

Stafford Borough
**Community Safety
and Wellbeing Strategy**
2020 - 2024



**Community
Wellbeing**
PARTNERSHIP
STAFFORD BOROUGH

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Foreword

Welcome to our Community Safety and Wellbeing Strategy for 2020 - 2024. The strategy outlines the Community Wellbeing Partnership's aims and ambitions for Stafford Borough to continue to be a safe place to live, work, visit and socialise and where people have a greater sense of wellbeing. This new version of the strategy not only encompasses new statutory duties relating to Serious Violence but takes an asset based approach in providing preventative and early help support which simultaneously deliver outcomes of improved community wellbeing for our residents.

Community Safety and Wellbeing is a hugely complex area of work that requires a number of different partners from the voluntary and public sectors working effectively together to improve standards of living for all residents. With reduced budgets across the public sector and extreme pressure on the national health service, all sectors need to continue to introduce innovative ways of working together to ensure we continue to reduce all criminal activity and create the right conditions for wellbeing.

The outbreak of Covid-19 continues to have a devastating effect on the whole Country, on the lives that have been lost, the economy, and the way we now live our lives. As we find ourselves moving in between both response and recovery phases of the pandemic, it is still very much business as usual for us as a partnership as we keep critical services going and provide support to vulnerable residents. Covid-19 is impacting on all aspects of community safety and wellbeing, with some issues presenting more quickly than others such as domestic abuse, acquisitive crime and detriment to mental health. In planning for the future, the partnership remains committed to reducing crime, anti-social behaviour and improving the wellbeing of our residents.

There will be a number of key issues arising from the pandemic and Brexit that present further challenges to us over the next few years but we will continue to work with partners at a local, regional and national level to advocate the importance of the work that we undertake. With this strategy, we have an opportunity to make a real change and have a positive impact, to change the lives of some of the most excluded in our Borough and to improve their lives and those of their children.

Cllr Jeremy Pert

Cabinet Member for Communities and Health

Introduction

The Crime and Disorder Act 1998 placed a duty on local authorities to work together with key partner agencies and organisations to develop and implement local crime reduction strategies. These statutory partners are the Local Authority, Police, Fire and Rescue, Probation and Clinical Commissioning Groups. In Stafford Borough this partnership is the Community Wellbeing Partnership (CWP). The strategy interlinks with a number of national and local strategies and delivery structures, outlined in appendix one. The partnership recognise that activities to address community safety and wellbeing overlap with these agendas so priorities will focus on supporting and complementing, rather than duplicating existing activity.

A comprehensive Community Safety Strategic Assessment is undertaken in Staffordshire and Stoke-on-Trent every three years and an annual update is undertaken in the remaining two years. The annual update provides the Community Wellbeing Partnership (CWP) with a review of their current community safety priorities to check that they are still the most important crimes or themes for the partnership to focus on. The Community Wellbeing Partnership and the Police, Fire and Crime Commissioner have a duty to have regard to each other's priorities and ensure that these are reflected in their partnership plans.

The partnership priorities for Stafford Borough were assessed to make sure they were still the most relevant for the CWP to focus on during 2020-2024. Data from a wide range of sources was analysed to show how the Borough compares with other areas for the priority crime types and how volumes and rates have changed over time and how they vary by ward. Information from research was used to describe any notable risk factors and victim and offender characteristics as well as approaches to partnership working. This enables the Partnership to determine how being a victim of crime impacts on an individual's wellbeing and how, by addressing in partnership those key groups with certain characteristics or risk factors can make individuals feel safer and reassured, thereby improving wider population wellbeing. In society today it is evident that the face of crime is changing and the type of crime being committed is becoming more complex, which has a huge impact on victims of crime. Over the past few years we have seen increases in issues such as cyber bullying, criminal and sexual exploitation and as a partnership we work hard to try and implement preventative and early help initiatives which address root causes, reduce risks and fears.

The new Serious Violence Act placed a statutory duty on community safety partnerships and other partner agencies to ensure that the organisations work together to share information, data and intelligence and encourage partnership working to prevent and tackle serious violence. From children to the elderly, serious violence can affect people across all stages of life. Many survive serious violence but suffer physical, mental, and/or emotional health problems throughout the rest of their lives. We are committed to stopping serious violence before it begins. By approaching serious violence through a public health approach we aim to deliver

sustainable reductions in serious violence and improve the health and quality of life of all residents and visitors to Stafford Borough.

We aim to address this through understanding the issue and local needs, addressing risk factors that increase the likelihood of somebody becoming an offender or a victim. Prevention and early help support will be central to our approach and will require the commitment of a range of agencies and communities in Stafford Borough and surrounding areas.

Local Context

Stafford Borough is one of eight district and borough councils that make up Staffordshire in the West Midlands. Stafford is the county town and the borough is the largest district geographically, predominantly rural, with 32% of the population living in these areas, its economic scale score of 84.71 ranks it as medium size by British standards. The borough has over 134,800 residents and has a lower proportion of people aged under five, under 16 and aged 16-64 compared to average. The population is projected to increase by 3% by 2027 with a significant growth in people aged 65 and over. 5% of Stafford residents live within the most deprived national quintile.

Stafford Borough is also experiencing growth with an additional 7,000 new homes to be built in the town over the next 15 years. The redevelopment and inward investment will also bring its own challenges in terms of licensing and policing resources that will need to be given some consideration going forward.

Although some areas of Stafford Borough demonstrate positive results in terms of key quality of life indicators, there are a number of areas where families and communities face multiple issues such as unemployment or low incomes, low qualifications, poor housing or ill-health (physical and/or mental). Wards which have the highest risk of poorer outcomes, where families and communities face multiple issues, based on an assessment of key indicators are ¹Common, Coton, Doxey & Castletown, Forebridge, Highfields & Western Downs and Penkside.

Life expectancy for men in Stafford is higher than the national average and women's is similar to the national average. However both men and women who live in the most deprived areas of Stafford Borough live four and six years less than those living in less deprived areas. Healthy life expectancy is similar to England for both men and women at 65 and 66 respectively.

¹ Stafford Data Pack 2018 – Staffordshire Observatory

²The impact of COVID-19 has replicated existing health inequalities and, in some cases, increased them. There is evidence that self-reported mental health and wellbeing worsened during the first national lockdown of the COVID-19 pandemic. Psychological distress, anxiety and depressive symptoms appeared to peak in April 2020 and whilst there is evidence of some recovery since April, this has not yet returned to pre-pandemic levels.

Approach

We will continue to work in partnership with a broad range of agencies to understand the causes and consequences of crime and violence; focusing on early intervention and prevention, being informed by evidence and evaluation of interventions. A wide range of statutory and non-statutory agencies will be involved, as well as insight from communities and the voluntary sector.

All of our outcomes for our residents, families and communities are affected by a wide range of social, demographic, environmental and economic factors which are inextricably linked. It is often the same families and communities that have poor outcomes and who more likely to be the victims and also perpetrators of crime and anti-social behaviour.

There is increasing focus upon public sector organisations working in partnership with each other, the voluntary, business sectors and communities to plan, design, resource, build and deliver services around people, families and communities in the most disadvantaged communities to support them to improve their life opportunities. This approach to place based working helps to look at issues in a more holistic way, to identify support at the earliest opportunity and to identify any gaps or duplication of effort. It is recognised that at a district level that this kind of place based approach is well established and this is evident through the early identification of issues through mechanisms such as the Partnership HUB and the Stafford Borough Supporting Schools Programme. This multi-agency approach is something that we will work with partners to continue to develop.

We will continue to develop a health in all approach with our partners to ensure that the wellbeing of local people is at the forefront of everything we do. Collaborating with partners to target vulnerable groups or deprived communities for the purpose of improving safety, can deliberately result in positive wellbeing outcomes which have a wider social and economic benefit. Such interventions can help to **enhance place based social cohesion, connect people with their localities** and improve local conditions and community behaviours which in turn contribute to reduced health inequalities.

² [covid-19-mental-health-and-wellbeing-surveillance-report](#)

Recommendations from the Community Safety Strategic Assessment 2020

The coronavirus (COVID-19) pandemic has had a considerable and unprecedented impact on the lives of everyone in the UK, including those in Staffordshire and Stoke-on-Trent. The virus and measures to control rates of infection (such as the national lockdowns, systems to limit social contact, and the temporary closure of education settings) have had a significant impact on many; directly affecting individual's physical health, mental health and well-being, education, and employment.

A survey of local residents (n=3,921) carried out by Staffordshire County Council³ highlights that more than 3-out-of-5 people (63%) felt that the pandemic has had a negative impact on their life overall - with those with a disability or limiting illness, and those who have been furloughed, having experienced even greater negative impact.

Rather than focus on Covid-19 within this assessment as a single specific priority or risk to community safety, the impact of the pandemic has been considered and discussed as a factor in each individual priority theme, wherever it is relevant.

Key findings and comparison to previous (2019) assessment

Significant overall changes and findings

Restrictions imposed as part of the government approach to controlling the Coronavirus pandemic have resulted in significant reductions in recorded crime and disorder from mid-March 2020 onwards. This is particularly the case with regards to crime, disorder and ASB taking place in public places.

The data for the period from April 2019 to March 2020 shows a considerable reduction in crime in Stafford Safety Partnership area prior to the pandemic compared to the previous year; with a 9% reduction in Stafford, compared to a 2% average increase seen across all Safety Partnership areas in England & Wales overall.

While the overall rate of crime in Stafford is statistically similar to the national CSP average, there are a number of crime types which are statistically well below average, particularly Violence with injury offences, Burglary, and Public Order offences. There are no major types of offence where rates in Stafford overall are statistically high. Rates in Forebridge ward are significantly above local ward averages, but this is similar to all other town/city centre wards in Staffordshire and Stoke-on-Trent.

³ <https://www.staffordshire.gov.uk/Coronavirus/Covid-19-residents-survey-results.aspx>

There has been no significant shift in the demographic composition of any of the Safety Partnership areas in Staffordshire and Stoke-on-Trent, and demographic analysis for the Stafford Partnership area within the previous (2019) Strategic Assessment still remains relevant.

Changes against key priorities and recommendations

Community Cohesion and Tackling Extremism

- This priority replaces two pre-existing priorities around *Community Cohesion & Hate Crime* and *Counter Terror/Prevent* - with the two merged together and renewed focus on Community Cohesion.
- This merge is taking place in the wake of Brexit, as well as in response to increases in Right Wing extremism, and tension in some communities resulting from breaches of COVID guidance and legislation.
- Since the time of the last report the UK terror threat level has been lowered from 'Substantial' to 'Severe'

Areas of consideration

There should be additional consideration for children who receive home education, including those who have started to be home educated throughout the COVID-19 pandemic, to ensure that they are receiving a well-rounded education in order to prevent any extremist teachings and that they are also safeguarded.

Safety Partnerships should engage with the development of Community Cohesion partnership work through the Safer & Stronger Communities Strategic Group, which will link in to existing strategic Hate Crime work and the Prevent board. Partnerships should also strongly consider whether there is a need to work with local partners and stakeholders (such as voluntary sector partners) to develop local Community Cohesion strategy for their local area.

As people spend more time online as a result of COVID-19-related restrictions on social contact, it should be considered that there is increased risk around online radicalisation. Partnerships should continue to raise awareness of extremism and potential signs of radicalisation within communities, and particularly in those communities at risk of emerging extreme right-wing and far-right extremism. Young people, parents/guardians and community members should have an awareness of prevalent extremist groups.

Domestic Abuse

- In the 12 months to November 2020, Stafford has seen the largest increase in Domestic-related offences out of the nine local CSP areas (+9%, compared to overall 0% force-wide).
- The area saw significant spikes in incidents and also calls to local helplines in both July and August 2020. Similar spikes were seen in five other CSP areas, although those in Stafford were particularly high.

Areas of consideration

Safety Partnerships should remain sighted on the Domestic Abuse Bill (2020) - due to become law in April 2021. This places statutory duties on upper-tier LAs, including the duty to provide victims (and their children) with appropriate safe accommodation and support whilst in accommodation. Stafford Borough is fortunate to have a purpose built refuge catering for families fleeing domestic abuse as well as a number of dispersed units which were set up to meet increased demand, in part resulting from the pandemic. This provision is critical in meeting both housing and community safety duties and the roll out of the new accommodation duty will be closely monitored to ensure that these valuable facilities are placed on a sustainable footing. Responsible authorities will be required to form Domestic Abuse Local Partnership Boards and CSPs should ensure that they engage with these accordingly.

Fraud

Fraud is of increased and growing concern in Staffordshire and Stoke-on-Trent.

- Monthly Fraud incidents picked up by the National Fraud Intelligence Bureau (NFIB) increased significantly following the first UK lockdown in March 2020 – and have remained consistently high since.
- Much of the increase has comprised of less-sophisticated fraud, taking place through online marketplaces and auctions. With increases in online shopping during the pandemic, it is likely levels will remain high into 2021.

Areas of consideration

Telephone and courier fraud still present a high risk to particularly vulnerable and socially isolated groups. As these are individuals who are often not connected digitally, it is essential that awareness raising activity includes a focussed element for identified high-risk groups who might be missed by online and digital awareness raising activity. With growth in online auction/marketplace fraud, those who are connected digitally are also at increasing risk - awareness raising strategy should also consider younger age groups who carry out much of their non-essential shopping online.

Vulnerable Persons (including County Lines)

- There is growing concern that the wider impact of COVID will result in considerable increases in demand relating to all major vulnerabilities (alcohol, drug and substance misuse, mental health, safeguarding)
- Analysis⁴ has already found that, taking account of pre-pandemic trajectories, mental health has worsened substantially (by 8.1% on average) as a result of the pandemic. Young adults and women - groups with worse mental health pre-pandemic - have been hit hardest.

Areas of consideration:

Given the impact of the Coronavirus pandemic; on physical health, mental health and well-being, employment, and education - it should be considered that over the next 12-24 months there will be increases in numbers of people and families considered to be vulnerable. Partnerships must consider that this will not only increase demand on support services and partners, but also increase numbers of individuals who may be at increased risk of criminal exploitation. It is important that mechanisms to document, share, and escalate concerns around exploitation and vulnerability can cope with increased pressure.

At the start of the first lockdown those in insecure housing presented to the council, many were well known to services and had multiple support needs. Many have been rehoused, but there are still significant numbers either in emergency accommodation, sofa surfing or on the street. During the pandemic there has been a significant increase in calls to the homelessness service in relation to family breakdown, in 2020/21 it has been the single biggest cause of homelessness accounting for around a third of all cases.

With people staying at home, those who are living in poor housing conditions have really struggled and there has been a significant increase in requests for help both from individuals, friends and family and from other agencies. Poor housing conditions have a direct impact on a person's health and there have been challenges in both inspecting properties and getting work completed, due to ongoing restrictions as a result of the pandemic.

Going forward housing are anticipating challenges as a result of the full lifting of the ban on evictions as well as rising unemployment, which often leads to a loss of accommodation. The impacts of the pandemic around mental and physical health and increased needs of residents can make acquiring and sustaining housing more challenging.

⁴ Institute of Fiscal Studies (IFS) - The mental health effects of the [first] lockdown and social distancing during the Covid-19 pandemic in the UK

Recommendations linked to additional considerations

Business Crime: Preliminary findings from Staffordshire Commissioner's Office report on Business Crime suggests that there may be a need for greater engagement with smaller businesses in partnership areas, in order to better understand their needs and how they are impacted by crime.

Summary of Local Community Safety Priorities

The identified priorities are as follows;

- Anti-Social Behaviour (ASB)
- **[REVISED] Community Cohesion & Tackling Extremism**
(combines previous 'Counter Terror' and 'Community Cohesion and Hate Crime' priorities)
- Domestic Abuse
- County Lines⁵
- Modern Slavery / People Trafficking
- Fraud
- Vulnerable Persons and Safeguarding (incl. Mental Health)

Repeat and persistent offending, homelessness and rough sleeping are priorities for Stafford, however their delivery is subject to dedicated strategies and governance arrangements. Given their impact on communities it is recommended this group has awareness and a degree of oversight of them.

In addition, there are some challenges which, while not necessarily overly present in the partnership area, require the work of the whole partnership to address. It is important for each partnership to consider how they can contribute to the force-wide approach and strategy. These challenges are highlighted as;

- Fire and Fire Risk
- Business Crime
- Serious Violence

People and Communities at Greatest Risk

Vulnerability is cross-cutting; many of those considered vulnerable for a range of concerns (including general safeguarding, social isolation, economic stress, and health and mental health concerns) are also additionally vulnerable to criminal exploitation and victimisation through crime and ASB. Stafford Borough has a high prevalence of suicide, this topic links to mental health, substance abuse and many

⁵ County Lines refers to organised drug supply and trafficking routes into and out of 'county' and rural areas from metropolitan areas.

factors similar to those which increase a person's susceptibility to becoming a victim or offender in crime or violence to others. Staffordshire's Suicide Prevention Strategy, 'Saving Lives', is currently being refreshed and the partnership should have oversight of this to ensure that consideration is given to this in their partnership plans.

It is considered, based on existing UK research (IFS and ONS), that the wider impact of the Coronavirus pandemic will be an increase in the numbers of vulnerable persons in the UK, rather than a dramatic shift in reasons for vulnerability.

Those considered to be particularly vulnerable to experiencing crime, safeguarding concerns or being criminally exploited in Stafford borough are identified as;

- Offenders with known drug dependencies or previous drug-related offending
- Children (under 10s) in areas with high levels of Domestic Abuse and/or drug-related offending
- Children and young people (aged 10-19) in areas of high deprivation
- Children and young people (aged 10-19) at risk of criminal exploitation
- Socially isolated older adults
- Socially isolated adults with alcohol and/or drug dependencies
- young people missing school who have received fixed term exclusions, high levels of absenteeism and those with behaviour issues in School.
- Families with Early Years Children with lower Levels of Development

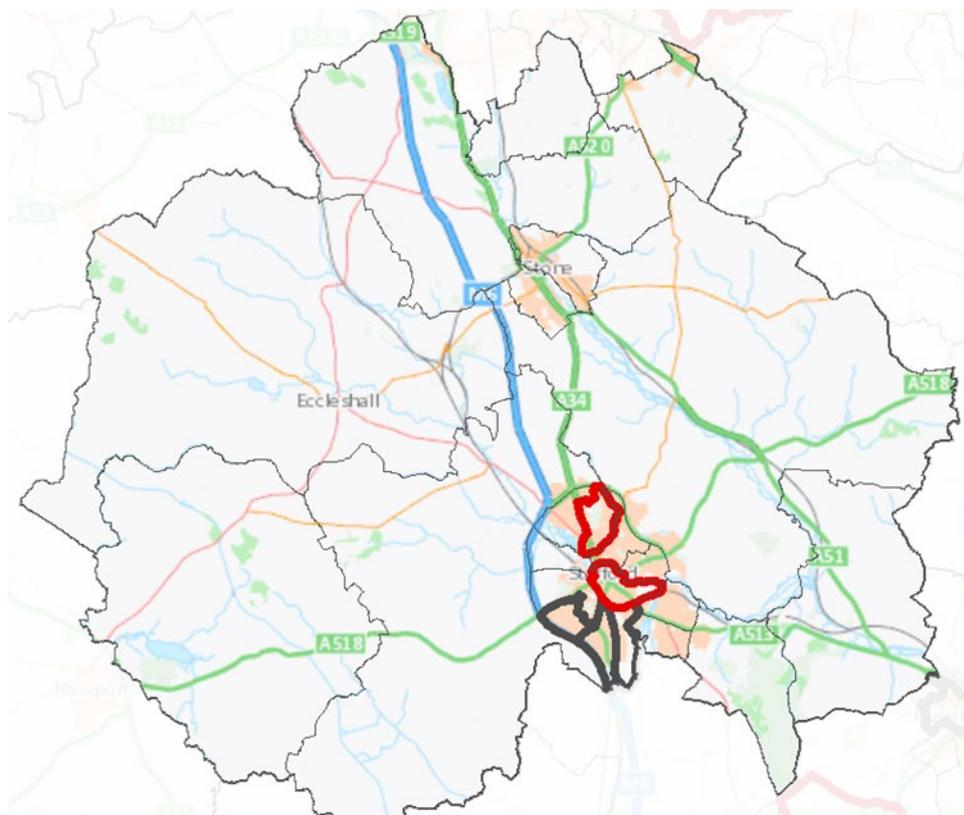
Those who belong to the 'Family Basics' demographic Mosaic group tend to be the most disproportionately affected by almost all aspects of crime and anti-social behaviour in Stafford (5% of population, 12% of all victims).

These are primarily younger families (aged 25-40) with infant or primary school-aged children, living in lower-cost housing, in areas with higher levels of deprivation. Adults in these communities tend to have limited qualifications; many are employed in lower-paid and lower-skilled jobs resulting in limited financial resources and high levels of economic stress, with many requiring an element of state support, particularly through access to social housing and through universal credit.

Those in the Senior Security group are also considered particularly vulnerable, due to their significant over-representation amongst victims of Fraud – but under-representation amongst victims of crime overall. Those in the Senior Security group are most likely to be over 65 and even more likely still to be over 75, living in affluent communities, but fairly socially isolated and spending a lot of time in their home.

Older people living in isolation, who are particularly vulnerable to experiencing Fraud offences, are also vulnerable to 'door step' crime, which may involve intimidating and aggressive behaviour on the part of the offenders or an element of befriending or grooming of the victim to facilitate the offending or repeat victimisation.

Places at Greatest Risk



The areas of greatest priority in Stafford CSP area are generally centred around the more urban and densely populated parts of Stafford town and the edge of Stafford town, these are;

1. Forebridge (Stafford Town Centre) (Overall crime, ASB, All individual crime types)

As the ward that covers the largest public-space in Stafford, Town sees the highest rates of crime overall, as well as statistically high levels most individual types of crime, in addition to a high level of ASB relating to Rowdy and Inconsiderate Behaviour.

2. Common (Domestic offences, Child Safeguarding, Drug-related offending)

Common ward has the second-highest rate of offending in the Stafford CSP area. Drugs offences are above ward-average. Levels of Children's Safeguarding concerns in the area have been historically high, as have rates of Domestic offences.

Although not flagged as a priority ward through overall offending rates or volume of incidents, the following may need consideration – as rates of incidents are only narrowly below the threshold for being considered significantly high.

3. Penkside (Child Safeguarding and Drugs offences)

Although Penkside doesn't experience significantly high rates of offending or ASB overall, it does see significantly high rates of Looked-After Children (LAC) and has recently (2019-20) experienced high levels of Drugs offences.

4. Highfields and Western Downs (Child Safeguarding, Domestic offences, County Lines risk)

The level of overall crime and ASB in the ward does not meet the threshold for concern, however, the area sees a high number of LAC and above-average levels of Domestic offences - with the area also experiencing some significantly high levels of deprivation.

5. Manor (Residential Burglary)

While Manor ward was identified as an area of consideration in last year's full assessment; the previously recorded uncharacteristically high rates of Residential Burglary and Vehicle Offences have both fallen considerably in 2019-20 and are now in line with averages across Staffordshire and Stoke-on-Trent. There is value in tracking whether these declines have continued, however it should be considered that crime data for 2020-21 will be heavily impacted by COVID related restrictions such as the national lockdowns.

(Source: Stafford Borough Community Safety Strategic Assessment, produced by Staffordshire County Council in partnership with the Staffordshire Commissioners Office)

Community Safety and Wellbeing - Aim

We aim to:

To improve the quality of life of local people by providing a safe, clean, attractive place to live and work and encouraging people to be engaged in developing strong communities that promote health and wellbeing.

In order to deliver our approach, we will foster robust partnership working to deliver our priority areas under three main workstreams that will focus on prevention and early help support and improve the wellbeing of individuals:

Primary Prevention

- to prevent the onset of crime, disorder and violence
- to change behaviour so that crime and violence is prevented from developing;
- to prevent and mitigate the impact of crime, disorder and violence on the health and wellbeing of individuals and the wider community

Secondary Prevention

- halt the progression of crime and violence once it is recognised and has started to become established through early identification / diagnosis followed by prompt, effective support, treatment and/or diversionary activities.

Attitudinal Change –

- change attitudes and behaviours towards all types of crime, disorder and violence at a societal, community and personal level

As such, as a Partnership we will work together to aim to:

- **Work jointly** at every opportunity; having a **multi-agency strategy** supported by **strong, partnership governance and delivery** arrangements;
- Provide **effective strategic leadership**; ensuring an integrated approach, with relevant partners involved and held **accountable** for their contribution;
- Understand the **risk and profile of violence** within our communities;
- **Involve communities** in shaping and delivering responses to crime, disorder violence and improved wellbeing and community cohesion;
- **Not be constrained** by organisational / professional boundaries;
- Develop and maintain a **public health model that understands and addresses the root-causes of crime**; including prevention, early intervention, targeted support, specialist provision, recovery and enforcement activities / services (to respond to all levels of demand);
- Base our interventions on **data and intelligence**;
- Root our response in **evidence of effectiveness** to address the problem;

- **Break the cycle** of crime and serious violence within families;
- Focus on **addressing risk factors** that can impact on an individual's vulnerability and susceptibility to becoming a victim or offender of violence;
- Target interventions to help **mitigate and protect children** against these factors;
- Generate **short, medium and long term** solutions;
- Adopt a framework of **continuous learning**;
- Work in an asset based way which values communities' strengths and opportunities (rather than purely deficits) to build upon community cohesion and social capital for wider wellbeing;
- Implement robust **workforce and community development**;
- Ensure synergies with **other related strategies** and services.

Workstream One: Primary Prevention

Our ultimate aim is to prevent crime and violence in order to improve the wellbeing of our residents. Gathering data to identify new trends is core to prevention and changing outcomes in the longer term. Also critical is support for the development of a range of programmes which help children to be the best they can be.

We will:

For Children, Young People, Parents and Carers

- Continue to develop the Supporting Schools Programme to raise awareness of violence and violent crime and broader vulnerabilities such as anti-social behaviour, exploitation, substance misuse, mental health, domestic/sexual abuse
- Review the homelessness prevention programme in schools to ensure young people stay in the family home where possible and it is safe to do so
- Support the development of a strong and consistent approach to PSHE (Personal, Social, Health and Economic (PSHE) Education) with schools and other educational establishments to reduce impulsive and aggressive behaviour and to increase social competence and resilience;
- Support communities, businesses and residents in raising awareness of the causes of crime, violence and related services;
- Advocate for early years support as crucial to preventing all types of crime;
- Support parents and children from the most deprived areas in improving the life chances of their children;
- Maximise opportunities to work with children and families before issues arise and when they do arise, respond in a swift and coordinated way;

- Work with parents and communities in designing and delivering safer communities;
- Encourage community cohesion and greater intra-community support;

For Partnerships and businesses

- Have all crime recognised as a shared strategic issue for relevant partners;
- Ensure relevant bodies are sharing timely information as a mechanism to understand and respond to local needs and to prevent all types of crime;
- Work with a range of early intervention services to identify potential victims and potential offenders;
- Strive to give those with no voice, a platform to change their outcomes;
- Advocate the role of everyone in preventing violence and the importance of equitable, respectful relationships; raise awareness about what it is to be a role model;
- Equip professionals with the skills to recognise and respond to adverse childhood experiences;
- Support the development of peer mentoring, encouraging people who have previously accessed violence-related services to become mentors;
- Promote a whole-system approach to criminal and violence-related issues, supporting the development of integrated pathways between all services.

Workstream Two: Secondary Prevention

By developing prevention mechanisms that specifically target those at risk of either committing violence, or being the victim of violence, we will support the reduction of crime and violence in order to promote sustainable and positive change.

For Children, Young People, Parents and Carers

We will:

- Work with schools to agree a standardised approach to partner / police support and input;
- Support the introduction of mentors (against violence) into targeted schools;
- Support the work with higher education establishments to prevent sexual assault;

- Through the Supporting Schools Programme, support schools in reducing exclusions and 'off-rolling' from school;
- Support families experiencing crime and violence in order to prevent the intergenerational cycle of crime and violence from continuing;
- Through a place based approach, build a network of women and men with 'lived experience' who volunteer to mentor and support those who seek to change their lives;
- Through mediation, work with families to ensure young people who can no longer stay in the family home have planned moves rather than crisis evictions;
- Explore the need for young person's accommodation to ensure best possible outcomes for those unable to live in the family home who otherwise could be at risk of violence and victimisation;
- Support a multi-agency place based approach in taking enforcement and disruption action (county lines, drug markets etc) and utilising statutory powers effectively and proactively;

For Partnerships and businesses

- Support a place based approach to dealing with crime, serious violence and vulnerability as a way of co-producing better outcomes in communities;
- Work with the licensed trade to help reduce crime and violence;
- Work with voluntary and faith groups in developing and supporting the mentoring of our most at risk young people as a way to change behaviour;
- Commission a range of effective, joined up related services able to meet the needs of potential victims and potential offenders;
- Support the development of vulnerability education / prevention programmes, support to those considered more vulnerable to / at risk of violence;
- Divert children away from harm through targeted intervention

Workstream Three: Attitudinal Change

We will work to prevent serious violence and crime from happening in the first place by challenging the attitudes and behaviours which foster it and intervening as early as possible. This will take all community members and professionals to work with us and to change mind-sets in believing that crime and violence is preventable.

We will:

- Champion the agenda;
- Inform and educate to help change society's views about the nature and causes of violence and the way ahead;
- Seek to influence public opinion and the role of the media;
- Facilitate a more positive relationship between communities (community members and public/voluntary sector organisations) and the service providers;
- Continue to work with victims and the families of victims, keeping them at the heart of our prevention work;
- Support the development of a widely accessible knowledge base for injury and violence prevention and control;
- Design a more targeted pro-social media approach to more vulnerable / at risks groups;
- Engage with both the traditional and non-traditional media to promote a positive image of the County as well as promoting young people more positively.

Implementation

The implementation of this strategy will be overseen by The Community Wellbeing Partnership (CWP). The CWP will ensure that planning and programmes are delivered effectively, in a structured coherent manner, with the appropriate communities and in a timely fashion. It will govern the agenda, establishing strategic priorities, joint commissioning intentions and budgets, challenging and managing performance, sharing good practice, championing achievements and identifying and managing risks. Performance reports from commissioned services will be presented to the CWP each quarter.

The CWP Delivery Group will have responsibility for the development of the delivery plans that will detail how the strategic priorities and recommendations will be taken forward.

Appendices

Appendix One: Strategic Direction / Links

This Strategy has links to numerous national and local strategies and delivery structures. These include:

- Drug Strategy (2017);
- Alcohol Strategy (2012);
- Serious and Organised Crime Strategy (2018);
- National County Lines Action Plan (2016);
- Ending Gang and Youth Violence (2015 - 2018);
- Working Together to Safeguard Children and Keeping Children Safe in Education 2018);
- Troubled Families Programme;
- Serious Violence Strategy (2018);
- National County Lines Action Plan (2016);
- Ending Gang and Youth Violence (2015 – 2018);
- Staffordshire Early Help Strategy;
- Stoke on Trent Early Help Strategy;
- Safer Fairer United Communities for Staffordshire 2017-2020;
- Stoke-on-Trent Safer City Partnership Plan 2017-2020;
- Staffordshire Community Safety Agreement 2017 – 2020;
- Staffordshire Safeguarding Boards Strategies / Plans;
- Staffordshire Domestic Abuse Strategy; Breaking the Cycle (2017-2020);
- Staffordshire Policing Plan (2018/19)
- Saving Lives: Staffordshire Suicide Prevention Strategy 2015/15 - 2020/21

(List not exhaustive)

We recognise that activities to address violence overlap with these agendas and we will seek to support and complement, rather than duplicate, existing activity. As such, we will ensure that the Strategy and supporting action plan builds upon this existing activity and, where possible, is delivered through established partnership arrangements.

Appendix Two - Serious Violence

For the purpose of this document, the World Health Organization (WHO) definition of Violence has been adopted:

“the use of physical force or power, threatened or actual, against oneself, another person, or against a group or community, that either results in or has a high likelihood of resulting in injury, death, psychological harm, mal-development or deprivation”.

This provides a broad, inclusive basis for the strategy and supports the approach being taken.

National Context

- Serious Violence is a national priority due to its growing prevalence and impact
- There has been a significant rise in serious violence, with increases seen in homicide, knife and gun crime experienced in virtually all police force areas since 2014. Offences of Robbery have also risen significantly since 2016. The violence is often gang-related and the association with drugs markets, particularly crack cocaine has clearly been evidenced. Too often children and young people become the victims of gun and knife crime resulting in the tragic loss of life.
- The detrimental impact on communities is also evident, particularly with the exploitation of young people, in many cases by organised criminal groups running ‘County Lines’, and the speed of issues emerging in an area can be frighteningly fast as organised groups infiltrate an area and take hold.
- As such, the Government published its ‘Ending Gang and Youth Violence: Community Engagement’ report in 2014, which highlighted key principles for successful community engagement as part of the solution to combating gang and youth violence. It also reinforced the principle that ending youth violence requires an end-to-end approach, from prevention to rehabilitation, from a range of statutory and non-statutory partners including the local community, public agencies and businesses.
- The Government then launched its “Serious Violence Strategy” in April 2018; striking a balance between enforcement, early intervention to tackle root causes of violence and a strengthened partnership response. The key themes of the strategy are: Tackling county lines and misuse of drugs; Early Intervention and Prevention; Supporting Communities and Partnerships; Effective Law Enforcement and Criminal Justice Response.

Appendix Three - Overview of the CWP Priorities

Domestic Abuse

Domestic Abuse is recognised as an under-reported issue, with much abuse hidden. Stafford Borough has seen a significant upward trend in reported Domestic Abuse incidents since May 2014. While this is not necessarily a negative trend (confidence in reporting meaning that victims are not suffering in silence), it has an impact on the CWP's ability to manage the issue from a resourcing perspective. While Domestic Abuse presents a significant direct risk to victims, it also has a wider negative impact where children are present in households. Links between Domestic Abuse and child neglect/abuse are well known and evidenced.

In 2019-20 there were 1,455 Domestic-related offences in Stafford, around 20% of all crime in the local Safety Partnership area. The rate of Domestic crime is 10.6 per 1,000 population, which is below the force-wide rate (14.2).

Although around 20% of crime in the area is flagged as being domestic-related, this increases to 40% amongst violent offences overall, and 45% of Stalking & Harassment offences.

The majority (78%) of recorded Domestic offences in Stafford in 2019-20 were violent offences; 34% Violence without injury, 27% Stalking & Harassment, 17% Violence with injury. Domestic incidents are not limited to Violent Offences and cross a range of offence types; around 7% of domestic offences in Stafford are instances of Criminal Damage, 4% are instances of Theft, and 2% were Sexual Offences (half of these being incidents of Rape).

Nationally reported increases in Domestic Abuse following the first national lockdown and wider impact of COVID on society appear to have been seen in Stafford - in the 12 months to November 2020 there was a significant increase (9%) on the previous 12 months. There have been considerable spikes in reported monthly incidents in both July 2020 and August 2020 - both of which were just above the upper-most range of what is considered normal variation.

Victims of Domestic offences are disproportionately repeatedly victimised compared to victims of other types of crimes. In Stafford in 2018-19, while 24% of victims of any crime were repeat victims and were the victims in 42% of all crimes in the area; 38% of victims of Domestic-flagged offences were repeat victims, and were the victims in 63% of all Domestic crimes.

To address this the CWP commissioned healthy relationship workshops to be delivered in schools. The outcomes of these were that young people were able to:

- Identify different emotions and how to respond to them
- Identify the characteristics of a healthy, respectful relationship
- Identify the characteristics of an unhealthy and disrespectful relationship

- Seek appropriate help and intervention
- Have a better understanding of the rights and responsibilities of young people, agencies and communities
- Better understand equality and diversity
- Increase confidence and social skills
- Increase a sense of self-identity

During 2020/21 Workshops will be delivered to teachers to enable them to confidently deliver a lesson on Healthy Relationships to children from Year 6 in primary schools and Year 9 in high schools. These lesson plans include the new Government guidance for Relationships Education and OFSTED recommended standards.

During 2018/19 we provided specialist one to one outcome focussed support to 76 children and young people affected by domestic abuse or sexual abuse in Stafford Borough.

The following outcomes were achieved:

- 68% reported increased safety
- 86% reported improved health and wellbeing;
- 77% reported improved confidence and self-worth;
- 72% reported improved skills, knowledge and confidence to establish boundaries and assess abusive and healthy relationships.

Measures were put in place to allow victims of domestic and sexual abuse and their families to remain in their own property feeling confident of their security. The Sanctuary scheme provided a safe and secure environment through the provision of security measures as identified by the police and other relevant agencies. It reduced the potential homelessness caused by domestic violence and a potential reduction in repeat victimisation and incidents of domestic violence.

From 1st April 2018 to 31st March 2019 a total of 26 victims of domestic abuse have been able to remain in their own home through the provision of a sanctuary.

The Independent Sexual Violence Advisors (ISVA) were commissioned to give victims of sexual violence:

- An increased awareness of their rights and available legal, welfare, health and practical choices.
- An improved sense of emotional wellbeing and self-esteem.
- Greater feelings of safety.

Between April 2018 and March 2019 50 women in Stafford Borough received support from the ISVA service.

Anti-Social Behaviour

Due to the high volume of ASB incidents seen in Stafford Borough CSP (as per across the County) the severe harm it poses to communities and repeat victims and the fact that it is a key priority for residents of Stafford Borough means ASB has been chosen as a strategic priority for Stafford Borough CSP. The combined impact of volume and frequency is causing both capacity and capability issues and impacting on the CSPs ability to deal with the problem whilst maintaining public confidence.

ASB accounts for a significant amount of demand across the partnership (roughly 25%). In 2019-20 there were 3,460 ASB incidents recorded in Stafford by the Police – equivalent to a rate of 25.2 incidents per 1,000 residents. This is a fractional reduction compared to 2018-19 but remains lower than the force-wide rate of 28.9 per 1,000 population.

While in the 12 months to date (November 2020) ASB was slightly lower than the previous 12 months (-2%) this also included a significantly spike in April 2020 due to COVID-related ASB incidents, prior to these moving to a different recording mechanism.

Since new recording began (20th April 2020) up to 30th November 2020 there had been 1,090 ASB incidents in Stafford which were specifically breaches of COVID-related legislation - equivalent to 7.9 per 1,000 residents. This is slightly below the force-wide rate of 8.9 per 1,000 population.

ASB in Stafford remains dominated by reports of incidents of 'Rowdy and Inconsiderate Behaviour' (65% of ASB) and to a lesser-extent 'Neighbour Disputes' (15% of ASB). Around a quarter of all Rowdy and Inconsiderate Behaviour related ASB takes place in the Forebridge ward, which includes Stafford town centre.

Similarly to crime overall, ASB tends to disproportionately affect the most deprived and disadvantaged communities, and town and city centres. Previous risk assessment concludes that repeat victims of ASB tend to experience the same levels of psychological harm as victims of less-serious violent crime.

It was identified that an early help/intervention programme to address anti-social behaviour and exploitation and ensures young people are provided with information and support networks to get them into positive activities was needed.

The commissioned project worked with 70 different young people during 2018/2019 who between them attended 3100 sessions.

Student feedback

(Year 7) - Because of what's going on at home it really helps me cope

(Year 7) - I feel a lot of anger all the time but I feel different in these lessons.

(Year 7) - Everyone is different to me in class .People use my differences against me , but not in these lessons.

Staff Feedback

Deputy Head - There is clear evidence of a slowdown in the number of Behaviour Cards issued per child who is accessing the Boxing Club

44% of the cohort continued to access the activity in their own time.

Substance Misuse and Mental Ill-Health

Stafford Borough CWP recognises the impact that drugs, alcohol and poor mental health can play as risk factors impacting victims and offenders across their chosen priority areas. As such they have been identified as cross-cutting themes. We should continue to consider where drugs and alcohol may be a factor in offending behaviour or in levels of vulnerability.

The impact of Mental Health needs on communities is difficult to quantify - while Public Health data can give some indication of local needs, it is anticipated that these are an under-estimate.

Although the area sees a high number of Mental Health calls to Staffordshire Police, Public Health England (PHE) estimates⁶ for mental health disorders⁷ in Stafford Borough are below average. Estimates suggest that around 8.6% of children aged 5 to 16 years (approximately 1,460 children) may have a mental health disorder.

Vulnerable people, including those experiencing mental health issues, are at greater risk of being a victim of crime - targeted by criminals who seek to exploit vulnerabilities and take advantage through financial or criminal exploitation. Local research has shown that individuals who have experienced crime first-hand as either a victim or a direct witness, are likely to score lower than average in terms of their overall levels of wellbeing.

⁶ Public Health England (PHE) Public Health Outcomes Framework (PHOF) Fingertips dashboard

⁷ Mental Health disorders include, but are not limited to; Anxiety, Depression, Eating Disorders, Schizophrenia, Obsessive-Compulsive Disorder, Hyperactivity Disorders, Phobias and Paranoia.

While prevalence of depression and anxiety are similar to national levels, rates of suicide, particularly amongst males, are significantly above the national average (15.3 per 100,000 people, compared to 9.6 per 100,000 nationally).

The project commissioned by the CWP makes Stafford Borough a safer, healthier place for all community members to live by running a specialised preventative/early intervention alcohol/substance misuse and mental health outreach service providing advice, information, outreach and community sessions and signposting. The service is there for all community members although the work targets hotspot areas identified in the strategic assessment. Community sessions have been running to identify areas and groups which need the most support in the borough. The resilience-building programme works not just with young people and those who may be struggling but also with parents, family members and the wider community - a vital but under-utilised source of social capital in prevention and early intervention work. It is helping to create an environment where community members talk, listen and support their children, families and neighbours and are able to spot the signs that someone is struggling and many need a little extra support. The ultimate aim is that more early support comes from within the community.

From November 2018 to July 2019 354 adults and 641 young people had direct intervention through community groups on prevention and early intervention, 37 volunteers have been recruited and trained and 27 individuals had direct signposting and support to access services.

Social Prescribing

Social prescribing is a way of enabling GPs and other health and care professionals to connect patients to community activities, networks and non-clinical services that can help to meet their social, emotional or practical needs; with the help of a 'link worker'. Social prescribing focuses on 'what matters to me' whilst recognising that health and wellbeing is determined by a range of social, environmental and economic factors.

Support Staffordshire carried out a pilot with 3 Doctors Surgeries within the borough. Over the entire scheme the pilot exceeded the number of referrals originally intended by 65 people (81%).

Main reasons for referral

Main Reason for Referral	Number of Referrals
Advice and information	50
Social activities and Befriending	44
Exercise and outdoor activities	14
Skills based learning opportunities	8
Volunteering	3
Finance or welfare benefits	26

The pilot has shown that patients felt that they had been given a voice and health choices, providing a platform for greater improvement and change moving forward. There was a huge increase in overall confidence and self-esteem for the majority.

Placed Based Approach

A place-based approach targets an entire community and aims to address issues that exist at a neighbourhood level. As a partnership we wanted organisations to showcase their work and the differences their organisation and volunteers make to people's lives on a daily basis. We want to support voluntary organisations to network, build relationships and explore new ways of working to assist them in supporting their communities.

Groups have been established in the Highfields and Doxey wards. Together they hope to grow the aspirations of their residents, work with young people around wellbeing and happiness, work closely with the schools, support families with financial issues and recruit and engage volunteers.