



Brighton & Hove City Council

Appendix 2:

2017-18 City Corporate KPIs - Q2

Period: Apr-17 - Sep-17

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
2017-18 Families Children & Learning - Quarterly - City (Corporate)				
Number of first time entrants to the youth justice system [Corporate - city]	No.	19.00	16.00	 Improving

Position:

There have been 9 First Time Entrants (FTE) to the Youth Justice System between 1st July and 30th September 2017.

The quarter by quarter trend is:

(Q1 17/18) Apr to Jun 2017 = 6

(Q4 16/17) Jan to Mar 2017 = 10

(Q3 16/17) Oct to Dec 2016 = 7

(Q2 16/17) Jul to Sep 2016 = 10

From the Police National Computer (PNC) data, there were 30 FTEs during the year ending 31st March 2017, down from 56 during the previous 12 months and below the 2017/18 target of 37. The number of FTEs has fallen from 102 during the year ending 31st March 2014. This data became available from the 1st September 2017. The target is based on the number of FTEs from local interim data recorded on the case management system.

Brighton and Hove's FTE rate for the year ending 31st March 2017 is 137 per 100,000, below the national rate of 321 per 100,000 and the regional rate of 246 per 100,000. The rate for our statistical neighbours is 356 per 100,000 and 434 for our contextual neighbours.

The rate has fallen from 259 for the year ending 31st March 2016 and from 209 for the year ending 31st March 2015. The national rate has fallen from 362 for the year ending 31st March 2016 to 321 for the year ending 31st March 2017.

Due to the small numbers involved, a breakdown by demographics cannot be provided as this is a Corporate KPI and the information will be made publicly available.

Commentary:

It is significant that the YOS has continued to improve on this already low FTE rate. This continues to be as a result of the good joint working between the YOS and the police. However, following the introduction of a new diversion process in February 2017 we have not seen a significant reduction in numbers to 2016.

Of the 9 FTE's in the quarter all 9 went to court and received some form of community sentence. While 7 received sentences which result in working with the YOS, two received conditional discharges. Sussex Police and Brighton and Hove YOS continue to scrutinise all youth cases that could be charged or given an out of court disposal. The panel at its review was seen to be working well and wider Sussex YOTs are now looking adopts the model. Exploration of the FTE rate is that a number of these come through to Court following no comment interviews pre-charge (and thus are not eligible for pre-court disposals), while work has been undertaken with local defence solicitors further work is needed. Work with the police is underway on developing a pathway for motoring offences.

Actions:

1. Maintain data flow between YOS and Police (Service Manager, on-going)
2. Undertake work with defence solicitors to enable them to understand the impact of no comment interviews (Operational manager, April 18)
3. Work with Sussex police to develop a pathway for young people who commit motoring offences so that they will be also be able to receive out of court disposals. Operations Manager (December 17)

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
% of people with a learning disability in employment [Corporate]	%	11.00	9.90	 AMBER Declining

Position:

The % of people with a learning disability (LD) in Brighton and Hove who are in receipt of Adult Social Care and are currently in paid employment

2017/18 Q2 - 9.90% (69 clients out of a total of 697)

2016/17 - 10.96% (79 out of 721)

2015/16 (latest available) National Top Quartile = 8.9% (2016-17 data is due to be released on 25 October 2017)

For this performance indicator only people with learning disabilities who have eligible social care needs and are in receipt of social services are counted. These are the people furthest from the labour market. The number of people in this entire cohort has reduced this year from 721 to 697. Of that number, on 30 September, 69 (9.9%) were in paid employment. Based on the most recent data available this still puts Brighton & Hove in the top quartile nationally for this indicator.

Of the 10 people who were counted as employed on 31st March and are no longer counting towards this KPI:

5 - Are no longer in need of adult social care services (they are still in paid employment)

1 – Resigned from their job

4 - Were made redundant from their jobs (one from the council)

Progress to Date:

Supporting people to explore their vocational options is a multi disciplinary activity involving services across the council, the voluntary sector and mainstream services. Overview and strategic steer on this is provided by the Services Action Group for the city’s employment and skills plan.

In 2016 the council commissioned the Learning and Work Institute to research the barriers people with disabilities face when seeking work. In 2017 the recommendations from the research are being incorporated into the services action group’s action plan. There have been a number of positive developments this year.

The council’s supported employment team has been chosen as one of the nine national sites where the DWP will test the concept of the DWP and local authorities working in partnership to deliver supported employment. The addition of this DWP funding will enable the Supported Employment team, working in partnership with Southdown employment services, to deliver an enhanced service to people with significant mental health challenges, autism or learning disabilities. This proof of concept project will last eighteen months and could potentially increase Supported Employment funding in the city by 50%. As part of this project the DWP is funding development opportunities for the council’s supported implement team which will further enhance this high performing service.

The voluntary organisation Possability People has been funded by the DWP to deliver a journey to employment course for people with disabilities. This course has been so successful that the DWP have rolled it out to a total of 71 national locations which includes ongoing funding for the possibility people course in Brighton.

The council’s Supported Employment Team and other Sussex based Supported Employment services are working in partnership with the Sussex community foundation NHS trust and the Brighton Sussex University Hospital NHS trust to meet the NHS commitment to hiring more people with disabilities. As a result of this partnership work so far in Brighton and Hove six people with disabilities have retained or gained employment with these local NHS trusts.

Next Steps:

1. Supported Employment Team to set up and deliver the DWP funded Proof of Concept initiative in Brighton & Hove (Karen Kingsland, March 2018)
2. Supported Employment Team to enter into discussion with the Work & Health Programme provider for this area to explore partnership working opportunities (Karen Kingsland, January 2018)
3. Supported Employment Team to participate in the Employment Services Network administered by the Family Information Service as part of their Providing Access to Childcare and Employment project.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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(Karen Kingsland, January 2018)

2017-18 Health & Adult Social Care - Quarterly - City (Corporate)

Number of alcohol-related hospital admissions per 100,000 population [Corporate - city]	No.	149.50	152.00	 AMBER New in 2017-18
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Position:

The way this indicator is calculated has changed in 2017/18 so we are unable to show direction of travel at this point in the year.

From April to June 17 there were 152 hospital admission episodes in Brighton & Hove for alcohol-related conditions (narrow definition) per 100,000 persons, directly standardised rate. There was an equivalent rate of 166 hospital admission episodes in Q1 17/18 in England. Brighton & Hove has performed better (lower admission rate) than England for this period. This is the latest available data on Hospital Episode statistics (HES).

These figures are currently unpublished and have been estimated by the Public Health team using both HES data and ONS 2016 mid-year population estimates. They have been calculated using the Public Health England definition for this indicator.

The recent trend (published by Public Health England on Fingertips) since 2014/15 has been for Brighton & Hove to have a lower rate than England for hospital admissions for alcohol-related conditions. The estimated 2016/17 annual rates are 598 admissions per 100,000 for Brighton & Hove and 641 admissions per 100,000 for England. These annual 2016/17 figures are also currently unpublished and have been estimated by the Public Health team using HES and ONS data. Based on the 16/17 figures and the current 17/18 quarterly figures, the trend for Brighton & Hove to be performing better than England looks set to continue, although the number of admissions in Brighton & Hove has risen slightly since 2015/16.

Brighton & Hove alcohol admission rates have traditionally been higher than other local authorities in the South East region but low compared to its CIPFA comparators. Brighton & Hove had the third lowest admission rate at 581 in 2015/16, compared to its CIPFA comparators who had rates ranging from 546 to 945.

Commentary:

A number of different factors and organisations contribute to the reduction in alcohol related hospital admission rates. Providers of substance misuse treatment services have a role in this, as do Police (with regard to managing the night time economy), Higher Education organisations, local entertainment establishments, retail operators and other health and social care support organisations.

The work of the Alcohol Programme Board, and the associated domain groups, take forward the work streams that address alcohol related harm, including hospital admissions. The reduction in hospital related admissions should reflect the work that has been taken forward in the last three years. This has included a focus on supporting 'frequent returners' to hospital with an alcohol related issue, to address the underlying causes of their alcohol consumption. There has been work with off licences to reduce the amount of high strength beers and ciders available, which has meant that fewer of the 'street drinking' population are consuming high amounts of alcohol, which could result in a hospital admission. In the first quarter of 2017/18 there has been an upturn in the alcohol related performance in treatment services. A greater number of individuals are now successfully completing treatment for alcohol and not re-presenting within 6 months

The Safe Space project continues to operate on Friday and Saturday nights until the early hours in the City centre. Service monitoring data suggest the service does have some impact in reducing alcohol-related A&E admissions

Actions:

1. To look at broader issues around alcohol, the Local Authority and partners are currently undertaking the Alcohol 'CLEaR', a self-assessment tool supported by Public Health England. This will help the partnership to identify areas to focus on for future development. (Lead – Alcohol Programme Board members led by Commissioner, Jan 18)
2. Collaborative development work is underway between the mental health services, substance misuse services and the local hospital trust. The aim is to improve communication between the various teams,

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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and ensure that the needs of individuals presenting at the hospital are appropriately met by support agencies. (Lead – CCG commissioners and PH commissioners, ongoing)

Under 18 conception rate per 1,000 women aged 15-17 [Corporate - city]	No.	24.00	20.40	 Improving
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Position:

This Performance Indicator (PI) measures the number of under 18 conceptions per 1,000 women aged 15-17 expressed as an average rate over the latest 12 months. This data is lagged and the latest data available relates to the twelve months ending June 2016.

The latest rate is 20.4 calculated as a 12 month rolling average and shows a 26.6% reduction compared with the same period the previous year.

It should be noted that two quarters in the last four are marked as having 'low reliability' due to low numbers, which has influenced this rolling average. Performance is ahead of the target for 2017/18 which is 24.0 conceptions per 1,000 women aged 15-17.

The target was set using the 2015 CIPFA Comparator Group benchmark figure.

Commentary:

Whilst the reduction in conception rate is positive this does include two quarter's information with data that has been flagged as 'low reliability'. However if this data is correct, the 26.6% reduction seen locally is greater than the 13.0% reduction in the South East, and a 9.6% reduction in England. There has been a 58% reduction locally in the under 18 conception rate since 1998, and this is now in line with the reductions seen in the South East and England (58% respectively) over the same time period. A full annual analysis will be completed by the end October, now scheduled to explore the data in depth. It will include the data that will demonstrate the impact on access to services from the social media developments promoting the Sexual Health and Contraception Service (SHAC).

Actions:

1. Teenage Pregnancy annual performance report will be completed by end October 2017, with service improvement actions being agreed and implemented. (Public Health Children, Young People and Schools Commissioner agree service improvement actions by Nov 2017).
2. The redesign of an integrated adolescent health offer across substance misuse and teenage pregnancy will be completed by November 2017, with the commissioning process starting and memorandum of understanding with FCL being negotiated. (Public Health Children, Young People start implementing the procurement process by Nov 2017).

2017-18 Neighbourhoods Communities & Housing - Quarterly - City (Corporate)

Number of violent crimes with injury [Corporate - city]	No.	1,315.00	1,574.00	 Declining
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Position:

Between April and September 2017, there were 1,574 injury violence crimes, an increase of 9% compared with the same period in 2016/17. This is against the 'in-year' target of 1,315 crimes. In 2016/17 there were 2,907 crimes of violence with injury, an increase of 9% on 2015/16.

The target for 2017/18 was set at the average per 1,000 residents for the 'most similar Community Safety Partnership' group of 15 partnerships for 2016/17. This equates to 9.282 crimes per 1,000 population, or 2,648 crimes for Brighton and Hove. This is a 9% decrease on the 2016/17 outturn. The rate of violent crime incidents varies across the year and the quarterly target is profiled accordingly. Compared with the benchmarked group of 15 Community Safety Partnerships over the first five months of 2016/17, Brighton & Hove's performance ranked below average with a rate of 2.8 injury violence crimes per 1,000 compared with 2.7 for the group.

According to A&E statistics, there were 696 attendances at A&E related to assaults in the first six

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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months of 2017/18, a 19% decrease on the same months in 2016/17.

Commentary:

Data recording issues, which have made the interpretation of police recorded violent crime data difficult, will have a reduced effect on the statistics over time but are still present at the moment. Therefore it is difficult to make a judgement on why violent crime is rising.

Further analysis of violent crime by the police reveals the increases in recorded violent crime relate to assault with injury, assault without injury, public fear alarm and distress and harassment and malicious communications. Police are also seeing an increase in the number of calls relating to violent crime. From an operational perspective officers are reporting increases in DVSV and public place violent crime.

The Safe in the City Partnership Board received a report from police with includes analysis of violent crime, showing that police recorded violent crime is increasing particularly for public order offences and domestic and sexual violence.

Managing support for domestic violence is a particular concern and the team is working with the commissioned service (RISE) to establish a more effective triage process to effectively assess the vulnerability of victims and provide appropriate support.

Managing the Night Time Economy is included in the new Community Safety and Crime Reduction Strategy. This is accompanied by an action plan which is being developed to address safety and violence.

Actions:

1. Support RISE to improve the Triage system and manage risk harm and vulnerability more effectively (Dec 17 Head of Community Safety)
2. Ensure that the action plan for the Night Time Economy strand of the Community Safety Strategy is implemented. Focus within the strand on continuing support for Night Safe which takes in people who are vulnerable, drunk or drugged and supports them to get home safely (Apr 18, Head of Community Safety)
3. As a result of information being shared at the NICE Committee in October the CEO will be asked to write to the Government regarding the reduction in police resources which the committee believes is contributing to an increase in violent crime and other crime types. (Dec17 Head of Community Safety)
4. Continue work with police to address drugs gangs and 'county lines' closing down properties that are 'cuckooed' by dealers that attract ASB and violence. (Dec17 Head of Community Safety)

Nitrogen Dioxide levels in Brighton and Hove ($\mu\text{g}/\text{m}^3$ - micrograms per cubic meter): Lewes Road (quarterly) [Corporate - city]	No.	36.00	49.20	 RED
				Declining

Position:

The average level Nitrogen Dioxide (NO_2) measured at Lewes Road as a 12 month rolling mean up to 30 June 2017 is $49.2 \mu\text{g}/\text{m}^3$ (micrograms per cubic metre). This is the latest data available. There is always a time lag obtaining these results from the contractor, TRL. This quarterly data is calibrated and ratified by the contractors before publication. We anticipate that the Q2 data will be available October 2017.

The target of $36 \mu\text{g}/\text{m}^3$ is 90% of the $40 \mu\text{g}/\text{m}^3$ is the EU and UK standard, which would mean Brighton and Hove are statistically assured that the EU and UK standard are met. To be able to revoke an Air Quality Management Area nitrogen dioxide levels must be less than $36 \mu\text{g}/\text{m}^3$ for over a year.

For the NO_2 continuous analysers at Lewes Road and North Street they will report the following NO_2 levels where $<36 \mu\text{g}/\text{m}^3$ is equivalent to 90% of the objective and in Defra Technical Guidance TG16 is regarded as a near miss or potential exceedance

The level of $49.2 \mu\text{g}/\text{m}^3$ demonstrates a slight increase compared to the last reporting period where it was $48.3 \mu\text{g}/\text{m}^3$. We have seen an increase trend over the last year. In comparison higher concentrations of nitrogen dioxide were recorded during 2014.

Commentary:

Continuous automatic monitoring of nitrogen dioxide continues in North Street and Lewes Road Brighton. Between 1996 and 2017 monitoring results for Lewes Road suggested that Nitrogen Dioxide levels exceeded the EU and UK standard (annual average). The council therefore has a statutory duty to declare an Air Quality Management Area for Nitrogen Dioxide. This was last declared in 2013. This declaration must be followed by an Air Quality Action Plan that sets out how that council will work

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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towards compliance with Nitrogen Dioxide at the facade of permanent residential dwellings. Nitrogen Dioxide and particulate in diesel fumes is the second highest risk to overall health after smoking. Carcinogenic emissions influence lung cancer, lung and brain development, lifelong lung capacity, Chronic Obstructive Pulmonary Disease, bronchitis, pneumonia and stroke. The European Commission can fine member states including the UK for none compliance of air quality legislation most especially the 40 µg/m3 limit for nitrogen dioxide which became legally binding some years ago. The process for enforcement of this provision and whether the fine will be passed to individual local authorities has not been clarified by central government. The BREXIT decision could also result in a review of the air quality objectives. Third parties such as Community Groups or Client Earth can choose to take independent legal action if the limits for the protection of human health are not met.

Proactive measures are being taken to improve emissions of buses, taxis. Modal shift has reduced the number of journeys by private car. Numbers of cars, vans and lorries have also reduced on Lewes Road (by 15%).

As a result of a successful bid with the Department for Transport, in 2014/15, 50 buses have been retrofitted. A scheme to improve taxi emissions is ongoing and due to be completed by the end of December 2017. To extend this work a further Department for Transport was awarded to Brighton and Hove City Council in 2015/16 for 500k. This funding stream was the Clean Bus Transport Fund which targets reductions of emissions of oxides of nitrogen This work included retrofit of a further 23 buses for 2016/17 targeting lower emissions of oxides of nitrogen. The 23 buses are from Brighton and Hove Buses have now been retrofitted. In addition Brighton and Hove Buses have purchased 72 brand new buses. Big Lemon Bus Company are now operating 3 electric buses in the City using a contribution from this funding. Brighton and Hove buses are working with partners to progress with low emission options that work for a fleet operating 24hours 7 days a week. These changes to the bus fleet will show a reduction in NO2 emissions.

The air quality action plan was approved at Environment, Transport & Sustainability Committee in October 2015 and this includes a comprehensive set of measures to reduce nitrogen dioxide levels. The Council is required to provide annual status air quality reports to Defra and the latest report was submitted in June 2017 in accordance with the statutory timetable. This report was compiled in conjunction with colleagues from Transport and Public Health. This report is has been appraised by Defra and is now on the Council's website.

Actions:

1. Following agreement from defra transfer 170K of the Clean Bus Transport Fund to Big Lemon for Electric Bus delivery by March 2018 (Acting Head of Regulatory Services, March 2018)
2. To ensure that the remaining 6 taxis are retrofitted by December 2017. This project is funded by the Clean Vehicle Transport Fund. (Acting Head of Regulatory Services, December 2017)
3. Continue to monitor and manage the NO2 continuous analyser at Lewes Road (Acting Head of Regulatory Services, March 2018)
4. Continue to review the contract for the air quality automatic analysers which comes to an end January 2018. (Acting Head of Regulatory Services, January 2018)
5. Review the status of the City's Low Emission Zone with the introduction of the Government's proposed Clean Air Zone Framework. Review potential funding streams as this new framework is implemented. (Acting Head of Regulatory Services, March 2018)

Nitrogen Dioxide levels in Brighton and Hove (µg/m3 - micrograms per cubic meter): North Street (quarterly) [Corporate - city]	No.	36.00	50.70	 RED	Declining
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Position:

The average level Nitrogen Dioxide (NO2) measured at North Street as a 12 month rolling mean up to 30 June 2016 is 50.7µg/m3 (micrograms per cubic metre). This is the latest data available. There is always a time lag obtaining these results from contractor, TRL. This quarterly data is calibrated and ratified by the contractors before publication. We anticipate that the Q1 data will be available October 2017.

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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The target of 36 µg/m³ is 90% of the 40µg/m³ is the EU and UK standard, which would mean Brighton and Hove are statistically assured that the EU and UK standard are met. To be able to revoke an Air Quality Management Area nitrogen dioxide levels must be less than 36 µg/m³ for over a year.

For the NO₂ continuous analysers at Lewes Road and North Street they will report the following NO₂ levels where <36 µg/m³ is equivalent to 90% of the objective and in Defra Technical Guidance TG16 is regarded as a near miss or potential exceedance

The level of 50.7 µg/m³ demonstrates a slight increase compared to the last reporting period where it was 47.6 µg/m³. In comparison higher concentrations of nitrogen dioxide were recorded in 2015.

Commentary:

Continuous automatic monitoring of nitrogen dioxide continues in North Street and Lewes Road Brighton. Between 1996 and 2017 monitoring results for Lewes Road suggested that Nitrogen Dioxide levels exceeded the EU and UK standard (annual average). The council therefore has a statutory duty to declare an Air Quality Management Area for Nitrogen Dioxide. This was last declared in 2013. This declaration must be followed by an Air Quality Action Plan that sets out how that council will work towards compliance with Nitrogen Dioxide at the facade of permanent residential dwellings.

Nitrogen Dioxide and particulate in diesel fumes is the second highest risk to overall health after smoking. Carcinogenic emissions influence lung cancer, lung and brain development, lifelong lung capacity, Chronic Obstructive Pulmonary Disease, bronchitis, pneumonia and stroke.

The European Commission can fine member states including the UK for none compliance of air quality legislation most especially the 40 µg/m³ limit for nitrogen dioxide which became legally binding some years ago. The process for enforcement of this provision and whether the fine will be passed to individual local authorities has not been clarified by central government. The BREXIT decision could also result in a review of the air quality objectives. Third parties such as Community Groups or Client Earth can choose to take independent legal action if the limits for the protection of human health are not met.

Proactive measures are being taken to improve emissions of buses, taxis. Modal shift has reduced the number of journeys by private car. Numbers of cars, vans and lorries have also reduced on Lewes Road (by 15%).

As a result of a successful bid with the Department for Transport, in 2014/15, 50 buses have been retrofitted. A scheme to improve taxi emissions is ongoing and due to be completed by the end of December 2017. To extend this work a further Department for Transport was awarded to Brighton and Hove City Council in 2015/16 for 500k. This funding stream was the Clean Bus Transport Fund which targets reductions of emissions of oxides of nitrogen This work included retrofit of a further 23 buses for 2016/17 targeting lower emissions of oxides of nitrogen. The 23 buses are from Brighton and Hove Buses have now been retrofitted. In addition Brighton and Hove Buses have purchased 72 brand new buses. Big Lemon Bus Company are now operating 3 electric buses in the City using a contribution from this funding. Brighton and Hove buses are working with partners to progress with low emission options that work for a fleet operating 24hours 7 days a week. These changes to the bus fleet will show a reduction in NO₂ emissions.

The air quality action plan was approved at Environment, Transport & Sustainability Committee in October 2015 and this includes a comprehensive set of measures to reduce nitrogen dioxide levels. The Council is required to provide annual status air quality reports to Defra and the latest report was submitted in June 2017 in accordance with the statutory timetable. This report was compiled in conjunction with colleagues from Transport and Public Health. This report is has been appraised by Defra and is now on the Council's website.

Actions:

1. Following agreement from defra transfer 170K of the Clean Bus Transport Fund to Big Lemon for Electric Bus delivery by March 2018 (Acting Head of Regulatory Services, March 2018)
2. To ensure that the remaining 6 taxis are retrofitted by December 2017. This project is funded by the Clean Vehicle Transport Fund. (Acting Head of Regulatory Services, December 2017)
3. Continue to monitor and manage the NO₂ continuous analyser at North Street (Acting Head of Regulatory Services, March 2018)
4. Continue to review the contract for the air quality automatic analysers which comes to an end

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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January 2018. (Acting Head of Regulatory Services, January 2018)

5. Review the status of the City's Low Emission Zone with the introduction of the Government's proposed Clean Air Zone Framework. Review potential funding streams as this new framework is implemented. (Acting Head of Regulatory Services, March 2018)

The number of households where homelessness was prevented due to casework by the council and partner agencies [Corporate - city]	No.	1,086.00	921.00	 RED Declining
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Position:

During the 2017/18 financial year to date a total of 921 households had their homelessness prevented as a result of casework by the council and partner agencies. These preventions are achieved through assisting households to obtain alternative accommodation or enabling them to remain in their existing home. The 2017/18 target is locally set at 2,172 in order to maintain performance achieved during 2016/17. This annual target averages at 543 per quarter and 1,086 for the financial year to date, which means that performance is below target. The standalone result during Quarter 2 2017/18 was 449, a 5% decrease compared to 472 during the previous quarter and 500 during Quarter 2 2016/17. Council preventions have decreased by 21% compared to the previous quarter (from 154 to 122) and partner agency preventions have increased by 3% (318 to 327).

Commentary:

Performance is poor relative to the target and the result during the previous quarter. It is becoming more difficult for Housing Options Officers to prevent homelessness because they're working in a toughening climate in which lower income households in the city are finding it increasingly difficult to access the private rented sector and are at increased risk of losing accommodation in this sector. This is related to factors such as increasing rents, reductions in Local Housing Allowance payments and welfare reforms (such as the Benefit Cap and the upcoming full rollout of Universal Credit from October 2017). The key financial implication is that statutory homeless households will be likelier to require temporary accommodation (TA) including expensive nightly booked/spot purchase TA.

The Housing Needs service is working to mitigate these pressures by increasing prevention work through the use of Trailblazer funding awarded by the Department for Communities and Local Government (DCLG) and through plans to reduce the number of households in TA, including through the new social housing allocations policy (which prioritises 40% of social housing allocations for homeless households in TA). Of the two actions from the previous quarter, two have been completed ("Produce full implementation plan for use of Trailblazing funding" and "Develop plan for a whole project approach, aligned with Trailblazer project outcomes, to reduce temporary accommodation usage over the next 18 months"). Furthermore, all Trailblazer staff (three coordinators, 4 home visiting officers and 1 data coordinator) are now in post.

Mobilisation of the Trailblazer project took longer than anticipated and the figures haven't been included in the prevention figures but kept separate – when these are added there are an additional 100 preventions. We have now resolved the IT issues of recording and Trailblazer projects are fully mobilised so we are confident performance will be back on track by Q3.

The current IT system for housing option, prevent and home move 'Locator' will be replaced with the new IT system 'Home Connections' for the new financial year. The new system will enable more people to self-serve, creating capacity for officers to focus on those who need intensive assistance.

Actions:

1. Financial incentives to applicants and landlords to enable more people to access private rented accommodation where sustainment hasn't been successful. (Head of Temporary Accommodation & Allocations, January 2018).
2. Workshops for getting people ready for private renting being rolled out (Head of Temporary Accommodation & Allocations, January 2018)
3. Roll out early prevention successes of trailblazer to whole service (Head of Temporary Accommodation & Allocations, February 2018).
4. Realign service to focus on early prevention and sustainment in preparation for Homeless Reduction Act. (Head of Temporary Accommodation & Allocations, April 2018).
5. New IT system will enable more people to self serve, creating capacity for officers to focus on those who need intensive assistance. (Head of Temporary Accommodation & Allocations, April 2018).

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
% of bus services running on time [Corporate - city]	%	95.00	80.00	 RED Improving

Position

The 2016/17 result of 80% reflects an 10 percentage point improvement on the previous year of 69.8% through still not at 2014/15 and earlier levels which were consistently around 85% - 90%.

The target has been set at 95% using the traffic commissioner threshold for bus services running on time as this was more challenging than the comparator average.

The latest CIPFA neighbour average is 83.9% and BHCC were ranked 6 of the 16 CIPFA Comparators in 2015/16

Commentary:

B&HCC has a compact road network and experiences a high volume of traffic which requires constant maintenance and improvement. Over the past couple of years there has been a high number of large scale essential highways improvements that have taken place on the network. The associated temporary traffic management arrangements to accommodate those works has caused more delays on the network than usual and in turn caused delays to buses.

There has also been a large amount of essential utility works on the network which has compounded the issue.

Actions:

1. B&HCC has commissioned a bus network review which will explore opportunities to improve the bus network, this work is expected to be completed in 6 months' time and will assist in informing future the capital investment programmes. (Head of Transport Projects & Engineering, Mar 18)
2. In terms co-ordination and managing utilities work on the network, B&HCC is employing its powers provided under the Traffic Management Act to ensure better co-ordination and execution of works carried out by utility companies to mitigate impacts on the network (Interim Traffic Manager, ongoing).

Number of drug related deaths [Corporate - city]	No.	30.00	27.00	 GREEN No change
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Position:

ONS produce annual calendar year data which in 2016 reported a total of 27 drug death poisonings of which 20 were related to drug misuse. This compares with data for 2015 which showed 27 drug death poisonings of which 17 were related to drug misuse.

Nationally comparable data for the 2014-16, period identified 56 deaths related to drug misuse with a mortality rate of 6.5 per 100,000 (Lower Confidence interval 4.8 – Upper Confidence Interval 8.4). This places Brighton and Hove in 53rd place of the 338 local authorities where a rate per 100,000 was calculated. For the previous 2013-15 measurement period the City was in 23rd place. This continues a positive improvement in the rate of drug related mortality in the City when compared with other local authorities.

Commentary:

Historically deaths from heroin overdose have made a considerable contribution to the total number of deaths in the City. Local delivery of a programme of naloxone mini-jet provision for clients and their families appears to be having a positive effect in reversing overdoses that might otherwise have resulted in a death.

Increasing the numbers of opiate users accessing treatment and improving the retention of clients in treatment along with the successful completion of treatment also have a role in driving an improving picture locally relative the national profile of drug related deaths

The on-going challenge of addressing the mental health needs of those who commit suicide through

INDICATOR	UNIT	TARGET	ACTUAL	STATUS
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the use of poisons (barbiturates in particular) is at present affecting the overall number of those dying locally who are recorded as having a drug related death.

Actions:

1. Continue to ensure that all clients in treatment with a known history of using Heroin/other Opiates are offered first aid training and a naloxone mini-jet. (Substance Misuse Commissioner, quarterly)
2. Continue to work with partners such as hostels and A&E to support their use and distribution of naloxone with clients who are known heroin users/present with an overdose. (Substance Misuse Commissioner, on-going)
4. Work with mental health services to share learning of the risks of suicide with staff and clients in substance misuse services. (Substance Misuse Commissioner, on-going)
5. Continue to review and feedback the detailed findings of the DRD audits and incorporate recommendations into the Harm Reduction Action Plan. (Substance Misuse Commissioner, ongoing)
6. Pro-actively generate learning from those who die in treatment by compiling a list of clients who have died in treatment or have been identified by Sussex Police as a suspicious/drug related death via the Drug Death Risk meetings. Reviewing cases and share the learning across treatment services, rough sleepers team, Sussex police, Adult Social Care and Public Health. (Substance Misuse Commissioner, on-going)

