



Havering

L O N D O N B O R O U G H

CRIME & DISORDER SUB-COMMITTEE AGENDA

7.00 pm

**Tuesday
29 August 2017**

**Town Hall, Main Road,
Romford**

Members 6: Quorum 3

COUNCILLORS:

Ian de Wulverton (Chairman)
David Durant (Vice-Chair)
Garry Pain

Ray Best
John Mylod
Brian Eagling

**For information about the meeting please contact:
James Goodwin 01708 432432**

Protocol for members of the public wishing to report on meetings of the London Borough of Havering

Members of the public are entitled to report on meetings of Council, Committees and Cabinet, except in circumstances where the public have been excluded as permitted by law.

Reporting means:-

- filming, photographing or making an audio recording of the proceedings of the meeting;
- using any other means for enabling persons not present to see or hear proceedings at a meeting as it takes place or later; or
- reporting or providing commentary on proceedings at a meeting, orally or in writing, so that the report or commentary is available as the meeting takes place or later if the person is not present.

Anyone present at a meeting as it takes place is not permitted to carry out an oral commentary or report. This is to prevent the business of the meeting being disrupted.

Anyone attending a meeting is asked to advise Democratic Services staff on 01708 433076 that they wish to report on the meeting and how they wish to do so. This is to enable employees to guide anyone choosing to report on proceedings to an appropriate place from which to be able to report effectively.

Members of the public are asked to remain seated throughout the meeting as standing up and walking around could distract from the business in hand.

What is Overview & Scrutiny?

Each local authority is required by law to establish an overview and scrutiny function to support and scrutinise the Council's executive arrangements. Each overview and scrutiny sub-committee has its own remit as set out in the terms of reference but they each meet to consider issues of local importance.

The sub-committees have a number of key roles:

1. Providing a critical friend challenge to policy and decision makers.
2. Driving improvement in public services.
3. Holding key local partners to account.
4. Enabling the voice and concerns to the public.

The sub-committees consider issues by receiving information from, and questioning, Cabinet Members, officers and external partners to develop an understanding of proposals, policy and practices. They can then develop recommendations that they believe will improve performance, or as a response to public consultations. These are considered by the Overview and Scrutiny Board and if approved, submitted for a response to Council, Cabinet and other relevant bodies.

Sub-Committees will often establish Topic Groups to examine specific areas in much greater detail. These groups consist of a number of Members and the review period can last for anything from a few weeks to a year or more to allow the Members to comprehensively examine an issue through interviewing expert witnesses, conducting research or undertaking site visits. Once the topic group has finished its work it will send a report to the Sub-Committee that created it and will often suggest recommendations for the Overview and Scrutiny Board pass to the Council's Executive.

Terms of Reference

The areas scrutinised by the Committee are in exercise of the functions conferred by the Police and Justice Act 2006, Section 19-22 and Schedules 8 & 9.

AGENDA ITEMS

1 CHAIRMAN'S ANNOUNCEMENTS

The Chairman will announce details of the arrangements in case of fire or other events that might require the meeting room or building's evacuation.

2 APOLOGIES FOR ABSENCE AND ANNOUNCEMENT OF SUBSTITUTE MEMBERS

(if any) – receive.

3 DISCLOSURE OF INTERESTS

Members are invited to disclose any interest in any of the items on the agenda at this point of the meeting.

Members may still disclose any interest in an item at any time prior to the consideration of the matter.

4 MINUTES OF THE PREVIOUS MEETING (Pages 1 - 4)

To approve as correct the minutes of the meeting held on 22 June 2017 (attached) and authorise the Chairman to sign them.

5 PERFORMANCE INDICATORS (Pages 5 - 10)

Report attached.

6 STREET TRIAGE - REPORT FROM HEALTHWATCH HAVERING (Pages 11 - 22)

Report attached.

7 UPDATE ON TRI-BOROUGH MODEL (Pages 23 - 26)

Report attached.

8 REPORT FROM SUPERINTENDENT RESPONSIBLE FOR NEIGHBOURHOODS (Pages 27 - 34)

Attached.

9 REPORT FROM SUPERINTENDENT RESPONSIBLE FOR PROTECTING VULNERABLE PEOPLE (Pages 35 - 38)

Attached.

10 VIOLENCE AGAINST WOMEN AND GIRLS (Pages 39 - 48)

Report attached.

11 URGENT BUSINESS

To consider any other item in respect of which the Chairman is of the opinion, by reason of special circumstances which shall be specific in the minutes that the item should be considered at the meeting as a matter of urgency.

12 EXCLUSION OF THE PUBLIC

To consider whether the public should be excluded from the remainder of the meeting on the grounds that it is likely that, in view of the nature of the business to be transacted or the nature of the proceeding, if members of the public were present during these items there would be disclosure to them of exempt information within the meaning of paragraph 7 of Schedule 12A of the Local Government Act 1972; and, if it is decided to exclude the public on these grounds, the Committee to resolve accordingly on the motion of the Chairman.

13 ANTI-TERRORISM (Pages 49 - 50)

Report attached.

14 REPORT ON GUN AND KNIFE CRIME (Pages 51 - 52)

Report attached.

Andrew Beesley
Head of Democratic Services

This page is intentionally left blank

Public Document Pack Agenda Item 4

**MINUTES OF A MEETING OF THE
CRIME & DISORDER SUB- COMMITTEE
Committee Room 2 - Town Hall
22 June 2017 (7.00 - 8.45 pm)**

Present:

Councillors Ian de Wulverton (Chairman), David Durant (Vice-Chair) and Brian Eagling.

Apologies for absence were received from Councillors Ray Best, John Mylod and Garry Pain

1 DISCLOSURE OF INTEREST

There were no declarations of interest.

2 MINUTES OF THE MEETING

The minutes of the meeting of the Sub-Committee held on 20 April 2013 were agreed as a correct record and signed by the Chairman.

3 METROPOLITAN POLICE UPDATE ON TRI-BOROUGH MODEL

In the absence of the Borough Commander consideration of this item was deferred until the next meeting.

4 METROPOLITAN POLICE REPORT ON NEIGHBOURHOOD POLICING

In the absence of the Borough Commander consideration of this item was deferred until the next meeting.

5 2017-2018 WORK PROGRAMME

Officers had prepared a draft Work Programme for the Sub-Committee's consideration. Officers had met with the Borough Commander of the Tri-Borough Pathfinder and he had agreed that it would be a good idea if the senior officers responsible for the different areas could attend to discuss their areas of expertise.

Having considered the report, the Sub-Committee **agreed** to adopt the work plan set out below for 2017/18:

**Crime & Disorder Sub-Committee
2017/18**

Committee Date	Report	Author
29 August 2017	Update on Tri-Borough model	Metropolitan Police
	Report from Superintendent responsible for Neighbourhoods	Metropolitan Police
	Report on Knife and gun crime in the borough	Metropolitan Police
	Report on Anti- Terrorism	Metropolitan Police
	Report from Superintendent responsible for Protecting Vulnerable People	Metropolitan Police
	Domestic Violence	Community Safety
	Violence Against Women and Girls including draft strategy	Community Safety
	Performance Indicators Quarter 1	Community Safety
30 November 2017	Report from Superintendent responsible for Investigation	Metropolitan Police
	Serious Group Violence Work programme	Community Safety
	Reducing Re-Offending Work Programme	Community Safety
	Deep Dive in to Re-Offending data	NPS/CRC
	Performance Indicators Quarter 2	Community Safety
27 February 2018	Report from Superintendent responsible for Response	Metropolitan Police
	Update on Tri-Borough model	Metropolitan Police
	Managing the Night Time Economy	Community Safety
	Strategic Assessment	Community Safety
	Annual Report	Democratic Services
	Performance Indicators Quarter 3	Community Safety

6 CORPORATE PERFORMANCE REPORT QUARTER 4 (2016/17)

Officers provided details of the performance of the three Corporate Performance Indicators that fell under the Sub-Committee's remit. All three related to the SAFE goal.

Two of these indicators had ended the year with a red indicator, (these being number of anti-social behaviour incidents and number of total

notifiable offences reported. The indicator for repeat domestic violence cases going to MARAC ended with a green indicator.

The factors behind the red indicators were explained to the Sub-Committee.

From April 2017 the system of reporting on Performance Indicators had changed. The Council would no longer use the traffic light system to indicate how well the indicator was being met. Additionally, it had been agreed that each Overview and Scrutiny Sub-committee would chose two or three indicators which they would review each quarter.

After discussion the Sub-Committee **agreed** they would like to receive indicators as follows:

1. Comparison of numbers of Neighbourhoods establishment against actual;
2. Review of Police Response times; and
3. The proportion of ASB incidents relating to travellers.

7 SAFER NEIGHBOURHOOD BOARD ANNUAL REPORT

The Sub-Committee received the Annual Report of the Safer Neighbourhood Board.

Officers advised that the Board's Chairman, Trevor Mears had stood down and that Sasha Taylor had been elected as the new Chairman.

8 EXCLUSION OF THE PUBLIC

The Committee resolved to excluded the public from the meeting during discussion of the following item on the grounds that if members of the public were present it was likely that, given the nature of the business to be transacted, that there would be disclosure to them of exempt information within the meaning of paragraph 7 of Schedule 12A to the Local Government Act 1972 which could reveal information relating to the financial or business affairs of any particular person (including the authority holding that information) and it was not in the public interest to publish this information.

9 METROPOLITAN POLICE REPORT ON KNIFE CRIME

In the absence of the Borough Commander consideration of this item was deferred until he next meeting.

10 **METROPOLITAN POLICE REPORT ON TERRORISM THREAT LEVELS**

In the absence of the Borough Commander consideration of this item was deferred until the next meeting.

11 **PROVEN RE-OFFENDING RATES**

The Sub-Committee received a report from the National Probation Service providing details of Proven Reoffending Statistics for the period Jun-Dec 2014.

The figures for Havering were very positive being better than the national average and the London average for all but one set, the 35-39 age group. Here Havering had a reoffending rate of 29.3% compared to 21% in Barking & Dagenham.

The next set of data, only the second since the split between the National Probation Service and Community Rehabilitation Companies was due in August. Representatives from both organisations would be invited to the meeting in November to provide a more in depth report and analysis.

Chairman

CRIME AND DISORDER OVERVIEW AND SCRUTINY COMMITTEE

Subject Heading:	Crime and Disorder OSC Performance Indicators - Quarter 1 (2017/18)
SLT Lead:	Sarah Homer (Interim Chief Operating Officer)
Report Author and contact details:	Kit Weller, Community Safety Analyst, Community Safety and Development Team, 01708 433465
Policy context:	The report sets out Quarter 1 performance against indicators relevant to the committee
Financial summary:	There are no financial implications arising directly from this report

The subject matter of this report deals with the following Council Objectives

Communities making Havering	[X]
Places making Havering	[X]
Opportunities making Havering	[]
Connections making Havering	[]

SUMMARY

The report provides information on performance against the indicators that the Crime and Disorder Overview and Scrutiny Committee has chosen to track this financial year. As such, this is the first time that performance against this particular basket of indicators has been reported to the Committee.

RECOMMENDATIONS

Members of the Committee are asked to review performance against the requested indicators and note the corrective action being taken to improve this.

REPORT DETAIL

'Deployable Police resources compared with establishment'

Data relating to the proportion of shifts where the minimum strength is met, abstractions, and sickness is not available for all officers at a borough level, due to Emergency Response Team officers currently being classed as working for the East Area Command Unit rather than the Havering Borough, as they had been classed prior to the tri-borough policing pathfinder commencing earlier this year.

Abstraction data is currently only available in the form of the total number of staff-hours worked by Dedicated Ward Officers (DWOs) in any month, and the number of hours for which officers are abstracted from their ward-based work. For example, there were a total of 5261 staff hours worked by DWOs in April, 5365 in May, and 5227 in June.

The information on abstractions cannot be broken down into numbers of officers abstracted, or the ranks which are abstracted. Exact details of abstractions are not provided; merely the staff-hours for all DWOs.

Figure 1. Percentage of Havering's Dedicated Ward Officers' time spent on ward-based duties or other activities

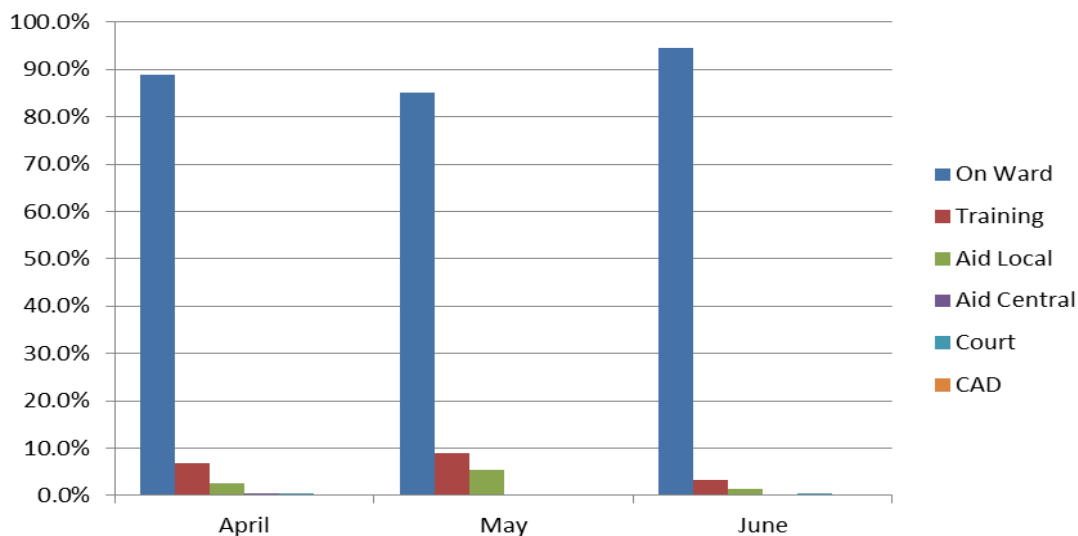


Figure 1 demonstrates that the majority of total hours worked by DWOs are spent on ward-based activities. June saw the highest proportion of time spent on wards however training and local aid commitments were lower than in April and May.

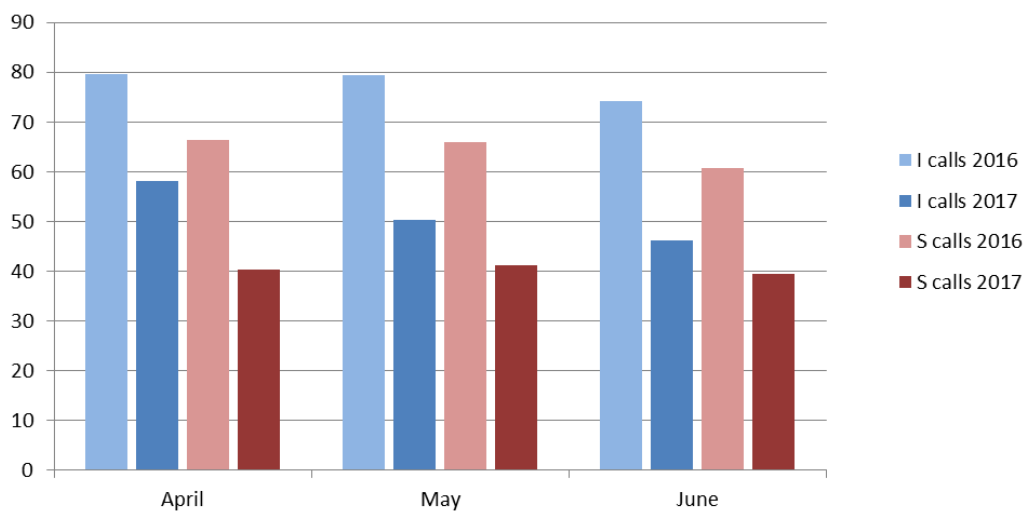
It is important to note that much of the training undertaken by officers is mandatory and relates to essential skills such as emergency life support, or officer safety training. Quarter 1 also saw DWOs undergo training on the new working methods and exactly what their DWO role comprises of under the new One Met model, which would account for a significant amount of the training shown above.

Average response times to Immediate (I) and Significant (S) Grade Incidents

The Metropolitan Police Service (MPS) has a target to reach 90% of I-graded calls within 15 minutes of the call being made. For the rolling year ending April 2017, the average response time was 14.33 minutes, with 72.4% of incidents reached within 15 minutes of the call being made. The average response times for April, May, and June 2017 respectively were 21.8 minutes, 23.6 minutes, and 28.2 minutes.

The MPS target for S-grade calls is to reach 90% within one hour of the call being made. For the rolling year ending April 2017, the average response time was 2 hours, 25 minutes; with 60.3% of these calls reached within one hour of the call being made. Q1 2017/18 saw average response times of 384 minutes (6 hours, 24 minutes) in April and May, and 682 minutes (11 hours, 22 minutes) in June.

Figure 2. Percentage of I and S grade calls reached in target time; 2016 against 2017



As shown in figure 2, the percentage of calls reached within the target times of 15 minutes (for I grade) and one hour (for S grade) has reduced when comparing April, May and June this year against the figures for 2016.

It should be noted that the Response teams have recently been challenged in terms of their deployable numbers. The aid requirements linked to recent critical incidents elsewhere in London have impacted the Response teams heavily and adversely affected these figures.

Notwithstanding this, a range of remedial actions are in place and planned to improve response times. The establishment of the Resolution Centre and Operation Pierrepoint have seen much of the outstanding demand removed from the system by officers dealing with outstanding actions through telephone calls to the victim. Adjustments to the Sergeant's role in the Operations Room have also assisted Metropolitan Police Central Control (Met CC) in the allocation of calls.

The addition of an extra Controller and an extra Dispatcher in the Met CC pod between the hours of 1100 and 2300 are also expected to have a positive impact going forward.

It is understood that improvements have been made within Quarter 2 which will be reported in the next quarterly performance report.

'Percentage of Anti-Social Behaviour Reports relating to Traveller incursions'

Interrogation of the Metropolitan Police Computer Aided Despatch system shows that in Q1 2017/18 there were 1,050 calls to the Metropolitan Police classified as relating to 'Anti-Social Behaviour' in Havering. This includes duplicate calls regarding a single incident. Of these, 11 calls (1%) related to three separate Traveller incursions.

IMPLICATIONS AND RISKS

Financial implications and risks:

There are no financial implications arising directly from this report which is for information only.

Adverse performance against some performance indicators may have indirect financial implications for the Council, particularly where targets are explicitly linked with particular funding streams and/or levies from other bodies.

Whilst, it is expected that targets will be delivered within existing resources, officers regularly review the level and prioritisation of resources required to achieve the targets agreed by the Cabinet at the start of the year.

Robust ongoing monitoring is undertaken as part of the established financial and service management processes. Should it not be possible to deliver targets within approved budgets, this will be raised through the appropriate channels as required.

Sam Gable, Strategic Finance Business Partner.

Legal implications and risks:

Whilst reporting on performance is not a statutory requirement, it is considered best practice to review the Council's progress against the Corporate Plan and Service Plans, and the associated performance indicators, on a regular basis.

Human Resources implications and risks:

There are no specific Human Resource implications or risks arising directly from this report.

Equalities implications and risks:

There are no specific equalities implications and risks arising directly from this report.

BACKGROUND PAPERS

None

This page is intentionally left blank

CRIME & DISORDER SUB-COMMITTEE, 29 AUGUST 2017

Subject Heading:	Street Triage - Report from Healthwatch Havering
Report Author and contact details:	Anthony Clements, Principal Democratic Services Officer, London Borough of Havering
Policy context:	The attached report details a recent review undertaken by Healthwatch Havering on the NELFT street triage scheme.
Financial summary:	No impact of presenting of information itself.

SUMMARY

The attached report on the NELFT Mental Health Street Triage Scheme is presented to the Sub-Committee by Healthwatch Havering. The Sub-Committee is asked to consider the report and take any action it considers appropriate.

RECOMMENDATIONS

1. That the Sub-Committee considers the attached Healthwatch Havering report, asks the Metropolitan to respond to the report and takes any other action it considers appropriate.

REPORT DETAIL

Officers will present and summarise the main features of the attached Healthwatch Havering report on the NELFT Mental Health Street Triage Scheme. This follows a decision by the Health Overview and Scrutiny Sub-Committee, at its meeting on 28 June 2017 to refer the report to the Crime & Disorder Sub-Committee in order that a response to the report could be sought from the Metropolitan Police.

IMPLICATIONS AND RISKS

Financial implications and risks: None of this covering report.

Legal implications and risks: None of this covering report.

Human Resources implications and risks: None of this covering report.

Equalities implications and risks: None of this covering report.

BACKGROUND PAPERS

None.

Enter & View

**NELFT
Mental Health
Street Triage Scheme**

Goodmayes Hospital
Barley Lane, Goodmayes IG3 8XJ

23 November 2016



What is Healthwatch Havering?

Healthwatch Havering is the local consumer champion for both health and social care. Our aim is to give local citizens and communities a stronger voice to influence and challenge how health and social care services are provided for all individuals locally.

We are an independent organisation, established by the Health and Social Care Act 2012, and are able to employ our own staff and involve lay people/volunteers so that we can become the influential and effective voice of the public.

Healthwatch Havering is a Company Limited by Guarantee, managed by three part-time directors, including the Chairman and the Company Secretary, supported by two part-time staff and a number of volunteers, both from professional health and social care backgrounds and people who have an interest in health or social care issues.

Why is this important to you and your family and friends?

Following the public inquiry into the failings at Mid-Staffordshire Hospital, the Francis report reinforced the importance of the voices of patients and their relatives within the health and social care system.

Healthwatch England is the national organisation which enables the collective views of the people who use NHS and social services to influence national policy, advice and guidance.

Healthwatch Havering is your local organisation, enabling you on behalf of yourself, your family and your friends to ensure views and concerns about the local health and social services are understood.

Your contribution is vital in helping to build a picture of where services are doing well and where they need to be improved. This will help and support the Clinical Commissioning Groups and the Local Authority to make sure their services really are designed to meet citizens' needs.

***'You make a living by what you get,
but you make a life by what you give.'***
Winston Churchill

What is an Enter and View?

Under Section 221 of the Local Government and Public Involvement in Health Act 2007, Healthwatch Havering has statutory powers to carry out Enter and View visits to publicly funded health and social care services in the borough, such as hospitals, GP practices, care homes and dental surgeries, to observe how a service is being run and make any necessary recommendations for improvement.

These visits can be prompted not only by Healthwatch Havering becoming aware of specific issues about the service or after investigation, but also because a service has a good reputation and we would like to know what it is that makes it special.

Enter & View visits are undertaken by representatives of Healthwatch Havering who have been duly authorised by the Board to carry out visits. Prior to authorisation, representatives receive training in Enter and View, Safeguarding Adults, the Mental Capacity Act and Deprivation of Liberties. They also undergo Disclosure Barring Service checks.

The visit that is the subject of this report was arranged through NELFT.

Although the visit was not undertaken as part of Healthwatch Havering's 'Enter and View' programme of visits using statutory powers, its content was similar and this report sets out the findings of Healthwatch participants.

Background and purpose of the visit:

Healthwatch Havering (HH) is aiming to visit all health and social care facilities in the borough. This is a way of ensuring that all services delivered are acceptable and the safety of the resident is not compromised in any way.

The Scheme

The NELFT Mental Health Street Triage Scheme is operated by NELFT in association with the Metropolitan Police, British Transport Police (BTP) and London Ambulance Service (LAS). Through the scheme, a dedicated team of mental health practitioners (the triage team) is available for call out by police or the LAS to assist with people who appear to have a mental disorder who are causing a disturbance in a public area. The intention is to avoid the unnecessary arrest and potential criminalisation of a person whose problem is essentially one of mental distress and whose care is better left to mental health professionals. Having responded to a call out, the triage team can assess the individual and decide whether the best course of action is to take them to a mental health facility, to the Emergency Department at an acute hospital or leave them for the police to deal with under their statutory powers. The scheme operates across the four Outer North East London boroughs, Havering, Barking & Dagenham, Redbridge and Waltham Forest.

At the invitation of NELFT, a team of Healthwatch Havering members attended one of the regular management meetings for the Scheme. The meeting was also attended by a Police Sergeant from Romford (who is the liaison officer for the scheme), a liaison officer from the BTP and members of the street triage team (the LAS had been invited to attend but did not do so). The discussion focused on the police use of Section 136 of the Mental Health Act, 1983 (which contains the statutory authority for police officers to initiate the “sectioning” of people who have mental disorders and can lead to their compulsory detention in a mental health facility). It was agreed that a police station custody area was not ideal as a place of safety for people showing mental health problems and one of the main objectives of the scheme was to ensure that properly trained police officers and others attended a location and dealt with the matter.

The mental health facility at Goodmayes Hospital has two rooms dedicated for the use of patients detained under Section 136.

Another objective of the team is to stop people being taken to an Emergency Department (A&E) suffering from apparent mental issues unless they need

immediate medical assistance for an injury or illness. The consensus is that an ED/A&E is really not an appropriate place of safety for those suffering from mental health issues, not least because of the pressure that such departments are under currently.

At the time of the visit, the triage team was operating Monday to Friday from 11am until 1am but not at weekends or on public holidays; from December 2016, the team was merged into the Integrated Acute Service Response Team with revised hours of 5pm-1am Monday to Friday, and 8am-12midnight at weekends and bank holidays. Typically, 2 or 3 incidents will be attended each day, with some additional referrals signposted. Outside the scheme's operating hours, police respond to people suffering mental disorder and deal with them as a policing issue. Police officers approach such people as sympathetically as possible but their training, priorities and powers are focussed on "maintaining the peace" rather than handling complex individual mental health problems and so they will take a person either to a police station as a place of safety or to an ED/A&E if that person is injured.

The BTP interest in the scheme stems from the fact that many people with mental health problems seek to end their lives by suicide on the railways, both National Rail and London Underground. The BTP is in the forefront of measures to reduce suicide on the railways and has developed training programmes for their own and railway operating staff to deal sensitively with people who have mental health problems.

Development of the scheme

Public service resources are, of course, heavily constrained. There are funding pressures, not only on the NHS but also on the police service (both Metropolitan and BTP). National policy is, however, moving to favour improvements in services for people in mental health crisis, not least to reduce their dependence on ED/A&E services and it may now be time to promote innovative, multi-agency schemes such as this. In the context of the railways, an incident caused by a person in mental distress can lead to

disruption in the travel arrangements of thousands of people, at enormous overall cost, both public and private.

The scheme clearly has the potential to be cost effective in supporting people in a mental health crisis. At present, outside the times when the triage team operates, police officers (who are largely untrained in mental health issues) are left to cope with people in mental health crisis as best they can; whilst the officers undoubtedly deal with the situation to the best of their ability, their efforts are no substitute for assessment by trained and accredited mental health staff.

Healthwatch Havering would therefore support any move to extend the operating times of the triage team, ideally to provide 24 hour cover all the time. While accepting that this is dependent on the availability of funding, it is surely more cost effective to provide specialist intervention at the earliest opportunity and avoid unnecessarily taking people in mental health crisis to a police station.

In the same vein, Healthwatch Havering believes that consideration should be given to providing the triage team with a dedicated LAS emergency vehicle able to use “Blues and Twos” (two tone siren and blue lights), in a similar way to the service provided by the K466 Rapid Response Car (run jointly by the LAS and NELFT) to attend calls to elderly people who have had a fall. This would enable the rapid deployment of triage team members to an incident - currently, they use ordinary vehicles that, complying with traffic law, can take a considerable time to get to an incident. This will require development with the LAS - but ought not to require much additional expense, given that an ambulance will often attend an incident in any event (and may even lead to some reduced cost, given that attendance by a paramedic in a car is less costly than deploying a crewed ambulance). It would also be possible for the paramedic to deal with minor physical injuries, thus avoiding need for unnecessary hospitalisation.

Ideally, the triage team could be supported by a team of dedicated police officers working from the same hub as the NELFT staff. That may not be practicable but arrangements should be made to provide all police officers in

the three boroughs (including their BTP colleagues) with an understanding of mental health issues and the work of the triage team.

Conclusions and recommendations

The street triage scheme appears to be an excellent idea that will lead to an improved service for people suffering from mental health crises in a public place. It will also ensure that police officers will no longer have to deal unnecessarily with events using their Section 136 powers. It is an innovation that deserves support and development, not least as a cost-effective alternative to dealing with people in mental health crisis by putting them at risk of being dealt with inappropriately through the criminal justice system.

To secure development of the scheme, the following recommendations are made:

To NELFT:

- (1) That consideration be given to operating the scheme for longer hours than at present, ideally on a 24-hour basis at all times;
- (2) That arrangements be made with the Metropolitan Police and the BTP for all police officers in the BHR area to be given training to enable them to cope confidently with people undergoing a mental health crisis up to the point where a mental health street triage team can intervene, without unnecessarily resorting to their Section 136 powers;
- (3) That the scope for use of a dedicated LAS vehicle to convey triage team members to an accident be explored with the LAS and police.

To the LAS:

- (4) That effort be made to ensure that a LAS officer of suitable seniority attends future meetings of the Street Triage Team;
- (5) That scope for use of a dedicated LAS vehicle to convey triage team members to an accident be explored with NELFT and the police;

To the Metropolitan Police and BTP:

- (6) That arrangements be made for officers in the BHR area be given training to enable them to cope confidently with people undergoing a mental health crisis up to the point when a mental health street triage team can intervene, without unnecessarily resorting to their Section 136 powers;

To the BHR and Waltham Forest Clinical Commissioning Groups:

- (7) That development of the Street Triage Scheme be supported, and that consideration be given to providing funding for:
 - (a) training police officers as recommended in (2) and (6) above
 - (b) further development of the scheme to provide up to 24 hour, all times cover; and
 - (c) use of an LAS vehicle to convey team members to incidents.

Healthwatch Havering would like to thank all staff who were seen during the visit for their help and co-operation, which is much appreciated.

Disclaimer

This report relates to the visit on 23 November 2016 and is representative only of those staff who participated. It does not seek to be representative of all service users and/or staff.

Participation in Healthwatch Havering

Local people who have time to spare are welcome to join us as volunteers. We need both people who work in health or social care services, and those who are simply interested in getting the best possible health and social care services for the people of Havering.

Our aim is to develop wide, comprehensive and inclusive involvement in Healthwatch Havering, to allow every individual and organisation of the Havering Community to have a role and a voice at a level they feel appropriate to their personal circumstances.

We are looking for:

Members

This is the key working role. For some, this role will provide an opportunity to help improve an area of health and social care where they, their families or friends have experienced problems or difficulties. Very often a life experience has encouraged people to think about giving something back to the local community or simply personal circumstances now allow individuals to have time to develop themselves. This role will enable people to extend their networks, and can help prepare for college, university or a change in the working life. There is no need for any prior experience in health or social care for this role.

The role provides the face to face contact with the community, listening, helping, signposting, providing advice. It also is part of ensuring the most isolated people within our community have a voice.

Some Members may wish to become **Specialists**, developing and using expertise in a particular area of social care or health services.

Supporters

Participation as a Supporter is open to every citizen and organisation that lives or operates within the London Borough of Havering. Supporters ensure that Healthwatch is rooted in the community and acts with a view to ensure that Healthwatch Havering represents and promotes community involvement in the commissioning, provision and scrutiny of health and social services.

Interested? Want to know more?

Call us on **01708 303 300**; or email
enquiries@healthwatchhaverling.co.uk



*Healthwatch Havering is the operating name of
Havering Healthwatch Limited
A company limited by guarantee
Registered in England and Wales
No. 08416383*

*Registered Office:
Queen's Court, 9-17 Eastern Road, Romford RM1 3NH
Telephone: 01708 303300*

Email: enquiries@healthwatchhavering.co.uk

Website: www.healthwatchhavering.co.uk



EA BCU Report to Crime & Disorder Sub Committee - August 2017

All screenshots within this summary update are taken from a regular update provided to the BCU by the One Met Model team

BCU Overview

The BCU Command Structure is still predominantly as was previously circulated to this forum as per the hyperlink attached

<http://democracy.havering.gov.uk/documents/g3673/Public%20reports%20pack%2022nd-Jun-2017%2019.00%20Crime%20Disorder%20Sub-%20Committee.pdf?T=10>

(Ref – Page 22)

4 Functional Superintendents provide leadership and delivery of core policing functions as below

Supt Sean Wilson – Response

Det Supt Jane Scotchbrook – Neighbourhoods

Det Supt Simon Warwick – Investigation

Det Supt John Ross – Safeguarding

The core roles for each portfolio again are listed as per in the BCU Overview access via the hyperlink in the above reference

Chief Inspector Beehag-Fisher has been aligned to the BCU under the response strand to provide functional support and resilience to it. This is owing to the fact of the larger and enhanced remits that the strand has taken on owing to investigation of low risk high volume crimes, in addition to traditional responsibilities such as response policing, and public order demand.

BCU Challenges

Response Times

As indicated by the below diagrams, response times to I graded calls have seen a reduction in achievement versus the charter time. This is reflected in the below graph (fig1) however should be seen in context with the figure below that which identifies a short term improvement following measures introduced (fig2)

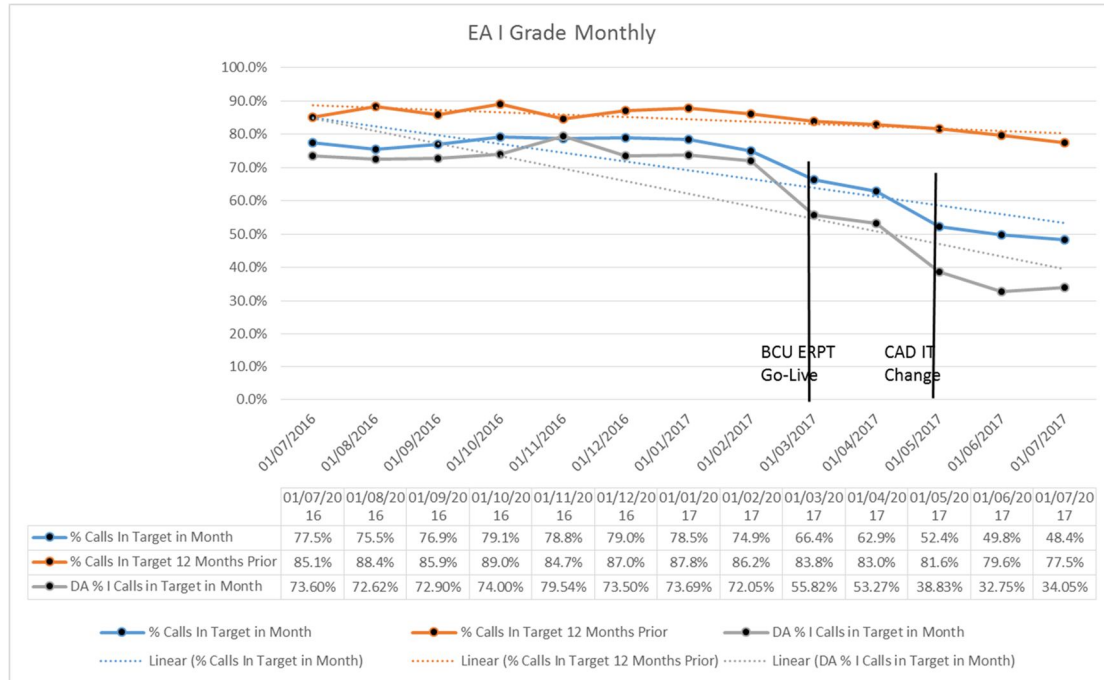


Fig 1 – Yearly performance for I/S Calls for EA

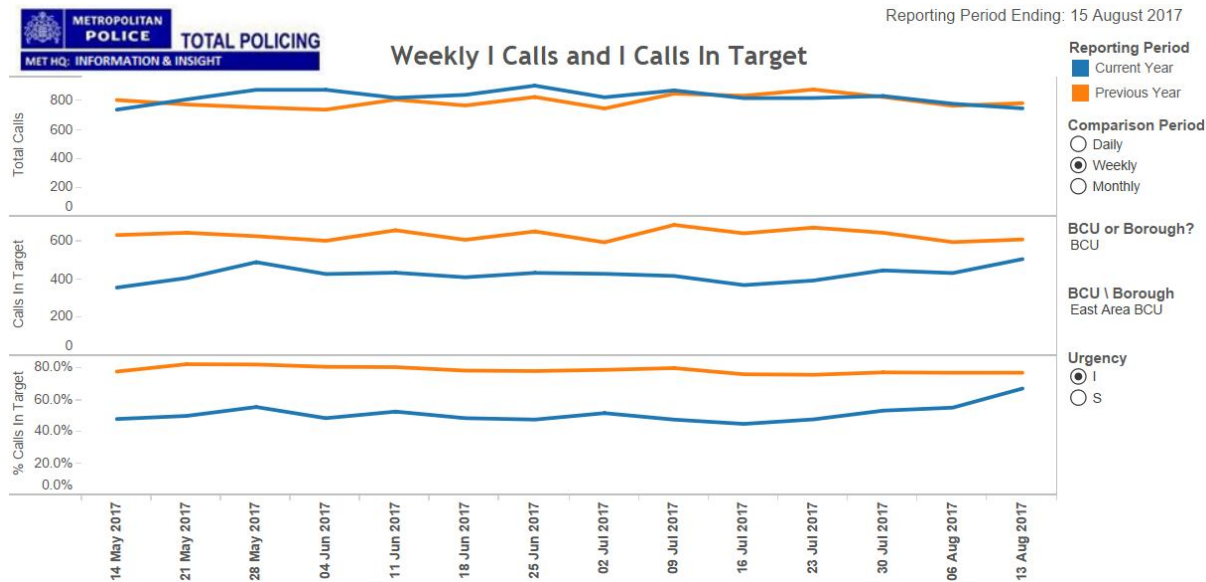


Fig 2 – Weekly summary showing recent recovery of I grade performance EA

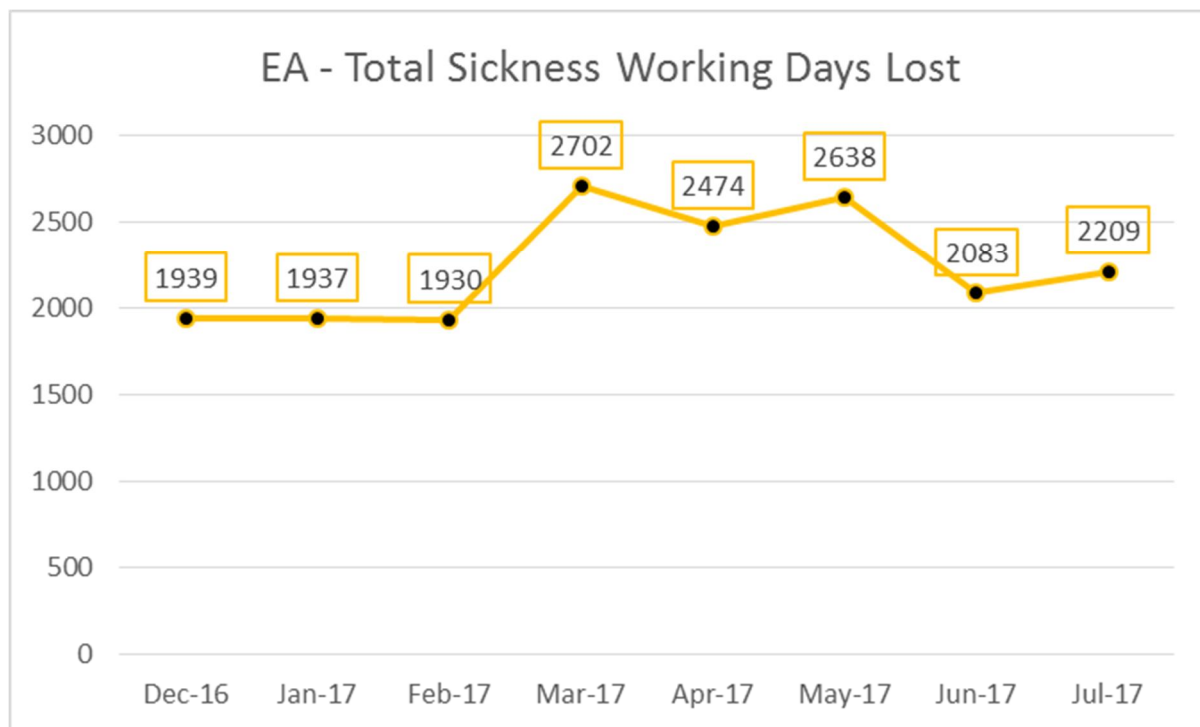
Steps Taken To Counteract

- Introduction of a Pathfinder Demand Management Unit (PDMU)

EA			UNASG-CNT
	DATE	AM/PM	
AVERAGE			98
Wed	02/08/2017	AM	141
Wed	02/08/2017	PM	123
Thu	03/08/2017	AM	163
Thu	03/08/2017	PM	145
Fri	04/08/2017	AM	141
Fri	04/08/2017	PM	113
Sat	05/08/2017	AM	96
Sat	05/08/2017	PM	103
Sun	06/08/2017	AM	89
Sun	06/08/2017	PM	72
Mon	07/08/2017	AM	62
Mon	07/08/2017	PM	57
Tue	08/08/2017	AM	63
Tue	08/08/2017	PM	16

- A Team of 18 recuperative officers working on a shift pattern basis (0700 to 2300) to remove low risk and high volume calls out of the outstanding incident list. This enables response officers to be freed to deal with new emergency calls.
- PDMU routinely dealing with and resolving 50-60 CADs per day, which depending on day to day fluctuations can account for as much as 10% of daily call volume
- Team Minimum Strengths enhanced to give greater resilience and volume of deployable officers to deal with outstanding calls. This has seen in the first week of operation from 2nd August a reduction in the unallocated call volume from 141 to 16 calls (**as per figure left**)
- Operations Clean Sweep/ Pierre Point utilising deployable officers (not abstracting DWOs off of their wards) to deal with CADs relating to local issues such as ASB

Attendance Management



A significant challenge has been the number of available officers not deployable through sickness. This is now showing signs of greater manageability looking at the right hand tail of the graph. The total number of days lost are tending to approach the levels pre BCU Implementation. **A renewed focus of this at the monthly SLT "Crime Fighters" meeting and a line by line intrusive approach at the BCU Attendance Management Meeting appear to be paying dividends.**

Investigations Update

Please refer to separate update provided by Det Supt Warwick

Neighbourhoods Strand Update

Please refer to separate update provided by Det Supt Scotchbrook

Safeguarding Update

Please refer to separate update provided on behalf of Det Supt Ross



Havering

LONDON BOROUGH



Violence Against Women and Girls (VAWG)

Overview and Scrutiny

2017/2018

Page 28

Diane Egan – Community Safety and Development Team
Manager



Overview

These are the items that will be discussed in today's presentation:

- DA statistics – Q1 2017/2018
- The VAWG strategy
- VAWG services in Havering
- MARAC
- MARAC statistics – Q1 2017/2018



DA Offences Data:

Page 30

Volume Indicators – Q1 2017/2018				
Indicator	2017-18 (Apr-Jun)	2016-17 (Apr-Jun)	Change No	Change %
DA offences	565	575	-10	-1.74
DA violence with injury	167	167	0	0
DA incidents	1029	1261	-232	-18.4
Alcohol related DA offences	27 (in April and May – average of 13.5 per month)	136 (in April to June, average of 45.3 per month)	-	-



The VAWG Strategy

- The VAWG strategy is due for review this year.
- This is being scrutinised with the support of a focus group, made up of members of the VAWG strategic partnership.
- Key theme's of change emerging are:
- A revised Sexual Relationship Education policy with focus on consent and healthy relationships education.
- Improved pathways when victims report as homeless as a result of domestic abuse as changes in homeless legislation are potentially going to cause additional pressures on the Local Authority.
- Incorporating MOPAC's focus area's of CSE, Harmful practices, trafficking and modern day slavery.



VAWG Services in Havering

- Havering Women's Aid – refuge and floating support.
- Solace counselling in Havering Children's Centres.
- Victim Support IDVA service based in the magistrates court and other dual borough locations.
- MARAC (Multi Agency Risk Assessment Conference).
- MASE (Multi Agency Sexual Exploitation) panel.
- Domestic Abuse Champions and further training.
- Domestic Abuse annual conference.



MARAC

The purpose of the MARAC is to support high risk victims a co-ordinated multi-agency approach.

Professionals can refer to the panel by completing a DASH-RIC questionnaire and can also refer on professional judgement.

The panel is chaired by the police and has regular key partners. Some of these are CYPS, SAT, Probation services, NELFT, Housing, Victim Support, Women's Aid etc.

MARAC occurs once every three weeks.

The MARAC referral form and DASH-RIC has now go live online:

<https://havering.firmstep.com/default.aspx/RenderForm/?ID=tjEotgduuH8&TestFillID=CJRHKxVY6tt>



MARAC Data:

Page 34

MARAC Data : Q1 2017/2018				
Indicator	2017-18 (Apr-Jun)	2016-17 (Apr-Jun)	Change No	Change %
Referrals to the DA/VAWG MARAC	67	57	+10	+17.5
% Rate of repeat MARAC referrals	22.4	44	-	-21.6
DA = Domestic Abuse; VAWG = Violence against Women & Girls;				



Crime & Disorder Overview and Scrutiny Meeting – Safeguarding Update.

Safeguarding Cars

The role of the car is to attend the call and take control of the investigation. The specialist officers assigned to this vehicle then use the resources at the scene as they see fit, requesting extra resource from the ROM if necessary. The purpose of safeguarding attending is to ensure that a high quality investigation is done straight away ensuring the victim is safeguarded from the outset. Officers have been directed that the members of the car prioritise getting control of and looking after the victim, whilst our colleagues at the scene (under safeguarding direction) work on the other building blocks of witnesses (local enquiries with neighbours included), suspects (arrest enquiries, searches), forensic evidence (seizures, photos, SOCOs), scenes (cordons, seizures, SOCOs) etc.

The demand modelling for this function predicted that there would be approximately 2 call-outs per day total.

We parade 2 cars of staff per shift, to be available to turn out to a crime which fits one of the 2 following criteria:

Criteria 1 – Both Vulnerable Victim AND Serious Crime

Vulnerable Victim

Defined as:

- The victim is a subject of Domestic Abuse
- Vulnerable due to significant mental/physical impairment
- Racially/Religiously Motivated or Homophobic or Transphobic

Serious Crime

Defined as:

- Serious Injury
- Lethal Barrelled Weapons
- Knife Enabled
- Substantial Loss to Victim
- Blackmail
- Rape or Serious Sexual Assault
- Child Abuse (Intra-Familial, Professional, Carer, Historic)
- Perverting Justice Offences
- Professional Judgement

Domestic Abuse

The cross-government definition of domestic violence and abuse is:

any incident or pattern of incidents of controlling, coercive, threatening behaviour, violence or abuse between those aged 16 or over who are, or have been, intimate partners or family members regardless of gender or sexuality. The abuse can encompass, but is not limited to:

- psychological
- physical
- sexual
- financial
- emotional

Criteria 2- Complex Incident

Defined as:

- Sudden and unexpected deaths of children (U18)
- Parental Child Abduction
- CSE
- Professional Judgement

PC Abstractions

PCs in Safeguarding have been protected from abstraction to ERPT at this time. This will allow them to concentrate on their core duties around safeguarding the boroughs most vulnerable.

Outstanding Suspects

All Domestic Abuse suspects will be circulated on EWMS within 24 hours.

It is the responsibility of the crimes sergeant to provide a list of all of the outstanding suspects to the night duty team for arrest enquiries to be conducted. This should hopefully result in more abusers being picked up quickly after an allegation of crime has been made, with the knock on effect of increasing victim confidence and satisfaction in the response of the police. Enquiries will be ordered by risk.

Where an arrest is not appropriate, a rationale needs to be recorded by the OIC on the DETS of the CRIS.

Mr Ross has commissioned a team of 3 to assist in gaining intelligence to locate suspects, which launched on the 14th August, with the objective of hunting down those who are wanted by police.

DVPN/DVPO

Domestic Abuse is a power and control issue, and in the absence of being able to prosecute the offender a DVPN is a core tactic in providing safety to the victim. A DVPN provides a power vacuum for DA professionals (IDVA etc) to operate within, with the victim.

If a No Further Action relates to a job where the suspect is:

- Over 18
- Has used or threatened violence
- There are no other control measures (bail/non mol etc)

Officers should be seeking a DVPN/DVPO on every occasion. We receive about 4-8 prisoners per day, and that our detection rates are about 30%, this would be 3-6 DVPNs or bail conditions per day.

MASH

Three CSU DCs are seconded into the new, larger MASH teams. Their role is to support decision making in relation to Domestic Abuse specifically and to engage in strategy discussions as needed. This supports recommendations resulting from a recent HMIC case examination. Until this point we have not had capacity to deliver on this. DC's will be selected from Teams, and will start on 04/09/2017. They will work from within one of the MASH departments in the Local Authorities. This will rotate every three months.

STAFFING

We have recruited a number of SOIT officers and some CAIT vacancies are being filled. This will ease the pressure on existing team members and leave others more accessible to the community and our victims.

This page is intentionally left blank

CRIME & DISORDER SUB-COMMITTEE, 29 AUGUST 2017

Subject Heading:	Violence against women and girls
Report Author and contact details:	Anthony Clements, Principal Democratic Services Officer, London Borough of Havering
Policy context:	The attached report details the prevalence and other information regarding violence against women and girls in Havering.
Financial summary:	No impact of presenting of information itself.

SUMMARY

The attached presentation on the strategy to prevent violence against women and girls is presented to the Sub-Committee. The Sub-Committee is asked to consider the report and take any action it considers appropriate.

RECOMMENDATIONS

1. That the Sub-Committee considers the attached information regarding violence against women and girls in Havering and takes any action it considers appropriate.

REPORT DETAIL

Officers will present and summarise information regarding the prevalence in Havering of violence against women and girls in Havering and strategies employed to deal with this.

IMPLICATIONS AND RISKS

Financial implications and risks: None of this covering report.

Legal implications and risks: None of this covering report.

Human Resources implications and risks: None of this covering report.

Equalities implications and risks: None of this covering report.

BACKGROUND PAPERS

None.



Haverling

LONDON BOROUGH

Page 41



Violence Against Women and Girls (VAWG)

Overview and Scrutiny

2017/2018

Page 42

Diane Egan – Community Safety and Development Team
Manager



Overview

These are the items that will be discussed in today's presentation:

- DA statistics – Q1 2017/2018
- The VAWG strategy
- VAWG services in Havering
- MARAC
- MARAC statistics – Q1 2017/2018

Page 43



DA Offences Data:

Page 44

Volume Indicators – Q1 2017/2018				
Indicator	2017-18 (Apr-Jun)	2016-17 (Apr-Jun)	Change No	Change %
DA offences	565	575	-10	-1.74
DA violence with injury	167	167	0	0
DA incidents	1029	1261	-232	-18.4
Alcohol related DA offences	27 (in April and May – average of 13.5 per month)	136 (in April to June, average of 45.3 per month)	-	-



The VAWG Strategy

- The VAWG strategy is due for review this year.
- This is being scrutinised with the support of a focus group, made up of members of the VAWG strategic partnership.
- Key theme's of change emerging are:
- A revised Sexual Relationship Education policy with focus on consent and healthy relationships education.
- Improved pathways when victims report as homeless as a result of domestic abuse as changes in homeless legislation are potentially going to cause additional pressures on the Local Authority.
- Incorporating MOPAC's focus area's of CSE, Harmful practices, trafficking and modern day slavery.

Page 45



VAWG Services in Havering

Page 46

- Havering Women's Aid – refuge and floating support.
- Solace counselling in Havering Children's Centres.
- Victim Support IDVA service based in the magistrates court and other dual borough locations.
- MARAC (Multi Agency Risk Assessment Conference).
- MASE (Multi Agency Sexual Exploitation) panel.
- Domestic Abuse Champions and further training.
- Domestic Abuse annual conference.



MARAC

The purpose of the MARAC is to support high risk victims a co-ordinated multi-agency approach.

Professionals can refer to the panel by completing a DASH-RIC questionnaire and can also refer on professional judgement.

The panel is chaired by the police and has regular key partners. Some of these are CYPS, SAT, Probation services, NELFT, Housing, Victim Support, Women's Aid etc.

MARAC occurs once every three weeks.

The MARAC referral form and DASH-RIC has now go live online:

<https://havering.firmstep.com/default.aspx/RenderForm/?ID=tjEotgduuH8&TestFillID=CJRHKxVY6tt>



MARAC Data:

Page 48

MARAC Data : Q1 2017/2018

Indicator	2017-18 (Apr-Jun)	2016-17 (Apr-Jun)	Change No	Change %
Referrals to the DA/VAWG MARAC	67	57	+10	+17.5
% Rate of repeat MARAC referrals	22.4	44	-	-21.6
DA = Domestic Abuse; VAWG = Violence against Women & Girls;				



By virtue of paragraph(s) 7 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted

This page is intentionally left blank

By virtue of paragraph(s) 7 of Part 1 of Schedule 12A of the Local Government Act 1972.

Document is Restricted

This page is intentionally left blank