Community Safety Plan 2011>14

INTRODUCTION

This is the Safer Stockton Partnership's fifth Community Safety Plan for the Borough of Stockton on Tees. The Safer Stockton Partnership (SSP) is a thematic arm of Stockton Renaissance which deals with crime, anti social behaviour and substance misuse related crime and anti social behaviour. The partnership is made up of the following members:

- Stockton-on-Tees Borough Council
- Drugs and Alcohol Action Team (DAAT)
- Cleveland Police
- Cleveland Fire Brigade
- Durham Tees Valley Probation Trust
- Tristar Homes Ltd
- Victim Support
- Neighbourhood Watch
- Local Area Partnership Boards
- Stockton Primary Care Trust (to be replaced by GP commissioning consortia in 2013)
- H M Prison Holme House
- Safe in Tees Valley
- Cleveland Police Authority (to be replaced by Police and Crime Commissioner in 2012)

This is the strategic plan for SSP and it will cover the three year period April 2011 to March 2014. The Plan will be reviewed and refreshed yearly and will be updated to take account of the yearly Partnership Strategic Assessment. The PSA will also identify any emerging issues which require extra focus by the partnership.

The key priorities within this plan have been identified by residents during our main consultation period which ran from August to November 2010. We received 5,222 responses to our consultation from residents and visitors to the Borough and they told us that the top six key priorities for the next three years should be:

1. Anti Social Behaviour (ASB)
2. Alcohol related crime/ASB
3. Violent crime
4. Drug related offending
5. Criminal damage
6. Domestic violence

All crime and ASB is important to us but we will focus our efforts on the top six concerns chosen by residents and in the areas where crime and ASB is significantly higher than the borough average. Domestic Violence is around 35% of all Violent Crime so we will combine these two categories together and have Emerging Issues as the sixth key priority, to address rising crime types identified in the yearly Partnership Strategic Assessment.

We also asked residents which types of anti social behaviour should be prioritised within the ASB category and residents identified the following:

1. Vandalism
2. Alcohol misuse
3. People being drunk and rowdy
4. Poor parental responsibility
5. Threats/verbal abuse
6. Street drinking

SAFER STOCKTON PARTNERSHIP AIMS

Our aim as a partnership is to improve the safety of the community in the Borough of Stockton on Tees by:

- Preventing and reducing crime and anti social behaviour
- Increasing feelings of safety and reducing fear of crime
- Preventing and reducing crime and anti social behaviour related to substance misuse
- Reducing reoffending

Since the last CSP was published in 2008 SSP has combined with the former Drugs and Alcohol Action Team Steering Group and we now work as a single partnership. Together we work closely with a range of other partnerships to achieve our aims, including in particular:

- Safeguarding Adults Committee
- Safeguarding Children Board
- Youth Offending Service Management Board
- Health and Well Being Partnership

This Community Safety Plan aims for consistency with other medium and long term plans term plans such as:

- DAAT plans
- Youth Justice Plan
- Policing Plan
- Council Plan
- Community Strategy

There are a number of plans that are developed from the Community Safety Plan providing additional information and detail.

- Anti Social Behaviour Plan
- Domestic Violence Plan
- Violence Reduction Plan

Throughout the plan we will focus attention on a number of threads that impact on all of our key priorities:

- Reducing reoffending
- Providing reassurance
- Focussing our efforts on the areas that have the highest levels of crime and ASB

PROGRESS AND DEVELOPMENT

Over the last three years we have achieved some remarkable reductions in crime, including 23.5% for Total Crime which means that there have been 3,394 fewer victims of crime. We recognise that the next three years are going to be particularly challenging. All partners are working with reduced resources following recent government cuts to funding to the public sector, so achieving further reductions will be a challenge.

Since 2004 the reducing re-offending agenda has evolved and in Stockton in 2009 we established an Integrated Offender Management (IOM) structure that is an overarching framework to bring together partners to prioritise interventions with the most persistent adult offenders. The Police and Crime Act 2009 placed a duty on local Community Safety Partnerships to formulate and implement a strategy for adult and young offenders and this drives our IOM work. Our multi agency IOM team is now well established working with Prolific and Priority Offenders (PPO), people subject to a Community Order with a Drug Rehabilitation Requirement (DRR) and high crime causers. With this approach the focus is on the offender not the offence and it entails identifying and using a dual support and/or enforcement approach with the relatively small numbers of repeat offenders who disproportionately cause harm to the community. Where possible we will use this approach for the operational activity for each of the key priorities in this plan. The IOM team are working with 117 offenders (at February 2011).

To complement this, our Partnership Strategic Assessment uses a victim, offender location approach to interrogate the various partner data sets to give us an overall picture of what is happening across the Borough.

This allows us to identify repeat victims and those who are vulnerable in our community, repeat locations as well as repeat offenders so that we can target our resources more effectively.

What the data tells us:

- There were 87 repeat streets and all but one of these is in our top five wards.

- Repeat victimisation differs depending on the type of crime. We know that for Domestic Violence there is a 10% repeat rate.

- For anti social behaviour all repeat callers to the police, the ASB team and housing providers are analysed daily and if it is thought that a caller may be vulnerable they are contacted to identify any concerns.

- The number of Hate crimes has decreased over the PSA period from 119 to 108. Of those 99 were race related (three were asylum seekers) and nine homophobic.

- The majority of suspects for crimes are male (81%) as are the majority of those who are arrested (81%).

- We have 33 PPOs all of whom are male with 70% of them aged between 25-34

- 47% of female clients with Probation are victims of domestic violence and 37% of male clients are perpetrators of domestic violence

- There were 265 first time entrants (FTE) to the criminal justice system. Of those 74% were male with the highest crime type for males being criminal damage and for females shoplifting.

This plan will be reviewed and updated yearly following the production of the Partnership Strategic Assessment to capture any changing trends in our key priorities.

Key Priority 1

ANTI SOCIAL BEHAVIOUR

Lead: **Chief Inspector Neighbourhoods & Community Safety (Mick Williams)**
Deputy: **Community Safety Manager (Marilyn Davies)**

This was the top priority for respondents to the survey, chosen by more than 3,000 people, with only 284 saying that it should not be a priority. It was the top priority for all categories except for under 16s, who placed it as their third priority, after violent crime and drug related offending and was also the top priority when responses were broken down by ward, for all wards except Grangefield who placed this second. A significant number of the Grangefield, responses came from the two schools in the ward and as previously observed under 16s ranked this lower.

What do we know about this issue?

Consultation responses told us that within the ASB category the following were the most and least important to respondents:

SHOULD BE A PRIORITY	SHOULD NOT BE A PRIORITY
Vandalism	Begging
Alcohol Misuse	Abandoned cars
People being drunk and rowdy	Trespassing
Poor parental responsibility	Kerb crawling
Street Drinking	Graffiti
Threats/verbal abuse	Prostitution

Our latest yearly Partnership Strategic Assessment tells us that:

1. Total ASB incidents recorded by the Police reduced by 15.3%. The Multi Agency ASB Team (MAASBT) also saw a reduction of 27%.

AS13 Forms	Deliberate Fires	Police recorded ASB				LA recorded ASB					
		Total ASB	Rowdy / Inconsiderate	Vehicle Nuisance	Nuisance Neighbours	ASB team Service Reqs	Fly Tipping	Graffiti	Noise	Sharps	NES (ASB reported)
Stainsby Hill (7)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)	Hardwick (4)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)	Stockton Town Centre (1)
Stockton Town Centre (1)	Hardwick (4)	Hardwick (4)	Stainsby Hill (7)	Stockton Town Centre (1)	Parkfield & Oxbridge (5)	Stainsby Hill (7)	Parkfield & Oxbridge (5)	Western Parishes (16)	Parkfield & Oxbridge (5)	Parkfield & Oxbridge (5)	Mandale & Victoria (2)
Billingham Central (11)	Billingham South (6)	Stainsby Hill (7)	Hardwick (4)	Roseworth (13)	Billingham East (9)	Mandale & Victoria (2)	Mandale & Victoria (2)	Parkfield & Oxbridge (5)	Billingham East (9)	Mandale & Victoria (2)	Parkfield & Oxbridge (5)
Mandale & Victoria (2)	Newtown (3)	Parkfield & Oxbridge (5)	Mandale & Victoria (2)	Mandale & Victoria (2)	Newtown (3)	Billingham Central (11)	Stainsby Hill (7)	Ingleby Barwick East (26)	Mandale & Victoria (2)	Billingham Central (11)	Billingham Central (11)
Hardwick (4)	Stainsby Hill (7)	Mandale & Victoria (2)	Parkfield & Oxbridge (5)	Newtown (3)	Hardwick (4)	Hardwick (4)	Hardwick (4)	B'garth & Elmtree (17)	Billingham Central (11)	Newtown (3)	Stainsby Hill (7)

2. 70% of service requests to the MAASBT came from activity identified by uniformed presence on the streets through alcohol confiscations, AS 13s and section 27 notices issued by police, Neighbourhood Enforcement Service (NES) and the ASB Team.

3. 31% of ASB incidents reported to the ASB Team were alcohol related.

4. Anti social behaviour continues to be male and youth dominated.

Category	Males	Females	Youths (>18yrs)
All Service Requests	81%	19%	83%
AS13s	81%	19%	87%
Section 27s	84%	16%	17%
Alcohol confiscations	62%	38%	79%
ABCs	95%	5%	68%
ASBOs	80%	20%	60%

What we will do.

Based on the problem profile for this crime type we know that (Anna to complete a problem profile actions to be added)

We will:
1. Use information from data analysis to direct operational activity.

2. Clarify what residents think anti social behaviour is, whether they have reported it and if so to whom and if not why not. We will use Viewpoint focus groups for this purpose.

3. Use MORI/Viewpoint to assess satisfaction levels with how ASB is dealt with in Stockton.

4. Maintain a uniform presence on the streets in particular in hot spot areas and at key times.

5. Maximise the use of mediation to resolve disputes. The Multi Agency ASB Team will have officers trained in mediation skills and techniques.

6. Work with alcohol support services to improve the early identification of those misusing alcohol and causing ASB.

7. Work with the Youth Offending Service to reduce the number of young people who enter the Criminal Justice System.

8. THL will launch an ASB Standard for the Borough which will be signed up to by all housing providers and the MASBT. A yearly performance report will be brought to SSP to review performance against the standard.

9. Add more after Problem Profile is completed?

Performance measures.

	Measure	Timescale	Lead
1	**Reduce repeat callers the Police, ASB Team and Registered Social Landlords.** We will monitor all repeat callers to the Police, ASB Team and RSL's to identify those who may be vulnerable and will provide support via the ASB Victim/Witness Support Officer. We will assess the number of calls six months prior to the support and six months after.	April 2011 to March 2012 Evaluation to be completed April 2012	Community Safety Manager
2	**Reduce the perception that ASB is a serious problem** Using focus groups clarify what types of issues residents consider anti social, whether they report this and if so to whom. Measure satisfaction and perception levels in the Viewpoint/MORI yearly survey.	Questions identified by April 2011 Improve satisfaction levels from the baseline taken in 2009?? MD check	Community Safety Manager
3	**Reduce Anti Social Behaviour in the top five wards** We will identify the wards with the highest levels of ASB. Through the Joint Action Group process support and diversionary resources will be directed to these areas.	Baseline ????? April 2011	

Key Priority 2

ALCOHOL RELATED CRIME AND ANTI SOCIAL BEHAVIOUR

Leads: **DAAT Strategic Manager (Emma Champley)**
Deputy: **Chief Inspector Operations (Ted Allen)**

This was chosen as a priority by 2,630 residents, with only 341 saying that it should not be a priority. Under 16s ranked it as the sixth priority and it was seen as a lower priority for Grangefield, Roseworth, Eaglescliffe and Western Parishes. It is worth noting that all but Western Parishes are wards where consultation was undertaken in schools so the under 16 results will have had an impact in these areas.

An Alcohol Strategy for Stockton was launched in 2009. It is based on a needs assessment that identified the main concerns for Stockton. We have an action plan which is monitored by the SSP and the Health and Well Being Partnership.

We contribute to the regional Alcohol Crime and Disorder Group which is coordinated by Balance.

We have maintained our ThinkB4UDrink campaign to raise awareness of the harm that alcohol misuse can cause.
TB4UD pic

What do we know about this issue?

Our latest yearly Partnership Strategic Assessment tells us that:

1. For Probation clients 18% of males and 17% of females report that they drink excessively.

2. Within the ASB category of the consultation alcohol incidents were also ranked as the 2nd, 3rd and 6th key priority so residents see this as a real concern.

3. Alcohol related assault data from A & E shows that in the strategic period there were 1,239 presentations by 1,160 patients.

4. Of those who presented to A & E for assault injuries 73% were male and 18 – 24 was the most common age group and 79 were repeats.

5. 29% of females who presented to A & E reported that the alcohol related assault was domestic violence compared to only 2% of males.

6. Ambulance pick up data tells us that between April 2009 and March 2010 there were 494 alcohol related calls for assistance. 60% were from males and over a third aged between 15 and 29.

7. A third of all ASB recorded by the ASB Team was alcohol related.

8. 34% of all Violence Against the Person was alcohol related.

What we will do.

Based on the problem profile for this crime type we know that(Anna to complete a problem profile actions to be added)

We will:

1. Complete a further Alcohol Needs Assessment in 2011 and the information from this will be used to update our Alcohol Strategy.

2. Monitor targets in the Alcohol Strategy action plan and prepare a yearly summary of progress for the SSP.

3. Use a multi agency process similar to that used for Prolific and Priority Offenders to identify a cohort of those who misuse alcohol to measure their offending behaviour six months prior, during and six months after they have been given an Alcohol Treatment Requirement. This will include a gravity score for the seriousness of the offending.

4. Increase the number of section 27 notices issued especially in the top five wards.

5. Monitor the success of ASRO's Alcohol ??? to assess their effectiveness by looking at criminal activity 6 month prior, during and six months after.

6. Continue to use a brief intervention for all of those who come to the attention of the ASB Team for incidents involving misuse of alcohol and ensure that referrals are made to support services.

7. Use A & E data to inform operations and any licensing reviews.

8. Consider whether or not to include the levy on licensed premises provided for by the Police Reform and Social Responsibility Act 2011, in the context of the existing voluntary 'Operation Tranquility' scheme.

9. Add more after Problem Profile is completed?

Performance measures

	Measure	Timescale	Lead
1	**Increase the number of section 27 notices issued.** In particular in the top five wards.	Using a baseline taken from 2009/10 ==(need to quote this)== achieve an increase against 2011/12	CI Ted Allen
2	**Reduce the number of alcohol related crimes for those on an ATR.** Cohort taken using ATR data to identify offending 6 months prior, during and 6 months after ATR	Identify a baseline for April 2012.	Emma Champley
3	**Reduce the number of alcohol related crimes for those on an ASRO.** Cohort taken using ASRO data to identify offending 6 months prior, during and 6 months after ASRO	Identify a baseline for April 2012.	Emma Champley

Key Priority 3

VIOLENT CRIME

Lead : **Chief Inspector Operations (Ted Allen)**
Deputy: **Community Safety Manager (Marilyn Davies)**

Violent crime was chosen as a priority by 2,308 residents with only 164 saying that it should not be a priority. 1,739 people thought that Domestic Violence should be a key priority with 366 saying that it should not. Under 16s thought that violent crime should be the top priority and BME respondents ranked it as the fifth priority, and they ranked domestic violence as the seventh key priority. It was ranked in the top three by all wards except for Newtown who placed domestic violence third and violent crime fourth. Mandale and Victoria and Stainsby Hill ranked domestic violence as the fifth key priority.

What do we know about this issue?

Our latest yearly Partnership Strategic Assessment tells us that:

1. Violence against the person has reduced by 3.1% in the last 12 month period.

2. Assaults without injury have also reduced this time by 4.4% (51 offences)

3. Incidents of domestic violence have increased during the same period by 7.4% and represent 33% of all violent crime.

4. 85% of domestic violence incidents had a female victim.

5. Males account for 64% of non domestic related violence.

6. Over two thirds of victims of domestic violence had children living with them and there were child protection issues with 30%.

7. For Most Serious Violence 85% of victims were males and a third of offences were linked to domestic violence.

8. Victims from the BME community account for 11% of violent crime but further analysis shows that racially motivated violence was mainly harassment. In comparison only 3% of victims for domestic violence and 1% of patients at A&E with assault injuries were from a BME community.

9. Repeat victimisation is common in domestic violence and has a 10% repeat rate with 80 victims subject to two or more crimes.

10. 23% of probation clients have Violence Against the Person as their offence.

11. Weapon usage remains low with only 11% of male probation clients and 8% of females being recorded as carrying/using a weapon to offend.

What we will do.

Based on the problem profile for this crime type we know that (Anna to complete a problem profile actions to be added)

We will:

1. Establish an Integrated Offender Management process for prolific perpetrators of Domestic Violence.

2. Improve data sharing for domestic violence to include health and other partners.

3. Increase the number of completions on Harbour male perpetrator programme.

4. Develop an Action Plan for the top ten DV perpetrators to ensure an integrated partnership response is in place.

5. Improve the use of A & E data to influence licensing reviews

6. Use A & E data to identify the top localities for assault related injuries and assess this against police recorded crime to improve the quality of information used to identify our top hot spot areas.

7. Identify repeat offenders in the night time economy and work with Pub Watch to reduce incidents.

8. Provide intensive support for repeat cases of domestic violence that are presented to the MARAC

9. Sustain the Safe at Home scheme to enable victims of domestic violence to remain in their home if it is safe for them to do so.

10. Add more after Problem Profile is completed?

Performance measures

	Measure	Timescale	Lead
1	**Maintain a reduction in Most Serious Violent Crime**	Baseline taken from 2010/11 <mark>[suggest 3 year average 2008-2011]</mark>	CI Ted Allen
2	**Reduce Violence Against the Person offences in the top five wards.** Use the Vulnerable Localities Index to identify hotspots within wards and use this data to inform patrols and CCTV monitoring.	Identify the top five wards and a baseline by April 2011. Reduce by April 2012	CI Ted Allen
3	**Reduce repeat perpetrators of Domestic Violence** Use a baseline taken from 2010/11 to identify offenders who re-offend 6 months after completing a Perpetrator Programme.	Reduce the number of perpetrators of DV who re-offend 6 months after completing a programme year on year. Baseline taken from 2010/11	Marilyn Davies
4	**Increase the number of victims accessing support from Harbour Women's Outreach <mark>for repeat cases presented to MARAC.</mark>** Increase the take up of support using a baseline taken from identifying numbers offered support against those accessing support during 2010/11.	Baseline taken from 2010/11 Increase year on year	Marilyn Davies

Key Priority 4

DRUG RELATED OFFENDING

Lead: **DAAT Strategic Manager (Emma Champley)**
Deputy: **Detective Chief Inspector (Rob Donaghy)**

In previous consultations in 2002 and 2007 drug related offending was the top and then second key priority. This time 2,145 respondents identified it as a key priority with 236 saying it should not be a priority for us. Under 16s ranked it second, BME residents, over 65s and those with a disability ranked it as their third key priority. Respondents from Roseworth, Eaglescliffe and Western Parishes ranked it as their second key priority whereas Hartburn, Norton South and Ingleby Barwick West ranked it fifth.

What do we know about this issue?

Our yearly Partnership Strategic Assessments tells us that

1. 70% of male probation clients and 52% of females misuse drugs.

2. During the strategic period 2,413 mandatory drug tests on 959 people were carried out. Of these 99 have been tested more than five times.

3. The most common trigger offence for a drugs test was theft at 62%.

4. Those aged between 25 and 35 are more likely to test positive for drugs and opiates is the most common drug type for those tested.

5. During the strategic period more than 1,400 drug users accessed treatment services.

6. Of those accessing treatment 73% were male, 60% aged between 25-34 and 98% of white ethnicity.

	PDUs in Effective Treatment (01/07/09 to 30/06/10)	Gender (% Male)	Ethnicity (% White)	Age			Main Drug (% Opiates)
				(% 18-24)	(% 25-34)	(% 35+)	
ABS	341	66	97	7	58	34	95
Birchtree	774	74	99	4	59	37	97
CJIT	187	82	98	16	55	30	73
VISION	109	79	93	5	56	39	92
Stimulant	27	71	92	51	40	9	1
STAR	136	75	98	15	53	32	82
Aftercare	43	76	97	16	58	26	59

7. Key characteristics of those not in treatment are:
   - Females
   - BME community
   - Under 21s

- Stimulant users

We know that women and the under 21 age group are underrepresented in treatment services. Further work is needed to understand whether there is a hidden population of substance misusers in our BME community.

8. The most deprived wards also have the highest levels of drug use, needle finds and emergency hospital admissions due to drugs.

What we will do.

Based on the problem profile for this crime type we know that (Anna to complete a problem profile actions to be added)

1. Carry out at least six drugs dog operations during 2011/12. Reducing Supply Group to direct the locations and dates of operations.

2. Maintain our IOM approach for the most prolific of drug using repeat offenders.

3. Increase the number of female drug users accessing and maintaining attendance at support services.

4. Use peer mentors to work in drug using communities as part of rehabilitation and support.

5. Increase the number of planned exits from treatment services.

6. Improve the transition from the young people's service to adult services and thereby reduce drop out.

7. Increase housing opportunities for drug users by maintaining a range of support services.

8. Increase employment opportunities for drug users by providing peer support to complement Job Centre support.

9. Using the IOM service reduce drug related repeat offending.

10. Encourage the development of Narcotics Anonymous in the Borough.

11. Add more after Problem Profile is completed?

Performance measures

	Measure	Timescale	Lead
1	**Increase the number of female drug users accessing support.**	Baseline taken from 2010/11 of ???	Emma Champley
2	**Reduce drug related repeat offending.** Identify a cohort of drug using high crime causers. Monitor their offending six month prior, during and six month after being on IOM	Cohort identified April 2011. Evaluation report to SSP April 2012 Reduce number/proportion of positive tests on arrest?	CI Rob Donaghy
3	**Increase the number of people leaving treatment services drug free.** Develop wrap around support services for substance misusers in the treatment system with a focus on abstinence.	Baseline taken from 2009/10 [quote it]	Emma Champley
4	**Reduce the number of positive drug tests for HCCs** Use IOM and DIP to provided wraparound intensive support.	Baseline taken from 2010/11 or average taken from 2009 – 2011?	Emma Champley
5.	**Reduce drop out in transition from young people's services to adult services**	Baseline?	EC?

Key Priority 5

CRIMINAL DAMAGE

**Lead :   Chief Inspector Neighbourhoods & Community Safety
(Mick Williams)**
Deputy: Community Safety Manager (Marilyn Davies)

Criminal damage was seen as a key priority by 1,853 people, with 320 saying it should not be a priority. It was ranked as fourth for under 16s and BME respondents and for Hartburn, Norton South and Ingleby Barwick West but was the third priority for Stainsby Hill and was ranked slightly higher, at fifth, by those who said that they had read the magazine. When viewed at the Local Area Partnership Board level all four ranked it as the fifth key priority.

What do we know about this issue?

Criminal damage is closely linked to anti social behaviour in particular to vandalism. Our latest yearly Partnership Strategic Assessment tells us that:

1. Over the last four years criminal damage has been reducing and dropped by a nearly 18% since the last strategic period and now represents 22% of total crime against 25% the previous strategic year.

2. Victims of criminal damage are evenly spread across gender and age.

3. THL properties are over represented for offences of criminal damage.

Ward	No of CD to dwellings	CD to THL properties	% to THL properties	% of properties managed by THL
Billingham Central	24	11	46%	23%
Billingham East	65	29	45%	30%
Billingham North	19	0	0%	1%
Billingham South	*58*	*44*	*76%*	*21%*
Billingham West	9	0	0%	1%
Bishopsgarth and Elm Tree	20	6	30%	6%
Eaglescliffe	19	7	37%	3%
Fairfield	9	4	44%	4%
Grangefield	6	1	17%	7%
Hardwick	*85*	*51*	*60%*	*40%*
Hartburn	9	0	0%	0%
Ingleby Barwick East	10	0	0%	0%
Ingleby Barwick West	2	0	0%	0%
Mandale and Victoria	81	22	27%	20%
Newtown	68	24	35%	24%
Northern Parishes	4	0	0%	2%
Norton North	53	30	57%	14%
Norton South	37	15	41%	12%
Norton West	10	0	0%	0%
Parkfield and Oxbridge	43	1	2%	4%
Roseworth	58	33	57%	28%
Stainsby Hill	*68*	*46*	*68%*	*27%*
Stockton Town Centre	*137*	*91*	*66%*	*42%*
Village	42	16	38%	16%
Western Parishes	4	0	0%	6%
Yarm	8	0	0%	3%
Grand Total	**948**	**431**	**45%**	**13%**

4. 273 businesses or residential properties suffered two or more offences of criminal damage, with 76 of them reporting three or more incidents.

5. 27 streets were subject to 10 or more incidents during the strategic period. [how many of these in the top 5 Wards?]

6. Most arrests for young people aged between 10 and 17 were for criminal damage.

7. Overall criminal damage is the most common offence type committed by males.

8. Criminal damage offences peak in October/November and March/April. Also at weekends and evenings between 6pm and 1am.

9. There has been a reduction in the number of primary deliberate fires recorded by Cleveland Fire Brigade of 35% and 41% for deliberate fires.

Deliberate Fires	Current Strategic Period	Previous Strategic Period	Change	% Change
Primary Dwelling Fire	18	19	-1	-5.3%
Primary Fire - Other	49	46	3	6.5%
Primary Vehicle Fire	58	91	-33	-36.3%
Secondary Fire	731	1235	-504	-40.8%
Total deliberate fires	856	1391	-535	-38.5%
Total accidental fires	392	170	222	130.6%

What we will do.

Based on the problem profile for this crime type we know that….(Anna to complete a problem profile actions to be added)

1. Identify repeat victims and ensure that they are visited to identify and redress any triggers.

2. Investigate all repeat cases of criminal damage to THL properties.

3. Maintain our prevention programme in schools to raise awareness of the harm caused by criminal damage and deliberate fire setting.

4. Include top streets for criminal damage in foot patrols and where available CCTV coverage.

5. Develop and implement a plan for peak times and localities for criminal damage to be monitored by the Criminal Damage Think Tank.

6.

Add more after Problem Profile is completed?

Performance measures

	Measure	Timescale	Lead
1	**Reduce Criminal Damage** Maintain a reduction in offences of criminal damage.	Baseline taken from an average from 2007/10. Reduce year on year	CI Mick Williams
2	**Reduce Criminal Damage at street level** Criminal Damage Think Tank to focus interventions on the top five streets for repeat incidents. Aim for removal from repeat list.	Baseline taken from 2010/11 for each of the top five streets.	CI Mick Williams
3	**Reduce deliberate fires**	Baseline taken from an average from 2007/10. Reduce year on year	District Fire Commander, Ian Harrington

Key Priority 6

EMERGING ISSUES

Lead: **Detective Chief Inspector (Rob Donaghy)**
Deputy: **PPO Manager (Jeff Evans)** <mark>Should these be the other way round?</mark>

Having Emerging Issues as a key priority allows us to focus on crime and incidents of concern identified through data analysis. During the lifetime of the last Community Safety Plan the focus remained on Other Theft, however the categories within this fluctuated and alternated between shoplifting and theft of metals.

What do we know about this issue?

Our yearly Partnership Strategic Assessments tells us that:

1. Other Theft has increased its percentage of total crime by 2.9% in the strategic period and 28% of total recorded crime is made up of this category.

2. The majority of offences within this category are shoplifting (38%). This is also the most common crime for female young offenders.

3. For shoplifting offences alcohol remains the preferred choice for consumable goods and is taken for consumption rather than for retail.

4. Theft of plant and other equipment in regeneration areas is an ongoing problem.

5. Other theft has the highest level of repeat victimisation with a rate of 38%. Within the category shoplifting has a RV rate of 63% with 25% of commercial premises targeted on more than five occasions.

6. There were small peaks in shoplifting offences in July and September and also on Stockton market days.

7. All of our High Crime Causers are linked to theft offences and all are substance misusers.

What we will do.

Based on the problem profile for this crime type we know that…. <mark>(Anna to complete a problem profile actions to be added)</mark>

1. Maintain the approach of using the Police Priority Crime Team to investigate all Other Theft offences but in particular theft of metals and shoplifting.

2. Use the IOM model to provide intensive support and enforcement work with a cohort of high crime causers managed by the IOM Strategy Group.

3. Police crime prevention officers to continue to provide advice and support to retail stores and repeat locations for metal theft.

4. Maintain support for the Retailers Against Crime group.

5. Ensure that a brief intervention is carried out for all of those who are arrested for shoplifting involving alcohol and/or they are given details of support services.

6. Reduce the number of convictions for high crime causers.

Add more after Problem Profile is completed?

Performance measures

	Measure	Timescale	Lead
1	**Reduce convictions for HCCs** Use the IOM approach to provide intensive support and enforcement.	Baseline taken from 2010/11 of ???	
2	**Reduce re-offending** Single target to be launched in April add detail when known.		
3	**Increase the number of HCCs accessing treatment services.??** Identify the number of HCCs accessing treatment and monitor the number of crimes committed 6 months prior, during and after treatment	Baseline taken from 2010/11???	
4.	**Target on brief interventions?**	Either numerical or % of relevant arrests? Need to think about what we can count.	