

The Sustainable Community Strategy for Halton 2011 – 2016

Mid-year Progress Report 01^{st} April – 30^{th} Sept 2012



Document Contact
(Halton Borough
Council)

Hazel Coen (Divisional Manager Performance & Improvement) Municipal Buildings, Kingsway Widnes, Cheshire WA8 7QF

hazel.coen@halton.gov.uk

This report provides a summary of progress in relation to the achievement of targets within Halton's Sustainable Community Strategy 2011 - 2016.

It provides both a snapshot of performance for the period 1st April 2012 to 31st September 2012 and a projection of expected levels of performance to the year-end.

The following symbols have been used to illustrate current performance as against the 2012 - 13 targets and as against performance for the same period last year.



Target is likely to be achieved or exceeded.



Current performance is better than this time last year



The achievement of the target is uncertain at this stage



Current performance is the same as this time last year



Target is highly unlikely to be / will not be achieved.

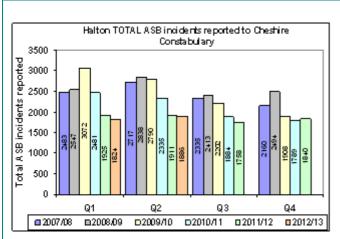


Current performance is worse than this time last year

Page	Ref	Descriptor	2012 / 13 Target	Direction of travel
4	SH 1	Reduce Actual Number of ASB incidents recorded by Cheshire Police broken down into youth and adult incidents.	✓	t
6	SH 2	Reduce the number of Deliberate Fire incidents (NI33)	✓	1
8	SH 3	Reduced perception by Residents of antisocial behaviour (NI 17)	N/A Survey in 2013/14	2011/12 Survey
10	SH 4	Safeguarding Children: Reduce the Number of Young People who repeatedly run away in Halton (New Measure)	N/A	1
11	SH 5	Vulnerable Adults – Safeguarding: Increase the percentage of VAA Assessments completed within 28 days.	✓	#
12	SH 6	Reduce repeat incidents of domestic abuse within the MARAC Cohort (NI32)	?	#
14	SH 7	a) Increase the percentage of successful completions (Drugs) as a proportion of all in treatment (over 18)	?	#
15		b) Increase the percentage of successful completions (Alcohol) as a proportion of all in treatment (over 18)	New Measure	N/A
16	SH 8	a) Reduce the number of individuals re-presenting within 6 months of discharge (Drugs) [New Measure]	?	1
17		b) Reduce the number of individuals re-presenting within 6 months of discharge (Alcohol) [New Measure]	New Measure	N/A
18	SH 9	Reduce the rate of young people (0-18) admitted to hospital due to substance misuse (will include alcohol)	✓	1
19	SH 10	Reduce Alcohol related hospital admissions (NI 39)	✓	Û
21	SH 11	Reduce the re-offending rates of repeat offenders (RO's in the Navigate IOM scheme) (Formerly NI 30)	✓	Û
23	SH 12	Reduce the number of first time entrants to the Youth Justice System (formerly NI111).	✓	\Leftrightarrow
25	SH 13	Use of Custody (New Measure)	✓	1
26	SH 14	Reduce the proportion of individuals within the Navigate cohort who's offending is substance misuse related. (Placeholder New Measure)	New Measure	N/A
27	SH 15	Reduce the re-offending rate of young offenders (Formerly NI 19)	New Measure	N/A
28	SH 16	Reduce serious acquisitive crime (Formally NI16)	✓	1
30	SH 17	Reduce Assault with Injury crime rate (Formerly NI 20) New Revised Measure	✓	1

SCS / SH1

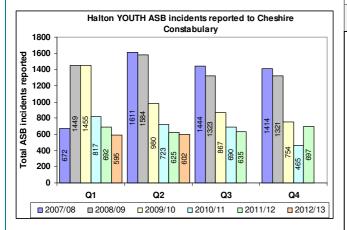
Reduce Actual Number of AASB incidents recorded by Cheshire Police broken down into youth and adult incidents



2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
7434	8065	3710		✓	1

Data Commentary:

Actual number of antisocial behaviour (ASB) incidents reported to the Cheshire Police, cumulatively in the year.



Performance Commentary:

During April to September 2012 a total of 3710 incidents relating to Anti Social Behaviour were reported to Cheshire Constabulary from the Halton Area equating to a 3.3% reduction when compared to the same period during the previous year (3836 to 3710). Projected year end estimated volumes equate to 7420 incidents based on current half year count, therefore, we are likely to achieve the 2012/13 target.

With regard to Youth related Anti Social Behaviour the Halton Area reported 1197 incidents during April to September 2012 equating to a 9.1% reduction when compared to the same period during the previous year (1317 to 1197).

(Data as provided is not split by Adult and Youth related incidents – the youth element is retrieved via using the QAL qualifier within data extraction and a common word search with reference to youth)

Summary of Key activities taken or planned to improve performance:

Working closely with the ASB Housing and Enforcement Officer has resulted in a significant reduction of anti- social behaviour suffered particularly in areas identified in the Tasking Coordination Meeting -Problem Profiles. Cases are also discussed in the Multi Agency Meeting and vulnerable victims and witnesses have received re-assurance visits from PCSOs and the officers engaged with the Tasking Vehicle when it is deployed.

The ASB victim and Witness Support Service have also worked closely with the Youth Offending Team to ensure the views and opinions of victims and witnesses of Anti-Social Behaviour are canvassed and where appropriate they are given the opportunity to participate in Referral Panels

(attending panel meetings), Restorative Conferences and other community/restorative disposals.

Considerable reductions have occurred across Runcorn in Qtr. 1 (117 less incidents) and Qtr. 2 (47 less incidents); however, Widnes has shown an increase in Qtr. 1 (20 more incidents) and Qtr. 2 (22 more incidents). Hotspots will continue to be monitored and addressed noted in April, May and June most marked in Broadheath and Riverside wards, with increases occurring more on a Saturday evening from 20hrs -23hrs in Broadheath and a Tuesday and Sunday between 16-21hrs in Riverside. Increases were also noted in Youth ASB in the wards of Broadheath and Ditton during July and Birchfield and Hough Green in August.

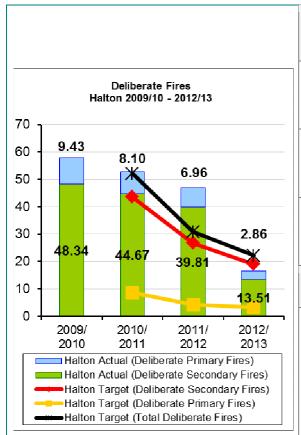
Feedback was received on a bid to secure continuation funding submitted to the "lottery' feedback on 19th July 2012 and will be re-submitted in November 2012 by the service, to secure continuation funding via the National Lottery.

Thirty four referrals were made between April 2012 to September 2012 to the Victim & Witness Coordinator and sixty individuals are currently receiving support at the end of Quarter 2.

Training of five volunteer panel facilitators was completed on 23rd June 2012 and the first Neighbourhood Resolution Panel was convened on 13th September 2012 following the Official launch of the project on August 20th 2012, with articles published in the Local press.

A briefing was also made to local schools on October 1st 2012 and the Safer Policy and Performance Board, updated with a presentation and position statement on 18th September 2012.

SCS / SH2 Reduce the number of Deliberate Fire incidents (NI33)



	2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
Primary	6.96	3.18	2.86		✓	û
Secondary	39.81	19	13.51		✓	û
Total	46.77	22.18	16.37		✓	☆

Data Commentary:

Data relates to all fire incidents deemed to have been caused by deliberate ignition, between 1 April and 30 September 2012.

It is the number of deliberate:

- (i) primary and
- (ii) secondary fires per 10,000 population.

This is an APACS indicator: SPI 7.1 deliberate fires.

- Deliberate fire is any fire where the cause of fire is suspected non-accidental.
- Primary fire is any fire involving casualties OR any fire involving property (including non-derelict vehicles) OR any fire where at least 5 fire appliances attend.
- Secondary fires are reportable fires that were not involving property; were not chimney fires in buildings; did not involve casualties; were attended by four or fewer appliances. An appliance is counted if ether the appliance, equipment from it or personnel riding in it, were used to fight the fire. Derelict building or derelict vehicle fires are secondary fires.

Performance Commentary:

The direction of Travel for deliberate fires in Halton is positive, with projected year-end figures suggesting an outturn positively below target by at least 10%. This trend continues across the whole of Cheshire and can, in part, be contributed to poor weather conditions recently.

Summary of Key activities taken or planned to improve performance:

Highlights during the last 6 months include:

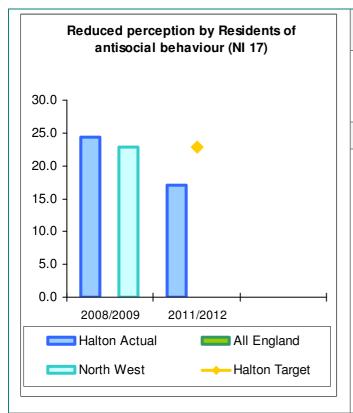
 Youth engagement activities including: RESPECT, the Phoenix Project, 2 X Fire Cadet units, Princes Trust and Fire Station Community Garden at Runcorn.

- Established Police Notification Reporting (PNR) process so deliberate fire information and intelligence gathered by fire crews is user friendly and accessible between partners. This working relationship has supported numerous convictions for arson during last 6 months.
- Fire stations in Halton produce a monthly arson report to identify trends and peaks in arson activity which is shared with partners from the Borough Community Safety Team and the Halton Tasking and Coordination Group.
- Fire stations have dedicated 'arson routes' which are reviewed monthly to encompass the areas of greatest anti-social fire activity. Crews patrol the areas in their fire appliances to act as a deterrent and provide reassurances to the community. They actively knock on doors and remind residents to stow away bins and likewise, businesses to arrange for skips to be removed once full.
- Advertising/ Marketing on fire appliances ref crime and arson prevention.
- Fitting of Domestic Fire Retardant Letter box covers to the vulnerable.
- Fire Safety Enforcement activity in areas of high risk for arson.
- Joint SMART Water/crime prevention/home fire safety initiatives with Police and Partners.
- The concept and development of Phoenix Cadets this is an addition to the current Phoenix Project in Halton to extend the Fire Cadets out to primary age children in schools within the community.

Future Activities During Next 6 Months:

- Multi-agency Halloween and Bonfire initiative comprising Elimination, Education, Engagement & Enforcement activities.
- Fitting Wheelie Bin Locks in areas of high activity or to vulnerable households

SCS / SH3 Reduced perception by Residents of antisocial behaviour (NI 17)



2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
17%		ey is 2 years		N/A	2011/12 Survey

Data Commentary:

Local Measures focusing on perceptions of antisocial behaviour, which combines responses to seven questions about antisocial behaviour.

Local authorities are a key partner agency with the police in tackling ASB and have responsibilities to prevent ASB. They are an applicant agency for antisocial behaviour orders (ASBOs); they lead on housing-related ASB, tackling litter/graffiti, and are responsible for licensing of premises and in securing and designing environments to reduce likelihood of alcohol-fuelled disorder and ASB.

Performance Commentary:

From the 2011 resident's survey a figure for NI17 is 17%, showing improvement, a reduced perception by residents of Antisocial behaviour. However this comes with a number of caveats.

 It cannot be directly compared to the 2008 place survey, carried out by MORI (24.8% Halton, NW Average 22.9%), due to changes in methodology between the two surveys. Therefore should now act as a benchmark figure for future resident surveys.

There is no North West comparison figure available and is unlikely to be in the future. This is because there is no statutory requirement for Local Authorities to collect NI17 information.

Summary of Key activities taken or planned to improve performance:

In the absence of a nationally prescribed survey (previously the Place Survey), a residents survey undertaken in October 2011 to capture community perceptions and satisfaction levels.

This includes the following questions:

- 1) How much of a problem respondents feel 'Teenagers hanging around the streets' 'Vandalism, graffiti and other deliberate damage to property and vehicles' 'People using or dealing drugs' 'abandoned or burnt out cars' and 'people being drunk or rowdy in public spaces' to be a very big or fairly big problem within their local area
- 2) Respondents experience of the above in the last 12 months

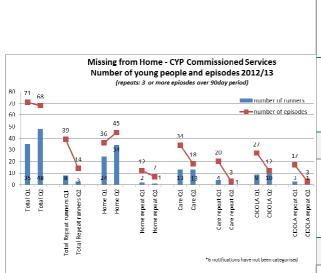
- 3) How safe respondents feel 'inside your home' 'in your local area during the day' and in your local area after dark'
- 4) Confidence in the police in respondent's local area.

During February 2012, the Research & Intelligence team reported on the results of the residents' survey. About 1,800 residents returned filled in forms, sufficiently covering all wards and Area Forums to give a representative sample of the borough. The response rate was better than the previous survey carried out by MORI.

The full results of the survey are available from www.halton.gov.uk/research.

It is intended to undertake future surveys every two years. In addition to the resident's survey measures, the previous NI 17 (Reduced perception of antisocial behaviour) measure will also be reported to inform perceptions of anti-social behaviour. It will then be determined as to whether future targets will be set based on NI 17 or a selection of indictors as established and a baseline captured in 2011.

SCS / SH4 Safeguarding Children: Reduce the Number of Young People who repeatedly run away in Halton (New Measure) – repeatedly: 3 or more episodes over a 90 day period



					001	te	d 1	0	Ch	es	hir	e (Co		ab	oul	an	ents /
\ \ \	1	Ž	1	↑	¥	*	<i>*</i> /	<u>, </u>		<u> </u>	√ √	^	Ì		ý	*	<u>~</u>	- EASTERN - WESTERN - HALTON - WARRING
0.11000(709	92/3001 20	03 1008/39	04/1008/19	01/600110	01/5001 70	03/6001 60	0410009/10	0,11010/11	11/0101 ZO	C3 1040/81	Q4 1010/h1	0.11011/12	02 1011/12	Q3 1011/12	0,41011,02	Q11012/J3	02 1012/13	

	2011/12 Actual	2012/13 Target	2012/13 Qtr 1	2012/13 Qtr 2	Current Progress	Direction of Travel
e n c	revious ommission d service o omparable ata	TBC	8 repeat runners 39 episodes	3 repeat runners 14 episodes	N/A	û
y in Q	cheshire constabular reported ncidents & Q2: 19	TBC	179	137	N/A	û

Data Commentary:

Data obtained from Children and Enterprise commissioned service. Targets to be determined with the New provider Pan Cheshire.

Performance Commentary:

Young People who have reported missing on <u>3 or more</u> occasions from their Home Environment, Care Homes and CICOLAS have all reduced this quarter (using commissioned Service data). Young People who have reported missing <u>less</u> than 3 occasions have however increased.

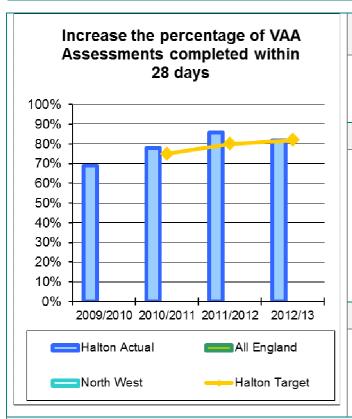
Commissioned data is considered alongside Cheshire Constabulary Data in order to ensure that numbers correlate. However, Constabulary data does include both Adult and youth incidents, restrictions in the data quality prevent separation, numbers should therefore be viewed as an indicator only. Incident numbers reported to Cheshire Constabulary have reduced significantly this quarter for Halton.

There will be further work undertaken in the next couple of months with the commissioned service to analyse data in more detail.

Summary of Key activities taken or planned to improve performance:

A Pan Cheshire 24 hour helpline has been implemented. Key links have also been made with schools, youth provision and residential providers within the borough. A group of young people that have used the service are also going to undertake some quality assurance exercises around the service. Plans are also being developed around preventive work with targeted groups of young people and doing direct work with families and the risk and dangers of going missing.

SCS / SH5 Vulnerable Adults – Safeguarding: Increase the percentage of VAA Assessments completed within 28 days.



2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel			
85.78	82%	81.94%		✓	#			
Data Commentariu								

Data Commentary:

The higher the number of VAA's completed within 28 days ensures that investigations are conducted in a timely manner and the resulting outcome delivered quickly for the alleged victim. This potentially reduces the impact that abuse can have on those involved.

Performance Commentary:

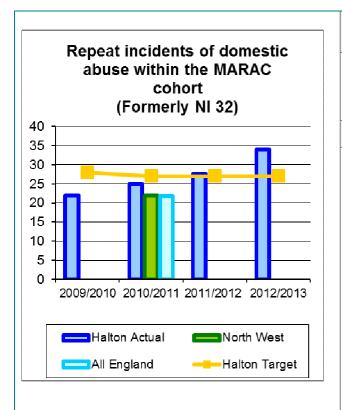
Current progress suggests that the target will be exceeded again this year.

Summary of Key activities taken or planned to improve performance:

The reconfiguration of adult social care and the establishment of an integrated safeguarding unit has further enhanced the capabilities of the care management teams to investigate referrals and ensure positive outcomes for alleged victims. This has been further supported by the use of IT systems and risk management processes.

Since its establishment, the Integrated Safeguarding Unit (ISU) have developed an operational Thresholds Guidance document. This guidance is directed at providers/practitioners and aims to ensure all adult protection issues and concerns are reported and investigated at the appropriate level and to broker consistency of approach across agencies. New documentation for investigating cases has been created and is currently being benchmarked against recent cases to ensure it is fit for purpose prior to being approved. Implementing this guidance will help to strengthen procedures, promote consistency of approach across all agencies as well as ensuring the ISU are fully informed of all safeguarding investigations to enable thorough monitoring to take place.

SCS / SH6 Reduce repeat incidents of domestic abuse within the MARAC Cohort (NI32)



2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
27.6%	27%	34%		?	#

Data Commentary:

For the purposes of this indicator, a repeat case occurs when a case that is reviewed at a MARAC has also been seen or reviewed at the same MARAC or a different MARAC within the same Local Area Agreement within the preceding 12 months (from the review). Each repeat case will also be counted each time it is reviewed in a given 12 month period (i.e. If a case first comes to MARAC in January and then is reviewed in February and July this will count as two repeats). If a case was reviewed at a different MARAC outside of the Local Area Agreement within the preceding 12 months, this will not be counted as a repeat.

Performance Commentary:

Halton MARAC has a current rolling NI 32 performance level of 34% compared with 26% in quarter 2 last year. 76 cases were discussed in quarter 2 compared to the same period last year (65) with 30 repeats seen this quarter compared to 20 in Q2 last year. The number of children involved - 105 this quarter is 29% higher than the 81 recorded in Q2 last year.

When comparing quarter 2 last year with this year, it should be taken into account that as of August 2011 there are now 2 MARAC meetings per month given demand.

Summary of Key activities taken or planned to improve performance:

Coordinated Action Against Domestic Abuse (CAADA) recommend for an area the size of Halton, taking into account local demographics and contextual data indicate that the repeat rate would be in the range of between 28-40%, for more mature MARAC. A higher rate may also indicate that more agencies are able to identify a repeat victim and that victims have the confidence to disclose further incidents possible suggesting a good experience of MARAC the first time.

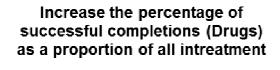
Given the increase in repeats, Halton MARAC members met and jointly completed the CAADA self-assessment tool. By accessing the Halton MARAC in detail it will enable Halton to locally improve the outcomes of the MARAC process in the following ways:-

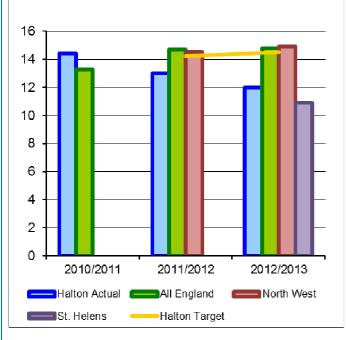
- a) Manage MARAC practice providing the opportunity for agencies represented at the MARAC to raise issues of concern they have about the MARAC's practice, processes and resourcing, and contribute to how they are addressed;
- b) Identify risks in practice, processes and resourcing that the MARAC is not [yet] sighted on;
- c) Highlight to the MARAC's local strategic bodies issues such as the resourcing of the IDVA service, potential lack of engagement from key agencies, high volume of cases, under representation or poor response to BME victims etc;
- d) Following from point c), the self-assessment will provide the basis for a business case for the MARAC unit and
- e) Evidence proactive continuous improvement which will bear up under scrutiny in Domestic Homicide Reviews, Ofsted inspections and Serious Case Reviews.

CAADA have visited Halton and attended a MARAC. They are due to provide Halton with report that will then be used to complete the self-assessment. A full report is expected to be published in January 2013.

SCS SH7¹a

/ Increase the % of successful completions (Drugs) as a proportion of all in treatment (18+) New Measure





2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
13%	14.5% (Above NW average)	12%		?	#

Data Commentary:

The new substance misuse service, provided by CRI commenced on 1st February.

August 2012 figures for comparison:

NW=14.9%

All England=14.8%

St Helens=10.9%

Performance Commentary:

Latest data is rolling 12 months to August 2012. Due to the low number of discharges in the last quarter of 2011/12 (handover to new Service Provider), the percentage is below target. The number of successful completions would need to increase from 68 to 85/568 (+17) in order to achieve the target percentage. This compares to Qtr 2 2011/12 where discharge rates were 14.18% from the NTA April- Sept 2011. Thus, it is uncertain at this stage if the target will be achieved due to the low numbers discharged to date.

Summary of Key activities taken or planned to improve performance:

Key activities are as follows:

- Increased activity and joint working with Police to maximise engagement and positive outcomes
- Introduction of a wide range of recovery focused interventions ranging from assessment and case management documents to therapeutic group working and increased recovery capital.
 This approach will maximise all opportunities for individual recovery and positive discharge.
- Staff development programme to increase the quality of interventions including observed practise, value based interviewing and caseload auditing.
- Review of discharge procedure
- Increased detoxification activity

¹ SCS / SH7a is also replicated under Healthy Halton as SCS /HH 11a Safer Halton SCS Mid-Year Progress Report 2012/13

SCS SH7²b

/ Increase the percentage of successful completions (Alcohol) as a proportion of all in treatment (over 18)

DI	lace	hal	dor	201	2/1	2
М	ıace	HOH	aer	20 I	Z/ I	J.

2011/12	2012/13	2012/13	2012/13	Current	Direction of
Actual	Target	Qtr 2	Qtr 4	Progress	Travel
New In	dicator	Baseline to be established		New Measure	N/A

Data Commentary:

The aim of this service is to increase the % of successful completions as a proportion of all people in treatment for an alcohol addiction. It is a measure of how successful the Tier 3 Community Service is, in treating alcohol dependency and ensuring that the in-treatment population does not remain static.

Performance Commentary:

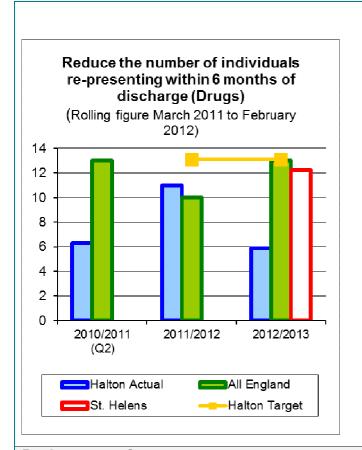
Targets will then be set following the collection of data in year 2012/13 and a baseline established.

Summary of Key activities taken or planned to improve performance:

Data is not yet available in this format, however work is underway to develop data sets in line with local and National Treatment Agency requirements.

² SCS / SH7b is also replicated under Healthy Halton as SCS / HH 11b. Safer Halton SCS Mid-Year Progress Report 2012/13

SCS / SH8a Reduce the number of individuals re-presenting within 6 months of discharge (Drugs) [New Measure]



2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
11%	13.1%	5.9%		?	û

Data Commentary:

Re-presentations indicates the number of clients who have successfully completed treatment who have re-presented for treatment within six months.

Performance Commentary:

Latest data is rolling 12 months to August 2012. 0/13 Problem Drug User opiates (PDU) and only 2/21 non opiate PDU represented during this period, making 2/34 (5.9%) in total. Due to the small numbers involved, an increase of one in the overall total would result in the percentage figure increasing from 5.9% to 8.8%.

Comparison figures for August 2012 to St Helens: 12.2% and all England: 13%.

The direction of travel is positive. The area of concern is that the percentage figures above can be impacted on greatly due to the small numbers of individuals that have successfully completed treatment.

Summary of Key activities taken or planned to improve performance:

There is currently an action plan being developed by the new provider CRI to improve performance. This includes staff training, systems and procedures and review of current workloads within the service to ensure long term outcomes for that's discharged from the drug service.

SCS / SH8b Reduce the number of individuals re-presenting within 6 months of discharge (Alcohol) [New Measure]

	2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
Placeholder 2012/13	New Indicator	Target to be set once baseline established	Refer to comment		New Measure	N/A

Data Commentary:

Re-presentations indicates the number of clients who have successfully completed treatment who have re-presented for treatment within six months.

This provides an indication of the numbers of individuals who have left treatment and are managing to sustain their recovery in the longer term.

Performance Commentary:

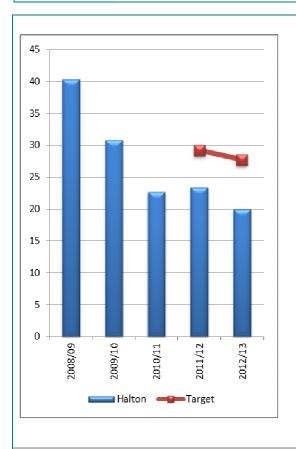
Data is not yet available in this format, however work is underway to develop data sets in line with local and National Treatment Agency requirements.

Summary of Key activities taken or planned to improve performance:

Work continues with CRI to develop optimal Alcohol pathways which will encourage safe discharge and robust aftercare, in order to maintain treatment gains and avoid repeat admissions.

Work has begun in relation to linking the Community Service CRI into the Whiston Alcohol Nursing Scheme in order to identify people with high need who may represent at differing access points within the treatment system.

SCS / SH9 Reduce the rate of young people (0-18) admitted to hospital due to substance misuse (will include alcohol)



2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
23.4	27.7	11.66 (mid- year)		✓	†

Data Commentary:

Please note there have been some changes to data source over the past two years. This data measures the number of hospital admissions for 0-16 year olds where substance misuse is coded as a reason for admission per 10,000 0-18 year olds. The target represents a year on year reduction of 5%.

Data given above details the Q2 position, however as this measure is cumulative the chart shows the forecast position should numbers remain stable for the full year.

Performance Commentary:

Halton continues to reduce the number of 0-18yr olds being admitted to hospital for substance misuse and is forecasted to be below the target rate of 27.3 in 2012/2013.

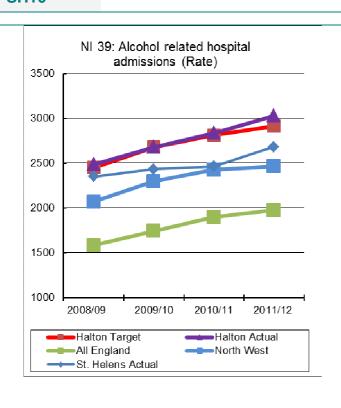
Summary of Key activities taken or planned to improve performance:

- Further embed referral processes and working relationships with A & E and acute wards within surrounding hospitals.
- Ensured 100% of workers, volunteers, and young leaders directly working in drug and alcohol services are working towards Drug and Alcohol National Occupational Standards (DANOS) through service provide contract monitoring processes and the Integrated Youth Support Service (IYSS) workforce development plan.
- Promoted Provision within Community Centres, Locality Teams, Children Centres, GP surgeries and further establish referrals/screening systems into universal, targeted and specialist provision.

Used the VRMZ outreach bus in hotspot areas on Friday and Saturday nights to provide young people with information and advice reducing substance misuse.

SCS SH10³

Reduce Alcohol related hospital admissions (NI 39)



2011/12	2012/13	2012/13	2012/13	Current	Direction of Travel
Actual	Target	Qtr 2	Qtr 4	Progress	
2922.4	3027	1297.8		✓	1

Data Commentary:

This indicator measures the cumulative rate of alcohol related hospital admissions per 100,000 population using Hospital Episode Statistics.

The verified LAPE performance data for 2011/12

The verified LAPE performance data for 2011/12 is now included in the table above.

Local Data can be utilised as an interim measure. Q2 is an actual to September 2012.

Performance Commentary:

Comments on <u>alcohol related</u> admissions (All fractions):

- At the end of Sep 2012, Alcohol Attributable Admissions were fewer than expected (1297.8) and significantly less than both the target (1513.5) and the number of admissions at the same time, the previous year 11-12 (1440.9).
- Also, at the end of Sep 2012, Wholly Alcohol Attributable Admissions were fewer than
 expected (417.5) and significantly less than both the target (510.35) and the number of
 admissions at the same time, the previous year 11-12 (529.1).

Summary of Key activities taken or planned to improve performance:

1. Strategic

The new National Alcohol Strategy has been published (March 2012). A revised Halton Local Strategy is under development and further consultation is needed with key stakeholders to agree priority work streams.

Alcohol Harm Reduction has been agreed as a priority by the Halton Health & Wellbeing Board.

2. Contract transition

Work is underway to ensure that contracts with services which aim to reduce alcohol harm are fit for

 $^{^3\,}$ SCS / SH10 is also replicated under Healthy Halton as SCS / HH 1

purpose, value for money and that care/business continuity will be maintained when responsibility for alcohol misuse prevention and treatment transfers to Public Health in the Local Authority in April 2013.

3. Alcohol Liaison Nursing Service at Whiston and Warrington Hospitals

On 17 September 2012, the **Alcohol Liaison Nursing Service** went live at Whiston Hospital.

Four Alcohol Nurses; 1 Band 7 and 3 Band 6 Nurses have been appointed. This service operates seven days a week, with late night cover. It will ensure that high quality, alcohol screening and treatment interventions are carried out for people attending A&E with alcohol related harm. It also ensures that people who require longer term support are linked into Community Services and that people who are frequently admitted to hospital for alcohol related harm receive joined up care from both the hospital and the community. The service does not accept referrals from outside the hospital and will explore alternatives to admission where appropriate.

The service will be subject to rigorous performance monitoring and the anticipated benefits are:

- Reduced hospital attendances, admissions and re-admissions for alcohol related harm
- Reduced length of stay for alcohol related admissions
- Reduction in the number of people drinking above the NHS guidelines⁴ and consequently improved health/less dependency on services.
- Improvements in the number of people living drug/alcohol free lives in St Helens.
- Improve the health and well being of individuals sustaining recovery, their families and the wider community.
- Early identification and treatment of alcohol misuse disorders.

The cost of the Service is being met by both NHS Halton & St Helens and NHS Knowsley. The funding is for a two year period starting 17 September 2012.

The Alcohol Nursing Service continues to operate at Warrington Hospital and work is underway to ensure that there are streamlined pathways into the Community Treatment Service in Halton (CRI). The cost of the Service is being met by both NHS Warrington and NHS Halton & St Helens.

4. Alcoholic Liver Disease

Work is underway to explore actions which could assist with prevention in relation to alcoholic liver disease.

5. Robust Health Assessments are being carried out by the Community Alcohol Provider for Service Users (including Criminal Justice clients) who attend for treatment. This includes identifying dental issues and smoking cessation.

⁴ No more regularly than 3 to 4 units per day for men and no more regularly than 2 to 3 units per day for women. Safer Halton SCS Mid-Year Progress Report 2012/13

SCS / SH11 Reduce the re-offending rates of repeat offenders (RO's in the Navigate IOM scheme) (Formerly NI 30)

	2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
Placeholder measure in 2011/12	PPO: 77.13% reduction. RO: 36.73% reduction. Shift in offence type	To maintain and reduce offending rates for PPO's and RO's from the 2011/12 Baseline PPO: 40% reduction. RO: 4% reduction	PPO: 85.2% reduction. RO: 66.38% (Qtr 1 2012/13)		✓	û

Data Commentary:

Data is only available from Cheshire Constabulary data delivery team.

Performance Commentary:

Figures from Quarter 1 indicate a 85.52 reduction in re-offending for PPO offenders and 60.38 reduction for Repeat Offenders.

Summary of Key activities taken or planned to improve performance:

Bank Accounts

The team has now forged collaboration with the Halifax Building Society to assist offenders on the Scheme to open bank accounts. Historically some offenders have been unable to open accounts because they have not possessed the correct identification. However, the Manager of the Halifax has agreed to take evidence from the team as a proof of identity.

Student social worker

Karen Garner has now completed her placement with the team but having enjoyed her time with us she has remained as a volunteer within Ashley House working with the Peer mentoring scheme and operation stay safe.

Intervention Schemes:

Offenders on the Scheme have been referred to a charitable organisation called Rotters. The organisation offers interventions such as sports training and preparation for work within the catering industry.

Early Intervention Scheme

By the time offenders come onto our Scheme their offending and associated behaviours are already significantly problematic. Whilst at the early stages of development the aim of the intervention will be to identify offenders whose behaviour does not yet meet the threshold for entry as a PPO or Repeat Offender and offer them a brief intervention to address their behaviour before it deteriorates

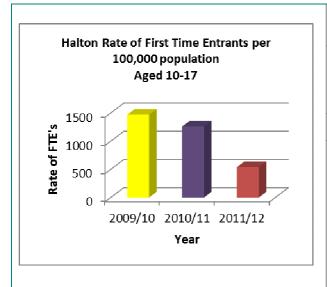
Housing

Housing has historically taken up a significant period of time for Police and Probation staff. The deployment of a worker from Housing Solutions for one afternoon per week has alleviated some of this workload. However, due to the constraints within the criteria for housing offenders via Property Pool Plus problems still remain. This issue is being discussed at a strategic level.

Peer Mentoring

CRI who are responsible for drug and alcohol services within Ashley House have implemented a Peer Mentoring Scheme. Training to become a peer mentor involves a 15 month course which includes some classroom work and voluntary work within Ashley House. To meet the criteria for consideration individuals must be stable within their recovery from drug/alcohol misuse themselves or have a family member who has/had alcohol/substance misuse dependency. It is hoped that some of those offenders on the Scheme will be in a position to access this.

SCS / SH12 Reduce the number of first time entrants to the Youth Justice System (formerly NI111).



2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
64	64	32		✓	\Rightarrow

Data Commentary:

From April 2011 this measure will be reported by Police National Computer (PNC) to Ministry of Justice (MoJ) who will publish the figures. Official Police National Computer First Time Entrants figures are published quarterly on a 12 month rolling process and will always be 6 months behind. These figures will be reported when available including the rate per 1,000 aged 10-17 local population.

Performance Commentary:

Juveniles are mapped to individual local authority areas using their home address or post code recorded on the Police National Computer. Current performance is 12 months rolling as of March 2012. From 2009/10 FTE's have reduced by 64%

The FTE rate is taken from the Office for National Statistics mid-year population estimates and using the rate per 100,000 aged 10-17 year olds.

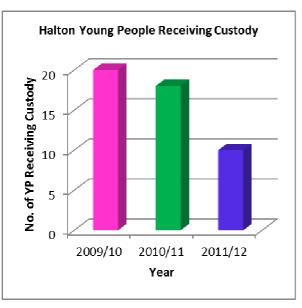
Summary of Key activities taken or planned to improve performance:

In Halton, the Diversion Project is a scheme provided by Halton & Warrington Youth Offending Team developed in 2008 and currently funded by the Department of Health. The project consists of two Diversion Workers, one with a Social Care background and the other a seconded CAMHS Advanced Nurse Practitioner. The CAMHS worker is a significant part of the scheme and is able to assess young people for Mental Health, Communication needs and where appropriate link them directly and swiftly into appropriate health services. The key aim of the project is to divert children and young people with specific health needs or learning difficulties away from the Youth Justice System, by providing appropriate and professional support at the earliest stage. The referrals for this scheme come directly from Cheshire Police and the scheme is currently available to all young people who are at risk of becoming first time entrants with future scope looking at providing such a process for children and young people who are already involved in the YJS. As part of the process, upon receiving a referral, one of the Diversion workers will undertake an assessment with the young person which will identify any concerns and further refer to the appropriate services and/or provide a package of support. Contact will also be made with any services including Children's Social Care who the young person is open to glean any further information and also make agencies aware that the child or young person is currently under the Diversion scheme. A full comprehensive feedback form is then provided to Cheshire Police ahead of the child or young person answering bail with a view that any identified concerns or difficulties will be taken into consideration by the Police with the matter potentially having no further action taken (NFA) and the young person diverted away from the

YJS. Halton & Warrington Youth Offending Team are also provided with a fortnightly report from Cheshire Police of all children and young people who have received a Police Restorative Justice disposal. In similarity to the diversion scheme all children & young people who have received an RJ disposal will be offered a Diversion assessment and further intervention and support if the assessment identifies a need.

Halton & Warrington YOT's Diversion Scheme was one of 6 pilot areas. The University of Liverpool evaluated the scheme across the 6 pilot areas between 2008-2011 using control sites. Following the completion of the evaluation report in 2011 HWYOT became one of 37 pathfinder sites. Due to the previous limited findings HWYOT are now in the process of undertaking our own local reports on performance and reporting into HWYOT Management Board.

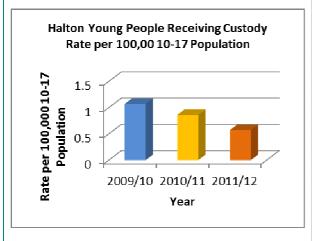
SCS / SH13 Use of Custody (New Measure)



2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
10	10	4		✓	1

Data Commentary:

This is a new measure for 2011/12 established to look at the number of young people sentenced to custody as a figure and also represented as a rate per 1,000 aged 10-17.



Performance Commentary:

The number of young people sentenced to custody has dropped by 50% between 2009/10 and 2011/12 from 20 to 10 young people. The YOT has introduced a number of internal measures to help with the reduction. These are outlined in the section below.

HWYOT submits data as a whole service that covers Halton & Warrington, therefore the rate per 100,000 10-17 population covers both local authority areas as follows:-

Summary of Key activities taken or planned to improve performance:

All Pre-Sentence Reports/Breach Reports (PSR/BRs) are gate-kept by an Operational Manager or Senior Practitioner.

The Youth Offending Service (YOS) will not recommend a custodial sentence to the Court in a PSR/BR but will always propose a Community Order, including requesting an Intensive Supervision and Surveillance (ISS) Requirement as a direct alternative to custody.

An Operational Manager will review all cases where a young person receives a custodial outcome to ensure all options have been considered to avoid incarceration.

The YOS introduced their 'Compliance Procedures' in November 2011 which has introduced a number of measures (including a Pre-Breach Meeting chaired by a Manager) to try ensure that the young person does not breach their Order/Licence.

SCS / SH14 Reduce the proportion of individuals within the Navigate cohort who's offending is substance misuse related. (Placeholder New Measure)

	2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
Placeholder 2012/13	New Indicator	ТВА	Refer to comment		New Measure	N/A

Data Commentary:

To reduce the proportion of individuals within the Navigate cohort who continue to demonstrate offending behaviour related their substance misuse. The Police and Drug Team are working together to reduce this. The service commenced in February 2012 and data to support the measurement of this outcome is in the process of being identified. Targets will be linked to the service specification and outcomes for this new service.

Data will also be required to inform this target, which will be generated in partnership with CRI as in part, it relates to early intervention by CRI to avoid the need for individuals to be nominated on to the Navigate Scheme.

Performance Commentary:

New measure – Service due to commence in February 2012 and data to support the measurement of this outcome is in the process of being identified.

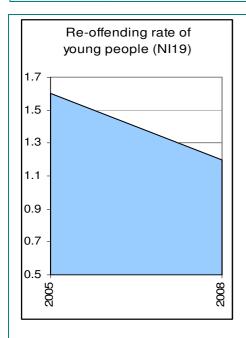
The current Strategic Navigate Report includes data for those on the Scheme where offending is influenced by substance misuse. However, it does not capture specific data in relation to a reduction in offending because drug use has reduced or ceased. A meeting will be arranged in November between the Navigate leads, CRI Managers and the Substance Misuse Commissioner to ensure that the wording of the target reflects the joint working between Navigate and CRI and to devise a data collection method which will enable us to report on the target.

Summary of Key activities taken or planned to improve performance:

Offenders on the Scheme are referred as appropriate to drug services within Ashley House which includes group and one to one intervention. Navigate staff work closely with colleagues there to ensure timely assessment, treatment and regular update on progress to ensure individual needs are met and any deterioration is identified and acted upon so that offending behaviour does not increase.

The Navigate Scheme are in the early stages of developing and Early Intervention Scheme as by the time offenders come to us their offending and associated behaviours are already significantly problematic. The aim of the Early Intervention Scheme will be to identify offenders whose behaviour does not yet meet the threshold for entry as a PPO or Repeat Offender and offer them a brief intervention to address their behaviour before it deteriorates. The high correlation between drug use and offending will mean that early intervention will be a positive initiative to meet the target.

SCS / SH15 Reduce the re-offending rate of young offenders (Formerly NI 19)



2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
New measure	Baseline to be established	Refer to comment		New Measure	N/A

Data Commentary:

The YOT have now ceased reporting on the old NI19 – Reoffending Rate of Young Offenders. From April 2011, a new unified reoffending measure will be reported to the Ministry of Justice directly from Police National Computer data.

In its place the YOT aim's to work closely with young people on the Integrated Offender Management (IOM) scheme to reduce the rate of re-offences.

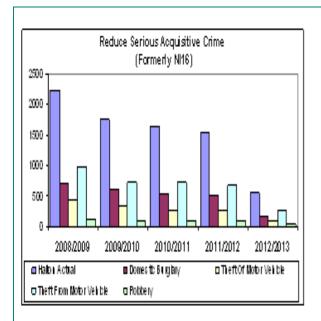
Performance Commentary:

Rate of proven re-offending by young offenders in IOM cohort to be agreed with the Safer Halton Partnership once a baseline is established. The YOT will track people who entered the Integrated Offender Management (IOM) cohort between January 1st to March 31st 2011 to measure re-offending rates including frequency and seriousness 12 months prior to nomination.

Summary of Key activities taken or planned to improve performance:

Discussions are on-going with the Youth Offending Team and Navigate IOM scheme to monitor and report on reoffending rates of repeat offenders, which will now encompass young people, given that data is now sourced from the Police National Computer.

SCS / SH16 Reduce serious acquisitive crime (Formally NI16)



* 2012/13 volume provided within chart above is for the 6 month period April to September 2012 period only.

2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
1548	1652	559			
(13.10	(14.00	(4.81			
rate	rate	rate		1	
per	per	per			
1,000)	1000)	1000)			

Data Commentary:

This measure covers the following acquisitive crime rates:

- Domestic burglary
- Theft of motor vehicle
- Theft from motor vehicle
- Robbery (personal and business)

It is calculated as follows:

Number of recorded serious acquisitive crimes/total population x 1,000

Performance Commentary:

During April to September 2012 a total of 559 Serious Acquisitive Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 26.5% reduction when compared to the same period during the previous year (761 to 559).

Projected year end estimated volumes equate to 1118 crimes based on current half year count, therefore, we are likely to achieve the 2012/13 target as provided above (TBC).

During April to September 2012 a total of 175 Household Burglary Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 30.6% reduction when compared to the same period during the previous year (252 to 175).

During April to September 2012 a total of 90 Theft Of Vehicle Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 38.8% reduction when compared to the same period during the previous year (147 to 90).

During April to September 2012 a total of 258 Theft From Vehicle Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 21.3% reduction when compared to the same period during the previous year (328 to 258).

During April to September 2012 a total of 36 Robbery Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 5.9% increase when compared to the same period during the previous year, albeit relating to 2 additional crimes (34 to 36).

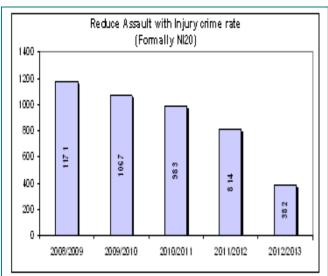
Summary of Key activities taken or planned to improve performance:

Partnership Task and Coordination continues to work in a focused way with the Partnership Inspector and key partner agencies rotating the chair.

The group continues to target the emerging trends and seasonal patterns to address hot spots in the area. Profiles are discussed in detail and actions agreed by all parties recorded and reported back upon until the problem has been solved or dissipated. The profiles provide visibility and audit trails and document any potential spending allocated to a profile.

<u>Business Robbery:</u> A trend is emerging with 8 business robberies in Halton since mid-August. Premises have been contacted and joint visits by Phil Buckley and Environmental Health HBC (Health & Safety legislation / powers) are being carried out. An extensive briefing document has also been compiled by Phil and T/DCI Blackwell has been informed of activities and measures to prevent lone working and work by NPU's to enhance PCSO cover during vulnerable times at vulnerable locations.

SCS / SH17 Reduce Assault with Injury crime rate (Formerly NI 20) New Revised Measure



* 2012/13 volume provided within chart above is for the 6 month period April to September 2012 period only.

2011/12 Actual	2012/13 Target	2012/13 Qtr 2	2012/13 Qtr 4	Current Progress	Direction of Travel
814 (Rate per 1,000 6.48)	1074	382 (3.2 rate per 1000)		✓	û

Data Commentary:

This is the number of 'assaults with injury' (including racially and religiously aggravated) offences per 1,000 population as a proxy for alcohol related violent offences. *We do not include inflicting grievous bodily harm or malicious wounding (including racially and religiously aggravated)

The APACS indicator: SPI 5.3 Assaults with less serious injury rate is no longer recorded.

Population adjusted and rates restated for 2011/12

Performance Commentary:

During April to September 2012 a total of 382 Assault with Injury Crimes were recorded to Cheshire Constabulary from the Halton Area equating to a 5.7% reduction when compared to the same period during the previous year (405 to 382).

Projected year end estimated volumes equate to 764 crimes based on current half year count, therefore, we are likely to achieve the 2012/13 target as provided above.

Summary of Key activities taken or planned to improve performance:

Alcohol licensing enforcement and related wider partnership activity continues to develop and has recently been renamed the Alcohol Harm Reduction Group in recognition of the greater role that Health have to play in this area.

The team is starting to develop more activities around harm prevention and make greater use of prevention referrals that are "upstream" of the offences in order to deal with root cause issues. The borough's licensing team has been in place since 2008 and consists of both police and civilian licensing officers with linked PCSOs from the two local Neighbourhood Policing Teams. The colocated team has a close working relationship with the local legal department and licensing committee. The team have regular meetings with key partners to collectively address problem premises and improve working practices. The team reports monthly to the alcohol harm reduction group which is a multi-agency group. The focus of alcohol related enforcement activity is aimed towards the night time economy, and targeting multi agency activity towards limiting the alcohol supply to young and vulnerable children.