

**Community Safety Partnership Membership****Date and Time:** Wednesday 29<sup>th</sup> March 2023, 10:00am-13:00pm**Venue:** Committee Room 2, Barking Town Hall

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**A G E N D A**

	<b>Presented by</b>	<b>Pages</b>
<b>1. Declaration of Interests</b>	Chair	Verbal
Members of the Board are asked to declare any personal or prejudicial interest they may have in any matter which is to be considered at this meeting.		
<b>2. Minutes</b>	Chair	1 – 5
<b>3. Introductions and Apologies for Absence</b>		
<b>4. Headline updates on ASB Community MARAC</b>	Qais Ghafar	7 – 8
<b>5. Drugs and Alcohol Service Tender</b>	Amolak Tatter	9 – 40
<b>6. One Panel</b>	Katie Jones	Verbal
<b>7. Serious Violence Duty Strategy and Action Plan</b>	Katie Jones	41 – 81
<b>8. VAWG Operational Meeting</b>	Katie Jones	83 – 84
<b>9. VAWG Strategy</b>	Angela D'Urso	Verbal
<b>10. Domestic Abuse Improvement Plan</b>	Angela D'Urso	85 - 165
<b>11. Police representation – Proactive unit/Gangs</b>	Gary Jones	Verbal
<b>12. Domestic Homicide Reviews and Rapid Review</b>	Katie Jones	Verbal

<b>13. Forward Plan</b>	Chair	167
<b>14. Any Other Business</b>	Chair	
(a) Performance Report	Daniel James	169
(b) Subgroup Update Reports	Subgroup leads	

**Children and Young People**

**Hate, Intolerance and Extremism and Tension Monitoring**

(c) Safeguarding Boards Update Report	Joanne Kitching	179 - 182
<b>15. Date of Next Meeting</b>	Chair	

Community Safety Partnership  
Wednesday 03 July 2024, 10.00-13.00pm  
Chair: Stuart Bell MS Teams

## Membership

<b>Name</b>	<b>Post title</b>	<b>Organisation</b>
Cllr Syed Ghani (Chair)	Cabinet Member for Enforcement and Community Safety	London Borough of Barking and Dagenham (LBBB)
Stuart Bell (Interim Chair)	Detective Superintendent East Area BCU	Metropolitan Police Service (MPS)
Fiona Taylor (Deputy Chair)	Chief Executive	LBBB
April Bald	Operational Director, Childrens' Care and Support	LBBB
Clare Brutton	Head of Commissioning Disabilities	LBBB
Steve Calder	Head of Service, Barking, Dagenham and Havering	The Probation Service
Matthew Cole	Director of Public Health	LBBB
Jennie Coombes	Head of Service	Be First
Narinder Dail	Borough Commander	London Fire Brigade (LFB)
Angela D'Urso	Domestic Violence Improvement Lead	LBBB
Matthew Feather	Inspector, East Area BCU Partnership and Prevention	MPS
Angie Fuller	Head of YJS, Missing and Exploitation, Childrens' Care and Support	LBBB
Zahid Iqbal	Designated Professional for Safeguarding Adults	NHS North East London ICB
Daniel James	Senior Intelligence and Analytics Officer	LBBB
Gary Jones	Operational Director for Enforcement, Regulatory Services and Community Safety	LBBB
Alexandra Joseph	Senior Independent Domestic Violence Advisor	Victim Support
Cllr Elizabeth Kangethe	Cabinet Member for Educational Attainment and School Improvement	LBBB
David Lingard	Community Safety Operations Manager	LBBB
Katie Jones	Community Safety Partnership Manager	LBBB
Kevin Makambe	Head of Triage Lifecycle	LBBB
Sarah Robertson		Barking and Dagenham Council for Voluntary Service (BDCVS)
Pip Salvador-Jones	Director	Barking and Dagenham Citizens Advice Bureau (CAB)
Nathan Singleton	CEO LifeLine Projects	BD Collective
Cllr Maureen Worby	Cabinet Member for Adult Social Care and Health Integration	LBBB

Deirdre Collins

Chief Legal Officer

LBBB

**Non-LBBD Advisers**

<b>Name</b>	<b>Post title</b>	<b>Organisation</b>
Isabella Kennedy	MOPAC Link Officer	Mayor's Office for Policing and Crime (MOPAC)
Jo Roebuck	Programme Manager, London Alcohol, Drugs and Tobacco	Department of Health Care Services
David Rhodes	Police Superintendent Neighbourhoods	MPS

**Contact Officer:**

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## THE COMMUNITY SAFETY PARTNERSHIP

Wednesday, 6 December 2023  
10.00-13.00pm

**Present:** Amolak Tatter, Angela D’Urso, Angie Fuller, Councillor Ghani, Daniel James, Gary Jones, Katie Jones, Isabelle Kennedy, Matthew Cole, Nathan Singleton, Stuart Bell (CHAIR), Sarah Robertson, Narinder Dail, Qais Ghafar, David Rhodes.

**Additional Attendees:** James Northbury, Jemma Breslin, Julia Kanji, Stephen Hynes, Oliver Marshall-Camm, Carol Weeden.

**Apologies:** April Bald, Jenni Coombes, Clare Brutton, Simon Cornwall, Fiona Taylor, Councillor Worby, Councillor Kangethe, Steve Calder and Zahid Iqbal. **Minutes:** Jade Cavalli

### 1. INTRODUCTIONS AND APOLOGIES FOR ABSENCE

Stuart Bell, Community Safety Partnership chair opened the December meeting and introductions and apologies were noted.

The chair informed the board that a representative from HMICFRS (His Majesty’s Inspectorate of Constabulary and Fire & Rescue Services) is in attendance to observe to allow evidence gathering for the PEEL review that is due to be undertaken in March 2024.

**ACTION: Jade Cavalli to chase outstanding ISA signatures.**

### 2. DECLARATION OF INTERESTS

No declarations of interest to note.

### 3. MINUTES

The September CSP board minutes were reviewed, and the following actions were requested.

**ACTION: Isabelle Kennedy to be noted on the attendee’s list - CLOSED**

**ACTION: Angela D’Urso to amend September minutes on DAIP to reflect correct update – CLOSED**

The following updates were noted as outstanding.

1. Update on ASB MARAC
2. CCTV Update

Gary Jones noted the ASB MARAC led by Karen Bryan is functioning well and MPS attend. The chair requested headline updates on ASB Community MARAC at the March 2024 CSP.

**ACTION: Jade Cavalli to add headline updates on ASB Community MARAC to March CSP - CLOSED**

**ACTION: Jade Cavalli to share September CSP report on ASB Community MARAC with chair - CLOSED**

**ACTION: Board members to agree what updates are required for the CCTV update report.**

#### **4. DRUGS AND ALCOHOL SERVICES TENDER**

Method statements have been received in relation to the Drugs and Alcohol Services retender which are under review. The team aim to agree preferred providers by the end of December and announce those in early January. There will be a 10-day standing period to raise any challenges, aiming to officially announce preferred providers in January 2024.

The contract for the new services will runs for 5-years from 1st April 2023 to 31st March 2028 with the option to extend for a further 2-years.

In total they council received 4 tenders for the young people's service and 5 tenders for the adult service, 2 providers applied for both. Out of those tenders, 2 providers are from the care system and the others are already delivering services across other sectors.

**ACTION: Jade Cavalli to add Drugs and Alcohol Services Tender update to March CSP Board - CLOSED**

#### **5. CSP BOARD AND STRUCTURE REVIEW**

A review of the CSP will be undertaken. The purpose of the review is to look at the roles and responsibilities of the board to try and work as effectively and efficiently as possible to avoid meeting duplication. The review will focus on

1. Reviewing the membership and governance so the CSP reflects a core statutory executive membership with set subgroups. Improving attendance is key, the CSP may need to introduce mini agreements told hold partners to account for attendance with a suitable deputy identified.
2. Review the structure of the board and its subgroup including reviewing information flow up and down. This review will feed into the council's restructure of the CSP and wider teams.
3. Whether the board should remain a public forum or become a solely restricted, this would reduce the level of administration but also improve accountability and decision making.
4. Use the learning from the Safeguarding Childrens Partnership (SCP) to inform the CSP review.
5. Explore a working group may support the planning and development of the new structures and increased partnership working with the BCU. One Panel is an area that highlights how effective working can be achieved across boroughs.

Stuart Bell agreed on the importance of the review and the need for a clear process of how we should do business up and down the partnership structure with clear objectives and better communication. The chair advised to look at other boroughs who have undertaken similar reviews for best practice.



Angela D'Urso noted the review needs to link in with other statutory structures to provide more efficient ways of reporting. The LGA peer review from the SCP can help frame the CSP review.

The chair requested the boards commitment to support the review and noted the final decision should be partnership led. A task and finish group can look at the current structure and responsibilities then develop a proposal as to how we move forward including learning from best practice.

**ACTION: Jade Cavalli to add update from Katie Jones on forward plan for March CSP to outline current structure, subgroups, how to we hold them to account, useful investment of time going into each group, is it effective along with a proposal for change - CLOSED**

**Action: Katie Jones to link in with David Rhodes chief inspector for the CSP review.**

## **6. ONE PANEL**

In June 2023 the Safeguarding Childrens Partnership (SCP) invited the LGA to undertake peer review, looking at effectiveness of the partnership and its arrangements. One of the initial findings was around the structure, subgroups, and effectiveness. The SCP Executive Group reviewed the recommendations to agree how each can be taken forward.

The SCP are discussing with partners the learning of One Panel that has been adopted on neighbouring boroughs. Both the SCP and Safeguarding Adults Board (SAB) hold reviews like DHRs which are a big expense and undertaking of work, and in most cases have a cross over between boards. The One Panel would seek to join CSP, SCP and SAB into a think family approach, with expertise around the table to review and determine where the information should feed into and if what reviews should be conducted. One Panel would have shared responsibility across the business managers who would triage referrals providing clear pathways. The panel would meet monthly when there are cases to review, the frequency of the meetings can be reviewed if there are no cases.

A suggested membership has been provided in the draft ToR, senior membership which has been agreed through the SCP. The One Panel is being presented to the SAB in January, if approved the first One Panel meeting will be arranged for early February with Elaine Allegretti chairing the initial meetings.

Angela D'Urso highlighted the opportunity this provides to the CSP around DHR and rapid review process, at present we don't have a place in partnership for dissemination of learning and practice. The One Panel would hold that responsibility to ensure this connects into the right partnerships, the multi statutory partnership ways of working supports the aim for the CSP structure review.

The chair and board members agreed to support the implementation of One Panel.

**ACTION: Jade Cavalli to add One Panel update to March CSP led by Jemma Breslin - CLOSED**

## **7. DOMESTIC ABUSE IMPROVEMENT PROGRAMME UPDATE**

The VAWGSG will meet at the end of the quarter to fully programme manage to DAIP, therefore a verbal update was provided to the CSP. The following was noted.

- 16 days of activism has delivered a series of successful events.
- VAWGSG are working on new funding stream to create a SISTAS expert, which aims to support families in a more targeted way to achieve better outcomes for children and families. The role will sit with those working with young people subject to protection plans and experience serious DA. A project team are meeting weekly to implement, reviewing measuring tools and making required changes to systems.
- As a result of Support2safety there has been on average 2 cases referred into MARAC, due to having a better grip on the risk management.
- Rolling out of Safe and Together and DARAC across the childrens workforce. Training sessions have been positive and looking at how we see the changes in practice.
- Positive uptake of the DA multi-agency learning programme.
- 9 DA Champions have been trained in tranche 1, tranche 2 is scheduled for May 2024. There is a call for nominations across the partnership. The training also incorporates community champions.
- AVA Programme workshops looking at homelessness and housing services, a workshop was undertaken, and shared priorities identified. This supports codesigning of interventions and providers opportunities for commissioning.

Stuart Bell highlighted the new VAWG action plan is being launched in December. This will look at business, delivery of the action plan core commitments, and how the governance on VAWG is considered in CSPs. A quarterly VAWG governance panel is being implemented and the MPS will need support from the 3 CSP in the BCU. CSPs will be consulted on how the panel will be set up. This work will need to feed into the CSP review. Angela noted the BCU has a close tri-borough working on VAWG which will provide a solid platform.

**ACTION: Angela D’Urso to share presentation on Support2Saftey with CSP Members.**

## **8. DOMESTIC HOMICIDE REVIEW AND PROPOSED RAPID REVIEW**

RESTRICTED ITEM

## **9. PREVENT UPDATE**

Report shared with the CSP to note.

## **10. SERIOUS VIOLENCE DUTY ASSESSMENT**

RESITRICTED ITEM

## 11. FORWARD PLAN

The board reviewed the CSP forward plan and agreed the items for the next CSP following the additional requests from this board.

## 12. ANY OTHER BUSINESS

Subgroup update reports were provided within the agenda pack. The VAWGSG have not met so not update could be provided at the time of the meeting.

**ACTION: Jade Cavalli to update CSP Forward Plan with the VAWG strategy replacing the DIAP update for March 2024 - CLOSED**

The board were advised meeting dates for 2024 will need to change for the MPS Chair to attend.

**ACTION: Jade Cavalli to share new proposed CSP Board dates for 2024 with chairs - CLOSED**

**ACTION: Jade Cavalli to update calendar invites for the 2024 CSP boards once dates agreed.**

## 13. SUBGROUP UPDATE REPORTS

No further updates provided.

### (i) SAFER NEIGHBOURHOOD BOARD UPDATE

No further updates provided.

## 14. SAFEGUARDING BOARDS UPDATE REPORT

No further updates provided.

## 15. DATE OF NEXT MEETING

Community Safety Partnership Board  
Wednesday 03 April 2023, 10:00am-13:00pm  
Committee Room 2  
Chair: Councillor Ghani

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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Subject:** Community MARAC

**Date:** March 2024

**Author:** Karen Bryan- ASB Manager

**Contact:** Karen.bryan@lbbd.gov.uk

**Security:**

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The ASB, Crime and Policing Act 2014 is designed to shift the focus from centrally set targets, and the type of behaviour, to looking at the impacts on the lives of victims. Key components in the “putting victims first”.

The management and intervention of anti-social behaviour (ASB) cases in the borough often suffered from an uncoordinated approach. Opportunities for joined-up working and problem solving were missed.

Individual cases were often known to a variety of partners and agencies, but intelligence sharing and decision-making practices lacked cohesion. This often meant no single public body was able to effectively assess the risk attached to each individual case, and to take ownership.

### Solution

- Establish a multi-agency problem solving panel for high risk ASB case referrals; to improve information sharing practices and take ownership of assessing and managing risk.
  - Establish a formal risk assessment process to identify high risk ASB cases and maintain a consistent approach in referring appropriate cases to the panel.
  - Merge and utilise partnership ASB data for a more informed intelligence picture; make use of this data to allocate resources effectively, to target partnership sources at vulnerable individuals and communities most at risk.
- **HOW**
  - Information is shared monthly between various stakeholders which directs risk planning, risk management, and effective problem solving across partnerships.
  - The panel includes representation from, Community Safety, Tenancy Sustainment, Landlord Services, Probation, London Fire Brigade Service, Adult Social Care,

Youth Offending, Legal, ASB, CGL Substance Misuse and NELFT (mental health) and Police.

## Data

The first Community MARAC took place in October 2023. There have been 4 meetings to date, the 5<sup>th</sup> meeting is being held on Thursday 13<sup>th</sup> March 24.

2 cases returned declined -did not meet criteria for Community MARAC

<b>Location</b>	<b>Brief</b>	<b>Meetings/referred by</b>	<b>Outcome</b>	<b>Actions</b>
Five Elms	Complex ASB/Mental Health	1 meeting referred by ASB	Professionals meeting held- support provided	Resolved and closed
Kingsley Mews	Noise/ASB	2 meetings referred by ASB	No evidence	Referred to PSH
Fanshawe Crescent	Violence/ASB	2 meetings referred by Police	CPW served mediation offered	Resolved and closed
Tilney Road	Serious ASB/DV and criminal issues	3 meetings referred by ASB	CPW/CPN served	With legal to act

Currently have 3 open ongoing cases:

Aidan Close – referred by Landlord Services

Pandall Road – referred by LS/ASB/Complaints

Laburnum House – referred by ASB/CGL

# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Subject:** Supplementary Substance Misuse Treatment & Recovery Grant (SSMTR Grant)

**Date:** Tuesday 20<sup>th</sup> February 2024

**Author:** Amolak Tatter

**Contact:** [Amolak.tatter@lbbd.gov.uk](mailto:Amolak.tatter@lbbd.gov.uk)

**Security:** [UNPROTECTED/ PROTECTED/ RESTRICTED]

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### 1. Purpose of Presenting the Report and Decisions Required

- 1.1 The Office for Health Improvement & Disparities (OHID) has awarded Barking and Dagenham the Supplementary Substance Misuse Treatment & Recovery (SSMTR) Grant.
  - 1.2 The condition of grant is to maintain investment in drug and alcohol treatment and recovery in line with our outturn for 2023/24.
  - 1.3 To provide an update on the 2023/24 SSMTR quarter 3 returns and to present the 2024/25 SSMTR Plan.
- 

### 2. Recommendation(s)

- 2.1 To provide an update to the Community Safety Partnership Board and partners on the Supplementary Substance Misuse Treatment & Recovery (SSMTR) Grant an update on the spends for 2023/24 for quarter 1 to 3 and to present 2024/25 grant plan.

### 3. Main Text

#### 3.1 Quarter 3 Return 2023/24

- 3.2 For the remaining 6-months, quarter 3 and 4 we had to reprofile £21,357.34 for the Commissioning Support Officers post, as we were unable to recruit to this post.

- 3.3 The £21,357.34 was reprofiled to CGL, St Luke's Service who has brought in SWIM (Support When It Matters Enterprise) CIC organisation who are able to provide a wrapped around service to support services users for ETE, Housing, Benefits, delivered gender groups and working with the global majority community.
- 3.4 In addition, there is an overspend of £81.10 which we will be covered through the substance misuse core grant.
- 3.5 The Office for Health Improvement and Disparities has accepted the SSMTR Q3 Returns for 2023/24, for the returns submitted see appendix one, 5.1.

#### **4. SSMTR Grant Plan for 2024/25**

- 4.1 The borough will receive £709,925.00 SSMTR grant for 2024/25, compared to 2023/24 funding £432,581.00; therefore, the borough will be receiving additional £277,344.00 funding.
- 4.2 The SSMTR grant is only available for one-year only and no future decision has been made whether the grant will continue beyond 2024/25.
- 4.3 The increase in the funding has enabled the borough to sustain all the post as 2023/24 and recruit additional two Recovery workers (£89,124.00), which will increase the treatment capacity.
- 4.4 The increase in the funding has also enabled us to increase Shannon Trust worker post from parttime post to fulltime. Shannon Trust is an educational organisation who supports service users when their literacy and numeracy.
- 4.5 The additional £60,561.20 will fund Buprenorphine, a prescribed medical treatment for people with an opioid drug dependence, such as heroin and/or other opioid medicines.
- 4.6 OHID has also suggested that the borough considers increasing commissioning capacity; therefore, we have allocated £49,000.00 to a commissioning support officer post.
- 4.7 The SSMTR Grant plan for 2024/25 has been submitted to OHID and are waiting for OHID to agree the plan, which is attached, see appendix one, 5.2.



## 5. List of Appendices: Appendix 1:

### 5.1 Quarter 1 to 3 Returns



Barking & Dagenham  
SSMTR FRT 23-24 - si

### 5.2 2024/25 Plan



Copy of Barking and  
Dagenham 24-25 Finz

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# 18 Procurement Strategy Report Template

## Signing-off Sheet

<b>Title of Report:</b>	Contract Variation Adult Substance Misuse (Drug and Alcohol) Integrated Service		
<b>Name of Meeting:</b>	Procurement Board	<b>Date of Meeting:</b>	18/09/2023
<b>This Report is currently listed on the Forward Plan: Yes</b>			

	<b>Name of consultee:</b>	<b>Clearance given:</b> (Yes / No)
<b>Required Consultees on Draft Report</b> (these must be consulted or an explanation given i.e. not relevant)		
<b>Cabinet Member(s):</b>	Councillor Worby	Yes
<b>Ward Members</b> (for Ward related issues)		
<b>Departmental Finance</b> (via <a href="mailto:financialimplication@lbbd.gov.uk">financialimplication@lbbd.gov.uk</a> )	Katherine Heffernan	Yes
<b>Corporate Risk</b> (via <a href="mailto:christopher.martin@lbbd.gov.uk">christopher.martin@lbbd.gov.uk</a> )		
<b>Corporate Procurement</b> (via <a href="mailto:euan.beales@lbbd.gov.uk">euan.beales@lbbd.gov.uk</a> )	Adebimpe Winjobi	Yes
<b>HR</b> (via <a href="mailto:gail.clark@lbbd.gov.uk">gail.clark@lbbd.gov.uk</a> )		
<b>Legal Practice</b> (via <a href="mailto:legalimplications@lbbd.gov.uk">legalimplications@lbbd.gov.uk</a> )	Kayleigh Eaton	Yes
<b>Corporate Policy and Equality Impact</b> (via <a href="mailto:Ce-Strategy@lbbd.gov.uk">Ce-Strategy@lbbd.gov.uk</a> )		
<b>Property/Asset Management</b> (via <a href="mailto:anthony.wiggins@lbbd.gov.uk">anthony.wiggins@lbbd.gov.uk</a> )		
<b>Adults' and Children's Safeguarding</b> (via <a href="mailto:christopher.bush@lbbd.gov.uk">christopher.bush@lbbd.gov.uk</a> )	Chris Bush	Yes
<b>Public Health</b> (via <a href="mailto:matthew.cole@lbbd.gov.uk">matthew.cole@lbbd.gov.uk</a> )	Mathew Cole	Yes
<b>Sustainability and Net Zero</b> (via <a href="mailto:neil.pearce@lbbd.gov.uk">neil.pearce@lbbd.gov.uk</a> )		
<b>Business Continuity and Disaster Recovery</b> (via <a href="mailto:mandy.beacher@lbbd.gov.uk">mandy.beacher@lbbd.gov.uk</a> )		
<b>Other Consultees (including external bodies):</b> (To be completed as appropriate)		

## Procurement Board

<b>Title:</b> Contract Variation Adult Substance Misuse (Drug and Alcohol) Integrated Service	
<b>Report of the</b> Councillor Maureen Worby, Cabinet Member for Adult Social Care and Health Integration	
<b>Open Report / Open Report with Exempt Appendix / Fully Exempt Report</b> Open Report	<b>For Decision</b> Yes
<b>Wards Affected:</b> All	<b>Key Decision:</b> Yes
<b>Report Author:</b> Amolak Tatter, Commissioning Manager	<b>Contact Details:</b> Tel: 0797 200 3623 E-mail: <a href="mailto:Amolak.tatter@lbbd.gov.uk">Amolak.tatter@lbbd.gov.uk</a>
<b>Accountable Director:</b> Chris Bush, Commissioning Director for Children's Care and Support	
<b>Accountable Executive Team Director:</b> Elaine Allegretti, Director of People and Resilience	
<p><b>Summary:</b></p> <p>To waive the requirement to tender and approve the variation of the contract for the provision of Adult Substance Misuse (Drug and Alcohol) Integrated Service to CGL for a period of 12-months from 1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024.</p> <p>This is a retrospective waiver in relation to a current contract where a service is being provided to residents. Alongside this, new substance misuse services are in the process of being procured with an anticipated start date of new contracts on 1 April 2024. Agreement to extend the contract will ensure service continuity during procurement and enable payment for services already carried out this financial year 2023-24.</p> <p>The current value of the contract for the year 1 April 2023-31 March 2024 is £1,836,351.76.</p> <p>It is regretted that a retrospective waiver is required. Initially it was expected that a new service contract would be in place this financial year and as such the current contract would not need to be extended. The reason(s) for delay were:</p> <ul style="list-style-type: none"> <li>• the undertaking of a comprehensive needs analysis required by the Office for Health Improvement and Disparities (OHID),</li> <li>• In addition a cultural competency analysis followed that has informed the service specification of the new service in relation to better meeting the needs of a diverse population.</li> <li>• Finally, OHID (Grant Manager) had indicated that it was going to undertake a national Substance Misuse Direct Purchasing System (DPS) from which Local Authorities could undertake 'mini re procurements or direct award. However, OHID</li> </ul>	

has been unable to deliver this procurement at the scale and pace indicated. Alongside a number of other local authorities, Barking and Dagenham has been forced to go out to full procurement late, which it is now taking place.

### **Recommendation(s)**

The Procurement Board is recommended to:

- (i) Agree that the Council approves the retrospective modification of the contract for the provision of St Luke's service with Change Grow Live (CGL) to extend for a period of 12-months from 1st April 2023 to 31st March 2024, in accordance with the Council's Contract Rules.

### **Reason(s)**

This retrospective waiver is required to ensure service continuity during the financial year 2023-24 and to enable payment for services provided to date. The treatment of drug and or alcohol addiction is important to support recovery, families, reduce acquisitive crime and improve physical and mental health.

Alongside this the Borough is in the process of procuring a new adult substance misuse service. The new contract is anticipated to start 1 April 2024. Extending the current contract to 31 March 2024 will allow procurement to take place inclusive of a necessary 3-month lead-in for the new service. The tender process has already begun with a number of well-known organisations in the field expressing interest in working for Barking and Dagenham.

The variation to the contract will ensure we take into consideration the recommendations from the Needs Assessment, including Cultural Competence Assessment, the Government 10-year drug strategy and aligning additional Supplementary Grant within main service delivery, as outlined below.

The borough has received additional funding for drug and alcohol from the Government through OHID, for 4-years, covering the period from 2021/22 to 2024/25.

## **1. Introduction and Background**

- 1.1 Substance misuse is defined as intoxication by or regular excessive consumption of and/or dependence on psychoactive substances, leading to social, psychological, physical, or legal problems.
- 1.2. Increasing and higher risk of drugs and drinking creates a huge burden on the health (and wider public sector) system both in terms of the cost of treating alcohol related diseases and the impact on hospital and primary care demand. It is associated with a wide range of problems, including physical health problems such as cancer and heart disease.
- 1.3. LBBD has commissioned Integrated open access and specialist services that enable people who misuse drug and/ or alcohol to access treatment and work towards recovery. The current contract provides a Trauma Informed Approach

(TIA), prescribing, structured drug and alcohol programmes, counselling, needle exchange and BBV (Blood Born Virus) testing.

- 1.4. The service offers an addiction to medicine treatment pathway to support those individuals who are either prescribed pain killers or purchase them over the counter and have subsequently become dependent on them.
- 1.5. The criminal justice provision in the service, supporting offenders through the court process and advocating on their behalf. Individuals that are due to be released from prison will be contacted in preparation for returning into the community.
- 1.6. The integrated substance misuse service, St Luke's, has continued to be successful in engaging and providing treatment to the most vulnerable residents who are using Drugs and/or Alcohol, either through the voluntary route or those referred through the criminal justice system.
- 1.7. During the period 2021/22 Barking and Dagenham received additional funding from the Government through the Office for Health Improvement and Disparities (OHID), previously known as PHE (Public Health England), initial funding came through the Universal Grant £384,000 which has been proportioned between the adult and young people which has enabled the services to set up Complex Criminal Justice Team (CCJT). The CCJT engages with both young people and adult service users who are using substances and in the criminal justice system.
- 1.8. Following year 2022/23, the funding comes through the Supplementary Grant, the borough received £394,998 and for the period 2023/24, the borough received £432,581, which has enabled the Borough to sustain the CCJT and for 2024/25 the borough will receive £709,925 which will enable us to enhance the offer.
- 1.9. To sustain the service for 12-month (2023/24) the total contract value will be £1,836,351.00 which includes the Supplementary Grant.
- 1.10. The Government launched its 10-year drug strategy in December 2021, "From harm to hope: a 10-year drug plan to cut crime and save lives", which has led to setting up Combating Drugs Partnership Boards, to take this agenda forward.
- 1.11. The OHID had requested for all boroughs to undertake a drug and alcohol 'Needs Assessment', which was commissioned and completed December 2022.
- 1.12. In addition, we commissioned a Cultural Competence Review given the shift in the ethnic profile of Barking & Dagenham in the past 20-years from majority White British, reviewing the way in which we deliver strategies and services to best engage with, and meet the needs of, it's now global majority residents in 2023, which was completed in May 2023.
- 1.13. Despite the challenges, during the period 2021/22 with the pandemic, the service had 990 service users in treatment, which is illustrated in the table below and provides a breakdown substance. Opiate being the main drug, followed by Alcohol only.

<b>Substance Category</b>	<b>Nos in Treatment</b>
Alcohol only (Alc)	305

Alcohol and non-opiate only (A&N)	167
Non-opiate only (Non-o)	165
Opiate (Opi)	353
<b>Total Clients</b>	<b>990</b>

1.14. The table below shows that there were 574 new presentations into the service during the period 2021-22, with Alcohol only as the high in presentations, followed by Alcohol and non-opiate only.

Substance Category	New Presentations
Alcohol only (Alc)	214
Alcohol and non-opiate only (A&N)	126
Non-opiate only (Non-o)	109
Opiate (Opi)	125
<b>Total Clients</b>	<b>574</b>

(Source: National Drug Treatment Monitoring System (NDTMS) 2020/21))

## Current Contract Arrangement

- 1.15. In April 2018, CGL (Change, Grow, Live) were awarded the contract for a three-year period (2018/29, 2019/20, 2020/21) with the option to extend for two years on an annual basis, taking the total period of the contract to a potential five years to which ended on 31<sup>st</sup> March 2023.
- 1.16. The initial duration of the contract for CGL was five-years (three-years with an additional two-years extension on an annual basis), contact values during this period from 1st April 2018 until 31st March 2023, was £7,996,783.
- 1.17. We are currently going through the retendering to procure a new contract, which will be implemented from 1st April 2024, extending the service contract for 12-months will ensure continuation of integrated service for a vulnerable population.
- 1.18. Unfortunately, there is no extension provision in the existing service contract which ended on 31st March 2023.
- 1.19. The annual value of the contract is £1,836,351 for 2023/24, which includes:
- £1,599,663 Public Health Core Grant
  - £236,688.76 portion of the Supplementary Grant from The Office for Health Improvements and Disparities (OHID)
- 1.20. We are requesting a variation for 12-months (1st April 2023 to 31st March 2024) for the incumbent providers, CGL, this includes up to a 3-month period mobilisation phase for the new service. The contract value will not exceed more than 50% of the value of the original contract or the framework agreement.

1.21. It is regretted that a retrospective waiver is required. Initially it was expected that a new service contract would be in place this financial year and as such the current contract would not need to be extended. The reason(s) for delay were:

- the undertaking of a comprehensive needs analysis required by the Office for Health Improvement and Disparities (OHID),
- In addition, a cultural competency analysis followed that has informed the service specification of the new service in relation to better meeting the needs of a diverse population.
- Finally, OHID (Grant Manager) had indicated that it was going to undertake a national Substance Misuse Direct Purchasing System (DPS) from which Local Authorities could undertake 'mini re procurements or direct award. However, OHID has been unable to deliver this procurement at the scale and pace indicated. Alongside a number of other local authorities, Barking and Dagenham has been forced to go out to full procurement late, which it is now taking place.

## **2. Proposed Procurement Strategy**

### **2.1 Outline specification of the works, goods or services being procured**

#### **2.1.1 Integrated substance misuse service (drug and alcohol service)**

Core elements of the service delivered are:

2.1.2 The Community Integrated Substance Misuse Service is for Barking & Dagenham residents from the age of 18 experiencing problems with drugs and/or alcohol, family members, and other professionals working with residents with substance misuse addition. The service will work within a results-based accountability model that will have an integrated approach with staff working within the Criminal Justice System, such as Probation, Prison's and Police Custody, Anti-Social Behaviour (ASB) Teams, Community Mental Health Teams (CMHT), Pharmacies, GP's and A&E, Hospital departments.

2.1.3 The service will continue to provide:

- Supporting vulnerable service users to maintain abstinence.
- Encouraging ambition and aspiration and enable them to be realised through recovery plan goals.
- Enabling and encouraging service users who misuse substances to remain in or re-engage with education, training, and employment.
- Helping service users with substances to manage their behaviours and emotions appropriately, and to challenge inappropriate or damaging behavior and attitudes.



- Identifying service users 'At-Risk' of abuse or harm and working with them and other agencies to manage situations with a high standard of practice.
- Providing a unitary service with no clinical/talking therapy split.
- Promoting physical, mental, and sexual health on an individual and service wide level.
- Developing effective and meaningful user participation that achieves evidenced results for the service and the individuals involved.
- Working with people with service users to build, or rebuild, safe and positive social relationships and networks, particularly with their families.

## 2.2 **Estimated Contract Value, including the value of any uplift or extension period**

2.2.1 Total Value £1,836,351.76 (12-months):

- £1,599,663 Public Health Core Grant
- £236,688.76 portion of the Supplementary Grant from The Office for Health Improvements and Disparities (OHID)

## 2.3 **Duration of the contract, including any options for extension**

2.3.1 12-months from 1st April 2023 to 31st March 2024, (this includes up to a 3-month period for mobilisation phase for the new service); however, if the incumbent provider is successful, they will not require lead in time and will be able to deliver the new contract immediately.

## 2.4 **Is the contract subject to (a) the Public Contracts Regulations 2015 or (b) Concession Contracts Regulations 2016? If Yes to (a) and contract is for services, are the services for social, health, education or other services subject to the Light Touch Regime?**

2.4.1 Yes, subject to the Light Touch Regime

## 2.5 **Recommended procurement procedure and reasons for the recommendation**

2.5.1 Waive the requirement to tender and approve the variation of the contract for the provision of St Luke's service with CGL for a period of 12-months from 1st April 2023 to 31st March 2024, (this includes up to a 3-month period for mobilisation phase for the new service) in accordance with the Council's Contract Rules

**Reasons:**

- 2.5.2 While we are currently in the process of retendering the contract for the adult integrated substance misuse, we will need to ensure there is a service in place that will continue to engage with residents who are using substances, including those have been identified as vulnerable.
- 2.5.3 The service will need to continue to work and provide support to service users 18-years and over, including those who are within the criminal justice system, such as those who are identified with substances by the Probation Service.
- 2.5.4 During the procurement of new services we have taken into consideration the following:
- the Governments 10-year Drug Strategy “From harm to hope: a 10-year drug plan to cut crime and save lives.
  - the recommendations from the Needs Assessment are incorporated within the service specification and contract.
  - Cultural Competency recommendations.
  - Supplementary Grant is aligned with the main core grant to enhance the Integrated Complex Criminal Justice Team.
  - To ensure continuation of service for a vulnerable population

## 2.6 **The contract delivery methodology and documentation to be adopted**

- 2.6.1 The contract document will be a Deed of Variation prepared by the legal team to vary the termination date of the contract.
- 2.6.2 The Community Integrated Substance Misuse Service is for Barking & Dagenham residents from the age of 18 plus, experiencing problems with drugs and/or alcohol, family members, and other professionals working with residents with substance misuse addition. The service will work within a results-based accountability model that will have an integrated approach with staff working within the Anti-Social Behaviour (ASB), Probation, Community Mental Health Teams (CMHT), GP’s and A&E, Hospital departments.

## 2.7 **Outcomes, savings and efficiencies expected as a consequence of awarding the proposed contract**

- 2.7.1 To act as a gateway into drug and alcohol treatment for residents of Barking and Dagenham and case manage service users to recovery:
- To work with people with drug and alcohol problems to build, or rebuild, safe and positive social relationships and networks, particularly with their families.
  - The service will continue to engage with adults 18-years and over and provide interventions regarding their drug and/or alcohol use.

- Enhance the engagement of adults who are in the criminal justice system, such as the Probation Service.
- Continue to provide continuity of care and engage with offenders released from prison and returning to the borough.
- To provide high quality, harm reduction interventions that are flexible to meet the changing demographics of the borough.
- To work in partnership with the Local Authority, Health, Criminal Justice and other key stakeholders
- To work and support Adult Social Care teams and provide Hidden Harm work.
- To provide needle exchange service within the service and local pharmacies.
- To assess and support service users who require residential rehabilitation and/or detoxification.
- Continue to provide specialist prescribing for stabilisation, reduction and detoxification for the following:
  - Opioid dependency.
  - Dependent Alcohol users assessed as safe for community detoxification.

2.7.2 A comprehensive review and re-procurement of the treatment system to operate under a new model that delivers recovery focussed services in a more streamlined and cost-effective way will benefit substance misusers, their families, and the local community. It will also mean that significant savings will be achieved with minimal impact to service recovery outcomes.

## 2.8 **Criteria against which the tenderers are to be selected and contract is to be awarded**

2.8.1 N/A

## 2.9 **How the procurement will address and implement the Council's Social Value policy**

2.9.1 The Council's social value responsibilities are taken through its vision: One Borough; One Community; No one Left Behind. Through the variation of the contracts, the Council will ensure service continuity that meets the needs of the local population who misuse drug and alcohol and their families.

2.9.2 The Council will work with the provider to seek to identify local opportunities for apprenticeships, training and recruitment for Barking and Dagenham residents.

## 2.10 London Living Wage (LLW)

2.10.1 The requirement of LLW will continue to be met by the provider.

## 2.11 How the Procurement will impact/support the Net Zero Carbon Target and Sustainability

2.11.1 The provider will continue to provide a review and delivery plan of how they will support Barking and Dagenham's Net Zero Carbon Target.

## 3. Options Appraisal

3.1 Council needs to commission services for adults who misuse drugs or alcohol. Having no service in place is likely to lead to the deterioration in individuals' health and circumstances and for some may result in death. This could also lead to an increase in health and social care costs and an increase in crime. Reduction or cessation of these services would affect the performance against substance misuse Public Health Outcomes Framework (PHOF) indicator.

## 4. Waiver

4.1 To waive the requirement to tender and approve the variation of the contract for the provision of Adult Substance Misuse (Drug and Alcohol) Integrated Service St Luke's Service with CGL for a period of 12-months from 1st April 2023 to 31st March 2024 in accordance with the Council's Contract Rules.

4.2 The ground upon which this waiver is required is Contract Rule 6.6.(e) The circumstances of the proposed contract are covered by legislative exemptions (whether under EU or English law).

## 5. Consultation

5.1 Key stakeholders have been consulted before the commencement of the competitive procurement process including service users, carers, and key partners in health, social care, criminal justice, and housing agencies.

## 6. Corporate Procurement

**Implications completed by:** Adebimpe Winjobi, Head of Public Health Programme

6.1 This report is seeking the approval to waive the requirement to tender and approve the variation of the contract for the provision of Adult Substance Misuse (Drug and Alcohol) Integrated Service to CGL for a period of 12-months from 1st April 2023 to 31st March 2024 in accordance with the Council's Contract Rules due to unforeseen circumstances.

- 6.2 It has been stated that the council is currently in the process of retendering the contract for the young people integrated substance misuse and during this period the council need to ensure there is a service in place that will continue to engage with adults who are using substances in the borough, including those have been identified as vulnerable.
- 6.3 The contract variation for this contract is based is Reg 72(c) of PCR 2015 and can justify the use as:
- The need arises from circumstances which a ‘diligent contracting authority’ could not have foreseen- in this case a delay to the procurement of a new service
  - The overall nature of the contract is not altered;
  - The increase in price is less than or equal to 50% of the contract value.
- 6.4. support the recommendation if this report.

## **7. Financial Implications**

### **Implications completed by Katherine Heffernan – Head of Service Finance:**

- 7.1 This report seeks Council’s approval for retrospective variation and extension of the contract for the provision of adult substance misuse (drug and alcohol) integrated service with Change Grow Live (CGL) for a period of 12 months from 1st April 2023 to 31st March 2024.
- 7.2 The contract extension is required to ensure continuation of the integrated service for Borough residents who are using substances during contract re-tendering period. This interim measure is required because the Council had been expecting to use a national Substance Misuse DPS but the Office for Health Improvement and Disparities (OHID) did not put this in place in the expected timeline.
- 7.3 The cost of the extension will be £1,836,352 which can be fully funded from Public Health grant and OHID supplemental grant as set out in paragraph 2.2.1.
- 7.4 This cost is an increase from the previous contract value (an average of £1,599,357 a year) as the supplemental grant has been used to expand and enhance the service. The commissioner has worked with the current provider to ensure that the service continues to meet the needs of users and offers value for money.

## **8. Legal Implications**

**Implications completed by:** Kayleigh Eaton, Principal Contracts and Procurement Solicitor, Law & Governance

- 8.1 This report is seeking retrospective approval to vary the contract for the Adult Substance Misuse (Drug and Alcohol) Integrated Service in order to extend by an additional 12 months. The Council currently has a contract in place with Change Grow Live. It is noted the initial term of the contract was from 1 April 2018 for an initial 3 years with an option to extend on a 1+1 basis. The contract period therefore ended in 31st March 2023 with a contract extension being put in place. This report seeks retrospective approval for this extension by way of a modification.
- 8.2 This report notes that the need has arisen due to a needs assessment which was requested by Office for Health and Improvement and Disparities (OHID). The aim of the assessment was to provide an analysis of current substance misuse needs and identify health inequalities and unmet needs to shape commissioning going forward. If the Council undertook the re-procurement prior to the results being known then there could have been a possibility that a new procurement would not have covered the recommendations of the review and therefore the Council's full requirements. The requirement for this review to be carried out so close to the end of the contract was not foreseen in the original procurement.
- 8.3 Regulation 72 (c) of the Public Contracts Regulations 2015 states that modifications to existing contracts are permitted where the need for modification has been brought about by circumstances which a diligent contracting authority could not have foreseen, the modification does not alter the overall nature of the contract and the increase in price does not exceed more than 50% of the original contract value.
- 8.4 As noted above the need for this extension could not have been foreseen. The services during the additional 12 months will not differ from those originally procured so it will therefore not alter the overall nature of the contract and the increase in price is approximately 23%, which does not exceed the 50% threshold.
- 8.5 The Council will be required to publish a notice of this modification in accordance with Regulation 72 (3).
- 8.6 The extension should be recorded in writing and signed by all parties.

## 9. Other Implications

### 9.1 Risk and Risk Management – N/A



### 9.2 TUPE, other staffing and trade union implications – N/A

### 9.3 Corporate Policy and Equality Impact – Substance misuse is linked with a range of health inequalities including poor physical and mental health, hidden harm, family

breakdown and involvement in the criminal justice system will ensure that services for people who misuse alcohol and/ or drugs remain available and are accessible to service users across the gender, ethnicity, age, faith, disability, sexuality, and all protected characteristics under the Equality Act 2010.

There is scope in the longer term to have a positive effect on equalities through the commissioning of more flexible models of service delivery to better meet the needs and preferences of different groups within the population. In evaluating Social Value proposals, additional consideration will be given to innovative ways of outreaching to those groups who are currently underrepresented in services based on the protected characteristics including race and ethnicity, gender reassignment, sex and sexual orientation.

Also included will be outreach to faith groups to raise awareness of drug and alcohol misuse and services. To support service development a Cultural Competency Needs Analysis has been commissioned to ensure an inclusive and culturally inclusive approach to ongoing service delivery. Service user groups are seen to support service development in relation to effectiveness and user input. Given their importance the successful provider(s) will be expected to facilitate the service user voice in the development of services.

- 9.4 **Safeguarding Adults and Children** – Substance misuse places vulnerable adults and children at risk. Substance misuse presents a range of behaviours that pose a risk to the individuals themselves and others around them and can amplify a range of safeguarding concerns, including domestic abuse and hidden harm. The borough’s systems for reporting and investigating both adult and child safeguarding concerns have established links to drug and alcohol services, and the borough recognises the need for commissioning interventions to continue to foster these links and provide training for those involved in safeguarding. All agencies commissioned to work with adults and young people are aware of LBBD safeguarding procedures and must adhere to incident reporting as part of their contractual obligations.
- 9.5 **Health Issues** – The proposal is in line with the outcomes and priorities of the joint Health and Wellbeing Strategy. The award of the contract should further enhance the quality of and access to substance misuse services in the borough for adults and young people. The proposal will have a positive effect on our local community by improved services with greater accessibility and cultural competence thus helping to reduce health inequalities.
- 9.6 **Crime and Disorder Issues** – Substance misuse impacts on many areas of crime and disorder including anti-social behaviour and offending behaviour. By commissioning services that prevent people from using substances and supporting those that are using in a problematic way will support the Partnership in reducing offending behaviour. Those individuals that are drug tested positive for Class A drugs in police custody will be compelled to engage in drug treatment
- 9.7 **Property / Asset Issues** – The proposal will have a neutral impact upon the property or assets.

- 9.8 **Business Continuity / Disaster Recovery** – The proposal will have a neutral impact on business Continuity/Disaster Recovery. However, in relation to service continuity the incoming providers will be expected to provide a business continuity plan within one month of mobilisation.

**Public Background Papers Used in the Preparation of the Report:**

- Drug Market Profile Report 2019/20
- Governments 10-years drug strategy December 2021
- Need Assessment December 2022
- Cultural Competence Review May 2023

**List of appendices:**

Appendix 1 Substance Misuse Equalities Impact Assessment (Adult)



Appendix 3 Adult  
Substance Misuse S

For further guidance on the completion of this report template please see **Reports for Council meetings – A Guide for Officers** at [Brand and templates \(sharepoint.com\)](#)



## Procurement Strategy Report Template

### Signing-off Sheet

<b>Title of Report:</b>	Contract Variation Young People Substance Misuse (Drug and Alcohol) Integrated Service		
<b>Name of Meeting:</b>	Procurement Board	<b>Date of Meeting:</b>	18/09/2023
<b>This Report is currently listed on the Forward Plan: (Yes / No)</b>			

	<b>Name of consultee:</b>	<b>Clearance given:</b> (Yes / No)
<b>Required Consultees on Draft Report</b> (these must be consulted or an explanation given i.e. not relevant)		
<b>Cabinet Member(s):</b>	Councillor Worby	Yes
<b>Ward Members</b> (for Ward related issues)		
<b>Departmental Finance</b> (via <a href="mailto:financialimplication@lbbd.gov.uk">financialimplication@lbbd.gov.uk</a> )	Katherine Heffernan	Yes
<b>Corporate Risk</b> (via <a href="mailto:christopher.martin@lbbd.gov.uk">christopher.martin@lbbd.gov.uk</a> )		
<b>Corporate Procurement</b> (via <a href="mailto:euan.beales@lbbd.gov.uk">euan.beales@lbbd.gov.uk</a> )	Adebimpe Winjobi	Yes
<b>HR</b> (via <a href="mailto:gail.clark@lbbd.gov.uk">gail.clark@lbbd.gov.uk</a> )		
<b>Legal Practice</b> (via <a href="mailto:legalimplications@lbbd.gov.uk">legalimplications@lbbd.gov.uk</a> )	Kayleigh Eaton	Yes
<b>Corporate Policy and Equality Impact</b> (via <a href="mailto:Ce-Strategy@lbbd.gov.uk">Ce-Strategy@lbbd.gov.uk</a> )		
<b>Property/Asset Management</b> (via <a href="mailto:anthony.wiggins@lbbd.gov.uk">anthony.wiggins@lbbd.gov.uk</a> )		
<b>Adults' and Children's Safeguarding</b> (via <a href="mailto:christopher.bush@lbbd.gov.uk">christopher.bush@lbbd.gov.uk</a> )	Chris Bush	Yes
<b>Public Health</b> (via <a href="mailto:matthew.cole@lbbd.gov.uk">matthew.cole@lbbd.gov.uk</a> )	Mathew Cole	Yes
<b>Sustainability and Net Zero</b> (via <a href="mailto:neil.pearce@lbbd.gov.uk">neil.pearce@lbbd.gov.uk</a> )		
<b>Business Continuity and Disaster Recovery</b> (via <a href="mailto:mandy.beacher@lbbd.gov.uk">mandy.beacher@lbbd.gov.uk</a> )		
<b>Other Consultees (including external bodies):</b> (To be completed as appropriate)		

<b>Title:</b> Contract Variation Young People Substance Misuse (Drug and Alcohol) Integrated Service	
<b>Report of</b> Councillor Maureen Worby, Cabinet Member for Adult Social Care and Health Integration	
<b>Open Report / Open Report with Exempt Appendix / Fully Exempt Report</b> Open Report	<b>For Decision</b> Yes
<b>Wards Affected:</b> All	<b>Key Decision:</b> Yes
<b>Report Author:</b> Amolak Tatter, Commissioning Manager	<b>Contact Details:</b> Tel: 0797 200 3623 E-mail: <a href="mailto:Amolak.tatter@lbbd.gov.uk">Amolak.tatter@lbbd.gov.uk</a>
<b>Accountable Director:</b> Matthew Cole, Director Public Health	
<b>Accountable Executive Team Director:</b> Elaine Allegretti, Director of People and Resilience	
<p><b>Summary:</b></p> <p>To waive the requirement to tender and approve the variation of the contract for the provision of Subwize Service with V-I-A formally known as WDP for a period of 12-months from 1st April 2023 to 31st March 2024 in accordance with the Council's Contract Rules</p> <p>This is a retrospective waiver in relation to a current contract where a service is being provided to residents. Alongside this, new substance misuse services are in the process of being procured with an anticipated start date of new contracts on 1 April 2024. Agreement to extend the contract will ensure service continuity during procurement and enable payment for services already carried out this financial year 2023-24.</p> <p>The current value of the contract for the year 1 April 2023-31 March 2024 is £506,424 (Inclusive of the Supplementary Grant)</p> <p>It is regretted that a retrospective waiver is required. Initially it was expected that a new service contract would be in place this financial year and as such the current contract would not need to be extended. The reason(s) for delay were:</p> <ul style="list-style-type: none"> <li>• the undertaking of a comprehensive needs analysis required by the Office for Health Improvement and Disparities (OHID),</li> <li>• In addition, a cultural competency analysis followed that has informed the service specification of the new service in relation to better meeting the needs of a diverse population.</li> <li>• Finally, OHID (Grant Manager) had indicated that it was going to undertake a national Substance Misuse Direct Purchasing System (DPS) from which Local</li> </ul>	

Authorities could undertake 'mini re procurements or direct award. However, OHID has been unable to deliver this procurement at the scale and pace indicated. Alongside a number of other local authorities, Barking and Dagenham has been forced to go out to full procurement late, which it is now taking place

### **Recommendation(s)**

The Health and Wellbeing Board is recommended to:

- (i) Agree that the Council approves the retrospective modification of the contract for the provision of Subwize service with V-I-A in order to extend for a period of 12-months from 1st April 2023 to 31st March 2024, in accordance with the Council's Contract Rules.

### **Reason(s)**

This retrospective waiver is required to ensure service continuity during the financial year 2023-24 and to enable payment for services provided to date. The treatment of drug and or alcohol addiction is important to support recovery, families, reduce acquisitive crime and improve physical and mental health.

Alongside this the Borough is in the process of procuring a new CYP substance misuse service. The new contract is anticipated to start 1 April 2024. Extending the current contract to 31 March 2024 will allow procurement to take place inclusive of a necessary 3-month lead-in for the new service. The tender process has already begun with a number of well-known organisations in the field expressing interest in working for Barking and Dagenham.

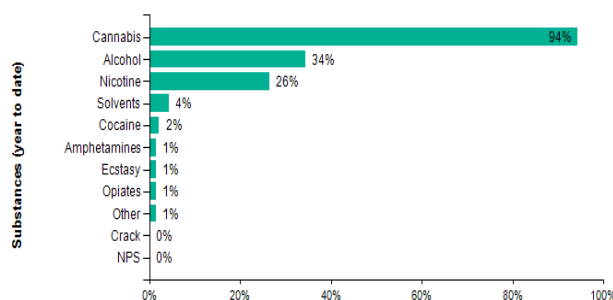
The variation to the contract will ensure we take into consideration the recommendations from the Needs Assessment the Government 10-year drug strategy and aligning additional Supplementary Grant within main service delivery, as outlined below.

The borough has received additional funding for drug and alcohol from the Government through OHID, for 4-years, covering the period from 2021/22 to 2024/25.

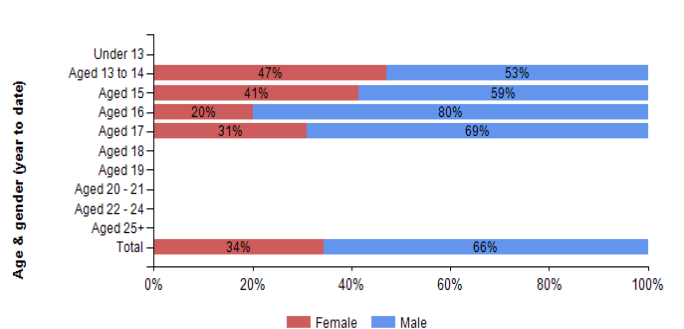
## **1. Introduction and Background**

- 1.1 Substance misuse is defined as intoxication by or regular excessive consumption of and/or dependence on psychoactive substances, leading to social, psychological, physical, or legal problems.
- 1.2. Increasing and higher risk of drugs and drinking creates a huge burden on the health (and wider public sector) system both in terms of the cost of treating alcohol related diseases and the impact on hospital and primary care demand. It is associated with a wide range of problems, including physical health problems such as cancer and heart disease.

- 1.3. LBBD has commissioned an Integrated open access and specialist services that enable young people who misuse drug and/or alcohol to access treatment and work towards recovery. The current contract is providing a Trauma Informed Approach (TIA), structured drug and alcohol programmes, counselling, and Hidden Harm. If a young person is identified as using opioid's, the Subwise Service will work in collaboration with the St Luke's prescribing service to ensure the young person is provided with the appropriate clinical treatment.
- 1.4. Young people who have been identified by the YOS, using substances and committing criminal offences, a referral is made to the substance misuse worker who is based within the YOS. This has enabled both the YOS and the substance misuse worker to work collaboratively, sharing information, ensuring that the young person is receiving a robust case management plan.
- 1.5. The service has built a robust relationship with CAMHS (Child and Adolescent Mental Health Services) and are working in collaboration to provide an extensive range of integrated community and mental health support and treatment to young people who are identified with dual diagnosis.
- 1.6. During the period 2021/22 Barking and Dagenham received additional funding from the Government through the Office for Health Improvement and Disparities (OHID), previously known as PHE (Public Health England), initial funding came through the Universal Grant £384,000 which has been proportioned between the young people and the adult service which has enabled the services to set up Complex Criminal Justice Team (CCJT). The CCJT engages with both young people and adult service users who are using substances and in the criminal justice system.
- 1.7. Following year 2022/23, the funding comes through the Supplementary Grant, the borough received £394,998 and for the period 2023/24, the borough received £432,581, which has enabled the Borough to sustain the CCJT and for 2024/25 the borough will receive £709,925 which will enable us to enhance the offer.
- 1.8. To sustain the service for 12-month (2023/24) the total contract value will be £506,424 which includes the Supplementary Grant.
- 1.9. The Government launched its 10-year drug strategy in December 2021, "From harm to hope: a 10-year drug plan to cut crime and save lives", which has led to setting up Combating Drugs Partnership Boards, to take this agenda forward.
- 1.10. The OHID had requested for all boroughs to undertake a drug and alcohol 'Needs Assessment', which was commissioned and completed December 2022.
- 1.11. During the period 2021/22 the service had 140 young people in treatment, of which 110 were new presentations and as the table below highlights that Cannabis is the main substance, followed by alcohol and then Nicotine. In the last couple of years, we have seen a dramatic increase in cannabis use and the way that cannabis is being used, moving away from traditional smoking with tobacco to less conventional ways such as via vapes and edibles.



1.12. The table below shows the number of young people engaging with the service between the ages of 13 to 17, with the gender breakdown.



(Source: NDTMS 2020/21)

1.13. Hidden Harm has increased since the pandemic started with many children and young people exposed to parental or carers drug and/or alcohol use.

### Current Contract Arrangement

1.14. In April 2018, formally known as WDP, with the recently rebranding change to V-I-A, were awarded the contract for a three-year period (2018/29, 2019/20, 2020/21) with the option available to extend for 2 years on an annual basis, taking the total period of the contract to a potential five years to the end of March 2023.

1.15. The initial duration of the contract for V-I-A was five-years (three-years with an additional two-years extension on an annual basis), contact values during this period from 1st April 2018 until 31st March 2023 was £1,676,491.

1.16. We are currently going through the retendering to procure a new contract, which will be implemented as from 1st April 2024, extending the service contract for 12-months will ensure continuation of integrated service for a vulnerable population.

1.17. Unfortunately, there is no extension provision in the existing service contract which ended on 31st March 2023.

1.18. The annual value of the contract is £506,424 for 2023/24, which includes:

- £332,780 Public Health Core Grant
- £173,644 portion of the Supplementary Grant from The Office for Health Improvements and Disparities (OHID).

1.19. We are requesting a variation for 12 months (1<sup>st</sup> April 2023 to 31<sup>st</sup> March 2024) for the incumbent providers, V-I-A, this includes up to a 3-month period mobilisation

phase for the new service. The contract value will not exceed more than 50% of the value of the original contract or the framework agreement.

- 1.20. It is regretted that a retrospective waiver is required. Initially it was expected that a new service contract would be in place this financial year and as such the current contract would not need to be extended. The reason(s) for delay were:
- the undertaking of a comprehensive needs analysis required by the Office for Health Improvement and Disparities (OHID),
  - Finally, OHID (Grant Manager) had indicated that it was going to undertake a national Substance Misuse Direct Purchasing System (DPS) from which Local Authorities could undertake 'mini re procurements or direct award. However, OHID has been unable to deliver this procurement at the scale and pace indicated. Alongside a number of other local authorities, Barking and Dagenham has been forced to go out to full procurement late, which it is now taking place.

## **2. Proposed Procurement Strategy**

### **2.1 Outline specification of the works, goods or services being procured**

#### **2.1.1 Integrated substance misuse service (drug and alcohol service)**

Core elements of the service delivered are:

- 2.1.2 The Community Integrated Substance Misuse Service is for Barking & Dagenham young people under the of 21 and where applicable the transitional age group 21-24 experiencing problems with drugs and/or alcohol, family members, and other professionals working with residents with substance misuse addition. The service will continue to work within a results-based accountability model that will have an integrated approach with staff working within the Children, Young People and Families, Anti-Social Behaviour (ASB), Youth Offending Service (YOS), Child and Adolescent Mental Health Services (CAMHS), this is not an exhausted list.

#### **2.1.3 The service will continue to provide:**

- Supporting vulnerable young people to maintain abstinence.
- Encouraging ambition and aspiration and enable them to be realised through recovery plan goals.
- Enabling and encouraging young people who misuse substances to remain in/or re-engage with education, training, and employment.
- Help and support young people with substances to manage their behaviours and emotions appropriately, and to challenge inappropriate or damaging behavior and attitudes.
- Identifying young people 'At-Risk' of abuse or harm and working with them and other agencies to manage situations with a high standard of practice.
- Providing a unitary service with no clinical/talking therapy split.
- Promoting physical, mental, and sexual health on an individual and service wide level.

- Developing effective and meaningful user participation that achieves evidenced results for the service and the individuals involved.
- Working with young people to build, or rebuild, safe and positive social relationships and networks, particularly with their families.

## 2.2 **Estimated Contract Value, including the value of any uplift or extension period**

### 2.2.1 Total Value £506,424 (12-months):

- £332,780 Public Health Core Grant
- £173,644 portion of the Supplementary Grant from The Office for Health Improvements and Disparities (OHID)

## 2.3 **Duration of the contract, including any options for extension**

2.3.1 12-months from 1st April 2023 to 31st March 2024, (this includes up to a 3-month period for mobilisation phase for the new service).; however, if the incumbent provider is successful, they will not require lead in time and will be able to deliver the new contract immediately.

## 2.4 **Is the contract subject to (a) the Public Contracts Regulations 2015 or (b) Concession Contracts Regulations 2016? If Yes to (a) and contract is for services, are the services for social, health, education or other services subject to the Light Touch Regime?**

2.4.1 Yes, subject to the Light Touch Regime

## 2.5 **Recommended procurement procedure and reasons for the recommendation**

2.5.1 Waive the requirement to tender and approve the variation of the contract for the provision of Subwize Service with V-I-A for a period of 12-months from 1st April 2023 to 31st March 2024, (this includes up to a 3-month period for mobilisation phase for the new service) in accordance with the Council's Contract Rules.

### **Reasons:**

2.5.2 While we are currently in the process of retendering the contract for the young people integrated substance misuse, during this period we will need to ensure there is a service in place that will continue to engage with young people who are using substances, including those have been identified as vulnerable.

2.5.3 The service will need to continue to work and provide support to young people under the age 21-years who are within the criminal justice system, such as those who are identified with substances by the Youth Offending Service, including the transitional age (21 – 24 years old).

- 2.5.4 The service will continue to provide support and training to school staff and substance misuse awareness sessions and engage with young people, within the school setting.
- 2.5.5 During the process we need to take into consideration the following:
- Consider the Governments 10-year Drug Strategy “From harm to hope: a 10-year drug plan to cut crime and save lives.
  - Ensure the recommendations from the Needs Assessment are incorporated within the service specification and contract.
  - Cultural Competency recommendations are taken into consideration.
  - Supplement Grant is aligned with the main core grant to enhance the Integrated Complex Criminal Justice Team.
  - To ensure continuation of service for a vulnerable population and ensuring the safety and wellbeing, during the pandemic and allow time for the completion of the strategic review of the service.

## 2.6 **The contract delivery methodology and documentation to be adopted**

- 2.6.1 The contract document will be a Deed of Variation prepared by the legal team to vary the termination date of the contract.
- 2.6.2 The Community Integrated Substance Misuse Service is for Barking & Dagenham young people up to the age of 21 and where applicable the transitional age group 21-24 experiencing problems with drugs and/or alcohol, family members, and other professionals working with residents with substance misuse addiction. The service will work within a results-based accountability model that will have an integrated approach with staff working within the Anti-Social Behaviour (ASB), Probation, Community Mental Health Teams (CMHT), GP’s and A&E, Hospital departments.

## 2.7 **Outcomes, savings and efficiencies expected as a consequence of awarding the proposed contract**

- 2.7.1 To provide advice, information and treatment for those young people, who reside in the borough, aged up to 21, including transition age up 24-years who are affected by substance misuse (drug and/or alcohol) to help them grow and develop as an individual and reach their full potential in society:
- To work with young people with drug and alcohol problems to build, or rebuild, safe and positive social relationships and networks, particularly with their families.



- Enhance the engagement of young people who are in the criminal justice system, such as the Youth Offending Service, including the transitional age group.
- To provide high quality, harm reduction interventions that are flexible to meet the changing demographics of the borough.
- The service will continue to deliver to reduce the long-term demand on services by focusing on prevention and early and effective interventions to prevent escalation and crisis.
- To support and deliver workshops to both the students and teaching staff in schools and colleges.
- To work in partnership with the Local Authority, Health, Criminal Justice and other key stakeholders
- To work and support Children Social Care teams and provide Hidden Harm work.

2.7.2 A comprehensive review and re-procurement of the treatment system to operate under a new model that delivers recovery focussed services in a more streamlined and cost-effective way will benefit substance misusers, their families, and the local community. It will also mean that significant savings will be achieved with minimal impact to service recovery outcomes.

**2.8 Criteria against which the tenderers are to be selected and contract is to be awarded**

2.8.1 N/A

**2.9 How the procurement will address and implement the Council's Social Value policy**

2.9.1 The Council's social value responsibilities are taken through its vision: One Borough; One Community; No one Left Behind. Through the variation of the contracts, the Council will ensure service continuity that meets the needs of the local population who misuse drug and alcohol and their families.

2.9.2 The Council will work with the provider to seek to identify local opportunities for apprenticeships, training and recruitment for Barking and Dagenham residents.

**2.10 London Living Wage (LLW)**

2.10.1 The requirement of LLW will continue to be met by the provider.

**2.11 How the Procurement will impact/support the Net Zero Carbon Target and Sustainability**

2.11.1 The provider will continue to provide a review and delivery plan of how they will support Barking and Dagenham's Net Zero Carbon Target.

### **3. Options Appraisal**

- 3.1 Council needs to commission services for adults who misuse drugs or alcohol. Having no service in place is likely to lead to the deterioration in individuals' health and circumstances and for some may result in death. This could also lead to an increase in health and social care costs and an increase in crime. Reduction or cessation of these services would affect the performance against substance misuse Public Health Outcomes Framework (PHOF) indicator.

### **4. Waiver**

- 4.1 To waive the requirement to tender and approve the variation of the contract for the provision of Subwize Service with V-I-A formally known as WDP for a period of 12-months from 1st April 2023 to 31st March 2024 in accordance with the Council's Contract Rules.
- 4.2 The ground upon which this waiver is required is Contract Rule 6.6. (e) The circumstances of the proposed contract are covered by legislative exemptions (whether under EU or English law).

### **5. Consultation**

- 5.1 Key stakeholders have been consulted before the commencement of the competitive procurement process including service users, carers, and key partners in health, social care, criminal justice, and housing agencies.

### **6. Corporate Procurement**

Implications completed by: Adebimpe Winjobi, Head of Public Health Programme

- 6.1 This report is seeking the approval to waive the requirement to tender and approve the variation of the contract for the provision of Subwize Service with V-I-A formally known as WDP for a period of 12-months from 1st April 2023 to 31st March 2024 in accordance with the Council's Contract Rules due to unforeseen circumstances.
- 6.2 It has been stated that the council is currently in the process of retendering the contract for the young people integrated substance misuse and during this period the council need to ensure there is a service in place that will continue to engage with young people who are using substances, including those have been identified as vulnerable.
- 6.3 The contract variation for this contract is based is Reg 72(c) of PCR 2015 and can justify the use as;
- The need arises from circumstances which a 'diligent contracting authority' could not have foreseen- in this case a delay to the procurement of a new service
  - The overall nature of the contract is not altered;

- The increase in price is less than or equal to 50% of the contract value.

6.4. I support the recommendation of this report.

## **7. Financial Implications**

Implications completed by: Katherine Heffernan, Head of Service Finance

- 7.1 This report seeks Council's approval for retrospective variation and extension of the contract for the provision of young people substance misuse (drug and alcohol) integrated (Subwize) service with V-I-A (former WDA) for a period of 12 months from 1st April 2023 to 31st March 2024.
- 7.2 The contract extension is required to ensure continuation of the integrated service for vulnerable young people who are using substances during contract re-tendering period. This interim measure is required because the Council had been expecting to use a national Substance Misuse DPS but the Office for Health Improvement and Disparities (OHID) did not put this in place in the expected timeline.
- 7.3 The cost of the extension will be £506,424 which can be fully funded from Public Health grant and OHID supplemental grant as set out in paragraph 2.2.1.
- 7.4 This cost is an increase from the previous contract value (an average of £335k a year) as the supplemental grant has been used to expand and enhance the service. The commissioner has worked with the current provider to ensure that the service continues to meet the needs of users and offers value for money.

## **8. Legal Implications**

Implications completed by: Kayleigh Eaton, Principal Contracts and Procurement Solicitor, Law & Governance

- 8.1 This report is seeking retrospective approval to vary the contract for the Young People Substance Misuse (Drug and Alcohol) Integrated Service in order to extend by an additional 12 months. The Council had a contract in place with WDP (now known as V-I-A). It is noted the initial term of the contract was from 1 April 2018 for an initial 3 years with an option to extend on a 1+1 basis. The contract period therefore ended in 31<sup>st</sup> March 2023 with a contract extension being put in place. This report seeks retrospective approval for this extension by way of a modification.
- 8.2 This report notes that the need has arisen due to a needs assessment which was requested by Office for Health and Improvement and Disparities (OHID). The aim of the assessment was to provide an analysis of current substance misuse needs and identify health inequalities and unmet needs to shape commissioning going forward. If the Council undertook the re-procurement prior to the results being known then there could have been a possibility that a new procurement would not have covered the recommendations of the review and therefore the Council's full requirements. The requirement for this review to be carried out so close to the end of the contract was not foreseen in the original procurement.

- 8.3 Regulation 72 (c) of the Public Contracts Regulations 2015 states that modifications to existing contracts are permitted where the need for modification has been brought about by circumstances which a diligent contracting authority could not have foreseen, the modification does not alter the overall nature of the contract and the increase in price does not exceed more than 50% of the original contract value.
- 8.4 As noted above the need for this extension could not have been foreseen. The services during the additional 12 months will not differ from those originally procured so it will therefore not alter the overall nature of the contract and the increase in price is approximately 30%, which does not exceed the 50% threshold.
- 8.5 The Council will be required to publish a notice of this modification in accordance with Regulation 72 (3).
- 8.6 The extension should be recorded in writing and signed by all parties.

## 9. Other Implications

### 9.1 Risk and Risk Management – N/A



### 9.2 TUPE, other staffing and trade union implications – N/A

### 9.3 Corporate Policy and Equality Impact – Substance misuse is linked with a range of health inequalities including poor physical and mental health, hidden harm, family breakdown and involvement in the criminal justice system will ensure that services for people who misuse alcohol and/ or drugs remain available and are accessible to service users across the gender, ethnicity, age, faith, disability, sexuality, and all protected characteristics under the Equality Act 2010.

There is scope in the longer term to have a positive effect on equalities through the commissioning of more flexible models of service delivery to better meet the needs and preferences of different groups within the population. In evaluating Social Value proposals, additional consideration will be given to innovative ways of outreaching to those groups who are currently underrepresented in services based on the protected characteristics including race and ethnicity, gender reassignment, sex and sexual orientation.

Also included will be outreach to faith groups to raise awareness of drug and alcohol misuse and services. To support service development a Cultural Competency Needs Analysis has been commissioned to ensure an inclusive and culturally inclusive approach to ongoing service delivery. Service user groups are seen to support service development in relation to effectiveness and user input. Given their importance the successful provider(s) will be expected to facilitate the service user voice in the development of services.

### 9.4 Safeguarding Adults and Children – Substance misuse places vulnerable adults and children at risk. Substance misuse presents a range of behaviours that pose a

risk to the individuals themselves and others around them and can amplify a range of safeguarding concerns, including domestic abuse and hidden harm. The borough's systems for reporting and investigating both adult and child safeguarding concerns have established links to drug and alcohol services, and the borough recognises the need for commissioning interventions to continue to foster these links and provide training for those involved in safeguarding. All agencies commissioned to work with adults and young people are aware of LBBDD safeguarding procedures and must adhere to incident reporting as part of their contractual obligations.

- 9.5 **Health Issues** – The proposal is in line with the outcomes and priorities of the joint Health and Wellbeing Strategy. The award of the contract should further enhance the quality of and access to substance misuse services in the borough for adults and young people. The proposal will have a positive effect on our local community by improved services with greater accessibility and cultural competence thus helping to reduce health inequalities.
- 9.6 **Crime and Disorder Issues** – Substance misuse impacts on many areas of crime and disorder including anti-social behaviour and offending behaviour. By commissioning services that prevent people from using substances and supporting those that are using in a problematic way will support the Partnership in reducing offending behaviour. Those individuals that are drug tested positive for Class A drugs in police custody will be compelled to engage in drug treatment.
- 9.7 **Property / Asset Issues** - The proposal will have a neutral impact upon the property or assets.
- 9.8 **Business Continuity / Disaster Recovery** – The proposal will have a neutral impact on business Continuity/Disaster Recovery. However, in relation to service continuity the incoming providers will be expected to provide a business continuity plan within one month of mobilisation.

#### **Public Background Papers Used in the Preparation of the Report:**

- Drug Market Profile Report 2019/20
- Governments 10-years drug strategy December 2021
- Need Assessment December 2022
- Cultural Competence Review May 2023

#### **List of appendices:**

Appendix 1 Substance Misuse Equalities Impact Assessment (Young People)



Appendix 4 EIA YP  
Substance Misuse Pi

For further guidance on the completion of this report template please see **Reports for Council meetings – A Guide for Officers** at [Brand and templates \(sharepoint.com\)](#)

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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Subject:** Barking and Dagenham VAWG Public Spaces Delivery Group

**Date:** Wednesday 03 April 2024

**Author:** Katie Jones, Community Safety Partnership Manager

**Contact:** [Katie.jones@lbbd.gov.uk](mailto:Katie.jones@lbbd.gov.uk)

**Security:** [UNPROTECTED]

### 1. Purpose of Presenting the Report and Decisions Required

- 1.1 This report has been drafted to update the Community Safety Partnership Board on the newly formed Barking and Dagenham VAWG Public Spaces Delivery Group.

### 2. Overview

The CSP and MET Police are co-chairing the new VAWG Public spaces delivery group.

The Intention of this meeting is to provide a platform for the cross strands and LA partners to understand, review and address identified problems, threats and risks in relation to the delivering spacer spaces for women and girls in Barking and Dagenham.

The meetings are monthly, taking place on the last Wednesday of every month.

The aims and purpose of the group is to:

- Analyse performance in accordance with agreed objectives.
- To use this group as a focal point for VAWG-related public spaces activity and align it to a single governance structure which engenders inter-strand, intra-OCU and intra[1]organisational collaboration in women's safety in public spaces in Barking and Dagenham.
- To engage our partners, third sector VAWG organisations and women across our communities in a transparent way
- Proactively identify threats and risks through analysis of data and apply a problem-oriented policing and evidence-based approach to find solutions and risk mitigation.

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- Partners are actively involved as owners, leaders, and contributors in line with the objectives of this group.
- Partners to provide any data required by the group, to provide meaningful updates on local authority activity to improving public spaces in line with feedback from women and girls and commitment with partnership with police Meetings will be held on a monthly basis.

## Domestic Abuse Improvement Programme - Project Plan 2023/2

Domestic Abuse Commission action
Amended / added from DAIP 22/23

**Priorities**

Domestic Abuse Commission Outcomes	Objective
	<p>Create a three point domestic abuse assessment for all council services and decision making boards</p>

<p>Outcome 1 - professionals and services  I know where to get help from for domestic abuse, and when I do seek help, I feel supported, believed by different services and they don't make me feel as if it is my fault. Services are</p>	<p>The council shows leadership on tackling domestic abuse, incorporating domestic abuse into all decision making</p>
	<p>Ensure a robust strategic framework is in place across the council and partners</p>
	<p>Ensure robust strategic oversight structures are in place across the council and partners</p>

aware perpetrators may manipulate professionals as well as victims. Tackling domestic abuse is the duty of every professional in Barking and Dagenham.

	<p>Ensure excellence in services, including commonly adopted practice standards across the council and partnerships, with shared understanding and approaches</p>
	<p>Ensure agreed level of resources are committed across partnerships to tackle domestic abuse</p>
<p>Outcome 2 - healthy relationships and young people  All young people in Barking and Dagenham understand gender, domestic abuse and relationships through teaching about domestic abuse, gender and relationships in schools and the</p>	<p>Schools prioritise healthy relationships and domestic abuse education</p>

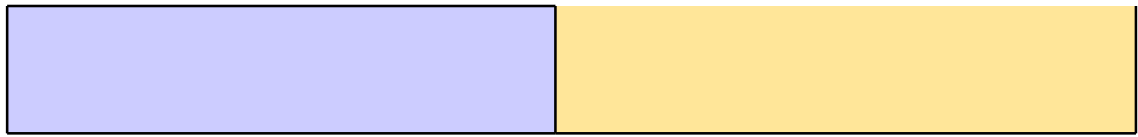


<p>wider community so they're aware of the signs of domestic abuse and how to respond to it</p>	<p>The council has oversight on the healthy relationships work that is taking place in schools</p>
	<p>Recruit a group of culturally diverse young ambassadors of domestic abuse and healthy relationships</p>
	<p>Young ambassadors of domestic abuse use social media to create organic conversations to tackle domestic abuse</p>
<p>Outcome 3 - trauma informed services I only have to tell my story once to different services and services recognise that it is triggering to retell my story</p>	<p>Commit to being a trauma informed council</p>
	<p>Establish a permanent domestic abuse survivors panel for co-production</p>
	<p>The council must look to include lived experience of key policy areas (including DA) as a desirable criteria within recruitment</p>
	<p>Health partners should develop a specific perinatal domestic abuse service</p>

	<p>Improved commissioning of specialist services, addressing identified service gaps and increasing numbers of supported victims and survivors</p>
	<p>A community ambassador scheme to increase domestic abuse awareness and train up community champions</p>
	<p>Use the Citizens' Alliance Network to start resident conversations/ownership of campaigns</p>
	<p>Compel local businesses to play a key role in tackling abuse</p>

<p>Outcome 4 - community awareness  Those within the community understand domestic abuse, including those going through it, and the borough has a clear and unified message about its response to domestic abuse</p>	<p>Launch a borough-wide 'We believe you' campaign</p>
	<p>Launch bottom up campaign about domestic abuse</p>
<p>Outcome 5 - perpetrators and those using abusive</p>	<p>Tiered interventions for perpetrators, which are all Respect Accredited</p>
	<p>Use a MATAC model for high risk perpetrators</p>

<p>Perpetrators are both held to account for their actions and have the opportunity for honest conversations to challenge their behaviour through interventions. Survivors have a sense that their abuse has been taken seriously</p>	<p>Increase use of Domestic Violence Disclosure Scheme</p>
	<p>Increase use of DVPOs and DVPNs</p>
	<p>A community training perpetrator scheme</p>
<p>Outcome 6 - community groups and community spaces I feel supported in Barking and Dagenham and can recover from and process my experience, with the support of access to supportive groups/professionals quickly where I need them</p>	<p>Enable survivors of domestic abuse to set up support groups in the borough</p>
	<p>The council should ensure that all new housing developments have community spaces within them</p>
	<p>Use the Citizens' Alliance Network to help both women's groups, and domestic abuse specific support groups to flourish both online and offline</p>
	<p>Learn from programmes of positive male role models in the borough to spread awareness of positive masculinity</p>
<p>Outcome 7 - child survivors of domestic abuse I know my children are safe, and their psychological and emotional needs are met. They are able to thrive</p>	<p>Work with schools across the borough to ensure behaviour policies are trauma informed</p>
	<p>Health and police to invest in specialist support for young survivors of domestic abuse</p>



- 1 - Improving strategic oversight across the partnerships and systems
- 2 - Shared understanding of risk and thresholds, consistent practices
- 3 - Improving commissioned services - providing the right services, adding v
- 4 - Improved used of structures and resources across partnerships
- 5 - Long term change in the community, driving down demand

Key activity
Create a Domestic Abuse Champions scheme to recognise and celebrate staff who have done important work to tackle domestic abuse and support survivors
Partnership learning and development - DA training offer, safeguarding partnerships learning and development offer, LBBB learning and development offer (and other anchor institutions - should include the courts). Create a culture change around domestic abuse so that a shared language of 'we believe you' is the starting point for all professionals
Low level training should be rolled out to a broad range of support services, including the family courts to ensure they are also trauma informed and can understand and access the directory of services where they can signpost.
Ensure domestic abuse is considered within all equality impact assessment processes, aligning to protected characteristics, deprivation and health inequalities

Make tackling domestic abuse the duty of every LBBB employee through production of a 'LBBB Against Domestic Abuse' Charter / Code of Conduct

Update the LBBB modern slavery statement

Produce a new VAWG strategy for LBBB and partnerships, in line with the new Serious Violence Duty and Serious Violence Needs Assessment and Strategy

Continue to deliver the MARACIP through the reestablished MARACSG

Referral pathways across the DA system to be improved to ensure system working and achievement of high outcomes standards for victim survivors, children and young people and perpetrators



Ensure shared understanding of risk and improve risk assessment tools and application of thresholds.

Ensure excellence in housing services for survivors of domestic abuse

Submit funding bids as required to improve service offer

Agree long term funding approach for domestic abuse

Map the domestic abuse and healthy relationship activity being delivered across primary and secondary schools. This will include the DA commissioned services offer, LBBB schools offer, CEP offer, and schools commissioned

Develop healthy relationships education framework, to ensure coherent messages to all schools, particularly focused in priority schools. To include evaluation methods to ensure success / outcomes delivered

Make the mapping exercise outlined above an annual process to ensure oversight, with a report discussed at Schools Partnership

Linked to above activity - as part of mapping exercise identify intensive interventions delivered in schools. Create pathways from these interventions to a peer to peer support network, building on knowledge on those who have been through interventions in order to build capacity and challenge to attitudes in CYP. This network will become provide the basis for the development of the Young Ambassadors scheme.

To be developed by Young Ambassadors when they are in place.

Join the UK National Trauma Council

One Small Thing policy review

Survivors group has already been established through commissioned services. A survivors network is in place, These are able to be used to inform service design and coproduction as required.

Review key roles and job descriptions, exploring opportunities to remove qualifications requirement and replace with lived experience

The local place based partnership (Integrated Care Partnership) priorities include children and young people and maternity services (including at an ICS level)

Opportunities provided by the recommissioning of health visiting contract, links across UP and UPP offers. Opportunity to explore a MESCH programme, or similar approach, building on best practice

Health interventions e.g. IRIS programme, MARAC primary care link, hospital IGVAs

Embedding the new commissioned services offer

Develop the domestic abuse commissioning plan 2024, incorporating learning from pilot services within the interim commissioning plan

Community Champions scheme to be rolled out by new Refuge DA outreach (Family Hubs) service

Safe Haven and Safe Spaces schemes to be implemented

Use Barking and Dagenham's existing online platform to start resident conversations about domestic abuse, and allow residents to feed their views into campaigns around domestic abuse and volunteer for specific roles

Lobby across key partnerships and anchor institutions to ensure employee domestic abuse policies are in place, in line with LBBD's

Include requirement to have an employee domestic abuse policy within LBBD's procurement and social value framework

Support to businesses through the Barking and Dagenham Business Forum, Barking and Dagenham CVS and Barking and Dagenham College

Campaign delivered - review of impacts to be undertaken and shared in order to inform future campaigns

Deliver this through increasing VCS, faith groups etc., involvement, ensuring appropriate and bespoke messaging and support as needed by different communities. To form a key part of the relaunched DA Champions scheme

Ensure lessons learned from RA evaluations informs the domestic abuse commissioning plans 2022 - 2024 and beyond

See MARAC improvement plans as outlined above

<p>Understand current rates of 'Right to Ask' and 'Right to Know', develop communications plan to increase 'Right to Ask' and review local protocols for 'Right to Know'</p>
<p>Understand current rates of use and develop protocols to increase use - linked to housing pathways. Non-mol use to be reviewed in terms of effectiveness</p>
<p>Explore opportunity to become a pilot area for the Make a Change programme</p>
<p>Building on the existing survivors network, explore opportunities to allocate funding to survivors to set up survivor led community support and outreach (can this be explored through NCIL priorities?)</p>
<p>Policy in place relating to existing community facilities within planning guidance. The LDP outlines community infrastructure required in line with new development.</p>
<p>Continue to engage through the CAN with the development discrete projects within DAIP</p>
<p>Increase opportunities to be exposed to positive masculinity - opportunity to explore this through NCIL and other community funding streams</p>
<p>Develop a model trauma informed behaviour policy for use by schools</p>
<p>Bespoke LBBD model for child survivors to be addressed through the 2022-24 domestic abuse commissioning plan, as outlined above</p>
<p>Mental health services to provide a specific service offer for child survivors</p>
<p>Health visiting commissioning - opportunities to be reviewed to increase early intervention activity via the UP offer, and to increase available programmes e.g. MECSH (Maternal Early Childhood Sustained Home-visiting)</p>

Review of health based routine enquiry disclosure rates and explore opportunities to review approaches - particularly maternity/booking

value at the right point in the system

<b>High level tasks</b>
Explore opportunities to link this to the LBBD domestic abuse ambassadors or thank you messages within all staff briefings by CE or STAR awards scheme
Council lobbies partners to invest in domestic abuse training (continuing from 2022/23 work)
Safe and Together approach embedded and rolled out across partners to ensure consistency of approach - utilising possible HOPIF bud working with other London LAs
Domestic Abuse Matters training to be taken up by Police partners
Promotion of the DA L&D offer across partners
Review template published as part of the Domestic Abuse Commission, and implement into existing impact assessment processes

Review of code of conduct and staff charter to embed making tackling domestic abuse the duty of every LBBB employee.

Statement to be reviewed and republished

VAWGSG to continue to work to agree contributions to the DA system across partners - incorporating learning from the new 2 year commissioned services and interventions

Continue to develop the MARAC and S2S interface to deliver daily mini MARACs in line with approaches taken by OLAs

Develop pathways across other risk management interventions e.g. IOM, MAPPA, MH/SM panels

Explore funding opportunities to create a MATAC, including opportunity to work on a triborough basis to deliver



Explore opportunities to create a MARAC primary care lead

Continue to develop the perpetrator focus in line with the above

Review of referral pathways at booking appointment to support early intervention for key families, to include reviews of routine enquiry across maternity and health visiting. Linked to early help target operating model and thresholds development for targeted early help interventions at the maternity and health visiting services. To be implemented through commissioning processes - 0 - 25

Review of joint working arrangements and processes across police, health and social workers in the context of Liberty Protection Safeguards and older abuse

Ensure that wherever possible, feedback is given from the MASH to the referring party and information is shared appropriately between partners. Process developed and in place.

Tool identified - roll out of the DARAC tool across the children's workforce focusing on a group of train the trainer and direct training of priority staff. Staff and possible funding contributions identified through the BDSCP Practice Development and Learning sub group

Development of DA and Housing Policy to provide strategic framework

DA and housing audit

Housing to include landlord function , PSL, RSL etc - to develop based on the below and any audit findings and ongoing work re vulnerable housing pathways. ASB policy reviewed and updated with DA elements contained.

Deliver the AVA programme to develop a model of excellence in homelessness services - working with survivors with lived experience to identify issues and design and deliver solutions. Possible funding streams to deliver solutions have been identified.

Bid submitted, funding to be identified, possible 2022/23 commissioning plan underspend (priority is risk assessment / thresholds tool)?

VAWGSG to continue to work to agree contributions to the DA system across partners - incorporating learning from the new 2 year commissioned services and interventions

Healthy schools partnership

Based on mapping exercise, review pathways to becoming an Ambassador and map requirements of scheme
To review possibility of joining as a local authority
Consider opportunities to secure the trauma informed quality mark, which provides a national benchmark for trauma aware, trauma informed and trauma responsive practice.
This can be built upon by the activity also described below e.g. community champions. We also have now establish the public women's safety forum, which can be used to inform work and develop coproduction approaches.
Mapping work against CQC framework lead by Best Chance Delivery Group, reporting to Health Exec. Outcomes will inform interventions mapped. Resources to be identified. Proposals include MARAC primary care nurse and improved I&D links
Relet of the commissioning contract in line with the above
Paper on DA services to go through ICS structures on investment and services required - recognising nature of footprint - as linked to the above

Service mobilisation and embedding of all services commissioned as part of DAIP - some key services already completed, focus on those remaining.

Paper to Exec in June/July - first steps in agreeing core resources

Proposal in place, modelled on Sunflower Scheme. Key conversations ongoing to finalise links and opportunities, then needs to be launched

Safe Havens scheme launched, with training of first tranche completed. Scheme will work closely with DA Community Champions scheme

Conversations in place - process to be established to close feedback loop, so that insights are shared across services, commissioners, providers and partners - possibly via regular report to VAWG group

To review current requirements

To consider policies, tools, templates and advice and guidance

Plan to develop behaviour change campaign under strap line 'we believe you' - resource options being explored

Review opportunities to link BD Collective to Refuge to create a community level response to domestic abuse - ensuring risk is managed by experts - as above and linked to the Champions scheme

Review opportunities to work with BD Giving and their funding framework, so that support can be prioritised for groups who want to tackle domestic abuse, and can be linked to the umbrella provision

Build on the commissioned work with Faith Action to develop a faith networks to tackle domestic abuse, again exploring opportunity to link to Refuge to ensure risk is managed by experts

Review opportunities provided by participatory budgeting approaches, supporting community groups to address issues

Ensure social prescribing model has access to new and developing community based provision

Funding identified to deliver temporary housing option - protocol to be described as part of the DA and Housing Policy. Behaviour change interventions in place, and additional educational programmes and community outreach (Family Hubs) will be commissioned for 2023/24, reflecting the end of the pilot funding period. Interventions also put in place through the S2S model

As above

Continue awareness raising work and measure through ongoing performance data (triborough)

Replaced and delivered through the perpetrator community outreach (Family Hubs) service - coming online in 2023

Continue to support We Rise

Review of policy

Linked to new community outreach services (Family Hubs) as described above. Victims service online, perpetrator service in 2023/24

Commissioned as described in EOY performance - to be embedded and opportunities to develop links through S2S and Operation Encompass

As above. CYP therapeutic and wellbeing service has been commissioned by the council as part of the 22-24 commissioning plan

As above as part of recommissioning exercise

Linked to booking appointment reviews as outlined above

Key

2023/24 (Year 3)	H	Unresourced, no decision	
Year 4	M	Unresourced, identified £	
Year 5	L	Resourced	

Lead	Priority	Resources additional / available	£
ComSol / HR &OD	M	Sasha Timmermans, Amisha Maisuria	
BDCSP / BDSCP / BDSAB	H	No additional resource identified	
BDSCP / BDSAB	H	Refuge L&D lead	
Police			
VAWGSG / BDSCP / BDSAB	M	Refuge L&D lead	
Corporate equalities	H	Angela d'Urso	



HR & OD	H	None required	
CSP VAWG sub group	H	VAWG group	
CSP VAWG sub group	H	Daniel James	
MARAC coordinator / Angela d'Urso / S2S team manager		S2S implementation group	
MARAC coordinator/Angela d'Urso/Chris Lyons/Amolak Tatter		MARACSG	
MARAC coordinator / Angela d'Urso /MARAC chair		MARACSG	

MARAC coordinator / Angela d'Urso /MARAC chair		MARACSG	
MARAC steering group chair (Robin Peel)	H	MARACSG	
Head of commissioning disabilities and health, NELFT	H		
Police EBCU, NELFT, lead adult social worker, Refuge IGVA	H		
Head of Assessment	M	Angela d'Urso / S2S team manager	

Angela d'Urso / Russ Bellenie	H	BDSCP PD&LSG	Yellow
Angela d'Urso / Katharine Gilcreest / Leona Melville	H		Green
External	H		Yellow
Angela d'Urso / Katharine Gilcreest / Leona Melville / Gary Jones	H		Yellow
Angela d'Urso / Katharine Gilcreest	H	AVA, Lynsey Flowers	Yellow
Commissioning Manager (health)	H	Ad'U, AM - no match funding identified	Yellow
VAWGSG / Angela d'Urso	H		Yellow
School Performance and Partnerships, Culture and Wellbeing Lead	H	DA Outreach service, Family Hubs	Green
School Performance and Partnerships, Culture and Wellbeing Lead	H	DA Outreach service, Family Hubs	Green

School Performance and Partnerships	M	DA Outreach service, Family Hubs	
DA Outreach service, Family Hubs	M		
	L		
	L		
	L		
Angela d'Urso	M	VAWGSG	
HR & OD	M	None required	
Place based partnership	H		
Head of commissioning disabilities and health	H		
Triborough	H	Paper will be seeking resource	

Angela d'Urso	H	VAWGSG	
Children's commissioning	M	The plan will require resources	
Refuge, Angela d'Urso, Head of Community Participation and Engagement, Community Safety Manager	H		
BDCSP	H	Funding secured	
Citizens' Alliance Network Officer	M	None required	
BDSAB, BDSAB, BDCSP, BDHWB / ICP	M	No council resource required	
Corporate procurement / commissioning	M	No council resource required	
Economic development	M	No additional resource identified	

Communications	L	No additional resource identified	
Director of Community Participation and Prevention, Angela d'Urso	H	DA Outreach service, Family Hubs	
Director of Community Participation and Prevention, Angela d'Urso	H	DA Outreach service, Family Hubs	
Director of Community Participation and Prevention, Angela d'Urso	H	DA Outreach service, Family Hubs	
Director of Community Participation and Prevention, Angela d'Urso	M	DA Outreach service, Family Hubs	
Director of Community Participation and Prevention, Angela d'Urso	M	DA Outreach service, Family Hubs	
Commissioning Manager (health) / Angela d'Urso / Katherine Gilcreest / Kevin Makambe	H		
MARAC steering group chair	H	No additional resource identified	

Police EBCU / Angela d'Urso	H		
Police EBCU / Angela d'Urso	H	Refuge	
Angela d'Urso	H	Family Hubs, Cranstoun	
Director of Community Participation and Prevention, Angela d'Urso	H		
Planning	M		
CAN officer, Amisha Maisuria	M	Angela d'Urso	
Director of Community Participation and Prevention, Angela d'Urso	M	Family Hubs and outreach services	
School Improvement Partnership	M	DA Outreach service, Family Hubs	
Angela d'Urso	H		
Head of commissioning disabilities and health	H		
Head of commissioning disabilities and health	H	None identified	

LBBB ICP	M		
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Q1 Update	Q2 Update
Champions scheme proposal approved at Q1 VAWGSG	Champion scheme will be launched by Refuge in September /October, with targeting of priority services and agencies
L&D offer across multi agency space agreed, with content of courses designed and approved. L&D lead available to provide bespoke training to agencies and services as required	L&D programme in place, promotion happening across the children's safeguarding partnership.
HOPIF bid unsuccessful.	Signed up for additional S&T resource and identified necessary funding. Additional resource includes 0.5 FTE implementation lead, additional practitioner training and access to awareness sessions, which will promote S&T approach across partnerships
L&D programme in place, promotion happening across the children's safeguarding partnership and through CSP VAWGSG. Promotion of the LBBB service offer ongoing and continuous.	L&D programme in place, promotion happening across the children's safeguarding partnership and through CSP VAWGSG. Promotion of the LBBB service offer ongoing and continuous. Meeting relating to court outcomes across the triborough footprint being organised, including police.
	Template to be reviewed Q3

<p>Champions scheme agreed by Council Exec, Leadership Team to all become Champions. DA at work policy updated in 22/23 DAIP</p>	<p>Compulsory Managers Training pack further updated, to raise awareness that tackling DA is everyone's responsibility, promote available L&amp;D for teams and promote the updated webpages and toolkits already produced.</p>
	<p>VAWGSG discussion - agreement to update and the parameters for updated statement provided</p>
<p>VAWGSG agenda item - actions agreed and ongoing</p>	<p>VAWGSG agenda item. Serious Violence Duty workshops attended and actions agreed.</p>
<p>MARAC protocol updated, included is section on the interface between S2S and MARAC to ensure robust grip on high risk. S2S workers attend MARAC to ensure MARAC appraised of 'mini MARAC' work undertaken by S2S for high risk clients. S2S also takes referrals from MARAC re perpetrators.</p>	<p>Drive project implementation - MOPAC funded pan London service. Lower numbers of referrals - can take 8-10 cases per annum. Agreed that referral pathways will be via S2S, MARAC or Predatory Offender Unit. Complex cases identified locally as likely referrals to be made.</p>
<p>MARAC protocol updated, and outlines interfaces with other panels. MARACSG agreed proposals relating to complex case management.</p>	<p>MARAC coordinator has linked across other key risk management panels - particularly related to substance misuse. Information sharing pathways shared to ensure robust case management and breach action taken where required. Community MARAC options also being explored, as agreed at CSP Board</p>
<p>Funding bid for MATAAC was submitted to HOPIF - unsuccessful. Agreed as a priority in the Police's VAWG TriBorough Strategy</p>	<p>Funding bid for MATAAC submitted to Foundations - unsuccessful. Request to Drive to consider introduction of MATAAC - not supported by MOPAC. Options continue to be explored.</p>

<p>Meetings held with Hackney service to understand service and develop the LBBB model based on learning. Paper to Best Chance Strategy Delivery Group and Health Exec structures - including mapping of current health service offer across CQC inspection framework</p>	<p>Funding bid submitted for MARAC primary care service - unsuccessful due to timescales relating to spend of money required. Paper to go to Committee in Common on ICB funding of DA. Attendance at Health DA Summit in order to lobby decision makers. Training on DA and awareness raising of services available delivered to all LBBB GPs, with offer to attend further sessions for practice staff.</p>
<p>MARAC protocol updated to include perpetrator focus and toolkit available to MARAC.</p>	<p>Routine consideration of perpetrator referrals at MARAC where appropriate and possible. Promotion of toolkit available to MARAC ongoing e.g. LBBB Foyer Unit. Submitted funding bid to extend Restart scheme to LBBB (opening up more temporary rehousing options) - unsuccessful.</p>
<p>Commissioning process ongoing</p>	<p>Commissioning process ongoing</p>
<p>Key learning emerging from SAR.</p>	<p>Vulnerable Adults IGVA colocation in place. SAB October Conference - session on DA has been agreed. Actions expected in terms of protocols from the conference. Consideration of service offer in terms of adult child to adult parent abuse ongoing.</p>
<p>In place - referrals to S2S will provide feedback to referrer on outcome where possible and appropriate</p>	<p>In place - referrals to S2S will provide feedback to referrer on outcome where possible and appropriate</p>

Agreement of priority areas to focus DARAC tool with, working across children's social care and the emerging Family Hubs. Open access multi agency training also to be available. DA L&D lead will be trained as trainer, as well as organisational leads (linked to S&T champions and DA champions) and will provide ongoing DARAC tool training.	DARAC leadership sessions and training booked into the diary October - December. Embedding tool within existing S2S screening tool and assessments.
Draft policy produced	Draft policy produced - work to implement to progress in Q3
	Paused
	Paused
AVA programme ongoing - working with AVA leads on implementation, including promotion of Experts By Experience opportunities.	AVA programme ongoing. Sessions delivered to Experts By Experience, workshops scheduled for October.
Ongoing - funding bids submitted across council, partners and triborough partners	Ongoing - funding bids submitted across council, partners and triborough partners
Paper to Executive on long term funding options of DA	VAWGSG to consider partnership contributions
Attendance at Healthy Schools Partnerships to promote DA service offer. Family Hub DA Children's Outreach Workers ongoing relationship building with schools to provider offers, pathways and support.	Work with Tender re Teacher's Toolkit developed. LBBB identified as priority area for roll out. Teacher's Toolkit promoted on our websites and linked to in our core guidance/toolkits. Also shared with relevant LBBB practitioners to ensure coherence of approach. Health Schools Partnership attendance ongoing. To attend Deputy Heads Forum. LBBB DA service providers working together to engage schools in service offers - including promotion of the new Barnardo's CYP service (Phoenix)

Engagement with survivors ongoing through a number of mechanisms, including the new Public Women's Safety Forum - co-Chaired by We Rise lead. Experts By Experience within AVA programme - specific purpose is codesign of solutions to jointly identified issues.	Engagement with survivors ongoing through a number of mechanisms, including the new Public Women's Safety Forum - co-Chaired by We Rise lead. Experts By Experience within AVA programme - specific purpose is codesign of solutions to jointly identified issues.
Reports to the Best Chance Delivery Group and Exec	Attending Health and DA summit to lobby partners. Health progress as contained in other lines
Ongoing	Ongoing
As above. Also working with BHRUT and DA providers to implement a colocation in triborough hospitals	

<p>See separate slides for update.</p>	<p>Go Live - Phoenix, Perpetrator Community Services. Being commissioned - additional £145k allocated to Tier 3/4 DA team. See separate paper on recommissioning process of core contract.</p>
<p>Paper developed</p>	<p>Paper considered by Exec. A number of proposals made within MTFS / Star Chamber processes. Needs partnership discussion on contributions, core offer and additional funding reliance -see separate paper on commissioning process of core contract</p>
<p>Proposal agreed by VAWGSG</p>	<p>Champions scheme being launched by Refuge.</p>
<p>Roll out continuing</p>	<p>Roll out continuing - to work alongside Champion Scheme.</p>
<p>Ongoing</p>	<p>Sharing of information via network, including grant and funding opportunities for communities. Community champions scheme will be promoted within this space.</p>
	<p>NHS Pledges in place - including NEL best practice around staff DA policies</p>

Comms campaign work ongoing, led by community safety through the Women's Safety Operational Group	Comms campaign work ongoing, led by community safety through the Women's Safety Operational Group. Opportunities to align with Redbridge work ongoing, will require resourcing and no funding stream identified
As outlined above - agreement of champions scheme by VAWGSG	As outlined above - scheme being launched, and will include promotion across VCS
	Funding criteria reviewed and agreed as part of the CSP LCPF - including ensuring funding goes towards known gaps in DA responses
	Family Hubs outreach work. Community based perpetrator service go live in Q3 to work alongside.
	Information shared, including services and pathways. Embedding through Family Hubs and Navigators.
Perpetrator unit in the Foyer set up and parameters around use of the unit agreed.	Perpetrator unit in the Foyer set up, with clear referral pathway in place and promoted on webpages and toolkits / protocols. Submitted funding bid to be part of Restart - bid rejected.
As above. Submitted funding bid for MATAC - not approved. Perpetrators considered within MARAC - building on S2S interface and 'front door' - referrals from MARAC to S2S for perpetrator interventions	As above. Submitted funding bid for MATAC - not approved. Perpetrators considered within MARAC - building on S2S interface and 'front door' - referrals from MARAC to S2S for perpetrator interventions

Reviewed and actioned as part of MARACSG new quarterly performance report - data compared across the triborough and best practice shared	Reviewed and actioned as part of MARACSG new quarterly performance report - data compared across the triborough and best practice shared
Reviewed and actioned as part of MARACSG new quarterly performance report - data compared across the triborough and best practice shared	Reviewed and actioned as part of MARACSG new quarterly performance report - data compared across the triborough and best practice shared
	Perpetrator community based service go live. Working with Redbridge to explore opportunities around ex perpetrator buddy scheme for programme referrals
Ongoing	Ongoing
Ongoing	Ongoing
LBBB model developed and final commissioning ongoing	LBBB model in place and commissioned. Service mobilisation and promotion ongoing.
Commissioning process held and awarded.	CYP service in place. Significant mobilisation work during summer break and promotional activity. Relationship building across providers, organisations and services.
Ongoing commissioning process	Ongoing commissioning process



	Ongoing
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Q3 Update	Q4 update
<p>Champion scheme launched. 10-15 sign ups in the first tranche. 10 attended training delivered by Refuge in December as part of the 16 Days of Action. Intranet to pages to be adapted to include new Champions, and promoted across key services and staff. Champions from key services across the council and a range of levels. 2nd tranche for training will happen in May 2024.</p>	<p>Champion scheme launched. 10-15 sign ups in the first tranche. 10 attended training delivered by Refuge in December as part of the 16 Days of Action. Intranet to pages to be adapted to include new Champions, and promoted across key services and staff. Champions from key services across the council and a range of levels. 2nd tranche for training will happen in May 2024.</p>
<p>L&amp;D programme in place, promotion happening across partnerships. Courses have been well attended and well evaluated.</p>	<p>L&amp;D programme in place, promotion happening across partnerships. Courses have been well attended and well evaluated. L&amp;D has been factored into the survivor service recommissioning process.</p>
<p>0.5 FTE resource has joined the council. Located in the SIS team. Will provide additional audit capacity, as well as embedding of training and practice champion. Linked to the CARES Academy implementation. S&amp;T training continues to roll out, attendance good and partnership sessions very well attended. Intro to S&amp;T session also given at the DA Symposium in November 2023.</p>	<p>0.5 FTE resource has joined the council. Currently supervised by Head of MASH. S&amp;T training continues to roll out, attendance good and partnership sessions very well attended. LL systems being amended to allow for impact tracking of Safe and Together approach - consideration being given to the use of S2S per leads in the initial completion of form as part of the screening tool assessment in place.</p>
<p>L&amp;D programme in place, promotion happening across partnerships. Courses have been well attended and well evaluated.</p>	<p>L&amp;D programme in place, promotion happening across partnerships. Courses have been well attended and well evaluated. We have also secured additional free training through our links with Cambridge academics.</p>
<p>To roll over to Q4</p>	<p>To roll over to 2024/25 plan.</p>

<p>Corporate induction content to be reviewed in Q4. Compulsory managers training updated and now in delivery. Learning and development offer promoted across the council.</p>	<p>Compulsory managers training updated and now in delivery. MARAC training has also been reviewed and extended. Learning and development offer promoted across the council.</p>
<p>Final statement being prepared to come to Q4 VAWGSG</p>	<p>Final statement being prepared to come to 2024/25 Q1 VAWGSG as the statement will need to be updated after the agreement of the new VAWG Strategy - timelines adjusted in light of the SVD Strategy process.</p>
<p>Serious Violence Strategy being prepared for virtual sign off by CSP. VAWG Strategy to develop alongside this, and a final strategy to be agreed and approved by March CSP Board</p>	<p>As above, adjusted timescales for SVD Strategy sign off. VAWGSG to discuss draft VAWG strategy in Q4, with final sign off by CSP in Q1 2024/25.</p>
<p>Positive feedback from Drive - LBBB referral pathway (S2S/MARAC) is working well. Referrals made, 5 cases currently open to Drive.</p>	<p>LBBB MARAC made 16 referrals as at end of December 2024. 7 were accepted.</p>
<p>Ongoing</p>	<p>Ongoing</p>
<p>Ongoing search for funding sources and bidding accordingly</p>	<p>Ongoing search for funding sources and bidding accordingly</p>

<p>Paper to Best Chance delivery group scheduled for February 2024 to assess partnership spend on DA, to agree baseline offer and to identify funding</p>	<p>Ongoing conversations of new DA system maintenance when the time limited, one off funding ends (from 24/25 onwards). This is a key risk. The Council is taking forward via MTFS process for 2025/26. Partners will need to consider and agree via the VAWGSG contributions e.g. delivery of Health VAWG pledges.</p>
<p>Further funding bid has been submitted to add LBBD to the Restart scheme. First applications made to the perpetrator foyer unit -key learning in terms of use of previous Remove Abuse processes and paperwork</p>	<p>Bid successful to join Restart Scheme and we are mobilising into the borough.</p>
<p>Commissioning process ongoing</p>	<p>Commissioning process ongoing</p>
<p>In place - referrals to S2S will provide feedback to referrer on outcome where possible and appropriate</p>	<p>In place - referrals to S2S will provide feedback to referrer on outcome where possible and appropriate</p>

DARAC leadership training event held, and training sessions for staff are in the middle of being rolled out. Key staff trained. Session delivered at the DA Symposium in November. Further sessions booked in early 2024. Train the trainer sessions happening in January 2024. Nominations for those to be trained are being received.	DARAC training completed. DARAC train the trainers training completing this week. A number of attendees, who will act as DARAC champion in their area to support staff in using the tool. DA L&D has been trained as a trainer and will provide further multi agency introduction to DARAC sessions for the children's workforce.
To progress in Q4	Post AVA announcement and internal structural decisions this will move to 2024/25 plan.
Paused	Will no longer go ahead.
	Housing representatives at vulnerable housing panel extended in line with full range of tenures. DA and Housing Policy will address this item.
Workshop session held. Workplan areas agreed upon include - EBE engagement in commissioning and interventions, review of housing pathways with agreed standards, communications of offer and behaviour change work. Will require further engagement across some service areas to see if this is a possibility.	AVA has gone bankrupt and the programme can no longer continue. We will take this work forward as part of the development of the DA and Housing Policy and related actions to deliver.
Ongoing - funding bids submitted across council, partners and triborough partners. Successful award of COMF, SISDAS being implemented.	Ongoing.
VAWGSG to consider partnership contributions - also paper to Best Chance delivery group as outlined above	VAWGSG to consider partnership contributions and individual agency action as above
Promotion of Barnardo's Phoenix service to schools ongoing. Work underway re Operation Encompass with new ways of working and practice guide developing, to go to Headteachers' Forum for implementation in Q4. Ongoing attendance at Healthy Schools Partnership. Several events held during 16 Days of Action at B&D College, with stalls for providers and the BAD Youth Forum.	An area of focus for 2024/25.
Ongoing through Healthy Schools Partnership and the MOPAC Tender pack. Training being rolled out across LBBB schools - linked to Operation Encompass work outlined above.	Ongoing.

Proposed to have conversations with BAD Youth Forum in Q4	To be taken forward with new Head of Youth Support and Participation and the Cranstoun and Refuges Community Outreach services within the Family Hubs in 2024/25.
Engagement with survivors ongoing through a number of mechanisms, including the new Public Women's Safety Forum - co-Chaired by We Rise lead. Experts By Experience within AVA programme - specific purpose is codesign of solutions to jointly identified issues.	Engagement with survivors ongoing through a number of mechanisms, including the new Public Women's Safety Forum - co-Chaired by We Rise lead.
Report being developed for Best Chance Delivery Group for Q4, including priority areas for DA and minimum service offers	Report delivered and actions in train in relation to partnership funding for DA.
Ongoing	Ongoing
Health IDVA employed and collocated in hospitals in EA footprint. Funding available for 1 year. Implementation meetings are ongoing. Outcomes will need to form part of future funding decisions.	Successful outcomes seen so far for Health IDVA. Need to consider mainstreaming options connected to the above points in relation to partnership funding contributions.

<p>Phoenix online safe space launched - some final amends being made. Online space is available to children and young people between 11-17. All services promoted through a DA conference in the 16 days of action. SISDAS team being mobilised, with systems development work ongoing. CIN/CPP perpetrator offer transferred to Cranstoun, and Embrace programme established to meeting need of client group - 12 week 121 programme. Procurement Board papers for core contract approved to go to board - with some adjustments in cross council contributions. Excellent Q2 evaluation of S2S - with positive outcomes noted, including a reducing in children subject to CPP.</p>	<p>SISDAS team being mobilised, with systems development work ongoing. New DA Children's Lead being recruited to by Refuge and will mobilise April 2024. Web pages updated - internal and external to ensure up to date service provision information.</p>
<p>Financial pressures changed direction of activity. Core budget confirmed as part of commissioning process, with some internal adjustments. Rest of service offer will require VAWGSG financial consideration.</p>	<p>As stated in relation to DA offer, and funding across the partnership to deliver.</p>
<p>Scheme launched. 15 sign ups. 10 trained in the 16 days of action and now full Champions. Across key council services and levels. Second tranche training scheduled for May 2024 - promotion across partners to enable wider sign up. Web pages to be updated with the Champions, following the Ambassador model.</p>	<p>Champions details available on the intranet. Champions attending DARAC train the trainer training where relevant. Second tranche training scheduled for May 2024 - promotion across partners to enable wider sign up.</p>
<p>Space created for Women's Public Safety Forum where information is placed to support community ownership and development  <a href="https://oneboroughvoice.lbbd.gov.uk/hub-page/women-safety-forum">https://oneboroughvoice.lbbd.gov.uk/hub-page/women-safety-forum</a></p>	<p>Space created for Women's Public Safety Forum where information is placed to support community ownership and development  <a href="https://oneboroughvoice.lbbd.gov.uk/hub-page/women-safety-forum">https://oneboroughvoice.lbbd.gov.uk/hub-page/women-safety-forum</a></p>
<p>NHS Pledges in place - including NEL best practice around staff DA policies</p>	<p>Ongoing.</p>

On agenda for consideration at Q3 meeting - mapping of community level assets and consideration of behaviour change campaign across partners - funding is key issue. Work will need to be community led - existing forums in place to enable this.	Agreed to develop key messages and opportunities to promote based on existing resources. Proposal to come to Q1 2024/25
As outlined above - scheme being launched, and will include promotion across VCS	Second tranche of champions has been promoted across the VCS.
Funding criteria of BD Giving in line with Borough Manifesto - DA outlined as key priority.	Funding criteria of BD Giving in line with Borough Manifesto - DA outlined as key priority.
Community outreach work to take the lead. DA Forum membership to be reviewed in Q4 to ensure representation for 24/25 onwards	DA Forum membership reviewed to ensure representation for 24/25 onwards. Family hubs DA leads (survivors and perpetrators) to lead on building relationships.
Social prescribing model making referrals to DA services - promotion of new services to ensure all aware. DA section of the Family Hub workforce has been developed with IAG in line with existing intranet and internet offers. Also accessible to social prescribers.	Social prescribing model making referrals to DA services - promotion of new services to ensure all aware. DA section of the Family Hub workforce has been developed with IAG in line with existing intranet and internet offers. Also accessible to social prescribers.
Further funding bid has been submitted to add LBBD to the Restart scheme. First applications made to the perpetrator foyer unit -key learning in terms of use of previous Remove Abuse processes and paperwork	As above, Restart bid successful and is mobilising into the borough. Review of perpetrator unit to be undertaken.
Perpetrators considered within MARAC - building on S2S interface and 'front door' - referrals from MARAC to S2S for perpetrator interventions. Drive referrals via MARAC/S2S embedded, with working referral pathway in place and 5 live cases. Ongoing submission of bid when appropriate funding stream becomes available.	Perpetrators considered within MARAC - building on S2S interface and 'front door' - referrals from MARAC to S2S for perpetrator interventions. Drive referrals via MARAC/S2S embedded, with working referral pathway in place and 5 live cases. Ongoing submission of bid when appropriate funding stream becomes available.

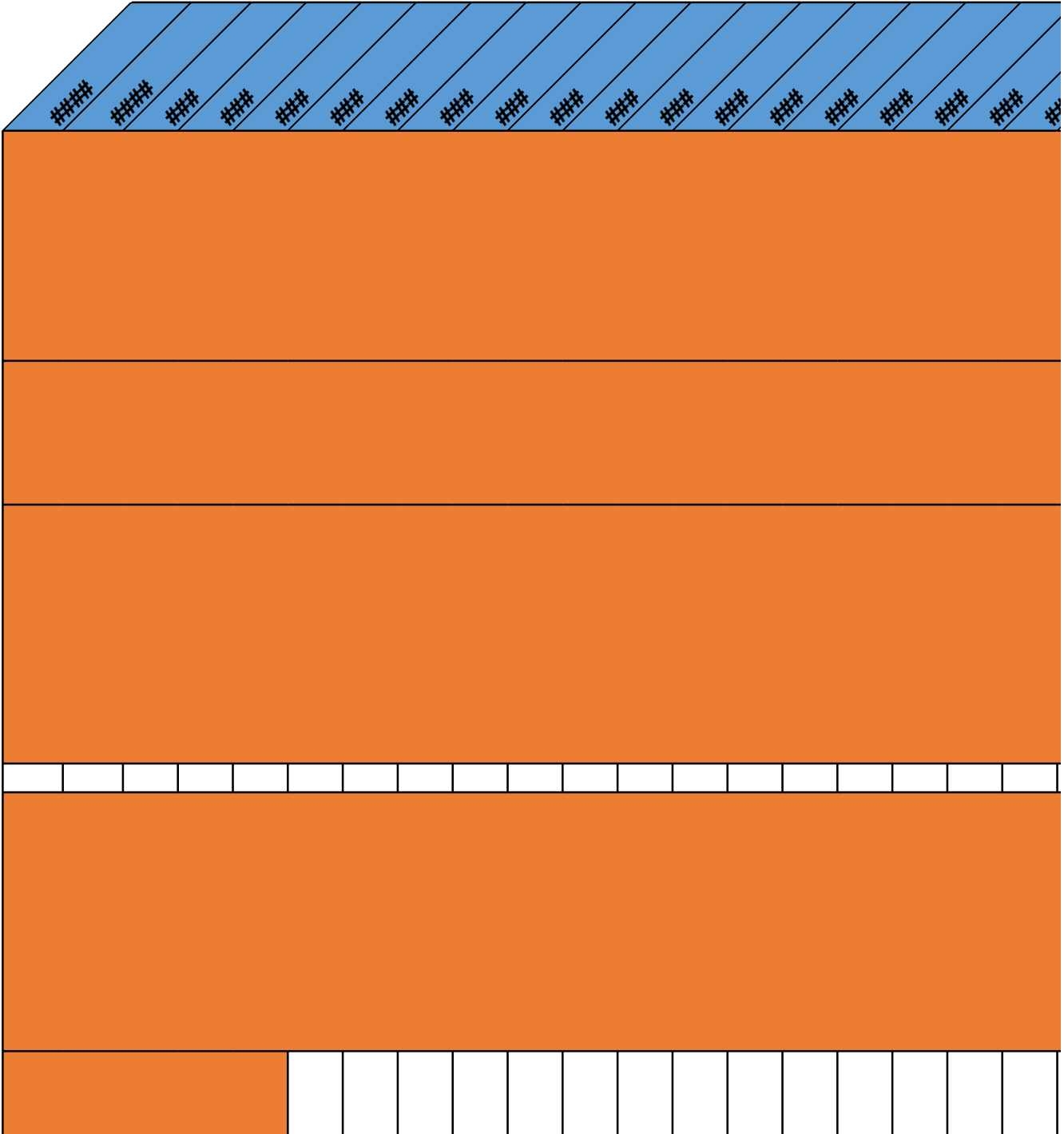


Performance in Q3 highlighted in MARACSG for further consideration and action.	For further consideration in 2024/25
Reviewed and actioned as part of MARACSG new quarterly performance report - data compared across the triborough and best practice shared	Reduction observed in Q3 data and will require focus by key groups to address in 2024/25.
Developing proposals for a peer lead support programme led by those who have successfully gone through perpetrator programmes. Behaviour change programme outlined above.	As detailed above in relation to behaviour change campaigns.
Ongoing. Service promoted as part of 16 days of action.	Ongoing. Service promoted as part of 16 days of action. Launch of the Women's Museum in Q4 and links to be developed in 2024/25.
Ongoing	Ongoing
LBBB model in place and commissioned. Service mobilisation and promotion ongoing.	LBBB model in place and commissioned. Service mobilisation and promotion ongoing.
CYP service in place, and online space launched. Promotion during 16 days of action and referral forms on internet/intranet. Continue to promote heavily, with key relationships with schools and youth venues.	CYP service in place, and online space launched. Promotion ongoing.
Ongoing commissioning process	Ongoing commissioning process

Health IDVA in place and discussions ongoing in relation to support offer to priority services e.g., maternity services

Health IDVA in place and discussions ongoing in relation to support offer to priority services e.g., maternity services

Bid successful to join Restart Scheme and we are mobilising into the borough.





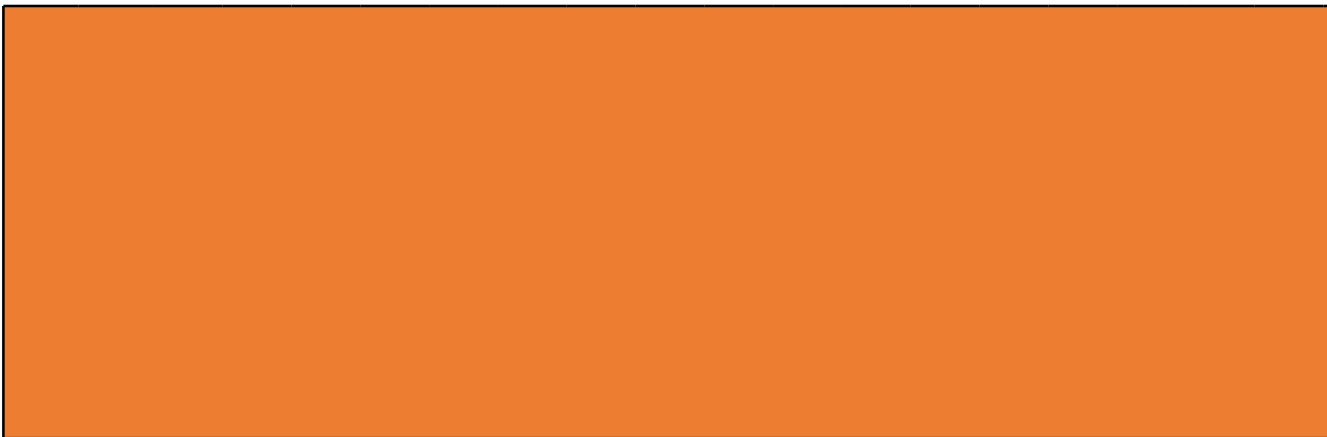
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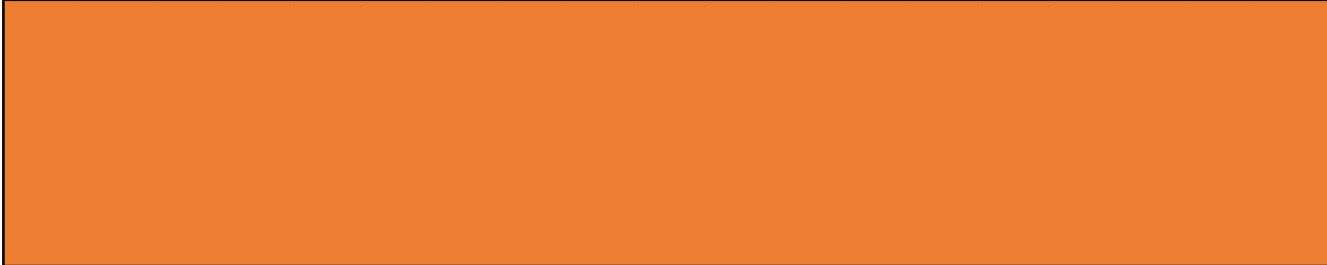




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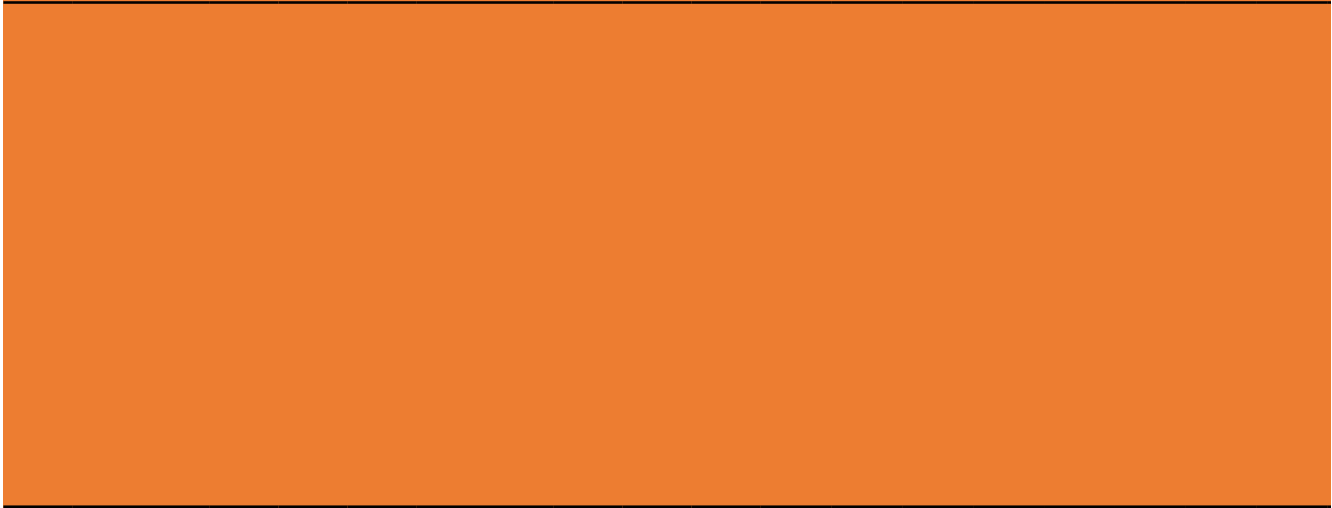




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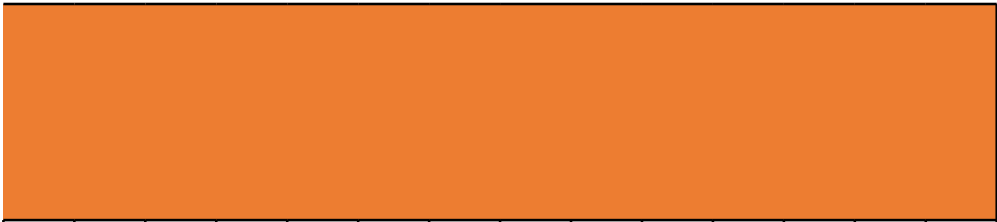




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Community Safety Partnership Board Forward Plan

Date of Meeting	Report Title	Presenter	Time	Item No	Item Status	
Wednesday 26 June 2024	Introductions and Apologies	Chair	2 mins	Item 1		
	Declaration of Interest	Chair	2 mins	Item 2		
	Minutes and Actions from previous meeting	Chair	5 mins	Item 3		
	CCTV Update	Qais Ghafar	10 mins	Item 4		
	Drugs and Alcohol Tender	Amolak Tatter	10 mins	Item 5		
	Police Funded Team Update	Gary Jones and Mo Mahmood	15 mins	Item 6		
	Serious Violence Duty Update	Katie Jones	10 mins	Item 7		
	Community Safety Partnership Review	Katie Jones	20 mins	Item 8		
	VAWG Strategy (for approval)	Angela D'Urso	15 mins	Item 9		
	Domestic Abuse Improvement Programme Update	Angela D'Urso	10 mins	Item 10		
	<b>RESTRICTED: Domestic Homicide Review Update</b>	CSP Team	10 mins	Item 11		
	<b>RESTRICTED: Prevent Update</b>	Prevent Lead	5 mins	Item 12		
	Forward Plan	Chair	5 mins	Item 13		
	<b>AOB</b> Performance Report <b>Subgroup Updates</b> a- Substance Misuse Operational subgroup b - Contextual Safeguarding & Exploitation and YOS Board c - Hate Crime, Intolerance and Extremism d - Violence Against Women and Girls e - ASB Tasking Group f - Safer Neighbourhood Board Update g - Safeguarding Boards (LSCB/SAB Updates)	Chair Subgroup Leads	5 mins	Item 14	Daniel James a - Amolak Tatter and Clare Brutton b- April Bald/Angie Fuller c- Daniel Bacon d- Angela D'Urso/Daniel Thompson e - Julia Kanji f - Evan Hollows/ Ifthahar Ahmed g - Joanne Kitching/Jemma Breslin <b>NO UPDATE FOR REDUCING REOFFENDING BOARD</b>	
Wednesday 25 September 2024	Introductions and Apologies	Chair	2 mins	Item 1		
	Declaration of Interest	Chair	2 mins	Item 2		
	Minutes and Actions from previous meeting	Chair	5 mins	Item 3		
	Community Payback Update	Mathew Chaplin	15 mins			
	London Fire Brigade Projects	Narinder Dhill	15 mins			
	Serious Violence Duty Update	Katie Jones	10 mins	Item 4		
	Partnership delivery to VRU Serious Violence Plan	All Partners	15 mins	Item 5		
	<b>Domestic Abuse Improvement Programme Update</b>	Angela D'Urso	10 mins	Item 6		
	<b>RESTRICTED: Domestic Homicide Review Update</b>	CSP Team	10 mins	Item 7		
	Forward Plan	Chair	5 mins	Item 8		
	<b>AOB</b> Performance Report <b>Subgroup Updates</b> a- Substance Misuse Operational subgroup b - Contextual Safeguarding & Exploitation and YOS Board c - Hate Crime, Intolerance and Extremism d - Violence Against Women and Girls e - ASB Tasking Group f - Safer Neighbourhood Board Update g - Safeguarding Boards (LSCB/SAB Updates)	Chair Subgroup Leads	5 mins	Item 9	Daniel James a - Amolak Tatter and Clare Brutton b- April Bald/Angie Fuller c- Daniel Bacon d- Angela D'Urso/Daniel Thompson e - Julia Kanji f - Evan Hollows/ Ifthahar Ahmed g - Joanne Kitching/Jemma Breslin <b>NO UPDATE FOR REDUCING REOFFENDING BOARD</b>	
	Wednesday 4 December 2024	Introductions and Apologies	Chair	2 mins	Item 1	
		Declaration of Interest	Chair	2 mins	Item 2	
		Minutes and Actions from previous meeting	Chair	5 mins	Item 3	
Serious Violence Duty Update		Katie Jones	10 mins	Item 4		
Partnership delivery to VRU Serious Violence Plan		All Partners	15 mins	Item 5		
<b>Domestic Abuse Improvement Programme Update</b>		Angela D'Urso	10 mins	Item 6		
<b>RESTRICTED: Domestic Homicide Review Update</b>		CSP Team	10 mins	Item 7		
Forward Plan		Chair	5 mins	Item 8		
<b>AOB</b> Performance Report <b>Subgroup Updates</b> a- Substance Misuse Operational subgroup b - Contextual Safeguarding & Exploitation and YOS Board c - Hate Crime, Intolerance and Extremism d - Violence Against Women and Girls e - ASB Tasking Group f - Safer Neighbourhood Board Update g - Safeguarding Boards (LSCB/SAB Updates)		Chair Subgroup Leads	5 mins	Item 9	Daniel James a - Amolak Tatter and Clare Brutton b- April Bald/Angie Fuller c- Daniel Bacon d- Angela D'Urso/Daniel Thompson e - Julia Kanji f - Evan Hollows/ Ifthahar Ahmed g - Joanne Kitching/Jemma Breslin <b>NO UPDATE FOR REDUCING REOFFENDING BOARD</b>	

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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Subject:** Community Safety Partnership Performance report

**Date:** 03 April 2024

**Author:** Daniel James, Senior Intelligence and Analytics Officer

**Contact:** daniel.james@lbbd.gov.uk

**Security:** UNPROTECTED

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### 1. Purpose of Presenting the Report and Decisions Required

- 1.1 To provide a brief update on the review of the Community Safety Partnership Performance report.
- 

### 2. Recommendation(s)

- 2.1 It is recommended that the Community Safety Partnership Board:  
Note the contents of this update.

### 3. Main Text

The Community Safety Partnership Performance report is currently being reviewed to align with the Community Safety Partnership priorities and sub-groups. A new version should be available for the next Community Safety Partnership meeting in July 2024. In the interim the latest crime figures for the borough can be viewed on the existing Metropolitan Police interactive [crime dashboard](#) available on the Metropolitan Police website.

### 4. List of Appendices: Appendix 1:

N/A

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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

<b>Title:</b>	<b>Youth Justice Service Board Subgroup Update</b>
<b>Date:</b>	April 3 <sup>rd</sup> 2024
<b>Author:</b>	Angie Fuller, Head of Service, Adolescent and Youth Justice Service
<b>Contact:</b>	<a href="mailto:Angie.fuller@lbbd.gov.uk">Angie.fuller@lbbd.gov.uk</a>
<b>Security:</b>	UNPROTECTED

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### 1. Brief Update

- 1.1 The Youth Justice Service management Board has met twice during the last quarter, Jan 8<sup>th</sup> and Feb 19<sup>th</sup>.
- 1.2 The January meeting focused on:-
  - Performance Update – Quarterly performance update that showed that First Time Entrants into the criminal justice system had slightly risen in the last quarter but the overall trend has been a downward trajectory and we are currently sitting at 8<sup>th</sup> highest in London compared to previous years where we have been in the top 3. Reoffending has slightly risen in the last quarter but remains lower than this time last year but custody figures have increased. Whilst this equates to one additional child in custody this has increased our percentage and we are currently 2<sup>nd</sup> highest in London.
  - YJB oversight and quadrant framework – The YJB representative gave a presentation to explain the new YJS oversight and quadrant framework model that all YJS services are being rated against. We are currently in quadrant 2.
  - Update on restructure and improvement work - Improvements against audit activity and dip sampling as well as preparations for future inspection. Improvement work is underway and progressing well. Further audit completed which still raises concerns in some areas which is being addressed at the team day in April but does show some progress. Restructure almost complete and recruiting into the last few posts due to internal progression.

- Further Update on work to improve the health offer within the YJS presented and good progress is being made in this area. Health SOP is now finalised and signed off.

### 1.3 The February meeting focused on :-

- HMIP recent thematic report on those children who are remanded and sentenced to custody and the quality of the resettlement work. Highlighting the national findings and the learning for us and how we compare locally.
- Section 60 stop and search super complaint published by HMICFRS update to the board from police.
- Closer look at children remanded and sentenced to custody – focus on those children that are currently in custody and any themes and trends identified as well as court processes. This also gave the board an update with regard to next steps and changes in practices that are influenced by this work. Recruitment of a resettlement worker in the new restructure has also enhanced the offer for these children.

## 2. Key Challenge(s)

- 2.1 Ongoing improvement work and service developments have been slower than anticipated but the recruitment of the new service manager for Youth Justice has now meant that the service can move at a quicker pace with some of the developments needed.
- 2.2 The Youth Justice Service has been working with partners to ensure that systems and processes within their own organisations are able to meet the requirements expected of them. This has improved and is an ongoing area for development.
- 2.3 Ongoing improvement/development work will continue to ensure that standards are raised and that audit outcomes are improved and the service is prepared for future inspection.

## 3. Emerging Trends

- 3.1 None in addition to the findings outlined in the previous section.

## 4. Support required from CSP Board

- 4.1 Continued focus as a board on the scheduled improvements and learning from previous inspections.
- 4.2 Partner agencies ensuring that the themes that are highlighted in inspection reports and board meetings are considered and good practice identified is replicated.

- 4.3 Partner agencies need to ensure that the work of seconded staff is evident within the youth justice recording system as part of the recommendations from the audit.

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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Title:** Contextual Safeguarding & Exploitation Subgroup Update

**Date:** Wednesday 03 April 2024

**Author:** April Bald

**Contact:** April.bald@lbbd.gov.uk

**Security:** UNPROTECTED

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### 1. Brief Update

- 1.1 The Contextual Safeguarding and exploitation sub-group is in place to ensure coordinated multi-agency responses to reduce experiences of significant harm such as child criminal & sexual exploitation and serious youth violence that tends to happen in contexts outside the family home i.e. within peer groups, schools settings, online and neighbourhoods. The Partnership now known as the Adolescent safety and wellbeing strategic group met on 11 March 2024 . The members refreshed the terms of reference.
- 1.2 Education and Participation colleagues presented an update on the development of the new LBB Youth Offer - In September 2023, the Department for Culture Media and Sports released statutory guidance for local authorities in relation to improving young people's well-being. The new guidance makes it much clearer for Councils to ensure that their provision is effectively meeting the needs of young people in their localities. Local authorities have a statutory duty to provide a local youth offer for young people and are required to ensure that the offer is responsive to the needs of young people. The guidance provides greater clarity on what is required and specifies the need for high quality and effective practice provided by trained youth workers. The current LBB Youth Offer across the borough has suffered in Barking and Dagenham because of several years of cuts and an increase of need. A Head of Youth Support and participation has been appointed and will lead on delivering the new youth offer with meaningful participation from young people in the community, with additional focus on those with special education needs and additional vulnerabilities.
- 1.3 The annual Children's contextual safeguarding safety summit will be held in July, the Strategic group has kept oversight of the 'ask ' from children and young people at the last summit. It will be important that we can feedback in July what work has happened since we last met , so they can see their voices do make a difference . Making local parks safer was a consistent request from young people and our community safety colleagues are continuing to looks at CCTV, improving technology and lighting in car parks . The meeting agreed we needed to look at local park cafes being part of the Safe Haven scheme. The Comms team have agreed to continue the Lost hours campaign in 2024 , ensuring wider communication on adolescent safety with the wider community .
- 1.4 We know that children and young people are safer in school. That is why driving up attendance and tackling rising school suspensions and absenteeism is at the heart of the Mayor of London's Violence Reduction Unit's (VRU) prevention work . Since 2018/19, London has seen a 14 per cent rise in suspensions and a 106 per cent increase in persistent absenteeism- LBB figures highlight upward trend. The VRU has led a partnership approach to develop London's Inclusion Charter, built on the voices of young people and informed by schools, parents and carers, local authorities and

education specialists. This Charter is in line with the work we have already been doing across our schools . The LBBB inclusion charter will be launched on 26/4/24 .

- 1.5 The Strategic group reflected on the findings and recommendations from the HMICFRS inspection into child exploitation. We recognised some of the findings were not prevalent in LBBB as the partnership with police Exploitation colleagues is a strong one where the team have worked for several years applying a contextual safeguarding and trauma informed approach to responding to children at risk of sexual and criminal exploitation. We recognise however there is always room for improvement and the findings have brought with them much needed additional funding and growth in key police teams – MASH, Missing and Exploitation teams. This no doubt will enhance further improvements
- 1.6 MASE (Missing and sexual exploitation group) and CEG(Criminal exploitation group ) continue to meet on a monthly basis . These tactical and strategic meetings continue to be well attended with comprehensive reports provided by the Exploitation & missing lead. Key partners provide a monthly update on the work their service is undertaking to respond to this cohort of children. The sharing of information also supports targeting unsafe locations and people of concern. Meetings give the partnership an insight into the profile and experiences of young people at risk of exploitation in the borough.

## **2. Key Challenge(s)**

- We continue to only have access to data from Social care systems, partners attending the key Exploitation meetings do not provide any data , trends or analysis , this includes data on perpetrators .
- Whilst specific voluntary sector groups attend periodically to share updates on their work /offer , we have not yet secured a representative from the sector at the Strategic group

## **3. Support required from CSP Board**

- For the CSP Board to note the updates of the LBBB Adolescent Safety & wellbeing Strategic group and it's sub groups MASE & CEG



# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Title:** HATE CRIME, INTOLERANCE AND EXTREMISM

**Date:** Wednesday 03 April 2024

**Author:** Inspector Dan Bacon Met

**Contact:** Daniel.bacon2@met.police.uk

**Security:** [RESTRICTED]

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### 1. Brief Update

- 1.1 There has been an increase in relation to hate crime offences since the conflict in the Middle East this is reflected in the data. It was pointed out that this forum would be a good opportunity to address community tension with some more specific data and also by considering the views of community faith leaders. It is also a good opportunity to bring in community members from the LGBT+ community; much of the CSP response needs to take into consideration the needs of all communities. The most recent focus has been on upskilling and raising awareness for all staff in relation to graffiti or stickers advertising support for proscribed groups and promoting hate crime. This does not seem to be an emerging problem and there is no data to support this. The forum was an opportunity to provide members with an update on the Police Engagement and patrol plan for Ramadan.

### 2. Key Challenge(s)

- 2.1 The most obvious challenge faced by partnership currently is Ramadan which coincides with a significant increase in reported hate crime. The partnership response needs to be targeted and informed and of course meaningful. There is a significant effort being undertaken by police to engage with community leaders, but there is no specific forum that the police are engaged with currently as a forum to build consistent and effective relationships.

### 3. Emerging Trends

- 3.1 The majority of hate crime reported in this reporting period are racially and religiously aggravated crimes against the Islamic and Jewish community when considering the BCU as a whole. The data was not LBBB specific which is something that requires improvement. Al Madina Mosque on Fanshawe avenue is a repeat venue reporting hate crime offences and a considerable effort has been

made to increase meaningful engagement and presence during Friday Prayers as BAU.

#### **4. Support required from CSP Board**

- 4.1 Introductions and support into any existing faith forums and with the LGBT+ community (Billy Crossman, Rhodri Rowlands and Cllr Ghani have been instrumental thus far in assisting police to reach out). The police also need to support the board with specific data and information in respect of the community tension report. A table top exercise is being planned for faith leaders to participate in a Major Incident scenario where a discussion is invited into the collective response from police, community leaders and the local authority. The date is TBA and will be soon after Ramadan, this exercise has been written and will be delivered by a conversation member from the Police organised conversations with the BCU commander. A suitable venue will need to be identified depending on the number of faith leaders who express an interest in attending.

#### **5. List of Appendices:**

##### **Appendix 1:**

Minutes from the most recent TMHIE dated 01/03/2024



TMHIE Minutes  
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# COMMUNITY SAFETY PARTNERSHIP

## REPORT

**Subject:** Updates from the Safeguarding Children's Partnership (SCP) and the Safeguarding Adults Board (SAB).

**Date:** Wednesday 04 April 2024

**Author:** Joanne Kitching, Safeguarding Adults Board Business Manager  
Jemma Breslin, Safeguarding Children's Partnership Business Manager

**Contact:** [Joanne.kitching@lbbd.gov.uk](mailto:Joanne.kitching@lbbd.gov.uk) and [Jemma.breslin@lbbd.gov.uk](mailto:Jemma.breslin@lbbd.gov.uk)

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### 1. Brief Update

- 1.1 The four partnerships and boards work closely to share information and strengthen priorities across Adults, Children, Community Safety and Health and Wellbeing partnerships.
- 1.2 The table below provides a brief outline of the key items of business discussed at the last Safeguarding Children Partnership (SCP) Delivery Group and the Safeguarding Adults Board (SAB).

<b>SCP Delivery Group date:</b>	<b>Key issues</b>
<b>Safeguarding Adults Board – 24<sup>th</sup> January 2024</b>	<b>Key agenda items</b>
Safeguarding Adult Review 'George'	The SAR 'George' report was shared along with the findings and recommendations. Themes from this SAR included domestic, intergenerational abuse, coercion and control, multi agency co-ordination and risk assessment. The SAR report and updated learning briefing have been published and are available to view at this link <a href="https://www.lbdd.gov.uk/safeguarding-adult-reviews-sars/">Safeguarding Adult Reviews (SARs)   London Borough of Barking and Dagenham (lbdd.gov.uk)</a> The actions and learning will be overseen by the SAR Committee going forward.
BD One Panel	It was proposed that a BD One Panel be implemented which will take referrals for all Safeguarding Adult Reviews, Children's Safeguarding Learning Reviews and Domestic Homicide Reviews (DHR) using the current criteria. This will be an opportunity to co-ordinate all reviews and learning across all the three partnerships. All partners agreed. There will be monthly meetings and chairing will be shared across partners in 6 monthly blocks.
Neglect & Self Neglect Practice Work	Angela D'Urso spoke about the neglect improvement work and that we are looking to undertake some practice work around neglect and self neglect across Children's, Adults and partners services to get a deeper understanding in this area. It is proposed that there is a shared learning event held in April and practice work/week in April/May. Partners were asked to support this work and input where necessary. This may include attendance at a learning event or joint work to look at services, specific cases or information. Partners were asked to consider where might be useful to visit and what mechanisms might need to be included from external organisations perspective.
CQC Inspection Update	Joanne Starkie gave an update. Inspections have started and the CQC are announcing three new inspections per week. The improvement plan has been published on the Council's website at this link <a href="https://www.lbdd.gov.uk/plans-and-strategies-in-adult-social-care/">Plans and Strategies in Adult Social Care   London Borough of Barking and Dagenham (lbdd.gov.uk)</a> It is likely that

	<p>inspectors will want to interview the Independent Chair and other partners. The recent staff feedback sessions showed that Social Workers were positive about SARs and learning but more clarity might be required around the type of approach we take e.g. reflective, investigative or strengths based/appreciative enquiry approach. It might be helpful for us to reflect on the approach and how we communicate this when we discuss the learning from SARs.</p>
<p>London Safeguarding Voice (LSV)</p>	<p>The London Safeguarding Voices (LSV) group brings together people with lived experience of safeguarding from across London borough. HealthWatch Kingston are contracted by the London SAB via the London Association of Directors of Adult Social Services (London ADASS) to co-ordinate the LSV. HealthWatch Kingston has worked with local Safeguarding Adults Board (SAB) Chairs and Managers and local Healthwatch organisations to identify a range of local representatives with lived experience of safeguarding. This initiative supports the London SAB to ensure its work is co-produced and more person-centred. It is a safe space for people with lived experience of safeguarding and gives people an opportunity to give direct feedback to SABs. There may be opportunity to see if anyone is interested in the role via the Care Providers Voice Forum.</p>
<p>Learning from Persons in a Position of Trust (PIPOT) cases</p>	<p>Liana Kotze gave an overview of PIPOT and the duties under Care Act, to manage allegations of people in a position of trust. Two cases have been referred via the process in the last year. The cases have been reviewed and discussed to appropriately and proportionately managing the risks. Neither case went to a full PIPOT. However, the most recent case was referred through the PIPOT process and also investigated by the Metropolitan Police's Economic Crimes unit. Although this case did not reach the threshold for a full PIPOT there were a number of learning points from the case around protecting vulnerable people, informal carers, financial abuse and Lasting Power of Attorney. A learning briefing will be developed and there may need to be some joint work with voluntary sector organisations such as Age UK, Carers of B&amp;D and the ILA to ensure people know how to protect themselves.</p>
<p>SAR Committee Update</p>	<p>Two cases have been reviewed and discussed at the SAR Committee based on NELFT Serious Incident Report referrals. Scoping documents were gathered for further information from all partners to allow the Committee to decide whether they met the criteria for a SAR. These cases did not meet the criteria but for one of the cases a learning briefing was produced to support system wide learning. This can be accessed here <a href="https://www.lbbd.gov.uk/adult-health-and-social-care/barking-and-dagenham-safeguarding-adults-board/system-wide">https://www.lbbd.gov.uk/adult-health-and-social-care/barking-and-dagenham-safeguarding-adults-board/system-wide</a></p>

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Performance and Assurance Committee Update	The quarter 2 data and presentation was circulated. Vikki raised that the data set is very LA top heavy although we do get health data and some Police data. Much of the Police data is BCU wide and cannot be broken down by borough. A P&QA workshop will be held to develop next steps around the quality assurance work.
Safeguarding Adults Complex Cases Group	The meeting has been reviewing and managing the risks around one particularly complex case of a family. Partners involved include the NHS, Probation Services, Adult Care and Support, the Police, NELFT Mental Health Services and Housing Tenancy Services. A Multi Agency Professionals meeting has taken place outside of the Complex Cases Group to agree decisions to support the family and manage the risks. The case will be brought back to the next meeting for an update on the actions.