Agenda for New Safer Executive Group
20 October 2020

1. Minutes and actions last meeting (Chair 20 mins) – Pages 1 - 6

2. Welcome to new members and discussion on governance Arrangements (AM 15 mins) – Pages 7 - 16

3. Theme lead update (theme leads 40 mins)
   a. Safer Families – Pages 17 – 20
   b. DASV Partnership – Pages 21 – 24
   c. Safer Communities – Pages 25 - 56
   d. Safer People – Pages 57 - 64

4. Youth Justice update (JK 10 mins)

5. Local Strategic Crime Assessment (AM, Theme Leads and Rob Sowden 35 min) – Pages 65 – 86)

6. Comfort Break (10 mins)

7. Domestic Abuse Bill Action Plan (AM and DASV theme leads 20 mins) – Pages 87 – 98)

8. DHR update (AM 5 mins)

9. Prevent Workforce Development (TN 15 mins)

10. Any Other Business (10 mins) – Pages 99 - 102

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SAFER PLYMOUTH EXEC 28 July 2020 13:00 - 16:00 Microsoft Teams	PLYMOUTH CITY COUNCIL

ATTENDEES:

Tamasine Mathews (TM), Matt Garrett (GM), Hannah Shead (HS), Jean Kelly (JKE), Lyn Gooding (LGO), Tracey Naismith (TN), Rachel Silcock (RS), Simon Hardwick (SH), Jackie Kings (JK), Tracey Watkinson (TW), Ian Taylor (IT), Chloe Causer (CC), Anna Moss (AM).

1. **Minutes and actions from previous meeting.**

Discussion		Actions
1.1.	25% MASH refereals relate to Domestic Abuse significantly in April and May in Op and Compass – DA referrals have in fact remained at a steady rate and being monitored. Need to gain a better understanding as to why the data for Op and Compass looks so different to the other data.	**Safer Families** to look into this data and try to gain a better understanding of the data.
1.2.	Siobhan provided update from previous action ref the courts reopening and the backlog, from a Youth Offenders aspect there were 30 young people awaiting a hearing, hearings have been held and a number have be adjourned. It is believed the backlog will be more manageable over a period of time due to adjournments etc.	

2. **Youth Justice Update to be provided in September.**

3. **Theme Lead Reports**

HS – There has been more frequent DA and is fast moving. Engagement has gone well in virtual meetings. A women's only housing has now been opened which has been long needed in the city.	

Since lockdown there has been a great sense of working well together and achieving great outcomes. Ask - Happy to part fund accommodation, however we require half of the funding from somewhere to achieve this. Volunteered there DV forum to lead on the delivery of the DA Bill and feel best placed for this however would require resources to do so, such as funding. Concerns around MARAC and if the right people are sat around the table. Due to the delay in the Criminal Justice System there have been a number of DV and sexual violence cases that are delayed and this does have an impact on the victims. Would like to see regular around the table from Children's Social Care to support in the DV Bill. Since Covid-19 DV has really been brought out of the shadows, its more recognised that it happens in our communities, I wider spotlight has been shone on this issue and feel we need to take this opportunity to build on this momentum and other services buy in. Match funding for the hospital LG and AM had a discussion with the budget holder around having an IDVA in the regional trauma centre, there is currently an underspend of 6 months but they feel it should be a 12 month project so are looking at resourcing another 6 months.	**Discussions need to be had with PCC around how this will look, resourcing and support**
TW (Supporting People) – Discussion around gaining a better oversight of a strategic approach across the city. Need to get clear data and intel that we can use. RS – there has been a lot of work going on around mental health inequalities and creating a better pathway for mental health support.	
SH – Safer families This group is well established, there is a wide diverse group of people around the table. There have been challenges around Covid-19 and reduced resources due to furlough etc. Highlighted the impact of schools returning in September and the challenges families will face around this. TW	**TW –** Barnardos have been doing work around hidden harm during Covid-19. They have a great initiative and lots of support surrounding children returning to education out there for

	families. **TW to share this information with the group.**
Children's commissioning data is a rich set of data that we can utilise and how relevant this data may be to the city. JKE would be useful to see who is in the different groups and can visibly see if the right people are around the table – AM is collating this information around who exactly are involved in what groups. There is a need for business support within Safer.	**MG and JK to have a discussion around this, there is minimum funding for this.**
TN – Had a meeting in July, this was well attended, positive and inclusive. Public Protection could not attend however have been very engaging via email outside of the meeting and willing to engage and support the group. There has been an increase in ASB post Covid. Terms of reference was not top of the agenda in the previous meeting. A lot of learning from Covid-19 and how people have had to respond and react differently, some have been positive however some changes would mean changes to their own organisations process.	**TN will bring terms of reference to the next meeting.**

4. **Governance Review**

At the last board exec it was identified there has been a crossover with agenda's. Instead of having a board and exec meeting it is suggested that they are both joined into one meeting, as part of this some work needs to be done around ensuring the right people are present and to look at who the decision makers are and ensuring they are sat around the table.

Looked at the frequency of these meetings and it was suggested that having 4 meetings per year forming 1 official public meeting. Subsequent sub meetings to be had with relevant people. Using teams to discuss and update between meetings.

AM is developing membership lists and recommendations of who should sit within what group.

Official letter should be drafted and sent by the chair to responsible authorities that do not respond to request for engaging with this group

5. **Alcohol Related ASB Fund**

Have been successful in Police and Crime funding for Alcohol Hotspot. 50 / 50 split between the Barbican and the Hoe this will include funding for Marshals, Porta Loo's and Street Pastors. This initiative will sit within safer Communities, question around how we collate data to submit a summary

at the end of this initiative. **TN to enquire about what safeguarding training the street pastors have had.**

6. DHR Review

DHR Review group's engagement has been really positive.

One case is currently held up from CCG signing this off before press release.

Missy – Homicide was in 2013 – AM still has not heard from the Home Office despite chasing. AM hada catch up with the family and informed them of the action plan relating to Safer Plymouth.

The majority of actions published on the DHR website have been actioned and making good progress.

There is work currently going on around 'did not attend' attitude, and discussed the 'pause' model appose to 3 strikes and you're out. AM will regularly update on this progression.

Drafted DHR Toolkit is awaiting sign off and will be shared in due course.

7. Planning for the new DA Bill

Feel there is a need for input from PCC Coms team and the force to coordinate the communications coming out of the DA Bill.

LG – There is more of a willingness to talk about Domestic Abuse, there is still room to educate more around DA, and some people still see this as violence when DA is so much more than that, feel this is a great opportunity to educate more via coms around DA.

8. Serious Violence Strategy

8.1. How are we going to deliver this in terms of policing, and having the correct people around the table? Concern around it being collaborative and city led. TN felt we run the risk of not being prepared, and feel we are risking this being a silo piece of work as appose to being city led. **8.2.** SH – serious violence links in to serious crime as a policing area we are 1 of 3 force areas that have not had much funding around serious crime. **8.3.** Need to begin putting together a proposal so we are 'bid ready'.	**TN to share a list of people whom she feels should be involved in developing a proposal.** **TM to have a conversation with the OPCC and Chiefs Office to find out what requirement for the 'bid' or 'proposal' may look like?**

9. Strategic Crime Assessment

Since March there have been a lot of changes with Covid-19.

I have been using some community tension data. However am not a Data analyst and feel it would been beneficial to have some technical support from a data analyst to understand the data better. This will help us to understand the data, what the data is telling us and any trends etc.

AM – To write up and feedback on what the ask is for a potential analysis on the data.

It is likely that last year's priorities will be the same as last years, we will need the strategic team to hold data, pull out and compare with last year's data.

OPiC Data to be released and shared with the theme groups.

10. Communications Strategy

There has been issues around people attending MARAC, people are attending in relation to a specific person. There is a feeling of not getting the right level of engagement.

There has been a 50% increase in MARAC since Covid-19, and feel more support is needed around the mental health aspect. We need to cascade guidance around what expectation is at MARAC.

SH – We are putting a more trauma informed lens on Hate Crime Awareness Week and Black Lives Matter.

Discussion around the need for a website. There is funding available from OPCC for a website and twitter.

Theme leads to get together and look at the scope of this.

AM to put on theme leads meeting agenda.

A note from JK around the management and upkeep of the website and risks we run of a website being overrun or underused, we need to consider the lack of resources.

11. Contextual Safeguarding Update

Modern Slavery is reviewing the framework, almost half now relate to children and county lines.

12. AOB

TW – Real concern around websites promoting 'cute baby masks' (masks that are stitched to a baby's pacifier) these pose real danger to children so please all keep an eye out for these.

AM – trauma Informed roll out of training was successful. Now looking to roll out training via webinar, also socially distant face to face training so hoping to catch up on time lost over lockdown.

A discussion took place with Craig McCardle around the concept of some sort of Charter for the network for people to sign up to.

Papers and presentation to support the agenda will be made available via Teams and email in the weeks leading up to the next meeting.

1.

Safer Plymouth Partnership

Structure and Membership Review

Design Principles

- Statutory compliance
- Confidence of partnerships, communities and citizens
- Identify, focus and aim
- Emphasis upon safer outcomes for communities, families and people
- Trauma informed approach
- Reduce duplication
- Increase flexibility and proportionality
- Aligned to strategic assessment
- Strengthen relationships and use of existing networks and partnerships
- Promote the voice and address the needs of the community
- Shared communication approach with clear key messages
- Efficiency and connectivity

Statutory commitment

- Set up a strategic group to oversee the work of the partnership

- Regularly engage and consult with the community about their priorities and progress achieving them

- Set up protocols and systems for sharing information

- Analyse a wide range of data including recorded crime levels and patterns, in order to identify priorities in an annual strategic assessment;

- Set up a partnership plan and monitor progress

- Produce a strategy to reduce reoffending

- Commission domestic violence homicide reviews

Horizon Scanning

Safer Plymouth statutory partners should expect some considerable new responsibilities under the new DA bill

The responsibilities for CSP to deliver on local serious violence strategies will require greater connectivity with public health and education

Resourcing needs assessments for above will have to be prioritised

Effective partnership will require leadership and pooling of resources by all responsible authorities

Roles and Responsibilities Previous

Full Board

- Chaired by Police
- Strategic
- Reports into Overview & Scrutiny & to OPCC
- Meets quarterly
- MORILE & Strategic Assessments
- Community engagement
- Review and monitor performance against Partnership Plan
- Lay member

Executive

- Chair by Chair of Full Board
- Leadership group
- Sets direction for delivery of partnership plan
- Meets bi monthly
- Establishes and measures KPI
- Reports into Full Board
- Funding and commissioning
- Develops and delivers communication plan
- Commissions DHR

Themes

- Chaired by statutory member of CSP
- Meetss bi monthly
- Reports quarterly to Exec
- Identifies priorities, actions and improvement
- Delivers/oversees actions and improvements
- Identified member(s) sit on and report into and out of Executive
- Applies learning from DHR

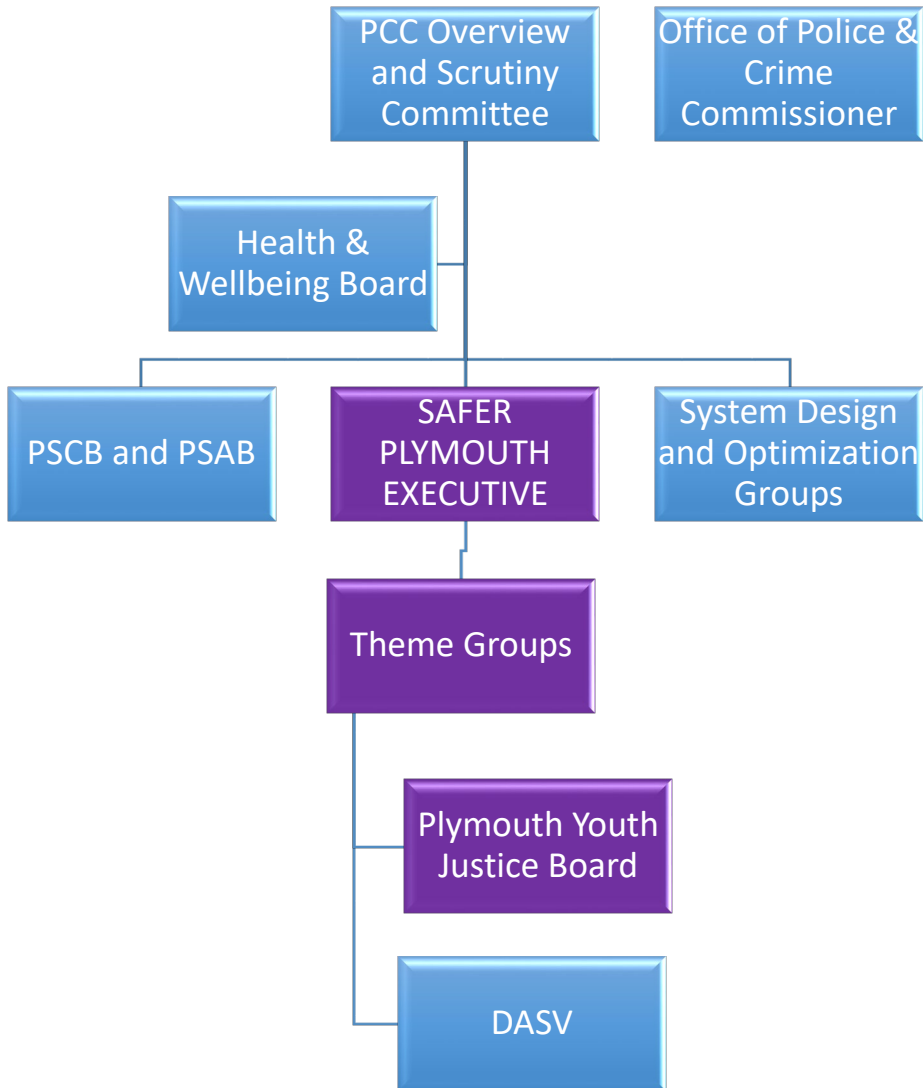# Roles and Responsibilities New

Executive

- Chaired by Police
- Strategic leadership group
- Reports into Overview & Scrutiny, H&WB Board & to OPCC
- Meets quarterly
- MORILE & Strategic Assessments sign off
- Oversight of community engagement and communication plan
- Review and monitor performance against Partnership Plan
- Commissions DHR
- Lay member

Safer Thematic Group

- Chair / Facilitator agreed by membership
- Meets bi monthly
- Reports quarterly to Exec
- Identifies priorities, actions and improvement
- Establish and measure performance criteria
- Delivers/oversees actions and improvements
- Theme leads sit on and report into and out of Executive
- Applies learning from DHR
- Develop communication priorities

Proposed Governance

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                    │   PCC Overview and   │   │  Office of Police &  │
                    │  Scrutiny Committee  │   │  Crime Commissioner  │
                    └──────────────────────┘   └──────────────────────┘

              ┌──────────────────────┐
              │     Health &         │
              │  Wellbeing Board     │
              └──────────────────────┘

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   │ PSCB and PSAB│   │ SAFER PLYMOUTH   │   │   System Design and  │
   │              │   │   EXECUTIVE      │   │  Optimization Groups │
   └──────────────┘   └──────────────────┘   └──────────────────────┘

                      ┌──────────────────┐
                      │   Theme Groups   │
                      └──────────────────┘

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                          │  Plymouth Youth    │
                          │  Justice Board     │
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                          │       DASV         │
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Case for Change

- End duplication of membership and activity at Board and Executive Meetings

- Clearer lines of accountability will improve governance and enable us to develop clear work programmes for each group

- More effective use of senior leadership resource and limited business support capacity

- Improve collaboration in line with trauma informed approach, find the right people to lead change in line with our partnership plan

Flexibility and proportionality

- Current delivery mechanisms across the Plymouth system should be utilised where possible; cross partnership working is maximised

- Keep a watching brief on DASV and potential responsibilities under new DA Bill

- Virtual networks using Microsoft Teams and task/finish meetings can provide targeted and responsive delivery within the system.

- Theme leads MST channel meets fortnightly for informal progress reviews while system transformation takes place

- Technical lead to arrange short briefing session with Chair/ Vice-Chair prior to each executive meeting

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Safer Plymouth

Safer Families   **Add date 09/10/20**

Report from Chair of Safer Families

SECTION A		
Chair Name and Contact:	Simon Hardwick	
Dates of meetings since last Full Board	14/09/2020 Click or tap to enter a date.	
Executive Summary/ Key Issues only[1]	Quality Assurance	• Identified need to enhance the data set regarding intra-familial harm to support existing priorities and help develop strategic assessment.
	Partnership Co-ordination	• Safer Families Group has identified system coordination across key priorities within COVID-19 critical. Linked to existing priorities & other theme groups and wilder children & families system.
	Systems Leadership	• Safer Families supporting new projects and enquiry within emerging themes (Progeny, Child to Parent Violence, Sharing the Brain Story, CAPO)
	Statutory Governance	• ToR exist and group has now met 3 times. • Reporting mechanism via Theme Leads & Safer Executive feels appropriate.
	Trauma Informed System Development	• Safer Families critical hub for ACE awareness & trauma responsiveness.

SECTION B	
What is working well?	• Group has continued to be active & adaptable regardless of challenges of COVID-19 lockdown. This is reflected in the change to priorities. • New projects & work is developing: CAPO project, Progeny, Sharing the Brain Story, Child to Parent Violence within families. This work is informing wider partnership (DA/SV). • Qualitative conversation & reflection has helped refresh the strategic assessment & develop understanding of emerging issues.

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[1]**Please see Priorities below for further detail**

	• Interconnection between the Safer delivery groups & the theme leads is excellent & key themes are understood. (Strategic Assessment) • Beginning to expand and understand the data sets identifying childhood adversity (Encompass, SHARP data).
What are we worried about?	• Some group members have been prevented from fully engaging as a result of COVID-19. • Some actions against priorities has been delayed, or prevented (Thrive). • Challenges around quantitative data & business support to assist delivery. (Children's Commissioner data). • Continued impact of COVID -19 on service responsiveness. Re-aligning services has stretched capacity within the system. System/professional fatigue needs to be continually understood.
What needs to happen?	• Achieve delivery against identified priorities – this is starting to happen.
Identify Group Impact upon: • **Reducing violence, abuse and exploitation** • **Reducing re-offending** • **Early intervention and prevention of harm** • **Building community resilience, reducing inequalities and improving lives**	• Safer Families has been critical in identifying a hidden harm in terms of adolescent violence & aggression within families. This has been a key focus during COVID-19. Work is ongoing to pilot some work with families affected (YOT/AST/CCP). This is not only directed toward reducing violence but also might be a critical opportunity to reduce future DA offending. • Safer Families supporting new initiatives aimed at reducing harm in families through earlier intervention and building resilience – CAPO, Sharing the Brain Story.
Formal recommendation to/action required of Full Board.	• Consideration of business & analytical support for all Safer Plymouth theme groups & Executive.
Suggested work engagement with Trauma Informed Plymouth Network	• Ongoing – Majority of group members belong to the TI network so all priorities are connected to the network where appropriate.

Name of Group Chair	Simon Hardwick
Signature of Group Chair	Simon Hardwick

Draft Report Form Safer Plymouth October 2019

Date Signed	09/10/2020

Safer Families 2019 PRIORITIES

Domestic Abuse	• Develop awareness around children as 'victims' of domestic abuse, through analysis of Operation Encompass data. • Better understand the context of adolescent to parent/carer violence and sibling to sibling (-16) violence within the context of families, with a view to improving support. (*Particular focus on the impact of gender in relation to violence aimed at women and girls).* • Ensure recommendations arising from Domestic Homicide Reviews (DHRs) are subject of reflective learning across the CSP & wider children & families system.
Substance Misuse and Related Harms	• Review current data sets around substance misuse to help develop an evidence base for understanding substance misuse as an ACE.
Communication and Awareness Raising	• Work collaboratively with other Safer theme leads to develop a communications & events plan. • Develop a locality based 'Sharing the Brain Story' pilot aimed at using a strength's based approach to communicating with families regarding the impact of adversity on child development. • Assist the delivery of the Progeny trauma pilot aimed at developing a trauma informed approach to meet the needs of young people.
Trauma informed practice and ACE Awareness	• Reviewing and understanding the existing local evidence and data across the partnership around ACEs and trauma. • Assist the developing city CAPO group to define a pilot for children affected by parental offending. • Ensure data informs the review of the Trauma Informed City approach. • Support the Lived Experience sub-network (Trauma Informed Network) in developing guidance for professionals around appropriate connection to people with lived experience.
Preventing Child Sexual Abuse	• Collaboration with Together For Childhood programme to better understand the impact of sexual abuse within the family context and the role of communities in working together for prevention'

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Safer Plymouth

DASV partnership group   27 July 2020

Report from Member of   DASV Partnership

SECTION A	
What is working well?	• High levels of engagement throughout the partnership – we have moved to a virtual meeting the 1/3rd Monday of every month with good representation from across the city and organisations • Subsequent information sharing has improved service delivery – sharing of comms / service updates and challenges / solutions • The Partnership have developed an action plan to aid our response to the pending DA Bill • Good partnership ownership of their element of the DA 4P Plan • Good partnership collaboration to help prepare an OPCC bid to the Home Office DA Perpetrator funding round • A number of sub groups have been established focusing on specific areas of business e.g. MARAC, Perpetrators, sexual violence. • The use of Microsoft Teams provides an ideal medium to facilitate meetings, consultation and feedback, as well as the sharing of information • Concerted effort to focus on the impact of sexual violence as previous meetings were very DA orientated. • Emergency COVID-19 funds have assisted services to mobilise to remote working and enhance service provision • The DA Safety Car pilot continues to work well, with additional funding secured to extend the pilot to the New Year bank holiday weekend.
What are we worried about?	• The most significant area of concern is the lack of a sustainable data source and analysis to help develop and interpret the current data available, as well as to inform future priorities and areas of activity • Delays in CJS due to Covid-19. DA and sexual violence cases are subject to an unacceptable level of delay and this is having a direct impact upon victims, with reports across the partnership of increased suicidality. • Membership – there still remains concerns regarding engagement with Children's Social Care. Would also seek a commitment from police regarding senior office engagement following the departure of D/Supt Steve Brownlow • While partners within the group understand their responsibilities, we need to seek assurance that statutory partners understand their responsibilities set out in the new DA Bill, in order to be able to respond effectively when the Bill is passed.

Draft Report Form Safer Plymouth October 2019

What needs to happen?	• We continue to build upon momentum within the partnership • Covid-19 has brought DA out of the shadows – within wider society people are recognising the impact of DA. We want to make the most of this opportunity, especially whilst there is such high 'buy in' from agencies in the City
Identify Group Impact upon: • **Reducing violence, abuse and exploitation** • **Reducing re-offending** • **Early intervention and prevention of harm** • **Building community resilience, reducing inequalities and improving lives**	• Partners continue to maximise opportunities for collaboration, to help tackle the various elements of DASV • Partners share learning and ideas to address issues such as abusive behaviours
Formal recommendation to/action required of Full Board	• Board to resolve the lack of analytical capability • Board to secure a commitment from Children Social Care to attend DASV Partnership meetings
Suggested work engagement with Trauma Informed Plymouth Network	• Click or tap here to enter text.

Name of Group Chair	Lyn Gooding
Signature of Group Chair	*[signature]*
Date Signed	08/10/2020

Domestic Homicide Reviews	• Develop Plymouth DHR Toolkit • Review current DHR content to ensure learning outcomes meaningful and trauma informed • Workforce development priority for CSP • Click or tap here to enter text.
Domestic Abuse System Change	• Prepare system for implementation of DA bill • Improve whole system response including: victims with complex lives; C & YP; earlier intervention and prevention and perpetrators. • Commission needs analysis to help inform next steps • Click or tap here to enter text.
Communication and Awareness Raising	• Call to Action to summarise and embed learning from systems leadership • Communicate key messaging from DA bill • Review of Workforce development offer • Click or tap here to enter text.
Trauma informed practice	• Impact of DA on children (ACE awareness) • Consider application of Power Threat Meaning Framework • Click or tap here to enter text.
Clarify governance arrangements and understanding of data in sexual violence systems	• Deep dive into local data and mapping to establish referral pathways and volumes • Clarify Governance arrangements and establish Plymouth mechanism • Click or tap here to enter text.

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Safer Plymouth
28/07/2020

Report from Chair of -   Safer Communities

SECTION A		
Chair Name and Contact:	Tracey Naismith PCC – Community Connections. Operational Manager. Tracey.naismith@plymouth.gov.uk	
Dates of meetings since last Full Board	08/07/2020 09/10/2020	
Executive Summary/ Key Issues only[1]	Quality Assurance	• Prevent Partnership Action Plan oversight and scrutiny. • Group has recognised improved links between Safer, Prevent and Communities. Inclusive of VCS.
	Partnership Co-ordination	• Network creation of Youth Provision. • Safer Summer Scheme • Appreciative Enquiry – VCS –on hold • ASB support • Violence reduction work
	Systems Leadership	• Provision of information and support for Safer Communities members of system leadership
	Statutory Governance	• ToR drafted to support statutory governance
	Trauma Informed System Development	• Core business of group to include principles of trauma informed approach. • Principles to be embedded in ToR.

SECTION B	
What is working well?	• Broad spectrum of partners. Inclusive forum –aspirational and collaborative approaches. • PH keen to support and provide expertise, data as required. • Willingness to work together to offer mutual support to benefit multiple city services. • Prevent and the current refreshing of approach – more inclusive and better engaged.
What are we worried about?	• Serious Violence Reduction Strategy and how the group can and should prepare for its inclusion and embedding into Safer. Resource. • No needs assessment to enable design of Violence Strategy. • Senior support for strategy design, including resource and data.

[1]**Please see Priorities below for further detail**

	• Data – Provision and use of to inform work.
What needs to happen?	• Early collaborative approach to Violence Reduction Strategy. • Provision and analysis of data • Learning from Covid-19 to be understood to ensure strengths identified and embedded •
Identify Group Impact upon: • **Reducing violence, abuse and exploitation** • **Reducing re-offending** • **Early intervention and prevention of harm** • **Building community resilience, reducing inequalities and improving lives**	• TBC
Formal recommendation to/action required of Full Board.	• Consideration and support in embedding and QA of Prevent Training Strategy • Support to develop Violence Network
Suggested work engagement with Trauma Informed Plymouth Network	• Discussion and support of Violence work

Name of Group Chair	Tracey Naismith
Signature of Group Chair	Tracey Naismith
Date Signed	09/10/2020

Safer Communities 2019 PRIORITIES

Substance Misuse and Related Harms	• Ensure coordinated approach to Alliance developments and collate non- alliance responses • Deep dive into local poly substance use issues
Communication and Awareness Raising	• Voice of lived experience, communication plan and key events • Community messaging around priority areas such as domestic abuse, hate crime, ASB and Prevent • Work collaboratively with the PREVENT partnership to increase confidence in the wider anti-radicalisation theme. • Work collaboratively with other Safer themes to ensure crossover theme responses are co-ordinated.
Trauma informed practice and ACE Awareness	• Applying the trauma lens to our understanding of ASB and amending existing practices to reflect this improved understanding • Breaking the cycle of intergenerational harm
Emerging Issues	• Horizon scan for new areas of concern • Provide rapid and flexible response to identified issues • Respond to CTLP recommendations
Prevent	• Review WRAP and PREVENT Training offers • Lead appreciative inquiry into communication and wider PREVENT understanding. • Improve understanding of Prevent across communities • With Prevent partners develop key messages and narrative.

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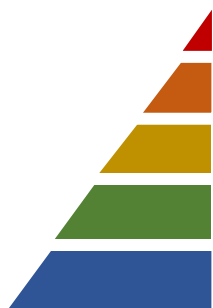
Devon, Torbay and Plymouth Prevent Partnerships

Prevent Training Strategy:
The Five Tiers of Prevent Training

The Prevent Training Strategy should be read in conjunction with the relevant guidance and references listed in section 7.

Author(s):	Contact Details:	
Delia Gilbert, Designated Nurse Safeguarding Adults NHS Devon CCG	Delia.gilbert@nhs.net	
Approved by:	Date of formal approval	Review Date:
Date Issued: March 2020		Version 7.0

Document Change History:		
Version	**Date**	**Comments (i.e. reviewed/amended/approved)**
V1.0 April 2019	17/04/2019	
V2.0 May 2019	08/05/2019	Reviewed and amended following feedback from Workforce Development sub-group.
V3.0-5.0 July 2019	28/06/2019	Further reviews and amendments following feedback from Workforce Development and Prevent Partnership colleagues.
V.6.0	25/09/2019	Further amendments prior to signoff
V 7.0	08/11/2019	Final amendments following signoff

Partner agencies within the Plymouth, Devon and Torbay Community Safety Partnerships promote equality, diversity and human rights and are committed to ensuring that all people and communities they serve have access to the services they provide. In exercising their duty to address health inequalities, partner agencies have made every effort to ensure this policy does not discriminate, directly or indirectly, against those they work with, employees, contractors or visitors sharing protected characteristics of age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion and belief; sex (gender); sexual orientation; or those protected under the Health and Social Care Act 2012 and Human Rights legislation.

Partner agency policies can be provided in large print or Braille formats and translations, on request. Language line interpreter services are available and website users can use contrast, text sizing and audio tools if required.

For additional assistance please contact either:
Devon County Council: customer@devon.gov.uk, telephone 0345 155 1015 or 0845 155 1015
Torbay Council: 01803 201201
Plymouth Council: 01752 668000

The partner agencies, organisations and groups within Torbay, Plymouth, and Devon covered by this strategy are as follows:

Local Authorities
- Devon County Council
- Torbay Council
- Plymouth City Council
- Exeter City Council
- East Devon District Council
- North Devon District Council
- South Hams District Council
- Teignbridge District Council
- Torridge District Council
- West Devon Borough Council

Criminal Justice
- Community Rehabilitation Service
- Counter Terrorism Policing – South West
- Devon and Cornwall Police
- HM Prisons (Exeter, Dartmoor and Channings Wood)
- Dorset, Devon and Cornwall Probation Services
- National Probation Service
- Youth Justice Service

Health
- Devon Partnership Trust
- NHS Devon Clinical Commissioning Group
- NHS England South West
- Northern Devon Healthcare NHS Trust
- Royal Devon and Exeter NHS Foundation Trust
- Torbay and South Devon NHS Foundation Trust
- University Hospitals Plymouth NHS Trust
- South Western Ambulance Service NHS Foundation Trust
- Primary Care (GP practices; dentists; optometrists; pharmacies)
- Livewell South West

Education
- Early Years
- Schools (Primary and secondary schools per local authority area)
- Further Education Colleges
- Exeter University
- Plymouth University
- Alternative Education Providers
- Language Schools

Independent Sector
- Care providers
- Independent hospitals
- Contracted health and social care services
- Housing organisations
- Voluntary and community sector

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1. Introduction

1.1 The Prevent strategy, first published by the Government in 2011, is part of the Government's overall Counter-Terrorism Strategy, CONTEST.

1.2 The strands of the Strategy are:
- **Pursue**: concerned with the apprehension and arrest of any person suspected of being engaged in the planning, preparation or commission of a terrorist act.
- **Prevent**: concerned with working with partners to reduce the support for terrorism of all kinds, challenging and isolating extremists whose views are shared by terrorist organisations and challenging and isolating extremists operating on the internet.
- **Protect**: aims to strengthen our protection against a terrorist attack and reduce vulnerability to such attacks. This involves managing the risks to crowded places and safeguarding hazardous materials.
- **Prepare**: seeks to mitigate the impact of a terrorist attack where that attack cannot be stopped. This includes work to bring a terrorist attack to an end, increase our resilience and to assist recovery in the aftermath.

1.3 The aim of the Prevent Strategy is to reduce the threat to the UK from terrorism by stopping people becoming terrorists or supporting terrorism. In the Strategy this has simply been expressed as the need to "prevent people from being drawn into terrorism".

1.4 The 2011 Prevent Strategy had three specific strategic objectives:
- respond to the ideological challenge of terrorism and the threat we face from those who promote it;
- prevent people from being drawn into terrorism and ensure that they are given appropriate advice and support;
- work with sectors and institutions where there are risks of radicalisation that we need to address.

1.5 In June 2018 CONTEST was updated and strengthened. The updated objectives of Prevent are to:
- tackle the causes of radicalisation and respond to the ideological challenge of terrorism;
- safeguard and support those most at risk of radicalisation through early identification, intervention and support;
- enable those who have already engaged in terrorism to disengage and rehabilitate.

1.6 The Government issued the statutory Prevent Duty Guidance under section 29 of the Counter-Terrorism and Security Act 2015 to support the aims of the Prevent Strategy.

1.7 Under the Prevent Duty Guidance 2015, Local Authorities have a duty to establish or make use of an existing local multi-agency group to agree risk and co-ordinate Prevent activity. In Devon, Torbay and Plymouth the respective Community Safety Partnerships have delegated this to either the joint Devon and Torbay Prevent Partnership, or the Plymouth Prevent Partnership.

1.8 The members of the Prevent Partnerships are committed to safeguarding and promoting the welfare of children, young people and adults who may be at risk of being drawn into terrorism.

1.9 This is achieved through ensuring that employees, staff and volunteers working for us or within services commissioned and contracted by us (collectively known as staff), understand their role and responsibilities and are competent and well-trained in meeting their overarching safeguarding duty of care to those for whom we either care for or employ, and, where necessary, to take action for safeguarding and crime prevention purposes. Through Prevent this will include taking preventive action to safeguard and support those individuals who may be at risk of, or are being drawn into, terrorist-related activity.

1.10 The Counter-Terrorism and Security Act 2015 also made the Channel Panel a legal requirement. Channel is a multi-agency safeguarding programme providing tailored support to people who have been identified as at risk of being drawn into terrorism.

2. Purpose

2.1 The purpose of this Prevent Training Strategy is to provide a framework which ensures that multi-agency Community Safety Partnerships, through the Prevent Partnerships, meet their legislative responsibilities to equip people to work effectively to safeguard and promote the welfare of children, young people and adults in relation to Prevent.

2.2 Identification of the required level of Prevent training is dependent on the staff member's role and responsibility. Following completion of the agency's staff induction programme this should be linked to said agency's staff development process.

2.3 All training provided should respect diversity (including culture, race, religion and disability), promote equality and encourage the participation of children, families and adults in the Prevent and Channel processes.

3. Aim

3.1 This strategy outlines the Devon and Torbay Prevent Partnership and Plymouth Prevent Partnerships' joint training plan and provides a framework for the delivery of Prevent training to support the Partnerships in meeting the objectives of Prevent and their statutory duties.

3.2 The elements described within the strategy aim to provide all employees, staff and volunteers with information about required Prevent training including, where appropriate, Channel training. This will enable managers and staff to gain the knowledge and skills required to fulfil their duties and responsibilities in relation to Prevent.

4.   Roles and Responsibilities

4.1   Section 26 of the Counter-Terrorism and Security Act 2015 (the Act) places a duty on certain bodies ("specified authorities" listed in Schedule 6 to the Act), in the exercise of their functions, to have "due regard to the need to prevent people from being drawn into terrorism". This guidance is issued under section 29 of the Act. The Act states that authorities subject to the provisions must have regard to the Prevent Duty Guidance when carrying out this duty.

4.2   This duty does not confer new functions on any specified authority. The term "due regard", as used in the Act, requires authorities to place an appropriate amount of weight on the need to prevent people from being drawn into terrorism when considering all other factors relevant to the fulfilment of their usual functions.

4.3   Prevent work relies on effective partnerships. To demonstrate effective compliance with the duty, specified authorities must demonstrate evidence of productive co-operation, in particular with local Prevent co-ordinators, the police and local authorities, and co-ordination through existing multi-agency forums, such as Community Safety Partnerships.

4.4   The Prevent Partnerships are responsible for ensuring that key learning and developments are disseminated to all partners who support staff to be competent in their roles, and for updating the Prevent Training Strategy every three years.

4.5   Those with strategic and executive roles within partner agencies have a responsibility to ensure that their staff are trained to recognise and respond to safeguarding and Prevent concerns. In addition, they are required to be fully cognisant of both their individual and corporate accountability for safeguarding children and adults, and the wider safeguarding agenda, including Prevent.

4.6   Additionally, the Local Authority-led Community Safety Partnerships have a responsibility to challenge and hold partner agencies to account in relation to Prevent.

4.7   With regards to the Prevent Training Strategy, Organisational Prevent Leads are responsible for delivering Prevent within their agencies through ensuring that all staff receive the appropriate training to support them to be competent in fulfilling their roles. Prevent leads are also responsible for ensuring that their agency conducts a training needs analysis based on Appendix 2.

4.8   All managers are responsible for ensuring that staff are released to undertake training commensurate with their competency level. Managers should also ensure that their staff are compliant with their competency requirement.

4.9   To remain compliant, all organisations must ensure that:

- o   staff receive written training updates every year, and receive refresher training every three years;

- all new staff receive training as part of their induction, as per the competency framework.

4.10 Prevent Leads representing organisations on an advisory basis are responsible for advising these organisations about the Prevent training requirements outlined in this strategy and for, where possible, seeking assurance over their training offers. This could, for example, be achieved through conducting audits.

4.11 All staff have a safeguarding duty of care to those they work with and, where necessary, to take action for safeguarding and crime prevention purposes. Through Prevent this will include taking preventive action and supporting those individuals who may be at risk of, or are being drawn into, terrorist-related activity.

4.12 All staff are responsible for attending training and ensuring that they are compliant with their competency requirement.

4.13 Organisations and managers will be required to exercise discretion when mapping staff against the roles and responsibilities included in this Training Strategy.

4.14 The Appendices describe in greater detail the legal requirements underpinning statutory Prevent training duties; training competency requirements; training tier alignment to staff roles and responsibilities; named contacts for Prevent training across the Prevent Partnerships; and example training offers.

- **Appendix 1 – Legal Requirements Underpinning Statutory Training Duties**
  Describes and provides easy access to the legal requirements underpinning Prevent training.

- **Appendix 2 – Prevent Training Competencies**
  Describes the knowledge, skills and learning outcomes expected of all staff in relation to Prevent.

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- **Appendix 3 – Mapping of Prevent Training Tiers per Sector, According to Role Requirements**
  Maps the Prevent training tiers against sector-specific roles.

- **Appendix 4 – Named Contacts for Prevent Training**
  Provides a list of named partner contacts for Prevent training

- **Appendix 5 – Example Training Offers**
  Provides a list of example training suitable for each training tier.

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5.   Governance

5.1   All partners have a responsibility to ensure that their staff are competent to undertake their roles and that any in-house training packages will be reviewed and amended in line with any national or local changes. This will take place annually at the end of each financial year, and as required.

5.2   All partner agencies are expected to be aware of whether their staff are compliant with Prevent training requirements and to take action to support staff. The minimum standard of compliance is 85%.

5.3   Local Authority-led Community Safety Partnerships have a responsibility to understand how partner agencies comply with their Prevent duties and ensure that their staff are competent to undertake their roles. This involves challenging and holding partner agencies to account.

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6.   Implementation

6.1   Individual organisations will be responsible for implementing this Training Strategy within their own agency. To ensure effective implementation the Prevent Partnerships have made the following recommendations to individual organisations:
   o   to map the specific roles of staff within their organisation against the generic role types and functions described in Appendices 2 and 3 – unless already mapped against existing competency frameworks;
   o   to use the Five Tiers of Training to benchmark their current Prevent training and inform reviews and revisions of internal training plans, as appropriate.

6.2   Local Authorities will have access to a relevant webpage or electronic resource that includes a training section providing access to standardised resources and materials.

6.3   The impact and effectiveness of the Strategy will be monitored via the Devon and Torbay Prevent Partnership and the Plymouth Prevent Partnership.

7.	References and relevant guidance

Legislation

- Counter-Terrorism and Security Act (HM Government, 2015)
- Counter-Terrorism and Border Security Act (HM Government, 2019)
- Care Act (HM Government, 2014)
- Children's Act (HM Government, 2004)

Guidance

- CONTEST: The United Kingdom's Strategy for Countering Terrorism (HM Government, 2018)
- Prevent Duty Guidance (HM Government, 2015 - last updated 2019)
- Prevent Duty Toolkit for Local Authorities and Partner Agencies (Home Office, 2018)
- Channel Duty Guidance (HM Government, 2015)

- Adult Safeguarding: Roles and Competencies for Healthcare Staff (2018)
- Building Partnerships Staying Safe: Guidance for Healthcare Organisations (Department for Health, awaiting)
- Building Partnerships, Staying Safe: Guidance for Healthcare Workers (Department for Health, awaiting)
- CCG Prevent Duty Responsibilities
- Guidance for Mental Health Services in Exercising Duties to Safeguard People from the Risk of Radicalisation (NHS England, 2017)
- Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE, 2019)
- Looked After Children: Knowledge Skills and Competences of Health Care Staff (RCGP, Royal College of Nursing and RCPCH, 2015)
- Managing Extremism and Terrorism Amongst Offenders in Custody and the Community: Policy Framework Detailed Guidance (National Offender Management Service, 2019)
- NHS PREVENT Training and Competencies Framework (NHS England, 2017)
- Prevent Duty Guidance for Further Education and Higher Education Institutions (HM Government, 2015)
- Prevent Duty Toolkit for Local Authorities and Partner Agencies (Home Office, 2018)
- Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff (Royal College of Nursing, 2019)
- Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (NHS England, 2019, awaiting)
- Skills for Health - Statutory/Mandatory Core Skills Training Framework (CSTF, 2018)
- Statutory Framework for the Early Years Foundation Stage (DfE, 2017)
- The Prevent Duty: Departmental Advice for Schools & Childcare Providers (DfE, 2015)
- Working Together to Safeguard Children (DfE, 2018)

Appendix 1: Legal Requirements Underpinning Statutory Training

Core Legislation	Counter-Terrorism and Security Act (HM Government, 2015) ; Counter-Terrorism and Border Security Act (HM Government, 2019); Care Act (HM Government, 2014) ; Children's Act (HM Government, 2004)
Core Guidance	Prevent Duty Guidance (HM Government, 2015, updated 2019) ; Channel Duty Guidance (HM Government, 2015); CONTEST: The United Kingdom's Strategy for Countering Terrorism (HM Government, 2018); Prevent Duty Toolkit for Local Authorities and Partner Agencies (Home Office, 2018) and sector-specific guidance, as detailed below.

Healthcare Services	Children's Social Care	Adult Social Care	Police	LAs (includes all councils)	Prisons	Probation	Fire	Early Years and Schools (0-16)	Further Education	Higher Education
Building Partnerships, Staying Safe: guidance for healthcare organisations (Department for Health, awaiting) Building Partnerships, Staying Safe: guidance for healthcare workers (Department for Health, awaiting) CCG Prevent Duty Responsibilities Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (NHS England, 2019, awaiting) Working Together to Safeguarding Children (DfE, 2018)	Working Together to Safeguarding Children (DfE, 2018)	No additional sector-specific guidance	No additional sector-specific guidance	No additional sector-specific guidance	Managing Extremism and Terrorism Amongst Offenders in Custody and the Community - Policy Framework Detailed Guidance (National Offender Management Service, 2019)	Managing Extremism and Terrorism Amongst Offenders in Custody and the Community - Policy Framework Detailed Guidance (National Offender Management Service, 2019)	No additional sector-specific guidance	The Prevent Duty: Departmental Advice for Schools & Childcare Providers (DfE, 2015) Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE, 2019) Statutory Framework for the Early Years Foundation Stages (DfE, 2017)	Prevent Duty Guidance for Higher Education Institutions in England and Wales (HM Government, 2015) Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE, 2019)	Prevent Duty Guidance for Higher Education Institutions in England and Wales (HM Government, 2015) There is no specific statutory training course however universities must show key staff have received training in Prevent (both induction training and refresher training at regular intervals) as required by the Office for Students Supplementary guidance is online at Safe Campus Communities

Pyramid levels (top to bottom):
- Board Training
- Prevent Lead & Channel Chair Training
- Specialist Training
- Enhanced Prevent Awareness Training
- Basic Prevent Awareness Training

Appendix 2: Prevent Training Competencies

		Role Profile	Knowledge	Skills	Learning Outcomes
Board Training	**Board Members (Organisation Leadership)**	Role will include any of the following: • Providing governance of, and challenge to, their own organisation in relation to performance and compliance with statutory requirements • Understand strategic responsibilities in order to hold own organisation to account	Alongside that listed for 'Prevent and Channel Chairs', Board Members should have knowledge and understanding of the following: • The roles and responsibilities of partner organisations • Statutory Prevent duties • Strategic responsibilities, in order to hold own and other organisations, where applicable, to account for Prevent work • The limits of their own knowledge, and recognition of when to consult other partners.	Board members should have the following skills to: • Promote person centred and outcome-based approaches • Ability to contribute appropriate support, challenge, and enquiry in a multi-agency setting • Understand the role of the Prevent Lead in their own organisation and ensure that this lead is meeting statutory Prevent requirement. In addition, System Leadership will: • Understand the role of the Prevent Partnership.	Alongside the learning outcomes listed for 'Prevent and Channel Chairs', Board Members will: • Develop knowledge of statutory Prevent requirements and of the interaction between Prevent and other areas of safeguarding • Understand how to measure Prevent roles and responsibilities within key organisations are meeting statutory Prevent duties and the local Prevent strategy • Understand the Prevent Duty Guidance and its application to their own organisation • Recognise the links between adult and children's safeguarding, other areas of exploitation, and PREVENT referrals • Understand one's own role as a strategic lead, and that of partner organisations represented on the Prevent Partnership Board • Build on foundational knowledge and skills gained through basic Prevent awareness training, enabling them to understand their own role in the Prevent agenda.
	Board Members (System Leadership)	• Providing effective strategic leadership for Prevent across the area • Providing governance of, and challenge to, the Prevent Partnership Board, in relation to performance and compliance with statutory requirements • Understand strategic responsibilities in order to hold partner agencies to account			
Prevent Lead & Channel Chair Training	**Prevent Leads and Channel Chairs**	Role will include any of the following: • Lead the risk management process and development of risk plans • Hold local agencies to account for Prevent work with adults and families • Provide governance of, and challenge to, the Prevent Partnership Board in relation to performance and compliance with statutory requirements through scrutiny arrangements • Be experienced in providing supervision and reflective practice • Delivering training to staff with Specialist Roles	Alongside that listed for 'Specialist Roles', Prevent Leads and Channel Chairs should have knowledge and understanding of the following: • Risk management processes and the development of risk plans • Advocacy support • Providing managerial oversight of Prevent work • Providing appropriate and proportionate support • Contextual learning • The role of Channel Panels • Who the Channel Coordinator is for their local area, and knowledge of how to contact them • The stands of the UK Counter Terrorism Strategy (CONTEST), and the significance of safeguarding within the Prevent strands • The statutory, contractual, policy and other Prevent duties and obligations that apply to own organisation • Possess an up-to-date knowledge of appropriate community safety processes and access points. • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	Alongside the skills listed for 'Specialist Roles', Prevent Leads and Channel Chairs should have the following skills to: • Provide effective strategic leadership for Prevent within their own organisation, and across the local area (where applicable) • Advise managers and practitioners on their participation in local panels • Apply understanding of CONTEST, and the significance of safeguarding within the Prevent strand, within their organisation • Interpret the statutory, contractual, policy and/or other Prevent duties and obligations that apply to own organisations – including interpreting this for others • Chair meetings effectively • Represent own organisation at multi-agency meetings and work in partnership to deliver mutually-agreed outcomes • Manage the information-sharing process appropriately, and in accordance with relevant policies, guidance and legislation, to effectively escalate with other partners • Engage all relevant partners in Prevent work • Provide effective support to staff engaged in Prevent work • Strategically apply responsibilities to act on Prevent and assess the risk to the wider organisation.	Alongside the learning outcomes listed for 'Specialist Roles', Prevent Leads and Channel Chairs will • Demonstrate clear decision-making processes, as illustrated in their action plans for Channel panels. This will include the ability to: • Demonstrate a high level of interpersonal skills and an ability to manage difficult conversations. • Clarify Prevent thresholds with colleagues • Apply detailed understanding of adult and children's safeguarding policies and law, and meet these requirements in the context of Prevent – including situations where a Channel referral is not appropriate • Demonstrate a practical understanding the issues of capacity and consent; confidently apply this in relation to safeguarding and the context of Prevent • Define the content and extent of the Counter-Terrorism and Security Act 2015, and the statutory implications of this legislation and CONTEST. In addition, Channel Chairs will: • Carry out the functions of the Chair • Effectively work in partnership with the Channel Co-ordinator and local Counter-Terrorism Unit officers • Provide demonstration of the Channel process, including the need for individually-tailored intervention and support to provide positive outcomes.

		Role Profile	Knowledge	Skills	Learning Outcomes
Specialist Training	**Specialist Roles**	Role will include any of the following: • Responsibility for providing advice, support, supervision and training for staff in relation to a broad range of safeguarding duties. • Supporting staff and clients' efforts to safeguard children and adults • Delivering Enhanced Prevent Awareness Training	Alongside that listed for 'Staff with additional safeguarding roles', those with Specialist Roles should have knowledge and understanding of the following: • The legal and policy context of Prevent • Channel's multi-agency arrangements to provide support and redirection to individuals at risk of radicalisation • Community safety processes and referral pathways • Risk indicators relating to people who are being radicalised • The impact of direct (discrimination, friendships, influential peers) and indirect (internet, media) factors on people, and how this might change their thoughts and behaviours • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	Alongside the skills listed for 'Staff with additional responsibilities', staff with Specialist Roles should have the following skills to: • Advise staff in relation to meeting Prevent and safeguarding responsibilities • Advise others about Prevent guidance and strategies which hold relevance to their organisation and roles • Apply critical thinking to Prevent referrals; identify the need for additional information, where required, prior to progressing a referral • Communicate effectively with others and have 'difficult conversations' • Raise concerns, and take action when concerns have been identified • Demonstrate effective interpersonal skills • Be able to identify and advise others of appropriate reporting pathways	Aim: Staff with Specialist Roles will be able to demonstrate direct work skills with someone who has been identified as at risk of radicalisation and will be able to participate effectively in the Channel panel. This will include the ability to: • Discuss Prevent in the context of CONTEST • Clarify the Channel process and the Channel referral process • Identify relevant community safety processes and pathways. • Describe the Prevent case management process and its relevance to Channel, including in relation to the role of Channel Co-ordinators and Counter Terrorism Unit Officers. • Identify and advise on factors indicating vulnerability to radicalisation or grooming, and signs of radicalisation • Discuss concerns raised by self or others with an appropriate line manager, Prevent Lead or Prevent Co-ordinator. • Complete an appropriate referral. • Participate in difficult and sensitive conversations with individuals and professionals. • Create and maintain accurate records in line with the Data Protection Act 2018 and information-sharing guidance. • Demonstrate ways of working which proactively prevent people at risk of radicalisation from becoming radicalised – including effective risk assessment and case management which takes account of the effects of potential interventions • Create effective multi-agency safeguarding action plans which are person-centred and take account of mental capacity • Justify the proportionality and appropriateness of support proposed in action plans • Summarise the current threat level
Enhanced Prevent Awareness Training	**Staff with additional safeguarding roles**	Role will include any of the following: • Supporting staff and clients to safeguard children and adults • Delivering Basic Prevent Awareness Training	Alongside that listed for 'All Staff', Staff with additional safeguarding roles should have knowledge and understanding of the following: • The current threat level • The potential for Prevent to be applied to all forms of terrorism, present or emerging • Vulnerability factors that can make individuals susceptible to radicalisation • Points of contact for advice and reporting concerns • Safeguarding responsibilities linked to Prevent • The Prevent strategy and their organisation's contribution to the Prevent agenda; • Ideology and how it relates to radicalisation • Channels available for reporting other types of concern • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	'Alongside the skills listed for 'All Staff, staff with additional responsibilities should have the following skills to: • Document safeguarding concerns and maintain appropriate record-keeping, including making appropriate records of the wishes and views of the person at risk (this will involve differentiating between fact and opinion) • Share appropriate and relevant information between teams and agencies – in written form, verbally and electronically, within relevant information sharing protocols • Identify when further support is needed, when to take action, and when to refer to managers, supervisors or other relevant professionals – this will involve using locally-agreed Prevent referral processes • Demonstrate effective interpersonal skills	Aim: Staff with additional safeguarding responsibilities will build on the foundational knowledge and skills gained through Basic Prevent Awareness training, enabling them to gain a greater understanding of their role within the Prevent agenda. This will include developing the ability to: • Discuss own agency's Prevent policy/guidelines • Explain how to report concerns within own area • Clarify differences between the national and local terrorist threat • Identify own responsibilities for Prevent and safeguarding • Discuss the relevance of whistle-blowing to Prevent • Document concerns in a means which captures the wishes and views of people at risk; differentiates between fact and opinion; is compliant with the Data Protection Act 2018. • Explain the tenents of appropriate and relevant information-sharing (written, verbal and electronically)

		Role Profile	Knowledge	Skills	Learning Outcomes
Basic Prevent Awareness Training	**All Staff**	Role will include any of the following: • Contribute to the safeguarding of children and adults	All staff should have knowledge and understanding of the following: • Radicalisation and the context in which it can occur • Indicators of radicalisation • The impact of direct (discrimination, friendships, influential peers) and indirect (internet, media) factors on people, and how this might change their thoughts and behaviours • Knowledge of appropriate Prevent referral routes (including knowledge of Prevent Leads and locally-agreed Prevent referral processes) and knowledge of how to seek advice • Understand the importance of sharing information appropriately (covering confidentiality, consent and information-sharing)– including understanding of the consequences of failing to do so • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	All staff should have the following skills to: • Raise concerns, and take action when concerns have been identified – this includes referring concerns to the appropriate individual/body, following locally-agreed Prevent referral processes	Aim: All staff will gain an understanding of Prevent, enabling them to recognise indicators of radicalisation and understand reporting processes. This will include developing the ability to: • Describe the term Prevent; understand its practical applications; understand its situation within the pre-criminal space; understand its situation in relation to CONTEST • Recognise the Channel process as a multi-agency panel to support vulnerable people at risk of being drawn into terrorism • Summarise local Prevent mechanisms – such as referral routes and sources of information and advice • Describe factors that might lead people to become radicalised; the process of radicalisation; risk indicators • Discuss routes for reporting concerns and seeking advice • Explain confidentiality and information-sharing requirements in relation to safeguarding concerns • Summarise the actions taken following the reporting of concerns

Key Documents

• Counter Terrorism Strategy (CONTEST) (Home Office, 2018)

• Counter Terrorism and Security Act (2015), and statutory duties

• Counter-Terrorism and Border Security Act (HM Government, 2019)

• National Prevent Strategy (HM Government, 2011)

• Local Prevent Strategies

• Prevent Partnership Terms of Reference and Delivery Plans

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Appendix 3: Mapping of Prevent Training Tiers per Sector, According to Role Requirements

	Responsibilities	Roles	Alignment with staff roles											
			Local Authorities			Police	Prisons	Probation	Fire	Early Years and Schools (0-16)	Further Education*	Higher Education*	Healthcare Services
			Children's Social Care	Adult Social Care	All Councils*								
Board Training	Any of the following: • Responsibility for scrutinising strategic Prevent work • Responsibility for challenging and holding own and partner organisations to account, where applicable.	Chairs, executive and non-executive members of boards with strategy and policy responsibilities Elected members	Children's Social Care Prevent Representative	Adult Social Care Prevent Representative	Lead Elected Member/Cabinet members/Chief Executive/Chief Officers and Heads of Service with responsibility for Community Safety, Children's Services and Adult Services	JESIP Strategic Commanders	Prison governors, senior management team)			Chair of Governors/Trust Chair/Trust CEO/Proprietor	Chair of Governors/CEO	Chair of Governors/CEO	Safeguarding Level 1 and Board
Prevent Lead & Channel Chair Training	Any of the following: • Responsibility for delivering Prevent with and within partner organisations. • Responsibility for chairing multi-agency Channel Panels.	Designated Prevent leads Channel chairs	Designated Professionals/ Area Managers/ Designated Prevent Lead	Designated Professionals/ Designated Prevent Lead	Designated Prevent Lead/Channel Chair	Designated Prevent Lead	Designated Prevent Lead	Designated Prevent Lead	Designated Prevent Lead	Principal/ Head Teacher/ Designated Prevent Lead	Head of Establishment/ Designated Prevent Lead	Head of Establishment/ Designated Prevent Lead	Safeguarding Level 5
Specialist Training	Any of the following: • Responsibility for understanding extremist ideology and the wider context in which radicalisation can occur. • Responsibility for actively supporting individuals at risk of radicalisation	Staff with roles including any of the following: • attending Channel panels • providing safeguarding guidance to staff • providing targeted interventions, therapies • approving venue hire • developing IT policies • human resources • workforce development • Prevent champions	Management Roles and Named Professionals	Management Roles and Named Professionals	Any member of staff who regularly attends Channel Panels	Prevent SPOCs (JESIP Tactical Commanders)	n/a – role carried out by designated Prison Prevent Lead			Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Safeguarding Level 4
Enhanced Prevent Awareness Training	Any of the following responsibilities for: • Identifying signs of radicalisation when working with clients at risk of radicalisation. • Having knowledge of the various stages that an individual will go through if referred into Prevent. • Employees	Staff with additional safeguarding roles including any of the following: • contributing to, assessing, planning, intervening in, and/or evaluating the needs of persons for whom there are concerns regarding safeguarding or radicalisation • management and supervision of staff	All staff with regular contact with children. All staff who may contribute to assessing, planning, intervening & evaluating needs of a child/ parenting capacity, and foster carers	All staff with regular contact with clients All staff who may contribute to assessing, planning, intervening & evaluating needs of an clients	All staff with regular contact with the public.	Prevent Champions (JESIP Operational Commanders)	All staff – including prison officers, partners (e.g. education, healthcare, specialist services), administrators.			Safeguarding staff such as pastoral staff	Safeguarding staff such as pastoral staff	Safeguarding staff such as pastoral staff	Safeguarding Level 3
Basic Prevent Awareness Training	Any of the following: • Responsibility for identifying signs of radicalisation in clients. • Responsibility for reporting concerns about people who may have been radicalised	All staff	Staff with infrequent contact with children/parents/carers (tbc)	Staff with infrequent contact with clients (tbc)	Staff with infrequent contact with the public (tbc)	All staff (JESIP New Entrants and Operational Staff)	Directly and indirectly employed staff conducting prison visits			All school staff - teachers, TAs, admin, catering cleaning, governors	All staff - teachers, TAs, admin, catering cleaning, governors	All staff - teachers, TAs, admin, catering cleaning, governors	Safeguarding Levels 1 and 2

To remain compliant, all organisations must ensure that:
• Staff receive written training updates every year, and receive refresher training every three years.
• All new staff receive training as part of their induction, as per the competency framework.

Please note that the exact job titles described may differ between organisations within each sector.

References: NHS England (2017); Prevent Training and Competencies Framework; Home Office (2018); Prevent Duty Toolkit for Local Authorities and Partner Agencies.

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Appendix 4: Named Contacts for Prevent Training

Redacted due to the personal information included with this document. Please contact the document author for further details.

Appendix 5: Example Training Offers

Prevent training for Enhanced Prevent Awareness upwards should be delivered through a combination of face-to-face and e-learning and should be embedded within wider safeguarding training. All staff are required to receive annual updates and three-yearly refresher training. Organisations are expected to achieve an 85% compliance rate.

Board Training	In addition to Basic Prevent Awareness Training: • Organisational training to support board members in their understanding and accountability in relation to safeguarding
Prevent Lead & Channel Chair Training	In addition to Enhanced Prevent Awareness Training: • Home Office Channel Training - https://www.elearning.prevent.homeoffice.gov.uk/channel_awareness/01-welcome.html • Action Counters Terrorism Training - https://www.gov.uk/government/news/act-awareness-elearning • Local counter-terrorism events, regional and national conferences and updated legislation and guidance • Hydra Training
Specialist Training	In addition to Enhanced Prevent Awareness Training: • Additional reading and case studies (https://www.preventtragedies.co.uk/help-guide/) and involvement in Channel • Document guidance training (for HR staff)
Enhanced Prevent Awareness Training	In addition to Basic Prevent Awareness Training: • Notice, Check, Share - https://www.elearning.prevent.homeoffice.gov.uk/prevent_referrals/01-welcome.html • Organisational Enhanced Prevent Awareness Training Offer • Prevent Partnership Briefings • Mental Health First Aid Kit - https://mhfaengland.org/ (recommended addition)
Basic Prevent Awareness Training	• Home Office Prevent E-learning - https://www.elearning.prevent.homeoffice.gov.uk/screen2 (WRAP) • Preventing Exploitation Toolkit - www.preventingexploitationtoolkit.org.uk • Organisational Basic Prevent Awareness Training Offer (e.g. a bespoke version of the Home Office e-learning) • Prevent Partnership Briefings *Basic Prevent Awareness Training should be included in all staff induction training.*

Appendix 1: Legal Requirements Underpinning Statutory Training

Core Legislation	Counter-Terrorism and Security Act (HM Government, 2015) ; Counter-Terrorism and Border Security Act (HM Government, 2019); Care Act (HM Government, 2014) ; Children's Act (HM Government, 2004)
Core Guidance	Prevent Duty Guidance (HM Government, 2015, updated 2019) ; Channel Duty Guidance (HM Government, 2015); CONTEST: The United Kingdom's Strategy for Countering Terrorism (HM Government, 2018); Prevent Duty Toolkit for Local Authorities and Partner Agencies (Home Office, 2018) and sector-specific guidance, as detailed below.

	Healthcare Services	Children's Social Care	Adult Social Care	Police	LAs (includes all councils)	Prisons	Probation	Fire	Early Years and Schools (0-16)	Further Education	Higher Education
Board Training / **Prevent Lead & Channel Chair Training** / **Specialist Training** / **Enhanced Prevent Awareness Training** / **Basic Prevent Awareness Training**	Building Partnerships, Staying Safe: guidance for healthcare organisations (Department for Health, awaiting)

Building Partnerships, Staying Safe: guidance for healthcare workers (Department for Health, awaiting)

CCG Prevent Duty Responsibilities

Safeguarding Vulnerable People in the NHS: Accountability and Assurance Framework (NHS England, 2019, awaiting)

Working Together to Safeguarding Children (DfE, 2018) | Working Together to Safeguarding Children (DfE, 2018) | No additional sector-specific guidance | No additional sector-specific guidance | No additional sector-specific guidance | Managing Extremism and Terrorism Amongst Offenders in Custody and the Community - Policy Framework Detailed Guidance (National Offender Management Service, 2019) | Managing Extremism and Terrorism Amongst Offenders in Custody and the Community - Policy Framework Detailed Guidance (National Offender Management Service, 2019) | No additional sector-specific guidance | The Prevent Duty: Departmental Advice for Schools & Childcare Providers (DfE, 2015)

Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE, 2019)

Statutory Framework for the Early Years Foundation Stages (DfE, 2017) | Prevent duty guidance: for further education institutions in England and Wales 2019

Keeping Children Safe in Education: Statutory Guidance for Schools and Colleges (DfE, 2019) | Prevent Duty Guidance for Higher Education Institutions in England and Wales (HM Government, 2019)

There is no specific statutory training course however universities must show key staff have received training in Prevent (both induction training and refresher training at regular intervals) as required by the Office for Students

Supplementary guidance is online at Safe Campus Communities |

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Appendix 2: Prevent Training Competencies

		Role Profile	Knowledge	Skills	Learning Outcomes
Board Training	**Board Members (Organisation Leadership)**	Role will include any of the following: • Providing governance of, and challenge to, their own organisation in relation to performance and compliance with statutory requirements • Understand strategic responsibilities in order to hold own organisation to account	Alongside that listed for 'Prevent and Channel Chairs', Board Members should have knowledge and understanding of the following: • The roles and responsibilities of partner organisations • Statutory Prevent duties • Strategic responsibilities, in order to hold own and other organisations, where applicable, to account for Prevent work • The limits of their own knowledge, and recognition of when to consult other partners.	Board members should have the following skills to: • Promote person centred and outcome-based approaches • Ability to contribute appropriate support, challenge, and enquiry in a multi-agency setting • Understand the role of the Prevent Lead in their own organisation and ensure that this lead is meeting statutory Prevent requirement. In addition, System Leadership will: • Understand the role of the Prevent Partnership.	Alongside the learning outcomes listed for 'Prevent and Channel Chairs', Board Members will: • Develop knowledge of statutory Prevent requirements and of the interaction between Prevent and other areas of safeguarding • Understand how to measure Prevent roles and responsibilities within key organisations are meeting statutory Prevent duties and the local Prevent strategy • Understand the Prevent Duty Guidance and its application to their own organisation • Recognise the links between adult and children's safeguarding, other areas of exploitation, and PREVENT referrals • Understand one's own role as a strategic lead, and that of partner organisations represented on the Prevent Partnership Board • Build on foundational knowledge and skills gained through basic Prevent awareness training, enabling them to understand their own role in the Prevent agenda.
	Board Members (System Leadership)	• Providing effective strategic leadership for Prevent across the area • Providing governance of, and challenge to, • the Prevent Partnership Board, in relation to performance and compliance with statutory requirements • Understand strategic responsibilities in order to hold partner agencies to account			
Prevent Lead & Channel Chair Training	**Prevent Leads and Channel Chairs**	Role will include any of the following: • Lead the risk management process and development of risk plans • Hold local agencies to account for Prevent work with adults and families • Provide governance of, and challenge to, the Prevent Partnership Board in relation to performance and compliance with statutory requirements through scrutiny arrangements • Be experienced in providing supervision and reflective practice • Delivering training to staff with Specialist Roles	Alongside that listed for 'Specialist Roles', Prevent Leads and Channel Chairs should have knowledge and understanding of the following: • Risk management processes and the development of risk plans • Advocacy support • Providing managerial oversight of Prevent work • Providing appropriate and proportionate support • Contextual learning • The role of Channel Panels • Who the Channel Coordinator is for their local area, and knowledge of how to contact them • The stands of the UK Counter Terrorism Strategy (CONTEST), and the significance of safeguarding within the Prevent strands • The statutory, contractual, policy and other Prevent duties and obligations that apply to own organisation • Possess an up-to-date knowledge of appropriate community safety processes and access points. • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	Alongside the skills listed for 'Specialist Roles', Prevent Leads and Channel Chairs should have the following skills to: • Provide effective strategic leadership for Prevent within their own organisation, and across the local area (where applicable) • Advise managers and practitioners on their participation in local panels • Apply understanding of CONTEST, and the significance of safeguarding within the Prevent strand, within their organisation • Interpret the statutory, contractual, policy and/or other Prevent duties and obligations that apply to own organisations – including interpreting this for others • Chair meetings effectively • Represent own organisation at multi-agency meetings and work in partnership to deliver mutually-agreed outcomes • Manage the information-sharing process appropriately, and in accordance with relevant policies, guidance and legislation, to effectively escalate with other partners • Engage all relevant partners in Prevent work • Provide effective support to staff engaged in Prevent work • Strategically apply responsibilities to act on Prevent and assess the risk to the wider organisation.	Alongside the learning outcomes listed for 'Specialist Roles', Prevent Leads and Channel Chairs will • Demonstrate clear decision-making processes, as illustrated in their action plans for Channel panels. This will include the ability to: • Demonstrate a high level of interpersonal skills and an ability to manage difficult conversations. • Clarify Prevent thresholds with colleagues • Apply detailed understanding of adult and children's safeguarding policies and law, and meet these requirements in the context of Prevent – including situations where a Channel referral is not appropriate • Demonstrate a practical understanding the issues of capacity and consent; confidently apply this in relation to safeguarding and the context of Prevent • Define the content and extent of the Counter-Terrorism and Security Act 2015, and the statutory implications of this legislation and CONTEST. In addition, Channel Chairs will: • Carry out the functions of the Chair • Effectively work in partnership with the Channel Co-ordinator and local Counter-Terrorism Unit officers • Provide demonstration of the Channel process, including the need for individually-tailored intervention and support to provide positive outcomes.

	Role Profile	Knowledge	Skills	Learning Outcomes
Specialist Training — **Specialist Roles**	Role will include any of the following: • Responsibility for providing advice, support, supervision and training for staff in relation to a broad range of safeguarding duties. • Supporting staff and clients' efforts to safeguard children and adults • Delivering Enhanced Prevent Awareness Training	Alongside that listed for 'Staff with additional safeguarding roles', those with Specialist Roles should have knowledge and understanding of the following: • The legal and policy context of Prevent • Channel's multi-agency arrangements to provide support and redirection to individuals at risk of radicalisation • Community safety processes and referral pathways • Risk indicators relating to people who are being radicalised • The impact of direct (discrimination, friendships, influential peers) and indirect (internet, media) factors on people, and how this might change their thoughts and behaviours • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	Alongside the skills listed for 'Staff with additional responsibilities', staff with Specialist Roles should have the following skills to: • Advise staff in relation to meeting Prevent and safeguarding responsibilities • Advise others about Prevent guidance and strategies which hold relevance to their organisation and roles • Apply critical thinking to Prevent referrals; identify the need for additional information, where required, prior to progressing a referral • Communicate effectively with others and have 'difficult conversations' • Raise concerns, and take action when concerns have been identified • Demonstrate effective interpersonal skills • Be able to identify and advise others of appropriate reporting pathways	Aim: Staff with Specialist Roles will be able to demonstrate direct work skills with someone who has been identified as at risk of radicalisation and will be able to participate effectively in the Channel panel. This will include the ability to: • Discuss Prevent in the context of CONTEST • Clarify the Channel process and the Channel referral process • Identify relevant community safety processes and pathways. • Describe the Prevent case management process and its relevance to Channel, including in relation to the role of Channel Co-ordinators and Counter Terrorism Unit Officers. • Identify and advise on factors indicating vulnerability to radicalisation or grooming, and signs of radicalisation • Discuss concerns raised by self or others with an appropriate line manager, Prevent Lead or Prevent Co-ordinator. • Complete an appropriate referral. • Participate in difficult and sensitive conversations with individuals and professionals. • Create and maintain accurate records in line with the Data Protection Act 2018 and information-sharing guidance. • Demonstrate ways of working which proactively prevent people at risk of radicalisation from becoming radicalised – including effective risk assessment and case management which takes account of the effects of potential interventions • Create effective multi-agency safeguarding action plans which are person-centred and take account of mental capacity • Justify the proportionality and appropriateness of support proposed in action plans • Summarise the current threat level
Enhanced Prevent Awareness Training — **Staff with additional safeguarding roles**	Role will include any of the following: • Supporting staff and clients to safeguard children and adults • Delivering Basic Prevent Awareness Training	Alongside that listed for 'All Staff', Staff with additional safeguarding roles should have knowledge and understanding of the following: • The current threat level • The potential for Prevent to be applied to all forms of terrorism, present or emerging • Vulnerability factors that can make individuals susceptible to radicalisation • Points of contact for advice and reporting concerns • Safeguarding responsibilities linked to Prevent • The Prevent strategy and their organisation's contribution to the Prevent agenda; • Ideology and how it relates to radicalisation • Channels available for reporting other types of concern • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	'Alongside the skills listed for 'All Staff, staff with additional responsibilities should have the following skills to: • Document safeguarding concerns and maintain appropriate record-keeping, including making appropriate records of the wishes and views of the person at risk (this will involve differentiating between fact and opinion) • Share appropriate and relevant information between teams and agencies – in written form, verbally and electronically, within relevant information sharing protocols • Identify when further support is needed, when to take action, and when to refer to managers, supervisors or other relevant professionals – this will involve using locally-agreed Prevent referral processes • Demonstrate effective interpersonal skills	Aim: Staff with additional safeguarding responsibilities will build on the foundational knowledge and skills gained through Basic Prevent Awareness training, enabling them to gain a greater understanding of their role within the Prevent agenda. This will include developing the ability to: • Discuss own agency's Prevent policy/guidelines • Explain how to report concerns within own area • Clarify differences between the national and local terrorist threat • Identify own responsibilities for Prevent and safeguarding • Discuss the relevance of whistle-blowing to Prevent • Document concerns in a means which captures the wishes and views of people at risk; differentiates between fact and opinion; is compliant with the Data Protection Act 2018. • Explain the tenets of appropriate and relevant information-sharing (written, verbal and electronically)

	Role Profile	Knowledge	Skills	Learning Outcomes
Basic Prevent Awareness Training — **All Staff**	Role will include any of the following: • Contribute to the safeguarding of children and adults	All staff should have knowledge and understanding of the following: • Radicalisation and the context in which it can occur • Indicators of radicalisation • The impact of direct (discrimination, friendships, influential peers) and indirect (internet, media) factors on people, and how this might change their thoughts and behaviours • Knowledge of appropriate Prevent referral routes (including knowledge of Prevent Leads and locally-agreed Prevent referral processes) and knowledge of how to seek advice • Understand the importance of sharing information appropriately (covering confidentiality, consent and information-sharing)– including understanding of the consequences of failing to do so • The limits of their own knowledge, and recognition of when to consult colleagues in the tier above.	All staff should have the following skills to: • Raise concerns, and take action when concerns have been identified – this includes referring concerns to the appropriate individual/body, following locally-agreed Prevent referral processes	Aim: All staff will gain an understanding of Prevent, enabling them to recognise indicators of radicalisation and understand reporting processes. This will include developing the ability to: • Describe the term Prevent; understand its practical applications; understand its situation within the pre-criminal space; understand its situation in relation to CONTEST • Recognise the Channel process as a multi-agency panel to support vulnerable people at risk of being drawn into terrorism • Summarise local Prevent mechanisms – such as referral routes and sources of information and advice • Describe factors that might lead people to become radicalised; the process of radicalisation; risk indicators • Discuss routes for reporting concerns and seeking advice • Explain confidentiality and information-sharing requirements in relation to safeguarding concerns • Summarise the actions taken following the reporting of concerns

Key Documents

- Counter Terrorism Strategy (CONTEST) (Home Office, 2018)

- Counter Terrorism and Security Act (2015), and statutory duties

- Counter-Terrorism and Border Security Act (HM Government, 2019)

- National Prevent Strategy (HM Government, 2011)

- Local Prevent Strategies

- Prevent Partnership Terms of Reference and Delivery Plans

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Appendix 3: Mapping of Prevent Training Tiers per Sector, According to Role Requirements

Training Tier	Responsibilities	Roles	Alignment with staff roles										
			Local Authorities			Police	Prisons	Probation	Fire	Early Years and Schools (0-16)	Further Education*	Higher Education*	Healthcare Services
			Children's Social Care	Adult Social Care	All Councils*								
Board Training	Any of the following: • Responsibility for scrutinising strategic Prevent work • Responsibility for challenging and holding own and partner organisations to account, where applicable.	Chairs, executive and non-executive members of boards with strategy and policy responsibilities Elected members	Children's Social Care Prevent Representative	Adult Social Care Prevent Representative	Lead Elected Member/Cabinet members/Chief Executive/Chief Officers and Heads of Service with responsibility for Community Safety, Children's Services and Adult Services	JESIP Strategic Commanders	Prison governors, senior management team)			Chair of Governors/Trust Chair/Trust CEO/Proprietor	Chair of Governors/CEO	Chair of Governors/CEO	Safeguarding Level 1 and Board
Prevent Lead & Channel Chair Training	Any of the following: • Responsibility for delivering Prevent with and within partner organisations. • Responsibility for chairing multi-agency Channel Panels.	Designated Prevent leads Channel chairs	Designated Professionals/ Area Managers/ Designated Prevent Lead	Designated Professionals/ Designated Prevent Lead	Designated Prevent Lead/Channel Chair	Designated Prevent Lead	Designated Prevent Lead	Designated Prevent Lead	Designated Prevent Lead	Principal/ Head Teacher/ Designated Prevent Lead	Head of Establishment/ Designated Prevent Lead	Head of Establishment/ Designated Prevent Lead	Safeguarding Level 5
Specialist Training	Any of the following: • Responsibility for understanding extremist ideology and the wider context in which radicalisation can occur. • Responsibility for actively supporting individuals at risk of radicalisation	Staff with roles including any of the following: • attending Channel panels • providing safeguarding guidance to staff • providing targeted interventions, therapies • approving venue hire • developing IT policies • human resources • workforce development • Prevent champions	Management Roles and Named Professionals	Management Roles and Named Professionals	Any member of staff who regularly attends Channel Panels	Prevent SPOCs (JESIP Tactical Commanders)	n/a – role carried out by designated Prison Prevent Lead			Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Designated Safeguarding Leads and Deputy Designated Safeguarding Leads	Safeguarding Level 4
Enhanced Prevent Awareness Training	Any of the following responsibilities for: • Identifying signs of radicalisation when working with clients at risk of radicalisation. • Having knowledge of the various stages that an individual will go through if referred into Prevent. • Employees	Staff with additional safeguarding roles including any of the following: • contributing to, assessing, planning, intervening in, and/or evaluating the needs of persons for whom there are concerns regarding safeguarding or radicalisation • management and supervision of staff	All staff with regular contact with children. All staff who may contribute to assessing, planning, intervening & evaluating needs of a child/ parenting capacity, and foster carers	All staff with regular contact with clients All staff who may contribute to assessing, planning, intervening & evaluating needs of an clients	All staff with regular contact with the public.	Prevent Champions (JESIP Operational Commanders)	All staff – including prison officers, partners (e.g. education, healthcare, specialist services), administrators.			Safeguarding staff such as pastoral staff	Safeguarding staff such as pastoral staff	Safeguarding staff such as pastoral staff	Safeguarding Level 3
Basic Prevent Awareness Training	Any of the following: • Responsibility for identifying signs of radicalisation in clients. • Responsibility for reporting concerns about people who may have been radicalised	All staff	Staff with infrequent contact with children/parents/ carers	Staff with infrequent contact with clients	Staff with infrequent contact with the public	All staff (JESIP New Entrants and Operational Staff)	Directly and indirectly employed staff conducting prison visits			All school staff - teachers, TAs, admin, catering cleaning, governors	All staff - teachers, TAs, admin, catering cleaning, governors	All staff - teachers, TAs, admin, catering cleaning, governors	Safeguarding Levels 1 and 2

To remain compliant, all organisations must ensure that:
• Staff receive written training updates every year, and receive refresher training every three years.
• All new staff receive training as part of their induction, as per the competency framework.

Please note that the exact job titles described may differ between organisations within each sector.

References: NHS England (2017); Prevent Training and Competencies Framework; Home Office (2018); Prevent Duty Toolkit for Local Authorities and Partner Agencies.

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Appendix 4: Named Contacts for Prevent Training

Emergency Services	
Devon and Cornwall Police	Learning and Development Team QualityAssuranceandDevelopmentUnit@devonandcornwall.pnn.police.uk
Devon and Somerset Fire and Rescue Service	organisationaldevelopment@dsfire.gov.uk
South Western Ambulance Service Trust	Head of Safeguarding swast.safeguarding@nhs.net
Criminal Justice	
Prisons	Prison Prevent Lead Contact 01803 814802
Probation (HMPPS)	Probation CT Lead SWSCNPS.Counterterrorism@justice.gov.uk
Probation (CRC)	Senior Probation Officer case.admin.plymouth@ddccrc.probationservices.co.uk
Healthcare Services	
Devon CCG	Designated Nurse Safeguarding Adults d-ccg.safeadults@nhs.net
North Devon Healthcare Foundation Trust	ndht.safeguardingadults@nhs.net
Royal Devon and Exeter NHS Foundation Trust	rde-tr.safeguarding@nhs.net
Torbay and South Devon NHS Foundation Trust	TSDFT Mandatory and Essential Training Lead training.southdevon@nhs.net
University Hospitals Plymouth NHS Trust	plh-tr.conflictresolutiontrainingenquiries@nhs.net
Devon Partnership Trust	dpn-tr.mhaadministrator@nhs.net
Livewell	livewell.ptd@nhs.net
Local Authorities	
Devon County Council	Safer Devon Partnership Manager saferdevonpartnership@devon.gov.uk
Torbay Council	Partnership Lead Manager Prevent@torbay.gov.uk
Plymouth City Council	Community Connections Operational Manager Communityconnections@plymouth.gov.uk
Exeter City Council	Community Safety Lead community.safety@exeter.gov.uk
East Devon District Council	learninganddevelopment@eastdevon.gov.uk
Mid Devon District Council	Learning and Development learning@middevon.gov.uk
North Devon District Council	Community Safety Lead communitysafety@northdevon.gov.uk
South Hams District Council	Community Safety Specialist environmentalhealth@swdevon.gov.uk
Teignbridge District Council	Community Safety and Safeguarding Manager community.safety@teignbridge.gov.uk
Torridge District Council	Community Safety Lead environmental.protection@torridge.gov.uk
West Devon Borough Council	Community Safety Specialist environmentalhealth@swdevon.gov.uk

Local Authority Children's Social Care	
Devon	Workforce Development Advisor childrenssocialworkacademy-mailbox@devon.gov.uk
Torbay	Workforce Development Team torbaypdc@torbay.gov.uk
Plymouth	Dev.prof@plymouth.gov.uk
Local Authority Safeguarding Children Partnerships	
Devon Children and Families Partnership	Workforce Development Lead safeguardingelearning-mailbox@devon.gov.uk
Torbay Safeguarding Children Partnership	tscbtraining@torbay.gov.uk
Plymouth Safeguarding Children Partnership	safeguardingtraining@plymouth.gov.uk
Local Authority Adult Social Care	
Devon	Workforce Development Officer Safeguardingadultstraining-mailbox@devon.gov.uk
Torbay	TSDFT Mandatory and Essential Training Lead training.southdevon@nhs.net
Plymouth	livewell.ptd@nhs.net
Local Authority Safeguarding Adult Boards	
Devon Safeguarding Adult Board	Safeguardingadultsboardsecure-mailbox@devon.gov.uk
Torbay Safeguarding Adult Board	tsdft.torbaysafeguardingadultsboard@nhs.net
Plymouth Safeguarding Adult Board	adultsafeguarding@plymouth.gov.uk
Education	
University of Exeter	Risk and Compliance Officer prevent@exeter.ac.uk
Plymouth University	Head of Student Services and Prevent Lead safeguarding@plymouth.ac.uk
Exeter College	Director of Student Experience Contact: 01392 400448
South Devon College	Prevent Lead prevent@southdevon.ac.uk
Babcock LDP	Safeguarding Team Coordinator LDP-LearnerSupport@babcockinternetional.com
City College Plymouth	humanresources@cityplym.ac.uk
Plymouth College of Arts	Head of Compliance and Quality Systems studentsupport@pca.ac.uk
Housing	
Plymouth Community Homes	HR Business Partner (Talent Management and Staff Development) learninganddevelopment@plymouthcommunityhomes.org.uk
Non-Prevent Partnership Training Providers	
Learn Devon	Quality and Performance Manager learndevon@devon.gov.uk
Early Years – Devon	Covered by Devon Children and Families Partnership training provisions.
Early Years – Plymouth	earlyyears@plymouth.gov.uk
Early Years – Torbay	Early Years and Childcare Advisory Service earlyyears@torbay.gov.uk

Appendix 5: Example Training Offers

Prevent training for Enhanced Prevent Awareness upwards should be delivered through a combination of face-to-face and e-learning and should be embedded within wider safeguarding training. All staff are required to receive annual updates and three-yearly refresher training. Organisations are expected to achieve an 85% compliance rate.

Board Training

In addition to Basic Prevent Awareness Training:
- Organisational training to support board members in their understanding and accountability in relation to safeguarding

Prevent Lead & Channel Chair Training

In addition to Enhanced Prevent Awareness Training:
- Home Office Channel Training - https://www.elearning.prevent.homeoffice.gov.uk/channel_awareness/01-welcome.html
- Action Counters Terrorism Training - https://www.gov.uk/government/news/act-awareness-elearning
- Local counter-terrorism events, regional and national conferences and updated legislation and guidance
- Hydra Training

Specialist Training

In addition to Enhanced Prevent Awareness Training:
- Additional reading and case studies (https://www.preventtragedies.co.uk/help-guide/) and involvement in Channel
- Document guidance training (for HR staff)

Enhanced Prevent Awareness Training

In addition to Basic Prevent Awareness Training:
- Notice, Check, Share - https://www.elearning.prevent.homeoffice.gov.uk/prevent_referrals/01-welcome.html
- Organisational Enhanced Prevent Awareness Training Offer
- Prevent Partnership Briefings
- Mental Health First Aid Kit - https://mhfaengland.org/ (recommended addition)

Basic Prevent Awareness Training

- Home Office Prevent E-learning - https://www.elearning.prevent.homeoffice.gov.uk/screen2 (WRAP)
- Preventing Exploitation Toolkit - www.preventingexploitationtoolkit.org.uk
- Organisational Basic Prevent Awareness Training Offer (e.g. a bespoke version of the Home Office e-learning)
- Prevent Partnership Briefings

Basic Prevent Awareness Training should be included in all staff induction training.

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Safer Plymouth

Meeting Date   **20 October 2020**

Report from Chair of   **Safer People**

SECTION A		
Chair Name and Contact:	Tracey Watkinson Safeguarding Business Manager Plymouth Safeguarding Children Partnership Tracey.Watkinson@plymouth.gov.uk	
Dates of meetings since last Full Board	26/08/2020	
Executive Summary/ Key Issues only[1]	Quality Assurance	• PSCP senior lead oversight and scrutiny has secured a SMART project implementation plan for the Plymouth Adolescent Safety Framework. • Liaison with Devon Children & Family Partnership to benefit from their evaluation of implementation and impact. • PSCP Quality Assurance Framework and Work plan identifies extra familial risk as third cycle of quality assurance activity (June 2021). • Data reporting, data and analysis • CE Screening Tool
	Partnership Co-ordination	• Safer People link into Modern Day Slavery partnership • Extended membership of Safer People to improve multi-agency engagement and participation. • Operation Lavender – CSE – Hotels and B&Bs • Dangerous Drug Networks & County Lines – Alter Ego production.
	Systems Leadership	• Work upon Children and Young People Strategic Governance continues • Ten Wishes – revisit and enhance to address COVID-19 and the current lived experience of our children and young people. • Collaboration and engagement upon Strategic Assessment of Threat/Risk Harm profile for 2020.

[1]**Please see Priorities below for further detail**

		• HSB Audit NSPCC/PSCP.
	Statutory Governance	• Terms of Reference concluded and agreed.
	Trauma Informed System Development	• Safer People to seek appropriate engagement from Lived Experience Group of Trauma Informed Network. • NWG Presentation on Trauma Informed Practice and Contextual Safeguarding. • Victim blaming and shame multi-agency awareness raising. (JTAI).

SECTION B	

What is working well?
 	
Op Lavender Audio.m4a
	• Safer People Group met again on 28 August 2020 with increased participation which promoted informed discussion upon the key themes of work for the group, i.e.:
	  ▪ Extra-Familial Framework
	  ▪ Modern Day Slavery
	  ▪ Exploitation of vulnerable adults
	  ▪ Understanding and responding to mental ill health inequalities.
	  This extends reach into experienced professionals, agencies and provides benefit of knowledge and organic intelligence.
	• Focus upon modern slavery has substantially improved with link into the Modern Slavery Partnership. A draft Modern Day Slavery strategy for Plymouth is currently out for consultation with Safer People and Modern Day Slavery Partnership.
	• Operation Lavender evidences proactive partnership working. This was a test purchase type operation to gather information and raise awareness of CSE within hospitality by Devon & Cornwall Police. Response by hotel staff (80%/12 did not challenge) to spot potential warning signs of CSE, indicates a need for education and training. Education and training is being prepared for delivery by both Children Society and Plymouth Safeguarding Children Partnership.
	• Plympton Schools have commissioned Alter-Ego to deliver their County Lines production. This will be supported by the presence and availability of both Safer People and Plymouth Safeguarding Children Partnership and supports prevent and protect models re, dangerous drug networks and county lines. Drug misuse has been a concern for these Schools within the Operational Missing and Child Exploitation Group.
	• A bid has been made by the Plymouth Safeguarding Children Group to Research in Practice (Tackling Child Exploitation) for support within its Adolescent Safety Framework, with a focus upon virtual expansion to adapt child exploitation services/support for young people over the age of 18.
	• Improved join-up across strategic landscape within Plymouth on key themes, promoting dialogue and engagement and reducing duplication.

	• The NSPCC/PSCP Harmful Sexual Behaviour Audit was extended to enable a greater agency over the COVID-19 period. Validation panel due to meet in October.
What are we worried about?	• Continued multi-agency leadership engagement to provide effective engagement and challenge to secure timely development and vertical expansion of the Adolescent Safety Framework. • Continued concern re. data reporting, intelligence and narrative. Concern that without effective data availability and analysis work, the group could operate within a silo and fail to provide a full systemic picture and intelligence which could inform our approach and services for children and young people, and adults with care and support and needs. • Consistent and qualitative use of CE Screening Tool to promote professional judgment on lived experience of the child and risk presented (JTAI) • Referrals to and use of SARC; further analysis and investigation required. • Cyber Crime and Vulnerability does not address the increased incidents of fraud within the city; particularly arising from Covid-19 scams etc. The Fraud and Cyber Group remains as a network, rather than physical group, with interaction managed virtually.
What needs to happen?	• Continued drive, strategic direction and accountability of multi-agencies to implement, deliver, roll out and embed Adolescent Safety Framework with multi-agency practice. • Subject to outcome of Research in Practice Bid to actively engage within research into and implementation of bespoke models of support for the Adolescent Safety Framework, with particular focus upon expansion to over 18's. • Strategic consideration and decision making on provision of data analyst support to inform partnership understanding, intelligence and quality assurance of key themes. • Evaluation and data check on SARC referrals and engagement. (subject to above bullet on data analysis expertise). • Cross-partnership working group to evaluate current 'fit' and effectiveness of multi-agency use and impact.
Identify Group Impact upon: • **Reducing violence, abuse and exploitation** • **Reducing re-offending** • **Early intervention and prevention of harm**	• Draft Modern Day Slavery strategy will support raising awareness and implementation of training etc. and should promote collegiate working to reduce, protect and prevent this abuse and exploitation. • Operation Lavender and ongoing support, training and quality assurance will build resilience within the hotel and bed and breakfast community within Plymouth. • Alter-Ego production again supports awareness and early intervention and prevention of harm regarding dangerous drug networks and county lines, in schools where concerns have been evidenced. • NWG presentation on contextual safeguarding with trauma informed lens has promoted reputation and response of Safer

• **Building community resilience, reducing inequalities and improving lives**	Plymouth and Plymouth Safeguarding Children Partnership nationally and approaches from other agencies and research groups can help to enhance our approach on reducing violence and exploitation.
Formal recommendation to/action required of Full Board.	• Continued drive, strategic direction and accountability of multi-agencies to implement, deliver, roll out and embed Adolescent Safety Framework with multi-agency practice. • Subject to outcome of Research in Practice Bid to actively engage within research into and implementation of bespoke models of support for the Adolescent Safety Framework, with particular focus upon expansion to over 18's. • Strategic consideration and decision making on provision of data analyst support to inform partnership understanding, intelligence and quality assurance of key themes • Consider Safer Plymouth partnership response/campaign re COVID-19 related scams; particularly in light of potential local or national response to COVID-19 crisis during winter months.
Suggested work engagement with Trauma Informed Plymouth Network	• Consultation and participation within project management plan and implementation of Adolescent Safety Framework – co-design. • Lived experience engagement as part of Safer People Group. • Potential engagement with NWG Annual Conference • Provision of trauma informed practice training to strategic leads within Safer People and Plymouth Safeguarding Children Partnership.

Name of Group Chair	Tracey Watkinson
Signature of Group Chair	
Date Signed	09/10/2020

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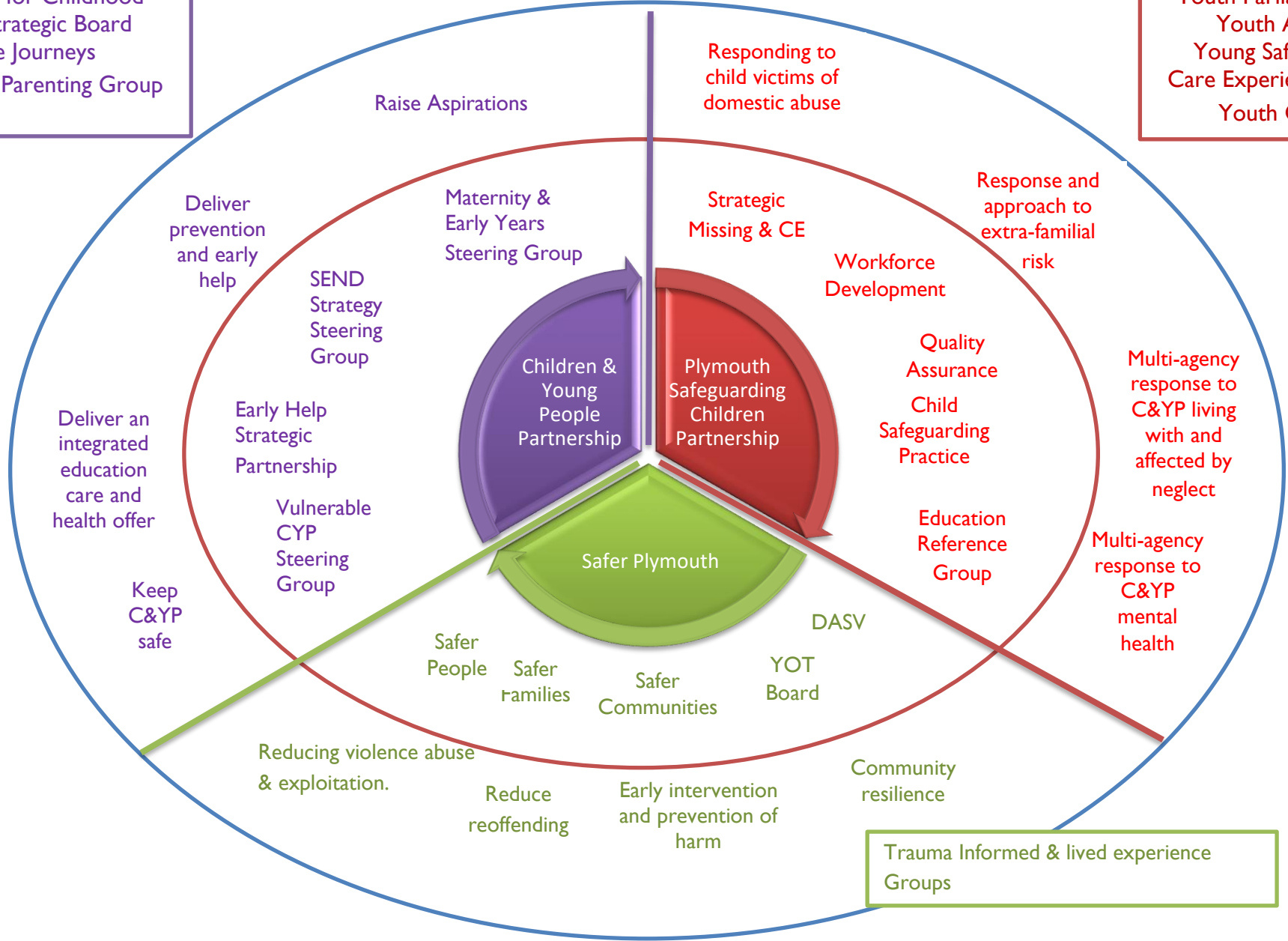
Trauma Informed

Trauma Informed

Trauma Informed

Strategic Governance
Plymouth Education Board
EHWB Steering Group
Together for Childhood
Pause Strategic Board
Care Journeys
Corporate Parenting Group

Voice of CYP & Families
Listen & Care Council
Parent/Carer Forum
Youth Parliamentarians
Youth Ascends
Young Safeguarders
Care Experience Council
Youth Cabinet

Raise Aspirations

Responding to child victims of domestic abuse

Deliver prevention and early help

Maternity & Early Years Steering Group

Strategic Missing & CE

Response and approach to extra-familial risk

SEND Strategy Steering Group

Workforce Development

Children & Young People Partnership

Plymouth Safeguarding Children Partnership

Quality Assurance

Deliver an integrated education care and health offer

Early Help Strategic Partnership

Child Safeguarding Practice

Multi-agency response to C&YP living with and affected by neglect

Vulnerable CYP Steering Group

Safer Plymouth

Education Reference Group

Keep C&YP safe

DASV

Multi-agency response to C&YP mental health

Safer People

Safer Families

Safer Communities

YOT Board

Reducing violence abuse & exploitation.

Reduce reoffending

Early intervention and prevention of harm

Community resilience

Trauma Informed & lived experience Groups

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Safer Plymouth: a strategic assessment of threat, risk and harm 2019/20

Introduction

Safer Plymouth is the **community safety partnership** for the city of Plymouth. We are made up of six statutory organisations (referred to as **responsible authorities**), working alongside a wide range of other agencies to protect our local community from crime and to help people feel safer. The responsible authorities are Plymouth City Council, Devon and Cornwall Police, Devon and Somerset Fire and Rescue Service, National Probation Service, Dorset, Devon and Cornwall Community Rehabilitation Company and Devon Clinical Commissioning Group (CCG).

Achieving safer communities depends on everyone working together to find local solutions to local problems. Safer Plymouth has a responsibility to do all that it can to reduce crime and disorder including domestic abuse and sexual violence, anti-social behaviour, problem use of drugs and alcohol and re-offending. Safer Plymouth provides leadership, support and co-ordination of the work of all the partners in the local area by:
- Producing an annual strategic assessment to identify community safety priorities and setting objectives;
- Developing a three year Partnership Plan, refreshed annually, to ensure priorities are the same and co-ordinate activities to address the
- community safety priorities;
- Monitoring delivery against objectives and driving good performance by targeting resources to deliver efficient and effective outcomes for
- communities
- Developing a communication plan to raise the profile of Safer Plymouth, its purpose, priorities and achievements

Safer Plymouth reports to the Health and Wellbeing Board to ensure strong links between community safety issues and health and wellbeing issues, allowing the Safer Plymouth Board to lead on community safety issues, and quality assure activity.

As part of the development of **Statutory Partnership Plans**, Community Safety Partnerships (CSPs) are required to **set their priorities** based upon the findings from the evidence presented in their **local Strategic Assessments**.

The Partnership Plan for Safer Plymouth is contained within the overarching Plymouth Plan, which sets out the direction of travel for the long term future of the city until 2034, specifically:-

 "work towards **delivering strong and safe communities and good quality neighbourhoods** by delivering a partnership approach to:
Tackle crime and disorder that causes the most harm and affects those most at risk
Reducing opportunities for crime and the fear of crime by requiring all new development to incorporate good design principles "

This document is intended to inform the development of the community safety element of the Plan.

Acknowledgments

Plymouth: an overview

Plymouth is Britain's Ocean city with ambitions plans to be one of Europe's most vibrant water front cities. Plymouth is **one of the largest cities on the south coast** and the fifteenth largest city in England. With a **travel-to-work** area bringing in **over 100,000 people**, a tourist industry drawing in more than **5 million visitors**, and approximately **26,000 students**, the city is a significant economic and cultural centre which also enjoys a thriving evening and night time economy.

Plymouth is also a city that has **significant deprivation**. More than 29,000 city residents live in the most (10%) deprived areas in England. **Inequalities** occur both **geographically** across the city, and **within and across communities**, with **disadvantaged and marginalised populations** most severely affected. These communities experience **multiple social and economic issues**, such as lower incomes, higher unemployment rates, poorer health and housing conditions and higher rates of crime and disorder.

QUICK FACTS: PLYMOUTH RECORDED CRIME

Reporting period is the 12 months to 31 March 2020

Key Facts

23,024 crimes / 87.84 crimes per 1,000 resident population;
Rate of crime remains below average for Most Similar Group (MSG, 107.81);
This is a decrease of 2.5% from the previous 12 month period (23,626 crimes)
The Universal Dataset provided by Devon and Cornwall Police shows 8,126 Anti-Social Behaviour incidents recorded, this is a 8.1% reduction on the number recorded in 2018/19 (8,838)
(Source: iQuanta unless stated)

Trends
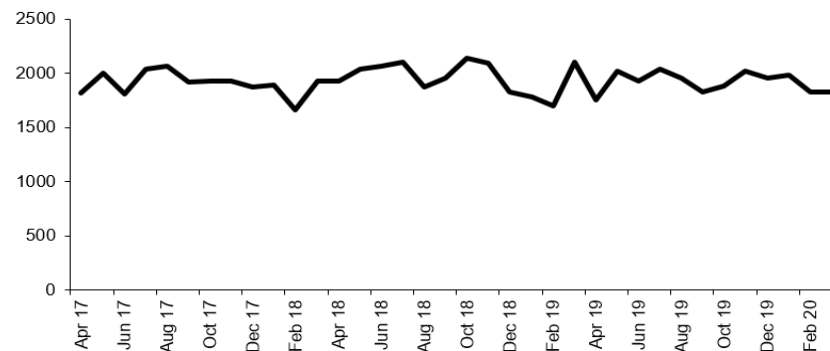
Since the beginning of 2017 the level of crime recorded within Plymouth has been on a steady trend. (Source: iQuanta)

Seasonality
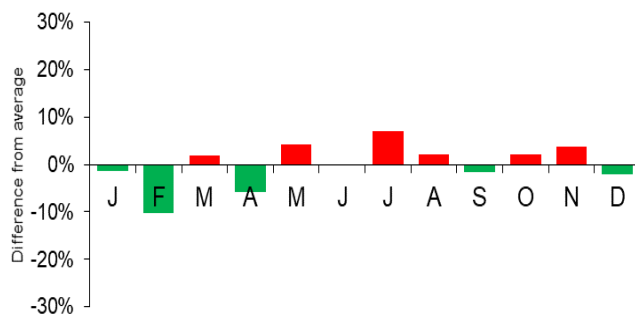
There is a light seasonal pattern of crime in Plymouth, with spring and summer months having higher numbers of recorded crime. There are also smaller peaks seen in October and November. Seasonal trend is based on a three year average. The last 12 months has seen crime recorded in December fall below the monthly averages. (Source: Universal dataset, Devon and Cornwall Police)
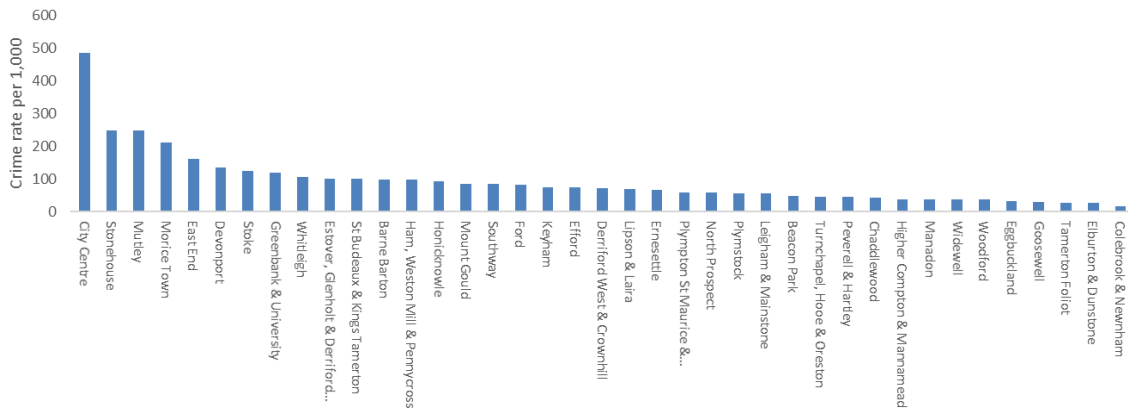
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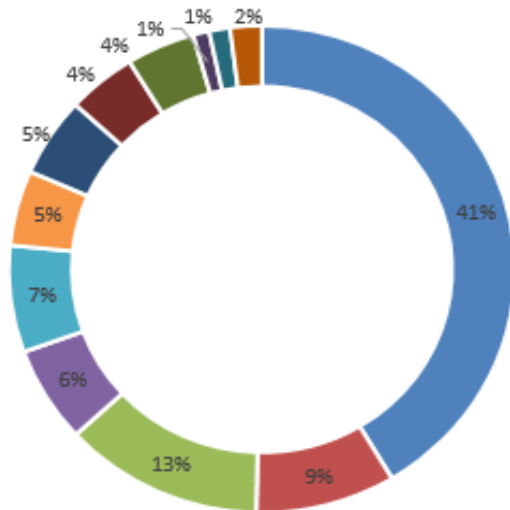
Crimes

The chart shows the breakdown of crime by type for April 2019 to March 2020.

Violence 41%

Criminal Damage 13%

Theft 9%

Public Order 7%

Shoplifting 6%

Burglary 5%

Location

Neighbourhood	Number of crimes	Rate per 1000 population
City Centre	3595	486.3
Stonehouse	2490	248.6
Mutley	855	248.5
Morice Town	628	212.3
East End	953	160.8

In 2019/20 the rate of crime is highest in the City Centre neighbourhood, followed by Stonehouse and Mutley. The neighbourhoods with the lowest rate of crime are Colebrook & Newnham and Elburton & Dunstone. This representation of crime is no change from 2018/19.

Crime trends

Overall recorded crime in Plymouth decreased by 2.5% or 602 crimes in the 12 month period to end March 2020 compared with the same period the previous year. This follows on from increases reported in the last two strategic assessments. Plymouth has a comparatively low crime rate for a city of its type and is placed second in its most similar family group of partnerships (where first is lowest). Plymouth's crime rate is 87.84 crimes per 1,000 population compared to an average of 107.8 for the iQuanta group of similar areas within which it sits.

Plymouth also compares favourably to the average within its iQuanta group for 11 key crime types. These crime types include; Burglary within a residential setting where the crime rate of 5.9 is less than halve that of the iQuanta group average (13.2), Burglary within a commercial setting, Robbery and vehicle related Theft offences. in 2019/20 Plymouth had the lowest rate of Serious Acquisitive Crime within its iQuanta group.

Whilst the levels of Robbery remain low comparatably low it is one of a number of crime types where levels increased in 2019/20. The number of Robbery crimes recorded increased by 16%, rising from 205 to 238, it is however important to note that this is still the third lowest rate within the iQuanta group.

The levels of violent crime recorded continues to stand out as it has done for a number of years. The number of Violence with Injury offences recorded in 2019/20 reduced by 7% (or 252 crimes) but the rate of offences remains amongst the highest within its comparator group, Plymouth had the 12th highest rate (of 15). Conversely the number of Violence without Injury crimes increased by just 1% (+36) but remains low compared to the iQuanta group (Plymouth had the 6th lowest rate recorded in 2019/20).

There is no comparator information available for Domestic Abuse (DA) offences but in 2019/20 the levels of both DA related crimes and DA related incidents increased, by 5% (+240) and 7% (+141) respectively.

Other notable increases include a 17% (+58) rise in Rape, a 5% (+40) rise in Possession Drugs and a 8% rise in crimes recorded with a Hate Crime flag. In 2019/20 Plymouth has the 12th highest (of 15) rate of Rape offences within its group of similar cities.

Crime Table

The table below provides a summary of all crime and disorder types in the city.

Crime / Incident Type	2018/19	2019/20	% Increase / Decrease (no. crimes)	Plymouth rate per 1,000 population (MSG Group in brackets)
All Crime	23,626	23,024	-3% (-602)	87.8 (107.8)
Burglary Residential	667	649	-3% (-18)	5.9 (13.2)
Burglary Business and Community	535	498	-7% (-37)	1.9 (2.3)
Robbery	205	238	+16% (33)	0.9 (1.5)
Theft other	1,840	1,660	-10% (180)	6.3 (8.7)

Crime / Incident Type	2018/19	2019/20	% Increase / Decrease (no. crimes)	Plymouth rate per 1,000 population (MSG Group in brackets)
Shoplifting	1,587	1,468	-7% (-199)	5.6 (8.5)
Theft from Motor Vehicle	781	711	-9% (-70)	2.7 (5.4)
Theft of Motor Vehicle	411	367	-10.7% (-44)	1.4 (2.0)
ASB	8,838	8,126	-8% (-712)	31.0
Criminal Damage	2,762	2,785	+1% (+23)	10.6 (10.9)
Public Order	1,606	1,607	+<1% (+1)	6.1 (10.7)
Rape	337	395	+17% (+58)	1.6 (1.3)
Other sexual offences	720	615	-15% (-105)	2.4 (2.2)
Domestic Abuse crimes	4,642	4,882	+5% (+240)	18.6
Domestic Abuse incidents	1,910	2,051	+7% (+141)	7.8
Possession of drugs	768	808	+5% (+40)	3.1 (2.5)
Trafficking of drugs	196	195	-1% (-1)	0.74 (0.85)
Violence with injury	3,768	3,516	-7% (-252)	13.4 (11.2)
Violence without injury	6,017	6,053	+1% (+36)	23.1 (26.1)
Hate crime	529	570	+8% (+41)	2.2

Risks

Crime and other community safety issues have been considered under broad themes using the MoRiLE methodology to undertake a review of strategic threat, risk and harm. More information on the MoRiLE tool can be found in Appendix A. A full MoRILE analysis was undertaken in early 2019 and due to COVID-19 this has not been possible in 2020. In its place a series of working groups have taken place to review the findings of 2019, and to consider the impact of COVID-19. The lists of risk below remain largely unchanged from 2019 following these working group sessions. Risks have been categorised as High, Moderate and Standard.

High Level Risks

These should be prioritised by Safer Plymouth and all of its partners, and feature strongly in local strategies and plans.

- Terrorist Incidents
- Domestic Abuse, including Domestic Homicide
- Problem Drinking
- Dangerous Drug Networks, including County Lines
- Drug Trafficking
- Problem Drug Use, including Drug Related Deaths
- Rape and Sexual Assault
- Alcohol Related Hospital Admissions
- Child Sexual Exploitation and Abuse (CSE to be considered in the broader context of child exploitation)

Moderate Level Risks

It is important that the CSP continues to be proactive in these areas; working together to manage the risks, address identified problems and prevent new problems developing.

- Cyber Dependent Crime, including Fraud
- Homicide
- Alcohol Related Crime
- Modern Slavery[1]
- Terrorist Activity
- Hate Crime
- Violence relating to the Night Time Economy

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[1] Although rated as a moderate risk, it is recommended that this is retained as a Safer Plymouth priority due to continued national focus.

Standard Level Risks

These risks are being managed as "business as usual" and/or not placing much additional demand on services. These should be monitored to ensure they continue to be managed well.

- Anti-Social Behaviour (Impact of COVID-19 on community relations)
- Burglary
- Robbery
- Thefts **–** Shoplifting, Thefts of and from Motor Vehicles, Other Thefts
- Other Sexual Offences
- Possession of Drugs
- Public Order Offences
- Violence, with or without injury
- Criminal Damage and Arson
- Slight Injury Road Traffic Collisions

Key Areas of Focus

The next section reports on some of these risks in greater detail, providing an overview of MoRILE scoring as well as qualitative intelligence obtained via working groups that will assist Safer Plymouth in its decision making.

Domestic abuse and sexual violence

Domestic abuse & sexual violence	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Domestic homicide					Moderate
Domestic abuse					**High**
CSA/CSE					**High**
Rape & sexual assault					**High**
Other Sexual Offences					Standard

Key Statistics:

- Following an increase in 2018/19 the number of Domestic Abuse crime recorded increased again in 2019/20, crimes increased by 5% and incidents by 7%.
- There has been no Domestic Homicide Reviews (DHR) in Plymouth since 2017. We have published 2 DHRs this year and will be publishing 2 more by end of the year but they were for homicides dating 2013 to 2017.
- 395 reported crimes of rape, a 17% increase from 2018/19. Plymouth has a higher rate of Rape and other Sexual Assault than its comparators.

Impact	- **Victim/subject** – short and long term physical impacts requiring medical assistance and potential for hospitalisation; long term psychological impacts requiring specialist intervention, risk of self-harm and suicide; link between domestic abuse and mental health issues; potential for loss of life – domestic homicide (worse-case scenario); developmental impact (ACE) upon child victims impacting upon future life outcomes (including employment, health, risk of

	being a victim or perpetrator of crime). Alcohol use seen as a significant factor and linked to more serious incidents. DASV in the family home impacts on young people needing to access housing support. Can have long-lasting financial impact on victim and their family.
	• During COVID-19 we have seen escalating concerns on the impact of DASV upon mental health and suicidality, delays in victims accessing justice due to disruption to courts system has contributed to this. A majority of our Plymouth MARAC cases now have mental health as a significant contributing factor.
	• Police colleagues noted a rise in non-recent sexual violence reporting during early lockdown, perhaps reflecting people having time to reflect and act upon historic incidents.
	• The issue of child to parent/carer violence seen as a growing concern. Local data from our child centered policing team supports this and nearly half of our referrals to adolescent support involve child to parent violence. We would like to see this data collected across the Peninsula for future workshops. Concerns that verbal abuse can be normalized for some families.
	• Child exploitation, including sexual, remains a concern, particularly during the continuing COVID-19 period, which presents a greater risk of exploitation. Children and young people can be less visible, and exploitation activities become harder to identify, disrupt and intervene. Online child sexual exploitation presents a particular challenge.
	• **Community/public expectation** – There has been increased local and national media interest in domestic abuse during the COVID-19 period. We anticipate this may continue with the passage of the DA bill through Parliament. Visibility of sexual violence issues is much less.
Likelihood	• Domestic abuse is high frequency, high volume**;** other issues happen often but in lower numbers; adverse trends seen in domestic abuse, increases in Rape figures are of particular concern although we note that increased reporting can indicate increased confidence to do so.
	• Community tension data indicates an increase in Domestic abuse (high risk) crime, this is corroborated by our specialist service provider who had seen more complex and serious offences during COVID-19, including more incidents with weapons (around 1/5 of weapons offences in Plymouth are DA related). Since lockdown restrictions eased our MARAC referrals are up by approximately one third.
	• Sexual Assault Referral Centre noted an increase in sibling related incidents during lockdown. Voice of young people work (NSPCC) indicates that many young people experience harmful sexual behaviour as a norm that they know is not ok, but would not report.
Organisational response	• **Costs to respond** are felt in all agencies - direct costs (police, health, social care) and indirect costs (mental and physical health impacts in later life); long term demands; DHRs require significant resources to co-ordinate and secure multi-agency participation. Our SafeLives commissioned needs assessment for Plymouth (Jan 2020) estimated that the annual financial cost to the city of domestic abuse to be in excess of £24 million.
	• **Capacity** – Crime numbers on the increase but no additional resources to respond to this, increase in police capacity will take time to impact due to time to train and develop skill set required. Safer Plymouth is seeking to address this with better partnership working

	though there are also challenges around rising thresholds in other services (especially mental health). Partners in Plymouth have actively pursued additional funding made available during COVID-19. Plymouth Domestic Abuse Service have secured five additional Independent Domestic Violence Advisor posts and we have additional accommodation units and move on support. Concerns around capacity to deliver once these short term funded projects end, given impacts of COVID-19 could be generational.
	• **Capability** – recommendations from Domestic Homicide Reviews identify capacity and capability amongst Primary Care as a gap, Plymouth is seeking to address through a Sustainable and Transformational Partnership funded Primary Care project. Domestic Abuse training and trauma informed practice training have been disrupted by COVID-19 with moves being made to move to some virtual delivery. There are issues around whole system understanding of working with victims of rape and sexual assault; some issues exist with referrals to the Sexual Assault Referral Centre. . Plymouth is seeking to ensure that child exploitation screening tools, as part of the development of an Adolescent Safety Framework, are used consistently to provide qualitative and informed professional judgments as to risk and the lived experience of a child/young person. Development of an Adolescent Safety Framework will enable contextual understanding and interventions for children and young people at risk of child exploitation.
	• **Mitigating factors** - Specialist services are in place to work with victims, and there is a move towards a more trauma informed whole system approach that will build capacity/skills for early intervention. Strong partnership working is seen as a real strength in the city with our local Domestic Abuse and Sexual Violence (DASV) partnership increasing frequency of meetings to monthly in response to COVID-19 and producing a coordinated approach document and action plan.
Knowledge gaps	• There is an overall confidence in intelligence assessment but under-reporting identified as a risk factor; specialist services have well developed and comprehensive knowledge. The DASV group receives monthly written updates from partners which has improved ability to form a detailed local picture. Pathfinder work should improve health based reporting. Our Domestic Abuse Systems Leadership work has given a wealth of Lived Experience intelligence which we use to inform system developments.
	• **Gaps identified** – more understanding is needed around sexual violence and interventions for child sexual exploitation including understanding the voice of lived experience. Adverse Childhood Experiences information is still emerging although some partners such as Adolescent Support Team are now collating this. Trauma Informed approaches are still new to some partners and as a partnership we await the full implications of the Domestic Abuse Bill. We identified a gap around clear pathways around reporting of historic sexual violence. We are concerned that the Brook traffic light system for harmful sexual behaviours no longer being free may lead to future knowledge gaps, and impact upon pathways for referrals. More work can be undertaken to improve the consistent and qualitative use of child exploitation screening tool to promote professional judgment and secure the right help at the right time.
Recommendation	• Recommended CSP priority**,** with the focus on domestic abuse, rape and sexual assault, and CSA/CSE (within the wider context

		•	of child exploitation and development of Adolescent Safety Framework).		
		•	It is noted that 'Other Sexual Offences' covers a broad area of offending so the risk may not be adequately reflected in the scoring outcomes.		

Alcohol-related harm

Alcohol-related harm	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Problem drinkers					**High**
Alcohol-related hospital admissions					**High**
Alcohol-related crime					Moderate

Key Statistics:

- **3,320 dependent drinkers,** 1.58% compared to 1.39% nationally
- Rates of **alcohol-related hospital admissions** are lower than the national average (575 hospital admissions per 100,000 population compared to 626 nationally)
- **Under 18 alcohol-related admissions** are significantly higher than the national average (47.7 per 100,000 population aged under 18 in Plymouth compared to 31.6 nationally)
- **3,427 alcohol-related crimes**, an increase of 9% on 2018/19 (3,143)
- **14%** of all recorded crime and non-crime incidents is flagged as alcohol related
- **872 incidents of street drinking**, 11% of all reported ASB incidents, this is a higher proportion than 2018/19 (9%).

Impact	• COVID-19 means alcohol related ASB related to NTE well down, although flashpoints occurred during easing of restrictions e.g. on the Barbican. Concerns that lockdown has increased levels of problematic alcohol consumption in the home, this may well take time to turn into referrals for help. Particular concern around alcohol use in home and domestic abuse.
	• **Victim/subject** - Acute and chronic health impacts requiring hospitalisation, both immediate and longer term treatments; dependency requires specialist intervention; long term financial instability, lack of regular income; mental health issues and addiction increase threat to individuals' recovery capital.
	• **Community** - visible disorder related to alcohol-related anti-social behaviour and violence will affect residents' behaviour and their satisfaction with the city as a place to live. Physical and economic impacts on local businesses. Seems to be more visible lately due to displacement from other areas into City Centre. Tensions relating to COVID-19 and the role of social media seems to have more impact on communities recently.
Likelihood	• High frequency, volume and adverse trends in problem drinking and hospital admissions; alcohol-related crime has increased in the 12 months up to March 2020.

	• Our Specialist Young People Substance Misuse Service noted the last NDTMS report did outline that Plymouth does have a higher than average number of YP presenting with severe levels of alcohol use
Organisational response	• **Regional/local priority** to tackle effectively; • **Costs to respond** are high - extending to crime and anti-social behaviour, health and care, families, lost income due to unemployment, lost productivity, absenteeism and accidents, costs of illness, disability and early death. • **Capacity** – capacity for prevention/identification and response is limited; well recognised situation. Individuals with significant psychological/psychiatric and physical co-morbidities that make demands across the whole complex needs system of services. Capacity to respond to alcohol related crime has reduced due to reduced police resources. • **Capability** – public understanding of the health harms associated with alcohol is limited. More focus needed on universal approaches to information/ awareness/prevention, rather than a 'specialist workforce'; use of Mental Health Treatment Requirements now being rolled out in Plymouth. Rehabilitation services may not be sufficient. Some schemes due to stop next year due to funding streams stopping. • **Mitigating factors** - Alcohol-related health harms are well understood locally and currently part of the city's complex needs agenda and service re-procurement workstream; well established NTE response. • Strong partnership working through Operation Hippic. The work of the Alliance in coordinating partnership responses and taking a holistic approach to complex needs has made significant improvements to this area of practice in Plymouth. We need to ensure public kept well informed of the positive work undertaken as media/ social media may not reflect reality on the ground. The City-wide PSPO order is imminent, giving powers to remove alcohol if use is ASB related.
Knowledge gaps	• **Overall confidence** in intelligence assessment; • **Gaps identified** – dependent drinkers not engaged with services during COVID-19; drinking in the home, hidden harm.
Recommendation	• **Recommended CSP priority**, with the emphasis on problem drinking and complex needs rather than targeting alcohol-related crime.

Drug-related harm

Drug-related harm	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Drug related deaths					Moderate
County Lines/Dangerous Drug Networks					**High**
Problem Drug use					**High**
Trafficking Class A Drugs					**High**
Trafficking Other Drugs					Standard
Possession of Drugs					Standard

Key Statistics:

- Trafficking of Class A drugs – reduction of 1% in trafficking crimes recorded
- 808 Possession of drugs crimes recorded, an increase of 5% (+40)
- Plymouth's rate of **death from drug misuse** (11.4 per 100,000) is higher than regional (9.9 per 100,000) and England (10.8 per 100,000).

Impact	- Victim/subject - Acute and chronic health impacts requiring hospitalisation; dependency requires specialist intervention; long term financial instability, lack of regular income; mental health issues and addiction increase threat to individuals' recovery capital; potential for loss of life through overdose/suicide; high psychological and financial impact for individual and their families if trafficking related to Drug Dealing Gang's (DDN's). - Community – increased concern in communities where drug dealing is visible; potential impacts on fear of crime and quality of life, increasing visibility of drug use seems to be increasing concern in community. DDN activity more hidden so less impact unless it is uncovered. - Significant differences in Plymouth with more DDN's and less County Lines activity. COVID-19 reduced County Lines activity in the city but note this is liable to change as restrictions ease and we see changes in supply and demand. - During COVID-19 we have seen an increases in use of alcohol and benzodiazepines, including illicitly produced and potentially more dangerous counterfeit products. Decreased use of heroin (availability decrease and reported reduction in purity). Changes in substance type will impact on behaviour both in private homes and the community. - The SHARP team (Specialist Young People Substance Misuse Service) noted increased use of social media, particularly Snapchat, being used with young people to obtain and sell substances during COVID period. - Drug related deaths - Plymouth has more deprivation, drug prevalence and inequality than nationally and its neighbours, that is why the rate of deaths is higher, it is expected and consistent with rates of it statistical (as opposed to geographical) neighbours. There is overlap between drug/alcohol/fire/suicide/domestic homicide deaths and with certain illness and conditions, notably Chronic obstructive pulmonary disease, bacterial infections (including MRSA, iGAS and TB) and viral infections such as Hepatitis C and HIV. This is why in Plymouth we look at drug deaths as part of an 'Avoidable Deaths' strategy (note 'avoidable' not 'preventable' because many are not preventable). - Increased risk to local vulnerable young people who may be recruited into criminal activity – threats/experience of physical and sexual violence. The SHARP team raised concerns about targeting of young people to supply drugs and exploitation. Partners noted that for some young people risks decreased during COVID-19 as they spent more time in family environment. But for those accommodated outside the family home or in unstable environments the risk increased. SHARP

	team noted increased use of reported 'pill' use (both MDMA and valium) with noted rises in nitrous oxide and some ketamine use.
Likelihood	• Frequent (constant) issue but mainly small volumes; increasing trend in trafficking and problem drug use. During COVID-19 arrests for drugs, trafficking and weapons all increased. Concern raised at the 77% increase U18 possession of drugs although note numbers involved still low (47-83). Youth Offending Teams saw a 31% decrease in caseload during lockdown and decreased reported substance use during this period, however substances were more easily obtained once restrictions eased.
Organisational response	• National/regional/local priority to tackle effectively. • Costs to respond are high across the system (housing, social care, health, police/CJS). • Capacity – Good police capacity to respond during COVID-19 led to significant increase in arrests during this period, emptier streets made this activity easier to spot. Response is dynamic. Specialist services made significant adjustments to meet needs of clients with social distancing – some longer term benefits for use of technology in engaging clients may be evidenced, managing higher levels of referrals/ improved engagement. Securing housing and tenancy support a key priority for rough sleepers during COVID 'everyone in' approach, effective partnership work with Alliance helped to support people with substance misuse into accommodation, strong desire to maintain the gains made. Focus on traffickers as victims of DDN's leading to more capacity needed to provide safeguarding and support. • Capability – Focus on young people – drug use, awareness of risks and where to get help, preventing involvement in illegal drugs trade; drug needs in offenders not reflected in use of Drug Rehabilitation Requirement • Mitigating factors - Introduction of child exploitation toolkit and associated training is raising awareness and some improvement seen. New Trauma Informed approach is helping to raise awareness around DDN's and drug trafficking. Strong partnership working through Operation Hippic and the work of the Alliance has made significant improvements. Plymouth performing well for use of partnership intelligence portal, this is an area Safer Plymouth could look to significantly build on current success.
Knowledge gaps	• Gaps identified – understanding the relationship between serious group offending and local drug markets (including illegal, prescription drugs and new psychoactive substances); problem drug use in young people, links between DDN and serious violence. Improve understanding of why gaps between offending around substance misuse and YOT referrals. • Devon and Cornwall police are preparing a 4P strategy for DDNS that should better inform impact/ likelihood and threat analysis. • Intelligence around counterfeit valium is being developed with A&E departments. • Recognition that elements around drug supply hidden, but knowledge around the harms improving.
Recommendation	• Focus on protecting the vulnerable **–** preventing drug related deaths and reducing risks to young people of illegal drugs trade. • Focus on action to tackle Dangerous Drug Networks / Trafficking of Class A Drugs and the associated issue of drug related violence.

Vulnerability and Exploitation

Hate Crime and Prevent	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Terrorist incident					**High**
Terrorist activity					Moderate
Hate crime					Moderate

Key Statistics:

- Hate Crime – 570 offences, an increase of 8% on 2018/19.
- Racism represents 64%, Homophobia 15%, Disablist 11%, Transphobic 5%

Impact	• Victim/subject – acts of terrorism hold the greatest potential risk – mass casualties/loss of life – but incidence at this level is rare; terrorist activity could have a lasting psychological impact and victims of grooming could go on to become offenders; persistent/repeat hate crime can have long term psychological impacts and may require victim and family to relocate; • Community – raises fear and concerns for safety in affected communities; major incident such as terrorist attack has lasting impact of community's way of life; higher risk military sites (Devonport Dockyard and Millbay Docks). With hate crime, concern has gone up in local communities and more expectation for agencies to act. Black Lives Matter protests saw an associated rise in hate crime reporting. Use of social media and internet means greater reach so impact is wider, emergence of COVID related extremism against target groups (can be anti-Muslim, Q-Anon linked to anti-Semitism)
Likelihood	• Reported hate crime is frequent but low volume with adverse trends apparent; terrorist incidents are rare and terrorist activity has been low level so far but constant vigilance required;
Organisational response	• **National/regional/local priority** to tackle effectively; potentially international in respect of an act of terrorism. • **Costs to respond** are managed within existing resources; hate crime has potential hidden costs (such as mental health impacts and rehousing); prevention and emergency response to terrorism well established. • **Capacity** – mostly managed within day to day business; Prevent training requires ongoing commitment to deliver; some capacity issues for agencies such as housing agencies when terrorist activity is disrupted. • **Capability** – Wider awareness of hate crime amongst some partners needed. Third party reporting still needs improving in some areas of the city, Transphobic incident reporting is still new for a lot of people as is the new category of sex / gender hate crime. Better understanding of the impact of COVID-19 upon number of children and young people within elected home education and city response to identify, protect from and prevent harm. • **Mitigating factors** – Counter Terrorism Local Profile identifies threats and risks; Channel process very effective locally – identifying

	and engaging people at risk; good joint partnership with Emergency Management. Third party reporting of hate crime has helped reach communities traditionally hard to reach so there is a local change in this respect.
Knowledge gaps	• Gaps identified – Hate crime still acknowledged as largely under-reported; continued issues around public confidence; improve data flow from third party reporting centres. Impact of Brexit. • Understanding around whether BLM impacts on confidence in policing and reporting.
Recommendation	• Statutory duty to prevent terrorism, high level of inherent risk requires ongoing vigilance, especially around high risk sites; • Local responses to hate crime to focus on protecting the most vulnerable, preventing repeat victimisation and building public confidence to report incidents and seek support. • We need to ensure Prevent training fully embedded within a quality assured framework. • Vulnerability (risk of hidden harm) to increasing number of children and young people within elected home education as a consequence of COVID-19.

Vulnerability and Exploitation

Serious and Organised Crime	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Modern Slavery					Moderate
Impact	• **Victim/subject** – physical and psychological abuse with long term recovery implications; financial deprivation through enslavement. • **Community** – lack of awareness in the community; often pick up on 'nuisance' issues relating to modern slavery e.g. waste, noise, anti-social behaviour.				
Likelihood	• Numbers remain **low and have reduced for 2019/20** –there has been reduced reporting within the city which may have been impacted by COVID 19. This may mean cases have been more hidden and that as lockdown restrictions end we see/ identify more victims coming forward for support and response.				
Organisational response	• **National/regional/local priority** to tackle effectively; tied in with people trafficking both internationally and within UK. • **Costs to respond** are increasing for the Local Authority who retain responsibility for support for children and will have immediate response needs for adults prior to transfer to Salvation Army under the Adult Care Contract; repeated targeting is resource intensive; significant cost implications to feed and house victims to enable police to carry out ABEs. Need to consider greater use of external funding to support local delivery. • **Mitigating factors** – No current gaps in service provision; well managed through the mix of local and national resources in place; skills are rapidly evolving as the partnership gains experience from new cases; good awareness and information exchange between				

		partners. The Safer People thematic group are developing a new Modern Day Slavery Strategy.
Knowledge gaps	•	**Gaps identified** – Intelligence gathering remains a priority. NRM awareness raising still needed with some partners and concern over low referral rates.
Recommendation	•	Statutory duty to respond to modern slavery, high level of inherent risk requires ongoing vigilance; potential for escalation of risk as community awareness is raised and more cases are identified.

Vulnerability and Exploitation

Serious and Organised Crime	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Cyber Dependent Crime / Fraud					Moderate
Cyber Related Vulnerability					Standard
Impact	• **Victim/subject** – Cyber dependent crime - some physical and psychological impact on vulnerable people and elderly; mainly medium-tem financial impact although some are long term. Cyber related vulnerability - majority cases low impact with caveat of extreme cases of physical harm as a result of coercion into sexual or physical acts / self harm/ suicide. • **Community** – Cyber dependent crime has potential for wide community impact with an incident similar to recent NHS cyber-attack. Cyber related vulnerability - self-harm, sexting or CSE coercion online can rapidly reach significant numbers of CYP via online communities. • Need to maintain a focus on non-Cyber fraud activities, these have been increasing with COVID related scams and illegal money lending				
Likelihood	• Moderate volume but numbers **are increasing**.				
Organisational response	• **Regional/local priority** to tackle effectively. • **Costs to respond** are managed within existing resources; police have set up a new cyber-crime unit which has resource implications. • Cyber related vulnerability – can be vastly resource intensive especially in bringing organised online abuse to justice.				
Knowledge gaps	• **Gaps identified** – concern over 'under-reporting' as issue feels greater than crime levels suggest. • Need to seek data from a number of sources supporting victims of online exploitation/abuse to better understand prevalence and nature of crimes.				
Recommendation	• Maintain a focus on cyber dependent crime and fraud through the Fraud and Cyber group. • Consider expanding the remit of this group to include online harm and vulnerability.				

Emerging Issues for Safer Plymouth

Child to Parent Violence	Child to Parent Violence -The issue of child to parent/carer violence is seen as a growing concern and has been identified as a priority issue by our Safer Families group. Local data from our child centered policing team supports this (report appended) and nearly half of referrals (14 so far in 2020) to our Adolescent Support Team involve child to parent violence. We would like to see this data collected across the Peninsula for future workshops. Partners noted that parents tend to report only the more extreme incidents. Concerns that verbal abuse can be normalized for some families. Partners noted links to children and young people experiencing adverse childhood experiences and child to parent/ carer violence, particularly violence in the home and separation of parents. The AST now track ACEs to help develop understanding of this issue.
Knife Crime	Knife Crime – our local specialist problem solver was able to bring a detailed breakdown of Offensive Weapons Crimes in Plymouth between Jan and Aug 2020 (awaiting sign off so only shared internally). This included knifes but could also cover other types of weapons or implements used as weapons. During COVID we see a pattern of stable possession offences but an increase in harm offences. Alcohol is the most significant aggravating factor, but we note with concern that 1 in 5 offences are domestic abuse related (see also DASV section). The majority of offenders are aged 26-35.
	Figures for young people aged 10-18 show there are significantly more possession offences than harm offences. Partners note that vulnerability and fear of violence are driving factors in young people carrying weapons. Responses developed by Safer Plymouth partners should be trauma informed and focus on developing skills for conflict resolution. Activity should focus on identified vulnerable groups. Communications/ campaigns should be sensitive to the underlying anxieties that lead to young people carrying weapons and caution exercised so that fear of knife crime is not exacerbated as this could be counter- productive. In Plymouth we will continue to work with Youth Parliament members and Young Safeguarders to inform our approach.
	The Force is drafting a strategic 4P plan on Knife Crime to support our understanding and approach.

Appendix A: Understanding threat, risk and harm

The MoRiLE model

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

Devon and Cornwall Police and the community safety partnerships across the Peninsula are transitioning across to a new **nationally accredited tool** to assess threat, risk and harm which was developed through the national **Management of Risk in Law Enforcement** (MoRiLE) programme.

The national programme has created **core principles**, a **consistent language** for threat, risk and harm, and **strategic and tactical models**. These have been delivered through a collaborative approach with **over 300 representatives across UK law enforcement agencies**, supported by national and international consultation.

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

The national programme recognised that the model has potential for application in a wider partnership environment and Amethyst is leading on a strand of work to **develop the methodology for use by community safety partnerships.**

The process

An initial assessment of harm and likelihood based on current data and intelligence was undertaken by the analyst team and this identified the principle threats.

All data was drawn from police **Universal Data Set/iQuanta** and other **routinely available data** (dependent drinkers estimates, estimates of opiate and/or carck use, road traffic collisions etc.)[2]

The findings were then taken to a partnership workshop to ratify the impact scores and discuss and agree the **confidence and organisational position scores**.

The collated outputs were used to calculate an overall assessment of threat, risk and harm.

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[2] A full list of sources can be provided on request

Broadly speaking, the levels of risk have the following implications for the partnership.

Threat, risk and harm rating	What this means for the partnership
High	• Should be recognised by CSP and partners as a priority, and this needs to be clearly evidenced in all relevant strategies and delivery plans; • May demand additional resources and funding to address; • Review existing strategy and service provision – identify where we can improve/enhance/increase existing response framework to reduce the risk; • Ensure that the risk is understood across the partnership and that partners are proactively taking action to reduce the risk; • Set targets to evidence improvement in key areas.
Moderate	• Ensure that there is a clear strategy in place and adequate service provision to respond; • Continue to maintain/support/improve existing response framework in place to reduce/control the risk; • Ensure that the risk is understood across the partnership and that partners are proactively taking action to reduce/control the risk. Seek to influence other relevant strategies; • Continue to monitor the level of risk against moderate improvement targets, and respond appropriately if adverse trends are identified.
Standard	• Ensure that there is adequate service provision in place to respond; • Maintain/support existing response framework in place to control the risk; • Ensure that the risk is understood across the partnership and that partner actions do not increase the risk; • Continue to monitor the level of risk and respond appropriately if adverse trends are identified.

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Domestic Abuse Bill Partnership Action Plan

1. **Context**

The 2020 Act aims to:

- Protect and support victims – to enhance the safety of victims and the support they receive;
- Transform the justice process – to provide support to victims throughout the justice process and an effective response to perpetrators to end the cycle of abuse;
- Improve performance – to drive consistency and better performance in the response to domestic abuse; and
- Promote awareness – put domestic abuse at the top of everybody's agenda.

 "Domestic abuse is an abhorrent crime perpetrated on victims and their families by those who should love and care for them. This landmark Bill will help transform the response to domestic abuse, helping to prevent offending, protect victims and ensure they have the support they need." Victoria Atkins MP, Minister for Safeguarding

Draft Statutory Guidance has been in place since July 2020 and will be embedded in the partnership action plan

file:///C:/Users/MossA/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/KI7XFXGX/Draft_statutory_guidance_July_2020.pdf

Safer Plymouth is committed to being a trauma informed community safety partnership. We will use the trauma lens when considering all aspects of this action plan. This includes embedding the voice of lived experience in our approach.

It may also be helpful to consider the Home Office 'National Statement of Expectations' on Violence Against Women and Girls (2016) which states an expectation that local strategies and services will:

1. Put the victim at the centre of service delivery;
2. Have a clear focus on perpetrators in order to keep victims safe;
3. Take a strategic, system-wide approach to commissioning acknowledging the gendered nature of VAWG;
4. Are locally-led and safeguard individuals at every point;
5. Raise local awareness of the issues and involve, engage and empower communities to seek, design and deliver solutions to prevent VAWG.

2. Timeline

- The Bill was announced in the Queens speech on 19th December 2019
- Introduction in the House of Commons 3rd March 2020
- Second Reading 28th April 2020
- Went through report stage of the House of Commons June 2020
- First reading House of Lords held 7th July
- Second reading House of Lords TBA

Progress of the Bill
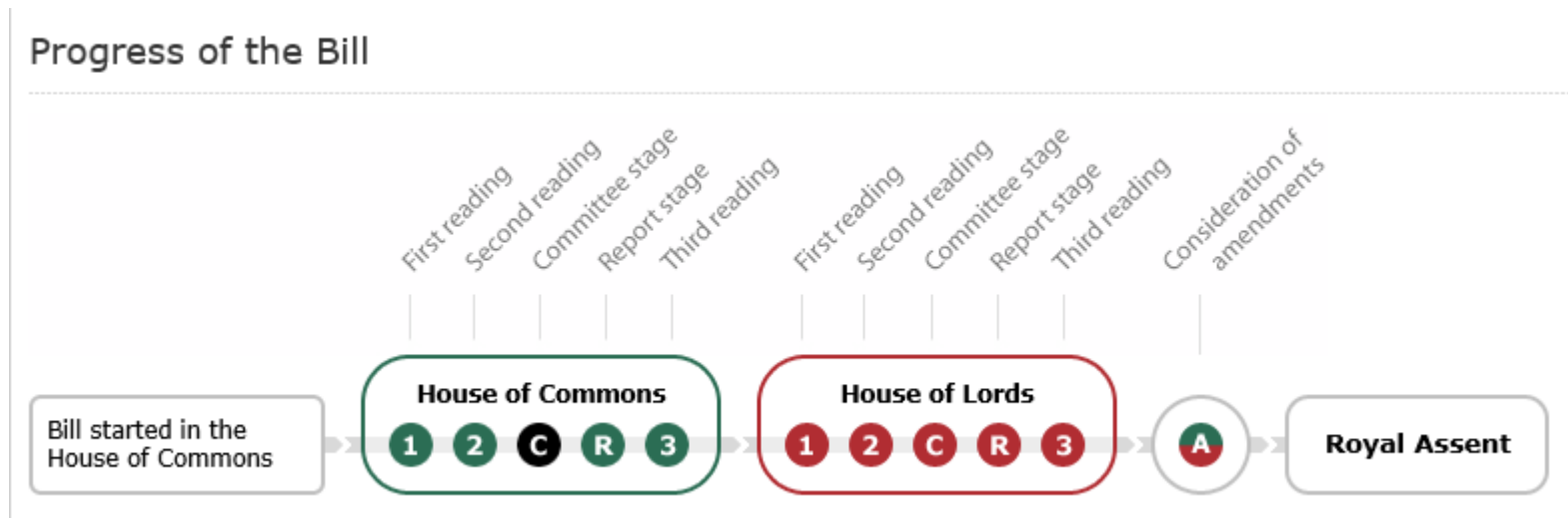
Discussions with Home Office representatives through the Community Safety Advisors Network lead us to anticipate that the Domestic Abuse Bill will gain Royal Assent by April 2021. Further guidance will be needed on which aspects of the legislation will come into effect immediately and which might come after a set period following piloting of new approaches (detailed in plan).

3. Purpose of the plan

The plan has been designed to ensure that we can consider all elements of the Domestic Abuse Bill in one document, bring together the right partners with the required expertise to support each aspect of the plan and understand the actions being developed and undertaken within the partnership by responsible authorities. It is very much a 'living document' that will be updated as more detailed information becomes available from the Home Office. At this stage, as the bill is still in progress, it represents our expected direction of travel and is subject to change.

Once the bill receives assent there will need to be detailed implementation plans for responsible authorities based on departmental guidance. Sarah Daniels-Day is working on a spreadsheet which will detail actions required by individual partner agencies, using guidance provided by the Domestic Abuse Statutory Guidance Framework.

4. Roles and responsibilities

The Safer Plymouth Domestic Abuse and Sexual Violence Group will take responsibility for monitoring progress of the bill at their monthly meetings, developing partnership approaches to the legislation and providing advice and updates as the bill progresses. A task and finish group will be set up within the DASV partnership to progress every aspect of the plan (chaired by Sarah Daniels-Day from D&C Police Specialist Problem Solvers).

The Safer Plymouth Executive Group will be responsible for sign off of the plan and ensuring that recommendations within it are appropriately resourced and implemented at organisational level.

5. Next steps
- Draft plan to be taken to DASV partnership meeting on 21st September for partnership input. The plan will be worked on by the partnership so that an agreed draft can be presented for sign of by the Safer Plymouth Executive Group on 20th October
- Task and finish group to be set up on Microsoft Teams
- 8th October Home Office Community Safety Advisors network, update Anna Moss attending
- 15th October MHCLG workshop on implementation of bill, Anna Moss attending

Section A – Statutory Requirements Action Plan

Areas of legislative changes	Actions to be taken Sept 2020-April 2021	Who is guidance aimed at?	DASV Leads	Resource Required
Creating a statutory definition of domestic abuse, emphasising that domestic abuse is not just physical violence, but can also be emotional, coercive or controlling, and economic abuse. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909878/Statutory_Definition_of_Domestic_Abuse-_AUG_2020_.pdf	• **Develop domestic abuse communication strategy to ensure statutory definitions understood. NB: stated aim is to 'put DA at the top of everyone's agenda'** • **Audit locally delivered training provision to ensure definitions are current** • **Audit partnership domestic abuse policies to ensure definitions are current** • **Ensure effective join-up with communication approaches of key partners and Peninsula colleagues**	Statutory and non-statutory partners	Anna Moss Caroline Wilson	PCC comms resource? See also Safer Plymouth Comms Plan 2020 Integration of the existing DA systems leadership work / Lived Experience Voice essential to comms approach Some DASV partners have offered specialist comms support

Establish in law the office of Domestic Abuse Commissioner and set out the Commissioner's functions and powers. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909881/Domestic_Abuse_Commissioner-_AUG_2020_.pdf	• **Establish appropriate links with the Domestic Abuse Commissioner and regional representatives** • **Develop protocols on duty to co-operate** • **Report on emerging requirements for Domestic Abuse Local Partnership Boards**	Public bodies, VCS	Hannah Shead Lyn Gooding Laura Griffiths	
Provide for a new Domestic Abuse Protection Notice and Domestic Abuse Protection Order. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909883/Domestic_Abuse_Protection_Order-_AUG_2020.pdf	• **The DASV group will arrange for updates from the D&C police vulnerabilities lawyer** NB: This section of the bill we be phased following area based pilots of the new orders	Criminal Justice	DASV police reps	
Placing a duty on local authorities in England to provide support to victims of domestic abuse and their children in refuges and other safe accommodation. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909939/Support_for_Victims_of_Domestic_Abuse_and_their_Children-AUG_2020_.pdf	• **The DASV task and finish group housing specialists to keep a watching brief on emerging guidance on needs assessment requirements e.g. by attending SW domestic abuse housing forum** • **DA commissioner to continue work on Peninsula Housing Pathways as part of EOS project** • **DA commissioner and Technical Lead Community Safety to attend Peninsula DA meetings (EOS, OPCC) to support Peninsula approaches, reporting into DASV**	Local Authorities	Sarah French, Katy Fisher, CC rep Laura Griffiths/ Anna Moss	Confirm Community Connections Rep for DASV New burdens assessment being carried out to assess costs to LA- guidance notes there will be additional funding

	• **Technical lead to attend relevant CSAN and Home Office briefings and report back to DASV**			Safer Plymouth DA needs assessment (Jan 2020-SafeLives) gives us some degree of confidence in sufficieny
Prohibit perpetrators of abuse from cross-examining their victims in person in the civil and family courts in England and Wales. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909892/Cross-examination_in_family_proceedings-_AUG_2020_.pdf https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909928/Prohibition_of_Cross-Examination_In_Person_in_Civil_Proceedings-_AUG_2020.pdf	• **Raise awareness through communication strategy**	Criminal Justice	Sarah Daniels-Day/ Anna Moss	
Create a statutory presumption that victims of domestic abuse are eligible for special measures in the criminal, civil and family courts. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909903/Special_Measures_in_the_Criminal_Courts-_AUG_2020_.pdf https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/90	• **Raise awareness through communication strategy**	Criminal Justice	Sarah Daniels-Day/ Anna Moss	

9933/Special_Measures_in_Civil_Proceedings-_AUG.pdf https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909927/Special_Measures_in_Family_Proceedings-_AUG_2020_.pdf				
Clarify by restating in statute law the general proposition that a person may not consent to the infliction of serious harm and, by extension, is unable to consent to their own death. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909931/Consent_to_serious_harm_for_sexual_gratification_not_a_defence-_AUG_2020.pdf	• **Raise awareness through communication strategy**	Criminal Justice	Sarah Daniels-Day/ Anna Moss	
Extend the extraterritorial jurisdiction of the criminal courts in England and Wales, Scotland and Northern Ireland to further violent and sexual offences. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909885/Extraterritorial_Jurisdiction-_AUG_2020_.pdf	• **As above, include Istanbul Convention in comms and WFD**			
Enable domestic abuse offenders to be subject to polygraph testing as a condition of their licence following their release from custody. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909897/Mandatory_Polygraph_Tests-_AUG_2020.pdf	• **There will be a 3 year pilot to evaluate this measure. DASV to keep watching brief and report when appropriate**	Criminal Justice (Probation)	DASV police rep	

Place the guidance supporting the Domestic Violence Disclosure Scheme ("Clare's law") on a statutory footing. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909887/Domestic_Violence_Disclosure_Scheme-_AUG_2020_.pdf	• **Raise awareness through communication strategy, ensuring effective links with D&C Police Comms team**	Criminal Justice (Police)	Sarah Daniels-Day Anna Moss	
Provide that all eligible homeless victims of domestic abuse automatically have 'priority need' for homelessness assistance. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909930/Homelessness-_Victims_of_domestic_abuse-_AUG_2020_.pdf	• **DASV group housing specialists to support Community Connections in amending priority need guidance**	Local Authority	CC rep Sarah French Katy Fisher	Councils to be fully funded by Govt
Ensure that where a local authority, for reasons connected with domestic abuse, grants a new secure tenancy to a social tenant who had or has a secure lifetime or assured tenancy (other than an assured shorthold tenancy) this must be a secure lifetime tenancy. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/909910/Secure_tenancies_and_victims_of_domestic_abuse-_AUG_2020.pdf	• **The DASV task and finish group housing specialists to keep a watching brief on emerging guidance e.g. by attending SW domestic abuse housing forum**	Local Authorities	CC Rep Sarah French Katy Fisher	Guidance anticipates costs to be small and outweighed by benefits
Additional: - an amendment to the bill in July confirmed that children will be viewed as victims of domestic abuse in their own right if they witness abuse in the home *Awaiting additional guidance and factsheets*	• **Update aimed at CSC expected from Home Office rep at next CSAN meeting 8/10 (AM to attend)**	CYP partners	CSC rep	Unknown- but consider no recourse to public funds families for CSC

	AM to attend MHCLG workshop 14/10 on statutory guidance and implications for Local Authorities **DASV task and finish will develop actions in line with guidance as soon as it is released**			

Section B – Non statutory commitments

In addition to the legislative changes set out in the act, the Government has set out 123 commitments to help tackle domestic abuse. This plan cannot detail all of these but includes the following examples identified as key non-statutory commitments.

Key non-statutory commitments	Actions to be taken Sept 2020-April 2021	Who is guidance aimed at?	DASV Leads	Resource Required
Introduce regulations and statutory guidance on Relationship Education, Relationship and Sex Education, and Health Education.	• **Healthy relationships work being delivered by NSPCC (Empower) will be reported into DASV for ongoing partnership awareness and support**	Education	Shelley Shaw	
Invest in domestic abuse training for responding agencies and professionals	• **Safer Plymouth workforce development plan to be reviewed by the DASV workforce group (see both domestic abuse and trauma informed practice)** • **DASV will monitor for toolkits that supports WFD relevant to the new bill**	All partners	Anna Moss Caroline Wilson	To be reviewed by Exec Will need to consider WFD within commissioning specification
Develop national guidance for police on serial and repeat perpetrators	• **We anticipate a range of commitments around perpetrator work. A sub-group has been identified to work on this and an application for funding made via OPCC which sets out our ambitions for the City**	Police for example given Partnership for wider approach	Wayne Kirby Sarah Daniels-Day Ilona Rossen	Funding bid in progress (12 months only) No current commissioned programme

			AHIMSA reps Wayne Kirby	
Improve awareness and understanding of coercive control offence and review effectiveness of offence	• **Coercive control to be embedded in WFD approaches. Key learning objective from our local DHRs**	DASV partners/ Police	Anna Moss/ DASV police reps	
Continue to develop means to collect, report and track domestic abuse data	• **DASV has a data and performance group who will continue to develop our basket of indicators. This will include thinking about how we include system measures which reflect our ambitions to be a trauma informed CSP**	Main duty with fall to Local Authorities but data will be required from key public bodies and partners	Data Analyst is an identified gap	Some additional funding may be made available to facilitate this from Govt.

TRAUMA INFORMED PLYMOUTH Network Update	PLYMOUTH CITY COUNCIL

1. Overview

The Trauma Informed Plymouth Network has continued to meet and expand its membership, (currently in excess of 180 people) over the summer months. We have successfully transitioned to Microsoft Teams, hosted by the NSPCC, to enable virtual meetings to take place. Engagement levels have been relatively stable throughout the COVID restrictions and the network has been able to develop trauma informed responses to the pandemic along with progressing overarching network objectives as laid out in the approach document.

2. Workforce Development

- The network produced a 'Vicarious Trauma' presentation to support the workforce in understanding the potentially traumatic impact of COVID 19 and to provide people who may be experiencing this type of trauma with sources of support and signposting to additional help where needed. The training is freely available and network members have made an offer to facilitate the workshops when this is felt to be useful. It was delivered via the OPCC as part of their monthly support webinars for frontline staff and very warmly received. http://www.plymouthscb.co.uk/uncategorized/new-training-resource-on-vicarious-trauma/
- The network workforce development group have agreed a virtual format for the trauma informed practice training, which is administered and supported by the Plymouth Safeguarding Children's Partnership. The training will be available as an ACE awareness webcast and a Trauma Informed Practice Webinar from October.
- The network have developed a 'Trauma Informed Leadership' virtual workshop. This was piloted with Plymouth BCU in June as a 2 hour course aiming to develop conversations about what trauma informed leadership might look like and how trauma informed practice can be embedded at all levels of an organisation. The network delivered the workshop to the national NSPCC leadership team on 23rd September and to over 100 participants at an NWG (Child Sexual Exploitation) learning event on 24t September.
- The sub-group lead for workforce development has regular meetings with Peninsula colleagues to look at sharing learning on trauma informed practice across the area.

3. World Health Organisation – Trauma Informed City Work

Following on from the networks successful engagement with the All Party Parliamentary Group on ACEs in June, we have been asked to showcase the work of the Plymouth network as a best practice example at a WHO event in Oslo on 26th October.

4. A Charter for Trauma Informed Plymouth

The network had begun to work on developing a position statement on what steps could be taken by partners in Plymouth looking to become trauma informed at our January meeting, but had refocussed energies on responses to COVID in the first part of the year. The concept of a charter of key principles has been re-prioritised over July and August and we have developed a draft statement which was taken for discussion to our full network meeting on 25th September. Once agreed the charter will be embedded into our approach document and workforce development and will provide a potential basis for a 'Trauma Informed Plymouth' quality mark.

5. **Exploring the impact of trauma related shame on accessing support**

The Lived Experience Group invited Luna Dolezal, Associate Professor in Philosophy and Medical Humanities at the University of Exeter, to come to talk about her work on the topic of health related shame. This has particularly been identified as an important topic for members of this sub-group who are considering how it impacts on accessing health care, social work relationships and how chronic shame plays out in behaviours. We anticipate this exploration will help us shape our primary care and trauma informed practice project. The main meeting on 25th September agreed this should be explored across the network and we will be inviting Luna to speak at our next full meeting.

6. **Lived Experience Sub-Group**

Emma Bainborough, our sub-group Chair, delivered a talk to the OPCC about the work we have been doing in Plymouth as part of their developing lived experience engagement work (18/9). This is another reflection of the impact that Plymouth is having on trauma informed practice across the Peninsula. The group have also been working with our local public health team to share experiences of mental health during the COVID pandemic.

7. **Inclusion and resilience sub-group**

Following discussions around the need to have more focus around community based trauma (discrimination, inequalities) at the July meeting, the network is looking to establish a new sub-group to look at how our trauma informed practice work intersects with work around equality and diversity. Part of the remit will be to ensure our communication around the approach document and network activity is inclusive and accessible. The first meeting will be on 2nd October.

8. **Member updates**

At our main network meeting, member Jemma Facenfield shared referral information about a new trauma informed dentistry pathway being developed for vulnerable children and young people in Plymouth.

Plymouth University will be including a session on trauma informed practice across all nursing degrees following a successful input into the children's course by the network last year.

9. **Communication**

The network has identified improving communication as a priority area and will be setting up a task and finish group (first meeting 8th October) to consider improving use of social media, developing a website and producing video clips to share what is working well in the city. We are also looking to produce an interactive newsletter.

Next steps:

- There is a 2 week window for network members to comment on the charter document. This will then be finalised as a working draft for mid-October
- Once the charter has been approved by network members we will be able to set up workshops to engage city leaders in a discussion about how it might be applied as part of our journey to become a trauma informed city. This will include engaging with leadership teams at Plymouth City Council
- NSPCC 'Sharing the Brain Story' training will be delivered to 48 participants across the city in October. This will help us to develop accessible language around the neuroscience of how trauma and adversity can shape the brains of children and young people, along with strategies to support healthy brain development
- Communication task and finish group to report back with a set of proposals for a communication strategy at the next main network meeting

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