DEVON CORNWALL ISLES OF SCILLY

COMMUNITY SAFETY PARTNERSHIPS

Peninsula Strategic Assessment 2019/20

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INTRODUCTION

What are community safety partnerships?

Community Safety Partnerships (CSPs) involve a wide range of organisations across the public, community and private sectors working together to **protect their local communities from crime** and to help people feel safe.

The **statutory agencies** or 'responsible authorities' are Local

Authorities, Police, Fire and Rescue Services, National Probation Service, Community Rehabilitation Company and NHS Clinical Commissioning Groups.

Achieving safer communities depends on **everyone working together** to find local solutions to local problems. We have **a responsibility to do all that we can** to reduce crime and disorder, anti-social behaviour, problem use of drugs and alcohol and re-offending.

The Peninsula incorporates **eight CSPs** and **one strategic County level partnership**, Safer Devon.

Their statutory responsibilities and activities are set down within the **Crime and Disorder Act 1998**, but the partnerships essentially **serve and respond to local need and delivery structures** so there are differences across the Peninsula in the way that they work.

CSPs support and co-ordinate the work of all the partners in their local area by:

- Producing an annual strategic assessment to identify community safety priorities and set objectives;
- Developing a three year
 Partnership Plan, refreshed

annually, to co-ordinate activities to address the priorities;

 Monitoring delivery against our objectives and driving good performance by targeting resources to deliver efficient and effective outcomes for communities.

The role of the Police and Crime Commissioner

On 5 May 2016 the public elected a Police and Crime Commissioner (PCC) for Devon and Cornwall to serve a 4 year term. The next elections are in May 2020. The role is **accountable to the public** for how crime is tackled across the Peninsula. Specifically the role:

- Listens to the views of the public on community safety and sets priorities in a plan for the police which address community concerns;
- Ensures the Chief Constable directs police officers and resources to tackle the things that communities say are important and holds him to account;
- Sets the **police budget** and determines the precept;
- Is responsible for ensuring delivery of a support service for victims that is compliant with the victims code;
- Sets the strategic direction for policing but does not interfere with day-to-day police operations or tactics;
- Balances local needs of the public and victims alongside national policing responsibilities.

PCCs have a **statutory duty¹ to work with community safety partners**, as well as criminal justice agencies and the voluntary sector, to help deliver local solutions to reduce crime and disorder and provide support to victims and communities.

In 2015, the Police and Crime Commissioners and Chief Constables for **Devon and Cornwall Police** and **Dorset Police** reached agreement for a large scale **strategic alliance between the two forces**.

The aim of the strategic alliance continues to be the provision of a **more resilient police force against a backdrop of reducing budgets**, particularly around high cost, complex areas such as terrorism and organised crime.

Working together for a safer future

Since 2012, analysts representing each of the CSPs and the police have worked together to build a shared evidence base, in the form of the **Peninsula Strategic Assessment (PSA)**² and the suite of **Organised Crime Local Profiles (OCLPs)** that support the local delivery of the Serious and Organised Crime Strategy.³

This iteration of the PSA provides an updated evidence base to support the Police and Crime Commissioner in understanding and prioritising crime and disorder issues in Devon and Cornwall and developing the **Police and Crime Plan**. The **PSA has evolved** to support the changing needs of the CSPs and take into account increased demands on our resources.

It utilises the <u>MoRiLE</u> methodology to undertake a consistent review of **strategic threat, risk and harm** in each of the CSP areas and bring these together into a coherent whole for the Peninsula.

It identifies and describes the **main threats and risks** to communities across Devon and Cornwall. It also provides a broad assessment of the effectiveness of the responses in place and identifies gaps and areas for improvement.

It is intended to be used to indicate where **joint approaches** and **coordination of partnership resources** may be most effective.

It should be **read alongside** the more detailed evidence found in the **local strategic assessments and OCLPs** undertaken by the police and CSPs.

Consultation with communities

The views of communities are an intrinsic part of the assessment process and **CSPs consult with communities in different ways**, including local engagement events, town and parish council meetings and by undertaking surveys with residents.

Details of individual approaches in each CSP are provided in **the local strategic assessments**.

¹ <u>Guidance note</u> on amendments to the Crime and Disorder Regulations 2007, Home Office 2012

² Published on the Police and Crime

Commissioner's <u>website</u>

³ <u>Serious and Organised Crime Strategy</u>, Home Office October 2013

The national landscape

Community Safety Partnerships are operating in a constantly shifting environment, with national and international priorities being driven by changing political focus and new legislation.

The continued impacts of the economic downturn and austerity measures bring particular challenges for the most vulnerable people in our communities. More families are facing temporary accommodation, living in poor conditions or becoming homeless. This adds to the challenges of trying to provide help to people with complex and multiple problems.

Crack use is increasing leading to increased crime and health harms. It has increased in purity and affordability and is more readily available with newly established supply routes in the UK emerging, via the distribution of crack into coastal and rural areas, including through so-called "County Lines".

A new 'public health **duty**' aims to ensure that relevant services work together to share data, intelligence and knowledge **to understand and address the root causes of serious violence including knife crime.** The Crime and Disorder Act has been amended to ensure that **serious violence** is an explicit priority for Community Safety Partnerships.

The UK faces a **severe and continuing threat from terrorism**. **Raising awareness** of the risks locally and delivery of **targeted prevention activity** and training is a vital part of the overall counter-terrorism strategy. The **decision to leave the European Union** has created widespread uncertainty, particularly with regard to the future of equivalent EU funding coming to the Peninsula. Other risks, such as **rising costs of medications** used to treat drug dependency and an **increase in community tensions**, have been identified.

Pressures on budgets and resources across the public sector, combined with a profile of increasing complexity and volume of demand presents significant challenges to the ability of CSPs to manage risks effectively.

The way that **probation services** are delivered has changed with National Probation Service due to take over **responsibility for all offender management in 2021**. Rehabilitative services from private and voluntary sector providers will be used and there is an intention to **move away from short custodial** sentences. This will **change local services on the ground and relationships** with partners.

All health and care systems in England are focused on transforming services through their five year **Sustainability and Transformation Plans**.

The **underlying factors** of poor health are the same factors that increase risk of crime – vulnerability, poverty, previous experience of crime, unemployment and low education levels – reinforcing the **importance of a joined-up approach between health and community safety**.

Devon and Cornwall: an overview

The Devon and Cornwall Peninsula encompasses over 700 miles of coastline, covers 3,961 square miles and incorporates five upper tier/unitary local ISLES OF SCILLY authorities - Cornwall, Plymouth City, Devon County, -107 Torbay and the Isles of Scilly and the eight district/city councils within Devon County -East Devon, Exeter, Mid Devon, North Devon, South Hams, Teignbridge, Torridge, and West Devon.



These local authorities make up our eight community safety partnerships (CSPs) and one strategic County level partnership, Safer Devon.

About the area: key statistics

People	Current population is 1,762,376 and projected to increase by 4% to 1,826,000 by 2025 5% across England		 27% are aged under 25 30% across England 24% are aged over 65 18% across England 5% BAME (not White British) 20% across England
Vulnerable groups	 14% live in the 20% most deprived LSOAs in England 16% of children are living in poverty 19% across England 	Housing	 6% of households lack central heating 3% across England 80,000 households in fuel poverty
Education & skills	18% of people have noqualifications22% across Great Britain	£ Economy	 77% of people aged 16-64 are in Education, Employment or Training 74% across England and Wales
Health & wellbeing	23% of people have a limiting long-term illness 18% across England	Access & transport	20% of households do not have a car 26% across England

Within this large geographical area, we have a **population of 1.7 million residents⁴** living in 739,300 households. Our population is generally **older than the national profile** with more people aged 65+ and fewer under the age of 25.

The population significantly increases due to the influx of around **11 million visitors** to the area during the average year. This provides much needed income to the local economy but increases the demand on our services and infrastructures.

Over 70,000 students also have an

impact on localised demand for services at predictable times within the academic year, and are identified as particularly vulnerable to crime. The demographic is also changing with all of the universities actively **increasing their international intake**, and a number of private institutions attracting higher numbers of younger foreign students to the area.

Black, Asian and other Minority Ethnic (BAME) groups⁵ make up only 5% of our resident population, well below the national average of 20%. People from BAME groups may feel **more isolated and vulnerable** and may lack support networks and a strong voice locally and this may be particularly strongly felt in rural areas.

Plymouth, Torbay and Exeter are urban centres of significant size but the remainder of the population across the Peninsula is spread between **smaller urban clusters, market towns and villages.** There are a large number of **seaside towns** that have their own unique issues. In addition to the usual

4 Mid-2017 population estimate, Office for National Statistics, © Office for National Statistics (ONS)

5 Census 2011, White non-British, Asian, Black, Mixed, Other Ethnic Group (85,500 people) $\ensuremath{\mathbb{C}}$ ONS

types of crime and disorder issues associated with urban areas anywhere, CSPs face **additional challenges** in providing equal access to services for widely dispersed communities.

The **Isles of Scilly** are a cluster of islands located off the far South West of Cornwall. Scilly has its own **unique character and very few crimes** are recorded on the islands each year (a total of 165 over the last two years) The CSP is a subgroup of their Health and Wellbeing Board.

Although overall unemployment in the Peninsula is lower than the national average and has reduced in line with the national average, **wages are lower**. There is an overdependence on seasonal and part-time jobs and **fewer opportunities for young people**.

Housing affordability and availability is a major issue with insufficient social housing and higher than average property costs. These factors combined with increased living costs and lower incomes put local families under significant pressure.

Plymouth and Torbay are described by national measures as deprived, but there are **pockets of significant deprivation** right across the Peninsula.

Many of these areas have frequently been identified as focus areas locally due to the **strong link between worklessness and poverty** but higher concentrations of benefit claimants mean that these areas are also particularly **vulnerable to the impacts of welfare reform**.

Current partnership priorities

Cornwall

- Core work plan around high risk themes, including Safer Towns place-based approach
- Four overarching priority outcomes



Safer Cornwall Partnership Plan 2019-2022

Plymouth

To work towards becoming a trauma informed community safety partnership, focusing on:

- Reducing violence and exploitation
- Reducing re-offending
- Early Intervention and prevention of harm •

Safer Plymouth Plan 2018-2020

Building community resilience, reducing inequalities, improving lives

Safer Families

- Domestic abuse Substance misuse
- and hidden harm
- Preventing child sexual abuse
- Trauma informed practice & ACE awareness

- Safer People
- Safer Communities Child exploitation Youth justice Substance misuse
 - and related harms
 - Preventing Violent Extremism
- Emerging Issues Embedding trauma
 - informed practice
- Drug-related exploitation Cybercrime and online exploitation Modern slavery Embedding trauma
 - informed practice

Devon – Safer Devon Partnership

- To build safer and stronger communities which are **better informed** and more compassionate and resilient;
- Preventing and tackling hidden and visible **harm**, including addressing the root causes of:

Intra and extra-familial violence and abuse, including Sexual Violence and Domestic Violence and Abuse

Problem drinking and Problem drug use, including Drug-Related Deaths

Exploitation including Dangerous Drug Networks and County Lines, Modern Slavery and Radicalisation

Safer Devon website where you can find information about district CSP priorities

Torbay

One overarching priority; a **trauma** informed approach with 3 areas of focus



Safer Communities Torbay

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ANALYSIS FINDINGS

Which issues are impacting most on communities?

This assessment has yielded **broadly similar results to the 2018 assessment**, with a high degree of consistency between each year's highest-level threats.

The **impacts have largely remained the same**, as has partners' confidence in their **knowledge and understanding** of each issue. Following police and partner efforts to improve the quantity and quality of **intelligence submissions**, confidence in the intelligence picture has increased for issues coming under the umbrella of exploitation.

Recorded crime numbers saw a further rise in 2018/19, up by 4% compared with last year and this has kept the scores at upper levels for many of our high risk issues, particularly where violence or drugs is a factor.

The impacts of most of the changes in police reporting practice have plateaued, however, so we would expect to see some of these scores moderate in future reviews. We are continuing to see **improved reporting rates for hidden harm** issues such as sexual violence and domestic abuse.

Drug use has changed

We have seen the continued spread of organised drug trafficking activity, particularly County Lines, from the major cities into towns and rural areas across the Peninsula. Crack cocaine is more available and affordable and use of the drug has escalated, especially amongst those who already use heroin. This brings with it a greater risk profile, including a rise in **violence and exploitation**, and serious health harms, particularly related to injecting and **drug related deaths**. This has increased the risks for some of our most **vulnerable populations**, including children and young people.

The local picture also shows **increased poly drug use**, and **illicit use of prescribed medicines**, particularly amongst young people.

Although overall the **Peninsula crime** rate remains low compared with the average for similar areas nationally, we have higher rates of violence with injury and drugs offences.

A report⁶ published by the Office for National Statistics indicates that overall the proportion of crimes recorded as **domestic abuse in Devon and Cornwall is higher** than in other Force areas and this is likely also to be a factor in our higher than average violence rates.

Funding and resourcing pressures have increased

Capacity pressures were identified by all Peninsula partnerships as impacting on our ability to manage many of our high risk issues effectively.

Delivery is increasingly constrained by funding and resourcing

pressures and specialist commissioned services are working at above capacity and unable to meet demand in some areas, specifically in

⁶ <u>Domestic abuse in England and Wales</u>; Office for National Statistics 2018; How domestic abuse is dealt with at the local level within England and Wales, using annual data from the Crime Survey for England and Wales, police recorded crime and a number of different organisations.

the areas placing demands on community services for domestic abuse and sexual violence and for drugs and alcohol.

The **short term nature of funding streams** coming from central government, alongside the shrinking of core budgets, is reported to have had a significant **impact on service resilience**, both in the public and the Voluntary Community and Social Enterprise sector.

As funding in most areas of the public sector continues to reduce, partners are keen to see **services work together as a system** – with better co-ordination and appropriate training in place, particularly around people with complex and multiple needs.

Demands on partnerships are increasingly complex

Across the Peninsula, services continue to report the growing number of people that are seeking help with **highly complex and overlapping needs** for whom the current system is not supporting them to achieve good outcomes. This is a **recurring theme** that cuts across all areas of partnership work.

Developing our ways of working to better meet their needs provides an opportunity to **reduce vulnerability and health inequalities** and also **reduce costs across the system**.

A key factor in understanding vulnerability is the role **that childhood adversity** plays in the long term social, emotional and behavioural experiences of individuals.

Across the Peninsula, partnerships are starting to **explore and adopt trauma informed approaches**, building on existing research and good practice from both national and

international studies.

High Level Threats

High level threats have been prioritised by CSPs and all partners, with an **explicit response provided through local Partnership Plans** and reflected in other strategies and plans. These threats can be grouped under three broad headings but are interlinked.

Domestic abuse and sexual violence

- **Domestic Abuse**, including Domestic Homicide
- Rape and Sexual Assault
- Child Sexual Abuse and Exploitation

Exploitation

- **Drug Trafficking**, including County Lines
- Modern Slavery
- Terrorism/Violent Extremism

Vulnerability and Complex Needs

- **Problem Drug Use**, including Drug Related Deaths
- Problem Drinking and healthrelated harms
- Vulnerability on the streets
- Youth risks and vulnerability

Moderate Level Threats

It is important that CSPs continue to be proactive in the moderate threat areas; working together to **manage the risks,** address identified problems and stop new **problems developing**.

As part of the ongoing review of local Partnership Plans, the CSPs may also wish to include the areas scored as moderate threats where there are **elements of increasing risk** or where the response are considered to **impede effective management**. This band includes:

- Anti-Social Behaviour
- Fatal and Serious Injury road traffic collisions
- All types of violence, from serious physical assaults through to verbal assaults that do not cause injury. This also includes violence linked to night time drinking in public places and violence where there is no physical injury, such as stalking and on-line harassment offences
- Cyber Crime, including frauds committed on-line and crimes directly attacking computer systems, such as such as sending out viruses, putting a service or services out of action and hacking.
- Hate crime

We have seen **increased harm related to street drinking** due to rise in reported incidents and community concerns.

Although numbers remain low at less than 2% of all recorded crime, the number of **hate crimes reported has increased** and there are current and escalating concerns over the **impact of** "**Brexit**" on community cohesion and tolerance.

Although overall the Peninsula crime rate remains low compared with the average for similar areas nationally, Peninsula partnerships have **higher rates of violence with injury and drugs offences**. Violence with injury is explored in more detail in this assessment.

Reported cyber-crime is noted to be just the tip of the iceberg.

Standard Level Threats

Standard Level Threats are areas that are having a lesser impact on communities and not placing much additional demand on services. They may be being managed effectively as "business as usual".

CSPs should **monitor** these areas to ensure that we continue to manage them appropriately.

- Burglary
- Robbery
- Fraud (non-Cyber)
- **Thefts** Shoplifting, Thefts of and from Vehicles, Other Thefts
- Criminal Damage and Arson
- Public Order Offences
- Possession of **Drugs**
- Slight Injury Road Traffic Collisions
- Possession of Weapons

Over the last year we have seen some **localised spikes in burglary and vehicle crime**.

Where acquisitive crime types were reassessed, a decline in capacity scores was noted due to the reduced ability by the police to gather crime scene information and **long delays in obtaining forensic results** (such as fingerprints and DNA).

These issues and delays in analysis of mobile phone activity were specifically cited in the MoRiLE workshops as **impacting negatively on the investigation** and achievement of crime outcomes.

Weapons use and robbery have increased over the last year. Whilst these crimes continue to be very low volume, they potentially may be part of a more serious harm picture linked to organised crime and drug trafficking.

National insight from the Crime Survey for England and Wales (CSEW)

Nationally police recorded crime has increased by 35% since 2015/16. The CSEW⁷ indicates, however, that **actual experience of crime** has fallen over the last decade and remained **broadly stable in recent years**. Whilst in the last year there has been no change in overall levels of crime, there has been some **variation in individual crime types**.

Estimates from the CSEW show a rise of **13% in theft since March 2017**. Despite this increase, estimates of theft remain much lower than 20 years ago.

Police recorded crime figures give a reliable indication of trends in some types of offence involving theft that are thought to be well-reported and accurately recorded by the police. In the latest year these data show:

- **2% increase in vehicle offences**, which includes an 8% increase in the subcategory of "theft or unauthorised taking of a motor vehicle"
- 11% increase in robbery
- **3% decrease in burglaries**, following rises seen in the previous two years

The CSEW shows that the level of lower-harm violent offences (for example, violence without injury and assault with minor injury) did not change. However, police recorded crime gives more insight into the lower-volume but higher-harm violence that the survey either does not cover or does not capture well. These data show:

- 4% decrease in homicides following increases over the last four years
- 8% increase in offences involving knives or sharp instruments
- 3% increase in offences involving firearms

Many of these lower-volume, higher-harm types of violence tend to be **concentrated in metropolitan police force areas** such as London, the West Midlands, West Yorkshire and Greater Manchester.

The overall number of **crimes recorded by the police has increased**, but any trends should be interpreted with caution, as this does not necessarily mean a change in the actual level of crime. Police recorded crime can be affected by changes in policing activity, recording practices and by willingness of victims to report. It does, however, provide a **good measure of crime-related demand** on services.

Over recent years, most crime types have been affected by improved police recording and changes in police priorities. This effect is particularly pronounced for:

- Violent crime, particularly violence without injury offences
- Sexual offences
- Stalking and harassment
- Public order offences

It is thought that increases in these crime types largely reflect changes in reporting and recording practices.

⁷ <u>Crime in England and Wales: year ending March 2019</u>: Crime against households and adults, also including data on crime experienced by children, and crimes against businesses and society; Office for National Statistics, July 2019

Local trends

All areas across England and Wales have seen a **rise in recorded crime to some extent**, and the national average was 35%. This rise has predominantly been driven by improvements in police recording.

Since 2015/16 there has been a 40% increase in recorded crime (30,000 crimes) across Devon and Cornwall.

In line with national trends, the types of crime most affected by these improvements are violence without injury, sexual offences, stalking and harassment and public order offences. The impact of this has **started to settle** over the last 12 months.

Other changes are still having a significant impact. Stalking and harassment rose by 56% in 2018/9 compared with last year, further to a change in legislation in April 2018, and this accounted for 38% of the increase in violence recorded by the police.

Recorded crime has increased but crime rates remain low

- Recorded crime across the Peninsula rose by 4% in 2018/19 compared with the previous year. This equates to an additional 4,000 crimes being recorded over the last 12 months, further to large increases year on year since 2015/16;
- Peninsula CSPs continue to have lower crime rates compared with similar areas nationally and Devon and Cornwall Police has the third lowest crime rate in its most similar group of police forces – 61.4 crimes per 1,000 population compared with an average of 68.1;
- Devon and Cornwall Police has the sixth lowest crime rate overall out of 42 forces nation-wide.

The chart below shows 2018/19 crime rates in the Devon and Cornwall police force ranked within our most similar group of forces nationally, alongside the ranks for the previous year. Note that a rank of 1 means the lowest rate in the group.

- Devon and Cornwall ranks highest for crimes of violence with injury, drug offences and criminal damage and arson offences;
- We have seen an improvement in rank for theft offences and possession of weapons offences;
- Comparative ranks of criminal damage, robbery and sexual offences have seen a small decline.



Interpreting the spider diagrams

Rates per 1000 population provide a standardised measure to compare the levels of crime in the Peninsula with the average for other areas in England and Wales with similar characteristics (known as 'most similar groups'). The spider diagrams show the ranking of our local crime rates in our most similar group, with a rank of 1 (lowest crime rate) in the centre and higher ranks (comparatively high crime rates) towards the outer edges. See <u>Notes on the Data</u> for more information on interpreting crime figures.

Some genuine rises in more serious low volume crimes

- Most serious violence is a high harm, low volume crime that is well-reported and recorded by the police. This has increased by 21% over the last year, further to a similar rise last year, and this is against a backdrop of a continuing rising trend in violence with injury. The Peninsula rate of violence with injury is greater than the average for similar areas nationally;
- We have seen rises in crimes where knives and firearms are used but rates are significantly lower than in other areas nationally. Intelligence about knife crime linked to organised crime groups and gangs suggests there are isolated problems in specific areas;
- Thefts of vehicle are also generally well reported and recorded by the police and this type of crime has increased by 19% compared with last year;
- Robbery has increased by 20%, although the rate of crime remains well below the average for similar force areas nationally.

Increased reporting of more hidden crimes

- The drive to raise awareness about sexual violence and abuse, and improve victims' confidence in services, has resulted in more crimes being reported;
- Domestic abuse crimes increased by 18% compared with last year and this is a key driver in the continued rise in violence with injury crimes. Locally the proportion of crimes recorded as domestic is higher than the national average;
- The sharp rise in reporting of sexual violence has plateaued, but the level of crimes is around two thirds higher than it was in 2015/16.

Rural areas see less crime than urban areas but share some common issues

- The urban CSPs of Plymouth and Torbay have higher crime rates than the larger CSPs with a greater rural component. All of the Peninsula CSPs have lower overall crime rates, however, compared with similar areas nationally;
- All areas have comparatively high rates of violence with injury and drug offences (except the Isles of Scilly) when compared with their most similar family group. This is most pronounced in both Plymouth and Torbay but is a notable feature in the more rural areas;
- The increase in drug offences is influenced by proactive policing targeting county lines and dangerous drug networks.

The summer crime rise places significant extra demand on services

- A rise in crime levels over the summer months is to some extent predictable, due to seasonal effects (lighter nights and warmer weather) and the scheduling of school holidays and large scale events such as concerts and festivals, but the impact is significantly greater in Devon and Cornwall than the average for similar areas nationally;
- In Devon and Cornwall, the average number of crimes per month between July and September is 11% higher than the monthly average for the rest of the year, compared with an average rise of 6% for our most similar group of Forces and 3% across England and Wales;
- Thefts, violence and public order offences are the crime types most affected.

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Some types of crime are more hidden in nature

- Under-reporting is a key limiting factor in our understanding of the extent of these problems in our communities and in taking early harm reduction activity;
- Levels of reported domestic abuse and sexual violence have increased but it remains substantially under-reported.

Women's Aid found that, despite the rise in policerecorded domestic abuse, the **majority of victims do not report abuse** to the police -28% of women accessing community-based services and 44% accessing refuges had reported the abuse

Survival and Beyond The Domestic Abuse Report, Women's Aid 2018

- From consultation and research with minority groups, we know that reports of hate crime to the police are not representative of their real experiences, and this is nationally as well as locally;
- Exploitation linked to organised crime, including drug trafficking and Modern Slavery, may not be reported due to fear of repercussions and risks of criminalisation.

Some people, including those who are more at risk, do not seek help

 Under-reporting may be more acute in rural areas, where victims may be more isolated with limited access to support – this was strongly highlighted in recent research into domestic abuse by the National Rural Crime Network.⁸ Certain populations are believed to be less likely to report that they have been a victim of crime and seek help – and their isolation can place them at higher risk of victimisation.

> National estimates indicate that around **2% of the population** aged 16 years and above are **victims of sexual assault** in one year – this equates to **18,500 victims in the Peninsula** and an estimate of only 1 in 5 crimes being reported.

Sexual Offences in England and Wales, Office for National Statistics 2018

- Barriers can include social isolation, language or cultural differences and/or a lack of confidence in or access to reporting and support pathways;
- Local strategic assessments highlight knowledge gaps, due to under-reporting or poor quality monitoring data, for people who are homeless/rough sleeping/ transient, minority ethnic groups, migrant workers and people who identify as Lesbian, Gay, Bisexual or Transgender;
- Adults at risk and children are particularly vulnerable and may not recognise that they are being abused or exploited.

An estimated **15–20% of girls and 7–8% of boys** have experienced some form of sexual abuse in childhood this equates to between 36,300 and 46,000 children across the Peninsula.

Centre of Expertise on Child Sexual Abuse, 2017

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⁸ <u>Captive and Controlled: Domestic Abuse in</u> <u>Rural Areas</u>, National Rural Crime Network 2019

What do the latest crime figures show?

The table below provides a quick glance at all crime and disorder recorded by the police across the Peninsula, describing whether the trend is increasing (\blacktriangle), decreasing (\bigtriangledown) or stable (\triangleright) and how this area compares with the average for most similar group of police force areas nationally (high \bullet , above average \bullet , average or lower \bullet).

Crime / incident type	Trend	Rate per 1000	2018/19	2017/18	Annual change	MSG Compare rate	MSG trend
All crime		61.4	107,439	103,408	4%	•	
Domestic abuse [1]		18.0	31,400	29,420	7%	-	-
Domestic abuse crimes		11.5	20,104	17,108	18%	-	-
Rape	•	0.9	1,602	1,599	0%	•	•
Other sexual offences	•	1.7	2,963	2,857	4%	•	•
Alcohol-related crime [2]		8.1	14,172	12,174	16%	-	-
Anti-social behaviour		23.1	40,457	42,249	-4%	-	-
ASB street drinking		1.8	3,072	2,963	4%	-	-
Homicide		0.0	19	14	36%	•	•
Violence with injury		9.1	15,963	14,415	11%	•	
Violence without injury		14.6	25,614	22,434	14%	•	
Violence - Night Time Economy	•	2.2	3,779	3,688	2%	-	-
Possession of weapons		0.6	983	828	19%	•	
Trafficking of Drugs		0.6	1,027	886	16%	•	
Possession of Drugs		1.8	3,146	2,844	11%	•	•
Criminal damage		8.1	14,213	14,471	-2%	•	•
Arson		0.4	619	587	5%	•	•
Public order offences	•	4.1	7,180	6,933	4%	•	
Hate crime (total incidents)		1.0	1,813	1,568	16%	•	
Burglary	•	3.3	5,737	6,123	-6%	•	•
Robbery		0.4	617	531	16%	•	
Vehicle offences		3.2	5,645	5,896	-4%	•	•
Shoplifting	•	4.3	7,600	8,009	-5%	•	
Other theft offences		7.0	12,281	12,807	-4%	•	
Road Traffic Casualties - KSI [3]		0.5	854	870	-2%	•	
Road Traffic Casualties - slight [4]		2.2	3,898	4,139	0%	•	•

[1] All crimes and incidents with a domestic abuse flag

[2] All crimes with an alcohol flag

[3] Killed and Seriously Injured; 2018 calendar year compared with 2017

[4] Slight Injury; 2018 calendar year compared with 2017

Crime comparisons - urban areas

These charts show how crime rates in the three urban CSPs – Plymouth, Torbay and Exeter – compare with the 15 CSPs in their most similar group for each crime type.



Crime comparisons rural areas

These charts show how crime rates in the three CSPs that cover our rural communities – Cornwall, Devon (excluding Exeter) and Isles of Scilly – compare with the 15 CSPs in their most similar group for each crime type.

In common with the urban CSPs, **violence with injury** and **drug offences** are comparatively high.

Possession of weapons in East and Mid Devon is a notable outlier.

There are **lower ranks for** acquisitive crimes such as burglary, robbery and

shoplifting (with the exception of North Devon) in the rural CSPs.

As previously referred to, research indicates **higher levels of under-reporting in rural areas** for some types of crime, such as domestic abuse, due to victims being more isolated and lacking ready access to help and support.



A place-based approach - Safer Towns Programme

The Safer Towns programme was designed by Safer Cornwall to provide **additional support to specific towns** where there are more complex and/or persistent community safety issues, requiring a more intensive, co-ordinated multi-agency approach to address effectively. Typically these towns experience **higher levels of crime and anti-social behaviour**, alongside complex issues around drugs, alcohol, rough sleeping and vulnerable people.

It is a **flagship programme for Safer Cornwall** where it is enabling community safety partners to work together to **target limited resources** to where they are needed most. There are **ten Safer Towns** across Cornwall and the programme has been running for 18 months. Partner feedback indicates that this approach has **improved multi-agency working** and delivered tangible **cultural change amongst partners** working together around shared aims and goals.

This approach is now being **considered for other towns** across the Peninsula.

In Cornwall

Each Safer Town was allocated funding from the Office of the Police and Crime Commissioner to support the delivery of local initiatives. The Safer Towns held **engagement events jointly with the OPCC**, providing awareness and an opportunity for residents to raise their concerns directly with partner agencies.

Town Profiles were presented to the Safer Towns towards the end of the calendar year, with **delivery plans for 2019/20** being developed to respond to the crime trends and emerging issues identified, alongside other local priorities. Some of the local initiatives that have been delivered include:

- **Shoplifting Prevention Briefings** were delivered to businesses in all Safer Towns by the Crime Prevention Officer and local police teams;
- Penzance Town Council are jointly funding a dedicated ASB caseworker (one year pilot) for the town; towns in the East of Cornwall have joint funded a body worn camera for the local ASB caseworker;
- Town-based MoRiLE workshops have been run, allowing local staff to provide their views on key issues for their town. Common concerns include anti-social behaviour, street drinking, adverse media coverage and a lack of communications in response to local incidents;
- A **domestic abuse and sexual violence awareness campaign**, targeting hairdressers and barbers providing training and signposting information;
- **Needle disposal units have been purchased** towns with an identified issue. Most of the towns have reviewed the need for additional disposal units;
- The **Time Credits programme**, aimed at helping some of our most complex individuals in drug and alcohol services, has been rolled out in various towns;
- Safer Redruth and Camborne have agreed to allocate their funding to contribute towards the opening of a youth café in the town. The café will provide advice and counselling to young people as well as focussing on early interventions for those who are vulnerable and perceived to be at risk;
- There has been additional funding for **Street Marshalls to support the** evening and night time economy. The street marshals offer support to those in need of welfare but also people who may have been a victim of assault;
- There is a focus on young people and mental health across many of the towns, with a range of interventions aimed at building confidence and improving wellbeing.

Focus on Violence with Injury

Trends in violence with injury

The rise in the number of crimes recorded by the police in recent years has predominantly been driven by improvements in recording practice, but the impact of these changes is waning. The trend in violence with injury shows a **continued increase across the force area**. We have seen an 11% increase which equates to just over 1,500 offences.

The increase is mainly accounted for by a rise in the number of ABH offences, with serious assaults and wounding offences seeing a small increase when compared with the previous year.

What makes up violence with injury?

Violence with injury can be grouped under 3 broad categories; domestic abuse, violence linked to the Night Time Economy (NTE) and other violence. Within these groups, offences can also be flagged as alcohol related.

- There has been a significant increase in alcohol-related violence, although issues regarding the Night time economy is seen in only a few areas
- Domestic abuse offences have increased, now making up just over a third of all violence with injury offences;
- 16% of violence with injury involves a victim aged under 18, which is consistent with the previous year.

Alcohol related violence makes up 31% of all violence with injury – it has increased by 17% or 729 offences.



This can be attributed to increases in:

- Domestic abuse (26% or 412 offences), 37% of domestic abuse is alcohol related;
- NTE violence has increased slightly by 15% or 74 offences.

There has also been an increase in the number of offences that involve a **young person aged under 18** as both a victim and a perpetrator, although this is **proportionate** with the overall rise.

- Offences that involve a victim aged under 18 have increased by 8% or 188 offences when compared with the previous year;
- Offences involving perpetrators aged under 18 has increased by 14% or 212 offences when compared with the previous year, which may be linked to detection rates.

National research⁹ highlights that children should be recognised as **victims of violence and criminal exploitation**, but this same exploitation makes them perpetrators of crime.

This is a huge challenge for safeguarding, policing and criminal justice services where there are legal, policy and practical distinctions between victims and offender.

- Experience of domestic abuse, exclusion from school, or being looked after in care have wellevidenced links to vulnerability. In turn, the systematic targeting and grooming of vulnerable children and adults in the supply and distribution of drugs increases their risks of being drawn into violence;
- Technology including social media is making it easier for organised crime groups and gangs to market drugs, recruit and control vulnerable people and compete for status at street level.

The 2019 update to Devon and Cornwall police knife crime profile concludes that there does appear to be a **small increase in knife-related activity** in certain pockets of the Peninsula, but there does not appear to be evidence of any widespread largescale increases.

There is intelligence from young people's services suggesting **more young people are carrying knives**, however this is not being seen in the crime data.

Although this does not appear to be cause for serious concern at this time, police and partners should continue to be alert to the possibility of an increasing problem, and partners are actively encouraged to contact the police with any new intelligence.

Trends in Most Serious Violence

Most serious violence¹⁰ has increased by 24% over the last year, further to a similar rise last year, although it remains a low volume crime. National rises in most serious violence have been linked to organised crime groups and gangs, with problems strongly concentrated in metropolitan areas.

Various types of violence were reviewed using the MoRiLE model and assessed as **moderate level threats**.

A rise in serious violence was apparent across all Peninsula CSPs except Torbay, where there was no notable change. The highest rise was in Plymouth (35%).

The police review of most serious violence in 2017/18 highlighted that:

- Most serious violence impacts predominantly on male victims (3 in every 4 crimes) aged between 18 to 36 years old;
- Female victims are much more likely to experience most serious violence in a domestic context (50%) than males (11%);
- Around a third of offences appear to have been aggravated by alcohol, and three-quarters of offences occur between 6pm and 6am, so it is likely that the Night Time Economy plays a role.

There have been concerns that the **increase in County Lines** in the Peninsula has contributed to a rise in most serious violence. This was difficult

⁹ Serious violence in context: Understanding the scale and nature of serious violence

¹⁰ iQuanta crime grouping - includes homicide, attempted murder, wounding or other act endangering life, Grievous Bodily Harm, causing death by dangerous driving and causing death by aggravated vehicle taking.

to quantify, but a review of offences found that a **significant proportion** of violence was connected to drugs

- approximately 13% of Grievous Bodily Harm and wounding offences, 28% of murders and 23% of attempted murders (but the volumes are much smaller). Around a quarter of the offences involve **multiple suspects/offenders**.

Identifiable 'youth gang' violence does not appear to have contributed to the rise in recorded offences of most serious violence, with very **low proportions of offences involving suspects/offenders under the age of 18**.

Partners working in the areas most affected by gang issues, in South Devon, are concerned that **assaults are not being reported to the police**, including a couple of cases that have resulted in serious injuries, so the figures therefore underestimate the impact of the problem. This concern is also being reported by Devon partners in relation to **drug related crime**.

New 'public health duty' to tackle serious violence

In July 2019, the government announced a **new 'public health duty' to tackle serious violence** as part of its new <u>Serious Violence</u> <u>Strategy</u>. The Strategy stresses the strong link between County Lines, drugs, and violence and includes gun and knife crime and robbery within its scope.

A 'public health approach' means looking at crime not as isolated incidents or solely as an enforcement issue but instead, regarding it as a preventable consequence of a range of factors, such as **adverse early-life experiences**, or harmful social or community experiences and influences.

The new duty will cover the police, local councils, local health bodies such as NHS Trusts, education representatives and youth offending services. It will ensure that relevant services work together to **share data**, **intelligence and knowledge** to understand and address the root causes of serious violence including knife crime. It will also allow them to **target their interventions** to prevent and stop violence altogether.

The government will **amend the Crime and Disorder Act** to ensure that serious violence is an **explicit priority for Community Safety Partnerships** and ensure that they have a strategy in place to tackle violent crime.

Threat, risk a	and harm as	sessment				
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues		
High	High	Significant limitations	High	Violence with injury (domestic abuse) 5,431 crimes \blacktriangle +15%		
Moderate	Minor	Good	Standard	Violence with injury (excluding DA) 10,495 crimes ▲ +9%		
Moderate	Moderate	Some limitations	Standard	Violence with injury – NTE 2,389 ▲ +5%		
	Most serious violence (includes DA 927 crimes ▲ +24%					
				Related statistics: Knife crimes 440 crimes ▲ +11% Gun crimes 126 crimes ▲ +48% Robbery 617 crimes ▲ +16%		
Headlines 2019	 The number of recorded violence with injury crimes continues to increase, primarily driven by alcohol-related crime and domestic abuse, of which a small proportion can be attributed to the Night Time Economy (NTE); most serious violence has increased by 24%, further to a similar rise last year; Crimes that involve young people under 18, both as victims and perpetrators, have also increased. Research suggests that a proportion of this crimes could be linked to criminal exploitation – this is also discussed under Drug Trafficking and County Lines; There has been a small increase in knife-related crimes but this appears to be in pockets rather than a widespread large-scale increase. Gun-related crime has also increased but remains very low volume and some of the rise reflects improvements in identifying weapons such as stun guns, CS gas and pepper spray; Reduced visibility of the police is a recurrent concern from community engagement and has a strong impact on feelings of safety; this was specifically raised with respect to the NTE where it may place added 					
Risk to Public	 Violence with injury covers a broad range of harm from grievous bodily harm to minor injuries; NTE/alcohol-related violence sees a higher proportion of physical injury assaults than other types of violence; substantial physical and psychological impacts associated with a violent attack, dependent on seriousness of injuries; potentially more enduring impacts on fear of crime and wellbeing; Public violence may create heightened concerns amongst people using the Night Time Economy, likely to change behaviours (avoidance of certain locations); wider community awareness in hotspots (town centres) particularly at night. 					
Risk to Partnership	 Short term media coverage for violent offences and some towns may receive adverse press for persistent issues; In 2018 the Government committed to implementing a new, national strategy on alcohol but this has not yet been published; National guidance and best practice highlights the importance of health input into violence prevention. The priority given to this by health partners varies across the Peninsula, with some areas experiencing greater health input than others; Violence places a constant but mostly predictable demand on 					

	 resources, largely police and health; more joined-up working would be beneficial; a lack of investment in prevention and funding for services providing support for drug and alcohol problems continues to reduce; Children need to be recognised as victims of violence and criminal exploitation. Exploitation can also lead to use of violence by the young person themselves, and this can be coercive. This is a huge challenge for safeguarding, policing and criminal justice services where there are legal, policy and practical distinctions between victims and offender.
	 Well established expertise in regards to NTE violence, with limited but generally adequate resources in place across a range of agencies to provide a response, targeted according to risk and vulnerability;
Ability to mitigate	 Additional tools are available to help us understand and mitigate risks related to alcohol, such as the Assault Related Injuries Database (ARID), Identification and Brief Advice training and Cornwall's Health Impact Licensing Tool;
risk	 Police provide a limited presence in town centres and there is an increasing need for community initiatives such as Pub Watch and Street Pastors; inexperienced staff in licensed premises due to high staff turnover; fewer licensing officers to do proactive work with licensed premises – relies on cooperative relationships to avoid hearings.
Knowledge	 Data from hospital emergency presentations for assault indicate that around 37% of assaults are not reported to the police, with a significant proportion of these likely to be occurring in the Night Time Economy – the level of violence linked to the NTE may therefore be underestimated based on police data alone;
gaps	 National research shows that technology including social media is making it easier for organised crime groups and gangs to market drugs, recruit and control vulnerable people and compete for status at street level. Violence will often be used as a method of control in these situations.

Domestic Abuse and Sexual Violence

Domestic Homicide Reviews (DHRs) are a statutory responsibility of Community Safety Partnerships and came into force in April 2011. They are:

"...a locally conducted multi-agency review of the circumstances in which the death of a person aged 16 or over has, or appears to have, resulted from violence, abuse or neglect by:

- A person to whom he or she was related, or with whom he or she was or had been in an intimate personal relationship; or
- A member of the same household as himself or herself"

A DHR is usually undertaken in cases of homicide but can **also be undertake in cases of suicide**, where domestic abuse is evidently a factor.

The purpose of a DHR is not to reinvestigate the death or to apportion blame – it is intended to help **prevent domestic homicide** and improve service responses for the whole family, including victims, those engaging in abusive behaviours and their children, through **improved intra and inter-agency working**.

This includes establishing what lessons are to be learned, how they will be acted on, within what timescales, and what is expected to change as a result. It also extends to applying these lessons to service responses, including changes to policies and procedures as appropriate.



Since April 2011, **35 Domestic Homicide Reviews** have been instigated across the Peninsula CSPs. The **demands on agencies participating in DHRs are considerable** and vary on a case-by-case basis in terms of both in-house and external resourcing needs, depending on complexity and the need to commission further external reports. Basic costs¹¹ to be covered include a Chair, administration (internal and external), chronolator and external expertise.

Domestic abuse

Threat, risk and harm assessment				
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues
High	High	Significant limitations	High	Domestic Homicide Reviews - 35 since 2011
Significant	Moderate	Significant limitations	Moderate	Domestic Abuse - 31,400 incidents ▲+7%
Headlines 2019	• Comprehensive strategies are in place but effective delivery is constrained by funding and resourcing pressures (increasing); specialist			

 11 An average of £13,000 was quoted based on 5 DHRs in Cornwall.

	•	The number of domestic abuse crimes reported to the police continue to rise , with alcohol-related crimes making up a significant component;
	•	More training in routine enquiry is required to improve early identification and intervention in non-specialist services, particularly GPs and Social Care, and reduce the reliance on disclosure;
	•	DHRs highlight the need to provide a better response to victims and families with multiple and complex needs to ensure that they do not 'fall through the gaps'; knowledge is building about trauma informed approaches with services are trained to ask about and respond to past life trauma and its impacts;
	•	Improvement required in the DHR process across the Peninsula to address quality and consistency and progress the implementation of recommendations ; national recommendations are not being addressed by Home Office e.g. training medical practitioners.
	•	Significant short and long term physical and psychological impacts on the victim; frequently part of a picture of multiple vulnerabilities , including drug and alcohol problems, poor physical and mental health and previous trauma; risk of self-harm and suicide (victim and perpetrator); potential for loss of life – domestic homicide (worse-case scenario);
Risk to Public	•	Significant financial hardship including the loss of income , savings, possessions and home, as well as financial deprivation/control ; has a greater impact in the context of existing hardship caused by austerity policies such as Universal Credit;
	•	Developmental impacts of domestic abuse experienced or witnessed by children are severe and long-lasting (one of the ACEs) leading to poorer life outcomes and intergenerational cycle of abuse;
	•	Community/public expectation – harm is more hidden ; people in the community, other than the victim and family, are unlikely to be aware;
	•	Domestic abuse is high frequency, high volume ; adverse trends although improved recording is a factor.
Risk to Partnership	•	Local and national priority with international standing - Violence Against Women and Girls Strategy, Istanbul Convention, focus in national inspection regimes (such as HMICFRS ¹² and JTAI ¹³); associated reputational risks includes loss of public and victim confidence , failure to respond to DHR recommendations carries a risk of corporate manslaughter ; new <u>Domestic Abuse Bill</u> , places additional responsibilities on partners , including those relating to a statutory duty for local authorities to provide accommodation-based support for victims;
	•	Costs to respond are felt in all agencies - direct costs (police, health, social care) and indirect costs (mental and physical health impacts in later life); long term demands; DHRs are resource intensive to co-ordinate and secure multi-agency participation.
Ability to mitigate risk	•	Comprehensive DASV strategies in place across the Peninsula; all areas have specialist services in place to work with victims and their children, and some provision for those engaging in abusive behaviours; staff have well developed and comprehensive knowledge; Healthy Relationships and Operation Encompass in all schools; pilot project running to provide tailored support for women with complex needs (Eos) but this is time limited ;

 ¹² HM Inspectorate of Constabulary, Fire and Rescue Services
 ¹³ Joint Targeted Area Inspections by Ofsted, Care Quality Commission, HM Inspectorate of Constabulary, Fire and Rescue Services and HM Inspectorate of Probation.

	 Funding pressures on all domestic abuse services across the Peninsula, with many parts of the system reliant on small pots of short term funding; specialist services are working above capacity (waiting lists etc.) across the Peninsula; Cornwall specifically highlights a shortage of mental health workers (acute services) and waiting lists for specialist therapy and counselling; neither Plymouth nor Torbay has a community perpetrators programme;
	 Specialist police resources in place (SODAITs) but some concerns about capacity; police officers are getting better at completing DASH and ViST risk assessments and these are a good source of raw intelligence; Plymouth SODAIT has ISVA and IDVA commissioned services working within the team; 3 specialist Lawyers are working with police to provide an enhanced service to DA victims;
	 Widespread capacity pressures for agencies who participate in DHRs, and limited resources to progress recommendations; a Peninsula review of DHR practice recommended sharing learning and recommendations and working together to improve DHR processes;
	 There remains a reliance on disclosure rather than routine enquiry - more training required in early identification and intervention for non- specialist services (GPs, primary care, social care); criminal justice outcomes persistently low and not improving;
	• Independent inspection of Multi-Agency Risk Assessment Conference ¹⁴ processes, by national domestic abuse charity Safe Lives, found issues around attendance , accountability and training for attending agencies.
	 Under-reporting identified as a major limiting factor;
	 Apart from in Cornwall, a lack of data and intelligence across the system limits partners' ability to understand domestic abuse at a local level, evaluate the effectiveness of services and secure future investment;
Knowledge gaps	 Adult safeguarding cases not identified/recorded as DA; additional knowledge and skills required to support individuals with a learning disability and to recognise vulnerability to exploitation;
	 Hard to reach victims, rural and small communities, abuse in relationships for young people under 18; Female Genital Mutilation and Honour Based Abuse may be missed due to cultural/ language barriers; coercive control; harassment online through social media etc.

The good stuff – what CSPs are doing

Improving Referrals to increase Safety, IRIS

Area: Devon and Torbay

- Health services are often the first point of contact for women who have experienced violence. They can play a vital role in responding to and preventing further DVA by intervening early, providing treatment and information and referrals to specialist services;
- In Devon and Torbay, an enhanced

Integrated Offender Management pilot: Behaviour Change IDVA

Area: Devon

- This pilot involved funding Behaviour Change IDVAs to provide a whole family response to domestic abuse;
- One IDVA has been working with non-statutory perpetrators of domestic violence and abuse to reduce repeat perpetration. Outcomes include reducing repeat perpetration to 8%, well below the

¹⁴ Multi-Agency Risk Assessment Conferences are used to manage high risk domestic abuse cases

version of IRIS has been commissioned to work with GPs to **embed clinical enquiry in 50 GP practices** across Devon and Torbay. This is funded from Home Office, Violence Against Women and Girls funding to March 2020. Devon is **trialling an added sexual violence and abuse component** to IRIS;

- The pilot has been very successful with a high number of referrals received from GP practices;
- A business case has been put together for a similar approach in Cornwall and funding is being sought to progress it.

Community Mobilisation Campaign

Area: Cornwall

- Safer Cornwall is working with local businesses, starting in the Safer Towns, to ensure they can recognise and respond to domestic abuse and sexual violence (DASV), both for their staff and for the local community;
- This involves training staff in local businesses in identification and referral, providing them with a DASV policy template and posters, stickers and leaflets so that staff and people in the community can easily recognise that they offer a safe place.

national benchmark of 18%. As a result of this success options are being explored for expanding this programme across the Peninsula;

- Another IDVA has worked with the specialist substance misuse service to deliver mentoring and advice to staff to help them identify, challenge and support clients who are perpetrating domestic abuse;
- This work has improved staff training and skills, and is being continued through a new programme which is training staff to deliver Healthy Relationship Programmes.

Are You OK? campaign

Area: Torbay

- The "Are You OK?" campaign links into the Reducing The Risk Domestic Abuse (DA) Champion network, and offers professionals from third sector, community and partners to become DA Champions;
- By having DA Champions in many agencies, the aim is to dramatically improve channels of help, advice and support to victims, and ensure professionals have an improved common understanding of the issues and have the ability to coordinate their efforts more efficiently.

Upskilling the Workforce

Area: Torbay

- A DASV Co-ordinator role has been introduced to support and facilitate robust partnership working;
- Safer Communities Torbay (SCT) delivered Stalking and Harassment training across the area, with two elements - Awareness Raising, and an intensive 2 day course for those directly managing relevant cases;
- SCT has also supported extra capacity to deliver CRUSH in schools. CRUSH is an awareness raising and support programme for 13-19 year olds to help them make safe and healthy relationships.

Eos Project

The Eos Project seeks to establish a **whole system approach for women and families with complex needs fleeing domestic abuse** across the Peninsula. Twoyear grant funding has been secured from Ministry of Housing, Communities and Local Government through the South West Peninsula EOS project bid.

The main aims of the project are to **provide specialist housing support**, roll out a **workforce development programme** across the Peninsula to upskill the workforce and invest in **system change** to share and embed best practice.

Refuge for women with complex needs - unique in the South West

Area: Cornwall

- Pre-existing refuge provision would not take women with alcohol and drug problems who were not abstinent;
- Grant funding secured through the Eos project bid has facilitated the expansion of the Vulnerable Women's Unit to provide 12 units of accommodation for those fleeing domestic abuse who have additional complex needs;
- The service provides drug and alcohol tolerant accommodation with tailored support, including access to specialist domestic abuse services and appointments with health care and recovery services on-site, to ensure there are no gaps in support;
- The dedicated support team provide a range of trauma-informed support to promote recovery and independent living through a Tenancy Sustainment Programme, educational courses, community projects and a volunteering programme.

Domestic abuse system leadership

Area: Plymouth

- Since February 2019, Plymouth has been working with the Leadership Centre with the ambition of improving the city's response and partnership working around domestic abuse – funding for the facilitation of this work was secured via the Eos bid;
- Key to this work was ensuring that the perspective and voice of people with lived experience is central - 20 people from different organisations have listened to over 100 voices of lived experience and staff;
- These insights have been used to understand how the system is currently working and provoked challenges to try out different ways of work and prototyping;
- This has led to a review of **what might be different** including: the reprocurement of **specialist services**, as well as **behaviours and values**;
- Eos funding has also supported Plymouth in developing a trauma awareness workshop in partnership with the Trauma Informed Plymouth network;
- The content and delivery have been part of a multi-agency collaboration and will draw upon the local approach document and emerging best practice. This will be initially aimed at professionals who come into contact with domestic abuse issues as part of their work;
- The training will run monthly from January 2020 and aims to deliver to 360 participants.

Rape and sexual assault

Throat rick	and harm as	scossmont			
		Ability to			
Risk to public	Risk to partnership	mitigate risk	Overall risk	Key issues	
Significant	High	Significant limitations	High	Rape – 1,602 ► +0% Sexual Assault – 2,040 ▲+4%	
Minor	Minor	Good	Standard	Other sexual offences - 904 offences ►-1%	
Headlines 2019	 since last y sustainab network of The steep stabilise b demand or cases of c Evidence th trafficking young peo sexual ex Specific co people an Sexual Abu Also in con required to services, p disclosure; with service 	As for domestic abuse, funding and capacity pressures have intensified since last year and present a significant risk to service resilience and sustainability ; Sexual Assault Referral Centres in place but a fragile network of services around them to support victims; The steep rise in sexual offences reported to the police has started to stabilise but at a much higher level than previously recorded; increased demand on services from people seeking support for recent and historical cases of child sexual abuse ; Evidence that sexual violence is being used as a method of control in drug trafficking/exploitation , particularly targeting vulnerable women and young people; police intelligence highlights a specific knowledge gap around sexual exploitation linked to County Lines; Specific concerns about harmful sexual behaviours amongst young people and the prevalence of peer-on-peer sexual violence (see Child Sexual Abuse and Exploitation); Also in common with domestic abuse, more training in routine enquiry is required to improve early identification and intervention in non-specialist services, particularly GPs and Social Care, and reduce the reliance on disclosure; knowledge is building about trauma informed approaches with services being trained to ask about and respond to past life trauma and its impacts; lack of assertive outreach and tailored services for those with			
Risk to Public	on the via agencies and suic blood bor to the pro re-traum Evidence traffickin hidden ha Specific of people a Commun victim, fa rates for reported Sexual vi last 5 ye	 on the victim; harm sustained over life course (but recovery possible if agencies provide the right support at the right time); risk of self-harm and suicide; risk of exposure to sexually transmitted infections and blood borne viruses; unwanted pregnancy; victims may not seek help due to the prospect of lengthy court cases or poor outcomes; fear of and actual re-traumatisation; Evidence that sexual violence is being used as a method of control in drug trafficking/exploitation, particularly targeting vulnerable women; hidden harms and risks with victims unlikely to seek help; Specific concerns about harmful sexual behaviours amongst young people and the prevalence of peer-on-peer sexual violence; Community/public expectation – There is a high expectation from the victim, family and community to bring offenders to justice, but conviction rates for rape are very low, far lower than other crimes with only 2% of reported rape cases ending in a conviction for the perpetrator; 			
Risk to Partnership	Local an Against V	d national pr Vomen and Gir	riority with rls Strategy,	ficantly increased. international standing - Violence Istanbul Convention, sustained high I media; campaigns such as #MeToo;	

	associated reputational risks including loss of public/victim confidence ; impacts on student recruitment for educational establishments;
	• Costs affect multiple agencies and can be long term, but are often hidden or not recognised; direct costs to respond (police and health) and indirect costs (mental/physical health impacts in later life). Past life trauma is a common feature in more complex cases requiring specialist support; demands on services have increased from people seeking support for recent and historical cases of child sexual abuse .
	 Comprehensive DASV strategies in place across the Peninsula; specialist services are in place to work with victims and staff have well developed and comprehensive knowledge; Healthy Relationships in schools; specialist police teams (SODAITs) but some capacity concerns; Plymouth and Torbay SODAITs have ISVA and IDVA commissioned services working within the team;
Ability to mitigate risk	 Lack of capacity for co-ordinated and proactive preventative work; funding arrangements for services across the Peninsula are varied and fragile; cases where complex needs exist, such as homelessness and poor mental health, may go unresolved due to being too resource intensive for individual agencies; collective, assertive responses under- utilised; Very little to address perpetrator/potential perpetrator behaviour;
	 Capability – continued reliance on disclosure rather than routine enquiry, lack of understanding of risk factors and vulnerability in wider services; lack of skills to identify and engage hard to reach victims.
	 Under-reporting is a major limiting factor, with a range of groups highlighted including people with dual diagnosis, adults at risk, rough sleepers, sex workers, BAME communities (cultural barriers), transient populations (tourists, students etc.) and older people;
	 Police intelligence highlights a specific knowledge gap around sexual exploitation linked to County Lines;
Knowledge gaps	 Additional knowledge and skills are needed to support individuals with a learning disability and to recognise risk and vulnerability to exploitation;
	 New areas including online dating apps, 'revenge porn', up-skirting and 'chemsex'¹⁵.
	 Significant gaps around perpetrator response – small evidence base to draw on and a lack of community models. We need to know more about offender behaviour, young people's attitudes and expectations to improve our prevention response.

¹⁵ 'Chemsex' refers to gay or bisexual men using drugs to facilitate sex with other men, but has become a catch-all term for sex involving drugs.

The good stuff – what CSPs are doing

Routine Enquiry for Adverse Childhood Experiences (ACEs)

Area: Cornwall

- Internationally ACEs are recognised as a major cause of noncommunicable disease. This project aims to raise awareness amongst professionals and the public about the long term outcomes of childhood adversity and trauma;
- This will be achieved by establishing and supporting organisational practice and culture change by embedding Routine Enquiry about Adversity in Childhood within every appropriate assessment across domestic abuse, mental health (adult and CAMHS) and alcohol and drug services;
- The model has five key elements:
 - Readiness Checklist and organisational buy-in
 - Change Management systems and processes to support enquiry
 - Training Staff hearts and minds and how to ask and respond appropriately
 - Follow up support and staff supervision
 - **Evaluation** and research

Workforce development conferences

Area: Plymouth

- In response to needs identified in their 2018 Workforce Survey, Safer Plymouth delivered two conferences in 2019. Both events featured **talks** from nationally recognised experts in the field along with opportunities for sharing best practice locally;
- The 'Improving responses to sexual violence' conference was a one day event attended by 105 people, with the following objectives:
 - To gain a better understanding of sexual violence in Plymouth
 - To understand current thinking, research and innovations
 - To understand current responses in Plymouth
 - Engage in system wide developments and improvements
 - Networking and making new connections
- The 'Community Safety Through a Trauma Informed Approach' was also a one day event and attended by 141 people;
- This was an opportunity for partners to engage with Safer Plymouth at the start of the journey to become a trauma-informed community safety partnership;
- The event was aimed at helping to define what is meant by the term 'trauma informed' and the transformative potential of this approach, and the objectives were:
 - To increase understanding of Safer Plymouth;
 - To introduce the trauma informed approach;
 - To inspire partners to take an active role in doing things differently.

"Ask for Angela" campaign

Area: Plymouth and Torbay

- Ask for Angela is a safeguarding initiative which aims to combat sexual violence and abuse. Adopted by licensed premises, the campaign displays posters encouraging customers to approach staff members and ask for 'Angela' if they feel unsafe whilst on a night out.
- In Plymouth, Devon and Cornwall Police, Best Bar None, L&D Training and the University of Plymouth Students' Union worked together to launch the 'Ask for Angela' campaign to help people to stay safe while dating in pubs and clubs. The scheme has been rolled out in 15 bars, clubs and pubs across the city.
- In Torbay the campaign has been promoted by the Best Bar None group, which includes Police and the Local Authority, and is **currently active in 21 premises**. It is also being promoted with local hotels and restaurants.

Threat, risk	and harm ass	sessment		
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues
Significant	Significant	Significant limitations	Moderate/ High	Sexual offences – victim under 18 [1] 2,457 crimes ▲ +4%
				Make/possess/show indecent photos of child 713 crimes ▼ -14%
				Child sexual abuse [2] 291 crimes ▲ +4%
				Child sexual exploitation [2] 189 crimes ▲ +26%
				under 18 at the time of reporting oor but improving
Headlines 2019	 Devon and Cornwall CSPs have opted for differing approaches for the assessment of child sexual abuse and exploitation this year but for consistency with last year these are presented together; closely linked to other exploitation discussed <u>under Drug Trafficking and County Lines;</u> Evidence that sexual violence is being used as a method of control in drug trafficking/exploitation, particularly targeting vulnerable women and young people; police intelligence highlights a specific knowledge gap around sexual exploitation linked to County Lines; Specific concerns about harmful sexual behaviours amongst young people and the (increasing) prevalence of peer-on-peer sexual violence; In common with offences against adults, the steep rise in sexual offences against children reported to the police has started to stabilise but at a much higher level than previously recorded. Rates are highest in Plymouth and Torbay. 			
Risk to Public	severe and and interg apparent u • Significan	severe and long-lasting (one of the ACEs) leading to poorer life outcomes and intergenerational cycle of abuse; victimisation often doesn't become apparent until identified in later life ;		

Child Sexual Abuse and Exploitation

	agencies provide the right support at the right time); risk of self-harm and suicide; risk of exposure to sexually transmitted infections and blood borne viruses; unwanted pregnancy ;
	 Abuse may not be reported due to fear of not being believed, control by abuser and threats of further abuse; unresolved trauma and abuse in childhood is a common feature in complex cases requiring specialist support; we have seen demand on services increase due to people seeking support for recent and historical cases of child sexual abuse;
	 Evidence that sexual violence is being used as a method of control in drug trafficking/exploitation, particularly targeting vulnerable women and young people; hidden harms and risks with victims unlikely to seek help;
	 Although the volume of crimes has increased, the three main relationship types between victims and offenders have remained the same: friend/peer (24%), family (21%) and stranger online (14%); specific concerns about harmful sexual behaviours amongst young people and the prevalence of peer-on-peer sexual violence; peer-on-peer offences increased by 10% compared with 4% for all offences.
	 High public expectation placed on services to respond effectively to protect children from abuse and exploitation. Failure to respond effectively to prevent CSE and failure carries huge reputational risk (Rochdale, Rotherham etc.); national profile through the Truth Project and national inquiry;
Risk to Partnership	• Costs affect multiple agencies and can be long term, but are often hidden or not recognised; direct costs to respond (police and health) and indirect costs (mental/physical health impacts in later life). Past life trauma is a common feature in more complex cases requiring specialist support; demands on services have increased from people seeking support for recent and historical cases of child sexual abuse .
	 Specialist services are in place to work with victims (Sexual Assault Referral Centres, support and therapy) and staff have well developed and comprehensive knowledge; Healthy Relationships in schools; specialist police teams (SODAITs) but some capacity concerns;
	 Multi-agency arrangements established to manage and respond to child sexual exploitation cases; all areas except Torbay have expanded these forums to consider wider exploitation (such as criminal and drug related); the police Partner Agency Information Sharing (PAIS) portal went live in October 2018 and partners report that information sharing has improved;
Risk mitigation	 Capacity - lack of capacity for co-ordinated and proactive preventative work; challenges around timely access to other services (especially mental health); disruption for CSA/CSE not mainstreamed activity; Cornwall highlight an ongoing gap in paediatric forensic provision (capacity and skills) for sexual abuse clinics; boom in online offences over the last few years has put significant pressure on police capacity;
	• Capability - routine enquiry becoming more widely embedded and health professionals are getting better at recognising signs of sexual abuse; some professionals say that the drive to improve identification and response to CSE has resulted in a lack of action for CSA ; need to improve understanding of risk factors and vulnerability amongst non- specialist services;
	• Whole family approaches are improving; Cornwall reports that identification of historic and current issues within families is increasing, but there is a risk of missing the harms that exist in families that are not known to services; under-used role of other professionals (such as GPs and dentists).
	 Under-reporting identified as a major limiting factor, particularly from 'seldom heard groups' such as children with disabilities; home educated students more isolated; young people around transition age in danger of 'falling through the gap' in services;
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Knowledge gaps	 Peer-on-peer sexual abuse and exploitation is likely to be an under- reported area and there is a danger that both victims and authorities may view an act of abuse as "experimenting"; young people have used
	 Reporting weakness (lack of detail, poor but improving use of CSE and Cyber flags) in police data, lack of data contributions from other agencies; Online/cyber offences are less visible and not well understood with systems and platforms evolving rapidly.

Targeted CSE Awareness Training

Area: Torbay and South Devon

- Targeted CSE training has been delivered to over 400 Licensed Taxi drivers in Torbay, with the aim of raising awareness of this issue and safeguarding young people within the Bay;
- Initially offered on a voluntary basis, it will be mandatory under a new policy to be published at the end of the year. The training is delivered by local children's charity Checkpoint;
- Torbay and South Devon have been working in partnership to improve safeguarding within fairgrounds and reduce opportunities for exploitation of children, young people and vulnerable adults;
- Torbay worked with the fairground provider to develop a safeguarding policy and fairground staff attended safeguarding training;
- The two CSPs are now working to build on this good practice and develop resources to promote safeguarding across all events.

National Citizens Service CSE campaign

Area: Plymouth

- Young people in Plymouth joined forces with police and other agencies to design a **new child sexual exploitation awareness campaign** aimed at their peers;
- The new campaign is the result of an innovative two-year collaboration between the National Citizens Service (NCS), the Plymouth Safeguarding Children's Board, police and city partners and will be rolled out across the Devon and Cornwall area;
- Young people from the NCS spent time over the summer learning about child sexual exploitation and gaining an understanding of the issue and then provided feedback and ideas for key messages that would resonate with their peers:
 - Anyone can be a victim
 - Young people can be exploited by **someone their own age**
 - If a young person is missing from home or school, they become more vulnerable
- Young people are encouraged to #SaySomething if they are worried about their own or other people's relationships. "I didn't know" campaign

"I didn't know" campaign

Area: Cornwall

- In September 2018, Cornwall and Isles of Scilly Safeguarding Children Partnership and Safer Cornwall delivered an education campaign aimed at the hospitality industry called 'I didn't know';
- An extension of an existing Police campaign, its aim was to support the hospitality industry to spot the signs that their establishment is being used for the exploitation of children;
- Local delivery included a leaflet drop, advice and information and multi-agency walkabouts. This included some targeted locations based on intelligence shared at the Multi-Agency Child Exploitation Panel.

Coming Together for Childhood

Area: Plymouth

- The NSPCC provide a variety of services to help children who've experienced abuse to go on to live safe and happy lives, in **Plymouth** they are focused on preventing and recovering from **Child Sexual Abuse**;
- To make a lasting difference, abuse must be prevented from happening in the first place and this is a 10 year strategic partnership to bring communities together to prevent Child Sexual Abuse;
- The aim is to work towards a community that uses the best of what social care, schools, community groups, police and the NSPCC are already doing to prevent abuse. By working together and combining these skills, children and families can receive earlier and better support;
- A community where there is less abuse is one where:
 - Places where children spend time are made safer;
 - Adults take action to keep children safe;
 - Children know what abuse is and are able to speak out;
 - There is **early and effective action** if problems do arise.
- In Plymouth organisations and community members are developing and delivering a range of projects from working in schools on **healthy relationships** to taking a population wide approach using a **public health model to prevent child sexual abuse**, together all these elements are **building learning** about what works to empower communities to prevent abuse.

Vulnerability and Complex Needs

What do we mean by 'complex needs'?

Complex needs means **multiple problems occurring together** and each problem can make the others worse. People with complex needs have to access **multiple services** to get the help that they need, which means that **no single agency will hold all the solutions**.

Complex needs commonly include drug or alcohol problems, criminal or anti-social behaviour, mental and physical health problems, learning difficulties, poor family and other relationships, poverty and debt.

Across the board services are reporting the growing number of people that are seeking help with **multiple and overlapping issues**. This is a **recurring theme** that cuts across all areas of partnership work.

Individuals facing multiple/complex needs often rotate through various health, welfare and justice systems. This can deepen the problems in their lives at a cost to them, their families and to society. This group often struggle to engage with everyday life and mainstream services and can often feel on the margins of society.

There are particular challenges in getting **suitable housing** and accessing timely **mental health support**, both in terms of finding the right type of support and how services can **come together to help people** when they are **most at risk**.

Experiences of social isolation, trauma, exclusion and poverty in childhood and adulthood are all too common. A

growing body of research¹⁶ is revealing the **long-term impacts of violence**, **abuse and neglect** experienced in childhood, supporting the causal link with poor health and social outcomes.

Children and young people who have **experienced 4+ ACEs** are significantly more likely to:

- Develop **mental health conditions**, such as anxiety, depression and psychosis
- Adopt health harming behaviours such as smoking, harmful drinking, or use of illicit drugs and risky sexual behaviour
- Become a victim of violence or commit acts of violence

Adverse Childhood Experiences

(ACEs), as well as referring to the wellrecognised impact of child sexual, physical and emotional abuse and neglect, also include witnessing or experiencing **violence or abuse**, poor **mental health** of a parent, parental use of **alcohol and other drugs**, or **a parent dying or being in prison**.

High ACE scores are linked to chronic disease, frequent mental distress, morbid obesity, sexually transmitted diseases, homelessness¹⁷ and greater risk of early death (by up to 19 years).

There is also a **growing evidence base linking ACEs to criminal behaviour**, although the links here are less well defined. High ACE scores have been linked to anti-social behaviour, violence, problem use of alcohol and drugs and unhealthy sexual behaviour.

Children who experience multiple ACEs are **more likely to be taken into care**, due to abuse or neglect. Children

¹⁶ Such as the <u>Welsh Adverse Childhood</u> <u>Experiences Study</u>, Public Health Wales, 2015 17 Cited in the <u>Rough Sleeping Strategy</u>, Ministry of Housing, Communities and Local Government, 2018

in care tend to **go missing more** often than other children and this exposes them to a much greater level of risk and harm.

They also may form friendships with other young people with similar challenges, which may be **unhealthy relationships** and escalate their risk.

Locally a review of case studies of the young people in South Devon that are linked to gang activity demonstrates that **virtually all of the young people at the core of the group are known to have experienced Adverse Childhood Experiences**, including witnessing domestic abuse, substance abuse and mental health problems, and some of them have also experienced neglect and/or abuse.

Research into youth reoffending in Cornwall found that **young people with 4 or more ACEs were more likely to reoffend** and to be charged with a higher number of reoffences, with domestic abuse, parental substance use and mental health problems having the greatest impact.

People with multiple and complex needs are a **significant source of repeat demand for public services** and also amongst the 'hardest to help'.

Developing our ways of working to better meet their needs provides an opportunity to reduce vulnerability and health inequalities and also **reduce costs across the system**.

Across the Peninsula, partnerships are starting to **explore and adopt trauma informed approaches**, building on existing research and good practice from both national and international studies.

Safer Plymouth was the first CSP to overtly start to transform its delivery into a specifically trauma-informed system and thus the approach is most established in this area.

Alliance Working

Area: Plymouth

- The Complex Needs Project was established in 2015 with all commissioners and service providers for drugs and alcohol, homelessness, offending, mental health and domestic abuse. From April 2019 this evolved into the Alliance Commissioning Model;
- Senior decision makers meet regularly to make 'best for user' decisions. These include system changes such as shared assessments and consent forms, data sharing agreements, co-location, integration and delivering efficiencies;
- The Creative Solutions Forum is the operational group that focuses on bespoke and creative approaches for the most complex people.

Vulnerability and Complex Needs (VCN) Team

Area: Torbay

- The VCN team in Torbay Council specialises in clients with complex needs and sit within a wider **multidisciplinary team** that includes ASB investigators, Town Centre Wardens, Domestic Abuse Co-ordinator, Substance Misuse Link Worker, Resettlement Workers and a Rough Sleeper Co-ordinator;
- The team consists of two mental health nurses and a social worker, who conduct assessments, liaise with partners, produce multi-agency plans and broker access into the appropriate support services;
- **Partnership working is** an integral part of the approach and a day-to-day feature of their role.

Complex Needs Strategy

Area: Cornwall

- The Complex Needs Strategy is a multi-agency approach to better meet the needs of people with multiple vulnerabilities and embed a long term solution that will address growing demand and complexity across the system;
- The strategy includes a more victimoriented approach to balance any enforcement (where this is called for, e.g. ASB, rough sleeping on public and private land) with support;
- The key elements of this approach are:
 - Multi-disciplinary, multi-agency team with weekly tasking meetings and an assertive outreach team with daily tasking meetings – supported by a robust information sharing framework;
 - Immediate, flexible and targeted outreach intervention;
 - A **persistent**, **assertive approach** to engagement;
 - Additional budget through personal budgets;
 - Commitment from agencies to target resources;
 - **Continued support** after being accommodated;
 - An agreed/shared **single approach/plan** for each individual
 - Escalation process strategic brokering and support from commissioners to troubleshoot barriers and overcome obstacles.
- The strategy has evolved over the last year and elements of the approach have been successfully piloted. It will move fully into implementation in 2020.

Time Credits

Area: Cornwall

- Time Credits are a community currency that values everyone's time equally – one hour of your time earns you one Time Credit;
- Since launching earlier this year, already 644 people have come forward through 50 earn partners across drugs, alcohol, homeless and DASV services to contribute over 700 hours of volunteering their time through a range of opportunities;
- There are now over 40 spend partners, including Cornwall College, cinemas, leisure centres, Hall for Cornwall and Flambards;
- The National Impact report on the success of Time Credits found that:
 - 80% report improved quality of life
 - 63% feel more able to contribute to the community and other people
 - 59% share their skills with others
 - 57% feel less isolated and lonely
 - 55% develop new friends and acquaintances
 - 54% feel more positive about their future

Transforming the workforce

Area: Cornwall

- Safer Cornwall is delivering a transformational workforce development programme to build capacity across the public and voluntary sectors to identify and respond to problems early to reduce risk of harm;
- In the last 18 months, 2,200 staff have been trained to screen and work effectively with people affected by problem drinking and drug use, mental health problems and early life trauma;
- This has covered screening tools, Mental Health First Aid, delivery of brief interventions, asset based approaches and motivational interviewing.

Creative Solutions Forum

Area: Exeter

- A Creative Solutions Forum is currently being piloted in Exeter by the **Devon** Safeguarding Adults Partnership;
- The Forum supports people with multiple and complex needs who could benefit from different, more solution-focused approaches;
- It brings multiple agencies together to discuss cases and adopts a personcentred whole-system approach to problem solving;
- The Forum will help identify gaps in current provisions and inform commissioning plans, service improvements and system learning.

Wellbeing Hubs

Area: Plymouth

- The vision is 'a network of integrated resources working together to enable and support people in the local community to live independently and make life choices that will improve their health and wellbeing'.
- Integrated resources will include the following services provided by community members, volunteers, staff across public, private, and community / voluntary sectors:
 - Housing, benefits, debt, health and social care advice and advocacy
 - Healthy Lifestyles, health and wellbeing promotion
 - Counselling, befriending and other mental health support
 - Long-term conditions selfmanagement education
 - Employment, education, training, volunteering, learning and digital inclusion
 - Social, arts, crafts and peer support
 - The first of these, the <u>Jan Cutting</u> <u>Healthy Living Centre</u>, was launched in March 2018 with further centres being added across the city until March 2020.

Problem drug use

Threat, risk	and harm as	sessment		
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues
High	Significant	Significant limitations	High	Opiate/Crack Users (PHE, 2016/17) 8,178 people aged 15-64 ▲ +15%
High	Moderate	Significant limitations	Moderate	Drug Related Deaths (ONS, 2016- 18) 251 ▲+13% (from 2015-17)
Significant	Moderate	Significant limitations	Moderate	Drugs Possession Offences – 3,146 ▲+11%
Headlines 2019	 High and increasing drug-related deaths – key factors include the availability of high purity heroin and cocaine and an ageing drug using population with complex health needs; Escalation of crack use – heightened risk profile including health related harms (particularly street injecting) and rise in Organised Crime Group activity, violence, exploitation, robbery and acquisitive crime; the South West is a Heroin and Crack Action Area; Increasing poly-drug use; illicit use of prescription drugs, stimulants and new psychoactive substances, particularly amongst young people; Greater recognition of the prevalence of underlying adversity and trauma, for both adults and children, and the need to embed trauma-informed approaches; the challenges of breaking the cycle of Adverse Childhood Experiences; Reduced funding for treatment services at a time when demand is rising, coupled with increasing complexity and vulnerability of users – longer waiting lists, reduced options for those receiving treatment and a lack of capacity for prevention work. 			
Risk to Public	 PHE prevalence estimates indicate 8,178 opiate/crack users in the Peninsula; increased prevalence across all Peninsula CSPs, but particularly pronounced in Torbay; drug-related deaths have increased locally and nationally and are at their highest since records began; Acute and chronic health impacts linked to problem drug use, frequent/sustained demands on hospitals and other health services, including blood borne viruses (BBV) and infections; increasingly part of a picture of wider complex needs, including poor mental health, criminal or anti-social behaviour, poverty and homelessness; potential for loss of life through overdose/suicide; rapidly building knowledge of the impacts of increasing crack use – health related harms (particularly street injecting), crime and violence/aggression, exploitation; homelessness increases risk of being targeted and exploited by OCGs; Lasting impacts on affected others, particularly children (one of the Adverse Childhood Experiences); Cornwall reports that the number of children on Child Protection Plans due to drug use is increasing; Community – increased concern in communities where drug use is visible, including outward signs such as drug related litter and anti-social behaviour; impacts on fear of crime and quality of life; Public Health risks of BBV and treatment resistant infections; escalation, robbery and acquisitive crime; media and public response to drug-related deaths of young people, although other deaths receive less attention. 			

Risk to Partnership	 National Drug Strategy, priority for NHS and Home Office; scrutiny of treatment system effectiveness by Public Health England; problem drug use is a key element of the Serious Violence Strategy; Costs to respond are high across the system (housing, social care, health, crime and ASB); costs of crime estimate £26k per heroin/crack user not in treatment; specialist services are costly but good social return on investment for every £1 spent.
Ability to mitigate risk	 The South West has received funding from the Home Office as a Heroin and Crack Action Area (HCAA) with Devon and Cornwall police leading on the approach; Established and effective local community treatment services (although funding is reducing in all areas); outreach services are in place to reach those hardest to engage; knowledge is building about trauma informed approaches – services are trained to ask about and respond to past life trauma and its impacts; take-home and supported housing Naloxone initiatives (reverses the effects of opioid overdose); needle exchange services reduce the risk of blood-borne viruses and infections through sharing equipment; Robust process for investigating and learning from drug-related deaths; There is a lack of funding for preventative programmes in schools; reduced capacity in community treatment services due to cuts in Public Health Grant, (increasing waiting lists and reducing options for those in treatment); securing housing and tenancy support is a massive challenge - particularly acute for criminal justice clients; Wider training needed in drug screening to support earlier intervention; drug needs in offenders are not being picked up and reflected in use of Drug Rehabilitation Requirements; drug use continues to be a significant barrier to accessing mental health services; emphasis on symptoms rather than cause – lack of co-ordinated approach for people with complex needs.
Knowledge gaps	 Drug use in young people, including poly-drug use and illicit use of prescription drugs; impacts of sustained drug use amongst older people; understanding hidden harms – impacts on children and families; use of the Dark Web to purchase drugs; Uses of Spice and Fentanyl were also cited as concerns previously but the risk is perceived to have moderated over the last year; nationally the number of deaths involving Fentanyl have stabilised further to a spate of deaths in 2017; New areas of risk around new substances – challenging to keep track and update partners via Drug Alert system.

Schools training on ACEs and substance use

Area: Plymouth

- Through partnership working between local schools, Plymouth City Council, Harbour and Hamoaze, Plymouth commissioned training events for school staff and key partners on **substance misuse and vulnerable young people**;
- Key learning was to embed awareness about Adverse Childhood Experiences and an understanding of the **impact of childhood trauma on substance use** so that schools can improve how they deal with drug and alcohol issues with pupils;
- Using the trauma lens helped participants to think about how to keep pupils safe and improve outcomes for the most vulnerable young people.

Promoting resilience through PSHE and RSE

Area: Devon

- PHSE and RSE programmes are delivered to educational staff in Devon. These have been funded by the Safer Devon Partnership and delivered by Y-Smart and other local agencies. The programmes aim to give educational staff the skills and confidence to promote resilience amongst young people. Topics covered included healthy relationships, drugs and alcohol, making safe choices and protecting young people from exploitation;
- An evaluation of the first phase of the programme has highlighted the **positive feedback** received by participants, with most reporting **increased knowledge and capability** to deliver effective PSHE/RSE programmes;
- Phase two of the programme is planned, which will include additional training sessions and consideration of the forthcoming statutory changes to the PSHE/RSE legislation in 2020, and the provision of training to residential settings for children in care.

YZUP Schools Programme and Mind and Body Programme

Area: Cornwall

YZUP is the commissioned young people's drug and alcohol service, run by Addaction.

- Since its start in 2014, the Schools Programme has delivered evidence based interventions to over 23,000 young people, providing modules from year 7 through to post-16 education, as well as staff training and workshops for youth centres and Supported Housing;
- The programme raised awareness about the young people's substance misuse pathway, supported earlier intervention through sharing specialist knowledge with staff and increased referrals into treatment, particularly self-referrals (a 60% increase since the scheme started);
- In 2016/17, funded by Health Education England, YZUP ran a pilot of Addaction's Mind and Body Programme, a school-based intervention for 14-17 year olds involved in self-harm behaviours. 350 students completed the programme with 91% reducing or stopping self-harming and schools reported better attainment and attendance;
- The programme won the Royal Society of Public Health Award and the National Positive Practice in Mental Health Award. Mind and Body is now commissioned as a community programme by Kernow CCG.

Problem drinking

Threat, risk and harm assessment					
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues	
High	Significant	Significant limitations	High	Dependent drinkers (PHE 2016/17) 19,429 adults ▲ +2%	
Significant	Significant	Significant limitations	High	Alcohol-related hospital admissions (PHE 2017/18) – 36,888 ▼-3%	
Moderate	High	Significant limitations	High	Alcohol-related crime – 14,172 ▲+16%	
Headlines 2019	 86% of people with an alcohol treatment need are not accessing specialist help; wider training is needed in alcohol screening and brief interventions to build capacity for early identification and response; Reduced funding for treatment services at a time when demand is rising, coupled with increasing complexity and vulnerability of users – longer waiting lists, reduced options for those receiving treatment and a lack of capacity for prevention work; Greater recognition of the prevalence of underlying adversity and trauma, for both adults and children, and the need to embed trauma-informed approaches; the challenges of breaking the cycle of Adverse Childhood Experiences; Alcohol related crime is increasing - not linked to the Night Time Economy (although there are increases in some locations) but to a rise in domestic abuse. Limited capacity of police to respond to simultaneous 				
Risk to Public	 PHE prevalence estimates indicate 19,429 dependent drinkers in the Peninsula; increased prevalence across all Peninsula CSPs, apart from Torbay; 2,664 people accessed specialist alcohol treatment services, equating to only 14% of people with an alcohol treatment need – the vast majority are not accessing specialist help; Alcohol-related hospital admissions have started to reduce and local rates are now in line with or lower than the England average; rates of admissions for under-18s remain higher than the England average, except in Cornwall, and relatively stable; Acute and chronic health impacts linked to problem drinking, frequent/sustained demands on hospitals and other health services; often part of a picture of wider complex needs, including poor mental health, homelessness, poverty, criminal and anti-social behaviour; just over a third of alcohol-related crime is violence with injury; alcohol can increase vulnerability or be used as a "pull factor" in exploitation; Community - visible disorder related to street drinking, alcohol-related anti-social behaviour and violence, affects residents' behaviour and satisfaction with their area as a place to live; physical and economic impacts on local businesses; there have been some localised issues around drink spiking, requiring a rapid prevention response; Alcohol-related crime has increased by 16%. There are some localised increases in crime linked to the Night Time Economy but the majority of 				
Risk to Partnership	Governmei alcohol bu	nt committed in this has not	o implement yet been pul	b tackle effectively; in 2018 the ing a new, national strategy on blished; and anti-social behaviour, health and	

	care, families, lost income due to unemployment, lost productivity, absenteeism and accidents, costs of illness, disability and early death.
	 Established and effective local community treatment services (although funding is reducing across all CSP areas); outreach services are in place to reach those hardest to engage; good quality training in identification and brief advice (IBA) for alcohol problems is available; knowledge building about trauma informed approaches, most established in Plymouth;
Ability to	 Well established and effective Evening and Night Time Economy responses but limited capacity of police to respond to simultaneous events and risk to officers high if not double crewed;
mitigate risk	 Capacity/capability for prevention and early intervention is limited – there is knowledge in specialist services but not in the wider system which means issues are not being picked up and intervention offered at an early enough stage; more training is needed in alcohol screening and brief interventions, gaps highlighted in social care, housing and criminal justice services;
	 People with complex and multiple needs place demands on resources across the system, but they are often viewed as too challenging to help – this requires a change of culture and better co-ordination of services.
Knowledge gaps	 Dependent drinkers not engaged with services (older drinkers, 'silent' drinkers, hidden harm); nature and extent of drinking in the home; young people's drinking behaviour, including pre-loading.

Hospital Outreach Team (HOT)

Area: Cornwall

- Review of the most frequent Emergency Department attendees found that the majority were dependent alcohol and/or drug users with highly complex needs;
- A rapid response team was set up within the hospital, delivered by commissioned Community Services alongside hospital staff;
- HOT uses an assertive engagement approach to work with the most frequent attenders to help meet their needs and reduce admissions, length of stay and ambulance call-outs;
- This is a Social Impact Bond project, the only one of its kind in the UK, bringing innovation and additional funding to Cornwall.

Purple Flag

Area: Torbay and Plymouth

- Purple flag is an accreditation that is awarded by the Association of Town Centre Management and represents a "gold standard";
- Torbay has successfully retained its Purple Flag status for the 8th year running, and is the only area in Devon and Cornwall to hold this prestigious award;
- By focusing on key areas, this ensures a safe vibrant attractive ENTE and demonstrates the excellent partnership working in this area within Torbay. The award highlights that Torquay is a safe place to have a night out;
- Plymouth has also been awarded Purple Flag status. The city was also nominated for two additional awards, and this was a first for an area that had only just been granted the flag, showing the strength of our partnership working.

Blue Light Project

Area: Cornwall and Devon

- Local delivery of Alcohol Concern's national initiative to develop alternative approaches and care pathways for people who are dependent drinkers and resistant to treatment;
- Using a "train the trainer" approach, it involves building skills across all community safety partners to motivate and engage the most vulnerable and resistant into housing and treatment;
- In Cornwall this is **supporting multi**agency assertive outreach in the hospital and the community.
- In Devon the Blue Light Trainers network has conducted work to promote training with partner agencies, and has created a website for professionals to promote the Blue Light programme and provider greater access to information and resources.

Health Impact Licensing Tool

Area: Cornwall

- Cornwall's Community Safety Intelligence Team (Amethyst) and the Cornwall and Isles of Scilly DAAT have achieved **national recognition** for an innovative small-area tool that they developed as part of the national HaLO pilot (PHE's Health as a Licensing Objective), supporting greater health involvement in licensing decisions;
- Making best use of readily available data (crime, ARID, alcohol treatment and hospital admissions) the HaLO tool flags the potential risk posed by alcohol for any given postcode area in Cornwall;
- The output presents 5 Key Indicators, supported by an array of additional health data;
- The data has been successfully used in a number of licensing hearings, to support a review of Cumulative Impact Zones and in local area profiles.

Vulnerability on the streets

Threat, risk and harm assessment					
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues	
High	Significant	Significant limitations	High	Rough sleepers (MHCLG, 2018) 149 people ▼-24% Reported concerns increasing ▲	
Significant	Moderate	Significant limitations	Moderate	Outreach calls for drug litter (Cornwall) 231 \blacktriangle +124%	
Significant	Moderate	Some limitations	Standard	Anti-Social Behaviour – Street Drinking 3,072 ▲ +4%	
Headlines 2019	 Communities are increasingly reporting concerns about individuals or groups living on the streets, and others associated with them. The presenting issues may be highly visible anti-social behaviour, but the people concerned are themselves vulnerable and needing support for a complex range of issues; The rough sleeper count provides a ratified snapshot of homelessness but it is recognised that it underestimates the extent of the problem, not taking into account people who are sofa surfing, in hostels etc. The impacts of homelessness are severe, increasing the likelihood of serious illness and premature death, and homeless people are at greater risk of being targeted for exploitation and abuse. 				

	 Rough sleepers experience the most acute needs and worst health and wellbeing outcomes; exposure to harsh climates, poor sanitation, nutrition and care all contribute to ill health and premature death; individuals have complex and inter-related needs requiring specialist care and support - drug and alcohol problems, mental health issues, past and current abuse, violence and exploitation; severe financial hardship, with individuals lacking the means to improve their situation and access work and benefits; vulnerability to exploitation and abuse; victims of labour exploitation are often homeless or living in hostels when recruited and are easy to exploit;
Risk to Public	• Residents and local businesses are increasingly reporting concerns about individuals or groups living on the streets, and others associated with them but the focus is on the most visible elements; concerns about anti-social behaviour , such as street drinking, drug use and aggressive begging, vandalism, site damage (waste, fires, urination etc.); impacts negatively on residents' fear of crime and satisfaction with local area, changes behaviours (area avoidance etc.);
	 Reports of discarded needles and syringes have increased; this has been a particular priority in Cornwall to address; Devon has seen closures of public toilets due to drug related issues; physical risk with needle stick injuries and blood borne viruses;
	 New and existing problems in most of our major towns; proactive efforts to raise awareness about risk and vulnerability and improve pathways into support are identifying more people that need help.
Disk to	 Recognised as an issue across the region and nationally; public interest fluctuates in response to local visibility and media coverage; strong community voices in Cornwall in the form of local groups and Members (particularly in St Austell, Penzance and Truro);
Risk to Partnership	 Costs to respond are high across the system (police, outreach services, drugs and alcohol, housing, social care, mental and physical health services); an estimated £19,000 per year is spent on each individual¹⁸ facing a combination of addiction, homelessness, offending and poor mental health.
	 Assertive outreach work in Torbay and Cornwall has proved that it is possible to resolve issues; Torbay's Homeless Service has been revised and given greater resource, although the impact still needs to be evaluated;
Ability to mitigate risk	 Capacity is there to respond but the culture of working practices needs to change, better co-ordination needed between mental health, housing and community treatment services; Cornwall and Torbay report a lack of housing options for these clients; no dedicated resources for missing adults (as there are with children), much harder to engage partners in problem-solving around adults (not a statutory requirement);
	 Capability – education is required to improve capability of response, volunteer services often seen as exacerbating the problem by providing support and "attracting" problems; conflict between removal of problem and safeguarding affected individuals, public perception and lobbying by community representatives often focuses on the former; dispersal makes it harder to engage/retain people.
Knowledge gaps	 Intelligence picture is patchy – groups are transient and dynamic – challenging and changing mix of complex needs; we need to understand more about the risk factors linked to domestic abuse and sexual violence, exploitation of vulnerable people, particularly women and young people.

¹⁸ Bramley and Fitzpatrick 2015, as cited by the Institute for Public Policy Research

"Change: Make it Count"

Area: Torbay

- Safer Communities Torbay and Torbay's ASB team worked in partnership with the local business community and the Torbay End Street Homelessness campaign to deliver Change: Make it Count;
- An alternative giving campaign, it encourages the public not to give on the street but to think how they can best support those who may be street homeless;
- All donations are used to help individuals buy **household essentials** when they are supported to move into long term accommodation.

Multi-agency outreach pilot

Area: Cornwall

- A flexible and targeted outreach intervention was piloted to help 16 high risk people rough sleeping in a car park and placing high demands on partners, including 56 police calls and 38 A&E presentations;
- Highly complex needs, including physical and mental health issues, sexual abuse, drug and alcohol problems, prolific criminal and antisocial behaviour and poor life skills;
- Multiple agencies committed to target resources, share information and resolve barriers. Collectively they agreed a shared single plan for each person with clear outcomes;
- Short term objectives were met rehousing and safeguarding individuals, reducing police logs and hospital admissions. Areas to improve include housing options for high risk individuals and assertive engagement for mental health services;
- The pilot provided learning for a **Cornwall-wide approach**.

Exeter Street Homelessness Approach

Area: Devon

- Exeter City Council are working alongside statutory and voluntary services to change the way of working with rough sleepers and people with complex lives;
- The Integrated Team has a holistic approach to meeting people's needs, with early intervention being the main focus;
- Strong engagement with local businesses has resulted in widespread and sustained support;
- They have identified the gaps in services and the next year will be spent working with partners to bring in new accommodation models to meet local needs.

Alliance Management Team

Area: Plymouth

- The Alliance Management Team is enabling partners to work together more effectively to **improve access to housing support**. Key improvements include:
- Positive links with the MARS team
 homelessness outreach/resettlement;
- Weekly drop-in sessions at Shekinah by a Community Connections Officer giving housing advice;
- Access 2 Accommodation (A2A), multi-agency accommodation solutions group, expanding as organisations engage. This has reduced bureaucracy and shown a positive reduction in accommodation refusals (which would have meant B&B placements);
- Harbour worker co-located at The Zone for young people transitioning to adult services, and progress towards a PATH worker for private rented and tenancy support;
- New Start complex service improved offer for couples and potential for individuals with dogs.

Breaking the cycle of offending

Adults and young people that commit crime are **amongst the most socially excluded in society** with complex and deep-rooted health and social problems.

There is recognition of the **huge overlap** between those who commit crime, are homeless, have problems with alcohol and/or other drugs, mental ill health and domestic abuse.

Welfare reform is exacerbating the situation and is having an overwhelmingly negative effect, with knock-on **impacts to offending rates** and demand for services, including mental health and housing.

Effective approaches to reducing reoffending focus on **tackling the underlying causes of crime** in a holistic and co-ordinated way that provides 'pathways out of offending' and helps to break the intergenerational cycle of offending and prevent family breakdown.

This rationale underpins the function of Integrated Offender Management (IOM, called **Turnaround** locally) which operates across the Peninsula as a multi-agency 'one stop shop' for managing frequent repeat offenders.

Previously focused on **prolific acquisitive offenders**, particularly drug users, Turnaround is undergoing some changes to support a similar approach with **domestic abuse offenders**, and have delivered a successful pilot in Exeter. Reducing reoffending is **fundamental to reducing crime** and has been a statutory responsibility of community safety partnerships since April 2010.

Trends in reoffending

Trends in reoffending show that offender cohorts continue to shrink, and **reoffending rates have reduced**, but **more reoffences** are committed by those that do reoffend.

This is largely reflective of the male offender population, who make up 81% of the cohort.

For female offenders, reoffending rates have increased in recent years, having been fairly static previously. The number of reoffences has also increased – the number of reoffences was above that of males for the first time in the most recent period.

Reoffending rates for **young** offenders have been fairly stable over the longer term but have seen a recent increase, particularly for females.

 Peninsula reoffending rates are lower than regional and national averages, for all cohorts.

Since October 2015, reoffending data have been collected using different data sources to previous quarters so observations over a longer time series should be seen as indicative only. Only the last two years are presented here for direct comparison.

	Peninsula		National
Reoffending	Oct-15 to Sep-16	Oct-16 to Sep - 17	Oct-16 to Sep- 17
Adults			
Proportion who reoffend (%)	25.9	25.4	28.7
Average reoffences per offender	3.6	3.8	4.1
Females			
Proportion who reoffend (%)	20.6	20.7	23.5
Average reoffences per offender	3.3	4.1	4.3
Males			
Proportion who reoffend (%)	27.0	26.5	29.8
Average reoffences per offender	3.6	3.8	4.0
Young people			
Proportion who reoffend (%)	30.3	34.5	39.2
Average reoffences per offender	3.7	4.0	4.0

The most recent cohort offended in the period 1 October 2016 to 30 September 2017.

In this period in Devon and Cornwall **9760 adult and young offenders** were cautioned, received a noncustodial conviction at court or released from custody, **2,541 of these offenders (26%)** committed a reoffence within a year.

- Reoffending rates for both adults and young people are below the south west and national rates;
- Reoffending rates for both adults and young people have been gradually falling over the last 5 years but the average number of reoffences has increased slightly;

Young people are more likely to reoffend than adults but they make up only a **tiny minority** (7%/637) of the reoffender cohort;

 The proportion of female reoffenders that reoffend has remained fairly stable but the average number of reoffences has increased by nearly one per female reoffender. This is in contrast to reoffending rates for male reoffenders which have dropped slightly with the number of reoffences remaining fairly stable.

Female reoffenders

The **number of female offenders has decreased** in all areas of the Peninsula. The proportion of those **female offenders who reoffend has increased** by 2.6% in Cornwall and by 2.3% in Torbay. There was a slight decrease of 0.8 % in Devon and a more substantial decrease of 2.8% in Plymouth.

The average **number of reoffences** per female reoffender **has increased** in all parts of the Peninsula. Cornwall saw the highest increase of reoffences (1.3) and the smallest increase was 0.3% in Torbay.

312 women offenders have engaged with the Pathfinder

scheme locally. There is no discernible pattern to female offence types but a mix of drunk and disorderly, possession of drugs, common assault, and theft and fraud offences.

The scheme has worked with a significant group of child neglect cases (drunk in charge of a child).

The women's needs show high levels of **trauma and victimisation**. A dip sample in Plymouth showed that **over 80%** of the female cohort had

experienced **domestic abuse**, sexual violence and childhood trauma.

Male reoffenders

Whilst the number of male offenders has also decreased in each part of the Peninsula, there are no areas where there has been a significant increase in the proportion of males who re-offend

Devon and Cornwall Police: Pathfinder

Operational since July 2017, the Pathfinder Scheme is an **early intervention scheme** offered to offenders – historically when they had admitted quilt and were to receive a Police Adult simple

with two areas decreasing (Plymouth and Torbay) or staving largely stable (Cornwall and Devon).

The average number of reoffences they commit has seen a small increase across the Peninsula, but to a lesser extent than for females.



caution. The scheme is currently in the process of **expanding to cover Deferred** Charge (go live 25 November 2019).

Deferred Caution and Deferred Charge involve a four month contract that is agreed and has to be complied with. Failure to comply results in the original disposal being recorded (caution or postal requisitioned to appear in Court).

- There are **14 keyworkers** based across Devon and Cornwall, 2 support officers processing deferred cautions and 5 CIP volunteers; Pathfinder has had over **13,000** referrals;
- Offenders are provided with a **holistic client-centred needs assessment** that informs the rehabilitative conditions of the contract, and is also used to measure the impact of the scheme at the end of the contract;
- In response to The Corston Report recommendations Pathfinder offers a female worker to all female offenders;
- A Randomised Control Trial on deferred caution was undertaken in 2018 and the results will be published in 2020 as part of the overall evaluation by **Cambridge University**. This will focus on reoffending and harm;
- Participants have undertaken 1000s of hours of voluntary activities as part of their contracts for the good of their community and as a key intervention for improving their wellbeing;
- **Safeguarding has been improved** dramatically at the front end of policing, as many of the offenders engaged with the scheme are vulnerable with complex needs but the risks have not been previously identified or disclosed;
- Pathfinder has worked with a number of female offenders that are in current high risk domestic abuse situations and supported them to escape;
- **Restorative Justice is proactively offered** to both parties and Pathfinder is • the largest single stream of RJ referrals from the Police;
- Pathfinder gathers a substantial amount of intelligence from low level offenders on individuals involved in more serious crime;
- Regular case audits are undertaken to check proportionality, case studies and a link to a feedback survey is sent to everyone completing the scheme. Almost **all** of the survey respondents felt that the scheme had helped reduce their risk of reoffending and helped them with other issues that they have faced.

Resilient Women's project

Area: Exeter

- Ministry of Justice (MoJ)-funded project developed by CoLab Exeter and MoJ partners to promote a resilience-based approach to working with women at risk of entering, or within, the criminal justice system;
- It provides a range of interventions including outreach support, access to services, learning and employment opportunities, positive activities and support for mothers including those who are apart from their children;
- This has included hosting sessions for women covering topics such as selfesteem and confidence building, arts and crafts, benefits, housing, relationships, domestic abuse and sexual violence, health and employment opportunities.

Prison Resettlement Project

Area: Devon and Torbay

- Safer Communities Torbay and Safer Devon CSPs jointly commission the Prison Resettlement Project. The project works with prisoners coming up to release to support them to find suitable accommodation;
- Cases that are referred to the project have a history of complex needs and vulnerabilities, and often face multiple barriers;
- In Torbay, the project has been **successful in supporting more than 50%** of the referred individuals into suitable housing.

Exploitation

Drug trafficking, including County Lines

Dangerous drug networks relate to supply chains controlled by organised crime groups which are used to traffic and deal illegal drugs.

Serious violence is associated with dangerous drug networks, as is the exploitation of vulnerable people who may be forced to participate in drug trafficking and dealing. People, especially women and girls, may be sexually exploited by members of the organised crime group.

County Lines is a form of dangerous drug network which has gained increasing national and local prominence. It has a **specific definition**, referring to the export of illegal drugs, mainly from major metropolitan areas, into import locations through the use of mobile phones or other 'deal lines.'

Threat, risk	reat, risk and harm assessment					
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues		
High	High	Significant limitations	High	17 active County Lines (Aug-19); 516 partner intelligence submissions (since Oct-18) ▲		
Significant	Moderate	Significant limitations	Moderate	Drug Trafficking Offences class A – 1027 crimes ▲+16%		
Minor	Minor	Significant limitations	Standard	Drug Trafficking Offences Other Drugs – 1027 crimes ▲+16%		
Headlines 2019	Minor Standard Standard					
Risk to Public	 County Lines/Dangerous Drug Networks target the most vulnerable and present a significant risk of harm; associated with violence including physical and sexual violence, use of weapons, homicide, suicide, abduction, sexual and other exploitation of children, problem drug and alcohol use; Control and coercion of vulnerable targets – cuckooing, threats of violence/blackmail and exploitation of victims and family members; severe 					

	financial impact – loss of home/income for individuals targeted by cuckooing, particularly if they themselves are prosecuted; homelessness increases vulnerability, rendering people visible to drugs gangs at a time when they are in significant need;
	 Heightened concern in communities where activity is more visible (such as 'crack houses'); impacts on fear of crime and quality of life of local residents; increased risk to vulnerable young people and adults who may be recruited/blackmailed into engaging in criminal activity; lack of awareness more generally in the community about vulnerability and exploitation and links with cuckooing and drug/people trafficking;
	 Increase in OCG activity, particularly gangs from North West England; increases in gang violence and conflicts between home and outside OCGs.
	 National focus on organised crime groups, increased violent crime associated with gangs drives up level of fear amongst public; priority for Home Office and local partnerships;
Risk to Partnership	• Significant expectations placed on local authorities and partner agencies to deliver an effective response – underlined by the government's <u>Serious</u> <u>Violence Strategy</u> , which stresses the strong link between County Lines, drugs, and violence, and the accompanying <u>duty</u> for community safety partnerships to make serious violence an explicit priority ;
	 Economic cost to deal with threat is very high and felt across many services, particularly considering geographical dimensions of response; complex and dynamic cases involving networks of people; multi- agency response required to safeguard individuals and put disruption activity in place – rapid interventions to reduce immediate risk and harm and ongoing preventative work.
	• Proactive police teams have an excellent understanding of the different networks, locations and people involved in drugs markets in their area;
Ability to	 Multi-agency arrangements established to manage and respond to child sexual exploitation cases now recognise and respond to wider exploitation in all areas but Torbay; the police Partner Agency Information Sharing (PAIS) portal went live in October 2018 – 516 submissions received to date (July 2019) and increasing; partners report that information sharing has improved;
mitigate risk	 Capability - lack of consistency in definitions and methods to identify gang related risks, vulnerability and exploitation; workforce development is needed to understand and reduce risk (but lacking a consistent agreed approach or resources to deliver);
	 Capacity – there are resources available and examples of good practice and innovative approaches across the Peninsula; this would benefit from better co-ordination, consistency of approach and more sustainable funding solutions.
Knowledge gaps	 Police intelligence highlights specific knowledge gaps around sexual exploitation, exploitation of young people and females and the use of transport particularly the rail network. Partners also linked some suicides to drug trafficking, youth gang culture and how this maps out across Peninsula and the vulnerability to exploitation of other at risk groups, such as those in supported housing or with learning disabilities.

Multi-Agency County Lines Partnership	Ending Gang Violence and Exploitation Project		
Area: Devon and Torbay	Area: Plymouth		
 The Devon and Torbay County Lines Partnership has continued to support strategic cross-partner approaches to addressing county lines-related activities. Recent work includes improving the sharing of police and partner 	 The Gang Violence and Exploitation delivery group is chaired by the Chief Executive of the drug and alcohol service, Harbour, who has previous experience of tackling violence and gangs; The group supports and provides 		
 intelligence relating to county lines and dangerous drug networks. This has included cascading intelligence to frontline staff to assist with safeguarding and disruptive work. Increasing partner engagement in 	 advice to young people experiencing problems with drugs and alcohol. This includes those using/at risk of using drugs and alcohol, and the use of family members and peers; The approach is Adverse Childhood 		
police intensification activity	Experiences and Trauma Informed , providing awareness raising activities and holistic support to prevent and reduce drug use and drug related harm, including drug related violence and exploitation.		
County Lines Diversion Project	Online Preventing Exploitation		
Area: Devon	Toolkit		

The evolvement of 'gang culture' in the Peninsula

In early 2017, a number of individuals in a South Devon town were regularly coming to police attention, and there were **growing problems with large groups of young people causing anti-social behaviour** in public places. The group were confrontational when police intervened to disperse them. It became apparent that the degree of **organisation amongst group members was greater** than we had previously seen locally.

The young people at the core of the group were **complex and vulnerable**, virtually all of them having experienced **trauma in their early lives**.

This included witnessing domestic abuse, substance abuse and mental health problems; some of them have also experienced neglect and/or abuse. Care placements and other social care involvement, missing episodes and school exclusions were commonplace.

A range of **intensive interventions** were put in place, and collectively these are seen to have had a **positive impact**.

- Regular multi-agency risk
 management meetings
- Parent support group
- Friday night project
- Youth Intervention Team
- St Giles Trust Junior Smart interventions to 2,200 young people
- Youth Offending Team Interventions
- Use of Gang Injunctions
- Safeguarding visits by Police

This led to the development of the **Turning Corners** project.

Similar issues, on varying scales, have emerged in other parts of the Peninsula and it is recognised that these situations are constantly evolving with new risks and harms to consider. These risks are not well evidenced through police data due to a culture of non-disclosure, even for more serious incidents.

The demand on police and other agencies in these cases is significant, due to the **escalating nature of the criminality**, the **numbers of people** involved, the **impact on the local community** and the **safeguarding considerations** for those involved and others as a consequence of the behaviour of the group.

There are concerns about **how linked our young people are** from one area to another and risks may escalate quickly unless the **skills and capacity** are there to recognise the signs and mobilise a prompt response.

A **strategic profile** was commissioned by the Police, focusing on South Devon, as a vehicle to **share practice and learning** across the Peninsula; the **learning and recommendations** are summarised here.

The profile should be used to **support effective early intervention** and prevent problems becoming entrenched elsewhere.

Behaviours	Learning and recommendations
 Violence, including cases of serious assault and life-changing injuries Involvement in use and supply of drugs Evidence of structures/organisation Links to other localities Demeaning acts Significant levels of fear Carrying of weapons, mostly knives 	 Early intervention is critical to try to prevent a 'group' becoming a 'gang' Professionals involved should have a good understanding of ACEs and their impact on young people; approaches should be trauma-informed Good information sharing, relationships and protocols around care placements, particularly for new children placed in the local area
 Emerging risks Changing role of females within groups, risks of domestic abuse and sexual violence Increased drug activity, including County Lines, and drug debts being carried by children Links to adults known to the police 	 Set up a multi-agency group as soon as possible once an issue has been identified, to co-ordinate a response; There must be attendance from all significant agencies; they must meet frequently and hold each other to account; Assign a lead worker per child; apply flexibility to policies and procedures to get the best working relationship with the
 Disengagement from support Wider groups with unknown children Links to other geographic areas Lack of reporting of violence – culture of fear and non-disclosure First incident involving a firearm Permanent exclusions creating links across areas with new provisions 	 Agree an internal and external communications strategy early on Utilise police mapping and intelligence tools and resources; proactively gather and share intelligence Consider protective factors across all the different social environments encountered

The profile also researched the types of interventions that work best to build resilience, and prevent gang involvement and youth violence. The strongest evidence was for skills-based and family programmes.

- Skills-based programmes that focus on problem-solving, self-control, anger management, conflict resolution, and socio-emotional skills; healthy life choices and preventing abuse in relationships
- **Family-based programmes**, including home visiting, parenting interventions and family therapy

Turning Corners Project

Area: Devon and Torbay

- The project is funded until 2020 by the Home Office Early Intervention Youth Fund and is working to identify and support young people drawn into crime, violence and gang-type groups and behaviour;
- A bid to the Youth Endowment Fund in 2019 to expand the approach was not successful but we were encouraged to bid again when the next round of funding is announced;
- It focuses on early intervention, with work including street-outreach and intervention work; one-to-one support delivered by the Youth Intervention Team; transition work with primary school students who have high childhood adversity indicators; speech and language interventions; and the establishment of parent support groups;
- Partners include CSPs, Police and the OPCC, local authorities, the YIT and YOT, social services, education, Y-Smart, health services and a specialist speech and language therapist;
- Turning Corners has received a constant flow of referrals since becoming established.

Parent Support Groups

Area: Devon and Torbay

- Arising from the Turning Corners Project, parent support groups have proved an invaluable way of engaging parents as partners in responses to youth vulnerability;
- The groups have enabled parents to meet and discuss the risks facing their children and develop local responses to safeguarding in partnership with services. The groups have been effective and have been expanded to other parts of Devon and Torbay.

Youth Exploitation Tracking Assessment (YETA)

Area: Devon and Torbay

The YETA tool was developed to **assess the vulnerability** of young people, enable **coordinated**, **targeted responses** to safeguarding, **and track progress** towards reducing risk and harm.

The YETA has provided **extra insight into the cohort** and identified key vulnerability factors, for example:

- High vulnerability indicators 83% were known to social care; 83% had experienced ACEs; 77% had less than 90% school attendance; 75% were linked to a crime. Other vulnerabilities included mental health conditions, times of feeling suicidal/self- harm, and learning disability;
- Possession of weapons was also linked to a notable number of young people referred to the programme.

Extra-familial youth risk and vulnerability

Arising from growing cross-partnership concerns about **the vulnerability of young people to harm occurring outside the family environment**, Safer Devon's strategic assessment provides a specific focus on threats to young people up to age of 25 years from factors outside of the family home – taking into account school exclusion, victimisation and perpetration of crime, drug and alcohol use, exploitation, peer group and gang association.

This collective assessment of threat, risk and harm resulted in a **high risk score**, with **very limited ability** by partners to mitigate the risk. A number of cross-partnership approaches have been put in place to supplement existing services provided by specialist child and youth services, many of which are under development and will evolve as intelligence and understanding grow. The key strategic approach is the **Adolescent Safety Framework** developed by Devon Children's Social Care.

Threats such as exploitation through County Lines/drug gangs, sexual exploitation and abuse and peer-onpeer violence are explored separately in this assessment.

The Adolescent Safety Framework (ASF)

Area: Devon

The Adolescent Safety Framework has been developed and adapted from **bestpractice evidence and evaluated models**, in particular the Contextual Safeguarding Network Approach, Achieving Change Together (ACT Rochdale) model and Research In Practice Core Principles. The framework includes:

- An underpinning theoretical approach to multi-agency working with extrafamilial risk
- A revised and unified model of Multi-Agency Coordination
- A clear pathway for the assessment of need and provision of help;
- A **comprehensive toolkit for professionals** undertaking referrals, screening, assessment processes, planning and review, support, help and intervention;
- A comprehensive suite of Guidance and Terms Of Reference;
- A multi-agency workforce training plan;
- A monitoring and evaluation plan.

Duplication across forums has been eradicated within the new framework.

Key changes in practice include:

- A **single and holistic approach to assessment** including vulnerabilities, behaviours, environment, relevant concerns as well as protective factors;
- The **revision of existing assessment and planning** approaches to ensure contextual factors are considered within all aspects of safeguarding practice;
- A **model of working at the individual level** to ensure a strong focus on contextual/ extra-familial risks, maximise the participation of the young person and focus on the primacy of collaboration with them to cultivate safety;
- Peer Group, Neighbourhood (Location) and School Context conferences
- A single coordination hub through the MASH

Modern Slavery and Human Trafficking

Threat risk	and harm as	sessment			
Risk to	Risk to	Ability to	Overall		
public	partnership	mitigate risk	risk	Key issues	
High	High	Significant limitations	High	Referrals to National Referral Mechanism – 84 ▲ +65%	
				Modern Slavery crimes – 38 crimes ▲+31%	
Headlines 2019	where it is Intelligen and a mor Nationally linked to across the increasingl	occurring in E ce submission e proactive a and locally, hu County Lines country to tra y using Mode	Devon and Co ons from part approach is uman traffick activity, wi insport drugs ern Slavery	n crime and the true extent of rnwall is still not known. tners to the police remain infrequent	
Risk to Public	 malnourish victim is en themselves Little imp nature, bu nationals a attitudes 	ament, verbal hslaved - com s, loss of perso act felt in the ut also due to and people who towards these	abuse, coerci plete depriv onal items; e wider com its associatio o have entere groups influ	gical impacts on victims - neglect, ion, threats of and actual violence; vation of financial means to support munity , partly due to its hidden n with the exploitation of foreign ed the UK illegally and societal encing the level of public interest;	
	 Numbers of cases uncovered remain low but are rapidly increasing, due to increased awareness about what to look for and proactive activity by police and partners. 				
Risk to Partnership	 Modern Slavery has a national profile driven by a national strategy, legislation (Modern Slavery Act) and specialist resources in central government; Devon and Cornwall Police are national lead on Modern Slavery; 				
	 Potentially huge costs to train workforce in modern slavery awareness including the resource to undertake the training (limited by being managed through existing resources); targeted operations can be complex and costly; significant cost implications to feed and house victims to enable police to carry out Achieving Best Evidence (ABE) interviews. 				
	this is not Peninsula; Partnershij areas in de	translating i Cornwall has o and robust p elivering a loca	nto local ac an establishe processes whi al response; t	national lead for Modern Slavery but tion consistently across the ed Serious and Organised Crime ch are recognised as ahead of other the police are training twenty people rn Slavery operations;	
Ability to mitigate risk	live in Octo infrequent	• The police Partner Agency Information Sharing (PAIS) portal went live in October 2018 but intelligence regarding Modern Slavery is submitted infrequently. Intelligence received has been linked to labour exploitation and concerns for vulnerable persons at risk of exploitation;			
	• Capability - basic lack of understanding of risk in the workforce and the general public; victims (e.g. young people coerced into trafficking drugs, or foreign males coerced into running cannabis farms etc.) are viewed as offenders and not given the support that they need to prevent re-victimisation; modern slavery awareness is not a core element of				

		workforce development and this is required to extend across the public sector, VCSE, education and the public;
Knowledge gaps	•	Capacity – partners should regularly visit sites that are considered to be a Modern Slavery risk to gather intelligence; more migrant worker PCSOs would be valuable for gathering more intelligence from communities that are vulnerable to exploitation.
	•	Partners report that the intelligence picture is improving but currently only "scratching the surface"; intelligence gathering remains a priority . Good level of confidence in the evidence base provided by the OCLP in terms of providing key locations and areas to focus on, and sharing of local intelligence (for example, through MIGWAG across Devon and Cornwall); with the introduction of Operation Gala we are getting better at investigating pop-up brothels;
	•	Partners are actively seeking to share information and raise awareness but the evidence is not always apparent - Torbay are unable to evidence this being a priority for them locally;
	•	In Cornwall there has been a focus on labour exploitation but the knowledge of the breadth of modern slavery types is expanding , including sex trafficking and exploitation, domestic servitude and links to domestic abuse, coercion and control, links to OCGs.

Devon and Torbay Anti-Slavery Partnership

Area: Devon and Torbay

- The Devon and Torbay Anti-Slavery Partnership continues to lead strategic work across the two local authority areas. Recent work includes:
- Targeted work conducted with housing providers and other stakeholders to raise awareness of the links between **homelessness** and modern slavery, supported by a grant from the Modern Slavery Police Transformation Fund.
- Convening a task and finish group to strengthen local responses to modern slavery incidents through developing cross-partner processes, protocols and resource arrangements.
- Increasing opportunities to gather intelligence around modern slavery and identify potential victims.

Modern Slavery Training Package

Area: Devon, Torbay and Somerset

- Trading Standards have developed a modern slavery training package to increase awareness of modern slavery amongst frontline staff and businesses signed up to their Buy With Confidence Scheme, funded through the Home Office Police Transformation Fund;
- The package includes a training day, a <u>training video</u> and training guides.

Operation Costume

Area: Cornwall

- In February 2018 intelligence was received about West Cornwall farm where
 potentially 200 migrant workers had their passports seized and were at risk of
 labour exploitation and debt bondage;
- The multi-agency response to this information became the **largest UK Modern Slavery operation** to date;
- Logistical issues regarding accommodation, finances, language and health were identified and addressed with translators, catering and fresh clothing provided, with **14 individuals referred** through the National Referral Mechanism;
- This case is a good example of **partners working collaboratively** to achieve good outcomes, but it has also provided some important **learning to inform future large scale operations**.

Radicalisation and prevention of extremism

Threat, risk and harm assessment				
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues
High	High	Significant limitations	High	Terrorist incident Occurs very rarely, single events
Moderate	Significant	Some limitations	Moderate	Referrals to Channel (Prevention) Weekly, increasing ▲
Headlines 2019	 Under Operational Dovetail, the Home Office will transfer responsibilities for some elements of Channel from the police to local government, in a graduated regional roll out over the coming months. There are concerns about how the programme will work in practice, how it will be resourced and about levels of consultation and communication with local authorities.; long term funding arrangements for the programme are uncertain; new skills will be required for staff to undertake this work and an adequate IT system needs to be in place order to respond to requirements; The current national and international political context holds the potential to heighten support for extremist ideologies and groups, and to increase tensions between and within communities – including Brexit, movement of refugees from Middle Eastern countries and the involvement of British people in terrorist groups abroad; Specific threat around lone actors and attacks requiring limited planning and sophistication, radicalised by online extremist materials. 			
Risk to Public	 Where Prevent referrals are made, there may be significant psychological impacts on the individual, family and friends but wider community is usually unaware; Terrorist incidents are very rare but there is potential for mass casualties and loss of life and significant financial losses for local businesses affected; if it happened, it would be a major incident requiring co-ordinated multi-agency response in immediate, medium and long term (blue light response, post-incident support, prevention); large and long lasting impacts on community; Public expectation of visible governmental counter terrorism response 			

	to protect residents and safeguard against future incidents;
	• The Peninsula is assessed as low risk area but, should an incident occur, it would attract both national attention and scrutiny. Significant reputational damage if CSPs failed to identify risk and respond to prevent it. Plymouth has higher risk military sites (Devonport and Millbay Docks);
	 Cornwall report that the number of Prevent referrals is rising as awareness increases and the number of cases referred to Channel for intervention has seen a proportionate uplift as a result.
	 Terrorism and Violent Extremism has an international profile, driven by a national strategy, legislation and specialist resources in central government. Statutory duty to prevent terrorism, high level of inherent risk requires ongoing vigilance, especially around high risk sites;
	 Massive reputational risk if our local delivery of Prevent fails and a terrorist incident occurs (worst case scenario);
Risk to	• Costs to respond - significant public sector investment in Prevent
Partnership	and it is now business as usual across all agencies; substantial ongoing costs to public and community and voluntary sector – for all agencies in terms of training and planning for public events and for specific agencies providing support and interventions for individuals at risk; a terrorist incident would require an intensive multi-agency operation to investigate, clean up, support victims and families etc.
	• Mainstreamed resources in place across all agencies; comprehensive
	evidence base in Counter Terrorism Local Profile; vulnerabilities of minority
	groups are well understood by practitioners; Channel process is universally viewed as effective; good joint working arrangements with
	Emergency Management; the police are using more nationally
	accredited intervention providers to respond to increased complexity of cases;
Ability to mitigate risk	 A range of training packages are being offered in order to raise awareness including WRAP (Peninsula-wide) and 'Autism and Vulnerability' training in Devon. The training highlights how these vulnerabilities can increase the risks of exploitation, radicalisation and grooming;
	 Lack of dedicated capacity in 'low risk' areas limits the amount partners are able to do at a local level; demand on the police to provide mutual aid to other areas that have experienced a major terrorist incident would limit our ability to respond to anything else locally; high thresholds for some services (safeguarding, mental health services) mean that Prevent risks are frequently held by the identifying agency;
	 Capability – successful implementation of Operational Dovetail will require training and an adequate IT system in order to respond to requirements; better technology is needed to enable more proactivity in seeking out potential threats, along with more training of staff; cases are getting more complex to investigate and taking longer to resolve.
Knowledge gaps	• On-line gaming environment is dynamic and constantly evolving; threats from Cornish nationalist groups ; access to and use of smart technology in increasingly younger children; threat from extreme right wing groups; lone actors; using vehicles as weapons; cases of unclear, mixed or unstable ideology .

Operation Dovetail

The Government is keen to emphasise, and build on, Channel's core aim of safeguarding individuals at risk of being radicalised. To this end, the Home Office is proposing making changes to Channel – aiming to de-securitise the process **by transferring responsibilities for some elements of Channel from the police to local government**, sitting more closely with local authorities' and their wider safeguarding responsibilities.

This approach, known as **Operation Dovetail**, was piloted in nine areas in 2017 (Brighton, Croydon, Haringey, Kent, Kirklees, Lancashire, Luton, Oldham and Swansea), using a range of different models. Following an evaluation of the pilots last year, the Home Office is now proposing to introduce Dovetail across England and Wales, with a graduated regional roll out over the coming months.

The best indication from the Home Office at this time is that **1 or 2 posts will be funded for the South West**, and will probably be based in Bristol with existing Channel Chairs from Cornwall, Plymouth Torbay and Devon linking closely with these new posts.

The Home Office has been in contact with a number of local authorities (All those in the South West included) regarding the proposals for Dovetail to explore the implications and gather views, including three areas involved in the pilots.

While there have been very few objections in principle to the roll out or to the concept of aligning Channel with other safeguarding responsibilities, there are a number of **concerns about how the programme will work in practice**, how it will be **resourced** and about levels of **consultation and communication** with local authorities.

It should be noted that areas contacted who were involved with the pilots were largely positive about their experiences.

The regional Channel Chairs are in discussion with the Home Office around how these concerns might be addressed.

Workshop to Raise Awareness about Prevent (WRAP) Training

Area: Cornwall, Devon and Torbay

Early support and intervention through Prevent Referrals and the Channel Process is key preventing radicalisation and terrorism.

- Across Cornwall referral rates have increased as a consequence of greater awareness through WRAP and Counter Terrorism and Security Act 2015 training, Conferences and Lessons Learned workshops. The programme has trained around 30,000 people over the last 6 years with a focus on education from early years upwards;
- Torbay offer WRAP training to anyone in the children and young people's workforce, in addition to the specific Prevent module, and including Prevent in safeguarding children courses. Torbay also offer an on-line learning module for Prevent and Channel;
- The Devon and Torbay Prevent Partnership have commissioned a Workforce Development Group to review the current training offer to ensure it best meets local needs.

Radicalisation awareness film

Area: Devon

- Current intelligence indicates that the internet and social media are being increasingly used to radicalise vulnerable people. This includes online gaming platforms;
- The Safer Devon Partnership has commissioned a short film to raise awareness of vulnerability to radicalisation amongst parents and carers of young people, focusing on radicalisation through online gaming. The film will be launched in autumn 2019.

Prevent Workforce Development Strategy

Area: Devon, Torbay and Plymouth

- A workforce development subgroup of the Devon, Torbay and Plymouth Prevent Partnerships has developed a new Prevent training strategy and competency framework to increase the consistency of training provided by partners;
- It outlines the level and type of training required for all staff groups and provides examples of training;
- The framework will be adopted by both Partnerships in Autumn 2019.

Road Traffic Collisions

Threat, risk	and harm as	sessment		
Risk to public	Risk to partnership	Ability to mitigate risk	Overall risk	Key issues
High	Moderate	Significant limitations	Moderate	Fatal Casualties (2018) 59 ▶ -6% Serious Injury Casualties (2018) 795 ▶ -1%
Minor	Minor	Significant limitations	Standard	Slight Injury Casualties (2018) 3,898 ▼ -6%
Headlines 2019	 they are su Assessme which is in are suppor Despite the (following term colli The needs families liv greater cas officers, sp more preva In terms o is identified 	upported by a forming a new tive but not d e adverse tren the introduction sion trend is assessment h ing in deprive sualty risk; ba beed and driv alent in the Pe f response, in	new compre- by road safety Peninsula le lirectly enga d in serious i on of a new ro downward; ighlights you sed on factor ver impairmeninsula than creasing pro- ting risk and	fety Partnership is newly formed – ehensive Strategic Needs y research organisation, Agilysis, evel strategy and delivery plan; CSPs aged in development and delivery; injury collisions in recent years ecording system), the overall long- ; ing drivers and motorcyclists, and ities and rural villages as being at rs recorded by attending police ent through substance use are similar areas in the UK; essures facing blue light services there remains a shortage of
Risk to Public	 collisions of loss of life earnings for psycholog Fatalities stories aro authoritie Serious an volume. Fradverse t that this has known but Casualty ri Cornwall (pare young homes an pedestrian recorded b through s areas in th Cornwall a traffic collisialcohol' excollisions 	butnumber KSI and potentia or time off wor gical impacts are "signal" und them are as and police d slight injury fatal collisions rend in seriou as now stabilis currently unq sk is compara particularly Ea d families in m s); pedal cycli by attending po substance use is UK; ssessed risk of sions, includin cessive speed were the only	is by almost a l for multiple k to recover; on individua events with often highly to remedy th collisions occ occur at a ra is injury collis ed), with rep uantifiable fa tively lower if st Cornwall). motorcyclis nore deprive st risk is note blice officers, a are more put f harm across g those invol and vulnerate issue to be a	minor injury but slight injury 4:1; worst case scenario means casualties; loss of vehicle, loss of ; can result in enduring I, family and friends. a huge impact on local communities; emotive; high expectations of local ne perceived threat. cur at high frequency but are low te of around 5 per month; persistent sions (although latest data indicates oorting changes through CRASH a actor; n Devon and higher in parts of Groups found to be at elevated risk sts, families in affordable village ed communities (particularly as ed as high in Exeter; based on factors speed and driver impairment revalent in the Peninsula than similar s a number of sub-categories of road ving distractions, drugs and/or ole people – speed related assessed as high risk, due to the to tackle speeding effectively.

Risk to Partnership	•	Regional/local priority – our PCC has a national lead for road safety. Currently there is no national government strategy or reduction targets; fatal and serious incidents can make regional and even national news; local media reporting and social media can exacerbate public concerns – although reputational damage is effectively moderated through local controls; statutory duty on local authority to investigate fatal incidents and take appropriate action (engineering controls, signage etc.). Costs to respond – places a constant and substantial demand on resources across a range of agencies; from a Blue Light perspective responding to incidents is business as usual, with more serious incidents requiring greater resources (including costs after the incident, such as diffusing and family liaison); cost of road closures and traffic management; knock on costs to businesses (service interruption, deliveries in/out, public transport networks); demand on health services beyond Blue Light response for treatment of injuries and ongoing support; fatal incidents investigations can be lengthy and complex.
Ability to mitigate risk	•	South West Peninsula Road Safety Partnership forming, new comprehensive Strategic Needs Assessment produced by road safety research organisation, Agilysis, to underpin a new Peninsula level strategy and delivery plan; local strategies in place with good sign up from CSP partners;
	•	Good awareness raising initiatives (such as Learn to Live), education programmes and established local response mechanisms – although Torbay flags that a reduction of funding has impacted on awareness/prevention programmes; dedicated road safety teams in a range of agencies, very high levels of expertise – including the new <u>No</u> <u>Excuse</u> police team which is dedicated to targeting offences on the regions roads;
	•	Robust investigation of fatal RTCs ; evidence-led improvements in engineering, education and enforcement; lack of capacity to research "what works" in prevention and develop learning from existing initiatives;
	•	Adequate resources are in place to respond to incidents but increasing pressure facing blue light services is identified as an escalating risk; large-scale incidents are a challenge and require diverting resources; limited specialist resources - road closures lengthened due to capacity of specialist officers to attend site; low number of specialist roads policing officers, with concerns about impact on their health and wellbeing;
	•	Concerns about the impact on wellbeing and welfare for all emergency services staff . Volume and frequency of crashes involving death or serious injury places significant strain on wellbeing of staff involved in scene attendance, family liaison and investigation;
	•	Shortage of specialist skills in collision inspection and investigation, roads policing and Highways (civil engineers) and a decline in the number of people going into/being trained in this area; the quality of collision reports has declined due to lack of expertise; drink/drug driving messages focus on legal limits rather than zero tolerance.
Knowledge	•	Overall confidence in the evidence base, especially for fatal incidents where there is a thorough investigation; less confidence in serious incident data further to implementation of CRASH; more serious incidents are thought to be well reported but massive under-reporting of slight incidents;
gaps	•	Suicides and medical episodes as a causation factor, impacts of mobile phone use (harder to track phone activity with smart technology), deaths that occur outside of the "fatal" window.

South West Peninsula Road Safety Partnership (SWPRSP) Board

- The **newly convened SWPRSP Board** comprises strategic leaders from local authorities, Highways England, Devon and Cornwall Police, Office of the Police and Crime Commissioner, emergency services and public health across Devon and Cornwall. The Executive Director for the Parliamentary Advisory Council for Transport Safety also attends to provide a Critical Friend role;
- This Board has adopted a vision zero approach and established a target to reduce fatalities and serious injuries across Devon and Cornwall by 50% by 2030 (these will be two separate targets).

Peninsula Road Safety Partnership – Area Profile

- The Peninsula Road Safety Partnership¹⁹ commissioned an area profile of road safety outcomes in Devon and Cornwall over the last five years from road safety research organisation Agilysis;
- The profile provides detailed analysis and insight on all injury collisions reported to the police in Devon and Cornwall. It also provided the opportunity to examine road safety issues from a public health perspective and explore possible strategies for influencing the behaviour of road users;
- This analysis indicated that the stretch of the A38 in south east Cornwall presented particularly high risk to road users.
- In October 2019 Agilysis facilitated a two-day workshop attended by a wide range of statutory and road safety stakeholders tasked with developing an action plan to deliver the Board's vision and target using the Safe Systems approach. This work will be facilitated through the Operational Delivery Group;
- The A38 in Cornwall was selected as a route to **pilot a corridor approach** bringing together resource from a wide range of agencies to deliver interventions to address vulnerable road user groups.
- **8 priority areas were agreed**: Post-collision conference, A38 Day of Action demonstration project, Young drivers, Motorcycling, Older Drivers, Business Drivers, Cyclists and Pedestrians.

The good stuff – what CSPs are doing

Power BI Report Suite for Road Traffic Collisions

Area: Devon

Devon County Council Road Safety team have published a suite of resources that provide details of RTCs in each CSP area across Devon. This helps CSPs gain a better understanding of what is happening in their local area, so they can plan appropriate responses, and also informs the public.

- <u>Devon County Council Collision Data webpage</u> data collections, reports and interactive tools
- <u>Data Dashboards</u> Power BI dashboards for the latest road casualty figures and 5 year trends; there also is a <u>Young Driver Dashboard</u> for the highest risk age group (17-24 years);
- <u>Devon Collision Map</u> Maps 5 years of collision data points in zoom-able map.

¹⁹ Safety Camera Partnership

Measuring crime outcomes

In April 2013, the Home Office introduced a new outcomes framework and changed the presentation of its crime outcomes statistics. From April 2014 onwards, police forces have supplied data to the Home Office on a broader set of outcomes including those that do not result in a formal or informal criminal justice outcome.

Under this framework, every notifiable crime recorded by the police is assigned an outcome including those still under investigation. Since the introduction of the new crime outcomes framework there has been a national downward trend in the proportion of offences with a charge/summons applied.

There has also been a growing proportion of cases assigned the outcome that victims did not support police action.

These two trends are likely to have been influenced by the on-going work to improve crime recording by police forces which has increased the volume of crime forces are managing. There is evidence to suggest that a higher proportion of crimes being recorded are in offence types which are more complex and challenging to identify an offender and bring to justice.

Care needs to be taken when making comparisons of crime outcomes between police forces. In some cases making any such comparisons may be misleading, given that different police forces can interpret outcome categories in different ways.

How crimes are resolved is an area of continuous review within Devon and Cornwall Police. In recent months the use of outcomes that fall

within the Suspect Identified -Evidential Difficulties categories has been under particular scrutiny.

As a result of this review it is expected that **improvements will be made** to their use of and approach to these outcome types.

It is anticipated these changes will have a positive impact on the proportion of offences with these outcome types applied.

As part of this process there is **an** opportunity to explore the role that partners have in supporting victims of crime through the criminal justice process in order to achieve the best possible outcome in each case.

The latest national data published for crime outcomes in England and Wales were for the year ending March 2019.



Out-of-court
 Evidential difficulties (suspect identified; victim supports action)

Evidential difficulties (victim does not support action)

Investigation complete – no suspect identified
 Not yet assigned an outcome

Other

This showed that despite recorded crime rising, the number of criminal charges being brought is falling.

Nationally 8% of crimes recorded to March 2019 resulted in someone being charged. In 20% of offences nationally the victim did not support (or withdrew support for) action.

Almost half (44%) of offences recorded nationally in the year ending March 2019 had been closed with no suspect identified.

How **crimes are resolved vary considerably** by the type of offence committed and reflect factors such as nature of the offence, differing police force priorities and the varying challenges in gathering evidence.

For example, it will be far more difficult to identify a suspect for a criminal damage offence that was not witnessed than for a drug possession offence where the police apprehended the offender when the crime came to their attention. Similarly, an offence where substantial forensic evidence exists will be easier to proceed with than one where such evidence does not exist.

The variation in outcomes across offence groups is shown in the chart below.

Comparing outcome rates for Devon and Cornwall police with our most similar group of forces highlights that locally we have a **higher proportion of crimes that do not proceed due to the evidential difficulties**, particularly where the victim doesn't support the action. The greatest disparity is apparent for sexual offences and violence.



■ Charged ■ Out of court ■ Evidential difficulties ■ No suspect identified ■ Other

Domestic abuse crimes

The table (right) shows outcomes assigned to crimes flagged as domestic abuse in the year ending March 2018 by outcome group and offence group.

Reviewing the charge rates across all Forces, the highest charge rate is 26% (British Transport Police) and lowest is 10% (Hertfordshire).

The charge/summons rate for Devon and Cornwall Police is low at one percentage point less than Hertfordshire and four percentage points lower than



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the national average, but not significantly worse than most similar group of police forces (13.8%).

The outcome of **evidential difficulties** where the victim does not support action is accounts for a **greater proportion of crimes for Devon and Cornwall Police** than the average for our most similar group force area (59% v 43%). It is also higher than the national average (48%). Improving the proportion of positive offender outcomes for domestic abuse crimes is a **long-standing priority for Safer Cornwall** and for Devon and Cornwall Police.

There is a **comprehensive and established Police Improvement Plan** in place, covering all areas from improving risk assessment processes to increasing arrests to improving victim support for police action.

APPENDICES

Assessing threat, risk and harm The changing delivery landscape Notes on the data Glossary Further reading and contacts

Assessing threat, risk and harm

The MoRiLE model

Prioritisation involves understanding what poses the **greatest threat or risk** to the safety of the community and a common framework for undertaking that assessment is vital to ensure that this process is **fair**, **equitable and effective**.

Devon and Cornwall Police and the Peninsula CSPs have transitioned to a new **nationally accredited tool** to assess threat, risk and harm which was developed through the national **Management of Risk in Law Enforcement** (MoRiLE) programme.

The MoRiLE programme was created in 2014 through the National Police Chiefs Council (NPCC)'s Intelligence Innovation Group. It was established with the aim of providing a **common methodology and language** for the assessment of threat, risk and harm in relation to law enforcement.

The programme has developed two models - **thematic (strategic model)** and **tactical** – supported by a set of core principles. The collaborative delivery approach included **over 300 representatives across UK law enforcement agencies**, and national and international consultation.

The key features of the MoRiLE process are:

- A transparent and informed decision making process, that is multi-agency and secures buy-in from partners from an early stage;
- Assessment of a range of thematic areas alongside each other;
- Assessment of capability and capacity for each thematic area;
- Avoidance of bias in risk assessment;

- Use of a common language in relation to threat, risk and harm;
- A clear process that is **easy to use and understand**.

In October 2016, the models were **approved by the NPCC** for roll out to all police forces as Authorised Professional Practice from April 2017. The thematic model is now being used by over 60 law enforcement agencies, including the National Crime Agency, to **inform their Strategic Assessment processes**.

The national programme recognised the models' potential for application in a wider partnership environment and Amethyst was asked to lead on a strand of work to **develop the methodology for use by CSPs.**

The MoRiLE model is a matrix which generates a score for each community safety issue, based on the individual scores for:

- **Impact** on the victim, community, and environment
- **Likelihood** frequency, volume, trend and forecast)
- Organisational position reputation and politics, cost to respond, capacity and capability

The list of community safety issues was generated based on the Home Office crime groups and offence types, local priorities and wider community safety issues such as problem use of drugs and alcohol and RTCs.

The lists created in each CSP and by the police were slightly different according to local needs. The process was delivered in each area by **analyst teams** in collaboration with **subject experts and thematic leads**.

Notes on the data

Where possible, the Peninsula Strategic Assessment uses published data that is familiar to and routinely used by community safety partnerships – such as crime data from iQuanta (see note below) and the Local Alcohol Profiles for England.

Each partnership also has its own data sharing arrangements with local partners and receives a range of complementary data that is used to provide a broader picture of the impact of crime, disorder and substance use on local communities.

Crime and incident data

Data on all crime and incidents reported to the police comes from Devon and Cornwall Police. These are provided in three key formats:

- High level crime figures and comparators with our "most similar family" of forces/CSPs are taken from the **published performance** data on the iQuanta website. This is a secure access data sharing facility used by police forces and community safety partnerships across England and Wales and is essentially static after the data has been provided by individual police forces;
- Data download from the police crime system to populate the individual partnership and Peninsula <u>Strategic Threat and Risk</u> <u>Assessment</u> matrices;
- Data download from the police crime system to provide the monthly and annual **Universal Datasets** for each of the partnerships.

In addition, local partnerships receive additional data sets/crime information from the police to assist in understanding specific issues. All of these data sets are drawn from recorded crime and incident data but are extracted at different points in time and because crime recording is dynamic (for example, after initial recording a crime may subsequently be reclassified as a different type of crime or "no-crimed") the **numbers may not match** exactly.

For ease of presentation and understanding, criminal offences are organised into types and groups. The Office for National Statistics presents crime statistics as **victim-based crime** and **other crimes against society**, aligning with the "crime tree" used by Her Majesty's Inspectorate of Constabulary (HMIC). More information on the HMIC crime tree is available from their <u>website</u>.

The police performance website iQuanta allows us to **compare levels of crime and general trends** with the average for partnerships and police force areas with similar characteristics nationally (known as our '**most similar family group**'). The most similar family groupings are regularly reviewed.

There are two main ways in which we measure our performance against our most similar family – **incidence of crime** (crime rate) and **crime reduction performance** (change in level of crime over time). If our performance is significantly different from our most similar family group, this indicates **that local factors**, rather than national trends, are driving the changes.

Headline crime figures for the partnerships have been **drawn from published data** on iQuanta. These may slightly differ from crime data drawn directly from the police crime system at a different point in time, although the **key messages in terms of trend will be the same**.

Measuring crime trends – data reliability

In January 2014, the UK Statistics Authority withdrew the gold-standard status of "national statistics" from police crime data, further to concerns about reliability.

In 2014 HMICFRS carried out an inspection into the way the 43 police forces in England and Wales record crime data, reviewing over 10,000 records. This inspection was the **most extensive of its kind** that HMIC has undertaken into crime data integrity.

The final overview report <u>Crime-</u> recording: making the victim count was published in November 2014. The key finding across all forces was that an **estimated 19% of crime went unrecorded**, equating to an annual estimate of around 800,000 crimes. The problem was found to be greatest for victims of violence against the person and sexual offences.

Following this, HMICFRS introduced a **rolling programme of inspections**²⁰ to assess the progress made by forces against recommendations set out in the 2014 reports.

- The second inspection published in February 2017 gave Devon and Cornwall Police an **overall** judgment of inadequate and made a series of recommendations and areas for improvement;
- When re-inspected in 2018, Devon and Cornwall Police had improved to "good"

As a result of the national focus on improving the quality of crime recording and compliance with the National Crime Recording Standard (NCRS), **levels of recorded crime** **have dramatically increased**. Forces are improving at different rates and this has had an ongoing impact over the last few years.

The **Crime Survey for England and Wales**²¹ (CSEW) provides more robust measures of crime trends across a range of different crime types but police recorded crime continues to provide the best measure for low volume crimes that are well reported and recorded by the police, such as theft of vehicle, homicide and robbery.

²⁰ HMICFRS Reports - Rolling programme of <u>crime data integrity inspections</u>, last updated July 2018

²¹ <u>Crime in England and Wales: year ending</u> <u>March 2019</u>: Crime against households and adults, also including data on crime experienced by children, and crimes against businesses and society; Office for National Statistics, July 2019

Comparing recorded crime with the CSEW

Crime type	Police recorded crime – 2018/19, compared with previous year	What the CSEW says	Key things to note
Criminal damage and arson	5% increase in arson offences; 1% of all recorded crime2% reduction in criminal damage; 13% of all recorded crime	No change in overall criminal damage and arson estimated by the CSEW 17% increase in criminal damage to a vehicle estimated by the CSEW	This offence type is not well-reported to the police so the CSEW provides a more robust measure of trends.
Domestic abuse	18% increase in crimes flagged as domestic abuse; 19% of all recorded crime.	According to the CSEW, there was no change in the proportion of adult victims of domestic abuse in the year ending March 2019 (6.3%). Over the same time period police recorded domestic abuse increased by 22%. 14% of all crimes recorded by the police were flagged as domestic abuse related.	Higher reporting rates for domestic abuse in the Peninsula than the national average. Given the different factors affecting the reporting and recording of these offences, the police figures do not provide a reliable measure of current trends The CSEW is the better source for domestic abuse victimisation.
Homicide	19 homicides, 36% increase (5 more crimes); less than 1% of all recorded crime	Nationally there was a 4% decrease in police recorded homicides. Excluding the terror attacks in 2017, however, which accounted for multiple homicide offences, there was a small rise.	While the CSEW provides a good picture of the overall trend in violent crime, police recorded crime is a better measure of higher-harm but less common types of violence.

Crime type	Police recorded crime - 2018/19, compared with	What the CSEW says	Key things to note
Public order offences	previous year 3% increase in 2018/19 but has increased by 67% since 2015/16; 7% of all recorded crime	Nationally there has been a 16% increase in police recorded public order offences, further to a 36% rise the previous year.	A large part of this increase is likely to reflect improvements to recording practices. For example, incidents that may have previously been recorded as an anti- social behaviour incident may now be recorded as a public order offence. It is also possible that genuine increases in public disorder may also have contributed to the rise.
Robbery	20% increase in robbery; less than 1% of all recorded crime. The majority of crimes are robbery of personal property – theft from a person or persons involving the use of threat of force.	Nationally police recorded robbery has increased by 11%. The CSEW does not provide a robust measure of short-term trends in robbery as it is a relatively low-volume crime.	This increase is likely to reflect some real change in these crimes. Recording improvements are likely to have contributed, but the impact is thought to be less pronounced than for some other crime types.
Sexual offences	2% decrease in rape offences; 1% of all recorded crime. The sharply rising trend has plateaued over the last 12 months. 58% increase since 2015/16. 3% increase in other sexual offences in 2018/19; 71% higher than in 2015/16	According to the CSEW, there was no change in the proportion of adults who experienced sexual assaults in the year ending March 2019 (2.9%). Over the longer-term, there was a rise in sexual assault estimated by the survey over the past five years, with the latest estimate returning to levels similar to those around a decade ago.	Greater willingness in victims to come forward to report crimes and improved crime recording practice are key factors in the rise over recent years. Given the different factors affecting the reporting and recording of these offences, the police figures do not provide a reliable measure of current trends. The CSEW is the better source of victimisation data on sexual offences.

	Police recorded crime		
Crime	- 2018/19,	What the CSEW says	Key things to note
type	compared with		Rey things to hote
Theft offences	 previous year 5% decrease in thefts overall in 2018/19; 29% of all recorded crime. 13% rise compared with 2015/16. 4% decrease in vehicle related thefts but within this thefts of a vehicle increased by 19% and thefts from a vehicle decreased by 13%. 6% decrease in burglary; 5% of all recorded crime 	No change in overall theft offences estimated by the CSEW in the latest year, but a 13% rise compared with two years ago. Nationally police recorded vehicle offences increased by 2%. This increase is driven mainly by "theft or unauthorised taking of a motor vehicle", which showed an 8% increase. Burglary recorded by the police decreased by 3%.	The CSEW provides the better indication of overall trends in theft offences. It better captures more minor thefts, such as from outside a dwelling, which are less likely to be reported to the police. However, police recorded crime data can help identify short-term changes in individual offences.
			Vehicle offences and burglary offences are thought to be generally well- reported by victims and well-recorded by the police.
Violence and weapons offences	 13% increase in violence against the person overall; 39% of all recorded crime. Stalking and harassment make up 38% of the rise in violent crime. Violence without injury increased by 14% and has more than doubled since 2015/16. Violence with injury increased by 11% and is 36% higher than in 2015/16. Most serious violence (GBH and attempts) increased by 24%, but remains a low volume crime (<1% of all recorded crime). 	No change in overall violent offences estimated by the CSEW. However, rises seen in more harmful but less common violent offences.	Police recorded violent crimes have seen the greatest rise due to changes in crime recording, thus the CSEW provides the better indication of overall trends in violent crime, particularly for more common but less harmful offences. Police recorded crime provides a better measure of the more harmful but less common offences (such as serious violence).

Crime type	Police recorded crime - 2018/19, compared with previous year	What the CSEW says	Key things to note
	11% increase in crimes involving a knife or sharp instrument; 2% of all recorded violent and sexual crimes ²²	Nationally there was an 8% increase in police recorded offences involving a knife or sharp instrument.	The majority of police forces (36 of the 43)6 recorded a rise in these offences, but the highest rates were seen in metropolitan areas.
	48% increase in crimes involving firearms; a very low volume crime – 126 crimes, 0.5% of all recorded violent and sexual crimes	Nationally there was a 3% increase in police recorded offences involving firearms.	Firearms offences are concentrated in urban areas. The rise partly reflects improvements in identifying weapons such as stun guns, CS gas and pepper spray.
Computer misuse	Not included	21% decrease nationally in a offences estimated by the CS The CSEW is the best source volume of computer misuse offences that go unreported. misuse is a recent addition t limited time series data are be taken in interpreting early	SEW. e for measuring the offences as it captures However, as computer o the CSEW and only available, caution must
Fraud	Not included	17% increase nationally in fraud offences estimated by the CSEW.The CSEW provides the best indication of the volume of fraud offences experienced by individuals as it captures the more frequent lower-harm cases that are likely to go unreported to the authorities. However, as fraud is a recent addition to the CSEW and only limited time series data are available, caution must be taken in interpreting early trends.	
Anti- Social Behaviour	A small reduction of 4% compared with 2017/18. The only type of anti- social behaviour to see an increase was street drinking.	38% of people surveyed in Devon and Cornwall had experienced or witnessed anti-social behaviour, an increase on 31% in 2017/18.	
Sources	Devon and Cornwall Police	Office for National Statistics	

 $^{^{\}rm 22}$ Includes homicide, attempted murder, threats to kill, assaults with injury, sexual offences and robbery

Glossary

Term	Description		
Acquisitive	Crime grouping including burglary, shoplifting, vehicle offences and other		
crime	types of thefts		
Alcohol-	Any crime recorded with an alcohol flag by police – this can relate to any		
related crime	type of crime and indicates that alcohol was a factor in the crime		
ARID	Assault Related Injuries Database (in hospital Emergency Departments)		
ASB	Anti-Social Behaviour		
BAME	Black, Asian and other Minority Ethnic (groups)		
(DDC) CRC	(Dorset, Devon and Cornwall) Community Rehabilitation Company		
CSA/E	Child Sexual Abuse/Exploitation		
CSEW	Crime Survey for England and Wales		
CSP	Community Safety Partnership. Statutory partnership between Council,		
	Police, Fire, Health and Probation to tackle crime and disorder issues		
DA(SV)	Domestic Abuse (and Sexual Violence) Any crime recorded with a domestic abuse flag by police – this can relate		
Domestic	to any type of crime. The domestic abuse flag is also used to identify non-		
abuse crime	crime incidents in a similar way.		
DASH	Domestic Abuse, Stalking and Harassment and Honour Based Violence		
	Risk Identification and Assessment and Management Model		
DVPO/N	Domestic Violence Protection Order/Notice		
ED	Emergency Department (often called Accident and Emergency or A&E)		
(E)NTE	(Evening and) Night Time Economy – economic activity taking place in the		
FGM	evenings and at night, such as drinking, entertainment and nightlife.		
	Female Genital Mutilation Any incident where the victim or a witness feels that they were targeted		
Hate	because of disability, race, religion, gender identity or sexual orientation;		
incident/crime	if the behaviour constitutes a criminal offence, it becomes a hate crime		
HBA/V	Honour Based Abuse/Violence		
HMIC(FRS)	Her Majesty's Inspectorate of Constabulary, expanded to include Fire and		
	Rescue Services in 2018		
IBA	Identification and Brief Advice for alcohol problems		
IDVA	Independent Domestic Violence Advocate or Advisor (Service)		
ІОМ	Integrated Offender Management; see TurnAround		
ISVA	Independent Sexual Violence Advocate or Advocacy (Service)		
KSI	Killed or Seriously Injured (used to describe serious road traffic collisions)		
LGBT(Qi)	Lesbian, Gay, Bisexual, Transgender, Queer (or Questioning) and Intersex		
LSOA	Lower Super Output Area; statistical geographical unit with c.1500 people		
MARAC	Multi-Agency Risk Assessment Conference that manages high risk domestic abuse cases		
	Management of Risk in Law Enforcement - accredited models to assess		
MoRiLE	threat, risk and harm developed through the national MoRiLE programme		
	Most Similar (Family) Group. Grouping of police forces or CSPs that are		
MSG	closest in terms of characteristics such as population structure; used by		
	the Home Office, police forces and CSPs to compare performance		
NCRS	National Crime Recording Standard - the standard for recording crime in accordance with the law and the Home Office Counting Rules		
	An incident recorded by the police that does not constitute a criminal		
Non-crime	offence; recorded for risk assessment and intelligence purposes		
incident	particularly in domestic abuse, hate crime and incidents involving children		
	or vulnerable adults		
NRM	National Referral Mechanism – a framework for identifying and referring		
	potential victims of modern slavery and ensuring they receive support		

Term	Description	
OCG	Organised Crime Group	
ONS	Office for National Statistics	
OCLP	Organised Crime Local Profile – detailed profile developed by Devon and Cornwall Police with local partners for serious and organised crime themes	
PCAN	Peninsula Crime Analysts' Network	
PHE	Public Health England	
PSA	Peninsula Strategic Assessment	
RTC	Road Traffic Collision	
SARC	Sexual Assault Referral Centre	
SDP	Safer Devon Partnership, strategic partnership covering all district CSPs	
SODAIT	(Police) Sexual Offences and Domestic Abuse Investigation Team	
TurnAround	The delivery name for Integrated Offender Management in Devon and Cornwall; a multi-agency approach to work with frequent offenders	
ViST	Vulnerability Screening Tool, used by Devon and Cornwall Police	
WRAP	Workshop to Raise Awareness of Prevent – Home Office accredited training package for preventing violent extremism	
YOT/YOS	Youth Offending Team / Service	

Further reading and contacts

For more information about the Peninsula partnerships, including strategic assessments and plans, please follow the links below:

Cornwall	http://safercornwall.co.uk/crime-in-your-area/documents- publications/
Devon (SDP)	https://saferdevon.co.uk/
Plymouth	https://www.plymouth.gov.uk/antisocialbehaviourandcrime/com munitysafetypartnership
Torbay	https://www.torbay.gov.uk/emergencies/safer-communities- torbay/what-sct-do/
Isles of Scilly	https://www.scilly.gov.uk/community-safety/community-safety- partnership

For further details on the work of the local partnerships please contact:

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Kernow Salwa

South Devon and Dartmoor Community Safety Partnership



EVETED



EXETER community safety partnership making a safer city







North Devon & Torridge Community Safety Partnerships COLLON C CALMER SAL

East & Mid Devon Community Safety Partnership