Public Document Pack



Safer Policy and Performance Board

Tuesday, 11 March 2014 at 6.30 p.m. Karalius Suite, Halton Stadium, Widnes

****PLEASE NOTE CHANGE OF VENUE****

David w R

Chief Executive

BOARD MEMBERSHIP

Councillor Shaun Osborne (Chairman)	Labour
Councillor Norman Plumpton Walsh (Vice-Chairman)	Labour
Councillor Susan Edge	Labour
Councillor John Gerrard	Labour
Councillor Robert Gilligan	Labour
Councillor Valerie Hill	Labour
Councillor Miriam Hodge	Liberal Democrat
Councillor Darren Lea	Labour
Councillor Martha Lloyd Jones	Labour
Councillor Paul Nolan	Labour
Councillor Pauline Sinnott	Labour

Please contact Lynn Derbyshire on 0151 511 7975 or e-mail lynn.derbyshire@halton.gov.uk for further information.

The next meeting of the Board is To Be Determined

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

Part I

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1.	MINUTES		
2.	2. DECLARATION OF INTEREST (INCLUDING PARTY WHIP DECLARATIONS)		
	Members are reminded of their responsibility to declare any Disclosable Pecuniary Interest or Other Disclosable Interest which they have in any item of business on the agenda, no later than when that item is reached or as soon as the interest becomes apparent and, with Disclosable Pecuniary interests, to leave the meeting during any discussion or voting on the item.		
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In accordance with the Health and Safety at Work Act the Council is required to notify those attending meetings of the fire evacuation procedures. A copy has previously been circulated to Members and instructions are located in all rooms within the Civic block.

Agenda Item 3

REPORT TO: Safer Policy & Performance Board

DATE: 11 March 2014

REPORTING OFFICER: Strategic Director, Policy and 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:-
 - 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.

Agenda Item 4

REPORT TO: Safer Policy and Performance Board

DATE: 11 March 2014

REPORTING OFFICER: Chief Executive

SUBJECT: Specialist Strategic Partnership minutes

WARD(s): Boroughwide

1.0 PURPOSE OF REPORT

The 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 Monday, 25 November 2013 The Board Room - Municipal Building, Widnes

Present	M. Andrews E. Anwar	Community Safety Public Health
	S. Boycott	Cheshire Police
	J. Bucknall	Children's Provision & Organisation
	D. Cargill	Police Crime Panel
	J. Davidson	Cheshire Probation Service
	J. Duff	Faith Representative
	D. Gordon	Community Safety
	S. Henshaw	Cheshire Fire and Rescue Service
	A. Jones	Democratic Services
	D. Parr	Chief Executive
	D. Perchard	Halton Trading Standards
	L. Smith	
	E Sutton-	Policy & Resources, Communities
	Thompson	-
	J. Williams	Commissioning Manager Drugs

SHP9 WELCOME & INTRODUCTIONS

David Parr welcomed everyone to the meeting and introductions were made around the table.

Action

It was noted that Deana Perchard from Trading Standards would be replacing Linda Smallthwaite on the Partnership.

SHP10 MINUTES OF THE LAST MEETING

The Minutes of the last meeting held on 24 September 2013 were taken as read and agreed as a correct record.

SHP3 – It was noted that feedback had been received from Jeremy Duff regarding the SCS outcome targets and this was discussed. The Partnership then agreed that they were all happy with the draft document.

SHP11 DOMESTIC HOMICIDE POLICY

A report was presented to the Partnership that described the process that was being developed to manage

any Domestic Homicide Review (DHR) that was established in Halton. The report briefly described:

- The DHR context;
- Puts forward a policy and procedure for consideration by the Partnership; and
- Discussed the process that was being developed for sharing the role of chairing Domestic Homicide Reviews across localities.

The Partnership was advised that the DHR was a key feature of the *Domestic Violence, Crimes and Victims Act 2004* and was only implemented in 2011 following the publication of the Government's strategic narrative *"Call to end violence against women and girls"* and the subsequent Action Plan. Statutory guidance was issued glowing this, and this guidance was revised and reissued nationally in August 2013.

It was reported that DHR's were statutory reviews set up to consider the areas of learning, and what needed to change as a result of the learning, for individuals and organisations following an incident of domestic violence that had resulted in death. It was noted that the responsibility of setting up a DHR rested with local Community Safety Partnerships, which were regarded as ideally placed to discharge this duty because of their multi-agency design.

It was noted that the draft *Multi Agency Policy, Procedure and Practice – November 2013,* which was presented to the Partnership today for approval, had already been to the Children's and Adults Safeguarding Boards' and to the Halton Domestic Abuse Forum for comment.

The report provided members with an overview of the contents of the Review and discussed the need for the DHR process to have an independent Chairperson. It also discussed the Home Office training plans across the country and its aim to create a 'pool' of Chairpersons in each region, to ensure that there was an adequate supply of people to call upon when needed. It was stressed that it was also important to have legacy planning; to ensure that there would always be an adequate supply of potential DHR Chairpersons in the region.

It was suggested that as there was an existing consortium in place across Warrington, Chester West and Cheshire and the Wirral, that Halton Joined this group. A Memorandum of Understanding was being developed therefore in consultation with the legal services from each authority for agreement with this.

It was commented that the trigger for such a review would be the death of a person aged 16 years and above. The potential cost and time implications were noted and the fact that the frequency of such reviews were totally unpredictable. The Partnership agreed the draft DHR policy and procedures and noted the information provided in the report.

RESOLVED: That the Safer Halton Partnership:

- 1. Notes the contents of the report and the developing arrangements for ensuring an adequate supply of DHR chairpersons; and
- 2. Approves the draft policy and procedures.

SHP12 DRUGS STRATEGY 2014-18

The Partnership was presented with the Safer Halton Partnership (SHP) Drug Strategy 2014-2018 and accompanying evidence document.

It was reported that the National Drug Strategy 2010 changed the focus of drug service delivery from maintenance of an individual's dependent misuse of drugs to enabling and promoting recovery. The substance misuse service was a partnership approach to improving the outcomes for individuals and families affected by drug misuse problems as well as reducing the impact of drug related crime and anti-social behaviour for the communities of Halton. The strategy had been extensively consulted upon with a range of partners' agencies, service users, carer groups and voluntary agencies.

It was noted that budgets for drugs had now been transferred to Public Health England and the Police and Crime Commissioners, providing an opportunity to draft a four year Drug Strategy with an action plan that all key partners could deliver upon.

The Strategy was appended to the report together with an evidence paper that set out the context in which the Strategy had been developed, including national and local context and supporting data and information on the issues of drug misuse within Halton.

It was reported that the strategy had been to other Boards for consultation, namely; the Safer and Health Policy and Performance Boards, the Health and Wellbeing Board and Executive Board. Members noted that the Action Plan was a working document and that the success of the Strategy would be monitored.

RESOLVED: That the contents of the report be noted.

SHP13 TASK GROUP UPDATES

The following task group updates were received:

- a) <u>Alcohol Harm Reduction Group</u> Alcohol Harm Reduction Week had taken place 16 to 20 September 2013. A Late Night Levy report had been compiled and submitted to the Chief Superintendent. Street Pastors in Widnes were discussed and it was agreed that Dave Gordon and Jeremy Duff would liaise and prepare a report on the Street Pastors for the next meeting.
- b) <u>Quarterly Alcohol Update</u> Clarification was provided on the information displayed on pages 155-156. It was noted that the data showed that Halton was below the 2013-14 threshold for (a) alcohol related admissions and (b) admissions which were wholly attributable to alcohol. Performance data had now started to flow from the two providers of the Alcohol Liaison Nurse Service: Whiston and Warrington hospitals. Work was underway to develop the reporting mechanisms and the level of detail provided that related to Halton. Noted that an alcohol 'app' was being promoted and a review of the alcohol strategy for Halton would start soon.

Halton had submitted an expression of interest to be a Local Alcohol Action Area (LAAA) and would find out the success of this in the New Year. A copy of the documentation relating to this would be emailed to Partners following the meeting. Any feedback from Partners was welcomed.

c) <u>Anti-Social Behaviour</u> (ASB) – Quarter 2 showed increased numbers of ASB incidents which followed the trend from Quarter 1. Again this was mainly due to increased incidents with 'mini motos' and neighbour nuisance. Discussion took place around the possibility of an off road area for mini motos to be driven and the problems so far of locating a piece of land for this.

With regards to neighbour nuisance incidents it was commented that these were becoming more complex as they were often alcohol driven or caused by people with mental health issues. Input from the RSL's was needed here as they were often the first point of contact when incidents took place.

Comments regarding the lack of ASB preventative measures in Riverside would be looked into. Additionally it was commented that geographical areas needed looking at to see where most of the ASB was happening and it was noted that some ASB was in fact a 'generational' issue. The troubled families agenda would become involved here. The Partnership agreed that the resources for ASB should be looked at again, although this would be difficult with limited resources and money.

d) <u>Domestic Abuse</u> – The number of incidents in Halton had risen. The report highlighted the Voluntary Domestic Abuse Perpetrator Programme which would be delivered in partnership with Halton CCG and Self Help, a locally commissioned provider. The provider had undertaken bespoke training or order to facilitate them to deliver the course to a national recognised standard. The intention was to launch the programme in January 2014.

A MARAC *Participation Guidance Document* and *'How it Works'* leaflet were attached to the report for information.

- e) <u>Substance Misuse</u> Discussed mainly in Drug Strategy item 4 on the agenda. Main emerging issue was the impact of welfare reforms on service users incomes; if benefits are stopped then this may lead to hardship and increased dependency on family and carers or potential increase in crime. Work was ongoing between Ashley House and Young Addaction to ensure that children were identified and supported due to the impact of their parents drug use.
- f) <u>Partnership Tasking & Coordination</u> The problem profiles of Bechers and Upton Green, Stewards Av and Dundalk Road, and motocycles and mini motos were discussed. Respect weeks were delivered in Runcorn and Widnes in July and August respectively.
- g) <u>Hate Crime & Community Tensions</u> Reported incidents showed a reduction of 15% when compared

to Q1 and reported crimes showed a 33% reduction on Q1. Detected crime had increased in Halton from 13% in Q1 to 33% in Q2? It was reported that staff in reporting centres were undergoing training to increase disability awareness amongst them.

SHP14 POLICE & CRIME COMMISSIONER

It was noted that the PCC, Mr John Dwyer, had recently attended the Safer Policy and Performance Board meeting and several local Area Forums to provide Council Members and residents with an overview of his areas responsibilities and plans for the future.

The Chairman advised the Partnership that it was recently announced that the PCC had awarded £800,000 to the four Cheshire Community Safety Partnerships. A working group would be set up to identify individual priorities for Halton where the money could be spent. It was noted that that a process would need to be developed for the PCC based on needs, to assist with the allocation of the money. As progress developed it would be fed back to the Partnership.

SHP15 POLICE CRIME PANEL

Dave Cargill, Chairman of the Police Crime Panel, advised the Partnership that business was progressing at a steady pace, with the scrutiny protocol yet to be agreed. There was debate presently over the plans of the PCC to recruit special constables as opposed to PCSO's, which were popular with the community.

SHP16 ITEMS FOR INFORMATION

The following were attached for the information of the Partnership:

- Widnes Blue Lamp Report (July September 2013); and
- Runcorn Blue Lamp Report (July September 2013)

Meeting ended at 12.00 p.m.

Agenda Item 5a

REPORT TO:	Safer Policy and Performance Board
DATE:	11 March 2014
REPORTING OFFICER:	Strategic Director, Communities
PORTFOLIO:	Health and Wellbeing
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; and
- (2) Members ask any questions about the Ambulance service as it operates in Halton.

3.0 SUPPORTING INFORMATION

- 3.1 The Health Halton PPB has a overview and scrutiny role for the emergency services as they operate in Halton.
- 3.2 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 health, 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.



Delivering the right care, at the right time, in the right place

North West Ambulance Service NHS Trust

Halton Overview and Scrutiny Committee

March 2014

Our Services

- 999 Paramedic Emergency Service
- Urgent Care
- Patient Transport Service
- Major Incident Management
- Provide 111 services in the North West (NW) from October 2013



Delivering the right care, at the right time, in the right place

Facts & Figures

- 7 million population over 5,400 square miles
- Employs approximately 5,000 staff
- Annual income of £260 million
- Three emergency control rooms
- 1.1 million 999 calls a year (900,000 emergency patient episodes)
- 2 million Patient Transport Service journeys
- Covers the NW footprint 5 Local Area Teams with
 33 Clinical Commissioning Groups, 28 provider trusts

Delivering the right care, at the right time, in the right place

What the presentation will cover

- Key Achievements
- Headline Performance
- Halton Information
- Estates review
- Complaints and Compliments
- Foundation Trust (FT) status

Key Achievements

- One of the top performing ambulance trusts nationally despite activity increases
- Excellent Care Quality Committee inspection
- Pathfinder and urgent care development
- Membership targets for FT achieved
- Established clinical leadership structure
- National innovation award for Patient Experience
- First ambulance service to get Gold Investors in People Award
- National recognition for Channel 4 series "999: What's your emergency?"

Halton Information

- Two stations serve the Halton area Widnes and Runcorn
- Widnes:
 - 16 Paramedics and 12 Emergency Medical Technicians (Grades 1 & 2)
 - 2 emergency ambulances
 - 2 Rapid response vehicles (RRVs)

Delivering the right care, at the right time, in the right place

Halton Information - Continued

- Runcorn:
 - 16 Paramedics and 12 Emergency Medical Technicians (Grades 1&2)
 - 2 emergency ambulances and 2 rapid response vehicles (RRVs)
- Patient Transport Service (PTS) operate from Warrington, Widnes and Runcorn stations
- Total of 26 PTS staff and 13 PTS vehicles

Halton (WA7) Headline Performance

Call increase of 5.1% compared to the same period last year

OVERALL PERFORMANCE	Number of 999 calls	R1 <8m%	R2 <8m%
April-December 2012	12,978	71.5%	77.5%
April-December 2013	13,646	73.2%	77.5%

Delivering the right care, at the right time, in the right place

In the Community

- Two active Community First Responders
- Assisted Cheshire Fire and Rescue with purchase and placement of defibrillator in Widnes, Asda
- 10 October 2013 17 public defibrillators installed in sites throughout Halton
- Advanced Paramedic working with Community Care to put diabetic and falls pathways in place
- Work undertaken with care and nursing homes to prevent unnecessary hospital attendance

Complaints & Compliments

- Complaints, and concerns expressed via the NWAS Patient Advisory Liaison Service (PALS), are now being counted as one
- For the time period of April December 2013, the Trust has received the following:

	2012	2013
Complaints	12	26
Compliments	60	46

Delivering the right care, at the right time, in the right place

Foundation Trust Status

- August 2013, Monitor announced the Trust's application had unfortunately been deferred for a period of 12 months.
- Monitor stated the reason for deferral as being that NWAS "could not demonstrate that its Board had the necessary processes in place to govern how the Trust provides the required quality of care for its patients."
- Monitor did not identify any issues relating to the provision of services, quality of services, performance or finance.
- The deferral period given to allow the Trust to make improvements and strengthen its governance capabilities.

Estates Review

- Launched a review of Trust's estate portfolio
- Looking at the future of all stations/properties and the following options:
 - Refurbishment
 - Closure
 - Relocation
 - Co-location with fire, police or other NHS organisations
 - Savings made to be reinvested in frontline services
 - No current developments in Halton

There's More to Your Ambulance Service

- #team999 launched in September 2013
- Campaign aims to show 999 callers may not always get an ambulance or be taken to hospital
- Profiles members of #team999 to show the varied roles involved in patient care



Any questions?

Delivering the right care, at the right time, in the right place

Agenda Item 5b

REPORT TO:Safer Policy and Performance BoardDATE:11 March 2014REPORTING OFFICER:Strategic Director, CommunitiesPORTFOLIO:Health and WellbeingSUBJECT:Presentation – Proposed Anti-Social Behaviour ReformsWARDS:Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 To receive a presentation on the proposed anti-social behaviour reforms.

2.0 **RECOMMENDATION:** That

- (1) Members receive the presentation; and
- (2) Note the proposed anti-social behaviour reforms

3.0 SUPPORTING INFORMATION

- 3.1 The Safer PPB has a overview and scrutiny role for anti-social behaviour and the safety of the people in Halton.
- 3.2 The presentation will update the Members of the Board on the proposals to reform how anti-social behaviour is addressed.

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

Anti-social behaviour impacts on the health, safety and well-being of people in the Borough.

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

None.

6.3 A Healthy Halton

Fundamental to ensuring the health and safety of people in the Borough.

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.



Anti-social behaviour reforms

February 2013 National Community Safety Network

Michael Andrews Community Safety Manager Safer Halton Partnership

Reducing ASB is a priority

- A Coalition Commitment
- Around three million incidents of ASB reported every year
- 1 in 7 people think there are high levels of ASB in their area
- In 2011 we asked practitioners for their views on the system
- The consultation also asked victims for their views
- In May 2012, we published our White Paper:

"Putting Victims First: More effective responses to anti-social behaviour."

Key points:

•The current set of tools do not provide the flexibility that practitioners require to deal with ASB quickly and effectively

•There needs to be more of a focus on the impact ASB has on victims – especially repeat or vulnerable victims

•Victims are best supported when responses are quick and effective

•Using the MARAC approach to drive a multi-agency approach to managing those high-risk cases

Streamlining the Toolkit

Anti-Social Behaviour Order (ASBO) ASBO on Conviction Drinking Banning Order (DBO) DBO on Conviction Anti-Social Behaviour Injunction (ASBI) Individual Support Order (ISO) Intervention Order

Crime Prevention Injunction (CPI) Criminal Behaviour Order (CBO)

Litter Clearing Notice Street Litter Clearing Notice Graffiti/Defacement Removal Notice Designated Public Place Order Gating Order Dog Control Order ASB Premises Closure Order Crack House Closure Order Noisy Premises Closure Order Section 161 Closure Order

Community Protection Notice (CPN) Community Protection Order (Public Space) Community Protection Order (Closure)

Section 30 Dispersal Order Section 27 Direction to Leave **Directions Powers**

Tackling problem individuals

Anti-Social Behaviour Order (ASBO) ASBO on Conviction Drinking Banning Order (DBO) DBO on Conviction Anti-Social Behaviour Injunction (ASBI) Individual Support Order (ISO) Intervention Order



Criminal Behaviour Order (CBO) Crime Prevention Injunction (CPI)

• The **Crime Prevention Injunction** will be a purely civil injunction available in the County Court for adults and the Youth Court for 10 to 17 year olds.

• We will allow a wide range of applicants to reduce the risk of the burden falling on any particular agency to make applications on behalf of others.

• Breach by someone aged 10 to 17 would result in a curfew, activity or supervision requirement, or as a very last resort, repeated breach causing serious harm could result in custody for up to three months for someone aged 14 to 17 years old.

Tackling problem individuals

Anti-Social Behaviour Order (ASBO) ASBO on Conviction Drinking Banning Order (DBO) DBO on Conviction Anti-Social Behaviour Injunction (ASBI) Individual Support Order (ISO) Intervention Order



Criminal Behaviour Order (CBO) Crime Prevention Injunction (CPI)

• The **Criminal Behaviour Order** will be a civil order, available following a conviction for any criminal offence.

• Breach of the Order will be a criminal offence, with a maximum sentence of five years in custody.

• This will demonstrate to the offender and the community the seriousness of the breach, and, as it is an order on conviction, there is no risk of criminalising someone for the first time for breach of a civil order.

Tackling Environmental ASB

Litter Clearing Notice Street Litter Clearing Notice Graffiti/Defacement Removal Notice Designated Public Place Order Gating Order Dog Control Order Premises Closure Order Crack House Closure Order Noisy Premises Closure Order Section 161 Closure Order



Community Protection Notice (CPN) Community Protection Order (Public Spaces) Community Protection Order (Closure)

• The **Community Protection Notice** will be issued to deal with a particular problem negatively affecting the community.

• It could be used to tackle a range of anti-social behaviour (for example graffiti, littering, dog fouling or using a skateboard somewhere inappropriate).

• The notice would be issued to stop persistent, unreasonable behaviour that is detrimental to the amenity of the locality or is having a negative impact on the local community's quality of life.

Tackling Environmental ASB

Litter Clearing Notice Street Litter Clearing Notice Graffiti/Defacement Removal Notice Designated Public Place Order Gating Order Dog Control Order Premises Closure Order Crack House Closure Order Noisy Premises Closure Order Section 161 Closure Order



Community Protection Notice (CPN) Community Protection Order (Public Spaces) Community Protection Order (Closure)

• The **Community Protection Order (Public Space)** will provide local authorities with a flexible power to put in place local restrictions to address a range of antisocial behaviour issues in public places, and prevent future problems.

• This would be different to the current situation as one order would be able to cover a number of issues, rather than needing to follow separate processes for each - reducing bureaucracy for local authorities.

Tackling Environmental ASB

Litter Clearing Notice Street Litter Clearing Notice Graffiti/Defacement Removal Notice Designated Public Place Order Gating Order Dog Control Order Premises Closure Order Crack House Closure Order Noisy Premises Closure Order Section 161 Closure Order



Community Protection Notice (CPN) Community Protection Order (Public Spaces) Community Protection Order (Closure)

• The **Community Protection Order (Closure)** will provide the police or local authority with new, simpler, closure powers, consolidating four of the powers already available to them.

• This would make it easier to issue a notice to temporarily close any property, for up to 48 hours if there is, or is likely to be, a public nuisance.

• The police or local authority would have to apply to the Magistrates' Court if they wished to extend this beyond the 48 hours.

Police Powers to Disperse

Section 30 Dispersal Order Section 27 Direction to Leave

Directions Powers

• The police **Directions Power** will enable officers to require a person who has committed, or is likely to commit, anti-social behaviour to leave a specified area and not return for a specified period of up to 48 hours.

• No advance designation or consultation would be required. The test would be 'that the constable has reasonable grounds for suspecting that the person's behaviour is contributing or is likely to contribute to anti-social behaviour or crime or disorder in the area and that the direction is necessary'.

• The direction would have to be given in writing. The police could also take photographs of the person without their consent, again to assist with enforcement and monitoring.

- The draft ASB bill will include the mandatory possession clauses that DCLG have been working on.
- There will be four 'triggers' for mandatory possession:
- •Criminal conviction;
- Breach of a Crime Prevention Injunction;
- •Closure of premises; or
- Breach of a Noise Abatement Notice

Police, councils and social landlords are working hard to tackle ASB. But even the best recognise that persistent problems undermine the public's faith in the authorities:

•The Community Trigger will help ensure long-running issues are not 'parked'.

•We are working with a number of areas this year to trial the trigger.

- Manchester
- Brighton and Hove
- West Lindsey
- London Borough of Richmond

•They are all testing different methodologies and thresholds.

- In October last year, the Home Secretary announced the Community Remedy. This will give victims of low-level crime and anti-social behaviour a say in the punishment of offenders out of court.
- This means victims will get justice quickly, and the offender has to face immediate and meaningful consequences for their actions.
- Punishments could include the offender signing an acceptable behaviour contract, paying compensation to the victim, or doing local unpaid word in the community, or for the victim, such as repairing damage or scrubbing graffiti off a wall.
- As well as pre-legislative scrutiny, a separate public consultation on this aspect will run until 7 March this year.

- We will introduce legislation at the first opportunity.
- Current powers remain in force for the time being, and practitioners should still use them where they offer the best available means of protecting victims and communities.
- Questions?

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Agenda Item 6a

DATE: 11 March 2014

REPORTING OFFICER: Strategic Director, Communities

PORTFOLIO: Health and Wellbeing

SUBJECT:Performance Management Reports, Quarter 3,
2013 - 14WARD(S)Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 This Report describes the progress of key performance indicators, milestones and targets relating to Safer Halton in Quarter 3 of 2013-14. This includes a description of factors which are affecting the service.

2.0 **RECOMMENDATION: That the Policy and Performance Board:**

- i) Receive the Quarter 3 Priority Based report
- ii) Consider the progress and performance information and raise any questions or points for clarification
- iii) Highlight any areas of interest or concern for reporting at future meetings of the Board

3.0 SUPPORTING INFORMATION

3.1 The Policy and Performance Board has a key role in monitoring and scrutinising the performance of the Council in delivering outcomes against its key health priorities. In line with the Council's performance framework, therefore, the Board has been provided with a thematic report which identifies the key issues in performance arising in Quarter 3 2013 – 14.

4.0 **POLICY IMPLICATIONS**

4.1 There are no policy implications associated with this Report.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 There are no other implications associated with this Report.

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

6.1 Children & Young People in Halton

There are no implications for Children and Young People arising from this Report.

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

There are no implications for Employment, Learning and Skills arising from this Report.

6.3 A Healthy Halton

There are no specific implications for health arising from this Report.

6.4 **A Safer Halton**

The indicators presented in the thematic report relate specifically to the delivery of the priorities for a Safer Halton.

6.5 Halton's Urban Renewal

There are no implications for Urban Renewal arising from this Report.

7.0 **RISK ANALYSIS**

7.1 Not applicable.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 There are no Equality and Diversity issues relating to this Report.

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

9.1 None under the meaning of the Act.

Safer Policy & Performance Board Priority Based Report

Reporting Period: Quarter 3 – 1st October 2013 – 31st December 2013

1.0 Introduction

This report provides an overview of issues and progress against key service area objectives and milestones and performance targets during the third quarter of 2013/14; for service areas within the remit of the Safer Policy and Performance Board.

The report has been structured by the following key priorities for Safer PPB, as identified in the Directorate and Corporate Plans:

- Community Safety
- Safeguarding and Dignity (including Consumer Protection and Substance Misuse)
- Domestic Violence
- Drugs & Alcohol
- Environment Health
- Risk & Emergency Planning

The way in which the Red, Amber and Green, (RAG), symbols have been used to reflect progress to date is explained in Appendix 2 at the end of this report.

2.0 Key Developments

There have been a number of developments within the Directorate during the third quarter which include:-

COMMISSIONING AND COMPLEX CARE

Domestic Abuse

A procurement exercise is in progress for the provision of Domestic Abuse Accommodation and Community Support Services. The tender is due to close on 11th February 2014 and the new service will commence on 1st July 2014.

The remodelling of the existing refuge accommodation is underway. The first phase has been completed with 3 self-contained units handed over in December 2013, and the second phase commenced in January 2014. The work is expected to be completed by May 2014.

PREVENTION AND ASSESSMENT

Making Safeguarding Personal

In November 2013 Halton were invited to participate in the Making Safeguarding Personal Programme.

This work aims to provide a commitment to improve outcomes for people at risk of harm. The key focus is on developing a real understanding of what people wish to achieve, recording their desired outcomes and then seeing how effectively these have been met.

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Halton have been using two different methods to:

- Establish what outcomes the person want at the outset and then a review of the extent to which they have been realised, and
- Gather feedback from people who use services on their experience of the safeguarding adult process.

A briefing paper outlining the initial findings will be available by the end of February 2014

PUBLIC HEALTH

Alcohol Harm Reduction

The Alcohol Action Plan (developed as part of the Health and Wellbeing Strategy) identifies on-going action with key contacts and training for all front line workers including GPs, Alcohol Liaison Nurses and children's workers etc., to identify and help moderate unhealthy drinking behaviour. Alcohol rates are currently reducing.

A social marketing campaign is currently being developed targeting women who are of childbearing age and pregnant, to ensure they understand the harm that alcohol can cause to their baby.

Alcohol Strategy and Pathway Development

Reducing alcohol harm is a key priority for Halton and it is one of the five priorities identified in the local Health and Wellbeing Strategy. Work will commence in Q4 on the development of a local Alcohol Strategy and Pathway. A multi-agency Workshop has been scheduled for mid-January to bring key stakeholders together to facilitate discussions about what local action needs to take place to tackle alcohol-related harm in the Borough. The workshop will inform the development of a local Alcohol Strategy and Alcohol Pathway.

Dry January

Halton Borough Council is backing Alcohol Concern's 'Dry January' campaign. A launch event was held during the quarter to raise awareness about the national campaign with key stakeholders including partner agencies. The campaign will run throughout the whole of January and will form part of a multi-pronged approach to tackle the high levels of alcohol-related harm in Halton. The Dry January campaign is intended to get local people thinking about when, where and how much they drink, which may trigger a change to their regular drinking habits.

Environmental Health

Trading Standards transfer: A project plan has been drawn up to facilitate the transfer of the trading standards service back to Halton. A principal trading standards officer has been appointed to manage the new service. Negotiations are on-going to agree the remaining staff to transfer.

POLICY, PLANNING & TRANSPORTATION

No key developments to report regarding Risk & Emergency Planning

3.0 Emerging Issues

PREVENTION AND ASSESSMENT

Safe in Town

The Safe in Town Pilot has been viewed as a success and a small working partnership has been pulled together to look at increasing the number of beneficiaries using the scheme and the number and types of premises involved. The scheme will look to include people with low level mental health issues and dementia. Further development of premises will include those particular identified by service users and are likely to include such venues as libraries, leisure facilities and The Hive. Applications for funding have been made to the Police and Crime Commissioner and the Clinical Commissioning Group to support the on-going project and its future development. Decision is due sometime in January 2014. The CCG has also, in principle only at this stage, agreed to support the development of a Safeguarding training programme for businesses, organisations and agencies who sign up to the scheme – to be run over a 2 year period.

PUBLIC HEALTH

- An alcohol Strategy and Suicide Prevention Strategy is being developed.
- A new programme on alcohol that challenges social norms amongst young people is being developed for secondary schools.

Environmental Health

New Kennelling facility for stray dogs: discussions are almost complete and the specification for the contract agreed. The Invitation to tender has been placed on the Chest with the intention of having a contractor in place from 1st April 2014.

POLICY, PLANNING & TRANSPORTATION

No emerging issues to report regarding Risk & Emergency Planning.

4.0 Risk Control Measures

Risk control forms an integral part of the Council's Business Planning and performance monitoring arrangements.

As such progress concerning the implementation of all high risk mitigation measures will be monitored in Quarter 2 and Quarter 4. However no high risks have been identified for this service area.

5.0 Progress against high priority equality actions

Equality issues continue to form a routine element of the Council's business planning and operational decision making processes. Additionally the Council must have evidence to demonstrate compliance with the Public Sector Equality Duty (PSED) which came into force in April 2011.

As a result the Board will receive further information following the completion of the Annual Equality Assessment which will be undertaken during Quarter 3.

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There have been no high priority equality actions identified in the quarter.

6.0 Performance Overview

The following information provides a synopsis of progress for both milestones and performance indicators across the key priorities that have been identified for Safer PPB, as stated in the Directorate and Corporate Plans.

COMMISSIONING AND COMPLEX CARE

Key objectives and milestones

Ref	Milestones	Q3 Progress
CCC1	Conduct a review of Domestic Violence Services to ensure services continue to meet the needs of Halton residents	 Image: A start of the start of

SUPPORTING COMMENTARY

CCC1: Conduct a review of Domestic Violence Services:

During a review of domestic violence services it was highlighted that the current refuge is not fit for purpose. Riverside ECGH have secured funding to remodel the refuge into self-contained units, and the improvement work is underway. The first phase was completed in December 2013 and the remodelling is expected to be completed by April 2014.

Key Performance Indicators

None applicable to Safer Halton priorities

PREVENTION AND ASSESSMENT

Key objectives and milestones

None applicable under Safer Halton priorities

Key Performance Indicators

Ref	Description	Actual 2012/13	Target 2013/14	Quarter 3	Current Progress	Direction of Travel
<u>PA 3</u>	Percentage of VAA Assessments completed within 28 days (Previously PCS15) (Previously PA5 [12/13], PA8 [11/12])	86.73%	82%	89.8%	~	Î

SUPPORTING COMMENTARY

PA3: We have exceeded the target to date.

COMMUNITY AND ENVIRONMENT

Key objectives and milestones None applicable under Safer Halton priorities

Key Performance Indicators

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Ref	Description	Actual 2012/13	Target 2013/14	Quarter 3	Current Progress	Direction of Travel
<u>CE LI</u> <u>14</u>	Residual household waste per household	633 Kgs	700 kgs	473 kgs (estimated)	~	Î
<u>CE LI</u> <u>15</u>	Household waste recycled and composted	37.30%	40%	39.38% (estimated)	✓	Î
<u>CE LI</u> <u>16</u>	Municipal waste land filled	58%	60%	56.36% (estimated)	 ✓ 	Î
<u>CE LI</u> <u>19</u>	Number of Green Flag Awards for Halton	12	12	12	~	⇔
<u>CE LI</u> <u>20</u>	Improved Local Biodiversity – Active Management of Local Sites	58.49%	54%	58.49%	✓	⇔

SUPPORTING COMMENTARY

CE LI 14: Residual household waste per household:

This is an estimated cumulative figure and early indications are that this target will be met.

CE LI 15: Household waste recycled and composted:

This is an estimated figure and early indications are that this target will be met.

CE LI 16: Municipal waste land filled:

This is an estimated figure and early indications are that this target will be met.

CE LI 19: Number of Green Flag Awards for Halton:

Twelve green flag award parks have been retained. A mystery shopper visit in Q3 demonstrated that green flag parks are still within the standards required.

CE LI 20: Improved Local Biodiversity – Active Management of Local Sites:

The figure is likely to remain the same until Q4. The majority of conservation tasks are carried out during the winter period

PUBLIC HEALTH

Key objectives and milestones

Ref	Milestones	Q3 Progress
PH 02	Continue to review and assess air quality within the Air Quality Management Areas to assess effectiveness of the action plan. Identify any other Areas within the Borough where national air quality objectives are likely to be exceeded. March 2014	✓
PH03	Work proactively with GPs, all service providers, Alcohol Liaison Nurses, teachers in schools to reduce the number of people drinking to harmful levels and alcohol related hospital admissions given the rise in pancreatic and liver cancer rates. March 2014	

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Ref	Milestones	Q3 Progress
PH06	Implement the alcohol harm reduction plan working with a range of providers including schools, focusing on preventive interventions and behaviour change to target the following vulnerable groups – pregnant women, women with babies and young people under 16 years. March 2014	

SUPPORTING COMMENTARY

Continue to review and assess air quality

Progress continues to be made in this area. We are continuing to operate a monitoring station within the air quality management to monitor air quality in line with the national air quality objectives. Action plan subject to review.

Reduce the number of people drinking to harmful levels

An Action plan for the Reduction of Harm from Alcohol has been developed as part of the Health and Wellbeing Strategy. The plan identifies on-going action with key contacts and training for all front line workers including GPs, Alcohol Liaison Nurses, and children's workers etc., to identify and moderate unhealthy drinking behaviour. Alcohol rates are currently reducing

Implement the Alcohol Harm Reduction Plan

A social marketing campaign is currently being developed targeting women who are of childbearing age and pregnant, to ensure they understand the harm that alcohol can cause their baby.

Key Performance Indicators

Ref	Description	Actual 2012/13	Target 2013/14	Quarter 3	Current Progress	Direction of Travel
PH LI 01	 a) % of scheduled Local Air Pollution Control audits carried out 	90%	94%	53%	✓	⇒
	 b) % of Local Air Pollution Control Audits being broadly compliant 	95%	79%	93%	~	⇒
PH LI 02	Food Establishments in the Area which are broadly compliant with Food Hygiene Law. (Previously PA 26 [12/13], PA 19. NI 184)	90%	85% (has been amended)	N/A		î
PH LI 13 (SCS HH1)	Alcohol related hospital admissions, AAF > 0, rate per 100,000 population (previously NI 39)	2815.9*	3,142	3184* (Oct 12 to Sep 13)	?	+
PH LI 14	Admissions which are wholly attributable to alcohol	878.0	1039	1038.2	?	+

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(SCS AAF = 1, rate per 100,000	(Oct 12 to
HH1) population	Sep 13)

SUPPORTING COMMENTARY

PH LI 01: Q3 figures indicate that we should be on target for the annual target.

PH LI 02: This is an annual measure reported by the Food Standards Agency each year. Halton's performance has risen steadily since the launch of the Food Hygiene Rating Scheme from 84% in 2008 to 90% to date.

PH LI 13: The 2012/13 local rate is provisional data and will be updated nationally in early 2014. Current quarter data shows an increase in the rate from 2012/13 and the rate has risen to just above the target. There is seasonal variation in alcohol admissions so this increase is in line with expected increases in admission for this quarter. The national trend is also one of a year on year increase.

PH LI 14: The 2012/13 local rate is provisional data and will be updated nationally in early 2014. Current quarter data shows an increase in the rate from 2012/13 although is currently below target. There is seasonal variation in alcohol admissions so this increase is in line with expected increases in admission for this quarter. The national trend is also one of a year on year increase.

POLICY, PLANNING & TRANSPORTATION

Key objectives and milestones

Ref	Milestones	Q3 Progress
РРТ 03	Develop and consult on a local flood risk strategy for Halton. November 2013 and then to progress towards adoption by March 2014.	✓

SUPPORTING COMMENTARY

PPT03: The draft Local Strategy has been reviewed by the Environment Agency and a formal partner / stakeholder consultation is currently in progress. It is anticipated that the public consultation will be undertaken during February 20104 and completed by the end of March 2014.

Key Performance Indicators

None applicable under Safer Halton priorities.

APPENDIX 1 – Financial Statements

COMMISSIONING & COMPLEX CARE DEPARTMENT

Revenue Budget as at 31st December 2013

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend)
	£'000	£'000	£'000	£'000
Expanditura				
Expenditure Employees	7,152	5,148	5,119	29
Premises	233	178	182	(4)
Supplies & Services	2,080	1,667	1,675	(8)
Emergency Duty Team	103	51	50	1
Carers Breaks	471	401	394	7
Transport	170	128	150	(22)
Contracts & SLAs	199	138	83	55
Payments To Providers	3,839	2,696	2,689	7
Other Agency Costs	828 15,075	616 11,023	615 10,957	1 66
Total Expenditure	15,075	11,025	10,337	00
·				
Income				
Sales & Rents Income	-218	-193	-204	11
Fees & Charges	-169	-69	-58	(11)
CCG Contribution To Service	-846	-519	-507	(12)
Reimbursements & Grant Income	-914	-657	-670	13
Transfer From Reserves	-245	0	0	0
Total Income	-2,392	-1,438	-1,439	1
	10 692	0 595	9,518	67
Net Operational Expenditure	12,683	9,585	9,510	07
<u>Recharges</u>				
Premises Support	304	229	229	0
Central Support Services	1,958	1,327	1,327	0
Transport Services	440	223	223	0
Asset Charges	79	0	0	0
Internal Recharge Income	-1,747	0	0	0
Net Total Recharges	1,034	1,779	1,779	0
Net Departmental Total	13,717	11,364	11,297	67

Comments on the above figures:

Net operational expenditure is £67,000 below budget profile at the end of the third quarter of the financial year.

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Employee costs are currently £29,000 below budget profile. This results from savings made on vacant posts, specifically in relation to Day Services and the Supported Housing Network. The majority of these posts were appointed to in September and October, and it is not anticipated that the underspend will increase beyond the current level.

Expenditure on Contracts and Service Level Agreements is projected to be £75,000 below budget at the year-end. This relates to savings in respect of payments to bed & breakfast providers for homelessness support, and savings made on the Bredon Respite Care contract. There has historically been significant variations in demand for the bed and breakfast service, although current expenditure patterns are stable, and the projected underspend seems realistic. It should be noted that £50,000 of the bed and breakfast accommodation budget has been proposed as a saving from the 2014/15 budget year onwards.

Income projections take into account the fact that £50,000 of rental income relating to Grangeway Court will not be recovered whilst the building is in the process of being refurbished. However, income above target from trading services supplied by ALD Services (specifically catering, hairdressing, the tea room and micro-brewery) should result in the overall Departmental income target being met at the year-end.

At this stage, it is anticipated that expenditure will be approximately £60,000 below budget by the end of the financial year.

	2013/14	Allocation	Actual	Allocation
	Capital	To Date	Spend	Remaining
	Allocatio		То	
	n	£'000	Date	£'000
	£'000		£'000	
	7	5	5	2
Choice Based Lettings				
	13	13	13	0
Bredon Respite Unit				
Bungalows At Halton Lodge	400	0	0	400
Grangeway Court Refurbishment	347	0	0	347
Contingency	29	0	0	29
Total Sponding	796	18	18	778
Total Spending	790	10	10	//0

Capital Projects as at 31st December 2013

PREVENTION & ASSESSMENT DEPARTMENT

Revenue Budget as at 31st December 2013

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (underspend)
	£'000	£'000	£'000	£'000
Expenditure				
Employees	6,710	4,934	4,829	105
Other Premises	61	35	<u>ُ</u> 31	4
Supplies & Services	494	301	314	(13)
Aids & Adaptations	113	42	42	0
Transport	5	4	6	(2)
Food Provision	17	13	20	(7)
Other Agency	23	15	13	2
Contribution to Complex Care Pool	18,224	10,748	10,638	110
	25,647	16,092	15,893	199
Total Expenditure				
Income				
Other Fees & Charges	-221	-154	-163	9
Reimbursements & Grant Income	-330	-84	-97	13
Transfer from Reserves	-496	-329	-329	0
Capital Salaries	-52	0	0	0
Government Grant Income	-40	-29	-27	(2)
CCG Contribution to Service	-520	-417	-417	0
Total Income	-1,659	-1,013	-1,033	20
Net Operational Expenditure	23,988	15,079	14,860	219
Bachargaa				
<u>Recharges</u> Premises Support	373	284	284	0
Asset Charges	294	204 0	204 0	0
Central Support Services	2,430	1,750	1,750	0
Internal Recharge Income	-419	0	0	0
Transport Recharges	59	37	41	(4)
Net Total Recharges	2,737	2,071	2,075	(4)
	26,725	17,150	16,935	215
Net Departmental Total				

Comments on the above figures:

In overall terms, the Net Operational Expenditure for the third Quarter of the financial year is £105,000 under budget profile excluding the Complex Care Pool.

Employee costs are currently showing £105,000 under budget profile. This is due to savings being made on vacancies within the Department, in the Care Management and Independent Living Divisions. Some of these vacancies are yet to be filled. If these vacancies remain unfilled, the current underspend will increase beyond this level by the end of the financial year.

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Income has, for the third quarter, over achieved by £20,000 and income targets in the main are expected to overachieve slightly this financial year. Lifeline income is higher than anticipated at budget setting time. However, this is offset by an increase in transport recharges of £4,000 for diesel, vehicle repairs, tyres and casual hire.

The anticipated year end position for the Department is expected to be circa £120,000 under budget. However, this is based on current information and variations are very much dependant on other pressures within the Directorate.

A detailed analysis of the Complex Care Pool is shown below:

COMPLEX CARE POOL

Revenue Budget as at 31st December 2013

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (overspend)
	£'000	£'000	£'000	£'000
Expenditure				
Employees	3,288	2,084	2,051	33
Contracts& SLA's	1,846	1,236	1,204	32
Transport	5	4	3	1
Joint Equipment Store	518	210	210	0
Adult Care: Residential & Nursing Care	18,026	11,447	11,446	1
Domiciliary & Supported Living	10,419	6,752	6,745	7
Direct Payments	3,076	2,338	2,335	3
Block Contracts	171	119	111	8
Day Care	415	308	307	1
Total Expenditure	37,764	24,498	24,412	86
Income				
Residential & Nursing Income Community Care Income	-4,564 -1,541	-3,160 -1,067	-3,170 -1,075	10 8
Direct Payments Income	-187	-130	-135	5
CCG Contribution to Pool	-12,627	-9,498	-9,498	0
Reablement & Section 256 Grant	-1,273	-566	-566	0
Transfer from Reserves	-100	0 57	0	0
Other Contributions to Care Total Income	-114 -20,406	-57 -14,478	<u>-57</u> -14,501	0 23
	20,400	17,770	14,001	20
Net Operational Expenditure	17,358	10,020	9,911	109
Recharges				
Central Support Services	329	329	329	0
Premises Support	122	87	87	0
Internal Recharge	409	307	307	0
Transport Support	6	5	4	1

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	- i ugo c			
Net Total Recharges	866	728	727	1
Net Departmental Total	18,224	10,748	10,638	110
	. 3,22 .		. 5,000	

Pane 59

Comments on the above figures:

In overall terms the Net Operational Expenditure for Quarter 3 is £110,000 under budget profile. Expenditure on employee costs is currently showing £33,000 less than expected at this stage of the year. This is due to savings being made on vacancies within the Department, which are yet to be filled. Contract's & SLA's spend is £32,000 under budget profile mainly due to a reduction in the Sub Acute Unit contract.

The net expenditure for Adult Care for Quarter 3 is currently showing £43,000 under budget profile. The number of clients in receipt of residential & nursing social care has increased by 8.7% and the corresponding 4 weekly spend has increased by 7.2% from April. The number of clients in receipt of domiciliary social care (including supported living) has reduced by 3.6% and the corresponding 4 weekly spend has reduced by 0.3%.

The budgets across health and social care have been realigned to reflect spend.

Due to expenditure by nature, being volatile and fluctuating throughout the year depending on the number and value of new packages being approved and existing packages ceasing trends of expenditure and income will be scrutinised in detail throughout the final quarter of the year to ensure a balanced budget is achieved at year-end and in order to identify pressures that may affect the budget in the medium term.

Capital Projects as at 31st December 2013

	2013/14	Allocation	Actual	Allocation
	Capital	To Date	Spend To	Remaining
	Allocation		Date	_
	£000	£000	£000	£000
Disabled Facilities Grant	584	250	223	361
Energy Promotion	6	0	0	6
Stair lifts (Adaptations Initiative)	250	187	163	87
RSL Adaptations (Joint Funding)	350	150	82	268
Total Spending	1,190	587	468	722

PUBLIC HEALTH DEPARTMENT

Revenue Budget as at 31st December 2013

	Annual Budget	Budget To Date	Actual To Date	Variance To Date (underspend)
	£'000	£'000	£'000	£'000
Expenditure				
Experiancie	1,433	1,057	1,049	8
Supplies & Services	34	25	18	7
Consumer Protection Contract	393	314	332	(18)
Other Agency	20	20	18	2
	6,023	3,857	3,826	31
Contracts & SLA's				
Transfer to Reserves	207	0	0	0
	8,110	5,273	5,243	30
Total Expenditure				
Income				
Other Fees & Charges	-68	-51	-31	(20)
Sales Income	-26	-26	-25	(1)
Reimbursements & Grant Income	-45	-38	-38	Ó
Government Grant	-8,510	-4,255	-4,255	0
Total Income	-8,649	-4,370	-4,349	(21)
Total Income				
Net Operational Expenditure	-539	903	894	9
B. I.				
Recharges	47	35	25	0
Premises Support Central Support Services	47 2,014	35 218	35 218	0 0
Transport Recharges	2,014	16	16	0
Net Total Recharges	2,088	269	269	0
	1,549	1,172	1,163	9
Net Departmental Total				

Comments on the above figures:

In overall terms, the Net Operational Expenditure for the first three quarters of the financial year is $\pm 9,000$ under budget profile.

The Consumer Protection Contract is currently £18,000 over budget profile, due to the increase in the Warrington Borough Council Trading Standards contract for the combined service they provide. The year-end position is expected to be £23,000 over budget profile.

Other fees and charges income is currently showing $\pounds 20,000$ below budget profile, of which $\pounds 17,500$ relates to domestic pest control fees income underachieving. The pest control income target had already been reduced by $\pounds 16,000$ in 2012, as it had been highlighted as unachievable. This will remain a budget pressure throughout 2014/15 unless the budget is reduced further or steps are taken to increase income.

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COMMUNITY & ENVIRONMENT DEPARTMENT Revenue Budget as at 31 December 2013

	25,302	14,796	14,930	(136)
	-,	-,••	-,	(
Net Total Recharges	9,538	4,295	4,311	(16)
HBC Support Costs Income	-375	-375	-374	(1)
Asset Charges	3,052	_,	_,	0
Central Support Services	3,119	2,362	2,362	0
Departmental Support Services	_,	0	0	0
Transport Recharges	2,242	1,384	1,398	(14)
Premises Support	1,491	924	925	(1)
Recharges	,	, , , , , , , , , , , , , , , , , , , ,	· · · · ·	
Net Controllable Expenditure	15,764	10,501	10,621	(120)
Total Income	-11,304	-7,551	-7,377	(174)
Transfers From Reserves	-247	-185	-185	0
Capital Salaries	-103	-77	-39	(38)
Catering Fees	-173	-130	-62	(68)
Meals On Wheels	-188	-132	-135	3
School Meals Other Income	-2,265	-1,883	-1,916	33
Internal Fees Income	-104	-59	-48	(11)
Schools SLA Income	-278	-254	-226	(28)
	-510	-291	-330	39
Reimbursements & Other Grant	F10	001	000	
Government Grant Income	-111	-31	-43	12
Rents Income	-156	-97	-94	(3)
Fees & Charges Income	-2,729	-1,750	-1,676	(74)
School Meals Sales	-2,224	-1,154	-1,192	38
Sales Income	-2,216	-1,508	-1,431	(77)
Income				<u> </u>
Total Spending	27,068	18,052	17,998	54
Capital Financing	33	0	0	0
Rolling Projects	185	42	42	0
Grant To Norton Priory	222	222	224	(2)
Grants To Voluntary Organisations	333	290	287	3
Leisure Management Contract	1,492	1,011	1,042	(31)
Waste Disposal Contracts	4,799	2,697	2,667	30
Other Agency Costs	877	145	153	(8)
Transport	70	52	33	19
School Meals Food	1,660	917	887	30
Food Provisions	773	499	460	39
Other Hired Services	991	528	542	(14)
Promotional	290	206	205	ĺ
Book Fund	225	186	187	(1)
Supplies & Services	1,549	1,083	1,023	60
Other Premises	1,363	969	876) 93
Employees	12,206	9,205	9,370	(165)
Expenditure	got 2000	2010 2000	2000	2000
	Budget £'000	Date £'000	£'000	£'000
	Annual	Budget To	Actual to Date	Date (overspend)
				Variance To

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Comments on the above figures:

Net operational expenditure is £136,000 over budget profile at the end of the third quarter of the financial year.

Employees' expenditure is over budget profile by £165,000, primarily due to savings targets for premium pay of £256,400 for this financial year. Agency staffing is approximately £58,000 less than at the same stage last year, which is helping to keep the overspend on staff costs to a minimum. To date, with the exception of the Stadium, all other divisions with the department are under budget profile contributing to the achievement of the staff turnover saving targets of £461,625.

The main budget pressure is income received and the targets set for the department and budgets are underachieving in several areas particularly Sales, Fees & Charges, Catering Fees and Capital Salaries. Sales and Fees and Charges for the Stadium as a whole are still struggling to meet targets and changes to capital salaries criteria has added further pressure to the underachieving income targets.

Expenditure on other premises and supplies and services is currently \pounds 153,000 under budget profile. This is due to savings on equipment budgets, hired services, lower than expected utility bills within the Community Centres and savings on consumables budgets.

The Leisure management contract is over budget profile and is expected to overspend by approximately \pounds 40,000 by year end.

Waste disposal contract invoices have been fluctuating during the year with amounts being higher than expected earlier in the year but recent invoices are lower, resulting in overall spend being less than anticipated for this stage of the financial year. It is possible that increases will occur in the next few months so revisions to projections will continue to be monitored regularly.

School Meals is still performing well against budget, with sales and food costs both having favourable variances.

The final year end position for the Department is expected to be approximately £180,000 over budget which will be contained within the Directorates budget.

Capital Projects as at 31 December 2013

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Project	Capital Allocation 2013/14 £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Community & Environment Division				
Stadium Minor Works	30	8	8	22
Stadium Disability Works	30	0	0	30
Stadium Gym Equipment	30	0	0	30
Widnes Recreation Site	2,680	110	108	2,572
Childrens Playground Equipment	81	25	24	57
Playground Third Party Funding	340	13	13	327
Arley Drive (Upton)	66	2	2	64
Crow Wood	13	0	0	13
Open Spaces Schemes	72	72	71	1
Runcorn Cemetery Extension	9	1	1	8
Cremators At Widnes Crematorium	396	5	5	391
Runcorn Hill Park	120	52	52	68
Runcorn Busway Works for Gas Powered				
Buses	30	30	30	0
Litter Bins	50	30	29	21
	3,947	348	343	3,604

POLICY, PLANNING & TRANSPORTATION DEPARTMENT

Revenue Budget as at 31st December 2013

		.	A · · ·	
	Annual	Budget	Actual	Variance
	Budget	To Date	To Date	To Date
	C'000	C'000	C'000	(overspend)
	£'000	£'000	£'000	£'000
Expanditura				
Expenditure	4,958	3,822	3,875	(52)
Employees Other Premises	4,958	3,022 80	3,675	(53) 7
Hired & Contracted Services	438	208	208	0
Supplies & Services	309	208 250	208	2
Street Lighting	1,791	1,070	1,070	0
Highways Maintenance	2,223	1,337	1,070	0
Bridges	2,223	48	38	10
Fleet Transport	1,235	40 945	945	0
Lease Car Contracts	622	622	622	0
Bus Support – Halton Hopper	231	182	182	0
Tickets	201	102	102	0
Bus Support	531	356	341	15
Out of Borough Transport	51	34	33	1
Capital Financing	406	307	307	0
Grants to Voluntary	68	68	68	0
Organisations	00	00	00	U
NRA Levy	62	62	59	3
Mersey Gateway	4,966	3,262	3,262	0
moreey datemay	18,223	12,653	12,668	(15)
Total Expenditure	.0,220	,000	,000	(10)
P				
Income				
Sales	-310	-248	-271	23
Planning Fees	-506	-354	-373	19
Building Control Fees	-81	-71	-80	9
Other Fees & Charges	-519	-351	-387	36
Rents	-8	-4	-2	(2)
Reimbursements & Other	-171	-128	-138	ìÓ
Grants				
School SLAs	-39	-39	-44	5
Recharge to Capital	-2,736	-995	-995	0
	-2,567	-2,267	-2,267	0
Transfer from Reserves				
Total Income	-6,937	-4,457	-4,557	100
	11,286	8,196	8,111	85
Net Controllable Expenditure		,		
<u>Recharges</u>				
Premises Support	770	333	332	1
Transport Recharges	568	430	430	0
Asset Charges	7,432	-30	-50	(1)
Central Support Recharges	3,200	2,400	2,401	(1)
Departmental Support	,		·	
Recharges	446	0	0	0
	I I	I		ı I

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		aye 05		
Support Recharges Income – Transport	-4,699	-2,823	-2,823	0
Support Recharges Income – Non Transport	-2,925	-806	-805	(1)
Net Total Recharges	4,792	-466	-464	(2)
Net Departmental Total	16,078	7,730	7,647	83

Comments on the above figures:

In overall terms revenue spending at the end of quarter 3 is below budget profile. This is due to a number of expenditure and income budget areas.

Daga 65

Expenditure on staffing is above the budget to date, this is linked to the staff savings turnover target not being met for the year to date.

Planning fees are currently above the income target to date due a number of individual developments across the borough. These consist of one off large fee applications which cannot be guaranteed in the future. At this stage income on planning fees for the year is forecast to be in line with the annual budget

Schools SLA income is above target in Risk Management due to higher than anticipated demand for the service for the year.

The increase in other fees and charges is mainly due to extra income being generated in the MOT bay; however as this is customer lead it cannot be guaranteed.

The increase in sales is mainly due to increased fuel sales and highway searches.

At this stage of the year it is anticipated that overall spend will be within the Departmental budget at the financial year-end.

POLICY, PLANNING & TRANSPORTATION

Capital Projects as at 31st December 2013

	2013/14 Capital Allocation £'000	Allocation To Date £'000	Actual Spend To Date £'000	Allocation Remaining £'000
Local Transport Plan				
Bridges & Highway Maintenance				
Bridge Assessment, Strengthening & Maintenance	3,060	1,700	1,635	1,425
Road Maintenance	1,715 4,775	1,100 2,800	1,025 2,660	690 2,115
Total Bridge & Highway Maintenance				
Integrated Transport	725	210	205	520
Total Local Transport Plan	5,500	3,010	2,865	2,635
Halton Borough Council Early Land Acquisition Mersey Gateway Development Costs Mersey Gateway Street lighting – Structural Maintenance Risk Management	15,378 3,500 105 118	9,016 995 22 26 400	9,016 995 22 26	6,362 2,505 83 92
Fleet Replacement	950	400	366	584
Total Halton Borough Council	20,051	10,459	10,425	9,626
Grant Funded				
Surface Water Management Grant	214	0	0	214
Mid Mersey Local Sustainable Transport	150	9	9	141
Total Grant Funded	364	9	9	355
Local Pinch Point Fund A558 Access Improvements	1,805	36	36	1,769

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Total Local Pinch Point Fund	1,805	36	36	1,769
Total Capital Programme	27,720	13,514	13,335	14,385

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APPENDIX 2 – Explanation of Symbols

Symbols are used in the following manner: Progress **Objective Performance Indicator** Indicates that the objective Indicates that the annual target is Green on course to be achieved. on course to be is achieved within the appropriate timeframe. Amber Indicates that Indicates that it is uncertain or too it ? is early to say at this stage whether uncertain or too early to the annual target is on course to say at this stage, whether the milestone/objective will be achieved. be achieved within the appropriate timeframe. Red Indicates that it is highly Indicates that the target will not x be achieved unless there is an likely or certain that the objective intervention or remedial action will not be achieved within the taken. appropriate timeframe. **Direction of Travel Indicator** Where possible performance measures will also identify a direction of travel using the following convention Indicates that performance is better as compared to the same Green period last year. Amber Indicates that performance is the same as compared to the same period last year. Red Indicates that **performance is worse** as compared to the same period last year. N/A Indicates that the measure cannot be compared to the same period last year.

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REPORT TO:	Safer Policy & Performance Board
DATE:	11 March 2014
REPORTING OFFICER:	Strategic Director, Communities
PORTFOLIO:	Physical Environment
SUBJECT:	Halton Homelessness Strategy 2013 - 2018
WARD(S):	Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 The purpose of the report is to present Halton's Homelessness Strategy 2013-2018 to members of the Safer Policy & Performance Board.

2.0 **RECOMMENDATION: That Members of the Board note and comment on the Strategy.**

3.0 SUPPORTING INFORMATION

- 3.1 In accordance with Homelessness Act 2002 the local authority has conducted a full Strategic Review of Homelessness within the area and formulated a Homelessness Strategy for the next five year period.
- 3.1.1 The Homelessness Strategy 2013-2018 is based upon the findings and recommendations of two other documents, one being a comprehensive review of the current homelessness services which was conducted over a nine month period during 2012 -2013. The other being the previous Homelessness Strategy 2009-2013, which involved active engagement with service users, providers and members.
- 3.1.2 The Strategic Review of Homelessness involved active engagement with service users, service providers and all partner agencies and Elected Members. The draft findings were discussed and agreed with all key stakeholders prior to the report being finalised.
- 3.1.3 The Review provided clear direction for preventing and addressing homelessness in Halton and reflects the factors known to affect future homelessness. It also forms the basis of this new Homelessness Strategy for Halton over the next five years.
- 3.1.4 During 2012/13 a Homelessness Scrutiny Review was conducted by Members to review supported accommodation services within the

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district. A number of recommendations were made and were incorporated within the Strategic Review of Homelessness in 2012 and form part of the Homelessness Strategy 2013-2018

3.2 <u>Issues</u>

- 3.2.1 Halton is experiencing a gradual increase in homelessness presentations and statutory homelessness acceptances. The main causes of homelessness are due to family exclusions, relationship breakdown and the loss of private rented accommodation.
- 3.2.2 There are a number of client groups that do not meet the statutory homelessness criteria, but have a pressing housing need. Concerted efforts are being made by the Housing Solutions Team to assist these client groups, offering temporary accommodation for a limited period and facilitating a more efficient and accessible move on process.
- 3.2.3 The Scrutiny Review highlighted the high vacancy levels across all the supported hostel accommodation schemes. Due consideration was given towards reducing capacity and a number of recommendations were proposed to address the changing homelessness culture and reliance upon supported housing provision.
- 3.2.4 The Housing Solutions Team is more accessible and community focused, with emphasis placed upon Prevention. The team strive to reduce the levels of homelessness within the district and fully utilise the prevention options and services available to vulnerable clients.
- 3.3 Legislation
- 3.3.1 The Localism Act 2011 introduced many changes to homelessness and allocations legislation. In November 2012, the Localism Act 2011 brought into force provisions that allow local authorities to end the main housing duty to a homeless applicant by means of a private rented sector offer, i.e. a fixed term assured shorthold tenancy for a minimum of 12 months. The authority should consider the new allocated powers, which will impact upon future homelessness and service delivery.
- 3.3.2 Furthermore, it was determined that the council would be able to reduce the length of stay for households in temporary accommodation and the associated costs. Additionally, it will help the council to avoid future use of B&B accommodation
- 3.3.3 Welfare reforms affecting single people and couples aged 18-35 have put significant pressures on local housing providers, as suitable accommodation is in short supply. It is therefore anticipated that welfare reform and recent legislative changes will result in a

further increase in levels of homelessness across the district.

- 3.3.4 The Homelessness Strategy identifies the gaps in provision and the need to improve communication between partner agencies. An integrated approach will enable the authority to address both the social and health care issues, reduce homelessness and encourage lifestyle change.
- 3.3.5 Halton is fully committed and focused upon health care and service provision for homeless people. The integration of CCG, Public Health and Homelessness will enable the authority to develop a new holistic approach. The aim would be to improve health care for vulnerable people, offering a more flexible and accessible service to achieve positive and sustainable outcomes for service users.

4.0 **POLICY IMPLICATIONS**

4.1 The Localism Act 2011 will have future policy implications and will impact upon future housing provision and allocation of accommodation within the private rented sector.

The Homelessness Strategic Action Plan identifies a task to develop a Private Rented Sector Offer policy to ensure the Authority is fully compliant with its statutory housing duty, in accordance with Part 7, Housing Act 1996. It is recommended that future consideration be given to develop a PRSO policy and implement the option to adopt the power to end the homelessness duty within the private rented sector.

- 4.2 The following sections within the primary legislation represent the recent history of the new powers arising from the Localism Act 2011. The policy will fully comply with the following legal requirements:
 - Housing Act 1996
 - Homelessness Act 2002
 - Localism Act 2011
 - Equality Act 2010
 - Suitability of Accommodation Order 2012
 - Homelessness Code of Guidance 2006
 - Localism Act 2011

The policy will reflect the priorities and rules shown within the authority's local documents and would be implemented and administered by the Housing Solutions Team.

4.3 Upon considering the policy option, weight was given to the fact that the local Homelessness Strategy already promotes the use of private rented accommodation to prevent homelessness.

The Housing Solutions Team have successfully helped numerous

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households who may be threatened with homelessness to obtain accommodation from a private landlord, fully utilising various incentives, such as rent deposit, Bond Guarantee and Discretionary Housing Payments.

5.0 **FINANCIAL IMPLICATIONS**

5.1 The financial implications of delivering the Homelessness Strategy are outlined in the Action Plan.

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

6.1 **Children & Young People in Halton**

Homelessness can have an adverse impact on the wellbeing of children and young people with educational attainment being affected by adverse residential mobility. The prevention focus of the Strategy will ensure that families with children are assisted swiftly to ensure minimal disruption. In addition, the Strategy recognises that homelessness amongst young people in Halton is challenging and therefore includes priorities to strengthen joint working to ensure this group is provided with the most appropriate support by the relevant agencies.

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

The lack of a settled home can adversely impact an individual's ability to find and sustain employment – the Strategy's focus on homelessness prevention allows people to remain in their homes wherever possible.

6.3 **A Healthy Halton**

The Homelessness Strategy places emphasis on the links between health and homelessness and one of the strategy objectives is specifically focussed on this issue. Therefore, implementation of actions contained within the strategy will have positive implications for the health and wellbeing of those experiencing homelessness.

6.4 **A Safer Halton**

Criminal activity can be both a cause and consequence of homelessness and homeless prisoners are more likely to re-offend following release than those who have settled accommodation. Therefore, the Strategy includes a priority to improve joint working with the police and probation service to address the growing housing need for offenders.

6.5 Halton's Urban Renewal

The presence of rough sleeping can have a negative impact on the environment and the Strategy seeks to continue to ensure that this does not pose an issue for Halton through the 'No Second Night Out' initiative.

7.0 **RISK ANALYSIS**

7.1 The Communities and Local Government Homelessness Grant funding makes an important contribution to the delivery of a range of homelessness services in Halton. This fund is currently frozen and arrangements for distribution of the grant for the financial years 2014/15 are unclear. If the homelessness grant funding were to be reduced or ceased completely, it would adversely affect the ability of the Housing Solutions Team to offer a range of housing options and would impact upon performance and service delivery.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 The Strategy includes priorities targeted at providing support for those who are vulnerable or have complex needs and other marginalised groups such as young people and offenders.

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

None under the meaning of the Act.



Halton Homelessness Strategy

2013-2018



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1. Foreword



Halton Borough Council is pleased to present its Homelessness Strategy 2013 - 2018 which sets out the key challenges, objectives and priorities for tackling homelessness in Halton over the coming years.

The Strategy highlights and reinforces our commitment to reducing and preventing homelessness. It identifies and examines the current homelessness issues faced by Halton and sets out how we plan to address the housing needs and aspirations of those who are homeless or threatened with homelessness.

Although there have been many achievements in delivering effective homelessness services in Halton, the council recognises that some significant challenges lie ahead. The Localism Act has introduced the greatest changes to homelessness and allocation legislation since 1977 and we believe that many households, both new and existing ones, will be adversely affected by not only the housing and welfare reforms, but other new legislation. To respond to this and its impact on homelessness, joint working between the council and its key partners will be central in ensuring local housing need is met.

Demand for private rented accommodation greatly outstrips supply and rents are rising. Levels of homelessness fell during 2006–2011, but there are worrying signs now as the effects of the recession and overall economic environment begin to become apparent, that it is once again on the rise. In addition, vulnerable households will have specific needs. Among these is specialist housing with appropriate support. This can enable the person to remain at home for longer.

The Homelessness Strategy is based upon the findings and recommendations of two other documents – a comprehensive review of current homelessness services over a nine month period during 2012-2013 and the Homelessness Strategy 2008–2012 which involved active engagement with service users, service providers and members. This Strategy continues to build on current good practice and strives to meet the gaps in existing service provision to ensure the needs of those individuals who are at risk of homelessness are met.

Halton is fully committed and focused on the health care and service provision for homeless people. The integration of the Clinical Commissioning Group, Public Health and Homelessness will enable the council to develop a new holistic approach. The aim would be to improve health care for extremely vulnerable people whenever they need help, within primary and community care and hospitals.

Halton aims to put the person/patient back at the heart of healthcare with the focus on what the individual wants and needs. With cross professional and organisation boundaries to shape care around the person and ensure services are more flexible and accessible. Experienced health and homeless professionals will be included at every level of the future shaping of services.

The Strategy is supported by a five year Action Plan which clearly sets out the short, medium and long term solutions along with specific actions to deliver long lasting change to those at risk.

To ensure the Strategy remains relevant it will be monitored by the Halton Homelessness Forum and reviewed annually in order that it can be responsive to emerging change.

Yours sincerely,

Councillor Ron Hignett

Board

Executive

Member

_

Physical

Environment

2. Introduction

The Homelessness Act 2002 places a duty on local authorities to carry out a Strategic Review of Homelessness in their area and then formulate and publish a Homelessness Strategy based on the findings from the review.

Strategic Review of Homelessness

The review was conducted over a period of nine months and involved active engagement with service users, service providers and all partner agencies and members. Draft findings were discussed and agreed with key stakeholders before the report was finalised.

The review provides clear direction for preventing and addressing homelessness in Halton and reflects on the factors known to affect future homelessness. Its findings and recommendations are the basis for the development of this new Homelessness Strategy for Halton over the next five years.

This strategy will build upon the success of its precursor (2009–2013) which focused upon four important issues:

- 1. Understanding the Problem
- 2. Prevention
- 3. Increasing Access to Housing Choice
- 4. Providing Support

Understanding the problem (homelessness and housing need)

Significant progress has been made in determining the levels of homelessness, the reasons why people become homeless and which household group it affects most. This progress has been achieved through a range of measures including: analysis of the move from short term supported accommodation and research into households requiring resettlement services.

Prevention

The introduction of a preventative approach among statutory homeless households has proved successful. This change from reactive assessment to proactive prevention, coupled with a housing options service, proved to be a significant factor in improvement.

Increasing access to housing choice

Progress has been made in allowing customers choice and enabling them to access properties owned by accredited private sector landlords. This progress is likely to continue now that 'Property Pool Plus' has been introduced.

Providing support

Floating support services have been re-tendered. This has resulted in more streamlined and better support for households which are vulnerable to homelessness. With all of this successful work already undertaken and acting on the findings of the review, this new strategy will continue to strive to respond to evolving pressure on existing service provision. This will ensure that Halton is best placed to meet the needs of individuals at risk of being or who already are currently homeless.

Homelessness is increasing across the country and it is anticipated that this trend will continue. This will place additional pressure on services. To address this national problem, the Government has published 'Making Every Contact Count.' This recognises that early intervention to prevent homelessness is the key. It does this through 'social justice' by supporting the most disadvantaged individuals and families. It tackles many of the underlying problems that, if left unchecked, can increase the likelihood of the individual or family becoming homeless.

The ultimate goal, nationally and locally for Halton, is to ensure that people have settled homes. This stability will then enable individuals to build settled lives.

3. Homelessness in Halton

Halton is experiencing a gradual increase in homelessness presentations and of those being accepted as statutory homeless. The main causes are loss of home due to family exclusions, relationship breakdown or the loss of a private sector tenancy.

There are many groups of people who are not deemed statutory homeless, but still have pressing housing needs and no settled home. The Housing Solutions team work extensively with these groups and offer temporary accommodation for a limited period, to allow the crisis to be averted and suitable options explored and implemented.

People on low incomes without regular work, lack of proven track record, previous failed tenancies, mental health or substance misuse are unlikely to meet letting agents/landlords vetting procedures and so cannot obtain a private tenancy.

Poor discharge planning for ex-offenders and those with mental health needs have been cited as additional factors contributing to homelessness. Those with complex needs, addiction, negative behaviour, and poor parenting and life skills face particular problems in attaining settled homes and can often fall through the net of services and accommodation provided.

Welfare benefit reforms, especially limiting Housing Benefit for younger people and the effect of the 'Benefit Cap' on larger families, will increase the risk of homelessness for these groups in the future.

Rough Sleeping in Halton is not identified as a major problem; however, the majority of people identified as sleeping on the streets of Halton are aged between 26 and 50. The council developed a sub-regional prevention service to tackle rough sleepers and the outreach service will ensure that all clients have access to services and if necessary are relocated back to their local connection area.

Homelessness issues

Key issues influencing the Strategy are examined in detail within the Homelessness Review Consultation Report (2013). They are summarised in the following table under three themes (People, Health and Wellbeing and Communities). Each underpins the overarching aims and the six strategic objectives and accompanying priorities.

People	Health & Wellbeing	Communities
National evidence of impact on health and wellbeing due to homelessness National evidence indicates additional costs due to children entering the care system Impact on young people and families experiencing/ threatened with homelessness Lack of settled accommodation and support can prove detrimental and lead to repeat homelessness Domestic violence within Halton is evident and analysis confirms 11% of acceptances compared to 3% in England	 National evidence of poor health or neglect of physical needs related to homelessness Mental Health and substance misuse problems are contributable factors towards homelessness Impact on health and social care services due to homelessness and rough sleeping National evidence that homeless people have significantly higher levels of premature mortality, mental and physical health needs than the settled population 	Impact of anti-social and offending behaviour due to increased homelessness National evidence indicates dependency on drugs and alcohol amongst rough sleepers Criminal activity can be both the cause of and a consequence of homelessness High incidence and turnover of temporary accommodation within an area can lead to neighbourhood decline

Homelessness characteristics

- Families or friends unwilling to accommodate.
- o Domestic violence
- o Relationship breakdown
- Health addictions, drug/alcohol misuse
- o Offending, anti-social behaviour
- o Issues with private rented property (disrepair, loss of assured shorthold tenancies)
- Debt, money problems, rent arrears, often due to benefit issues

Prevention and relief

- Housing Solutions community focused service
- o Partnership working with registered providers and private landlords
- Joint working between various agencies.
- o Benefit and legal advice
- o Floating support
- Supported temporary accommodation
- o Effective and accelerated Move On approach to secure accommodation

4. Achievements from Previous Strategy

There have been many successes in the last five years in spite of the high housing demand in Halton. Nationally, the number of individual cases accepted as homeless increased by 16% and there has been a 44% increase in the use of bed and breakfast accommodation in the year ending March 2012. However, in Halton over the same period, there were no households in bed and breakfast accommodation and the borough has managed to maintain an annual decrease in its use of temporary accommodation.

This is an outstanding achievement given the intense housing pressures in Halton. It has been achieved through the high priority placed on homelessness prevention in the borough and the continuing work in delivering practical homelessness solutions. As a consequence, a strong network of partnerships and services has been developed to support those who are either threatened with or experiencing homelessness.

Since the previous strategy there have been significant changes in legislation such as the Welfare Reform and Localism Act 2011. This combined with the considerable cuts to local authority budgets have led to significant challenges for the borough. Yet despite this, there have been a number of major achievements, as described in the following sections.

Achievements	2008/ 09	2009/ 10	2010/ 11	2011/ 12	2012/ 13
Statutory homelessness presentations	241	216	78	154	168
Statutory homelessness acceptances	166	158	37	64	86
Use of temporary Accommodation.	54	41	35	23	39
Use of Bed & Breakfast	7	1	0	0	1
Homelessness Prevention	Not recorded	625	550	492	431
Advice and assistance	803	1800	2228	2488	2051

Statutory homelessness

The following key points can be observed from the data displayed in the table above:

• Over the past five years, there has been a reduction in the number of households presenting as statutory homeless.

- Significant reductions in the use of temporary accommodation which meet and go beyond the March 2010 target set by CLG.
- A decrease in the use of bed and breakfast accommodation. This has improved the quality of life for homeless households and reduced the cost to the public purse.
- An increase in homelessness prevention (advice and assistance) and developed initiatives. The priority is on preventing homelessness occurring by helping people resolve their housing problems. In addition people are helped to tackling barriers which would prevent them from either obtaining or retaining sustainable accommodation.

Youth homelessness

- The Southwark Protocol was developed and implemented in 2010/11 and is currently being reviewed. The aim is to provide a co-ordinated response to the prevention of homelessness amongst 16-17 year-olds. It ensures they receive the right level of support and are able to access appropriate and suitable accommodation where necessary. The protocol was a response to judgements by the House of Lords which reaffirmed and clarified that the duty under Section 20 of the Children Act 1989 takes precedence over the duties within Part 7 of the Housing Act 1996 in providing for children in need who require accommodation.
- Made use of extra funding to create a dedicated Youth Officer post. This role involves joint working with Children's Services in connection with the Southwark Protocol. It will focus on homeless prevention and mediation among 16-17 year-olds.
- 85% of young people presenting as homeless were facilitated successfully back home.

The age-groups 16-24 and 25-44 contain the highest numbers of statutory homeless individuals. This national pattern is also reflected in data for Halton. The table below shows the percentage statutory homeless (national and local) for the year 2011-2012 by age-groups:

Age group	% accepted as statutory homeless		
Age group	Halton	England	
16-24 years	<mark>34%</mark>	<mark>35%</mark>	
25-44 years	<mark>52%</mark>	<mark>51%</mark>	
45-59 years	13%	11%	
60-64 years	2%	1%	
65-74 years	0%	1%	
75+ years	0%	1%	

- A 'Home Essentials Fund' was launched to help young people between the ages of 18 35 to move on from hostel accommodation and sustain their tenancy by providing help towards the cost of setting up a home. The scheme provides assistance to purchase household items such as microwaves, bedding, crockery and cookery items up to the value of £300, .which is not repayable.
- 55 Gift applications were received in 2011/12
- o 38 applications were approved and received assistance under the scheme
- \circ 75% of clients have successfully sustained their tenancies since 1st April 2012

Case study: youth homelessness



Melissa is a 17 year old female who approached the Housing Solutions Service to present as homeless.

Melissa claimed that due to constant arguments with her mum, she was ordered to leave the family home and not able to return.

Melissa was referred to the Housing Solutions

Youth Adviser and a full homeless assessment was completed, although, Melissa stressed that she wished to be accommodated within the hostel where her friends had been placed.

The Youth Officer conducted a home visit to discuss the situation with Melissa's mum and negotiate for Melissa to return home, but mum refused.

Melissa was referred to the Nightstop service and reluctantly took up the temporary accommodation.

Mediation was put in place and after a number of home visits and telephone discussions; both Mum and Melissa agreed to work with the officers to resolve their issues.

Unfortunately, Melissa failed to engage with training/education programmes, which jeopardised her placement.

The officer dedicated, considerable time to work with Melissa and mum to address their issues, and encouraged them to discuss how they could work together to resolve them.

OUTCOME: After regular contact with Melissa and her mum, an intense support package was agreed and implemented. Melissa was allowed to return home and is actively engaging in training and there has been improvement in her relationship with her mum.

Mortgage rescue

- Development of a Repossessions Action Plan. This was in response to Halton being identified as a national 'hotspot' for mortgage repossessions. To achieve this, the council introduced a 'task and finish' working group. This brought together the work of various agencies in the borough to prevent repossessions.
- In addition, the Housing Solutions Team established a dedicated Mortgage Rescue Advisor. This post provides tailored advice to those at risk of repossession and can negotiate with lenders and at court hearings.

Case study: mortgage rescue



Mrs L approached the Housing Solutions Team as she had suffered a relationship breakdown and could not afford her mortgage on her income alone.

Mrs L stressed that her son had recently been offered a placement on a speech and learning therapy course that was located within the vicinity and to move from her present home would affect his health and be detrimental to his progress.

The Housing Solutions Adviser completed a Mortgage Rescue application which was submitted to Riverside for review in September 2013.

In October 2013, Mrs L received confirmation that her application had been successful and she would be allowed to remain within the family home.

OUTCOME: The acting agent completed the buyback process, allowing Mrs L to remain in her property as the tenant at an affordable rent and close to all the support networks for her son's needs.

Service improvement

- Progress made with the development and implementation of the Housing and Support Gateway. This will provide a single point of access into support services for individuals with housing support needs.
- Improved information for local people through the development of a pack of leaflets on such topics as homelessness, housing options, the 'Bond Guarantee Scheme' and a guide for private tenants.
- Developed and promoted a customer satisfaction survey. This gathers feedback on the quality of the service and identifies areas for improvement.
- Towards the end of 2009, a mystery shopping exercise was carried out. This led to improvements being made to the way customers were dealt with via the contact centre and one-stop-shops.
- Designated Housing Solutions Officers located at local one-stop-shops to provide immediate advice for those facing homelessness. This saves time by reducing the need for an appointment among homeless or those threatened with homelessness. This initiative stemmed from an internal review of the Housing Solutions Team was taken late in 2011.

Sub-regional approach

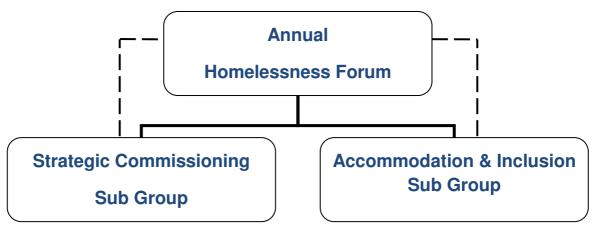
• Partnership working with Merseyside authorities led to the development of the 'No second night out' initiative. In its strategy – 'Vision to end rough sleeping: no second night out', the

government called on local authorities to implement this initiative (previously successfully piloted in London). This provides a quick and effective response from relevant services to help individuals off the streets.

In Merseyside, local authorities have collaborated to deliver the vision that by the end of 2012 no-one will live on the streets of the Liverpool City Region and no individual arriving on the streets for the first time will sleep out for more than one night. The scheme involves widespread promotion of the one telephone number to call to report someone sleeping rough in the sub-region.

Homelessness Forum structure

 A re-structured homelessness forum from one large meeting into an annual meeting plus two sub groups to focus on Strategic Commissioning and Accommodation & Service Inclusion.



Homelessness Scrutiny Group

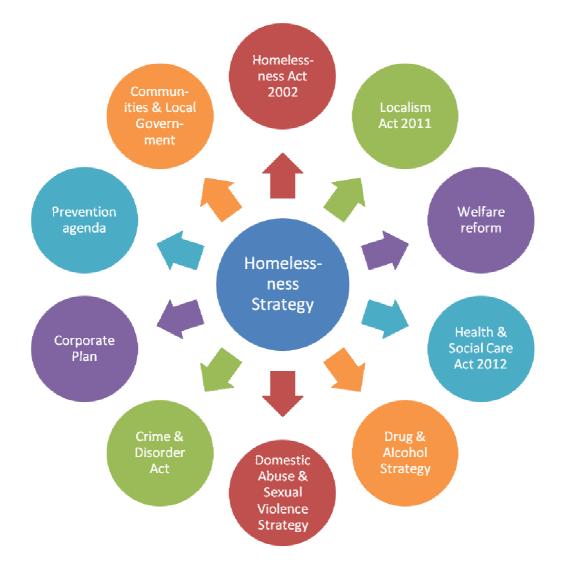
A set of recommendations arising from a scrutiny review led by Elected Members (2011-12). This resulted in efficiencies being achieved through a new contract with Halton YMCA for the YMCA hostel and 'Nightstop', the de-commissioning of the 'Y's Up' advice and guidance service, a new contract with Plus Dane for floating support services. Efficiencies have also been achieved through the reconfiguration of hostel provision for single homeless people. Access to services has been prioritised to those who are owed a statutory duty. There is also an increased focus on prevention to help people to resolve their housing issues.

However, despite these achievements, Halton is not complacent and acknowledges that the challenges ahead will be considerable. Halton will continue to review and adapt its service provision to prevent future homelessness in the most effective way.

We are witnessing fundamental changes in the housing market and in social and welfare reform. The successes of the past five years will be even more difficult to replicate in the years ahead.

5. Context

Halton's Homelessness Strategy has been developed in the context of a wide range of national, regional and local policies, strategies and plans. These are summarised in the diagram below. Further details of how this influences the Strategy can be found in the evidence paper Strategic Review of Homelessness in Halton 2012/13.



Homelessness services are essential in meeting Halton's priorities set out in the 'Sustainable Community Strategy', as demonstrated below:

A Healthy Halton	 Homeless people have significantly higher levels of premature mortality, mental and physical ill health than among the settled population and are more likely to have a drug or alcohol addiction. Net cost estimated to be £64m per year over and above health costs for same number of general population.
Employment, Learning and Skills in Halton	 The lack of a settled home can be a significant barrier for those seeking permanent employment and training opportunities. Additional costs of providing support to homeless people to enable them to find a job and live independently.
A Safer Halton	 Criminal activity can be both a cause of and a consequence of homelessness. Research shows that homeless prisoners are more likely to re-offend within the first year of release than those who had settled accommodation before custody.
Children and Young People in Halton	 Research shows that frequent adverse residential mobility (e.g. due to homlessness) can have a detrimental effect on educational attainment. Additional costs resulting from children entering the care system due to the lack of a settled home.
Environment and Regeneration in Halton	 Environmental impact of rough sleeping and its potential impact on economic investment in an area. High incidence and turnover of temporary accommodation in an area can lead to neighbourhood decline.

Making Every Contact Count: a joint approach towards homelessness prevention

In August 2012, the Department for Communities and Local Government (CLG) published this report produced by the Ministerial Working Group on Homelessness. It states clearly that 'there is no place for homelessness in the 21st century'.

The report sets out the Government's approach to homelessness prevention by focusing on the contribution that a commitment around troubled families, health, crime prevention and employment

and skills can make. The report calls for central Government, local authorities, government agencies and the voluntary sector to work together to support those at risk of homelessness.

It also gives an indication of the Government's direction and expectations for homelessness prevention. This emphasises a number of important factors, including; greater integration of local authority services (Housing, Social Services, Welfare Rights etc.); increased focus on a payment by results approach to funding; increased reliance on the private rented sector; and a focus on wrap-around services to tackle youth homelessness (such as those provided by Youth Hubs).

The report also set ten local challenges, which the government has recommended local authorities should take forward. This strategy recognises the importance of these challenges and acknowledges existing work already undertaken or underway in response to them. Halton will ensure that the ten 'Gold Standard Pledges' remain key to its targeted approach in addressing homelessness prevention and homelessness. The Strategy identifies key themes, with emphasis placed upon reducing homelessness and increasing future prevention initiatives. The Gold Standard ten-point challenges will be to maximise opportunities arising from the Government commitments and will be reflected within the six strategy objectives an their accompanying priorities and the strategy action plan.

Link between Strategy Objectives and Gold Standard

Strategy objective	Gold standard
1. Collaborative and integrated approach to commissioning improved outcomes	 Have a homelessness strategy which sets out a pro-active approach to preventing homelessness and is reviewed annually so that it is responsive to emerging needs Adopt a 'no second night out' approach or an effective local alternative Actively engage in preventing mortgage repossessions including through the mortgage rescue scheme
2. Health and homelessness	Offer a housing options prevention service, including written advice, to all clients
3. Minimise the impact of welfare reform	 Offer a housing options prevention service, including written advice, to all clients
 Improve the provision of a range of housing options and services to reduce homelessness 	• Develop a suitable private rented sector offer for all client groups, including advice and support to both clients and landlords
5. Increase and improve communication and partnership working	 Actively work in partnership with voluntary sector and other local partners to address support, education, employment and training needs Have housing pathways agreed or in development with each key partner and client group that includes appropriate accommodation and support
6. Minimise the use of temporary accommodation by facilitating the supply of secure move-on accommodation	 Not place any young person aged 16 or 17 in Bed & Breakfast accommodation Not place any families in Bed & Breakfast accommodation unless in an emergency and then for no longer than six weeks

Health

Local authorities complete a quarterly statistical report (P1E) which identifies levels of homelessness and prevention outcomes achieved. The report is submitted to Communities and Local Government (CLG) in relation to their activities to ensure compliance with the relevant homelessness legislation. The new Public Health Framework sets out the desired outcomes and how they will be measured, which includes two homelessness indicators – statutory homeless acceptances and households in temporary accommodation.

There is an encouraged focus on the health of the local homeless population and a real commitment within Halton to ensure health services assist in identifying those at risk and prevent homelessness by making every contact count.

The health of people who are homeless is generally much poorer than that of the general population. There is limited data available at a local level and it is not routinely collected and analysed, consequently, it is not possible to determine the exact health issues facing people who are homeless. The National Audit found that homeless people have a higher usage of healthcare services than the general population and established;

- 41% had gone to A&E at least once;
- 31% had been admitted to hospital at least once (compared to 7% of the general population in a typical year);
- 28% had used an ambulance at least once;
- 82% had been to a GP at least once;
- Only quarter of homeless people admitted to hospital had help with housing;
- Average length of stay of 6.2 days for homeless people (compared to 2.1 days for the general population);
- Most common reasons for admission include toxicity, alcohol or drugs and mental health problems.

To allow further understanding of the public health needs and pressures placed on services, the Liverpool Public Health Observatory has been commissioned to complete a Health Needs assessment. The commissioned piece of work will look at qualitative methods of gathering intelligence to determine health experience, access to services and homelessness status.

Health & Well Being

The 'Health and Well Being' needs of the homeless in Halton can vary significantly between individuals, and is frequently related to their particular status. This ranges from households fleeing domestic abuse and identified as a priority need for accommodation, to the hidden homeless, single non-priority persons who are rough sleepers, 'sofa surfers' and night shelter residents.

Priority groups for housing include young families, who usually retain access to primary care services and GP to ensure their physical and mental health needs can be met. However, the hidden homeless are particularly vulnerable, with complex physical and mental needs leading to an extremely high level of mortality and an average life expectancy of 40. They can often prove extremely hard to reach through mainstream provision.

Information taken from National Audit carried out by Homeless Link during 2010/11 gave a proxy analysis of the health needs of homeless people in Halton found:

- 8 out of 10 clients have one or more physical health needs and 1 in 5 confirmed they found it difficult to cope and required support;
- The most common conditions mentioned were chest/breathing, pain, joint and muscular problems, dental and eye sight problems. The proportion of homeless people citing these conditions was much higher than prevalence of general population;

- 56% reported long term health conditions compared to 29% in general population;
- 72% have mental health needs compared to 30% of the general population;
- 1 in 3 regularly eat less than 2 meals a day and only 7% consume the recommended 5 portions of fruit or vegetables a day compared to 21% of the general population;
- 77% were smokers and had been offered smoking cessation advice;
- 52% indicated they used one or more type of illegal drugs.

Whilst it is essential that the strategic focus remains on preventing homelessness, there is now a new council responsibility under the Health & Social Care Act 2012. This is to reduce premature mortality and tackle health inequalities. Hence the council is strongly committed to supporting a system where vulnerable single homeless persons have equal access to its health and social care services.

The welfare reform and wider economic pressures are likely to increase the numbers of hidden homeless in Halton, further increasing demand on existing health and support services. Following the NHS reform, Public Health now sits within Halton Borough Council. This provides a unique opportunity to review and reposition all disparate homeless health provision investments through Section 75 agreements with Public Health Services. Joint commissioning of a new integrated homeless service could then be more easily achieved. This would meet the spectrum of health needs of the hidden homeless along with those identified for priority accommodation.

Halton intends to build upon the partnership links made with other agencies, including health and mental health services and will remain vigilant in its search for joint working opportunities that improve outcomes for service users.

6. The Journey Ahead

The magnitude and complexity of the issues that face us in the next 5 years must not be underestimated. However, Halton will continue to plan ahead and will work in partnership with others who can assist in delivering solutions. We have prioritised issues and proposed actions to build on our past success, mitigate the impacts of changing housing markets, social and welfare reform but, above all, prevent homelessness.

Halton's future goals

- Early intervention to prevent homelessness before a crisis point is reached.
- Provision of appropriate advice, accommodation and support if crisis occurs.
- Prevention of repeated homelessness to ensure people have settled and sustainable homes.
- Improve clear links between Health, Homelessness, Housing and Social Care.

Key challenges

The outcome of the consultation held for reviewing and developing the new strategy with stakeholders highlighted the key challenges Halton is facing. Key issues and priorities identified were:

- Adverse impact of welfare reform;
- Funding;
- Affordable housing need;
- Increasing pressures on household incomes in the current and future economic climate;
- Single non priority and intentionally homeless households;
- Young people;
- People at risk of domestic abuse;
- Difficulty in meeting the needs of households with more complex needs;
- Service integration to develop and improve health care for homeless people;
- Increasing problems accessing private rented accommodation for homeless and potentially homeless households;
- Developing solutions to meet gaps in future funding including accommodation based services for rough sleepers.

Factors that may affect future homelessness levels

- Lack of affordable housing;
- Housing and Welfare Reforms;
- Increase in Landlord and Mortgage repossession claims.

How Halton will deliver its objectives in response to these pressures is contained within the Homelessness Strategy Action Plan. This sets out clear tasks and targets within identified areas of

work.

7. Our vision, objectives and priorities

The vision is to assist and prevent people who are threatened with homelessness in Halton. To provide a community focused and accessible service to ensure people know where and how they can seek help and assistance to prevent them becoming homeless and receive a quality and confidential housing options service.

The Strategy aims to:

- Reduce Homelessness presentations and acceptances; and
- Increase and improve Homelessness prevention and access to housing services.

Further emphasis is placed upon prevention, support and partnership working to deliver an efficient and coordinated approach towards reducing the levels of statutory homelessness within Halton.

To help achieve these aims, we have adopted the following six strategic objectives. Each contains a set of priorities detailed below, which are linked to the Gold Standard pledges. The Strategy explains why each priority has been selected, what we hope to achieve and how we plan to achieve it.

Strategic objective 1:

Collaborative and integrated approach to commissioning improved outcomes for people experiencing homelessness

- Priority 1A: Develop and co-ordinate services to deliver a comprehensive approach towards homelessness and prevention
- Priority 1B: Develop a marketing plan with partners to raise awareness of the Housing Solutions service to ensure that the homelessness services strive to meet the National Gold Standard
- Priority 1C: Promote a range of prevention options, including the GIFT initiative, prevention fund, and mortgage rescue scheme to enable clients to remain within their homes
- Priority 1D: Respond to and prevent rough sleeping

Strategic objective 2:

Health and homelessness

- Priority 2A: Ensure that homelessness is recognised as a priority for action within the Health and Wellbeing Board
- Priority 2B: Develop a business case to formalise a single practice approach to address the housing and health care needs of vulnerable homeless people

Strategic objective 3:

Minimise the impact of welfare reform

- Priority 3A: Agree a joint approach with the Housing Benefits service for the future use of Discretionary Housing Payments to ensure they are used effectively to prevent homelessness and to determine future areas of action
- Priority 3B: Develop under-occupation schemes with housing providers to free up family homes and encourage shared housing

Strategic objective 4:

Improve the provision of a range of housing options and services to reduce homelessness

- Priority 4A: Improve access to housing using the private rented sector and shared housing options
- Priority 4B: Improve working with private sector landlords and promote the Bond Guarantee Scheme

Strategic objective 5:

Increase and improve communication and partnership working

- Priority 5A: Develop an effective multi-agency approach to support vulnerable and complex needs households to sustain and secure affordable accommodation to prevent homelessness
- Priority 5B: Support young people and facilitate the delivery of integrated housing, care and support for young people at risk, care leavers, young offenders and teenage parents
- Priority 5C: Improve partnership working and communication with key agencies, police, probation and housing providers to address the growing housing need for offenders
- Priority 5D: Joint partnership working with agencies, police and housing providers to offer options and solutions to victims of domestic abuse to support them to remain within their home

Strategic objective 6:

Minimise the use of temporary accommodation by facilitating the supply of secure move-on accommodation

• Priority 6A: Reduce the use of temporary accommodation (including B&B) to maximise the use of prevention options available to reduce homelessness

The following tables report the findings of the Strategic Review of Homelessness within Halton. These findings have been incorporated within the strategy document and comply with the government's approach to homelessness prevention while focusing upon partnership working to support those at risk of homelessness.			
Why this is a priority?	What do we want to achieve?	How do we plan to achieve it?	
The Homelessness Act 2002 requires that every five years, local authorities must carry out a strategic review of homelessness, formulate and publish a homelessness strategy based on its findings.	demands of homelessness within Halton.	Adopt a corporate commitment to reduce and prevent homelessness, which has a buy in across all local authority services. Early intervention in the homelessness risk assessment process to prevent homelessness and deliver a range of housing options. Develop a Housing and Support Gateway service that will offer an accelerated process and improve access to the homeless and support services within the district.	

Strategic objective 1: Collaborative and integrated approach to commissioning improved outcomes for people experiencing homelessness

GOLD STANDARD:

- Have a homelessness strategy which sets out a pro-active approach to preventing homelessness and is reviewed annually so that it is responsive to emerging needs
- Adopt a 'no second night out' approach or an effective local alternative
- Actively engage in preventing mortgage repossessions including through the mortgage rescue scheme

Priority 1A: Develop and co-ordinate services to deliver a comprehensive approach towards homelessness and prevention

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Develop a homeless strategy that sets out a pro-active approach to preventing homelessness and is reviewed annually to ensure it is responsive to emerging trends.	Put a robust framework for measuring the effectiveness of interventions in place and implement the review recommendations by April 2014.	Conduct a review of the current homeless prevention using the Communities and Local Government (CLG) toolkit.
	Actively encourage partnership working with statutory and voluntary partners, including other Local Authorities to improve service delivery and address support, education, training and employment.	Develop housing pathways with key partners and client groups that include appropriate accommodation and support. Continue to work with Supported Housing providers to strengthen the outcomes on prevention and long term tenancy sustainment.

Priority 1B: Develop a marketing plan with partners to raise awareness of the Housing Solutions service to ensure that the homelessness services strive to meet the National Gold Standard				
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?		
To ensure key agencies and partners have an understanding of the homelessness assessment process, applied legislation and prevention agenda to reduce the levels of homelessness.	Conduct review of current homeless prevention using CLG toolkit.	Develop a robust framework for measuring the effectiveness of interventions in place to determine trends and review recommendations annually.		
To increase access to prevention services and resources across the district.	Improve awareness of the Housing Solutions Team and promote the range of housing options and resources available to clients.	Commission a range of learning, development and role shadowing opportunities for staff and partners to improve knowledge and understanding around the issues of homelessness and prevention.		
	Reduce the level of homelessness and increase positive prevention outcomes.	Increase the number of 'Housing Solutions' drop in advice sessions across the district to further develop a community focused and accessible service.		
		Increase/ develop prevention initiatives to promote client choice and access to services.		

Priority 1C: Promote a range of prevention options, including the GIFT initiative, prevention fund, and mortgage rescue scheme to enable clients to remain within their homes				
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?		
Work in accordance with the Prevention agenda to develop and improve homelessness prevention initiatives.	Continuous improvement and delivery of prevention services with the priority on helping people to resolve their housing problems and tackle barriers to obtaining accommodation.	Ensure the service is accessible and transparent and people facing crisis are fully aware of the options and services available to them.		
Reduce the levels of future homelessness presentations and acceptances.	Continue the delivery of the Mortgage/ Repossession role and ensure the MRS fund is fully utilised.	Increase the number of those accessing the Mortgage Rescue Service by 20%. Further improve joint working with all housing partners to offer an accelerated process for clients facing repossession due to rent arrears.		
		Further develop county court service and attend court action group to be aware of changes within the legal setting.		
	Review and promote the GIFT scheme for young people to ensure it is made available to clients in crisis / homeless.	Review information leaflets and circulate across the district. Update council website to illustrate the level of services and assistance available to clients.		
		Develop as part of move on process to ensure service is fully utilised and clients have access to the relevant funding to take up a tenancy.		
	Deliver a programme of training to promote homelessness prevention and the impact of the Localism Act, Welfare Reform and other initiatives with partners.	Deliver joint staff training between partners and agencies every quarter commencing December 2013. Co-ordinate sub regional training programme to share resources and reduce costs.		

	Priority 1D: Respond to and prevent rough sleeping			
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?		
Ensure that no client spends more than one night rough sleeping.	Implement a sub-regional approach to tackling the problem of rough sleeping across Merseyside and Cheshire. Develop and improve a co-ordinated approach that is consistent across all Local Authorities when assisting clients sleeping rough.	 Review the no second night out service to determine current trends and future funding to retain service provision Ensure sufficient specialist accommodation and support is available to meet the needs of single homeless clients in the borough. Ensure that the reconnection policy for 'out-of-borough' clients is fully supported when they return to their local connection district. 		

Strategic objective 2: Health and homelessness

GOLD STANDARD:

• Offer a housing options prevention service, including written advice, to all clients

Priority 2A: Ensure that homelessness is recognised as a priority for action within the Health and Wellbeing Board

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Make every contact count and ensure individuals and/ or families affected by homelessness can access appropriate advice, support and accommodation.	Ensure that homelessness services are appropriately linked into Health Care services and fully informed of the options available to maximise resources, prevent homelessness and improve Health and wellbeing.	Present Homelessness Strategy to Health & Well Being Board to raise awareness of the Housing Solutions Service. To ensure Homelessness is identified as a Priority and to build upon joint Strategic Needs Assessments to determine future service delivery.
	To promote and encourage integration between homelessness and public health care services to allow a broader understanding of the priorities and challenges faced by each service	To forge close working relationships with Health Care services and outline future trends and challenges of homelessness and the impact and cost it will have on future health care.
	Review the Hospital discharge policy to incorporate procedural practice changes to the service.	Joint partnership approach to review and develop a Hospital Discharge Policy which will enable vulnerable clients to be discharged from hospital more quickly. This would put their home less at risk.

Priority 2B: Develop a business case to formalise a single practice approach to address the housing and health care needs of vulnerable homeless people			
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?	
Homelessness people are at the bottom of any graph of health inequalities, putting the average age of death of homeless people some 30 years below that of the general population. Homelessness is therefore a	Integrated service approach to develop a National Practice for homelessness people that is flexible and easily accessible. Reduce homelessness and repeat hospital	To transform health outcomes for homeless people and other multiply excluded groups. Develop Healthcare pathway with integrated	
Healthcare issues	admissions by taking a holistic approach to reach the clients and address all their needs to improve the quality and experience of these groups	care co-ordination team that will include homelessness, to improve outcomes for homeless people.	
	Collect and record data to support local commissioners and health care partners to shape services around the health needs of the most vulnerable and marginal groups, that are often invisible.	Conduct needs assessment and collect data on levels of hidden local health need and health inequalities within the defined population.	

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Strategic objective 3: Minimise the impact of welfare reform
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GOLD STANDARD:

• Offer a housing options prevention service, including written advice, to all clients

Priority 3A: Agree a joint approach with the Housing Benefits service for the future use of Discretionary Housing Payments to ensure they are used effectively to prevent homelessness and to determine future areas of action

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
To ensure that the council is fully compliant with changing legislation and responsible for the administration of public funds.	Develop a co-ordinated approach to providing advice on housing and welfare benefit, debt and money advice by working with and fully supporting partner agencies.	Review current services to ensure that the level of advice offered on benefits, debt and money advice is accessible and efficient and to determine gaps in service delivery.
		Develop evening / weekend advice services and consider on-line advice services.
	Agree a joint approach to the future use of Discretionary Housing Payments	Review and monitor future allocation of Discretionary Housing Payments (DHP) to determine future areas of action.
		Request for Housing Solutions Officer to attend DHP application panel assessments.

Priority 3B: Develop under-occupation schemes with housing providers to free up family homes and encourage shared housing			
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?	
To prevent and reduce future homelessness for clients affected by the Welfare Reform Act.	A joint approach to administering the allocated DHP funding to reduce the impact of the Welfare Reform Act and minimise penalties in order to prevent and reduce homelessness. Target social tenants likely to be affected by the under-occupation penalties enforced through the welfare reform.	Develop a coordinated approach to offering advice and support for housing welfare benefit, debt and money management. This will increase early access to advice services and further promote financial inclusion. Targeted support to those likely to become homeless as a result of the under-occupation penalties and social rent conversions. Consult with all housing partners to develop a move on/ transfer scheme for clients affected by under –occupation penalties. Joint partnership approach to develop and promote shared housing scheme. Advertise and promote shared housing on the PPP housing register.	

Strategic objective 4: Improve the provision of a range of housing options and services to reduce homelessness

GOLD STANDARD:

• Develop a suitable private rented sector offer for all client groups, including advice and support to both clients and landlords

Drievity / A. Impresse og	aaaa ta hayaina yaina	a the private repted	anator and abored	housing options
Priority 4A: Improve ac	cess to nousing using	g the private rented :	sector and shared	nousing options

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Enable Halton Borough Council to take advantage of powers available to them under sections 148 and 149 (Chapter 20, Part 7 of Localism Act 2011). The powers allow the local authority to make an offer of suitable private rented accommodation to persons who have a priority need and are not intentionally homeless.	Agree approaches to using the new homelessness discharge duty in accordance with PRSO policy and Improve access to housing via Property Pool Plus to increase private rented sector and shared housing options.	Encourage private sector landlords to advertise their accommodation on Property Pool Plus and work with the LA to secure accommodation for homeless households. Increase supply of homes to homelessness and vulnerable households by bringing empty homes back into use Promote and facilitate mutual exchanges to
Review the Allocations Policy to cover new powers introduced by the Localism Act 2011 and Welfare Reform Act.	Develop and review initiatives to make better use of social housing stock.	clients. Work with housing providers to develop incentives to free up stock and meet housing demands. Continue to work with floating support services to strengthen prevention outcomes and tenancy sustainment.

Priority 4B: Improve working with private sector landlords and promote the Bond Guarantee Scheme						
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?				
Reduce and prevent homelessness and enable the local authority to discharge its statutory housing duty using the private rented sector.	Increase housing options and choice to meet increasing housing demand to prevent homelessness and reduce the use of temporary accommodation.	Increase sustainable move on options and support from temporary accommodation to make full use of the bond guarantee scheme and promote independent living.				
	Improve partnership working with letting agents to improve the service available.	Improve overall approach to working with private landlords to promote the 'Bond Guarantee Scheme' and increase number of lets with rental bond by 10% by April 2014.				
		Make full use of DHP for rent in advance required for private renting. Encourage letting agents to work with the council to fully utilise the accommodation available.				
	Improve advice and support offered to landlords and clients.	Undertake awareness and publicity campaign to inform landlords and tenants of services available.				
		Encourage and support people to let out their property or rooms.				

Strategic objective 5: Increase and improve communication and partnership working

GOLD STANDARD:

- Actively work in partnership with voluntary sector and other local partners to address support, education, employment and training needs
- Have housing pathways agreed or in development with each key partner and client group that includes appropriate accommodation and support

Priority 5A: Develop an effective multi-agency approach to support vulnerable and complex needs households to sustain and secure affordable accommodation to prevent homelessness

Why is thi	is a priority?	What do we want to achieve?	How do we plan to achieve it?
People experiencing hor generally in contact with services. Providing acce information and support	a range of other public ess to advice,	Integrated approach to addressing the housing and social needs of vulnerable and complex households to prevent homelessness.	Review intelligence which will identify arising needs for vulnerable and complex needs households
right help at the right tim		Deliver a planned approach involving key agencies. Respond to the needs of vulnerable and complex care households experiencing homelessness.	Agree and develop a joint working protocol between Housing Solutions service and; • Health & Social Care • Mental Health • Local Hospitals • Probation • Job Centre Plus.
		Develop an effective multi agency approach to support vulnerable and complex needs households to sustain and secure affordable accommodation to prevent homelessness.	Provide emergency temporary housing provision and tailored support for vulnerable client groups experiencing homelessness.

	leavers, young offenders and teenage parents	
Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Ensure that all young people in Halton have support, life skills and opportunities to thrive physically and emotionally to prevent homelessness.	Scope and identify opportunities to improve access to education, training and housing options for young people.	Continue to develop joint working between the Housing Solutions Team, Children's services and the team around the family.
	Ensure that staff working with young people affected by homelessness, have the appropriate skills, knowledge and safeguarding training.	Ensure that the housing solutions team access children's and adults safeguarding training to raise awareness of key issues and reporting process,
		Provide learning and development opportunities on Homelessness legislation and applied criteria to all key services that work with young people.
	Collaborate with the skills and work programme providers.	Increase the number of referrals to training, employment and education providers by 15% annually.
		Support housing providers to develop a coordinated approach to delivering life skills sessions to young people.
	Review the joint protocol with Children's services and youth offending team to ensure the council complies with legal judgements and case law.	Further review and develop the joint working protocol for 16/17 year olds, enabling transition towards independent living with tailored support.
	Explore the development of emergency respite accommodation for $16 - 21$ year olds.	Develop crisis intervention centre for young people threatened with homelessness. Offer a holistic approach to working with young people and their

	nolds as a means of them returning back to nily home.
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Priority 5C: Improve partnership working and communication with key agencies, police, probation and housing providers to address the growing housing need for offenders

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Ensure the current housing accommodation and support for all offenders is appropriate and that pathways to specialist services are available to reduce the level of re-offending and enable Housing Solutions advisers to work	Review current housing policies to identify gaps in provision and agree the information required by Registered Providers to enable them to rehouse offenders.	Investigate Registered Providers reluctance to house Schedule 1 offenders and those subject to MAPPA.
with offenders as part of a wider package of support.	Reduce the number of prisoners being released from prison without a resettlement plan to prevent homelessness and re- offending.	Work with shelter to develop joint protocol to maximise notice periods for prisoners requiring accommodation on release. To ensure offenders are registered with Housing Solutions and Property Pool Plus at earliest opportunity.

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Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
Homelessness Act 2002 and provides temporary /secure accommodation for victims of violence and abuse.	Work in partnership with National Domestic Abuse Organisations, Police, registered Housing providers and key agencies to offer a range of rehousing options and solutions to victims of domestic abuse	Multi-agency approach to deliver a holistic prevention service. This will ensure that the right support and services are made available to the household. Develop a range of housing accommodation
meet with and tackle the issues of domestic abuse.		provisions to meet the needs of victims of abuse. Ensure that families with dependent male children and male victims can be accommodated within the district.
	Improve partnership working with Sanctuary scheme providers to promote safety housing options and solutions to victims of abuse.	Support Sanctuary scheme to reduce the number of men and women becoming homeless because of domestic abuse.
	Improve referral and data sharing processes across organisations to ensure consistency and accuracy and better service delivery	Agree a pathway action plan with Key agencies to deal with the crisis and empower the individual to achieve positive outcomes and sustain long term tenancy.

Strategic objective 6: Minimise the use of temporary accommodation by facilitating the supply of secure move-on accommodation

GOLD STANDARD:

- Not place any young person aged 16 or 17 in Bed & Breakfast accommodation
- Not place any families in Bed & Breakfast accommodation unless in an emergency and then for no longer than six weeks

Priority 6A: Reduce the use of temporary accommodation (including B&B) to maximise the use of prevention options available to reduce homelessness

Why is this a priority?	What do we want to achieve?	How do we plan to achieve it?
In accordance with homelessness legislation the council cannot place families into B&B accommodation for more than 6 weeks.	 Continue to reduce the use of B&B and temporary accommodation and make better use of housing stock within the district. Continued achievement to reduce the use of temporary accommodation. Review the level of temporary accommodation within the district to ensure it meets current and future housing demands Temporary accommodation provision made available for non-statutory homeless households in crisis. 	 Early intervention and promoting a community focused service, made more accessible to households threatened with homelessness. Reduce the number of households in temporary accommodation by 20% by April 2014. Support temporary accommodation providers Promote housing services available and facilitate move on options. Evaluate and develop temporary accommodation provision within the district to ensure it meets the needs of statutory homeless households and reduce the level of voids and rent loss. Improve access to appropriate temporary hostel accommodation for short periods to allow housing solutions and key agencies to address the issues and facilitate move on to alternative suitable accommodation.

8. National & Local Policy

Local authorities have statutory duties under the Housing Act 1996 (as amended by the Homelessness Act 2002). This includes a duty to provide advice and assistance to all people who are homeless or threatened with homelessness.

Following the Homelessness Act 2002, preventing homelessness has become a central component of national and local policy direction. The Act imposes a statutory duty on local authorities to produce a homelessness strategy for addressing prevention and recurrence of homelessness. This includes a requirement to assist 16 and 17 year olds and other vulnerable groups. In carrying out these functions the council must consider both the objectives of central government and local priorities, as determined by the corporate housing strategy and other key council policy documents.

 Localism Act - The Localism Act 2011 introduced a range of measures to give more powers to individuals, communities and local authorities enabling them to make decisions, and influence policies in their own local areas with a diminishing central government role. The main implications for homelessness are changes to the local authority duty to accommodate households assessed as 'statutory homeless' and to allow the discharging of homelessness duty to the private rented sector.

The new legal powers will have implications for the Housing Solutions Team. For example, reliance upon private rented accommodation would form an important part of the service, alongside the existing focus on homeless prevention. This would increase pressure on the council to ensure there was better private sector stock provision by increasing enforcement activities, extending bond schemes, licencing and prioritising referrals to accredited landlords.

Welfare Reform – The introduction of the Welfare Reform Act 2012 has major implications for Halton residents and there are concerns that it could lead to an increase in homelessness. The reforms proposed are intended to protect the most vulnerable, create the right incentives to get more people into work resulting in a fairer benefit and tax credit system. However, our initial analysis indicates that welfare reform will have a detrimental effect on many of the vulnerable and high risk client groups.

A number of changes to housing benefit have already been implemented and will continue until 2014/15. Universal Credit will replace the current system of means tested working age benefits and tax credits and came into effect in October 2013 (in piloted areas). The measures to reduce Local Housing Allowance (LHA) rates would ultimately result in people's inability to find suitable affordable housing in the private sector and may threaten the ability of some households to continue to afford their current home. To help households manage the transition, the Government has awarded increases in the Discretionary Housing Payments (DHP) fund. The council will use the increase in DHP to target vulnerable households with the most need and to address the 'bedroom tax'; however, there is a risk that the allocation may not be sufficient.

 No Second Night Out (NSNO) – The ministerial working group on homelessness published its first report in 2011. This addresses the complex causes of homelessness more effectively and tackles the problem of rough sleeping out on the streets. NSNO was a Merseyside subregional approach that has been operating successfully since 2011

9. Delivery of the Strategy

To achieve the strategic priorities and objectives an Action Plan has been developed in partnership with partners and stakeholders to outline key objectives and tasks to be delivered over the 2013 - 2018 period. The action plan is reviewed annually and targets set are evaluated to incorporate legislation and policy changes.

Governance and monitoring

Progress and delivery of the strategy and action plan will be monitored and updated quarterly by the *Strategic Commissioning Group* and annually by the *Halton Homelessness Forum* to celebrate the achievements and remove any barriers, address new challenges and ensure efficient service delivery. It is considered important to have the involvement of stakeholders and partners in the delivery of the targets set in the strategy action plan. The monitoring of the homelessness strategy targets is shown in the table below:

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Stakeholders and Partners	Homeless Strategy Targets			
Halton Homelessness Forum	Annual conference to inform stakeholders and partners of the progress made towards delivering the set targets identified within the Strategy Action Plan.			
Strategic Commissioning Group	Through quarterly meetings the strategy action plan will be updated and progress recorded for each action. Any new developments at local and regional level will be considered and the implications will be evaluated.			
Halton Housing Partnership	Progress on the homelessness strategy action plan to be reported to HHP on an annual basis, however, exceptions could be reported to its monthly meetings.			
National Performance Indicators:	 The new CLG single data list require the following data for homelessness: Mortgage Rescue quarterly return - monitors the number of households at risk of homelessness who are assisted by the Housing Solutions Team Rough Sleeper annual return - records the number of people reported to be sleeping rough in the Local Authority on a given night between October and November each year P1E quarterly return - covers all areas of Local Authority activity under the homelessness provisions of Housing Act 1996. 			

Monitoring Homeless Strategy Targets

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Stakeholders and Partners	Homeless Strategy Targets
Local Performance Indicators:	Halton will continue to monitor performance against certain local performance indicators relating to housing and homelessness. These are:
	LPI – relates to the <i>number of households who are considered homeless or threatened with homelessness within 28 days, who approached the Local Authority Housing Solutions Service, and for whom housing advice casework and intervention has resolved their situation.</i> This data is recorded on the 'Housing Advice' database and reported through section E10 of the P1E
	LPI – Shows the average length of stay in B&B accommodation for households with dependent children or expectant mothers that are unintentionally homeless and in priority need.
	LPI – This indicator measures the <i>number of households living in temporary accommodation provided under the homelessness legislation</i> . This indicator is no longer reported to Government but is monitored locally.

Risk elements to delivery of Homelessness Strategy

The key risks to the delivery of the homelessness strategy have been analysed to ensure there are mechanisms in place to mitigate or manage their impact.

Access to resources

The CLG Homelessness Grant funding makes an important contribution to the delivery of a range of homeless services in Halton. This fund is currently frozen and arrangements for distribution of the grant for the financial years 2014/2015 are unclear. If the homelessness grant funding were to be reduced or ceased completely, it would adversely affect the ability of the Housing Solutions team to offer a range of housing options and would impact upon performance and service delivery.

Homelessness Strategy for Halton (2013 – 2018) – Action Plan

Strategic objective 1: Collaborative and integrated approach to commissioning improved outcomes for people experiencing homelessness Success measures and **Priority** Action **Bv** when Responsibility Resources outcomes 1A: Develop and Review/ improve current 2014 PHO. Officer time, P1E, Robust framework measuring Health & Social homelessness prevention using CLG CLG Homelessness effectiveness of interventions. co-ordinate Develop and implement the Action toolkit. Care Grant services to deliver Commissioner Plan recommendations. a comprehensive approach towards Adopt a corporate commitment to Merseyside and CLG sub-regional Joint approach to develop and 2015 homelessness and reduce and prevent homelessness in Over strategy Cheshire sub-Prevention Fund. implement quality and cost-Page 119 prevention which all Local Authority services are effective services across regional groups. P1F period Health & Social neighbouring authorities. involved Care PHO. Review mechanisms to introduce Annually Officer and staff time. Improve listening and learning Policy Officer CLG Homelessness from homelessness people to meaningful and cost-effective Over strategy satisfaction and customer (Communities) further develop: Grant period experience feedback - including Community focused service • independent facilitation. Procedural practice • Service provision • Accessibility • Integrated partnership • approach to improve service delivery. Identify gaps and actions from PHO Increase awareness of realistic Quarterly Officer and staff time. trends and changes, promoting housing options for agencies via regular P1E Housina wider public awareness of working with homeless clients. partnership Solutions team homelessness and supply and meetings

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
					demand for social housing. Improved partnership working with accommodation providers to improve prevention outcomes and comply with contract requirements.
	Continue to work with Supported Accommodation providers to strengthen prevention outcomes and 'move on' processes.	Over the strategy period	PHO, SDO, Accommodation Providers	Officer time, CLG Prevention Fund, P1E	Develop housing pathways with key partners and client groups that include appropriate accommodation and support to promote independent living.
1B: Develop a marketing plan with partners to	Revise procedures, staff awareness and training to incorporate any policy and legislative changes.	Over the strategy period	PHO, Policy Officer, HST	Officer time, training fund, P1E	Maximise homelessness prevention by 10%.
raise awareness of the Housing Solutions service to ensure that the homelessness	Review best practice and performance to strive towards continual improvement to meet the Gold Standard.	2014/15	DM Commissioning, PHO, SDO, Policy Officer	Officer time, sub- regional groups	Fully utilise all resources and develop new initiatives to offer choice and prevent future homelessness.
services strive to meet the National Gold Standard	Deliver a programme of training to promote homelessness prevention and the impact of Localism and Welfare Reform with partners.	Quarterly Over Strategy Period	PHO, Homelessness Forum, Partners	Regular strategic partnership meetings, NHAS	Participate in national benchmarking to improve service planning and ensure cost effectiveness of homelessness services.
	Develop Gateway for homeless accommodation and support services.	May 2014	DM Commissioning, PHO, SDO, Capita	CLG Sub Regional Funding	Increase the number of key agencies accessing homelessness training. Gaining better understanding of the service, the applied processes and priorities.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
	Develop and implement information recording and evidence base for homelessness.	2014	PHO, SDO, Capita	SP Budget, P1E	Improved data recording and access to develop accelerated process to accommodation and support services. Maximised efficiency of recording systems to collect homeless data to monitor trends that will inform future policy and service development.
1C: Promote a range of prevention options, including the GIFT initiative,	Review and promote GIFT scheme initiative and make available to clients aged 18-35.	2013/14	PHO HST.	CLG Home Grant. P1E	Increase access to funding to enable single homeless clients to take up and sustain new tenancies. 55 applications 2011/12 to increase annually by 5%
prevention fund, and mortgage rescue scheme to enable clients to remain within their homes	Continue the delivery of Mortgage Repossession Prevention Scheme.	Over the strategy period	DM Commissioning, PHO, MRS Officer	Officer time, SP Budget CLG Homelessness Grant	Undertake advertising campaign to raise awareness of MRS and prevention options. Annual increase in number of households accessing mortgage rescue and advice by 10% to prevent and reduce homelessness.
1D: Respond to and prevent rough sleeping	Review impact of the ' <i>No Second Night out</i> ' outreach service.	Annually	PHO, Merseyside sub- regional group Whitechapel	CLG sub-regional, budget, P1E	Reduction in number of new rough sleepers spending 2 nd night on the streets.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
	Review operational procedures to ensure they are consistent and clear to all sub-regional authorities.	Quarterly	PHO, Merseyside sub- regional group Whitechapel	Officer time, Merseyside sub- regional budget	Rough sleepers with no local connection are reconnected to services in their local area.
	Develop and implement services to tackle issues of habitual rough sleepers.	2014	PHO, Health & Social Care, sub- regional partners	Staff time, CLG sub- regional budget	An assertive, personalised approach to target habitual rough sleepers and empower them to access alternative accommodation options.
	Improve pathways through supported accommodation for former rough sleepers.	Over the strategy period	PHO, SDO, Whitechapel		Improved move on options from supported hostel accommodation with a constant review to deliver and achieve positive outcomes.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
2A: Ensure that homelessness is recognised as a priority for action within the Health	Present Homelessness Strategy to Health & Wellbeing Board to raise as priority for future action.	2014	DM Commissioning, PHO, CCG	Officer time	To ensure that Homelessness is identified as a priority and the board have an understanding of future challenges and funding requirements.
and Wellbeing Board	Attend and contribute to meetings, events and regular performance reports.	Quarterly Performance reports	DM Commissioning Health & Social Care, PHO, Policy Officer	Officer time within existing resources	Maximise opportunities for joint commissioning to include health, DAAT, probation and key professionals.
	Review and develop sub-regional hospital discharge policy.	2013/14	PHO, sub- regional partners, Health & Social Care, Policy Officer, Accommodation Providers	Partnership working, Crisis Bid Fund, Merseyside sub- regional budget	Policy offering accelerated proces for vulnerable clients discharged from hospital. A cost-effective, timely and proactive approach to reducing crisis-led homelessness and repeat admissions.
	Review and revise protocols and working arrangements with key partners.	2014–2015	PHO, Health, Policy Officer, Key partners	Officer time	More efficient and timely interventions from using a multi- agency approach to achieve positive sustainable outcomes.
	Develop housing options for substance misuse clients to move on after rehabilitation and ensure they can sustain a tenancy.	2014-2015	PHO Commissioning Managers, HSO, substance misuse services	CLG Homelessness Grant, Health Budget	Effective move on and outreach support process for substance misuse clients to address social issues and reduce repeat homelessness.

	2: Health and homelessness				
Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
	Review housing options for clients with low to moderate learning difficulties to inform future commissioning of support and appropriate housing.	2015/ 2016	Adult Comm. DM Commissioning, PHO	Officer time, SP & Health budgets	Develop model to provide accommodation and support provision to address the needs of clients with a learning disability and/ or Autism, to empower them to live independently.
2B: Develop a business case to formalise a single practice approach to address the housing and health care needs of vulnerable homeless people	Develop a Healthcare pathway that offers an integrated multi - disciplinary approach and is fully inclusive and builds relationships around individuals, between the statutory and non-statutory services engaged in their care	2014/2015	CCG Commissioners, Health & Social Care, PHO, HST	Budget TBC Officer time	A developed model to transform and improve health care and homelessness service outcomes. A pathway that integrates health, and other services around vulnerable people. A process used to review all elements of an individual's care, across housing, social care, mental health, drug & alcohol services and personally, thus allowing the individual to reflect and choose a pathway that is right for them.
	Improve health care for patients who cross the boundaries of traditional GP practice areas.	2014/2015	CCG Commissioners, GPs, Health & Social Care, PHO	TBC, officer time, Multi-agency partners	Ensure that patients who are not registered with a GP and those with extensive and complex needs are identified and addressed through a multi-agency response.
	Improve arrangements for health care delivery for vulnerable homeless people.	2014/2015	Health & Homelessness services, key partner	Training budget, officer time	Empower front line staff and homeless officers to work with Public Health and service colleagues to develop a

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
			agencies		comprehensive and integrated health response to homelessnes configured around a community need and shared set of standard
	Participate in the Housing Needs Assessment commissioned from Liverpool Public Health Observatory	April 2014	CCG Commissioners, DM Commissioning, PHO, S.R. Partners	Health care budget, officer time	The HNA will identify the health needs of the homeless population and assess whether their needs are being met, with recommendations to improve service provision.
	Collect and record data to support local commissioners and health care partners to shape services around the health needs of the most vulnerable and marginal groups, that are often invisible.	2014/2015	CCG Commissioners, Officers	Budget TBC, officer time	Determine qualitative methods of gathering intelligence on the subject of health experience, homelessness and access to services.

Strategic objective 3: Minimise the impact of welfare reform								
Priority	Action	By when	Responsibility	Resources	Success measures and outcomes			
3A: Agree a joint approach with the Housing Benefits service for the future use of	Joint approach to review and monitor future Discretionary Housing Payments with Housing Solutions representative at panel assessments.	April 2014 Over strategy period	PHO, HB Manager	Officer time, DWP budget	Increase the number of approved DHP applications to assist homeless clients into suitable accommodation.			
Discretionary Housing Payments to ensure they are used effectively to prevent homelessness and to determine future areas of action	Develop financial inclusion strategy, with integrated financial management, budgetary skills and benefit advice.	2014	DM Commissioning, PHO, HB/DWP, key agencies	Officer staff and partner agency time	Improved referral process and access for debt advice and money management to promote financial inclusion.			
3B: Develop under- occupation schemes with housing providers to free up family homes and	Review & monitor social tenants affected by the under occupation penalties enforced through the welfare reform.	2014 Reviewed quarterly.	PHO, SDO, RPs and partner agencies	Officer and partner agency time. DHP budget	Early intervention and targeted support for households affected by the under-occupation penalties and social rent conversions to prevent homelessness and promote tenancy sustainment.			
encourage shared housing	Consult with housing providers to develop a transfer/ shared housing scheme for clients affected by under- occupation penalties.	April 2014	DM Commissioning , PHO, HHT & housing partners	Officer time, housing budget	Increasing housing provision available to meet future housing needs and encouraged shared housing to reduce homelessness within the district.			

Strategic objective	4: Improve the provision of a ran	ge of housing o	options and serv	rices to reduce homele	essness
Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
4A: Improve access to housing using the private rented sector and shared housing options	Develop and implement Private Rented Sector Offer policy which relates to new powers within the Localism Act 2011. This will allow the council to discharge full homeless duty into the private rented sector.	April 2014 Reviewed over strategy period	DM Commissioning, PHO, Landlord Accreditation Officer	Within existing resources	Increase supply and choice of housing available to homeless households.
	Develop a housing pathway toolkit to direct homeless clients into the private rented sector and revise procedures and training to incorporate policy change.	April 2014	PHO, HST	Within existing resources	Devise assessment process and measures to encourage and support private landlords to accept homeless households. Offer staff/ agency awareness training of PRSO policy and impact
	Produce a report and options analysis to consider the outcomes of landlord surveys and views of PPP to undertake a gaps and options analysis to include:	2014/2015 Over the strategy period	PHO, Landlord, Accreditation Officer, Environmental Health, RPs	Within existing resources	training of PRSO policy and impact on homelessness services. Review analysis of current activity and performance to determine future trends and demand within the private rented sector.
	 Possibility of creating a social lettings agency. Review incentives offered to landlord. Effectiveness of Bond Guarantee. Out of area moves where 			DM Commissioning, PHO, SDO	Develop social letting agency to facilitate and manage PRS accommodation and reduce future homelessness. Improve advice and support services available to landlords and clients.
4B: Improve working with	appropriate. Liaise with and support agencies and supported housing providers to identify private sector housing	2013/14 Reviewed over strategy period	PHO, Landlord Accreditation Officer,	CLG Homelessness Grant, DHP, BGS	Increase accelerated move on process to empower individuals to secure suitable accommodation

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Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
orivate sector andlords and promote the Bond	options for vulnerable people. Develop sustainment and prevention	Over the	Accommodation providers Landlord	Within existing	and reduce dependency upon hostel accommodation provision. Encourage and increase
auarantee Scheme	roles with private landlords.	strategy period	Accreditation Officer, Landlord Forum	resources	involvement with private landlords to work with the council to address and resolve housing/ homelessness.
	Develop a multi- agency approach for bringing empty properties back into use. Exploring the potential through initiatives and as funding becomes available with voluntary and community Sector agencies.	Reviewed throughout period of strategy	DM Commissioning, PHO Manager, Environmental Health, HHT, private rented sector	Empty Homes Fund, CLG Homelessness Grant, housing budget	Encourage key partners and agencies to develop financial and option incentives. This will free up housing stock to reduce and prevent future homelessness.
	Undertake publicity campaign to raise awareness and inform landlords, letting agents and tenants of services available.	April 2014	Landlord Accreditation Officer, Environmental Health	CLG Homelessness Grant, Cheshire sub- regional prevention fund	Improved advice and support offered to landlords, letting agents and tenants to improve service delivery.
	Maintain register of reputable accredited private sector landlords with affordable good quality properties. To publicise using Property Pool Plus as a mechanism for moving within the existing social sector.	Review over strategy period.	Landlord Accreditation Officer, Environmental Health, Landlord Forum	Within existing resources	Encourage and support people to let out their property or rooms. Private rented sector properties advertised on Property Pool Plus scheme to increase housing provision available and prevent

Strategic objective	Strategic objective 4: Improve the provision of a range of housing options and services to reduce homelessness							
Priority	Action	By when	Responsibility	Resources	Success measures and outcomes			
					homelessness.			

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
5A: Develop an effective multi- agency approach to support vulnerable and complex needs	Review intelligence which will identify arising needs for vulnerable and complex needs households.	Over the strategy period	DM Commissioning, Adult Comm., PHO, SDO	Within existing resources	Maximise efficiency to deliver a planned approach to respond to the needs of vulnerable clients. Ensure adequate housing and support is made available to address future demands.
households to sustain and secure affordable accommodation to prevent homelessness	Work in partnership to develop supported accommodation project for single adults with complex needs and due to be discharged from hospital.	April 2014 Review	PHO, DM Commissioning, Health & Social Care, Whitechapel, YMCA	Budget TBC, officer and agency time	Efficient and timely approach to provide suitable self -contained accommodation and outreach support to address the needs of vulnerable clients.
	Develop complex needs /hospital discharge pathway plan and devise multi agency priority panel to review and monitor complex needs client group.	January 2014	PHO, DM Commissioning, Health & Social Care, Whitechapel	Officer time	Multi agency approach to identify key responsibilities to increase access to suitable accommodation and support for complex needs groups to achieve successful outcomes and prevent repeat homelessness.
	Amend Allocations policy to ensure that Armed Forces are identified as priority client group.	Over the strategy period	Cheshire sub- regional group, Commissioning, PHO, RP	Within existing resources	Provide integrated and accessible services to ensure priority is given to Armed Forces personnel due to be discharged from service.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
			Partners		
5B: Support young people and facilitate the delivery of	Develop social enterprise opportunities in education, training and employment to meet the needs of single homeless people in Halton.	Over the strategy period	PHO, YPT, HST, training providers	Officer time	Improved partnership working to improve access to training, education and housing services for young people.
integrated housing, care and support for young people at risk, care leavers, young offenders and	Identify lead agencies to seek funding and improve services available for young people.	Over the strategy period	DM Commissioning, PHO, YPT, regional partners/ agencies	Officer time, SP budget	To develop and sustain opportunities for young people to increase skills and prevent future homelessness.
teenage parents	Develop specialised mediation service to work with young people and families.	2014 Over the strategy period	PHO, YPT, partner agencies	Budget TBC, officer time	Improve services for young people and families to work through housing and social issues and promote positive outcomes.
	To ensure that all staff working with	2014	PHO,		
	young people affected by homelessness have the appropriate skills, knowledge and safeguarding training.	Over the strategy period	homelessness forum members, regional partner agencies	Training budget, officer time	Increase learning and development training opportunities to raise awareness of key safeguarding issues and reporting process.
	Review joint (Southwark) protocol with Children's Service and YOT to ensure the council is fully compliant with legal case law judgements and legislation.	2014/15	PHO, YPT, YOT	SP budget, officer time	To improve joint working between services for 16/17 year olds, enabling transition towards independent living with tailored support to reduce repeat
	Promote young person involvement to fully participate in the delivery of	2014/ 2015	PHO, YPT, forum members,		homelessness.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
	youth service. Develop emergency respite accommodation for 16 – 21 year olds to provide multi agency approach to prevent homelessness.		accommodation providers DM Commissioning, PHO, SDO, YPT Policy Officer	S/ P Budget. Budget TBC	To be actively involved with Homeless Forum and identify and deliver effective services for young people. A crisis intervention centre made available for young people threatened with homelessness, offering a holistic approach to facilitate them retuning back home and preventing homelessness.
5C: Improve partnership working and communication with key agencies, police, probation	Review current housing policy and procedures to identify gaps in provision and information required from providers to increase housing accommodation for offenders.	2014/ 2015. April 2014.	PHO, Probation, PPO, Policy, RPs PHO, SDO,	Within existing resources Within existing	Identify and address barriers to increase the availability of housing provision for offenders.
and housing providers to	reluctance to house Schedule 1 offenders		Probation, RPs	resources	the housing issues faced by offenders.
address the growing housing need for offender	To continue the integrated approach to offender management between criminal justice agencies and Homelessness services.	Over the strategy period	PHO Probation, Cheshire Police RPs	Staff time	To reduce the risks to the community posed by those individuals who are homeless and have a pattern of prolific, drug related offending.
5D: Joint partnership working with agencies, police and housing	Increase partnership working with domestic abuse services, Police and registered providers to offer a range of rehousing options and solutions to homeless victims of abuse.	Over the strategy period	PHO, SDO DV Co-ordinator Policy officer, DA service providers	Within existing resources	Improve access to suitable accommodation options and improve service delivery to support victims of abuse to prevent homelessness.

Priority	Action	By when	Responsibility	Resources	Success measures and outcomes
providers to offer options and solutions to victims of domestic abuse to	Develop temporary dispersed housing provision to accommodate families with dependent male children and male victims fleeing domestic abuse.	Over the strategy period	DM Commissioning. PHO, SDO, DV Co- ordinator, RPs	Budget to be identified.	Increased housing provision for victims of abuse to provide safe accommodation with tailored support.
support them to remain within their home	Work in partnership with Sanctuary Scheme to develop safe security options to facilitate victims of abuse to remain in or return to their homes.	Over the strategy period	DM Commissioning, PHO, SDO, Sanctuary Scheme providers	SP Funding	Reduce the number of male/females becoming homeless due to domestic abuse.
	Improve the substance misuse service response to drug and/or alcohol related domestic abuse.	2014/ 2015	Substance Misuse Service, Domestic Abuse Service, PHO	Budget TBC	The improvement of identification of victims and perpetrators of domestic abuse provided by substance misuse service staff and detailed within homeless assessment.
	Agree a referral criteria and pathway plan between the substance misuse, domestic abuse and Housing Solutions Services.	April 2014	PHO Commissioner, Substance Misuse Service, Domestic Abuse Service	Within existing resources	To reduce the impact of parental substance misuse and domestic abuse on children and young people.

Strategic objective	Strategic objective 6: Minimise the use of temporary accommodation by facilitating the supply of secure move-on accommodation								
Priority	Action	By when	Responsibility	Resources	Success measures and outcomes				
6A: Reduce the use of temporary accommodation	Continued achievement of performance -indicator to reduce the use of temporary accommodation.	P1E – over strategy period	PHO HST	Within existing resource.	Reduce homeless levels and dependency upon temporary accommodation services.				
(including B&B) to maximise the use of prevention options available to reduce	Reduce the number of households in temporary accommodation by 10% annually.	P1E – over strategy period	PHO HST	Within existing resources	Reduced level of homeless households placed in temporary accommodation by fully utilising prevention service options available to reduce homelessness.				
homelessness	Evaluate and develop temporary accommodation provision within the district to ensure it meets the needs of statutory homeless households.	2015 Reviewed quarterly	DM Commissioning, PHO, SDO, Policy Officer	Budget TBC	Reduced /remodelled supported housing provision to address future housing trends and meet the needs of statutory homeless households. Reduce level of voids and rent loss.				
	Deliver sufficient, appropriate temporary accommodation suitable for homeless prevention at crisis point.	2013/2014	PHO, Supported Housing Providers	Within existing resources	Improved prevention assessment process to tackle homeless crisis and developed change in service/accommodation provision to promote prevention solutions, including private rented sector.				

11. Glossary

Benefit cap	There's a limit on the total amount of benefit that most people aged 16 to 64 can receive. This is called the benefit cap. It is \pounds 500 for couples with or without children living with them; \pounds 500 for single parents with children living with them; and \pounds 350 for single adults who don't have children or whose children don't live with them.
BGS	Bond Guarantee Scheme This scheme is aimed to help those who are homeless or threatened with homelessness and can provide a landlord with a bond guarantee certificate, which confirms the deposit amount will be paid should it be reasonably required at the end of the tenancy.
CCG	Clinical Commissioning Group CCGs are responsible for implementing the commissioning roles as set out in the Health and Social Care Act 2012. They are groups of GP practices that are responsible for commissioning health and care services for patients.
CLG	Communities and Local Government
DHP	Discretionary Housing Payment These can be made by the council if a person's housing benefit or council tax benefit is less than the full amount of their rent or council tax.
DM	Divisional Manager Refers to the Divisional Manager of the Commissioning section of the council, where the Housing Solutions Team sits.
DV	Domestic Violence
DWP	Department for Work and Pensions
GIFT Initiative	Halton Borough Council operates a 'gift' initiative for $18 - 25$ year olds, which provides some essential items to assist in furnishing their home.
Gold standard	In its report 'Making every contact count: a joint approach to preventing homelessness' CLG set local authorities ten local challenges, which will lead to homelessness teams delivering a 'gold standard' service. The council pledges, through implementation of this strategy, to meet this gold standard.
ННТ	Halton Housing Trust The council transferred its housing stock to HHT in 2005.
HSO	Housing Solutions Officer
HST	Housing Solutions Team The team carry out assessments under statutory homelessness legislation and carry out homelessness prevention work.

Local connection	Halton Borough Council will only have a duty to assist someone under homelessness legislation if that person has a local connection to the borough. If their normal place of residence is in another authority area then Halton will refer them to that authority.	
Localism Act (2012)	This provides new freedoms and flexibility for local government; new rights and powers for communities and individuals; a much more democratic planning system and decisions about housing are taken locally.	
MAPPA	Multi-Agency Public Protection Arrangements	
	The principal multi-agencies are the Probation Service, Prison Service, Police and Local Authorities and collectively they are known as 'Responsible Authorities.' The arrangements are a set of procedures for dealing with registered sex offenders and other violent individuals who pose a threat of serious harm to the public.	
Mortgage Rescue	The Housing Solutions Team has a dedicated Mortgage Rescue Adviser to help those who are facing repossession. It provides advice on the help available, negotiating with mortgage lenders and attending court hearings.	
NHAS	National Homelessness Advisory Service	
Nightstop	A supported lodgings scheme which enables young people to stay with a volunteer host family for an emergency period, whilst more suitable short-term housing is found or until mediation leads to the young person returning to their family home.	
NSNO	No Second Night Out	
	A campaign to ensure no-one spends more than one night on the streets in the Liverpool City Region. Halton participates in this scheme along with six other councils in the city region. As part of the scheme, people are urged to call a helpline if they see someone sleeping rough. The relevant agencies are then alerted in order to find somewhere for the person to sleep.	
РНО	Principal Housing Solutions Officer	
PPO	Persistent and Prolific Offenders	
PPP	Property Pool Plus	
	This is the Choice Based Lettings (CBL) scheme used by Halton, Knowsley, Liverpool, Sefton and Wirral councils and over 20 housing associations to advertise and let their vacant properties. Housing Associations advertise their available vacancies every week through Property Pool Plus. The scheme offers increased choice allowing applicants who are looking for affordable housing to see what vacant properties are available, and express an interest in selecting a suitable new home. PPP informs applicants what priority banding they have, based on the urgency of their need to move from their current property. Properties are advertised and applicants are invited to place a bid (express an interest). The system then puts people into priority order for the property they have bid for, based on their priority band and application date.	
PPP Housing Register	The register has been developed by Halton, Knowsley, Liverpool, Sefton and Wirral Councils in partnership with over 20 Housing Associations across Halton and Merseyside. A single application to join the Housing Register allows individuals to be considered for properties advertised by all the participating housing associations.	

PRSO Policy	Private Rented Sector Offer Policy Since November 2012 local housing authorities have been able to discharge their duty to secure settled accommodation to homeless households by using privately rented accommodation, as well as homes owned or managed by social landlords. This creates a greater range of options for local families, however the local housing authority must ensure that decisions of suitability are made objectively and take into account both the circumstances of the family and the availability of homes in the area.
RP	Registered Provider (of social housing) RPs are more commonly known as housing associations and have previously been referred to as Registered Social Landlords (or RSLs). They are independent societies, bodies of trustees or companies established for the purpose of providing low-cost social housing for people in housing need on a non-profit-making basis.
Sanctuary Scheme	This is a multi-agency initiative that is focused on victims of domestic violence. Its aim is to enable households where the person is at risk of violence to remain safely in their own homes by installing sanctuary measures.
SDO	Service Development Officer
Southwark Protocol	The protocol aims to provide a co-ordinated response to the prevention of homelessness amongst 16-17 year-olds, ensuring they receive the right level of support and can access appropriate and suitable accommodation where necessary. The protocol was a response to judgements by the House of Lords which reaffirmed and clarified that the duty under Section 20 of the Children Act 1989 takes precedence over the duties within Part 7 of the Housing Act 1996 in providing for children in need who require accommodation.
SP	Supporting People Originally ring-fenced to fund housing related support services for vulnerable adults, including homeless people. In 2009 local authorities were no longer required to spend this funding on housing related support. In 2011 decisions about where to allocate funds became entirely at the discretion of the local authorities. Thus, SP no longer exists in a defined way and is managed in different ways by different local authorities.
Statutory homelessness	This is where a household is deemed to be in priority need and unintentionally homeless under the relevant legislation and in this case the council has a duty to find accommodation for the household.
Youth Hubs	These are venues for young people (aged 13-19) youth groups, voluntary organisations and partners, where young people can have a say in activities in their local area.
YOT	Youth Offending Team This is a multi-agency team that is co-ordinated by a local authority with the intention of reducing the risk of young people offending and re-offending, and to provide counsel and rehabilitation to those who do offend. YOT engages young offenders in a wide range of tasks designed to put something positive back into the local community through unpaid activities.

Agenda Item 7b

REPORT TO:	Safer Policy & Performance Board
DATE:	11 March 2014
REPORTING OFFICER:	Strategic Director - Communities
PORTFOLIO:	Community Safety
SUBJECT:	Safer Policy and Performance Board Work Programme 2014/15 – Scrutiny Topic
WARD(S)	Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 This report is the first step in identifying a scrutiny topic for the Board to examine during 2014/15.

2.0 **RECOMMENDATION: That the Board:**

- i) Put forward and debate its initial suggestions for a Topic to be included in the Board's 2014/15 work programme;
- ii) Agree the Scrutiny Topic to be examined during 2014/15, with a view to an associated topic brief being developed and agreed at the next meeting of the Board.

3.0 SUPPORTING INFORMATION

- 3.1 Whilst 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. This may include members of the Council's Executive, other non-Executive Members, officers, the public, partner and other organisations, performance data and inspections.
- 3.2 Prior to determining the Board's preferred Topic, the PPB may wish to take soundings from relevant Executive Board portfolio holders and other key partners.
- 3.3 Policy and Performance Board input into the business planning process and the setting of priorities for the Directorate is an important part of this process. Key priorities for development or improvement in 2014 2017 were agreed by Members at the Safer PPB meeting on 12th November 2013. Members may feel they would want to select a topic during 2014/15 that supports one of these areas. The main priorities identified at that meeting were :-
 - Reduce alcohol abuse and domestic violence;
 - Safeguarding; and
 - Consumer Protection.

4.0 **POLICY IMPLICATIONS**

4.1 The outcome from the Scrutiny Topic may result in the need to review associated policies.

5.0 **OTHER/FINANCIAL IMPLICATIONS**

5.1 The outcome from the Scrutiny Topic may result in recommendations which have financial or other implications and these will be considered as necessary.

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

6.1 **Children & Young People in Halton**

None identified.

6.2 Employment, Learning & Skills in Halton

None identified.

6.3 A Healthy Halton

None identified.

6.4 A Safer Halton

Any topic identified will support the Council's strategic priority of Improving safety.

6.5 Environment and Regeneration in Halton

None identified.

7.0 **RISK ANALYSIS**

7.1 No risks associated with this report have been identified.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 An Equality Impact Assessment is not required for this report.

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

9.1 None under the meaning of the Act.

<u>Appendix 1</u>

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
Why?	Evidence for why a topic should be explored and included in	the work
	amme	
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	nd/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	e.g.
	apparent from consultation, complaints or the local press	
4	Has the Topic been identified through performance monitoring e.g.	Pls
	indicating an area of poor performance with scope for improvement?	
5	Has the Topic been raised as an issue requiring further examinatio	n
	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.	
	pattern of major overspending or persisting staffing difficulties that could	d
	undermine performance?	
7	Has some recent development or change created a need to look at t	
	Topic e.g. new government guidance/legislation, or new research findir	
8	Would there be significant risks to the organisation and the communi	ty as
	a result of not examining this topic?	
	her? Reasons affecting whether it makes sense to examine an	identified
topic		1
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 answ	
	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 outwe	igh
	the costs, making investment of time & effort worthwhile?	
12	Are PPBs the best way to add value in this Topic area? Can they ma	ike a
	distinctive contribution?	
13	Does the organisation have the capacity to progress this Topic? (e.g.	
	related to other review or work peaks that would place an unacceptable	e
	load on a particular officer or team?)	
14	Can PPBs contribute meaningfully given the time available?	

DATE: 11 March 2014

REPORTING OFFICER: Strategic Director - Communities

PORTFOLIO: Health & Adults

SUBJECT:Annual Report 2013/14 for the Safer Policy and
Performance Board

WARD(S): Borough-wide

1.0 **PURPOSE OF THE REPORT**

1.1 To present the Annual Report for the Safer Policy and Performance Board for April 2013 - March 2014, attached at Appendix 1 to this report.

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

3.0 **SUPPORTING INFORMATION**

3.1 During 2013 – 14, the Safer Policy and Performance Board have looked in detail at many of Safer priorities during this period. Further details of these are outlined within the appended Annual Report.

4.0 **POLICY IMPLICATIONS**

4.1 There are no policy implications arising directly from the Annual Report. Any policy implications arising from issues included within the Annual Report will have been identified and addressed throughout the year via the relevant reporting process.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 As with the policy implications, there are no specific or other implications arising directly from the report. Any finance implications arising from issues included within it would have been identified and addressed throughout the year via the relevant reporting process.

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

6.1 Children & Young People in Halton

There are no specific implications as a direct result of this report however the health needs of children and young people are an integral part of the Health priority.

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

None identified.

6.3 A Healthy Halton

The remit of the Health Policy and Performance Board is directly linked to this priority.

6.4 **A Safer Halton**

None identified.

6.5 Halton's Urban Renewal

None identified.

7.0 **RISK ANALYSIS**

7.1 None identified.

8.0 EQUALITY AND DIVERSITY ISSUES

8.1 An Equality Impact Assessment is not required for this report.

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

None under the meaning of the Act.

Cllr. Shaun Osborne Chairman	ANNUAL REPORT SAFER HALTON POLICY AND PERFORMANCE BOARD APRIL 2013 – MARCH 2014
	"Safety and people's perception of being safe in all its forms remain a major issue in Halton. The Board has, and will continue to focus its energy on making Halton residents feel safe. I would like to offer my sincere thanks to Board members who have worked hard to this end.
	The Board has had a very challenging programme of monitoring, scrutiny, and policy development, because 'Safer Halton' is a truly cross-cutting agenda. I believe it is making a considerable contribution to improving the way the Council and its partners work together to improve the quality of life in Halton.
	I would like to thank and congratulate Norman for his contribution and his comprehensive Night Time Economy report and his support as Vice Chair. Thank you also to Chris Patino, Mike Andrews, Emma Sutton-Thompson, Janet Guy and Lynn Derbyshire for all the support, advice and knowledge and of course all the other members whose contribution and debate make a difference to outcomes without which we would not make progress as a scrutiny and policy board. To all the other staff and members, who have contributed throughout this year, thank you."
	Councillor Shaun Osborne Chairman, Safer Halton Policy and Performance Board
	MEMBERSHIP AND RESPONSIBILITIES
	During 2013/14 the Board comprised eleven Councillors – Councillors Osborne, Plumpton-Walsh, Edge, J Gerrard, Gilligan, Hill, Hodge, Lea, Lloyd-Jones, Nolan and Sinnott.
	The Board is responsible for scrutinising performance and formulating policy in relation to Community Safety, Domestic Abuse, Safeguarding Adults Environmental Health and the Safer Halton Partnership.
	Topic Groups for 13/14:- • Night Time Economy

The full Board met 5 times during the year.

The main initiatives of the Board's work for 2013/14 are as follows: -

Overview and Scrutiny

The Board continued its scrutiny and policy development role in this crucial area, and completed a Topic Group focussing on the *Night Time Economy*, what works well in Halton and what could be improved to provide a safe, accessible, well managed night time economy that meets the needs of residents and businesses and attracts visitors to the borough. The Topic Group developed an Action Plan with recommendations that will be monitored through the Board.

The *Police and Crime Commissioner* (PCC), John Dwyer, has been in place since November 2012, along with the Police and Crime Panel. Councillor Osborne and Cargill are Halton representatives on the panel which scrutinises the activities of the PCC. Throughout 2013/14, the Board has received regular updates from the PCC and Panel, including a presentation from John Dwyer at the Board on 12th November 2013.

The Board received the Safer Halton Partnership **Drug Strategy** 2014 – 2018. The strategy was designed to be a short document that focussed on the strategic objectives and priorities linking to a drugs service action plan that would be monitored by the Substance Misuse task group with quarterly themed updates to the Safer Halton Partnership Board.

The Board received the **Dementia Strategy** 2013 - 2018. This strategy has been developed as a direct response to the National Dementia Strategy – Living Well with Dementia (DH 2009). The local strategy has adopted the national targets as well as developing a specific implementation plan to deliver a range of improvements for people diagnosed with dementia and their carers.

The *Communities Directorate Business Plan* was reviewed by members and priorities for 2014/15 were agreed as follows:

- Reduce alcohol abuse and domestic violence;
- Safeguarding; and
- Consumer Protection.

Community Safety

The multi-agency *Hate Crime and Harassment Reduction Strategy* has been reviewed and updated, following the launch of the Government's plan to tackle Hate Crime "Challenge It, Report It, Stop It: The Government's Plan to Tackle Hate Crime" March 2012. The revised strategy continues to promote effective and co-ordinated action against hate crime. Work continues with the Safer Halton Partners, including the Police, Housing, voluntary sector support groups and the Council to gain a better understanding of reported incidents within Halton. In line

with this a new Hate Crime Scrutiny Panel has been established.
 The Board considered the <i>Cheshire Fire and Rescue Service Annual Report</i> for 2012/13 and an update of the Integrated Risk Management Plan (IRMP). The report highlighted that there had been a 25% reduction in primary fires, which represented the lowest number ever recorded. Injuries had also reduced and had been categorised as slight with no serious injuries. In respect of the IRMP it was reported that the delivery plans were on track as follows: Widnes – remove the second fire engine and provide additional cover from the new whole time station at Penketh; and Runcorn – change how the second fire engine was crewed from whole time to On-call (24/7).
The Board received an update regarding the <i>Bonfire Removal Initiative</i> from the proposed operation for 2013. This initiative sets out to improve community safety by removing unauthorised and uncontrolled bonfires before they are ignited. It was reported that discussions had taken place with housing partners, the Police and Cheshire Fire and Rescue Service and funding had been jointly established to deal with issues around Mischief Night and Bonfire Night.
The Board considered a report regarding an <i>Alleygate Proposal</i> for Elkan Road, Widnes. A request had been made for the installation of a gate on Elkan Road to reduce the incidents of anti-social behaviour on the pathway that runs between two properties. After much discussion, the Board unanimously supported the installation of the alleygate and recommended that consideration be given to a spring lock and that the decision on a partial or full closure be decided by Ward Councillors.
Domestic Abuse
The Board received regular updates regarding Domestic Abuse and Sexual Violence which included:
The locally delivered <i>Perpetrator Programme</i> was currently under development with funding in place to deliver a 26-week programme for eight male perpetrators. The programme would initially be delivered as a pilot. If successful, the NHS Halton CCG had agreed to assist in determining a sustainable pathway.
The Children and Enterprise Directorate were currently commissioning a service for children and young people affected by domestic violence, based on an analysis of need in Halton.
With an amendment to the definition of domestic violence to include 16 and 17 year olds, the Government has funded <i>Co-ordinated Action Against Domestic Abuse</i> (CAADA) to support local authorities to train a <i>Young Persons Independent Domestic Violence Advocate</i> (YIDVA) and to develop

The *Rape and Sexual Abuse Support Centre* (RASASC) had published a review of the service. The report summarised the hard and soft findings of the review and the importance of the service in the current environment. The profile of sexual violence had increased on the political, health and criminal justice agenda, but better funding was required to enable RASASC to support and counsel more survivors through the legal system and beyond.

Safeguarding Vulnerable Adults

The Board received regular updates regarding Safeguarding Adults. The *Integrated Safeguarding Unit* is now in its second year, funded jointly with the NHS Halton CCG. There was now a strong and growing evidence base for the effectiveness of behaviour analytic approaches and these had been shown to significantly reduce the frequency, intensity and duration of challenging behaviour.

The Board was advised that an internal *peer challenge* review had been undertaken during June – August 2013 based on the "Standards for Adult Safeguarding Peer Reviews". A Peer Challenge Team had been formed to take forward the review and undertake a self-assessment against the Adult Safeguarding Standards and to write a report for the Challenge Team.

Recommendations from the report had been converted into an Action Plan which would be progressed during 2014 and monitored through the Safeguarding Adults Board.

Environmental Health

The Board considered an update report on the *safety and control of cosmetic treatments*. The Board was advised that considerable progress had been made in addressing illegal tattooists, e.g. the health and safety team were using new powers which allowed Local Authorities to obtain a court order to intervene were a premises, person or thing presented a risk of contamination or infection. Local Authorities, however, had to apply to a magistrate for a court order and demonstrate that a risk to health existed. In the last six months the team had executed seven warrants with support from Cheshire Police and seized tattooing equipment from five illegal tattooists. In August 2013, the Health and Safety Team with support from Trading Standards had undertaken a test purchase operation on nine sunbed operators, using a 16 year old volunteer. Unfortunately, five of the operators had failed the test purchase and allowed the 16 year old to purchase sunbed sessions. The Board noted that currently 90.3% of Halton premises were broadly compliant with the law in the National Food Hygiene Rating Scheme.

Members of the Public are welcome at the meetings of the Board. If you would like to know where and when meetings are to be held or if you would like any more information about the Board or its work, please contact Chris Patino (0151 511 8556) or email at <u>Chris.Patino@halton.gov.uk</u>