



## **CRIME & DISORDER COMMITTEE AGENDA**

**7.30 pm**

**Tuesday  
8 May 2012**

**Town Hall, Main Road,  
Romford**

Members 9: Quorum 3

**COUNCILLORS:**

Ted Eden (Chairman)  
John Wood (Vice-Chair)  
Becky Bennett  
Denis Breading  
David Durant

Roger Evans  
Georgina Galpin  
Frederick Osborne  
Linda Van den Hende

**For information about the meeting please contact:  
James Goodwin 01708 432432  
james.goodwin@haverling.gov.uk**

## **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 committee has its own remit as set out in the terms of reference but they each meet to consider issues of local importance.

They 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; and
4. Enabling the voice and concerns of the public.

The Crime and Disorder Committee considers issues by receiving information from, and questioning, Cabinet Members, officers and external partners, particularly the Responsible Authorities, i.e. Metropolitan Police, Metropolitan Police Authority, Fire and Rescue Authorities, and Primary Care Trusts, 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.

Committees will often establish Topic Groups to examine specific areas in much greater detail. These groups typically consist of between 3-6 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 and site visits. Once the topic group has finished its work it will send a report to the Committee that created it and it will often suggest recommendations to the 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 DECLARATION OF INTERESTS**

Members are invited to declare any interests in any of the items on the agenda at this point of the meeting. Members may still declare an interest in any item at any time prior to the consideration of the matter.

### **4 MINUTES OF THE MEETING (Pages 1 - 4)**

To approve as correct the minutes of the meetings held on 16 February 2012 and authorise the Chairman to sign them.

### **5 POTENTIAL WORK PROGRAMME THEMES ARISING FROM AGEING WELL EVENT (Pages 5 - 14)**

Report attached.

### **6 DOMESTIC VIOLENCE IN HAVERING (Pages 15 - 34)**

Report attached.

### **7 COMMUNITY SAFETY FUND - COMMUNITY SAFETY SECTION 1ST APRIL 2011 - 30TH MARCH 2012. (Pages 35 - 54)**

Report attached.

### **8 ANNUAL REPORT (Pages 55 - 64)**

Report attached.

**9 NO PLACE FOR RACISM IN THE METROPOLITAN POLICE**

The Borough Commander will give an oral report on the 'Newham Incident' and the position in Havering.

**10 METROPOLITAN POLICE CHANGES.**

The Borough Commander will give an oral report.

**11 CRIME STATISTICS**

The Borough Commander will give an oral report.

**12 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.

**Ian Buckmaster  
Committee Administration &  
Member Support Manager**

**MINUTES OF A MEETING OF THE  
CRIME & DISORDER COMMITTEE  
Town Hall, Main Road, Romford  
16 February 2012 (7.30 pm- 8.40pm)**

**Present:**

Councillors Ted Eden (Chairman), David Durant, Roger Evans, Frederick Osborne, Linda Van den Hende, Linda Hawthorn (Vice-Chair, in the Chair) (In place of John Wood), Sandra Binion (In place of Georgina Galpin), Wendy Brice-Thompson (In place of Becky Bennett) and Keith Darvill (In place of Denis Breading)

Apologies for absence were received from Councillor John Wood, Councillor Rebecca Bennett, Councillor Denis Breading and Councillor Georgina Galpin

**50 MINUTES OF THE MEETING**

The Minutes of the meeting held on 29 November 2011 were agreed as a correct record and signed by the Chairman.

**51 LONDON PROBATION TRUST**

The Assistant Chief Officer - Barking, Dagenham & Havering LDU, London Probation Trust attended the meeting and delivered a presentation on the work of the Probation Trust in Havering. The focus of the Trust was to reduce re-offending. There were 780 offenders living in Havering. Of these 54% were community orders or suspended sentence orders,

The Committee were informed that there were 142 persons on licence, having previously been in prison. If they broke the terms of the licence they would be sent back to prison. 250 offenders were currently incarcerated, the majority in Pentonville. Offenders were regularly moved from prison to prison so Probation Officers had to travel a lot.

The Probation Trust work first with the offender then with the family. There was an Offender supervisor in prison who worked closely with the Probation Officer. The Probation Trust work with offenders who were sentenced to a 12 month custodial sentence or longer. No one worked with offenders who received a shorter custodial sentence.

The case load was mainly male (94%) with 60% being white British. This compared with 90% white British in 2000. There were 78 foreign national offenders in Havering.

The Probation Officer recommends the sentence to court trying to balance punishment with rehabilitation. Sentencing was no longer carried out at Havering, it was now done at Barkingside. The aim of the sentence plan is to reduce the chance of re-offending.

The Officer advised the Committee that 38% of the offenders had drink problems and many were linked to Domestic Violence. £2% related to drugs. Because of these numbers the Probation trust worked closely with the DAAT.

The re-offending rate in Havering was 7% this was lower than the London average, which was 8.4%, and better than Barking and Dagenham.

The average age of offenders were as follows:

28% in the age range 18-24  
24% in the age range 24-28  
25% in the age range 31-40.

The figures across London were similar.

The borough had the 8<sup>th</sup> lowest rate of Domestic Violence across London, although there had been a recent 5% increase. This was however linked to one of the highest arrest rates. However, 70% of the top 100 chaotic families were likely to suffer domestic violence.

The Committee **noted** the report and thanked Carina for her presentation.

## 52 **LONDON FIRE AND EMERGENCY PLANNING AUTHORITY**

Chris Drew, Borough Commander, London Fire Brigade attended the meeting and delivered a presentation on the work of the Fire Brigade in Havering. The Committee were advised that the borough benefits from 4 fire stations in the borough. These were based in Wennington, Hornchurch, Romford and Harold Hill. Harold Hill was the newest purpose built station in London.

In 2010/11 the Fire Brigade dealt with 927 fires, 597 special services and 1,109 false alarms in the borough. Whilst the number of false alarms seemed high this was a lot fewer than in previous years. Chris Drew explained a lot of these were generated by faulty alarms, both fire and carbon monoxide alarms.

The Committee were provided with details of the performance indicators against which the fire brigade would be judged. In Havering they would fail to meet the target for primary fires in dwelling and buildings other than dwellings. They would beat their target on arson.

The Committee were provided with details of particular problems faced by the Fire Brigade. These included:

- Fires in new developments, especially timber framed buildings;
- Fires in abandoned cars in country roads – here the news was good because by working closely with the council once an abandoned car had been identified it was removed quickly;
- Fires in outdoor buildings, such as garden sheds;
- Potential arson in unoccupied buildings refused planning permission;
- Potential Arson in business's affected by recession

On the positive side the Fire Brigade were running a number of initiatives designed to reduce the risk of fire. These included:

- LIFE: Local Intervention Fire Education
  
- CADETS: Community Cadets
  
- ATF: LFB Arson Task Force working in Borough
  
- JFIS: Junior Fire-setters Intervention Scheme
  
- Schools Teams
  
- Rural Strategy: Reducing Fires in Open Spaces
  
- ASB Panel

Members of the Committee had visited the LIFE project and were most impressed with the work done. The good news in 2013 the project would move to Romford whilst the Dagenham Fire Station was renovated.

It was brought to the Committee's attention that people stuck in lifts had been a problem. The Fire Brigades solution to introduce call challenge and if the call was not an emergency they could pass the problem over to the Council. If they were called to the same lift more than three times the organisation responsible for the lift would be charged for the Fire Brigades time. Chris Drew did advise the Committee that Homes in Havering had worked well with the Brigade to reduce the problem in their properties.

Finally the Committee were advised that hoax calls were not a serious problem in Havering.

The Committee noted the report and thanked Chris for his presentation.

## **53 YOUTH OFFENDING SERVICE**

The Committee received a report outlining progress in responding to the issues set out in the Improvement Plan drawn up following the Core Case Inspection of the Youth Offending Team. Following on from previous updates the Committee were informed that a full time Operations Manager had now been appointed for statutory cases. She had looked at the criticism

from the Lead Inspector regarding management oversight and has modified how information about management involvement in a case was recorded.

On the downside the existing Preventions Manager had resigned her post in November 2011. In a positive response to this resignation a very experienced locum Operations Manager had been recruited to provide both management input to the Team and increase the available knowledge about statutory work to assist in delivering the Improvement Plan.

Details of the on-going work with practitioners was provided giving the Committee a sense that real change was happening. Individual training needs had been identified and these were being pursued through the Children and Young People's training programme. Further training was planned on safeguarding and risk management utilising external trainers.

At our previous meeting concern was raised that staff were unable to access the Council's networks whilst engaged at Redbridge Court. We were pleased to note that through the work of the IT team this problem had been overcome. The Committee were advised of the effects of moving juvenile court work to Redbridge. The Council now shared the Court with Redbridge, and Barking and Dagenham and this meant we were picking up more of their cases. i.e. Havering Youth team was funded to deal with 90 cases, Redbridge 150 and Barking and Dagenham 200. On Havering day we were expected to deal with Redbridge and Barking and Dagenham cases.

The Committee **noted** the report.

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**Chairman**



## REPORT TO ALL OVERVIEW AND SCRUTINY COMMITTEES, MARCH-MAY 2012

<b>Subject Heading:</b>	Potential Work Programme Themes Arising From Ageing Well Event
<b>CMT Lead:</b>	Ian Burns, Acting Assistant Chief Executive, Legal and Democratic Services
<b>Report Author and contact details:</b>	Anthony Clements, Principal Committee Officer Tel: 01708 433065 anthony.clements@havering.gov.uk
<b>Policy context:</b>	The Council's overview and scrutiny powers and the need to ensure an effective overview and scrutiny process.
<b>Financial summary:</b>	No implications arising directly from this report.

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

Ensuring a clean, safe and green borough	<input type="checkbox"/>
Championing education and learning for all	<input type="checkbox"/>
Providing economic, social and cultural activity in thriving towns and villages	<input checked="" type="checkbox"/>
Valuing and enhancing the lives of our residents	<input checked="" type="checkbox"/>
Delivering high customer satisfaction and a stable council tax	<input type="checkbox"/>

### SUMMARY

Following the recent Ageing Well event considering priorities for older people in the borough, this report details some themes arising from the event that could be used as components of the overview and scrutiny committees' work programmes.

**RECOMMENDATION**

That Members consider the themes raised by the Ageing Well event and decide which, if any, should be added to the work programme of their Committees.

**REPORT DETAIL**

1. Members will be aware that, in January 2012, an event was held considering the implications for Havering of the growing elderly population and the Ageing Well agenda generally. The event was well attended with a number of Members and other stakeholders present. Groups and organisations dealing with the elderly who were represented included Age Concern, Havering Police and local NHS organisations.
2. The event produced a great deal of discussion and ideas from the delegates about what were considered the priority areas for older people (a number of members of the Havering Over-50s forum also attended and gave valuable input to the discussions). The results of these sessions are summarised in the appendix to this report.
3. Shortly after the event, several of the Overview and Scrutiny Committee Chairmen, assisted by officers, met informally to consider the outcomes from the event. A number of general themes emerged and these, along with some further suggestions, are listed below. It should be noted that this is not an exhaustive list and Members are welcome to use any of the information below or in the appendix to consider what items could be added to the Committees' work programmes.
  - Security and fear of crime including data protection issues
  - Lifestyle and social inclusion
  - The impact of housing and planning on older people
  - Accessibility and transport
  - Bereavement support
  - The impact on young carers
  - Safeguarding issues
4. Issues affecting older people are often wide ranging and it is likely that many of the issues listed above (or any others chosen by Members) may cover the remit of more than one Overview and Scrutiny Committee. This should not be seen as an obstacle to undertaking the work but Members may wish to give consideration to co-opting members from appropriate

other committees onto any topic group set up in response to the Ageing Well work. For example, a review of security and fear of crime led by the Crime & Disorder committee may find it useful to co-opt a member from the Towns & Communities overview and scrutiny committee in order to more fully consider the security aspects of housing design and related areas.

## **IMPLICATIONS AND RISKS**

### **Financial implications and risks:**

None arising directly from this report. Any financial implications arising from individual reviews would need to be considered as part of the report of the specific topic group.

### **Legal implications and risks:**

None.

### **Human Resources implications and risks:**

None, this work would be supported within the existing committee administration team.

### **Equalities implications and risks:**

The ageing well event was specifically focussed on issues affecting older people and hence sought to improve scrutiny of an area (age) that is a protected characteristic under the Equality Act 2010. Further scrutiny work in this area will assist in meeting the Council's equalities obligations.

## **BACKGROUND PAPERS**

Appendix: Feedback from Ageing Well Event Breakout Sessions, 19 January 2012, Havering Town Hall

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**Appendix: Feedback from Ageing Well Event Breakout Sessions, 19 January 2012, Havering Town Hall**

**Lifetime Housing & Health**

<b>Contributor's background</b>	<b>What is going well</b>	<b>What is not going well</b>	<b>Priority Areas</b>
Individual	<ul style="list-style-type: none"> <li>• Homes in Havering – tenants in need – contains service</li> <li>• LA – reablement. Occupational Health</li> <li>• Age Concern – partnership</li> <li>• Libraries service re info</li> <li>• Information – downsizing</li> <li>• Referral to chemists</li> <li>• Home blood tests</li> <li>• Polyclinic</li> <li>• Care at Queens</li> <li>• Patient choice/ Service Provision</li> </ul>	<ul style="list-style-type: none"> <li>• Dementia admission to hospital going into care homes and not home on discharge</li> <li>• Lowest survival rate in first year of cancer</li> <li>• Death rate 50% in falls</li> <li>• Unavailability of NHS Dental</li> <li>• Homes in Havering</li> <li>• First point of contact (Housing and Health, customer services, training)</li> <li>• Private sector – unsure where to access advice</li> <li>• Declining membership at libraries amongst older people</li> </ul>	<ul style="list-style-type: none"> <li>- Making sure voices are heard in the CCG</li> <li>- Discharge from hospital</li> </ul>
Community and voluntary sector	<ul style="list-style-type: none"> <li>• Homes in Havering – good partners</li> <li>• Training</li> <li>• Handyman service</li> <li>• Always someone on end of a phone</li> <li>• Gardening service</li> <li>• Bowel cancer screening</li> <li>• Day hospitals – full clinics</li> <li>• Personal budget</li> <li>• Age concern being totally independent</li> </ul>	<ul style="list-style-type: none"> <li>• Cross-related working</li> <li>• Removal of wardens from sheltered housing</li> <li>• Poor communication between partners</li> <li>• Apathy</li> <li>• Outcome of consultation and foregone conclusion</li> <li>• Major issue with discharge from hospital</li> </ul>	<ul style="list-style-type: none"> <li>• Homes in Havering work with older people</li> </ul>
Organisation and agency	<ul style="list-style-type: none"> <li>• Good liaison/communication with tenants</li> <li>• Lunch clubs run by Age Concern</li> <li>• Concessionary decoration</li> </ul>	<ul style="list-style-type: none"> <li>• Homes in Havering in implementation</li> <li>• GP commissioning – have a particular way of looking at things which may preclude other things</li> </ul>	<ul style="list-style-type: none"> <li>• Homes in Havering issues</li> <li>• Oversight of CCG's monitoring</li> </ul>

	<ul style="list-style-type: none"> <li>• Handyman services (HiH) – gardening etc</li> <li>• Health – emphasis on mental health – more awareness</li> <li>• Good new initiatives</li> <li>• Dementia liaison services</li> <li>• Hospital training</li> <li>• Housing transfer arrangements</li> </ul>	<ul style="list-style-type: none"> <li>• Housing provision is not fit for purpose – sheltered</li> <li>• OAP's become isolated</li> <li>• Reduction in in-patient beds</li> <li>• Failure to diagnose serious illness early enough</li> <li>• GPs not aware of symptoms of dementia</li> <li>• Wish Council would leave things alone if it is doing well</li> </ul>	<ul style="list-style-type: none"> <li>• Dementia services, esp. in health service.</li> </ul>
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### Remaining active & healthy

	What is going well	What is not going well	
Individual	<ul style="list-style-type: none"> <li>• Parks/open spaces</li> <li>• Adult gyms</li> <li>• Walking section social</li> <li>• Community/pensions clubs, dance clubs, active</li> <li>• Culture</li> <li>• Transport</li> <li>• Facilities for DIP second to none - everything you need</li> <li>• Use of allotment sites</li> </ul>	<ul style="list-style-type: none"> <li>• 2<sup>nd</sup> largest borough in London</li> <li>• cost of Dial-a-Ride prohibitive</li> <li>• compared to B &amp; D poorer service</li> <li>• need to pay for audio books</li> <li>• Transport</li> <li>• Safety in public</li> <li>• Not enough social activities in Romford</li> </ul>	<ul style="list-style-type: none"> <li>• Culture and Leisure Services</li> <li>• Dial-a-Ride</li> </ul>
Community and voluntary sector	<ul style="list-style-type: none"> <li>• Libraries/churches</li> <li>• Caring</li> <li>• Parks</li> <li>• Lots of open spaces</li> <li>• Concessionary swimming classes</li> <li>• Well being classes at centres</li> <li>• Walking clubs</li> <li>• Informed voluntary group (friends of Parks)</li> <li>• Volunteers are 50+</li> </ul>	<ul style="list-style-type: none"> <li>• Cost to health of stopping free swimming</li> <li>• Poor communication of activities</li> <li>• Integration of Services</li> <li>• People falling through the gaps</li> </ul>	<ul style="list-style-type: none"> <li>• Cost of Dial-a-Ride and poor service</li> <li>• Leisure activities for over 50s</li> </ul>

Organisation and agency	<ul style="list-style-type: none"> <li>• referrals from GPs to Hornchurch Sports Centre</li> <li>• rehabilitation service</li> <li>• Freedom Pass – keeps people active</li> <li>• Good leisure facilities</li> <li>• Good integration between services</li> <li>• Good CQC interventions and transformations</li> </ul>	<ul style="list-style-type: none"> <li>• Lack of coordination between agencies regarding preventative work</li> <li>• Transport access to Queens/St Francis Hospice</li> <li>• Gaps in bus provision (accessing care provision)</li> <li>• Subway access in Romford market</li> <li>• Fear of crime</li> <li>• Nil increase in community support</li> <li>• Sports co-ordinators lost</li> </ul>	<ul style="list-style-type: none"> <li>• Transport issues</li> <li>• Fear of crime amongst over 50s</li> </ul>
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### Financial security & social inclusion

	What is going well	What is not going well	
Individual	<ul style="list-style-type: none"> <li>• Age Concern</li> <li>• NELFT integrating social care/health</li> <li>• Community nurses</li> <li>• Willingness to engage with commissioners</li> <li>• IT training – access to Financial Services</li> <li>• Greater Choice</li> </ul>	<ul style="list-style-type: none"> <li>• Insurance provision and awareness (home/travel etc)</li> <li>• Increase in suicide rate and dementia</li> <li>• Mental health and separation of services</li> <li>• Parcels of high relative deprivation (unseen poverty)</li> <li>• Poor pension planning</li> <li>• Lack of access/understanding of what benefits and support are available</li> <li>• Power of attorney – lack of awareness</li> <li>• Misunderstanding of LPA</li> <li>• Dementia – putting people back in own homes</li> <li>• Right to choice where to live</li> <li>• Data Protection</li> </ul>	<ul style="list-style-type: none"> <li>• Financial awareness and social accessibility</li> <li>• Role played by putting a charge on housing for people who access services</li> <li>• Mental health services for older people</li> </ul>
Community and voluntary sector	<ul style="list-style-type: none"> <li>• Borough looking at financial inclusion</li> <li>• Work of Age Concern</li> <li>• Banking protocol</li> <li>• Advisory/signposting Services of Age Concern.</li> </ul>	<ul style="list-style-type: none"> <li>• People not necessarily aware of rights</li> <li>• Cannot access cash</li> </ul>	

Organisation and agency	<ul style="list-style-type: none"> <li>• <b>Super neighbourhood team</b></li> <li>• <b>Safeguarding</b></li> <li>• <b>Restructure of Dementia services</b></li> <li>• <b>Community engagement and awareness from London Fire Brigade</b></li> <li>• <b>Community provisions at Queens</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Safeguarding – care homes in the borough</b></li> <li>• <b>Relatives abusing parents to retain control</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Safeguarding</b></li> </ul>
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### Independent Living

	What is going well	What is not going well	
Individual	<ul style="list-style-type: none"> <li>• <b>Specialist Dementia Teams in hospitals</b></li> <li>• <b>Staying longer in own home and not forced to leave</b></li> <li>• <b>Home shopping delivery</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Lack of personal responsibility</b></li> <li>• <b>Lack of ICT literacy (impact of demographic changes)</b></li> <li>• <b>Change of family set up</b></li> <li>• <b>No dementia phone</b></li> <li>• <b>Subsidy to people and children – need to look after yourselves</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Domiciliary care</b></li> </ul>
Community and voluntary sector	<ul style="list-style-type: none"> <li>• <b>Lots of volunteers in Age Concern</b></li> <li>• <b>Aware of people with Dementia</b></li> <li>• <b>Good local shops and facilities</b></li> <li>• <b>Provision of ICT support from various sectors</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Risk to local shops/community facilities</b></li> <li>• <b>Lack of recognition and broader awareness</b></li> <li>• <b>Lack of practical support for over 65's</b></li> <li>• <b>Support for carers – not individuals with dementia</b></li> <li>• <b>Gaps not aware of</b></li> <li>• <b>No one for single persons</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Role of carers</b></li> </ul>
Organisation and agency	<ul style="list-style-type: none"> <li>• <b>Provision of ICT classes at Libraries</b></li> <li>• <b>Re-ablement Services</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>automation of services (telephones)</b></li> <li>• <b>old equipment used by reablement services, not possible to recycle</b></li> <li>• <b>cutting funding for Advocacy Project at Age Concern</b></li> </ul>	<ul style="list-style-type: none"> <li>• <b>Reablement service</b></li> </ul>



## Care & community issues

	What is going well	What is not going well	
Individual	<ul style="list-style-type: none"> <li>• <b>Emphasis of keeping people in their own homes</b></li> <li>• <b>LINK</b></li> <li>• <b>HUBB and LA very good</b></li> <li>• <b>Churches in the Community</b></li> <li>• <b>CQC value the person</b></li> <li>• <b>Good to have standards thresholds</b></li> </ul>	<ul style="list-style-type: none"> <li>• Demise of extended family</li> <li>• Isolation of many individuals</li> <li>• Feelings of vulnerability (media driven)</li> <li>• Services of St Francis Hospice not reaching everybody – focus on education and lifelong learning</li> <li>• Need intergenerational demographic cohesion</li> <li>•</li> </ul>	
Community and voluntary sector	<ul style="list-style-type: none"> <li>• <b>Work of the Hospice</b></li> <li>• <b>Low level of crime</b></li> <li>• <b>Reablement service is very good</b></li> <li>• <b>Providing improvement in the home</b></li> <li>• <b>Involvement of Older People (over 50s forum)</b></li> </ul>	<ul style="list-style-type: none"> <li>• Quality of Home Care variable</li> <li>• Home care – plenty of it</li> <li>• Crimes get missed because of lack of resources</li> <li>• Lack of neighbourliness (public awareness)</li> <li>• Emphasis of Safeguarding</li> <li>• Lots of work goes unseen in the voluntary sector</li> <li>• Churches/ religious groups not being included in some events</li> </ul>	<ul style="list-style-type: none"> <li>• Domiciliary care – quality issues</li> <li>• Safeguarding work</li> <li>• Hard to reach groups</li> </ul>
Organisation and agency	<ul style="list-style-type: none"> <li>• <b>Voluntary sector provides excellent service</b></li> <li>• <b>People's Housing Choices are respected</b></li> </ul>	<ul style="list-style-type: none"> <li>• Unrecorded crime</li> <li>• Lack of referrals to Hospice from GP's (no consistency)</li> <li>• Are there enough people to help the elderly stay at home.</li> <li>• Churches to be involved in all aspects of work</li> <li>• Need to consult with voluntary/ community sector when designing new services (LA/NHS)</li> <li>• Unaware of CQC legal powers</li> </ul>	<ul style="list-style-type: none"> <li>• Role of GPs</li> <li>• Role of churches &amp; community groups</li> </ul>

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**CRIME AND DISORDER  
COMMITTEE**

**REPORT**

**Subject Heading:**

Domestic Violence in Havering

**CMT Lead:**

Ian Burns

**Report Author and contact details:**

Diane Egan  
Community Safety Officer  
01708 432927

**Policy context:**

Crime and Disorder Reduction

**SUMMARY**

*The report highlights the level of domestic violence currently reported in Havering and the range of projects currently delivered across the Havering Community Safety Partnership*

**RECOMMENDATIONS**

*That Members consider the findings of the DV JSNA*

**REPORT DETAIL**

**1. Background**

In the UK the British Crime Survey has found that domestic violence accounts for between 16% and 25% of all recorded violent crime.

The World Health organisation has found that abused women are more likely to suffer from depression, anxiety, psychosomatic systems, eating problems and sexual dysfunction. The Department of Health states that between 50% and 60% of women mental health service users have experienced domestic violence, and up to 20% will be experiencing current abuse. It is estimated that 30% of domestic violence starts in pregnancy and domestic violence has been identified as a prime cause of miscarriage or still-birth and of maternal deaths during childbirth. Many

women use alcohol or drugs as a response to and a way of dealing with abuse. Women experiencing domestic violence are up to fifteen times more likely to misuse alcohol and nine times more likely to misuse other drugs than women generally.

The Department of Health estimates that

- at least 750,000 children a year witness domestic violence
- nearly three quarters of children on the 'at risk' register live in households where domestic violence occurs
- 52% of child protection cases involve domestic violence.

Previous Surveys in Havering would show that the picture is similar to the national perspective. Research has shown that children who live with domestic violence are at increased risk of behavioural problems and emotional trauma and mental health difficulties in adult life. Extensive research has shown that the link between child physical abuse and domestic violence is high, with estimates ranging between 30% to 66% depending upon the study (Hester et al, 2000; Edleson, 1999; Humphreys & Thiara, 2002). A recent survey by the NSPCC showed that one in five teenage girls has been hit by a boyfriend. Research into the needs of children affected by domestic violence found that their two primary needs are to be safe and to have someone to talk to. (Mullender, A et al. (2002) Children's perspectives on domestic violence.)

## **2. DV in Havering**

Domestic violence (DV) is prevalent in the borough. We know that it has a significant impact on the health and wellbeing of victims and their children.

DV is defined as:

"Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality. This includes issues of concern to black and minority ethnic (BME) communities such as so called 'honour based violence', female genital mutilation (FGM) and forced marriage."

The recent strategic assessment for Havering has found that between 1<sup>st</sup> of January 2011 and the 31<sup>st</sup> of December 2011 there were 1214 domestic violence offences within the Borough. Where the domestic violence is recorded as an offence three out of five (62%) are an assault (common assault, assault with injury, serious wounding or a sexual assault).

It is also to be expected that most victims are residents of Havering with only 7% being from other areas.

In one in five cases the victim is male. The recording of ethnicity by this crime system is quite poor but eight out of ten are white (83%). The current demographic of Havering will not be accurately known until late 2012 but it would appear that 'Afro-Caribbean' who account for one in ten cases (10%) may be over represented. It should be noted that in addition to the 1200 reported offences there are a further 2872 incidents recorded on the CRiS system where the incident was of a domestic nature but no statutory offence had been committed.

### Domestic Violence Forum

The Domestic Violence Forum meets on a bi – monthly basis and is attended by a wide range of statutory and voluntary partners.

A dedicated action plan has been developed to address domestic violence. This is currently under review and a revised action plan will be presented to the DV forum in May. This work is coordinated and monitored by the Community Safety Service.

A Joint Strategic Needs assessment (JSNA) was completed in 2011 (see appendix 1). The JSNA made a number of recommendations which the DV forum will seek to address through the revised partnership action plan.

### Having MARAC

The Multi-Agency Risk Assessment Conference (MARAC) aims to review and co-ordinate service provision in high-risk of harm domestic violence cases. The focus is to reduce repeat victimisation and preventing DV homicides. MARAC has a priority focus on victim safety with links to child protection and multi agency protection arrangements for violent and dangerous offenders. MARAC facilitates, monitors and evaluates effective information sharing to enable appropriate actions to be taken to increase public safety

Borough data for the Multi Agency Risk Assessment (MARAC) shows that for 2010/11:

- 109 cases were discussed
- These cases involved 112 children
- 13 cases were repeats
- 14 of these cases were from BME communities.

An Independent Domestic Violence Advocate (1 FT), funded jointly by LBH £18,000 and Home Office £18,000 till March 2013. The IDVA is provided by Victim Support to support the MARAC.

### Having Women's Aid

Having Women's Aid are commissioned by the local authority to provide the refuge accommodation and the floating support service. This is a three year contact from October 2011. Having Women's Aid have 23 flats and are commissioned to provide 230 hours per week for the Refuge and Floating Support Service.

Having Women's Aid is also commissioned by the local authority to provide a one year drop in and support group. This contract is £11 000 for 2012/13 Having Women's Aid provide a DV Support Group which was jointly funded £4,000 LBH, and £ 4,000 Having Police to hold 40 support group sessions in 2011-2012.

In 2010/2011 Having Women's Aid supported 1192 women, 539 children and 20 men.

Referral to the service is via a helpline and Having Women's Aid provides a wide range of services such as:

- Refuge accommodation for twenty three families
- A Floating support service to Women and Men in the Community
- Children's services for the refuge
- Children's services for the community
- Drop In service
- Support Groups
- Counselling Service
- Helpline
- 24 hour on call for emergencies

**IMPLICATIONS AND RISKS**

**Financial implications and risks:** The Council Part funds the DV IDVA based in VS and the DV advocacy project at HWA. Funding has been secured to continue these projects until March 2013. The Council are unable to confirm whether further funding will be available in 20113-14

**Legal implications and risks:** Nil

**Human Resources implications and risks:** Nil

**Equalities implications and risks:** Nil

**BACKGROUND PAPERS**

1. *Joint strategic Needs assessment (attached)*

### Domestic Violence

#### SUMMARY

##### 3.1 What Is The Level of Need in Havering?

- Around 5,460 women and girls in Havering are estimated to experience domestic violence (DV) every year. Actual figures may be higher than this as these estimates do not include men experiencing DV
- 4,880 women and girls annually are also estimated to experience sexual assault, and 9,670 to experience stalking in Havering
- It is estimated that the cost of responding to DV in Havering is £23.3million annually (not including the human and emotional costs)
- Over 1000 cases of DV were supported by Havering DV services in 2010/11
- Havering has the 8<sup>th</sup> lowest rate of DV offences and incidents (per 1000 population) out of the 32 London Boroughs
- Over a third of DV in Havering takes place at the weekend, and 1 in 10 cases occurs between midnight and 1am

##### 3.2 Current Service Provision in Havering

Services for those experiencing DV in Havering are delivered by a range of organisations such as Women's Aid and include:

- Refuge accommodation for 23 families, floating support for women and men in the community, children's refuge and community services, a drop in service, support groups, a counselling service, a helpline (including an on call 24 hour service for emergencies), skills and training support, an Independent DV Advocate (who supports risk of harm cases) and the East London rape crisis centre (not Havering specific)
- In 2010/11, Havering's Women's Aid supported 1192 women, 539 children and 20 men
- A MARAC (multi agency risk assessment conference) also operates locally. (where partners co-ordinate services for the highest risk DV cases to prevent repeat cases of DV) and supported 112 people experiencing DV in 2010/11. These high risk MARAC cases involved 112 children

##### 3.3 Gaps in Knowledge and Service Provision in Havering

- Referrals from health services including GPs to DV services are extremely low and currently regular information from DV services on health referrals is not captured
- Little feedback has been collated from local service users on their views on how services are supporting them and what improvements are required
- Intelligence on the incidence and nature of issues such as prostitution, sexual violence, trafficking, forced marriage, honour based violence and female genital mutilation in Havering is currently lacking
- An outcome monitoring framework needs to be agreed and implemented by all DV services in Havering
- Data systems used by Children's Social care do not record domestic violence as a reason for referral or a background factor. Due to this gap in data little information is currently shared about children in contact with social care who are experiencing DV

**3.4. Domestic Violence (DV): for decision makers and commissioners to consider:**

- Update and publish a DV and violence against women and girls strategy for Havering
- Engage GPs in the coordinated response to DV, to improve practice and generate referrals. Consider commissioning a pilot of Project IRIS with GPs, to improve primary care response to patients who are experiencing DV
- Ensure appropriate agencies and representatives attend the MARAC. Continue to improve the collation and analysis of MARAC data to understand the needs of those experiencing DV and to align services accordingly
- Work with health and social care to improve the availability of local DV data. Currently most local data on DV is provided by the police and including information from other partners would improve local intelligence on the prevalence of DV. There is also a need for local partners to begin to record information about areas such as forced marriage, honour based violence and female genital mutilation.
- Develop further joint commissioning for DV/violence against women and investigate the need for specialist services e.g. care for those girls and women affected by female genital mutilation or sexual violence
- DV Forum and Violent Crime Action Group to consider a DV awareness campaign to increase reporting of DV and increase confidence of victims to access help earlier
- Introduce DV performance indicators into the contracts of health service providers
- Consider commissioning specialist support services for families where DV has been identified e.g. a family DV support worker
- Consider how the East London rape crisis centre will be commissioned in the future and what resources will be available to support this commissioning (in 2013/14 when funding from the Mayor of London ceases)
- Develop a process with DV services for recording referrals received from health services to better understand health involvement in responding to DV
- Domestic Violence Forum to work with Havering Magistrate's Court to improve management of domestic violence cases, including information sharing, tracking of results and listing of cases to help support services attend court and support victims
- Partners to explore the use of the Barnardos Risk Assessment Matrix in conjunction with the MARAC risk assessment tool



## **1. WHAT DO WE KNOW ABOUT DOMESTIC VIOLENCE IN HAVERING?**

### **a) Introduction**

Domestic violence (DV) is prevalent in the Borough. We know that it has a significant impact on the health and wellbeing of victims and their children.

DV is defined by the government as:

"Any incident of threatening behaviour, violence or abuse (psychological, physical, sexual, financial or emotional) between adults who are or have been intimate partners or family members, regardless of gender or sexuality. This includes issues of concern to black and minority ethnic (BME) communities such as so called 'honour based violence', female genital mutilation (FGM) and forced marriage." (1)

DV has a financial impact on agencies and services and we know that it has a significant impact on the health and wellbeing of victims and their children. It is a major public health concern and is a priority safeguarding issues for children and adults.

The significance of domestic violence and its connection to child abuse is now well documented in research. In a recent study on Serious Case Reviews nationally, Marion Brandon noted that "the mention of DV permeated all types of reviews concerning babies, children and adolescents" (2). DV has been a feature of some Serious Case Reviews conducted in Havering since 2007. There were a number of relevant key learning points that affected the outcomes of some of these cases including: the failure to maintain focus on the child and failure to understand domestic violence.

DV is the leading cause of ill health for women aged 19 – 44, greater than cancer, war and motor vehicle accidents (3).

30% of DV starts or gets worse during pregnancy (4, 5).

Between 50% and 60% of women mental health service users have experienced DV, and up to 20% will be experiencing current abuse (6, 7).

The estimated costs of DV (not including the human and emotional costs) pro rated by population to Havering (8) is **£23.3 million**. The hidden costs to NHS in Havering in responding to DV (its immediate and the long term impact) is estimated to be **£7.1 million** a year). This figure includes the costs of visits to GPs and A&E, treatment for injuries, use of ambulances, prescriptions, referral to services for treatment, mental health and rehabilitation.

### **b) Prevalence of DV**

Home Office estimates based on the British Crime Survey (9) makes the following estimates of the level of need for local services for DV, sexual violence and stalking in their area. These estimates can be used to help inform commissioning of services to meet unmet and previously un-recognised need.

Figure 8: Estimated level of need for local DV services. Home Office, 2009.

Borough	Female population	Estimate for area
Havering	116,291	DV 5,466 Sexual Assault 4,884 Stalking 9,673
Redbridge	122,786	DV 5,771 Sexual Assault 5157 Stalking 10,213
Waltham Forest	112,093	DV 5,268 Sexual Assault 4,708 Stalking 9,324
Barking and Dagenham	858,76	DV 4,036 Sexual Assault 3,607 Stalking 7,143

Population data taken from 2001 Census (is total female population and not broken down to 16 – 59 age group). Figures are an estimate of number of women and girls who have been a victim in the past year.

### c) DV Offences in Havering

#### Number of Incidents and Offences

Table 1 shows the number of incidents and offences in Havering for two financial years and the percentage change.

A domestic offence is where an incident occurs and the investigation reveals an offence against a statute of law (ie an assault). If the incident is not against a Statute of Law, e.g. a row between partners) it is defined as an incident. The police record both to ensure a full record of any potential DV is recorded.

Figure 1: DV offences and incidents in Havering in 2009-2011. Police Performance Information Bureau, 2011 (10).

	DV Offences	DV Incidents
2009/10	1,093	2,821
2010/11	1,200	2,817
Change	9.8%	-0.1%

Between 2009/10 and 2010/11, the number of DV offences in Havering have increased by 9.8%. In the same time period, the number of DV incidents has stayed approximately the same.

#### Havering's Performance

- Figure 2 shows how Havering 'sits' within the 32 other London Boroughs. It shows Havering's position in pure volume of reports and as a per thousand population. (A low number is good; high is bad.)

Figure 2: DV offences and incidents in Havering compared to all London Boroughs. Police Crime Reporting Information System, 2011 (11).

	DV Offences	DV Incidents

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Population	8th	8 <sup>th</sup>
Volume	9th	8 <sup>th</sup>

Havering has the 8<sup>th</sup> lowest rate of DV offences and incidents (per 1000 population) out of the 32 London Boroughs. When only the volume of DV is considered (and size of the population is not taken into account), Havering has the 9<sup>th</sup> lowest volume of DV offences (out of the 32 London Boroughs) and the 8<sup>th</sup> lowest volume of DV incidents.

### Arrest Rate

The arrest rate is the percentage of those committing DV who are subsequently arrested.

- In 2010/11, Havering had an arrest target of 77% and an actual arrest rate of 84%. In Havering, the sanctioned detection rate target was 47% and a 49% rate was achieved. This means that in almost eight out of ten cases where a DV allegation was made the perpetrator was arrested; of these arrests almost half (49%) result in a caution / charge. Havering is ranked 16<sup>th</sup> out of the 32 London Boroughs for DV sanctioned detection rate (where a ranking of 1<sup>st</sup> = best performing Borough) (12).

### Victims and Accused

- Figures 3 and 4 show the breakdown of victims and accused respectively.

*Figure 3: Table Showing the Proportion of DV Victims In Havering, by age and gender, 2010/11. Police Crime Reporting Information System, 2011 (13).*

Age Groups	Female	Male	Total
<10	0%	0.1%	0.0%
10 – 17	1%	1%	1%
18 – 25	28%	24%	26%
26 – 35	30%	30%	30%
36 – 45	24%	25%	24%
46 – 55	11%	12%	12%
56 – 65	4%	5%	4%
66 – 75	2%	2%	2%
76 – 85	0.4%	1%	1%
86+	0.3%	0.4%	0.4%

*Figure 4: Table 3: Table Showing the Proportion of those Committing DV in Havering, by age and gender, 2010/11. Police Crime Reporting Information System, 2011 (14).*

Age Group	Female	Male	Total
10 – 17	0%	0.2%	0.2%
18 – 25	25%	30%	29%
26 – 35	32%	30%	31%
36 - 45	35%	27%	28%
46 - 55	5%	9%	8%
56 - 65	2%	2%	2%
66 - 75	2%	1%	1%

The table shows the percentage that the gender of a particular age group represents.

So the accused table shows that 35% of all female victims are aged 36 - 45 and 27% of all male victims are aged between that age. A large proportion (80%) of those experiencing DV are aged between 18 and 45.

**Time when DV Occurs (15)**

Figure 5 shows DV offences by hour of the day separated into Havering (excluding Romford town centre) and Romford town centre only.

Figure 5: Time of day when domestic violence occurs in Havering. Police Crime Reporting Information System, 2010/11 (15).

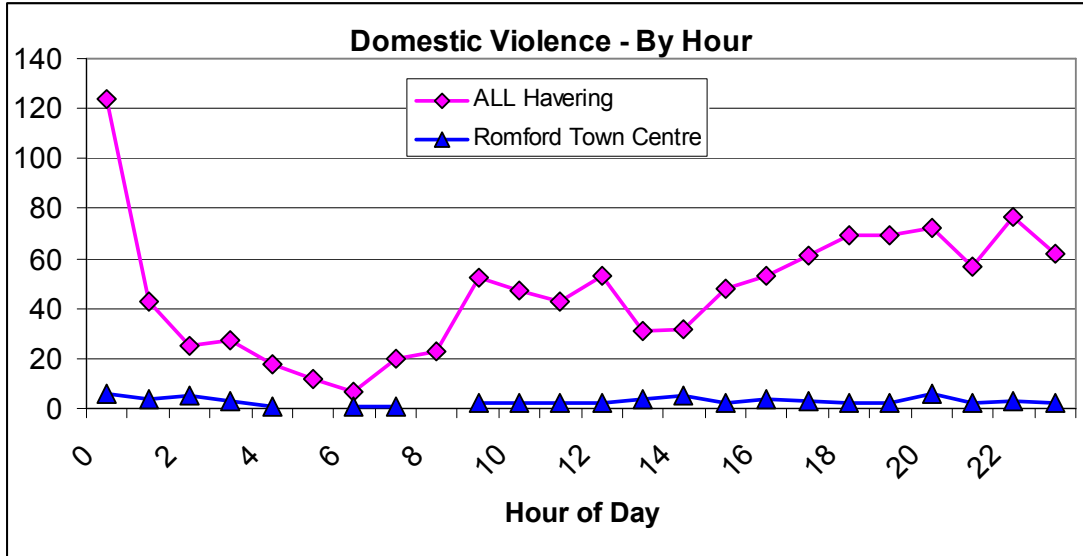
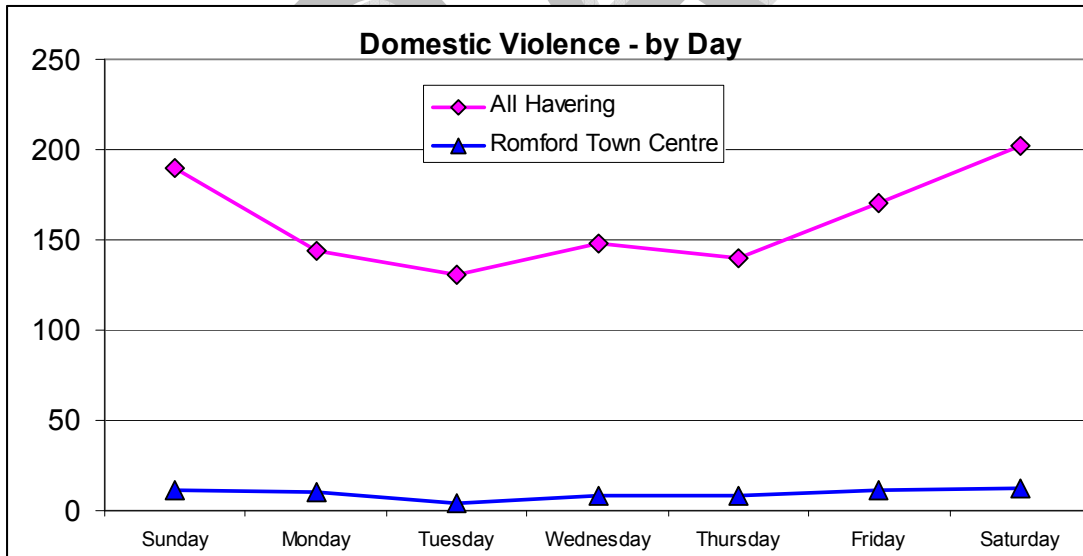


Figure 6 shows the same data but by day of the week.

Figure 6: Days of the week when domestic violence occurs in Havering. Police Crime Reporting Information System, 2010/11(15).



The premise being raised was whether alcohol can be linked to the offence of DV. Romford town centre, where there are a concentration of premises licensed to sell alcohol, does not show any significant increase in DV during licensing hours. Havering as a whole does show an increase in DV from 4.00pm to 1.00am. This may be due to partners being at home (or out) together. This is further supported by the lower number of reports during the 'normal' working day. This does not follow for the other raised reporting times, between 10.00am and 1.00pm. However, a further look at the data shows that these reports are mainly on a Saturday and Sunday which tends to support the argument that alcohol need not be a factor.

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Saturday and Sunday account for 28% of the week but 35% of reports are made on these days. When the hours of the day for Saturday and Sunday are examined the fewest reports are made in the 8<sup>th</sup> hour (17%) (i.e. between 8.00am and 8.59am but this rises to 74% for the 3<sup>rd</sup> hour (3.00 to 3.59am). This could suggest that alcohol is involved, but further evidence is needed to investigate whether this is the case.

Over one in ten DV offences occur between midnight and 1.00am (11.04%).

*Figure 7: Result of DV Cases Where Defendant Pleaded Not Guilty At First Hearing in Havering, September 2010 to August 2011. Havering Magistrates Court, 2011 (16).*

Month	No of Trials	Victims Attended	Adjourned	Outcomes		
				Guilty	Not Guilty	Withdrawn
Sep-10	7	6	0	<5	<5	<5
Oct-10	6	<5	<5	-	<5	<5
Nov-10	13	8	<5	<5	<5	6
Dec-10	6	<5	<5	-	<5	<5
Jan-11	8	6	<5	<5	<5	<5
Feb-11	10	7	<5	<5	<5	<5
Mar-11	5	<5	<5	<5	<5	<5
Apr-11	8	8	<5	<5	<5	<5
May-11	10	7	<5	<5	<5	<5
Jun-11	9	7	<5	7	<5	<5
Jul-11	10	7	<5	<5	<5	<5
Aug-11	7	<5	<5	<5	<5	<5
<b>Total</b>	<b>99</b>	<b>70</b>	<b>18</b>	<b>34</b>	<b>16</b>	<b>31</b>
<b>Percentage of Trials</b>			<b>18%</b>	<b>34%</b>	<b>16%</b>	<b>31%</b>

Figure 7 (data provided by Havering Magistrates Court) (16) shows the result for DV cases where the defendant pleaded not guilty on the first hearing. It does not include those who during the remand for a trial changed their plea to guilty.

### d) Prevalence of Harmful practices in Havering

Data on the prevalence of harmful practices within the borough is limited. The police data shows that from April 2011 to date there have been five cases of forced marriage and no allegations of female genital mutilation reported (17). In Havering, between 2001 and 2004, it is estimated that there were 47 maternities in Havering where women had female genital mutilation (18). This could present child protection concerns if these mothers delivered a daughter. Data on the prevalence of FGM locally and reflects the national difficulties in collecting accurate data on the prevalence of FGM in certain communities.

### e) Total Cost of DV (19)

However as mentioned above, the MARAC is estimated to address only around 10% of all DV. Therefore the total cost of dealing with DV is even higher. It is estimated that based on Havering's population size, DV (not including the human and emotional costs) costs **£23.3 million per year**. The hidden costs to NHS in Havering in responding to DV (its immediate and the long term impact) is estimated to be **£7.1 million** a year). This figure includes the costs of visits to GPs and A&E, treatment for injuries, use of ambulances, prescriptions, referral to services for treatment, mental health and rehabilitation.

In comparison to other Boroughs across outer north east London, the costs are:

- Redbridge cost of DV is **£29.9 million**, the hidden costs to NHS are **£9 million per year**

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- Barking and Dagenham cost of DV is **£19.1 million**, the hidden costs to NHS are **£5.7 million per year**
- Waltham Forest cost of DV is **£26 million** and the hidden costs to the NHS are **£7.8 million per year**

### f) Safeguarding children and domestic violence

DV has been a feature of some Serious Case Reviews conducted in Havering since 2007. There were a number of relevant key learning points that affected the outcomes of some of these cases including: the failure to maintain focus on the child and failure to understand domestic violence.

Although children's social care are currently unable (for systems reasons, which are being addressed) to robustly quantify the actual prevalence of domestic violence as an issue in referrals to them or in child protection plans, it is acknowledged as a significant concern. The concern relates not only to the volume but to the severity of the violence, and the consequences that has on the safety and wellbeing of children in the household.

For those 6,150 families referred to Children's Centres over the past two years (2010 and 2011), domestic violence is recorded in 5% of cases. This is not a full indication of the prevalence, as Children's Centres tend to provide support in cases which do not meet child protection thresholds.

Data from the MARAC shows that in 2011/12 112 children were involved in the high risk cases discussed.

**2. WHAT CURRENT SERVICES ARE THERE FOR DOMESTIC VIOLENCE (DV) IN HAVERING?**

**a) Havering Women’s Aid**

Havering Women’s Aid are commissioned by the local authority to provide refuge accommodation and a floating support service for women experiencing DV in Havering?. This is a three year contact from October 2011. Havering Women’s Aid have 23 flats and are commissioned to provide 230 hours per week for the Refuge and Floating Support Service. They also provide a drop in and support group for women experiencing DV (commissioned until 2012).

Havering Women’s Aid also provide the DV Support Group. , which holds 40 support group sessions annually (funded by Havering police and Havering Council)

2010/2011 Havering Women’s Aid supported 1192 women, 539 children and 20 men. Referral to the service is via helpline and Havering Women’s Aid provides a wide range of services such as:

- Refuge accommodation for twenty three families
- A Floating support service to women and men in the Community
- Children’s services for the refuge
- Children’s services for the community
- Drop In service
- Support Groups
- Counselling Service
- Helpline
- 24 hour on call for emergencies.

**b) Independent DV advocate**

An independent DV Advocate (IDVA) is provided by Victim Support to support high risk of harm cases discussed at the Borough’s MARAC. This role is currently funded by the London Borough of Havering and the Home Office until March 2012.

In 2010/11 the IDVA supported 177 high risk victims of DV (169 female, 8 male) (20)

*Figure 9: Individuals supported by the independent domestic violence advocate in Havering. Havering Independent Domestic Violence Advocate, 2011.*

<b>Age</b>	
16 - 18	<5
18 - 35	93
35 - 50	55
Over 50	8
Unknown	18

<b>Ethnic Origin</b>	
White/Other	137
Black/Carribbean	<5
Asian/Other	<5
Black/British	
White/European	<5
Black/African	<5
European	<5
Sri Lanka	<5
Unknown	<5

Over half of the referrals came from the police (90) and 32 from MARAC. The rest of the referrals came from a wide range of services and agencies in the Borough, however only one health referral was noted.

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In addition to the 177 high risk of harm cases, the IDVA received a further 708 referrals from the police. These cases are contacted and a risk assessment is completed. Usually this contact is limited to one phone call due to capacity of the IDVA.

### c) MARAC

The Multi-Agency Risk Assessment Conference (MARAC) aims to review and co-ordinate service provision in high-risk of harm DV cases. The focus is to reduce repeat victimisation and prevent DV homicides. MARAC has a priority focus on victim safety with links to child protection and multi agency protection arrangements for violent and dangerous offenders. MARAC will facilitate, monitor and evaluate effective information sharing to enable appropriate actions to be taken to increase public safety.

Each individual high risk case of DV discussed at the MARAC costs £20K (21). It is estimated that MARACs deal with around 10% of the total of all DV reported incidents. These are the most serious and high risk cases and should be seen as the “tip of the iceberg”.

In the period between April 2010 and October 2011, 204 cases have been discussed at the MARAC, 31 were repeat cases. The MARAC has a repeat victimisation rate of 15.2%, which is lower than for cases not discussed at the MARAC (22). More information about the definition of DV repeat victimisation rates can be found on the Audit Commission website here:

[www.audit-commission.gov.uk/localgov/audit/nis/Pages/NI032repeatincidentsofdomesticviolencecasesreviewedatmarac.aspx](http://www.audit-commission.gov.uk/localgov/audit/nis/Pages/NI032repeatincidentsofdomesticviolencecasesreviewedatmarac.aspx)

This means that the 109 high risk cases of DV discussed at the MARAC in the Borough for 2010/11 cost partners in the Borough (e.g. the police, community safety, housing etc) **£2.18 million** and health services **£545,000** (this includes visits to GP, A&E, prescriptions and other health services such as sexual and mental health).

In comparison to high risk cases discussed at MARAC across outer north east London, the costs are:

- Waltham Forest **£4 million** and health services **£1 million**
- Redbridge: **£3.4 million** and health services **£850 000**
- Barking and Dagenham: **£5.3 million** and health services **£1.3 million**

Using an independently verified analysis (23), MARACs save at least £6,100 of these costs per victim. The net return on investment for the health service is 533%.

### d) Family MOSAIC Project

Family Mosaic Project received 12 referrals in 2010/11 for their rent deposit scheme for victims of domestic violence. In the same year they received 7 referrals from Victim Support and from health services for support for victims of domestic violence.

### e) Relate North East London

Relate North East London have 18 counsellors working in Havering who have all had training for Domestic Violence. They do not receive any funding to offer our services in Havering. The majority of the adult clients using the service are self referred or recommended by other agencies e.g. GP, Citizens Advice Bureau. These self referrals are usually all self funded, with exception of a few clients who are funded by Social Services.

In 2010/11 Relate saw 1083 adult clients and 341 children from Havering. 43 cases were due to family conflict, constituting approximately 12% of their caseload. Of the 341 children, 225 were referred to the service by education. The remaining 116 have either been referred by their GP, school, children’s social care or other health professionals.



### **f) Women's Trust East London**

Woman's Trust East London Counselling and Support Services provide free confidential one to one counselling to women affected by domestic violence. In 2010/12 they received 10 referrals for women living in Havering and in the year 2011/12 to date 8 referrals. No referrals have been from health services. Woman's Trust are funded by the Big Lottery Fund. This is a 5 year grant (April 2010 to March 2015). Woman's Trust work across 8 east London boroughs: Barking & Dagenham, Greenwich, Hackney, Havering, Newham, Redbridge, Tower Hamlets and Waltham Forest. 2 staff members work specifically for the East London Counselling and Support Services: a Senior Counselling Coordinator (28 hours per week), and an Office Administrator (25 hours a week).

### **g) Rape Crisis Centre**

The East London Rape Crisis Centre started to take referrals in March 2011 and has received less than 5 referrals from Havering to date for its counselling service. Initial low take up of the service is expected as it's a new service and the sensitive and complex nature of disclosure and help seeking in cases of rape and sexual assault. An engagement and publicity campaign is underway to raise awareness locally of the service. The Mayor of London has funded the East London Rape Crisis Centre to March 2012. Consideration needs to be given to future commissioning of this essential service if this funding ceases. This is expected to be approximately £30 000 per year from each Borough.

### **h) Top 100 Families Project**

The Top 100 Families project will identify current high contact, high need families across by all public sector partners within Havering. Once these families are identified all agencies will collectively review the intervention and support these vulnerable families receive.

The 'new' targeted approach with these families will be designed using best practice, listening to family feedback and experiences, consulting with frontline practitioners, improving cross sector communication, jointly funding work, sharing roles and responsibilities, improving performance management, eradicating duplication and achieving efficiencies and value for money.

The success factor will be the improved outcomes for families with multiple complex needs, with the majority of families needs being met by the prevention and early intervention services, and a reduction in demand for specialist, high level targeted services and ultimately reduction to the amount of families at threat of losing their children (into care), their liberty (offenders) or their home.

Following the piloting of this joined up approach, the changes to service planning and delivery will be imbedded into the day to day ways of working in all public sector agencies over time, to achieve systemic change.

All partners, including Police, Local Authority, Probation and Health Agencies have contributed to the identification of our high contact/high need families. Part of this process has been the identification of which 'complex needs' are experienced within family units, given that currently different agencies identify and assist families with multiple needs. Domestic abuse has been an identified issue in 38% of families identified. Families identified with domestic violence had a higher number of other complex issues in the household, for example, mental health, offending behaviour, debt issues and child protection plans.

The Top 100 Families approach will enable better sharing of intelligence, information and joined up working to both identify and work with families experiencing domestic abuse.

### **i) Policy framework National**

Call to end violence against women and girls HM Government 2011

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[www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls](http://www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls)

Call to end violence against women and girls: Action Plan March 2011 HM Government  
[www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls/vawg-action-plan](http://www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls/vawg-action-plan)

Responding to violence against women and children the role of the NHS – the report of the taskforce on the health aspects of violence against women and children Dept of Health March 2010 – followed by interim government response to the report of the taskforce on the health aspects of violence against women and children Dept of Health March 2010  
[www.dh.gov.uk/en/PublicHealth/ViolenceagainstWomenandChildren/index.htm](http://www.dh.gov.uk/en/PublicHealth/ViolenceagainstWomenandChildren/index.htm)

### Regional

The Way Forward. Taking action to end violence against women and girls – final strategy and action plan 2010 – 2013, March 2010 Mayor of London  
[www.london.gov.uk/priorities/crime-community-safety/tackling-priority-crimes/violence-against-women/way-forward](http://www.london.gov.uk/priorities/crime-community-safety/tackling-priority-crimes/violence-against-women/way-forward)

### Local

Locally, DV is included in the Havering Community Safety Plan. Work to address DV in the Borough is included in theme one of the CSP plan – Serious Violence. This work programme has been developed to address Violence will seek to meet the Local Government PSA 23: Priority Action 1 – *'Reduce the most serious violence, including tackling serious sexual offences and DV'*.

Achievements noted in the CSP plan for 2009 – 2010

- Provision of DV drop in children centres
- Provision of services for people who suffer DV

NHS Barking and Dagenham DV and violence against women and children strategy and action plan 2010 – 2013 (this is now helping to inform NHS Outer North East London's and then Clinical Commissioning Groups response to DV and violence against women and girls)

### 3. WHAT GAPS ARE THERE IN SERVICES OR KNOWLEDGE IN THIS AREA?

- monitoring framework to be agreed and implemented by all DV services commissioned in the Borough
- Details from children's social care on the number of cases of DV they deal with (where is the primary reason for referral or a background factor)
- Referrals from health services including GPs to DV services are extremely low. We need to obtain regular information from DV services on health referrals, and work to capture information from victims of DV on their use of health services to evidence local need
- Feedback and perspectives of local service users on how our services are supporting victims and improvements they think are needed
- Data sets across services on incidents and concerns regarding DV, forced marriage, honour based violence and female genital mutilation
- Intelligence on the incidence and nature of prostitution, sexual violence and trafficking in the Borough.

### 4. WHAT DO LOCAL PEOPLE THINK?

No comprehensive recent consultation with women affected by DV in Havering been carried out. However, women survivors of DV who had received support from Refuge were consulted as part of the development of NHS Barking & Dagenham's DV and violence against women and children strategy, and the findings from this may also be relevant in Havering. Although this was not conducted with local women in the Borough it provides relevant feedback on survivors views of how health services can help victims of DV.

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The women felt that health services can and must play an important role in responding to DV– both for women and their children.

The women recommended that the health agency response to DV should include prevention and early intervention. They also recommended that training on DV is vital so that women experiencing DV can be confident that they will receive a consistent and professional response if they choose to disclose what is happening to them.

Above all, the health service response should be collaborative in approach and recognise that health services need to work with partner agencies to ensure that all the needs of DV victims are addressed. It is vital that partners from across the community work together in order to properly support women who experience violence.

The Community safety Partnership has agreed that a new DV strategy is needed for the Borough. Feedback from local DV services and their clients will be gathered to help inform and support the development of the new strategy.

### 5. EVIDENCE OF WHAT WORKS

#### a) NICE Guidance and national guidance

- Institute of Clinical Excellence (NICE) guidance on preventing and reducing DV between intimate partners is currently being developed and is expected in 2014
- Call to end violence against women and girls (2011). HM Government [www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls](http://www.homeoffice.gov.uk/publications/crime/call-end-violence-women-girls)
- Responding to Domestic Abuse: A Handbook for Health Professionals (2005). Department of Health: London. [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4126161](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4126161)
- Domestic Violence, Sexual Assault and Stalking: Findings from the British Crime Survey (2004). Walby, Sylvia and Johnathan Allen. Home Office Research Study 276. Home Office: London. [http://www.ccrm.org.uk/index.php?option=com\\_content&view=article&id=289&Itemid=354](http://www.ccrm.org.uk/index.php?option=com_content&view=article&id=289&Itemid=354)
- The Provision of Accommodation and Support for Households Experiencing Domestic Violence in England (2002). Office of the Deputy Prime Minister: London. <http://www.communities.gov.uk/archived/publications/housing/provisionaccommodation>
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#### b) Project iris

Project IRIS is an intervention to improve the health care response to DV and abuse. GP practices receive training, an audit and ongoing support, a prompt in the medical system, a named advocate based in a DV specialist facility to which GPs can refer, and materials to display in surgeries. The cost of setting up and implementing project IRIS in a local area is approximately £50,000.

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The pilot study for Project IRIS found it to be cost effective, with a cost effectiveness ratio of approximately £2,450 per quality of life year (QALY). Operating over 25 GP practices, Project IRIS generated a cost saving of £80 000 against a £50 000 investment (24).

**Further information about Project IRIS can be found here:**

<http://www.health.org.uk/publications/identification-and-referral-to-improve-safety/>

### c) Independent DV advocates

We know that DV advocates benefit victims of DV. For women and families living with severe DV, MARACs and Independent DV Advisors (IDVAs) offer a real solution. Almost two thirds of women living with high risk abuse report that it stops following intensive, multi-agency support coordinated by an IDVA (25).

## 6. ACTIONS AND RECOMMENDATIONS

- Develop and publish an updated Borough DV and violence against women and girls strategy
- Engage GPs in the coordinated response to DV, to improve practice and generate referrals. NHS ONEL and Clinical Commissioning Groups to consider commissioning a pilot of Project IRIS with GPs, to improve primary care response to patients who are experiencing DV.
- Ensure appropriate agencies and representatives attend the MARAC. Continue to improve the collation and analysis of MARAC data to understand the needs of those experiencing DV and to align services accordingly
- Work with health and social care to improve the recording and availability of local DV data. Currently most local data on DV is provided by the police and including information from other partners would improve local intelligence on the prevalence of DV. There is also a need for local partners to begin to record information about areas such as forced marriage, honour based violence and female genital mutilation. Children's Social Care to implement a domestic violence monitoring flag on their records so that data on number of children known to Children's Social Care due to domestic violence can be easily collected to support analysis of needs and trends. Children's Social Care to introduce a flag for all forms of VAWG concerns, particularly for FGM and forced marriage to improve recording and data collection.
- Develop further joint commissioning (particularly between the local authority and NHS ONEL and then Clinical Commissioning Groups) and also cross borough commissioning opportunities for DV/Violence Against Women, particularly in areas where high levels of expertise/specialism is required such as care for those girls and women affected by female genital mutilation, sexual violence
- A cross Borough, multi agency DV publicity campaign to be developed and implemented to raise the public's and practitioners awareness of DV and services available locally. This should include a series of high profile local community engagement events such as white ribbon day. Costed at £5000
- Introduce a series of DV key performance indicators into the contracts of health service providers to help support the mainstreaming of the response to DV within health
- Consider commissioning specialist support services for families where DV has been identified. This could be in the form of commissioning a specialist children and young people/family DV support worker to be located within one of the existing DV commissioned services at a cost of £50K to provide support and early intervention to families where DV has been identified
- Consider how the East London rape crisis centre will be commissioned in the future and what resources will be available to support this commissioning (in 2013/14) when funding from the Mayor of London ceases)
- Develop a process with DV services whereby they systematically record referrals received from health services and use of health services by victims as part of their case

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intake system to help develop a better understanding of health activity on responding to DV

- Health service commissioners (NHS ONEL and then Clinical Commissioning Groups) and health service providers to recognise the cost of responding to DV locally and the important role they hold in the coordinated community response to DV
- Domestic Violence Forum to work with Havering Magistrates Court to improve the way in which domestic violence cases are managed, this includes information sharing/tracking of results and listing of cases to help support services attend court and support victims
- Domestic Violence Forum, MARAC and LSCB to explore together the use of the Barnardos Risk Assessment Matix locally in conjunction the MARAC risk assessment tool – DASH

### **7. FURTHER INFORMATION AND REFERENCES**

#### **a) Further Information**

- For more information on MARACs visit [www.caada.org.uk](http://www.caada.org.uk).
- For information on Project IRIS go to: <http://www.health.org.uk/publications/identification-and-referral-to-improve-safety/>

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### Community Safety Fund - Community Safety Section – 1st April 2011- 30<sup>th</sup> March 2012

The purpose of this document is to highlight progress of the Community Safety Section programme of services commissioned through the Community Safety Fund, which supports the overall local delivery of the borough’s Community Safety Plan 2011/12. The spending plan approved by the HCSP in March 2011 agreed the allocation of funds to the following areas

Strategic Theme	CSF INITIAL ALLOCATION	CSF REVISED ALLOCATTION
1. Violent Crime	£30,000.00	£33,240.70
2. Acquisitive Crime	£30,000.00	£30,121.00
3. ASB	£30,000.00	£29,409.49
4. Integrated Offender Management	£30,000.00	£24,530.00
5. Problem solving	£20,000.00	£22698.81
6. Domestic violence	£20,000.00	£20,000.00
7. Administrative support for the HCSP	£17,788.00	£17,788.00
8. Young People's Substance Misuse Services	£40,800.00	£40,800.00
9. Community Call to Action	£1,600.00	£1,600.00
<b>Total available Revenue =</b>	<b>£220,188.00</b>	<b>£220,188.00</b>

## 1. Violent Crime

Project Name	Service Provider	Objective	Allocation Revenue	progress
Innovative solutions to under age sales	Trading Standards	To fund a range of initiatives including <ul style="list-style-type: none"> <li>• Proxy sales adverts on the local radio,</li> <li>• A reprint of proxy sales leaflets,</li> <li>• The launch of off-watch, training package,</li> </ul>	£3,,500.00	Proxy Sales Radio advert currently on the radio. Challenge 21 and Challenge 25 window stickers currently being printed Logo being designed for the Off-watch scheme and window stickers currently being produced, Laminated , refusal to serve cards prompt cards translated in a number of languages including Tamil,currently being produced and translated for Off Licences
Viper Car Deployment	Havering Police	To fund VIPER Car to cover Thursday & Fridays.	£10,520.00	Weekly deployments of car ongoing. To enable a rapid response to violent offences
Digital SLR Camera	Havering Police	To purchase a digital SLR camera and printer for use by VIPER car staff and violent crime and community safety units to capture evidence to support prosecutions	£797.45	Camera and printer purchased and deployed. The digital SLR continues to play a massive part in investigation across Havering borough. It is deployed on a daily basis and is utilised across all aspects of Havering CID work. Images captured immediately at the scene have secured the charging of several offenders most significantly a charge of GBH against a violent DV offender.
NBIS training	CSS	To fund training on the use of the National Business Information system	£1,500.00	All security teams in Romford Town centre are currently trained on the system. Currently 50 people have been banned from the daytime scheme, 1 of which was found to have been active in Milton Keynes prior to be coming to Romford
Body Cameras for RTC Team	Havering Police	To purchase 4 new pocket cameras and to fund the licence	£2,181.00	Cameras purchased and deployed.



		and maintenance of the existing cameras.		
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Services/ Initiatives	Service Provider	Objective	Allocation Revenue	progress
Safe Haven	Street Pastors	To provide 2 doors supervisors and a town link radio for the Deeper Lounge scheme.	£7,191.00	The Deeper Lounge operates from 10 pm till 3am every Friday night. The Team have been working under a market stall since being moved out of the Wykeham Hall. Following recent discussions with a range of partners the Safe Haven is hoping to relocate to the Battis shortly. On average 15 – 20 people being seen each Friday night
Safe and Sound	CSS	To purchase a range of materials to support and promote the work of the Safe and Sound Initiative	£4,000.00	<p>Section 27 booklets designed and distributed.</p> <p>“Missing” posters and “small handbag” leaflet and “mobile phone” leaflets on how to have a safe night out have been developed and distributed</p> <p>Cabwise bands distributed at Christmas advertising the cabwise number to get home safely</p> <p>Cocaine wipes bought and used by the MPS Specials.</p> <p>Heat blankets and flip flops purchased for Street Pastors</p>
Town centre team body computer	Havering Police	The computer is used to process film footage from the body cameras so it can be used as evidence.	£600.00	In the process of being procured

Services/ Initiatives	Service Provider	Objective	Allocation Revenue	progress
Drugs itemiser	Community safety	To fund a maintenance package for the Drug itemiser.	£2,000.00	The drugs itemiser allows you to test for the presence of drugs in premises or on individuals. The drug itemiser will be used by the newly established MPS Specials enforcement team who will now become a borough wide resource. Once the itemiser has had its annual maintenance checks the Team will be tasked with visiting licensed premises on a weekly basis
Personal safety and anti bullying awareness week	Max conflict	To reduce bullying and raise awareness amongst students and how to deal with it.	£951.25	Programme was delivered at Havering College. In November 2011
<b>TOTAL</b>			<b>£33,240.70</b>	

## 2. Acquisitive Crime

Services/ Initiatives	Service Provider	Objective	Allocation	Progress
Banking protocol	CSS Trading Standards CPCG Age Concern Havering Police	To develop and implement good practise guidelines for local banks to prevent opportunities for bogus and rogue traders preying on elderly and vulnerable residents	£2,000.00	An additional £3,000.00 funding secured from the CPCG. Banking Protocol was launched on the 12 <sup>th</sup> September. 14 banks now signed up to the scheme across the Borough. Training delivered to Banks is ongoing. The Scheme has prevented approximately £56,000 from being taken from the bank accounts of vulnerable people. The scheme has been shortlisted for a Municipal journal award and the winner will be announced in May 2012.
Serious acquisitive crime (SAC) communications	CSS	To raise public awareness of crime prevention measures and encourage local residents and businesses to adopt measures to reduce opportunities for SAC	£10,000.00	Spring Motor Vehicle campaign delivered. Summer Burglary campaign delivered. Light Up Havering Delivered in November Twelve safer days of Christmas delivered in December Quarterly advertising space purchased in LIVING. Radio advertising purchased at TIME FM

Services/ Initiatives	Service Provider	Objective	Allocation	Progress
Autumn / Winter burglary campaign	Havering Police	To run a series of police operations to target the projected spike in residential burglary from October to January	£15,000.00	<p>A three month targeted operation ran from September to December and included the following</p> <p>Night duty operations from Mawney ,Emmerson park, Brooklands, St Andrews , Petits ,and Hacton wards ,</p> <p>8 x Proactive operations ,</p> <p>43 x Burglary prisoners processed including TIC prisoner productions.</p> <p>Op Ram CCTV surveillance ( before OP ram funding secured)</p> <p>Op Villiers ( Distraction burglary series Suspect Smith received 10 x years imprisonment )</p> <p>False reporting of stolen mobile phones against those in Police possession /sold to second-hand outlets.</p>

Services/ Initiatives	Service Provider	Objective	Allocation	Progress
Operation Chiclid	Havering Police	To finance a three-month, proactive intelligence lead police operation, aimed at targeting known residential burglars, robbery nominals and vehicle crime offenders, by using covert patrols areas of Havering with the highest concentration of offences, identified by the Borough Intelligence Unit.	£2,500.00	<p>Operation CHICLID is a proactive tactic aimed at preventing priority crime (principally residential burglary) and disrupting people suspected of committing priority crimes. The tactic involves deploying Covert Human Intelligence Sources and their handlers into high crime areas supported by an intervention team of local officers who are able to assist with pro-active stop/account/search as appropriate. The principal aim is to identify burglary suspects frequenting an area suffering from a high level/increase in residential burglary offences but due to the nature of the deployment, it also identifies significant amounts of intelligence regarding all crime (including drugs supply, theft, handling stolen goods etc). Since July 2011, the Havering Dedicated Source Unit has deployed sixteen times on twelve separate dates and has been supported on the majority of those occasions by a local intervention team. These deployments have resulted in police obtaining 102 actionable pieces of intelligence, which would probably not have been achieved if Operation CHICLID had not been initiated.</p> <p>The precise detail of the intelligence obtained is confidential but in general terms includes;</p> <ul style="list-style-type: none"> <li>• The identification of offenders frequenting high crime areas</li> <li>• The identification of current addresses of persons suspected of/wanted for committing priority crimes</li> <li>• The identification of addresses concerned in the handling of stolen goods</li> <li>• The identification of addresses and vehicles concerned in the supply of drugs in high crime areas</li> </ul>

Services/ Initiatives	Service Provider	Objective	Allocation	Progress
Burglary reduction project	Havering Police	To reduce residential burglary	£621.00	5,000 leaflets ordered and received on 17th January. Distribution on the ward of these started the following day and was completed on the 1st February, the whole ward having been covered (Romford Town)
<b>TOTAL</b>			<b>£30,121.00</b>	

### 3. Anti Social Behaviour

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Services/ Initiatives	Service Provider	Objective	Allocation Revenue	Progress
Hilldene youth Projects 2011-12	Fun for Everyone (FFE)	To fund a range of diversionary projects to support the Hilldene dispersal zone.	£4,795.00	<p>BOYS BOXING and FITNESS 6 week programme of intensive coaching using FFE's own boxing ring and equipment. Used 2 volunteers from DYO programme and targeted an additional 4/6 from Harold Hill. Worked very well but would avoid Friday evenings in the future for targeted work.</p> <p>GIRLS ONLY BOXING AND FITNESS. Fitness/self defence/non-contact boxing. Targeted girls at risk of ASB/youth crime. Existing contacts plus referrals from school and YOT. Went really well and delivering a further 6 weeks up to end of March. Average attendance 9 with 15 who have attended sessions.</p> <p>FOOTBALL since April 2011. 5/7 a-side all weather pitch weekly session with qualified youth football coach. Plus occasional friendly matches at weekends and tournaments. Average weekly attendance since 4/11 is 19 and 100+ has attended during that time. Targeted those at risk/causing ASB. Those on ABCs and Court Orders. Currently 3 on Court Orders. Currently approx 15 on latest Homes in Havering 'ASB concerns Lists'</p>
YISP diversionary projects	YISP	To fund a range of diversionary projects with YP attending the YISP to reduce opportunities for engaging in ASB.	£3,100.00	<p>A range of activities have been delivered with YP engaged with the YISP this included :-</p> <ul style="list-style-type: none"> <li>• Pizza Hut &amp; Bowling Activity - attended by 12 young people and 3 peer mentors</li> <li>• Southend Activity – attended by 10 young people , 2 peer mentors and 1 volunteer</li> <li>• Go-Karting Activity attended by 8 young people and 2 peer mentors</li> <li>• Residential Project which consisted of a range of outdoor activities based at Stubbers whereby Motorvations providing the activities attended by 11 young people, 2 peer mentors, 1 Sessional worker and 1 volunteer .</li> </ul>



Services/ Initiatives	Service Provider	Objective	Allocation Revenue	Progress
SENTINEL	CSS	To fund the annual license for the SENTINEL software package and training sessions	£7,500.00	Annual licence purchased and training package delivered to train trainers
Parenting Skills Programme	ADD UP	To deliver a 6 week programme with parents on court mandated parenting orders for children with ADHD. Target of 20 parents.	£2,570.00	<p>The Parenting Skills Programme ran from 13<sup>th</sup> September till 25th October 2011.</p> <p>It was attended by 28 parent/carers and 6 staff members from Add+up and YISP</p> <p>A second 6 week programme will run from w/c 20th Feb to end of March</p> <p>Currently 24 parents are booked onto this course</p>
Rainham Halloween Project	Rainham Royals	To engage 30 young people, aged 11-17, in positive activity during Halloween week to reduce opportunities for engaging in ASB.	£1,234.49	An excursion was delivered to Chessington World of Adventure and was attended by 34 young people aged between 11 and 15 and 8 Staff
Parental substance misuse support leaflet	DAAT	To support parents who misuse substances	£610	Leaflets printed and distributed

Services/ Initiatives	Service Provider	Objective	Allocation Revenue	Progress
Restorative Justice	Streetcare	To facilitate restorative justice work with the YOT, Probation and other voluntary groups by funding skips for rubbish clearance and paint ancillaries for obliteration of graffiti.	£2,500.00	<p><b>May 2011</b>                      Clearance of Service road at rear of collier row Road                      2 x skips funded by LBH</p> <p><b>July 2011</b>                      Clearance of service road at rear of Tadworth Parade                      1 x skip funded by LBH</p> <p><b>October 2011</b>                      Coopers Alley Upminster                      Cut back of trees</p> <p><b>January 2012</b>                      Footpath 155 clearance of overgrown foilage                      2 x skips funded by LBH                      Cut back of trees</p> <p>Youth Offenders have painted out Graffiti, using paint purchased from the Community Safety Fund. @                      A12 - St Ives Close Fencing                      Junction Road Bridge over railway                      Grenfell Park (3 occasions)                      Cloisters Close                      Nursery Walk                      Tadworth Parade                      Rise Park Parade                      Footpath Station Road Gidea Park                      Hamilton Drive                      Straight Road Foot Path to Neave crescent                      Thames Hill Avenue                      Crossroad</p>
ASBO Legal training	CSS	To provide training for 35 staff on obtaining ASBOs.	£1,350.00	Training delivered and attended by 40 partnership staff

Services/ Initiatives	Service Provider	Objective	Allocation	Progress
Surveillance Van	Havering Police	To fund the use of a surveillance van for three nights over the Halloween Period targeting identified hotspot areas.	£2,000.00	Programme delivered over a three day period. Levels of crime and ASB remained low for the period
Overt Filming Initiative	Havering Police	To purchase 5 cameras to be used by core police teams to deter potential offenders.	£1,750.00	Overt cameras issued to the Police core teams and tasking team. All cameras are currently accounted for and taken out on every tour of duty by the core teams. The Record book shows 55 entries whereby the SD cards from these cameras have been booked into the BIU for the images to be down loaded for intelligence purposes. Each entry could have multiple people of interest on them as the cards are not booked in after each shift and could be held for a few days tour of duty before they are received for download. Data on the SD cards have also been booked straight into the evidential chain pending court cases.
Prevention Halloween and bonfire night 2011	Havering police	To reduce ASB and crime	£2000	HALLOWEEN DIVERSIONARY PROJECT. A range of activities Targeted those on ABCs and/or at risk of ASB/youth crime in the North and South of the Borough these included ;- <ul style="list-style-type: none"> <li>• Self Image Day attended by 6 young people (females)</li> <li>• Pizza Hut &amp; Bowling Activity attended by 2 peer mentors</li> <li>• Mountain Bike Activity attended by 7 young people and 2 peer mentors</li> <li>• Self Awareness / Staying Safe attended by 9 young people , 1 peer mentor and 4 parents</li> <li>• Ice Skating &amp; Pizza Hut attended by 12 young people and 2 peer mentors</li> </ul>
<b>TOTAL</b>			<b>£29,409.49</b>	

## **4. Integrated Offender management**

Services/ Initiatives	Service Provider	Objective	Allocation Revenue	Progress
Pro –Active YOT deter young offenders programme	YOT	Delivery of a flexible targeted Pro-Active Intervention Programme for DYO and others at high risk of re-offending.	£16,500.00	115+ positive successful engagements with a failure to attend rate of less than 7% (very low for this cohort) Payment only for successful engagements and not paid for 'failure to attend' sessions. Since July targeted 20 young offenders at highest risk of re-offending with highest ASSET scores. Positive feedback from young offenders and YOT staff and to date re-offending rates much lower than YOT overall. With 1 young offender supported on a 4-week media course in Southwark which he passed with flying colours with 100% attendance (50% of those booked on the course failed to attend at all) He has since had a job interview as a result. Another young offender we supported on a TAG Fitness apprenticeship scheme in Tower Hamlets where he achieved Fitness Instructing Level 1 and got an excellent report from the course manager. Although now completed his order we have found him a college placement to study for the Level 2. We believe this is a model that works
DYO Project Analysis 2011-12	YOT	To conduct full analysis on reoffending.	£550.00	Analysis ongoing to be completed by 30th April 2012
Emergency Accommodation provision for IOM clients	DAAT SHP	To provide emergency accommodation in bed and breakfast or rented accommodation for offenders.	£6480.00	The IOM housing scheme has housed 21 clients since it commenced in Dec 2010 - One client who was homeless for 3 years sleeping in the stairwells of blocks of flats recently celebrated living in his private rented home for one year, he was the first person accepted onto the scheme. The scheme was adapted in order that clients took more responsibility for their rehabilitation back into the community; it was therefore agreed by the partnership agencies supporting the clients that all clients will not be funded for private rented accommodation unless they are engaging with support services identified in their care plans.

Services/ Initiatives	Service Provider	Objective	Allocation Revenue	Progress
IOM criminal justice information leaflets	DAAT	To produce an information leaflet that will provide criminal justice clients with a list of support services within the borough.	£500.00	Leaflet in the process of being developed and will be printed mid February.
Emergency accommodation provision for IOM clients	DAAT	To fund client identification requests and the consumables needed to support IOM clients back in to the community.	£500.00	Funding used to purchase consumables such as food vouchers, birth certificates etc
<b>TOTAL</b>			<b>£24,530.00</b>	

### 5. Problem Solving

Services/initiatives	Service provider	Objective	Allocation Revenue	Progress
Hilldene youth project targeted project girls only fitness/self defence/non-contact boxing 12 sessions.	Is this fun for everyone	To reduce ASB youth crime at Hilldene shops near central park and other areas affected by groups of young people hanging about.	£600.00	GIRLS ONLY BOXING AND FITNESS. Fitness/self defence/non-contact boxing. Targeted girls at risk of ASB/youth crime. Existing contacts plus referrals from school and YOT.
Hilldene youth project RUUP for half term challenge (feb)	Is it fun for everyone	The project is to reduce ASB /youth crime at Hilldene shops, central park and other areas affected by youth ASB	£1,750.00	<p>FEBRUARY HALF TERM DIVERSIONARY 3 DAY PROJECT</p> <p><u>Visit to Mile End Climbing Wall</u> Took 13 targeted young people (6 on current ASB concerns lists) to challenging climbing with 2 qualified instructors. Included free climbing without ropes and traversing ceiling overhangs and obstacles</p> <p><u>Walking Tour Around Olympic Site</u> Took 12 targeted young people (5 on ASB concerns lists) for 2hr guided walk from Bromley-by-Bow to Stratford using Tourist Authority Guide</p> <p><u>Cooking Workshop at Jamie Oliver's Fifteen Restaurant in Shoreditch.</u> 8 targeted young people who showed most effort over previous two days whom we felt would benefit most from the workshop. Spilt into 2 teams for Ready Steady Cook type competition with both teams given identical ingredients. Each team supported by a current apprentice chef and a graduate apprentice chef from previous years. Young people spent over 3 hours in the kitchen making pasta, preparing veg, making pasta fillings and cooking everything with appropriate seasonings. Between them made 3 different types of ravioli, 2 other pasta dishes, a risotto, prepared and cooked mackerel. We all sat down to enjoy the fantastic lunch they had made.</p> <p>A day for them to remember as they also learned about the difficult backgrounds of the apprentice chefs and how they overcame them to achieve success.</p>

Services/initiatives	Service provider	Objective	Allocation Revenue	Progress
Operation RAM	Havering Police	To reduce the theft of metal in the borough	£10,000	<p>Community safety have coordinated a multi agency operation to tackle scrap metal dealers in the Rainham area.</p> <p>The first two week operation of Operation Ram started on the 10th October 2011.</p> <p>The operation involved two phases over the two week period with the following results</p> <p>Phase 1 Targetting of scrap yards</p> <ul style="list-style-type: none"> <li>• two warrants were executed for one of the scrap metal dealers in relation to fifteen lost and stolen vehicles and the Owner arrested.</li> <li>• Two stolen cars have been recovered.</li> <li>• Fourteen arrests took place for a range of crimes including theft of motor vehicles, immigration irregularities etc</li> </ul> <p>Phase 2 – Targetting of illegal waste disposal two week operation with 122 FPNs.</p> <ul style="list-style-type: none"> <li>• Nine vehicles taken off the road due to poor condition</li> <li>• Ten vehicles seized for red diesel – standard charge for this offence is £500.</li> <li>• Thirty eight sites visited with the Environment Agency.</li> </ul> <p>Further operations have taken place in December and January and will continue under the Met wide Operation Ferrous.</p> <p>The environmental agency have been involved and are targeting a number of scrap yards who do not dispose of their waste correctly.</p>
Crime prevention	CSS	To purchase a range of materials to enable the HCSP to continue to deliver Crime prevention road shows in 2012-13	£10,348.81	Crime prevention materials which included window alarms, property marking kits and purse chains to be distributed through road shows
<b>TOTAL</b>			<b>£22,698.81</b>	





## 6. Domestic Violence

Services/ Initiatives	Service Provider	Objective	Allocation Revenue	progress
DV Advocacy project	HWA	To provide advice and support to victims of domestic violence and their families	£11,000.00	156 drop in sessions held to end of Dec 2011. 250 clients have attended sessions. 16 women have attended counselling
DV Violence Support Group	HWA	To provide a support group for female victims of domestic violence to improve awareness of domestic violence and improve confidence and independence	£4,000.00	24 support group sessions have been held and 61 women have attended the sessions. 34 children have been cared for in the crèche
DV Violence Communications	CSS	TO raise public awareness of domestic violence, encourage uptake of services and reporting.	£5,000.00	The Domestic violence resource guide is currently being reviewed by the DV forum and will be published in March 2012. Radio advertising campaign went live on the 26 <sup>th</sup> December.
<b>TOTAL</b>			<b>£20,000.00</b>	

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## 7. Administrative support for the HCSP

To fund additional hours for administrative support for the HCSP action groups

## 8. Young People's Substance Misuse Services

Funds transferred to the DAAT

## 9. Community Call to Action

Funds transferred to Members services



## CRIME AND DISORDER COMMITTEE

**8 May 2012**

**ANNUAL REPORT, 2011/12**

### **SUMMARY**

This report is the annual report of the Committee, summarising the Committee's activities during the year ended May 2012.

It is planned for this report to stand as a public record of achievement for the year and enable Members and others to compare performance year on year.

There are no direct equalities or environmental implications attached to this covering report. Any financial implications & risks from reviews and work undertaken will be advised as part of the specific reviews.

### **RECOMMENDATION**

1. That the Committee note the 2011/12 Annual Report and authorise the Chairman to agree the final version for Council.
2. That the Committee agree the report be referred to full Council.

**Staff Contact:** James Goodwin  
Committee Officer

**Telephone:** 01708 432432

Cheryl Coppel  
Chief Executive

**Background Papers** - None.

# CRIME & DISORDER COMMITTEE

# REPORT

10 May 2011

**Subject Heading:**

Annual Report 2011/2012

**Report Author and contact details:**

James Goodwin, Committee Officer  
01708 432432

**Policy context:**

To summarise the work of the Council's  
Crime & Disorder Committee.

**Financial summary:**

Not applicable.

## SUMMARY

This report is the annual report of the Committee, summarising the Committee's activities during the past Council year.

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**RECOMMENDATIONS**

1. That the Committee note the 2011/2012 Annual Report and authorise the Chairman to agree the final version.
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**REPORT DETAIL**

During the year under review, we have met as a Committee on 4 occasions and dealt with the following issues.

**1. TOPIC GROUPS**

1. There were no Topic Groups in the year.

**2. NHS Havering**

1. At its meeting on 14 July 2011 the Committee received a presentation from Jacqui Himbury, the Havering Borough Director and Nuzhat Anjum, Head of Public Health Commissioning. Nuzhat Anjum was responsible for the DAAT budgets across ONEL and he advised the Committee that Havering's performance was very good.
2. Currently Havering was 'Non Intensive' so clients engaged in the Drug Intervention Programme (DIP) on a voluntary basis. To address this it was proposed that Havering DIP become an 'Intensive DIP'. This would make it compulsory for any person testing positive for Class A drugs to engage with the DIP service.
3. The representatives from NHS Havering admitted that the Alcohol Liaison with King Georges Hospital needed some improvement.

**3. COMMUNITY SAFETY SECTION STAFFING BUDGET 2011-12**

1. The Committee considered a report on the budget for the Community Safety section which showed that the section had 8.4FTE posts and a budget of £459,580. One of the posts was vacant and it was likely that this would remain unfilled to cover a potential shortfall on CCTV. A temporary post of full time ASB caseworker had been funded until July 2011, with further funding agreed for another year.
2. Whilst the Council's CCTV did not cover the whole borough the Metropolitan Police were very supportive of the use of CCTV, especially within Romford Town Centre. The Council had looked at the possibility f

extending coverage but the cost of communication from outlying areas to the Control Centre had proven excessive. However, the possible extension of CCTV and new ways of working, drawing on the experience of neighbouring boroughs was being explored.

**4. FUTURE OF THE SAFER NEIGHBOURHOOD TEAMS**

1. Following on from discussions last year the Committee were informed of the outcome of the review of the Safer Neighbourhood Teams. They were pleased to note that the Teams would maintain their existing structure although there would be the ability to temporarily flex resources across ward boundaries in response to specific problems.
2. The principle of 2 PC's and 3 PCSO's (6 PCSO's in an enhanced ward) would remain. However, there would be a reduction in the number of Sergeants available to manage the Teams. For Havering this meant a reduction of 4 sergeants with eight wards being combined into four each joint team served by one sergeant, The wards affected were:
  - Mawneys/Havering Park
  - Pettits/Squirrells heath
  - Hacton/Elm Park
  - Upminster/Cranham.

**5. HAVERING COMMUNITY SAFETY PARTNERSHIP – PRIORITIES FOR 2011/12**

1. The Committee received a report from the HCSP analyst regarding priorities for 2011/12. Progress against the targets were viewed as at the end of August 2011. The figures seemed to indicate there was a problem with fires but the Committee were informed that the Fire Brigade were not concerned as this was the peak time for fires and experience showed that there would be a drop off over the remainder of the year.
2. Prior experience had shown that the peak period for burglary was December and January and during these months the Partnership concentrated their efforts. However, despite perceptions to the contrary over a weekend on average less than five people were victims of a criminal action in Romford Town Centre.

**6. COMMUNITY SAFETY FUND**

1. Throughout the year the Committee received regular reports on how expenditure from the Safer Stronger Community Fund had been spent. The Committee had an opportunity to comment on the various projects being funded and monitor the level of expenditure, to ensure all the monies were spent during the financial year.
2. One of the new projects developed by the Havering Community Safety Partnership in conjunction with our local banks, the Metropolitan Police, Community Police Consultative Group and Age Concern, was the

banking protocol. The scheme has a strong focus on prevention and early intervention. It provides a route for bank staff to tactfully intervene when older and vulnerable customers seek to withdraw unusually large sums of cash. Therefore, not only does it focus on preventing our residents from being a victim of crime but also identifies vulnerable residents who might be living with dementia, so we can intervene and provide access to vital support services.

3. The initial idea for the scheme emerged after several reported incidents in Havering of older and vulnerable people being accompanied to banks, building societies and post offices by unscrupulous conmen to withdraw large sums of cash as payment for supposed 'building work'. Following discussions at the Community Safety Serious Acquisitive Crime Group a working group was established and project plan was developed. Funding was secured from the Community Safety Service and the CPCG.
4. The banks have been keen to adopt the scheme. Bank staffs use a prompt card with set questions to tactfully enquire about the purpose of any cash withdrawal over £500. They will explain the dangers of carrying large sums of cash and suggest an alternative, and safer, method of payment such as a cheque or bank transfer. If the cashier is suspicious in any way about the intent of the withdrawal or the vulnerability of the customer, he/she will notify their supervisor immediately and a call will be placed to the appropriate agency for assistance. This might be Trading Standards and/or the Police if they suspect the customer a victim of crime; or Adults Social Care and/or Age Concern if they feel the customer is confused in any way. The simple act of asking a few questions allows bank staff to delay the withdrawal of large sums of cash to give the referral agency time to respond.
5. Currently 19 banks have signed up to the scheme across the Borough.
6. Back in October £10,000 had been approved to support targeted work against scrap yards.

### **Operation RAM**

Following discussions at the HCSP on the increasing trend in theft of motor vehicles across the Borough, the Community Safety Service were tasked with coordinating a multi agency partnership meeting to address metal theft in Havering. Funding was secured from the Havering Community Safety Partnership to deliver a series of multi agency operations targeting scrap metal dealers within the Borough. Partners involved included Havering Council, Havering Police, London Fire Brigade, Environmental agency, and Customs and Excise.

Op Ram commenced on the 10th October 2011 and ran for a two week period targeting problematic scrap metal dealers in the Rainham area. Successes included over 15 arrests were made, two stolen vehicles were recovered, and 122 fixed penalty notices were served for failure to

produce a waste license. A number of cars were stopped during ANPR operations and 9 were identified as unroadworthy and seized. Ten vehicles were seized by Customs and excise for use of red diesel, which carries a fine of £500.

Thirty eight sites were visited with the Environment Agency and intelligence was gathered to support future operations. A Subsequent reactive Operation led to a further fourteen arrests.

Operation Ram was identified as good practise by the Metropolitan Police Force and has subsequently been rolled out to all Boroughs as Operation Ferrous.

There were 3 more week long operations since December with further planned in 2012.

**7. PUBLIC ORDER DISTURBANCES**

1. Following the Public Order Disturbances which had occurred last August the Committee reviewed the actions taken locally to ensure that Havering did not suffer as did other London Boroughs. Close co-operation between the Council, whose actions were co-ordinated by the Community Safety Manager, the Police and other Partners had lead to quick reactions to perceived problems enabled the police to head of any trouble before it started.

The Committee were informed that a review was being undertaken locally to see what happened and looking to identify the cost to the council of their response and the cost to local businesses. The Police informed the committee that they had made 24 arrests in the borough with 25 crimes reported.

**8. WORK OF THE TRADING STANDARDS TEAM**

1. The Trading Standards Divisional Manager attended the Committee and gave a presentation highlighting the work of his team in so far in tackling Crime and Disorder. He gave details of the different initiatives in which they were involved. These included the banking Protocol and Operation Ram.
2. Also of interest to the Committee was the work undertaken with test purchases, especially underage sales. The target for the team was to carry out 150 test purchases a year and these were targeted at known problem premises. Because of this targeted approach Havering had 20% failures on the test purchases compared to a London average of 17%. Another factor which may have contributed to the failure rate was the fact that the number of licensed premises in Havering had increased from 400 in 2007 to 570 in 2011.
3. Of particular concern to the Committee was the fact that an high



## **Crime and Disorder Committee, 8 May 2012**

- . percentage of the failed purchases occurred late at night when often untrained staff were serving. The Committee asked the Licensing Committee to look into the possibility of imposing conditions requiring the presence of a Designated premises Supervisor and/or Personal Licence Holder during these late hours.

### **9. YOUTH OFFENDING TEAM**

1. The Youth Offending Team had failed the recent Core Case Inspection of Statutory Youth Offending Work in Havering. A list of recommendations to improve the service had been issued and the Committee considered progress towards implementing these recommendations.
2. The Committee had concerns at the performance of the Youth Offending Team and agreed they would receive regular reports to monitor progress in meeting the recommendations. At the last meeting they felt good progress was being made and were pleased to note that the IT problems being experienced by staff attending Barkingside Court had been resolved.
3. Concern was expressed that following the changes in court arrangements whereby all Youth cases from Havering, Barking & Dagenham and Redbridge were initially referred to Barkingside Courts had increased the work load for Havering staff. Each borough were allocated a court day, but on that day they were expected to cover any cases from the other two boroughs which were dealt with as an emergency. Given the number of cases Havering normally dealt with compared with Barking & Dagenham and Redbridge on a regular basis this meant how workload had increased.

### **10 POLICE REFORM AND SOCIAL RESPONSIBILITY ACT 2011**

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  1. Throughout the year officers had kept the Committee informed of potential changes as a result of the Police Reform and Social Responsibility Act. As far as it related to London the major change was the abolition of the Metropolitan Police Authority and its replacement by the Mayors Office for Police and Crime (MOPC). Whilst the rest of the United Kingdom would have an opportunity to elect a Police and Crime Commissioner the Mayor of London was given this role in the capital.
  2. Unlike the Metropolitan Police Authority the MOPC would not be a responsible authority therefore the Crime and Disorder Committee would not have the opportunity to require their attendance. However, MOPC was required to co-operate with the Community Safety Partnership to reduce crime and disorder and re-offending.
  3. Responsibility for the crime and order reduction grants would pass from the Home Office to MOPC. It was possible that the MOPC's priorities would be different to local priorities and this could lead to a reduction in funding locally. It was hoped that the Community Safety Partnerships

## **Crime and Disorder Committee, 8 May 2012**

discussions with other Outer London Boroughs would help resolve our concerns.

### **11 LONDON PROBATION TRUST**

1. The Committee received a report on the work of the London Probation Trust and particularly the effects of the reorganisation on the service. They were informed that the focus of the Trust was to reduce re-offending and that 780 offenders lived in Havering, 54% of whom were on community orders or suspended sentence orders. 142 persons were on licence having previously been in prison with 250 persons being incarcerated, the majority of whom were in Pentonville.
2. The Probation Trust work first with the offender but also worked with the family. They was an Offender Supervisor in prison who worked closely with the Probation Service. The Trust worked with offenders who were sentenced to a custodial sentence of 12 months or more, No one worked with offenders who received a shorter sentence,
3. The Committee were informed that the borough had the 8<sup>th</sup> lowest rate of Domestic Violence, although this had increased by 5% recently. However, the borough did benefit from one of the highest arrest rates in respect of Domestic Violence.

### **12 LONDON FIRE AND EMERGENCY PLANNING AUTHORITY**

1. The new Borough Commander attended the Committee to up date them on the work of the London Fire Brigade in Havering. He highlighted the number of programmes the Fire Brigade ran to reduce Crime and Disorder. Members of the Committee who had taken the opportunity to visit the LIFE, Local Intervention Fire Education, commented and what a positive experience this was. The Committee were informed that in 2013 the LIFE programme would move to Romford whilst the Dagenham Fire Station was renovated.

### **13 VISITS**

1. Throughout the year the Chairman has been carrying out a series of visits to see how the Courts work. He has visited the local Magistrates Court on three occasions and with colleagues took the opportunity to visit Basildon County Court.
2. In addition the Chair together with Councillor Osborne has visited the House of Commons to observe how the House of Commons committees discuss legislation, specifically the passing of the Police Reform and Social Responsibility Act 2011.
3. A group of members also availed themselves of the opportunity to visit the four fire stations in the borough and obtain an insight in to how the Fire Brigade work locally.

**14 MEETINGS**

1. The Chairman has held regular meetings with The Borough Commander, Chief Superintendent Mike Smith. This is an opportunity to keep himself updated on current events and to raise specific issues of concern.

**IMPLICATIONS AND RISKS**

**Financial implications and risks:**

Narrative report only - not applicable.

**Legal implications and risks:**

Narrative report only - not applicable.

**Human Resources implications and risks:**

Narrative report only - not applicable.

**Equalities implications and risks:**

Narrative report only - not applicable.

**BACKGROUND PAPERS**

None

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