

Cambridgeshire and Peterborough
Countywide Community Safety Strategic Board

Wednesday 23rd October, 13:30 – 15:30, Police HQ, Huntingdon

Agenda

1. Introduction & apologies	Jason Ablewhite	5
2. Minutes & actions of the meeting held 10 th July 2019	Jason Ablewhite	5
3. Drug and Alcohol Misuse Delivery Board: A holistic approach to vulnerability	Dr Liz Robin, Supt. Laura Hunt	15
4. Mental Health Delivery Board: Tackling mental health crisis in partnership	Supt. Laura Hunt, Dr Emma Tiffin.	15
5. Vulnerability Knowledge and Practice Programme	Gareth Edwards	40
6. Transformation in action: Huntingdonshire – Developing Oxmoor (Presentation)	Jo Lancaster	20
7. Place-based partnerships – the next steps	Dorothy Gregson	20
8. Quarterly updates from Delivery Groups	Alasdair Baker	5
9. Forward agenda plan	Jason Ablewhite	5

Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

Wednesday 23rd October, 13:30 – 15:30, Police HQ, Huntingdon

Dates for future meetings:

Tuesday 21st January 2020, 13:00 – 15:00

Tuesday 21st April 2020, 13:00 – 15:00

Tuesday 14th July 2020, 13:00 – 15:00

Tuesday 20th October 2020, 13:00 – 15:00

All meetings to be held at Police HQ, Huntingdon, PE29 6NP.

Please ensure to bring proof of ID with you.

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For any enquiries relating to the meeting, please email:
cambs-pcc@cambs.pnn.police.uk marked FAO: Alasdair Baker.

Cambridgeshire and Peterborough Countywide Community Safety Strategic Board (CCSSB)

Wednesday 10th July 2019, 13:30 – 15:30, Conference Room 2, Police HQ, Huntingdon, PE29 6NP

ACTIONS

	Action	Owner
1	Rob Hill to have an item on implementing place-based governance at the next Community Safety Officer Group meeting.	Rob Hill
2	Update on progressing move to place-based delivery at the October Countywide Community Safety Strategic Board.	Rob Hill / Dorothy Gregson
3	The OPCC to schedule a development session focused on progressing place based delivery for late 2019.	Alasdair Baker
4	Tom Tallon to establish the relationships between the MEAM delivery groups and Community Safety Partnerships.	Rob Hill / Tom Tallon
5	All partners identify opportunities for appropriate inclusion of Joint Youth Justice Management Board Priorities in their own organisational or partnership delivery plans.	All Partners
6	Alasdair Baker to circulate final draft of the Youth Endowment Fund Bid to partners.	Alasdair Baker
7	Alasdair Baker to circulate resources regards online security.	Alasdair Baker
8	Rob Hill to progress development of a countywide DHR process, consulting with CSP chairs and utilising the Community Safety Officer Group.	Rob Hill
9	Any partners who have been negatively impacted by the Athena system should write to Dan Vajzovic in a formal capacity detailing the issues.	All Partners

Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

Wednesday 10th July 2019, 13:30 – 15:30, Police HQ – Conference Room 2

Minutes

Present		
Name		Representing
Jason Ablewhite	JA	Police and Crime Commissioner (Chair), Criminal Justice Board
Ray Bisby	RB	Deputy PCC (Vice Chair), Road Safety Partnership
Dorothy Gregson	DG	OPCC
Claire Higgins	CH	Safer Peterborough Partnership, Cross Keys Homes
Sarah Tabbitt	ST	Huntingdonshire CSP, Early Help
Kevin Napier	KN	Cambridgeshire Fire and Rescue Service, East Cambridgeshire CSP
ACC Dan Vajzovic	DV	Cambridgeshire Constabulary, Joint Youth Justice Management Board
Dr Liz Robin	LR	Public Health, Cambs & P'boro Health and Wellbeing Boards
Russell Wate	RW	Cambridgeshire and Peterborough Safeguarding Boards
Heather Wood	HW	South Cambridgeshire District Council
Julie Farrow	JF	Support Cambridgeshire, Hunts Forum
Supt. Jon Hutchinson	JH	Cambridgeshire Constabulary
Ch. Insp. Steve Kerridge	KP	Cambs Constabulary, PREVENT Delivery Group
Rob Hill	RH	Cambs County & P'boro City Councils, Safer Peterborough Partnership, DA & SV Delivery Group
Anna Jack	AJ	Cambs County & P'boro City Councils, Joint Youth Justice Management Board, Child Criminal Exploitation Delivery Group
Elaine Matthews	EM	Cambridgeshire County Councils
Leigh Roberts	LRO	Cambridgeshire Research Group
Shona McKenzie	SM	East Cambridgeshire District Council, East Cambridgeshire CSP
Paul Clarke	PC	Cambridgeshire Fire and Rescue Service, East Cambridgeshire CSP, South Cambridgeshire CSP
Debbie Kaye	DK	Cambridge City Council, Cambridge City CSP
Dan Horn	DH	Fenland District Council, Fenland CSP
Helen Duncan	HD	Cambridgeshire County & Peterborough City Councils
Oliver Hilbery	OH	MEAM
Safia Cragg	SC	MEAM
Jo Curphey	JC	BeNCH CRC
Kim Morris	KM	OPCC
Alasdair Baker	AB	OPCC (minutes)
Apologies		
Name		Representing
Adrian Chapman	AC	Cambridgeshire County & Peterborough City Councils
Jo Brookes	JB	East Cambridgeshire District Council
Sarah Ferguson	SF	Cambridgeshire County & Peterborough City Councils
Chris Parker	CP	Cambridgeshire Fire and Rescue Service
Stephen Carroll	SC	BeNCH CRC
D/Supt Becky Tipping	BT	Cambs Constabulary, Modern Slavery & Organised Crime Delivery Group
Matthew Ryder	MR	National Probation Service

<p>1</p> <p>1.1</p>	<p>Introduction & apologies</p> <p>Introductions were made and apologies noted.</p>
<p>2</p> <p>2.1</p> <p>2.2</p>	<p>Minutes and actions of the meeting held 10th April 2019</p> <p>All present agreed minutes of the meeting held 10th April as a true and accurate record.</p> <p>There were 5 actions from the previous meeting, all were marked completed.</p>
<p>3</p> <p>3.1</p> <p>3.2</p> <p>3.3</p> <p>3.4</p> <p>3.5</p> <p>3.6</p> <p>3.7</p> <p>3.8</p> <p>3.9</p>	<p>Think Communities and Place-Based Leadership</p> <p>DG guided partners through the paper, recognising the positive work already done by partners to transform the way place-based partnerships operate.</p> <p>RH underlined the clear links between place based delivery and the Think Communities agenda, and the importance of quickly understanding, agreeing and implementing a way of working in the next six months.</p> <p>RH noted it is helpful that the Primary Care Networks (PCNs) have now been defined and largely line up with Local Authority Boundaries.</p> <p>JA said he saw this as a way to improve the efficiency of existing resources.</p> <p>CH shared how the Safer Peterborough Partnership had evolved to work with Living Well Partnerships (LWPs).</p> <p>LR reflected a discussion at the Cambridgeshire Health and Wellbeing Board, who agreed moving LWPs into more general place-based partnerships would be helpful, but the organisation of PCNs was important.</p> <p>JF stated simplifying place-based working would be helpful for the voluntary sector. JF also attends LWPs in Huntingdonshire and Fenland & East Cambridgeshire, and can see the benefits of more joined up place-based working would bring in helping them progress their agendas.</p> <p>RW saw the benefits of being able to deliver universal safeguarding messages across place-based partnerships with holistic remits.</p> <p>There was clear support from partners that with CSPs, LWPs, PCN and Think Communities boundaries being closely aligned, it is beneficial to align governance. The key action now is to define the next steps.</p>

<p>3.10</p> <p>3.11</p> <p>3.12</p> <p>3.13</p>	<p>DG welcomed comments and reminded partners this is not a prescriptive approach, and that it would involve working with those willing and ready for the change. There remains flexibility for localities to set actions and timelines which meet their needs.</p> <p>ACTION: Rob Hill to have an item on implementing place-based governance at the next Community Safety Officer Group meeting.</p> <p>ACTION: Update on progressing move to place-based delivery at the October Countywide Community Safety Strategic Board.</p> <p>ACTION: The OPCC to schedule a development session to run in early 2019.</p>
<p>4</p> <p>4.1</p> <p>4.2</p> <p>4.3</p> <p>4.4</p> <p>4.5</p> <p>4.6</p> <p>4.7</p> <p>4.8</p>	<p>CCJB Offender Subgroup – Deep Dive</p> <p>MR gave last minute apologies to the meeting, CS talked partners through the paper.</p> <p>The paper stressed the need for a holistic and preventative approach, and also recognised the difficulty of having complex cohorts who often sit between thresholds for receiving support.</p> <p>There was a recognition that responsible authorities need to work closely with criminal justice agencies to ensure the needs of offenders, as part of a broader cohort of those who are socially excluded, are recognised and addressed as they develop improved services.</p> <p>JA recognised the whole system approach still had scope for improvement, and for industrialisation especially in the future where partners will see more offenders managed in the community.</p> <p>DG said the paper highlighted the vulnerability of this cohort and the interconnected nature of issues of people stuck between thresholds. There needs to be a piece of work by the offender group to address how we deal with this.</p> <p>RW highlighted a multi-agency risk matrix developed for the Adult Safeguarding Board by HD, which will help services think about vulnerability, not thresholds.</p> <p>DV supported this approach, recognising there are so many important individual issues, which are all related. DV is keen to look at holistic ways to manage risks, and has invited Gareth Edwards – the Lead for the National Policing Vulnerability Coordination Centre – to the October meeting of the Countywide Community Safety Strategic Board to talk about his work on this topic.</p> <p>DH asked what leadership from CSPs meant in practical terms. DG gave the example of developing prevention workstreams, for example Fenland’s work around the homelessness prevention workstream. DG highlighted the biggest leadership gap was around the Education, Training and Employment prevention workstream.</p>

4.9	<p>DG said a consistent approach – such as “Think Communities” was needed, rather than individual approaches to each issue. This will ensure organisations and CSPs are not overwhelmed by the number of pathways.</p>
4.10	<p>DH made partners aware that the homelessness trailblazer funding was not confirmed for 2020/21. JA asked that a business case outlining the costs and benefits is brought to partners to inform of joint funding or commissioning opportunities. DG advised a paper will be going to the Public Service Board on this topic.</p>
5	<p>Managing complexity in the system: a Countywide MEAM Approach, building pathways and strategic oversight</p> <p>5.1 HD introduced the paper, detailing the Making Every Adult Approach (MEAM) and the expansion of the Counting Every Adult (CEA) team from Cambridgeshire to include Peterborough, funded by the Police and Crime Commissioner.</p> <p>5.2 HD explained how this is an approach to vulnerability, and the importance of strategic oversight and support and learning from the tactical groups to adapt and change the system locally, rather than simply supporting a small cohort with extreme need.</p> <p>5.3 LR stated there was an evidence base that this approach showed savings for the public sector, particularly criminal justice.</p> <p>5.4 Partners agreed that that Countywide Community Safety Strategic Board offer strategic oversight to the MEAM Delivery Boards where they come across systemic issues.</p> <p>5.5 SC shared that further evaluation data will be available in August 2019.</p> <p>5.6 ACTION: Tom Tallon to establish the relationships between the MEAM delivery groups and Community Safety Partnerships.</p>
6	<p>Joint Youth Justice Management Board – Deep Dive</p> <p>6.1 DV stated a key aspiration of the Youth Justice Management Board (YMJB) is to enable more prevention and early intervention work.</p> <p>6.2 The paper listed key strategic objectives. In particular DV highlighted the aspiration to increase engagement of young people known to the Youth Offending Service (YOS) with education, training and employment. DV also highlighted the objective to enhancing partnerships responses to criminal exploitation and serious youth violence.</p> <p>6.3 AJ underlined that the YJMB is not about managing YOS, but about developing the partnership response to prevention.</p> <p>6.4 AJ stated that young people from care, and BAME young people were over-represented and work continues to map young people’s journeys to address this.</p>

6.5	The Youth Offending Service is expecting an inspection from Her Majesty's Inspectorate of Probation (HMIP) in the next 12 months.
6.6	Recognising the role of place-based delivery in preventative working, DV made a clear ask that partners embed the priorities from the YJMB in their own strategic and delivery plans. This would ensure partners are coordinating work on the same priorities, not duplicating.
6.7	ACTION: All partners identify opportunities for appropriate inclusion of Joint Youth Justice Management Board Priorities in their own organisational or partnership delivery plans.
6.8	DK recognised the need to be pragmatic in aligning governance, and was pleased there is flexibility for this to evolve naturally. DK also urged caution to avoid simply layering meetings. DK felt this direction of travel needed discussion between Chief Executives at Public Service Board. DG reassured DK that this was happening.
7	Progress from the Serious Violence Working Group – Verbal update
7.1	JH gave a verbal update on the Serious Violence Working Group.
7.2	A workshop was held on the 21 st June, attended by over 50 partners and members of the community, a further meeting was planned for Thursday 11 th July. There is a good appetite to take action.
7.3	JH said agencies are seeing young people quickly progressing from “unknown” to “well known” and this underlined the need to develop a universal offer in schools to address the growing issue.
7.4	AJ updated partners on two bids related to this subject. One bid to the Early Intervention Youth Fund secured £384,431 of Home Office Funding over 12 months that will deliver intensive support for high risk young people across the county. This project uses a trauma informed approach to develop relationships and divert young people away from harm.
7.5	A bid to the Youth Endowment Fund, is in the final stages of development and partners have been sighted on draft copies. This bid will focus on delivering evidence-based interventions to young people aged 10 - 14.
7.6	ACTION: Alasdair Baker to circulate the final draft of the Youth Endowment Fund Bid to partners.
7.7	JA reiterated the importance of evaluation and providing an evidence base so that after the funding period ends, we can demonstrate outcomes and be in a strong position to bid for or commission further and more sustainable projects.
7.8	DK supported this and asked what partners felt were the key forums for sharing information around this. It was recognised the serious violence working group and the Child Exploitation Group led by Det. Supt. Laura Kosciwicz would be suitable forums.

8	Against Scams Partnership, developing community resilience - presentation
8.1	EM presented how the Against Scams Partnerships had made an impact using the principles of Think Communities.
8.2	JA reflected this was about harnessing where there is community willingness, and about making the right resources available to the community to enable this.
8.3	DG identified that the blueprint for delivery was the learning here. There needed to be a mechanism where communities could be given support to build their resilience and tackle an issue itself.
8.4	DV shared some helpful information about online security for circulation.
8.5	ACTION: Alasdair Baker to circulate resources regards online security.
8.6	EM offered to attend CSPs and other partnership groups to help train partners further.
9	Domestic Homicide Review Funding – verbal update
9.1	RH was keen to bring this topic back into the focus of partners, and progress a solution for funding Domestic Homicide Reviews (DHRs). RH made it clear a solution was needed in the next six months.
9.2	Last year there were eight DHRs across the county, and there must be consideration for the financial implication of this, with DHRs typically costing £6,000 - £12,000.
9.3	RH gave an overview of three approaches, ranging from continued individual requests in relation each DHR, to a centralised process with pooled funding, where the Domestic Abuse and Sexual violence Delivery Group offers central support to CSPs who still have ownership of each DHR.
9.4	There was unanimous support for pursuing a centralised process, recognising this could also improve shared learning. DK suggested consideration could be given to a framework contract.
9.5	ACTION: Rob Hill to progress development of a countywide DHR process, consulting with CSP chairs and utilising the Community Safety Officer Group.
10	Future meeting dates and Forward Agenda Plan
10.1	The future agenda plan was circulated as Appendix 1. Partners were asked to note the plan, and be mindful of requests for papers to future board meetings, in line with the plan.
11	Any other business or updates
11.1	LRO highlighted ongoing difficulties around data sharing in relations to Athena. LRO recognised work is ongoing to solve this. DV recognised the performance is still not where

	the Constabulary wants it to be, and any evidence of impact is helpful to support contract management.
11.2	ACTION: Any partners who have been negatively impacted by the Athena system should write to Dan Vajzovic in a formal capacity detailing the issues.

Next meeting – Wednesday 23rd October 2019 – 13:30 – 15:30, Police HQ Huntingdon

**Cambridgeshire and Peterborough
Countywide Community Safety Strategic Board**

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Supt. Laura Hunt, Dr Liz Robin
Date:	09 October 2019
Title	Drug & Alcohol Misuse Delivery Board: a holistic approach to vulnerability

1 Purpose

1.1 The purpose of this report is to

- To brief partners on the current governance structures and existing operational and performance monitoring arrangements for the Drug and Alcohol Misuse Delivery Group.
- To display current performance highlighting any risks / gaps in provision and anticipated future risks.
- To highlight to partners
 - Prevention (prevention work streams)
 - Early Intervention (CSPs)
 - Intervention (other delivery Groups)

2 Recommendation

2.1 The Board is recommended to note progress and support the following

A significant amount of work is being undertaken across health, criminal justice, housing and social care services to tackle the harms associated with substance misuse, addressing inequalities and improving outcomes for individuals and families affected. Individuals with multiple needs require collaborative delivery of care. The level of vulnerability and complexity identified within the substance misusing cohort is becoming more and more challenging to address in segmented work streams. There is the demand for vulnerable adults to receive a similar response to young people and families, utilising multi agency early help assessments, the allocation of a lead professional and a 'team around the person' to respond to the full range of needs. With the introduction of place based delivery, the integration of CSP's and living well partnerships there is a real opportunity to make a step change and address vulnerability as a whole.

3 Background and context

- 3.1 The Drug and Alcohol Delivery Board (DAADB) co-ordinates the delivery of the multi-agency response to drug and alcohol misuse across Cambridgeshire and Peterborough by bringing together strategic leads from key agencies with responsibility for addressing different aspects of substance misuse and its impacts. The board focuses on the multi-agency approach to prevention, treatment of and responses to drug and alcohol misuse.
- 3.2 The D&A Delivery Board has developed a comprehensive action plan in line with the National Drugs Strategy (2017) encompassing four key themes of reducing demand, restricting supply, building recovery and taking action globally. The actions included in the plan are extensive and

will encompass work taking place over a number of years. The following key priorities have been identified through consultation with board members and evidenced in recent needs assessments (drugs and alcohol JSNA, 2016 (updated for re-commissioning 2017) and Offender Needs Assessment-OPCC (2016).

3.3 The Key Priorities are listed below

1) Prioritising early help interventions to children, young people and families most at risk of substance misuse
2) Reducing drug related deaths and implementing the recommendations of the drug related deaths review
3) Improving outcomes by addressing barriers in: <ul style="list-style-type: none"> a) Housing and homelessness and substance misuse (including linking in with the local homelessness pathfinder) b) Education, training, volunteering and employment and substance misuse (including embedding the work and health programme and work with Job Centre Plus). c) Mental health pathways and substance misuse d) Criminal justice system (across all relevant criminal justice pathways and interventions).

3.4 Each priority has a strategic lead responsible for driving through the work streams and ensuring there is integration and alignment across strategic delivery mechanisms.

4 Update on strategic partnership activity across key priority areas

4.1 Prioritising early help interventions to children, young people and families most at risk of substance misuse

4.1.1 NICE guidance is used to identify the 'at risk' groups for substance misuse. Work streams are focused across the following key themes

- a) Awareness raising
- b) Delivery of Impact programme
- c) Input to the Healthy Schools project

4.1.2 The following work has been undertaken over the last few quarters

- ❖ Creation of the CYP steering group, providing a useful operational forum to share information and identify gaps and opportunities for closer collaboration
- ❖ The Impact programme is a targeted group work programme for young people which aims to develop resilience and reduce risk taking behaviours. Youth support staff are being trained to deliver the intervention with input from partners.
- ❖ CGL took over the Cambridgeshire adult treatment contract in autumn 2019 which has streamlined working practices and the removed the need for service to service protocol across Adult Treatment and children/family teams.

- ❖ Family Safeguarding approach & funding agreed for Cambridgeshire with roll out planned in early 2020. The Family Safeguarding model is a whole system reform of Children's Services designed to tackle challenges around children's safeguarding, particularly the compounding factors to risk of harm known as the 'trio of vulnerabilities' (domestic abuse, substance misuse and mental health). Adult CGL Treatment staff have been embedded in the Family Safeguarding Team in Peterborough for the last couple of years with positive impact and the expectation is that the multi-disciplinary team approach, including CGL workers, will now be replicated across Cambridgeshire
- ❖ The Healthy schools contract is now in place, this service works to support schools to develop and support children and young peoples' self-efficacy and strengthen emotional, physical and behavioural resilience to improve health and wellbeing
- ❖ The Cambridgeshire Young People's treatment service has been remodelled to include an integrated criminal justice component providing a consistent clinical response to those young people with identified substance misuse issues in contact with the criminal justice system.
- ❖ The SAFE Team has been developed to engage with young people at risk of/being criminally exploited (some of which will inevitably have some involvement in substance misuse). The team has only just been developed and started taking referrals on the 1st October, 2019. Links are being made with specialist young people's treatment provision.

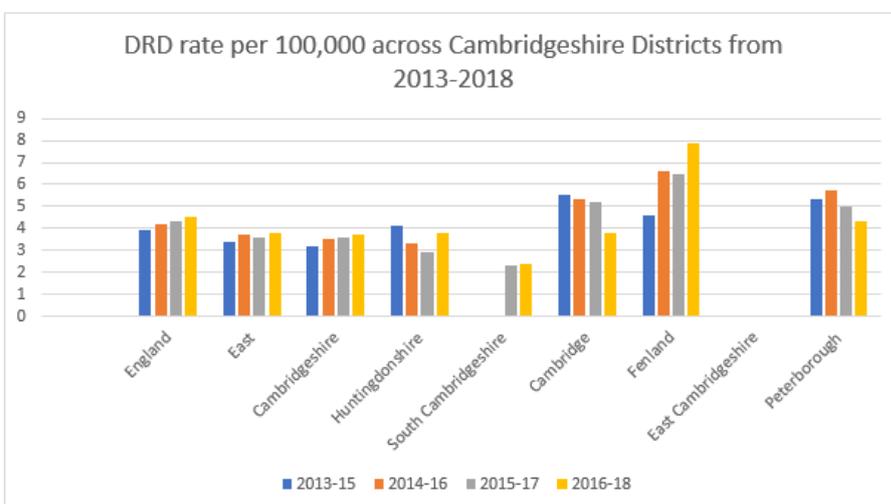
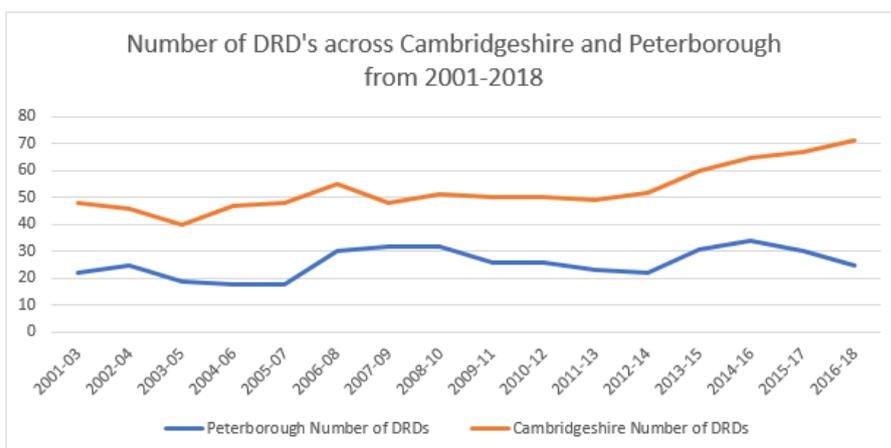
4.2 Reducing Drug Related Deaths (DRD) across Cambridgeshire and Peterborough

4.2.1 The national picture following the recent release of ONS data (August 2019) indicates the following

- ❖ Increases in the number of deaths involving a wide range of substances, though opiates (such as heroin and morphine) continue to be the most frequently mentioned type of drug.
- ❖ Deaths involving cocaine doubled between 2015 and 2018 to their highest ever level, while the numbers involving new psychoactive substances (NPS) returned to their previous levels after halving in 2017.
- ❖ The number of deaths registered from drug use in 2018 was the highest since records began in 1993 and the biggest year-on-year percentage increase. Previously, this had been linked to a rise in deaths related to opiates like heroin and morphine, but last year there were also increases in deaths across a wider variety of substances including cocaine and NPS.

4.2.2 The local death rate involving substance misuse is mixed. Overall the Cambridgeshire DRD rate has slightly increased from 3.6 per 100,000 (2015-17) to 3.7 per 100,000 (2016-18) which sits just under the East of England rate of 3.8 per 100,000 but well below the England rate of 4.5 per 100,000. The most recent ONS data indicates that rates per 100,000 have decreased in Peterborough for the second consecutive period reducing from 5.7 per 100,000 in 2014-16 to 5 per 100,000 in 2015-17 and most recently sitting at 4.3 per 100,000 in 2016-18. The Peterborough rate remains above regional DRD figures but now sit below national rates.

4.2.3 Fenland is of concern with DRD's in the most recent reporting period increasing from 6.5 per 100,000 (2015-17) to 7.9 per 100,000 (2016-18) above both national and regional rates.



4.2.4 A second coroners DRD audit has been undertaken analysing deaths occurring in 2017 (previous one looked at deaths in 2015) to help identify local risks and trends and focus countywide harm reduction activity. A comprehensive report and the countywide DRD action plan has been updated to reflect the findings.

4.2.5 The key findings identified the following risk factors

- Social isolation
- Prescription opioid use
- Mental health difficulties
- Chronic pain
- Multiple drug use (illicit and prescribed)

Similarly to the national trend, the review identified an increase in cocaine related deaths. Confirming local concerns and the increases in reported crack/cocaine prevalence rates. The DRD review has identified;

- 17 recommendations (see Countywide DRD Action plan)
- Updated countywide DRD action plan reflecting findings
- Requirement for continued partnership support, collaborative working and innovation
- Focus on Fenland

4.2.6 Partnership involvement

- a) Continued collaborative support from across the partnership to identify vulnerability for potential drug related death and communicate risk across agencies.
- b) To ensure that front line workers receive drug awareness training and have the relevant skills and confidence to discuss harm reduction techniques with users.
- c) To work with primary care and community pharmacists to ensure that the risk of long term prescription opioids are fully acknowledged and explored/reviewed by clinicians and patients and risk managed effectively.
- d) Users with co-occurring substance misuse and mental health difficulties are at increased risk of drug related deaths and the response requires a strengthened coordinated approach across both service areas.
- e) To continue to roll out lifesaving 'Take Home Naloxone' (THN) to opiate users. HMP Peterborough has started to dispense kits on prison discharge and discussions are underway with Addenbrookes ED department. Cambridgeshire Constabulary are now exploring the potential of nasal naloxone carried by specified officers following a roll out by the West Midlands Force.

4.3 **Housing and homelessness and substance misuse (including linking in with the local homelessness pathfinder)**

4.3.1 As part of the Countywide Trailblazer project to empower all public facing staff to identify the risk of homelessness and work together to prevent homelessness. One of the key work streams for 19/20 is 'Working with partners to tackle homelessness linked to mental health and substance misuse.

4.3.2 In June 2019 a workshop focusing on Improving Pathways into housing for people using Mental Health Services and Drug and Alcohol Support services was attended by 70 stakeholders which included powerful testimonials from a number of individuals with lived experience.

The aim of the event was to bring together representatives from different agencies to have open, honest discussions about the current situation, what's working and what challenges there are, identify gaps and look to the future and what it should and could look like.

A significant amount of feedback and recommendations have come out of this event. A Task and Finish group (first met in September) is looking at the findings and working to develop and adopt an action plan promoting good effective relationships between housing agencies and organisations supporting those with mental health challenges and those facing drug and alcohol addiction.

4.3.3 A number of strategic work streams are being developed to address homelessness which include; CCG led homelessness needs assessment, Peterborough City Council homelessness strategy and the Cambridgeshire supported housing review. The housing and associated health needs of individuals with substance misuse issues are being fed into all these documents.

4.4 Education, training, volunteering and employment and substance misuse (including embedding the work and health programme and work with Job Centre Plus).

4.4.1 Work has concentrated on 3 key areas

- a) To improve the recovery outcomes of those who misuse substances through increasing their opportunities for accessing education, training and employment opportunities.
- b) To increase the proportion of those who are receiving substance misuse treatment who enter full time education, training, employment and are not receiving benefits (ESA)
- c) To prevent those who are at high risk of becoming dependent on drugs and alcohol through engaging them in education/training/employment

4.4.2 The following work has been undertaken over the last few quarters

- ❖ Local Mental Health/drug and alcohol Stakeholders (commissioners and providers) and DWP/Jobcentre plus Staff took part in PHE Workshop that led to identification of local opportunities for improving collaborative working and pathways. Pathways have been established and the Papworth Trust is working closely with Drug and Alcohol Services.
- ❖ Treatment service staff to have a regular presence at all Job Centres across Cambridgeshire and Peterborough. The relationship between DWP staff and the CGL service has been strengthened with a view that this will lead to more referrals and address any operational issues.
- ❖ Peterborough Job Centre staff identified as a priority group for training, CGL Aspire have worked with Peterborough JCP Disability Employment Advisors to develop a bespoke training package which has been well received. There are now plans to extend the roll out to other DEAs/Job Centres.
- ❖ A referral flow chart for signposting organisations has been developed and is being rolled out across all providers
- ❖ The Work place Provider is actively promoting the BITC Drugs, Alcohol and Tobacco toolkit for Employers which includes an adaptable drugs, alcohol and tobacco policy.
- ❖ Information is provided to schools via the Healthy Schools' website on drug and alcohol misuse to help develop awareness and resilience in the student population and prevent those students who are experimenting with drugs/alcohol becoming excluded from education.

4.5 Mental health pathways and substance misuse

4.5.1 Approximately three quarters of people who attend drug and/or alcohol misuse services will also have a mental health issue. Around a third of people using mental health services will have some form of drug and/or alcohol use condition(s).

4.5.2 Countywide work to address and improve pathways and provision for those individuals experiencing co-occurring mental health and substance misuse difficulties have concentrated on the following areas

- ❖ The countywide Dual Diagnosis and Co-occurring principles document which demonstrates a strategic commitment to better care for people with co-occurring Mental Health and Substance/Alcohol use has been signed by the LA, CCG, PH and OPCC. Work is now underway to raise the profile of the document to ensure change is evidenced through frontline care provision.
- ❖ KPIs covering mental health are now embedded in substance misuse services to allow the monitoring of local prevalence and referral pathways. CPFT has committed to incorporate substance misuse measures when the new IT system is replaced next year.
- ❖ The Good Life service, launched in September 2019, (provided by CPSL Mind) has been designed to work collaboratively with the drugs and alcohol recovery service to provide community mental health support and wellbeing services across Cambridgeshire and Peterborough.
- ❖ Countywide training dates have been set for forthcoming months to help front line workers identify and support individuals with co-occurring mental health and substance misuse issues.
- ❖ A case file audit is planned for early next year across mental health and substance misuse services to explore the extent to which a joint approach to managing conditions has become embedded into service delivery.
- ❖ Substance misuse is included into the countywide suicide prevention plan and the CPFT zero suicide work plan. Addressing co-occurring conditions has also recently been included in the countywide STP (sustainable Transformation Plan) for the first time, highlighting the need for improvements in care and outcomes for this complex patient group.

4.5.3 There are still concerns across a wide range of partners that there are gaps in Mental Health provision for those individuals with co-occurring substance misuse and mental health difficulties who don't have diagnosed and/or 'severe' mental health difficulties that meet thresholds for secondary mental health treatment intervention. Many of these patients are too unwell or do not fit the criteria for the psychological wellbeing service (IAPT) and tend to hit crisis care when their mental health deteriorates. Without appropriate mental health intervention, long term recovery outcomes are much poorer.

4.6 Criminal justice system (across all relevant criminal justice pathways and interventions).

4.6.1 A task and finish group attended by key representatives from across the treatment and criminal justice system meets quarterly to ensure that the pathways are working effectively and efficiently for offenders with substance misuse issues. This group to date have reviewed and improved the referral mechanism between police custody and courts to treatment services, communication across both probation services and treatment services and pathway work has commenced with prison colleagues to ensure treatment continuity whilst in prison and pre planning for release. This is of particular significance as Peterborough Prison is preparing for an establishment change which will see an increase in the remand population in Peterborough and serving prisoners being moved out of area returning before release.

4.6.2 The newly developed Community Treatment order (ATR/DRR) protocol is being continuously reviewed by operational partners and there has been a significant increase in the number of community treatment orders being made by the courts.

4.6.3 Plans for the development of a joint outcomes framework (for substance misuse offenders) is due to be scoped with input from key partners. This will enable the strategic partnership to

measure and monitor substance misusing offenders moving through the criminal justice pathway, identifying the impact of treatment interventions across the criminal justice pathway and identification of longer term outcomes in terms of the reduction of re-offending. Currently different information is collected and monitored separately by individual agencies as per commissioning arrangements.

4.6.4 A new integrated treatment model is in place for Young People in Cambridgeshire (CASUS). This model will ensure longer term treatment consistency and continuity for those young people who have intermittent contact with the youth justice system.

4.6.5 Cambridgeshire constabulary is currently developing an 'Out of Court Diversion Team' which will work to identify offences that would be eligible for an out of court disposal (OOCd). Out of Court Disposals (OOCds) are responses to crime that the police can administer locally to adult or young offenders without having to take the matter to court. These disposals are a valuable tool for the police when tackling low-level crime and can represent a proportionate and effective response to offending. Drug and/or alcohol related low level offences will be identified as appropriate for an OOCd which may involve referral and intervention from the specialist treatment service. Local pathway and policy document are currently being developed in consultation with stakeholders.

4.7 Other key strategic work streams to note

4.7.1 The Safer Peterborough Partnership has identified drug dealing as one of its strategic priorities, the work termed 'Operation Spotlight' is split into 3 strands; disrupting supply, reducing demand and reducing harm. Work includes, increased enforcement aimed to tackle OCG's, prevention and early intervention work, safeguarding vulnerable adults and exploring innovative solutions to drug treatment.

4.7.2 A task force in Peterborough has been working in collaboration with members of the local community to tackle increased numbers of discarded needles and drug paraphernalia in open spaces. The group has successfully identified hot spots, engaged a wide variety of partners and service users to find local solutions. In September, 10 new community needle disposal units were installed across Peterborough to help tackle drug related litter and improve community open spaces.

5 Recommendation

5.1 The Board is recommended to note progress and consider the areas where it can use its authority to provide added value and coordinated assistance to help drive work streams and manage emerging risks

BIBLIOGRAPHY

Contact Officer(s)	Susie Talbot
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Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Crisis Care Concordat Mental Health Delivery Board & STP Mental Health Delivery Group
Date:	23 October 2019
Title	Tackling mental health crisis in partnership

1 Purpose

- 1.1 The purpose of this report is to update the Countywide Community Safety Strategic Board (“the Board”) on the most recent developments with mental health service provision across Cambridgeshire and Peterborough system.

2 Recommendation

- 2.1 The Board is asked to note the contents of the report.

3 Crisis Care

- 3.1 The Crisis Care Concordat MH Delivery Group, at a tactical level, has developed a comprehensive action plan which sets out work undertaken or still being progressed locally to deliver the priorities and next steps as articulated within the Five Year Forward View for Mental Health and the NHS Long Term Plan. The local multiagency action plan covers five key areas of crisis care; namely - commissioning, support, access, quality treatment and recovery.
- 3.2 Our system has been successful in securing additional mental health investment to further enhance local crisis care offer. This will be done by strengthening the First Response Service at the front door and creating closer working arrangements between secondary mental health services.
- 3.3 An agreement has been made to continue to commission the extended liaison psychiatry services at Addenbrookes and Peterborough City Hospitals for this financial year after considering the results of the evaluation and the direction of travel set by national policy, NHSE expectations and local ambition to improve quality /safety for MH patients seen in ED. The CCG together with CPFT are having conversations with Hinchingsbrooke Hospitals leaders to also extend service provision so it can be better equipped to meet the needs of local population.
- 3.4 All Cambridgeshire and Peterborough Crisis Care Concordat partners have now formally signed-off the Management of the MH Crisis Interagency Agreement that sets the standard to ensure compliance with relevant legislation, national guidance and other sources of standards and incorporates amendments to Mental Health Act 1983 made by the Policing and Crime Act 2017.
- 3.5 Recently additional investment has also been secured to pilot a few new initiatives that aims to support service users and professionals, namely Serenity Integrated Mentoring (SIM) project aimed at patients who are frequent users of mental health services and S12 Solutions web

based IT platform that aims to make the Mental Health Act Assessment set-up quicker and more efficient

4 Community

- 4.1 In June 2019, the Cambridgeshire & Peterborough system was invited to submit an expression of interest to be part of a two-year community transformation pilot to trailblaze and support the learning of other areas ahead of the national implementation of community transformation initiatives from 2021/2022. Main objectives are person-centred care, intelligent healthcare delivery (creating capacity in specialist services to deliver evidence-based interventions), empower people to achieve their full potential and maximise the use of local community assets. The pilot will be implemented in the Peterborough area, given the high level of deprivation and mental health need.
- 4.2 Perinatal Mental Health – This service surpassed 2018/19 access target as 18/19 access target by 44%, seeing 281 women. The target set was 195 women in the first year.
- 4.3 CPFT's primary care mental health initiative, PRISM, was shortlisted for two National Positive Practice in Mental Health Awards 2019, as well as recently being shortlisted for the 'Clinical Improvement Award: Mental Health' in the General Practice Awards.

5 Recommendation

- 5.1 The Board is asked to note the contents of the report.

Interventions currently subject to evaluation – VKPP AND College of Policing

	Intervention	Description	Area of focus	Force(s)
1	DIVERT	DIVERT uses a trauma informed, public health style intervention which aims to tackle the root cause of a person's offending; putting strategies in place to break the cycle. Custody Intervention Coaches (CICs) are trained and embedded within this police force's custody suites to approach suitable 18 to 25 year old detainees and support them in seeking employment and education opportunities.	Gangs and Youth Violence	Met Police
2	Op Divan	Operation Divan aims to reduce numbers carrying weapons, and raise awareness of the consequences of weapon carrying. Police work with agencies including YJS and Youth Offending Teams (YOTs) and the Prevention Service to identify and support those aged under 18 identified as being at risk as being at risk of weapon carriage and prevent future escalation.	Gangs and Youth Violence	North Yorkshire Met Police
3	Community Initiative to Reduce Violence (CIRV)	CIRV adopts a holistic approach to violence and gives gang members a choice to either stop the violence, or face the consequences. Those who make the decision to stop are supported by the community (for instance; police, employers, cognitive change specialists and ex-gang members). In contrast, clear signals and lawful disruptive tactics are used to discourage individuals who are intent on continuing their gang violence.	Gangs and Youth Violence	Northamptonshire
4	Think Family Early Intervention (TFEI) scheme	The TFEI scheme is a force response to the Troubled Families programme and employs a multi-agency approach to provide holistic support for families. The intervention involves PCSOs working with families to understand their key difficulties and identifying what can be done to support them. The focus is on a preventative approach and therefore aims to target low level problems before they become severe and high risk.	Vulnerability (Early Intervention)	Avon & Somerset
5	Adverse Childhood Experiences (ACEs)	The intervention focusses on young people who have experienced 4 or more ACEs and who may need support to deal with the trauma of those ACEs. The aim is to reduce the risk of future offending, tackle health problems and wider social issues, and ultimately support young people to enjoy a happy, healthy, crime-free life. Trusted Adult Workers (TAWs), funded by the OPCC, but working within Local Authorities, will be recruited to work with local children and adult safeguarding boards and community safety partnerships to deliver the intervention.	Vulnerability (Early Intervention)	Hampshire
6	Joint Approach to Neglect	The intervention has been developed to avoid repeated child neglect and common assault offences against children working jointly with children services and CPS. The aim is to undertake 'early intervention' activity to prevent individuals reaching a crisis point. The intervention delivers a joint visit by plain clothed officers and Child Services. Robust messaging is provided to families, and detailed behaviour contracts are	Vulnerable Children (Child Protection)	Hampshire

Cambridgeshire & Peterborough Countywide Community Safety Strategic Board

		developed which aim to improve the level of care given to children and raise awareness about the consequences of failing to adhere to the contract.		
7	Spousal Assault Risk Assessment (SARA v3)/ Stalking Assessment and Management tool (SAM)	Endorsed by the NPCC leads for MOSOVO and Domestic Abuse, a three-force pilot commenced in November 2018 looking at the application of a police risk assessment and management tool for serial and repeat perpetrators of domestic abuse and stalking. The tools being trialled are SARA V3, which is the latest version of the risk assessment and management tool used by the NPS for domestic abuse cases; and the Stalking Assessment and Management tool (SAM), used for managing stalking cases.	Risk Assessment and Management	Cleveland Lancashire West Midlands
8	High Harm Perpetrator Unit (HHPU)	The Surrey HHPU uses an algorithm and referral process to support professional judgement and provide a unique approach to proactively identifying high harm perpetrators who may or may not be currently managed. Through identification and bespoke offender targeting/rehabilitating; it aims to directly reduce and prevent the harm they cause to the community and in particular vulnerable victims and increase capacity through bringing together IOM and MAPPA resources.	Risk Assessment and Management	Surrey

**Cambridgeshire and Peterborough
Countywide Community Safety Strategic Board**

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Jo Lancaster
Date:	23 October 2019
Title	Transformation in action – Developing Oxmoor

Presentation to be circulated in due course

Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Dorothy Gregson
Date:	23 October 2019
Title	Next steps for place-based partnerships

1 Purpose

- 1.1 The purpose of this report is to inform the Countywide Community Safety Strategic Board (“the Board”) how local system change processes designed to respond to increasing demand are converging, and set out how the developing Place-Based Delivery Boards and workforce development can support this.

2 Recommendations

- 2.1 The Board supports an update to the Countywide Community Safety Agreement.
- 2.2 The Board recognises the role that Place-Based Partnerships can have in supporting system changes to reduce demand.
- 2.3 The Board endorses a system wide development session to enable learning from other areas, the pilots within Cambridgeshire and further integration across the NHS and Local Authority development programmes.

3 Background – Working together to respond to the grand challenges

- 3.1 Cambridgeshire and Peterborough based public and third sector organisations are experiencing increasing demand for services at a time when, for many organisations, resources are constrained. Analysis indicates the counties growth ambition drives population growth, the financial situation will worsen.
- 3.2 At the same time, historical improvements in outcomes are plateauing, or in some cases worsening. Cambridgeshire and Peterborough face four grand challenges:
- Giving people a good start in life
 - Ensuring people have good work
 - Creating a place where people want to live
 - Ensuring that people are healthy throughout their lives.
- 3.3 These grand challenges provide a common language which can link all the change programmes.
- 3.4 People with multiple disadvantages find it more difficult to respond to these grand challenges. Public and third sector organisations must treat the issues faced by these vulnerable individuals holistically, not separately in order to manage existing need and prevent future demand.

3.5 In response to this challenge, multiple partnership change programmes have emerged or broadened in scope, with the aim of driving system change. These work streams include, but are not limited to:

- Think Communities
- Health and Wellbeing Strategy
- Partnership Orientated Problem Solving (POPS)
- Making Every Adult Matter (MEAM)
- Housing Trailblazer
- Neighbourhood Cares Pilots
- Safeguarding Training

While the language is sometimes different, these change programmes share a number of key principles, including the utilisation of existing resource to work in a person / place focused way.

3.6 These change programmes also all identify workforce development as key to implementing lasting system change.

4 Place-based Delivery - Think Communities

4.1 Collectively, public and voluntary sector organisations deliver services to and within the same communities, and often to and for the same residents. This is can be complex and confusing for residents, communities and professionals.

4.2 Think Communities, puts a greater emphasis on co-ordinated place-based service delivery, underpinned by a deep understanding of the local needs and assets in a community and where the system works collaboratively to resolve often entrenched issues.

4.3 The Think Communities approach is underpinned by eight key workstreams:

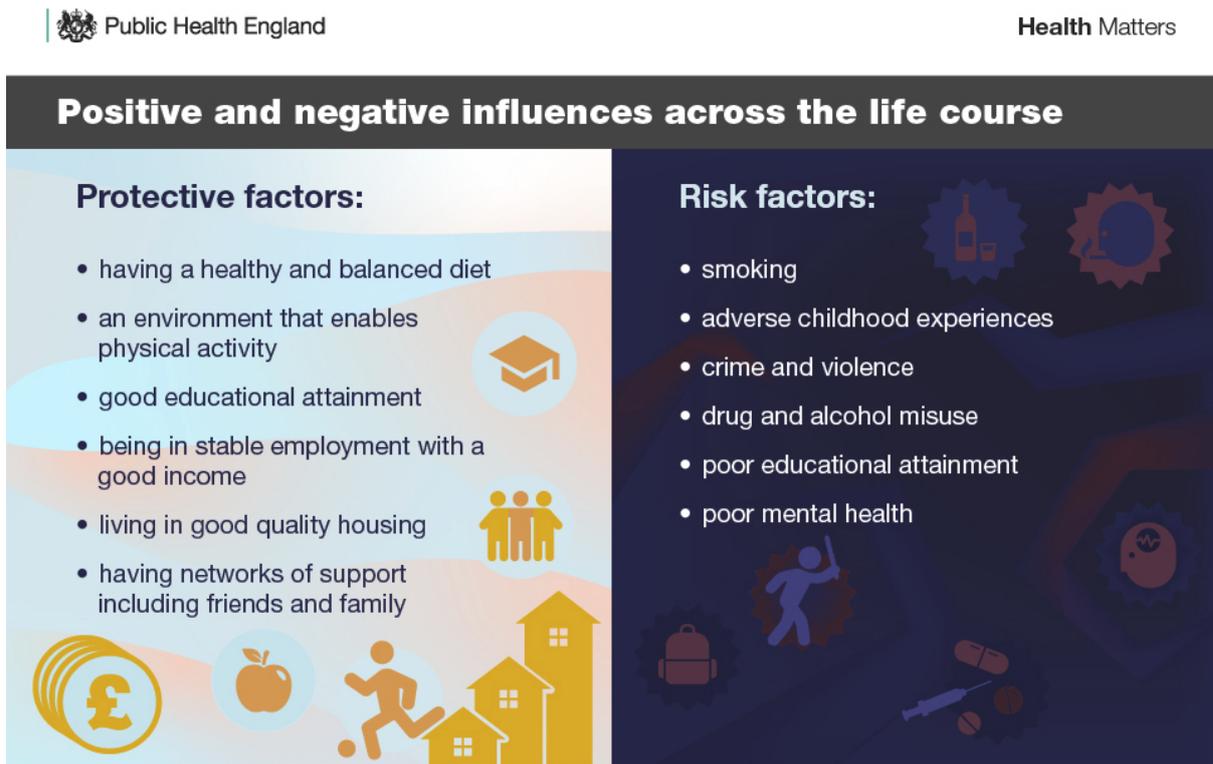
- Strategic Coherence & System Facilitation
- Communications
- Community Engagement
- Data and Intelligence
- Estates and Buildings
- Funding and Resources
- Technology and Digital
- Workforce Reform

4.4 A Think Communities Executive Board will lead and co-ordinate each of these workstreams, whereas place-based delivery boards best placed to utilise these workstreams to deliver change locally.

4.5 Looking through the lens of the four grand challenges, Think Communities offers an opportunity to reduce complexity with joined-up place-based delivery boards. Section 8 offers further information on the implementation of place-based delivery boards.

5 Place-based delivery - Health and Wellbeing Board

- 5.1 The Cambridgeshire Health and Wellbeing Board and the Peterborough Health and Wellbeing Board are working to develop a Joint Health and Wellbeing Strategy for 2019-24 to meet the needs of the Joint Strategy Needs Assessment. This strategy will be aligned to the NHS whole system Sustainable Transformation Partnership (STP), and have the flexibility to be sensitive to local differences and issues.
- 5.2 The draft strategy highlights the positive and negative influences across the life course.



- 5.3 The draft Health and Wellbeing Strategy can be organised under the 4 grand challenges.
- 5.4 The draft Health and Wellbeing Strategy outlines specific priorities for action. Many of these are very relevant to the community safety agenda and can set the evidence based priorities for action within place-based delivery boards, for example:
- Housing for vulnerable groups and homelessness - with a recommendation that the Health and Wellbeing Board work with the Housing Board to create joint pathways.
 - Empower local people to access education and skills to fully participate in society – linked to the work of the Combined Authority Skills Strategy.
 - Creation of an integrated outcome framework and strategy for older children and adolescents.
 - Support pathways for vulnerable people with mental health problems into housing and employment.

- 5.5 There is an aim that place-based delivery boards have specific public health support so they are able to engage with and draw from the evidence within the Health and Wellbeing Strategy.

6 Place-based delivery – Problem Orientated Problem Solving

- 6.1 Partnership Orientated Problem Solving (POPS) offers a consistent problem solving approach to address the underlying conditions that may be causing a problem. It utilises the expertise of partners and communities in order to prevent, solve, or manage the problems. POPS can be scaled to solve problems for individuals and communities.
- 6.2 Cambridgeshire Constabulary commissioned POPS training, which over the past 9 months has been delivered to over 1000 public sector professionals, ranging from frontline staff to senior managers.
- 6.3 This training provides a foundation for an approach to place based problem solving. The training gives a platform for sustainable and supported system change. To support the initial training, a number of Subject Matter Experts (SMEs) were trained and partners have been trained to use the ECINS information sharing Hub funded by the OPCC.
- 6.4 Chief Inspector Steve Kerridge will represent the Constabulary on the Think Communities Executive Board to ensure there is a link between the Think Communities work stream, the POPS workstream and the wider work of the Constabulary.

7 Place-based delivery - Community Safety Partnerships

- 7.1 The Countywide Community Safety Agreement identifies high risk areas associated with vulnerability that Community Safety Partnerships (CSPs) requested are co-ordinated at a countywide level. The Board identified existing Countywide Delivery Groups that manage these risks and encouraged communication between these groups and CSPs to identify opportunities for prevention. Cambridge City CSP stepped forward with the Constabulary to explore if an additional priority is needed focusing on street based violence.
- 7.2 Updates from Countywide Delivery Groups have been brought to the Board and provide CSPs with important context for their local work. It is increasingly important the updates from the Countywide Delivery Groups, managing high risk areas provide clearer direction to place-based delivery boards on how they can best respond to risk and prevent future risk. This challenge has been set for the chairs of these groups.
- 7.3 The Countywide Community Safety Agreement identifies CSPs as place-based leads of intervention and prevention, and Countywide Delivery Groups as groups managing high risk and vulnerability cohorts. It also sets out cross-cutting prevention workstreams which would benefit from development. The OPCC has linked its crime and disorder reduction grants to the development of these cross-cutting prevention workstreams.
- 7.4 The aim of this approach is to promote CSP development of prevention workstreams that would address high risk issues relevant to each CSP. Prevention workstreams that CSPs are currently developing are:
- Fenland CSP - Homelessness prevention
 - Huntingdonshire - Community Resilience (developing a place-based approach)
 - East Cambridgeshire – Community Resilience (community development & resources)

- South Cambridgeshire – Community Resilience (community resources and toolkits)

- 7.5 Cambridge City CSP are working with the Constabulary to looking at developing a prevention response to Serious Street based Violence, this work links to and will draw from the existing Child Exploitation Working Group.
- 7.6 CSPs are also collectively working to develop a coordinated response to Domestic Homicide Reviews, with a key objective being to better share and implement learning from DHRs at a countywide level.
- 7.7 It is recognised more work is needed to support CSPs to engage with high risk Countywide Delivery Groups managing high risk. Agenda items 5 explores if a new more integrated approach to managing risk areas is needed via a “threat agnostic” approach.

8 Developing place-based delivery boards

- 8.1 At the July 2019 meeting, Item 3 outlined to the Board a place-based partnership approach, evolved from the think communities’ principles. Place-based partnerships will build on and bringing together existing Community Safety Partnerships (CSPs) and Living Well Partnerships (LWPs) into a single place-based partnership operating at a district level.
- 8.2 This single partnership can strengthen the ability to deliver the statutory functions of CSPs and LWPs. There is support for this approach from many local elected members and local public sector organisations. With CSPs, LWPs, Primary Care Networks (PCNs) and Think Communities boundaries being closely aligned, partners see benefits to also align delivery mechanisms.
- 8.3 The pace and approach to taking forward place-based delivery is at the discretion of each district area. Peterborough and Huntingdon have already stepped forward to lead on the development of place-based partnerships. These new partnerships are putting the Think Communities approach at the centre of their work.
- 8.4 Item 6 described the work Huntingdonshire is doing to develop a place-based partnership approach through the Developing Oxmoor project. .
- 8.5 A key aspect of implementation will be significant workforce development and training – to develop staffs skills and “unlearn” traditional ways of working. A key aspect of workforce development is enabling staff to work in a “less permission, more innovation” environment, and to integrate where appropriate, lawful and safe to do so. Improving and coordinating the support and training for our workforce is a current priority within the Think Communities central team.

9 Next Steps

- 9.1 At the October Public Service Board (PSB) support was given for a system wide development event. The aim of this is to learn from work being undertaken elsewhere in the country, increase awareness and understanding of outputs from existing pilot work and further explore how Local Authority and NHS led developments can be better integrated. The existing informal the Senior Officers' Communities Network meetings is to be disbanded and a new Think Communities group is to be established bringing together those who can support delivery of

the Think Communities workstreams, providing strategic coherence and system facilitation across:

- Communications
- Community Engagement
- Data and Intelligence
- Estates and Buildings
- Funding and Resources
- Technology and Digital
- Workforce Reform

9.2 Huntingdon and Peterborough are moving quickly forward to establish Place Based Delivery Boards. This will require the existing Countywide Community Safety Agreement to be updated in recognition of these changes.

10 Recommendation

- 10.1 The Board supports an update to the Countywide Community Safety Agreement.
- 10.2 The Board recognises the role that Place-Based Partnerships can have in supporting delivery of system change.
- 10.3 The Board notes there will be a system wide development session to enable learning from other areas, the pilots within Cambridgeshire and further integration across NHS and LA development programmes.

BIBLIOGRAPHY

Source Document(s)	<p>Countywide Community Safety Strategic Board – 10 07 2019 - Item 3 – Think Communities and place-based leadership, Dorothy Gregson & Rob Hill</p> <p>Countywide Community Safety Agreement 2017 - 20</p> <p>Countywide Community Safety Strategic Board – 10 04 2019 - Item 7 – Think Communities, Adrian Chapman</p> <p>Cambridgeshire Public Service Board – 16 06 2019 - Item 4 – Health and Wellbeing Strategy Update, Dr Liz Robin</p>
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Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Alasdair Baker
Date:	23 October 2019
Title	Quarterly updates from delivery groups

1 Purpose

- 1.1 The purpose of this report is to inform the Countywide Community Safety Strategic Board (“the Board”) of work to update quarterly update process for countywide delivery groups.

2 Recommendation

- 2.1 The Board is recommended to note the contents of the report.

3 Provision of quarterly updates

- 3.1 The Countywide Community Safety Agreement identifies high risk areas associated with vulnerability. The Board identified existing Countywide Delivery Groups that manage these risks and encouraged communication between these groups and the Board.
- 3.2 At the Board meeting in June 2017, a process was put in place whereby Countywide Delivery Groups would provide concise written quarterly updates to the Board, providing assurance around progress on delivery of relevant strategic assessments, strategies, delivery plans, performance monitoring and risk mitigation.

4 Next steps

- 4.1 It is increasingly important the updates from the Countywide Delivery Groups, managing high risk areas provide clear direction to place-based delivery boards on how they can best respond to risk and prevent future risk.
- 4.2 In order to ensure the quarterly updates achieve their purpose, the template for the quarterly updates is being reviewed.
- 4.3 Moving forward, the updated templates will also feed into a risk register. This will provide a consistent approach to highlighting key issues that require consideration, action or co-ordination by the responsible authorities on the Board.
- 4.4 The OPCC will be approaching the chairs of countywide delivery groups to discuss the implementation of an updated process.

5 Recommendation

- 5.1 The Board is recommended to note the contents of the report.

Cambridgeshire and Peterborough Countywide Community Safety Strategic Board

To:	Cambridgeshire and Peterborough Countywide Community Safety Strategic Board
From:	Office of the Police and Crime Commissioner
Date:	23 October 2019
Title	Future meeting dates and the future agenda plan

1 Purpose

- 1.1 The purpose of this report is to inform the Countywide Community Safety Strategic Board (“the Board”) of future planned meeting dates and the updated forward agenda plan.

2 Recommendation

- 2.1 The Board is recommended to note the dates of future meetings, and be mindful of demand set out by the updated future agenda plan.

3 Future meeting dates

- 3.1 Planned future Board meetings have been provisionally scheduled to take place on the following dates:
- Tuesday 21st January 2020, 13:00 – 15:00
 - Tuesday 21st April 2020, 13:00 – 15:00
 - Tuesday 14th July 2020, 13:00 – 15:00
 - Tuesday 20th October 2020, 13:00 – 15:00

4 Future agenda plan

- 4.1 The future agenda plan, is circulated as Appendix 1.
- 4.2 Partners are asked to note where the plan schedules an item that will require a paper / presentation from the organisation / partnership / delivery group that they represent.
- 4.3 The future agenda plan allows for flexibility to alter future planned agendas where there required or sensible to do so. This flexibility allows for the Board to understand its direction of travel while remaining able to accommodate urgent or emerging issues.

5 Recommendation

- 5.1 The Board is recommended to note the dates of future meetings, and be mindful of demand set out by the updated future agenda plan.

Appendix 1 - Forward agenda plan for 2019/20 & 2020/2021

	2019/20 Meetings		2019/20 Meetings		
Items	21/01/2020	21/04/2020	14/07/2020	20/10/2020	Q4 – Date TBC
1 – Introductions	Standing item				
2 – Minutes & actions	Standing item				
3 – Delivery Group Focus	Road Safety	Domestic Abuse & Sexual Violence	Joint Youth Justice Management Board	Drug & Alcohol Misuse	Road Safety
4 – Delivery Group Focus	Organised Crime & Modern Slavery	PREVENT	Child Criminal Exploitation	Mental Health	Organised Crime & Modern Slavery
5 – Prevention focus	Homelessness	Early Help	Healthy and safe schools	Employment	Community Resilience
6 – CSP focus	Fenland	Peterborough	Cambridge City	Huntingdonshire	East Cambs
7 – CSP focus	East Cambs	Place-based partnerships – progress	South Cambs		Fenland
8 – Open item	Safer Streets Fund	Community Safety Agreement 2021 – 2024	Serious Street Based Violence	CCJB – Offender sub-Group	Homelessness
9 – Open item				Community Safety Agreement 2021 – 2024	