# AUDIT AND GOVERNANCE COMMITTEE AGENDA



## 27th February 2024

at 5.00 pm

## in the Council Chamber, Civic Centre, Hartlepool, TS24 9AY

MEMBERS: AUDIT AND GOVERNANCE COMMITTEE

Councillors Allen, Brash, Cowie, Creevy, Groves, Hargreaves, Moore, D Nicholson, V Nicholson and Sharp.

Standards Co-opted Independent Members: - Mr Martin Slimings and Ms Tracy Squires.

Standards Co-opted Parish Council Representatives: Parish Councillor Kane Forrester (Wynyard) and Parish Councillor Michael Jorgeson (Headland)

Local Police Representative

### 1. APOLOGIES FOR ABSENCE

#### 2. TO RECEIVE ANY DECLARATIONS OF INTEREST BY MEMBERS

### 3. MINUTES

3.1 To confirm the minutes of the meeting held on 30th January 2024 (to follow) and 21st February 2024 (to follow)

### 4. STATUTORY SCRUTINY ITEMS

### **HEALTH SCRUTINY**

- 4.1 Quality Accounts 2023/24 North Tees and Hartlepool NHS Foundation Trust:-
  - (i) Covering Report Statutory Scrutiny Manager
  - (ii) Presentation Associate Director of Nursing, Effectiveness and Clinical Standards
- 4.2 Quality Accounts 2023/24 Tees Esk and Wear Valley NHS Foundation Trust:-
  - (i) Covering Report Statutory Scrutiny Manager
  - (ii) Presentation (to follow)

- 4.3 People First Teesside Advocacy Service Update *Statutory Scrutiny Manager*
- 4.4 Crustacean Deaths Working Group Verbal Update (Councillor Creevy)

#### **CRIME AND DISORDER SCRUTINY**

- 4.5 Strategic Assessment 2022-2023 Executive Director of Development, Neighbourhoods and Regulatory Services
- 4.6 Safer Hartlepool Partnership Action Plan Assistant Director (Regulatory Services)

### 5. **STANDARDS ITEMS**

No Items.

#### 6. AUDIT ITEMS

No Items.

#### 7. OTHER ITEMS FOR DECISION

7.1 Regulation of Investigatory Powers Act 2000 (RIPA) – Quarter 4 Update - Director of Legal, Governance and Human Resources

#### 8. MINUTES FROM RECENT MEETINGS FOR RECEIPT BY THE COMMITTEE

- 8.1 Health and Wellbeing Board None
- 8.2 Finance and Policy Committee Relating to Public Health Issues None
- 8.3 Tees Valley Health Scrutiny Joint Committee None
- 8.4 Safer Hartlepool Partnership None
- 8.5 Tees Valley Area Integrated Care Partnership None
- 8.6 Regional Health Scrutiny None
- 8.7 Durham, Darlington and Teesside, Hambleton, Richmondshire and Whitby STP Joint Health Scrutiny Committee None

### 9. ANY OTHER BUSINESS WHICH THE CHAIR CONSIDERS URGENT

For information: - forthcoming meeting dates:-

Tuesday 12<sup>th</sup> March 2024, at 5.00 pm – Civic Centre, Victoria Rd, Hartlepool

## **AUDIT AND GOVERNANCE COMMITTEE**

27th February 2024



**Report of:** Statutory Scrutiny Manager

**Subject:** QUALITY ACCOUNT 2023/24 – NORTH TEES AND

HARTLEPOOL NHS FOUNDATION TRUST -

**COVERING REPORT** 

#### 1. COUNCIL PLAN PRIORITY

### Hartlepool will be a place:

 where those who are vulnerable will be safe and protected from harm.

#### 2. PURPOSE OF REPORT

#### 2.1 To:

- Introduce representatives from the North Tees and Hartlepool NHS Foundation Trust (NTHFT); and
- Facilitate Audit and Governance Committee engagement in the process for preparation of the Trust's Quality Account for 2023/24 and identification of priorities for 2024/25.

### 3. BACKGROUND INFORMATION

- 3.1 In November 2009 the Government published the Health Bill which required all providers of NHS healthcare services to provide an annual Quality Account. The Department of Health and Social Care requires all NHS healthcare providers to send their Quality Accounts to an Overview and Scrutiny Committee in the local authority area where the provider has a registered office.
- 3.2 The presentation attached at **Appendix A** will be provide the Committee with an opportunity to engage in the process for the production of their Quality Account for 2023/24. As part of the process the Committee is asked to consider and comment on:
  - Performance against the priorities identified in the 2023/24 Quality Account; and
  - Priorities identified for quality improvement within the draft Quality Account for 2024/25.

- 3.3 The Committee's views and comments are to be fed in to the formalisation of the 2023-24 Quality Account by the end of April 2024. Consideration of the finalised document will then be sought from the Audit and Governance Committee in May, with a Third Party Declaration to be returned to the Trust by the end of May 2024 for inclusion in the document.
- The 2023-24 Quality Accounts will then be published on the Trust's website by 30 June 2024.

#### 4. RECOMMENDATIONS

- 4.1 That the Audit and Governance Committee:
  - i) Note the presentation;
  - ii) Identify any views or comments it may wish to feed back to the Trust in relation to its performance against the three priorities identified for 2023/24; and
  - iii) Consider the priorities identified by the Trust for 2024/25 and identify any potential changes or additions for recommendation to the Trust.

**Contact Officer:-** Joan Stevens – Statutory Scrutiny Manager

Tel: 01429 284142

Email: joan.stevens@hartlepool.gov.uk

### **BACKGROUND PAPERS**

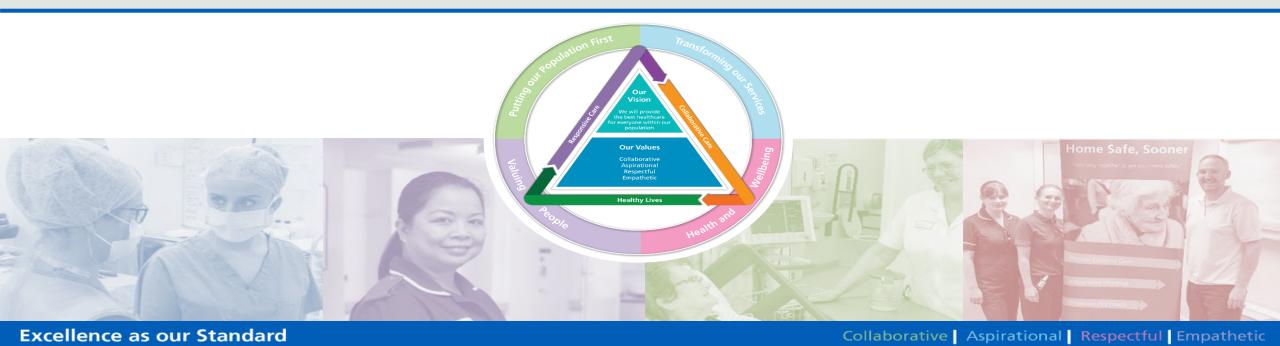
No background papers were used in preparation of this report.



# **Quality Accounts 2023-24**

Fiona McEvoy - Associate Director of Nursing, Effectiveness and Clinical standards

Rebecca Denton-Smith - Associate Director of Nursing, Clinical Safety and Deputy DIPC



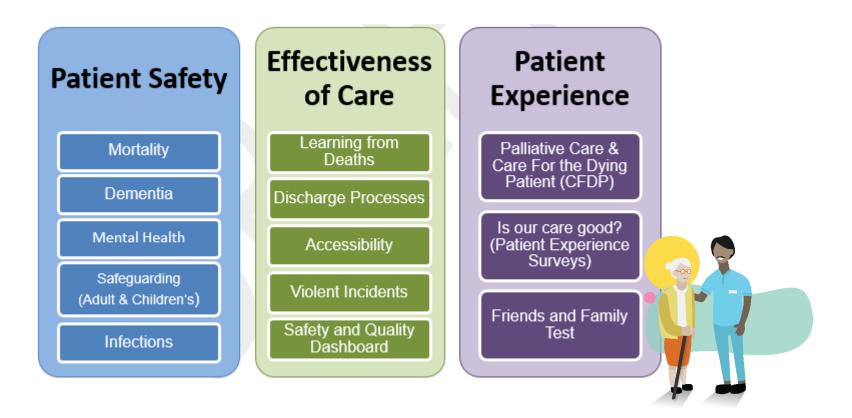


# Our four key principles





# **Quality Accounts Priorities** 2023-24





# **Patient Safety**





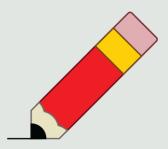
# **Mortality Indicators** (HSMR and SHMI)

**Hospital Standardised Mortality Ratio (HSMR)** – In-Hospital mortalities As of 1st April 2023 the Trust no longer reports on this indicator.

**HSMR** – **95.41** (January 2022 to December 2022) HSMR reporting in 2021-2022 Quality Accounts 87.81 (December 2020) to November 2021) a increase of 7.60 points.

Summary level Hospital Mortality Indicator (SHMI) – In-Hospital Deaths and those up to 30 days post Acute Trust discharge

**SHMI** – **95.48** (September 2022 to August 2023) SHMI reporting for 98.11 (September 2021 to August 2022) was 98.11 a decrease of 2.63 points.



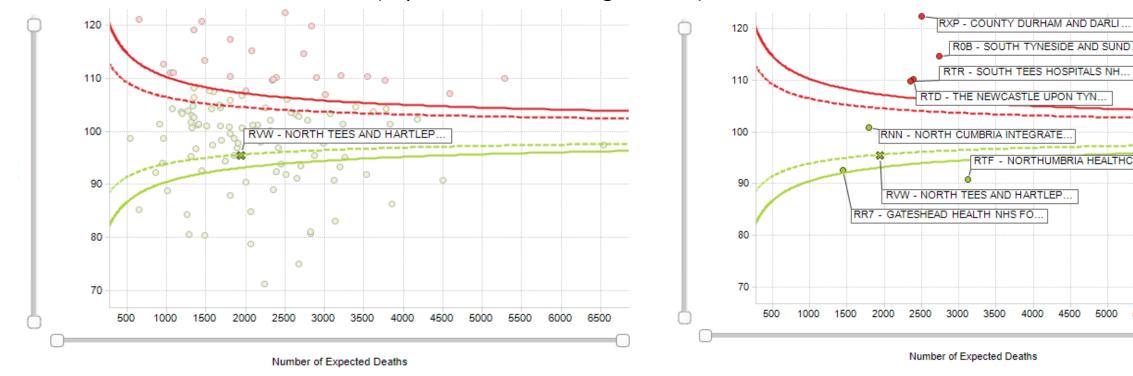


# **SHMI Indicator**

## Summary level Hospital Mortality Indicator (SHMI) -

In-Hospital Deaths and those up to 30 days post Acute Trust discharge

**SHMI – 95.48** (September 2022 to August 2023)



**National Range – 71.26 to 122.20** 

**Regional Range - 90.85 to 122.20** 



# **SHMI Indicator**

## Summary level Hospital Mortality Indicator (SHMI) -

In-Hospital Deaths and those up to 30 days post Acute Trust discharge



# **Trust Raw Mortality**



	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
2015/16	119	124	103	92	99	119	95	124	134	134	135	142
2016/17	142	131	123	119	107	97	132	119	144	155	136	136
2017/18	126	128	103	104	105	120	121	129	182	194	138	163
2018/19	135	104	102	114	92	108	139	134	132	149	132	113
2019/20	106	142	90	118	117	124	126	125	157	146	116	118
2020/21	152	113	101	93	102	106	120	154	206	207	110	83
2021/22	95	87	84	100	113	112	120	113	152	151	120	110
2022/23	153	117	111	134	95	115	113	135	171	158	116	125
2023/24	132	127	90	102	101	96	124	115	148			

2015/16     1009       2016/17     1114       2017/18     1118       2018/19     1060       2019/20     1105       2020/21     1147       2021/22     976       2022/23     1144		Apr to Dec
2017/18       1118         2018/19       1060         2019/20       1105         2020/21       1147         2021/22       976	2015/16	1009
2018/19     1060       2019/20     1105       2020/21     1147       2021/22     976	2016/17	1114
2019/20     1105       2020/21     1147       2021/22     976	2017/18	1118
2020/21     1147       2021/22     976	2018/19	1060
2021/22 976	2019/20	1105
	2020/21	1147
2022/23 1144	2021/22	976
	2022/23	1144
2023/24 1035	2023/24	1035







# **Dementia**

The challenges the Trust faces regarding patients admitted with a diagnosis of Dementia/Delirium.

Period	April	May	June	July	August	September	October	November	December	January	February	March
2021-22	282	311	318	319	337	284	322	318	335	323	289	186
2022-23	301	324	334	338	309	317	340	329	390	350	273	237
2023-24	320	325	319	334	316	302	321	301	174			



## Patients admitted with a diagnosis of Dementia/Delirium





# Infection Control – C diff

The following demonstrates the total number of *Healthcare Associated* infections during 2023-2024 compared with 2022-2023.

- Hospital onset healthcare associated (HOHA): cases that are detected in the hospital two or more days after admission
- Community onset healthcare associated (COHA): cases that occur in the community (or within two days of admission) when the patient has been an inpatient in the trust reporting the case in the previous four weeks.

Infection Type	2022-23	2023-24	Year on Year
*Clostridium difficile (C Difficile) HOHA – Hospital onset Healthcare Associated	23	34	+11
*Clostridium difficile (C Difficile) COHA – Community onset Healthcare Associated	12	17	+5

Data is for April to December for both financial years



# **Infection Control**

The following demonstrates the total number of Healthcare Associated infections during 2023-2024 compared with 2022-2023.

Infection Type	2022-23	2023-24	Year on Year
Methicillin-Resistant Staphylococcus Aureus (MRSA) bacteraemia	1	2	+1
Methicillin-Sensitive Staphylococcus Aureus (MSSA)	29	37	+8
Escherichia coli (E.coli)	63	68	+5
Klebsiella species (Kleb sp) bacteraemia	20	18	-2
Pseudomonas aeruginosa (Ps a) bacteraemia	12	8	-4
CAUTI	165	136	-29

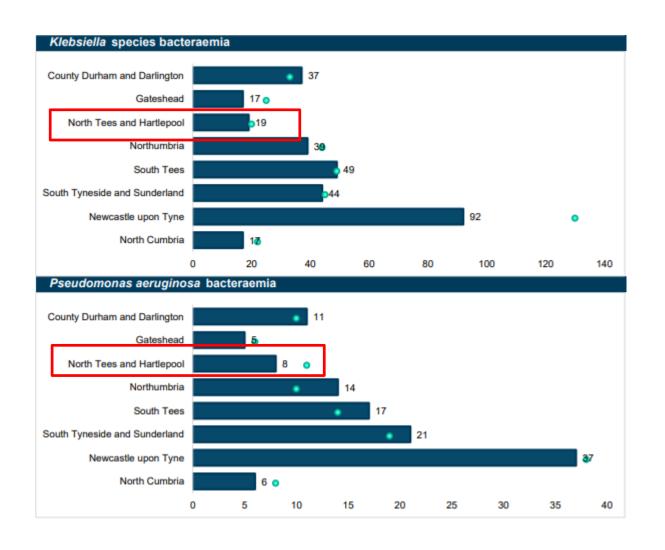
<sup>\*</sup>Data is for April to December for both financial years



# Healthcare associated infection by organisation

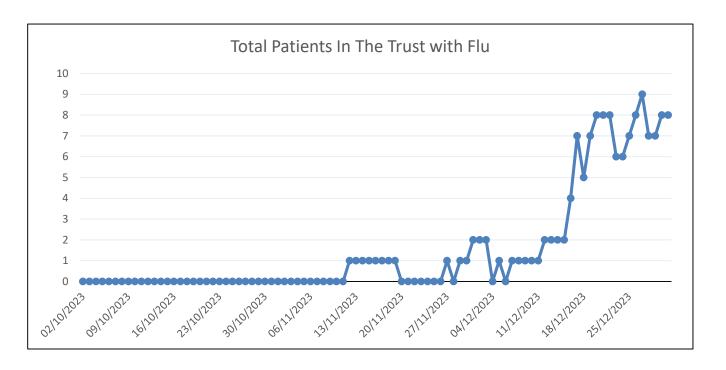


# Healthcare associated infection by organisation with Tees and Hartlepool NHS Foundation Trust





# 2023-2024 Flu Cases



On the 31 December 2023 there were **8** patients in the Trust with Flu.

The single day with the highest number of Flu admissions was the 27 December 2023 with 3.

Between 2 October 2023 to 31 December 2023 there have been **zero** cases in ITU with flu.

As of this presentation, there are **6** (ITU: 1, Other ward: 5) Flu cases in the Trust



# **Effectiveness of care**





# Accessibility

The trust is committed to ensuring that the Accessible information standard is met and all of the services we provide are able to make reasonable adjustments for those in need as required.

## Developments and improvements 2023/2024:

The Trust updated webpage was launched during 2023 to make it as accessible as possible (with the exclusion of some older PDF documents). It is possible for users to make the webpage more accessible by use their browser to:

- Change colours, contrast levels and fonts
- Zoom in up to 300% without the text spilling off the screen
- Navigate most of the website using just a keyboard
- Access the website on desktop, mobile or tablet devices
- Navigate most of the website using speech recognition software
- Listen to most of the website using a screen reader
- The Trust contracted language service provider continues to provide virtual training sessions to Trust staff to give guidance on best practice when working with an interpreter. This improves staff awareness in relation to communication barriers and increases confidence in accessing interpreting services.
- Accessibility Champions meet regularly to receive training to support patients.
- The Patient and Carer Experience Council now dedicates 4 meetings a year to receive updates from Care Groups to share examples of good practice and reasonable adjustments when meeting patient's accessible needs.



# Accessibility

The trust is committed to ensuring that the Accessible information standard is met and all of the services we provide are able to make reasonable adjustments for those in need as required.

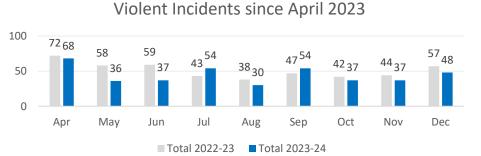
- The priority remedial work from the DDA access audit undertaken on North Tees, Hartlepool and Peterlee Hospital sites has been identified and will improve site accessibility.
- PLACE (patient-led assessment of the care environment) audits are in place. Members of the Healthcare User Group are an integral part of the audit process.
- The complaint process review, in line with the Parliamentary and Health Service Ombudsman's Complaint Standards Framework, is complete. The revised process is focused on identifying the issues and outcomes requested. It ensures equal access when raising a concern, complaint or providing feedback with a focus on quicker resolution. Patients and relatives are able to receive complaint feedback via email, telephone, meeting or a written response depending on their preference.
- A Co-production and Lived Experience Lead has been appointed. The objectives of the role are:
  - Implementation of the Patient, Public and People with Lived Experience Steering Group (PPPLE) strategy and promote accessibility standards across the Trust.
  - Support clinical teams and staff with the PPPLE work.
  - Promote good working relationships with our people and community.
  - Embed good practice and a strong culture of co-production.

The principles of the role are to increase shared decision making, equality, diversity, reciprocity, patient and carer involvement and accessibility.

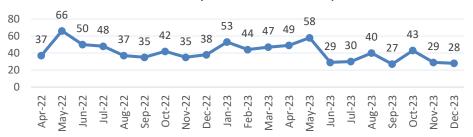


# **Violent Incidents**

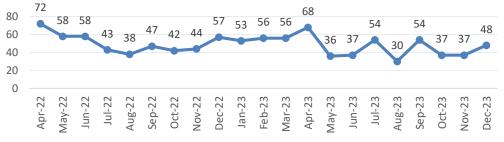
The following demonstrates the total number of Violent Incidents the Trust received during 2023-2024 compared with 2022-2023.











## Abuse of staff by Other person since April 2022



Reporting Period	Total	Abuse of staff by patients	Abuse of staff by other person
Apr - Dec 2022-23	460	405	55
Apr – Dec 2023-24	401	323	78

Data is for Apr to Dec for both financial years



# **Violent Incidents - events**

Adverse event	2022-23	2023-24	Difference
Assault etc with a weapon	4	5	1
Concerns to do with personal safety	40	12	-28
Disruptive, aggressive behaviour – other	42	71	29
Inappropriate behaviour and/or personal comments	18	28	10
Need for use of control and restraint with patient	21	78	57
Physical abuse, assault or violence – Malicious	7	25	18
Physical Abuse, assault or violence – unintentional	105	58	-47
Racial	4	5	1
Sexual	0	5	5
Verbal abuse or disruption	219	114	-105
Total	460	401	-59

Data is for Apr to Dec for both financial years



# **Patient experience**





# Friends and Family Test (FFT)





Data from April 2023 to December 2023

Total Responses	Month										
FFT Response	Apr 23	May 23	Jun 23	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23		
Very Good	1,547	1,778	1,858	1,878	2,079	1,906	1,975	1,918	1,251		
Good	294	342	339	318	360	358	360	349	241		
Neither Good nor Poor	57	73	79	86	81	85	83	81	71		
Poor	32	46	42	38	32	44	41	47	35		
Very Poor	35	34	39	51	53	46	42	34	37		
Don't know	12	10	13	11	13	18	13	7	14		
Total	1,977	2,283	2,370	2,382	2,618	2,457	2,514	2,436	1,649		

April 2023 to December 2023

Very 92.58% Good/Good %

Very 3.52% Poor/Poor %



# **Complaints**

The following demonstrates the total number of *Complaints* the Trust received during 2023-2024 compared with 2022-2023 and 2021-2022.

Complaint Type	*2021-22	*2022-23	*2023-24	2022-23 v 2023-24
Stage 1 - Informal	1,006	1,161	1,039	-122
Stage 2 - Formal (meeting)	67	68	86	+18
Stage 3 - Formal Response Letter	85	82	61	-21
Total	1,158	1,311	1,186	

Data is for April to December for all financial years



# **Complaints**

The following demonstrates the top 10 number of Complaints types so far for April to December.

Sub-subject (primary)	Apr- 22	May- 22	Jun- 22	Jul-22	Aug- 22	Sep- 22	Oct- 22	Nov- 22	Dec- 22	Total
Attitude of staff	5	18	13	9	12	15	7	12	8	122
Length of time to be given apt	5	9	11	9	14	12	20	8	13	108
Treatment and procedure delays	9	8	12	13	13	14	7	12	7	103
Care and compassion	4	7	2	7	9	6	12	6	9	76
Delay to diagnosis	4	2	5	10	12	12	8	6	6	74
Communication - Verbal	0	2	1	0	8	8	6	17	6	61
Communication - verbal / non verbal	27	18	4	4	0	0	0	0	0	53
Competence of staff member	3	6	3	10	9	5	5	4	2	50
Outpatient cancellation	6	7	8	8	3	1	7	6	1	50
Failure to monitor	5	3	4	4	10	3	5	5	2	47

Sub-subject (primary)	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Total
Attitude of staff	15	15	13	11	11	15	10	12	9	111
Delay to diagnosis	8	11	9	12	6	14	23	14	13	110
Communication - Verbal	6	7	16	15	6	14	10	13	14	101
Length of time to be given apt	7	6	16	17	16	15	6	8	8	99
Care and compassion	9	9	8	3	14	15	8	12	8	86
Treatment and procedure delays	6	8	10	7	6	5	10	6	6	64
Communication - Written	3	8	10	2	2	7	11	6	9	58
Discharge arrangements	3	7	8	9	8	7	3	6	2	53
Outpatient cancellation	7	7	1	14	4	11	4	2	3	53
Failure to monitor	7	4	5	8	6	6	3	3	8	50



# Compliments

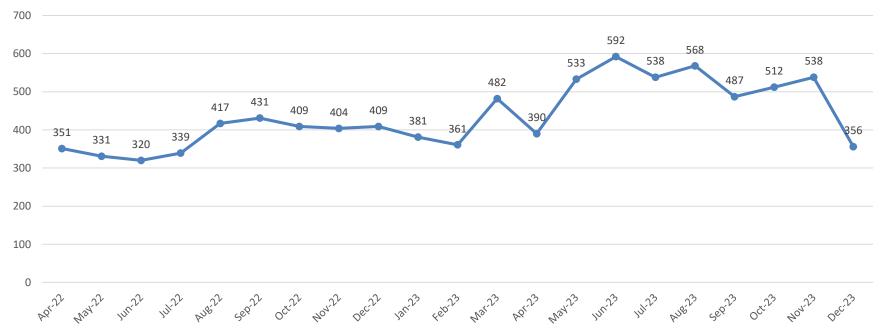
The following demonstrates the total Compliments received so far for April 2023 to December 2023 compared to April 2022 to December 2022.

Total Apr to Dec

2022-23 3,411

2023-24 4,514







# **Maternity**



# National safer care recommendations



- Maternity Incentive Scheme year 5
- Current monitoring period
- 10 Safety Actions nominated leads
- Governance process
- On track for compliance

- Ockenden Immediate & **Essential Actions**
- 7 IEAS
- Governance process
- Insights visit led by ICB with peer review
- On track for compliance

# **Maternity and Neonatal Three year Delivery Plan**

- Listening to and working with women and families with compassion
- 2. Growing, retaining, and supporting our workforce
- 3. Developing and sustaining a culture of safety, learning, and support
- 4. Standards and structures that underpin safer, more personalised, and more equitable care



## **Community Midwifery services**

- External review
- Engagement sessions with staff
- Triangulated local intelligence: complaints and compliments
- Community hubs
- Engaged with MNVP

## **Maternity and neonatal Voice partnership**

22/23 Workplan

Expanding the team

Co-production charter

Supporting communities in need

Communication development

## **Areas of Good Practice**

- Bereavement pathway
- PNA & PMA development across perinatal service
- Introduction of Badgernet
- Implementation of maternity preceptorship programme
- Visit from Jess Read and Tracey Cooper
- Resources: CTG machines
- Post discharge neonatal feeding support
- BFI accreditation
- Recruitment and retention
- QI and research



# 2024-25 Priorities





# Our approach to Quality





# Strategic plan



## Improving together

Patient Quality Strategy 2023 - 2026





## **Patient Quality**

#### Strategic Aim

Putting our population first

#### Strategic Objective

To deliver patient care that is safe, effective and personcentred.

#### We will achieve this by:

- Maximising the things that go right, minimising the things that go wrong
- Delivering good outcomes based on the best available evidence
- Care is shaped by what matters to people

#### **Priorities**

#### **Deliver Safe Care**

- No preventable deaths and delivering harm-free care
- Ensure staff feel secure in raising concerns
- Right skills, right place

#### **Deliver Informed Care**

- Improve outcomes through learning
- Learning from death, learning for life
- Evidencing compliance with fundamental standards of care

#### Deliver People-centred Care - "It starts with me"

- Proactively seek feedback
- Involve people at every stage
- Provide services that are accessible and inclusive for all (dementia, LD and autism, Mental Health)

#### How we will measure

- National/local survey results
- Compliance with fundamental standards
- Hospital Standard Mortality Ration (HSMR/SHMI)
- National and local audit
- Structured Judament Reviews
- Vacancies/turnover
- Training compliance
- Compliance with mandated surveillance of Infection Prevention control (IPC)
- Compliance with Clinical Negligence Scheme for Trusts (CNST)
- · Internal and external accreditation performance (JAG, GIRFT, CQUIN)
- Compliance with Parliamentary and Health Service Ombudsman (PHSO)
- · Learning from external partners

#### The results we want to achieve (Metrics/KPIs)

- No preventable deaths
- 10% reduction in the number of medication incidents
- 10% increase in harm-free care
- 20% increase in staff feeling secure raising concerns
- Increase training to have 30 Family Liaison Officers
- 25% reduction in Nursing, Midwifery and AHP vacancies
- 20% increase in response rates for FFT returns
- 50% increase audits evidencing improved outcomes
- Increase number of Patient Safety Partners and Patient Experience **Partners**
- 100% compliance with CNST

### **Enabling Strategic Plans**

- Nursing, Midwifery and AHP Workforce
- Patient Safety
- Patient Experience
- Effectiveness and Clinical Standards
- Digital

- Quality and Shared Governance
- Leadership
- People Strategy
- · Quality Improvement
- Risk Management

- Research and Development
- Population health
- Health and Wellbeing

**Excellence as our Standard** www.nth.nhs.uk

**Excellence as our Standard** 

Collaborative | Aspirational | Respectful | Empathetic



# Quality improvement priorities 24/25

Maximising the things that go right, minimizing the things that go wrong

Delivering good outcomes based on best available evidence

Care is shaped by what matters to people

We will publish and implement the Trust PSERP

We will improve clinical quality through robust audit programmes against NICE guidance

We will proactively seek patient feedback and support patients and families through difficult circumstances

We will continue to develop a culture of safety where the focus is on learning, ensuring the right people with the right skills are involved at each and every level

We will continue to benchmark, learn and improve from national improvement programmes such as GIRFT and CQUIN

We will respond compassionately and implement improvements as a result of learning



# **2023-24 Timeline**

- Engagement process between February 2024 to March 2024
- 2023-2024 document finalised end of April 2024
- Document sent to Stakeholders to produce their 3<sup>rd</sup> party statements in May 2024
- 3<sup>rd</sup> Party Statements back by end of May 2024
- The 2023-24 Quality Accounts to be published on the Trust website by 30 June 2024 deadline





# Thank you

## **AUDIT AND GOVERNANCE COMMITTEE**

27th February 2024



**Report of:** Statutory Scrutiny Manager

**Subject:** QUALITY ACCOUNT 2023/24 – TEES ESK AND

WEAR VALLEY NHS FOUNDATION TRUST -

**COVERING REPORT** 

## 1. COUNCIL PLAN PRIORITY

## Hartlepool will be a place:

 where those who are vulnerable will be safe and protected from harm.

#### 2. PURPOSE OF REPORT

#### 2.1 To:

- Introduce representatives from the Tees Esk and Wear Valley NHS Foundation Trust (TEWV); and
- Facilitate Audit and Governance Committee engagement in the process for preparation of the Trust's Quality Account for 2023/24 and identification of priorities for 2024/25.

### 3. BACKGROUND INFORMATION

- 3.1 In November 2009 the Government published the Health Bill which required all providers of NHS healthcare services to provide an annual Quality Account. The Department of Health and Social Care requires all NHS healthcare providers to send their Quality Accounts to an Overview and Scrutiny Committee in the local authority area where the provider has a registered office.
- 3.2 The presentation attached at **Appendix A** (to follow) will be provide the Committee with an opportunity to engage in the process for the production of their Quality Account for 2023/24. As part of the process the Committee is asked to consider and comment on:
  - Performance against the priorities identified in the 2023/24 Quality Account; and
  - Priorities identified for quality improvement within the draft Quality Account for 2024/25.

- 3.3 The Committee's views and comments are to be fed in to the formalisation of the 2023-24 Quality Account by the end of April 2024. Consideration of the finalised document will then be sought from the Audit and Governance Committee in May, with a Third Party Declaration to be returned to the Trust by the end of May 2024 for inclusion in the document.
- The 2023-24 Quality Accounts will then be published on the Trust's website by 30 June 2024.

### 4. RECOMMENDATIONS

- 4.1 That the Audit and Governance Committee:
  - i) Note the presentation;
  - ii) Identify any views or comments it may wish to feed back to the Trust in relation to its performance against the three priorities identified for 2023/24; and
  - iii) Consider the priorities identified by the Trust for 2024/25 and identify any potential changes or additions for recommendation to the Trust.

**Contact Officer:-** Joan Stevens – Statutory Scrutiny Manager

Tel: 01429 284142

Email: joan.stevens@hartlepool.gov.uk

## **BACKGROUND PAPERS**

No background papers were used in preparation of this report.

## AUDIT AND GOVERNANCE COMMITTEE

27th February 2024



**Report of:** Statutory Scrutiny Manager

**Subject:** People First - Teesside Advocacy Service Update

#### 1. COUNCIL PLAN PRIORITY

## Hartlepool will be a place:

 where those who are vulnerable will be safe and protected from harm.

### 2. PURPOSE OF REPORT

2.1 To inform Members that the Teesside Advocacy Manager from the Teesside Advocacy Service will be in attendance at today's meeting to provide the Committee with an update in relation to the level and type of complaints from Hartlepool residents being dealt with by the service.

## 3. BACKGROUND INFORMATION

- 3.1 Since March 2018, the Audit and Governance Committee has received annual updates on the provision of free, confidential and independent advocacy support to people wishing to raise complaints about their NHS funded treatment or care.
- 3.2 The information provided is useful to the Committee in identifying any trends in terms of issues facing residents, or particular service areas of concern, that the Committee might wish to look at more closely as part of its work programme.
- 3.3 The Teesside Advocacy Service is now responsible for the provision of this service and will at today's meeting present to the Committee an update on its activities, including the level and types of complaints dealt with from the perspective of Hartlepool residents. Comparative data will also be provided from across the Tees Valley and wider region.
- 3.4 The Teesside Advocacy Services report is attached at **Appendix A** (to follow).

### 4. RECOMMENDATIONS

4.1 That the Audit and Governance Committee note the update and seek clarification on any issues, where required.

## **BACKGROUND PAPERS**

No background papers were used in the preparation of this report.

**Contact Officer:-**

Joan Stevens – Statutory Scrutiny Manager Chief Executive's Department – Legal Services

Hartlepool Borough Council

Tel: 01429 284142

Email: joan.stevens@hartlepool.gov.uk

## AUDIT AND GOVERNANCE COMMITTEE

27th February 2024



**Report of:** Executive Director of Development, Neighbourhoods

and Regulatory Services

**Subject:** STRATEGIC ASSESSMENT 2022 - 2023

## 1. COUNCIL PLAN PRIORITY

## Hartlepool will be a place:that is sustainable, clean, safe and green.

### 2. PURPOSE OF REPORT

2.1 To consider and comment on the Safer Hartlepool Partnership (SHP) Strategic Assessment for October 2022 to September 2023.

## 3. BACKGROUND

- 3.1 The Safer Hartlepool Partnership has a statutory requirement to undertake an annual strategic assessment to identify and address the community safety issues that impact upon and matter to the local community. To address these issues, it is important to understand not only what is happening where, but what may be causing the problems and the best way to tackle them. The findings from the Strategic Assessment will inform the development of the next Safer Hartlepool Partnership's statutory Community Safety Plan due in April 2024.
- 3.2 As agreed by the Safer Hartlepool Partnership and detailed in the Community Safety Plan 2021-2024, the Partnership's current strategic objective and priorities are:

Strategic Objective 2021 - 2024	Priorities 2023 - 2024
To make Hartlepool a safe, prosperous and enjoyable place to live, work and visit.	Anti-social Behaviour  Drugs and Alcohol
	Domestic Violence and Abuse

### 4. STRATEGIC ASSESSMENT 2022 - 2023

- 4.1 The Strategic Assessment 2022 2023 Executive Summary is attached at **Appendix A**. The document draws on a wide range of multi-agency data, analysis of crime and disorder, anti-social behaviour, substance misuse and re-offending in Hartlepool.
- 4.2 The key findings of the assessment identify that the current Community Safety Plan priorities of Anti-social Behaviour, Drugs and Alcohol and Domestic Violence and Abuse remain relevant and, with the addition of Serious Violence, should be retained as priorities in the next Community Safety Plan, due for implementation in April 2024.
- 5. RISK IMPLICATIONS
- 5.1 No relevant issues
- 6. FINANCIAL CONSIDERATIONS
- 6.1 No relevant issues
- 7. LEGAL CONSIDERATIONS
- 7.1 In accordance with the Crime and Disorder Act 1998, Community Safety Partnerships have a statutory duty to undertake an annual strategic assessment.
- 8. CHILD AND FAMILY POVERTY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)
- 8.1 No relevant issues.
- 9. EQUALITY AND DIVERSITY CONSIDERATIONS (IMPACT ASSESSMENT FORM TO BE COMPLETED AS APPROPRIATE.)
- 9.1 No relevant issues.
- 10. STAFF CONSIDERATIONS
- 10.1 No relevant issues.
- 11. ASSET MANAGEMENT CONSIDERATIONS
- 11.1 No relevant issues.
- 12. ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS
- 12.1 No relevant issues.

### 13. SECTION 17 CONSIDERATIONS

13.1 Local Authorities and other public bodies have a duty to consider how their activities may impact on crime and disorder. The annual Strategic Assessment enables the SHP to consider and identify any changing/new priorities for inclusion in the next Community Safety Plan.

### 14. RECOMMENDATIONS

14.1 In accordance with its statutory function as the Council's crime and disorder scrutiny committee, the Audit and Governance Committee Members are asked to consider and comment on the annual SHP Strategic Assessment 2022 - 2023.

## 15. BACKGROUND PAPERS

15.1 None.

## 16. CONTACT OFFICERS

Tony Hanson

Executive Director of Development, Neighbourhoods and Regulatory Services Hartlepool Borough Council

Email: tony.hanson@hartlepool.gov.uk

Tel: 01429 523301

Rachel Parker Community Safety Team Leader Hartlepool Borough Council

Email: rachel.parker@hartlepool.gov.uk

Tel: 01429 523100



Safer Hartlepool Partnership Strategic Assessment 2022 - 2023

**Executive Summary** 

## APPENDIX A

## **CONTENTS**

Introduction	3
Strategic Objectives and Priorities	4
Local Context	5
Performance Overview	6
Strategic Assessment	10
1. Crime	10
2. Drug and Alcohol Misuse	13
3. Anti-Social Behaviour	14
4. Re-offending	17
Horizon Scanning	19
Strategic Objectives and Priorities	21

## INTRODUCTION

The Safer Hartlepool Partnership has a statutory requirement to undertake an annual Strategic Assessment to identify and address the community safety issues that impact upon and really matter to the local community. To address these issues, it is important to understand not only what is happening where, but what may be causing the problems and the best way to tackle them. All the work of the Safer Hartlepool Partnership is intelligence led provided by analysis contained within the Strategic Assessment and other detailed analytical reports when requested.

As the Partnership nears the end of its three year plan for 2021 – 2024, the Strategic Assessment 2023 will assist the Partnership in setting strategic objectives and priorities to inform the new Safer Hartlepool Community Safety Plan for 2024 – 2027.

The Strategic Assessment has been prepared by the Hartlepool Community Safety Team and we would like to thank the following agencies, partners and organisations who have provided data, material and / or comment on this assessment's content:

- Hartlepool Community Safety Team
- Public Health, Hartlepool Borough Council
- Cleveland Fire Brigade
- Cleveland Police
- Office of the Cleveland Police and Crime Commissioner

## **STRATEGIC OBJECTIVES & PRIORITIES**

As agreed by the Safer Hartlepool Partnership and detailed in the Community Safety Plan 2021-2024, the Partnership's current strategic objective and priorities are:

Strategic Objective	Priorities
2021 - 2024	2021 - 2024
To make Hartlepool a safe, prosperous and enjoyable place to live, work and visit.	Anti-social Behaviour  Drugs and Alcohol  Domestic Violence and Abuse  Serious Violence (from 2022)

## **LOCAL CONTEXT**

Hartlepool is the smallest unitary authority in the North East region.

It has a population of approximately 93,663 people with 51% being female and 49% male.

There are approximately 40,434 households with 28% renting their home; 11% have dependent children.

The average age in Hartlepool is 40 with 7% of the population aged 55-69.

The largest ethnic group is White British (98%).

Low educational attainment, high unemployment and poor physical health place Hartlepool in a deprived status and amongst the top 10% in England (ONS, 2021).

## PERFORMANCE OVERVIEW

The following provides an overview of key partnership performance indicators for the strategic period October 2022 to September 2023.

## 1. Performance Key Findings:

- 1.1 Recorded crime during the period increased by 11% (+1,471 offences) in Hartlepool when compared to the previous assessment period.
- 1.2 Increases were experienced in violence against the person offences (+315; 5%), sexual offences (+46; 12%) and criminal damage offences (+232; 14%).
- 1.3 Acquisitive crime offences increased overall by 34%, predominantly due to an increase in recorded shoplifting offences:
- Residential Burglary (-83; -12%)
- Vehicle Crime (+103; +20% offences)
- Shoplifting (+722; +66%)
- 1.4 Community Safety Partnerships are arranged in "Most Similar Groups<sup>1</sup>" with 14 other CSPs, determined by various measures including population figures and deprivation levels. Positions in these groups are ranked with 1 being the lowest (fewest offences) and 15 the highest (most offences).
- 1.5 The crime rate in Hartlepool is above the Most Similar Group (MSG) average of 118 per 1,000 population, standing at 154. (July 2023). (Table 1)
- 1.6 In comparison to our local peers Hartlepool has the second highest victimbased crime rate per 1,000 population and is above the Cleveland average. (Table 2)

<sup>&</sup>lt;sup>1</sup> Most Similar Group (MSG) Community Safety Partnerships – I-Quanta: Walsall, Sunderland, South Tyneside, Halton, Barrow-in-Furness, Rochdale, St Helens, Newport, Knowlesley, Stoke-on-Trent, Middlesbrough, North East Lincolnshire, Bradford, Thanet, Hartlepool.

Table 1 – Comparison to Most Similar Group

Crime Type	Hartlepool	MSG Average	Hartlepool Position	MSG Comparison
All Crime	154.006	117.497	15	Above
Violence against the Person				
Homicide	0.054	0.013	15	Above
Violence with Injury	13.492	12.661	11	Above
Violence without Injury	21.130	17.855	13	Above
Sexual Offences				
Rape	1.577	1.286	12	Above
Other Sexual Offences	3.025	2.461	15	Above
Acquisitive Crime				
Burglary Residential*	10.404	6.418	15	Above
Burglary Bus & Com	1.707	1.513	9	Above
Bicycle Theft	1.113	0.967	11	Above
Theft from the Person	0.0605	0.574	9	Above
Robbery - Personal	1.145	0.858	12	Above
Robbery - Business	0.162	.0125	13	Above
Vehicle Crime	6.449	6.040	11	Above
Shoplifting	17.576	8.159	15	Above
Other Acquisitive	10.208	8.290	13	Above
Criminal Damage				
All Criminal Damage	16.938	12.309	15	Above
Arson	1.015	0.804	13	Above

Table 2 - Comparison to Local Peers

Crime Category / Type	Hartlepool	Redcar and Cleveland	Middlesbrough	Stockton	Cleveland
Violence against the person	58.1	45.8	68.4	45.7	53.5
Homicide	0.0	0.0	0.0	0.0	0.0
Death or injury due to driving	0.0	0.0	0.0	0.1	0.0
Violence with Injury	13.7	10.6	17.7	11.1	13.1
Violence without Injury	20.6	15.7	26.1	16.1	19.2
Stalking and Harassment	23.8	19.4	24.5	18.5	21.1
Sexual Offences	4.7	4.0	5.8	4.4	4.7
Rape	1.5	1.5	2.3	1.5	1.7
Other Sexual Offences	3.2	2.5	3.5	2.8	3.0
Robbery	1.3	1.2	2.6	1.3	1.6
Robbery - Personal	1.1	1.0	2.5	1.2	1.5
Robbery - Business	0.2	0.2	0.1	0.1	0.1
Acquisitive Crime	46.9	39.3	46.3	38.1	41.9
Burglary - Residential	6.3	7.9	7.9	6.5	7.2
Burglary – Business and Community	1.9	2.2	1.6	1.6	1.8
Bicycle Theft	1.1	0.9	1.6	1.2	1.2
Theft from the Person	0.6	0.5	1.4	0.6	0.8
Vehicle Crime	6.8	7.4	10.2	7.1	7.9
Shoplifting	19.6	12.1	12.2	12.1	13.3
Other Acquisitive	10.7	8.3	11.3	8.9	9.7
Criminal Damage and Arson	18.7	16.8	23.1	15.2	18.1
Total	129.8	106.9	146.2	104.7	119.8

- 1.7 Anti-social behaviour (ASB) incidents reported to the Police reduced by 5% (-183 incidents) compared to the previous assessment period.
- 1.8 The anti-social behaviour rate in Hartlepool is more than double the national rate of 18 incidents per 1,000 population<sup>2</sup>, In comparison to our local peers, Hartlepool continues to have the second highest anti-social behaviour rate, but is slightly below the Cleveland rate. (Table 3)

Table 3 – ASB incident rate per 1,000 population

Police Anti-Social Behaviour	Hartlepool	Redcar & Cleveland	Middlesbrough	Stockton	Cleveland Average
Incidents	34.5	29.4	40.3	25.9	31.8

 $<sup>^{\</sup>rm 2}$  Data Source: Office of National Statistics – Crime in England and Wales March 2023

## **APPENDIX A**

1.9 - During the assessment period Cleveland Fire Brigade recorded a reduction of 15% for deliberate primary fires and a 34% reduction for deliberate secondary fires in Hartlepool. (Table 4)

Table 4 – Deliberate Fires in Hartlepool

Deliberate Fires	Oct 20 – Sep 21	Oct 21 – Sep 22	Oct 22 - Sep 23	Change from 21/22	% Change from 21/22
Primary Fires (F1) <sup>3</sup>	91	108	92	-16	-15
Secondary Fires (F3) 4	598	1049	695	-354	-34
Total Deliberate Fires	689	1157	787	-370	-32

1.10 - In comparison to our local peers, Hartlepool has the highest rate per thousand population for deliberate primary fires; the highest rate for deliberate secondary fires, and is above the Cleveland rate in both categories. (Table 5)

Table 5 - Rate of Deliberate Fires per 1000 population

Deliberate Fires per 1000 population	H'pool	M'boro	R&C	S'ton	C'land
Primary Fires (F1)	0.99	0.91	0.76	0.81	0.85
Secondary Fires (F3)	7.52	7.04	5.03	3.18	5.30

<sup>&</sup>lt;sup>3</sup> Deliberate Primary Fires (F1) are non-accidental fires that involve casualties and/or rescues or property or where at least five appliances attend.

<sup>&</sup>lt;sup>4</sup> Deliberate Secondary Fires (F3) are any non-accidental fires that do not involve property or casualties/rescues or where four or fewer appliances attend. Derelict properties are classed as secondary fires.

## STRATEGIC ASSESSMENT

## 1. Crime

## **Acquisitive Crime**

Acquisitive crime in Hartlepool increased by 34% (-806 offences). Historically, acquisitive crime has been the most prevalent crime type in Hartlepool for many years, however during this assessment period acquisitive crime accounted for only 31% of offences.

Whilst residential burglary offences reduced, vehicle crime and shoplifting offences increased by 20% and 66% respectively.

## **Violent Crime**

'Violence Against the Person' offences in Hartlepool increased by 5% when compared to the previous assessment period and equated to 46% of all victim based crime in the town.

More than half (56%) of all violence offences were assault without injury, assault with injury and harassment offences.

The geographical analysis of recorded violence offences identifies that more than half (55%) occurred in four wards; Victoria, Burn Valley, Headland and Harbour and De Bruce.

In April 2018 the government published its Serious Violence Strategy in response to increases in knife crime, gun crime and homicide across England. The strategy called for a public health approach, with the establishment of Violence Reduction Units to play a key role in the strategic coordination of all relevant agencies, to tackle serious violence and its root causes.

The Serious Violence Duty was legislated for in the Police, Crime, Sentencing, and Courts Act 2022. The duty requires specified authorities, the police, local authorities, fire and rescue authorities, youth offending teams, Clinical Commissioning Groups (CCGs) in England, (Local Health Boards in Wales) and probation services, to work together to formulate an evidence-based analysis of serious violence in a local area and then formulate and implement a strategy detailing how they will respond to those issues.

A Cleveland Unit for the Reduction of Violence, "CURV", was established in 2022 to provide leadership and strategic coordination of Cleveland's response to serious violence and is based within the Office of the Police and Crime Commissioner.

Serious violence offences are identified as follow;

- Homicide, attempted murder and manslaughter
- Assault with intent to cause serious harm
- Malicious wounding-wounding or inflicting GBH
- Arson with intent to endanger life
- Aggravated burglary
- Death or serious injury caused by unlawful driving
- Causing death by aggravated vehicle taking
- Kidnap
- Sexual Violence offences
- Knife crime and/or firearms enabled/threatened offences (including robbery, threats to kill, assault with injury, assault with injury on a Constable and racially or religiously aggravated assault with injury)

During the reporting period, serious violence increased by 26% when compared to the previous year, with Assault with Intent to Cause Serious Harm offences increasing by 54%

Offences of serious violence are highest in Victoria ward followed by Burn Valley with knife crime offences also highest in these and the Rossmere ward.

## **Organised Crime**

A Cleveland Serious and Organised Crime Local Profile is commissioned by the Local Serious and Organised Crime Partnership Board. The latest profile was published in early 2023 with the findings regularly reviewed at the Board meetings. The aim of the profile is to assess the threat from serious and organised crime and the impact on local communities in Cleveland. The profile should be used to:

- . Understand the impact and success of the police approach to tackling serious and organised crime in partnership with other agencies;
- . develop a common understanding among local partners of the threats, vulnerabilities and risks;
- . provide information on which to base local response and action plans;
- . support the mainstreaming of serious and organised crime activity in dayto-day policing, local government and partnership work;
- . allow a targeted and proportionate use of resources.

The profile incorporates police and partnership data to identify and assess current and emerging threats associated with serious and organised crime.

Organised crime activity in Hartlepool mainly occurs in the Victoria and Burn Valley wards and is predominantly related to the cultivation of cannabis, street level distribution of drugs and sales of counterfeit cigarettes and illegal vapes / e-cigarettes.

Modern Slavery and criminal exploitation are key features of the Organised Crime activity in Hartlepool. Organised crime groups are known to exploit children and vulnerable young people, coercing them into being cannabis 'farmers' and

'runners' to transport drugs, money and weapons locally as well as around the UK.

## **Hate Crime**

Hate crime<sup>5</sup> is different to other forms of crime as it targets people because of their identity. It is a form of discrimination that infringes human rights and prevents people from enjoying the full benefits of our society. Research has shown that hate crimes cause greater psychological harm than similar crimes without a motivation of prejudice. Hate crime creates fear in victims, groups and communities and encourages communities to turn on each other.<sup>6</sup>

Hate crime is defined as "any criminal offence which is perceived, by the victim or any other person to be motivated by hostility or prejudice towards someone based on a personal characteristic". There are five centrally monitored strands of hate crime:

- race or ethnicity;
- religion or beliefs;
- sexual orientation;
- · disability; and
- transgender identity

Home Office figures released in October 2023 indicate that in 2022/23 there were 145,214 hate crime offences recorded by the Police in England and Wales (excluding Devon & Cornwall Police), a decrease of 5% compared with the previous year (153,536).

Hate crimes in Hartlepool recorded during the assessment period increased by 7% when compared to the previous year.

As in previous years, and in line with the national picture, the majority of hate crimes continue to be racially motivated and accounted for two thirds (66%) of all hate offences (70% nationally).

Analysis identified that 25% (52) of all recorded hate crimes occurred in the Victoria ward and were predominantly (81%; 42 offences) racially motivated.

## **Domestic Violence and Abuse**

In the reporting period, police recorded incidents of domestic violence (DV) increased by 3% when compared with the previous year.

Domestic violence crimes equated to 21% of all recorded victim based crime in Hartlepool. The number of domestic related violent crimes in Hartlepool increased

<sup>&</sup>lt;sup>5</sup> Incorporating Racially/Religiously Motivated Crime Categories and crimes which are recorded with "Y" in the Racially Motivated data field

<sup>&</sup>lt;sup>6</sup> www.homeoffice.gov.uk/crime-victims/reducing-crime/hate-crime

<sup>&</sup>lt;sup>7</sup> Common definition agreed in 2007 by the police, Crown Prosecution Service, prison Service (now the national Offender Management Service) and other agencies that make up the criminal justice system.

## APPENDIX A

by 12% (+214 offences) compared to the previous year and equated to 31% of all violent crime.

Whilst more than three quarters (76%) of domestic violence offences are violence offences, other offence types which are recorded as domestic violence predominantly include criminal damage (11%), theft (4%) and sexual offences (3%).

Women and girls in Hartlepool continue to be at the greatest risk of domestic violence and abuse with more than thirds (70%) of all victims being female. Local analysis identifies that 62% of female victims of domestic violence and abuse are aged between 21 and 42 years. Repeat victimisation is evident, with 34% of female victims and 22% of males suffering two or more incidents during the reporting period.

The number of high risk domestic violence cases discussed at the Hartlepool Multi-agency Risk Assessment Conference (MARAC) in the assessment period stood at 142, a 3% increase when compared with the previous assessment period with a repeat case rate of 32%. The Police and Independent Domestic Violence Advisor (IDVA) continue to be the primary referral agencies to the MARAC accounting for more than 90% of referrals.

In relation to the perpetrators charged with domestic abuse offences during the assessment period, 84% were males with more than two thirds aged between 27 and 45 years. Repeat offending is evident with 41 males charged with 2 or more offences during the reporting period.

## 2. Drug and Alcohol Misuse

Drug and alcohol misuse in Hartlepool is a cross cutting issue that impacts on the work of the Safer Hartlepool Partnership as it is often a factor in crime, anti-social behaviour and reoffending.

Cleveland Police crime data identified that drug offences were comparable to the previous assessment period with 255 possession of drugs offences and 97 drug supply offences recorded<sup>8</sup>.

These offence types are indicative of proactive policing to tackle the dealing and use of illegal drugs in our community and are reliant on community intelligence to facilitate the obtaining and executing of warrants.

Analysis identified that more than half (59%) of all drug dealing / supply offences occurred in the Victoria (29), Foggy Furze (15) and Burn Valley (13) wards and related to the production of cannabis and supply of Class A drugs.

\_

<sup>&</sup>lt;sup>8</sup> 2021/22: 264 possession offences and 99 supply offences

Drug possession offences were recorded in all wards, however offences in the Victoria (66), Burn Valley (51) and Foggy Furze (30) wards equated to 58% of all offences recorded during the reporting period.

Substance misuse is a key priority for the Safer Hartlepool Partnership. Hartlepool has high numbers of substance users, high numbers of drug and alcohol related deaths and a significant proportion of treatment service users fail to complete their treatment.

In England and Wales, in the year ending March 2023, an estimated 9.5% of people aged 16 to 59 years (approximately 3.1 million people) reported using a drug in the last 12 months; 7.6% reported using cannabis (around 2.5 million people) and 3.3% reported using a Class A drug (around 1.1 million people)<sup>9</sup>.

During the reporting period, Hartlepool Borough Council's Public Health Team undertook a drug and alcohol needs assessment which identified that:

- Hartlepool has had more than a threefold increase in drug related deaths since 2012/14 with the current rate being the 3<sup>rd</sup> highest in England;
- In 2019/20, Hartlepool was in the top 10 highest rates across the country for alcohol related hospital admissions;
- For the last 5 years, more than 50% of young people engaged in substance misuse treatment services were aged 15 or younger;

The needs assessment informed the development of the Hartlepool Drug and Alcohol Strategy 2023-2028 and action plan which was presented to the Safer Hartlepool Partnership in October 2023.

The Strategy covers four key themes:

- Prevention and early intervention
- Reducing drug and alcohol related harms
- Supporting wider health needs
- Reducing drug and alcohol related crime and disorder

Progress in relation to the strategy implementation and delivery of the action plan will be reported to the Safer Hartlepool Partnership on an annual basis.

## 3. Anti-Social Behaviour

Anti-social behaviour behaviour is described as (i) conduct that has caused or is likely to cause harassment, alarm or distress to any person, (ii) conduct capable of causing nuisance or annoyance to a person in relation to that person's occupation of residential premises or (iii) conduct capable of causing housing-related nuisance or annoyance to any person. <sup>10</sup>

<sup>&</sup>lt;sup>9</sup> Drug misuse in England and Wales - Office for National Statistics (ons.gov.uk)

<sup>&</sup>lt;sup>10</sup> Crime and Policing Act 2014

APPENDIX A

Incidents of anti-social behaviour include a variety of behaviours and outcomes that can blight the quality of life of a particular individual, group or community.

Anti-social behaviour in all its forms (such as nuisance or rowdy behaviour, misuse of vehicles, littering, dog fouling) acts as visible signs of disorder in the community and is closely linked to perceptions of safety, satisfaction with the local area as a place to live and confidence in local services.

In Hartlepool, anti-social behaviour incidents recorded by the Police reduced by 5% when compared to the previous 12 months.<sup>11</sup>

During this reporting period an average of 266 incidents were recorded by the Police each month, compared to 281 in the previous reporting period. Incident levels were greatest in March, April and May 2023 and were predominantly related to an increase in complaints relating off road bikes and other vehicle nuisance, particularly in the Headland and Harbour ward.

Whilst reported incidents of anti-social behaviour display considerable variance across the town, almost half (48%) occurred in just 3 wards; Headland and Harbour, Victoria and Burn Valley. Incidents in the Headland & Harbour ward equated to 20% of all anti-social behaviour incidents in the town and as mentioned above, predominantly related to vehicle nuisance caused by off road motorbikes.

Similar to anti-social behaviour incidents reported to the Police, complaints received by the Hartlepool Community Safety Team display variance across the town. ASB cases in the Victoria and Burn Valley wards equated to more than one third of all complaints received during the assessment period with almost one third of cases linked to drug dealing.

One quarter of ASB cases during the reporting period related to drug dealing, with rowdy behaviour and nuisance behaviour cases equating to a further 21% and 20% respectively.

Analysis identifies that the majority of recorded anti-social behaviour incidents are perpetrated by adults. During this assessment period, youth related anti-social behaviour equated to one third (34%) of all incidents recorded and is comparable to the previous year when the level was 30%. Youth related ASB increased by 7% (+73 incidents).

Almost half (47%) of all youth related ASB was recorded in the Headland and Harbour, Manor House and Victoria wards. One quarter of the youth related ASB in these wards is linked to off road motorbike / vehicle nuisance.

National research<sup>12</sup> suggests that people judge the level of anti-social behaviour in an area by obvious physical signs, such as poor presentation of public spaces i.e. the presence of litter, graffiti or criminal damage. If environmental issues are

-

<sup>&</sup>lt;sup>11</sup> 3188 recorded ASB incidents compared to 3371 in October 21 to September 22

<sup>12</sup> Home Office – The Drivers of Perceptions of Anti-Social Behaviour

## APPENDIX A

not addressed at the earliest opportunity, there is a risk that more incidents, disorder or serious crime may occur. A delayed and uncoordinated response to this type of crime can also signal to communities that no-one cares about them, leading to a downward spiral in community cohesion, an increase in anxiety, fear and changes in behaviour to protect themselves and their property.

**Fly-tipping** is a significant blight on the local environment, creates potential danger to public health, and is a source of pollution and a hazard to wildlife. It also undermines legitimate waste carrier businesses who are undercut by unscrupulous competitors operating outside the law.

Reports of fly-tipping received by the Council's Contact Centre increased by 43% (+ 833) during the period October 2022 to September 2023. A total of 2,749 incidents were recorded compared to 1,916 in October 2021 to September 2022.

Further analysis of this data identified that reports of fly-tipping in the Manor house, Headland and Harbour and Victoria wards equated to almost half (46%) of all complaints received during the assessment period. The most common types of waste that are fly-tipped in these wards are household items / furniture and black bags.

**Noise** complaints received by Hartlepool Borough Council's Public Protection Team increased by 10% in comparison to the previous reporting period with 517 complaints received compared to 470.

Comparable to the previous assessment period, complaints predominantly related to loud music and barking dogs which equated to 62% of all complaints received.

Complaints received from the Victoria, Burn Valley and Headland and Harbour wards equated to 40% of all complaints across the Town.

**Deliberate fire setting** is the human behaviour employed in committing the crime of arson. Arson endangers life, damages property and causes destruction to the local environment. It also blights neighbourhoods, having a detrimental effect on people, communities and local authorities.

In 2022/23, the estimated economic cost to Hartlepool from deliberate fires was in excess of £2.2m.

Data provided by Cleveland Fire Brigade identified an overall reduction in deliberate fires of 32% during the assessment period; a 15% reduction in F1 deliberate primary fires<sup>13</sup> occurred whilst F3 deliberate secondary fires<sup>14</sup> across the town reduced by 34%.

Deliberate primary fires (F1) predominantly occurred in the Manor House, Burn Valley, Foggy Furze and Victoria wards and equated to 63% (58 of the 92 incidents) of all F1 fires during the reporting period. The main type of property targeted in these incidents were vehicles (53%) and dwellings (29%). Incidents of

<sup>&</sup>lt;sup>13</sup> Deliberate Primary Fires (F1) are non-accidental fires that involve casualties and/or rescues or property or where at least five appliances attend

attend.

14 Deliberate Secondary Fires (F3) are any non-accidental fires that do not involve property or casualties/rescues or where four or fewer appliances attend. Derelict properties are classed as secondary fires.

this nature are often linked to Serious and Organised crime and domestic violence.

Although they remain low in volume, the effects of deliberate primary fires are high personal impact and community loss, risk to life and high financial loss.

Police data identified that 104 offences of Arson were recorded in the assessment period, with 21% (22) categorised as Arson Endangering Life.

Deliberate secondary fires (F3) predominantly occurred in the Rossmere, Manor House, Hart and Headland& Harbour wards and equated to 64% (442 of the 695 incidents) of all F3 fires during the reporting period. F3 fires in these wards were predominantly refuse and grassland fires with a specific issue of trees being set alight in the Hart ward.

## 4. Re-Offending

Reducing re-offending is fundamental to both reducing crime and protecting the community. Proven re-offending rates published by the Ministry of Justice identify that re-offending rates for adult offenders in Cleveland remain high with three of the four local authority areas featuring within the "Top 20" areas with the highest re-offending rates in the country as detailed in the following table.

Upper Tier Local Authority Area	% of Adults who Re-offend
Cardiff	34.9
Darlington	34.0
Middlesbrough	33.9
Stockton-on-Tees	33.9
Gwynedd	33.2
Merthyr Tydfil	32.3
York	32.3
Swansea	31.4
Plymouth	31.3
Redcar and Cleveland	31.1
Nottingham	30.6
Wrexham	30.5
Hartlepool	30.4
Kingston upon Hull, City of	30.4
Blackpool	29.4
Conwy	29.3
Newcastle upon Tyne	29.3
Cheshire West and Chester	29.3
Westminster	29.0
Rhondda Cynon Taf	29.0

<sup>&</sup>lt;sup>15</sup> Proven reoffending statistics - GOV.UK (www.gov.uk)

## APPENDIX A

Top 20 - Local Authority areas in England & Wales with the highest proportion of adult offenders who committed a proven re-offence within 12-months, January 2021 – December 2021<sup>16</sup>

Recorded crime data identified a total of 659 individuals were detected and charged with more than 1,400 offences in Hartlepool during the assessment period; 252 charged with 2 or more offences of whom 23 were charged with 10 or more offences. These 23 individuals were detected to more than 350 offences which accounted for 24.5% of all detected crime and an average of 16. predominantly shoplifting, offences per individual.

The majority of repeat offenders were adults (92%) of which three guarters (75%) were males predominantly aged between 23 and 40 years (63%).

Information provided by the Hartlepool Youth Justice Service identified that comparable to the previous year, 20 young people entered the Criminal Justice system for the first time during the financial year 2022/23.

As identified in the Youth Justice Service Strategic Plan 2023 – 2024, the rate of youth re-offending in Hartlepool is lower than the regional and national percentages. Preventing reoffending remains a strategic priority for the Youth Justice Management Board.

During the assessment period, 51 young people aged between 11 and 17 years were detected to 85 offences in Hartlepool.

Offences committed by these 51 individuals were predominantly violence offences (36%). Other offence types included robbery, arson endangering life, criminal damage and drug offences that mainly occurred in the Victoria, Burn Valley and Manor House wards.

<sup>&</sup>lt;sup>16</sup> Ministry of Justice Proven Reoffending Statistics are two years out of date on publication.

## **HORIZON SCANNING**

## **Organisational Change**

Organisational change has been a key issue for Partnership members during the reporting period. As budget pressures continue, changes to service delivery and potential loss of some services may impact on community safety.

## Legislation

#### **Criminal Justice Bill 2023**

The Criminal Justice Bill was introduced to the House of Commons in November 2023. The Bill contains various measures which the Government says will protect the public, give the police the powers they need to cut crime and anti-social behaviour, improve public confidence in the police, introduce tougher sentencing for sexual and violent criminals and strengthen the supervision of offenders on release from prison.

### **Terrorism Protection of Premises Bill**

Also known as Martyn's law, this Bill is expected to become law in 2024 and is designed to reduce the risk to the public from terrorism by the protection of public venues. The Bill will place a requirement on those responsible for certain locations to consider the threat from terrorism and put measures in place to mitigate the threat, including implementing security systems, staff training and clearer processes.

## **Community Safety Partnership Review**

In 2022, the Government's internal review of Police and Crime Commissioners (PCCs) recommended that the Home Office conduct a full review of Community Safety Partnerships (CSPs) across England and Wales: the CSP Review. The CSP Review seeks to clarify the role of CSPs, and improve their transparency, accountability, and effectiveness, making it easier for CSPs to serve the needs of their communities in tackling crime, disorder, and antisocial behaviour.

Phase One of the CSP review launched in March 2023 alongside the Anti-social Behaviour Action Plan. Phase One comprised of a consultation exploring the relationship between CSPs and PCCs, with the aim of improving the way they work together, and strengthening the accountability of Community Safety Partnerships. The Government response to the consultation<sup>17</sup> will bring forward a package of targeted measures to improve alignment and collaboration between CSPs and PCCs, including creating a power for PCCs to make recommendations on the activity of CSPs to support the delivery of the objectives set out in the

<sup>&</sup>lt;sup>17</sup> Community safety partnerships review and antisocial behaviour powers - GOV.UK (www.gov.uk)

## APPENDIX A

police and crime plan and create a duty on CSPs to take those recommendations into account.

Phase Two of the CSP review will consider the broader role and responsibilities of CSPs in the local partnership landscape. Evidence gathering surveys were issued in December 2023, with the Government response expected in early 2024.

#### **General Election**

Prime Minister Rishi Sunak has said he expects to call a general election "in the second half" of 2024. There had been speculation it could be held in May, when some local elections take place. 18

The latest a Parliament can be dissolved for a general election is on the fifth anniversary of the day it first met. For the current Parliament, that date is 17 December 2024. However, 25 working days are then allowed to prepare for the election meaning the next election must be held by 28 January 2025.

\_

 $<sup>^{18}\</sup> https://www.bbc.co.uk/news/uk-politics-62064552$ 

## STRATEGIC OBJECTIVES AND PRIORITIES

It is recommended that the SHP retains the strategic objective and priorities of the current Community Safety Plan, with an additional priority of Serious Violence, for the development of the forthcoming 2024 - 2027 Plan as detailed in the table below:

Strategic Objective	Priorities 2024 - 2027
To make Hartlepool a safe, prosperous and enjoyable place to live, work and visit.	Anti-social Behaviour  Drugs and Alcohol  Domestic Violence and Abuse  Serious Violence

## SAFER HARTLEPOOL PARTNERSHIP



## AUDIT & GOVERNANCE COMMITTEE 27th February 2024



Subject: Safer Hartlepool Partnership Action Plan

Report of: Assistant Director (Regulatory Services)

**Decision Type:** Non-Key Decision

## 1. COUNCIL PLAN PRIORITY

## Hartlepool will be a place:

- That is sustainable, clean, safe and green.

## 2. PURPOSE OF REPORT

2.1 To consider and comment on the Safer Hartlepool Partnership (SHP) Action Plan in which partners report their performance against the priorities outlined in the Community Safety Plan 2024/2027

## 3. BACKGROUND

- 3.1 The Draft Community Safety Plan for 2024/27 has a strategic objective to "make Hartlepool a safe, prosperous and enjoyable place to live, work and visit". The priority areas identified to achieve this objective should be Serious Violence, Anti-Social Behaviour, Drugs and Alcohol and Domestic Violence.
- 3.2 In a report to SHP on 2<sup>nd</sup> October 2023 it was agreed that performance reporting would be in the form of an action plan covering each priority with the Community safety Plan. This would outline all the work being carried out by partners. It was agreed that updates against these action plans would be reported to SHP every six months. The action plans would be living documents and allow partners to include new initiatives to fully reflect the work being carried out.

## 4. PROPOSAL

4.1 The draft Safer Hartlepool Partnership Action Plan is attached in appendix 1 of the report it outlines activities carried out by partners across the priorities of the 2024/2027 plan.

4.2 Some partners are already producing action plans to accompany strategies such as Domestic Abuse and Drugs & Alcohol which are already being presented to the Partnership. Details from these plans are included in the action plan to ensure that all partners are contributing and including work they are carrying out.

## 5. OTHER CONSIDERATIONS/IMPLICATIONS

RISK IMPLICATIONS	No relevant issues.
FINANCIAL CONSIDERATIONS	No relevant issues.
LEGAL CONSIDERATIONS	No relevant issues.
CHILD AND FAMILY POVERTY	No relevant issues.
EQUALITY AND DIVERSITY CONSIDERATIONS	No relevant issues.
STAFF CONSIDERATIONS	No relevant issues.
ASSET MANAGEMENT CONSIDERATIONS	No relevant issues.
ENVIRONMENT, SUSTAINABILITY AND CLIMATE CHANGE CONSIDERATIONS	No relevant issues.
CONSULTATION	No relevant issues.

## 6. **RECOMMENDATIONS**

6.1 Members are asked to consider and comment on the SHP Action Plan 2024/2025.

## 7. REASONS FOR RECOMMENDATIONS

7.1 The Audit and Governance Committee has within its responsibility to act as the Council's Crime and Disorder Committee and in doing so scrutinize the performance management of the Safer Hartlepool Partnership.

## 8. CONTACT OFFICER

Sylvia Pinkney
Assistant Director (Regulatory Services)
Hartlepool Borough Council
Civic Centre
Hartlepool
TS24 8AY

(01429) 523315 Sylvia.pinkney@hartlepool.gov.uk

Priority	Objective / Outcome	Who	Actions/Progress/Comments	Date / RAG
Anti-Social	Ensure victims understand	SHP members and partner		
Behaviour*	how to report ASB.	organisations		
	Ensure victims are aware of	SHP members and partner		
	the ASB case review process	organisations		
	– "Community Trigger" and			
	how to initiate it			
	Provide a more visible police	Police and Local Authority	ASB hot spot funding uniformed patrols carried out in	
	and council officer 'on	Tonce and Escarriationity	Headland & Harbour and Victoria wards.	
	street' presence			
			SS5 funding providing project officer in Victoria Ward.	
	Make full use of the ASB	Lacal Authority Dalias and	Consequents Cofety Assertable and bounding ACD between	
	tools and powers related to	Local Authority, Police and partner organisations;	Community Safety Accreditation scheme in ASB hot spot areas giving Civil Enforcement Officers additional powers	
	the partnership activity to	Thirteen Group	areas giving eith zimereement eitheers additional pewers	
	tackle ASB			
	Reduce deliberate fires	Local Authority, Police, Fire	Multi agency deliberate fires group	
		Brigade and partner organisations		
		Organisacions		
	Reduce the nuisance caused	Local Authority, Police, Fire	Multi agency off road vehicle group	
	by illegal / off road	Brigade and partner		
	bikes/vehicles	organisations		
		Local Authority, Police, Fire		
	Tackle environmental crime	Brigade and partner	Multi agency fly tipping group.	
	in all its forms	organisations		

<sup>\*</sup> Community Safety Plan Priority

Domestic Violence and Abuse*	Local delivery of the Domestic Abuse Local Strategic Partnership action plan 2022-2025	SHP members and partner organisations		
	Workforce are equipped to ask the right questions and to support victims of Domestic Abuse	Local Domestic Abuse Partnership Board / All		
	Ensure that the needs of victims / survivors with multiple and complex issues are given due consideration	Strategic MARAC Group / Local Domestic Abuse Partnership Board		
	Domestic Abuse in all its forms is recognised by the workforce and in the community	All / HBC Domestic Abuse Coordinator / Corporate Communication Teams	Training/ promotion of Domestic Abuse campaigns; Ask for Angela, 16 Days of Action/	
	Victims/survivors (adults and children) are true partners in the review and development of services	HBC Domestic Abuse Coordinator / Harbour		
	Learning from Domestic Homicide Reviews is disseminated, resulting in improved service delivery across the whole system	SHP members and partner organisations		

<sup>\*</sup> Community Safety Plan Priority

Drug and Alcohol Misuse*	Work in partnership with the Combatting Drugs Partnership (CDP) to reduce drug supply  Local delivery of the Drug &	SHP members and partner		
	Alcohol Strategy action plan  Review the current criminal justice pathways into substance misuse services to ensure efficacy of treatment	organisations  START and Criminal Justice Partners		
	and support  Work in partnership to disrupt the supply of illegal drugs	Police Trading Standards Community Safety	Supply chain disruption work carried out including. Premises visits, raids & closures	
	Raise awareness of the harms associated with drug and alcohol misuse amongst school and college students	Neighbourhood Police Team (PC Coggin)	Presentations and targeted interventions delivered in schools and colleges across Hartlepool on key themes including County Lines and anti-social behaviour and drink spiking	

<sup>\*</sup> Community Safety Plan Priority

Analysis of existing and	Cleveland Unit for the	Partners providing data for need assessment.
	(CURV)	Partners providing data for deep dive.
, ,		
planned.		
Local delivery of the CURV		Needs assessment undertaken and response strategy
Response Strategy		developed.
`   <u>                                </u>	SHP members and partner	
	organisations	
•		
Strategy-rillal.pul		
Assist in the delivery of the	SHD members and narther	Installation four Bleed Cabinets at key locations across the
CURV night time economy	•	borough.
action plan.	organisations	borough.
		Establish a Responsible Authorities group. The group will
		consult on new licensing applications.
		In partnership with CURV to provide 25 apex radios to the
		Night Time Economy Premises
		Partnership working with the Hartlepool Town Pastors.
		Tarthership working with the Hartiepoor Town Tustors.
Daise awareness of the risks		
	Neighbourhood Police	Presentations and targeted interventions delivered in
·		schools and colleges across Hartlepool on key themes
	/ PC Geoff Coggin	including knife crime, personal safety and "Ask for Angela"
Jones and conege stadents		initiative.
Provide a more visible police		Dedicated patrols in hotspot (GRIP) areas / positive action /
presence to prevent and		reduction in offences and victims
	emerging hotspots of serious violence is shared and a multi-agency response is planned.  Local delivery of the CURV Response Strategy  CURV Response Strategy-Final.pdf  Assist in the delivery of the CURV night time economy action plan.  Raise awareness of the risks and potential consequences of serious violence amongst school and college students  Provide a more visible police	emerging hotspots of serious violence is shared and a multi-agency response is planned.  Local delivery of the CURV Response Strategy  CURV Response Strategy  SHP members and partner organisations  Neighbourhood Police Team - Supt. Martin Hopps / PC Geoff Coggin  Provide a more visible police

<sup>\*</sup> Community Safety Plan Priority

	deter serious violence in identified hotspot areas and the night-time economy	Police - Supt. Martin Hopps / Ch. Inspector Pete Littlewood		
Re-offending	The Ministry of Justice (MOJ) 'Proven adult offending rate' for Hartlepool offenders is reduced.	Probation / Integrated Offender Management		
	Implement the Youth Justice Service Strategic Plan	YJS Management Board Chair (Jo Heaney) / HBC YJS Manager (Roni Checksfield		
Prevent	Susceptible individuals are safeguarded from being radicalised by individuals and/or groups promoting extremist ideologies online or in the community	Community Safety / Police	Training Key partners briefed on the Counter Terrorism Local Profile Local Prevent Risk Assessment is in place	
	Workforce and Community awareness of Prevent and the risks of radicalisation is increased	Community Safety / Police / Corporate Communication Team	Develop a Prevent Communications Plan	
	Victims of hate crime have increased confidence in reporting and accessing support services	Community Safety / VCAS / Third Party Reporting Centres		

<sup>\*</sup> Community Safety Plan Priority

Acquisitive Crime	Reduction in residential burglary offences	Police / Crime Prevention/Community Safety	Proactive patrols in key areas/ prioritise activity to locate and arrest outstanding suspects / crime prevention and target hardening measures to prevent repeat victimisation.  SS5 funding providing target hardening works.
	Reduction in shoplifting offences	Police / PCSOs / Community Safety	Proactive patrols in key areas / prioritise activity to locate and arrest outstanding suspects / pursue robust enforcement for repeat offenders.
Protect	Workforce and Community awareness of Protect duty and the risks of terrorist threats.	SHP members and partner organisations	Requirement for staff to undertake ACT Awareness eLearning and SCaN for All training package  Recommended that all staff with a work Mobile phone to download the free ProtectUK App

<sup>\*</sup> Community Safety Plan Priority

## AUDIT AND GOVERNANCE COMMITTEE

**27 February 2024** 



**Report of:** Director of Legal, Governance and Human Resources

Subject: REGULATION OF INVESTIGATORY POWERS ACT

2000 (RIPA) - QUARTER 4 UPDATE

#### 1. COUNCIL PLAN PRIORITY

## Hartlepool will be a place:

 where those who are vulnerable will be safe and protected from harm.

## 2. PURPOSE OF REPORT

2.1 To provide members with a quarterly update on activities relating to surveillance by the Council and policies under the Regulation of Investigatory Powers Act 2011.

### 3. BACKGROUND

- 3.1 Hartlepool Borough Council has powers under the Regulation of Investigatory Powers Act 2000 (RIPA) to conduct authorised covert surveillance.
- 3.2 This report is submitted to members as a result of the requirement to report to members under paragraph 4.47 of the Covert Surveillance and Property Interference Revised Code of Practice (August 2018) which states that:

Elected members of a local authority should review the authority's use of the 1997 Act and the 2000 Act and set the policy at least once a year. They should also consider internal reports on use of the 1997 Act and the 2000 Act on a regular basis to ensure that it is being used consistently with the local authority's policy and that the policy remains fit for purpose.

- 3.3 As from 1 November 2012 Local Authorities may only use their powers under the Regulation of Investigatory Powers Act 2000 to prevent or detect criminal offences punishable by a minimum term of 6 months in prison (or if related to underage sale of alcohol and tobacco not relevant to this Council). The amendment to the 2000 Act came into force on 1 November 2012.
- 3.4 Examples of where authorisations could be sought are serious criminal damage, dangerous waste dumping and serious or serial benefit fraud. The surveillance must also be necessary and proportionate. The 2012 changes mean that authorisations cannot be granted for directed surveillance for e.g. littering, dog control, fly posting.
- 3.5 As from 1 November 2012 any RIPA surveillance which the Council wishes to authorise must be approved by an authorising officer at the council and also be approved by a Magistrate; where a Local Authority wishes to seek to carry out a directed surveillance or make use of a human intelligence source the Council must apply to a single Justice of the Peace.

## 4. RIPA AUTHORISATIONS

4.1 In the quarter to the date of this meeting:

Communications Data	Nil
CHIS	Nil
Directed Surveillance	Nil

### 5. RECOMMENDATION

5.1 That the quarterly report be noted.

## 6. REASONS FOR RECOMMENDATIONS

To enable the Council to monitor the RIPA system effectively and as required by law and guidance.

### 7. CONTACT OFFICERS

7.1 Hayley Martin

Director of Legal, Governance and Human Resources and Senior Responsible Officer for RIPA

Hayley.Martin@hartlepool.gov.uk

01429 523003

Amanda Whitaker

Legal and Democratic Services Team Manager

Amanda.whitaker@hartlepool.gov.uk

01429 523013