

LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD

Friday, 1 December 2017 at 10.00 am

Sparkenhoe Committee Room, County Hall, Glenfield Agenda

- 1. Introductions.
- 2. Minutes of previous meeting.

(Pages 3 - 10)

- Matters arising.
- 4. Declarations of interest.
- 5. Safer Communities Performance 2017/18 Quarter 2.

(Pages 11 - 16)

The Report will be presented by Rik Basra, Community Safety Coordinator.

6. The National Probation Service Leicestershire.

(Pages 17 - 20)

The report will be presented by Carolyn Maclean, National Probation Service Leicestershire.

 Domestic and Sexual Violence and Abuse Update. (Pages 21 - 24)

The report will be presented by Supt. Simon Cure, Leicestershire Police.

8. Domestic Abuse: November 2017 Awareness Raising Campaign.

(Pages 25 - 30)

The report will be presented by Julia Young, representing Gurjit Samra-Rai, Community Safety Manager.

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9. LSCSB Update: Supporting Leicestershire Families.

(Pages 31 - 34)

The report will be presented by Carly Turner, Service Manager Supporting Leicestershire Families.

10. Prevent - Update.

(Pages 35 - 38)

The report will be presented by Chris Thomas, Head of Service Early Help and Safer Communities.

Links between Leicestershire Safer
 Communities Strategy Board and the Health and Wellbeing Board.

(Pages 39 - 58)

The report will be presented by Joshna Mavji, Public Health.

12. LSCSB Update: Neighbourhood Watch Leicester, Leicestershire and Rutland.

(Pages 59 - 66)

The report will be presented by Richard Clarke, Chairman Neighbourhood Watch Leicester, Leicestershire and Rutland.

- 13. Other business.
- 14. Date of the next meeting.

The next meeting of the LSCSB is scheduled to take place on Friday 23 March 2018 at 10.00 am.

Agenda Item 2

Leicestershire Safer
Communities Strategy
Board
Making Leicestershire Safer

Minutes of a meeting of the Leicestershire Safer Communities Strategy Board held at County Hall, Glenfield on Monday, 4 September 2017.

Present

Ivan Ould CC - in the Chair

Cllr. Lee Breckon JP Community Safety Partnership Strategy Group

Chair - Blaby District Council

Cllr. Malise Graham MBE Community Safety Partnership Strategy Group

Chair - Melton Borough Council

Cllr. Kevin J. Loydall Community Safety Partnership Strategy Group

Chair - Oadby and Wigston Borough Council

Cllr. Jonathan Morgan Community Safety Partnership Strategy Group

Chair - Charnwood Borough Council

Cllr. Trevor Pendleton Community Safety Partnership Strategy Group

Chair - N. W. Leicestershire District Council

Cllr. Michael Rickman Community Safety Partnership Strategy Group

Chair - Harborough District Council

Matt Cane Leicestershire Fire and Rescue Service

<u>Officers</u>

John Richardson Blaby District Council

Stephen Glazebrook Oadby and Wigston District Council

Julie Robinson Charnwood Borough Council

Sharon Stacey Hinckley and Bosworth Borough Council

Chris Thomas

Gurjit Samra-Rai

Karen Earp

Ann-Marie Hawkins

Leicestershire County Council

Leicestershire County Council

Harborough District Council

Chris Brown North West Leicestershire District Council

<u>Others</u>

Lord W Bach Police and Crime Commissioner

Joshna Mavji Public Health

Supt. Shane O'Neill Leicestershire Police
Jonathan White Leicestershire Police

Apologies for absence

Chief Supt. Andy Lee Leicestershire Police

Jane Moore Assistant Director, Education and Early Help,

Leicestershire County Council

Mina Bhavsar Head of Adult Safeguarding (LLR CCG Hosted

Safeguarding team) representing Ket Chudasama;

Asst Director of Corporate Affairs (WLCCG)

Mark Smith Oadby and Wigston Borough Council

Rik Basra Community Safety Coordinator, Leicestershire

County Council

16. Introductions.

The Chairman welcomed everyone to the meeting and all those present introduced themselves.

17. Minutes of previous meeting.

The minutes of the meeting held on Friday 2 June 2017 were taken as read and confirmed as a correct record.

18. Matters arising.

There were none to note.

19. Declarations of interest.

The Chairman invited members who wished to do so to declare any interests in respect of items on the agenda for the meeting.

No declarations were made.

20. LSCSB Performance Report Quarter 1 2017/18.

The Board considered a report from Karen Earp, Research and Insight Manager which gave an update on the Safer Communities Performance for Quarter 1 2017/18. A copy of the report, marked 'Agenda Item 5', is filed with these minutes.

The Board discussed the information presented in Appendix 1 and were informed that there was an upward trend in reported crime levels overall. With regard to the increase in reporting of hate crimes, this was seen as an indicator of the success of the Hate Incident Project, which encouraged an increase in reporting.

It was explained that some data included in Appendix 1 was collected at different times of the year, from different sources which made it difficult to compare. For example, the Youth Offending Service tracked the cohort of offenders over the year which made it difficult to compare that on a quarterly basis with other crime data. Members were informed that this had been highlighted within the report against the individual data sets where this was the case.

The Board was informed that the new indicator 'percentage of people that agree Anti-Social Behaviour (ASB) has decreased or stayed the same' had replaced the other two indicators related to ASB that had been included in the Community Based Survey. Performance against this new indicator had decreased compared to the previous quarter; officers would continue to closely monitor

The Board was informed that the Risk Harm Rating Dashboard discussed at the last meeting showed that the area had moved from a low to a medium risk classification.

RESOLVED

performance.

That the Quarter 1 2017/18 Performance Report be noted.

21.LSCSB Updated Terms of Reference.

The Board considered a report from Gurjit Samra-Rai, Community Safety Team Manager, regarding the updated and refreshed Terms of Reference for the Leicestershire Safer Communities Strategy Board. A copy of the report, marked 'Agenda Item 6', is filed with these minutes.

The Board welcomed the inclusion of Leicester City Council and Rutland County Council as participating observers with no voting rights on the Board and agreed that they should be encouraged to attend meetings of the Board. All recognised the benefits of their attendance in terms of discussing cross boundary crimes and in sharing information.

Following discussion, it was agreed that the Revised Terms of Reference would be amended as follows:

- i) that the section on 'substitutes' would be amended to include:
 - that an officer from the Office of the Police and Crime Commissioner would attend in the absence of the Police and Crime Commissioner;
 - that an officer would substitute in the absence of the Chairman of each Community Safety Partnership;
 - that a District officer would substitute in the absence of the relevant District Councillor; and
 - that each substitute would have voting rights in the circumstances outlined above.
- ii) That the 'Purpose' would be amended to read:

"The Leicestershire Safer Communities Strategy Board (LSCSB) will oversee and co-ordinate the implementation and delivery of Leicestershire Community Safety *Partnership* priorities including co-ordination of the Police and Crime Plan";

iii) That reference to the Leicestershire County and Rutland Primary Care Trust (PCT) would be removed and changed to the West Leicestershire Clinical Commissioning Group and the East Leicestershire Clinical Commissioning Group;

iv) That the operational arrangements regarding the quorum for meetings of the Board would clarify that a minimum of 6 *voting* members would be required for the meeting to be quorate.

RESOLVED:

- a) That the revised Terms of Reference be approved, subject to the changes requested by the Board;
- b) That Leicester City Council and Rutland County Council be encouraged to attend future meetings.

22. Strategic Partnership Board Update.

The Board received a verbal update from Chris Thomas, Head of Service Early Help and Safer Communities at Leicestershire County Council, regarding the Strategic Partnership Board which was held on 3 July 2017.

The Board were informed that the priorities for 2017/18 had been clarified at the meeting and that the Executive would devise a delivery plan under each priority area. Reports had also been received which covered knife crime, counter terrorism and Braunstone Blues.

A multi-Agency Pursue Panel would be established which included Leicester City and Leicestershire County Youth Services, Child Safeguarding Boards from Leicestershire County and Leicester City, Leicestershire Police, Leicestershire Head Teachers and East Midlands Ambulance Service.

With regard to tackling knife crime, the Board were informed that agencies were working in partnership with the local Accident and Emergency Department to share information on certain injuries. Additionally, there was a regular update on knife crime at the Leicestershire Police force tactical meeting, to which City and County representatives were invited.

RESOLVED

That the update from the Strategic Partnership Board be noted.

23. Leicestershire Police and Crime Commissioner Update.

Lord Willy Bach provided a verbal update on his work as the Police and Crime Commissioner (PCC) and explained that he was looking forward to hosting a meeting with the Chairs of Community Safety Partnerships (CSPs) on 27 September 2017 at Leicestershire Police Head Quarters. He also invited Mr I. Ould CC, Chairman of the Leicestershire Safer Communities Strategy Board to attend. He added that the meeting would provide an opportunity to discuss funding with the CSPs as a large part of their funding came from the Office of the PCC.

Lord Bach informed the Board that grants of up to £10,000 were available to fund a range of activity that tackled crime and supported victims. He encouraged Community Safety Partnerships to advertise the availability of these grants to Third Sector organisations and private firms.

He informed the Board that he would, with the Chief Constable, meet with Parish Councils on Wednesday 27 September at 5pm to discuss rural crime and asked

members of the Board to promote the opportunity to increase attendance. The meeting would be held at Leicestershire Police Head Quarters.

Lord Bach highlighted that demand for a Police response had risen, with the use of 101 and 999 much higher on this recent August Bank Holiday weekend compared to the same time last year. Call centre improvements had been put in place and, through the introduction of a new system, people were able to track their own crimes online. Additionally, a webchat and the facility to report crimes online would be introduced in January 2018; all of which supported the efficient management of the increased demand.

Regarding the issue of missing persons, Lord Bach highlighted that there was a need for all partners, including Leicester City and Rutland, to work in partnership to address what had become a growing issue.

The Board was informed that the Fire Service and Police in Coalville would amalgamate into a single building and would look for opportunities for joint working to deliver efficiencies.

RESOLVED

That the update from the Police and Crime Commissioner be noted.

24. Partner Change Update - Leicestershire Fire and Rescue Service.

The Board considered a report from Matt Cane, Head of Community Safety at Leicestershire Fire and Rescue Service (LFRS) which provided an update on the work of LFRS. A copy of the report, marked 'Agenda Item 9', is filed with these minutes.

Details of the Braunstone Blues project were given and it was highlighted that the emphasis of the project was on enhancing the work already in place in an area. The Board recognised the effectiveness of the Braunstone Blues and acknowledged that there was a need to explore how that effectiveness was illustrated and success judged, to enable further roll-out in other areas.

LFRS, along with partners, had put in place a range of support for young people including Cadet groups in Leicester City and Market Harborough, and the targeted youth course in North West Leicestershire. Funding had been provided by CSPs and the opportunity for further roll-out in other areas was highlighted should funding from the CSP become available.

RESOLVED

That the report giving an update on the work of the Leicestershire Fire and Rescue Service be noted.

25. Leicestershire Policing Priorities and Police Strategic Assessment.

The Board received a presentation from Superintendent Shane O'Neill of Leicestershire Police which explained the Policing priorities for 2017/18. A copy of the presentation is filed with these minutes.

It was explained to the Board that delivery plans would be put in place for the 4Ps – Pursue, Prevent, Protect and Prepare. The Board were assured that resources for day to

day operations would not be affected. Additionally, delivery plans were in place to address other areas of concern – knife crime, terrorism, violent crime. Officers would ensure that each plan linked to the strategic priorities to ensure a consistent delivery across the force.

RESOLVED

That the presentation on the policing priorities for 2017/18 be noted.

26. LSCSB Update: Anti-Social Behaviour Case Management.

The Board considered a report from Gurjit Samra-Rai, Community Safety Team Manager, which provided an update on the current and planned developments in the management of Anti-Social behaviour (ASB) across Leicester, Leicestershire and Rutland (LLR). A copy of the report, marked 'Agenda Item 11', is filed with these minutes.

The comprehensive programme of ASB training for all front line neighbourhood policing teams, all local authorities across LLR and anyone managing ASB cases would begin imminently and would bring a consistent approach to the management of ASB across LLR, whilst still allowing for local variance. The Board were concerned that a too rigid approach would not enable good practice to shine through in particular areas.

The Board were concerned that the appropriate tools were in place to enable the sharing of data between partners within the principles of the Data Protection Act. It was recognised that SENTINEL could be used more effectively and consistently to enable data sharing between partners.

RESOLVED

That the update on the developments in the management of ASB be noted.

27. LSCSB Update: Domestic Abuse.

The Board considered the report from Gurjit Samra-Rai, Community Safety Team Manager, which provided an update on developments, challenges and opportunities regarding partnership domestic abuse and sexual violence projects and commissions. A copy of the report, marked 'Agenda Item 12', is filed with these minutes.

The Board were concerned about how best to communicate to people the key messages regarding domestic abuse, especially to those with low literacy levels. It was noted that information needed to be distributed through a variety of places – e.g. places of worship, schools and doctors' surgeries. The Board welcomed further information on how awareness could be raised of the issues related to domestic abuse.

The Board noted that it was likely that different partners dealt with the same families and highlighted that it was vital to share information to ensure efficient service delivery. It was acknowledged that all agencies had a role in supporting people affected by domestic abuse and were required to cooperate across partnerships in the prevention of abuse.

The Board were informed that the Specialist Domestic Abuse and Sexual Violence Service supported primary victims aged 13 and over. Regarding those under 13 years of age, schools had a role in referring those of concern to social workers; Accident and Emergency Departments could also pass information on.

RESOLVED

- a. That the update on developments, challenges and opportunities regarding partnership domestic abuse and sexual violence projects and commissions be noted.
- b. The Community Safety Team Manager to present a report to the next meeting of the Board on how to raise awareness of domestic abuse issues.

28. Other business.

i) Drug and Alcohol Data

Councillor Michael Rickman highlighted that he had had difficulty in obtaining data from Turning Point related to drug and alcohol misuse showing trends and comparisons; however, he had managed to source the data through the Clinical Commissioning Group (CCG). The Board noted that this raised the issue of monitoring carried out by the CCG.

RESOLVED

That Chris Thomas, Head of Service Early Help and Safer Communities at Leicestershire County Council, would speak with Public Health colleagues and would formally request the data from Turning Point for CSPs.

ii) Community Safety Agreement

Gurjit Samra-Rai, Community Safety Manager, Leicestershire County Council, explained that it was a statutory requirement for two tier local authorities to have a Community Safety Agreement and that she planned to draw up an agreement for Leicestershire. In order to inform the process, she asked all CSP managers to forward their Community Safety Strategy to her.

RESOLVED

That Community Safety Managers would send their CSP Community Safety Strategy to the Community Safety Manager at Leicestershire County Council.

iii) Partnership Mapping

Councillor Kevin Loydall asked whether a structure chart existed which explained the linkages between the different partnerships and their roles.

RESOLVED

That the Community Safety Manager, Leicestershire County Council would draw together a structure chart explaining the many partnerships and their role in community safety.

29. Dates of future meetings.

It was noted that future meetings of the Board were scheduled to take place at 10.00am on the following dates:

- Friday 1 December 2017
- Friday 23 March 2018
- Friday 15 June 2018
- Friday 28 September 2018
- Friday 7 December 2018

10.00 – 11.35am 4 September 2017

CHAIRMAN

Leicestershire Safer
Communities Strategy
Board
Making Leicestershire Safer

LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD 1 DECEMBER 2017

SAFER COMMUNITIES PERFORMANCE 2017/18 QUARTER 2

Introduction

- The purpose of this report is to update the Leicestershire Safer Communities Strategy Board (LSCSB) on the Safer Communities performance for 2017/18 Q2. The Safer Communities dashboard is shown at Appendix 1.
- 2. The dashboard shows performance of each key performance indicator (KPI) and includes rolling 12 months trend data. Collated comparative data is also included showing most similar group (MSG) ranking and, more locally, charts showing how district councils compare.

Overall Performance Summary

- 3. All crime reduction performance categories continue to follow a downward trend in Q2, as detailed below in paragraphs 7-11. Regional comparisons show vehicle crime is increasing and performing worse than the regional average, whilst other crime performance indicators, although on an upward trajectory, are performing better than the regional average.
- 4. Regarding Anti-Social Behaviour (ASB), changes to the Community Based Survey (CBS) have necessitated utilising a new ASB performance indicator. This shows public perceptions regarding ASB levels are on a sustained downward trend as detailed at paragraph 18.
- 5. Hate incident reporting; which initially fell short of target during 2016/17, has recovered with a 19% increase compared to the previous 12 months. Reporting numbers however, are small and fluctuations can disproportionately affect statistics.
- 6. Performance with regard to each priority is outlined below.

Ongoing Reductions in Crime

7. Domestic Burglary rates have increased compared with the previous year. However, changes to recording practice may at least partially account for the increase. In May 2017, burglary dwelling classification changed to incorporate structures within the curtilage of a dwelling (sheds, out-buildings, garages). A year on year comparison therefore is not possible until there is a full year's data under the new classification. Q1 shows a rate of 4.38 burglaries per 1000 population; Q2 shows a rate of 4.82. Although increasing it is a relatively small increase.

- 8. The current offence rate for all Burglary, incorporating both residential and commercial burglaries, is 7.96 per 1000 households. This is a 17% increase on the previous rolling 12 months, which is in-line with the regional average of 7.5.
- 9. Vehicle crime is continuing its increasing trend with a 32% increase compared to the same period last year. The Q2 rate of 8.48 crimes per 1000 population is higher than the regional average of 7.4.
- 10. The upward trend in violence with injury rates has continued in Q2 with 4.35 offences per 1000 population. Increases have been seen nationally; to add context, the regional average is 7.7 per 1000 population.
- 11. In summary, reported crimes in Leicestershire County in 2016/17 showed an increasing trend with an overall year on year increase of 21%. Q1 and now Q2 continue the upward trend with a current overall rate running at 56.4 crimes per 1000 population. This is, however, below the regional average of 67 crimes per 1000 population.

Reducing Re-offending

- 12. Integrated Offender Management (IOM) data monitors the Leicester, Leicestershire and Rutland wide overall reoffending rate amongst a representative cohort of offenders (163); Performance is measured annually and separate county figures are no longer produced. The percentage reduction in reoffending has shown a slight improvement with the 2014/15 figure sitting at 40%, a 2015/16 figure of 41% and current rolling 12 month figure of 42.8% reduction.
- 13. With regard to the number of first time entrants (FTE) into the criminal justice system aged 10-17, there were 32 FTE's in Q1 2017 (data is collected a quarter in arrears), which was a reduction of 4 young people (22.2%) in relation to the same quarter last year (36 FTE's). This KPI has shown continuous improvement; to add context, 2014/15 set a baseline figure of 190 entrants with a sizable fall to 126 FTE by 2016/17.
- 14. Reoffending rates for 2016/17 was 0.91 compared to 0.82 in 2015/16. This is ahead of the regional (1.26) and national (1.11) performance.

Repeat Victimisation and Vulnerable Victims

- 15. The rolling 12 month figure as at June 2017 for Repeat Multi Agency Risk Assessment Conference (MARAC) referrals is 27%. This is just below the SafeLives recommended threshold of between 28% and 40%.
- 16. The number of referrals to United Against Violence and Abuse (UAVA) in the 12 months up to June 2017 was 1448. This is an increase on the end of year figure of 1174 referrals. Data for district services has not been provided.

Anti-Social Behaviour (ASB) and Satisfaction

- 17. In 2017/18 the Community Based Survey (CBS) was recommissioned with a new question set agreed. The two questions previously used as a KPI "% of people stating that they have been a victim of anti-social behaviour in the past year" and "% of people stating that they feel that the police and other local public services are successfully dealing with ASB and crime in their local area" are no longer asked in the survey. Another question is now used to assess perceptions of ASB going forward: "% of people that agree ASB has decreased or stayed the same".
- 18. In relation to the question above, the Q2 figure shows that 81.5% of respondents agreed that ASB had decreased or remained the same. This value is down 13% on the comparable value in Q2 2016/17. The established quarter response to this question is usually between 92% and 97%, which shows a marked decrease for the current quarter.

Preventing terrorism and radicalisation

19. Reported hate incidents had previously shown a sustained, albeit slow, overall downward trend with a 2015-16 figure of 0.58 reports per thousand. However, recent figures show a very slight improvement with a 2016/17 rolling figure of 0.66 reports. Q2 trend data shows further increases in reporting with 0.84 reports per thousand population. To add context, reporting numbers are relatively small and as such small changes disproportionally affect the overall trend data.

Recommendations

20. That the Board notes the 2017/18 Q2 performance information.

Officers to Contact

Rik Basra Community Safety Coordinator Tel: 0116 3050619

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Appendices

Appendix 1- Safer Communities Performance Dashboard Quarter 2, 2017/18



Appendix 1 - Safer Communities Performance Dashboard Quarter 2, 2017/18

Outcomes	Overall Progress RAG	Supporting Indicators	Year end (2016- 17)	Current Year Q2 rolling 12month (2017-18)	Current Direction of Travel	Progress	Nearest Neighbour Comparison	County Comparison	District Comparison
Ongoing reductions in crime	Α	Total Crime rate (per 1,000 population)	51.61	56.40	1	A	4/9	Тор	B C H HB M NW O
		Domestic Burglary rate (per 1,000 population)	3.91	4.82¹	\Rightarrow	A	6/9	Average	B C H HB M NW O
		Burglary Rate (Includes residential, business & community)	7.33	7.96	\Rightarrow	A	5/9	Average	
		Vehicle Crime rate (per 1,000 population)	7.29	8.48	1	A	6/9	Below average	B C H HB M NW O
		Violence with Injury rate (per 1,000 population)	3.93	4.35	1	A	2/9	Тор	B C H HB M NW O
Reduce offending and re-offending	G	% Reduction in offending by IOM & PPO Offenders	41%	42.8%	\Rightarrow	G		-	
		Rate of re-offending by young offenders (local data)	0.82 April 15- March 16	0.91 April 16- March 17	•	G		-	
		Number of first time entrants to the criminal justice system aged 10 - 17	126	32 (YTD)	•	G		Тор	B C H HB M NW O
Protect and support the most vulnerable in communities		% of domestic violence cases reviewed at MARAC that are repeat incidents	30.0%	27% July 16- June 17	•	G		-	
	G	Number of referrals to domestic abuse support services (adults). From December 2015 includes sexual violence referrals.	1611²	1448 ³ July 16- June 17	•	G		-	
Continue to reduce anti-social behaviour	G	NEW - % of people that agree ASB has decreased or stayed the same.	93.9%	81.5%	•	A		-	B C H HB M NW O
Prevent people from being drawn into terrorism with a focus on working in partnership to reduce the risk of radicalisation	A	Reported hate incidents (per 1,000 population)	0.66	0.84	Ŷ	G		-	B C H HB M NW O

¹ Domestic Burglary rates are higher due to HO reclassification "Burglary Residential"

³UAVA referrals only

²Includes UAVA referrals (1174), HBBC & Blaby support services (287), LWA lottery funded outreach services(150).

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LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD 1 DECEMBER 2017

THE NATIONAL PROBATION SERVICE LEICESTERSHIRE

Background

1. The National Probation Service (NPS) are part of Her Majesty's Prison and Probation Service (HMPPS), an executive agency of the Ministry of Justice. The NPS are responsible for the statutory supervision of offenders managed under Multi-Agency Public Protection Arrangements (MAPPA), other offenders assessed as posing high risk of serious harm, foreign national prisoners subject to deportation orders along with any cases of notoriety. The purpose of this report is to update the Board on developments within the service over the last 12 months.

Notable developments and challenges

2. 2017 has been a year of continuing change and development for the National Probation Service following the Transforming Rehabilitation changes which began in 2014. A new operating model is in place which sets out and embeds the national changes achieved via the E3 (Efficiency, Effectiveness, Excellence) programme. Key changes are highlighted below in table 1.

Table 1

Business Area	Key components of the model
Approved Premises (AP)	Standard staffing model with clear roles and responsibilities
Tremises (var)	Standard operating model, prioritising key work and purposeful activities
	Enabling Environments for all Approved premises to enhance staff skills and improve residents' experience
	Electronic referrals through divisional hubs to reduce duplication and maximise occupancy
Youth offending service (YOS)	National framework for secondments, providing clarity for YOS and NPS
	National resourcing model for secondments based on YOS caseload, to ensure consistency
	Standard secondment arrangements for staff, supporting development of skills and support for seconded staff
	Standard workload model for seconded staff, using their skills in risk assessment and risk management

MAPPA	Single national job descriptions for MAPPA coordinator, deputy MAPPA coordinator and MAPPA administrators employed by the NPS.				
VISOR (polcie case recording system for MAPPA offenders)	Increased VISOR access for relevant staff, underpinned by training and roll out of new IT equipment.				
	Nationally agreed processes and thresholds for staff undergoing VISOR vetting.				
	Development is VISOR Quality Assurance Framework (QAF) to promote maintenance and enhance quality of information included within VISOR records.				
	VISOR administrator role undertaken by case administrators				
Interventions with people who have committed sexual offences	Divisional Units delivering accredited programmes, led by a Divisional Unit Manager with Divisional referral hubs				
	Facilitators will be qualified probation officers, managed by senior probation officers (SPOs) who will undertake the combined treatment and programme management role				
	Gradual move over to the newly accredited programmes; Horizon, Kaizen and Becoming New Me.				
Complaints management	A dedicated complaints team in each division to investigate formal complaints				
	Collation and review of learning from informal and formal complaints investigations to support quality practice				
	A national complaints lead				
Administration	Administrative support resourcing model based on ratios				
	Learning and development for administrative staff				
	Reception standards				
Management structures	Complex and standard LDU cluster model				
	LDU cluster support roles for all clusters with additional resource for complex clusters providing appropriate support to heads				
	Quality Development officer (QDO) role promoting effective practice and supporting staff				
	National framework for involvement in statutory partnerships to provide consistent service to local partners				
	Senior Administrative Officers (SAOs) to line manage case				

administrators ensuring appropriate support and skills development
Oasys countersigning framework in development

3. In addition to the nationally driven work, the National Probation Service has continued to work closely with local partners; notably Leicestershire Police; the Derbyshire, Leicestershire, Nottinghamshire and Rutland Community Rehabilitation Company (DLNR CRC) and Turning Point to revise the Integrated Offender Management (IOM) model. This has led to efficiencies and, for the NPS and police, an increased focus on working in partnership with some of the most complex high risk of serious harm cases.

Coming Year

- 4. Offender Management In Custody is a key focus for HMPPS between now and full roll out in 2019. The aim is to make prisons safer and to develop more rehabilitative prisons to deliver a supportive environment for both prisoners and staff. Nationally, an additional 2,500 prison officers are being recruited and there are plans to move some NPS qualified Probation Officers and Senior Probation Officers into prisons to ensure more effective rehabilitation of the highest risk most complex prisoners.
- 5. NPS is continuing to focus on improving outcomes for Indeterminate Public Protection (IPP) Prisoners. IPP cases were sentenced under the Criminal Justice Act 2003 and at the time of sentence they were considered to present a risk to the public. In 2012 the Legal Aid, Sentencing and Punishment of Offenders Act (LASPO) abolished the IPP sentence. Nationally, there are still approximately 3,800 prisoners serving IPP sentences (excluding recalls). Over 70% (around 2,700) of these prisoners are past their tariff date. Given the abolition of the sentence, there is concern about the legal position of those who are past their tariff date or who have been recalled. The key challenges post-release are:
 - access to suitable accommodation, often as a move-on from probation Approved Premises;
 - access to meaningful highly supported employment or training outcomes;
 - access to mental health services: and
 - · access to drug and alcohol services.

Key issues for partnership working or affecting partners

- 6. The Transforming Rehabilitation (TR) agenda streamlined NPS and CRC management structures. The reality is that there is now reduced capacity to attend partnership meetings and so focus is on those attended as a key partner, part of statutory arrangements or where significant value can be added. However, if other partners perceive a need for NPS input or attendance, this will be accommodated where possible.
- 7. Finding suitable settled and sustainable accommodation for offenders, including IPP cases, is increasingly a challenge. The NPS Head chairs the Offender Management and Reducing Reoffending Board which plans to hold a spotlight session to determine how agencies can best respond to the growing pressures in finding suitable and settled accommodation for adult offenders and to help scope the impact of the Homelessness Reduction Act 2017. The NPS Head seeks support from the LSCSB in attending this session and in identifying appropriate invitees from Leicestershire and Rutland partners.

Issues in local areas

- 8. The NPS Hinckley office will close on 31 January 2018 with offenders, in future, reporting either to Leicester or the Warwickshire Justice Centre in Nuneaton. The NPS are working closely with partners to ensure that cases reporting to Nuneaton can continue to access services that are currently provided by NPS in Hinckley and are not disadvantaged by the changes.
- 9. The Board were previously advised of a planned closure of the NPS Coalville office; this will not be going ahead. The office will continue to operate on reduced opening days.

Recommendations for the Board

- 10. It is recommended that the Board
 - note the contents of the report; and
 - endorse the proposal for relevant partners to attend an LLR spotlight session on adult offender accommodation and identify appropriate invitees from Leicestershire and Rutland partners.

Officer to Contact

Carolyn Maclean LDU Head National Probation Service

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LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD: 1 DECEMBER 2017

LEICESTERSHIRE POLICE

DOMESTIC AND SEXUAL VIOLENCE AND ABUSE UPDATE

Purpose and Background

1. This report details the structures in place and significant workstreams being undertaken with regard to Domestic Violence and Abuse across Leicester, Leicestershire and Rutland. In the main this relates to multi-agency work and is not locality based.

Domestic Sexual Violence and Abuse Executive Board

- 2. This Board, which is chaired by Assistant Chief Constable Rob Nixon, was established in April 2017. Its objective is:
 - To prevent harm and reduce the risk of Domestic Violence and Abuse including Sexual Violence and Abuse within Domestic Incidents. To promote the wellbeing of victims and families, by providing Governance and Coordination across multi-agency, commissioned and voluntary services.
- 3. The group is attended by senior managers from Local Authority Children and Adult social care departments, Clinical Commissioning Groups, Local Authority Public Health departments, Local Authority Community Safety departments and Leicestershire Police. It has commissioned a Domestic Abuse Strategic Needs Assessment that is currently in draft form and has been circulated to members of the Executive. This document is extremely comprehensive and draws upon information from statutory, commissioned and voluntary agencies. The Executive has a working strategy but the longer term strategy is to be drawn up as a result of the completed Strategic Needs Assessment.

Domestic Sexual Violence and Abuse Operations Group

- 4. The Abuse Operations Group reports into the Abuse Executive Board. A decision was recently made to hold both closed meetings and open meetings of the Group, both bi-monthly. The closed meeting has members from the same organisations as the Executive, but at a middle management level. The open group has the same members as the closed, but with the addition of representatives from commissioned services and the Third sector.
- 5. The Operations Groups has a development plan which is mature and progressing well. It is considering themes such as communications strategy, perpetrator management and diversion and victim and family support. The

Operations Group will be responsible for formulating the Leicester, Leicestershire and Rutland Domstic Abuse strategy from the Needs Assessment and proposing it to the Executive Board for approval.

Violence Against Womens and Girls (VAWG) Fund Project Board

6. The Partnership, led by the the Office of the Police and Crime Commissioner, was successful in bidding for funding from the Government VAWG fund and was awarded £600k. The Project Board is responsible for delivering the strands of the project, such as half a post MARAC (Multi-Agency Risk Assessment Conference) manager, 3 partnership posts to join the Domestic Abuse Support Team, assertive outreach for victims, mentoring and community champions and therapeutic and support coordination. Finally, University research is being undertaken to establish what support and counselling works best. The VAWG Project Board reports to the Domestic Sexual Violence and Abuse Executive Group.

Marac Operations Group (MOG)

7. This group reports to the Domestic Sexual Violence and Abuse Operations Group. It has been re-invigorated and is seeking to improve the outcomes as a result of couples being referred to MARAC. Currently, it has been assessed independently that local MARAC arrangements sufficiently address the guidance set nationally by Safelives. However, it is the aspiration to create a structure which is able to undertake daily MARACs. Currently all aspects of MARAC are funded by the Police. This is at odds with other areas in the East Midlands region. Initially the VAWG fund will assist to support this funding gap.

Joint Commissioning and Assurance Board (JCAB)

8. The JCAB oversees the UAVA contract which provides a number of support functions to Domestic Abuse and sexual abuse victims including the 24/7 helpline and Independent Domestic Violence Advisors (IDVA). The group is made up of the the organisations which fund the contracts.

Domestic Abuse (DA) Health group

 The DA Health group was set up originally to resolve recommendations arising from Domestic Homicide Reviews (DHRs) and other non-statutory reviews. The terms of reference and the continuation of the group are currently being considered.

Summary

10. Domestic Abuse causes significant harm to individuals and communities. Its prevalence is endemic; Leicestershire Police alone are called to over 14000 incidents per year. The impact on families and in particular children can not be underestimated. A recent LLR Child Death Overview Panel (CDOP) review concluded that, on average, 2 children per year die in Leicester, Leicestershire and Rutland with the modifiable factor being Domestic Abuse. This is in

- addition to many people, mainly women, being murdered as a direct result of Domestic Abuse.
- 11. The creation of a single structure to coordintae the multi-agency response to Domestic abuse is intended to ensure that as a partnership we provide the best level of service to reduce the harm domestic abuse causes.

Recommendations for the Board

12. That the board note the contents of the report.

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LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD 1 DECEMBER 2017

DOMESTIC ABUSE: NOVEMBER 2017 AWARENESS RAISING CAMPAIGN

Purpose of Report

1. The purpose of this report is to give an overview of the Domestic Abuse (DA) Awareness raising campaign being delivered during November 2017. A briefing note showing an evaluation of the campaign will be tabled at the meeting.

Background

- 2. The Sexual and Domestic Violence Commissioning Group holds funding to increase public awareness of local specialist services so that those affected by the issues (victim-survivors, dependents, perpetrators or other third parties) know how to seek help. It also aims to increase equality of access and challenge stereotypes and other barriers to reporting; increasing public confidence in the local response to sexual and domestic violence.
- 3. In November 2017 (marking International Day for the Elimination of Violence Against Women on 25 November), there will be a continuation and expansion of the WRONG campaign imagery created last year, with images designed to speak to target audiences. Events held by members of the group, partners and other organisations throughout November will be supported by the WRONG visuals and there will be a small collection of 'giveaways' to promote United Against Violence and Abuse (UAVA).

The Awareness Raising Campaign

- 4. The objectives of the Awareness Raising Campaign are:-
 - To increase awareness of Juniper Lodge (adult Sexual Assault Referral Centre (SARC)) and the local UAVA helpline and website so that those affected by the issues know how to seek help;
 - ii. To raise volunteers and funds for UAVA to better meet victim-survivor need:
 - iii. To raise awareness of local frontline services and staff of the specialist services and provide tools for them to signpost more effectively;

- iv. To raise self-reporting levels, especially from under-reporting groups including:-
 - Victim-survivors over 55
 - Asian/Asian British victim-survivors
 - Perpetrators with/without children
 - o Police reporting of sexual violence whilst forensically live
- 5. The Strategy of the Campaign is to:-
 - Deliver and support a number of events across the month of November designed to raise awareness of domestic and sexual violence (DVSV), supported by social media campaign and a high visibility poster campaign in the public realm;
 - Use of targeted posters, adverts and toilet door stickers within the County Council's network and through wider contacts in locations/organisations who can reach target audiences;
 - Encourage local voluntary organisations and businesses to give out and display promotional materials.
- 6. An example of the posters used in the Campaign is attached at Appendix A.
- 7. The Campaign will focus on the following groups:-
 - Victim-survivors over 55
 - Asian/Asian British victim-survivors
 - Perpetrators with/without children
 - Generic 'anyone affected': third parties, victim-survivors, perpetrators, children and so on
 - General public
 - Internal staff
- 8. The Campaign will highlight the following key messages for perpetrators:-
 - You are responsible
 - Your behaviour is causing damage
 - You have options should you be willing to change your behaviour.
- 9. The Campaign will highlight the following key messages for victim-survivors:-
 - There are local specialist services there to help
 - Juniper Lodge and UAVA are there in the evening until 8pm and on Saturdays
 - You have options.

Measurement of Success

10. The following measures of success will be used, with data compared to previous time periods to show progress:

- Number of calls to UAVA helpline and business line
- UAVA Website: page hits, and partners' DVSV page web hits
- Social media: reach, shares and retweets
- Attendance at events and number of referrals to UAVA by people in the target groups
- SARC referrals
- Number of enquiries about volunteering and community champions
- Amount gained from fundraising for UAVA

Recommendation

11. That Members note the contents of the report.

Officer(s) to Contact:

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Appendices

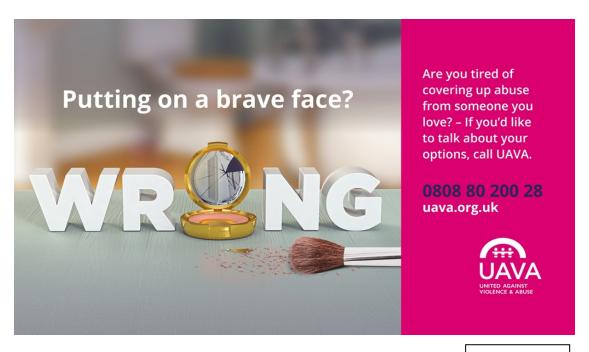
Appendix A – Domestic Abuse Campaign Images



UAVA campaign images 2017

A4 and A3 posters plus high definition adverts for digital screens in each of the designs below can all be downloaded from Dropbox.com

There are also social media images to download, and coming soon, animated videos for social media and digital screens.



Who's getting damaged?

Who's getting damaged?

More people than you think.
If you're worried about hurting your family, make a change. Call UAVA today.

0808 80 200 28 uava.org.uk

Teddy poster Make-up digital screen advert

Hole in wall social media image





Abuse in marriage or family relationships is wrong. If you'd like to get information and support, whatever your language or culture, contact UAVA.

0808 80 200 28
uava.org.uk

TV remote digital screen advert

Pestle poster

If you can't find the resources you require please contact sarah.bywater@leicester.gov.uk

UAVA (United Against Violence & Abuse)

Helpline **0808 80 200 28**Website: <u>uava.org.uk</u>
Twitter: <u>@UAVALtd</u>
Facebook: <u>@UAVALtd</u>



<u>LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD</u> <u>1 DECEMBER 2017</u>

LSCSB UPDATE: SUPPORTING LEICESTERSHIRE FAMILIES

Background

- 1. Leicestershire County Council was an early adopter of Phase Two of the expanded Troubled Families programme, after a successful first phase. The Troubled Families programme remains in Phase Two and the inclusion of families into the programme is based upon a cluster of six headline issues. To be eligible for the expanded programme, each family must have at least two of the following six problematic areas:
 - i. Parents or children involved in crime or anti-social behaviour;
 - ii. Children who have not been attending school regularly;
 - iii. Children who need help: children of all ages, who need help, are identified as in need or are subject to a Child Protection Plan;
 - iv. Adults out of work or at risk of financial exclusion and young people at risk of worklessness;
 - v. Families affected by domestic violence and abuse; and
 - vi. Parents or children with a range of health problems.
- 2. In 2013, Leicestershire County Council's response was the creation of a partnership approach across agencies to pool resources, including a pooled budget, to deliver a programme of intensive support to families with complex and multiple issues who placed demands on the resources of public sector services. From the outset of the programme, the County Council chose to work with a much broader range of families beyond the prescribed Payment By Results (PbR) criteria set out by the Department for Communities and Local Government (DCLG) in order to ensure that the new approach to working with complex families was targeted effectively across the County rather than solely focusing on the achievement of PbR.
- 3. In 2015, Supporting Leicestershire Families expanded to include the former Youth Service; this remains as the Service offer to families and young people. More families benefit from this service than are eligible for support under the Troubled Families Programme.

Notable Developments:

Payment by Results (PbR) – Phase Two:

4. The Troubled Families Unit identified that Leicestershire's target for the expanded programme is 2770 families. To date, outcomes have been claimed on 827 families, achieving 29.9% of the target set by the Troubled Families Unit

- (TFU). At the time of writing this report, a new claim is being prepared and will be audited robustly.
- 5. In April 2017, the TFU published its annual report placing Leicestershire in the top 5% of the country, with only 6 other Local Authorities (LAs) scoring above 25% of their total maximum funded families. There are 123 LAs, including Leicestershire, which provide data on their Troubled Families Programme. Of the 6 LAs which have drawn down a higher level of family funding, only one is of comparable size to Leicestershire in its targets and that is North Yorkshire. West Sussex and Leeds are larger LAs which have drawn down a high proportion of funding; the remaining 4 (Redbridge, Stockton-On-Tees, North Somerset and Merton) are all smaller with a lower number of families to support. As such, Leicestershire are a high performing Local Authority in relation to PbR.

Service Transformation - Maturity Model

- 6. A recent component of the Troubled Families Programme is the focus on service transformation. This involves embedding the learning from the programme in how agencies across the Early Help Partnership work with families with complex issues and how this is sustained after the closure of the programme in 2020.
- 7. An exercise that the partnership has been required to undertake is a self-assessment against six strands of service transformation, assessing the partnership against four stages early, developing, maturing or mature. The DCLG have named this the 'Maturity Model'. The six strands are; family experience of transformed services, workforce development, leadership, culture, delivery structure and processes.
- 8. A partnership event was held on the 15 November 2017 to undertake an assessment against the strands of the Maturity Model. The early indications from the event lean to an assessment around developing with elements of maturing. This is currently being prepared and will be shared with those partners in Early Help for validation. The DCLG require an Action Plan as part of the Troubled Families Programme which focuses on moving forward the learning from the programme into general business across a range of partners. Some of the areas for consideration in the action plan are:
 - influencing commissioning to have a whole family;
 - developing a training matrix to share the learning of whole family;
 working across partners in Early Help;
 - · creating problem solving opportunities in localities;
 - information sharing and opportunities to work smarter going forward.

The Action Plan will be formally shared and agreed before submission.

Proposed New DCLG Financial Framework:

9. The TFU are in the process of reviewing their Financial Framework: to update on elements of the Outcomes Plan and 'earned autonomy'. Earned Autonomy offers an upfront payment of monies that would normally be drawn down by PbR to enable partnerships and services to focus on service transformation. To be considered for earned autonomy there must be a clear vision about long term change and sustainability linked to the learning of the Troubled Families Programme, which continues after the programme has ended. The DCLG require clear evidence that the partnership collectively drive change and a clear plan as to how more upfront investment will help achieve the vision more quickly. The plan links with the self-assessment against the Maturity Model.

Recommendations for the Board

10. To note the progress of the work around partnership working within the Supporting Leicestershire Families Programme in Leicestershire.

Officer to Contact

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LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD

FRIDAY 1 DECEMBER 2017

PREVENT - UPDATE

Purpose of report

1. The purpose of this report is to give an overview of the Home Office pilot - Operation Dovetail and to inform the Board on how the Prevent agenda will be managed within Leicestershire County Council following the cessation of funding on 31 October 2018.

Background

- 2. Section 29 of the Counter-Terrorism and Security Act 2015 places a statutory duty on specified Authorities, including County, District and Borough Councils, to have "due regard to the need to prevent people from being drawn into terrorism". Local Authorities across Leicestershire have discharged this duty with support from the Prevent Officer based at Leicestershire County Council who supported them with the drafting of individual Prevent Action Plans and with delivering Home Office accredited Workshop to Raise Awareness of Prevent (WRAP) training.
- 3. Since September 2016 the Office for Security and Counter-Terrorism (OSCT) has undertaken a pilot (known as Operation Dovetail) to assess the feasibility of transferring responsibility and resources for Channel programme case management from the police to local authorities. Channel is part of the Prevent strategy and is a multi-agency approach to identify and provide support at an early stage to individuals who are at risk of being drawn into terrorism.

Home Office Pilot – Operation Dovetail

- 4. Nine pilot areas were identified and funding was provided for 12 months for Local Authority Channel Coordinators (LACC) to lead on managing the Channel process (assessing referrals, managing cases and the administration of the programme). The roll out is intended to reach the East Midlands in spring 2018.
- 5. The main points for consideration are:
 - i. The Local Authority will take the lead on information gathering (in the pilot this has assisted in building better relations with other partners

- such as health, education, and other Local Authority-led functions such as Social Services);
- There will be a five working day deadline to complete information gathering (in the pilot the Local Authority Channel Coordinator (LACC) spent time navigating an organisation to find the most appropriate contact);
- iii. On consent, more consideration will be given to the most appropriate partner to approach an individual rather than the default position of this being a police role. A number of the pilot sites developed practical guidance on gaining consent which will be reviewed and, potentially, incorporated into national guidance;
- iv. The police will transfer appropriate referrals to the Local Authority in a timely manner and the Local Authority will recommend whether to progress a referral to Channel;
- v. Training will be arranged by the Home Office to ensure that Local Authorities are confident in assessing referrals and developing a deeper understanding of the drivers to radicalisation. In the pilot Local Authorities were heavily reliant on the police, especially around understanding the radicalisation risk and ensuring that the Vulnerability Assessment Framework was completed accurately to determine next steps;
- vi. The Home Office will ensure that all regions have access to CMIS through existing networks before any region goes live. This is the database holding information on individuals enabling the sharing of all referrals between the Local Authority and the police.
- 6. Funding will be available for the roll out of Operation Dovetail to fund LACCs; whilst the Local Authority will chair panels and have oversight of Channel cases, they will draw on LACCs to work with a number of different panels as determined by demand. The location of the resource within each region will be subject to consultation with local authorities, and will reflect referral and case activity.
- 7. Across Leicester, Leicestershire and Rutland (LLR), whilst no firm position has yet been reached by Members and Chief Officers, as the majority of Channel cases are referred from within the City the discussion will probably centre around whether the City Council will host Channel and the LACC. If this is the proposal, consideration will be given to ensuring the checks and co-ordination of data is appropriate and within the timeframes for County and Rutland referrals.
- 8. A further issue worthy of note is that the funding for Intervention Providers may cease with this new arrangement. The Intervention Providers are individuals who work with vulnerable individuals through Channel to de-radicalise them; for 2016/17, across LLR, the programme costs were:

Q2 (July-Sept) £4,900 Q3 (Oct – Dec) £9,599 Q4 (Jan – March) £16,174

9. The Community Safety Manager is working with the Home Office and City Colleagues to ensure LLR concerns are highlighted and considered.

Leicestershire County Council - Prevent Post

- 10. The Prevent Co-ordinator post was funded for one year through the Home Office in 2016; the funding came to an end on 31 October 2017. This post was the single point of contact for internal staff and partners across the County and Rutland (including schools and District Councils), delivered the Home Office accredited WRAP training and ensured the County Council and District Councils were compliant with the Section 29 duty.
- 11. The Community Safety Manager sought funding from a range of sources, but has to date been unsuccessful. The Community Safety Team has been reorganised in order to accommodate the Prevent work, with the Community Safety Officer who has the lead for Hate becoming the central point of contact for Prevent queries and work on community engagement. The WRAP training will be delivered, predominantly, by the Learning and Development Team and the Community Safety Manager shall resume the responsibility for the corporate duty. Other members of the Community Safety Team will be trained to deliver the WRAP programme, to support districts and borough colleagues in delivering their corporate Prevent Duty and to deliver awareness raising sessions as and when required.
- 12. The new Channel responsibility, even if the City Council host the panel, will increase workloads as the County Council will be required to co-ordinate information for any County referrals.

Recommendation

13. That Members note the contents of the report.

Officer(s) to Contact

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1 DECEMBER 2017

LINKS BETWEEN LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD AND THE HEALTH AND WELLBEING BOARD

Purpose

1. The purpose of this report is to provide an update on the work being undertaken to explore how the Health and Wellbeing Board and the Leicestershire Safer Communities Strategy Board (LSCSB) can work together effectively to understand, support and help deliver common priorities.

Background

- 2. On 8 December 2016, the Leicestershire Safer Communities Strategy Board (LSCSB) received a presentation on the work of the Health and Wellbeing Board by Mr E F White CC, Portfolio holder for Health and Sport, and Chairman of the Health and Wellbeing Board, and Mike Sandys, Director of Public Health.
- 3. The presentation detailed the proposed outcome based approach to deliver the five key priorities of the Joint Health and Wellbeing Strategy 2017 2022 including:
 - i. The people of Leicestershire are able to take responsibility for their own health and wellbeing;
 - ii. The gap between health outcomes for different people and places has reduced;
 - iii. Children and young people in Leicestershire are safe and living in families where they can achieve their potential and have good health and wellbeing;
 - iv. People plan ahead to age well and stay healthy and older people feel they have a good quality of life;
 - v. People know how to take care of the mental health and wellbeing of themselves and their family.
- 4. The Board considered how to achieve a stronger working relationship between the Health and Wellbeing Board and the LSCSB, including work at district level. It was proposed that a smaller group would meet and take forward links between the two boards, including the role of the Senior Officers Group in the delivery

- plan of the Health and Wellbeing Strategy and report back to LSCSB to present the delivery plan.
- 5. At the LSCSB on 23 February 2017, the following recommendations were put forward:
 - i. To reinvigorate senior Public Health attendance to the LSCSB;
 - ii. For Public Health to complete a community safety needs assessment to identify the needs, gaps and demand across Leicestershire;
 - iii. To set up a facilitation event in late spring 2017 for key stakeholders to review the links between the LSCSB and the Joint Health and Wellbeing Strategy. This event would identify the key community safety priorities across Leicestershire and confirm the most appropriate delivery mechanism to collectively progress the agreed priorities.
- 6. The Board requested a further update in relation to the above recommendations.

Progress to date and next steps

- 7. A needs assessment is being developed for Leicestershire to explore the key aspects of community safety and health and wellbeing.
- 8. A workshop was held in September 2017 (in the presence of Mr Ivan Ould CC and Mr Trevor Pendleton CC) which was attended by community safety partners. Public Health presented headline data extracted from the needs assessment to explore the links between health and community safety. The key areas of focus and the headline data presented included the following:-

Substance misuse (drugs and alcohol)

- A significantly higher proportion of Leicestershire's 15 year olds reported having had a drink compared to the England average (69.5% vs 62.4%). 16.8% reported having been drunk in the last four weeks compared to 14.6% across England.
- ii. In Leicestershire, the rate of alcohol specific hospital admissions for young people is 20.2 per 100,000 population, which is below the national average of 37.4 per 100,000 population.
- iii. In Leicestershire, the rate of alcohol specific hospital admissions for adults is 59.2 per 100,000 population which is below the national average of 64.7 per 100,000 population.
- iv. The rate of alcohol related road traffic accidents in Leicestershire is 30 per 1,000 population which is similar to the national rate of 26 per 1,000 population.
- v. 9.5% of Leicestershire 15 year olds reported to have tried cannabis and 3.9% reported having taken cannabis in the last month. This is similar to national values of 10.7% and 4.6% respectively.

- vi. Estimated prevalence of opiate and/or crack cocaine use among 15-64 year olds in Leicestershire is 4.4 per 1,000 population. This is significantly lower than the England rate of 8.4 per 1,000 population.
- vii. In Leicestershire, although the rate of drug related hospital admissions has increased year on year to 71 per 100,000 population, it remains significantly below the national rate of 148 per 100,000 population.
- viii. In Leicestershire there has been an increase in the number and rate of drug related crimes between 2013 and 2017 (1,245 drug related crimes in 2013 which equates to a rate of 1.84 per 1,000 population; 1,345 drug related crimes in 2017 which equates to 1.99 per 1,000 population).
- ix. Drug offences have reduced significantly over the period 2013-2017 from a high of 1,030 in 2013 (a rate of 1.53 per 1000), to 479 in 2017 (a rate of 0.71 per 1000).

Mental Health

- x. One in ten people aged over 18 years in Leicestershire has a recorded diagnosis of depression. This is significantly higher than the national figure of 8.3% and equates to over 50,000 people in the County.
- xi. In Leicestershire and Rutland, the rate of hospital admissions for mental health conditions for those aged 0-17 years was 64.2 per 100,000 population. This is significantly lower than the England rate of 85.9 per 100,000 population.
- xii. 15.0% of individuals in Leicestershire are in concurrent contact with mental health services and substance misuse services for alcohol misuse. This is significantly lower than the national proportion 20.8%.
- xiii. In Leicestershire, the rate of suicide is 9.3 per 100,000 population, which is the same as the national rate. On further exploration, the suicide rate in males (14.9 per 100,000 population) is higher compared to the suicide rate in females (3.9 per 100,000 population).

Domestic violence

- xiv. The rate of domestic abuse incidents in Leicestershire is 20.6 per 1,000 population. This is similar to the England average of 20.4 per 1,000 population.
- xv. Recorded domestic offences in Leicestershire have risen significantly since 2013 from 2496 incidents to 4493 recorded offences in 2017.
- xvi. Crime rates for domestic offences and incidents (including domestic abuse) have risen significantly from 3.70 per 1000 population in 2013 to 7.71 per 1000 population in 2017.

Sexual violence and child sexual exploitation

- xvii. In England, there were 47,045 recorded sexual offences against children under the age of 18, a 19% increase on the 2014/15 figure. Translating this to Leicestershire, this would mean 547 children under the age of 18 would have been subject to sexual abuse over a 12 month period.
- xviii. Recorded incidents of sexual offences in Leicestershire have risen significantly year on year between 2013 and 2017, with the number of incidents rising from 469 in 2013 to 811 in 2017.
- xix. The rate of sexual offences in Leicestershire is 1.0 per 1,000 population, which is the lowest of all statistical neighbours and England (1.7 per 1,000 population).
- 9. Following presentation of the key data, participants worked in groups to discuss the topics highlighted above to explore:-
 - its relevance
 - gaps in information and services
 - things that could be done differently
- 10. Feedback from the discussions highlighted key themes which included:
 - Difficulties in accessing data particularly at district level;
 - Difficulties in accessing data from key partners e.g. schools;
 - The need for better data and intelligence sharing between partners and services;
 - The interplay between crime and health and the further work required. For example, whether there is a link between alcohol consumption in the home environment and domestic violence and sexual offences;
 - Importance of prevention, particularly among vulnerable groups;
 - Importance of education and awareness raising;
 - Developing and strengthening community assets;
 - Recognising that one size does not fit all. For example, there are different forms of drug misuse which may require different strategies to address them:
 - Importance of understanding the local context;
 - Limited information on some areas e.g. child sexual exploitation;
 - Mental health is a significant issue and is a cross cutting theme;
 - Lack of awareness of actions that partners take upon receiving information.
- 11. As a result of feedback from the workshop, a data compendium has been developed (Appendix A) which lists key health and crime indicators as well as listing the source of the information and caveats associated with the data to enable partners to access appropriate data and information as and when required. This is still in development.

Recommendations to the Board

- 12. It is recommended that Members
 - a. note the progress to date;
 - b. comment on and approve the proposed next steps, which include:-
 - Completion of the needs assessment and data compendium through joint working between public health, business intelligence and community safety partners;
 - Approval of the five joint priorities of drugs, alcohol, mental health, domestic violence and sexual violence:
 - The presentation by Public Health of a paper detailing the above to the Health and Wellbeing Board for approval.

Officers to contact

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Health Data

Report Section	Indicator	Source	Caveats
3.1.1	% of people in an area living in 20% most deprived areas in England (IMD2015)	Mental Health and Wellbeing JSNA	IMD: Although comprehensive, some aspects of deprivation not included in indices. Census data/mid-year estimates deficient in estimates of population sub-groups including: non-white populations, full-time students, men aged 20-39, nursing home residents; rough sleepers, inner-city populations, households of multiple occupation and migrants.
4.1.1.2	Percentage who have taken cannabis in the last month (WAY Survey)	Fingertips: Young People Profile	Home postal survey
4.1.1.2	Estimated prevalence of opiate and/or crack cocaine users per 1,000 population aged 15-64	Fingertips: Drugs and Alcohol Profile	
4.1.3	Total number of individuals who received treatment at a specialist drug misuse service	Fingertips: Co-occuring substance misuse and mental health issues	
4.1.3	Rate of individuals who received treatment at a	Numerator: Fingertips: Co-occuring substance	Crude rate calculated using the total number of individuals who received treatment at a specialist drug misuse service for the

Report Section	Indicator	Source	Caveats
	specialist drug misuse service	misuse and mental health issues Denominator: ONS: Mid-2015 Population Estimates	18-75 population.
4.1.3	Parents in drug treatment: rate per 100,000 children aged 0-15	Fingertips: Crisis Care Profile	Based on parents who are attending treatment for substance misuse, who live with their child or children. Note that numbers of parents in treatment is not a measure of the number of substance misusing parents in an area.
4.1.3	Successful completion of treatment for non-opiate use	Fingertips: Drugs and Alcohol Longer Lives Profile	Based on % of non-opiate drug users that left treatment successfully who do not re-present to treatment within 6 months
4.1.3	Successful completion of treatment for opiate use	Fingertips: Drugs and Alcohol Longer Lives Profile	Based on % of non-opiate drug users that left treatment successfully who do not re-present to treatment within 6 months.
4.1.4	Hospital admissions with a primary diagnosis of poisoning by illicit drugs	NHS Digital	
4.1.4	Young people hospital admissions due to substance misuse	Fingertips: Crisis Care Profile	Directly standardised rate of hospital admission for substance misuse, per 100,000 population aged 15-24 years. Primary diagnosis codes included in numerator: F11 – F19, T40, T52,

Report Section	Indicator	Source	Caveats
			T59, T43.6, or if main cause is one of: Y12, Y16, T19. Hospital admissions may be influenced by referral and admission practices as well as incidence or prevalence.
4.1.5	Concurrent contact with mental health services and substance misuse services for drug misuse	Fingertips: Co-occuring substance misuse and mental health issues	Based on people in contact with mental health services when they access services for drug misuse.
4.1.5	Hospital admissions for drug related mental health and behavioural disorders	NHS Digital	
4.1.6	Crude rate of drug related deaths per 1,000 population	PHOF: Health Improvement	Figures based on deaths registered per calendar year. Note registration of death may not occur in the same year as the death. Registration delays vary considerably across areas in England and Wales, potentially affecting trend and local area comparison analysis.
4.2.1	Percentage of adults who abstain from drinking alcohol	Fingertips: Local Alcohol Profiles for England	Numerator values sourced from Health Survey for England where abstainers are defined as those who answer 'No' to question "Do you drink alcohol nowadays?" And 'Never' to "Do you drink alcohol occasionally or never drink?"
			Health Survey for England data for 2011 to 2014 was combined to increase the sample size to a sufficiently robust level. The numerator and denominator were extracted by

Report Section	Indicator	Source	Caveats
			upper tier LA. The proportion was calculated as 100 * (number of abstainers) / (respondents aged 18+).
4.2.1	Percentage of adults binge drinking on heaviest day in the last week	Fingertips: Local Alcohol Profiles for England	Numerator values sourced from Health Survey for England Binge drinking is defined as more than 6 units for women, and more than 8 units for men. Household surveys are known to under-estimate alcohol consumption when compared with administrative sources such as tax returns and sales data.
4.2.1	Percentage of adults (18+) who drink more than 14 units of alcohol each week	Fingertips: Local Alcohol Profiles for England	Numerator values sourced from Health Survey for England. Household surveys are known to under-estimate alcohol consumption when compared with administrative sources such as tax returns and sales data.
4.2.1	Percentage of 15 year olds who have ever had an alcoholic drink	Fingertips: Young People Profile	Based on the 'What About YOUth' survey 2014/15' as those who answered 'yes' to "Have you ever had an alcohol drink – a whole drink, not just a sip?" Home Survey
4.2.1	Percentage of 15 year olds who have been drunk in the last 4 weeks	Fingertips: Young People Profile	Based on the 'What About YOUth' survey 2014/15' as those who answered 'yes' to "Have you been drunk in the last 4 weeks?"

Report Section	Indicator	Source	Caveats
			Home Survey
4.2.1	Percentage of 15 year olds who are regular drinkers	Fingertips: Young People Profile	Based on the 'What About YOUth' survey 2014/15' as those who answered 'at least once a week' to ""How often do you usually have an alcoholic drink?" 'At least once a week' is made up of codes: "Every day, or almost every day", "About twice a week" and "About once a week". Home Survey
4.2.1	Percentage of 15 year olds who partook in three or more risky behaviours	Fingertips: Mental Health and Wellbeing JSNA	Based on the 'What About YOUth' survey 2014/15' as those who reported undertaking at least 3 of the following unhealthy/illegal behaviours: smoking, drinking, cannabis, other drugs, diet, physical activity.
4.2.2	Total number of individuals who received treatment at a specialist alcohol misuse service	Fingertips: Local Alcohol Profiles for England	Based on adults aged 18+
4.2.2	Rate of individuals who received treatment at a specialist alcohol misuse service	Numerator: Fingertips: Local Alcohol Profiles for England Denominator: ONS: Mid-2015 Population Estimates	Crude rate calculated using the total number of individuals who received treatment at a specialist alcohol misuse service for the 18-75 population.

Report Section	Indicator	Source	Caveats
4.2.2	Successful completion of treatment for alcohol use	PHOF: Health Improvement	Percentage of alcohol users that left alcohol treatment successfully (i.e. free of alcohol dependence) in a year who do not re-present to treatment within 6 months. Figures for Leicestershire and Rutland are combined.
4.2.2	Parents in alcohol treatment: rate per 100,000 children aged 0-15	Fingertips: Crisis Care Profile	Based on parents who are attending treatment for alcohol, who live with their child or children. Note that numbers of parents in treatment is not a measure of the number of substance misusing parents in an area.
4.2.3	Percentage of individuals in concurrent contact with mental health services and substance misuse services for alcohol misuse	Fingertips: Mental Health and Wellbeing JSNA	Number of individuals who entered treatment at a specialist alcohol misuse service and were currently in receipt of treatment from mental health services for a reason other than substance misuse at the time of assessment, as a proportion of all individuals entering specialist alcohol misuse services.
4.2.5	Alcohol specific mortality rates per 100,000 population	Fingertips: Local Alcohol Profiles for England	Directly age-standardised rates of deaths from alcohol specific conditions. Alcohol specific conditions are defined as those where alcohol is causally implicated in all cases of the condition. E.g. alcohol-related liver cirrhosis. For more information please visit: http://www.lape.org.uk/downloads/Lape_guidance_and_methods.pdf
4.2.5	Alcohol related mortality	Fingertips: Local Alcohol	Directly age-standardised rates of deaths from alcohol related

Report Section	Indicator	Source	Caveats
	rates per 100,000 population	Profiles for England	conditions. Alcohol related conditions are defined as those where alcohol is causally implicated in some, but not all cases of the outcome. E.g. hypertensive diseases, various cancers and falls. For more information please visit: http://www.lape.org.uk/downloads/Lape_guidance_and_methods.pdf
4.2.6	Admission rates for alcohol specific conditions per 100,000 population	Fingertips: Local Alcohol Profiles for England	Directly age-standardised rates of hospital admissions for alcohol specific conditions for all ages. Based on admissions where the primary diagnosis or any of the secondary diagnoses are an alcohol specific (wholly attributable) condition. The indicator is based on admission episodes to hospital, rather than number of people admitted.
4.2.6	Admission rates for alcohol specific conditions for under 18s per 100,000 population	Fingertips: Local Alcohol Profiles for England	Crude rate of admissions to hospital for under 18's where the primary diagnosis or any of the secondary diagnoses are an alcohol-specific (wholly attributable) condition. The indicator is based on admission episodes to hospital, rather than number of people admitted.
4.2.6	Admission rates for alcohol related conditions per 100,000 population	Fingertips: Local Alcohol Profiles for England	Directly age- standardised rates of admissions to hospital where the primary diagnosis code is an alcohol-attributable code or a secondary diagnosis is an alcohol-attributable external cause code.

Report Section	Indicator	Source	Caveats
			Children under 16 were only included for alcohol specific conditions and for low birth weight. Coding of admissions for cancer patients vary across the country. Inconsistent recording has some implication for headline measures as cancer admissions make up approximately 25% of the total number of alcohol-related admissions (narrow definition)
4.2.7	Alcohol related Road Traffic Accidents per 1,000 accidents	Fingertips: Local Alcohol Profiles for England	Crude rate of alcohol related road traffic accidents in which at least one driver failed a breath test. Does not include accidents in which no injury occurs or which occur on private land away from the public highway. There is no legal obligation for drivers to report road accidents to the police, even where injury has occurred, provided the parties concerned exchange personal details at the scene. As such, values are a potential underrepresentation of RTA's. For more information please visit: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/462818/reported-road-casualties-gb-notes-definitions.pdf
4.3.1	Depression recorded prevalence (QOF)	Fingertips: Mental Health and Wellbeing JSNA	Percentage of patients aged 18 and over with depression as recorded on practice disease registers as a proportion of the estimated GP list size of patients aged 18 and over.

Report Section	Indicator	Source	Caveats
4.3.1	Severe mental illness recorded prevalence (QOF)	Fingertips: Mental Health and Wellbeing JSNA	Calculated through number of people registered with a GP and on the mental health register (people diagnosed with schizophrenia, bipolar disorder or other psychoses or on lithium therapy) expressed as a percentage of the total GP registered population.
4.3.1	Incidence of new cases of psychosis per 100,000 population	Fingertips: Mental Health and Wellbeing JSNA	Crude rate of new, clinically relevant cases of first episodes of psychosis (FEP) among people aged 16-64, expressed as a rate per resident population. Modelling approach used to estimate risk incidence.
4.3.2	Proportion of adults in the population in contact with secondary mental health services	PHOF: Healthcare and Premature Mortality	The percentage of the population aged 18-74 in contact with Secondary Mental Health Services. Denominator mid-year population estimates (ONS) are rounded to nearest 100.
4.3.2	Proportion of adults in the population in contact with secondary mental health services who live in stable and appropriate accommodation	PHOF: Wider Determinants of Health	Based on adults aged 18-69 who are receiving secondary mental health services on the Care Programme Approach recorded as living independently, with or without support.
4.3.3	Rate of hospital stays for self-harm per 100,000	PHOF: Health Improvement	Directly age standardised rate of emergency hospital admissions for intentional self-harm for all ages.

Report Section	Indicator	Source	Caveats
	population		Based on HES data. Coding variations may occur due to different practices between areas and over time. Admissions may be influenced by local variation in referral and admission practices as well as variation in incidence and prevalence.
4.3.3	Child Hospital Admissions for Mental Health Conditions per 100,000 population	Fingertips: Crisis Care Profile	Crude rate of inpatient admissions for mental health disorders per 100,000 population aged 0-17 years. The indicator is based on admission episodes to hospital, rather than number of people admitted. Based on primary diagnosis codes F00-F99. Based on HES data. Coding variations may occur due to different practices between areas and over time. Admissions may be influenced by local variation in referral and admission practices as well as variation in incidence and prevalence.
4.3.4	Rate of suicide per 100,000 population	PHOF: Healthcare and Premature Mortality	Age standardised mortality rate from suicide and injury of undetermined intent.
4.4	Rate of looked after children per 10, 000 population	Fingertips: Mental Health and Wellbeing JSNA	Crude rate of children aged 0-17 looked after by local authorities.
4.4	Rate of children leaving care per 10,000 population	Fingertips: Children and Young People's Mental Health and Wellbeing	Crude rate of children aged 0-17 who cease to be looked after by local authorities over the year.

Report Section	Indicator	Source	Caveats
4.11	Rate killed and seriously injured on roads per 100,000 population	Fingertips: Health Profiles	Crude rate of people reported killed or seriously injured on the roads, all ages, per 100,000 resident population. Data quality varies as there are differences between police forces in procedures for recording, collecting and collating. Not all road casualties are reported to police. Areas with low resident populations but which have high inflows of people or traffic may have artificially high rates because the at-risk resident population is not an accurate measure of exposure to transport. This indicator includes only casualties who are fatally or seriously injured and these categories are defined as follows: Fatal casualties are those who sustained injuries which caused death less than 30 days after the accident; confirmed suicides are excluded. Seriously injured casualties are those who sustained an injury for which they are detained in hospital as an in-patient, or any of the following injuries, whether or not they are admitted to hospital: fractures, concussion, internal injuries, crushings, burns (excluding friction burns), severe cuts and lacerations, severe general shock requiring medical treatment and injuries causing death 30 or more days after the accident.

Crime Data

Report Section	Indicator	Source	Caveats
4.1.1.1	Various	Crime Survey for England and Wales (2016/17)	
4.1.8	Drug Seizures	National Statistics: Seizures of drugs in England and Wales: Area Table 2	Rates per million population statistics are created using mid-year population estimates by the Office for National Statistics (ONS). In 2015/16 Leicestershire were unable to supply reliable estimates-imputation methods have been used to estimate the 2015/16 data.
4.5.3	Numbers of children subject to a child protection plan in England 2012-2016	Department for Education National Statistics: Characteristics of children in need: 2015 to 2016: Main Table SRF52/2016: Main Table D4	England figures include unborn children. Compilation methods of statistics may have changed year on year.
4.5.3	Numbers of children subject to a child protection plan in the year ending March 2016 by local authority and initial	Department for Education National Statistics: Characteristics of children in need: 2015 to 2016: Main Table	Category of abuse is assessed when child protection plan commenced. If a child is the subject of more than one child protection plan during the year, each will be counted. Includes a small number of child protection plans where the category of abuse is missing. The multiple category is for when more than one category of abuse is relevant to the child's current protection plan.

	category of abuse	SRF52/2016: Main Table D2	It is not for children who have been the subject of more than one child protection plan during the year. Any number between 1 and 5 inclusive has been suppressed and replaced by x. Secondary suppression has been carried out where necessary to preserve confidentiality.
4.5.3	Children subject to child sexual abuse 2015/2016	Bentley, H. et al (2017) How safe are our children? The most comprehensive overview of child protection in the UK 2017.	Leicestershire counts calculated based on England Rate reported, using ONS 2015 Mid-year population statistics.
4.5.6	Rate of children aged 10- 18 in the youth justice system per 1,000 population	Fingertips: Wider Determinants of Health	Crude rate of children and young people aged 10-18 years per 1,000, who have formally entered the youth justice system. 2014/15 value combined for Leicestershire and Rutland.
4.5.6	Rate of first time entrants into the youth justice system, per 100,000 population aged 10-17	PHOF: Wider determinants of Health	Crude rate of 10-17 year olds receiving their first reprimand, warning or conviction by local authority of residence. The current published figures of juvenile first time entrants (FTE) are estimated figures. They are calculated by mapping individuals to upper tier local authorities using the home address or postcode recorded by police on the Police National Computer (PNC) or allocated to upper tier local authority using an allocation model based on the pattern of offenders dealt with by police stations if no home address available

4.7.1	First time offenders per	PHOF: Wider	Crude rate of the number of first time entrants into the criminal
	100,000 population	Determinants of Health	justice system whether by caution, offence or conviction.
4.7.2	Repeat offenders – percentage of offenders who re-offend	PHOF: Wider Determinants of Health	Re-offences from a rolling 12 months cohort
4.7.2	Average number of re- offences per offender	PHOF: Wider Determinants of Health	Crude rate of re-offences committed per offender from a rolling 12 month cohort
4.10	Rate of sexual offences per 1,000 population	PHOF: Wider Determinants of Health	Crude rate per 1,000 population of violent crime (including sexual violence)- rate of sexual offences per 1,000 population. Crimes that have not been reported to the police or incidents that the police decided not to record are not included. Based on resident population. Action taken by police forces to improve their compliance with the National Crime Recording Standard (NCRS) is likely to have resulted in the increase in the number of offences recorded. It is thought that recording improvements are more likely to affect relatively less serious violent offences and explains the larger increase in the sub-category "violence without injury" compared with "violence with injury". ONS has also been informed there has generally been little change in the volume of "calls for service" related to violent crime in the year ending March 2015 compared with the previous year. This, along with the evidence from the CSEW, suggests the rise in recorded violence against the person is largely due to process improvements rather than a genuine rise in violent crime.

Agenda Item 12
Leicestershire Safer
Communities Strategy
Board
Making Leicestershire Safer

LEICESTERSHIRE SAFER COMMUNITIES STRATEGY BOARD 1 DECEMBER 2017

LSCSB UPDATE: NEIGHBOURHOOD WATCH LEICESTER, LEICESTERSHIRE AND RUTLAND

Purpose

1. This report outlines the current strategic aims and governance arrangements for Neighbourhood Watch Leicester, Leicestershire and Rutland (NHW LLR) and seeks formal support from partners through adoption of a Memorandum of Understanding (MOU, Appendix A).

Background

Neighbourhood Watch (NHW) is a partnership between local communities, Police and Policing and Community Safety Partnerships (CSP's). It is a service which is completely free and its aims are to help people to protect themselves and their property, to reduce the fear of crime, improve the safety of communities and develop community spirit and cohesion. Governance of NHW both nationally and locally has undergone substantial change and a great deal of work has been undertaken to restructure and reinvigorate the business model.

Notable developments and challenges:

Past Year

- 3. Key work-streams have included:
 - a. Ongoing work to develop a robust NHW Committee. The NHW Committee is made up of volunteers. The recruitment and retention of Committee members with the time and suitable skills is an ongoing challenge.
 - b. A notable achievement has been the successful introduction and development of an information mobile phone application in Rutland.
 - c. NHW LLR has been selected by National NHW for a pilot scheme for an awareness initiative, promoting NHW which is taking place in South Leicester Neighbourhood Policing Area (NPA).
 - d. The NHW LLR Memorandum of Understanding has been agreed and signed by Leicestershire Police, Leicester City Council and Rutland County Council. The document is also supported by the Police and Crime Commissioner.

- e. NHW has ongoing issues common to many charities. Two issues of particular note include:
 - Funding which in-turn impacts other aspects of NHW development.
 - ii. The recruitment and retention of volunteers to achieve overall objectives.

Coming Year

- 4. Unsurprisingly work-streams will focus on addressing the issues outlined above. NHW will:
 - Recruit additional members with the required skills and experience to enhance and augment the NHW Committee;
 - Obtain additional funding from a range of sources to support the development of more NHW schemes throughout the areas of geographical responsibility;
 - c. Development and introduction of the information mobile phone application within selected areas in Leicester and Leicestershire;
 - d. Develop new partnerships with like-minded organisations for mutual benefit, including CSP's, (with whom NHW would like to have very close working relationships), Rural Community Council and Royal Voluntary Service and Parish Councils, working closely with their individual initiatives such as Good Neighbour Schemes;
 - e. Continue to develop and expand existing relationships with such organisations as Voluntary Action Leicestershire;
 - f. Build upon the schemes which are being developed in such areas as Barwell where a community led initiative is proving to be a positive step forward.

Key issues for partnership working or affecting partners:

- 5. NHW would like to establish very close working relationships across LLR which would enable NHW to expand its work and help NHW to network and establish positive partnerships with local organisations. In so doing NHW will:
 - a. Help local communities to gain relevant awareness about other schemes in their locality to support self-resilience;
 - b. Help to instigate greater co-responsibility and trust amongst local residents:
 - c. Help to improve communication with Police, including PCSOs and Special Constables;

- d. Support the gathering of relevant intelligence that helps to prevent crime, and makes communities feel safer.
- 6. The development and implementation of NHW schemes across the county will help achieve NHW core objectives and support individuals living in communities across Leicestershire. A core aim is to promote a better quality of life; derived from an increase on social capital and a decrease on the fear of crime. NHW will seek to do this by:
 - a. Sharing relevant information (information about existing schemes, potential interested areas, etc.) that helps to develop resilient and sustainable communities;
 - b. Ensuring the right contact with CSPs is established and by communicating when personnel/members leave their role, ensuring a seamless process of development that helps NHW to be more effective and efficient;
 - c. By including NHW on relevant meetings where community participation, development of new schemes or relevant intelligence is shared that can support and strengthen the NHW network.

Issues and challenges in localities:

- 7. There are a range of issues which are not limited geographically. These are detailed as follows;
 - a. Access to potential partnerships and developing new partnerships both of which may be affected by a misconception about NHW;
 - b. Difficulty in recruiting volunteers at all levels:
 - c. Accessing and acquiring funding to support overall NHW development;
 - d. Inaccurate and outdated information about local NHW schemes.

Recommendations for the Board:

- That the Board:
 - a. Notes the content of the report;
 - b. Formally considers and signs up to the NHW Memorandum of Understanding.

Richard Clarke

Chairman, Neighbourhood Watch Leicester, Leicestershire and Rutland

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Appendix A

Memorandum of Understanding









The Purpose of this Memorandum of Understanding is to give a set of minimum standards to the expectations of Leicestershire Police the Leicestershire Neighbourhood Watch and the Community Safety Partnerships of Leicester and Leicestershire & Rutland.

Neighbourhood Watch will:

- Work with the Community Safety Partnerships and the Police in creating safer communities across Leicester, Leicestershire and Rutland
- Inform Community Safety Partners and Police of local and National Neighbourhood Watch communications and media campaigns
- Maintain an accurate database of NHW locality co-ordinators and assure compliance with data protection
- Seek opportunities to ensure that membership to NHW is representative of individual neighbourhoods
- Encourage members of NHW to record and report incidents, record community concerns and share this information with the Police and Community Safety Partnership single points of contact.
- Actively assist and promote to all residents the opportunity to be part of their local NHW
- To create an appropriate and effective training package for locality coordinators and volunteers
- Seek local and national funding opportunities to develop the scheme
- Work in partnership to promote equality, diversity and community cohesion

Leicestershire Police will:

- Work in partnership with Neighbourhood Watch in creating safer communities across Leicester, Leicestershire and Rutland
- Appoint a single point of contact within each locality that will assist in the development of the scheme, provide information and support where necessary.
- Inform NHW of local and national communications and media campaigns that promote crime reduction and community safety initiatives
- Involve and utilise NHW with local problem solving at neighbourhood level.
- Support NHW to create an appropriate training package for locality coordinators and volunteers using existing training
- Support NHW to seek local and national funding opportunities to develop the scheme
- Work in partnership to promote equality, diversity and community cohesion
- Provide a Leicestershire Police executive board member to ensure police representation and effective partnership working.

Community Safety Partnerships of Leicester, Leicestershire & Rutland will:

- Work in partnership with Neighbourhood Watch in creating safer communities across Leicester, Leicestershire and Rutland
- Appoint a single point of contact within each locality that will assist in the development of the scheme, provide information and support where necessary.
- Inform NHW of local and national communications and media campaigns that promote crime reduction and community safety initiatives
- Involve and utilise NHW with local problem solving at neighbourhood level
- Support NHW to create an appropriate training package for locality coordinators and volunteers using existing training
- Support NHW to seek local and national funding opportunities to develop the scheme
- Work in partnership to promote equality, diversity and community cohesion
- Provide an executive board member who will represent the Leicester and Leicestershire & Rutland Councils to ensure effective partnership working.



Signature
Name Position Date
Leicestershire Police Protecting our communities
Signature
Name
Position
Date
Leicester City Logo (here)
Signature
Name
Position
Date



(Signed for and on behalf of Leicestershire Community Safety Partnerships)

Signature
Name Position Date
Rutland
Signature
Name Position Date