MUNICIPAL YEAR 2013/2014 - REPORT NO.

MEETING TITLE AND DATE Health and Wellbeing Board 20 June 2013

Agenda - Part: 1 | Item: 3
Subject:
Serious Youth Violence and Gangs

Wards: All

Director of Environment Contact officer and telephone number: E mail:

andrea.clemons@enfield.gov.uk

Cabinet Member consulted: Yes

1. EXECUTIVE SUMMARY

The paper provides examples of some of the current activity to tackle gangs and promotes the benefits of further investment in and support for preventative work, by the Health and Wellbeing Board.

Successful delivery of the recommended actions will contribute to the achievement of a number of priority outcomes identified through the Public Health Outcomes Framework.

The Joint Strategic Needs Assessment also demonstrates areas for further investment, as does the Tackling Gangs and Serious Youth Violence Strategy which is attached in draft form for comment and agreement.

2. **RECOMMENDATIONS**

- The Health and Wellbeing Board are asked to note that following the presentation of the Tackling Gangs and Serious Youth Violence Strategy to the informal development meeting of the Health and Wellbeing Board, the work to tackle serious youth violence is now an identified area of need within the Joint Strategic Needs Assessment (JSNA) and will form part of the Joint Health and Wellbeing Strategy. This will enable the H&WB Board to support better early identification of problems and information sharing.
- To note that as part of the JSNA review process the H&WB Board will receive further analysis from the Youth Offending Service on the levels of support for young people with mental health needs.
- The H&WB Board note that as tackling Serious Youth Violence is part of the JSNA it will be considered as part of the Commissioning processes for Health and Wellbeing partners, including the Clinical Commissioning Group, Police and Local Authority.
- Agree a communications plan to publicise nationally this exemplar of good practice which for the first time in England aligns the work of the H&WB Board with that of the Safer and Stronger Communities Board to tackle gang and serious youth violence

3. BACKGROUND

In 2007-8, 7 young people lost their lives to violent crimes in Enfield. In the subsequent 4 years a further 4 young people died.

The Enfield Safer and Stronger Communities Board (SSCB) worked with a variety of partners to enhance the preventative work which was being undertaken at that time, bolstering the strong enforcement practices already in place.

A number of key projects were borne out of the tragedies, including the development of the Youth Engagement Panel and the Parent Engagement panel. The Youth Offending Service and Youth Support Services both developed their preventative work, by the creation of a specific Gangs Worker in the YOS and the targeted outreach which is now tasked through a multi agency tasking process "Safe Tasking".

Over the same period, the grant funding available through central government to the SSCB was reduced by around 60%, but the local administration continued to support community safety, which has led to some reductions in Serious Youth Violence (SYV) in recent years.

Enfield has developed some innovative practices which have led to national recognition. These include the "Call-in" where young people identified as being at risk from gangs are called in to the court and presented with a series of choices and potential consequences from those who have worked with gangs or have had personal experiences. We have also been the first North London Borough to utilise the "Gang Injunction" prohibiting certain types of gang behaviour. Our Gangs Action Groups considers individual cases and risks and we provide additional support for the families of identified gang members through the Change and Challenge programme. The list below highlights some of the other key projects in this area:

- 1 Safe and Secure moving gang member and sometimes their families away from the borough in a supported way
- 2 Providing a specific victim support worker for victims of gang related offending
- 3 Dedicated support for gang members who want to exit the lifestyle
- 4 Targeted youth work into known gang areas to engage young people
- Working with North Middlesex hospital, developing a pilot within A&E to pick up young people presenting with injuries that would not be reported to police
- Referrals to Safeguarding of young people at risk these are identified as a result of the partnership working.
- 7 Workshops for housing providers who want more information on how to deal with gangs and ASB
- 8 Targeted patrols and weapon sweeps in areas to prevent offending
- 9 Work with housing providers to change the design of estates and evict families who fail to change their criminal habits

- 10 Council investment into services that tackle gang related offending in parks and estates and irresponsible dog ownership
- 11 Deployable CCTV cameras used in crime / gang hotspot locations
- 12 Referral of gang members to Integrated Offender Management services

Our performance frameworks for this and other activity are overseen by the SSCB and look at key measures such as the levels of serious youth violence and the numbers of youth victims and offenders. However, it was acknowledged through a Peer review of the Home Office Team that Enfield needed an over-arching strategy. In April the draft document which highlights the current work and a gap analysis based on the strategic assessment was circulated to the SSCB for comment.

In addition to the crime measures, there also a significant number of indicators within the Public Health Outcomes Framework (PHOF) that are impacted by gangs and serious youth violence. These are:

- Pupil Absence
- First time entrants to the youth justice system
- 16-18 year olds not in education, employment or training
- People with mental illness and/or disability in settled accommodation
- People in prison who have a mental illness or significant mental illness
- Employment for those with a long-term health condition including those with a learning difficulty/disability or mental illness
- Domestic abuse
- Violent crime (including sexual violence)
- Re-offending
- Utilisation of green space for exercise/health reasons
- Social connectedness
- Older people's perception of community safety
- Under 18 conceptions
- Hospital admissions caused by unintentional and deliberate injuries in under 18s
- Emotional wellbeing of looked-after children
- Hospital admissions as a result of self-harm
- Successful completion of drug treatment
- People entering prison with a substance dependence issue who are previously not known to community treatment
- Chlamydia diagnoses (15-24 year olds)
- Mortality from causes considered preventable.
- Emergency readmissions within 30 days of discharge from hospital

The updated Gangs Strategy draft is now attached for the consideration and agreement of the Health and Wellbeing Board.

The support of the Health and Wellbeing Board is sought for the strategic approach and the ongoing delivery of action plans.

Areas of work which may have specific relevance to this board are:

- The geographical hotspots for gang activity which link with wider determinants of health and wellbeing in communities.
- The identification of problems and sharing of information is paramount to early intervention. The DoH have sponsored some work through Emergency Departments of local hospitals to provide information about violent incidents ad ongoing support for this will be needed.
- Many of the gang members take and sell drugs and they are also identified as having mental health issues. Additional CAMHS support through the Youth Offending Service is an identified area of need.
- Support for the whole family through programmes like Change and Challenge is an area which will need ongoing support and housing will also be a key factor if we are to manage Anti Social Behaviour and help people to exit gangs.
- The disproportionate costs associated with management of this cohort will demonstrate the value of investment and fast-track pathways into range of services.

4. ALTERNATIVE OPTIONS CONSIDERED

 That the cohort continues to be managed through current arrangement which is reaping some success, but further investment and support would enable us to tackle the risks from gang members earlier and with greater chance of successful outcomes.

5. REASONS FOR RECOMMENDATIONS

- There are strong links between the prevention of violent crimes and the health and wellbeing of those directly involved and the wider community.
- The impact of interventions being delivered already can show a financial saving to the wider public purse but still significantly impacts upon health services.
- A reduction in serious youth violence is a key factor in the delivery of a number of partnership's priorities.
- The confidence of local communities in accessing local facilities such as parks, open spaces, training and education facilities and sports clubs is imperative if the health and wellbeing of those most at risk is to be improved.
- As gangs prevail in the areas where those most vulnerable people live the negative and often tragic consequences of crime is especially damaging.

6. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS

6.1 Financial Implications

As the detailed arrangements for aligning the work of the two Boards is agreed, more detailed reports will be produced and the financial implications of actions will be covered in these reports. The costs of the communications plan associated with the recommendations can be absorbed within existing resources.

6.2 Legal Implications

The recommendations in the report are in line with current legislation and the Government's agenda. The Health and Social Care Act 2012 ("the Act") amends the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for health and wellbeing boards in relation to JSNAs and Joint Health and Wellbeing Strategies (JHWSs).

Preparing JSNAs and JHWSs can support other statutory legal duties, for example, in relation to the reduction of crime including serious youth violence and gangs. They can also contribute to other local partnerships such as Community Safety Partnerships (CSPs). In this regard, the work of the Safer and Stronger Communities Board, introduced by the Crime and Disorder Act 1998, as amended by the Police and Justice Act 2006, would be linked as these plans would reflect a local understanding of the priorities for Enfield.

Government has introduced various initiatives to support the implementation of the Act. For example, the Prison Reform Trust published a report in November 2012 titled, "How health and justice services can respond to children with mental health problems and learning disabilities who offend". The report urges health and wellbeing boards to improve joint working with local youth justice services to ensure the most vulnerable get the right support.

7. KEY RISKS

A coordinated approach between the Safer and Stronger Board and the Health and Wellbeing Board will improve the protective factors in tackling joint priorities.

8. IMPACT ON PRIORITIES OF THE HEALTH AND WELLBEING STRATEGY

- **8.1** Healthy Start Improving Child Health
- **8.2** Narrowing the Gap reducing health inequalities
- **8.3** Healthy Lifestyles/healthy choices
- **8.4** Healthy Places
- **8.5** Strengthening partnerships and capacity

9. EQUALITIES IMPACT IMPLICATIONS

It is not relevant or proportionate to undertake an equality impact assessment/analysis of this update on progress of the strategy that is designed to reduce inequalities by improving understanding and activity in a number of deprived areas and within vulnerable communities.

Background Papers

Enfield Tackling Gangs and Serious Youth Violence Strategy