission (CQC).

2.0 RECOMMENDATION: That the Board:

- (1) Receive a presentation from Susan Talbot, CQC Lead Inspector
- (2) Note the contents of the report and associated appendices

3.0 SUPPORTING INFORMATION

3.1 Background/Methodology to Inspection

3.1.1 The CQC is the independent regulator of health and social care in England. CQC regulate care provided by the NHS, local authorities, private companies and voluntary organisations. The inspection of Adult Social Care services is an integral part of the wider performance assessment of Councils. Service inspections of adult social care use the CQC Adult Social Care Outcomes Framework including domains relating to capacity for improvement. Evidence is assembled and reported against outcomes and constituent performance characteristics for the areas selected for an individual inspection.

The areas inspectors assess include:

- how well local services meet people's needs
- whether they provide the right specialist services and how good they are
- how effectively the council involves local people in planning services.

The resulting inspection report looks at areas that are successful, areas that are less successful, and states what needs to be changed and improved.

3.1.2 An inspection team from CQC visited Halton in September 2010 to find out how well the Council was delivering adult social care. To do this, the inspection team looked at how well Halton was:

- Safeguarding adults whose circumstances made them vulnerable

As part of safeguarding, inspectors would have considered how we safeguard people from abuse, neglect and self harm. How we ensure that people who use services and their carers are free from discrimination, respected in terms of individual preferences, dignity and privacy.

- Improving the health and wellbeing of older people

Inspectors would have reviewed whether we ensure that people are well informed and advised about their physical, mental health and wellbeing and how this helps to lower rates of preventable illnesses and long term conditions. Inspectors would have reviewed how we support people to recover following treatment in hospital through rehabilitation, intermediate care or support at home. At the end of life, do we ensure that people who use our services and their carers have their wishes respected and are treated with dignity.

- Increasing choice and control for older people

Services would have been assessed in terms of how people are supported to take control of their support including the assessment of their needs and whether we support their choices via a wide range of services that help promote independence. Inspectors would have also reviewed how effectively we manage complaints.

3.1.3 Before visiting Halton, the inspection team reviewed a range of key documents supplied by the Council and assessed other information about how the Council was delivering and managing outcomes for people. This included, crucially, the council's own assessment of their overall performance. The team then refined the focus of the inspection to cover those areas where further evidence was required to ensure that there was a clear and accurate picture of how the Council was performing. During their visit, (which involved 6 working days fieldwork within Halton) the team met with people who used services and their carers, staff and managers from the Council and representatives of other organisations.

3.2 Summary of Findings

3.2.1 CQC judges the performance of Councils using the following four grades: -

- performing poorly
- performing adequately

- performing well
- performing excellently

3.2.2 In respect of the three areas outlined in paragraph 3.1.2, CQC concluded that Halton was :-

- performing **excellently** in safeguarding adults.
- performing **well** in supporting improved health and wellbeing of older people.
- performing **excellently** in supporting increased choice and control for older people.

3.2.3 CQC also rates a Council's capacity to improve its performance using the following four grades:-

- Poor
- Uncertain
- Promising
- Excellent

CQC concluded that the capacity to improve in Halton was **excellent**

3.2.4 A copy of the Inspection report produced by CQC can be found at Appendix 1.

3.3 Action Plan/Monitoring Arrangements

3.3.1 Appendix A of the Inspection report (pages 31 & 32), provides a summary of the recommendations made by CQC for improving performance in Halton and as a result the Council (in conjunction with it's partners) has completed an Improvement Plan to address the issues raised. (This Improvement Plan is supported by a more detailed internal action plan). A copy of the Improvement Plan is attached at Appendix 2.

3.3.2 This Improvement Plan has been incorporated into Halton Safeguarding Adults Boards (HSAB) and the Health SSP performance management and business planning processes to ensure appropriate action/progress is taken/made.

3.3.3 The Improvement Plan will steer the work of the Council and its partners, with regards to adult social care over the next few months. The Council already have a strong base to make further improvements and recognise that we will do more to ensure that Halton residents receive the services they need. Given the dedication of our staff to deliver quality services and the commitment of the Council (and its partners) to support improvements we feel we can achieve the actions set down in the plan.

4.0 POLICY IMPLICATIONS

4.1 These are identified within the action plan at Appendix 2.

5.0 FINANCIAL IMPLICATIONS

5.1 The outcomes that are expected to be achieved will be done so from within existing budgets, however consideration will need to be given in respect of the ongoing efficiency review and other associated budgetary issues and the possible impact on service delivery.

5.2 At this stage it is anticipated that the actions linked to transport (Action point 2.2.2 'Address gaps in access to and the flexibility of local transport') may require further review and if resources are required then the implications etc will have to be addressed by the Council's Executive Board.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children and Young People in Halton

No specific issues identified

6.2 Employment, Learning and Skills in Halton

No specific issues identified

6.3 A Healthy Halton

The outcomes of the Inspection and it's resulting action plan clearly demonstrates the Council's commitment, (along with it's partners), in recognising the needs of Service Users and their Carers in promoting the health and wellbeing of vulnerable adults within the Community.

6.4 A Safer Halton

The Council and its partners (via the HSAB) continue to ensure that adults whose circumstances make them vulnerable are safeguarded.

6.5 Halton's Urban Renewal

No specific issues identified

7.0 RISK ANALYSIS

7.1 The main risk associated with the delivery of the outcomes outlined in the action plan are linked to financial implications as outlined in paragraph 5 of this report.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 No specific issues identified



Inspection report

Service inspection of adult social care: **Halton Borough Council**

Focus of inspection:

Safeguarding adults

Improved health and wellbeing for older people

Increased choice and control for older people

Date of inspection: September 2010

Date of publication: November 2010

About the Care Quality Commission

The Care Quality Commission is the independent regulator of health and adult social care services in England. We also protect the interests of people whose rights are restricted under the Mental Health Act.

Whether services are provided by the NHS, local authorities, private companies or voluntary organisations, we make sure that people get better care. We do this by:

- Driving improvement across health and adult social care.
- Putting people first and championing their rights.
- Acting swiftly to remedy bad practice.
- Gathering and using knowledge and expertise, and working with others.

Inspection of adult social care

Halton Borough Council

September 2010

Service Inspection Team

Lead Inspector: Sue Talbot

Team Inspector: Laura Middleton

Expert by Experience: Malcolm Haddick
Supported by: Age UK

Project Assistant: Balwinder Jeer

This report is available to download from our website on www.cqc.org.uk

Please contact us if you would like a summary of this report in other formats or languages. Phone our helpline on 03000 616161 or Email: enquiries@cqc.org.uk

Acknowledgement

The inspectors would like to thank all the staff, service users, carers and everyone else who participated in the inspection.

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Introduction

An inspection team from the Care Quality Commission visited Halton in September 2010 to find out how well the council was delivering social care.

To do this, the inspection team looked at how well Halton was:

- Safeguarding adults whose circumstances made them vulnerable,
- Improving the health and wellbeing of older people, and
- Increasing choice and control for older people.

Before visiting Halton, the inspection team reviewed a range of key documents supplied by the council and assessed other information about how the council was delivering and managing outcomes for people. This included, crucially, the council's own assessment of their overall performance. The team then refined the focus of the inspection to cover those areas where further evidence was required to ensure that there was a clear and accurate picture of how the council was performing. During their visit, the team met with people who used services and their carers, staff and managers from the council and representatives of other organisations.

This report is intended to be of interest to the general public, and in particular for people who use services in Halton. It will support the council and partner organisations in working together to improve people's lives and meet their needs.

Reading the report

The next few pages summarise our findings from the inspection. They set out what we found the council was doing well and areas for development where we make recommendations for improvements.

We then provide a page of general information about the council area under 'Context'.

The rest of the report describes our more detailed key findings looking at each area in turn. Each section starts with a shaded box in which we set out the national performance outcome which the council should aim to achieve. Below that and on succeeding pages are several 'performance characteristics'. These are set out in bold type and are the more detailed achievements the council should aim to meet. Under each of these we report our findings on how well the council was meeting them.

We set out detailed recommendations, again separately in Appendix A linking these for ease of reference to the numbered pages of the report which have prompted each recommendation. We finish by summarising our inspection activities in Appendix B.

Summary of how well Halton was performing

Supporting outcomes

The Care Quality Commission judges the performance of councils using the following four grades: 'performing poorly', 'performing adequately', 'performing well' and 'performing excellently'.

Safeguarding adults:

We concluded that Halton was performing excellently in safeguarding adults.

We concluded that Halton was performing well in supporting improved health and wellbeing of older people.

We concluded that Halton was performing excellently in supporting increased choice and control for older people.

Capacity to improve

The Care Quality Commission rates a council's capacity to improve its performance using the following four grades: 'poor', 'uncertain', 'promising' and 'excellent'.

We concluded that the capacity to improve in Halton was excellent.

What Halton was doing well to support outcomes

Safeguarding adults

The council:

- Was active and vigilant in its work to promote the safety and well-being of local people.
- Ensured safeguarding investigations were well-managed and that risks were appropriately addressed.
- Offered a comprehensive programme of training and guidance that built the knowledge, skills and confidence of staff across the sector.
- Promoted a strong culture and standards for ensuring people were treated with dignity and respect.
- Made detailed checks of the quality of local services, and took robust action to tackle poor performance and support improvements.

Improved health and wellbeing for older people

The council:

- Had developed a broad range of preventative strategies and activities that assisted older people to remain fit and active.
- Worked well with other agencies in supporting older people and their carers, including those with complex needs.
- Enabled easy access to and achieved good outcomes from rehabilitation services.
- Provided a range of equipment and home adaptations to promote independence.
- Provided effective support to older people and their families at the end of their lives.

Increased choice and control for older people

The council:

- Provided a high level of information, advice and support to local people.
- Ensured a timely and person-centred response to individual needs.
- Successfully supported high numbers of older people to live safely at home.
- Enabled good outcomes and flexible support through use of Direct Payments and individual budgets.
- Ensured older people and their carers were actively involved in their reviews and that their preferences and changing needs were carefully considered.

Recommendations for improving outcomes in Halton

Safeguarding adults

The council should:

- Strengthen the collection and analysis of information about safeguarding activity to support wider learning and targeting of areas of risk.
- Ensure people have good access to advocacy support to promote their full understanding and involvement in safeguarding work.

Improved health and wellbeing for older people

The council should:

- Secure further improvements in the health and wellbeing of older people and their carers.
- Address gaps in access to and the flexibility of local transport.
- Ensure hospital discharge arrangements work well for everyone and reduce the rate of emergency re-admissions.
- Continue to enhance the availability, range and quality of support for older people and their carers.

Increased choice and control for older people

The council should:

- Make it easier for people to raise concerns and ensure timely investigation and feedback about the outcome of complaints.

What Halton was doing well to ensure their capacity to improve

Providing leadership

The council:

- Benefited from having stable, strong and effective senior managers and elected members.
- Had a clear and shared vision and was making good progress in improving outcomes for older people and their carers.
- Had strong partnerships secured by comprehensive plans and effective deployment of resources.
- Had developed robust staff development and training opportunities to equip staff to do their jobs well.
- Set ambitious targets and ensured clear governance and accountabilities underpinned its improvement work.

Commissioning and use of resources

The council:

- Had a sound awareness of the needs and strengths of people living in the area.
- Had achieved wide ownership of shared agendas to transform local services.
- Effectively managed and controlled its resources.
- Actively promoted the involvement of older people and their carers in developing local services.
- Had successfully driven up standards and promoted innovative services.

Recommendations for improving capacity in Halton

Providing leadership

The council should:

- Strengthen the involvement of older people and their carers in key activities such as mystery shopping and review of the quality of local services.
- Continue to strengthen the involvement and contribution of all organisations to the work of the Safer and Healthier Halton partnership programmes.

Commissioning and use of resources

The council should:

- Ensure effective co-ordination of and enhancement of the role and contribution of local community, voluntary sector and faith groups.

Context

Halton Borough Council became a unitary authority in 1988. It was a district of Cheshire County Council prior to this. It has a population of approximately 120,000 people. Its two biggest settlements are Widnes and Runcorn. Halton's population is currently younger than national and regional averages. There are 17,100 people over the age of 65. This is predicted to rise by 40 per cent over the next decade. The population is predominantly white (97.6 per cent). Gypsy and traveller communities have settled in the area. In recent years small numbers of migrant workers from Poland and Slovakia have come to live in Halton.

Many local people experience significant health, social and environmental problems. Cancer rates, heart disease and life expectancy are amongst the worst in the country. Halton is ranked as the 30th most deprived area in England. A third of the population live in the top 4 per cent most deprived health areas in England. Over 50 per cent of people over the age of 65 have a limiting long-term condition or disability. There are 13,500 carers offering regular and substantial levels of care to family members or friends. Halton has a higher proportion of carers, many of whom are also in poor health, compared to other areas in England. Over 2,400 carers are currently registered.

The council has a Leader and Cabinet model of governance. The Labour party holds the majority of seats. The council is structured into four directorates. The Adults and Community Directorate was restructured on 1st April 2010 into five departments: Community Services, Prevention and Commissioning Services, Catering and Stadium Services, Complex Care Services and Enablement Services. The Directorate has a gross budget of £46,178,820 for 2010-2011. The council employs approximately 650 adult social care staff.

The council's Fair Access to Care Services (FACS) criteria includes people who fall within moderate, substantial and critical levels of need. The directorate dealt with a total of 1946 referrals in 2009-10. This included 359 safeguarding adult referrals. The majority of referrals (231) concerned the safety of older people.

Halton Borough Council has been rated by the Audit Commission as an 'excellent' council for a number of years. It is rated as good in its use of resources. The council's performance in the delivery of adult social care has been rated by the Care Quality Commission as excellent overall in the delivery of outcomes. All domiciliary care providers and 87 per cent of care homes operating in the area have been rated as good or excellent by CQC.

In 2009, the Care Quality Commission rated the performance of Halton and St Helens Primary Care Trust as good in the quality of commissioning, and fair in its financial management arrangements. The 5 Boroughs Partnership NHS Foundation Trust was rated as excellent in the quality of services delivered.

Key findings

Safeguarding

People who use services and their carers are free from discrimination or harassment in their living environments and neighbourhoods. People who use services and their carers are safeguarded from all forms of abuse. Personal care maintains their human rights, preserving dignity and respect, helps them to be comfortable in their environment, and supports family and social life.

People who use services and their carers are free from discrimination or harassment when they use services. Social care contributes to the improvement of community safety.

The council and its partners were active and vigilant in their approach to promoting the safety and well-being of local people. There had been a steady decrease in the incidence of reported crime in the area in recent years. Older people and people with learning disabilities reported positively about the support they had received from the police in helping them to feel safe.

The council strongly promoted equality and fairness in the way it conducted its business. Senior managers and elected members worked closely with local people to address concerns and build safe and supportive communities. Community safety, children and adult safeguarding and public protection arrangements were well-developed and were being continuously enhanced.

There was a significant programme of work to identify people who were vulnerable to abuse and to increase reporting of concerns including hate crime and domestic abuse. Arrangements for supporting people at risk of domestic abuse had been reviewed and strengthened. The Safeguarding Adults Board's (SAB) '*Don't turn your back on abuse*' and dignity campaigns had wide coverage and encouraged local people to report incidences of poor treatment or abuse.

*Halton Speak Out*¹ had a strong leadership role in raising awareness about abuse and how to deal with bullying. It was in the process of setting up a reporting centre to enable people to raise concerns in a supportive environment. There was positive work undertaken with students at the local college to promote the needs and rights of people with disabilities. This work was effective in supporting their social inclusion. The council was proactive in its encouragement of a number of inter-generational initiatives to promote wider understanding and respect between younger and older people.

Adult social care staff worked closely and effectively with partner agencies in sensitively addressing risks to people who were vulnerable to harm or exploitation. Cheshire Fire and Rescue Service referred people to the council and voluntary sector organisations where it identified concerns about their safety or well-being. Home security and assistive technology was provided to help people feel safe.

¹ Self-advocacy group for people with learning disabilities.

People are safeguarded from abuse, neglect and self-harm.

The council and its partners were committed to and demonstrated 'zero tolerance' of all forms of abuse. There was clear recognition of individual and joint agency responsibilities and accountabilities. Partner organisations had reviewed and strengthened their capacity and systems to deliver the Safeguarding Adults Board's priorities and work plan. Arrangements for sharing sensitive and confidential information between agencies were clear, complied with legal requirements, and were being continuously improved. There was strong management oversight and support for the work of front-line staff.

Safeguarding adults and dignity in care information was effectively promoted via the council website and through information leaflets, postcards and posters. Information was available in other languages and formats with easy read versions for adults with learning disabilities. The '*Inside Halton*' magazine went to every household and contained articles about safeguarding adults. The council held an awareness-raising event for local voluntary and community sector organisations that promoted their wider understanding of and contribution to safeguarding work. A number of dignity events had been held involving a wide range of partners, including people using services. These had been well-received and informed local priorities in identifying and addressing poor standards of care.

Safeguarding policies and procedures were comprehensive and had been recently reviewed and updated. They promoted best practice and incorporated learning from a wide variety of sources. The Safeguarding Adults Board had recently commissioned its first serious case review. Transition arrangements for young people moving into adult services had a clear focus on safeguarding. There was joint work taking place with neighbouring councils to streamline procedures and strengthen support to people who moved from one council to another. Work to develop a shared approach to safeguarding competences and to establish a multi-agency learning network should further enhance local safeguarding practice across the wider partnership.

There was a clear, joint and well-targeted approach to safeguarding people. Work had taken place to improve understanding of risk and levels of abuse. As a consequence the number of inappropriate referrals made under safeguarding procedures was reducing. Referrals made to the police protection unit had fallen, but the number of those being investigated had increased. NHS partners had seen an increase in the number of safeguarding referrals as a result of improved awareness and scrutiny of care provided. There was appropriate alignment of safeguarding adults and serious and untoward incident procedures. Staff working in Halton Direct² and the emergency duty team had sound systems in place for identifying and managing safeguarding concerns.

We saw many examples of work with service providers to learn lessons from safeguarding incidents and to embed learning to prevent recurrence. Care was taken to ensure they had the appropriate levels of staffing and expertise to support people with high and complex needs, including people whose behaviour placed themselves or others at risk. The council proactively supported people who experienced

² The council's customer contact centre

difficulties in managing their finances.

The council and its partners were working to strengthen the focus and reliability of safeguarding data to improve awareness of incidences of abuse and local trends. There were some areas where the collection and analysis of information about safeguarding activity required further development. This included learning from people's experiences of being safeguarded and the impact of preventative work in supporting people to be safe.

We found that safeguarding investigations were well-managed from the initial alert through to closure and involved appropriate partners. Safeguarding referrals were given high priority and were promptly followed up. Strategy discussions and meetings routinely took place and were clearly recorded. There was strong support from managers in planning and monitoring the effectiveness of actions to address risk. The standard of case recording was good. Safeguarding investigations were appropriately closed and outcomes were clearly identified and reported. Quality assurance and case file auditing supported wider learning and improvements.

Safeguarding work had a strong focus on promoting personal independence and expanding social and personal support networks to reduce the risk of further incidences of abuse. We found sensitive and effective multi-agency work to support people with complex needs, including those who were reluctant or felt unable to withdraw from abusive situations. Care was taken to build their trust and confidence and to help them to develop strategies to protect themselves. We found good practice in ensuring mental capacity assessments were routinely undertaken to inform actions taken in the best interests of individuals. Individual safeguarding plans were well-developed and regularly reviewed. People who needed help in staying safe told us:

"I am glad of all the support and advice I have been given to keep myself safe".

"There are people I can turn to who give me the support I need".

Care was taken to inform and involve people, and their carers and families as appropriate, in investigating risks to their personal safety or well-being. The council and its partners recognised the need to promote the use of advocacy to all people about whom there were safeguarding or deprivation of liberty concerns. This included increasing the availability of advocacy to people in hospital and care homes.

There was a need to strengthen support to carers of alleged victims and to perpetrators who were themselves vulnerable. There were some areas where work was required to build peoples' understanding of the safeguarding process and the options open to them. There was some good group work practice in supporting people with learning disabilities and women who had experienced domestic abuse that could be further built on.

There had been a number of positive developments to ensure effective alignment of children and adult safeguarding procedures and to promote a 'whole family' approach to safeguarding work. The focus of drug and alcohol services was reviewed to promote stronger joint working with children's services. There were a number of actions that consolidated joint working and quality assurance of practice in

supporting children whose parents had mental health needs. Partnership working with supported housing providers had been strengthened to ensure early identification of people vulnerable to abuse and reduce the risk of their being made homeless.

People who use services and carers find that personal care respects their dignity, privacy and personal preferences.

The council was innovative and challenging in its approach to ensuring local people received high quality, individually tailored support that recognised their uniqueness and promoted their dignity and privacy. The role, leadership and contribution of the dignity in care co-ordinator was highly valued and effective in raising standards and tackling discrimination or poor treatment of people in a variety of settings. There were many examples of the positive impact of this post in promoting and sharing best practice and tackling poor performance.

The council and its partners were working to embed a shared culture and customer care standards centred in implementing the Dignity in Care Charter and action plan. A dignity issues log had been developed to promote awareness of areas where practice fell below the required standards and to track the outcome of concerns raised. Some providers had undertaken detailed dignity in care audits and customer care surveys which provided a reality check of their performance. Other services would benefit from this rigorous approach in striving for excellent standards. The Local Involvement Network (LINK) was well-developed and positively contributed to improvement activity in a number of areas.

The *'Sticks and Stones'* campaign led by the 5 Borough Partnership NHS Trust had improved awareness of the discrimination faced by many people with mental health needs. The council and its partners had reviewed and strengthened their arrangements for promoting human rights and preventing people from being inappropriately deprived of their liberty. Care was taken to ensure care home providers understood their responsibilities in supporting people who lacked mental capacity. Health and social care staff had strengthened their focus on the care and treatment of people assessed as having continuing health care needs.

Frontline staff sensitively supported people in dealing with carer or relationship breakdown issues. Attention was paid to addressing the concerns of carers. Support plans increasingly reflected individual needs and preferred activities and routines. High priority was given to ensuring individual faith, dietary and cultural needs were met.

Social care staff were alert to concerns about the quality and reliability of providers. The council encouraged feedback from people using services about areas for improvement. However, some people we met did not feel confident or were worried about raising concerns, especially on behalf of others. This was an area that required further review.

The council had strong procurement and contract management arrangements. Service specifications required high standards of performance by service providers in

the promotion of equality and diversity, dignity and privacy. There were unannounced visits and detailed checks made of the quality and experiences of people using local services. Care was taken to review provider practices in areas such as infection control, medication, staff training, complaints and management of safeguarding incidents. Improvements were closely monitored to assess progress in addressing gaps or areas of weak practice.

People who use services and their carers are respected by social workers in their individual preferences in maintaining their own living space to acceptable standards.

The council and its partners had a strong focus on addressing a wide range of health inequalities and home/environmental issues that posed risks to personal safety and well-being. We found many examples of effective joint working between health, housing and social care staff to maintain people in their homes and local communities.

Halton Speak Out provided a positive challenge and contribution to the review of supported housing services for adults with learning disabilities. Outcomes included an expansion of opportunities for people to shape the development of their support service and be more actively involved in the life of their local communities.

Improved health and wellbeing

People in the council area have good physical and mental health. Healthier and safer lifestyles help lower their risk of illness, accidents, and long-term conditions. Fewer people need care or treatment in hospitals and care homes. People who have long-term needs and their carers are supported to live as independently as they choose, and have well-timed, well-coordinated treatment and support.

People are well informed and advised about physical and mental health and wellbeing. They take notice of campaigns that promote healthier and safer lifestyles. This is helping to lower the rates of preventable illness, accidents and some long-term conditions.

Senior managers and elected members gave a high priority to improving the health and well-being of local people. The council and its health partners had been working over a number of years to embed a shared approach to identifying and addressing the underlying causes of poor health. There were joint strategies to prevent ill-health, improve earlier identification of need, ensure targeted rehabilitation and support for people with long-term conditions. This was a significant challenge given the legacy of poor health and extent of deprivation experienced by local people.

Detailed research was undertaken to improve understanding of the health needs and experiences of local people. This has led to better targeting of health improvement work towards individuals and communities facing particular risks. Awareness raising and risk management had been strengthened as a result. For example, the council and primary care trust staff were working with local voluntary sector organisations, older people, housing providers and GPs to reduce the incidence of winter deaths. Halton Direct was implementing improved screening of the health needs of people who made contact with the council. Work was required to improve identification and support for older people and family carers who were dependent on alcohol or substances, including prescription medication.

There were a number of targeted campaigns to inform and advise people about risks to their health. Information about specific health conditions and sources of support was widely promoted. The council's approach to assisting people to manage their health and well-being was inclusive of their physical, mental health and emotional needs. There was a range of practical support to assist them in managing their finances or maintaining their home including help with claiming welfare benefits, handyperson and emergency alarm systems.

There was good awareness of and support to people with learning disabilities as they aged. Priority was given to identifying and supporting people who were reluctant to accept or may not know about help locally available. The council took into consideration the limited literacy levels of some people and used other media such as the radio and outreach in community venues to reach them.

There was effective work with members of the local gypsy and traveller communities to encourage their awareness of and take up of health screening and exercise groups. A health inequalities checklist was being used by front-line staff to

proactively identify individual needs and risks arising from their home or environment. This early identification of concerns supported improved targeting and involvement of other agencies to deliver the 'whole system' impact required to address the multiple problems experienced by some people or communities.

There was a strong focus on promoting the health and well-being of carers. There was good partnership working between the council, GPs and the local Carers Centre to ensure better access to health checks for carers and to advise them of social, leisure, training and employment opportunities locally available. An on-line support service was developed for carers who were lesbian, gay, transgender or bi-sexual that allowed them to have their needs recognised and met in the way they wanted.

The council and its health partners had a strong focus on enabling older people to live longer, active and more fulfilled lives. Support provided by Community Bridge Builders and Sure Start to Later Life positively promoted new opportunities and innovative practice. There was a clear focus on reducing social isolation and encouraging the active participation of older people in a wide range of social and community activities. The involvement of older people as volunteers was growing and there was potential to further build on this. There was positive use of exercise classes and falls prevention programmes to promote improved mobility and agility. One older person who enjoyed attending a lunch club told us:

"It stimulates me mentally. I enjoy the social company and the good food. It is a welcome day out. Otherwise I would be isolated".

Travel training was effectively used to help some older people to be independent in the use of public transport, important in an area of relatively low car ownership. People valued the community transport that was provided. However, it had a waiting list and people found it insufficiently responsive, particularly out-of-hours. There was a particular need to expand the availability of wheelchair accessible transport.

People who use services and carers go into hospital only when they need treatment. They are supported to recover through rehabilitation, intermediate care or support at home. This helps them to keep or regain their independence as far as possible.

Community-based health and social care staff worked well together in addressing the needs of older people and their carers, including those with complex mental health needs, sometimes over long periods of time. The council had established a *Social Care in Practice* project in one locality where social care staff were linked to GP surgeries. This ensured a prompt and shared response to addressing people's needs and provided easy access to a wide range of support for people in crisis. There were positive outcomes for people with long-term conditions including significant reductions in admission rates to hospital for some people. One older person told us:

"I have been very impressed by the multi-disciplinary work of social services, the NHS and my GP".

The council and primary care trust had enhanced access to out-of-hours and

emergency back-up services. This was effective in providing targeted support to people as their needs increased and provided a prompt response to crises. They had also had significantly expanded rehabilitation services. This was routinely offered to people in advance of decisions being made about how their long-term needs were best met. There was effective deployment of the expertise of team members to assist older people in regaining their skills or adjusting to changes in their health or mobility. Family carers were actively involved and were well-informed and supported in their role. Cardiac rehabilitation and after-care support was valued.

Care was taken to assist people to overcome any barriers to their personal safety and to ensure their home environment remained appropriate to their needs. The council and its partners had strengthened local arrangements for the delivery of items of equipment and assistive technology. There was a good range of equipment provided and older people reported high satisfaction rates with a positive impact on their ability to remain safe and independent. Waiting times for home adaptations had significantly reduced. There was creative work with housing partners to deliver improved outcomes. A few people told us that the delays in having a ramp installed to help them get out and about were too long.

We had positive feedback about many health and social care staff who were involved in supporting older people. The work of the specialist rehabilitation worker supporting people who were newly registered as blind or partially sighted was valued. People were supported to develop new skills and enjoy fuller and more active lives. Older people who were deaf or hard of hearing had identified some areas where they required additional support, which were being addressed by the council. However, some older people told us that there were too many changes of workers as people moved through different health and social care systems. Older people using services, particularly those with dementia and their carers would welcome more consistent support.

Outcomes from joint work to prevent avoidable admissions to hospital or care homes were good and improving. The council performed very well in supporting older people to live independently. There was relatively low usage of care homes in Halton compared to other areas. The council had very good performance in ensuring there were no delays in discharge from hospital for social care reasons. There were positive alternatives to in-patient care for older people with mental health needs. There was work taking place to reduce the length of stay of some people with long-term conditions.

Work was required to ensure hospital discharge arrangements worked well for everyone. This included ensuring shared and robust arrangements for identifying and managing risk. For people with complex needs this required a more person-centred approach with regular review of changes to their well-being or home circumstances. There were relatively high emergency re-admission rates to hospital for Halton residents. There was a need to improve communication and the sharing of information to support discharge arrangements. Some people also highlighted areas where there was a need to improve the care and dignity of older people in hospital settings. Senior hospital staff were working with the dignity in care co-ordinator to promote improvements.

There was a carer pilot project in one local hospital that sought to improve the focus

on and support to carers. This was seen to be working well and required expansion. The practical support provided by the Red Cross service on discharge from hospital was valued.

The council and its health partners were working to improve the quality and range of local services supporting older people with mental health needs. We saw some examples of sensitive work with individuals that provided reassurance and effectively involved or distracted them when they were distressed or were at risk of harming themselves or others. However, some service providers were not sufficiently skilled or responsive in meeting the needs of older people with dementia. Some carers highlighted areas for improvement in the level of support and communication by service providers. There was potential to be more creative in engaging with people with dementia and to offer a person-centred and stimulating range of activities.

People who use services in care homes or in their own homes have meals provided that are balanced, promote health, and meet their cultural and dietary needs. People who need support are helped to eat in a dignified way.

The council and primary care trust recognised the importance of ensuring older people were able to enjoy meals that promoted their health and wellbeing. The choice of meals and quality of food was routinely checked by the quality assurance team during their visits to care homes. There was also an assessment made of the quality of the environment and recognition of individual support needs.

The expertise of the speech and language therapist in the rehabilitation team was used to inform healthy eating and the provision of balanced diets in a number of settings. Individual cultural and faith requirements in the preparation and provision of food were recognised. There was targeted provision of hot community meals for some older people. Support plans increasingly included details about the levels of support and preferences of individuals.

At the end of life, people who use services and their carers have their wishes respected and are treated with dignity.

Older people with a diverse range of health needs were supported to die in the place of their choice. This included older people at the end stages of dementia as well as those with palliative care or other progressive conditions. Increasingly older people were able to die in their own homes in line with their wishes. Care was taken to involve wider family and friends and ensure a prompt and flexible response to meeting people's needs. This included provision of appropriate equipment with support provided at a number of levels by voluntary sector, health and social care staff. Work had taken place to strengthen the capacity of residential and nursing homes to care for people at the end of their lives. Domiciliary care staff had received appropriate training to support people with terminal conditions.

Family carers commended the quality and speed of response in meeting individual needs and supporting them before and following the death of their family member. One family member told us:

“Staff were very supportive, and organised a package of care, transfer home and equipment in a sensitive and timely manner”.

Joint arrangements for supporting people with continuing health care needs had been strengthened. There were now clear systems in place that focused on accountabilities, monitoring and review of changing needs to ensure appropriate care continued to be provided.

Increased choice and control

People who use services and their carers are supported in exercising control of personal support. People can choose from a wide range of local support.

All local people who need services and carers are helped to take control of their support. Advice and information helps them think through support options, risks, costs and funding.

The council provided a high level of information, advice and support to local people. It had reviewed its Fair Access to Care Services criteria and included people with moderate needs. Information leaflets were well-presented and translated into other formats or languages on request. The council's website provided good and easy access to information about local services. The One Stop Shops and advice bus were well-used and provided a comprehensive range of information. Customer services staff had a sound awareness of the needs of older people and their carers. They had a good understanding of changes within the directorate to support the personalisation agenda.

Local GP surgeries and libraries also provided a good range of information and advice on health and social care matters. The gypsy and traveller liaison worker played an important role in building people's awareness of and confidence in using local services.

The council had strengthened access to and the co-ordination of advice and support across its wider partnerships. It was working with other councils to expand on-line self-directed support and procurement options. Joint working with Age Concern and Sure Start to Later Life enabled a comprehensive response to individual needs. Arrangements for signposting people onto other agencies for additional advice or support were clear. Work was taking place to promote better understanding of the impact of support provided at a wider partnership level. The work of the local Carers Centre was highly valued. The number of people registered as carers was good and continued to increase. These approaches ensured improved targeting of information, advice and peer support.

People using services had been engaged in developing and giving feedback on the quality of public information. Most people reported that information was easy to access. A few people said they would have benefited from knowing about help available at an earlier stage, and that charging for services could be clearer.

Information and practical advice to support people using Direct Payments or personal budgets and employing their own staff was well-developed. The council had recognised the need to expand advocacy for older people, including out-of-hours. It gave priority to ensuring people with complex needs or communication difficulties were able to say what they wanted to see happen. It had commissioned additional capacity to support increased patterns of use. There was work in progress to encourage the development of user-led organisations to provide a higher level of peer support.

People who use services and their carers are helped to assess their needs and plan personalised support.

Many older people and their families praised the work of frontline staff in enabling them to be safe and independent. Older people and carers told us:

“Our social worker is very supportive and treats my husband and me with dignity and respect”.

“All my needs have been dealt with quickly”.

“They look at things from our perspective- they try hard to understand what we want and will explore alternatives”.

The council was working to transform the way it met the needs of older people and their carers. Changes had been made to assessment, care planning and review arrangements to deliver more flexible and creative responses to peoples’ needs and personal circumstances. These were informed by consultation with people using services and partner organisations. There was a carer support worker linked to each of the frontline care management teams that provided a strong focus on the specific needs of carers. Adult social care staff worked well with their local health colleagues in supporting older people with a diverse range of needs. There remained a few gaps in implementing single assessment across the wider health system that still needed to be addressed.

The use of pen pictures promoted improved understanding of the history, interests and talents of older people. Care was taken to actively involve them so that their priorities and wishes underpinned the help they received. This approach had also been positively adopted by some service providers, including care homes. There was evidence of stronger partnership working in enabling people to access a range of community-based activities.

The equality of older people and carers was strongly promoted. There was a clear focus on preventing age-related discrimination in promoting access to services. Frontline staff sensitively responded to the diverse faith, cultural and lifestyle preferences of local people. There was appropriate access to interpreting and translation services for people whose first language was not English. The needs of carers were clearly identified and promoted. Arrangements to support carers in the event of an emergency were well-developed.

Casework demonstrated sensitive practice in working at the pace of and in accordance with the older person’s wishes. Advocacy was effectively used where there were differences of opinion or uncertainty about the best way forward. Best interest decisions were carefully taken to secure shared understanding and agreement in supporting people who lacked mental capacity. Assessments of individual needs were thorough and paid attention to risks and areas where the older person required additional support to maintain their dignity and relationships.

Duty and access arrangements had been reviewed and strengthened. Demand and trends were carefully monitored. Staff capacity was flexibly deployed to support transition to new ways of working and address local priorities. This included

strengthening social work input to the older person's mental health team to support wider awareness of and take up of personal budgets.

The workload of frontline teams was well-managed and there were few delays or unallocated work. Management support and supervision arrangements were well-developed. Record keeping was of a good standard. There were clear arrangements in place to support case transfer or closure. Case records were routinely audited including by senior managers.

Service development and review arrangements were robust and guided practice so that new ways of working were sustainable and effectively managed risk. A risk enablement panel had been established to support decision-making in complex cases. Resource allocation systems had been piloted and a model for costing personal budgets had been agreed. A wide range of partners were proactively engaged in understanding the costs, workforce issues and changes required to fully implement self-directed support. Direct Payment arrangements had been reviewed to ensure alignment with new personalisation developments.

People who use services and their carers benefit from a broad range of support services. These are able to meet most people's needs for independent living. Support services meet the needs of people from diverse communities and backgrounds.

Older people had access to a broad range of support services. High numbers of people, including those with complex needs, were helped to live at home. There were few delays before people accessed the help they needed. Most people told us they were satisfied with the level of support provided. There was low and decreasing use of care homes. New models of support were being developed that offered increased choice to older people and their carers.

There was positive joint working with housing, rehabilitation and specialist health partners to help people live safely at home. The outcomes of the council's work with registered social landlords to expand the availability and timeliness of home adaptations was impressive. There was increasing use and enhancement of the capacity of assistive technology. The council had one extra-care housing scheme that was highly regarded by local people and was working to commission others.

Local services strongly promoted the social inclusion of older people and sought to strengthen their support networks. The Community Bridge Builders scheme supported older people to be active and develop new skills. A new sitting service had been developed to support carers of people with dementia, with improved levels of support out-of-hours. Care homes were strengthening their links with local voluntary sector organisations to enable people to access a wider range of opportunities.

There was wide promotion of personal budgets. The use of Direct Payments by older people and carers was steadily increasing. Recruitment, training and back-up support for people using personal assistants had been strengthened.

There were some areas where there was a need to further improve the quality and

availability of local services. Some older people told us that the service provided by their domiciliary care agency was not sufficiently flexible or responsive to their needs. This included issues around the timing of calls and choice of provider. Some carers reported gaps in local short-breaks services. The council was working to make booking arrangements more flexible and widen the range of options available.

People who use services and their carers can contact service providers when they need to. Complaints are well-managed.

Older people told us it was easy to get help from the council including out-of-hours. Halton Direct provided a single point of access to the council. The emergency duty team effectively responded to crises out-of-hours. The 5 Boroughs Partnership Trust had established a single point of access that provided a timely response to adults and older people with mental health needs. Surveys undertaken indicated high customer satisfaction with the council's response to requests for help.

The council had good performance in reviewing the needs of older people and their carers. The option of self-directed support and individual budgets was routinely offered. Reviews were outcome-focused and provided a clear picture of how well individual needs were being met. They involved appropriate partners and clearly recorded individual wishes. They took account of changes in individual need and ensured contingencies were in place to manage future risk.

Reviews had a strong focus on safeguarding including the effectiveness of support to people who lacked mental capacity and deprivation of liberty issues. Reviews also focused on the quality of life experienced by older people and their carers. This provided important information about inequalities and progress made in addressing risks.

The council encouraged feedback from people using services to inform its understanding of the quality of local services. There were a number of surveys and focus groups held to identify what was working well and areas for improvement. The dignity in care co-ordinator had undertaken an analysis of all complaints to inform preventative work. Information about making a complaint was widely available. Elected members were proactive in passing on any concerns brought to them by local people.

The council received a relatively low number of complaints about adult social care services. Some local people told us they were worried about or reluctant to complain. There was work required to build the confidence of older people and their carers and ensure independent support in enabling them to raise concerns. Our analysis of recent complaints identified the need for a timely response and to ensure the outcomes of the investigation and improvement actions were clearly shared with all relevant people.

Capacity to improve

Leadership

People from all communities are engaged in planning with councillors and senior managers. Councillors and senior managers have a clear vision for social care. They lead people in transforming services to achieve better outcomes for people. They agree priorities with their partners, secure resources, and develop the capabilities of people in the workforce.

People from all communities engage with councillors and senior managers. Councillors and senior managers show that they have a clear vision for social care services.

The council benefited from having strong, stable and effective leadership. Senior managers and elected members had regular contact with and a sound awareness of the needs of local people. The council encouraged and challenged its partners to ensure shared understanding of local priorities and promote better use of resources and expertise across the wider system. It was working to continuously improve satisfaction rates, value for money and outcomes for local people. People who used services and their carers told us they had seen real improvements over the last five years, and that they felt safe and happy living in the area.

The council had a clear and ambitious vision and goals to deliver high quality and sustainable responses to the needs of individuals and communities. The council had strong values centred in reducing inequalities in the life chances and outcomes experienced by many local people. Senior managers and elected members were energetic, responsive and accountable in the discharge of their responsibilities. Elected members were actively involved, well-informed and supportive of new developments in safeguarding and personalisation work. Partner agencies commended the council for its role in sharing learning and promoting innovative practice.

Links between children and adult safeguarding and wider community safety arrangements were developing well. Members of the Safeguarding Adults Board were working to continuously strengthen partner agency involvement in keeping people safe. The safeguarding event for local community and voluntary sector organisations provided a useful platform for widening awareness of individual and collective responsibilities in preventing and reporting abuse.

The Older Persons Empowerment Network (OPEN) and LINK had a strong focus on the experiences of local people. They were actively engaged in identifying and supporting improvements across a wide range of council and health services. The development of peer support groups for people with dementia and their carers was a positive development in tackling social isolation and ensured wider representation and involvement of older people.

People who use services and their carers are a part of the development of strategic planning through feedback about the services they use. Social care develops strategic planning with partners, focuses on priorities and is informed by analysis of population needs. Resource use is also planned strategically and delivers priorities over time.

Older people and carers were actively engaged in a range of user-led forums, partnership boards and joint planning groups. Strengthening their involvement in quality assurance activities such as mystery shopping and review of local services should ensure a comprehensive focus on the wishes and experiences of older people and their carers. As highlighted earlier in the report enhancing the involvement of people who were at risk of or who had been abused should provide important feedback on the effectiveness of safeguarding approaches and support provided.

The council had strong and enabling relationships with a wide range of partners. It had skilfully woven together a number of strategies and partnerships to keep people safe and to promote their independence and personal control. It was inclusive in its approach to addressing challenges and managing change at strategic and operational levels. The social care in partnership work with local GPs and work taking place to integrate hospital discharge arrangements should ensure wider learning and improved capacity to support people as they moved between different health and social care systems.

There was a sound focus on delivering efficiencies, securing value for money with close scrutiny of capacity to meet changes in demand and address risks. Plans were up-to-date, comprehensive and secured by robust governance and reporting arrangements. The council was effective in its management and control of resources. Medium term financial planning was closely aligned to service development and improvement priorities. Alternative funding had been secured to support new ways of working.

The terms of reference, representation and partner agency contribution to the work of the Safeguarding Adults Board had been reviewed and strengthened. The police and local health organisations had increased their capacity and focus in relation to the recognition and support of people at risk of abuse. There was positive joint working with neighbouring councils to align safeguarding policies and procedures. However, there were still a few partners that needed to be actively involved and increase their contribution to the work of the Board and its sub-groups.

The safeguarding work plan was well-developed. Good progress had been made in all areas. There was work in progress to develop practice networks that included a range of staff involved in safeguarding work. This was welcomed by frontline staff to support wider learning and review of their work, particularly in supporting people whose needs or personal circumstances were complex.

Joint approaches with health, community and voluntary sector organisations were being expanded to improve targeting and co-ordination of work to address the health and wellbeing and quality of life of local people. There was good progress being made and wide ownership of the personalisation agenda. The council had built open and transparent relationships with service providers. As highlighted elsewhere in the

report the joint approach to implementation of '*Dignity in Care*' in Halton was challenging and effective in recognising the value and human rights of people who were reliant on others for their safety and well-being.

The social care workforce has capacity, skills and commitment to deliver improved outcomes, and works successfully with key partners.

Frontline staff and their managers impressed us with their sense of purpose, enthusiasm and commitment to deliver high quality and responsive support. The council invested in a range of apprenticeships, professional training and leadership programmes that contributed to high staff morale and a stable workforce. There was a comprehensive programme of staff development and training to equip staff across the sector with the knowledge, skills and sensitivity required to meet the diverse needs of older people living in the area. The directorate restructuring process had been well-managed and the new operational teams worked well together.

The council's recruitment and employment practices complied with legal requirements and promoted high professional standards. Disciplinary procedures were promptly and appropriately used where there were concerns about the performance of staff. The council's quality assurance team routinely checked the procedures and practice of local providers.

There was a comprehensive programme of multi-agency safeguarding training and guidance to build the expertise and confidence of the workforce across the sector. Partners reported positively on ease of access to and the quality of safeguarding training. Training provided by the local police force supported improved joint working and understanding of evidence gathering requirements. Audits were undertaken of the effectiveness of training and its impact in delivering better outcomes. This approach to learning from and refining the delivery of training, including assessment of value for money was robust.

Workforce planning was well-developed and had a clear focus on the areas where change was required to support full implementation of the personalisation agenda. There had been a range of development work to promote awareness of the responsibilities of people employing their own personal assistants.

The council had positively used external support to strengthen its arrangements for carers and to develop new tools and approaches to deliver person-centred support. New ways of working were being introduced that promoted innovative working with people who had high or complex needs.

Performance management sets clear targets for delivering priorities. Progress is monitored systematically and accurately. Innovation and initiative are encouraged and risks are managed.

The council was strong in challenging its own performance and that of its partners in its quest for the highest possible standards and top performance. The directorate had a solid track record in raising and sustaining high performance, with an improvement-driven culture that supported a wide range of transformational activity. The council set ambitious targets and performed well in meeting them, including its local area agreement targets. There were sound systems in place for identifying and managing organisational risk.

Changes in performance levels and trends were carefully monitored and evaluated. Comprehensive quarterly performance reporting was undertaken. Policy and performance boards had a clear focus on the assessment of progress in meeting key targets, with detailed analysis of cost and efficiency and the quality and effectiveness of local services. Performance against key and wider partnership indicators, risk management and equality actions was routinely reported. The Safeguarding Adults Board and its sub-groups were working to continuously improve the collection and analysis of data.

Frontline staff had a good awareness of their own personal and team performance and contribution to wider organisational priorities and targets. Service development days and performance clinics were held to promote wider learning and shared approaches to service delivery. There was a strong emphasis on learning from compliments and complaints. Partnership agreements were in place and regularly reviewed to ensure the required outcomes were achieved. Action planning to support improvements was robust.

Commissioning and use of resources

People who use services and their carers are able to commission the support they need. Commissioners engage with people who use services, carers, partners and service providers, and shape the market to improve outcomes and good value.

The views of people who use services, carers, local people, partners and service providers are listened to by commissioners. These views influence commissioning for better outcomes for people.

The council gave a high priority to involving and listening to its partners, including people who used services and their carers. The Older Person's Empowerment Network had a large membership. They were engaged in work to identify unmet need and were consulted on the development of new models of support. The Carers Strategy was well-informed by the wishes and views of carers. Progress was reviewed and new priorities identified through a range of consultation and focus groups.

The LINK was actively involved alongside senior managers and elected members in work to address a range of health and social care issues that mattered to local people. Their '*Fact or Fiction*' events provided an important means of ensuring local people got clear messages about national and local policy changes and the implications for them.

The council hosted a number of personalisation events over the past year. "*Celebrating Our Successes*" was effective in promoting wide awareness of the impact of new ways of working in enabling people to have more choice and control over their lives. The council through its "*Working for Change*³" pilot with provider organisations demonstrated creative work and positive outcomes for adults with mental health needs. Its improvement focus and priorities were positively shaped by the experiences and views of people using local services.

Halton Speak Out had undertaken some innovative consultation work with older people with a learning disability. This included work on identifying people's future dreams and aspirations. There were positive outcomes including improved access and opportunities for people to make a positive contribution to the life of their local communities. Older people with mental health needs including dementia would also benefit from a targeted focus on the quality of their lives and the opportunities open to them.

³ Department of Health initiative to enable organisations consider the workforce and commissioning implications in supporting the shift to personalisation

Commissioners understand local needs for social care. They lead change, investing resources fairly to achieve local priorities and working with partners to shape the local economy. Services achieve good value.

Senior managers and elected members had a sound awareness of the needs and strengths of people living in the area. They were continuously striving to secure new opportunities and to deliver 'whole system' change to address the deprivation and inequalities experienced by local people. The joint strategic needs assessment had been updated and local people gave feedback on the issues they saw as most important for them and their communities. The council and its local health partners had a detailed understanding of the needs and risks to the safety and well-being of local people. It had achieved wide ownership of shared agendas through the work of policy and performance boards, local partnership boards, joint strategic needs assessment and joint commissioning arrangements.

The council had developed strong and shared approaches to maximising use of its own and partner agencies' expertise and resources. The work of the Carers Centre, Sure Start to Later Life and Community Bridge Builders enabled older people to have help at a number of levels and participate in a wide range of activities. The council was working to further expand these services in response to increased demand. Dignity in care was a 'golden thread' that supported a shared culture, standards and joint improvement projects across the partnership. Developments in assistive technology should further strengthen links between teams and agencies and provide better management and monitoring of risk.

There was a significant programme of work to address the current and future needs of older people. There had been additional investment in intermediate care services. High numbers of people did not require ongoing support, or a reduced level following their period of rehabilitation. The council was working with its health partners to shift investment from hospital care to ensure a stronger focus on early intervention and prevention and to expand the levels of specialist and out-of-hours support available in community settings. There was effective joint working with housing partners to expand approaches to meeting the needs of older people. The joint commissioning strategy for people with dementia supported an improved focus on early diagnosis, treatment and the delivery of person-centred support.

The council was effective in the management and control of its resources. Pooled budgets were well-managed. There was a clear focus on securing value for money and building organisational flexibility to address future risks and changes in demand. The council was working to address the impact of future funding constraints for its own and partner organisations. Care was taken to safeguard and continuously improve frontline operations whilst seeking efficiencies in its back office functions. It had refined and reduced its use of care home provision and worked sensitively with local providers to expand support to people with complex needs. It had freed up block contracting arrangements and had decommissioned some of its traditional services to enable a wider choice of options and flexibility of funding.

The council had a good track record in working with local providers to challenge poor performance and to drive up and maintain high standards of service delivery. Contract management and monitoring promoted a strong joint focus on work to continuously improve the responsiveness, quality and consistency of service

providers. There was a review of sheltered housing taking place to strengthen levels of support and the quality of local services. Further review of domiciliary, day care and short breaks services was required to achieve more individually tailored support arrangements.

The council was working to strengthen the capacity and contribution of local community and voluntary sector organisations. There was work required to ensure effective co-ordination of and enhancement of the role and contribution of local community, faith and voluntary sector groups in supporting the delivery of local priorities.

The council was working to update and improve the capabilities of its electronic social care recording system. There was work in progress to improve data capture across its partnerships. New management information systems aimed to strengthen analysis of the diverse needs of local people and improve performance management of outcomes across the wider system.

Appendix A: summary of recommendations

Recommendations for improving performance in Halton

Safeguarding adults

The council should:

1. Strengthen the collection and analysis of information about safeguarding activity to support wider learning and targeting of areas of risk (Page 13).
2. Ensure people have good access to advocacy support to promote their full understanding and involvement in safeguarding work (Page 13).

Improved health and wellbeing for older people

The council should:

3. Secure further improvements in the health and wellbeing of older people and their carers (Page 16).
4. Address gaps in access to and the flexibility of local transport (Page 17).
5. Ensure hospital discharge arrangements work well for everyone and reduce the rate of emergency re-admissions (Page 18).
6. Continue to enhance the availability, range and quality of support for older people and their carers (Pages 18-19, 24 and 31).

Increased choice and control for older people

The council should:

7. Make it easier for people to raise concerns and ensure timely investigation and feedback about the outcome of complaints (Pages 14 and 24).

Providing leadership

The council should:

8. Strengthen the involvement of older people and their carers in key activities such as mystery shopping and review of the quality of local services (Page 26).
9. Continue to strengthen the involvement and contribution of all organisations to the work of the Safer and Healthier Halton partnership programmes (Page 26).

Commissioning and use of resources

The council should:

10. Ensure effective co-ordination of and enhancement of the role and contribution of local community, voluntary sector and faith groups (Page 31).

Appendix B: Methodology

This inspection was one of a number service inspections carried out by the Care Quality Commission (CQC) in 2010.

The assessment framework for the inspection was the commission's outcomes framework for adult social care which is set out in full [on our website](#). The specific areas of the framework used in this inspection are set out in the Key Findings section of this report.

The inspection had an emphasis on improving outcomes for people. The views and experiences of adults who needed social care services and their carers were at the core of this inspection.

The inspection team consisted of two inspectors and an 'expert by experience'. The expert by experience is a member of the public who has had experience of using adult social care services.

We asked the council to provide an assessment of its performance on the areas we intended to inspect before the start of fieldwork. They also provided us with evidence not already sent to us as part of their annual performance assessment.

We reviewed this evidence with evidence from partner agencies, our postal survey of people who used services and elsewhere. We then drew provisional conclusions from this early evidence and fed these back to the council.

We advertised the inspection and asked the local LINKs (Local Involvement Network) to help publicise the inspection among people who used services.

We spent six days in Halton when we met with five people whose case records we had read and inspected a further twenty case records. We also met with approximately hundred people who used services and carers in groups and in an open public forum we held. We sent questionnaires to 150 people who used services and 41 were returned.

We also met with

- Social care fieldworkers
- Senior managers in the council, other statutory agencies and the third sector
- Independent advocacy agencies and providers of social care services
- Organisations which represent people who use services and/or carers
- Councillors.

This report has been published after the council had the opportunity to correct any matters of factual accuracy and to comment on the rated inspection judgements.

Halton will now plan to improve services based on this report and its recommendations.

If you would like any further information about our methodology then please visit the [general service inspection page](#) on our website.

If you would like to see how we have inspected other councils then please visit the [service inspection reports](#) section of our website.

Improvement Plan - Halton Borough Council

Improvement Area 1 – Strengthen the collection and analysis of information about safeguarding activity to support wider learning and targeting of areas of risk		
How is this to be achieved / action	Expected evidence of improvement	Timescale (by)
1. Review & update the Safeguarding Board's Quality & Performance Sub-group work plan and continue to progress work already underway.	Evidenced by :- a) Information will be reported to the Safeguarding Board's Quality and Performance Sub Group and Safeguarding Adults Board for analysis and comment. b) The above will be inclusive of partner agency data. c) Analysis of safeguarding data, feedback from service users and carers, and provider monitoring will all inform the Safeguarding Adults Board about the effectiveness of the management of Safeguarding activity. d) Analysis and interpretation of the above information will inform service development and commissioning. e) Data will be of good quality. f) Electronic Safeguarding Case Recording Form will be implemented. Staff fully trained in how to use electronic form. Any implementation issues resolved. g) Multi agency auditing will be established and reported to Safeguarding Adults Board 6 monthly. All agencies will address areas for development identified.	1. December 2010
2. Implement monitoring systems to track progress towards national dignity measures – data collection will be ongoing once system implemented		2. March 2011

Improvement Area 2 – Ensure people have good access to advocacy support to promote their full understanding and involvement in safeguarding work		
How is this to be achieved /action	Expected evidence of improvement	Timescale (by)
1. Develop Advocacy 'hub' specification for individuals/family and develop appropriate pathways	Evidenced by :- a) Advocacy Hub <ul style="list-style-type: none"> • All relevant elements and different types of Advocacy will have been determined • All relevant local services will have been appropriately mapped • Gaps in information, advice and advocacy will have been identified • Services specification will be in place which will determine what will be commissioned, decommissioned, how this will be completed and the agreed timescales. b) All Family members of service users who are the subject of Safeguarding cases will receive written information that states an advocacy service will be sought where needed.	1. December 2010
2. Commission provider to deliver 'hub' and ensure appropriate publicity of service		2. September 2011
3. Review & update advice leaflet 'Explaining Adult Protection Inquiries – Information for Families, Advocates & other Carers'.		3. December 2010
4. Implement updated advice leaflet 'Explaining Adult Protection Inquiries – Information for Families, Advocates & other Carers' via assessment teams		4. March 2011

Improvement Area 3 – Secure further improvements in the health and wellbeing of older people and their carers		
How is this to be achieved / action	Expected evidence of improvement	Timescale (by)
1. Nutrition guidelines will be developed to support Care Homes, Domiciliary Care, Sheltered Accommodation etc. Staff to be trained on appropriate guidelines	Evidenced by : - a) 90% of key identified frontline staff trained in alcohol awareness/identification and brief advice by November 2011 b) 70% of trained key frontline staff undertake alcohol screening/brief interventions with older people by January 2012. Ongoing process with quarterly updates to be made available. c) Brief intervention for alcohol and signposting training offered to all identified key frontline professionals by December 2011. Training sessions commence January 2011. d) Guidelines on emotional health and well being for older people developed by December 2011, training for staff commences January 2011. e) Consultation with carers and support into services commenced by December 2010. Health Checks+ commenced for carers by December 2010. Carers literature on health improvement initiatives available by June 2011.	1. January 2011
2. Increase the number of brief interventions for alcohol and signposting into relevant services for older people. These interventions will be undertaken by key frontline professionals who come into contact with older people, e.g. Age Concern and Primary Care. Training for staff will be in accordance with Identification and Brief Advice Training (IBA)		2. November 2011
3. Undertake an audit of hospital alcohol related admissions by age and condition to inform service delivery.		3. December 2010
4. Provide support and training to staff within Care Homes, Domiciliary Care, Sheltered Accommodation etc to improve the Health and Wellbeing of older people and their carers. To include:- a) Brief intervention Training on 1 to 1 Weight Management to tackle obesity b) Emotional Health and Wellbeing (inc. development of guidelines)		4 a) June 2011 4 b) December 2011

c) Stop Smoking Intermediate Training		4 c) March 2011
5. Continue to implement the 2010 Action Plan to Improve the Accessibility of Health Improvement Information for Carers.		5. January 2011

Improvement Area 4 – Address gaps in access to and the flexibility of local transport		
How is this to be achieved /action	Expected evidence of improvement	Timescale (by)
1. Transport gaps including issues around Community Transport and Wheelchair Accessible vehicles to be considered as part of the efficiency review of the Logistics division, incorporating Client Transport and Fleet Management.	Evidenced by :- a) Fleet Management and Transport are included within the current wave of efficiency reviews. As part of this review, shortfalls identified in various transport areas including community transport and wheelchair accessible vehicles will be addressed. This will be evidenced within the Efficiency Board Closure Report at the conclusion of the review	1. March 2011

Improvement Area 5 – Ensure hospital discharge arrangements work well for everyone and reduce the rate of emergency re-admissions		
How is this to be achieved / action	Expected evidence of improvement	Timescale (by)
1. To continue with the implementation of the Integrated Discharge Teams in Warrington and Whiston Hospitals.	Evidenced by:- a) a reduction in readmissions to hospital from the 2009/10 baseline- 9.6% (Warrington) (9.3% Whiston) to 8% by September 2011. b) a reduction in lengths of stay from the 2009/10 baseline- equivalent to 12 beds, in Warrington and 24 beds in Whiston, by September 2011. c) a reduction in people being discharged from hospital care directly to long term institutional care- from a 30% baseline 2009/10 (Further work required on accuracy of the data) d) an increase in the number of people receiving Intermediate Care/Re-ablement services. e) patient satisfaction on discharge from hospital.	1. January 2011
2. Develop and implement documentation, pathways, risk management and communication between the Hospital Teams and Care Management Teams, on admission and discharge.		2. November 2010
3. Develop processes to ensure that carers are partners in planning for discharge from hospital – To take account of the learning from the DoH Carers Demonstrator Site Project		3. January 2011

Improvement Area 6 – Continue to enhance the availability, range and quality of support for older people and their carers		
How is this to be achieved /action	Expected evidence of improvement	Timescale (by)
1. Review adult placement, domiciliary and residential services to identify capacity and skills to deliver support to people diagnosed with dementia	<p>Evidence by :-</p> <p>a) Will aim to achieve objectives within the National Dementia Strategy, including Objectives 4, 5, 6 and 9. This will be further enhanced by the implementation of a 17 point local action plan. The following are the key milestones to complete by March 2011:</p> <ul style="list-style-type: none"> • Dementia service pathway mapping complete • Proposed redesign of existing dementia services • Draft specification for the Assessment, Care and Treatment Service agreed. <p>Each of these targets and the others within the local action plan will be monitored through the Multi-agency dementia steering group.</p> <p>b) Actions 6 and 7 will be monitored through a range of consultation exercises that will be taking place with different carers across the borough. This will include at the Carers Event in December 2010, as part of the review of Adult Placement and as part of the development of Dementia Champions in the borough.</p> <p>c) Refreshing the Carers Strategy action plan to reflect findings in respect to the need for respite.</p>	1. March 2011
2. To continue to implement the Local Dementia Strategy		2. March 2015
3. To further develop and modernise Oakmeadow Community Support Centre in order to improve the range and quality of enabling support provided including activities and day opportunities		3. April 2011
4. Pilot electronic monitoring of domiciliary care with a local provider with a view to introducing borough wide electronic monitoring within 12 months		4. October 2011
5. Negotiate with a small number of providers to agree allocated beds for planned respite.		5. November 2010
6. Undertake a full needs assessment to identify both met and unmet need for short breaks/planned respite.		6. January 2011
7. Refresh commissioning action plans to incorporate findings from needs analysis		7. April 2011

Improvement Area 7 – Make it easier for people to raise concerns and ensure timely investigation and feedback about the outcome of complaints

How is this to be achieved / action	Expected evidence of improvement	Timescale (by)
<p>1. Form a Halton Customer Care Group working group (to include partner agencies e.g. Acute Trust) to develop a process to enable people to raise issues less formally in Halton and encourage an approachability ethos - linked to the developing Customer Service Excellence programme. The Contracts Team will work with providers to roll out a consistent approach across all sectors.</p>	<p>Evidenced by :-</p> <p>a) Action 1 (the formation of a Halton Customer Care Group working group) has commenced, with the 1st meeting held on 10th November 2010. Evaluation will be the formulation of new informal ways to raise concerns and the marketing of such an approach (as described in action 2)</p> <p>b) Action 3 ensures that this will remain under scrutiny and the outcome is evidenced through an analysis of resulting data and feedback (both unsolicited and proactive)</p>	1. June 2011
<p>2. Develop a marketing plan to promote the approachability culture to people who use services and their carers along with staff and the wider public, including attendance and promotion at user consultation forums, staff training etc. Also work with other colleagues to strengthen the approachability message across all organisations serving Halton residents.</p>		2. May 2011
<p>3. Review progress and consider and plan future activity</p>		3. July 2011

Improvement Area 8 – Strengthen the involvement of older people and their carers in key activities such as mystery shopping and review of the quality of local services

How is this to be achieved /action	Expected evidence of improvement	Timescale (by)
1. In conjunction with Halton OPEN, implement mechanisms to ensure that Older People are able to effectively contribute to service monitoring and reviews, including the development of mystery shopping. (Need to give consideration that all Halton OPEN members are volunteers.)	Evidenced by :- a) Complete three agreed focus groups as set out by Halton OPEN by March 2011 – These have been provisionally agreed to cover Dementia, Sensory Impairment and Complaints b) Involve Older People in the review of information services in the Borough c) Commissioning will develop a performance framework to ensure that Halton OPEN operates to an agreed governance arrangement as well as to a specific business model. In addition each of the actions will have completed documents to support their implementation and evidence the impact of the intervention. This will include a business plan, focus groups, minutes of meetings and monitoring paperwork	1. December 2010
2. Develop Peer monitoring pilot programme with Halton OPEN – this will initially include mystery shopping of the contact centre and local information providers.		2. January 2011
3. Develop an Older People’s Community Engagement strategy to support Older People and their Carers to effectively contribute to service planning, developments etc.		3. March 2011

Improvement Area 9 – Continue to strengthen the involvement and contribution of all organisations to the work of the Safer and Healthier Halton partnership programmes

How is this to be achieved / action	Expected evidence of improvement	Timescale (by)
1. Review representation on partnership programmes to ensure all key partners are appropriately represented. Put in place a framework for routine follow up.	Evidenced by :- a) All key partners are engaging effectively and contributing to partnership programmes - This will be evidenced through Boards and working groups and an annual review will be undertaken of relevant work plans	1. April 2011
2. Review effectiveness of Sub Groups and the contribution of partner organisations		2. April 2012

Improvement Area 10 – Ensure effective co-ordination of and enhancement of the role and contribution of local community, voluntary sector and faith groups		
How is this to be achieved /action	Expected evidence of improvement	Timescale (by)
<p>1. BME & FAITH NETWORK: Commissioners establish a link into the network and engage with the participants in future consultations to shape commissioning to support better outcomes for marginalised people.</p>	<p>Evidenced by :-</p> <p>a) 3 Consultations to be held with the BME & Faith Network over the next twelve months</p> <p>b) Themed local area forums meetings:-</p> <ul style="list-style-type: none"> • Area Forum for Birchfield, Farnworth & Halton View holding a themed daytime event on “Support for Older People” in January 2011 • Area Forum for Grange, Halton Brook, Heath & Mersey holding a daytime themed event on “Intergenerational Activity” in January 2011 • Area Forum for Castlefields, Norton North & South & Windmill Hill hosting a daytime meeting on “Drugs & Alcohol” in February 2011 • Area Forum for Appleton, Kingsway & Riverside hosting a daytime meeting of “Employment & Welfare Support” in January 2011. <p>c) Partner agencies, including the third sector become embedded in the Local Area Forum mechanism</p> <p>d) EVOLVE monitoring process – piloted with 10 VCS organisations before full roll out – Full roll out by May 2012.</p> <p>e) ‘Here to help’ searchable website with</p>	1. November 2011
<p>2. LOCALITY MANAGEMENT: The local area forum mechanism is extended to include partners at planning meetings, three per year per area forum area. Provide focussed community development to support community involvement at public meetings and agree a minimum of one themed daytime meeting per year per area forum, a total of seven per year responding to local concerns.</p>		2. January 2012
<p>3. Undertake a Corporate review of partnership and coordination of local community, voluntary sector and faith groups</p>		3. September 2011
<p>4. Working with partners in Health, ensure the effective co-ordination of information and intelligence on voluntary and faith sector provision</p>		4. May 2012

	intelligence on voluntary and faith sector provision will be fully populated by May 2012.	
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REPORT: Safer Policy and Performance Board

DATE: 18th January 2011

REPORTING OFFICER: Strategic Director – Adults and Community

SUBJECT: Safer Halton Policy and Performance Board
Work Programme 2011/12

WARDS: Boroughwide

1.0 PURPOSE AND CONTENT OF REPORT

- 1.1 This report is the first step in developing a work programme of Topics for the Board to examine in 2011/12. While the Board ultimately determines its own Topics, suggestions for Topics to be considered may also come from a variety of other sources in addition to Members of the Board themselves, including members of the Council's Executive, other non-Executive Members, officers, the public, partner and other organisations, performance data and inspections.
- 1.2 The key tasks for Board Members are:
- to suggest and gather Topic ideas on issues relevant to the Board's remit;
 - to develop and prioritise a shortlist of possible Topics for examination in 2011/12, bearing in mind the Council's agreed selection criteria (Annex 1)
 - to decide on a work programme of 2 or 3 Topics to be undertaken in the next municipal year.
- 1.3 A non-exhaustive list of initial Topic ideas is attached as Annex 2 to help prompt discussion. However, Members should not be inhibited from offering additional ideas of their own for discussion and prioritisation by the Board.

2.0 RECOMMENDED: that the Policy and Performance Board

- (1) Put forward and debate its initial suggestions for Topics to be included in the Board's 2011/12 work programme;**
- (2) Develop and informally consult on a shortlist of its own and others 2011/12 Topic suggestions ahead of the Board's meeting on 16th March 2010, bearing in mind the Council's Topic selection criteria;**
- (3) Decide at its 15 March 2011 meeting on a work programme of 2 or 3 Topics to be examined in 2011/12.**

3.0 SUPPORTING INFORMATION

Annex 1 – Topic selection checklist

- 3.1 Prior to determining their preferred Topics, the PPB may wish to take soundings from relevant Executive Board portfolio holders, the SSP and other key partners.

OVERVIEW AND SCRUTINY WORK PROGRAMME

Topic Selection Checklist

This checklist leads the user through a reasoning process to identify a) why a topic should be explored and b) whether it makes sense to examine it through the overview and scrutiny process. More “yeses” indicate a stronger case for selecting the Topic.

#	CRITERION	Yes/No
<i>Why? Evidence for why a topic should be explored and included in the work programme</i>		
1	Is the Topic directly aligned with and have significant implications for at least 1 of Halton’s 5 strategic priorities & related objectives/PIs, and/or a key central government priority?	
2	Does the Topic address an identified need or issue?	
3	Is there a high level of public interest or concern about the Topic e.g. apparent from consultation, complaints or the local press	
4	Has the Topic been identified through performance monitoring e.g. PIs indicating an area of poor performance with scope for improvement?	
5	Has the Topic been raised as an issue requiring further examination through a review, inspection or assessment, or by the auditor?	
6	Is the Topic area likely to have a major impact on resources or be significantly affected by financial or other resource problems e.g. a pattern of major overspending or persisting staffing difficulties that could undermine performance?	
7	Has some recent development or change created a need to look at the Topic e.g. new government guidance/legislation, or new research findings?	
8	Would there be significant risks to the organisation and the community as a result of not examining this topic?	
<i>Whether? Reasons affecting whether it makes sense to examine an identified topic</i>		
9	Scope for impact - Is the Topic something the Council can actually influence, directly or via its partners? Can we make a difference?	
10	Outcomes – Are there clear improvement outcomes (not specific answers) in mind from examining the Topic and are they likely to be achievable?	
11	Cost: benefit - are the benefits of working on the Topic likely to outweigh the costs, making investment of time & effort worthwhile?	
12	Are PPBs the best way to add value in this Topic area? Can they make a distinctive contribution?	
13	Does the organisation have the capacity to progress this Topic? (e.g. is it related to other review or work peaks that would place an unacceptable load on a particular officer or team?)	
14	Can PPBs contribute meaningfully given the time available?	

REPORT TO: Safer Policy and Performance Board

DATE: 18th January 2011

REPORTING OFFICER: Strategic Director, Adults and Community

SUBJECT: Alleygating

WARDS: Borough-wide

1.0 PURPOSE OF THE REPORT

To review the Council's policy on alleygating.

2.0 RECOMMENDATION: That

1) Members of the Safer Policy & Performance Board note and comment upon the report.

3.0 SUPPORTING INFORMATION

3.1 On 21st June 2007 the Executive Board adopted a policy on alleygating (Minute EXB 13). It was resolved that 'the policy that requires all future proposed alleygates on public highways (which can include Public Rights of Way) to be supported by a Gating Order, made under the provisions of Section 129A of the Highways Act 1980 be adopted'.

3.2 Experience has shown that the existing policy is difficult to implement in practice.

3.3 Two matters can be highlighted in particular: (1) ward members have considerable local knowledge which is underutilised and (2) the system is predicated on an evidence based approach when evidence is extremely difficult to obtain in this area. Indeed, requests are almost always based on impressions and feelings about the role of highways in crime and anti-social behaviour which are not substantiated objectively by analysis of the facts. The mismatch between the problems as perceived and evidence to back up those perceptions causes frustrations on the part of members and the public.

3.4 At its meeting on 21st September 210 the SH-PPB resolved that a short-term working group be established to look at the procedure for Alleygates. The working group concluded that a more radical approach was required which included a review of policy as well as procedures.

3.5 It is therefore appropriate to consider a more flexible approach to establish whether the expectations of the community and members can be accommodated better than with the current system. This also accords with the principle of continuous improvement.

4.0 PROPOSED ALLEYGATING PRINCIPLES

- 4.1 Alleygating involves a balance between (on the one hand) the duty of the Council to keep the highways within the Borough open for the public to use and (on the other hand) the duty of the Council to act to reduce crime and disorder.
- 4.2 Ward members should be involved more fully at an earlier stage of the process to enable their local knowledge of possible issues to be used to assess their merits of proposals.
- 4.3 There will always be highways which the Council can never allow to be gated whatever the level of crime and disorder because of the over-riding importance of maintaining unimpeded access.
- 4.4 Alleygating should not be allowed as a “quick fix” for problems which are unrelated to highways.
- 4.5 Alleygating proposals will be considered in the context of pursuing the well-being of the community and the Council’s objectives as set out in its Corporate Plan.
- 4.6 Where evidence exists to justify gating orders to be made the provisions of Section 129A Highways Act 1980 should apply.
- 4.7 All gating schemes will be monitored from time to time to assess their continued relevance and contribution to reducing crime and/or anti-social behaviour.

5.0 PROPOSED ALLEYGATING PROCEDURES

- 5.1 Appendix 1 sets out the proposed procedures. The proposed procedures are designed to produce a system which is in line with the principles set out above.

6.0 CONSEQUENTIAL ISSUES

- 6.1 The proposed principles and procedures are cost neutral in terms of the physical costs of erecting and maintaining alleygates but will save money in processing gating orders which do not comply with the above principles.
- 6.2 At current prices, the cost of processing gating orders (excluding costs of erecting and maintaining gates) is assessed at to be in the order of £ 1,000.00 to £ 1,500.00 per scheme.

7.0 POLICY IMPLICATIONS

- 7.1 This report represents a revision to existing policy.

8.0 OTHER IMPLICATIONS

- 8.1 There are no other implications arising out of this report.

9.0 IMPLICATIONS FOR THE COUNCIL’S PRIORITIES

9.1 **Children and Young People in Halton**

None

9.2 **Employment, Learning and Skills in Halton**

None

9.3 **A Healthy Halton**

Resident's perception that they live in a safe environment aids general well-being.

9.4 **A Safer Halton**

Previous studies have indicated that alleygates reduce burglaries, instances of fly-tipping and general anti-social behaviour.

9.5 **Halton's Urban Renewal**

By reducing fly-tipping and general litter problems, gates improve the overall appearance of the borough.

10.0 RISK ANALYSIS

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

11.0 EQUALITY AND DIVERSITY ISSUES

11.1 There are no direct implications arising from this report.

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

12.1 None under the meaning of the Act.

Document

Place of Inspection

Contact Officer

Procedures applicable to alleygating applications

ACTION	BY WHOM?
ASSESSMENT PHASE	
1. Request received for alleygate	Received direct by HDL or if received by other persons request is to be forwarded to HDL
2. Request forwarded to: <ul style="list-style-type: none"> Ward Members (WMs). WMs to give views on community feelings about the request. Community Safety Partnership (CSP). CSP simply report on crime etc statistics Highways (H). H asked whether the highway in question could in principle be gated or whether the highway is too strategically important in principle to be gated. Area Forum Co-ordinator (AFC). AFC does nothing at this stage. 	HDL
2. WMs give initial view on request. <ul style="list-style-type: none"> If they recommend approval go to point 5. If the recommend rejection go to point 9. 	WMs give views to AFC
3. H reply to question in point 2 above. <ul style="list-style-type: none"> If they say YES in principle go to point 5. If they say NO in principle go to point 9. 	H give views to AFC
5. Area to be consulted on request agreed	WMs, H and Property Services (PS) agree and inform AFC .
6. Budget checked to confirm funds available should request be approved. <ul style="list-style-type: none"> If budget available go to point 7. If budget not available go to point 9. 	AFC
7. CSP asked to canvass community view (i.e. whether the community feel that gating is desirable because of their perceptions of crime and/or anti-social behaviour:- <ul style="list-style-type: none"> Within the area identified in point 5 for general view and Neighbours with a boundary with a proposed gate to establish then they would agree to erection of gate. If outcome of canvas positive go to point 8. If outcome of canvas negative go to point 9. 	CSP report to AFC on outcome
8. AFC convenes meeting with WCs, H, CSP & PS to share all information obtained and agree to proceed to Implementation Phase	WCs, H, CSP & PS instruct AFC to prepare report for Implementation Phase
9. Decide to proceed or discontinue : <ul style="list-style-type: none"> If decision to proceed carry out any missing steps to get to point 8. If decision to discontinue inform persons making the request. 	AFC AFC
IMPLEMENTATION PHASE	
Refer to relevant area forum	AFC
If approved by area forum Property Services implements the gating after obtaining planning permission.	PS
MONITORING PHASE	
Monitoring/review procedures to be designed and outcomes reported to SH PPB periodically	SH PPB to specify requirements

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