haringey strategic partnership

NOTICE OF MEETING

Safer Communities Executive Board

FRIDAY, 28TH MARCH, 2008 at **11:30** HRS – CHIEF EXECUTIVE'S BOARD ROOM, LEVEL 5, RIVER PARK HOUSE, HIGH ROAD, LONDON, N22 8HQ.

MEMBERS: Please see the table below for details of the Membership

AGENDA

1. WELCOME AND INTRODUCTIONS

2. APOLOGIES FOR ABSENCE

To receive any apologies for absence.

3. MINUTES (PAGES 1 - 4)

To confirm the minutes of 14 December 2007 as a correct record of the meeting.

4. DECLARATIONS OF INTEREST

Members of the Board must declare any personal and/or prejudicial interests with respect to agenda items and must not take part in any decision with respect to these items.

5. URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item where they appear. New items will be dealt with under Item 13 below).

6. COUNTER TERRORISM UPDATE

A verbal update will be provided.

- 7. SAFER FOR ALL -THREE YEAR PARTNERSHIP PLAN 2008/11(DRAFT) (PAGES 5 54)
- 8. DRUGS: PROTECTING FAMILIES AND COMMUNITIES (PAGES 55 60)
- 9. ADULT DRUG TREATMENT PLAN: STRATEGIC SUMMARY (PAGES 61 70)

10. PROPOSED RESOURCE ALLOCATION 2008/09

A verbal update will be provided.

11. KEY PERCEPTIONS: CRIME AND CRIMINAL JUSTICE (PAGES 71 - 102)

A presentation will be made.

12. PERFORMANCE UPDATE (PAGES 103 - 112)

13. NEW ITEMS OF URGENT BUSINESS

To consider any new items of Urgent Business admitted under Item 5 above.

14. ANY OTHER BUSINESS

To consider any items of AOB.

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ORGANISATIONS	NO.	NAME OF REPRESENTATIVE
ORGANISATIONS	OF	
	REPS	
Haringey Council	8	Dr Ita O'Donovan, Chief Executive (Chair) Councillor Nilgun Canver, Executive Member for Enforcement & Community Safety Niall Bolger, Director of Urban Environment
		Sharon Shoesmith, Director of The Children and Young People's Service Barbara Nicholls, Director Rep for Adult, Culture and Community Services Claire Kowalska, Community Safety Strategic Manager Marion Morris, Drug & Alcohol Partnership Manager
		Jean Croot, Head of Safer Communities
Haringey Teaching Primary Care Trust	1	Christina Gradowski, Director
Haringey Peace Alliance	1	Pastor Nims Obunge, Chief Executive
Haringey Metropolitan Police	1	Simon O'Brien, Borough Commander (Vice-Chair)
Haringey Fire Service	1	John Brown, Borough Commander
Haringey Probation Service	1	Mary Pilgrim, Head of Service Delivery, Haringey
Homes for Haringey	1	David Hucker, Chief Executive (interim)
Haringey Community & Police Consultative Group	1	Enid Ledgister, Managing Director (SCEB representative to HSP)
Mental Health Trust	1	Lee Bojtor, Director
Voluntary Services Haringey	1	Gillian Lacey, Manager, Victim Support
Haringey Association of Voluntary & Community Organisations	1	Naeem Sheikh, Director
Metropolitan Police Authority	1	Kirsten Hearn, MPA Independent Member
Haringey Magistrates Court	1	Stephen Carroll, Bench Legal Manager
TOTAL	20	
OBSERVERS		
Councillor Matt Cooke		
Councillor Ron Aitken		
OFFICERS		
Xanthe Barker		Committee Secretariat

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genda Item 3 MINUTES OF THE SAFER COMMUNITIES EXECUTIVE BOARD FRIDAY, 14 DECEMBER 2007

- Present: Dr Ita O'Donovan, Shaun de Souza Brady, John Brown, Councillor Nilgun Canver, Jean Croot, Eliza Grainger, Vanessa Maughey, Nick Simpson, Richard Wood, Nims Obunge, Christina Gradowski, Sharon Kemp, Marion Morris, Claire Kowalska, Samuel Wynter, Enid Ledgister, Kirsten Hearn
- **Observer:** Jennifer Bracher, Elizabeth Dosu, Paulette Haughton, Georgia Hay, John Morris, Ben Rogers, Sean Sweeney, Otis Williams.

LC20. APOLOGIES, WELCOME AND SUBSTITUTIONS

The Chair welcomed those present to the meeting and noted that apologies had been received from the following people:

Robert Allan Niall Bolger Samantha Evans Mary Pilgrim Sharon Shoesmith

LC21. URGENT BUSINESS

No items of Urgent Business were received.

LC22. MINUTES

RESOLVED:

That the minutes of the meeting held on 26 October 2007 were confirmed as a correct record of the meeting.

LC23. GREENEST BOROUGH STRATEGY

A presentation was given on the Greenest Borough Strategy.

The Board was advised of the national and regional context within which the Strategy had been formed. It was noted that the Strategy would address Government targets in relation to the reduction of emissions and the targets within the Mayor's London Plan and supporting strategies.

In addition to the broader national and regional targets, the Strategy was also informed the local context, including the Sustainable Community Strategy, the Haringey Council Plan and the Strategic Framework for Improving Adults' Well-Being 2007/10.

In order to develop the Strategy, a Better Haringey Working Group and Stream Board had been formed and an Away Day was being held in the new year.

MINUTES OF THE SAFER COMMUNITIES EXECUTIVE BOARD (HSP) FRIDAY, 14 DECEMBER 2007

The Board was advised that the consultation process had included a 'vox pop', presentations to the Council's Area Assemblies and to young people via schools and that there had been consultation with Council staff. It was noted that the consultation period would end on 31 January 2008.

The Council's Cabinet would consider the Strategy in April 2008 and it would be submitted to Council in July 2008.

The Chair noted that there was an increasing focus on the need to address environmental issues and that this had to be addressed at local, as well as at a national and international level. The partnership was ideally placed to look at ways of tackling environmental issues at a local level.

It was noted that the Mental Health Trust's Green Champion had met with the Director for the Urban Environment in order to discuss how the organisation could address environmental issues as an organisation and it was suggested that other partners may also wish to do this.

The Board discussed cross cutting issues and how these should be addressed by the partnership. Measures such as developing recycling and reducing waste were also likely to impact on reducing crime in the Borough's parks and green spaces. There was agreement that reference to adopting a more cross cutting approach should be made within the document. Issues such as Designing out Crime and the Safer Transport Programme were highlighted as initiatives where a cross cutting approach had been successfully adopted.

It was suggested that reference should be made to Section 17 of the Crime and Disorder Act and the Council's responsibility to ensure that this was considered.

RESOLVED:

To note the presentation.

LC24. WORKSHOP

A workshop was held and the Board broke into groups to discuss the Crime and Community Safety Self Assessment.

Following discussion, the Board was advised that a response to the Community Safety Self Assessment would be draft, based on discussion arising from the workshop. Once drafted it would be circulated for comments.

LC25. DATES OF FUTURE MEETINGS

It was noted that the next meeting would be held on 17 March 2008.

Dr Ita O'Donovan

Chair

MINUTES OF THE SAFER COMMUNITIES EXECUTIVE BOARD (HSP) FRIDAY, 14 DECEMBER 2007

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Meeting: Safer Communities Executive Board

Date: 28 March 2008

Subject: Safer for All – Three-Year Partnership Plan (Draft)

Author: Claire Kowalska, Community Safety Strategic Manager

1. Purpose

1.1. For the Safer Communities Executive Board to agree the content, priorities and approach of the statutory 3-year partnership plan (attached)

2. Background

- 2.1 This plan is a requirement for all Crime and Disorder Reduction Partnerships and complies with new directives and guidelines following reform of the Crime and Disorder Act and recent publication of the Guidance for Effective Partnership Working.
- 2.2 The priorities and approach have been developed according to lessons learnt, partnership data assessments, and consultation with professionals and the public. The plan takes account of other relevant national and local strategies and supports Haringey's Community Strategy. It also plays a key role in delivering the Local Area Agreement (LAA). Six improvement indicators have been selected as a contribution to the borough's 35 LAA targets (see point 4 below).
- 2.3 In order to fit in with the sign off of the LAA in June, Government Office is now expecting a final version of this plan by 2nd June and publication of a summary document for general distribution by July 2008. We will be working throughout April on detailed action plans for all targets with smart objectives and delivery responsibilities across the partnership. The community engagement plan will also be further developed. A final draft of the partnership plan is due to be endorsed by Cabinet on 22 April.

3. Key priorities 2008 – 2011

- 3.1 The plan proposes the following priority areas:
 - Young people prevention and support
 - > Reduction in serious crime violence, acquisitive crime and domestic violence
 - Prevention and reduction of anti-social behaviour focusing on young people, families, housing and the public realm
 - > Drugs and alcohol prevention, effective treatment and reintegration
 - Reducing re-offending adults and young people
 - Increasing confidence in the Criminal Justice System

- 3.2 During consultation, partners agreed that, among others, the following lessons had been learnt during the previous strategy period. This will form the basis of our future approach:
 - > youth crime prevention and services for young people require strong co-ordination
 - solutions need to be long-term and holistic early intervention is key
 - > intelligence and strategic analysis is vital, as is information sharing
 - > dynamic problem-solving needs to be understood and applied across the partnership
 - > good communication, consultation and engagement is important
 - collaborative working must be at the core of planning

4. Delivery

- 4.1 A new corporate performance management framework is being established to track and monitor progress against targets for all HSP theme boards. The Safer Communities Partnership (SCP) already has an effective evaluation system and closely monitors project development and spend. The Safer Communities Service will provide the link between areabased working; borough wide performance against partnership targets and will report quarterly progress to the HSP.
- 4.2 From a list of 198 new national targets across Government and 35 core targets across Haringey, the SCP has chosen the following six improvement areas which we believe will contribute most to improvements on the ground:

Reducing serious violent crime (NI 15) Reducing serious acquisitive crime (robbery, burglary and vehicle crime) (N16) Dealing with local concerns about anti-social behaviour and crime by the local council and the police (NI 21) Building resilience to violent extremism (NI 35) Getting drug users into effective drug treatment (NI 40) Preventing young people aged 10 – 17 from entering the Youth Justice System (NI 111)

Existing stretch targets for robbery and repeat victimisation of domestic violence and a local target for victim support services to young people will be incorporated in the LAA.

5. Key challenges

The SCP has matured well but sustaining successes and improving further will not be easy. An updated Risk Register is appended to the strategy with further detail. However, these are some of the most likely challenges for the foreseeable future:

- : Co-ordinating effort across Council and partner services to achieve the best outcomes and value for money for vulnerable adults, young people and families
- : Sustaining crime reduction across all categories of serious crime
- : Delivering effective and co-ordinated communications as a whole partnership
- : Improving the strategic analytical capacity of the partnership in order to further steer activity and investment
- : Maintaining the recent reduction in concern about crime, drugs and ASB and delivering on perception targets
- : Achieving reductions in re-offending rates of young people and adults

There is a great deal of commitment from around the partnership to moving the agenda forward and contributing significantly to Haringey's LAA. However, previous success in crime

reduction in Haringey and the requirement for year on year improvements will continue to place high demands on delivery.

March 2008

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FRONT PAGE

Safer for All

Haringey's Community Safety Partnership Plan (2008 – 2011)

Foreword

The Safer Communities Partnership pledges to work collaboratively and transparently, utilising joint and individual resources to best effect and to achieve sustainable outcomes. Above all we will work SMARTER to achieve sustainable change and make Haringey Safer for All.

The crime and disorder issues identified as priorities for the next three years are:

- > Young People
- > Serious Crime
- > Anti-social behaviour
- Drugs and alcohol
- Reducing re-offending
- > Increasing confidence in the Criminal Justice System

Our vision for the coming three years is:

"We will reduce the incidence of, and the concern about, crime, tackle its underlying causes and provide support and protection to victims, neighbourhoods and the most vulnerable members of our community. We will make homes safer and create places that people and children enjoy using and take pride in. Our roads will be safer. We will reduce the incidence of young people as victims and perpetrators of crime, providing pathways for opportunity and success".

Haringey Community Strategy 2007 – 2016 'Safer for All' priority

Signatures of leaders of statutory agencies

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Executive Summary

Introduction

The Haringey Safer Communities Partnership is responsible for addressing crime, drug and alcohol misuse and anti-social behaviour across the borough, and for ensuring that Haringey is prepared for major emergencies.

The partnership combines the energy, experience and resources of the Council, Police, health authorities, fire service and many valuable voluntary and community groups. Since the establishment of Safer Neighbourhood Teams in each ward, residents have been contributing to our work more than ever.

This strategy builds on many years of constructive partnership work and on a high level of agreement across the board. However, there is still more to learn and as crime patterns change, the partnership must continue to evolve.

We are pleased to present our joint priorities for the next few years as follows:

- Young people prevention and support
- > Serious crime violence, acquisitive crime and domestic violence
- Anti-social behaviour A focus on children and families, housing and the public realm
- > Drugs and alcohol prevention, effective treatment and re-integration
- Reducing re-offending adults and young people
- Increasing confidence in the Criminal Justice System

Community Safety in Context

Over the years, Community Safety has become an increasingly important national and local priority. The causes of crime are complex and the gap between reality and perception remains a challenge for all partnerships. There is much work to be done, not only within the sphere of community safety, but across the Local Strategic Partnership as a whole.

Haringey is a diverse borough, a fact that is welcomed and viewed positively by residents. However, with pockets of enduring deprivation and a growing population, there are still many vulnerable people within the borough. Over the past year, we have been researching those communities that have traditionally been disproportionately affected by crime and this has resulted in new recommendations. Haringey has also received higher than expected numbers of new migrants from Poland and other Central European countries recently. While most of these newcomers make a valuable contribution to the area, others are vulnerable as victims and can be drawn into criminal activity. As a partnership, we need to regularly monitor and respond to the issues which affect our diverse communities at different times.

Recorded crime has fallen steadily over recent years in Haringey but we remain a high volume borough and community safety, therefore, firmly remains a top priority. From the latest Annual Resident's Survey, we know that crime is still a key concern among

residents, although a greater number now claim to feel safer both during the day and at night compared with previous years. There is also evidence of a significant degree of under-reporting and we believe this to be higher in certain groups. Communication and effective engagement with local people and groups is at the heart of this new strategy.

What we have learnt

There have been many successes since the start of the last strategy, both in terms of falling crime and a better understanding of the drivers of crime. Key lessons learnt from all areas of community safety include:

- a joined-up approach to youth crime is necessary and services for young people should be co-ordinated
- solutions need to be long-term and holistic early intervention is key
- > intelligence and analysis is vital, as is information sharing
- > good communication, consultation and engagement is vital
- collaborative working must be at the core of planning

Delivery

From a list of 198 new national targets across Government (reduced from 1,200), Haringey has chosen a core group of 35 which we believe will contribute most to improvements on the ground locally. The Safer Haringey Partnership will be responsible for the following six within the core group:

- Reducing serious violent crime
- Reducing serious acquisitive crime (robbery, burglary and vehicle crime)
- Dealing with local concerns about anti-social behaviour and crime by the local council and the police
- > Building resilience to violent extremism
- Getting drug users into effective drug treatment
- Preventing young people aged 10 17 from entering the Youth Justice System

There is support from the partnership to work more strategically across areas of responsibility; to focus on outcomes and to place communication and engagement at the heart of delivery.

The Safer Communities Service will develop action plans every year and provide a link between the work and achievements of area-based groups and our performance across the borough, ensuring the best possible outcomes for all.

1. Introduction

The Haringey Safer Communities Partnership is made up of a number of statutory partners: Haringey Council, Police, Primary Care Trust and the Fire Service along with other contributing partners from within the criminal justice system and the wider community. Collectively, we are responsible for addressing the crime, substance misuse and anti-social behaviour which is most prevalent in the borough and of greatest concern to local communities; and for ensuring the borough is prepared for major emergencies.

This strategy presents the most important community safety priorities for Haringey, building on collective knowledge as laid out in the Partnership Data Report and in line with Home Office guidance. The strategy also presents our commitment to embracing the new requirements on all partnerships and to implementing a co-ordinated and balanced programme of prevention and intervention for the coming three years.

The priorities outlined in this document build on a wide range of consultation exercises that have taken place locally over the past few years. Included in these are regular surveys, ward-based 'Have a Say' days and sessions with some of those most affected by crime and the fear of crime such as parents, schoolchildren, minority ethnic groups, service users, repeat victims and the older generation.

At the same time, we have expanded the use of data and intelligence. We have produced 6-monthly partnership strategic assessments examining the crime, disorder and environmental issues in the borough, drawn from a wide range of data sets. We have undertaken comprehensive training in information sharing across the partnership to improve work undertaken to reduce crime and disorder.

We have held workshops with our principal stakeholders to understand and agree on the causes of, and possible solutions to, our community safety challenges. We are pleased to report that there is a high degree of consensus about these issues among partners.

We are, therefore, confident that the proposed approach to community safety and the suggested priorities in this strategy combine evidence, professional experience and community intelligence.

This does not mean that we do not have more to learn. Crime patterns and feelings of safety are complex and do not remain static. The partnership must continue to evolve and adapt to changes in its membership; shifting local demographics and developments in the national community safety field.

It has become evident over the last few years that the priorities across Haringey's Local Strategic Partnership overlap to a significant and increasing degree. The outcomes in this new strategy will also have to be achieved whilst ensuring the best use of resources. A key priority for the coming few years will, therefore, be to further improve our partnership collaboration so that we minimise duplication and maximise success in areas of common concern.

2. National context

2.1 Strategic background

During the 1980s, crime and community safety became an increasingly important national priority. Alongside health, education and the environment, crime and disorder has featured prominently across different Government priorities. These issues are public-facing and often dominate the media. However, the complexities surrounding crime, substance misuse and anti-social behaviour are rarely captured, and addressing the gap between reality and perception remains a challenge for all partnerships.

In recognition of the evolving nature of community safety partnership work, the Home Office has undertaken a thorough review of partnership work. The Home Office team carried out an unprecedented level of public and stakeholder consultation, culminating in the publication of **'Delivering Safer Communities: A guide to effective partnership working'** in 2007. Many of the findings from this exercise had been highlighted in the Local Government White Paper of 2006, which reinforced the importance of local leadership, partnership duties and more flexible joint funding arrangements.

This document takes account of all 6 key Hallmarks, as follows:

- Empowered and effective leadership
- Intelligence-led business processes
- Effective and responsive delivery structures
- Engaged communities
- Visible and constructive accountability
- Appropriate skills and knowledge

Haringey welcomes this guidance as it reassures us that we are well on our way to implementing much of the suggested good practice and also clarifies the areas which our partnership needs to strengthen and improve upon.

From April 2008, the Criminal Justice System in England and Wales will have several new, 3-year strategies in place. These include the National Community Safety Plan, the Cutting Crime Strategy, Staying Safe (DCSF), Working Together to Cut Crime and Deliver Justice: A Strategic Plan for Criminal Justice and revised drug and alcohol strategies. In addition, The Children's Plan (10-year strategy) sets out a series of ambitions for all areas of children's lives, including ensuring their safety. These strategies place an emphasis on effective partnership working, better public engagement, earlier intervention, simpler business processes and a focus on the most serious and harmful problems.

2.2 Measuring success

Police and local partnership performance will be measured through a revised performance framework known as Assessment of Police and Community Safety (APACS).

Recognising that the police alone cannot prevent and reduce crime, APACS aims to further promote joint ownership for the delivery of policing and community safety through

a single and integrated set of targets. A new group of Public Service Agreements (PSAs) has been adopted which prioritises serious and persistent crime, a reduction in re-offending and the measurement of an expanded number of public confidence outcomes.

In addition to the overarching target to Make Communities Safer (PSA 23), the National Community Safety Plan recognises links with other outcome targets as below:

- Increase the number of children and young people on the path to success (PSA 14)
- Increase the proportion of socially excluded adults in settled accommodation, employment, education or training (PSA 16)
- > Tackle poverty and promote greater independence and wellbeing (PSA 17)
- Deliver a more effective, transparent and responsive Criminal Justice System for victims and the public (PSA 24)
- Reduce the harm caused by alcohol and drugs (PSA 25)
- Reduce the risk to the UK and its interests overseas from international terrorism (PSA 26)

The total number of National Indicators (NI) has been reduced from 1,200 to 198; these now cover the full range of priorities which are to be delivered by local authorities in partnership with other agencies and communities. The full list is shown in Appendix A.

From this National Indicator set, each Local Strategic Partnership has a core group of 35 improvement targets and these will be monitored closely by regional government bodies through Local Area Agreements (LAAs).

Our work will contribute to the full range of indicators under APACS and the national indicator set. However, we will be *specifically* measured on our agreed improvement targets, as below. Haringey's area-based grant has been apportioned according to top priorities for the borough with a substantial priority on employment, education and training. A copy of the resource plan for 08/09 is attached at Appendix C (currently under discussion).

- Serious violent crime rate (NI 15)
- Serious acquisitive crime rate (NI 16)
- Dealing with local concerns about anti-social behaviour and crime by the local council and the police (NI 21) TBA
- Building resilience to violent extremism (NI 35)
- Drug users in effective drug treatment (NI 40)
- First time entrants to the Youth Justice System aged 10 17 (N111)

Preventing and reducing domestic violence will remain a priority and Haringey's existing stretch target for reducing repeat victims of domestic violence continues.

In the light of new priorities and a revised national framework, we have also updated our arrangements for monitoring and measuring success at the local level and this is further described in sections 6 and 7.

3. Local context

3.1 Overall picture

Haringey is a hugely diverse borough with nearly half of all residents and three-quarters of young people from black and minority ethnic communities. In recent surveys, residents have rated the local diversity as a welcome and strong feature of the borough.

However, there are still pockets of enduring deprivation and worklessness, low educational achievement and health inequality. Housing need has been increasing and Haringey has levels of homelessness among the highest in London. Over 5,000 households are in temporary accommodation and one in five households is overcrowded. Local research and data show that African-Caribbean communities, and especially their young people, are still disproportionately affected by crime, and especially, acquisitive crime as both victims and accused.

Haringey also has a growing population and the number of children is increasing at the fastest rate. London as a whole but Haringey, in particular, has received higher than expected numbers of Polish and East European migrants over the past few years and is among the four boroughs in London with the highest number of national insurance numbers issued to Polish nationals.

We are aware that, whilst many members of these new communities make a valuable contribution to the area, others are vulnerable. As a partnership, we will need to regularly monitor and respond to the community safety issues that affect these population groups over the coming years. The crowded conditions in which many new arrivals to the borough are living also present a health and safety concern which will require attention.

The most recent research into the prevalence of problematic drug use estimates that Haringey has in the region of 2,485 problematic drug users¹. The patterns of drug use reflect geographical patterns of crime and deprivation with most of the people accessing drug treatment services coming from Tottenham and Wood Green. Haringey has rates of crack cocaine use above the London average; high levels of poly drug use; stabilised but significant opiate use; and an upward trend in cannabis use. There has been a substantial increase in the numbers of people entering drug treatment over the past two years and the future focus will be on treating the most problematic drug users and achieving longer-term outcomes for those completing treatment.

Both crime and local drug and sex markets are located in areas of high footfall. In Haringey, these are mainly Wood Green and Tottenham High Roads and Wood Green and Turnpike Lane stations with further hotspots around Seven Sisters, Bruce Grove, Northumberland Park stations and Green Lanes.

Recorded crime in Haringey has shown significant decreases over the past few years, as shown on the chart below. Despite this, it is still a high-volume crime borough and

¹ Glasgow University: Estimates of prevalence of opiate and/or crack use 2007).

the partnership remains concerned, especially about the amount of crime that affects young people and vulnerable families.

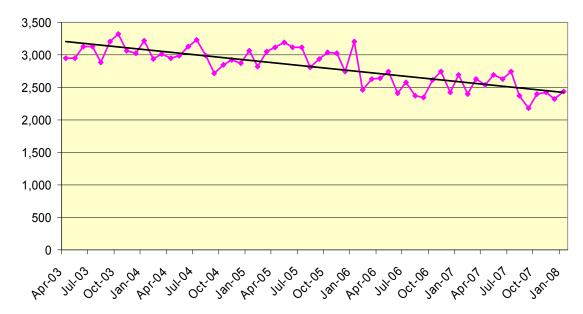


Chart 1: Total Notifiable Offences in Haringey April 2003 – January 2008

In spite of reductions in recorded crime nationally and locally, the British Crime Survey estimates that only 40 per cent of crimes are reported, so work still needs to be done to improve reporting rates. Anecdotally, it is known that under-reporting is higher in certain groups, for example young people, some ethnic minorities and victims of hate crime. Victim Support Haringey has been running workshops in schools to encourage young victims of crime to seek referral and support and we will continue to work with young victims in future.

The Annual Residents' Survey shows that while crime is still a top concern among residents, this is lower than in recent years and has fallen from 54% to 46% over the past year. In addition, residents appear to feel safer than in previous years, with a higher proportion reporting that they feel fairly or very safe both during the day and at night. The gap between perceptions of crime and the reality does still remain and will need to be addressed through more targeted communication and better community engagement.

The number of calls to the Anti-social Behaviour Action Team (ASBAT) has also been falling. The nature of the cases reported, however, appears to be more serious and the actual caseload is becoming more complex. Since the team was set up in 2004, it has prioritised prevention as a first measure but has also successfully taken civil action on behalf of residents against individuals causing serious and persistent problems. We will continue to strengthen our understanding of anti-social behaviour in the borough and to promote a co-ordinated response to its prevention and solution. The new ASB strategy 2008-2011 reinforces this.

Data from the Probation Service suggest that the greatest need for Haringey prisoners is related to skills for the workplace - higher than for London overall. Just over 20 per cent of Haringey residents have a level 1 or below qualification and 14 per cent have no

qualification. Although exam results have improved at twice the national average since 2001, educational attainment is still lower in the borough than in London and nationally. This will clearly remain a priority for co-ordinated work across the Local Strategic Partnership.

3.2 Sustainable Community Strategy

After a year of development and consultation, the Haringey Strategic Partnership published its overarching strategy to 2016 with the following priorities:

- > People at the heart of change
- An environmentally sustainable future
- Economic vitality and prosperity shared by all
- People and customer focused services

Safer for All

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 Healthier people with a better quality of life

The ambition of this strategy is to make lasting improvements to the quality of life for all by tackling the issues that still present barriers to success for too many local people. The main focus will be on improving the life chances for young people living in poverty by tackling deprivation and social exclusion. Substantial investment will be directed towards worklessness, and the Safer Communities Partnership will both benefit from and contribute towards the agreed outcomes from these priorities.

3.3 Links to other local Strategies

The following Haringey strategies have links to Safer for All:

- Mental Health Joint Strategy
- Supporting People Five Year Strategy
- > Changing Lives: Children and Young People's Plan
- > Annual Youth Justice Plan
- > Alcohol Harm Reduction Strategy
- Anti-Social Behaviour Strategy
- The Domestic Violence Strategy
- Haringey Homelessness Strategy
- Employment and Skills Strategy
- Enforcement Strategy
- Greenest Borough Strategy
- Adult Drug Treatment Plan
- Housing Strategy
- Waste Strategy
- Gambling Policy
- Licensing Policy
- > Haringey Regeneration Strategy: People, Places and Prosperity

The work of the Local Safeguarding Children Board (LSCB) will link into *Safer for All* where it relates in any way to children and young people. LSCBs were introduced as a statutory requirement under the Children Act 2004, with a broad remit to ensure that local work to safeguard and promote the welfare of children is well co-ordinated and effective.

4 Lessons learnt (2005-2008)

4.1 Overall picture

The previous strategy focused on four overall priorities:

- > Violent crime including domestic violence
- Acquisitive crime
- Anti-social behaviour
- Reducing the harm caused by drugs and alcohol

Underpinning these priorities were cross-cutting issues around young people, mental health, victim and witness support, and community engagement.

In 2005, the Safer Communities Partnership agreed a development agenda which recognised the importance of processes and skills in the delivery of community safety work. We also pledged to deliver *measurable* improvement. This agenda prioritised project management, evaluation, research and data analysis, communications, areabased problem solving and community engagement as hallmarks.

The agenda foresaw the development of the new national hallmarks and has placed Haringey in an excellent position to contribute strongly to the national strategy and to deliver the new requirements for effective partnership working. Although much of this work is already underway, improvements are needed in all areas and the importance of co-ordinated communication and engagement has been recognised across the partnership.

Our delivery structure has served us well for the last three years and has allowed specialist knowledge to be built up around our priorities. However, there is now a need for more integration across priorities and across areas of joint responsibility under Haringey's Local Area Agreement. Two of the most important areas for development will be to join up efforts in support of positive outcomes for young people and to co-ordinate wrap around services such as housing, treatment, education, skills and employment to reintegrate and resettle ex-offenders and former drug and alcohol misusers back into the community.

The evaluation and performance management frameworks that were set in place over the past couple of years have allowed us to manage resources and programmes more effectively and to establish a stronger link between what is needed, what works and the programmes we support. Haringey's Local Strategic Partnership is undertaking work to standardise and improve performance management and commissioning, and aligning work with new standards will be a priority for all partnerships.

Haringey has a varied and effective voluntary and community sector which is represented at all levels of the partnership. However, there is a need to improve our knowledge of the Third Sector and to work more strategically with key groups to build capacity and realise their delivery potential.

The Safer Communities Partnership has also taken oversight of Emergency Planning work within the borough, enabling a broader range of partners to be engaged in work to reduce the vulnerability of the borough to terrorism and other major incidents.

4.2 Violent crime (non-domestic)

Current situation and successes

Haringey has continued to see a steady falling trend in British Crime Survey (BCS) violence (wounding and common assault) over the last two years. We achieved a 15% reduction in 2006/07 - almost double the MPS reduction. The trend has continued this performance year.

Violent crime hotspots (particularly stranger violence) tend to correlate with vibrant latenight economy areas, such as Wood Green. It is thought that alcohol consumption by young adults is contributing to the problem.

Each financial year the Other Violent Crime Partnership Board has delivered an action plan focusing on communication, prevention and enforcement. The previous strategy highlighted three key areas of focus: young people and violence, joint operations and a knife crime strategy. While a specific strategy around knife crime has not been written, the partnership currently undertakes a variety of activities around knife crime and youth in particular.

Partners have made a range of successful contributions to reducing other violent crime since 2005: the Youth Offending Service, Red Cross, Victim Support, the Youth Service, Safer Schools Partnership and Project have all provided workshops and training in relation to young people and violence; partners have contributed to Police-led operations including Blunt, Curb and Trident. The partnership board led two problem solving meetings about alcohol-related violence and group related territorialism.

Key lessons learnt

- > There is no real pattern for violent crime in the borough
- > Problems flare up and require a swift and flexible response from the partnership
- > The earliest possible intervention is advocated in relation to preventing violence
- > Communication and reassurance is vital in relation to fears about violent crime
- > A coordinated approach to youth violence is essential
- Greater use of provisions within the Licensing Act 2003 should be made to address alcohol-related violence

4.3 Domestic violence

Current situation and successes

General statistics on domestic violence for England and Wales reveal that:

- > 1 in 4 women over the age of 16 has been a victim of domestic abuse
- Children may be affected in 90% of domestic violence incidents
- > 89% of those experiencing four or more attacks are women
- > 46% of women experience multiple forms of domestic abuse

> Domestic violence is predominantly but not exclusively a male to female crime

Domestic violence (DV) constitutes 30% of all violent crime in Haringey and remains a priority for the partnership. Due to its importance in Haringey and the high levels of suspected under-reporting, DV continues to have its own partnership board and a separate 4-year strategy. This should be consulted for more detailed information. Hearthstone acts as one-stop shop, providing a range of services for people facing domestic violence.

In 2006/07, the police recorded 3,310 incidents of domestic violence which amounts to a decrease of nearly 10% compared with the previous year. Wards in the east of the borough were by far the worst affected, reflecting higher levels of deprivation and population density. Currently, police performance in Haringey is showing unprecedented success in the rate of sanctioned detections for domestic violence and is outperforming all other boroughs in the Metropolitan Police Service.

During the course of the previous strategy, work to support children at risk was significantly increased including extensive prevention work in schools. There were also new developments in information sharing, training for front-line staff and in the piloting of perpetrator programmes. Regular awareness-raising has always been a priority for the DV agenda and this has continued.

Key lessons learnt

- Professionalism and suitable training for those in contact with survivors are key factors for trust and a positive outcome to be secured
- Domestic violence needs to be fully accepted as a priority across the partnership with a more co-ordinated approach that does not rely on the dedication and commitment of only a single member of staff with limited resources
- Structure, systems and processes are important and there is scope for improved user involvement, better accountability, joint protocols and more effective information sharing.

4.4 Acquisitive crime

Current situation and successes

As measured by the British Crime Survey (BCS), acquisitive crime has seen a steady declining trend during the last three years. During 2006/07, Haringey achieved an 8% reduction in 2006/07 and this trend has continued, albeit with more modest reductions.

Prior to 2005/06, personal robbery in Haringey fell year-on-year for three years. Overall personal robbery has seen a steadily declining trend since January 2005; including a 6% reduction in 2006/07 compared to the previous financial year. Performance for the period April 2007 – January 2008 showed a significant 21.3% reduction compared to the same period last year, averaging over 30 fewer robberies each month.

Although there have been year-on-year falls in burglary in recent years, sustaining high performance against targets has been a challenge. There could be a variety of reasons for this including:

- Robbery offenders 'switching' to burglary resulting from the success of antirobbery initiatives
- > Desirability of new products such as plasma televisions
- The impact of immigration (burglary is the top offence for Eastern Europeans victims)
- Influence of drugs (burglary is the second highest offence type for clients of the Drug Interventions Programme²)
- Volume of temporary housing and issues relating to Houses in Multiple Occupation (HMOs)

Overall, motor vehicle crime has been on a decreasing trend, with incidents of 'theft of' motor vehicles falling steadily and significantly. However, 'theft from' motor vehicles is a more challenging problem which is being affected by the desire for disabled badges, licence plates and audio equipment as well as the increasing popularity of goods such as SatNav systems.

Finding new ways of preventing and reducing these particular offences will require creativity and an ongoing focus of resources. Area-based working can contribute to this at a local level.

Tackling these, and the other acquisitive crimes, is co-ordinated by the Acquisitive Crime Partnership Group which has been focusing on four key areas; sharing information, targeted publicity, joint operations and target hardening. Specific areas of success in recent years include: The establishment of a system for sharing information about 'at risk' young people; the provision of training about the information sharing protocol; antiburglary and motor vehicle crime publicity campaigns; crime opportunity profiling of streets in two long-term burglary hotspots and the publication of a pocket directory of activities for young people during peak times for robbery.

Key lessons learnt

- Long-term and holistic solutions are required across the package of acquisitive crimes
- > Strategic analysis, forecasting and community intelligence is required in order to understand and respond to the different drivers of each crime type
- Public responsibility is the key to prevention and timely publicity campaigns can be successful
- Robbery is largely a young person's crime and requires joined up work across the providers of services to young people
- A significant proportion of acquisitive crime is committed by problem drug users. The continuation of the Drug Interventions Programme will ensure that a coordinated approach to this issue is maintained
- Recent research has shown that there may be a link between gambling premises and crime.

² The Drug Interventions Programme (DIP) aims to reduce drug related offending by providing appropriate and effective treatment to problem drug using offenders.

4.5 Anti-social behaviour³

Current situation and successes

Across the partnership a balanced and proportionate approach to dealing with anti-social behaviour has been developed. Key enforcement services – such as Safer Neighbourhood Teams, Environmental Enforcement and the Anti-Social Behaviour Action Team (ASBAT) – work together to deal with serious, complex and persistent problems.

The ASBAT is primarily responsible for enforcement using a range of powers such as dispersal orders, injunctions and anti-social behaviour orders, however during 2007 the preventative role was extended by the employment of a parenting worker and two support workers. This parenting support focuses on those families who have been identified as the most prolific anti-social behaviour offenders.

Recent joint operations have included:

- Homes for Haringey and Urban Environment tackling anti-social behaviour on estates; the Council signed up to the Respect Standard for Housing Management
- > Development of controlled drinking zones to limit drinking in public
- > Development of the Crack House Closure Protocol
- Operation Tailgate⁴
- ≻ Clean Sweep⁵
- > Establishment of 24 hour, 7 days a week out of hours service
- Establishment of the Tactical Enforcement Team

Information sharing has been key to developing joint working practices. Services dealing with anti-social behaviour have signed up to the Information Sharing Protocol allowing data to be shared between partners easily and minimising duplication.

Key lessons learnt

- > Continued joint operations is a key part of tackling anti-social behaviour
- Implementation of the ASB communications strategy will ensure that residents are kept informed and allow services to respond appropriately to residents' concerns
- Developing effective area-based problem solving around lower-level crime and ASB at an early stage will be key

4.6 Drugs and alcohol

Current situation and successes

³ The full Anti-Social Behaviour Strategy 2008-11 is available on request from the Community Safety Team.

⁴ Multi-agency enforcement concerning specific issues, for example nuisance garages, illegal gaming machine usage, unlicensed social clubs. Some of the agencies involved to date include, the Street Duties Team (Police), UK Immigration, Housing, Benefit Fraud Investigators and Department for Work and Pensions.

⁵ Multi-agency enforcement and cleanliness-based initiative in specific wards of the borough. The scheme is coordinated by the Better Haringey Team.

This programme of delivery is informed by an annual Needs Assessment which is then turned into an Adult Drug Treatment Plan. Problematic drug and alcohol misuse is a cross-cutting theme which runs through most of the priority areas in the strategy. By ensuring the provision of effective drug treatment, along with harm reduction and wraparound support services, drug related crime and in particular acquisitive crime is reduced as is risk of overdose and spread of blood-borne viruses. Work to tackle the supply of Class A drugs is undertaken through the borough's drugs squad, the DAAT, and drug treatment agencies. This joined up approach is the most effective means of minimising displacement following crack house closures.

The borough's three year Alcohol Strategy comes to an end in April 2008. Work is underway to update this strategy and align it more with the updated national Alcohol Strategy, Safe. Sensible. Social. Some of the priorities will be: Reducing alcohol-related hospital admissions, including the effect of harmful and binge-drinking; work to reduce alcohol-related violent crime and anti-social behaviour.

Key lessons learnt

- > A wraparound approach is key to successfully re-integrating problem drug users
- The effects of alcohol on offending remain unclear owing to poor recording and data quality
- Responsibility for drug and alcohol work needs to be further mainstreamed across the Haringey Local Strategic Partnership
- The percentage of those arrested for trigger offences testing positive for opiates and/or cocaine (33%) has remained consistent across the last 12 months

4.7 Young People

Current situation and successes

Youth crime (the number of accused and youth victims) has seen a falling trend over the last three years in Haringey. Specifically, the number of youths accused has reduced consistently including a significant reduction of over one quarter (27.4%) for the year ending March 2007. The number of young victims in Haringey has followed a similar falling trend. Personal robbery remains the most prolific offence type accounting for a quarter of all accused. However, contrary to the borough trend, the level of violent offending among young people has increased.

The proportion of young people committing serious offences of robbery and violence has increased since 2002. This trend confirms the need locally to prioritise more serious violent crime.

Young people were a key focus over the last few years, with particular attention being paid to projects around violence. These projects included knife crime workshops, weapons awareness courses and prison visits for school pupils. Operation Curb, tackling youth violence, was launched in 2007.

Many evidence-led, targeted programmes aimed at young people have been successful, in particular, engagement and diversion projects led by the Youth Service, Off the Street Less Heat, the Haringey Police and Community Boxing Club and the recent 'Say Yes' Challenge at St Thomas More School.

As previously stated, there is a real need to co-ordinate partnership resources and experience around the safety and success of young people in the borough during this new strategy period.

The Youth Service Detached Team has responded to concerns about anti-social behaviour by young people. They have successfully worked with other local partners and engaged with young people making a positive impact.

The DAAT Young Peoples' Needs Assessment (2007) estimates that in the region of 176 young people could be in need of specialist drug treatment. A treatment system has been designed which screens and targets those most at risk of developing substance misuse problems. Key posts within Schools, the Leaving Care Team, Children and Families and the YOS along with a dedicated specialist Young Persons Treatment Service (Involve - Haringey) ensure that an integrated support and treatment system is in place which aims to prevent the onset of problematic substance misuse and associated crime and anti-social behaviour.

Key lessons learnt

- Services for young people should not be delivered in isolation, a coordinated approach is essential
- > Responses to youth crime should be tailored at a neighbourhood level
- Good engagement and diversionary activity does impact on crime and anti-social behaviour
- > Priority should be given to activity that challenges negative behaviour

4.8 Mental health

Current situation and successes

A register of people with severe mental illnesses has been developed, following a requirement for GPs to collate information about patients within their practice, who present with certain conditions. The criteria for inclusion include diagnoses of schizophrenia, bipolar disorder and psychoses.

As of March 2007, 656 Haringey residents were on the register, with the highest rates of diagnosed mental illness in the east of the borough, and the overall rate higher than registered nationally. The differences between national and local rates cannot be easily explained, however influencing factors may include the relatively young population of Haringey, the more diverse ethnic mix and high levels of deprivation.

A new service in Haringey has been developed to encourage residents with mild mental health problems or who are experiencing stress, worry or panic to discuss their concerns with a professional. *Health in Mind* takes place in a community setting, with regular dropin sessions held at Wood Green Library. The sessions provide one-to-one emotional support, advice and guidance, and where necessary referrals will be made to established mental health services.

The current Mental Health Strategy for Barnet, Enfield and Haringey is reaching its end and a new strategy will be developed during 2008, setting out the local mental health needs and designing the services required to meet those needs. We will continue to support Forensic Nurses in custody suites and will further develop joint working between community mental health teams and the Anti-social Behaviour Action Team. We will Monitor the ability of the Workstep Programme to help ex-offenders with disabilities (physical, learning and mental health) into employment.

Key lessons learnt

- Mental Health Teams need to continue developing joint working practices with partners to ensure the best outcomes for service users
- Work around less serious mental health problems must continue in order to prevent more serious problems developing
- The information from the Mental Health Register can be used to target services more effectively

4.9 Emergency Planning

Current situation and successes

Over the past few years, there have been a significant number of incidents in the borough requiring a multi-agency response to safeguard the public. Partnership arrangements have been broadened and strengthened, allowing such incidents to be successfully managed.

The threat from international terrorism remains severe in the UK, and London remains a key target. It is also evident that climate change will significantly increase the risk of severe weather events, if it is not already. All partners are committed to putting in place the capabilities to deal with the challenges that these risks present.

Future work will focus more and more on increasing public awareness of these threats, and developing community resilience by encouraging practical preparation by businesses and residents.

4.10 Consultation

Current situation and lessons

Recent consultation with key partners and board members has revealed a high degree of consensus about where we have got to and how we need to go forward, including the focus of our joint work for the coming three years.

Specific consultation with the public takes the following shape and has helped inform this strategy:

- Six-monthly consultation with 3,800 residents in all 19 wards with police Safer Neighbourhood Teams to inform local priorities
- A one-to-one survey on concern about crime during the Christmas period in a number of top hot spots for crime and ASB, including Wood Green and Tottenham
- Annual Safer Sixties events and consultation around crime prevention, fire safety and health improvements
- Interactive consultation meeting with all criminal justice partners and a wide cross section of local residents prior to the Community Justice Pilot in Haringey
- Annual Residents' Surveys
- Individual consultation undertaken during 2007/08 with young people of African-Caribbean origin, as the group most disproportionately affected by crime and victimisation in the borough
- > Anti-social behaviour awareness sessions and intelligence gathering in schools
- Involvement of the Drug Users' Group
- > Business/education crime reduction challenge (Say Yes) with secondary schools
- Consultation on Police relations with young people

In addition, all of the strategies listed in section 3.3 will have involved some form of consultation.

Key lessons learnt

- > The best solutions come from those closest to the ground
- > Consultation must be well prepared, relevant and focused
- > Consultation must not only be heard but used

5. **Priorities (2008 – 2011)**

We will work in partnership with key staff and their resources across the Council, Criminal Justice System and in the Community and Police Consultative Group, Schools, Victim Support, Fire Service and the wider business and community sector, using extensive input from stakeholders and public consultation. Over the coming three years our work will focus on the following key areas.

- 1. Young people prevention and support
- 2. Serious crime violence, acquisitive crime and domestic violence
- 3. Anti-social behaviour A focus on children and families, housing and the public realm
- 4. Drugs and alcohol prevention, effective treatment and re-integration
- 5. Reducing re-offending adults and young people
- 6. Increasing confidence across the Criminal Justice System

5.1 Young people - Prevention and support

- Map and co-ordinate youth-related prevention and intervention work across the Haringey Strategic Partnership
- Develop co-ordinated responses through the Youth Summit (inc. restorative approaches; community safety impact assessments in schools etc)
- Commission targeted youth activity and diversion with proven outcomes (including the Local Intervention Fire Education project run by London Fire Brigade and the Leadership Centre)
- Regularly address all youth related issues raised through area-based working. (Long-term and ingrained problems will be resolved through problem-solving)
- Continue the 'Say Yes Challenge' to increase skills for the workplace
- Roll out the Youth Inclusion Project borough-wide and ensure closer links with the Youth Inclusion and Support Panel
- > Implement key findings from the Haringey Disproportionality Report 2007
- > Increase reporting, referral and support from young victims
- The Youth Offending Service will contribute to the Every Child Matters agenda for children and young people

5.2 Serious crime – violence, acquisitive crime and domestic violence

- Contribute to the designing out crime agenda through partnership working with Planning, Highways, Health and Housing and Transport for London
- Commission targeted crime prevention publicity campaigns with respect to motor vehicle crime and burglary
- > Develop a programme for businesses 'at risk' of robbery
- Continue to exchange information about 'at risk' young people between 16 25 years of age
- Deliver a programme of research and relevant action about alcohol-related violence

- > Commission and support early intervention projects regarding weapons
- Explore further the potential links between crime and gambling in Haringey, and respond appropriately
- Continue to support organisations which provide services to victims of burglary, including Metropolitan Care and Repair and Victim Support, with special focus on repeat victimisation
- Targeted approaches to crime, particularly taking account of the new communities and high turnover of population
- Commitment to assessing the impact of organised crime on enforcement services in the borough

Based on experience, the new domestic violence strategy for Haringey will embrace gender abuse to include 'honour based' crime and female genital mutilation. The strategy has the following strategic priorities to:

- Improve the safety of, and support to, those who experience or who are threatened by domestic violence
- > Improve the quality, co-ordination and effectiveness of services
- Hold abusers to account
- > Reduce the tolerance of domestic violence in local communities
- > Undertake constructive work with perpetrators
- Support targeted outreach work around Lesbian, Gay, Bisexual and Transgender domestic violence

The existing stretch target for reducing the repeat victimisation of domestic violence sufferers will remain.

5.3 Anti-social behaviour – A focus on children and families, housing and the public realm

- Develop evidence based approaches using a variety of research and data sources, particularly at ward level
- Reduce the opportunity for anti-social behaviour, with a focus on young people, and work to support families where there is a significant risk of members becoming perpetrators
- Focus enforcement on dealing with the causes of anti-social behaviour and deliver a programme addressing environmental crime
- Increase engagement with the community including new immigrant communities, in particular tackling perceptions around anti-social behaviour
- Address the need for structured engagement for young people; at schools and colleges, and through further education, employment and training
- Tackle anti-social behaviour across all housing tenures
- Continued investment in operations improving the cleanliness of the borough
- Commitment to work with strategic housing services to examine and respond to the link between housing and community safety

5.4 Drugs and alcohol – prevention, effective treatment and reintegration

- Identify ways of delivering wraparound services under the changing national priorities and reduced budgets
- Prioritise effective treatment programmes, identifying the most problematic users
- Carry out research examining the relationship between problematic drug use and serious acquisitive crime, to improve targeting of services
- Continue to align the work of the Drug Interventions Programme (DIP) and Priority and Prolific Offender (PPO) scheme, making best use of resources
- Improved application of the Licensing Act 2003 to address problem licensed premises; for example tackling underage sales of alcohol and violence

5.5 Reducing re-offending – adults and young people

- Adapt the London Resettlement Project locally, joining up all the strands of work across both adults and young people, linking in DIP and PPO
- Support ex-offenders into sustainable employment, training or apprenticeship under the Haringey Guarantee and the Worklessness Programme
- Keep abreast of best practice and developments, working closely with the London Resettlement Strategy Group

5.6 Increasing confidence across the Criminal Justice System

- Roll out and publicise a Third Party Reporting network. Monitor impact through the partners on the Hate Crime Group
- Implement an evidence-led and co-ordinated community engagement plan⁶
- Support and monitor the impact of the Community Justice Pilots (first pilot was launched in February 08)
- > Complete Police training programme for Stop and Search / Stop and Account
- Increase satisfaction with the police and local authority response to ASB and crimes that matter to local communities
- Improve partnership working between Victim Support and other key public-facing groups and services such as Safer Neighbourhoods, Hearthstone One Stop, ASBAT, YOS and community mental health teams
- Implement, develop and monitor the Preventing Violent Extremism Programme

⁶ There will be a particular emphasis on working with and supporting vulnerable groups such as repeat victims, victims of serious crime and hate crimes and communities whose safety and feelings of safety are disproportionately affected by their circumstances, their neighbourhood or their involvement in the criminal justice system.

6. Our approach

There is universal support from partners for the following approach to be adopted in addressing our agreed priorities.

6.1 Agreed principles

More strategic and cross-cutting partnership planning/co-ordination

- Sustainable change can only be brought about by multi-disciplinary approaches. More effective links need to be built up across the Haringey Strategic Partnership to both support those most in need via wraparound services and to tackle the cross-cutting themes of crime and community safety (see Section 7.2)
- Clarification of the roles and responsibilities of all partners is needed this will ensure that multi-disciplinary approaches work well
- Coordination of work around early intervention and prevention of serious crime and anti-social behaviour. The emphasis should be on young people with restorative approaches, mediation and mentoring being considered, particularly at primary school age
- > Coordination of enforcement tools and systems such as CCTV
- In tackling crime and anti-social behaviour, we must balance proactive, programmed work with the need to ensure we can respond quickly to emergencies or new problems
- Continued progression of area-based working to ensure that it becomes embedded within the delivery structure and strategic approach

Problem-solving and outcome-focused activity

- Problem-solving approaches should be fully integrated into the day-to-day business of the partnership (see section 6.3)
- > The Evaluation Framework should be further developed and where appropriate training carried out to ensure it is understood (see section 6.2 following)
- A more robust performance management framework developed in line with corporate developments
- Continued development of the strategic assessments ensuring that robust and reliable data and community intelligence are included alongside detailed analysis for use in allocating resources and forward planning.

Communication and engagement at the heart of Community Safety delivery

- A coordinated programme of communications, marketing and reassurance needs to be implemented including ensuring residents are aware of the different ways to report crime and anti-social behaviour
- Clear lines of communication, both internal and external, need to be established and understood
- > Implementation of co-ordinated partnership Communication Strategy

- Agree a joint forward plan for effectively engaging priority groups and addressing under-reporting (see outline at Appendix C)
- More constructive work with the Third Sector (voluntary and community organisations) and their networks as well as improved engagement with the community, in particular young people
- Targeting engagement at those groups that are over-represented in the Criminal Justice System and those hard to reach groups with emerging problems
- Agree a programme of public meetings for senior partnership members to be held at least once a year ('Face the People' sessions)
- Increasing confidence in the partnership and Criminal Justice System as a whole, using positive publicity, engagement and training
- Understanding local concern about crime and addressing its causes, closing the gap between residents' perceptions and actual risk

6.2 Evaluation / Monitoring

During 2006/07 a partnership evaluation framework was developed and implemented. The framework was designed to provide a system for assessing the impact of partnership working and for improving future efforts. There are six key aims of the framework:

- > Providing an audit trail of partnership funding
- Examining the impact pf partnership working
- Driving up performance
- Ensuring value for money
- Avoiding duplication of effort
- Ensuring accountability

Each project / programme funded through the partnership has been required to provide quarterly monitoring reports and a final evaluation report at the end of the financial year. Where there were delivery issues, the monitoring process enabled project leads to identify and reflect on problems, learn lessons and make necessary changes.

6.3 Problem Solving Process

More complex or ingrained problems can be dealt with through the problem solving process, which is based on a national model. This process involves defining the problem, setting baselines and aims, developing responses using research and analysis, and evaluating the whole process once complete. The analysis ensures that efficient, effective solutions are found and the evaluation determines success, cost effectiveness and good practice.

7. Delivery framework

The diagram following illustrates how the working structure of the partnership fits into the Home Office guidance. Most of the structure is already firmly established and commitment has been shown across the partnership to strengthen it and to apply robust problem-solving principles to the work.

Area based working

This is essentially partnership working at a local level, with local partners working together to address emerging crime, disorder and environmental problems. These include Safer Neighbourhood Teams, Urban Environment and Neighbourhood Management⁷. These teams meet on a monthly basis under the umbrella of Area Based Working Groups (ABWG), which cover two to four wards each and correspond with existing Area Assemblies.

The work of the ABWGs is guided by joint priorities set for each ward by a combination of public consultation and data analysis, and the evidence provides a baseline for monitoring the achievements of the ABWGs. For more complex and ingrained problems, the ABWGs will be supported to use problem-solving techniques. The Safer Communities Service will add value, for example helping to share good practice and coordinate problem solving.

Partnership Groups

These are multi-agency groups, currently known as Partnership Boards, which cover the borough-wide strategic priorities. The Safer Communities Service co-ordinates these groups, ensuring the flow of information between the strategic and operational level is kept open. The Partnership Groups facilitate joined-up responses to identified problems.

For those problems that cannot be resolved, the ABWGs will escalate the issue to the appropriate Partnership Group.

Resource Coordination Group (formerly Servicing Group)

This group will oversee the problem solving process at the Partnership Group level and where required and appropriate will offer advice and allocate additional resources.

Performance Management

Under the new Performance Management Framework area-based working, problem solving, monitoring and evaluation are key to ensuring that the work of the partnership is outcome-focused.

The Performance Management Group (PMG) will meet periodically to consider reports from the Safer Communities Service. These will be based on progress by the ABWGs;

⁷ Other delivery mechanisms include the following, but the list is not exhaustive: ASBAT, Community Courts, Community Organisations, Drug Intervention Programme, Enforcement Service, Faith Organisations, Hearthstone, Homes for Haringey, Police Reactive Units, Primary Care Trust, Probation, Urban Environment, Victim Support, Voluntary Sector, Youth Offending Service, Youth Service.

progress against our main borough-wide indicators and assessments of the performance of the partnership as a whole.

Safer Communities Executive Board (SCEB) is the statutory Crime and Disorder Reduction Partnership which agrees and oversees the strategic direction of the partnership and compliance with all guidance from central Government. SCEB is the final escalation point for problems that cannot be solved in other areas of the partnership.

Analytical support

At all levels analytical support will be provided in order to guide decision making and working practices. This will include annual strategic and needs' assessments to inform the SCEB, with baselines, tactical analysis and evaluation provided to guide the problem solving process.

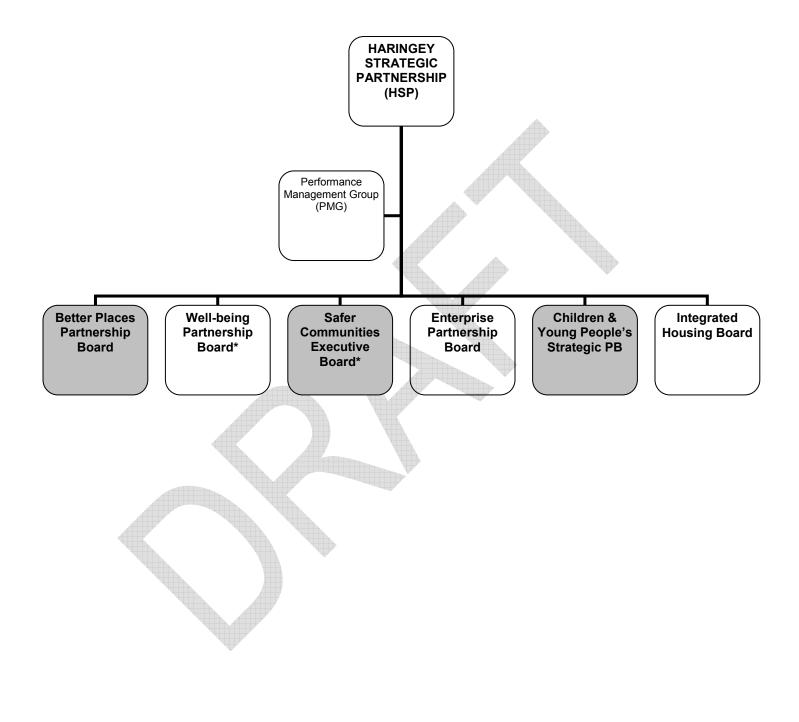
Benefits

This model is in line with the Home Office guidance. It allows partners to link resources improving efficiency and to deal with issues that do not fall under the remit of one particular partner. The setting of joint priorities will steer the area based working towards the issues of most concern to the community. The advantage of being able to refer blockages to the PMG or SCEB is that the partners are able to fulfil their obligations and that all issues can be dealt with

7.1 Safer Communities Partnership Delivery Structure (under development)







Appendix A – National Indicator Set (NIs)

Safer Communities block

- > NI 15 Serious violent crime rates PSA 23
- > NI 16 Serious acquisitive crime rate PSA 23
- > NI 17 Perceptions of anti-social behaviour PSA 23
- > NI 18 Adult re-offending rates for those under probation supervision PSA 23
- > NI 19 Rate of proven re-offending by young offenders PSA 23
- > NI 20 Assault with injury crime rate PSA 23
- NI 21 Dealing with local concerns about anti-social behaviour and crime by the local council and police PSA 23
- NI 22 Perceptions of parents taking responsibility for the behaviour of their children in the area HO DSO
- NI 23 Perceptions that people in the area treat one another with respect and dignity HO DSO
- NI 24 Satisfaction with the way the police and local council dealt with anti-social behaviour HO DSO
- NI 25 Satisfaction of different groups with the way the police and local council dealt with anti-social behaviour HO DSO
- > NI 26 Specialist support to victims of a serious sexual offence PSA 23
- NI 27 Understanding of local concerns about anti-social behaviour and crime by the local council and police HO DSO
- > NI 28 Serious knife crime rate HO DSO
- > NI 29 Gun crime rate PSA 23
- > NI 30 Re-offending rate of prolific and priority offenders HO DSO
- > NI 31 Re-offending rate of register sex offenders PSA 23
- > NI 32 Repeat incidents of domestic violence PSA 23
- NI 33 Arson incidents HO DSO
- > NI 34 Domestic violence murder PSA 23
- > NI 35 Building resilience to violent extremism PSA 26
- > NI 36 Protection against terrorist attack PSA 26
- > NI 37 Awareness of civil protection arrangements in the local area CO DSO
- > NI 38 Drug-related (Class A) offending rate PSA 25
- > NI 39 Alcohol-harm related hospital admission rates PSA 25
- NI 40 Drug users in effective treatment PSA 25
- > NI 41 Perceptions of drunk or rowdy behaviour as a problem PSA 25
- > NI 42 Perceptions of drug use or drug dealing as a problem PSA 25
- NI 43 Young people within the Youth Justice System receiving a conviction in court who are sentenced to custody MoJ DSO
- NI 44 Ethnic composition of offenders on Youth Justice System disposals MoJ DSO
- NI 45 Young offenders engagement in suitable education, employment or training MoJ DSO
- > NI 46 Young offenders access to suitable accommodation MoJ DSO
- > NI 47 People killed or seriously injured in road traffic accidents DfT DSO
- > NI 48 Children killed or seriously injured in road traffic accidents DfT DSO
- NI 49 Number of primary fires and related fatalities and non-fatal casualties, excluding precautionary checks CLG DSO

Relevant indicators from other blocks

- > NI 111 First time entrants to the Youth Justice System aged 10–17 PSA 14
- NI 143 Offenders under probation supervision living in settled and suitable accommodation at the end of their order or license PSA 16
- NI 144 Offenders under probation supervision in employment at the end of their order or license PSA 16
- NI 195 Improved street and environmental cleanliness (levels of graffiti, litter, detritus and fly posting) Defra DSO
- > NI 196 Improved street and environmental cleanliness fly tipping Defra DSO

Appendix B – Risk register for Safer Communities

This register sets out the principal risks under the responsibility of the Safer Communities Executive Board. The risks are linked to the new performance framework which begins with effect from 1 April 2008 and are based upon the objectives and targets set out below.

The overarching target area for SCEB is Public Sector Agreement 23: Make Communities Safer. The National Community Safety Plan also recognises overlap with the PSAs set out in section 2.2 of this strategy

Safer Communities priorities and key targets (2008 – 2011)

- Target 1: To provide co-ordination, development and monitoring of strategic policy and planning to reduce crime, substance misuse and anti-social behaviour
- > Target 2: To reduce serious violent and acquisitive crime (NI 15 and 16)
- Target 3: To prevent offending and re-offending by young people, reducing first time entrants to the CJS for 10 – 17 year olds (NI 111) and prevent re-offending by adults
- Target 4: To deal with local concerns about anti-social behaviour and crime by the local council and police (NI 21)
- > Target 5: To increase the numbers of drug users in effective treatment (NI 40)
- > Target 6: To build resilience to violent extremism (NI 35)
- Target 7: To ensure that the Borough continues to be well prepared for emergencies – increasing awareness of civil protection arrangements in the area (NI 37)
- > Target 8: To increase local confidence in the criminal justice system

Key to the Risk Register:

Inherent Risk: assessed by Impact (I) and Likelihood (L). The Inherent risk is the impact of the risk occurring, and how likely it is to occur, without any mitigating actions in place to address the risk. The Impact and Likelihood of the risks are scored from 1 to 9 with 1 being low and 9 high. The rankings can be tied into the overall Council Risk Framework.

Controls: the actions and processes which are currently in place to manage the risk identified.

Residual Risk: assessed on the same rankings as Inherent Risk. The Residual Risk is the impact and likelihood of the risk occurring with the current controls in place.

Further Action: Where there is outstanding residual risk, further actions have been identified to reduce the exposure to the risk.

Ref	Risk Identified	Inherent Risk		Controls	Residual Risk		Comment / further action
		Impact	Lhood		Impact	Lhood	
Гarge ASB	t 1: To provide co-ordination,	developm	ent and n	nonitoring of strategic policy and planni	ng to redu	ice crime	, substance misuse and
1	Failure to implement the recommendations and requirements from the Crime and Disorder Act Review	7	5	 Performance Management Group (PMF) in place for the SCEB with senior leadership. More effective links between area-based problem solving, borough-wide monitoring and the PMG New Safer for All Strategy 2008-2011 	6	4	New Safer for All strategy has taken account of the requirements
2	Failure to improve performance of the Safer Communities Partnership	7	7	 Evaluation framework is picking up any failures/delays in delivery Renewed PMG will be ensure proactive monitoring and adjustment Two-way delivery model is underway Full-time Development Co-ordinator (Data and Performance) in place 	5	3	Effective use of partnership funds Improve usefulness and timeliness of Data reports and joint tasking
3	Failure to improve performance of the Drug Intervention Programme			 Preparation of Adult Treatment Plan 08 Implementation of Young Person's Treatment Plan Monitoring of contracts (crack service, DIP, Step Ahead, Involve etc) 			Close monitoring of all key contracts Corporate (joint) commissioning model awaited
arge	t 2: To reduce serious violent	and acqui	sitive cri	me (NI 15 and 16)	1		1
4	Failure to achieve volume crime reductions	5	8	 Robust monitoring in place Maintaining tried and tested 	5	6	Focusing efforts on smaller no. of targets will help.

Ref	Risk Identified	Inherent	Risk	Controls	Residua	l Risk	Comment / further action
		Impact	Lhood		Impact	Lhood	
				responses (Video ID suite, Q cars, intelligence, bail conditions)			Impact may only be seen over longer term
				 Experienced multi-agency problem- solving groups are in place 			New targets plus new partners to get engaged
				 Greater priority across the partnership on early intervention and prevention 			Importance of maximising partnership work and community engagement
5	Failure to co-ordinate activity across Council	8	7	 Review of contribution and roles/ responsibilities is underway 	6	4	Promote section 17 duties
	departments and with key partners			 Realignment of work plan priorities for Safer Communities strategic team 			T ag
				 Corporate assessment of overlaps and common ground planned early 2008/9 			۵ ۲ ۲
Target	3: To prevent and reduce of	fending by	young p	eople aged 10-17 and re-offending by yo	ung peop	le and ad	ults
6	Failure to prevent and reduce offending and re- offending by young people	7	9	Map and co-ordinate youth-related prevention and intervention work across the HSP	5	6	Closely monitor and consider other actions as required
				 Co-ordinate investment in youth activity and diversion with proven outcomes 			
				 Evaluation of Multi-systemic Therapy programme by 2009 			
				Improvement plans all being progressed			

Ref	Risk Identified	Inherent Risk		Controls	Residual Risk		Comment / further action	
		Impact	Lhood		Impact	Lhood		
7	Failure to reduce re- offending by adults			 Commitment to adapt the London Resettlement Model locally in 08/09 Women's London Resettlement Project underway DIP/PP0 alignment in place and producing result 		6	Resources and ability to deliver will require close monitoring NOMS may undergo further restructuring	
Targe	t 4: To deal with local concer	ns about a	nti-social	behaviour and crime by local authority	and police	e		
8	Inability to favourably influence public perception	5	8	 Continue Safer Neighbourhood Teams Delivering Communications Strategy and targeted community engagement Area-based working and problem solving model to be rolled out 	5	6	Pilot effectiveness of local communications/ marketing efforts	
9	Failure to progress ASB cases that involve harassment and serious threats of violence, resulting in damage to individuals and the SCP	8	8	 Maintain policy of early intervention and effective application of all ASB- related legislation Close partnership work, especially between Police/ASBAT/Enforcement Introduction of new ASB strategy 	5	6	Resources and levels of absence will need to be closely monitored	
Targe	t 5: To increase numbers of c	Irug users	in effectiv	ve treatment				
10	Failure to deliver key aims of the Adult Drug Treatment and Young People's Substance Misuse Plans	5	7	 Budget re-profiling underway Effective tendering followed by robust contract monitoring DAAT Performance Management Group involving providers to ensure 	5	4	Mainstream responsibility crucial as well as co- ordinated wrap around services especially with housing, employ-mint/skills	

Ref	Risk Identified	Inherent Risk		Controls	Residual Risk		Comment / further action
		Impact Lhood			Impact Lhood		
				action taken if targets not being met.			etc
				User involvement and move towards individualised budgets underway			
arget	: 6: To prevent violent extrem	nism					
11	Failure to make an impact, especially in the short term	7	7	Programme of prevention, diversion, engagement and education underway with young people and Muslim Women	5	5	This work is relatively new and may only bear fruit in the long run
				 Strong links with community exist through Police Community Liaison Officer and CPCG 			
Target	7: To ensure that the Borou	gh continu	es to be	well prepared for emergencies and Civil	Continge	ncies Act	2004
12	Perceived failure of Partnership's response to an emergency	9	6	Emergency and Business Continuity Plans in place (+ LESLP procedures, pan-London plans and protocols) along with programme of exercise/ training	7	4	Use 'Minimum Standards for London' to review plans and capability of the partnership
				 Excellent partnership arrangements in place through Haringey Emergency Planning Partnership (HEPP) and the Local Resilience Forum (LRF) 			
				Contingency plans in place			

Appendix C – Resource Allocation Plan

(Highlights and overview) 08/09

The draft plan following includes funding received through the Area Based Grant & the Basic Command Unit Fund (It should be noted that the allocation procedures of the Basic Command Unit Funding has yet to be agreed by Central MPS & GoL and the level is yet to be confirmed). The amounts allocated to non staff projects may well need to be adjusted when the procedures are agreed). Not included at the moment are the Pooled Treatment Budget or Youth Justice Board statutory funding as these are ringfenced against specific work under the DAAT and YOS respectively.

SCEB is responsible for the following National Indicators in the LAA and they are shown against the resources plan highlight chart overleaf:

Serious violent crime rate (NI 15), Serious acquisitive crime rate (NI 16), Dealing with local concerns about anti-social behaviour and crime by the local council and the police (NI 21), Building resilience to violent extremism (NI 35), Drug users in effective drug treatment (NI 40), First time entrants to the Youth Justice System aged 10 - 17 (NI 111)

Priorities	Priorities Proposed Funding		ling National Contributing Indicators Agencies		Comments
	Staff	Projects			
All CDRP Strategic	& Priorities				
Safer Communities Provision	464,300		15, 16, 21, 35, 40, 111	Council	Statutory CDRP strategic and policy work, resource management/commissioning, partnership management and development, communications, data and analysis co- coordinating crime prevention. Key YOS prevention work.
Haringey Police Provision	315,000		15, 16, 21, 35, 40, 111	Police	This money is used to deliver added value policing in pursuit of the Targets set under current PSAs. It primarily delivers "partnership activity" over and above core policing responsibilities. This money is also used to match fund against central MPS resources or actually provide extra cover at peak times by paying overtime to officers.
Community Safety CCTV Management	25,000		Cuts across LAA Priorities to reduce crime	Council	This part funds a CCTV control room manager.
Preventing Violent Extremism		180,000	35	Council/Police/Third Sector	Ring Fenced grant within Area Based Grant to focus on prevting violent extremism within the definitions of NI35
Young People Pre	vention & Su	upport			
Local Intervention Fire Education (LIFE) Project		24,000	15,16,111	Fire Service	At risk young people are mentored by fire officers and are trained to "run" a fire station. The young people are expected to gain an understanding of the rewards of effort, teamwork and communication.
London Boxing Academy		20,000	15,16,111	Third Sector	The London Boxing Academy provides alternative education for young people who would otherwise be excluded from school. This is additional to the core funding they receive from schools and through fundraising elsewhere.

Priorities	Proposed	Funding	National Indicators	Contributing Agencies	Comments	
	Staff	Projects				
Off The Street Less Heat (BWFE)		10,000	15,16,111	Council/Police	Off the street less heat runs on Broadwater Farm Estate to engage young people at risk of crime and ASB late in the evenings (8pm- midnight) during school holidays. A borough wide pilot was trialled through 2007/08 however it has become apparent that this project is best suited to BWFE.	
Junior Citizens		6,000	15,16,111	Police	This project provides a transitionary programme of work for year 6 young people before they move to secondary schools across the borough.	
Value Life +		25,000	15,16,111	Schools	Value Life was instigated by young people at Gladesmore School in 2002. This is Year 5 of the project and it is anticipated that the partnership will encourage other schools to become involved in this celebration of young people's activities and allow their voice to be heard against weapons and violence.	
Say Yes Challenge		20,000	15,16,111	Council	The Say Yes Challenge is a social enterprise project engaging young people to develop solutions to local crime & anti-social behaviour issues.	
Haringey Amateur boxing Club		40,000	15,16,111	Third Sector	The Community & Police Amateur Boxing Club engages and mentors young people and challenges poor behaviour. In 2007/08 they were commissioned to provide activity during school holidays in schools across Haringey.	
YOS Foreign Nationals Worker	41,500		15,16,111	Council	This funds a post in YOS to carry out ethnically sensitive work with the differing communities known to the YOS by providing services relevant to their needs.	

Priorities	Proposed	Funding	National Indicators	Contributing Agencies	Comments	
	Staff	Projects				
Serious Violence						
Territorialism		50,000	15, 111	Council/Police/Third Sector	This fund will be used to commission work dealing with weapons and Territorialism across Haringey. Evaluation is taking place of several commissioned projects in 2007/08. (e.g. Be Safe)	
Leadership		30,000	15, 111	Council/Police/Third Sector	Leadership for young people has been highlighted as an area of need over the last year. This fund will be used to commission leadership work with young people across Haringey.	
Reducing Harm from Weapons		10,000	15, 111	Third Sector	This fund will be used to commission work with young people to challenge their views on weapons around the "Fear or Fashion" model (e.g. 'What's the Point?')	
Addressing and reducing domestic violence	82,400		32,34	Council	This facilitates the following work: administration of DV partnership board, sub- group and forum, co-ordination of the DV strategy and action plan, publicising initiatives to combat DV, running DV stakeholder events, conferences and expert user groups and runs initiatives to support LAA stretch targets.	
Serious Acquisitiv	e					
Met Care & Repair	45,000		16	Third Sector	Met Care & Repair are a sub group of Metropolitan Housing trust and provide a burglary reduction project for over 55s & vulnerable adults in Haringey	
Reducing Re-offer	nding					
Forensic nurses	25,000		15, 16	Mental Health Trust	This extends the provision of Mental Health Trust nurses into custody suites across Haringey to ensure that subjects arrested with Mental Health issues are fast tracked	

Priorities	Proposed	Funding	National Indicators	Contributing Agencies	Comments
	Staff	Projects			
					into appropriate treatment.
Restoratives Approaches		12,000	15, 16, 111	Schools	This funding trains primary school staff in restorative approaches for use in their schools to encourage young people to understand the impact of their actions at an early stage.
Anti-Social Behav	viour				
New Communities		15,000	15, 16, 21	Third Sector	This funding will be used to engage new communities with training and communications around laws and acceptable behaviour in Haringey.
Mediation		21,832	15, 16, 21	Third Sector	This fund will be used to develop a mediation process in Haringey that may well be able to reduce the seriousness of ASB incidents and the workload of ASBAT.
ASBAT Private and public sector work	229,500		23,24,27,17, PSA 21,23,14,17	Council	To respond to cases of ASB in the private and public sector and to protect the community as to the affects of ASB. To deliver on the Councils ASB strategy. This matched with 50% from core budget
ASB Grant	20,000		21	Council	50% of a Policy Officer post in the Community Safety Team co-ordinating ASB policy and strategy. This is matched with 50% core budget

Appendix D – Community engagement Outline

The British Crime Survey (BCS) measures the amount of crime in England and Wales by asking people about crimes they have experienced in the last year. This includes crimes not reported to the police, so it is an important alternative to police records. Because members of the public are asked directly about their experiences, the survey also provides a consistent measure of crime that is unaffected by the extent to which crimes are reported to the police, or by changes in the criteria used by the police when recording crime. The survey also helps to identify those most at risk of different types of crime, and this helps in the planning of crime prevention programmes.

The 2006/07 Survey estimated that approximately 60% of the key ten comparator crimes committed go unreported. Victims do not report crime for various reasons and as a result may not received required support. The Safer Haringey Partnership has during the past few years developed a programme of activity to help encourage people to engage with services that are able to support them, these include as follows:

Victim Support – They provide a free and confidential service, whether or not a crime has been reported and regardless of when it happened. Staff and volunteers in local branches in the community offer emotional support, practical help and information to victims, their families and friends. They also provide the Witness Service to give information and support to witnesses, victims, their families and friends when they go to court. Haringey's Victim Support service has also been working to engage young people, who comprise one of the hardest to reach categories of victims. The 'You'll be OK' workshop uses actors and musicians to highlight the main concerns surrounding young people, crime and victims. It has been delivered in Northumberland Park school, Parkview Academy, Woodside High, Highgate Wood and Greig City Academy. The workshop teaches pupils about how to respond appropriately when they or a peer become a victim of crime.

Lesbian Gay Bisexual and Transgender Network (LGBT) - Provides information that can:

- Help build community confidence
- Combat homophobia / transphobia
- Discourage isolation and stigmatisation of LGBT people
- Raise awareness of the diversity that exists within LGBT groups (including racial diversity; economic diversity; diversity of faiths; etc)
- Promote the existence of the Network at key events / dates, e.g. LGBT History Month / Pride / World AIDS Day, etc
- Provide information on where and how people can access services, e.g. through the website (includes web links to service providers, both statutory and voluntary)
- ASBAT- Undertakes intervention based work in schools through the Junior Citizen programme, reaching years 7, 9 and 10 pupils, using innovative games to deliver the message on anti-social behaviour.

- Preventing Violent Extremism Includes developing leadership programmes for young people, strengthening the capacity of women's groups, and local projects to build citizenship.
- Hearthstone Provides survivors of Domestic Violence in Haringey with access to all the support they need in one place. The centre brings together, housing officers, victim support volunteers, police community safety officers and staff from the council's Equalities and Diversity Unit.
- Disproportionately Affected Groups A report produced by the Community Safety Team has made a series of recommendations (see, 'A Study of Disproportionality in Haringey: Identifying and Addressing the Needs of Victims and Perpetrators of Crime').
- The 'Say Yes' Challenge The Say Yes Challenge involves young people working as mini companies, each with their own business mentor, devising practical solutions to local crime and anti-social behaviour issues. The programme gives participants the opportunity to contribute to the safety of their community at the same time as teaching them the basics of running a business. The programme has been undertaken already in the borough with success and it is planned to run again.
- Good Neighbourhood Agreements (GNAs) Social landlords are increasingly utilising GNAs to promote positive neighbourhood behaviours. They set out, in the form of a non-legally binding contract, the mutual rights, responsibilities and expectations between residents, social landlords and other service providers. GNA's are an integral part of the RESPECT Standard for Housing Management. Homes for Haringey (HfH) in partnership with the Council and the Department of Communities and Local Government (DCLG) are developing the use of GNAs in a Pilot at Mountview Court, N15. Residents have been actively involved from the outset and have suggested over 90 ideas for the pilot Agreement. These are now being narrowed down by residents to finalise the Agreement. The process will then be rolled across estates in the borough where appropriate during 2008/09 in the drive to tackle ASB.
- Local Problem Solving Area based working adopting the Police Form 302 problem solving methodology. Problem Solving works by identifying and dealing with the root causes of a problem instead of repeatedly responding to the consequences. Therefore, Police and partners, working together, can use Problem Solving to reduce:
 - crime and disorder, and opportunities for crime and disorder;
 - the fear of crime (improving quality of life);
 - road traffic collisions; and
 - calls for service, thus freeing police resources
- Third Party Reporting A process through which people will be encouraged to make issues known where they are comfortable reporting (e.g. voluntary group, faith group) is to be further developed and publicised in the borough. This would

then lead to relevant information being forwarded to the ASBAT, or Police, where necessary to action cases or track community tensions, e.g. where complainants wish to remain anonymous.

> Annual 'Face the People Sessions'

Police & Justice Act 2006

- Requirement for a 'Crime and Disorder Scrutiny Committee'
- Community Call for Action on 'crime and disorder' matters, which has now been developed into a Councillor Call for Action on 'crime and disorder' matters; here the councillor is the initiator, not the resident
- Councillors will pick up issues of local concern and try and to resolve them directly with the responsible organisation(s)
- Any councillor is entitled to place an item on a scrutiny agenda e.g. if they are unable to resolve issues themselves
- Formal powers to scrutinise anything relating to crime & disorder
- Scrutiny of local improvement targets

Safer Haringey Partnership agencies will have to:

- Provide information to scrutiny or attend its meetings on request
- Consider, respond and have regard to any scrutiny recommendations regarding crime & disorder issues

Local Strategic Partners will have to:

- Provide information to scrutiny
- Consider, respond and have regard to scrutiny recommendations regarding local improvement targets

From April 2008:

- Councillor Call for Action –post April 2008
- Scrutiny of CDRPs post April 2008

Challenges:

- To ensure that ward councillors use the best route to deal with local concerns & get them resolved
- To introduce scrutiny to organisations that have not been subject to public scrutiny
- To manage expectations (of ward councillors, of scrutiny and of partners)
- To be sensitive to those new to being scrutinised by ward councillors or scrutiny
- To ensure scrutiny has a potential for impact

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Meeting: Safer Communities Executive Board

Date: 28 March 2008

Subject: Drugs: Protecting Families & Communities.

Author: Marion Morris.

1. Purpose

1.1. To inform the Board of the key changes in the new National Drug Strategy and the implications for us locally.

2. Background

- **2.1.** The strategy replaces and builds on the previous ten year drug strategy 'Tackling Drugs to Build a Better Britain'. It sets out an overarching framework of objectives which extend the approach taken in previous years and contains a series of three year action plans which run alongside the Governments comprehensive spending review cycles and associated PSA targets.
- **2.2.** The strategy covers four themes:
 - Protecting communities through robust enforcement to tackle drug supply, drug-related crime and anti-social behaviour
 - Preventing harm to children, young people and families affected by drug misuse
 - Delivering new approaches to drug treatment and social re-integration
 - Public information campaigns, communications and community engagement
- **2.3.** There have been many different responses to the new strategy with many people saying that there will not be a huge amount of change. However the direction of travel for local partnerships and the work they're going to need to undertake is one of the areas of the strategy that's probably shifted the most, as is the greater focus on early intervention and re-integration.
- 3. Key differences/challenges
- 3.1. Localism and Reintegration

- **3.2.** The strategy is clear about two key things for local partnerships.
- **3.3.** Firstly the focus for drug treatment is reintegration and the delivery mechanism for most of that reintegration is going to need to be personalised commissioning and the LAA.
- **3.4.** Secondly, it's going to be a time of some change with reviews and pilots looking at the role of local partnerships, the shape of local commissioning and the way we performance manage and fund local drug strategy. Haringey DAAT has been working with the RSA on a proposal to trial personalised budgets with this client group.
- **3.5.** Although there is still a big clinical treatment component, it's no longer the main focus of the strategy. Reintegration, housing, training, employment and education are reprioritised.
- **3.6.** PSAs work differently now to the way they used to. The direct link-up between the PSA and the work of the LSP, PCT and local authority is much more explicit and stronger than before. This fits in with Haringey's new Performance Management structure.
- **3.7.** The new PSAs for drugs and alcohol are 14 and 25.

3.8. PSA 14

Increase the Number of Young People on the Path to Success. The drug measure that sits under this PSA relates to the number of young people who use drugs as measured by the Ofsted "Tellus" survey.

3.9. PSA 25

3.10 Reduce the Harm Caused by Alcohol and Drugs

3.11 The measures that sit under this PSA are:

- The number of problematic drug users recorded as being in effective treatment.*
- The rate of drug related offending (largely measured by performance of Drug Intervention Programme.
- The percentage of people who perceive drug use or dealing to be a problem in their area (Place survey).
- **3.12** However, arguably it is the PSAs that are not directly related to drugs measures which reflect issues that are at the heart of the new strategy like reintegration, housing, employment, training, community involvement, neighbourhood policing and regeneration.
- **3.13** It is therefore key that we foster an understanding of the relationship between substance misuse and the range of indictors chosen in our Local Area Agreement and how substance misuse interventions contribute to the success of LAA targets as a whole. **Related indicators are:**
 - **PSA 8** Maximise employment opportunity for all

- **PSA 13** Improve children and young people's strategy
- **PSA 24** Deliver a more effective, transparent and responsive CJS for victims and the public (contains measures relating to DIP)
- **PSA 21** Build more cohesive, empowered and active communities
- **PSA 16** Increase the proportion of socially excluded adults in settled accommodation and employment, education and training (at the moment only defines ex offenders, people with learning disabilities, care leavers and adults in contact with secondary mental health services as the vulnerable people for whom reintegration should be measured)
- **PSA 18** Promote better health and well being for all

(See appendix A for fuller description of related indicators).

4. Other key concepts:

4.1. Drug System Change Pilots

4.2. Being led by the Cabinet Office, these could throw up many new challenges. This is a big issue to look at that will include taking forward the RSA's suggestions around personalisation and individual budgets. It will also need to explore cluster commissioning, the role of multi area agreements, a tariff for drug treatment, plurality and choice.

4.3. National Audit Office review

4.4. Exploring issues around the cost effectiveness and delivery models of Drug Action Teams this work will directly complement that of the commissioning pilots and will be helpful in informing our own internal review of the DAAT team scheduled for Autumn 08.

4.5. Young People

4.6. Clear signals about the necessity of better use of the Common Assessment Framework in drug related areas, the extension of the OFSTED role to include drug education and the role of the Director of Children's Service as the lead for the young people's substance misuse.

4.7. Prisons

4.8. Commitments to make sure clinical interventions meet minimum standards across the secure estate by 2011. To ensure link-up on outcome and offender management by getting prisons to report via NDTMS (through pilots first) and have those reports included with local reporting to the PCT. The expansion of Integrated Drug treatment Services signals a major new focus on work in prisons. This is the only area of the strategy showing new investment.

5. Summary

5.1. In summary, in order to make any lasting inroads into the drugs 'problem' we will need to:

- To give local people a say in coming up with solutions for tackling drug problems in their communities
- Have a greater focus on families and early intervention
- Have a greater focus on embedding action on drugs in mainstream business of relevant agencies
- A greater focus on moving people through treatment to re-integrate with families and communities
- Using neighbourhood police approach to engage and empower communities to tackle drug related crime, ASB and supply
- Develop community based communication to build community confidence and engagment in the ability to tackle drug misuse
- **5.2.** This is not exhaustive but could be seen a useful basis for discussion in the SCEB LAA workshop later today.

6. Recommendations:

6.1 To note key differences in the new national strategy and issues which need to be tackled in order to better address the local drugs problem.

APPENDIX A

Related Indicators

- NI 16 Serious acquisitive crime rate
- NI 17 Perceptions of anti-social behaviour
- **NI 18** Adult re-offending rates for those under probation supervision
- **NI 21** Dealing with local concerns about anti-social behaviour and crime by the local council and police
- NI 28 Knife crime rate
- NI 29 Gun crime rate
- NI 30 Re-offending rate of prolific and priority offenders; and
- NI 32 Repeat incidents of domestic violence
- NI 38 Drug related (Class A) offending rate
- **NI 50** Emotional health of children
- NI 58 Emotional and behavioural health of children in care
- **NI 65** Children becoming the subject of a Child Protection Plan for a second of subsequent time
- **NI 68** Referrals to children's social care going on to initial Assessment
- NI 88 Number of extended schools
- NI 110 Young people's participation in positive activities

NI 111 First time entrants to the Youth Justice System aged 10-17

- NI 114 Rate of permanent exclusions from school
- NI 115 Substance misuse by young people; and
- **NI 117** 16-18 year olds who are not in education training or employment
- NI 118 Take up of formal childcare by low income working families
- NI 119 Self-reported measure of people's overall health and wellbeing
- NI 40 Drug users in effective treatment
- NI 120 All-age all-cause mortality rate
- NI 128 User reported measure of respect and dignity in their treatment
- NI 140 Fair treatment by local services
- NI 143, 145, 147, 149 Socially excluded adults living in settled and suitable accommodation
- NI 144, 146, 148, 150 Socially excluded adults in employment, education or training; and
- NI 152 Working-age people on out-of-work benefits
- **NI 156** Number of households living in Temporary Accommodation

PSA Targets

The proportion of young people frequently using illicit drugs, alcohol or volatile substances (PSA 14); and

The percentage of the public who perceive drug use or dealing to be a problem in their area (PSA 25).



Meeting: Safer Communities Executive Board

Date: 28 March 2008

Subject: Adult Drug Treatment Plan: Strategic Summary

Author: Marion Morris.

1. Purpose

1.2 To provide the Board with a strategic overview of the main commissioning intentions for adult drug treatment in 2008/09

2. Background

- **2.2.** The DAAT undertake an annual needs assessment which informs the commissioning priories for adult drug treatment in the year ahead. The attached strategic summary outlines the overall direction, and key priorities. This is further supported by a more detailed action plan. Both documents are now with the National Treatment Agency for final comment before final sign off by the DAAT Chair and Chair of the Joint Commissioning Group for Substance Misuse on 31st March 2008.
- 2.3 The strategy and action plan are essentially the means by which we deliver against **PSA 25** Reduce the Harm Caused by Alcohol and Drugs underneath which sits N140:

The number of problematic drug users recorded as being in effective treatment.*

One of our 35 Improvement Targets in the LAA

- 2.4. It should be noted that the government define problematic drug users as crack and heroin users. In terms of the LAA it is only this group of users that will be counted towards, the target.
- **2.5.** The Adult Drug Pooled Treatment monies are one of the few pots of money that will remain ring fenced until 2011 and will therefore not form part of the Area Based Grant. Young people's substance misuse monies (apart from the treatment element) will be coming down through ABG

3. Key Challenges

- **3.1.** One of the challenges will be to continue to deliver an effective prevention, treatment and re-integration system for drug users against a background of a potential decrease of 27%, (34%) in real terms of the Pooled Drug Treatment budget over the next three years.
- **3.2.** In addition changes in the funding formula whereby twice as much funding is awarded for crack and opiate users entering and being retained in treatment could make it difficult for us to respond to new and emerging patterns of drug use.
- **3.3.** Another potential unintended consequence of the new funding formula is that it could become increasingly difficult to continue to commission services that are not targeted at crack or heroin user's e.g. Cannabis support groups and work with Somali Community on Khat. Tier two, and some of the wrap-around support services which are crucial to recovery could also be compromised.
- **3.4.** Work is underway to safeguard against this and is more fully detailed in the action plan. It is however crucial that the partnership begin to address the ETE, and housing needs of this client group in a more considered way if we are to have any lasting effect on tackling the drugs issues in the borough.

4. Recommendations:

4.1. To note the contribution the Adult Drug Treatment Plan makes towards wider community safety, wellbeing and public health issues in the borough.

For a copy of Drug Treatment Action Plan contact: Marion Morris Drug & Alcohol Strategy Manager on: 0208 489 6909 marion.morris@haringey.gov.uk

Haringey Drug And Alcohol Action Team

Adult drug treatment plan 2008/09 Part 1: Strategic summary

Signature	Signature
Chair, Haringey DAAT	Chair, Adult Joint commissioning group

Section A: Strategic summary

Overall Strategic Direction/Purpose

The purpose of Haringey's drug treatment strategy is to respond to the diverse needs of its drug using population by providing accessible, timely and appropriate drug treatment, delivered by a skilled and effective workforce. Central to this focus is the involvement of service users and carers in the ongoing development of our treatment system. The challenge will be to continue to deliver this against a background of a potential decrease of 27%, (34%) in real terms of the Pooled Drug Treatment budget over the next three years. The changes in the funding formula whereby twice as much funding is awarded for crack and opiate users entering and being retained in treatment could make it difficult for us to respond to new and emerging patterns of drug use. Another potential unintended consequence of the new funding formula is that it could become increasingly difficult to continue to commission services that are not targeted at crack or heroin user's e.g. Cannabis support groups and work with Somali community on Khat. Tier two and some of the wrap-around support services which are crucial to recovery could also be compromised. To safeguard against this, and ensure we are able to respond to the complexity of Haringey's drug using population, we will be working with providers over the coming years to examine how existing services can be delivered in a more cost effective way. In addition the DAAT are working with partners to include wider improvement targets in the LAA which will help with the re-integration agenda e.g. PSA 149, and targets on work lessness.

Haringey has set itself a challenging but realistic target for engaging problematic crack and heroin users in effective drug treatment (New PSA) which has been agreed and will be one of the 35 improvement targets in our Local Area Agreement. We are confident that with the changes made to our drug treatment system over the past two years, engagment and retention of P.D.U's will be greatly improved.

The Drug Interventions Programme continues to be an integral part of our treatment system – acting as it does both as a pathway into Tier 3 treatment and provider of Tier 3 treatment to drug using offenders. However, the needs assessment indicates that improvements need to be made in the engagement and commencement into treatment process of DIP clients. This will be addressed through:

- training on case Managment with DIP staff
- the case management system Mi CASE
- active involvement of the Haringey of Metropolitan Police Service offender management unit who in conjunction with DIP staff are 'chasing up' those clients who have failed to turn up for first appointment.

The continued alignment of the DIP/PPO agenda will further improve the development of an effective referral process into Tier 3 services for PPO's with substance misuse problems. London Probation Service state that at least one third of their clients in Haringey have a substance misuse problem, plans are afoot to ensure that all LPS Haringey clients are linked to the DIP for treatment not just those on drug related orders.

Haringey will continue to commission the DIP Prison Link worker at HMP Pentonville to enhance the referral process to tier 3/4 community based services and aftercare. The DAAT is committed to working more closely with NOMS.

Haringey's overall approach to community re-integration is well established. We have developed an 'aftercare model' which is working effectively. However, the challenge in the years ahead as we move from ring-fenced to non ringed fenced budgets will be to convince the wider partnership of the benefits of co-commissioning some of these re-integration services and how it fits into the boroughs overall approach to tackling workless ness, regeneration etc.

We are working with our partners in Housing to ensure the housing and support needs of substance misusers are reflected in the new Homelessness Strategy and following last years review of SP accommodation services we are hopeful that some of these services will be re-tendered so that we have services that more adequately meet the needs of this client group.

The DAAT Rent Deposit Scheme is up and running and we now have representatives from the treatment agencies working within the Vulnerable Adults Team in Housing. These workers can input into housing assessments for substance misusers and help break down some of the prejudice associated with substance misuse.

The need for effective wrap-around support services has been recognised in the borough's new Community Safety Strategy – which will see a greater joining up of the PPO/DIP agenda and the development of a reducing re-offending action plan – central to which will be the nine strands of the London Resettlement Plan.

The treatment system has been redesigned and expanded over the past two years so that it now better matches the particular local treatment needs. Our key priorities:

- Clinical governance auditing and implementation of the clinical guidelines
- Continued monitoring of performance against targets through provider/DAAT monthly
 Performance Management Group
- A crack/ Cannabis awareness campaign
- A fully integrated DIP service in Bruce Grove
- A new tier 2/3 crack/poly drug service EBAN on first floor of DIP building at Bruce Grove to minimise attrition from DIP, and of primary crack users.
- Co-location BUBIC with EBAN to facilitate engagment into tier 3 services of primary crack users
- Relocation of DASH drop-in to more central location and improved range of treatment options available to primary opiate users
- Commissioning of DASH to provide cannabis support groups.
- Re-tendered young peoples substance misuse service new provider Involve and age range extended so that it is in line with leaving care (21)
- Extended the work of SHOC to provide tier 3 services to female sex workers
- Commissioned EBAN to provide a counselling service in response to unmet need in this area

Key Findings of Needs Assessment

The University of Glasgow prevalence study¹ (2004-5) – estimates that Haringey has in the region of 2485 problematic drug users, compared to our own local estimate of 2022 (using the NTA Treatment Bulls eye methodology)². However, if the Home Office figure is agreed as the most accurate then it indicates that in the region 1223 problematic drug users are not in contact with Tier 3 treatment services in Haringey. (For fuller discussion of prevalence see pg 66 of Haringey's 2007 Need Assessment). However, this figure does not readily translate to demand for Tier 3 (as in bourne out by our own needs assessment). At least some of these 1223 individuals will be having their needs meet in Tier Two services – and will therefore not appear in the National Drug Treatment Monitoring System data. The engagement or 'penetration' rate of problematic drug users in 2006-07 was 39%, slightly above the London average of 37% (NTA).

The same study also indicates that Haringey has above the London average rates of primary crack use, coupled with apparent lower rates of opiate use and marginally higher rates of crack and heroin use. This is certainly supported by our own local data in 2006/07. The Glasgow study suggests that Haringey's overall treatment population is younger than the London average of 25% (compared with Haringey's 19%). However, the figures do not appear to have been age standardised and will therefore not have taken into account Haringey's relative young population. Our own local data suggests that whilst we have marginally more 18-24 year olds accessing treatment (17% compared to London average of 16%), but that we also have a slightly higher proportion of over 35 years olds, (47% as opposed to London average of 45% accessing treatment, source NDTMS).

The proportion of women users is estimated at 20% which is lower than London average at 23%. Local data indicates a drop in women accessing treatment from 27% to 24%. Haringey's drug treatment agencies attract more service users from 'non white' backgrounds in comparison to the London average. At least some of these are the primary crack users referred to earlier. This is not 'by accident' but rather by design. Previous Needs Assessments identified that high numbers of younger African Caribbean men being arrested, assessed by the DIP but still not engaging in treatment. Our approach has been to try to intervene further upstream.

¹ Estimates of Prevalence of opiate use and/or crack use 2004/05 – university of Glasgow

² Haringey DAAT Needs Assessment 2008-09

Adult drug treatment plan 2008/09 - Part 1

Partnership name: Haringey Drug and Alcohol Action Team Date of submission to NTA: 14th March 2008.

We have done this by:

- the commissioning of a peer led, culturally specific service BUBIC, who aim to prepare potential service users for Tier 3, but also act as a service and meet a need in their own right.
- the commissioning of a specific stimulant/poly drug service that would better meet the needs of those not being retained in treatment EBAN.

Many of this client group are yet to move from Tier 2 service (BUBIC) to the Tier 3, which has impacted on numbers in effective treatment. The DAAT plan to co locate BUBIC with the new crack service to use their unique ability to engage crack users into treatment.

The Treatment system map shows the referral rates/movement between treatment agencies is low. This may be due to the way the treatment provision is configured whereby most services offer both Tier 2 and 3 services meaning referrals will be low. Equally referrals out to GP's from specialist services is low meaning the treatment system will get silted up if this is not addressed this year.

Our own analysis shows that the following groups were more likely to drop out straight after triage

- Aged18-29 (64% for age group 18-24 and 60% for ages 25-29)
- Primary drug cocaine (67%)
- Residing in N15 (67%)
- In treatment as part of the Drug Interventions Programme (75%).

Retention in drug treatment is particularly poor for:

- Under 25
- Reporting crack only/other stimulants or cannabis

These factors have been addressed by re-tendering, redesigning of existing treatment services and through rigorous performance management. We therefore expect to see a change in these treatment outcome demographics next year in line with the new treatment system.

Summary of key issues

- Stimulant users are accessing BUBIC but not accessing Tier 3
- One third in contact with probation are identified as using drugs problematically
- Two thirds of women testing positive on arrest do not enter treatment
- Though overall crime has dropped the proportion testing positive has not changed
- Yet to see impact of introduction of EBAN and new Young Peoples service Involve
- Crack and cannabis use higher than London average.
- High attrition rate between clients being assessed by the CJIT and entering the caseload
- High attrition rate in clients referred by CJIT and commencing treatment
- Proportionally number of women in treatment has dropped.
- Housing identified as a problem by 36% of treatment population
- Though there is an increase in numbers in treatment, many have been in treatment for a long time, "silting up" the system
- Retention rate lower for Crack users, where primary use or not, and younger age groups.
- 13% drop out after triage (see above)
- Number of GP referrals is low
- Number of clients accessing Tier 4 is low
- Number of psychosocial interventions low due to lack of skills.

Demand for open access services Open Access -

Haringey's wide range of open access interventions has been improved last year through the commissioning of two new pharmacy needle exchange services, increasing capacity, extending opening times and widening to include the north of the borough, which was previously poorly served. However, since the move of DASH to a more prominent location in Wood Green needle exchange activity has decreased. Therefore this will need to be addressed through better advertising next year.

From our local needs assessment we estimate that in the region of 1247 individuals may be in need of Tier 2 treatment. In addition BUBIC recorded a total of 1873 attendances at their peer support groups. The nature of the service means that we do not know how many of these 'contacts' are already known to Tier 3 services or duplicated. However, we do know that this service is attracting many family members, women carers as well as users themselves. This demand gives access to potential, treatment naïve users which need to be encouraged move through the treatment system.

Tier 2 Priorities

- Implement an outreach and engagement strategy to reduce attrition, improve engagment and retention
- continue to commission BUBIC to deliver Tier two services including outreach, signposting, peer support services, and co locate with EBAN
- Opening of new Tier 2 (drop-in) at tier 3 service EBAN
- Tier 2 services for sex workers (outreach, drop-in etc).
- Exploit the relocation of DASH drop-in service from Finsbury Park to a more central location in Wood Green Shopping City as per geographical client demand.
- Action Plan to increase number of women engaging in treatment across DIP and other tier 2 services
- Increase the engagement rate of offenders testing positive with the DIP
- To reduce the attrition between those referred by DIP and commencement into treatment.
- Improve numbers of offenders in effective treatment with the DIP.
- To ensure clear and effective referrals pathways between DIP and other providers

Harm Reduction Priorities

Despite scoring 4 (excellent) for the Healthcare Commission Improvement Review on harm reduction, we believe there is room for improvement in this area, particularly as the recent Health Protection Agency report, 'Local Estimates of Hepatitis C prevalence among injecting drug users' places Haringey in the high prevalence band. Current targets on testing and offering hep B vaccinations are not being achieved - even if some of this is down to poor recording. The DAAT are working on a borough wide BBV Protocol which will ensure that all services users are able to access BBV screening and vaccination services at all drug services in the borough. This will be lead by the boroughs' BBV Strategic Nurse post. In addition - DASH have been successful in their bid to take part in the NTA Contingency Management Pilot which will help us better understand if this approach works in the U.K. - by facilitating better uptake of BBV immunisation. In addition this year will see the setting up of a Drug Related Deaths Review process – again something which is still outstanding both from the Healthcare Commissions' point of view and our own. The London Health Observatory reported 42 drug related deaths in Haringey during the latest period of available data 2000-4. These are 42 deaths that could have been prevented and unfortunately this is likely to be an underreporting due to the way that deaths are recorded.

The Home Office study on prevalence indicated that 607 individuals were injecting drug users in Haringey in 2004-5. This represents a rate of 3.75 per 1000 population – which is not significantly higher than that of London overall (3.45). The total number deemed to be at risk of BBV's entering treatment was 167. However, given that changes in injecting status is not currently routinely updated by the treatment agencies is difficult to ascertain changes in injecting behaviour that occur in treatment. This will be greatly helped by the introduction of the TOPS tool – which should capture this information. Our own local data indicates that there is more reporting injecting use in the DIP 16% as opposed to non-dip (13%) which indicates the need to ensure effective safer injecting/harm reduction messages are given to DIP clients even if they do not engage in treatment. Given the high rate of crack use it is also of prime importance that we ensure all providers give effective Harm Reduction information to crack users as well as opiate users.

Improvements to Harm Reduction

- Harm reduction information for primary crack users
- Improved screening and vaccination for BBV's
- A borough wide BBV protocol an BBV nurse
- Contingency Managment piloting with the NTA at DASH, with focus on incentivising clients to attend BBV appointments
- Establishing a Confidential Inquiries protocol for drug related deaths

- Revamp advertising materials for pharmacy and fixed based needle exchange
- Ensue that all injecting drug users (and in particular DIP Clients) are given effective safer injecting advice.

Demand for Tier 3 services

The treatment demands of the borough are informed by:

- high rates of primary and secondary crack use,
- high levels of poly drug use
- an upward trend in cannabis use
- Ongoing but stable rates of opiate use.

In the region of 1223 problematic drug users may be in need of structured drug treatment, who are not currently accessing it. There are particular retention issues for primary crack users, 18-24 year olds and 18-29, and for those in treatment as part of the DIP. Good care planning is also a key element of quality treatment and important to outcomes. Whilst Haringey has improved its planned discharge rate (36%), it is still below the London average of 38%. The Healthcare Commission 2005-6 audit also indicated that Haringey has room for improvement in this area, giving the borough a score of 2 – fair. In recognition of this a borough wide care plan audit is currently being conducted and will report back to the DAAT by 1st February 2008. The findings of this and the Service User Group survey on care plans will be a focus in next years plan. The paucity of structured counselling will in part be addressed through the commissioning of EBAN who will be providing a new counselling service as part of the new service provision for poly drug users.

The key commissioning priorities listed below aim to address these gaps and further improve Tier 3 outcomes.

Key priorities:

- Bedding in of new Tier 3 crack poly drug service EBAN
- Development of crack/cannabis awareness campaign
- Continued commissioning of DASH to provide prescribing/OSI service to opiate/poly users
- Continued commissioning of SHOC to provide prescribing/OSI to female sex workers
- Action Plan to increase number of GP's involved in Shared Care
- Qualitative annual care plan audits
- Setting up of counselling service through EBAN

Tier 4 Needs and effectiveness

Mapping data for Tier 4 supplied by the NTA did not match information held locally. For example, contrary to what the map shows all drug using clients are assessed for Tier 4 by DASH (as they hold the contract for this). Also only half of the clients in residential rehab appear in the NTA data. A Tier 4 Strategy Group will be devised to address this by examining S.L.A's. with Tier 4 providers and reporting mechanisms.

Referrals to Tier 4 are low when compared to other London boroughs, and most of these referrals are generated by DASH. With the advent of the new services and structures, clarified earlier, the DAAT expects to see an increase in referrals of stimulant users. This year all services users will be able to access Community Care Assessments at all drug services in the borough. Tier 4 referrals from prison dropped in 07/08 due to personnel issue, however the link worker post will be continued to be commissioned and is expected to attain 06/07 levels this year.

Wait times for Tier 4 services are high, even in the cases where we have block contracts. Demand outstrips supply and this is particularly so for complex need cases. Planned discharges at Tier 4 are also low – this is part of a national problem of underreporting on the part of Tier 4, which needs to be addressed by the NTA at a national level. There are a range of recommendations that have come out of our local Tier 4 effectiveness review.

Tier 4 Priorities

- Commissioning more second stage rehabs places
- Improve access to Tier 4 by developing of link worker scheme in all treatment agencies
- Commission an additional block contract with Equinox
- Pilot of 12 week abstinence based programme
- Develop improvement plan for aftercare service
- Set up local Tier 4 strategic group
- Examine how complex needs can be better met within existing resources
- Conduct six additional rehab reviews to expand improved provider list
- Continue with plan to collaboratively commission North London Inpatient detox facility
- Improve access to all wrap-around support services housing, ETE etc.

Workforce

The DAAT has a comprehensive Treatment Sector Workforce Strategy which has targeted poor areas of performance by incorporating them into key DANOS units in our NVQ level 3 in Health and Social Care. Westminster Kingsway College are commissioned to deliver NVQ level 3 to all drugs workers, along with Thames Valley University who are delivering NVQ level 4 in Managment training to managers in the treatment sector, including the DIP. In addition the paucity of trained counsellors in the borough will be addressed by the commissioning of new counselling provision through EBAN. The importance of having a culturally competent workforce in a borough as diverse as Haringey cannot be overstated. However, it is also important to recognise that drug services alone cannot tackle the multitude of issues that these newly arrived communities face. In recognition of this the DAAT are linking in with neighbourhoods, the police and appropriate community organisations to address these issues.

Carers and Family members

Over the past two years the DAAT have moved from a position of having no carer involvement at strategic level to a point where two carers now sit on both our Treatment Task Group and DAAT Board. This means that we can ensure that carers are involved in the planning, commissioning and review of substance misuse service, along with providing services to better meet their needs.

Service Users

The DAAT has a comprehensive user involvement strategy that has now been operational for two years. The strategy outlines how users can be involved at an individual, service and strategic level – including a clear policy for reimbursements of fares and payment for sitting on strategic level meetings/ Boards etc. The involvement of service users, from all providers, including the DIP, at all levels has been invaluable to the DAAT in getting a much wider perspective on the effectiveness of the treatment system.

Summary

Haringey's treatment system ranges from Tier 2 - harm reduction services through to wrap -around support services. When seen as a whole we have a strategy in place for reducing substance misuse/associated offending, halting the spread of blood bourne viruses, improving individuals physical and psychological health and the overall health, wellbeing and safety of the wider community.

NB: Glasgow University prevalence data (2005/06) was published in mid January 2007. The data has been received too late to have been made full use of in this current needs assessment. Haringey's latest estimated number of problematic drug users is 2,690 (up by 205 on the 2004/05 estimate) but not statistically significant at the 95% level.

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Annual Residents' Survey Crime and safety Criminal justice system

Perceptions of:

- Safety
- Concern about crime
- Knowledge of and opinions
- of the Criminal Justice System





- Crime
- Anti-social behaviour and the Criminal Justice System
- Community Cohesion

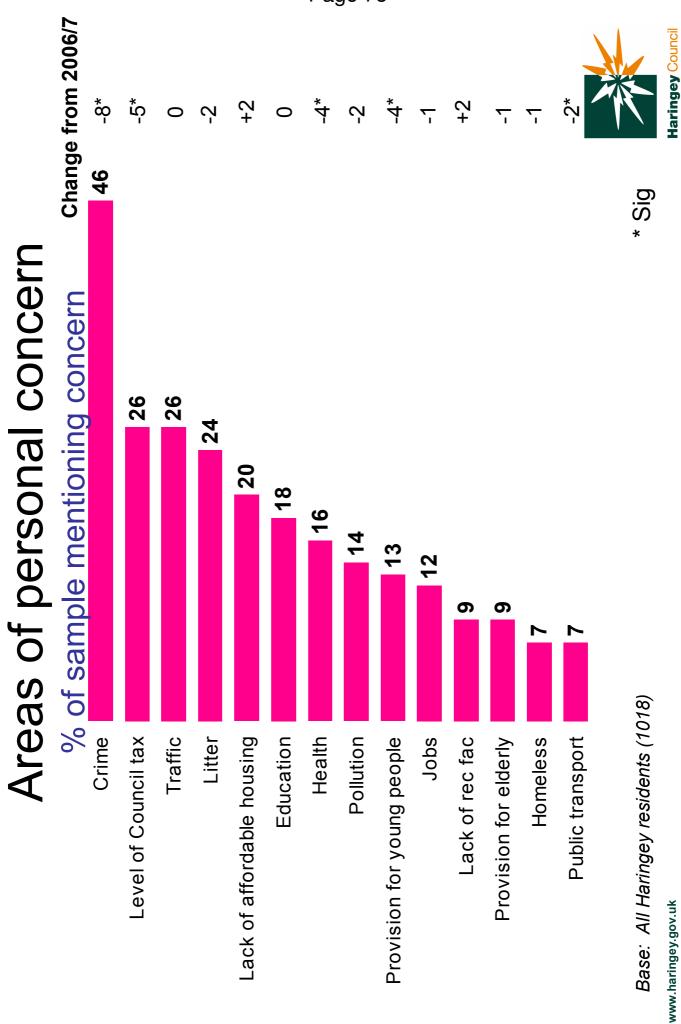


- 1018 interviews conducted in home and in street using CAPI
- Fieldwork conducted from 12 November 09 December 2007
- ethnic origin, tenure and working status of women. Census Representative quota sample. Quotas set on age, gender, 2001
- 88 sample points across the borough



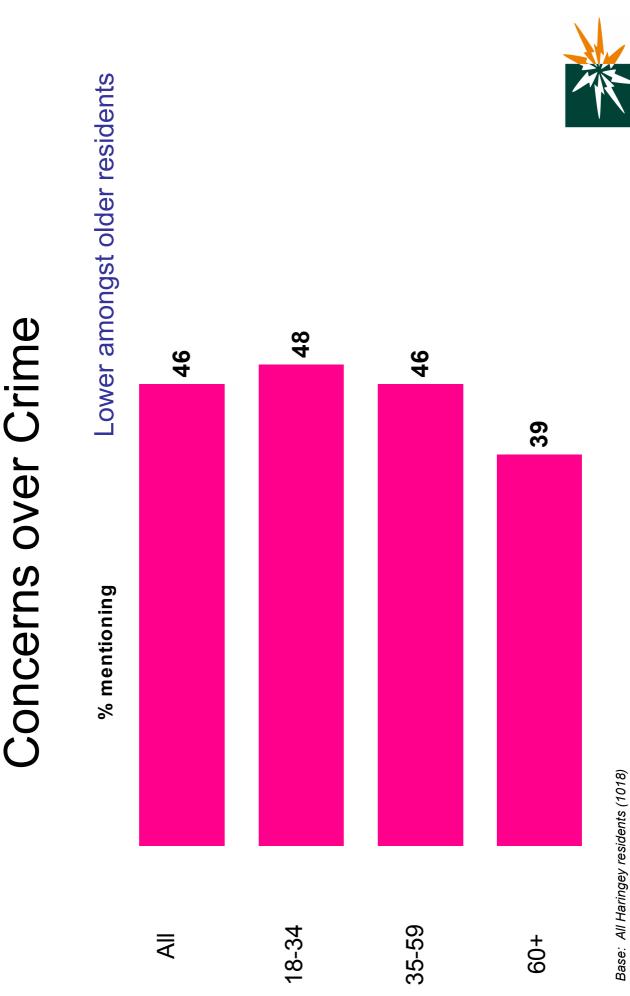
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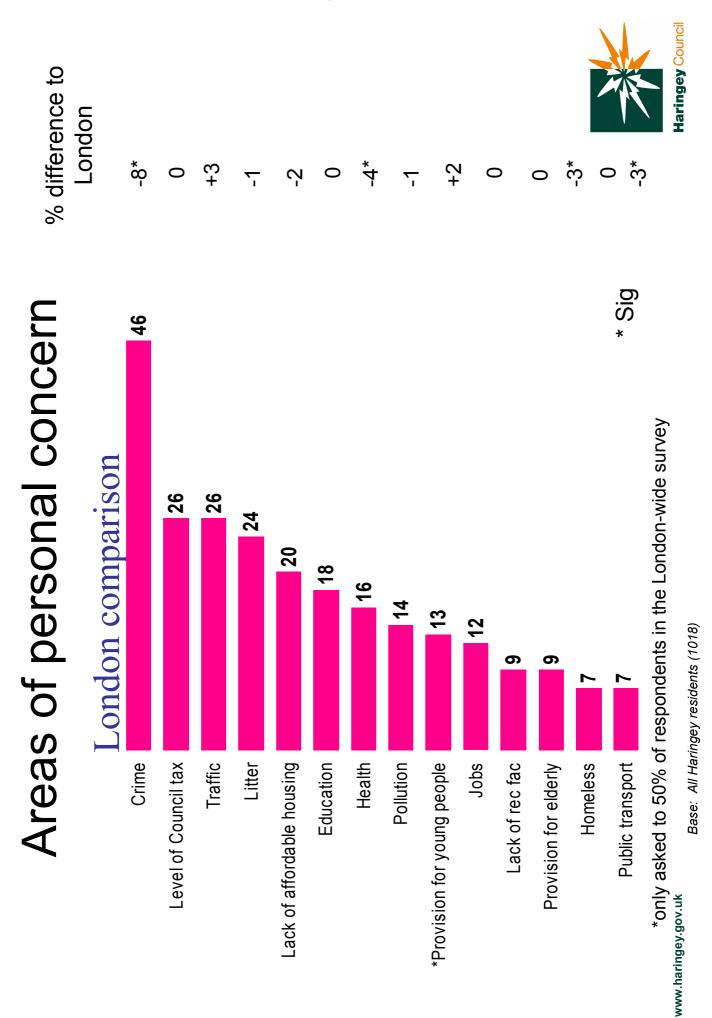
of personal concern since 2006	%	% φψ44ψ
Changes in areas of pers 2006	UP: No concerns have increased significantly	DOWN: Crime Level of Council tax Health Provision for young people Public Transport





www.haringey.gov.uk

Haringey Council



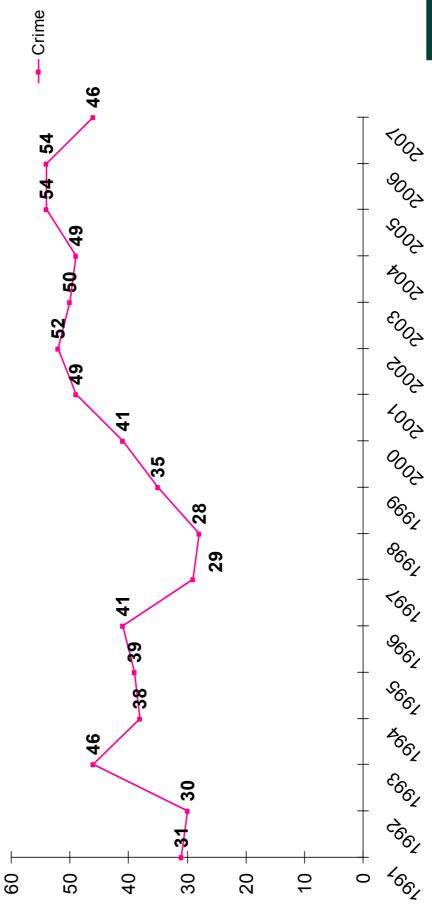


LESS CONCERN IN HARINGEY:

Crime Quality of health service Provision for elderly Public transport

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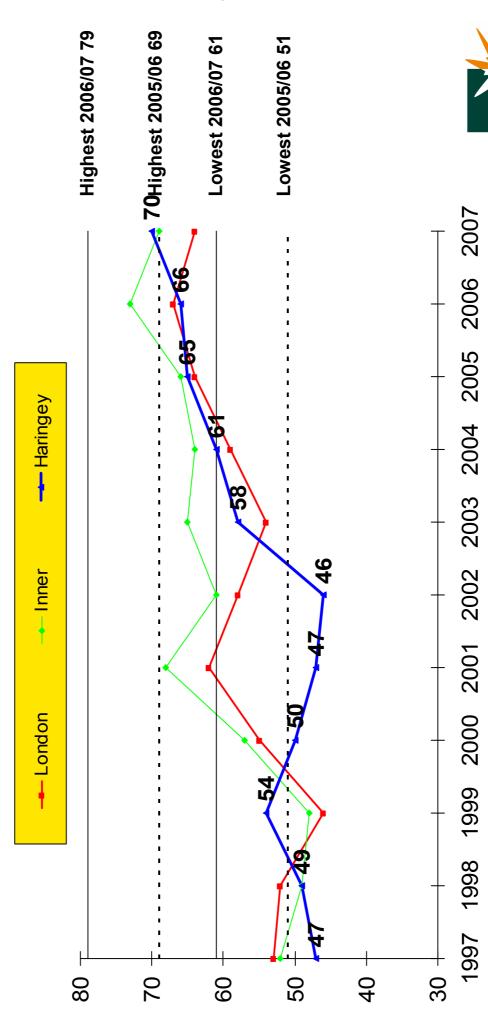












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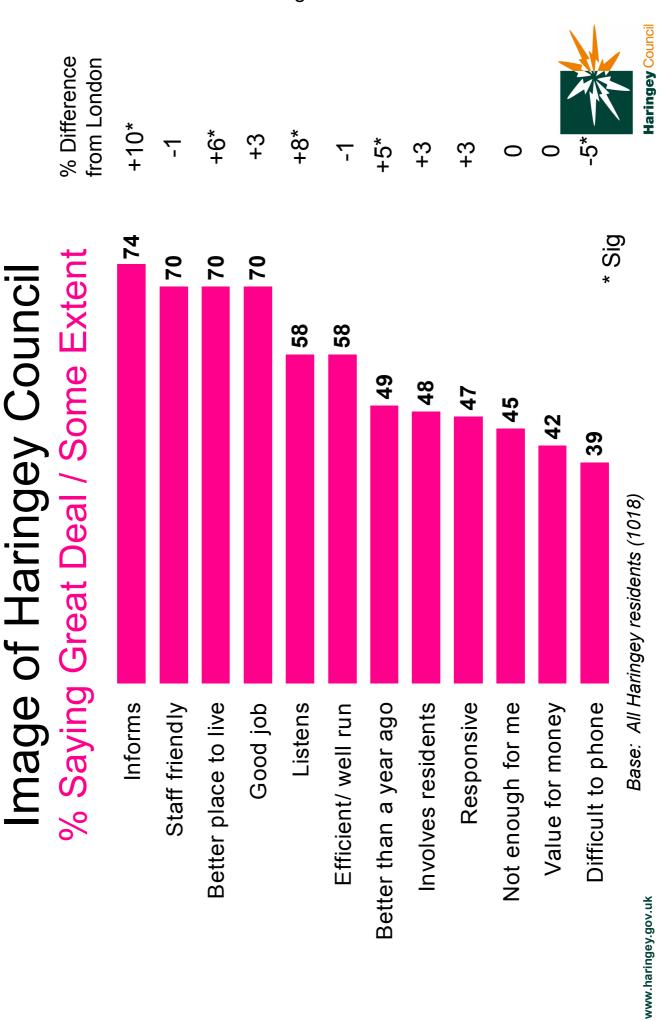


Image 2007	/ LONDON-WIDE
Council	HARINGEY \

HARINGEY BETTER THAN LONDON:	%
Keeps residents informed	+10
Listens to concerns	8 +
Making the area a better place to live	9+
Better job than a year ago	<u>9</u> +
Difficult to get through on the phone	പ്
HARINGEY WORSE THAN LONDON:	%

HARINGEY WORSE THAN LONDON: None

Haringey Council



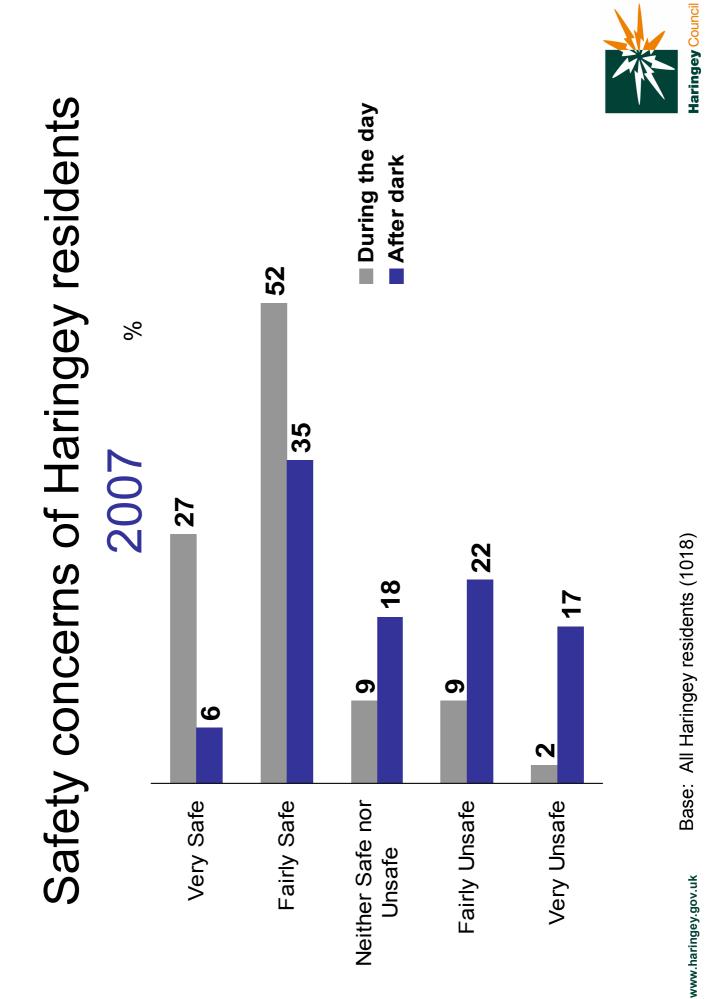
UP:	%
Repair of roads and pavements	+10
Street cleaning	6+
Parks and open spaces	8 +
Refuse collection	7+7
Public transport	7+7
Recycling facilities	9+
Collection of council tax	+2 +
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Nursery education	-4%

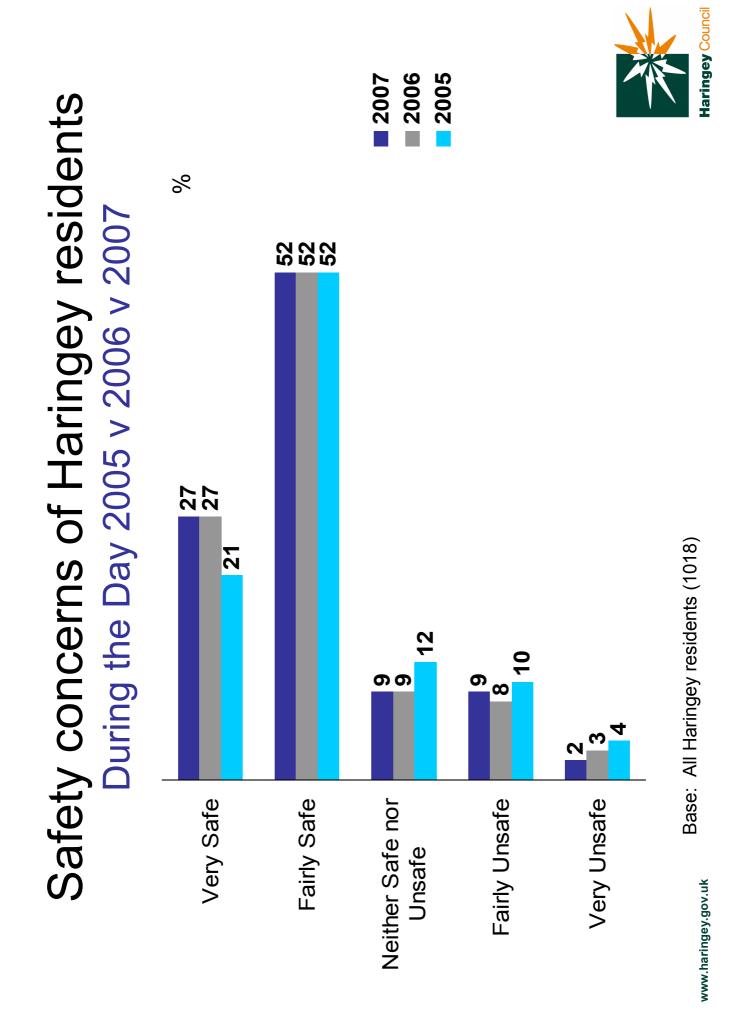


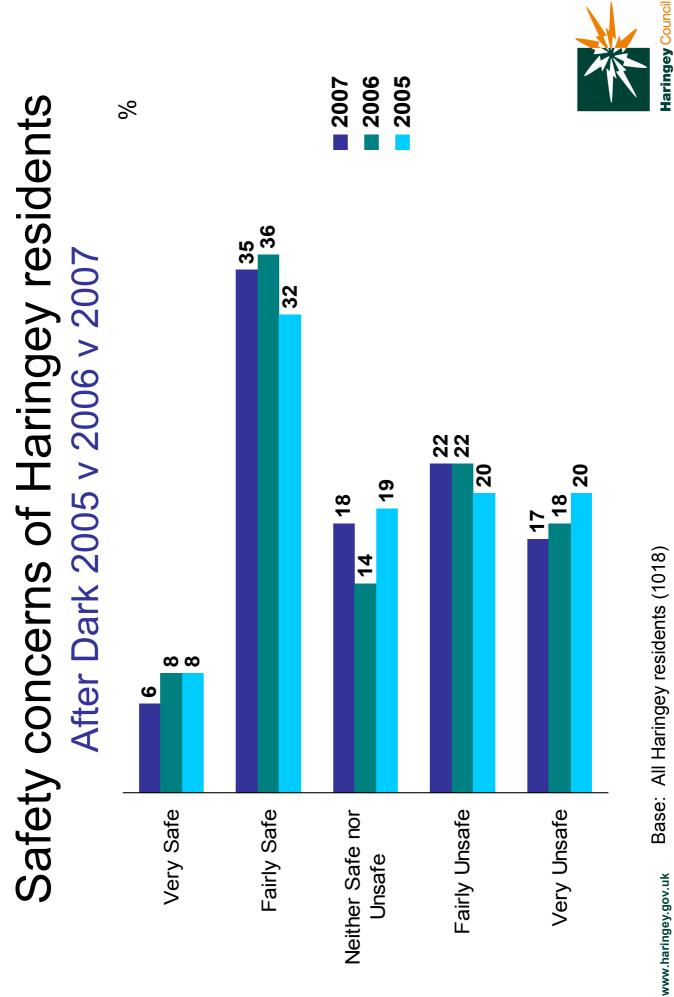


Crime and Safety specific dimensions

www.haringey.gov.uk









Anti-social behavior and the Criminal Justice System



The courts should be made aware of the impact of crime and anti-social behaviour on the local community

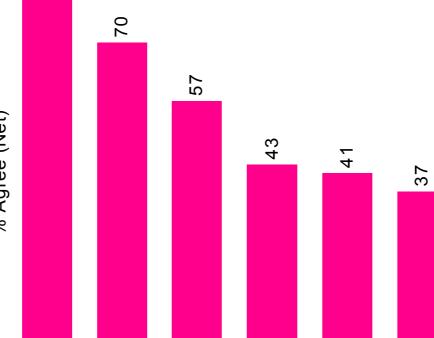
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Information on the sentences that courts pass should be freely available to the public The courts respect the rights of those accused of crimes and treat them fairly The courts understand local concerns about crime and anti-social behaviour

The courts take full accout of the victims experience when passing sentence The courts pass sentences that fit the crime

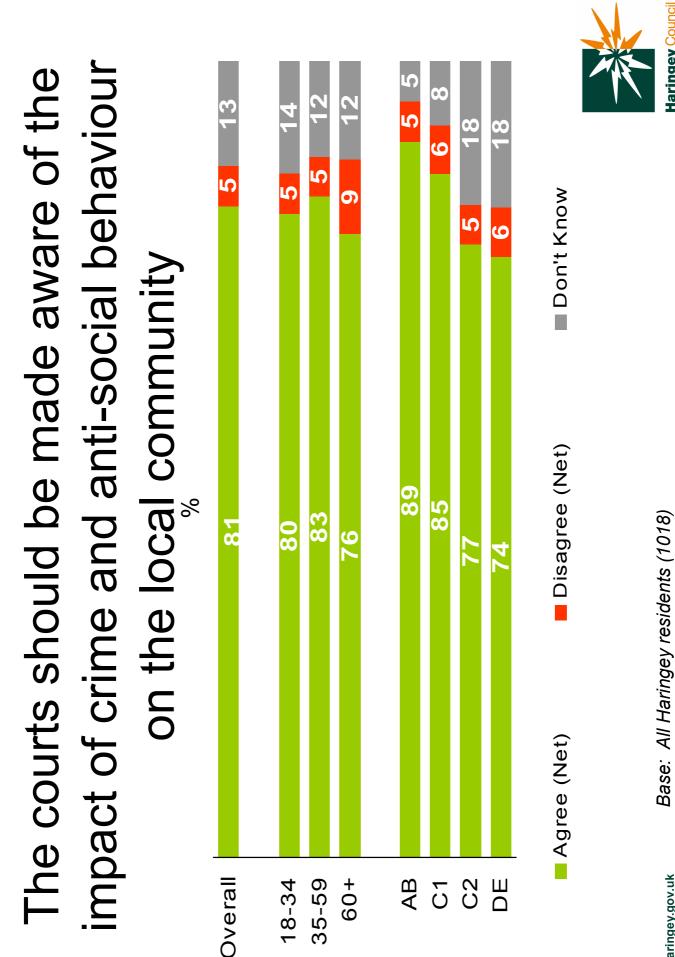
Fines stop people reoffending Base: All Haringey Residents (1018)

www.haringey.gov.uk





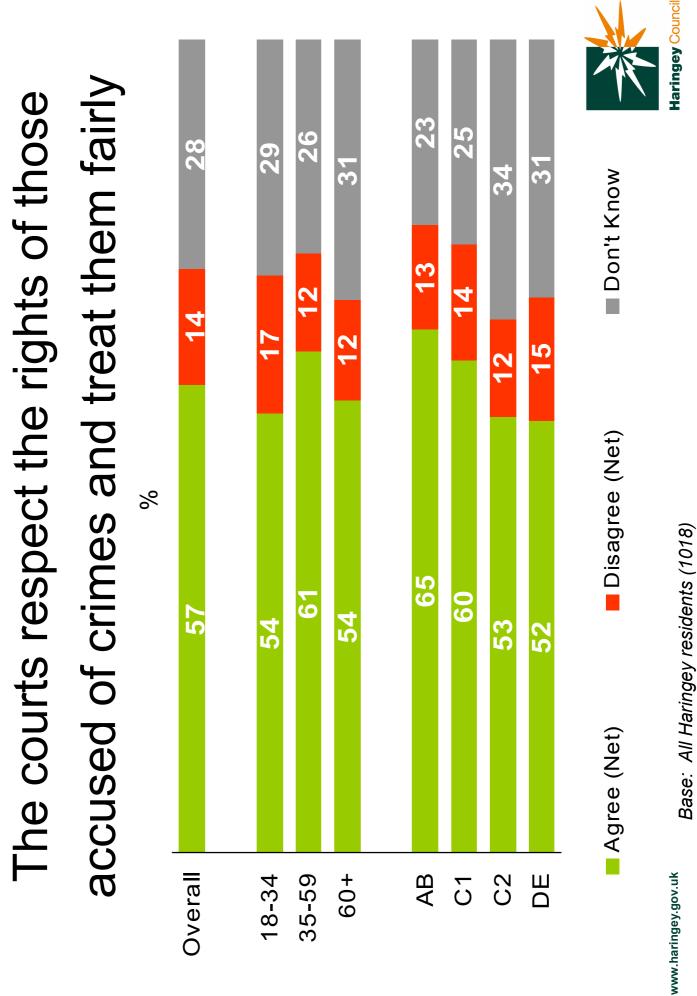
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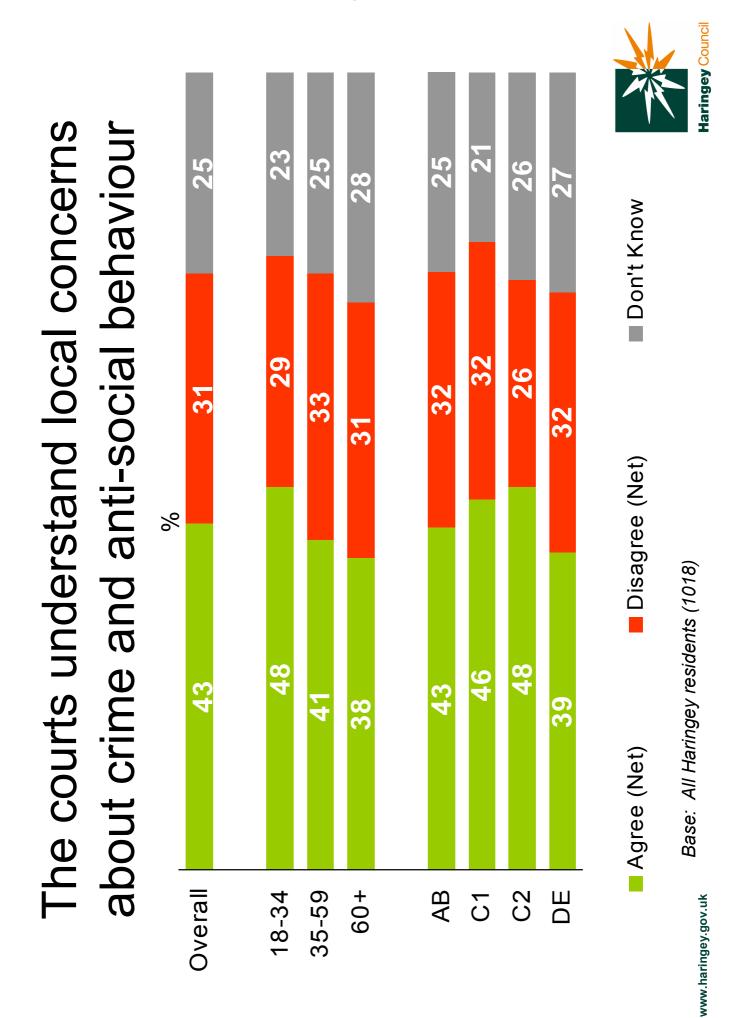


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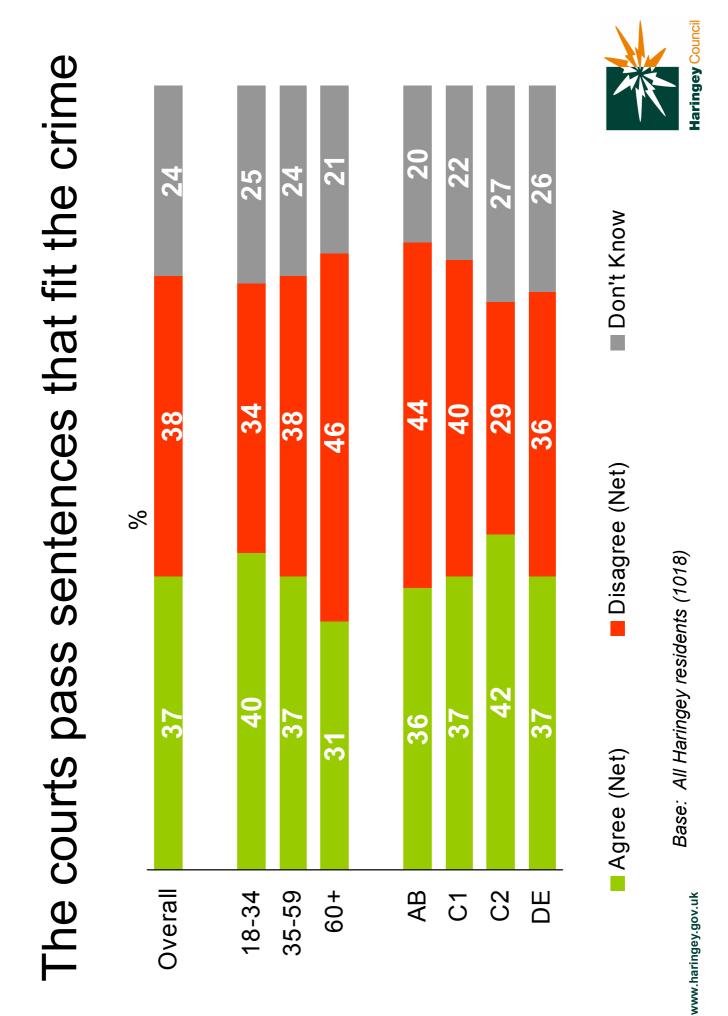
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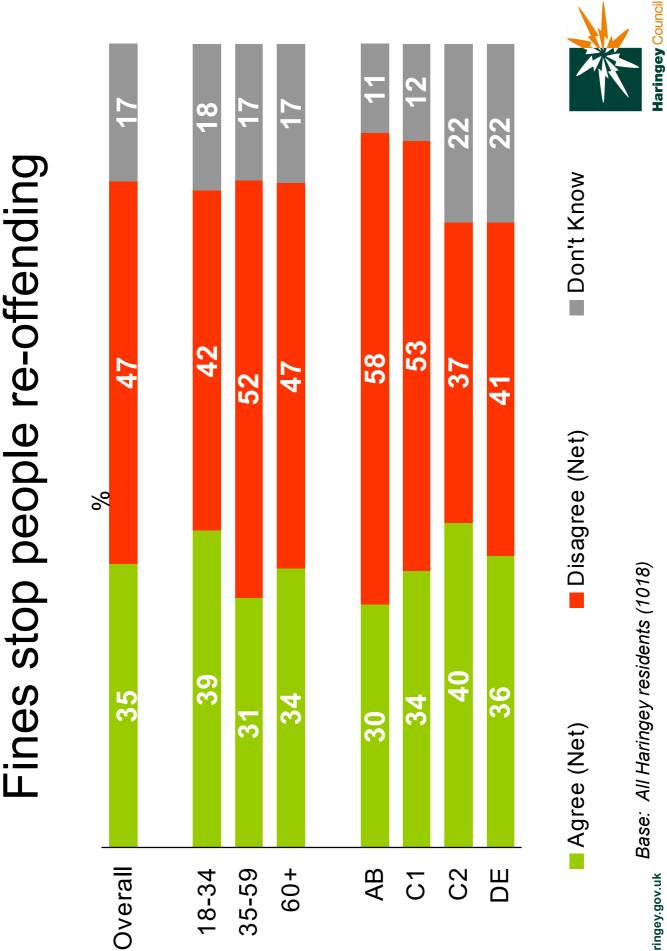
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Information on the sentences that courts pass should be freely available to the public	20	69	69	73	73	89	67	Disagree (Net)	yy residents (1018)
should b								Agree (Net)	Base: All Haringey residents
Infc	Overall	18-34 35-59	+09	AB	C1	1 C2	DE		www.haringey.gov.uk



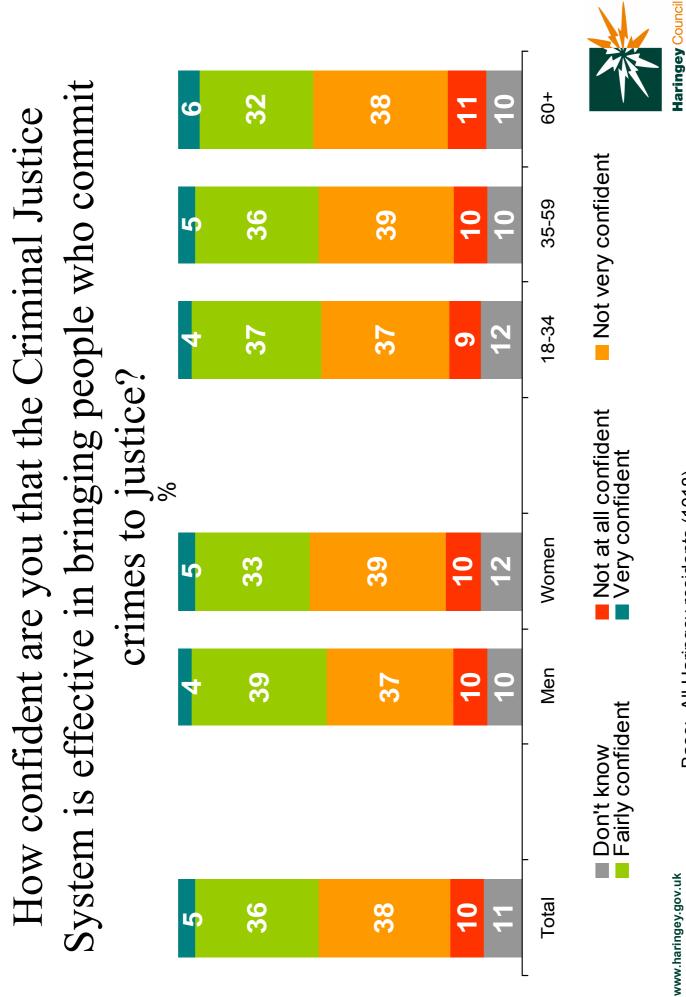


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he victim' entence	30	32	29	29	31	26	33	32	Don't Know	
ull account of the victiblen passing sentence	27	22	30	33	37	29	21	23	Disagree (Net)	18)
The courts take full account of the victim's experience when passing sentence	41	44	41	35	32	45	45	42	Agree (Net)	Base: All Haringey residents (1018)
The	Overall	18-34	35-59	+09	AB	G	C2	DE	■ Ag	www.haringey.gov.uk

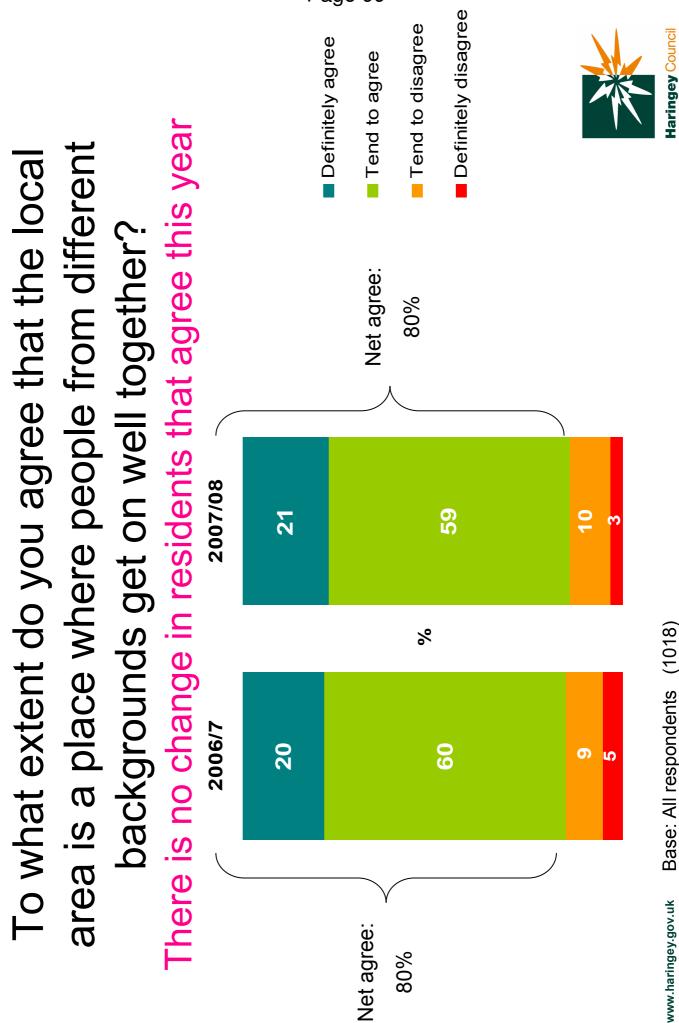




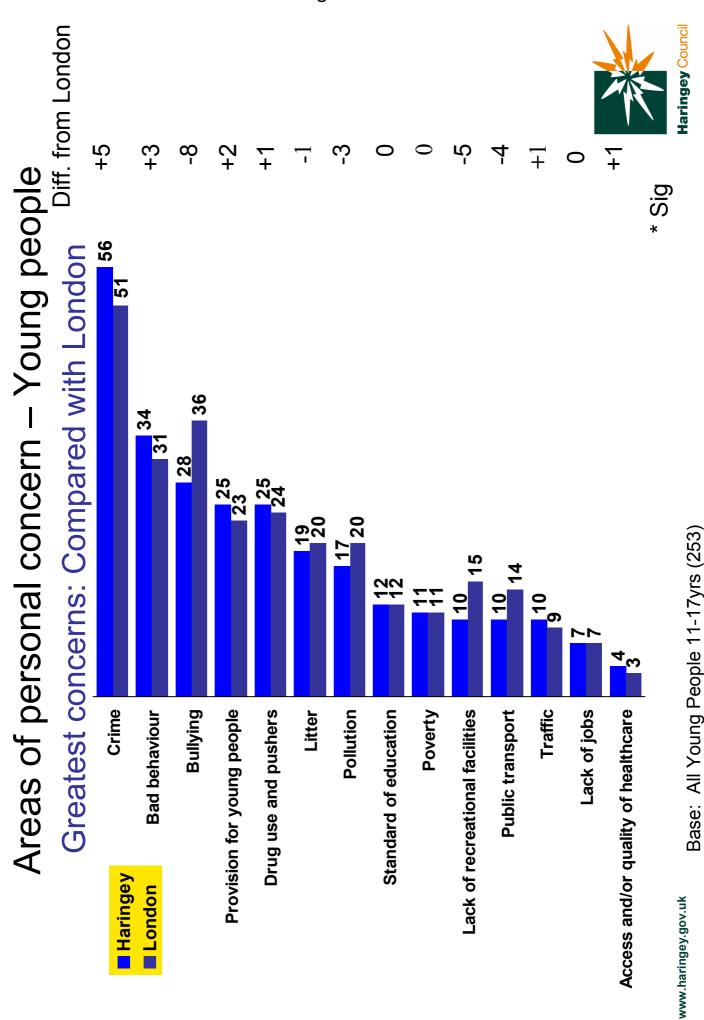
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Base: All Haringey residents (1018)



Base: All respondents (1018)





- Personal concern about crime is now at the lowest level since 2000
- Concern about crime tends to be lower amongst older residents (30%)
- Concern about crime is now lower than the London average
- Agreement with 'Making the Area a Better Place to Live' is now higher than the London average as is agreement with 'Keeping residents informed'
- Safety concerns have remained about the same level
- agreement that fines stop people offending (35%). The level of don't know responses to some of the Criminal Justice questions should be noted Residents are largely in agreement that the Courts should be made aware of the impact of anti social behaviour (81%), however there is less



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- Crime remains the main concern of young people, with 56% mentioning this as an area of personal concern
- Compared with last year, young people are less likely (-9%) to be concerned about the issue of Bullying
- (+36%) education. However young people were less positive about the image Young people are much more positive in their assessment of local services of the Council, with 28% fewer young people believing that they are kept compared with adults – particularly over primary (+32%) and secondary informed by the Council

- Most residents receive information about the Council from 'Haringey people' and by leaflets through the door – these are also the most preferred options
- Use of the Council website is up 4% on last year & regularity of receiving 'Haringey people' is up by 8%



rage 103 Agenda Item 12 Safer Community Key Performance Indicators Period: April 2007 – March 2008

YOUTH OFFENDING SERVICE (YOS) April 2007 - December 2007						
KPI	Description	March 2008 Target	Performance 2007/08			
1	Prevention - First Time Entrants	428	192			
2	Ethnicity (Annual) - White	n/a	n/a			
2	Ethnicity (Annual) - Mixed	n/a	n/a			
2	Ethnicity (Annual) - Asian	n/a	n/a			
2	Ethnicity (Annual) - Black	n/a	n/a			
2	Ethnicity (Annual) - Other	n/a	n/a			
3	Recidivism Rates (Annual)	29%	n/a			
4	Final Warnings	80%	100%			
	Remand [Reduce the use of the secure estates for remand to 9% of the total number of remand episodes The remand to custody (secure estate) of young people and the imposition of a custodial sentence by court brings down the performance of this PI]					
5a		9%	17.2%			
6 1	Use Of The Secure Estate -	F 0/	8.6%			
<u>5b</u>	Sentences	5%	11.3%			
6a	Restorative Process	25% 85%	100%			
6b	Victim Satisfaction		13.3%			
<u>7a</u> 7b	Parenting Interventions	20% 20%	37.3%			
	Parenting Prevention	<u> </u>	59.5%			
8 9	DTO Planning Education, Training & Employment	90%	73.6%			
9 10	Accommodation	90% 95%	96%			
11a	CAMHS - Acute	95% 95%	100%			
11b	CAMHS - Acute CAMHS - Non-Acute	95% 95%	100%			
12a	Substance Misuse - Assessment	90%	100%			
	Substance Misuse - Assessment Substance Misuse -Tiered Intervention		100%			
12b	Target met	90%	100/0			

Target not met Target not met (score 2 out of 3)

Community Safety British Crime Survey (BCS) performance ¹ April 2007-January 2008 compared with April 2006-January 2007								
RefDescriptionMarch 2008ProjectionPYTDTarget								
n/a	BCS Comparator Crimes	17,211	18,496	0.1%				
n/a	Wounding	2,666	2,652	-8.6%				
n/a	Burglary	2,615	2,894	4.7%				
n/a	Personal robbery	1,692	1,339	-21.3%				

 1 BCS comparator crimes are also referred to as Home Office Public Sector Agreement 1 (PSA 1): 'to reduce crime by 15%, and further in high crime areas (20.5% in Haringey), by 2007/08'

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n/a	Theft from the person	1,621	1,825	2.6%
n/a	Theft of motor vehicle (MV)	1,359	1,307	-7.9%
n/a	Theft from a MV	2,832	3,229	8.6%
n/a	MV interference	34	53	37.5%
n/a	Common assault	1,098	1,171	-0.9%
n/a	Theft of a pedal cycle	366	385	-10.3%
n/a	Criminal damage	2,928	3,640	10.6%

	DRUG & ALCOHOL ACTION TEAM (DAAT) April 2007 - January 2008						
Ref Description March 2008 Performance 2007 Target Target Target Target							
1	Numbers in Treatment YTD	1475 (for the full year)	1236				
2	% of new clients retained in treatment for 12 wks or more	75% (by the end of year)	84%				

	DRUG INTERVENTION PROGRAM (DIP) Compacts For December 2007 (provisional figures - January's figures are not published as yet)							
Ref	Description	March 2008 Target	Performance 2007/08					
1	95% of adults arrested for a trigger offence to be drug tested	95%	98%					
2	95% of adults who test positive and have an initial required assessment imposed, to attend and remain at the initial required assessment	95%	79%					
3	85% of adults assessed as needing a further intervention, to have a care plan drawn up and agreed	85%	62%					
4	95% of adults taken onto the caseload to engage in treatment	95%	77%					

Commentary - Haringey Youth Offending Service Key Performance Indicators

KPI	Description	Target	Apr-Dec 2007 Performance	Trend	Comments
	Use of Secure Remands	9%	17.2%		This is a national target and subsequently much more difficult for inner-city Boroughs to achieve. However, there was an significant increase in secure remands recently. Performance is liable to fluctuate depending on the offender cohort for that period, for example high numbers of Robberies results in young people being remanded due to risk of failure to attend future court appearances. Targeted police operations also contribute to the inconsistency of this indicator which the YOS has no real control over.
	Restorative Processes	25%	11.3%		Again this is a difficult target to achieve. Our output is consistent with other London Boroughs. There are challenges persuading victims to participate in the restorative process, the YOS is actually more successful with offender participation. Another issue is that 'victimless' crimes are not discounted hence offences such as 'possession of cannabis' is included in these figures. Victim participation is currently approximately 1 in 4. However, we are looking to improve the number of victim referrals & to increase the number of letters of apologies received.
	DTO Planning	90%	59.5%		DTO training plans are primarily carried out by face- to-face interviews or via video link to the custodial establishment. It is not always possible to arrange meetings within timescale due to lack of available appointments and the fact that young people are moved quite frequently between custodial establishments. This is further hampered by non- functioning video link at two of the main prisons used.

Commentary - Haringey Community Safety Team Key Performance Indicators

KP I	Descriptio n	Target	Projection (Based on Apr07-Jan08 performance)	3 year trend chart Feb05 – Jan08	Comments
	BCS Comparator Crimes	17,211	18,496		April – January comparison shows a 0.1% increase Five out of the ten BCS crime types saw reductions in the number of offences committed and five increased during this period. BCS comparator crimes are currently set to miss their target
	Wounding	2,666	2,652	Alexanda Caragonana fariti. Farina per (dol Anazes. Wending laceboard United 2005 - 31 Am 2008	April – January comparison shows a 8.6% reduction Haringey continues to see a steady falling trend in BCS violence (wounding + common assault) over the last two years. Violent crime hotspots correlate with vibrant late-night economy areas which attract large numbers of people (e.g. Hollywood Green). Alcohol consumption by young adults contributes the problem. Broadly, violence and robbery occur in similar hotspots at similar times therefore it's probable this reduction is related to the current significant robbery reduction. Currently wounding is projected to exceed the target by a 0.5% margin.
	Domestic burglary	2,615	2,894	Constant Constant of Link Constant of Li	April – January comparison shows a 4.7%increaseProbable contributory factors include robberyoffenders 'switching' to burglary as a result of thesuccess of the current anti-robbery initiatives. Anumber of those arrested recently for burglary arefrom the Eastern European community and

				previously unknown to the Met. A dedicated Q-car to tackle burglary hotspots is now in operation. Currently domestic burglary is projected to miss the target by 10.7% margin.
Personal robbery	1,692	1,339		April – January comparison shows a 21.3% reduction Personal robbery continues on a downward trend. Reduction can be attributed in part to the increased partnership activity around Hollywood Green including SNT, BST, PCT, Q cars and Borough Action Teams that reduced robberies by half in the immediate area earlier this year. Performance in personal robbery is currently set to exceed the target by 20.9%.
Theft from the person	1,621	1,825		April – January comparison shows a 2.6% increase The increase in snatches and pick pocketing seen earlier in the year could have been due to robbers 'switching' to this less violent type of offence that takes a shorter time to commit and are harder convict against. This is driven by pick pocketing primarily in the Wood Green Shopping area, approximately three-times more prevalent than snatches. The current theft from person performance is set to miss the target by 12.6% margin.
Theft of motor vehicle (MV)	1,359	1,307	Reards Conparticion Chart - Crimes per 1000 Residents Belogication Pales - Hannya Chart of Feb 2005 - 51 Jan 2001	April – January comparison shows a 7.9% reduction MV theft is falling across the MPS and is driven in part by the improvement in factory fitted anti-theft devices in modern cars. The current falling trend continues to perform better than last year and if current the performance continues the target will be exceeded by 3.8%

Theft from a MV	2,832	3,229		April – January comparison shows a 8.6% increase Police in partnership with the Council, carried out a number of decoy operations specifically around the theft of blue badges. This was successful and has had an impact earlier in the year. Traditionally certain types of crime increase from October onwards due to the early hours of darkness. Currently theft from MV is projected to miss its target by 14.0%.
MV interference	34	53	Substantion Chart - Chen set biological data and the interpret of Ch	April – January comparison shows a 37.5% increase This increase represents only 12 additional offences compared to the same period last year and MV interference represents less than 1% of all BCS crimes MV interference is set to miss the target.
Common assault	1,098	1,171	Reard Comparison Cheft - Crimes part 1000 Readonts Reards and the an element of the second of the social second se	April – January comparison shows a 0.9% reduction Common assault in Haringey has shown year-on- year reductions for the last three years and has outperformed the MPS since April 2006. However despite a continuing improvement compared to the same period last year, it is projected to miss it's challenging 6.7% annual target
Theft of a pedal cycle	366	385	Adarda Counteron Curri, Curran por Fordinan Strategi Bin d'Analysis e rea 2002 - 12 an 2001 0 feb 2002	April – January comparison shows a 10.3% reduction There were 37 fewer offences for this period. Theft of pedal cycle offences represent only 2.6% of all BCS crimes Theft of pedal cycles is set to miss the target.

Criminal damage	2,928	3,640	Buckground Product Chart - Change of 1808 Bresterst Bick 2000 - 31 Jan 2001	April – January comparison shows a 10.6% increase Criminal damage is showing a downward trend since peaking in July. Criminal damage accounts for the largest proportion of all BCS crimes (20.2%) and the 'other criminal damage' category continues to be problematic specifically concerning damage to gaming/fruit machines in pubs and specifically betting-shops. Following meetings with a number of betting shops in Haringey some have taken measures to target harden machines in their most affected premises as well as putting up signs warning against criminal damage of their property. Also working in partnership, local betting shops have agreed to share information that could lead to the identification of criminal damage offenders.
				Currently criminal damage is set to miss its target significantly by 24.3%.

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Commentary - Haringey Drug & Alcohol Action Team Key Performance Indicators

KPI	Description	07/08 Target	Performance Apr-Jan 2008	Trend	Comments
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Number of drug users in treatment. This number includes those in treatment at 1 st April 07 + new clients accessing treatment during the financial year.	1475	1236	Alf Adorbity target Boom Search 2 data Age May Jan Ja Age Sep Oct Nev Dec Jan Feb Mar	By end of January 2008 Local Development Plan (LDP) target achieved. 239 off stretched target. Estimate to be 1308 by year end and therefore miss target. Continuing pushing for target to attain a springboard into 2008/09. Awaiting YOS to report to NDTMS and beginning to see improve capture of Crack misuses.
% retained in drug treatment for more than 12 weeks (Performance in the last 12 month reporting period that can be fully reported)	75%	84%	100%	Target reached by October. DAAT needs assessments identified low attrition with crack using clients, and consequently CDP Blenheim has been commissioned to run a stimulant service from Sep 07 to ensure the needs of this client group are met, the performance will not be recorded and seen until December 2007 figures. Retention for the largest provider DASH prescribing clients has improved again, rising to 78% and, with the support of the DAAT, DASH continues to looking at ways to improve retention for their non-heroin using clients. Changes planned at DASH include the review of opening times, training for motivational interviewing skills for staff, BUBIC workshops on Fridays etc

Commentary - Haringey Drug Intervention Program Compact Key Performance Indicators

KPI	Description	07/08 Target	Performance December 2007	Trend	Comments (Comment below relate to January figures)
1	95% of adults arrested for a trigger offence to be drug tested	95%	98%		
2	95% of adults who test positive and have an initial required assessment imposed, to	95%	79%		Clients in police custody should be seen by drug workers however a number of clients leave before drug workers arrive. Also some tests are conducted outside

	attend and remain at the initial required assessment			regular working hours
3	85% of adults assessed as needing a further intervention, to have a care plan drawn up and agreed	85%	62%	Clients decline to meet with drug workers for further assessment for a variety of reasons e.g. client is not ready to engage in treatment
4	95% of adults taken onto the caseload to engage in treatment	95%	77%	Clients having agreed a care plan fail to attend their treatment appointments

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