



# **Safer Plymouth: a strategic assessment of threat, risk and harm 2020/21**

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# Introduction

Safer Plymouth is the **community safety partnership** for the city of Plymouth. We are made up of five 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, The Probation Service and NHS 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

This assessment was prepared by Plymouth City Council, in partnership with a broad representation of public, voluntary and community sector organisations working in Plymouth. Crime analysis is based on the 12 months up to the end of March 2021 unless otherwise stated.

Due to ongoing concerns about high COVID levels in Plymouth our community based workshops were held virtually via Teams again in 2021. We reached significantly more partners in these workshops than in previous years and would like to thank our community partners to their ongoing commitment to jointly developing our Local Strategic Crime Assessment. We made a decision to focus these sessions on sharing local intelligence and reflecting on the data rather than trying to use the MoRiLE scoring approach in the online meetings. Our MoRiLE scoring was done using an online survey which was then moderated by the Plymouth City Council Technical Leads for Community Safety and the Safer Plymouth Thematic Leads.

We made some changes to the workshop and assessment headings:

- We considered drug and alcohol harms in an integrated workshop following feedback from participants who attended separate workshops last year (same people being asked to repeat events, often same issues discussed). We moved County Lines and Trafficking to Serious Violence in line with draft statutory guidance.
- We included a workshop on ASB as this was identified as a priority in its own right at last year's MoRiLE workshops, in part due to the extraordinary impacts of COVID
- We ran our first 'Serious Violence' workshop in preparation for our forthcoming new CSP duties. This considered the Crest Advisory 'Serious Violence Needs Assessment' data commissioned by the OPCC and discussed what sort of different data and intelligence will be needed if we are to take a public health approach to preventing serious violence as we move forward.
- As part of our online survey, we asked Safer Plymouth partners how effective they felt MoRiLE was as a planning tool for developing our Local Strategic Crime Assessment. Half of our respondents had strong reservations, particularly where crime reporting is low and there are 'hidden victims' (DASV, CSA). COVID impacted heavily on confidence in using the MoRiLE data to predict trends for next year, with last year being atypical across many crime areas and next year feeling uncertain. There was a strong emphasis amongst partners on ensuring that the lived experiences of citizens and the professional wisdom and understanding of our city workforce were carefully triangulated with the best range of relevant data to achieve a meaningful assessment (echoing the serious violence discussions).

Special thanks are given to the following organisations for their input and support at the local workshops and subsequent follow up requests:

- Plymouth City Council, including Public Health
- Devon and Cornwall Police
- The Probation Service
- Office of the Police and Crime Commissioner
- NSPCC (Together for Childhood)
- University Hospitals Plymouth NHS Trust
- Plymouth Safeguarding Adult Partnership
- Plymouth Safeguarding Children Partnership
- The Zone Plymouth
- Hamoaze House
- Harbour
- The Department for Work and Pensions
- Trevi
- Barnardo's
- Plymouth and Devon Racial Equality Council
- Plymouth CAB
- Youth Offending Service
- Plymouth Domestic Abuse Service
- Plymouth Community Homes
- Livewell South West
- ACE Schools
- Plympton Academy
- Plymouth Argyle Football Club
- The Eddystone Trust
- CCG
- City College Plymouth
- Wolseley Trust
- First light
- Refuge4pets
- Ahimsa
- British Red Cross
- Discoverymat
- Keys Group
- South West Trading Standards Service

A particular mention must go to Sophie Taylor from Harbour, who developed the online survey approach and provided co-ordination around our virtual MoRiLE scoring experiment.

Safer Families

- 14 attended workshop
- 7 completed survey (NSPCC, PCC and Discovery Mat)

ASB

- 24 attended workshop
- 12 completed survey (Zone, PCC, NSPCC, Devon & Cornwall Police, PCH, ACE Schools and Plymouth Argyle Football Club)

Hate crime

- 20 attended workshop
- 6 completed survey (PCC, Devon & Cornwall Police, ACE Schools and Hamoaze House)

Drug & Alcohol harm

- 20 attended workshop
- 7 completed survey (PCC, Devon & Cornwall Police, Harbour and PAFC)

DASV

- 25 attended workshop
- 13 completed survey (Trevi, Devon & Cornwall Police, PCC, Ahimsa, Eddystone Trust, CCG, Plymouth University, PDAS, Wolseley Trust, Barnardo's, City College Plymouth)

Modern Slavery

- 10 attended workshop
- 3 completed survey (Devon & Cornwall Police, PCC and Zone)

Serious Violence

- 15 attended workshop
- 3 completed survey (Devon & Cornwall Police)

## Plymouth: an overview

**Plymouth is Britain’s Ocean city** with ambitious 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.

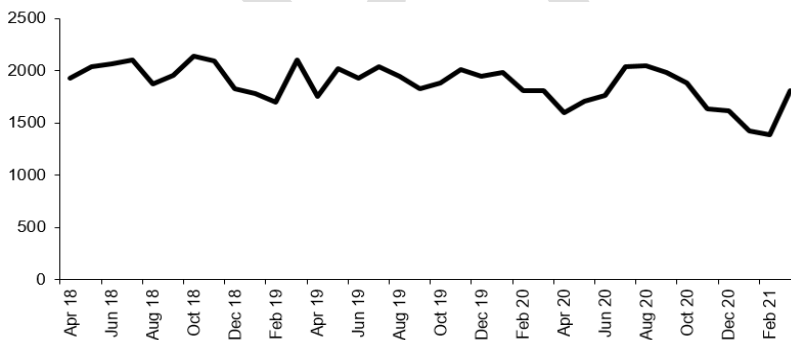
### QUICK FACTS: PLYMOUTH RECORDED CRIME

Reporting period is the 12 months to 31 March 2021

#### Key Facts

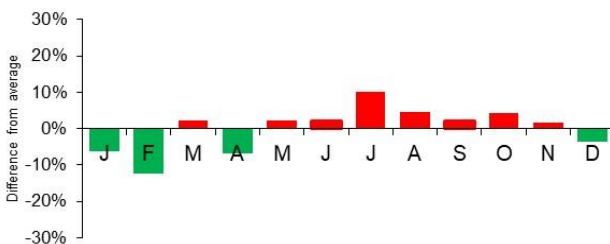
20,904 crimes / 79.76 crimes per 1,000 resident population;  
 Rate of crime remains below average for Most Similar Group (MSG, 95,68);  
 This is a decrease of 9.0% from the previous 12 month period (22,960 crimes)  
 The Universal Dataset provided by Devon and Cornwall Police shows 9,031 Anti-Social Behaviour incidents recorded, this is a 11.1% increase on the number recorded in 2019/20 (8,126)  
 (Source: iQuanta unless stated)

#### Trends



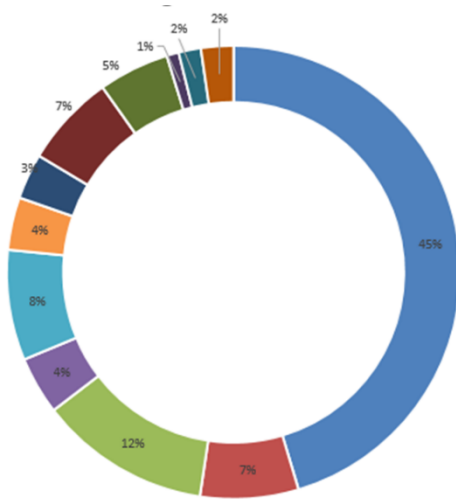
Crime levels were on a level trend between 2018/19 and 2019/20. Crime levels have been on a decreasing trend between July 2020 and February 2021, resulting in lower annual crime figures. (Source: iQuanta)

#### 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 fall, likely due to COVID-19. (Source: Universal dataset, Devon and Cornwall Police)

Crimes

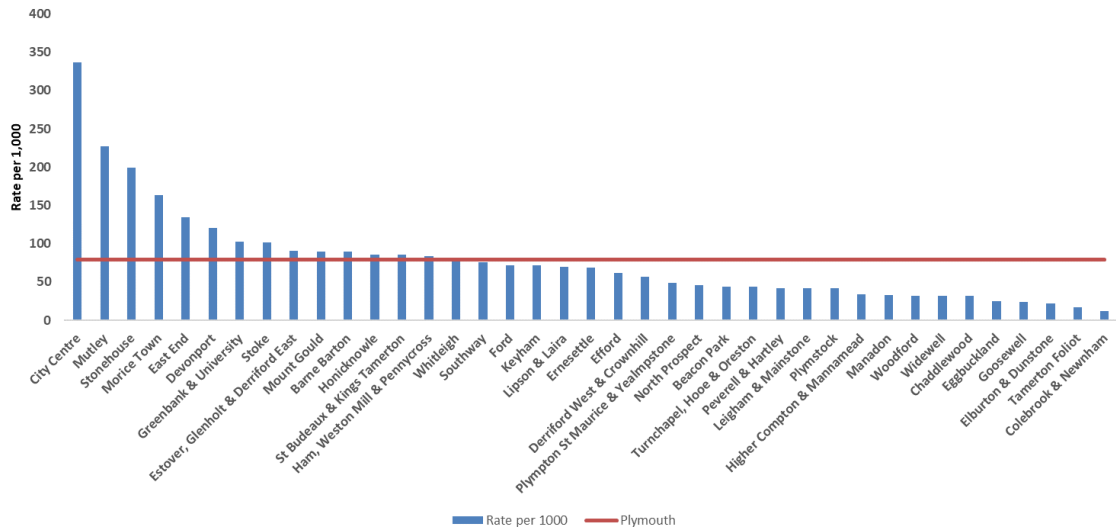


The chart shows the breakdown of crime by type for April 2020 to March 2021.

- Violence 45%
- Criminal damage 12%
- Public order 8%
- Theft 7%
- Drugs related 7%
- Sexual offences 5%

COVID-19 has impacted on the proportional representation of crimes with the percentage of crimes that are Burglary and Shoplifting dropping to 3.8% (from 5%) and 4.1% (from 6.4%) of all crime respectively.

Location



Neighbourhood	Number of crimes	Rate per 1000 population
City Centre	2488	336.5
Mutley	781	227.0
Stonehouse	1994	199.1
Morice Town	482	162.9
East End	799	134.8

The five neighbourhoods with the highest rate of crime are unchanged in 2020/21, though Mutley has replaced Stonehouse as the neighbourhood with the second high crime rate. In 2020/21 the rate of crime is highest in the City Centre neighbourhood. The neighbourhoods with the lowest rate of crime are Colebrook & Newnham, Tamerton Foliot and Elburton & Dunstone.

## Crime trends

Overall recorded crime in Plymouth decreased by 9% or 2,056 crimes in the 12 month period to end March 2021 compared with the same period the previous year. This follows on from a 2.5% decreases reported in last year's strategic assessment.

Plymouth has a comparatively low crime rate for a city of its type and is placed first in its most similar family group of partnerships (where first is lowest). Plymouth's crime rate is 79.8 crimes per 1,000 population compared to an average of 95.7 for the iQuanta group of similar areas within which it sits. The impact of COVID-19 has seen the rate of both Plymouth and the iQuanta group average reduce significantly in 2020/21.

Plymouth also compares favourably to the average within its iQuanta group for nine key crime types. These crime types include; Burglary within a residential setting where the crime rate of 4.3/1,000 is less than half that of the iQuanta group average (10.3), Burglary within a commercial setting, Robbery and vehicle related Theft offences. In 2020/21 Plymouth had the lowest rate of Serious Acquisitive Crime within its iQuanta group for the second year running.

Eleven crime/ incident types saw a reduction in 2020/21, some such as Shoplifting, which reduced by 41% will have been significantly impacted upon by COVID-19. Other crime types which saw large decreases in volume include; Residential Burglary (-27%), Business and Community Burglary (-37%), Other Theft (-26%), Theft from a vehicle (-52%) and Theft of a vehicle (-31%). Robbery, which increased in 2019/20 also reduced, with 25% (or 59) fewer crimes recorded.

The Possession of, and Trafficking of drugs are two offences which saw big increases in 2020/21. Possession offences rose by 32% (or 257 crimes) and Trafficking offences rose by 69% (or 128 crimes). For both these crime types Plymouth does not benchmark well with rates higher than the iQuanta group average for both offence types.

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 2020/21 reduced by 15% (or 544 crimes) but the rate of offences remains amongst the highest within its comparator group, Plymouth had the 13<sup>th</sup> highest rate.

Violence without Injury crimes decreased by 6% (-226 crimes) and remains low compared to the iQuanta group (Plymouth had the 5<sup>th</sup> lowest rate recorded in 2020/21).

There is no comparator information available for Domestic Abuse (DA) offences but in 2020/21 the volume of DA related crimes increased by 1.5% (+74). DA related non-crime incidents decreased, by 1.5% (-31).



## Crime Table

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

Crime / Incident Type	2019/20	2020/21	% Increase / Decrease (no. crimes)	Plymouth rate per 1,000 population (MSG Group in brackets) and ranking in group
All Crime	22,960	20,904	-9% (-2,056)	79.8 (95.7) 1 <sup>st</sup>
Burglary Residential	647	473	-27% (-174)	4.3 (10.3) 1 <sup>st</sup>
Burglary Business and Community	497	314	-37% (-183)	1.2 (1.5) 6 <sup>th</sup>
Robbery	238	179	-25% (-59)	0.7 (1.1) 4 <sup>th</sup>
Theft other	1,659	1,228	-26% (-431)	4.7 (6.6) 1 <sup>st</sup>
Shoplifting	1,468	863	-41% (-605)	3.3 (5.4) 1 <sup>st</sup>
Theft from Motor Vehicle	711	342	-52% (-369)	1.3 (3.5) 1 <sup>st</sup>
Theft of Motor Vehicle	367	254	-31% (-113)	1.0 (1.6) 4 <sup>th</sup>
ASB	8,126	9,031	+11.1% (+905)	N/A
Criminal Damage	2,782	2,457	-12% (-325)	9.4 (9.4) 9 <sup>th</sup>
Public Order	1,602	1,645	+3% (+43)	6.3 (11.2) 1 <sup>st</sup>
Rape	398	406	+2% (+8)	1.6 (1.2) 12 <sup>th</sup>
Other sexual offences	614	655	+7% (+41)	2.5 (1.9) 13 <sup>th</sup>
Domestic Abuse crimes	4,882	4,956	+1.5% (+74)	N/A
Domestic Abuse non-crime incidents	2,051	2,020	-1.5% (-31)	N/A

Possession of drugs	809	1,066	+32% (+257)	4.1 (2.7) 14 <sup>th</sup>
Trafficking of drugs	185	313	+69% (+128)	1.2 (1.0) 11 <sup>th</sup>
Violence with injury	3,525	2,981	-15% (-544)	11.4 (9.6) 13 <sup>th</sup>
Violence without injury	3,818	3,592	-6% (-226)	13.7 (14.8) 5 <sup>th</sup>
Hate crime	570	548	+4% (-22)	N/A

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# 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)
- Serious Violent Crime

## 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<sup>1</sup>
- Terrorist Activity
- Hate Crime
- Violence relating to the Night Time Economy
- Anti-Social Behaviour (Impact of COVID-19 on community relations)
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<sup>1</sup> 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.*

- Burglary
- Robbery
- Thefts – Shoplifting, Thefts of and from Motor Vehicles, Other Thefts
- Other Sexual Offences
- Possession of Drugs
- Public Order Offences
- Violence without injury
- Criminal Damage and Arson
- Slight Injury Road Traffic Collisions

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## 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. The contributing workshops for the following section were DASV and Safer Families (CSA/CSE).

## Domestic abuse and sexual violence

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

### Key Statistics:

- The volume of DA related crimes increased by 1.5% (+74). DA related non-crime incidents decreased, by 1.5% (-31).
- We received a domestic homicide referral in February 2021 for an adult child to parent homicide. This is currently under consideration as a possible joint DHR/ Mental Health Homicide Review. Although outside the data and intelligence timeframe of this assessment we would note that a second referral has been made relating to the Keyham shootings, again an adult child to parent homicide.
- In 2020/21 6.2% (305) victims of DA were recorded as under the age of 18, this compares to 5.4% (265) in 2019/20. There is a spread across all ages ranging from 0yo (18) to 17yo (107), 63.0% of U18 victims were aged 16 or 17yo.
- 406 reported crimes of rape, a 2% increase from 2019/20. Plymouth has a higher rate of Rape and other Sexual Assault than its comparators.
- The percentage of victims of 'other sexual assault' who are under 18 has increased, but the percentage of those victims of Rape who are under 18 has declined.
- In 2020/21 63.3% (413) victims of 'Other Sexual Abuse' were recorded as under the age of 18, this compares to 56.7% (350) in 2019/20. There is a spread across all ages ranging from 0yo (16) to 17yo (20), 59.3% of U18 victims were aged 11 to 15 years old.
- In 2020/21 37.3% (149) victims of Rape were recorded as under the age of 18, this compares to 43.6% (171) in 2019/20. There is a spread across all ages ranging from 0yo (8) to 17yo (16). The highest prevalence of victim was aged 16 years old (23).
- In 2020/21 94 crimes were flagged as Sexual Exploitation, this is an increase of 61 on 2019/20 (or 185%). This might be as a result of better recording. In 2020/21 67 victims were aged under 18, with the highest prevalence of victim being aged 13 and 15 years of age. Victims aged over 18 were the victims of historical offences.
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### 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 (now recognized as such under DA Act) impacting upon future life outcomes including employment, health, risk of being a victim or perpetrator of crime. Alcohol use seen as an aggravating 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. Plymouth saw an increase in people assessed as high risk.

- Concerns on the impact of DASV upon mental health, self harm and suicidality remain high. Coercive control was raised as a significant issue during lockdown periods with victims reporting that partners had much greater levels of control. This may not have been immediately visible to services but greatly increases individuals not feeling safe. Ongoing delays in victims accessing justice due to disruption to courts system have contributed poor mental health.
- Lockdowns resulted in fluctuating demand; we noted that contrary to national helpline findings we didn't see very large increases during lockdown periods but then demand on services could significantly increase (PDAS). Some services such as First Light report referral levels far higher than MoRiLE data suggests. Concerns that people just didn't always realise help was still available during lockdown despite some very good social media campaigns.
- Financial impacts of furlough or loss of employment were noted for some families. Impact of increased home working on victims seen as an area of particular concern.
- Perpetrator services saw a surge at beginning of lockdown but then tail off as referrals from social services dwindled. Backlogs in court meant some perpetrators couldn't access timely help which increases frustration. Some concerns more focus needed on service provision for female perpetrators. Perpetrator services are also offering increased support to the family victims. Noted the need to better understand jealousy as a trigger issue.
- Child exploitation, including sexual, remains a concern, particularly during the continuing COVID-19 period, which presents a greater risk of exploitation, particularly for a child not in school. 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. High profile incidents such as murders of Sarah Everard. We should expect the Keyham shootings to bring both national and international interest to Plymouth around DHR and related issues raised in media such as misogyny. Visibility of sexual violence issues is much less which we see as a key communication issue to address in our partnership.

## Likelihood

- Domestic abuse is high frequency, high volume; other issues happen often but in lower numbers; adverse trends seen in domestic abuse, and rape figures despite general sharp falls in crime figures during COVID. We reviewed some non MoRiLE data on stalking and harassment which showed concerning increases. SARC figures were quieter in lockdown but now numbers are nearly back to pre-COVID levels. MARAC numbers similar to last year.

## Organisational response

- There was a commonly held sense that the MoRiLE data didn't reflect levels of DASV actually taking place. Our police SV lead noted we know some victims are struggling to report and that some reporting mechanisms (concerned citizens in ENTE or social events, face to face GP appointments) have been limited during lockdowns.
- We recognize that DASV and CSA/CSE are gendered crimes where victims are predominantly women and girls while the people who commit sexual harm and domestic abuse are more likely to be men. We also recognize that this can make reporting and accessing support problematic for the male victims. In the contact of CSA/CSE boys are more likely to be abused in CSE environment or by authority figures which girls are more likely to be abused in family setting. Both adults and children with disabilities/ learning disabilities can be more vulnerable to harm and to some harming behaviours.
- Possible that as we invest more in communication around DASV we will see increased demand.
- More 'compassionate enquiry' needed in the system (education, health) to identify the hidden harms of DASV – can we look at models with health visitors to learn and share good practice?
- **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
- **Capacity** –Partners in Plymouth have actively pursued additional funding made available during COVID-19. We now have an IDVA post at Derriford, increased activity in our work with perpetrators including the Respect programme considering Child to Parent violence and additional burdens funding to support provision of Safe Accommodation under DA Act. However funding is often short term and real concerns about mainstreaming some of the good work done. Demand will always outstrip supply of specialist provision so we need a 'whole system approach'. Some real concern about pressure on staff in the city meaning that the consistent key worker model needed for effective relationship based practice has been damaged during COVID.
- **Capability** – Need for a more coherent approach to sharing learning from our DHRs. We will be using some additional burdens funding to redesign our workforce development offer for the city – this may impact on referral levels. Domestic Abuse training (DASH) has been severely limited during COVID. Trauma informed practice training has successfully transitioned to virtual delivery around DA trauma and ACE impact. 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 Adolescent Safety Framework goes live in October with new post being recruited for the Exploitation hub and a training programme on ASF being delivered by PSCP from October. Compassionate enquiry training is an emerging priority (possible CSA tools in development). Harmful Sexual Behaviour PSCP training is being rolled out across the city. There has also been investment in Bystander training programmes which will be enhanced by Safer Streets 3. Its great lots of new activity happening but some concerns on measuring

	<p>impact. Also concerns raised at lack of effective information sharing with no CSP website.</p> <ul style="list-style-type: none"> <li>• <b>Mitigating factors</b> - 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. Together for Childhood gives us significant innovation and strength in the city around CSA. Our successful Safer Streets 3 bid will give Plymouth an opportunity to significantly improve both infrastructure and innovative education approaches to reduce VAWG.</li> </ul>
<p><b>Knowledge gaps</b></p>	<ul style="list-style-type: none"> <li>• We felt that we had lower confidence than usual in our ability to predict trends due to ongoing COVID uncertainty. Very concerned that re-opening of ENTE will see sharp increase in rape and sexual violence with young people more vulnerable because of amount of time spent locked down and loss of access to health relationships education</li> <li>• Our DA Needs assessment should be read alongside this LSCA to improve understanding of Plymouth DA system (final version should be available at time of LSCA publication)</li> <li>• <b>Gaps identified</b> -</li> <li>• More focus needed on preventing harm and more thoughtful resourcing of around how we target people who cause sexual harm and domestic abuse</li> <li>• Consistent schools based data a priority from CSA/CSE discussions</li> <li>• Will CSA prevention be embedded in the 0-19 family hub model?</li> </ul>
<p><b>Recommendation</b></p>	<ul style="list-style-type: none"> <li>• Recommended top 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).</li> </ul>



## Alcohol and drug-related harm

Alcohol-related harm	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Alcohol and drug related harms	High	High	High	High	High
Problem drinkers	High	High	High	High	High
Alcohol-related hospital admissions	High	High	High	High	High
Alcohol-related crime	High	High	High	High	Moderate
Drug related deaths	High	High	High	High	Moderate
Problem Drug use	High	High	High	High	High
Possession of Drugs	High	High	High	High	Standard

### Key Statistics:

- **3,320 dependent drinkers**, 1.58% compared to 1.39% nationally
- Rates of **alcohol-related hospital admissions** are similar than the national average (636 hospital admissions per 100,000 population compared to 664 nationally)\*
- **Under 18 alcohol-related admissions** continue to be significantly higher than the national average (47.5 per 100,000 population aged under 18 in Plymouth compared to 31.6 nationally)\*\*
- **3,289 alcohol-related crimes**, a decrease of 4% on 2019/20 (3,427)
- **16%** of all recorded crime and non-crime incidents is flagged as alcohol related, slightly up on 2019/20 (1.7 percentage points)
- **872 incidents of street drinking**, 8% of all reported ASB incidents, this is a slightly lower proportion than 2019/20 (11%).
- Plymouth's rate of **death from drug misuse** (7.5 per 100,000) is higher than regional (4.9 per 100,000) and England (4.7 per 100,000) \*\*\*. (NB: Public Health note importance of comparisons with areas of population with similar levels of deprivation rather than region)
- ARID: 284 of the assaults recorded were flagged as 'alcohol related', this equates to 57.6% with activity higher between a Friday and Sunday, more than 54% of assaults occurred between these days.
- 
- \*Based on Public Health Outcomes Framework indicator 'C21 – Admission episodes for alcohol related conditions (Narrow)', period 2018/19
- \*\*Based on Plymouth Public Health Local Profile indicator 'Hospital Admissions for alcohol-specific conditions <18', period 2017/18-2019/20
- \*\*\*Based on Public Health Outcomes Framework indicator 'C19d – Deaths from drug misuse', period 2017-19
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### Impact

- Concerns that lockdown has increased levels of problematic alcohol consumption in the home. This will impact on service provision. Particular concern around alcohol use in home and domestic abuse. The drug market has proved to be resilient during COVID. Particular concerns around 'grey market' drugs, prescribed and illegal benzodiazepines.

**Likelihood**

- **Victim/subject** - Acute and chronic health impacts requiring hospitalisation, both immediate and longer term treatments; many health impacts not evident until later in life, dependency requires specialist intervention; long term financial instability, lack of regular income; mental health issues and addiction increase threat to individuals' recovery capital. More people die from drug misuse than all knife crime and RTAs combined. More working years lost to alcohol misuse than cancer. We noted particular concerns about the poor life expectancy of people who are street homeless with substance misuse issues. Specialist treatment provider Harbour noted increased complexity of referrals with more associated mental health issues and domestic abuse. Children and young people can be impacted by parental substance misuse (discussion noted this with young care leavers and young people on Ice Break waiting lists). Staff working in our system can face considerable vicarious trauma dealing with increased caseloads with greater complexity, they feel they are holding risk.
- **Community** - Almost half of homicides are drug related and a fifth suspect under influence of alcohol, 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. Substance use an aggravating factor in domestic abuse. Physical and economic impacts on local businesses can be significant, our meetings had reports of high costs relating to substance misuse in public spaces such as car parks, potentially street drinking and ASB is increasing outside of the City Centre with displacement activity so impacting areas such as Mutley, North Hill, Devonport more. Discussed whether having Harbour building in Mutley was a contributing factor but it has very limited client facing delivery during COVID with more delivery in community than offices.
- 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).
- Decreases in alcohol related crime almost certainly linked to COVID and lockdown impact on ENTE so not useful to use to forecast. Proportion of alcohol related crime has increased despite lockdowns and sharp drop in some traditionally substance use related crime such as shoplifting.
- Concerns expressed about under-reporting of issues around substance misuse because of residents being fearful.
- Possession of substances may reflect policing practices during lockdown periods (easier to spot offenders)

<p><b>Organisational response</b></p>	<ul style="list-style-type: none"> <li>• <b>Regional/local priority</b> to tackle effectively;</li> <li>• <b>Costs to respond</b> are high – See Dame Carol Black’s report, harms from drug misuse estimate at £19.3 billion p.a., 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.</li> <li>• <b>Capacity</b> – there have been significant cuts to drug and alcohol services going back to 2010 and estimated at 40% over optimum capacity (increased caseloads), we know that treatment can reduce offending rates by up to 50% so decreased capacity has serious implications, 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.</li> <li>• <b>Capability</b> – Concerns that ENTE has lost experienced staff during furlough and many won’t return- leaving inexperienced staff to deal with unknown demands such as extra-large Fresher’s week, new police may have limited experience of working ENTE, public understanding of the health harms associated with alcohol is limited. More focus needed on universal approaches to information/ awareness/prevention alongside out specialist complex lives system workforce. Harbour noted that with increasing mental health complexity staff need additional training around self harm and suicidal ideation.</li> <li>• <b>Mitigating factors</b> – Alcohol and drug-related health harms are well understood locally and currently part of the city’s complex needs agenda and service re-procurement workstream. The ‘no wrong door’ approach of the Alliance means responsibility shared across system.</li> <li>• Plymouth have successfully bid for ‘Changing Futures’ funding which will help to build upon strengths in the Alliance model to ensure greater reach across criminal justice system and join up with DASV system. Trauma informed approaches should support workforce as well as people using services.</li> </ul>
<p><b>Knowledge gaps</b></p>	<ul style="list-style-type: none"> <li>• <b>Overall confidence</b> in intelligence assessment – felt greater uncertainty than usual due to ongoing impact of COVID.</li> <li>• <b>Gaps identified</b> – understanding of online markets both for drugs (complex and multi-layered) and alcohol sales, reason for low referral rates from social care to specialist treatment, intelligence around street drinking outside of City Centre areas less well understood- fewer police resources</li> </ul>
<p><b>Recommendation</b></p>	<ul style="list-style-type: none"> <li>• <b>Recommended CSP priority</b>, with the emphasis on problem drinking and complex needs rather than targeting alcohol-related crime.</li> </ul>

## Anti-social Behaviour

Alcohol-related harm	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
ASB					Moderate

### Key Statistics:

- **872 incidents of street drinking**, 8% of all reported ASB incidents, this is a slightly lower proportion than 2019/20 (11%).
- Volume of ASB increased by 11% (905 reports)
- ASB related nuisance neighbours was biggest increase 69%, compares to rest of Peninsula as rest of Devon & Cornwall that was 68%
- Reports of street drinking with ASB reduced by 13%
- Report of street drinking (no ASB) reduced by 26%

### PCC Data

- Maybe some double counting as reported to PCC and Police.
- Data comparing January to June 2020 to same period 2021; 308 complaints reported 2020 compared to 255 in 2021. This is a decrease in 53 logs this year.
- Most complaints are noise and dealt with in-house, neighbour nuisance complaints are second biggest including noise and antisocial behaviour e.g. neighbourly disputes. Then looking at drug related antisocial behaviour.

### Impact

- COVID-19 means alcohol related ASB related to NTE down, although flashpoints occurred during easing of restrictions e.g. on the Barbican.
- **Victim/subject** – the psychological impact of ASB can be profound, particularly when involving neighbour disputes - disrupting the sense of peaceful enjoyment of one's home. In extreme cases people may feel need to move. COVID and lockdowns may have impacted people's tolerance levels (e.g. more time trying to work from home when there is noise from children out of school, impact on mental health).
- **Community** - visible disorder related to alcohol-related anti-social behaviour will affect residents' satisfaction with the city as a place to live. Costs to local businesses of damage to properties such as car parks can be significant. Tensions relating to COVID-19 and the role of social media can impact on communities. Vehicle related ASB has seen a small increase often linked to inconsiderate parking. Education reporting some ASB such as graffiti coming into their premises. During COVID young people may be negatively perceived by communities for activity that would usually be seen as normal, pro-social behavior.

<p><b>Likelihood</b></p>	<ul style="list-style-type: none"> <li>• High frequency and high volume</li> <li>• Decrease in street drinking related ASB most likely impacted by COVID and restrictions on ENTE so would expect trends to look different in coming year</li> </ul>
<p><b>Organisational response</b></p>	<ul style="list-style-type: none"> <li>• <b>Regional/local priority</b> to tackle effectively; identified as priority by our Police and Crime Commissioner</li> <li>• <b>Costs to respond</b> can be high – investment in prevention and early intervention approaches needed and interventions such as mediation to de-escalate nuisance neighbor tensions</li> <li>• <b>Capacity</b> –Improved PCC capacity will enable new ASB processes to be developed (including around ASB escalation, Youth ASB and ASB Case Reviews), more effective partnership operational delivery and increased community engagement; ensuring that our response to anti-social behaviour is efficient, victim-focused and trauma informed.</li> <li>• <b>Capability</b> – need to develop approaches with young people around creative consequences, we need to ensure public kept well informed of the positive work undertaken as media/ social media may not reflect reality on the ground. Looking at virtual delivery of the ‘Ask Angela’ session for ENTE staff. Safer Streets 3 funding can provide addition Bystander Training to ENTE staff.</li> <li>• <b>Mitigating factors</b> –Strong partnership working through Operation Hippic with examples given of positive enforcement reducing number of individuals identified as risky. 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. The City-wide PSPO order is now in place giving powers to remove alcohol if use is ASB related, important that there is good communications that this relates to behaviours not to fact of drinking. The Safe Bus is providing ENTE medical provision and reducing pressures on A&amp;E. Anti-drink spiking working practice being rolled out at Force level.</li> </ul>
<p><b>Knowledge gaps</b></p>	<ul style="list-style-type: none"> <li>• <b>Overall confidence</b> in intelligence assessment; recognition that ongoing changes with COVID situation can make forecasting difficult</li> <li>• <b>Gaps identified</b> – Interrogation to better understand the reason for decrease in PCC complaint reports logged, concern that there is some under-reporting in communities where there is reluctance to contact the police, better understanding of response to ASB in education settings so we can co-ordinate into whole system response</li> </ul>
<p><b>Recommendation</b></p>	<ul style="list-style-type: none"> <li>• <b>Recommended CSP priority</b>, need to understand how post COVID landscape will impact on ASB reporting, flexible response to changing needs</li> </ul>

# Vulnerability and Exploitation

## Hate Crime

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

### Key Statistics:

- Hate Crime – 548 offences, an increase of 4% on 2019/20. This follows on from an 8% increase in 2019/20 compared to 2018/19.
- 346 crimes flagged as Racism in 2020/21, this represents 63% of all hate crimes (64% in 2019/20), 65 (12%) flagged as Homophobic (15% in 2019/20), 54 (10%) flagged as Disablist (11% in 2019/20) and 21 (4%) flagged as Transphobic (5% in 2019/20).
- 10% increase in reporting from female victims than male (2%).

### 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; Hate crime linked to neighbourhood issues such as parking disputes impact community cohesion. Tensions have worsened with COVID. Some anecdotal reports from young people’s services around rising LGBTQ+ hate crime. Media can stoke anti GRT and Asylum Seeker sentiments – some liaison felt to be important to address.
- It is too early in the Keyham investigation to determine whether hate crime or radicalization were factors, however we should acknowledge that Plymouth is being heavily cited in the national and international media around misogyny
- **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, employers and schools around far right related hate crime, often linked to online influence, young people do not always understand racism. Use of social media and internet means greater reach so impact is wider, COVID has led to some particular community targeting (Chinese, SE Asian where there is a recognized need to build community links), Brexit influences community tensions and stresses on



<p><b>Likelihood</b></p>	<p>some community members e.g. around having settled status-feeling unwanted.</p>
	<ul style="list-style-type: none"> <li>• 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;</li> <li>• COVID may have impacted on visibility of hate crime reporting which is often linked to ENTE</li> </ul>
<p><b>Organisational response</b></p>	<ul style="list-style-type: none"> <li>• <b>National/regional/local priority</b> to tackle effectively; potentially international in respect of an act of terrorism.</li> <li>• <b>Costs to respond</b> 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.</li> <li>• <b>Capacity</b> – 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.</li> <li>• Going forward, our Technical Lead for Community Safety will be looking to change the online reporting tool as it needs to be made clearer this is a 3<sup>rd</sup> party hate crime reporting tool which will be forwarded to the police for them to log and progress. We will work to clarify that as a Local Authority, we should not be taking ownership for reports of hate crime or hate incidents so that public and partners are clear that the police to investigate these and we can then support as necessary &amp; required (e.g. with tools &amp; powers under ASBCPA '14). Therefore, any reports of hate crime / incidents we receive via our 3<sup>rd</sup> party online reporting tool going forwards will be captured in the police data.</li> <li>• Improved capacity in the PCC community safety team will give more focus on working alongside the police and partner agencies to support victims of hate crime, and assist with community cohesion, diversity and inclusion.</li> <li>• <b>Capability</b> – Wider awareness of hate crime amongst some partners needed. Third party reporting still needs improving in some areas of the city – this could be an area to develop a train the trainer model in, Transphobic incident reporting is still new for a lot of people as is the new category of sex / gender hate crime. LGBT+ awareness raising identified as workforce need. Better understanding of the impact of COVID-19, improve community understanding of available support such as CAB, Make Amends. There will be a Prevent Conference to look at mixed, unclear and unstable ideologies on 18<sup>th</sup> October and inform our work going forward. This will be the first in a series of events to improve understanding around emerging themes for Prevent in the city.</li> <li>• <b>Mitigating factors</b> – 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. Taking innovative approaches such as using appreciative enquiry could add depth to our CSP intelligence (ongoing work with POP and Mind the Gap work) – bridge the gap between police data and what communities tell us.</li> </ul>
	<p><b>Knowledge gaps</b></p>

<b>Recommendation</b>	<ul style="list-style-type: none"> <li>• Forum for housing providers to share intelligence</li> </ul>
	<ul style="list-style-type: none"> <li>• Statutory duty to prevent terrorism, high level of inherent risk requires ongoing vigilance, especially around high risk sites;</li> <li>• 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.</li> <li>• We need to ensure Prevent training fully embedded within a quality assured framework.</li> <li>• Vulnerability (risk of hidden harm) to increasing number of children and young people within elected home education as a consequence of COVID-19.</li> </ul>

## Modern Slavery

Serious and Organised Crime	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Modern Slavery					Moderate
<b>Impact</b>	<ul style="list-style-type: none"> <li>• <b>Victim/subject</b> – physical and psychological abuse with long term recovery implications; financial deprivation through enslavement. Victims may not recognize themselves as such. Noted that children arrested due to County Lines activity are very reluctant to give information – making NRM impossible to complete and leading to criminalization. Sexual exploitation and labour exploitation key areas of concern in Plymouth. High levels of violence and suicidality reported by women subjected to sexual exploitation through on street prostitution.</li> <li>• <b>Community</b> – lack of awareness in the community; often pick up on ‘nuisance’ issues relating to modern slavery e.g. waste, noise, and anti-social behaviour. This is very much a ‘hidden crime’ in our community which is reflected in low reporting.</li> </ul>				
<b>Likelihood</b>	<ul style="list-style-type: none"> <li>• Numbers remain <b>low and have reduced for 2020/21</b> –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.</li> <li>• Concerns raised that victims are fearful of reporting due to immigration status or criminalization (especially women). Need more emphasis placed that MS is primarily a safeguarding issue for the police.</li> </ul>				
<b>Organisational response</b>	<ul style="list-style-type: none"> <li>• <b>National/regional/local priority</b> to tackle effectively; tied in with people trafficking both internationally and within UK.</li> <li>• <b>Costs to respond</b> – resource focused on immediate safeguarding so ‘upstream’ work to understand how people entering country etc. is less well funded.</li> <li>• <b>Capability</b> – workforce training and awareness raising has been impeded by COVID but is a priority as we emerge from lockdown. Potential to link training on modern slavery into our Alliance and DASV workforce being explored. We need a workforce who are confident in asking questions around MS. Might be useful to have</li> </ul>				



<b>Knowledge gaps</b>	<p>identified lead contact in organisations – share learning from our homelessness team.</p> <ul style="list-style-type: none"> <li>• <b>Mitigating factors</b> – The MoRiLE meeting provided our Modern Slavery specialist staff (PCC and Police) with new contacts which they will pursue to improve joint working and intelligence gathering. Details of Anti-Slavery partnership shared. The Exploitation Hub (Adolescent Safety Framework) will be a significant resource for the city – but may also uncover additional unmet need. Modern slavery victim liaison officer posts have been recruited to. PCC Modern Slavery lead working alongside DASV sub-group looking at prostitution/ sex working and exploitation to develop new partnership responses.</li> </ul>
	<ul style="list-style-type: none"> <li>• <b>Gaps identified</b> – Intelligence gathering remains a priority. NRM awareness raising still needed with some partners and concern over low referral rates. Uncertainty about impact of COVID and gaps in labour market such as taxi driving and ENTE/ impact of move to online market for sex working.</li> </ul>
<b>Recommendation</b>	<ul style="list-style-type: none"> <li>• 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.</li> </ul>

## Cyber Crime/Fraud

<b>Serious and Organised Crime</b>	<b>Harm</b>	<b>Likelihood &amp; trends</b>	<b>Intelligence</b>	<b>Response</b>	<b>Threat, risk and harm assessment</b>
Cyber Dependent Crime / Fraud					Moderate
Cyber Related Vulnerability					Standard
<b>Key Statistics:</b>					
<ul style="list-style-type: none"> <li>• In 2020/21 268 of all crimes recorded were flagged as a cybercrime (only 31 were flagged in 2019/20), these are made up of various types of offence.</li> <li>• 95 (35.5%) were classified as Malicious Communication, 46 (17.1%) as Blackmail, 35 (13.1%) as Harassment, 31 (11.6%) as Obscene Publication and 22 (8.2%) as Sexual Activity involving a child under 16.</li> <li>• Ages were recorded against 230 victims, and of these 37.7% were aged under 18 (most being aged 12 to 15 years old), 61.7% were aged 18 to 64 and just 1 victim was aged 65 and over. Younger victims were mostly victim to Malicious Communication or Sexual Offences.</li> <li>• Fraud increased by 16% across the Peninsula and by 26% in Plymouth.</li> </ul>					
<b>Impact</b>	<ul style="list-style-type: none"> <li>• <b>Victim/subject</b> – Cyber dependent crime - some physical and psychological impact on vulnerable people and elderly; mainly medium-term 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. Concerns raised in Safer Families about the impact of cyber stalking and online crimes upon young people. They may feel this behavior is normalised and be unaware of possible legal implications. Impact upon young people’s mental health is a significant concern. CSA and CSE offences are increasingly initiated via online or digital contacts (TfC). 92% of CSA images depict girls.</li> </ul>				

	<ul style="list-style-type: none"> <li>• Victims of scams and fraud, specifically the elderly and consumers made vulnerable by their circumstances, experience deteriorating health, independence, and loss of self-confidence. These give rise to additional financial costs on the health and social care sector</li> <li>• <b>Community</b> – 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. The SARC raised concerns widely shared by partners about the impact of pornography upon young people, distortion of what is acceptable. The Zone note some young people having extreme expectations pushed upon them with damaging consequences for physical and mental health. Young people getting unmediated access to sites they should be barred from is a concern (Eddystone)</li> <li>• Need to maintain a focus on non-Cyber fraud activities, these have been increasing with COVID related scams and illegal money lending</li> <li>•</li> </ul>
<p><b>Likelihood</b></p>	<ul style="list-style-type: none"> <li>• Moderate volume but numbers <b>are increasing</b>.</li> <li>• Fraud estimated to make up 31% of all crime in England and Wales (The National Crime Report England and Wales)</li> <li>•</li> </ul>
<p><b>Organisational response</b></p>	<ul style="list-style-type: none"> <li>• <b>Regional/local priority</b> to tackle effectively. Victims of scams, whether that is mass marketing scam or doorstep scam, are victims of financial abuse. The Care Act 2014 puts all local authorities under a duty to take steps to prevent individuals being subject to financial abuse. It also requires them to take suitable steps to prevent or delay adults needing care and support; preventing people becoming victims is a key element of maintaining health and wellbeing in later life.</li> <li>• <b>Costs to respond</b> are managed within existing resources; police have set up a new cyber-crime unit which has resource implications.</li> <li>• <b>Sense across partnership that a more coordinated focused response is required</b> – digital platforms where YP can 'self assess' as first point of access</li> <li>• Her Majesty's Inspectorate of Constabulary and Fire &amp; Rescue Services (HMICFRS) undertook a thematic inspection looking at the Police response to fraud. In the report "Fraud: Time to Choose. An inspection of the Police response to fraud" it was concluded that there is a choice to be made. Leaders in government and Police forces should act to ensure that there is a clearer strategy, less variation in service between forces and better communication with the public.</li> <li>• Cyber related vulnerability – can be vastly resource intensive especially in bringing organised online abuse to justice.</li> <li>•</li> </ul>
<p><b>Knowledge gaps</b></p>	<ul style="list-style-type: none"> <li>• <b>Gaps identified</b> – concern over 'under-reporting' as issue feels greater than crime levels suggest.</li> <li>• Need to seek data from a number of sources supporting victims of online exploitation/abuse to better understand prevalence and nature of crimes.</li> <li>• There is a serious issue with under-reporting fraud - In a survey conducted by Age UK, only a minority of fraud victims report their</li> </ul>

<b>Recommendation</b>	<p>experience. Among people aged 65+, a full two-thirds (64%) targeted by fraudsters did not report it to an official channel such as Action Fraud, the Police, a bank or local authority. A third (36%) of those targeted confided in friends and family, and more than a fifth (22%) admitted they didn't tell anyone at all because they felt too embarrassed.</p>
	<ul style="list-style-type: none"> <li>• Maintain a focus on cyber dependent crime and fraud through the Fraud and Cyber group in order to ensure multi-agency response to the issues</li> <li>• Consider expanding the remit of this group to include online harm and vulnerability.</li> <li>• Consider separating out Fraud from Cyber Crime as a key issue</li> </ul>

## Serious Violence

Drug-related harm	Harm	Likelihood & trends	Intelligence	Response	Threat, risk and harm assessment
Serious Violence					<b>High</b>
County Lines/Dangerous Drug Networks					<b>High</b>
Trafficking Class A Drugs					<b>High</b>
Trafficking Other Drugs					Standard
Possession of Weapons					<b>High</b>

### Key Statistics:

- This was the first 'Serious Violence' themed workshop we have run as a CSP for inclusion in our Local Strategic Crime Assessment. At this stage we are yet to agree a local definition of what we mean by serious violence.
- Preparing us for anticipated new responsibilities to work differently to prevent serious violence (Police, Crime, Sentencing and Courts Bill) also considered what we mean by a public health prevention approach.
- Different from other MoRiLE workshops – we incorporated the Crest Serious Violence Needs Assessment to enable us to better explore key themes
- The Possession of, and Trafficking of drugs are two offences which saw big increases in 2020/21. Possession offences rose by 32% (or 257 crimes) and Trafficking offences rose by 69% (or 128 crimes). For both these crime types Plymouth does not benchmark well with rates higher than the iQuanta group average for both offence types (but see below for rationale)
- The total volume of crime related to Possession of Weapons increased by 9% (332).
- Other Firearms Offences increased by 2500%; 26 reported offences in 2020/21 compared to 2019/20. (this increase is an outlier due to changes in recording)
- Possession of Article with Blade or Point increased by 8% (184)
- Possession of Firearms Offences increased by 11% (20)
- Possession of Firearms with Intent decreased 23% (10)
- Possession of Other Weapons decreased by 10% (92)
- 50% (2) decrease in homicides (excluding domestic)

- Violence with Injury (excluding DA) decreased by 21% (1747).
- Offences against the person Act s18 and s20 decreased by 42% (149)
- In 2020/21 violence without Injury (excluding DA) increased by 15% (4034).
- Violence (with or w/out Injury) – NTE has decreased by 49%; 475 reported offenses in 2020/21 compared to 939 2019/20.

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• ARID:

- In the 12 months between June 2020 and the end of May 2021 493 attendances to Derriford Hospital Emergency Department were recorded as assault on the ARID system. This compares to 620 in the 12 months previous, a reduction of 127, though figures will be affected by COVID-19.
- 284 of the assaults recorded were flagged as 'alcohol related', this equates to 57.6% with activity higher between a Friday and Sunday, more than 54% of assaults occurred between these days.
- More than 65% of assaults occurred in a home (30% (148)) or on the street (35% (177)), with only 7.9% (39) occurring within or directly outside a licensed premises. This does not mean however that assaults on the street are not night-time economy related.
- 7.5% (37) of assaults occurred within a Park/Open Space and 4.3% (21) within a School or College
- 13% (64) of assaults involved a weapon being used, with 'other weapon' being the most common weapon classification used. The highest percentage of assaults involved a fist, with over 62% (307) assaults, followed by 5.5% (27) an 'other body part'. Whether a weapon was used was unknown in 9.5% (47) of assaults.
- The age profile of victims tends to mirror findings of previous analysis into violent crime with the ages of victims peaking at 18 and 19 years of age though victims are not restricted to the 18 to 24 year old age group. The number of victims aged 14 (11) is for example higher than the number of victims aged 22 (9) and the number aged 31 (18) is higher than the number aged 20 (14).
- 69.2% (341) victims are male, more than double the percentage of female victims (30.8% (152)).

**Impact**

- **Victim/subject** - Acute and chronic health impacts requiring hospitalisation; fear of violence has a potent psychological impact; mental health issues and addiction increase threat to individuals' recovery capital; potential for loss of life or life changing injury; high psychological and financial impact for individual and their families, e.g. if trafficking related to Drug Dealing Gang's (DDN's). Drivers identified in the Crest SVNA included vulnerability in terms of multiple needs, exclusion from school and being known to services.
- **Community** – increased concern in communities where drug dealing is visible; potential impacts on fear of crime and quality of life, the events in Keyham demonstrate the significant trauma that a community will undergo in the face of the most significant forms of serious violence.

**Likelihood**

- 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 2020/21 reduced by 15% (or 544 crimes) but the rate of offences remains amongst the highest

within its comparator group, Plymouth had the 13th highest rate. Tackling Serious Violent Crime is the responsibility of the Safer Plymouth Partnership and the issue has been raised as a priority concern across a number of partnership groups.

- The Office of the Police and Crime Commissioner has commissioned a peninsula wide needs assessment into Serious Violence and a separate Plymouth focused analysis is also underway. When this was conducted in 2020 Devon and Cornwall were recorded as one of the lowest crime areas in the country however, across the Peninsula has been an increase in number of violence offences.
- Violence in public more likely to happen in urban setting, the Crest assessment highlighted changes in recording however not only reason why there is an increase in violence reported. Recognise that although COVID has impacted in reduction reported this year the night time economy has had a significant role in driving violence. Concerns around increase in YP carrying knives but our understanding is that perception is YP are carrying knives as a protective factor not aggressive. The specialist problem solver informed us that harm relating from knife possession was lower than average in Plymouth. We were informed changes in reporting on weapons found in the home will likely lead to increase in these statistics next year,
- Weapons and drug offences, increased steadily over last five years.
- Violence offenders are predominantly age between; 18-34 highlighted. In the past 5 years there has been a shift from the 18-25 bracket to older offenders in the 26-35 age brackets. Crest recommendation is that we should be focusing on the under 25 age group in terms of preventative measures. Some concerns that COVID restrictions has increased naivety of young people when in the ENTE. Some young people have been more vulnerable to County Lines exploitation due to long periods out of education.
- YOT First Time Entrants falling by 34% in the year 2020, Re-offending rates falling by 13% on the last published data (16.09.21). Custody rates are low. Main types of offending are Violence (40%), Criminal Damage (19%) and drug offences 11%)
- All though our published YOT data shows our re-offending rate is falling, our current local tracker shows it has increased 2% ( 12% - 14%) and the reoffending is mainly violent in nature
- YOT are currently working with 55 young people. 14% class themselves as being from a global majority background, 86% class themselves as white British. Whilst the Census of 2011 shows 96.3% of children/young people were classed as white British, the current school roll in Plymouth shows this figure is now 86%. This appears this corresponds with our current cohort, it doesn't. 2.2% of young people on the school roll class themselves as being one of the black characteristics (Black - Any other Black background 0.1%, Black - Black African 0.8%, Black - Black Caribbean 0.1%, Mixed - White and Black African 0.6%, Mixed - White and Black Caribbean 0.6%). 11% of the current Youth Justice caseload class themselves as black in one of the ethnic characteristics above. Therefore, our disproportionality is growing
- Looking at STORM incidents and UNIFI Crime reports highlighted strong prevalence around City Centre and waterfront areas.

<p><b>Organisational response</b></p>	<ul style="list-style-type: none"> <li>• <b>National/regional/local</b> priority to tackle effectively.</li> <li>• Costs to respond are high across the system (housing, social care, health, police/CJS). Resource will need to shift to prevention.</li> <li>• <b>Capacity</b> – Good police capacity to respond during COVID-19 led to significant increase in drug related arrests during this period, emptier streets made this activity easier to spot. Response is dynamic. Op Cerberus will be looking at putting neighbourhoods staff out earlier e.g. 4-5pm to help prevent violence later in the evening midnight.</li> <li>• <b>Capability</b> – Focus on young people and taking a public health prevention approach. This will involve developing shared understanding of the following:             <ul style="list-style-type: none"> <li>- Violence is preventable</li> <li>- Violence is complex and a manifestation of issues</li> <li>- Predicated on good understanding of population and typography of violence ( what it looks like)</li> <li>- Root causes and situational determinants</li> <li>- Strong inequalities dimension</li> <li>- Risk and protective factors</li> <li>- Requiring collaborative approaches including; communities and lived experiences</li> <li>- There are significant concerns around the inexperience of both police and private sector staff working in the ENTE.</li> </ul> </li> <li>• <b>Mitigating factors</b> - Introduction of the Adolescent Safety Framework and new Exploitation hub, Trauma Informed approach is helping to raise awareness around public health prevention approaches in the Kindness Charter. The work of the Alliance has made significant improvements in our approach to multiple and complex needs which should be significantly enhanced by the work undertaken through Changing Futures. Operation Cerberus provides us with detailed place based intelligence. A partnership group will be established to develop a City strategy to tackle Serious Violence across Plymouth. We will be working closely with OPCC and partners in a task and finish group from October 2021 onwards. Innovation in our YOT provides a significant mitigating factor with trauma informed approaches becoming embedded. The Impact Project has worked with 222 young people in the first 3 months of the year, diverting 11% of young people away from the Criminal Justice System. Since the 01 October 2021, YOT have recruited 2 members of staff the build on this start.</li> </ul>
<p><b>Knowledge gaps</b></p>	<ul style="list-style-type: none"> <li>• <b>Gaps identified</b> – Some under-reporting of violence around DDNs and County Lines.</li> <li>• Education data / Prison data will be required in future SVNA at local level</li> </ul>
<p><b>Recommendation</b></p>	<ul style="list-style-type: none"> <li>• Preventing Serious Violence to be a key strategic priority for the following year with a new thematic group established to provide co-ordination and leadership</li> </ul>



# Emerging Issues for Safer Plymouth

## Online Harms and Online Help

Although primarily identified in the Safer Families workshop around online harms to children and young people, there was a significant cross cutting theme around needing to improve our understanding and response around online harms within every area of Safer Plymouth activity. The move to increased levels of online harm may well have been accelerated by the impact of COVID, but in all probability this simply sped up a process that was already underway in terms of criminal activity become more prevalent in the digital world, whether we consider drug markets, fraud, radicalisation or sexual harm. This may be an area which will need a particular task and finish group consideration from across our thematic partnerships if we are going to be able to respond effectively to forthcoming Online Harms legislation and the concerns identified in our MoRiLE discussions.

*"Online harm is now expected to be part of nearly every contact sexual abuse; online harm prevention should be included as a priority with a partnership and coordinated approach to preventing online harm through digital resilience and online safety."* (Safer Families Thematic Lead)

Our Domestic Abuse Needs Assessment and Communication Plan for 2021 both echo the PCC plan priority to improve access to digital help as part of our Safer Plymouth Response to online harms. Established a website and improved social media communications will be a priority for the year ahead.

## Keyham Recovery

Although the investigation around what happened in the Keyham shootings is still at an early stage, and there are numerous review processes which will be needed to inform our learning, we felt that we should signal our early intention to centre the events at Keyham within our forward planning as a community safety partnership. Where early action relevant to the shootings has been discussed in our Serious Violence workshop this has been included within this assessment, despite the period of data collection running until March 2021.

# 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 crack use, road traffic collisions etc.)<sup>2</sup>

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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<sup>2</sup> 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
<b>High</b>	<ul style="list-style-type: none"> <li>• Should be recognised by CSP and partners as a priority, and this needs to be clearly evidenced in all relevant strategies and delivery plans;</li> <li>• May demand additional resources and funding to address;</li> <li>• Review existing strategy and service provision – identify where we can improve/enhance/increase existing response framework to reduce the risk;</li> <li>• Ensure that the risk is understood across the partnership and that partners are proactively taking action to reduce the risk;</li> <li>• Set targets to evidence improvement in key areas.</li> </ul>
<b>Moderate</b>	<ul style="list-style-type: none"> <li>• Ensure that there is a clear strategy in place and adequate service provision to respond;</li> <li>• Continue to maintain/support/improve existing response framework in place to reduce/control the risk;</li> <li>• 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;</li> <li>• Continue to monitor the level of risk against moderate improvement targets, and respond appropriately if adverse trends are identified.</li> </ul>
<b>Standard</b>	<ul style="list-style-type: none"> <li>• Ensure that there is adequate service provision in place to respond;</li> <li>• Maintain/support existing response framework in place to control the risk;</li> <li>• Ensure that the risk is understood across the partnership and that partner actions do not increase the risk;</li> <li>• Continue to monitor the level of risk and respond appropriately if adverse trends are identified.</li> </ul>