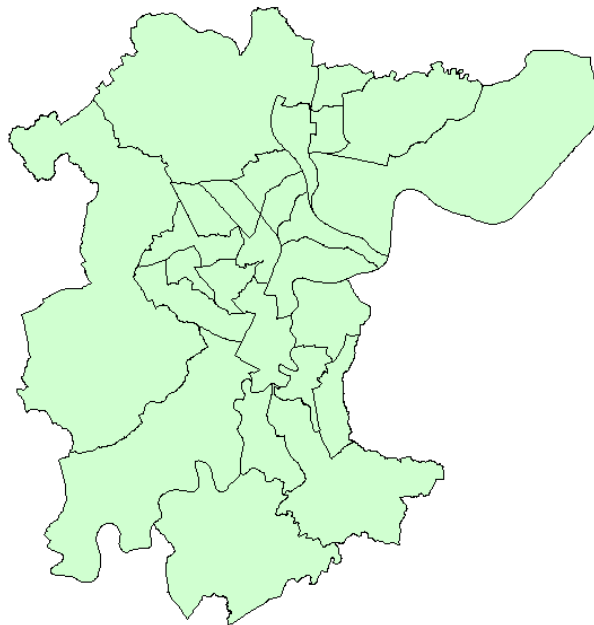


Community Safety Plan



April 2011 > March 2014



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:

- Catalyst
- Cleveland Fire Authority
- Cleveland Police
- Cleveland Police Authority (to be replaced by Police and Crime Commissioners in 2012)
- Drugs and Alcohol Action Team
- Durham Tees Valley Probation Trust
- H M Prison Holme House
- the four Local Area Partnership Boards
- Neighbourhood Watch
- Safe in Tees Valley
- Stockton Adult Protection Committee
- Stockton-on-Tees Borough Council
- Stockton Primary Care Trust (to be replaced by GP commissioning consortia in 2013)
- Stockton Youth Offending Service
- Tristar Homes Ltd
- University of Durham Queen's Campus
- the Vela Group
- Victim Support

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
2. Alcohol related crime/ASB
3. Violent crime
4. Drug related offending
5. Criminal damage
6. Domestic violence

All crime and anti social behaviour 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 anti social behaviour (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 for 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 and to prevent, minimise and reduce drug, alcohol and substance misuse and the harm it causes to individuals, families and communities in the Borough of Stockton-on-Tees by: -

- (a) reducing crime in the Borough
- (b) reducing disorder and anti-social behaviour in the Borough
- (c) preventing and reducing levels of substance misuse in the Borough, including both controlled drugs and alcohol, by providing the best possible treatment regimes and other interventions, in line with the National Drugs Strategy and National Alcohol Strategy
- (d) increasing feelings of safety in the Borough
- (e) reducing fear of disorder and anti-social behaviour in the Borough
- (f) reducing reoffending in the Borough"

Since the last Community Safety Plan was published in 2008 SSP has combined with the Drugs and Alcohol Action Team Steering Group and we now work as one partnership. Together we work closely with a range of other partnerships to achieve our aims:

- Safeguarding Vulnerable Adults Committee
- Local Children's Safeguarding 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 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
- Localities within wards 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 a reduction of 23.5% for Total Crime, which means that there have been 3,394 fewer victims of crime. Once again in 2010/11 we remain the safest place in the Tees Valley! We recognise that the next three years are going to be particularly challenging. Most partners are working with reduced resources following recent government cuts in funding to the public sector, so achieving further reductions will be a challenge.

Since 2006 the reducing re-offending agenda has evolved and in Stockton in 2009 we established an Integrated Offender Management (IOM) structure which 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 key priority in this plan. The IOM team are currently working with 117 offenders.

To complement this, our annual 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 (Stockton Town Centre, Mandale & Victoria, Newtown, Parkfield & Oxbridge and Hardwick).
- 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 of the victims 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. Action plans will be developed for each key priority and evaluation of progress will be reported to SSP quarterly.

1. REDUCE ANTI SOCIAL BEHAVIOUR

Lead: Chief Inspector Neighbourhoods (Mick Williams)
Deputy: Community Safety Manager (Marilyn Davies/Steven Hume)

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
Poor parental responsibility	Trespassing
People being drunk and rowdy	Kerb crawling
Street Drinking	Graffiti
Threats/verbal abuse	Prostitution

Our 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 MAASBT were alcohol related.
4. Anti social behaviour continues to be male and youth dominated as demonstrated in the table below:

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.

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 the council survey and 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 MAASBT. A yearly performance report will be brought to SSP to review performance against the standard.

Performance measures.

	Measure	Timescale	Lead
1.1	<p>Reduce repeat callers to the Police, MAASBT and RSLs.</p> <p>We will monitor all repeat callers to the Police, MASBT and RSLs to identify those who may be vulnerable and will provide support for them via the ASB Victim/Witness Support Officer.</p> <p>We will assess the number of calls six months prior to the support and six months after.</p>	<p>April 2011 to March 2012</p> <p>Evaluation to be completed April 2012</p>	Community Safety Manager
1.2	<p>Reduce the perception that ASB is a serious problem.</p> <p>Using focus groups held during 2011 to 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.</p>	<p>Improve satisfaction levels from the baseline taken in 2009: 23.2% of residents perceived high levels of ASB</p>	Community Safety Manager
1.3	<p>Reduce Anti Social Behaviour in the top five wards.</p> <p>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.</p>	<p>Baseline 2010/11 for MASBT is 12797 service requests.</p> <p>Top five wards:</p> <p>Police ASB incidents below with MASBT service requests in brackets.</p> <p>Stockton Town Centre – 2,678 (1,658) Mandale & Victoria – 1,246 (746) Hardwick – 1,151 (560) Parkfield & Oxbridge – 1,151 (425) Newtown – 971 (722)</p>	Community Safety Manager

2. REDUCE ALCOHOL RELATED CRIME AND ANTI SOCIAL BEHAVIOUR

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

This was chosen as the second priority by 2,630 residents with only 341 saying that it should not be a priority. Under 16s thought it should be 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.

What do we know about this issue?

Our yearly Partnership Strategic Assessments 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 MAASBT was alcohol related.
8. 34% of all Violence Against the Person was alcohol related.

What we will do.

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 one year prior, during and one year 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 Alcohol Specified Activity Requirement (ASAR) to assess their effectiveness by looking at criminal activity one year prior, during and one year after for those receiving an order.
6. Continue to use a brief intervention for all of those who come to the attention of the MAASBT 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 and Social Responsibility Act 2011, in the context of the existing voluntary 'Operation Tranquility' scheme.

Performance measures

	Measure	Timescale	Lead
2.1	<p>Increase the number of section 27 notices issued.</p> <p>In particular in the top five wards.</p>	<p>Using a baseline of 390 taken from an average of 2009/10 and 2010/11 achieve an increase against 2011/12</p> <p>Top five wards: Stockton Town Centre Yarm Norton North Parkfield & Oxbridge Stainsby Hill</p>	CI Ted Allen
2.2	<p>Reduce the number of alcohol related crimes for those on an ATR.</p> <p>Cohort taken using ATR data to identify offending one year prior, during and one year after an ATR</p>	Identify a baseline for April 2012.	Emma Champley
2.3	<p>Reduce the number of alcohol related crimes for those on an ASAR</p> <p>Cohort taken using ASAR data to identify offending one year prior, during and one year after an ASAR</p>	Identify a baseline for April 2012.	Emma Champley

3. REDUCE VIOLENT CRIME

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

Violent crime was seen as the third 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 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. Domestic violence has increased during the same period by 7.4% and represented 33% of all violent crime.
4. 85% of domestic violence incidents had a female victim.
5. Males commit 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 of the females 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/or using a weapon to offend.

What we will do.

We will:

1. Extend the Integrated Offender Management process to 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 our 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 (Multi Agency Risk Assessment Conference).
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.

Performance measures

	Measure	Timescale	Lead
3.1	Maintain a reduction in Most Serious Violent Crime	Baseline of 82 taken from an average of 2009/10 and 2010/11. Reduce year on year.	CI Ted Allen
3.2	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 from 2010/11. Reduce by April 2012 Top five wards: Stockton Town Centre – 464 Mandale & Victoria - 164 Hardwick - 150 Newtown – 141 Parkfield & Oxbridge - 116	CI Ted Allen
3.3	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 of 23 repeat perpetrators known to Police prior to completion of the programme taken from 2010/11.	Marilyn Davies
3.4	Increase the number of repeat victims in MARAC accessing support from Harbour. Increase the take up of support using a baseline taken from identifying numbers offered support against those accessing support during 2010/11.	Baseline to be gathered from 2011/12 data. Increase year on year.	Marilyn Davies

4. REDUCE DRUG RELATED OFFENDING

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

In previous consultations in 2004 and 2007 drug related offending was the top and then second key priority. This time 2,145 respondents identified it as the fourth key priority with 236 saying it should not be a priority for us. Under 16s ranked it second, BME 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 Assessment 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% were aged between 25 - 34 years and 98% were of white ethnicity.

PDUs in Effective Treatment (01/07/09 to 30/06/10)		Gender	Ethnicity	Age			Main Drug
		(% Male)	(% White)	(% 18-24)	(% 25-34)	(% 35+)	(% Opiates)
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

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.

We will:

1. Carry out at least six drugs dog operations. 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.

Performance measures

	Measure	Timescale	Lead
4.1	Increase the number of female drug users accessing support.	Baseline taken from 2010/11 of 365 females in treatment (27% of total in treatment).	Emma Champley
4.2	Reduce drug related repeat offending. Identify a cohort of drug using high crime causers (HCC). Monitor their offending six month prior, during and six month after being on IOM.	Cohort of 29 HCC's identified to be monitored 2011/12. Evaluation report to SSP April 2012.	CI Rob Donaghy
4.3	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 2010/11 (figures available July 2011).	Emma Champley
4.4	Reduce the number of individuals repeatedly testing positive for drugs within Arrest Referral Use IOM and DIP to provided wraparound intensive support.	Baseline taken from 2010/11 of individuals testing positive on three or more occasions to be added April 2011.	Emma Champley

5. REDUCE CRIMINAL DAMAGE

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

Criminal damage was seen as a key priority for 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 by Local Area Partnership Board they all 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 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. Residents in THL properties are over represented for offences of criminal damage; 45% of all criminal damage offences to dwellings occurred in THL properties overall, with this rising to more than 60% in four wards of the Borough.
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.
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 secondary deliberate fires.

Deliberate Fires	Current Strategic Period	Previous Strategic Period	Change	% Change
<i>Primary Dwelling Fire</i>	18	19	-1	-5.3%
<i>Primary Fire - Other</i>	49	46	3	6.5%
<i>Primary Vehicle Fire</i>	58	91	-33	-36.3%
<i>Secondary Fire</i>	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.

We will:

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.

Performance measures

	Measure	Timescale	Lead
5.1	Reduce Criminal Damage Maintain a reduction in offences of criminal damage.	Baseline of 2,589 taken from an average of 2009/10 and 2010/11. Reduce year on year.	CI Mick Williams
5.2	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. Top five repeat streets appear in the action plan.	CI Mick Williams
5.3	Reduce the number of repeat victims of Criminal Damage. All repeat victims to be visited to identify cause and implement actions to reduce victimisation.	Baseline of 280 repeat victims in 2010/11. Reduce year on year.	CI Mick Williams

6. ADDRESS EMERGING ISSUES

Lead: PPO Manager (Jeff Evans)
Deputy: Detective Chief Inspector (Rob Donaghy)

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 mainly between shoplifting and theft of metals. During the summer months theft from garden sheds and of garden furniture increases.

What do we know about this issue?

Our yearly Partnership Strategic Assessment 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 choice of 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 heavy 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 repeat victimisation 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.

We will:

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. Maintain our 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.

Performance measures

	Measure	Timescale	Lead
6.1	Reduce convictions for HCCs Use the IOM approach to provide intensive support and enforcement.	Baseline taken from 2010/11 of 111 (projected)	PPO Manager Jeff Evans
6.3	Increase the number of HCCs accessing treatment services. Identify the number of HCCs accessing treatment and monitor the number of crimes committed one year prior, during and one year after treatment	Baseline taken from 2010/11 of 28 from a potential of 29.	PPO Manager Jeff Evans