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CS Performance Dashboard

Q4 24/25

Community Safety Service



	Pr	erforn	rmance Monitoring	YTD (FY	Y) Perform Change	rmance and ge		Monthly P	Performance	e and Chan	ige		Q	uarterly Po	erformance	e and C	hange		
	T	arget	et and Rating (YTD)	Last Year	This Vear	Year				Month	nly Change					Quar	rterly Change	e	Performance Commentary
Measure Measure (SP=Strategic Plan, CEP=Coroorate Eoualitv Plan	Frequency	Min Target	Annual Target % Target Complete Rating	3/:	2024/25	Change	Jan-25	Feb-25	Mar-25	Previous Month	Same Month Last Year	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	;	Change Previous Q	Change Same Q Last Year	· ·
		Community Safety - Supporting victims & managing offenders																	
Number of VAWG victims referred to the council commissioned provider	Q			1669	1841	10%	151	162	189	17%	936%	489	421	429	502	♠	17%	11%	An increase (17%) in referrals from 24/25 Q3 to 24/25 Q4, from 429 - 502. In addition, approximately 31.5% of the survivors at referral intake had No Recourse To Public Funds. The
Number of VAWG victims supported by commissioned	Q			538	395	-27%	29	30	38	0 27%	-24%	104	93	101	97	Ψ	-4%	₩-38%	In addition, approximately 31.5% of the survivors at referral make had to keed by the voluce rules. The main visas survivors had were a Spouse Visa, and Indefinite Leave to Remain. We have recruited two duty volunteers who speak multiple languages to meet service user demands. 55% of referrals were of
							3	5	5			23	16	13	13				Bangladeshi background.
Proportion of Victims of VAWG who feel safer after engaging with commissioned provider - SP/CEP	Q 9	90%	95%	99%	98%	-1%	100%	100%	100%	0%	0%	100%	94%	100%	100%		0%	3%	MARAC, Self Referrals, Police, Solace Advice Service, and Children Social Care continue to be the highest source of referrals. We have seen an increase in the amount of referrals from GP from 1.17% in quarter
C.1999.19							3	5	5			23	17	13	13				3, to 3.59%, in quarter 4. In additon, referrals from Royal London Hospital have also seen an increase, rising from 2.4% in quarter 3 to 3.59 in quarter 4. This is likely due to the partnerships within the Hospital Co-location becoming more established
							11	3	4			22	25	23	18				Apr 25: 72 cases discussed at MARAC and a total of 9 repeat cases. A MARAC repeat is when a referral is received where there has been a further incident within 12 months of the case being last discussed at
Repeat victimisation of MARAC referrals	м			17%	14%	-4%	15%	14%	14%	0%	-3%	12%	14%	14%	14%		0%	-4%	MARAC. Repeat notifications are reliant on frontline services identifying a repeat incident. Majority of the referrals to MARAC were received from police (19 cases) followed closey by the IDVA
							52	46	47			177	165	159	145				service (17 cases).
Number of Hate Crime Awareness Raising initiatives/training - CEP	Q			115	131	14%						30	34	46	21	₩	-54%	₩-49%	The number of activities/training delivered has decreased in Q4 but increased by 14% in the FY 2024/25 compared to the previous FY.
Prevent: Number of training delivered	Q			70	59	-16%						30	22	7	7	•	0%	-70%	Qtr 4 was focused on Youth and Community settings. Statutory partners remained a priority also however down the pecking order. As a result more training was provided to Youth settings. in terms of
Prevent: Number of training attendees	Q			3282	1716	-48%						851	763	102	133		30%	- 81%	engagement and outreach there were 14 sessions and 620 particpants via the Prevent Youth engagement officer.
										Ci	vil Prote	ction l	Jnit						
Number of Incidents managed	м				36		3	2	5	150%		6	9	11	10	Ψ.	-9%		5 incidents managed in March (2 fires, 1 Gas Leak, 1 Explosion, 1 Water Outage). Training sessions
	м				13		1	1	1	➔ 0%		2	4	4	3	$\mathbf{\Psi}$	-25%		delivered were Case Study Series: Camden Decant, BC&R Drop in & Humanitarian Assistance Lead Officer
	M M				58 361		5 50	5	3 74	↓ -40% ↑1380%		17 80	17 86	11 66	13 129	Ť	18% 95%		Training.
Number of training attenuees	IVI				501		50	5	/4	T1560%		00	00	00	129	T	95%		

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Substance Misuse



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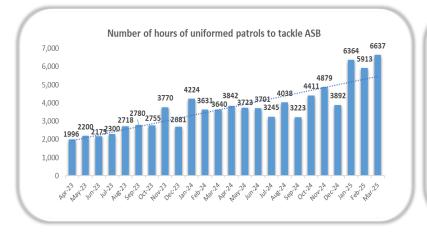
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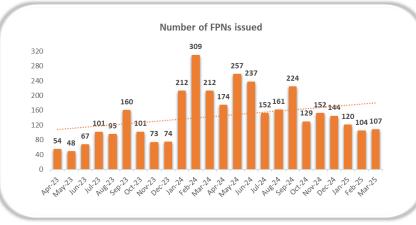
	P	erform	mance Monitori	ring	YTD (FY)	Y) Performan Change	ice and		Monthly	y Performance	e and Chang	je		q	uarterly P	erformance	e and Cl	hange		
	Ţ	arget	and Rating (YT	TD)	Last Year	This Year	Diff				Monthl	ly Change					Quar	terly Change		Performance Commentary
Measure Measure (SP=Strategic Plan, CEP=Corporate Equality Plan	Frequency	Min Target	Annual Target % Target Complete	Rating	2023/24	2024/25	Change	Jan-25	Feb-25	Mar-25	Previous Month	Same Month Last Year	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25	ō	Change Previous Q	Change Same Q Last Year	
										Crimir	al Justi	ice Servi	ice: Su	Ibstan	ce Mis	use				
Number of clients in contact with CJS (3.2 on domes report guarterly)	Q												307	293	277		Ψ	-5%	₩ -6%	there was a 4.4% decrease (12 individual). NDTMS Q4 Data will not be published until 29 May 25
Adults with substance misuse treatment need who successfully engage in community-based structured treatment following release from prison - SP	Q 5	50%	60%										54.5%	59.6%	56.2%		•	-3%	21%	56.2% of ex-prisoners started treatment within 21 days of release in Q3 (91 out of 162). LBTH continues to outperform both the London (40.7%) and national averages (55%). Discussion with OHID ongoing and data audit in progress.
Adults with substance misuse treatment need who successfully engage in community-based structured treatment following release from prison (LOCAL DATA) -	Q												77.8%	81.6%	83.2%	87.6%	•	4%	16%	Local data shows 87.6% of those released who had a referral to treatment within the year (Q4 1/1/24 to 31/12/24) started treatment within 21 days (142 out of 162).
Successful referral from the Community Criminal Justice System into drugs and alcohol treatment	Q												0.0%	0.0%	0.0%		•	0%	- 48%	There is no data for Q3 due to NDTMS continuing to have problems. NDTMS Q4 Data will not be published until 29 May 25
3.3 Successful completions as a proportion of Criminal Justice clients of all in treatment %	Q												8.8%	7.2%	7.9%			1%	-1%	7.9% of clients successfully completed treatment. NDTMS Q4 Data will not be published until 29 May 25
Successful completions as a proportion of Criminal Justice clients of all in treatment: Opiates %	Q												3.3%	1.3%	1.8%			1%	-1%	1.8% of Opiate clients successfully completed treatment. NDTMS Q4 Data will not be published until 29 May 25

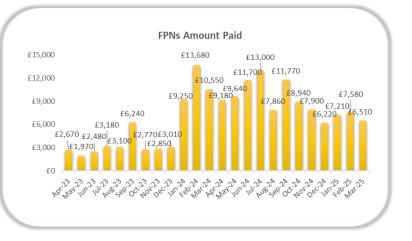
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SNO – Patrols and FPNs

	Pei	erformance Monitoring YTD (FY) Performance and Change						Monthly P	erformance	and Chan	ge		C	uarterly P	erformance	and C	hange		
	Та	rget and	l Rating (YTD)	last Year	This Year	Diff				Month	ly Change					Quar	rterly Chang	;e	Performance Commentary
Measure Measure (SP=Strategic Plan, CFP=Corporate Fauality Plan	Freq uency	Min Targel Annual	Target % Target Complete Rating	2023/24	2024/25	Change	Jan- 25	Feb-25	Mar-25	Previous Month	Same Month Last Year	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25		Change Previous Q	Change Same Q Last Year	
									Sa	fer Ne	ighboui	hood	Opera	tions					
Number of hours of uniformed patrols to tackle ASB - SP	M 36,	,750 38	,500 140%	34870	53868	54%	6364	5913	6637	() 12%	82%	11266	10506	13182	18914	•	43%	65%	Q4 data has surpassed both minimum and stretch targets, +43.5% on Q3. This is due to 9 new THEOs joining their teams on patrols in Jan25 after completing their training, in addition to the 11 that joined in Oct.
Overall Number of FPNs Issued by THEOs	М			1506	1961	030%	120	104	107	3%	-50%	668	537	425	331		-22%	-55%	
FPNs Paid	м			963	1254	30%	79	65	41	🕁 -37%	— -72%	407	365	297	185	•	-38%	6 4%	
% FPNs Paid	М			64%	64%	0%	66%	63%	38%	🔶 -39%	🛑 -45%	61%	68%	70%	56%		-20%	— -21%	
Income from FPNs	М			£61,750	£107,510	74%	£7,210	£ 7,580	£ 6,510	🔶 -14%	-38%	£30,520	£32,630	£23,060	£21,300		-8%	-36%	
FPN Issued by Locality Team Area 1 (from Jun 23)	М				331		18	39	20	🔶 -49%	82%	96	61	97	77		-21%	43%	0
FPN Issued by Locality Team Area 2 (from Jun 23)	Μ				511		28	17	19	12%	-32%	224	135	88	64	•	-27%	62%	
FPN Issued by Locality Team Area 3 (from Jun 23)	Μ				329		10	13	15	15%	- 76%	77	127	87	38	•	-56%	69%	
FPN Issued by Locality Team Area 4 (from Jun 23)	М				290		25	20	13	♦ -35%	- 70%	94	69	69	58	•	-16%	— -51%	
FPN Issued by Proactive Team 1 (from Dec23)	М				498		39	15	40	167%	-49%	175	145	84	94		12%	- 56%	





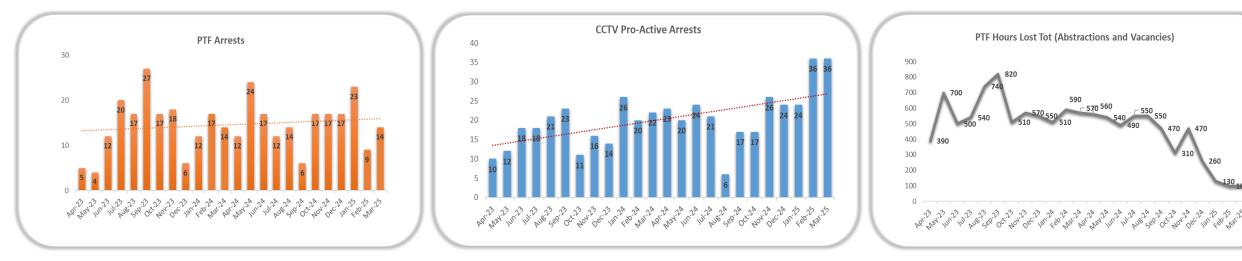


SNO – CCTV and PTF

	Р	erforn	mance N	Ionitoring	YTD (FY)	(FY) Performance and Change Change								Q	uarterly Pe	erformance	e and C	Change		
	٦	Farget	and Rat	ting (YTD)	Last Year	This Year	Diff				Monthl	y Change					Qua	rterly Chang	e	Performance Commentary
Measure Measure (SP=Strategic Plan, CEP=Coroorate Eouality Plan	Frequency	Min Target	Annual Target	% Target Complete Rating	2023/24	2024/25	Change	Jan-25	Feb-25	Mar-25	Previous Month	Same Month Last Year	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25		Change Previous Q	Change Same Q Last Year	
	Safer Neighbourhood Operations																			
Number of Arrests by PTF	м				169	182	8%	23	9	14	56%	0%	53	32	51	46	•	-10%		Small increase in N of arrests compared to Feb25 but below expected volume, maily due to focus on CHB area where opportunities for arrests have decreased as a result of the clear phase. FYTD figure is 8% higher than last year.
Number of CCTV "Proactive Arrests"	м				211	274	30%	24	36	36	0%	64%	67	44	67	96		43%	/11%	Improved info sharing re wanted individuals introduced in Nov, since then the monthly AVG of wanted nominals arrests facilitated by CCTV increased from 1 to 5.
PTF Abstractions	М				2670	2450	-8%	130	100	100	- 0%	-60%	630	930	560	330		-41%	-54%	All 26 officers in post. Abstractions include one officer that remains suspended. An additional 170 hours
PTF Vacancy Hours Lost	М				4320	2080	-52%	0	0	0	#DIV/0!	₩-100%	960	640	480	0		-100%	-100%	lost to sickness.
PTF Total Hours Lost	М				6990	4530	-35%	130	100	100	0%	-82%	1590	1570	1040	330		-68%	-80%	New measures to capture THTF abstractions and vacancies added.

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SNO – ASB and CMARAC

	P	erformance Monitoring	YTD (FY)	Performa Change	nce and		Monthly Pe	erformance	and Chan	ige		c	Quarterly F	Performanc	e and (Change		
		Target and Rating (YTD)	Last Year	This Year	Diff				Month	ıly Change					Qua	arterly Chang	e	Performance Commentary
Measure Measure (SP=Strategic Plan, CEP=Corporate Equality Plan	Frequency	Min Target Annual Target % Target Complete Rating	2023/24	2024/25	Change	Jan-25	Feb-25	Mar-25	Previous Month	Same Month Last Year	Q1 24/25	Q2 24/25	Q3 24/25	Q4 24/25		Change Previous Q	Change Same Q Last Year	
								Sa	afer Ne	eighbour	hood	Opera	tions					
Number of ASB cases reported to council (cases received) - <mark>CSP</mark>	м		1440	1529	6%	168	94	116	23%	29%	370	450	331	378	•	14%		The increase in Q4 compared to Q4 last year is driven by reports made by a resident with MH issues, case referred and discussed at CMARAC, housing and MH team in charge of the case. FY reports are +6% on last FY - Adjusted figures (removing repeat reporting from this residents) would show a 2% decrease
Repeat victimisation rate of Community MARAC cases (%)	м		28%	20%	-7%	0 0% 2	1 17% 6	2 40% 5	23.3%	23.3%	2 20% 10	4 36% 11	2 10% 20	3 23% 13	•	13%	-5%	Received an additional three referrals that did not meet the threshold for Community MARAC. One repeat case, in line with monthly average YTD.
Repeat ASB Victims Rate	м		9%	5%	-4%	1 4% 24	1 4% 28	1 4% 26	0.3%	-5.2%	6 8% 74	3 4% 76	3 4% 76	3 4% 78		0%	-4%	Repeat victimisation rate in Q4 has decreased by 4% compared to Q4 last year. The end of FY figure is also 4 percentage points below the one for the previous FY.
ASB cases received - all (estates)	Q			1212							336	325	293	258		-12%		
Satisfaction with case handling (estates) Satisfaction with outcome (estates)		55.1% 58.0% 55.1% 58.0%				38% 40%	53% 50%		-9%3%									44% customer satisfied with handling of ASB case. 50% dissatisfied and 6% neither. 53% satisfied with finial outcome, 40% dissatisfied and 7% neither. 67% will recomend ASB service despite the low figure
Satisfaction with approach to ASB (estates)	Q										56%	55%	69%	78%		13%		with handling and finial outcome

