

Performance Indicators

Neath Port Talbot Council

Appendix 1 - Partnerships & Community Cohesion Performance Indicators - Quarter 2 - 2019/20



Print Date: 18-Nov-2019

How will we know we are making a difference (01/04/2019 to 30/09/2019)?

PI Title	Actual 17/18	Actual 18/19	Actual 19/20	Target 19/20	Perf. RAG
1 Well-being Objective 1 - To improve the well-being of children and young people					
CP/015 - Percentage of schools that have adopted suitable programmes to address violence against women, domestic abuse and sexual violence (VAWDASV)		12.12	12.12	18.00	Red
Quarter Two: 8 of 66 Hafan Cymru's Spectrum Project is delivered in 8 schools and is funded by Welsh Government. In conjunction with the and Sexuality Education Pack, developed by the Youth Service. These lessons will be delivered across all schools followeek (week commencing Monday 11th November 2019), where a cohort of young people will receive the lesson. The return of an officer from maternity leave will assist in making further progress throughout the year and will suppont months, working towards our annual target of 25%. Progress of lesson roll out during Quarter 2 was more difficult dependence reported from 2018/19.	wing a phased ort the service	roll out. This to make inro	will commenc	e during Safe	guarding
PI/466 - Percentage of children and young people who have participated in a suitable programme that addresses VAWDASV		39.00	63.64	50.00	Green
1600 Year 6 pupils participated in this years Crucial Crew event. One of the sets at this event is focused on Healthy R 500 Year 8 Pupils attended the 'Its Your World' Wellbeing Workshops that were held at Ysgol Bae Baglan and Dwr Y R Relationships. The Wellbeing Workshops will be rolled out across more schools in the borough, with a view to school from the Community Safety Team.	elin. One of th	•			•
PI/467 - Percentage of year 6 children and young people who have participated in a suitable programme to address cyber-crime		97.98	98.79	98.00	Green
1,600 year 6 children attended Crucial crew and participated in a cyber crime awareness programme in June 2019. A same event.	n additional 30	year 8 childre	en attended a	nd delivered	a set at the
2 Well-being Objective 2 - To improve the Well-being of all adults who live in the county borou	gh				
CP/034 - Percentage of incidents of domestic abuse where people are repeat victims - Independent Domestic Violence Advisor (IDVA) Service - highest risk victims		37.26	44.19	33.00	

PI Title	Actual 17/18	Actual 18/19	Actual 19/20	Target 19/20	Perf. RAG			
Quarter Two: 95 of 215. The 'Healthy Relationships for Stronger Communities' Strategy, implementing the Violence Against Women, Domestic Abuse and Sexual Violence (Wales) Act 2015, recognises the need to better respond to victims in Neath Port Talbot. The VAWDASV Leadership Group commissioned a review of High Risk Victim Services, due to increasing demands and subsequent additional pressure on services. A systems review was undertaken analysing demands into services and process mapping. Various changes have been made as a result of this, including: changes to the step up and step down process for victims; changes to recording and monitoring; increased capacity within the team; and revised policies and procedures. However, as part of the demand analysis it is clear that there are a high number of repeat referrals into the system, in particular, those with complex needs. A dip sample of cases has been presented to the Leadership Group and a piece of work will be undertaken to better understand the: nature of the cases; profile of victims and profile of perpetrators and their wider needs. It has been agreed that this work should be escalated to the Community Safety Partnership Board and Public Services Board, as it is not solely a VAWDASV related issue. Going forward, the Independent Domestic Violence Advisor (IDVA) Service will monitor the number and nature of repeat referrals which will allow us to: better understand and improve services; ensure we give victims the best possible chance to fully engage with the support that is currently available; or consider whether alternative models of support for the more complex cases may be necessary. At present, the IDVA team continue to work on an analysis of repeat victims and are using a mapping tool to gather this data and present findings. This performance indicator is reported quarterly from financial year 2018/19.								
PI/153 - Number of referrals of high risk victims to the IDVA service		212.00	215.00	238.00	Green			
There are fewer people accessing the IDVA service due to changes to the referral process. With increased capacity in the team and the creation of a Business Support post, cases can now be screened, meaning only appropriate referrals are accepted by the service. All cases received into the IDVA service are classed as high risk. Victims deemed as medium or low risk will be supported by local specialist providers and not referred into the IDVA service.								
PI/154 - Number of new members to Paws on Patrol		74.00	96.00	50.00	Green			
Three events took place in quarter 3 resulting in 48 new members	<u>l</u>			<u> </u>	0.00			
PI/470 - Percentage of vulnerable people whose vulnerability is reduced via the vulnerable persons MARAC (Multi Agency Risk Assessment Conference)		90.00	96.77	90.00	Green			
PI/481 - Number of APB commissioned substance misuse services successfully maintained in the year								
New indicator for 19/20. No comparable data or target. Base lined for this year with a view of setting a target for 20/	/21.			l				
The number of services commissioned on behalf of the APB has been predetermined by historic systems inherited fro the regional APB was implemented.	m City and Co	unty of Swans	ea and Neath	n Port Talbot (CBC before			
During the first quarter of 19/20 work commenced on reviewing existing services and the commissioning cycle for a new commenced on reviewing existing services and the commissioning cycle for a new commenced on reviewing existing services and the commissioning cycle for a new commenced on reviewing existing services and the commissioning cycle for a new commenced on reviewing existing services and the commissioning cycle for a new commenced on reviewing existing services and the commission of the commission of the commenced on reviewing existing services and the commission of the commission of the commenced on reviewing existing services and the commission of the commenced on reviewing existing services and the commission of the commission of the commenced on the commenced	ew model of s	ervice provisio	on will be con	nmence durin	ng 20/21.			
PI/482 - Number of monitoring visits undertaken to APB commissioned substance misuse services								

PI Title	Actual 17/18	Actual 18/19	Actual 19/20	Target 19/20	Perf. RAG			
New indicator for 19/20. No comparable data or target. Base lined for this year with a view of setting a target for 20/21.								
The APB team has been without a Monitoring Officer since August 2018 so have not been able to carry out any visits. An interim desktop monitoring system was put in place during this time.								
In July 2019 a new officer started in post who has set up a new monitoring system which during Sept and Oct 19 will be tested and visits will be carried out on quarterly basis for the rest of the year. Monitoring information based on these visits will be reported to the APB.								
PI/483 - Number of agreed service outcomes achieved (2019/20 establishing baseline) in APB commissioned substance misuse services								
New indicator for 19/20. No comparable data or target. Base lined for this year with a view of setting a target for 20/21.								
Outcomes will be agreed with providers during 19/20 as part of the new contract monitoring system and a baseline will be established during 19/20, targets will be set during 20/21 and reported to the APB as part of a new performance management system.								
PI/484 - Percentage of non-fatal over-doses notified through the protocol that received appropriate advice and or other intervention (baseline)								
New indicator for 19/20. No comparable data or target. Base lined for this year with a view of setting a target for 20/21.								
During the first and second quarters of 19/20 twelve non fatal overdoses occurring in Neath Port Talbot were reported to the APB, all cases were followed up appropriately by local services.								
n.b. the APB receives notifications of overdoses on a regional basis. The figures provided here are for NPT only.								