

Corporate and Community Overview & Scrutiny Board



Report subject	BCP Community Safety Partnership Annual Report
Meeting date	12 December 2022
Status	Public Report
Executive summary	<p>This paper sets out elements of development and delivery by the BCP Community Safety Partnership (CSP), 'Safer BCP' and its constituent agencies. It provides Members with an update since the last report to Overview and Scrutiny Panel in December 2021.</p> <p>The Local Government Act 2000 includes crime and disorder scrutiny as one of the functions the council must ensure its scrutiny arrangements cover. Sections 19 and 20 of the Crime and Disorder Act 1998 and related regulations require the Council to have a committee with the functions of reviewing and scrutinising decisions and actions in respect of the discharge of crime and disorder functions by "responsible authorities".</p> <p>The specifics of the duty are set out in the Police and Justice Act 2006, which also allows members to refer any "local crime and disorder matter" raised with them by anyone living or working in their area, to the Crime and Disorder Committee. The Board designated as the Crime and Disorder Scrutiny Committee must meet at least once every 12-month period to conduct the functions.</p> <p>Guidance issued concerning how this role should be conducted include that:</p> <ul style="list-style-type: none"> • the role should be one of a critical friend, providing constructive challenge at a strategic level. • the focus should be on the entire partnership and if issues arise that relate specifically to a particular partner agency, it may be more appropriate to refer such issues to the governing bodies of that organisation. • the scrutiny of partners should be "in so far as their activities relate to the partnership itself." • the list of issues to be scrutinised should be agreed in consultation with relevant partners.
Recommendations	<p>It is RECOMMENDED that:</p> <ul style="list-style-type: none"> i) Members note the progress of the Community Safety Partnership over the past year, to November 2022 ii) Members note the BCP Community Safety Strategy developed by Safer BCP and the Partnership's priorities,

	based on recommendations from the annual Community Safety Strategic Assessment.
Reason for recommendations	Corporate and Community Overview and Scrutiny Board are updated and made aware of the Safer BCP Community Safety Strategy for 2022-2025, its activities and achievements over 2021/22. The requirement for annual scrutiny is met.
Portfolio Holder(s):	Cllr Bobbie Dove – Cabinet Member for Community Safety and Regulatory Services
Corporate Director	Jess Gibbons, Chief Operating Officer, Strategy Directorate
Report Authors	Kelly Ansell - Director of Communities Mark Callaghan – Police Chief Superintendent and CSP Chair
Wards	Council-wide
Classification	For update and information

Background

1. Since the BCP Community Safety Partnership (CSP) reported to the Overview and Scrutiny Panel in November 2021, the Partnership has completed an assessment of crime, ASB, substance misuse and reoffending in 2020/21, the findings of which were used to inform the CSP strategic priorities for 2022-2025. The Strategic Assessment is attached at Appendix 1 and available at [BCP Strategic Assessment 2020-2021 \(saferbcp.co.uk\)](https://www.bcp.co.uk/saferbcp-co-uk) for detailed information.
2. In line with guidance, the CSP has developed a three-year Community Safety Strategy which was adopted by BCP Cabinet in September 2022, and this is delivered through the development and implementation of annual Community Safety Plans. The strategy outlines three strategic priorities, 13 objectives, and 12 key performance indicators.
3. The strategic priorities are:
 - a. Tackle violent crime in all its forms
 - b. Keep young people and adults-at-risk safe from exploitation, including online risks
 - c. Work with communities to deal with antisocial behaviour (ASB) and crime hotspots, including ASB linked to substance misuse
4. Board Members will be aware that CSP's are statutory partnerships that comprise local authorities, the police, fire and rescue authorities, probation, and health. They have a reciprocal duty to cooperate with the Office of the Police and Crime Commissioner, with responsibilities set out in legislation, to develop strategies and plans to reduce crime, anti-social behaviour, substance misuse, and reoffending as required by Sections 5 and 6 of the Crime and Disorder Act 1998 (as amended).¹
5. Specifically, the current statutory obligations of CSP's may be summarised as follows:
 - a. To establish a strategic group to direct the CSP's work

¹ <https://www.legislation.gov.uk/ukpga/1998/37/section/5> and <https://www.legislation.gov.uk/ukpga/1998/37/section/6>

- b. To set up protocols and systems for sharing information
 - c. To identify priorities via an annual strategic assessment
 - d. To engage and consult the community about community safety priorities
 - e. To produce (annually) a Partnership Plan and monitor progress against it
 - f. To develop strategies to reduce re-offending, substance misuse and domestic abuse
 - g. To commission Domestic Homicide Reviews
6. The CSP also has oversight of the work to prevent people from being drawn into terrorism, although the statutory Prevent Duty is on individual organisations rather than the CSP itself.
 7. Under forthcoming legislation in the form of the Police, Crime, Sentencing and Courts (PCSC) Act 2022, CSPs will be required to formulate and implement a strategy to prevent and reduce serious violence. A Serious Violence Duty will also be placed on local authorities, the police, fire and rescue authorities, specified criminal justice agencies and health authorities, requiring them to work together to formulate evidence-based analysis of serious violence in their local area and to develop a strategic response.

Summary of the 2020/21 Strategic Assessment

8. The last community safety Strategic Assessment has been the most comprehensive since the formation of BCP CSP, and although there are some aspects of crime and disorder that need deeper and ongoing analysis (such as prevalence and distribution), the CSP was much better informed as a result about the overarching issues that contribute to community safety concerns, and which pose increasing risks to the safety of residents and communities.
9. As such, the CSP was able to develop its first three-year Community Safety Strategy, setting out three top priorities for multi-agency focus on prevention, early intervention, and enforcement. This is in line with the public health approach adopted by the CSP, as noted in the 2021 annual report.
10. More information about the public health approach is outlined in the strategy attached at Appendix 2 and available here [BCP CSP Strategy \(saferbcp.co.uk\)](https://saferbcp.co.uk) but put simply, this approach takes account of the wider drivers of crime and disorder that affect the community, as well as specific groups, and develops multi-agency responses for immediate intervention but also for long-term preventative impact.
11. The Strategic Assessment highlighted that there was a reduction in police recorded crime in BCP through 2020 and into the early part of 2021, which is consistent with the 13% reduction nationally from 2019/20 (excluding fraud and computer misuse offences). However, it is worth noting that crime levels across the country had been significantly impacted by the COVID-19 pandemic and associated restrictions. The largest reductions in crime were between April and June 2020, corresponding with the first national restrictions beginning at the end of March 2020.
12. There was a reduction in most crime types, with downward trends in violent crimes, such as sexual violence, and violence with injury. The same was the case for sexual offences and can be explained through COVID-19 restrictions in the night-time economy. The data for 2021/22 already indicates that offences are likely to return to pre-pandemic levels.
13. Some offences increased during the pandemic restrictions however - mainly domestic violence and reports to the police about anti-social behaviour (ASB). There were also

upward trends in individual crime types in smaller geographical areas, such as a higher rise in domestic violence (by 5%) in Poole and Christchurch.

14. Higher levels of knife crime in Bournemouth went against the low-level trend across Dorset, with the average age of suspects having fallen from around 30 years to around 20 years, and increasingly, possession-of-a-knife offences are related to drugs.
15. An area for ongoing analysis is around the profile of young people (as victims and offenders) involved in County Lines and criminal exploitation. The assessment identified links between knife crime and drugs in the local data, with evidence of disproportionate impact on young people being perpetrators of robbery against other young people.
16. One of the negative impacts of the COVID lockdown was a national increase in reported ASB, with a significant number of incidents directly linked to breaches of restrictions and larger number of visitors to the BCP area. In the 2021 BCP Residents' Satisfaction Survey, people using or dealing drugs was one of the types of ASB considered by respondents to be a "very or fairly big" problem.
17. Police recorded ASB in the table below outlines the trend in ASB reported to the police, including the positive decline in 2021-2022.

YTD (Apr-Mar)	2018/19	2019/20	2020/21	2021/22
	BCP	BCP	BCP	BCP
ASB - Environmental	1363	997	2502	1411
ASB - Nuisance	11931	10617	13010	9357
ASB - Personal	1934	1400	1859	1670
Total	15228	13014	17371	12438

18. The full Strategic Assessment is in Appendix 1 and is published on the Safer BCP website [BCP Strategic Assessment 2020-2021 \(saferbcp.co.uk\)](https://saferbcp.co.uk).

Strategy and Priorities for 2022 - 2025

19. The Strategic Assessment identified the following issues for priority focus for BCP CSP:
 - 1) Tackle violent crime in all its forms
 - 2) Keep young people and adults-at-risk safe from exploitation, including online risks
 - 3) Work with communities to deal with antisocial behaviour (ASB) and crime hotspots, including ASB linked to substance misuse
20. The priorities and objectives were agreed by the CSP Executive Board after careful consideration of the issues outlined in the Strategic Assessment. The resulting strategy involved consultation with partners, including voluntary and community sector partners.
21. The CSP Executive Board has agreed a delivery structure with responsibility for ensuring meaningful and effective actions are developed to deliver the strategic objectives. For 2022/23 a number of actions have been agreed through multi-agency discussions across the structure, including two new strategic groups set up to coordinate the public health approach.
22. The 2022-25 Community Safety Strategy is attached as Appendix 2 and is published on the CSP website [BCP CSP Strategy \(saferbcp.co.uk\)](https://saferbcp.co.uk).

CSP Plan 2022 – 2023

23. The CSP is required to publish a summary of the partnership plan, regarding the need to bring it to the attention of as many separate groups or persons within the conurbation.

Following discussions among CSP members, the strategic action plan attached as Appendix 3 and available here [BCP CSP Action Plan 2022-23 Summary \(saferbcp.co.uk\)](https://saferbcp.co.uk), has been developed.

24. The CSP's strategic subgroups have developed more detailed workplans, bringing together a number of individual and collaborative actions to deliver against the strategy, priorities, and objectives.
25. The strategic sub-groups are made up of senior officers across partner agencies, with authority and responsibilities, to shape and develop policies and operational protocols, commission services and allocate resources. This is to ensure that the actions agreed have the sufficient support to impact how services are delivered, including changes and adjustments at operational levels.
26. One very important action for the Partnership is to develop information sharing and data analysis. This runs across all priorities, as there are gaps in some baseline information. A specific task and finish group has been established, consisting relevant information governance leads across agencies, the work of which will bring improved sharing of research, surveys, and assessments, as well as raw data where required.
27. Performance, outcomes, and impact are monitored by the strategic subgroups and reported to the CSP Executive Board through quarterly performance reports.
28. The Strategic Assessment will be refreshed annually and used to update the annual plans.

Other activities

29. Although a new CSP structure has been developed to match the new strategic approach, pre-existing groups and collaboratives have continued to deliver programmes and initiatives under the CSP remit. These include work on substance misuse, youth offending, child exploitation, and domestic abuse.

Youth Offending

30. According to the local performance data, the number of BCP first-time entrants into the criminal justice system shows a reduction over the last four years. While officers are pleased with this reduction, they have noted that there is less of a reduction in the age group under 14. Further analysis of the 25 children who entered the justice system in this age group between April 2020 and January 2022, identified overlaps with SEND (56%), school exclusions (92% fixed term & 44% permanent), being known to Children's Social Care (76%), and having their first contact with the police as a victim or witness of harm (96%).
31. This is meaningful information which helps to inform the strategic groups of intervention and engagement points so as to reduce further the number of BCP young people entering the criminal justice system.
32. Other achievements relating to youth offending and safeguarding include further work done to embed the Youth Justice Service's (YJS) 'trauma recovery model', including case formulations led by the YJS Psychologist and case consultations with the YJS nurses. NHS England funding has been secured for a fixed term 'trauma champion' in the service.
33. The YJS also developed a new 'standardised approach' to enable restorative justice responses with young people who commit offences against police officers and other emergency workers. In addition, an Early Help representative now attends the weekly YJS and Police Out of Court Disposal decision-making meetings to help divert children from the justice system and access suitable support.

34. The Summer Violence Prevention Programme has been delivered by Youth Services again this year (late July – early September) with funding secured as part of the Seasonal Response programme. This programme offers diverse activities to young people throughout the daytime, evenings and weekends as a diversion from risk-taking behaviours, exposure to exploitation or victimisation. Young people are engaged through BCP schools (60%), existing service user groups (25%), and 15% from high-risk groups or vulnerable cohort identified by the YJS, Children Social Care (CSC) or the CSP.
35. As well as being involved in strategic discussions about the nature of risks and vulnerabilities in BCP, Early Help services have been linked to Seasonal Response programme meetings alongside Parks, Seafront services, Police, Health, Licensing, Safe Bus, and the CSP's problem-solving groups, including deployment of the detached youth work workforce.
36. Data has been obtained from the Police recording system NICHE of reports from members of the public in the open spaces of Bournemouth Square, Central Gardens, Lower Gardens, Pier Approach and Seafront which confirms that there has been a decrease in the number of reported crimes in open spaces when compared to 2021. When comparing reported crime rates across the peak summer seasons from April 21 to August 21 and then April 22 to August 22, there was a 25.59% reduction during the summer 22 season. There is anecdotal evidence to support that the presence of proactive patrols by security, CSAS and Police in key areas acted as a strong deterrent. A similar reduction was seen in ASB reports this year. When comparing April 21 – August 21 to the same period in 2022, there was a 23.64% reduction in reported ASB despite a peak in July 2022 which is attributed to high footfall and influx of visitors as a result of the extremely warm weather over that period.
37. There has been focussed work in and around Poole Bus Station to support vulnerable young people and community members, including intelligence sharing and direct detached youth work connected to exploitation with transport, police, YOS, ASB team, Complex Safeguarding Team in CSC, Edge of Care Teams, MISPER (Missing Persons).
38. Using the Public Health Approach, mental health and other support is provided to young people by Early Help Navigators in schools, linked to the Safer Schools and Communities' team coordinated by the police. Intensive Family Support Teams are also involved in this whole system approach to deliver a graduated support response to children and their families. An Early Help representative now attends the weekly YJS and Police Out-of-Court Disposal decision-making meetings to help divert children from the justice system and access suitable support.
39. Bulleted below is the current BCP Youth Services offer, and although under review, delivers effective youth intervention to safeguard young people and prevent their involvement in criminality, exploitation, or victimisation.
 - YAP (Youth Access Point) Early Help and Intervention Toolbox (Sussed in Kinson, 507 in Boscombe, and Number 18 in Poole)
 - Youth offer team service – Open access informal educational and social developmental activities for young people at a local level (8 buildings across BCP)
 - Detached team service- Street and mobile based youthwork offered across the conurbation (2 units that move around BCP dependent on community intel and need)
 - Adolescent Support – Information, Advice and Guidance mentors (based in YAPs)
 - Targeted work for NEET (not in Education, Employment or Training), based in YAPs

Substance Misuse

40. The Partnership, with coordination by the Drug and Alcohol Commissioning Team (DACT), have been working to address the needs of the estimated 2,799 individuals with opiate and crack misuse in BCP and the 4,737 individuals who potentially have a dependency on alcohol. Based on the estimates of individuals with problems against the individuals engaging in treatment, BCP has an estimated unmet need of 84% for primary alcohol misusers, (numbers in treatment for alcohol October 2021 to September 2022 have decreased by 60 since the same period 2020-21), and 55% estimated unmet need for opiate misusers (numbers in treatment for opiates October 2021 to September 2022 have increased by 92 since the same period 2020-21).
41. In the Government Drug Strategy 2021, Bournemouth was highlighted as having the ninth highest rate of opiate and crack misusers in England, 12.4 per 1,000 working adults, and being the eighth highest ranked area for individuals with multiple and complex needs - 15.05 per 1,000.
42. During the period 1 October 2021 – 30 September 2022, 2,475 adults accessed treatment in BCP (1,409 for opiate misuse, 473 for non-opiates, 593 for primary alcohol misuse), and 74 young people engaged in specialist treatment. (Latest NDTMS figures ref: <https://www.ndtms.net/>). Of those accessing treatment in the period, Public Health Dorset data identified three referrals with the referral source as a Drug Rehabilitation Requirement Court Order. The number of referrals with the referral source as an Alcohol Treatment Requirement Court Order was five. Court orders are for a six month to three-year period, as determined by the presiding magistrate or judge.
43. Since the start of the Naloxone project (2016) up to 31/10/2022, 1,588 kits have been issued to people in drug treatment and 745 to people not in drug treatment (family, friends, people who use opiates but who are not in treatment). 83 kits have been issued to front line workers. BCP Council staff who come in to contact with people at risk of opiate overdose can now voluntarily chose to attend Naloxone training and subsequently carry a kit. Council staff are offered a choice to carry Nyxoid (nasal naloxone) or Prenoxad (injection naloxone). Between 2018 and 2020 drug related deaths remained static at under 30 deaths per annum. However, in 2021 there was an increase in drug related deaths nationally and locally – with 40 suspected drug related deaths in BCP.
44. During 2021-2022, DACT was successful in being awarded additional funding on top of the allocation from the Public Health Grant. The funding breaks down as follows:
 - £900,297 for treatment for individuals who are homeless, at risk of homelessness or rough sleeping who require substance misuse treatment;
 - £414,000 for interventions to get people into treatment to cease their criminal activity; and
 - £76,000 as part of a consortium to open a new detox facility
45. Some of the additional funding has been used to:
 - Introduce a homeless substance misuse team, who assertively target individuals in temporary accommodation and /or rough sleeping and work with people at risk of eviction
 - Expand the Criminal Justice Team from 1.5 FTE workers to 7.6 FTE. This has allowed additional interventions to be delivered. The number of residents on Out of Court Disposals for substance misuse increased from 30 in 2020/21 to 133 in 2021/22. Outreach is undertaken daily in police custody suites and magistrate courts, and assertive outreach is undertaken on newly released prisoners and in areas with known anti-social behaviour linked to substance misuse, in partnership with CSAS officers; and
 - Send additional individuals into inpatient detoxification units and residential rehabilitation centres and offer specialist trauma counselling to people

46. The Council recommissioned the legacy treatment systems for young people and adults and merged provision into one new treatment system which covers BCP. The new provider for all provision is We Are With You, and the transfer of services commenced on 1st November 2021. The transfer has taken time due to approximately 1,700 service users and 50 members of staff needing to be transferred. New community delivery hubs have been set up in Christchurch and Poole, and a local office established in Christchurch. A new local office is due to open in Poole town centre in Autumn 22 and access to provision in Bournemouth has remained the same.

Combatting Drugs Partnership

47. The Government's Drug Strategy, From Harm to Hope, published in December 2021, stated that successful delivery of the strategy in local areas relies on co-ordinated action across a range of local partners, including enforcement, treatment, recovery and prevention. Guidance was issued to local authorities in the Summer of 2022, outlining how local areas should deliver the government's ambition including the creation of a Combating Drugs Partnership (CDP) in local areas based on a footprint agreed locally.

48. In this area, BCP and Dorset Council's along with other strategic partners decided to have one partnership to cover this region. The partnership should build on, and work alongside, existing programmes and structures already in place. Each partnership, when agreed, had to nominate a Senior Responsible Owner (SRO), who will be accountable for progress against frameworks, supporting metrics and report back to central government on a regular basis. The SRO for the pan Dorset CDP is the Police and Crime Commissioner, David Sidwick.

49. CDPs are multi agency forums who are accountable for delivering the outcomes and targets set by the government within the Combating Drugs Outcome Framework. The Government has set priorities for the first 6 months for CDPs to achieve:

- Partnership geography, membership – Aug 22
- Nominate a SRO – Aug 22
- Agree Terms of Reference – Sep 22
- Hold the first CDP meeting – Sep / Oct 22
- Produce a local needs assessment – Nov 22
- Produce a delivery plan and performance framework – Dec 22
- Complete a self-assessment on commissioning quality standards for the partnership – Jan – Mar 23
- Review progress against plan and local outcomes – April 23

Domestic Abuse

50. The BCP 'Preventing Domestic Abuse Strategy 2020-2023' sets out the key priorities and areas for action for the BCP Community Safety Partnership in tackling domestic abuse. The strategy has four key priorities:

- a. Priority 1- preventing violence and abuse
- b. Priority 2- provision of services
- c. Priority 3- partnership working
- d. Priority 4- responding to perpetrators

51. In 2021, in line with Government requirements through the Domestic Abuse Act 2021, BCP Council commissioned a domestic abuse safe accommodation needs assessment.

This was carried out by Standing Together, of behalf of the council, and concluded in September 2021. Along with the BCP 'Preventing Domestic Abuse Strategy 2020-2023' the recommendations of the needs assessment formed the basis for the CSP's 'Domestic Abuse Strategy Delivery Plan 2020-2023'. The actions have been split across the three-year plan, with the priorities for this current year including the need to reintroduce domestic abuse awareness training within the council, and for linked commissioned services, and to scope and prepare for the re-commissioning of council domestic abuse services with conversations with partner agencies regarding of wider co-commissioning of services. A detailed needs assessment has been undertaken which will inform the development of service specification for the commissioning of these services. In relation to the domestic abuse training a 2.5 hr awareness raising training package has been offered to Adult Social Care and Children's Social Care staff initially from November 2022 onwards, and this will be offered out to other council departments and some partner agencies from January 2023. A full day's course will be offered to front line staff from January 2023, for those who need a more in-depth knowledge. Early conversations with the Police, OPCC and councils are about to commence regarding the potential to co-commission domestic abuse support services to provide a better service to victims.

52. In relation to domestic abuse, the Partnership continues to support the Up2U family intervention programme, which works with both males and females from the age of 16, including people who use abusive or unhealthy behaviours in their relationship, as long as they accept that they use these behaviours and want to change them. A review and cost/benefit analysis of 19 cases during 2021-22 identified that, at an annual cost of circa. £53k, the estimated cost saved by BCP Council and law enforcement, in terms of costs averted, was circa. £933k.
53. This analysis is based on a relatively short-term approach that takes no account of longer-term savings, in terms of Adverse Childhood Experiences eliminated or reduced, or of non-quantifiable benefits such as increased happiness and reduced misery.
54. Up2U recognises that people use domestic abuse for different underlying reasons, ranging from childhood trauma and emotional deregulation, learned behaviour, attitudes that support gender differentials, poor conflict resolution, to the use of power and control, resulting in different typologies of domestic abusers. Typical outcome measures include the number of children prevented from going into care or removed from children in need plans, abstinence from alcohol and drugs, employment secured, improved mental wellbeing, and reduction in domestic abuse/violence incidents.
55. The latest data (Quarter 2) relating to Domestic Abuse is detailed in the table below and shows a trend of reductions for all three indicators.

		2022 / 2023 Year			
Domestic Abuse – Violent Crimes	4708 (Q1 = 1353, Q2 = 1241, Q3 = 1106, Q4 = 1008)	1104	964		
☞ DV Violent Crime includes Assault, Sexual Assault, and Harassment offences, within the context of Domestic Abuse.					
Domestic Abuse - Incidents	6554 (Q1 = 1786, Q2 = 1759, Q3 = 1619, Q4 = 1390)	1439	1365		
☞ Incident classed as Domestic Abuse, recorded by Police, but which does not constitute a criminal offence.					

56. Members may take some comfort and assurance in the fact that 2021/22 saw no new cases of domestic homicides referred to the CSP for review, especially following the national increase in domestic incidents during the COVID lockdown. This may indicate that the interventions during those most challenging periods had some positive impact in keeping people safe from the most serious risks through domestic violence. All Domestic Homicide Reviews (DHR) from recent years have been completed and recommendations from the learning added to the CSP's DHR Action Plan. There are 4 reviews going through the Home Office's quality assurance process before being signed off. Unfortunately, this is a lengthy process, but the CSP works closely with both the Children's Safeguarding Partnership and the Safeguarding Adults Board to ensure relevant learning is applied to improve services as soon as possible.
57. NHS Dorset continue to work with the CSP as a key partner in supporting victims and safeguarding vulnerable residents. NHSE have funded a Virtual Learning Platform for all schools to support children and young people into understanding the consequences of making lifestyle choices, in particular, related to child criminal and sexual exploitation, County Lines, Gang culture, and knife crime.
58. Between April 2021 and March 2022, BCP's domestic abuse Multi-agency Risk Assessment Conference (MARAC), which deals with victims at high risk of serious violence, met 52 times and heard a total of 743 cases (795 in 2020/21). 455 (61%) of the cases had children listed as belonging to either victim, perpetrator, or both². Most victims live in Bournemouth (64%), with Poole averaging at 28% and Christchurch, 8%. As is the case nationally, most victims were female (92%), and the cases involved domestic abuse between partners or ex partners in 90% of cases. There were male victims in 59 cases.
59. Health partners are active participants in the Partnership's work, including chairing one of the CSP's strategic sub-groups and Dorset's High-Risk Domestic Abuse meetings. NHS Dorset is also involved in BCP's MARAC, which supports high-risk victims and the DRIVE programmes that works with domestic abuse perpetrators.
60. Dorset Healthcare attend Multi-Agency Public Protection Arrangements (MAPPA), a process through which the Police, Prison Service, Probation and others work together to manage risks posed by violent and sexual offenders living in the community. NHS Dorset are also involved in our Channel Panels, Contest Board and Prevent Partnerships, helping to support those whose vulnerabilities put them at risk of radicalisation.
61. NHS Dorset play a key role in identifying and supporting victims of domestic abuse and exploitation, including facilitating the roll out of Operation Encompass³ into midwifery and health visiting services. All health staff have had training, commensurate to their role, on domestic abuse and Prevent, with specialist safeguarding staff having completed WRAP⁴ courses. Specialist areas across health, e.g., Emergency Departments, Outpatients, Midwifery, public health nursing and sexual health services have enhanced training in respect to exploitation.
62. As well as all NHS staff having access to a national safeguarding App which provides many resources for victims of community safety issues to support their practice, all GPs have been trained in domestic abuse, with the safeguarding leads having received additional training. GP's have produced a mini assessment tool to identify victims of domestic abuse in a primary care setting, and NSHE have commissioned counselling services for victims of sexual abuse. The Sexual Assault Referral Centre provides a wraparound package of support for victims of sexual assault, of all ages.

² in many cases the children are no longer living with either party. They are often with another parent, or family member, and not in the care and custody of the people being discussed at the MARAC.

³ Operation Encompass enables police to notify schools and other services when a student has experienced domestic abuse.

⁴ Workshop Raising Awareness of Prevent (WRAP)

63. With significant potential to support the CSP's understanding of the distribution of crime and victimisation, including risks and vulnerabilities indicators, Dorset Insight and Intelligence Service has been developed and collects data on behalf of all multi-agency Partners to inform at population level ongoing trends and risks. The data will be available for analysis with other agency information to support a significant area of the CSP's work.
64. Other elements of support to the CSP work by Health partners include healthcare and access to treatment and medication for those who are homeless, offered via the Homeless Bus, and the mental health services drop-in to support those who live chaotic lives. There is also a specialist service for vulnerable people, supporting the offer of COVID vaccination to the most hard-to-reach individuals. Sexual Health services provide a confidential service to some of the most vulnerable people, and midwifery services sensitively and discreetly screen for domestic abuse, trafficking, drugs and exploitation on booking. Midwifery services are currently looking at the level of cocaine use among pregnant women, facilitated through the CSP, and in partnership with Adults and Children Social Care.

Anti-Social Behaviour

65. To coordinate effective responses to ASB and public space crimes, including hotspots, the Partnership Coordinating Group (PCG) meets monthly and include representatives from frontline services and agencies. The group takes a problem-solving approach in relation to the individuals involved and the locations where problems are persistent.
66. The PCG coordinates task and finish groups to develop and deliver responses, and over the past year, the areas and themes that received specific focus for problem-solving through the PCG include Poole Bus Station, Bournemouth Gardens and surrounds, Eastcliff & Springbourne, and youth involvement in knife crime.
67. Problem solving work within these groups have included major environmental clean ups, additional CCTV cameras, a newsletter to residents and businesses in Poole to update them about the partnership work carried out in Poole, including joint days of action, joint multi-agency briefings for outreach workers in the Bournemouth Town Centre area through the summer and joint work with British Transport Police.
68. The latest data relating to Anti-social behaviour is shown in the table below and shows a downward trend in relation to the total number of reports of anti-social behaviour to the police and also for reports relating to personal anti-social behaviour.

INDICATOR	2021/2022 Baseline	2022 / 2023 Year			
		1st Qtr	2 nd Qtr	3 rd Qtr	4 th Qtr
The total number of ASB reports to the police	12,440	3,399	3,310		
☞ Standard CSP data set					
Increase in the reporting of personal ASB to the police	1,672	416	394		
☞ Standard CSP data set					

Summary of key successes and next steps

69. In summary, the Safer BCP Community Safety Partnership has made significant progress since it last reported to the Overview and Scrutiny Board in December 2021. The Strategic Assessment identified a reduction in police recorded crime and downward trends in violent crime. The multi-agency Seasonal Response during the summer resulted in a reduction in ASB in lower gardens and the surrounding areas of 23.64%. Alongside this there has been a reduction in the number of young people entering the criminal justice system for the first time. However, the Strategic Assessment also identified increases in domestic abuse, higher levels of knife crime and increases in the number of suspected drug related deaths.
70. The revised structure of the CSP is now complete and all of the new strategic groups have been set up, have action plans and have met several times to work towards completing those action plans.
71. The revised structure of the BCP Community Safety team is also now complete and new staff are now in post and able to support both the BCP Council and the CSP in the work, actions and outcomes. The new staff started in October 2022 and are embedding quickly into the team and will be involved in many new projects over the coming months, across the whole conurbation.
72. The additional capacity in the analytical team allows for a better early indication of any crime and disorder trends which can then be tasked out through the BCP Partnership Co-ordination Group which provides an evidence-led problem-solving capacity to the CSP.
73. The re-introduction of the Domestic Abuse awareness training for BCP staff has been particularly welcome and has been provided as a neutral cost as it was negotiated within the current budget. Further training, workshops and learning are being planned for 2023 and beyond.
74. Examples of some of the joint project work includes: the Hotel Watch conference in May 2022, linking in with the scheme members to upskill them around making their businesses as safe as possible for their workers and clients, county-wide project work with Prejudice Free Dorset including a collaborative workshop at Knoll Beach in June 2022 for local businesses to be more inclusive regarding how to be more inclusive, and the celebration of the first 100 'completers' of the UP2U project, working with DA perpetrators.

Summary of financial implications

75. The revised structure of the CSP requires additional coordination and information analysis to ensure that the Partnership is proactive, effective, and reflective. This presents additional financial demands on partners, who are now being encouraged to support joint funding towards specific areas of the Partnership's business, such as domestic homicide reviews and information governance.
76. When new community safety initiatives are being commissioned by any of the partners, efforts will be made to commission jointly to spread costs and increase operational coverage. This will take time to embed but the Partnership will encourage this way of working going forward.

Summary of legal implications

77. The Crime and Disorder Act 1998 (as amended) 2011, established partnerships between police, local authorities, fire and rescue authorities, probation, and health. The purpose of these partnerships is to ensure that all these agencies work together to tackle local crime and disorder. The 1998 Act placed a central duty on these 'responsible authorities' to

produce audits of the area's local crime problems and implement strategies to tackle them.

78. Section 115 of the Crime and Disorder Act (1998) gave a power to any person or body to share information with partners for the purposes of reducing crime and disorder. This was strengthened by paragraph 5 of Schedule 9 to the Police and Justice Act that introduces a new section 17A of the 1998 Act which is a duty to share certain sets of depersonalised information.

Summary of human resources implications

79. The revised structure of the CSP requires additional coordination and administration. This is largely met by council and police staff. Measures are being pursued to involve staff from other partners, especially in providing data and analytical support.

Summary of sustainability impact

80. The Partnership is developing a strength-based approach which will include residents in developing local solutions to local problems. This, coupled with the Public Health Approach, will improve sustainability through early intervention and building on the strengths in communities.

Summary of public health implications

81. Public health and wellbeing are important by-products of a safer community. The work of the Partnership is to improve public health and community wellbeing by preventing crime and disorder, effectively tackling them when they occur, improving safety in the community, and reducing victimisation.

Summary of equality implications

82. Crime and disorder are unevenly distributed across the conurbation, and generally in inverse proportion to income levels. The overwhelming majority of victims of domestic abuse are women and children. Minority groups, including Black & Minority Ethnic people, people with disabilities and people from LGBTQ+ groups can suffer from hate crimes and incidents. Young people are disproportionately represented among both victims of crime and offenders, and elderly people often suffer from exaggerated fear of crime. There is well recognised race disproportionality in the criminal justice system.

Summary of risk assessment

83. Data management resources pose the greatest risk to the effective functioning of the Partnership. However, measures are underway to strengthen this area.

Background papers

None

Appendices

Appendix 1- BCP CSP Strategic Assessment [BCP Strategic Assessment 2020-2021 \(saferbcp.co.uk\)](https://saferbcp.co.uk/BCP-Strategic-Assessment-2020-2021)

Appendix 2- BCP CSP Community Safety Strategy [BCP CSP Strategy \(saferbcp.co.uk\)](https://saferbcp.co.uk/BCP-CSP-Strategy)

Appendix 3- BCP CSP Action Plan Summary 2022/23 [BCP CSP Action Plan 2022-23 Summary \(saferbcp.co.uk\)](https://saferbcp.co.uk/BCP-CSP-Action-Plan-2022-23-Summary)